

Provider News | February 2023

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 Submit your information to us using the QR code to the left or click [here](#).

Contact Us

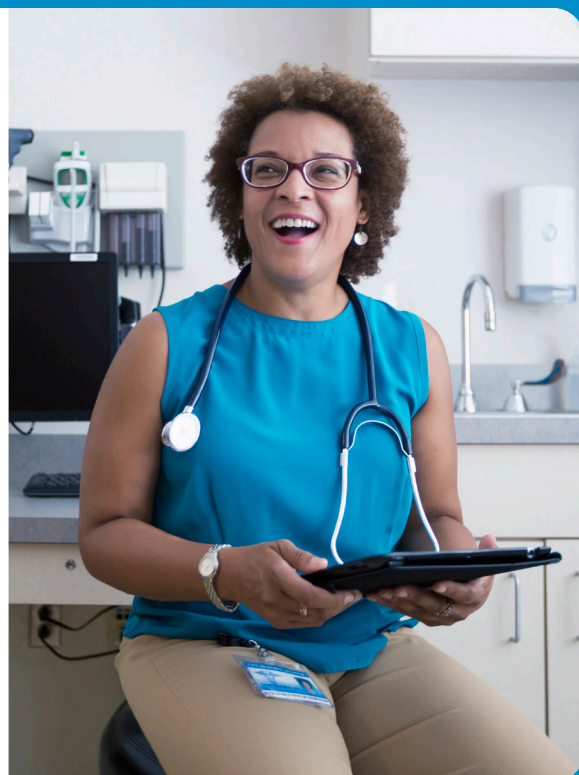
If you have questions or need assistance, visit the *Contact Us* section at the bottom of our provider website for up-to-date contact information and self-service tools or call Provider Services.

Provider website:

- <https://provider.amerigroup.com/tx>

Provider Services:

- Medicaid: **800-454-3730**
- Medicare-Medicaid Plan: **855-878-1785**
- Medicare Advantage: **866-805-4589**



Featured Announcement

Medicaid | Medicare-Medicaid Plan | Medicare Advantage

A new look is coming to our *Provider News*

We are committed to improving the way we do business with our provider community. Based on your feedback, we are pleased to announce that a new look and feel is coming to *Provider News*, including our monthly newsletter, in the first half of 2023, with additional improvements planned throughout the rest of year.

This new design features an enhanced search capability for individual articles and publications housed in a fully digital library. We're updating the format of articles to improve readability and allow for printing on an individual basis.

Stay tuned as we share more details on the new *Provider News* and these improvements in 2023.

TXAGP-CDCRMMP-016188-22-CPN15789

Administrative

Medicaid | Medicare-Medicaid Plan | Medicare Advantage

AIM Specialty Health will transition to Carelon Medical Benefits Management Inc.

In March 2023, AIM Specialty Health®* (AIM) will transition to Carelon Medical Benefits Management Inc. This transition is a name change only, and there will be no process changes. The new name will not impact the way AIM works with health plans and providers. In March, any operational assets that mention AIM Specialty Health (such as determination letters) will adopt the new Carelon Medical Benefits Management Inc. name.

Provider brand transition FAQ:

Provider experience focus area	
1. Will the AIM ProviderPortalSM URL or platform name be changed?	No, the website address will not be impacted; all providers will continue to have access to www.providerportal.com . The AIM logo will be replaced with a Carelon logo. No changes are being made to the case submission process.
2. Will there be any changes to the AIM Clinical Guidelines URL or content?	Yes, the clinical guidelines site will be automatically redirected to a new Carelon URL, and the branding will be updated to reflect Carelon.
3. Are any phone number changes planned as part of this transition?	No, inbound phone numbers are not being changed. References to AIM within recorded scripting will be replaced with Carelon Medical Benefits Management Inc.
4. Will there be any changes for providers who connect with AIM via other means such as Availity Essentials[*] ?	No, access changes are not needed or planned; however, all references to the AIM company name will eventually be updated to Carelon Medical Benefits Management Inc.
5. Will AIM references on health plan websites and member materials such as ID cards be changed?	Not right away. Providers may continue to see the AIM company name on health plan websites and member ID cards for some time, but it's expected that these will be changed through scheduled content update cycles.
Corporate website	
1. Will the AIM corporate website URL be changed?	The corporate website will be moved to www.carelon.com . All links to the ProviderPortal and clinical guideline pages will remain active and will be redirected.
Provider microsites	
1. Will the AIM provider microsite URLs change?	The provider microsite URLs you use today to access information from AIM will be automatically redirected to new Carelon URLs, and the branding will be updated to reflect Carelon branding.

