

Provider Update

Prior Authorization Requirement Change to Epidermal Growth Factor Receptor (EGFR) Testing

On **May 1, 2017**, Amerigroup* Community Care prior authorization (PA) requirement will change for Epidermal Growth Factor Receptor (EGFR) Testing. 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 prior authorization rules and must be considered first when determining coverage.

Non-compliance with new requirements may result in denied claims. PA requirement will be added to the following code:

- 81235 – EGFR (epidermal growth factor receptor) (e.g. non-small cell lung cancer) gene analysis, common variants (e.g. exon 19 LREA deletion, L858R, T790M, G719A, G719S, L861Q)

Not all prior authorization requirements are listed here. Detailed prior authorization requirements are available to contracted providers by accessing the “Provider Self-Service Tool” within Availity. Non-contracted providers should contact the Health Plan.

64661MUSENMUB 01/19/17

*In New Mexico, Amerigroup Community Care of New Mexico, Inc. In Texas, Amerigroup members in the Medicaid Rural Service Area are served by Amerigroup Insurance Company; all other Amerigroup members are served by Amerigroup Texas, Inc. In Washington, Amerigroup Washington, Inc.

Amerivantage is a DSNP plan with a Medicare contract and a contract with the State Medicaid program. In New Mexico: Amerivantage is an HMO with a Medicare contract. Enrollment in Amerivantage depends on contract renewal.

