

Coding patient services reminders

To help ensure your patients and our members receive their medical care in a timely fashion, we would like to remind you of important things to keep in mind when submitting CPT codes for requested services:

1. Ensure the CPT code requested is the service that the physician/provider details in the medical record.
2. Review appropriate coding and Medicare guidelines to ensure service is a covered service and that the code is a valid code for that year.
3. If a code that is requested does not match the intended service, please be prepared to correct the error and resubmit the request.
4. Amerigroup relies on the information submitted from the medical record to make its determinations on your requests. It is important that all relevant information to the member's requested service be submitted.

Providers requesting authorization for services based on **incorrectly** documented CPT/HCPCS codes may receive **avoidable** denial notices where the code/service is found not medically necessary or noncovered.

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.

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