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

TXAGP-CDCRMMP-015614-22-CPN15114



Administrative — Digital Tools

Medicaid

Submitting prior authorizations digitally through ICR

Prior authorizations submitted digitally can reduce denials associated with manual submission errors. The interactive care reviewer (ICR) prior authorization application makes it easy to submit, review, and check authorization status — all in one place.

Learn how to submit prior authorizations digitally by attending our January 2023 ICR webcast on Tuesday, January 17, 2023 at Noon ET.

To register, visit the [ICR target page](#) or go to the [Provider Learning Hub](#) and select the ICR live webinar learning icon.

You can also access self-service learning, view recorded learning sessions, and download ICR user guides and other job aides from the ICR target page.

Learn how to use ICR to:

- Create an authorization request.
- Inquire on a previously submitted authorization.
- Update a case.
- Copy a case.
- View letters associated with a case.
- Request and check the status of an authorization appeal.

TXAGP-CD-014686-22

Medicaid | Medicare-Medicaid Plan | Medicare Advantage

Medical Policies and Clinical Utilization Management Guidelines update

The *Medical Policies, Clinical Utilization Management (UM) Guidelines*, and *Third-Party Criteria* below were developed and/or revised to support clinical coding edits. Note, several policies and guidelines were revised to provide clarification only and are not included. Existing precertification requirements have not changed.

Please share this notice with other members of your practice and office staff.

To view a guideline, visit <https://medpol.providers.amerigroup.com/green-provider/medical-policies-and-clinical-guidelines>.

Notes/updates

Updates marked with an asterisk (*) notate that the criteria may be perceived as more restrictive:

- **CG-LAB-22 — Nucleic Acid Amplification Tests Using Algorithmic Analysis for the Diagnosis of Bacterial Vaginosis:**
 - Outlines the *medically necessary* and *not medically necessary* criteria for the use of nucleic acid amplification tests using algorithmic assays to detect bacterial vaginosis.
- **CG-MED-91 — Remote Therapeutic and Physiologic Monitoring Services:**
 - Outlines the *medically necessary* and *not medically necessary* criteria for remote therapeutic and physiologic monitoring services.
- **CG-SURG-114 — Ophthalmic use of Nd: YAG Laser for Posterior Capsulotomy:**
 - Outlines the *medically necessary* and *not medically necessary* criteria for ophthalmic use of Nd: YAG laser for posterior capsulotomy.
- **DME.00049 — External Upper Limb Stimulation for the Treatment of Tremors:**
 - Wrist-worn external upper limb tremor stimulator is considered *investigational* and *not medically necessary* for all indications, including but not limited to the treatment of essential tremor of the hands.
- **DME.00050 — Remote Devices for Intermittent Monitoring of Intraocular Pressure:**
 - The use of remote devices for intermittent monitoring of IOP is considered *investigational* and *not medically necessary* for all indications.
- **LAB.00049 — Artificial Intelligence-Based Software for Prostate Cancer Detection:**
 - Use of artificial intelligence-based software for prostate cancer detection is considered *investigational* and *not medically necessary* for all indications.
- **MED.00140 — Gene Therapy for Beta Thalassemia:**
 - Outlines the medically necessary and *investigational* and *not medically necessary* criteria for a one-time infusion of betibeglogene autotemcel for individuals with beta thalassemia.
- **MED.00141 — High-volume Colonic Irrigation:**
 - High-volume colonic irrigation is considered *investigational* and *not medically necessary* for all indications.

