Amerigroup
An Anthem Company

https://providers.amerigroup.com

Medication precertification requests

Use our provider self-service website to submit precertification requests for members who need medications considered to be:

- **General pharmacy** — dispensed directly to a member from a pharmacy
- **Medical injectables** — obtained by an office/facility for onsite infusion or administration

This guide:

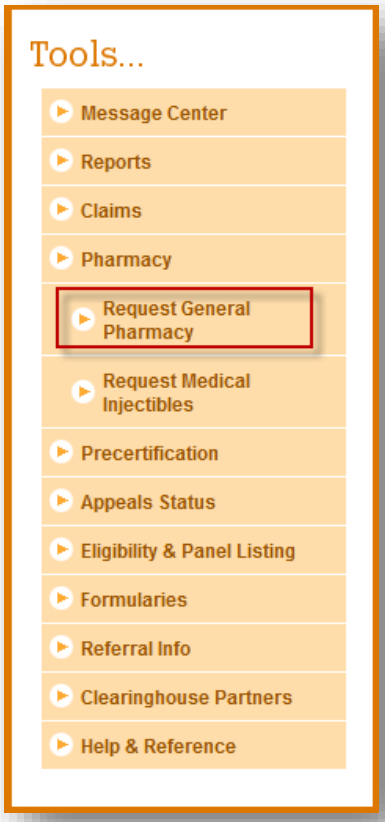
- Gives you step-by-step help to enter a precertification request for general pharmacy and medical injectables.
- Explains what happens after each request is submitted.
- Provides contact information if you need help.

Things to remember

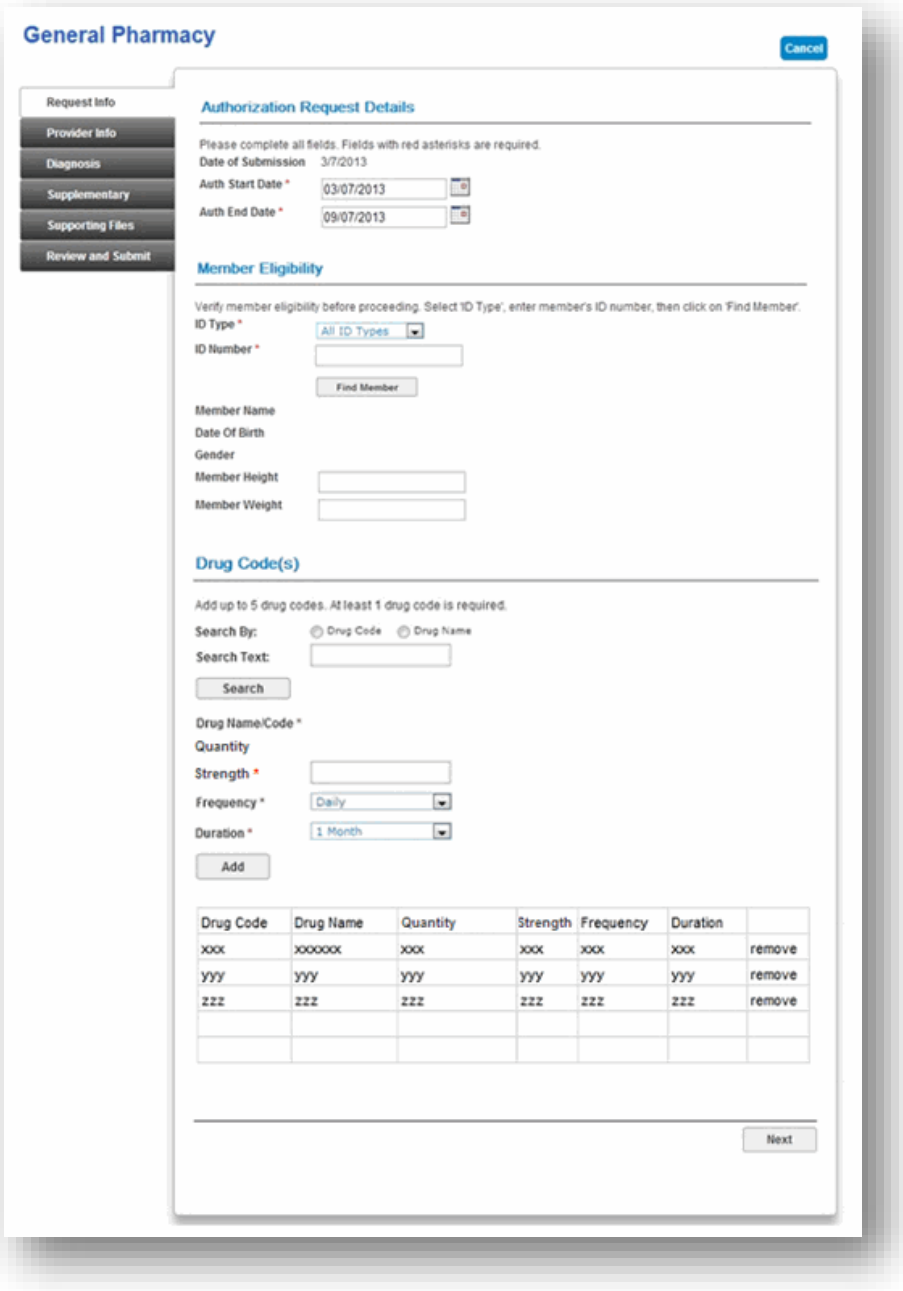
1. A red asterisk indicates a required field.
2. Use the **Previous** and **Next** buttons to navigate between tabs as you enter the required precertification information.
3. If an entry is incorrect, you'll see an error message with instructions.
4. If you can't correct an error, please call Provider Services at 1-800-454-3730 if you're a Medicaid provider or 1-866-805-4589 if you're a Medicare provider.
5. Authorization request date spans cannot begin before the date you enter your request.
6. The precertification request must be for an eligible participant who is an Amerigroup member. You must be logged in to https://providers.amerigroup.com and select one of the highlighted menu options shown on the right to follow the steps in this guide.

