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ProviderNews

Questions?

Medicaid providers call 1-800-454-3730
Medicare providers call 1-866-805-4589



Put heart into health care

Managed care sometimes feels like a faceless, nameless quagmire of policy and procedure — but not with Amerigroup. We are invested in people. Just like our logo suggests, the key piece to solving health care problems is a heart.

Our stories bring real people to the forefront to highlight solutions that improve quality of care, reduce costs and change lives. Our network providers and case managers intervene to get to core health issues and solve problems for patients and doctors.

“The reason I got into this was to help folks.”
— Dr. Carolyn Lightford, Amerigroup provider

To see Dr. Lightford’s practice success story, visit providers.amerigroup.com and click on Real Stories.



Save time and money

We’re always looking for new ways to make it easier for you to do business with us and get paid faster. Our provider website already offers tools to help you manage our members, clean claims and many day-to-day service needs. But we’ve recently made our site more user friendly, added member and health reporting options, and implemented enhancements to help you meet HIPAA 5010 requirements.

For 2012, our focus is enhancements to help not just you, but your office manager.

We’re rolling out features like a message center, download capability to support medical home practices and increased information sharing tools. Watch for rollout dates and instructions for your area to appear in future newsletters and bulletins.

If your address, phone or fax numbers have changed,

sign in at providers.amerigroup.com to update your contact information. You can also contact your local Provider Relations representative or call Provider Services at the numbers listed above.

It’s not too early to think about ICD-10 requirements for October 1, 2013.

Request updates from the Centers for Medicare & Medicaid Services at www.cms.gov or follow them on Twitter @CMSSGov.

Taking Care of Baby and Me[®],

a partnership between providers and our case managers, helps ensure safer births and healthier babies for our members. Know a mom who needs extra care or support at no cost? Call Provider Services.



Quality Health Care in Action — Meet the Leaders Who Carry Out Our Mission

Provider Services Organization

Our Provider Services Organization (PSO) exists to make doing business with us easier than ever and includes the following teams who support multiple functions to improve your experience at every touch point:

- **Provider Lifecycle Management** — supports provider data management; reimbursement systems configuration, integrity and quality; and contract management
- **National Provider Relations** — supports network development and provider recruitment; relationships with our vision, dental, transportation and durable medical equipment provider partners; provider communications strategy; and local provider relations teams' initiatives
- **Provider Collaboration** — supports our medical home and provider incentive programs

See "Provider Services" inside >



Tisch Scott
Senior Vice President,
National Provider Relations

Tisch Scott delivers executive leadership for network development, national accounts management, national provider relations, health plan support and provider communications strategy for Amerigroup.

With more than 18 years of leadership experience, she previously served as Chief Operating Officer (COO) of Amerigroup Georgia, where she led the launch of our Medicaid managed care plan, and served as COO at Amerigroup, Illinois. Her previous experience in contracting, provider relations, and operations for government and commercial products with health maintenance and preferred provider organizations drives the well-rounded and seasoned perspective she brings to service of our participating providers.

Office of Health Care Reform Integration

The 2010 Patient Protection and Affordable Care Act (PPACA) is arguably the most sweeping reform in health care since Medicare and Medicaid were established. "Health care reform is a historic and major overhaul in health care — how it is provided and how it is delivered. Amerigroup is positioned as the thought leader and a great, social community partner," vice president of the Office of Health Reform Integration, Maureen C. McDonnell explains. "Our team is dedicated to informing, engaging and planning with providers to prepare for the major changes to come."

Amerigroup health plans serve more than two million members, work with thousands of providers in 12 states and operate in four of the five states expecting the most significant growth in government-sponsored health program enrollment from pending reforms (e.g., Florida, Georgia, New York and Texas). "We are very much out there spreading the word and informing providers to make sure folks know they can come to us to get information," says Claire Winiarek, director of Public Policy and Research. "Our mission is to ensure providers have access to simple and meaningful tools to understand and integrate the reforms."

Of the numerous PPACA provisions, increased access to health care and payment models will have the greatest impact on providers.

See "Office of Health Care Reform Integration" inside >

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— Claire Winiarek, director of Public Policy and Research



providers.amerigroup.com

Behavioral Health: The Last Frontier in Managed Care

At Amerigroup, we see our members as people, not sets of health issues. Caring for the whole person — a core tenet of our mission — is our goal. With this approach, we also help our providers and state partners along the way.

Many Managed Care Organizations (MCOs) and commercial health insurance plans outsource management of Behavioral Health (BH) services for members, which could result in lack of ability to see members' cases from all angles. But, because we directly manage BH services for our members, we can see the full picture. We use claim, case history and experienced BH specialists to make the connections between medical and home-life issues that might trigger behavioral health episodes or aggravate existing conditions. This enables us to address those triggers by providing the right help in the right places at the right times.

