Provider Update

Nonemergency ambulance prior authorization update

Summary: Amerigroup* is updating prior authorization (PA) requirements provided by the Texas Health and Human Services Commission (HHSC) to comply with Human Resource Code (HRC) §32.024(t) effective January 1, 2016, for Medicaid (STAR and STAR+PLUS) and CHIP.

✦ **What this means to you:** Effective January 1, 2016, PA for nonemergency ambulance transportation of Medicaid and CHIP members must be requested by a physician, nursing facility, or health care provider and can no longer be submitted directly by ambulance/transportation providers.

Recently, HHSC shared PA for nonemergency ambulance transportation policy guidance in accordance with HRC §32.024(t) affecting fee-for-service and managed care organizations (MCOs). The policy guidance and HRC specifies that a health care provider, which includes physician, nursing facility, or other responsible party, must obtain the authorization. Other responsible party is further defined to mean staff working with a health care service provider. This means ambulance providers are unable to obtain an authorization for nonemergent ambulance transportation. In addition, if the covered service is for a Medicaid member (STAR or STAR+PLUS), the requesting individual must be Medicaid-enrolled.

As a reminder, all nonemergency ambulance transportation (NEMT) services require precertification and medical necessity review in accordance with the Texas Medicaid Provider and Procedure Manual guidelines.

Ambulance providers may coordinate the PA request between the health care provider or responsible party and Amerigroup. The PA must be signed and submitted by the health care provider or responsible party. The ambulance provider cannot submit the PA form. To assist in the process of finding a contracted ambulance provider, our website offers an online directory lookup tool at providers.amerigroup.com/pages/providerdirectory.aspx. In addition, when calling for PA, an Amerigroup representative may help you locate a provider (call information below).

It is important to note the ambulance provider is ultimately responsible for ensuring that PA has been obtained prior to transport; nonpayment may result for services provided without PA or when the authorization request is denied by the MCO.

Nursing facility (NF) providers must follow the steps below to obtain PA for nonemergency ambulance transportation for STAR+PLUS members:
1. A physician or physician extender writes an order for nonemergency transport.
2. NF staff should contact the member's MCO member services line, utilization management department, or service coordinator to find an ambulance company that is in-network.

*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.

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3. NF staff contacts the ambulance company to get their necessary information to complete the PA form. Necessary information supplied by the ambulance company is limited to company name, fax number, national provider identifier (NPI), and other business information.
4. The ambulance provider will document the request was initiated by NF staff and include name, time, and date.
5. The NF must sign and submit the form to the MCO for approval, along with documentation to support medical necessity. The MCO will provide notice of approval/denial to the NF and ambulance provider. If a request for recurring transports is approved, the MCO will include the number of one way transports in the approval.
6. The ambulance provider and NF will coordinate the scheduling of the appointment.

The NEMT ambulance PA form may be found on our website at providers.amerigroup.com/TX. Amerigroup will also accept the new Texas Department of Insurance (TDI) PA form as well. All PA forms must be completed fully with supporting documentation. Failure to complete the form and include applicable supporting documentation may result in a delay or denial of your request. The Amerigroup PA process is outlined below.

Requesting NEMT authorization during business hours (8 a.m. to 5 p.m. Central Time)
Requests for NEMT can be faxed, submitted via the Amerigroup website, or called into Amerigroup via the toll-free numbers shown in the table below. All requests require clinical information to support the need for the member to be transported by nonemergent ambulance transportation.

Requesting NEMT authorization after hours
Retrospective authorizations will be granted if transport has occurred during nonbusiness hours (5 p.m. to 7:59 a.m. Central Time), on weekends, or holidays. The request can be called in or faxed the next business day to the numbers listed in the table below.

NEMT request type	Members residing in a nursing home (facility)	Behavioral health (BH) facilities or to a BH provider and individuals with developmental disabilities (IDD) members	All other members for discharge from facility to home or from home to a provider/facility
Urgent same day	Call 1-866-696-0710	Call 1-800-325-0011, ext. 35933, option 2	Call 1-800-325-0011, ext. 35760
Nonurgent requests	Fax request to 1-844-206-3445	Fax request to 1-866-877-5229	Fax request to 1-866-249-1271

If you have questions about this communication, received this fax in error or need help with anything else, contact your local Provider Relations representative or call our Provider Services team at 1-800-454-3730.

Frequently asked questions

What if I have questions related to this change?
You may contact our Provider Services line at 1-800-454-3730 or your local Provider Relations representative.

What is the process for PA for Medicaid members not residing in a nursing facility?
1. A Medicaid-enrolled physician or health care provider writes an order for nonemergency transport.
2. The physician's office should contact Amerigroup to find an ambulance company that is in-network.
3. The physician's office contacts the ambulance company to get their necessary information to complete the PA form. (Necessary information supplied by the ambulance company is limited to company name, fax number, NPI, and other business information.)
4. The ambulance provider will document the request was initiated by the physician's office and include name, time, and date.
5. The physician must sign and submit the Amerigroup PA fax form along with documentation to support medical necessity.
6. Amerigroup will provide notice of approval/denial to the physician and ambulance provider. If a request for recurring transports is approved, Amerigroup will include the number of one-way transports in the approval.
7. The ambulance provider, physician's office and member will coordinate the scheduling of the appointment.

What is the process for PA for STAR+PLUS members residing in a nursing facility?
1. A physician or physician extender writes an order for nonemergency transport.
2. Nursing facility staff should contact Amerigroup to find an ambulance company that is in-network.
3. Nursing facility staff contacts the ambulance company to get their necessary information to complete the PA form. (Necessary information supplied by the ambulance company is limited to company name, fax number, NPI, and other business information.)
4. The ambulance provider will document the request was initiated by nursing facility staff and include name, time, and date.
5. The nursing facility must sign and submit the Amerigroup PA fax form along with documentation to support medical necessity.
6. Amerigroup will provide notice of approval/denial to the nursing facility and ambulance provider. If a request for recurring transports is approved, Amerigroup will include the number of one-way transports in the approval.
7. The ambulance provider and nursing facility will coordinate the scheduling of the appointment.

How do I locate ambulance providers that are in-network with Amerigroup?
You can call Amerigroup Provider Services at 1-800-454-3730 or access our Provider Directory online at providers.amerigroup.com/pages/providerdirectory.aspx.

Do you require precertification for emergency transportation?
No, we do not require precertification for emergency transportation.

What authorization form do I use now?
Complete the Amerigroup NEMT PA fax form or the new TDI PA form located at providers.amerigroup.com/TX. It is important that all information is completed in the form and all supporting clinical documentation is provided. Incomplete PA forms may a result in a delay. This information can be submitted electronically on the provider website or via fax**.**

I have an existing authorization for nonemergency transportation that spans beyond December 1, 2015. Am I required to request another PA?
No. Amerigroup recognizes authorizations may have been obtained prior to the effective date. There is no need to receive a new authorization. Once the authorization expires or previously approved visits have been used, then a new authorization is required. That new authorization request will need to be submitted to Amerigroup.

What will I receive from Amerigroup after I submit the PA request?
Amerigroup will fax responses to PA requests with the Amerigroup authorization number included to the requesting provider and ambulance provider. The response will provide information on services fully approved, partially approved, partially denied, or denied. The ambulance provider must ensure that a PA has been received prior to the nonemergency transport.

Can you provide guidance on billing nonemergency transportation codes? I'm not sure what codes are applicable for nonemergency transport.
Amerigroup uses the same procedures as outlined within the Texas Medicaid Provider Procedures Manual Ambulance Handbook.

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.