

Working together with tribal clinics

We recognize the unique qualities of each tribe in the Pacific Northwest and strive to assist you in meeting the overall health goals of your community. If you have suggestions or requests about how we can most effectively meet your needs, just let us know. Some of the services we offer to our contracted tribes are:

- Membership outreach by mail or phone for preventive health initiatives.
- Health education assistance and printed reference materials.
- Sponsorship and attendance at tribal events that promote health and wellness.
- Education on Amerigroup benefits and assistance with enrollment.
- Education on preventive care services that are needed, such as wellness visits for children to ensure they are receiving appropriate vaccines and meeting developmental expectations for their age.

For assistance, simply contact

Claims: Chris Falk at Christopher.Falk@amerigroup.com or 206-695-7081, ext. 54628

All other assistance: Amanda Goetz at Amanda.Goetz@amerigroup.com or 206-695-7081, ext. 54584

Amerigroup value added benefits for members

Members enrolled with Amerigroup receive a wealth of unique benefits in addition to those provided through the Washington State Health Care Authority (HCA) fee-for-service program. A few of those benefits are described below. For a full list, contact Amerigroup Member Services at 1-800-600-4441.

- Quit for Life tobacco cessation program available to all Amerigroup members age 18 and older
- No cost annual sports physicals for members ages 7 to 18
- No cost eye glasses for adults age 21 and older, up to \$100 per year
- Amerigroup On-Call allows all Amerigroup members to speak to a nurse about medical questions or concerns, day or night, even on holidays

Contracting with Amerigroup

Amerigroup agrees to the Model QHP Addendum for Indian Health Care Providers. To contract with Amerigroup, you can start the process simply by emailing your tribe's W-9 with a request and contact information to wa1provrelations@amerigroup.com or by faxing to 1-855-270-9583. An Amerigroup network manager will respond promptly.

Initial credentialing and adding new providers to an existing contract entity

Amerigroup follows the credentialing requirements of the National Committee for Quality Assurance (NCQA) for the accreditation of managed care organizations, as well as federal and state-specific requirements for credentialing and recredentialing.

We can credential in two ways:

- 1) We can credential each practitioner who serves in the clinics. This requires you to submit Washington Practitioner applications with all attachments, such as licenses, to Amerigroup. You will have to submit this information every time you add a provider.
 - a. You must submit application materials to Amerigroup whenever a practitioner is added and provide notice when a provider is terminated.
 - b. We list each practitioner's name in all of our provider directories.
 - c. Members may be assigned to individual PCPs in the tribal clinic.

- 2) We can credential your tribal clinic as a facility. This requires tribes to complete one Amerigroup application and send a list of its providers.
 - a. You must provide notification whenever a provider is added or terminated.
 - b. We will then list just the name and locations of the tribal clinics in our directories.
 - c. Member may be assigned only to the tribal clinic, not a specific practitioner.

In either case, the Tribal Clinic will be paid for all medically necessary covered services.

Length of the process: Credentialing can take 90 to 120 days to complete. The more accurate and complete a provider's application is, the faster the process can proceed.

Notification of credentialing completion: Amerigroup will mail notification to each provider when they have been approved or rejected for credentialing. If the provider group has designated a sole point of contact for credentialing, we will work with that contact to request additional information/clarification during the process but will mail the final notice to the provider's attention.

Recredentialing

If you have received a recredentialing request from our vendor, Medversant, please be sure to respond promptly to ensure your credentialing does not expire. Respond to them directly using the contact information provided in their communications. If you have any difficulties with recredentialing, please let your local Provider Relations representative know.

Timelines: We begin the recredentialing process eight months in advance of a provider's three-year credentialing anniversary with us and at least every three years thereafter. To avoid termination, providers must return all requested materials within 120 days of their anniversary.

Claims processing

Amerigroup generally follows the same billing rules as the Washington State HCA. HCA pays tribal health programs the Indian Health Services (IHS) encounter rate differential after Amerigroup has paid the original claim.

- Submit claims for Amerigroup members to Amerigroup.
- Upon Amerigroup payment, submit claims to HCA for reconciliation to tribal encounter rate.
- Bill professional services via 837P/CMS1500 claim.
- Submit claims using current CPT and HCPCS codes.
- Submit all claims to Amerigroup within 365 days of the date of service.
- For covered services provided to nontribal members, contracted tribal clinics are not required to obtain prior authorization (PA). Noncontracted tribal clinics must obtain PA for these members.
- All services performed by one or more providers on the same day under the same category of encounter must be billed on the same claim.
- Include all required American Indian/Alaska Native or non-native modifiers as referenced in the WA HCA Tribal Billing Guide to avoid delays in reimbursement. The claim would be processed under non-tribal member guidelines if the modifiers are not included on the claim.
- Tribal clinics may resubmit, modify or adjust any timely initial claim, except prescription drug claims, for a period of 24 months from the date of service (WAC 182-502-0150).