

Provider Update

Immune Globulin Home Infusion Therapy Part B coverage reminder

Background: Amerigroup Community Care reminds providers that the Centers for Medicare & Medicaid Services (CMS) requires that intravenous immune globulin¹ administered in the home setting is only covered under the Medicare Part B benefit when associated with primary immune deficiency disease.¹ Intravenous immune globulin provided for any other diagnosis in the home setting will not be covered under the member's Part B benefit.

✦ **What this means to you:** Home infusion providers should submit intravenous immune globulin drug reimbursement claims to the members' Medicare Part D benefit for all indications other than primary immune deficiency disease.

Additional information and tools

Please see CMS' Medicare Prescription Drug Benefit Manual for more information at:

- www.cms.gov/PrescriptionDrugCovContra/Downloads/Chapter6.pdf

What if I need assistance?

If you have questions about this communication, received this fax in error or need assistance with any other item, contact your local Provider Relations representative or call Provider Services at 1-866-805-4589.

¹ Immune globulin is defined by the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 as an approved pooled plasma derivative: IVIG, SCIG, IMIG.

¹ And meets medical necessity criteria

Amerivantage is an HMO plan with a Medicare contract and a contract with the Georgia Medicaid program. Enrollment in Amerivantage depends on contract renewal.

WEB-SSO-0040-15

January 2015

by Amerigroup Specialty Products Group

1145036 01 2015

