

May 2021

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COVID-19 information

Amerigroup is closely monitoring COVID-19 developments and how the novel coronavirus will impact our customers and provider partners. Our clinical team is actively monitoring external queries and reports from the Centers for Disease Control and Prevention (CDC) and the Texas Health and Human Services Commission (HHSC) to help us determine what action is necessary on our part. Amerigroup will continue to follow HHSC guidance policies.

For additional information, reference the *COVID-19 News and Resources* section on the homepage of our [website](#).

TXPEC-3523-20/TXPEC-3523-20/AGPCARE-0423-20

Medicaid

Continuing medical education/ Continuing education unit opportunities

We offer webinars on a variety of topics, including medical coding, claims issues, quality measures, healthcare and more. Each live webinar may offer both continuing medical education (CME)/ continuing education unit (CEU) credit for attendees. On-demand recordings are also available (with CME credit) for your convenience.

Sign up for a session [online](#) today!

TX-NL-0745-21



Metabolic monitoring and diabetes screening measures for those on antipsychotic medications

Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)

The Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM) HEDIS® measure evaluates the percentage of children and adolescents 1 to 17 years of age who had two or more antipsychotic prescriptions and had metabolic testing.

Antipsychotic medications can increase a child's risk for developing health concerns, including metabolic health complications. The goal of this measure is for members to have metabolic monitoring by having both a blood glucose test (glucose or HbA1c) and LDL-C testing annually.

Record your efforts:

- Glucose test or HbA1c test and LDL-C cholesterol test as identified by claim/encounter
- Document results in the member's medical record

Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)

The Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD) HEDIS measure evaluates members 18 to 64 years of age with schizophrenia, schizoaffective disorder or bipolar disorder, and who were dispensed an antipsychotic medication and had a diabetic screening test during the measurement year.

Diabetes screening is important for anyone with schizophrenia or bipolar disorder. The added risk associated with antipsychotic medications contributes to the need to screen people with schizophrenia for diabetes annually.



Record your efforts:

- Glucose test or HbA1c test as identified by claim/encounter
- Document results in the member's medical record

Helpful tips:

- Educate patients and their caregivers on the importance of completing blood work annually.
- If your practice uses electronic medical records (EMRs), have flags or reminders set in the system to alert when a patient is due for screenings.
- Draw labs in your office, if available, or refer members to a participating lab for screenings.
- Follow up on laboratory test results and document in your chart.
- Share EMR data with Amerigroup to capture all coded elements.

Other available resources:

- *Clinical Practice Guidelines* are available on our [provider website](#).
- For *The Quality Measures Desktop Reference for Medicaid Providers and HEDIS Benchmarks and Coding Guidelines for Quality Care*, contact Amerigroup Provider Services.

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

TX-NL-0384-21

Medicare-Medicaid Plan

Helping our members

The past year has been challenging for us all, especially for our senior members. Clinicians have also had to pivot and care for our members in new and creative ways. We thank you for caring for our members and ensuring they get the healthcare they need. As your patients engage you via telehealth or in person, we encourage you to have discussions about how they are coping with the pandemic and the state of their mental health. In addition, with stay at home orders, many are not able to get out to shop, see family and friends or even exercise. This is a great time to encourage them to stay active and maybe even try SilverSneakers®* online.

Below, you will find a few questions to stimulate dialogue and engage your patients during a tele-visit or office visit.

Improving or maintaining physical health:

- Compared to one year ago, how would you rate your physical health in general now?

Improving or maintaining mental health:

- Compared to one year ago, how would you rate your emotional problems (such as feeling anxious, depressed or irritable) in general now?

Monitoring physical activity:

- During the past 12 months, how has your level of exercise or physical activity changed? Have you exercised regularly, or do you take part in physical exercise. Would you be interested in participating in online exercise classes?

Reducing the risk of falling:

- A fall is when your body goes to the ground without being pushed. In the past 12 months, have you had problems with unsteadiness, tripping, falling or difficulty walking?

Improving bladder control:

- Do you have any concerns with not being able to control leaking of urine when you cough or sneeze?

Flu vaccine:

- Did you get your flu shot recently?

General questions:

- Do you have access to food and shelter?
- Do you have any concerns with not being able to get to your appointments or scheduling a specialist visit?
- Are you able to get the medicines that I prescribe?



** Tivity Health, Inc. is an independent company providing the SilverSneakers fitness program on behalf of Amerigroup STAR+PLUS MMP (Medicare-Medicaid Plan).*

TXD-NL-0209-21



Medicare Advantage



Helping our members

View the [article](#) in the Medicare-Medicaid Plan section

TXD-NL-0209-21

Amerigroup Community Care working with Optum to collect medical records for Medicare risk adjustment (MRA)

In 2021, Amerigroup will work with Optum,* who works with Ciox Health,* to request medical records with dates of service for the target year 2020 through present day for Medicare risk adjustment (MRA).

