

Provider Newsletter

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Want to receive the *Provider Newsletter* via email?

Click [here](#) to provide/update your email address.



COVID-19 information from Amerigroup Iowa, Inc.

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 Iowa Department of Public Health guidance to help us determine what action is necessary on our part. Amerigroup will continue to follow Iowa Department of Public Health guidance policies.

For additional information, reference the *COVID-19 Information* section of our [website](#).

IAPEC-1830-20

Attention facilities: Sending admission, discharge and transfer data to Amerigroup Iowa, Inc. results in improved care management for patients

CMS issued **an Interoperability and Patient Access Policy** to reduce the burden of certain administrative processes. The CMS policy requires providers to implement application programming interfaces (APIs) to improve the electronic exchange of healthcare data between patient, provider and payer. The policy states that in partnership with the Office of the National Coordinator for Health Information (ONC), CMS identified Health Level 7® (HL7) as the foundational standard to support data exchange via secure API. Implementation of this CMS mandate was July 1, 2021.

The Clinical Data Acquisition Group for Amerigroup integrates admission, discharge and transfer (ADT) data from facility providers, health information exchanges and third-party aggregators.

ADT data exchange helps Amerigroup:

- Better support members with care coordination and discharge planning — leading to healthier outcomes for our members, your patients.
- Proactively manage care transitions to avoid waste.
- Close care gaps and educate members about appropriate care settings.



Amerigroup would like to digitally exchange HL7 ADT messaging data for our members using secure data collection and transmission capabilities currently in use by facility systems. Facilities with network connections through vendors or health information exchanges can integrate ADT data with Amerigroup through these channels as well. Near real-time HL7 ADT messaging data — or at least within 24 hours of admission, discharge or transfer — enables Amerigroup to most effectively manage care transitions.

Email the Clinical Data and Analytics team at ADT_Intake@Anthem.com to get started today.

IA-NL-0356-21

Availity Portal eligibility and benefits provides both additional benefit notes and digital member ID cards



New: additional benefit detail

Now, you can select **Additional Benefit Notes**, on the Availity* Portal *Eligibility and Benefits* results screen to find more descriptive benefit information.

Benefits are listed in alphabetical order, making it easier to search for specific benefits. Capabilities include full benefit descriptions, vendor information associated with the benefit and the option for the provider to print out the benefit information.

Digital member ID cards

The digital member ID card allows easy, low-touch access to view additional information or confirm basic membership details.

When conducting an eligibility and benefits inquiry for our members, simply select **View Member ID Card** on the *Eligibility and Benefits* results page. Note: The Availity Portal requires you to enter the member's ID number, as well as a date of birth or the member's first and last name into the search options in order to submit an eligibility and benefits inquiry.

Eligibility and Benefits results page

Member ID: [REDACTED] Subscriber: [REDACTED] Transaction ID: [REDACTED] Transaction Date: [REDACTED] Customer: [REDACTED]

Plan / Coverage Date: Jan 03, 2020 - Dec 31, 9999

[View Member ID Card](#) [Additional Benefit Notes](#)

Try both of these valuable tools today!

* Availity, LLC is an independent company providing administrative support services on behalf of Amerigroup Iowa, Inc.

IA-NL-0332-20

Medical drug benefit *Clinical Criteria* updates

On March 25, 2021, and April 8, 2021, the Pharmacy and Therapeutics (P&T) Committee approved several *Clinical Criteria* applicable to the medical drug benefit for Amerigroup Iowa, Inc. These policies were developed, revised, or reviewed to support clinical coding edits.



[Read more online.](#)