Request precertification for general pharmacy

1. Navigate to the *Pharmacy Authorizations* page.
2. Select **Request General Pharmacy** from the *Tools* menu on our provider self-service homepage.
3. Select a market from the *Market* menu.

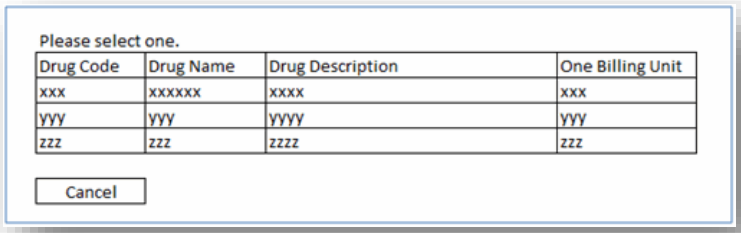


Completing the *Request Info* tab



1. Enter information into the *Auth Start Date* and *Auth End Date* fields for the precertification request.
   - The start date will default to the current date and the end date will default to six months from the current date.
   - Select the date field to type the date or select the calendar icon to choose a date.
2. Select the **ID Type** drop-down menu and select the specific ID type or **All ID Types**.
3. Enter the ID number that corresponds with the ID type selected and select the **Find Member** button.
   - If multiple members are found during the search, select the correct member name from the list.
   - If the member is eligible, the member's information will display.
   - If no members are found, re-enter the information to ensure it was typed accurately or try a different ID type and repeat your search. If you still receive an error message, call Provider Services at 1-800-454-3730 if you're a Medicaid provider or 1-866-805-4589 if you're a Medicare provider.
4. Select the **Search By** category under *Drug Code*. Available options are:
   - *Drug Code.*
   - *Drug Name.*
   - *Drug Description.*

5. Enter your search term in the *Search Text* field and select **Search**.
6. If your search returns multiple results, you will see a pop-up. Select the appropriate drug from the list.
7. Enter information in the **Quantity**, **Strength**, **Frequency** and **Duration** fields.
8. Select the **Add** button to add up to four more drugs. Repeat steps 7-9 for each.
9. Select the **Next** button.

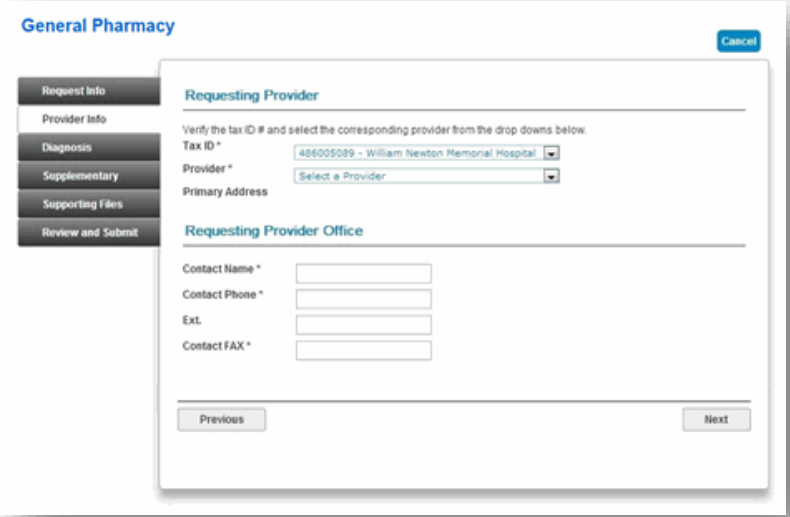


Note: If you need to request more than five drugs for one member, you have these options:

- Submit a second request using the online tool.
- Fax your request to 1-844-474-3341 for retail pharmacy or 1-844-512-8995 for medical injectables.
- Call Provider Services at 1-800-454-3730 (for Medicaid providers).
- Call Provider Services at 1-866-805-4589 (for Medicare providers).

