

## **Prior authorization requirements for E0482**

Effective **December 1, 2020**, prior authorization (PA) requirements will change for E0482. The medical codes listed below will require PA by Amerigroup Community Care. Federal and state law, as well as state contract language and Centers for Medicare & Medicaid Services guidelines, including definitions and specific contract provisions/exclusions take prece dence over these PA rules and must be considered first when determining coverage. **Noncompliance with new requirements may result in denied claims.** 

PA requirements will be added to the following:

• E0482 — Cough stimulating device, alternating positive and negative airway pressure

To request PA, you may use one of the following methods:

Web: https://www.availity.com

Fax: 1-800-964-3627Phone: 1-800-454-3730

Not all PA requirements are listed here. PA requirements are available to contracted providers by accessing the Provider Self-Service Tool at <a href="https://www.availity.com">https://www.availity.com</a> at <a href="https://providers.amerigroup.com/TN">https://providers.amerigroup.com/TN</a> Login. Contracted and noncontracted providers who are unable to access Availity\* may call Provider Services at 1-800-454-3730 for assistance with PA requirements.

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<sup>\*</sup> Availity, LLC is an independent company providing administrative support services on behalf of Amerigroup Community Care.