

Provider Update

Updated Medicaid/CHIP Provider Manual available online

Summary: There have been some important changes to the provider manual. Download the latest version from the provider self-service website at providers.amerigroup.com/TX.

✦ **What this means to you:** Please review the changes to the Amerigroup* provider manual and share the information with your staff and other providers in your group.

Why is this update necessary?

We update our provider manual to remain in compliance with regulatory requirements, our state contract, and standards necessary for accreditation with the National Committee for Quality Assurance. We also revise the manual for changes to Amerigroup information and procedures.

What is new in this version?

Below are key changes to the manual that you need to review:

- Section 1.1 – Updates to program descriptions and MMP (Medicare-Medicaid Plan) added
- Chapter 2 – Quick Reference Information updates including precertification contacts and new and changed vendors such as Availity, Express Scripts, and Smart Data Solutions
- Section 4.1 – Medicaid Covered Services – added spell of illness waiver for STAR+PLUS members with a diagnosis of bipolar disorder, major clinical depression or schizophrenia
- Section 4.1.1 – Covered Services (core Medicaid services) – Addition of Telehealth, Mental Health Rehabilitative Services and Mental Health Targeted Case Management
- Section 4.1.3 – Coordination with Non-Medicaid Managed Care Covered Services
- Section 4.1.6 – Vendor information changed from Caremark to Express Scripts
- Sections 4.1.7.1 & 11.11 – Texas Health Steps – timeliness of checkups ages 0 – 35 months
- Section 4.1.9 – Ambulance Transportation Services (Nonemergent) – precertification
- Section 4.1.11 – Vision Services – Block Vision name change to Superior Vision of Texas
- Section 4.3.4 – last bullet concerning blood lead levels testing
- Section 5.1 – Medical Review Criteria – utilization management guidelines
- Section 5.4 – Precertification/Notification Process – contact information
- Section 5.15 – Self-referrals – Early Childhood Intervention (ECI)
- Section 6.3 – The Role of Long-term Services and Supports Providers
- Section 6.4 – Personal Attendant Wage Requirements
- Section 6.5 – Electronic Visit Verification
- Section 6.6.3 – STAR+PLUS Coverage Table – Community First Choice benefits
- Sect 6.6.4 (new section) – Settings for Provision of LTSS Benefits
- Section 6.10.2 – Attendant Care Enhancement Payments



- Section 7.2.1 – Mental Health Rehabilitative Services and Targeted Case Management
- Section 9.2.2 – Provider Payment Appeals
- Section 10.5 – Appointments – access standards table
- Section 10.10 – Early Childhood Intervention (ECI)
- Section 10.13 – Fraud, Waste and Abuse – standards for providers with annual Medicaid receipts of \$5 million or more
- Section 10.20 – Noncompliant Amerigroup Members
- Section 10.22.3 – PCP Responsibilities – reporting of abuse, neglect or exploitation
- Section 10.31.1 – Specialty Care Providers’ Roles and Responsibilities - reporting of abuse, neglect or exploitation
- Section 11.3 – Case Management – super-utilizers
- Section 11.3.1 (new section) – Members with Special Health Care Needs (MSHCN)
- Section 11.8 – Amerigroup On Call changed to Nurse HelpLine
- Section 12.1 – Claims Submission – ICD-10
- Section 12.7 – Provider Reimbursement – Medicaid provider re-enrollment
- Section 12.8.1 (new section) – Provider Preventable Conditions
- Appendix A – Sample ID cards – all ID cards updated

What if I need other assistance?

If you have questions about this update, received this fax in error, or need any other assistance, call our Provider Services team at 1-800-454-3730.

**Amerigroup members in the Medicaid Rural Service Area are served by Amerigroup Insurance Company; all other Amerigroup members in Texas are served by Amerigroup Texas, Inc.*