- **MED.00142 — Gene Therapy for Cerebral Adrenoleukodystrophy:**
 - Outlines the *medically necessary* and *investigational* and *not medically necessary* criteria for infusion of elivaldogene autotemcel.
- **TRANS.00040 — Hand Transplantation:**
 - Hand transplantation is considered *investigational* and *not medically necessary*.
- **CG-DME-13 — Lower Limb Prosthesis:**
 - Added new *not medically necessary* statements addressing prosthetics utilized primarily for leisure or sporting activities.
- **CG-GENE-11 — Genotype Testing for Individual Genetic Polymorphisms to Determine Drug-Metabolizer Status:**
 - Added thiopurine methyltransferase (TPMT) to scope of document and Clinical Indications Medically Necessary section.
- **DME.00044 — Robotic Arm Assistive Devices; previously titled: Wheelchair Mounted Robotic Arm:**
 - Revised title.
 - Rescoped the *Position Statement* to also address robotic feeding assistive device.
- **SURG.00079 — Nasal Valve Repair; previously titled: Nasal Valve Suspension:**
 - Revised title.
 - Revised the *Position Statement*.
 - Expanded scope of document to address an absorbable nasal implant and low dose radiofrequency intranasal tissue remodeling for the treatment of nasal airway obstruction.
 - Content related to the absorbable nasal implant (Latera) moved from CG SURG 87 to this document.
- **CG-GENE-13 — Genetic Testing for Inherited Diseases:**
 - Interim update to add genes PIK3CA and CDKL5 to the table of genes in the Discussion section; added existing CPT® code 81309 and genes to tier 2 codes 81405, 81406 (*medically necessary* criteria).

Medicaid | Medicare-Medicaid Plan

AIM Specialty Health updates

Effective for dates of service on and after April 9, 2023, the following updates will apply to the AIM Specialty Health®* *Clinical Appropriateness Guidelines* for medical necessity review for Amerigroup.

MCG Care Guidelines 26th Edition updates

Effective May 1, 2023, we will implement the *MCG Care Guidelines Content Patch 26.1 Updates* for several modules.

Medical Policies

On August 11, 2022, the Medical Policy and Technology Assessment Committee (MPTAC) approved several *Medical Policies* applicable to Amerigroup. These guidelines take effect February 6, 2023.

Clinical UM Guidelines

On August 11, 2022, the MPTAC approved several *Clinical UM Guidelines* applicable to Amerigroup. These guidelines adopted by the Medical Operations Committee for members on September 22, 2022. These guidelines take effect February 6, 2023.



Read more online.

TXAGP-CDMMP-013813-22-CPN12607

Medical Policies and Clinical Utilization Management Guidelines update (cont.)

Medicare Advantage

MCG Care Guidelines 26th Edition updates

Effective May 1, 2023, we will implement the *MCG Care Guidelines Content Patch 26.1 Updates* for several modules.

Medical Policies

On August 11, 2022, the MPTAC approved several *Medical Policies* applicable to Amerigroup. These guidelines take effect February 6, 2023.

