

Complete your AIM OptiNet® registration for X-ray, ultrasound, echocardiography and/or high-tech imaging services by April 1, 2017

All participating Medicare Advantage providers who provide imaging services must complete registration for AIM's online registration tool, *OptiNet*. *OptiNet* will collect modality-specific data from providers who render X-ray, ultrasound (abdominal/retroperitoneum, gynecological and obstetrical services only at this time), Magnetic Resonance (MR), Computed Tomography (CT), nuclear medicine (NUC), positron emission tomography (PET) and echocardiograph imaging services. Areas of assessment include facility specifications, technologist and physician qualifications, accreditation, equipment and technical registration.

These data will be used to calculate scores for providers who render imaging services for our individual Medicare Advantage members.

All participating providers who provide imaging services, including x-rays and ultrasounds as noted above, must complete the registration. Providers who do not register, who score less than 76 or who do not complete the survey by April 1, 2017, will receive a line-item denial for the technical component of the outpatient diagnostic imaging service only. This includes providers who have delegated risk arrangements and who may see Amerigroup Community Care members outside of those risk arrangements.

If you have already completed an OptiNet assessment, please ensure that you keep your registration up to date. Expiring data could lead to a negative impact in your modality scores.

Facilities billing on a UB-04 claim form will be excluded from line item denials at this time.

The provider registration is available online at <https://www.providerportal.com>.

- Select Amerigroup MA from the drop down menu
- Only those providers who have completed the provider registration will be able to view their information online
- If you have questions or need help completing the registration, please call AIM Customer Service at 1-800-252-2021 Monday-Friday 8 a.m. to 7 p.m. ET or send an email to assessment@aimspecialtyhealth.com.

To improve your score

- Go to the OptiNet section of AIM's provider portal found at <https://www.providerportal.com>. Once you access OptiNet via the provider portal, you

The information in this update may be an update or change to your provider manual. Find the most current manual at <https://providers.amerigroup.com>.

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.

will see a link next to your completed registration titled scorecard. Once this link is selected, you are on the scorecard page and then you will find the link to the .pdf document titled "Understanding the Provider Registration Scorecard." That document explains OptiNet scoring logic and includes tips to help improve your score. The provider registration scorecard also is included at the end of this portal posting.

- Ensure that all info is accurate and expiration dates are current, especially for modality accreditation and staff credentials.
- Contact AIM's assessment staff at 1-800-252-2021, option 3 or assessment@aimspecialtyhealth.com.

Participating providers who have already completed the survey but scored less than 76 can use the online registration at any time to update their information and potentially improve their score. All providers, including those who score less than 76, will receive individualized information they can use to improve their score.

Act now to avoid line-item claims denials

Providers are strongly encouraged to register and improve their scores as needed before the line-item denials for claims submitted for dates of service on or after April 1, 2017, begins.

Registration checklist

The survey collects the following information:

- **Site and contact information:**
 - Verify imaging facility address
 - Designated contact person
 - Hours of outpatient operation
 - Site Accreditations and expiration dates
- **Equipment information for each modality (as applicable)**
 - Manufacturer
 - Model
 - Year made
 - Number of channels
 - Magnet strength
 - Table weight limit
 - Modality Accreditations and expiration date
 - Procedures performed
 - Average lead time to schedule appointment
- **Staff information**
 - For each interpreting physician
 - Specialty
 - Board certification and expiration date
 - Subspecialties/CAQ
 - For each technologist/imager
 - Modalities performed
 - Registration(s) by modality
 - Registration expiration date(s)

- **Shared and mobile services**
 - Other users of equipment and facility

Contracted providers will be asked to update their online information periodically.

Globally billed claims will deny in total if the provider scores less than 76 or if the provider does not complete the survey.

Please note that the line-item denial for a site score below 76 applies only to individual Medicare Advantage claims at this time.

Members cannot be balance billed if a line-item denial occurs.