

# Provider Update

## Welcome to Amerigroup Iowa, Inc.

**Summary:** This is update about information in the Amerigroup Iowa, Inc. provider manual. For access to the latest manual, go online to [providers.amerigroup.com/ia](http://providers.amerigroup.com/ia).

### ✦ What this means to you:

Amerigroup has been selected by the Iowa Department of Human Services to cover health care services for Amerigroup members enrolled in Iowa's Health Link Program effective April 1, 2016.

#### Benefits of working with Amerigroup

- We help providers promote a higher quality of health care through our direct outreach efforts and preventive programs for prenatal care and people with asthma or other conditions.
- Our programs help improve your patients' overall health by informing, educating and encouraging self-care in the prevention, early detection and treatment of existing conditions and chronic disease.
- We offer extensive provider services including: fast and accurate electronic claims submission and payment, online eligibility verification, claims submission, preauthorizations and local support through Provider Relations representatives.

#### Why is this change necessary?

Our top priority is making sure you have everything you need to serve your patients and this bulletin will provide information on what you need to know to make doing business with Amerigroup easy for you.

#### What is the impact of this change?

##### Provider website

On our provider website, [providers.amerigroup.com/ia](http://providers.amerigroup.com/ia), you have access to special tools and features to make doing business easy. The provider website will be your one-stop-shop to download your panel listings, look up prior authorization requirements, submit claims appeals and more! The website also provides a link to Availity's website to submit claims, verify member eligibility and request a prior authorization.

The table below outlines some of the great features and tools that will make it easier for you to serve your patients.

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<https://providers.amerigroup>

<b>Availity website</b>	Contact 1-800-282-4548
<b>Claim submission</b>	Providers will be able to:
<b>Checking claims status</b>	<ul style="list-style-type: none"> <li>• Submit claims</li> <li>• Check claim status</li> <li>• Check eligibility through the Availity website</li> </ul>
<b>Eligibility lookup</b>	<ul style="list-style-type: none"> <li>• Registration</li> <li>• Eligibility and benefits inquiry</li> </ul>
<b>Online correspondence</b>	Responses to provider online correspondence will be made via phone, email or fax.
<b>Claim appeals</b>	Providers will be able to appeal a claim online and can now include attachments (up to 25 megabytes). For additional details, refer to the provider payment appeal process section in this guide.
<b>Authorization submission</b>	Authorization requests can be submitted through the Amerigroup provider website.
<b>Authorization inquiry and update</b>	All inquiries and updates will be made through the Amerigroup provider website.

### **Availity**

Availity’s website offers a variety of online functions to help you reduce administrative costs and gain extra time for patient care. You will need to register with Availity to access the secure portion of our website. Once signed up, you can log in to a single account and perform numerous administrative tasks for patients covered by the Amerigroup IA Health Link program or by other payers. A full list of participating payers for each state is available on Availity.com.

Information on Availity, including how to register, training opportunities and more are available at Availity.com or on the Amerigroup IA Medicaid website at [providers.amerigroup.com/ia](http://providers.amerigroup.com/ia) or 1-800-282-4548.

### **Member eligibility - IA Health Link ID cards**

The IA Health Link Member ID card includes the member name and member ID number (10 digits, no prefix). Members will receive an Amerigroup ID number and ID card.

The front includes both the Amerigroup ID, the IA Health Link ID assigned by the state and the name and phone number of the primary medical group where the member is assigned. The back includes the mailing address for paper claims, important phone numbers and the general correspondence and appeal mailing address.

**Iowa Health Link and hawk-i – ID card samples**



Effective Date:  
Date of Birth:  
Amerigroup #:

[www.myamerigroup.com/IA](http://www.myamerigroup.com/IA)  
Amerigroup Iowa, Inc.

Member Name:  
Medicaid Number:  
Primary Care Provider (PCP):  
PCP Telephone #:  
Vision: **1-800-879-6901**

Copays: **No Copays**

Member Services/Behavioral Health: **1-800-600-4441 (TTY 711)**  
24/7 Amerigroup On Call/Nurse HelpLine: **1-866-864-2544 (TTY 711)**

**MEMBERS:** Please carry this card at all times. Show this card before you get medical care. You do not need to show this card before you get emergency care. If you have an emergency, call 911 or go to the nearest emergency room. Always call your Amerigroup PCP for nonemergency care. If you have questions, call Member Services at 1-800-600-4441. If you are deaf or hard of hearing, call 711.  
**MIEMBROS:** Lleve esta tarjeta de identificación con usted siempre. Muéstrela antes de recibir cuidado médico. No tiene que mostrar esta tarjeta antes de recibir cuidado de emergencia. Si tiene una emergencia, llame al 911 o vaya a la sala de emergencias más cercana. Llame siempre a su PCP de Amerigroup para cuidado que no sea de emergencia. Si tiene preguntas, llame a Servicios al Miembro al 1-800-600-4441. Si es sordo o tiene problemas auditivos, llame al 711.  
**HOSPITALS:** Preadmission certification is required for all nonemergency admissions, including outpatient surgery. For emergency admissions, notify Amerigroup within 24 hours after treatment at 1-800-454-3730.  
**PROVIDERS:** Certain services must be preauthorized. Care that is not preauthorized may not be covered. For preauthorization/billing information, call 1-800-454-3730. For preauthorization of medications, call 1-855-712-0104.  
**PHARMACIES:** Submit claims using Express Scripts RXBIN: 003858; RXPCN: MA; RXGRP: WKYA For technical help, call **Express Scripts** at 1-855-690-8353.