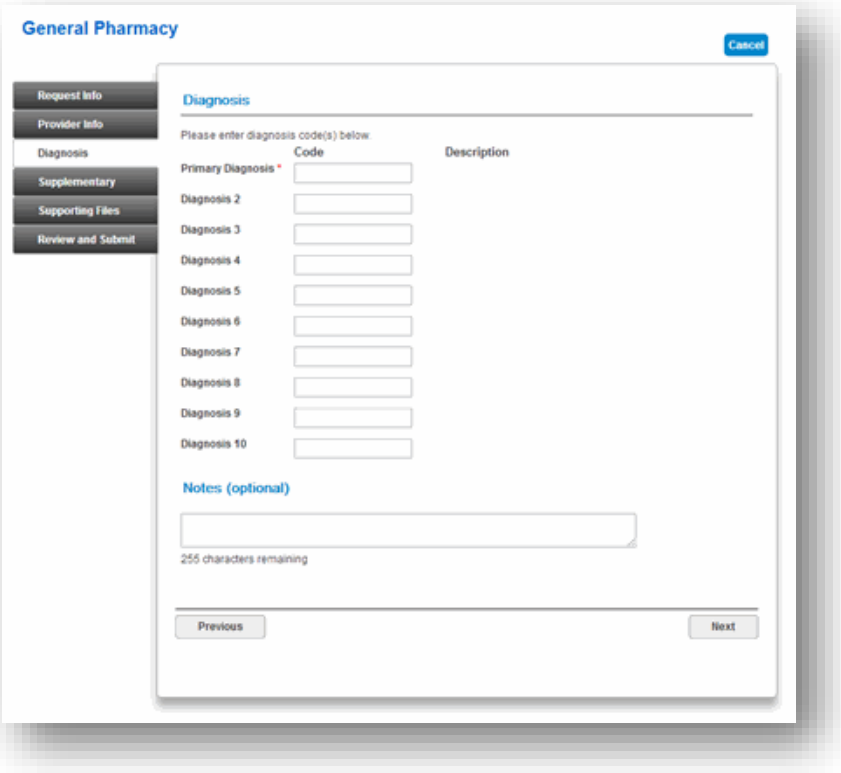
Complete the *Provider Info* tab

1. Select the **Tax ID** drop-down menu, and select the appropriate tax ID. Only the tax ID number associated with the user's credentials will be listed.
2. Select the **Provider** drop-down menu and select the requesting provider's name from the list. Only the provider names associated with the user's credentials will be listed.
3. If the information that populates in the fields under the *Requesting Provider Office* section is incorrect, type the correct contact information for the requesting provider's office.
4. Select the **Next** button.



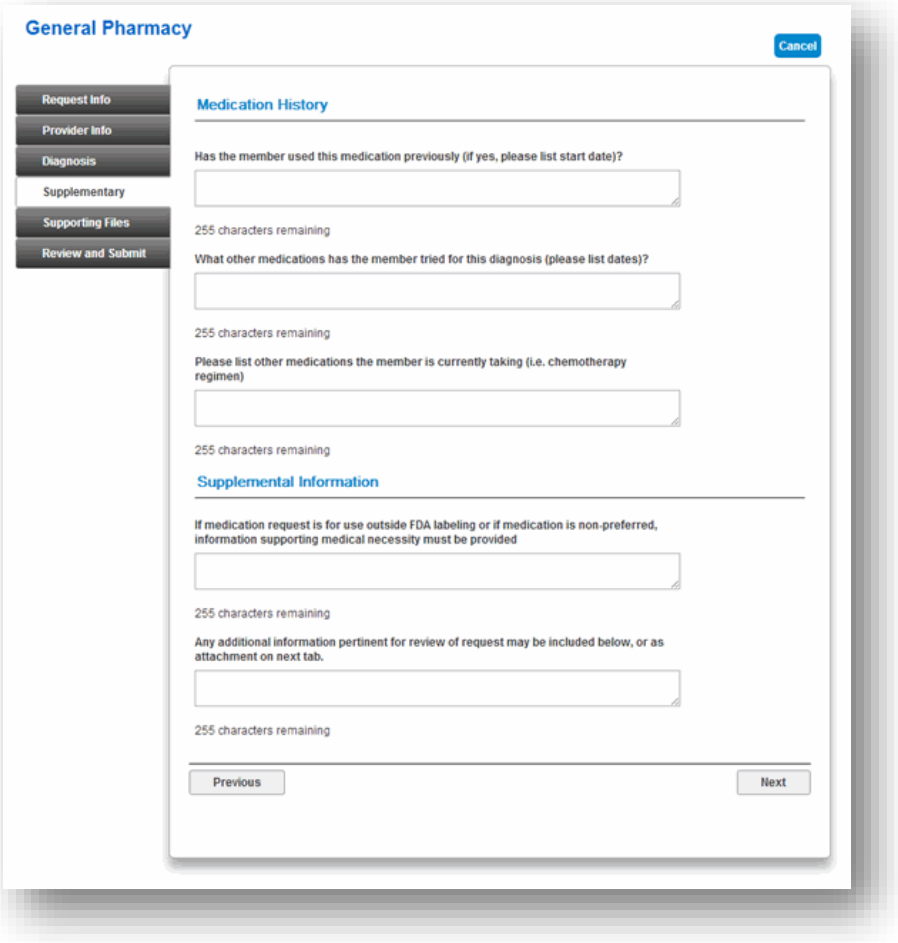
Complete the *Diagnosis* tab

1. Type the appropriate diagnosis code in the *Primary Diagnosis* field and press tab. The diagnosis code description will display if the code is valid.
   If you receive an error message, re-enter the primary diagnosis code and press tab.
2. Enter additional diagnosis codes, if known, in the remaining fields.
3. Type notes in the *Notes* field if appropriate.
4. Select the **Next** button.



