

Prior authorization requirements for Somatrem

Effective January 1, 2019, prior authorization (PA) requirements will change for injectable/infusible drug Somatrem to be covered by Amerigroup Community Care for Medicaid members. 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 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:

- Somatrem — injection, 1 mg (J2940)

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

- Web: <https://www.availity.com>
- Fax: 1-800-964-3627
- Phone: 1-800-454-3730

Not all PA requirements are listed here. PA requirements are available to contracted and noncontracted providers on our provider website (<https://providers.amerigroup.com/GA> > Quick Tools > [Precertification Lookup Tool](#)). Providers may also call us at 1-800-454-3730 for PA requirements.