**SUBMIT MEDICAL CLAIMS TO:**  
AMERIGROUP • P.O. BOX 61010 • VIRGINIA BEACH, VA 23466-1010  
**USE OF THIS CARD BY ANY PERSON OTHER THAN THE MEMBER IS FRAUD.**

IA01 03/16



Effective Date:  
Date of Birth:  
Amerigroup #:

[www.myamerigroup.com/IA](http://www.myamerigroup.com/IA)  
Amerigroup Iowa, Inc.

Member Name:  
**hawk-i** Number:  
Primary Care Provider (PCP):  
PCP Telephone #:  
Vision: **1-800-879-6901**

Copays: **No Copays**

Member Services/Behavioral Health: **1-800-600-4441 (TTY 711)**  
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### **Member panel listings**

A panel listing tool is available to providers to research and download a complete list of past and current members assigned to a specific provider, group or independent physician association. Member listings are available and include data accurate as of the close of business on the previous day. Real-time eligibility is available through Availity.

A member panel listing tutorial is available with step-by-step instructions at [providers.amerigroup.com/ia](http://providers.amerigroup.com/ia). To access the tutorial, go to the tutorial section in the left hand navigation under provider resources.

### **Prior authorization requirement**

Precertification, sometimes referred to as prior authorization, is required for certain services. Some common services requiring precertification include:

- Air ambulance
- Behavioral Health (all inpatient and outpatient services require precertification; for specialist referrals and precertification call 1-800-454-3730)
- Biofeedback
- Circumcision (Amerigroup covers routine circumcision without precertification for up to 12 months of age; after 12 months of age, medical necessity review is required)
- Durable medical equipment and disposable supplies
- Genetic testing (except routine amniocentesis and prenatal testing)
- HealthCheck (preventive health check-ups for members under age 21)
- Home health care services
- Hyperbaric oxygen therapy (no coverage for use of equipment)
- Infusion/injection therapy
- Inpatient hospital services
- Inpatient surgeries and procedures
- Outpatient surgeries and procedures
- Pharmacy
- Physician services (referrals to out-of-network specialists require precertification)
- Radiology services
- Spinal surgeries (lumbar fusion, disc excision and decompression surgery)
- Therapy services (physical, occupational and speech therapies)
- Transplant services
- Vision (Most routine vision services do not require precertification. If you have questions, call Superior Vision Care at 1-866-819-4298.)

To determine prior authorization requirements, use the lookup tool on the precertification page of our website at [providers.amerigroup.com/ia](http://providers.amerigroup.com/ia).

**Please note:** Emergency hospital admissions do not require precertification; however, notification is required within 24 hours or the next business day.

### **Amerigroup reimbursement policies**

We want to assist physicians, facilities and other providers in accurate claims submissions and to outline the basis for reimbursement if the services are covered by a member's benefit plan. The complete list of reimbursement policies is available at [providers.amerigroup.com/ia](http://providers.amerigroup.com/ia):

- Go to provider resources in the left-hand navigation
- Click Quick Tools
- Click reimbursement policies

Reimbursement policies are subject to change as necessary from time to time; however, we will provide 30 days prior notice before implementing any revisions.

### **Claims**

Having a fast and accurate system for processing claims allows providers to manage their practices and our members' care more efficiently. The provider manual includes detailed information on how Amerigroup has made claims processing as streamlined as possible. The provider manual claims topics include but are not limited to:

- Claim processing overview
- Submitting "clean" claims
- Methods for submission (web portal, electronic, and paper)
- National provider identifier
- Enrollment in Iowa Medicaid
- ICD-10 clinical modification (CM)
- Claim forms and filing limits
- Electronic remittance advice
- Member copayments and balance billing
- Claims appeal process
- Coordination of benefits

The provider manual is available on our website at [providers.amerigroup.com/ia](http://providers.amerigroup.com/ia).

### **Payment appeal process**

If you do not agree with the outcome of a claim decision, use the claims payment appeals process to challenge the decision. Submit requests for claims payment appeals in writing to Amerigroup within 60 days of receipt of remittance advice or payment voucher. Include all pertinent information, such as:

- Cover letter with all points of contention itemized and explained
- Copy of the original or corrected CMS-1500 or CMS-1450 claim form
- Supporting documentation deemed pertinent or requested by Amerigroup

Mail the cover letter and supporting documentation to:

Claims Appeals/Correspondence

Amerigroup Iowa, Inc.

P.O. Box 61599

Virginia Beach, VA 23466-1599

**What if I need assistance?**

If you have questions about this communication, received this fax in error or need assistance with any other item, contact your local Provider Relations representative or call Provider Services at 1-800-454-3730.

**Key contacts**

As an additional resource, below are other useful contact numbers:

- Availity Client Services: 1-800-282-4548
- Member Services: 1-800-600-4441
- Provider Services: 1-800-454-3730
- Amerigroup on call: 1-866-864-2544
- Disease Management: 1-888-830-4300
- Amerigroup Iowa Care Management Services
  - Providers: 1-866-819-4298
  - Members: 1-800-600-4441 (TTY 711)
- Superior Vision: 1-866-819-4298
- Delta Dental of Iowa: 1-888-544-0718 or 515-261-5500
- Interpretation services available in several languages upon member request