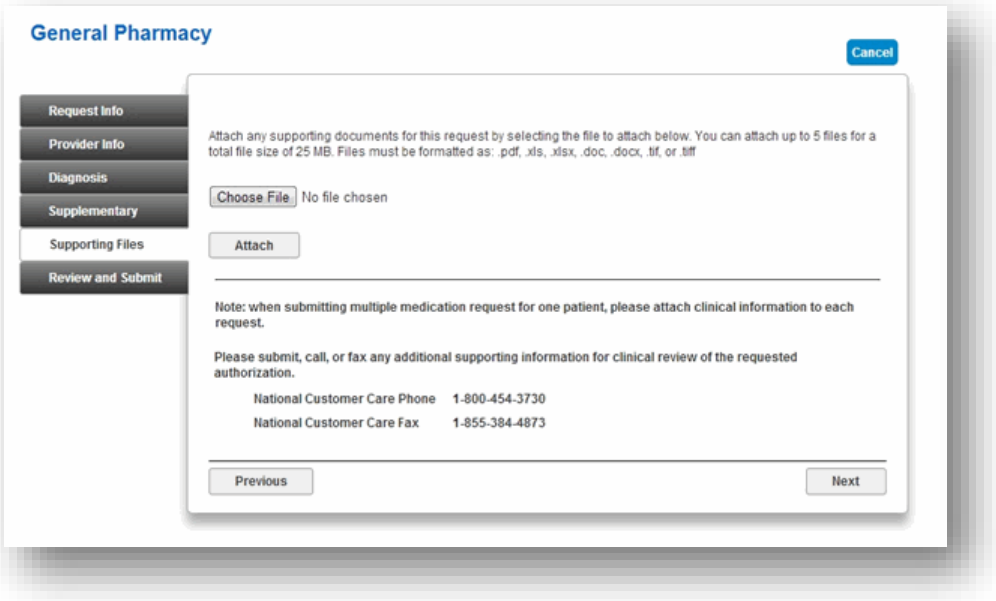
Complete the *Supplementary* tab

1. Enter corresponding information in the *Supplemental Information* and *Medication History* sections. The fields in this tab are optional, but having enough clinical information to make a decision allows us to process the precertification request quickly.
2. Select the **Next** button.

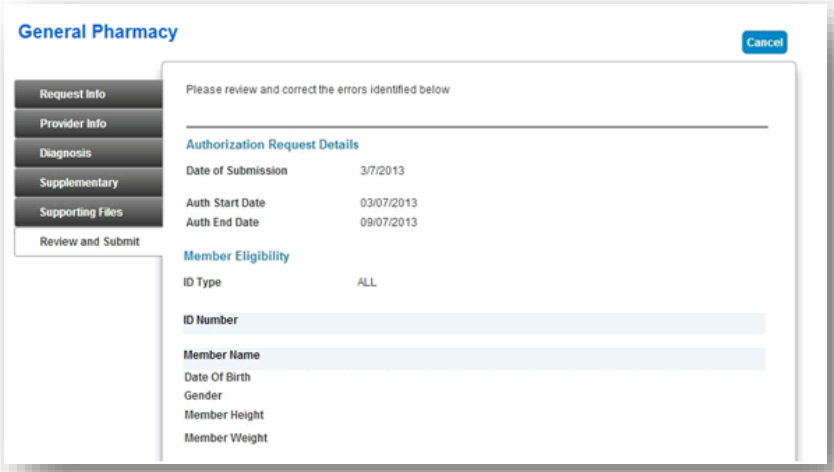


Complete the *Supporting Files* tab

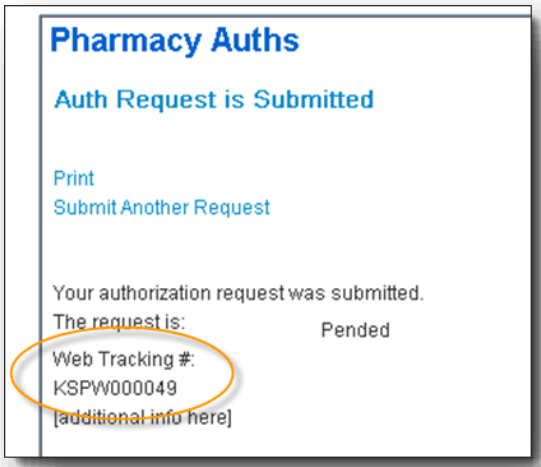
1. Select the **Browse** button and locate the supporting clinical file. When you find the file you want to attach and select it, the file path will display in the field that appears before the **Browse** button.
   - It's important to provide supporting medical information for certain types of drugs (e.g., biomarker testing or pertinent labs). Providing supporting documentation helps us to make a decision and process the precertification request quickly. If you're unsure about what type of information is needed, you can call us directly at 1-800-454-3730 (Medicaid providers) or 1-866-805-4589 (Medicare providers).
   - Acceptable file formats are Microsoft Word and Excel files, PDFs and TIFFs.
2. Select **Attach** to upload the file; it will display in the *Files Supporting the Auth Request* section once uploaded. Select **Remove** to delete the file from the request.
3. Repeat these steps until all necessary supporting clinical files are attached to the request.
4. Select the **Next** button.



Complete the *Review and Submit* tab

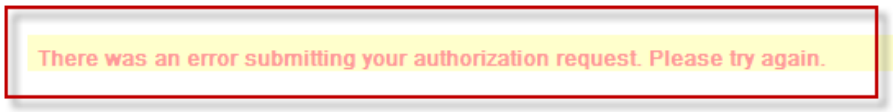


1. Review the information you entered for the precertification request.
   - All errors must be corrected before the request can be submitted. Select *Fix this* to go directly to the error and update the information.
2. To go back, select the **Previous** button to go back or select the tab on the left side of the screen to navigate directly to a particular tab. Make any necessary edits to the information entered.
3. Select **Print Review Copy** at the bottom of the screen to print a copy of the precertification request for your records.
4. Select the **Submit Auth** button when you're ready to submit your request.
5. Keep a copy of the web tracking number included in your submission confirmation; you will need this number if you have to follow up on your request. If additional precertification is needed for the same member, select the **Submit Another Request** button.



