

Provider Newsblast



<https://providers.amerigroup.com/TN>

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Amerigroup Community Care *Provider Manual* updates

The latest update to the Amerigroup *Provider Manual* is now available online. To view the *Provider Manual*, visit our provider website (<https://providers.amerigroup.com/TN> > Provider Resources & Documents > Manuals & QRCs > Medicaid Provider Manual).

How can I get a hard copy of the manual?

If you would like a hard copy of the updated manual, please contact Provider Services at 1-800-454-3730.

TN-NL-0035-16

Amerigroup Community Care complies with all applicable federal and state civil rights laws, rules and regulations and does not discriminate against members/participants in the provision of services on the basis of race, color, national origin, religion, sex, age or disability. To report a discrimination complaint or to request language, communication or disability assistance for a member/participant, call 1-800-600-4441. Information about civil rights laws can be found on our [website](#) and is available from the [U.S. Department of Health and Human Services](#).

Access to Population Health Management — helping you care for patients with chronic care needs

Amerigroup Community Care Population Health Management Programs are designed to assist PCPs and specialists in managing the care of members with chronic care needs. Members are provided with care management and education by a team of highly qualified disease management professionals whose goal is to create a system of coordinated health care interventions and communications for enrolled members.

Case managers provide support to members with:

- Behavioral health conditions.
- Diabetes.
- Heart conditions.
- HIV/AIDS.
- Pulmonary conditions.
- Substance use disorder.

Additionally, in order to improve condition-specific outcomes, case managers use motivational interviewing to identify and address health risks such as tobacco use and obesity.



Licensed nurse case managers are available Monday-Friday from 8:30 a.m.-5:30 p.m., and our confidential voicemail is available 24 hours a day, 7 days a week. To contact our Population Health Management team, call 1-888-830-4300.

Additional information about our Population Health programs can be found on our provider website (<https://providers.amerigroup.com/TN> > Provider Resources & Documents > Population Health). Members can obtain information about our Population Health Management Programs by visiting www.myamerigroup.com or referring to their *Member Handbook*.

TN-NL-0098-17

Hemophilia factor to require prior authorization

Effective September 1, 2017, Amerigroup Community Care requires prior authorization (PA) for hemophilia factor. Federal and state law as well as state contract language 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.**



PA requirements will be added to the following codes:

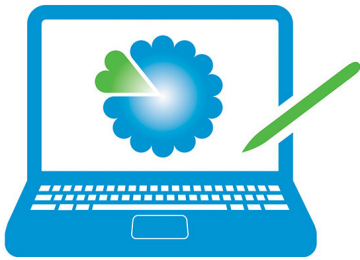
- J7175 — injection of factor x (human), 1 international unit (IU)
- J7179 — injection of von willebrand factor (recombinant), vonvendi, 1 IU
- J7202 — injection of factor ix (albumin fusion protein, recombinant), idelvion, 1 IU
- J7207 — injection of factor viii, (antihemophilic factor, recombinant), pegylated, 1 IU
- J7209 — injection of factor viii, (antihemophilic factor, recombinant), nuwiiq, 1 IU

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

- Phone: 1-800-454-3730
- Fax: 1-800-964-3627
- Web: Interactive Care Reviewer tool via <https://www.availity.com>

For detailed PA requirements, please refer to the provider website (<https://providers.amerigroup.com/TN> > Quick Tools > Precertification Lookup Tool) or call Provider Services at 1-800-454-3730.

TN-NL-0096-17



Tennessee Emergent Diagnosis List updated

The *Tennessee Emergent Diagnosis List* is now updated and can be found at <https://providers.amerigroup.com/TN> > Provider Resources & Documents > Claims Submission and Reimbursement Policy > [Emergent Diagnosis List - July 2017](#).

TN-NL-0100-17

New pregnancy notification process using the Availity Web Portal Benefit Look-Up Tool

As you know, Amerigroup Community Care offers pregnant women several services and benefits through the Taking Care of Baby and Me® program. It is our goal to ensure all pregnant members are identified early in their pregnancy, so they can take full advantage of the education, support, resources and incentives Amerigroup provides throughout the prenatal and postpartum period.

We've partnered with Availity, the vendor supporting the Benefit Look-Up Tool you may currently use in your OB office, to send us information about newly identified pregnant women. This new process, including the *HEDIS® Maternity Attestation* form, will help providers connect patients with additional benefits as soon as possible. The reporting process includes a few simple steps.