Clinical UM Guidelines

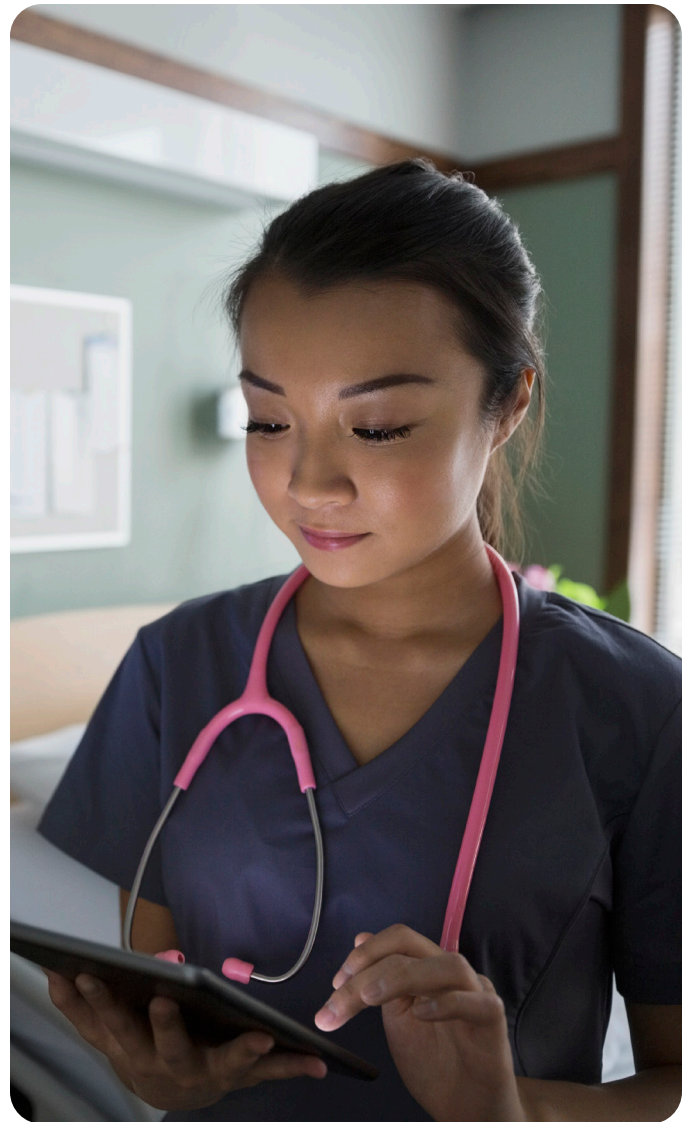
On August 11, 2022, the MPTAC approved several *Clinical UM Guidelines* applicable to Amerigroup. These guidelines adopted by the medical operations committee for Medicare Advantage members on September 22, 2022. These guidelines take effect February 6, 2023.



Read more online.

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

MULTI-AGP-CR-013815-22-CPN12607





Medicare Advantage

Updates to AIM Specialty Health *Rehabilitative and Habilitative Services Clinical Appropriateness Guidelines*

Effective for dates of service on and after April 9, 2023, the following updates will apply to the *AIM Specialty Health®* Rehabilitative and Habilitative Services Clinical Appropriateness Guidelines*. As part of the AIM guideline annual review process, these updates are focused on advancing efforts to drive clinically appropriate, safe, and affordable healthcare services.

Rehabilitative and habilitative services — updates by section

Speech-language pathology:

- Clarified language about the background of speech-language professionals
- Clarified language about qualified speech-language pathology providers

Speech therapy alternative treatments:

- Clarified language about qualified speech providers
- Definition of *blue dye test* clarified
- Parkinson Voice Project definition expanded

Physical therapy and occupational therapy adjunctive treatments:

- Added definition of Lee Silverman Voice Treatment BIG — proprietary program of intensive physical and/or occupational therapy of at least one month duration involving large, full-body exercises to improve functional movement and self-care tasks of people with Parkinson's disease and other neurological conditions. It requires company-certification of providers
- Added exclusion for Lee Silverman Voice treatment

As a reminder, ordering and servicing providers may submit prior authorization requests to AIM:

- Access AIM's **ProviderPortalSM**:
 - Online access is available 24/7 to process orders in real-time and is the fastest and most convenient way to request authorization.

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.

MULTI-AGP-CR-012886-22-CPN11938



Medicare Advantage

Updates to AIM Specialty Health Musculoskeletal — Interventional Pain Management Clinical Appropriateness Guidelines

Effective for dates of service on and after April 9, 2023, several updates will apply to the AIM Specialty Health®* *Musculoskeletal — Interventional Pain Management Clinical Appropriateness Guidelines*.



Read more online.