MRA refers to the process by which CMS adjusts Part C payments made to Medicare Advantage plans to account for expected costs of care based on factors associated with member demographics and health.

The goals of risk adjustment are:

- To collect accurate and complete diagnosis information to ensure proper treatment, care management, and care coordination services.
- To submit accurate and complete diagnosis data to CMS to ensure appropriate payment to both the Medicare Advantage plan and providers — in support of appropriate management of a member's health.

Jaime Marcotte, Medicare Retrospective Risk Program Lead, is managing this project. If you have any questions regarding this program, please contact Jaime at jaime.marcotte@anthem.com or **1-843-666-1970**.

** Optum and Ciox Health are independent companies providing medical record review services on behalf of Amerigroup Community Care.*

AGPCARE-0896-21

Maximizing efficient, high quality COVID-19 screenings

Identifying the most appropriate COVID-19 testing codes, testing sites and type of test to use can be confusing. The guidance below can make it easier for you to refer your patients to high-quality, lower-cost COVID-19 testing sites, find Amerigroup Community Care-contracted laboratories and identify the proper CPT® codes to use. Contact your Amerigroup representative for additional information or visit <https://provider.amerigroup.com>.

Refer patients to <http://www.myamerigroup.com> to find convenient testing locations

If an Amerigroup member requests a COVID-19 test, you may refer them to Amerigroup to find a testing location near them. Our test-site finder gives members important information about each site, including days and hours of operation, and if they offer:

- Appointment or walk-in
- Drive through service
- Rapid test results
- Antibody testing
- Testing for children

Consider antigen testing as an option when rapid results are needed

Antigen tests can be a quicker way to detect COVID-19 than nucleic acid amplification tests (NAAT) (for example, PCR). Antigen tests offer a reasonable and lower cost alternative when screening asymptomatic or low-risk patients and may be most useful for individuals within the first five to seven days of symptoms when virus replication is at its highest.

Send swab tests to Amerigroup-contracted laboratories

When providing COVID-19 molecular testing services to our members, consider utilizing the following additional in-network, high-quality labs to assist in helping to ensure that our members are receiving high-value healthcare.

In-network lab	Telephone	Website
Invitae Corporation	650-466-7242	https://www.invitae.com/en/partners

AGPCRNL-0181-21



Updates to the AIM Specialty Health Musculoskeletal Program *Clinical Appropriateness Guidelines*

Effective for dates of service on and after September 12, 2021, the following updates will apply to the AIM Musculoskeletal Program: *Joint Surgery and Spine Surgery Clinical Appropriateness Guidelines*. Part of the AIM Specialty Health®* (AIM) guideline annual review process, these updates are focused on advancing efforts to drive clinically appropriate, safe and affordable healthcare services.

Joint surgery (updates by section):

- Further defined criteria for home physical therapy.
- Removed cognitive behavioral therapy as a conservative care modality for extremity.
- Added indication for diagnostic arthroscopy.
- Standardized radiographic criteria to align with lateral release criteria.
- Adhesive capsulitis — Added history of trauma or postoperative contracture as a requirement.
- Tendinopathy — Removed rotator cuff tear as a criterion for tenodesis/tenotomy in patients with a clinical exam who do not meet criteria for superior labral tear anterior to posterior repair or have suggestive MRI findings.
- Hip arthroscopy — Removed complementary alternative medicine as not typically done for the hip.
- Arthroscopic treatment of femoroacetabular impingement syndrome (FAIS) — Removed age as an exclusion for FAIS, but further defined radiographic exclusions.
- Unicompartamental knee arthroplasty/partial knee replacement — Added degenerative change of the patellofemoral joint as a contraindication.
- Arthroscopically assisted lysis of adhesions — Added ligamentous or joint reconstruction criteria.
- Added criteria for plica resection.

Spine surgery (updates by section):

- Further defined criteria for home physical therapy.
- Added standard conservative management requirement for instability to align with spinal stenosis indications.
- Added new comprehensive indication for tethered cord syndrome.

As a reminder, ordering and servicing providers may submit prior authorization requests to AIM in one of several ways:

- Access AIM's [ProviderPortal_{SM}](#) directly. Online access is available 24/7 to process orders in real-time, and is the fastest and most convenient way to request authorization.
- Access AIM via the [Avality* Portal](#).
- Call the AIM Contact Center toll-free number at **1-800-714-0040** between 7 a.m. and 7 p.m. Eastern time.

Questions

If you have questions related to guidelines, please contact AIM via email at aim.guidelines@aimspecialtyhealth.com. Additionally, you may access and download a copy of the current and upcoming guidelines [online](#).

* AIM Specialty Health is an independent company providing some utilization review services on behalf of Amerigroup Community Care. Avality, LLC is an independent company providing administrative support services on behalf of Amerigroup Community Care.