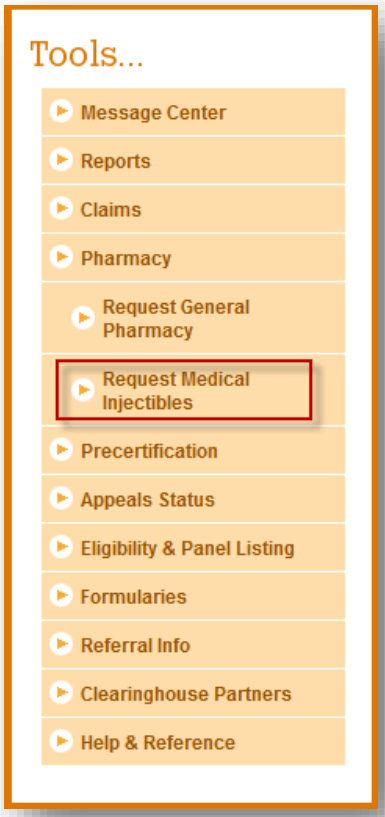
Notes:

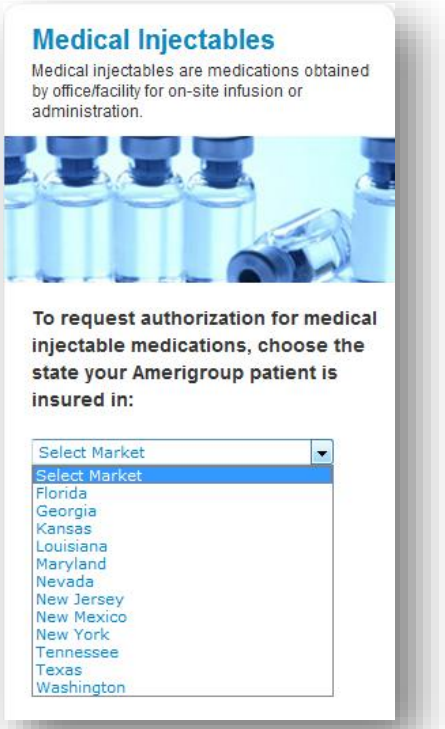
- You will receive an error message if there are problems with your request. Review the information on the *Review and Submit* tab and try again.
- If you continue to have issues with your online requests, call Provider Services at 1-800-454-3730 for help with Medicaid requests or 1-866-805-4589 for Medicare requests.



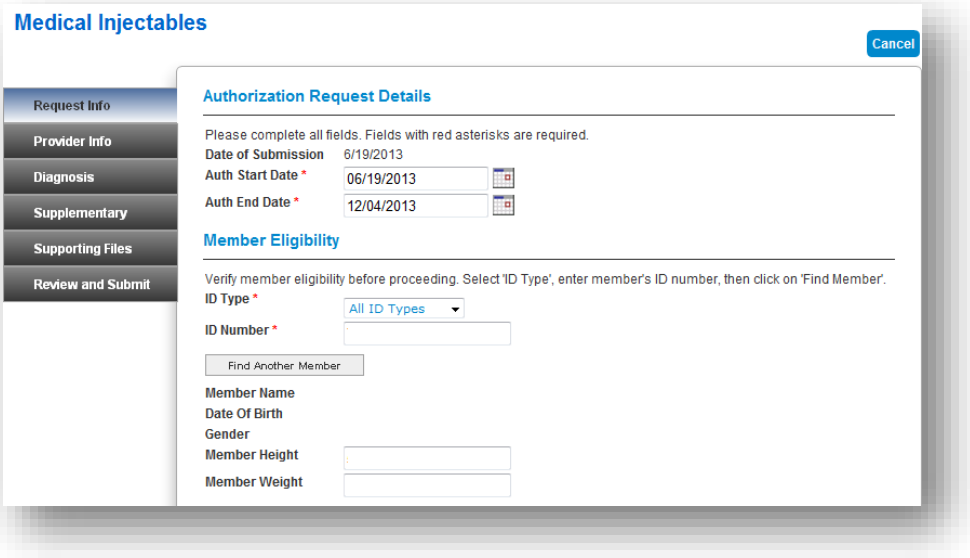
Request precertification for medical injectable medication

1. Navigate to the *Pharmacy Authorizations* page.
2. Select **Request Medical Injectables** from the *Tools* menu on our provider self-service homepage.
3. Select the market from the *Market* menu.