MULTI-AGP-CR-013431-222-CPN11940

Medicaid | Medicare Advantage

AIM Specialty Health *Cardiology Clinical Appropriateness Guidelines CPT Code List update*

Effective for dates of service on and after April 1, 2023, several code updates will apply to the AIM Specialty Health®* *Percutaneous Coronary Intervention Clinical Appropriateness Guidelines*.



Read more online.

TXAGP-CD-012757-22/MULTI-AGP-CR-013601-22-CPN12754

Medicaid | Medicare Advantage

Updates to AIM Specialty Health Advanced Imaging Clinical Appropriateness Guidelines

Effective for dates of service on and after April 9, 2023, several updates will apply to the AIM Specialty Health®* *Advanced Imaging Clinical Appropriateness Guidelines*.



Read more online.

TXAGP-CDCR-012931-22-CPN11942

* AIM Specialty Health is an independent company providing some utilization review services on behalf of Amerigroup.

Policy Updates — Prior Authorization

Medicare Advantage

Prior authorization changes

Effective April 1, 2023, prior authorization (PA) requirements will change for the following code(s). The medical code(s) listed below will require PA by Amerigroup Community Care for Medicare Advantage members.

Prior authorization requirements will be added for the following code(s):

- **0736T:** Colonic lavage, 35 or more liters of water, gravity-fed, with induced defecation, including insertion of rectal catheter
- **30468:** Repair of nasal valve collapse with subcutaneous/submucosal lateral wall implant(s)
- **K1019:** Monthly supplies for use of device coded at k1018

MULTI-AGP-CR-013628-22-CPN13014



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 precedence over these precertification rules and must be considered first when determining coverage. Non-compliance with new requirements may result in denied claims. Not all PA requirements are listed here. Detailed PA requirements are available on our [provider website](#) under the *Resources* tab or for contracted providers by accessing [Availity Essentials](#).^{*} Providers may also call Provider Services for assistance with PA requirements by calling the number on the back of the patient's member ID card.

^{*} Availity, LLC is an independent company providing administrative support services on behalf of Amerigroup Community Care.

Revised program implementation date: prior authorizations for post-acute care

As noted in a previous provider bulletin (posted to the provider website on October 27, 2022), the implementation of the myNEXUS* Post-Acute Care (PAC) program was delayed. The confirmed new program implementation date is March 1, 2023. For services beginning on this date, prior authorization requests for admission to or concurrent stay in a skilled nursing facility (SNF), an inpatient acute rehab facility (IRF), or a long-term acute care hospital (LTACH) will be reviewed by myNEXUS services for Medicare Advantage individual, group retiree solutions (GRS), and dual-eligible plan members. Through this program, myNEXUS clinicians will collaborate with members, caregivers, and facility care managers/discharge planners to provide transition planning as well as the pre-service and concurrent review authorizations of post-acute care services. The goal of this program is to support members through their recovery process in the most appropriate, least restrictive environment.

How to submit or check a prior authorization request

For SNF, IRF, or LTACH admissions, myNEXUS will begin receiving requests through the NexLync website on Sunday, February 26, 2023, and by telephone or fax on Monday, February 27, 2023, for members whose anticipated discharge date is March 1, 2023, or after. Concurrent stay review requests for members admitted to SNF, IRF, or LTACH facilities prior to March 1, 2023, should be directed to Amerigroup Community Care.

Providers are encouraged to request authorization using **NexLync** to get started. You can upload clinical information and check the status of your requests through this online tool seven days a week, 24 hours a day. If you are unable to use the link or website, you can call the myNEXUS Provider Call Center at **844-411-9622** during normal operating hours from 7 a.m. to 7 p.m. CT, Monday through Friday, or send a fax to myNEXUS at **833-311-2986**.



Please note: myNEXUS will not review authorization requests for durable medical equipment (DME), ambulance, and other related services that do not fall under Medicare-covered home healthcare services, such as home infusion, hospice, outpatient therapy, or supplemental benefits that help with everyday health and living such as personal home helper services offered under essential/everyday extras.

