Frequently Asked Questions:
Musculoskeletal Surgery (MSK) Program

Wellcare Iowa
Effective January 1, 2027

Who is Evolent?

Evolent is a comprehensive musculoskeletal surgery (MSK) quality management company whose goal is to apply evidence-based treatment to the delivery of care.

What is changing?

Beginning on January 1, 2027, Evolent will manage prior authorization for select musculoskeletal surgery (MSK) procedures on behalf of Wellcare Iowa. This change is designed to make the process more streamlined, automated, and transparent, reducing administrative burden for providers.

How do I request training?

If you have training needs or questions about this program, please email practicesuccess@evolent.com.

Which members are included?

Prior authorization will apply to Medicare members in Iowa 18 years of age and older.

What are the key benefits of this program?

- Faster, consistent determinations with specialty matched reviewers
- Real-time authorizations
- Real-time status updates
- Dedicated Evolent engagement team for ongoing support

How do I contact Evolent authorization support?

Contact 1.877.251.7995 (Monday - Friday from 7:00 am to 7:00 p.m. CST)

What services require prior authorization?

All planned/elective services listed performed in covered places of treatment:

- Lumbar and cervical spine surgery
- Hip, knee, and shoulder surgery

What places of service are in scope for the program?

Outpatient hospital, ambulatory surgical center, or *inpatient setting (*planned professional services only).

What provider specialties are in scope for the program?

All ordering specialties.

When will Evolent start accepting prior authorization requests?

Providers may begin contacting Evolent on January 1, 2027, to secure prior authorization for services scheduled on or after January 1, 2027, for Wellcare Iowa Medicare members.

Who reviews requests?

Specialty matched reviewers including board-certified orthopedic surgeons and neurosurgeons using nationally recognized clinical guidelines.

What happens if the authorization request does not meet guidelines?

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

What will the Evolent authorization number (request ID) look like valid?

The Evolent authorization (request ID) consists of letters and numbers. The authorization number is available after a determination has been made on a request.

What is the Evolent tracking number?

The Evolent tracking number is issued upon submission of a prior authorization request prior to determination (approval or denial) of the request. Tracking numbers consist of numeric digits only. The tracking number can be used to find an authorization number (request ID) in Evolent's portal once a determination is made.

Who is responsible for obtaining prior authorization?

The ordering physician or ordering physician's designated office staff must request prior authorization through Evolent.

How do I obtain prior authorization?

- Evolent portal at evolent.com/provider-portal, select RadMD.
- Via telephone at 1.877.251.7995 (Monday - Friday from 7:00 am to 7:00 p.m. CST).

What happens if authorization is not obtained?

If authorization is not obtained, Wellcare Iowa may deny payment for the relevant services.

Does prior authorization guarantee payment?

No. 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.