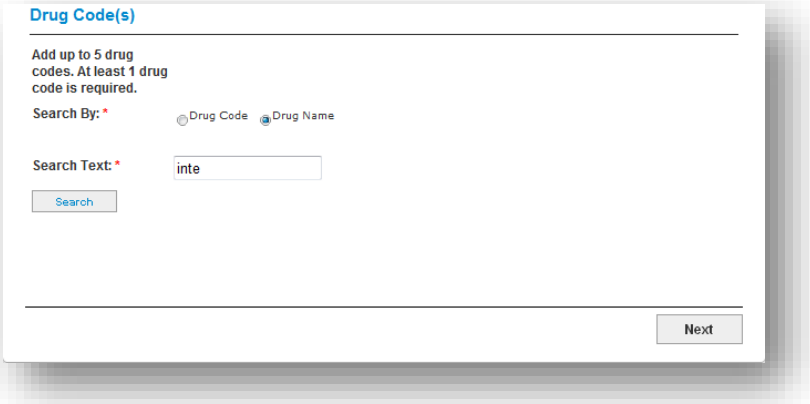




Completing the *Request Info* tab



1. Enter information into the *Auth Start Date* and *Auth End Date* fields for the precertification request.
   - The start date will default to the current date and the end date will default to six months from the current date.
   - Select the date field to type the date or select the calendar icon to choose a date.
2. Select the **ID Type.** drop-down menu and select the specific ID type or **All ID Types**.
3. Enter the ID number that corresponds with the ID type selected and select the **Find Member** button.
   - If multiple members are found during the search, select the correct member name from the list.
   - If the member is eligible, the member's information will display.
   - If no members are found, re-enter the information to ensure it was entered accurately or try a different ID type and repeat your search. If you still receive an error message, call Provider Services at 1-800-454-3730 if you're a Medicaid provider or 1-866-805-4589 if you're a Medicare provider.
4. Select the **Search By** category under *Drug Code*. Available options are:
   - *Drug Code.*
   - *Drug Name.*
   - *Drug Description.*
5. Enter your search term in the *Search Text* field and select **Search**.
6. If your search returns multiple results, you will see a pop-up. Select the appropriate drug from the list.
7. Enter information in the **Dose**, **Frequency** and **Duration** fields.
8. Select the **Add** button to add up to four more drugs. Repeat steps 7-9 for each.
9. Select the **Next** button.

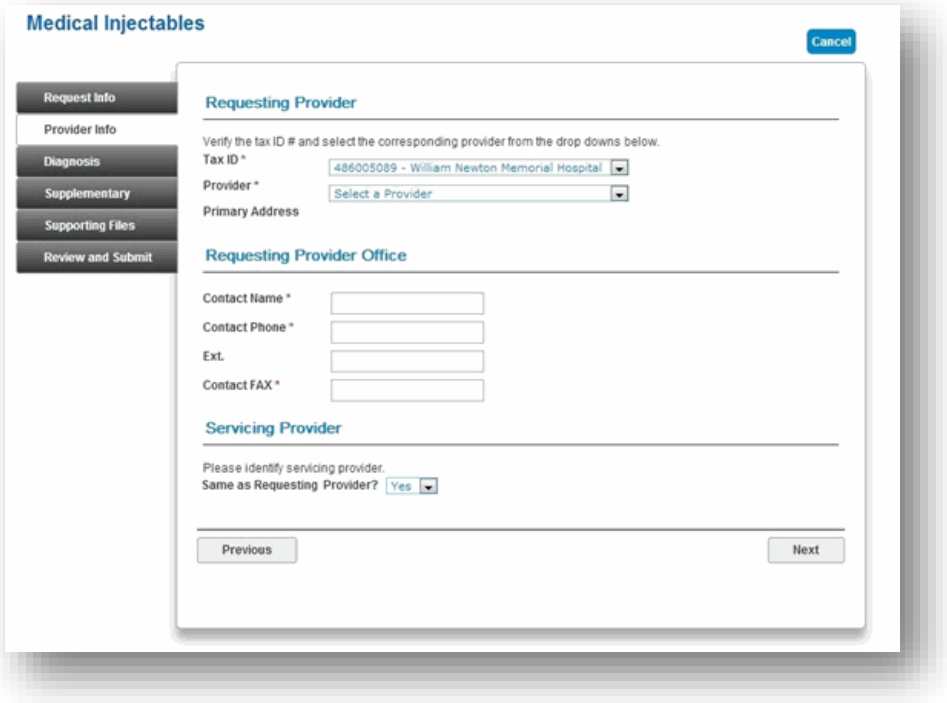


Note: If you need to request more than five drugs for one member, you have these options:

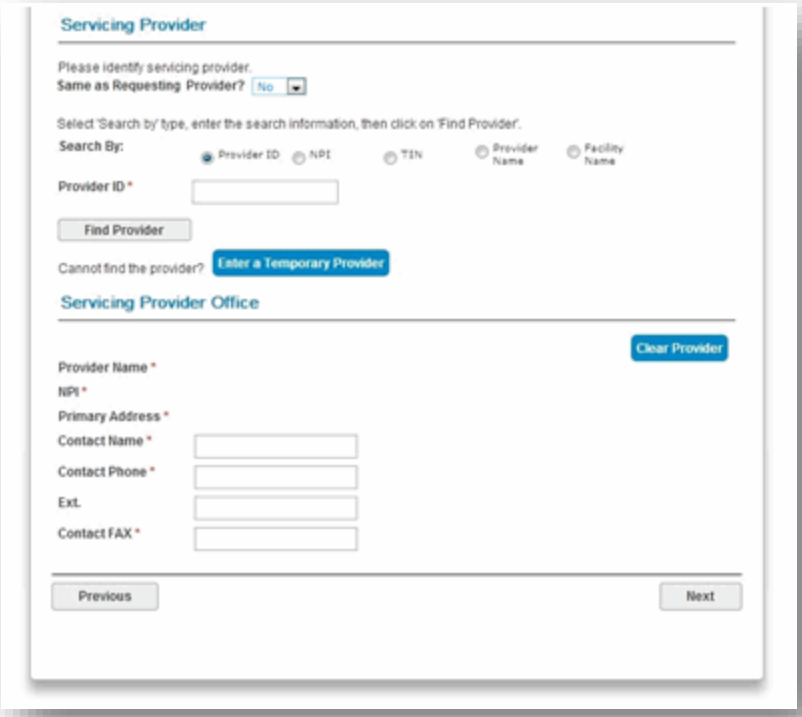
- Submit a second request using the online tool.
- Fax your request to 1-844-474-3341 for retail pharmacy or 1-844-512-8995 for medical injectables.
- Call Provider Services at 1-800-454-3730 (for Medicaid providers).
- Call Provider Services at 1-866-805-4589 (for Medicare providers).