How it works

When a member of childbearing age visits the OB office, the office associate will be prompted to answer the question "Is the member pregnant?" during the eligibility and benefits inquiry process. If the response is "yes," Amerigroup will inquire about the due date and a *HEDIS Maternity Attestation* form will be generated for the OB office to complete. On this electronic form, the provider will enter other important information including the date of the first prenatal care visit, delivery date and postpartum visit date.

This new, user-friendly workflow will generate timely information that will help members, providers and Amerigroup improve birth outcomes with early intervention and ensure compliance with HEDIS benchmarks.

Please note, completion of the *HEDIS Maternity Attestation* form does not take the place of completing the *Maternity Care Management Notification Form* if required. If you are unsure of this requirement, check with your Provider Relations representative.

We will be working hard to ensure providers throughout Tennessee receive necessary training for this new workflow and that all questions are answered. If you have any specific questions regarding the new Availity maternity attestation, please feel free to reach out to Provider Services at 1-800-454-3730.

TN-NL-0095-17



Provider FAQ — Availity Web Portal Pregnancy Notification and HEDIS Attestation

1. What is the purpose of this new process?

As you know, Amerigroup Community Care offers pregnant women several services and benefits through the Taking Care of Baby and Me® program. It is our goal to ensure all pregnant women are identified early in their pregnancy so they can take full advantage of the education, support, resources and incentives Amerigroup provides throughout the prenatal and postpartum period.

This new, user-friendly workflow will generate timely information that will help you, your patients and Amerigroup improve birth outcomes with early intervention and will ensure compliance with HEDIS® benchmarks.

2. When will the new pregnancy-related questions display?

When an OB/GYN office conducts an eligibility and benefits inquiry for an Amerigroup member in the Availity Web Portal, the system will display pregnancy-related questions. If the office confirms the patient is pregnant, a *HEDIS Maternity Attestation* form will be generated. If the patient is not pregnant, the desired eligibility and benefits information will display and no further action is required.

3. Does the new *HEDIS Maternity Attestation* form replace the need for an OB global authorization?

Responses provided in the Availity pregnancy notification system do not replace the need to submit a request for OB global authorization. A request for OB global authorization can be submitted by phone or fax as well as online through the secure provider self-service website that can be accessed through the Availity Web Portal.

4. How should the office reply when a patient presents as a transfer from another OB provider?

You should answer the pertinent pregnancy questions and complete the *HEDIS Maternity Attestation* form as usual. Even though the first prenatal visit question typically relates to prenatal care in the first trimester or within 42 days of plan enrollment, you can simply enter the date you first provided prenatal care for the patient.

5. If a patient transfers out of our practice during her prenatal course, how should the office complete the *HEDIS Maternity Attestation* form?

It is OK to leave the HEDIS attestation in a pending status as it provides Amerigroup with pertinent prenatal care information up to the point that the patient transfers out of the practice. The form will remain in place until it is automatically retired 19 months later.

6. If we have confirmed the patient is pregnant but suffers an early miscarriage or chooses to end the pregnancy, how will the office communicate this important information?

In this situation, you should select the option on the HEDIS Maternity Attestation form that states “this pregnancy ended or the baby delivered prior to 20 weeks.” This action will allow the office to close out and submit the Maternity HEDIS Attestation form for this pregnancy.

7. Do I have to answer all the questions on the *HEDIS Maternity Attestation* form all at once?

No, the workflow is designed so you may enter and save information as it becomes available during the pregnancy. After the delivery and postpartum visit dates are entered, you will be given the option to complete and submit the attestation. Until then, you may save the information you enter and continue on with other tasks.

8. Is there an easy way for me to obtain a list of all patients for whom I need to enter prenatal or postpartum visit dates?

Your organization will receive two notifications to complete the *Maternity HEDIS Attestation* form.

- In order to prompt you to complete the form and enter the first prenatal visit date, the first notification is posted at the time the form is created.
- In order to alert you to schedule the postpartum visit (if not already done) and to enter the postpartum visit date, the second notification is posted 14 days prior to the estimated due date.

You may access the work queue at any time by going to **Payer Spaces**. Next, select the payer title from the list. Then, select **Amerigroup HEDIS Attestation for Maternity**.

9. How can I get additional help, support or training?

- Availity offers integrated help and on-demand training demonstrations (select **Help | Find Help** and search using the keyword **maternity**).
- You can launch a training demo from associated help topics as well as the HEDIS attestation for maternity work queue.
- If you have technical difficulties related to the HEDIS attestation for maternity workflow, contact Availity at 1-800-282-4548.
- If you have specific member concerns, please contact Provider Services at 1-800-454-3730.

TN-NL-0094-17