



Frequently Asked Questions: Meridian Oncology Pathway Solutions

Q1: Who is New Century Health?

A1: New Century Health (NCH) is a comprehensive oncology quality management (OQM) company. Its platform optimizes the application of evidence-based medicine to the delivery of adult ambulatory cancer care.

Q2: What is the NCH Oncology Pathway Solutions program?

A2: The Oncology Pathway Solutions program provides prior authorization management for infusible, injectable, and oral chemotherapy agents, supportive drugs, symptom management drugs and radiation treatments. The program emphasizes and supports the selection of Preferred Pathways for patient care and is administered by New Century Health.

Q3: Is this for all Meridian members?

A3: The NCH Oncology Pathway Solutions program is for Meridian Medicaid members of all ages. Precertification, preauthorization, and notification requirements all refer to the same process of prior authorization.

Q4: When will the NCH Oncology Pathway Solutions program begin?

A4: The program will begin April 1, 2022.

Q5: How can a physician's office request training for this program?

A5: An NCH Provider Network Manager will contact you soon to schedule an introductory meeting and training. Should you have any questions prior to the introductory meeting, please call Meridian at 888-437-0606 (TTY: 711). You may also contact NCH at 888-999-7713, Option 6 or self-register online at <https://my.newcenturyhealth.com>.

Prior authorization

Q6: What are some key features of the program?

A6: The online provider portal is always available, offering:

- Real-time authorizations for treatment care pathways
- Reduced documentation requirements
- View of real-time status of authorization requests
- Eligibility verification
- Supportive telephonic authorization staff available at **888-999-7713**, Option 1, Monday–Friday (7 a.m.- 7 p.m. EST).
- Quick turnaround time on authorization requests submitted via portal or phone.
- Physician discussions by medical and radiation oncologists.
- New Century Health is a National Comprehensive Cancer Network (NCCN) licensee of the Drugs and Biologics Compendia. It uses nationally recognized, evidence-based treatment guidelines.
- New Century Health provider representatives are available for support as needed.



Q7: What is the transition of care process?

A7: Authorizations previously issued by Meridian Utilization Management (UM) **before April 1, 2022**, will be effective until the authorization expiration date. Authorizations previously issued by Meridian UM that **expire on or after April 1, 2022**, must be submitted to New Century Health to obtain a new valid authorization.

Q8: Who should obtain prior authorization?

A8: The physician organization ordering chemotherapeutic drugs or supporting agents for the treatment of cancer or related hematologic diseases, or radiation treatment must request prior authorization through New Century Health.

Q9: How do I obtain prior authorization?

A9: Submit chemotherapy requests to New Century Health via the following methods:

- Log into New Century Health’s provider web portal at <https://my.newcenturyhealth.com>
- Contact New Century Health’s Utilization Management Intake Department at **888-999-7713**,
 - Option 1 for Medical Oncology
 - Option 2 for Radiation OncologyMonday through Friday (7 a.m. to 7 p.m. EST)

Q10: Which drugs require prior authorization?

A10: The Oncology Pathway Solutions Program, administered by New Century Health, requires prior authorization management for radiation oncology, chemotherapeutic drugs, symptom management drugs and supporting agents for members with a cancer or hematology diagnosis code.

Q11: Which specialties are included in the NCH Oncology Pathway Solutions program?

A11: Medical specialties providing cancer care and its supportive services, *Medical Oncology/Hematology, Pediatric Oncology/Hematology, Gyn-Oncology, Neurological Oncology, Radiation Oncology, Surgical Oncology, and Urology* will submit their prior authorizations through New Century Health.

Q12: Who at New Century Health will be reviewing chemotherapy requests?

A12: New Century Health Medical Reviewers are licensed medical or radiation oncologists and are not incentivized to issue denials, as they use nationally recognized clinical guidelines when performing reviews. These guidelines are available at <https://my.newcenturyhealth.com> or by contacting New Century Health’s Utilization Management at **888-999-7713, Option 1 for Medical Oncology and Option 2 for Radiation Oncology**.

If the request does not meet evidence-based treatment guidelines, New Century Health may request additional information or initiate a physician discussion with the requesting provider.

Q13: What will the New Century Health authorization look like, and how long is it valid?

A13: The NCH authorization will start with “AR” followed by at least 7 digits (e.g., AR1000000). It is valid for the duration indicated on the Medication Request Authorization (MRA).

* Please submit claims to Meridian using the prior authorization number provided in the letter from Meridian, not the NCH authorization number. The Meridian authorization number will begin with “OP” followed by 10 digits.



Q14: What place of service does this prior authorization review process include?

A14: The Oncology Pathway Solutions program applies to services rendered (e.g., chemotherapy administration or radiation treatment) in an outpatient setting, which could include the physician's office, infusion centers and outpatient hospital locations.

Q15: Where do I obtain a prior authorization for inpatient chemotherapy or radiation treatment?

A15: Meridian will continue to manage inpatient treatment requests. As such, inpatient authorization for chemotherapy or radiation therapy remains the same. Please submit an authorization request via the Meridian web portal at **provider.mimeridian.com**. Check the requirements for any code on our website here: <https://www.mimeridian.com/providers/preauth-check.html>.

Claims

Q16: Where do I submit related claims once prior authorization is obtained through New Century Health? A16:

Once prior authorization is obtained through New Century Health, the provider will also receive a second approval letter with the Meridian authorization number. Once the authorization number is received ("OP" followed by 10 digits), submit claims electronically or by mail to the following address:

Meridian
Attn: Claims
PO Box 4020
Farmington, MO 63640-4402

Note: For the fastest, most accurate processing, EDI is the preferred method.

For dates of service on or after April 1, 2022, please submit claims with **payer ID MHPMI** via our direct connection clearinghouse, Availity.

Billing information, including the above, can be referenced on the Meridian website at mimeridian.com.

Q17: Does a prior authorization guarantee payment?

A17: No, a prior authorization does not guarantee payment for services. Payment of claims is dependent on eligibility, covered benefits, provider contracts, and correct coding and billing practices. For specific details, please refer to your Provider Manual.



Q18: Who is responsible for responding to Claims Disputes?

A18: Meridian will continue to respond to claims disputes. Providers can submit disputes using the current process outlined in the Provider Manual. Disputes must be submitted per below.

- **For DOS prior to April 1, 2022:**

By mail at:

Meridian

ATTN: Claims Department

1 Campus Martius, Suite 720

Detroit, MI 48226

- **For DOS on or after April 1, 2022:**

Use the new Meridian provider portal: provider.mimeridian.com

Or by mail to:

Meridian

Attn: Claims Appeals

PO Box 4020

Farmington, MO 63640

Q19: Who is responsible for responding to grievances and appeals?

A19: Meridian will continue to respond to member grievances and appeals. Members can continue to follow processes outlined on our website and in the member handbook to submit either a grievance or an appeal. Providers can initiate a grievance or appeal by mail or fax; however, the member's written consent for the grievance or appeal is required.

Meridian

Attn: Grievances Department

PO Box 44287

Detroit, MI 48244

Telephone: 888-437-0606 (TTY: 711)

Q20: What will happen if the physician does not request and obtain an authorization?

A20: If a required authorization is not obtained, Meridian may deny payment for the relevant drugs. Members cannot be held responsible or billed for denied charges/services. Providers may only collect the applicable cost share amount directly from the member.