Complete the *Provider Info* tab

1. Select the **Tax ID** drop-down menu and select the appropriate tax ID. Only the tax ID number associated with the user's credentials will be listed.
2. Select the **Provider** drop-down menu and select the requesting provider's name from the list. Only the provider names associated with the user's credentials will be listed.
3. If the information that populates in the fields under the *Requesting Provider Office* section is incorrect, enter the correct contact information for the requesting provider's office.
4. Select **Yes** if the servicing provider is the same as the requesting provider. Skip to Step 9.

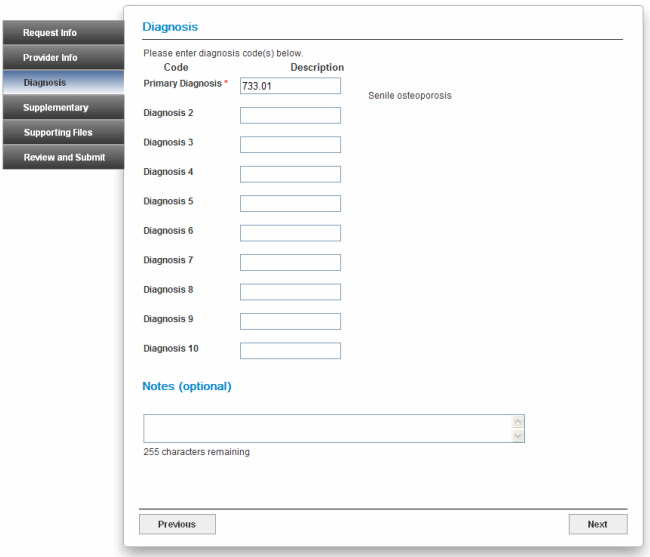


5. If the servicing provider is different from the requesting provider, select **No**. A new section will appear.
6. Select the corresponding **Search by** radio button to search for the servicing provider under the *Enter the Servicing Provider* section.
7. Enter the appropriate provider ID or name in the *Provider ID* field. Select the **Find Provider** button. The provider's information will populate on the screen.
   - If multiple providers are found, select the correct NPI from the list.
   - If no servicing provider is found, try the search again. Select the **Clear Provider** button and repeat the search by entering different provider information.
   - If the servicing provider still is not found, select the **Enter a Temporary Provider** button and enter all required information. Then, select **Save**.
8. Enter the contact information in the *Servicing Provider Office* section.
9. Select the **Next** button.



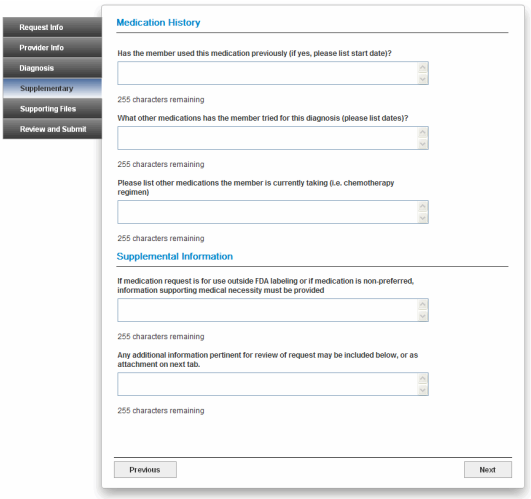
Complete the *Diagnosis* tab

1. Enter the appropriate diagnosis code in the *Primary Diagnosis* field and press tab. The diagnosis code description will display if the code is valid. If you receive an error message, re-enter the primary diagnosis code and press tab.
2. Enter additional diagnosis codes, if known, in the remaining fields.
3. Enter notes in the *Notes* field if appropriate.
4. Select the **Next** button.