Helping our state partners

Traditionally, BH services have been covered under state Medicaid fee-for-service programs. However, funding for these programs has decreased over time. Now, states are noticing treatment of physical conditions alone does not necessarily result in the best possible outcomes. This one-sided approach can also cause medical costs to skyrocket. So, many states now look to MCOs to handle all aspects of care with the goal of seeing health care costs decrease so taxpayer contributions can be stretched to cover more people in need.

How do we ensure members receive the individualized care they need with the limited resources states have to work with? An immediate cure will not suffice. We aim for an approach rooted in the principles of recovery and resiliency. Our Case Managers (CMs) play a key role in this effort.

Helping providers

We understand the challenges you face when treating members with BH needs. Our CMs are here to help! They will:

- Work with you to provide consistent, coordinated care
- Serve as adjuncts between you, our members and all others caring for them
- Work with you and our members to achieve the best possible health outcomes
- Make necessary referrals and keep you apprised of all that goes on with each member — not only health-wise but also life-wise

Case managers care

Our CMs complete a rigorous, six-month training process where they learn to treat people, not just illnesses. They learn to look at the full gamut of each member's health history and home life, from prescriptions to the ability to get to a pharmacy, from access to dental care to child care. They look at social, BH and medical needs. Rather than zeroing in on individual acute episodes, our CMs consider all factors that could adversely affect members' health.

By taking a fully integrated approach to medical and behavioral health care, we help members improve their overall functions, increasing the likelihood they will adhere to their unique treatments and plans. As a result, each member has fewer episodes that require acute care and is more able to achieve his or her life goals.

How to refer patients

Medicare: inpatient and outpatient mental health services are a covered benefit for our Medicare Advantage plans in FL, GA, MD, NJ, NM, NY, TN and TX.

Medicaid: currently, behavioral health services are a covered benefit for most of our Medicaid members in FL, GA, NM, NY, TN, VA, OH, TX and NV. Select services are covered in MD and NJ. It is our goal to continue to promote BH services with our other state partners.

Regardless of whether BH services are a covered service for members in your state, we will work closely with you to achieve positive health outcomes for our members with BH needs. If you feel one of our members could benefit from case management, call our Provider Services team.



Juliana Ekong, M.D.
Medical Director,
Behavioral Health

Dr. Ekong is responsible for the clinical aspects of our Behavioral Health (BH) department, including quality and utilization management. She also oversees our regional BH medical directors. After completing her psychiatric residency, Ekong completed a fellowship in public psychiatry at Columbia University. As a provider, she worked in several different systems of care. Prior to joining Amerigroup, she managed a primarily fee-for-service clinic serving low-income persons with mental health conditions. A board-certified psychiatrist, Ekong is also an assistant professor in clinical psychiatry at Columbia University, where she is a faculty member of the Public Psychiatry Fellowship.

We are excited to share two initiatives that will have immediate positive effects for provider onboarding and local services.

- Our National Provider Relations team, led by Tisch Scott, is implementing a new orientation and training program with increased interactivity and more tools to help you.
- This team is also focusing more effort and resources on delivering nimble, innovative and personalized local services to serve you. Ultimately, this effort makes our local representatives more available to you and more helpful, with enhanced tools and proven strategies to help you grow your practice, meet quality goals, reduce costs and administrative burden, and earn incentives when they are available.

Have a suggestion for ways we can serve you better? Call Provider Services or email customerexperience@amerigroupcorp.com.

With approximately 16 million people newly eligible for Medicaid and state Children's Health Insurance Programs (CHIP), providers will see more patients and increased revenues. Medicare primary care physicians may receive 10 percent bonus payments from 2011 through 2015. Medicaid payments for fee-for-service

and managed care will increase to 100 percent of the Medicare payment rates for 2013 and 2014. Although the effects of PPACA may be obvious, how to best implement the provisions is a challenge. In the Amerigroup tradition of community-focused solutions, the reform team works with providers to explore approaches like extended office hours and nurse help lines to serve the influx of patients. "This is an exciting initiative to be a part of and to be leading" says McDonnell.



Maureen C. McDonnell
Vice President,
Health Reform
Integration and
External
Communications
Prior to joining
Amerigroup,

McDonnell provided consulting services to nonprofit organizations and political candidates. Previously, she served as vice president of Institutional Advancement and University Relations for Regent University. In this capacity, she led the development of public and media relations, marketing and university special events departments, and launched the university's first capital campaign. McDonnell began her career with IBM, where she served in a variety of marketing, sales management and business development roles throughout 16 years of service.

Visit hcr.amerigroup.com for:

- Information about how PPACA will affect you
- 24-hour email response to your questions
- Frequently asked questions
- E-news alerts
- Reform implementation timelines
- Key terms and acronyms
- Interactive health reform maps
- Videos of Amerigroup experts discussing reforms
- Our Twitter and Facebook links

Here we grow again!

In the El Paso, Lubbock and rural areas of west, central and northeast Texas, we'll serve Medicaid beneficiaries effective March 1.



Amerigroup* will serve BAYOU HEALTH beneficiaries throughout Louisiana effective February 1.