To learn more about myNEXUS and upcoming training webinars, visit www.myNEXUScare.com/Anthem or email PACProvider_Network@myNEXUScare.com.

** myNEXUS is an independent company providing health management services on behalf of Amerigroup Community Care.*

MULTI-AGP-CR-014374-22

Pharmacy

Medicare-Medicaid Plan | Medicare Advantage

Specialty pharmacy precertification list expansion

Effective for dates of service on and after April 1, 2023, the specialty Medicare part B drug listed in the table below will be included in our precertification review process.

HCPCS or CPT® codes	Medicare Part B drugs
C9399, J3490, J3590	Rolvedon (eflapegrastim-xnst)
C9399, J3490, J3590	Stimufend (pegfilgrastim-fpgk)
J3590	Fylnetra (pegfilgrastim-pbbk)
C9399, J3490, J3590	Spevigo (spesolimab-sbzo)
C9399, J3490, J3590	Xenpozyme (olipudase alfa)

TXAGP-CRMMP-010703-22/TXAGP-CRMMP-007093-22/TXAGP-CRMMP-008573-22

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

Medicare Advantage

New specialty pharmacy medical step therapy requirements

Effective March 1, 2023, the status of Infed in current criteria documents will change in our existing specialty pharmacy medical step therapy review process. This update is to notify that Infed will change to non-preferred.

Effective since January 1, 2023, Feraheme (ferumoxytol) changed to preferred for both brand and generic.

Step therapy review will apply upon precertification initiation, in addition to the current medical necessity review (as is current procedure). Step therapy will not apply for members who are actively receiving medications listed below.

Clinical UM Guidelines are publicly available on the provider website. Visit the [Clinical Criteria website](#) to search for specific criteria.

<i>Clinical UM Guidelines</i>	Preferred drugs	Nonpreferred drugs
ING-CC-0182	Feraheme (ferumoxytol) Ferrlecit (sodium ferric gluconate/sucrose complex) Venofer (iron sucrose)	Infed (iron dextran) Injectafer (ferric carboxymaltose) Monoferric (ferric derisomaltose)

TXAGP-CRMMP-012806-22-CPN12458



Medicaid

Prior authorization updates for medications billed under the medical benefit

Effective for dates of service on and after February 1, 2023, the following medication codes billed on medical claims from current or new *Clinical Criteria* documents will require prior authorization.

Please note, inclusion of a national drug code on your medical claim is required for claims processing.

<i>Clinical Criteria</i>	HCP ^{CS} or CPT [®] code	Drug name
ING-CC-0118	A9699	Pluvicto (lutetium Lu 177 vipivotide tetraxetan)
ING-CC-0216	J9999, J3490, J3590, C9399	Opdualag (nivolumab and relatlimab-rmbw)
ING-CC-0107 ING-CC-0072	J9999, J3490, J3590, C9399	Alymsys (bevacizumab-maly)

Visit the [*Clinical Criteria website*](#) to search for the specific *Clinical Criteria* listed above.

Note: Prior authorization requests for certain medications may require additional documentation to determine medical necessity.

TXAGP-CD-009683-22/TXAGP-CD-014635-22

Name change announcement: myNEXUS will transition to Carelon Post Acute Solutions on March 1, 2023

In June 2022, myNEXUS* announced that it joined the Carelon family of companies. Carelon* is a new healthcare services brand dedicated to solving the industry's most complex challenges.

As part of this shift, myNEXUS will begin operating under a new name, Carelon Post Acute Solutions, on March 1, 2023.

In March, any documents that mention myNEXUS, such as provider forms or the [myNEXUSwebsite](#), will begin adopting the new Carelon Post Acute Solutions name. This is a name change only and does not impact the services myNEXUS offers or the way myNEXUS works with providers.

Learn more about Carelon and myNEXUS [online](#).

** myNEXUS/Carelon is an independent company providing post acute care services on behalf of Amerigroup Community Care.*

MULTI-AGP-CR-016944-22-CPN16447