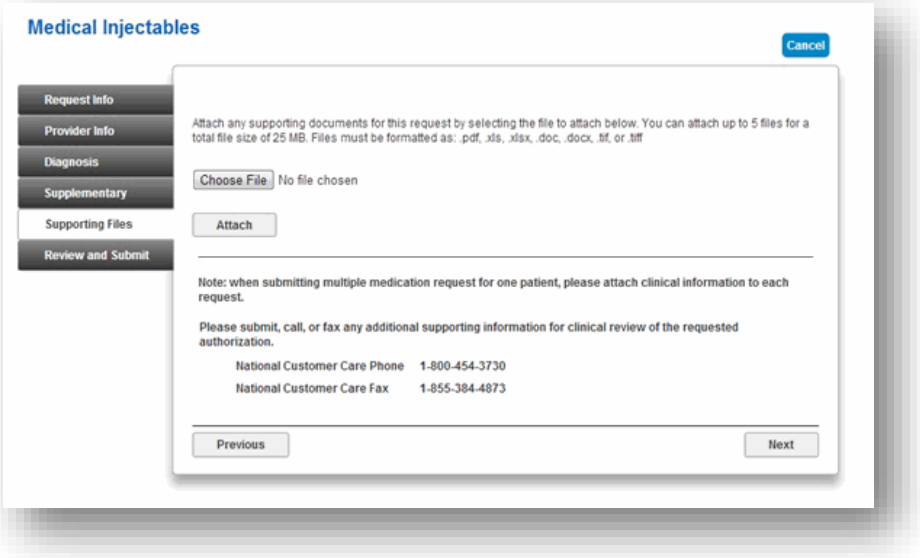
Complete the *Supplementary* tab

1. Enter corresponding information in the *Supplemental Information* and *Medication History* sections. The fields in this tab are optional, but having enough clinical information to make a decision allows us to process the precertification request quickly.
2. Select the **Next** button.



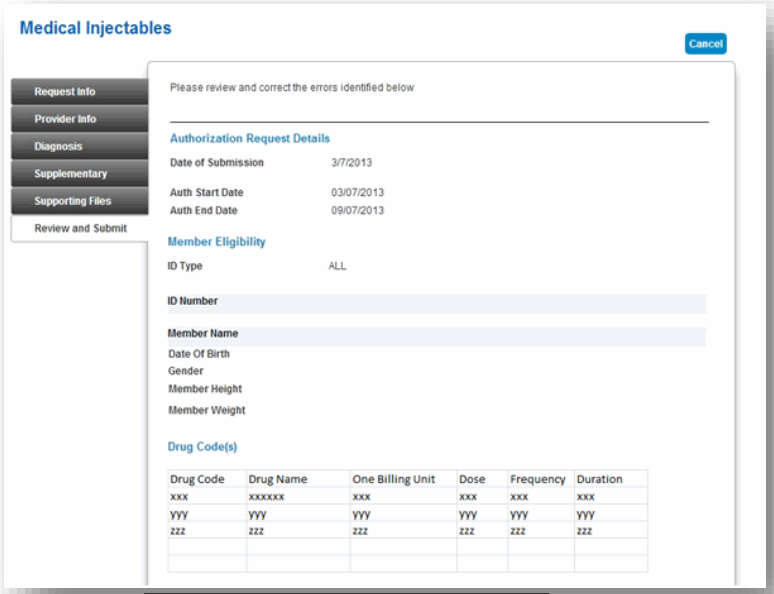
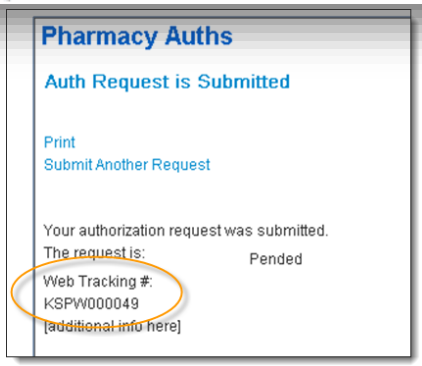
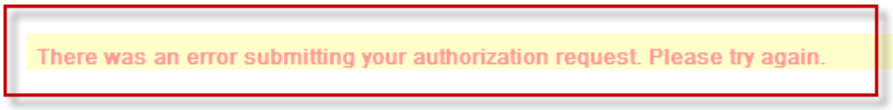
Complete the *Supporting Files* tab

1. Select the **Browse** button and locate the supporting clinical file. When you find the file you want to attach and select it, the file path will display in the field that appears before the **Browse** button.
2. It's important to provide supporting medical information for certain types of drugs (e.g., biomarker testing or pertinent labs). Providing supporting documentation helps us to make a decision and process the precertification request quickly. If you're unsure about what type of information is needed, you can call us directly at 1-800-454-3730 (Medicaid providers) or 1-866-805-4589 (Medicare providers).
3. Acceptable file formats are Microsoft Word and Excel files, PDFs and TIFFs.
4. Select **Attach** to upload the file; it will display in the *Files Supporting the Auth Request* section once uploaded. Select **Remove** to delete the file from the request.
5. Repeat these steps until all necessary supporting clinical files are attached to the request.
6. Select the **Next** button.



Complete the *Review and Submit* tab

1. Review the information you entered for the precertification request.
   - All errors must be corrected before the request can be submitted. Select *Fix this* to go directly to the error and update the information.
2. To go back, select the **Previous** button to go back or select the tab on the left side of the screen to navigate directly to a particular tab and make edits to the information entered.
3. Select **Print Review Copy** at the bottom of the screen to print a copy of the precertification request for your records.
4. Select the **Submit Auth** button when you're ready to submit your request.
5. Keep a copy of the web tracking number included in your submission confirmation; you will need this number if you have to follow up on your request. If additional precertification is needed for the same member, select the **Submit Another Request** button.

Notes:

- You will receive an error message if there are problems with your request. Review the information on the *Review and Submit* tab and try again.
- If you continue to have issues with your online requests, call Provider Services at 1-800-454-3730 for help with Medicaid requests or 1-866-805-4589 for Medicare requests.
- You have the ability to check the status of a medical injectable authorization request. To find out how, review the *Precertification Status and Appeals Tutorial* located in the *Provider Resources and Documents* menu under *Tutorials*.