

## **Genetic testing update**

**Summary of change:** Effective with dates of service on or after November 1, 2017, Amerigroup Community Care will transition the medical necessity review of all genetic testing services for Medicaid members to AIM Specialty Health®. Additionally, this review will now take place as a **prior authorization**. Additional information including medical policies and associated codes that will be reviewed by AIM for medical necessity will be available at: <http://aimspecialtyhealth.com>.

Effective November 1, 2017, please submit genetic testing prior authorization requests to AIM through one of the following ways:

- Access the AIM **ProviderPortal**<sup>SM</sup> directly at <https://providerportal.com>. Online access is available 24/7 to process orders in real-time and is the fastest and most convenient way to request authorization.
- Access AIM via the Availity Portal at <https://www.availity.com>.
- Call the AIM Contact Center toll-free number at 1-800-554-0580, Monday-Friday, 8:30 a.m.-7 p.m. Eastern time.

For further questions regarding prior authorization requirements, please contact the Provider Services number on the back of your patient's ID card.

Other services may be added to this list at a later date. If this happens, we will notify you in advance. In addition, other services not on the list above and, therefore, not managed through AIM, will follow the current Amerigroup prior authorization process.

When requesting the services noted above, please follow this process:

- The ordering provider is responsible for obtaining a health services review authorization. To obtain this authorization, you can access AIM via <https://providerportal.com> or <https://www.availity.com> or contact AIM toll free at 1-800-714-0040. Hours of operation are Monday-Friday, 8:30 a.m.-7 p.m. Eastern time.
- The **ProviderPortal** is the fastest, easiest way to contact AIM. This portal offers a convenient way to enter your order requests or check on the status of your previous orders. Go to <https://providerportal.com> to begin (registration required).
- Fax requests will no longer be accepted for the services reviewed by AIM as listed above.
- Providers should verify that the necessary prior authorization has been obtained in advance of rendering the services noted above. Failure to do so may result in nonpayment of your claim.
- Imaging and procedures performed as part of urgent/emergent care do not require prior authorization. Services provided as part of a planned inpatient admission may require prior authorization. However, these services are not handled by AIM. Contact the Provider Helpline at 1-800-454-3730 should you have questions about whether a particular service requires a prior authorization.

While procedures for some services have changed as noted above, certain core services and capabilities (while subject to change and independent of AIM's role as our outpatient imaging manager), remain unchanged at this time. These include:

- Claims processing.

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>

- Clinical and coverage guidelines.
- The Amerigroup network of providers offering these services to our members.

We appreciate your support and look forward to your assistance in assuring that our Amerigroup members receive diagnostic imaging services delivered in a clinically appropriate fashion.

Please note that adhering to these new policies and procedures is required to assure appropriate payment of claims. Should you have questions, please contact your local Provider Relations representative.