IA-NL-0383-21

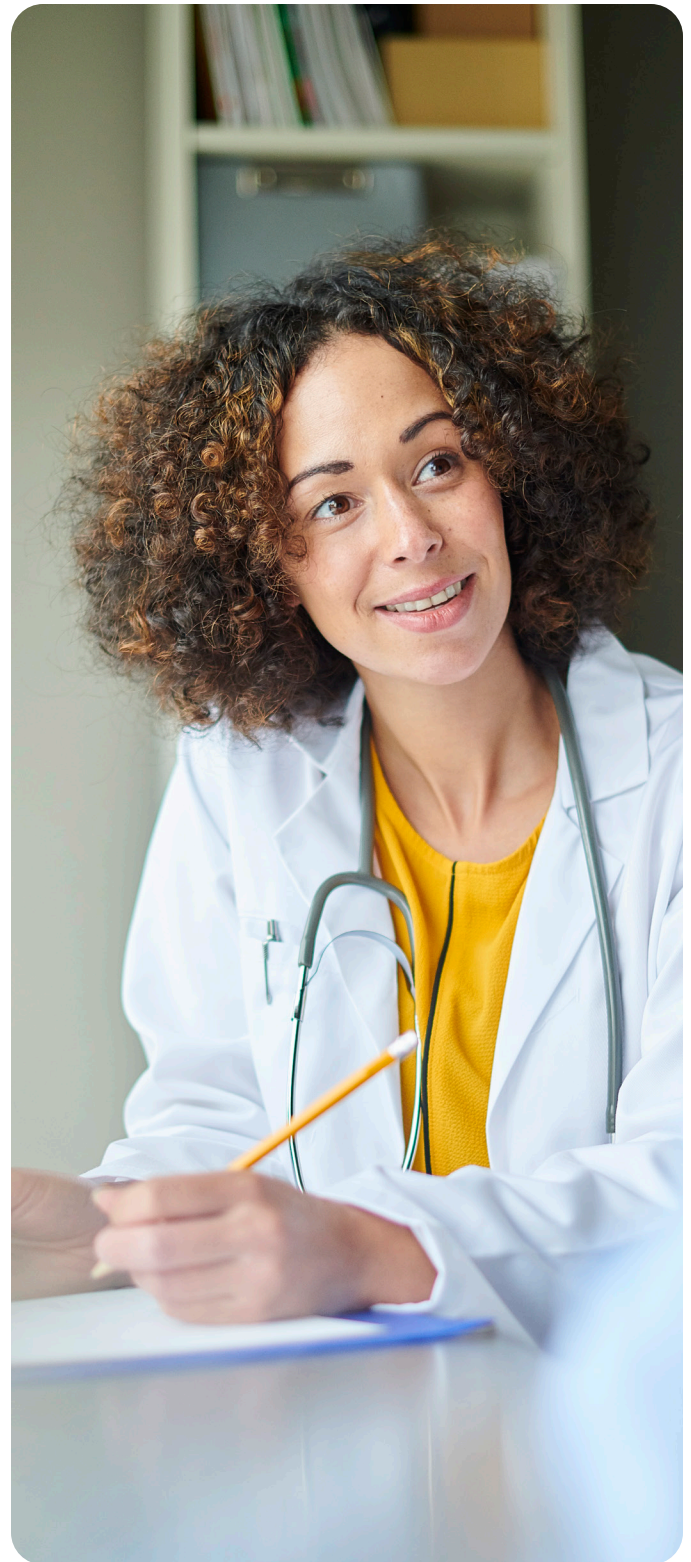
Prior authorization requirement changes effective September 1, 2021 — UM AROW 1837

Effective September 1, 2021, prior authorization (PA) requirements will change for multiple codes. The medical codes listed in the full article will require PA by Amerigroup Iowa, Inc. for our members. Federal and state law, as well as state contract language and CMS guidelines, including definitions and specific contract provisions/exclusions, take precedence over these PA rules and must be considered first when determining coverage. **Noncompliance with new requirements may result in denied claims.**



[Read more online.](#)

IA-NL-0378-21



Medicare Advantage

Medical drug benefit *Clinical Criteria* updates

On August 21, 2020 and May 21, 2021, the Pharmacy and Therapeutic (P&T) Committee approved several *Clinical Criteria* applicable to the medical drug benefit for Amerigroup Iowa, Inc. These policies were developed, revised or reviewed to support clinical coding edits.



Read more online.

Visit the [Clinical Criteria website](#) to search for specific policies. If you have questions or would like additional information, reach out via [email](#).

AGPCRNL-0206-21

Prior authorization/precertification form notification

The best way to ensure you're submitting everything needed for a precertification is to use the [Medicare Advantage — General Precertification Request](#) at <https://provider.amerigroup.com/IA>. Select Resources > [Forms](#) > Prior Authorizations. By filling out the form completely and with as much information as possible, you can be sure we have the information to process your request timely.

AGPCRNL-0204-21

Utilization management authorization rule operations

On November 1, 2021, Amerigroup Iowa, Inc. prior authorization (PA) requirements will change for L8702 covered by Amerigroup.

PA requirements will be added for the following code:

- L8702 — Powered upper extremity range of motion assist device, elbow, wrist, hand, finger, single or double upright(s), includes microprocessor, sensors, all components and accessories, custom fabricated

Federal and state law, as well as state contract language and CMS guidelines, including definitions and specific contract provisions/exclusions, take precedence over these PA rules and must be considered first when determining coverage. Noncompliance with new requirements may result in denied claims.

Not all PA requirements are listed here. PA requirements are available to contracted providers on the [provider website](#) > Login or by accessing Availity.* Once logged in to [Availity](#), select Patient Registration > Authorizations & Referrals, then choose **Authorizations** or **Auth/Referral Inquiry**, as appropriate. Contracted and noncontracted providers who are unable to access Availity may call the number on the back of the member's ID card for assistance with PA requirements.

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AGPCRNL-0203-21



Reimbursement Policies

Policy Update — Medicare Advantage **DRG Inpatient Facility Transfers** *(Effective 11/30/21)*

Effective November 30, 2021, Amerigroup Iowa, Inc. claims for members who leave against medical advice and are admitted to another acute care facility on the same day are considered transfers and will follow the criteria detailed in the policy.

For additional information, please review the **DRG Inpatient Facility Transfers reimbursement policy** at <https://provider.amerigroup.com/iowa-provider/claims/reimbursement-policies> under the **Facilities** dropdown.

AGPCRNL-0199-21