

Provider Update

Provider education: prior authorization requests

Background: Amerigroup Iowa, Inc. would like to inform our providers of the turnaround time frame for urgent and nonurgent prior authorization requests.

What this means to me

We want to keep our providers as well informed as possible on urgent care services. If you have an urgent prior authorization request, please mark it urgent so that we may quickly identify it.

Federal regulations definition of urgent care services

Urgent care services are defined in [Title 42 §405.400](#) as “services furnished within 12 hours in order to avoid the likely onset of an emergency medical condition.” Expedited requests will be completed when “following the standard timeframe could seriously jeopardize the enrollee’s life or health or ability to attain, maintain, or regain maximum function.” (*Code of Federal Regulations Title 42 §438.210*).

The turnaround time frame for standard nonurgent prior authorization requests is 14 days from the date submitted. The turnaround time frame for urgent prior authorization requests is 72 hours from the date submitted.

Tips for a smooth process:

- Submit **all current clinical information relevant to your request** with the completed prior authorization form.
- Submit the NPI for the contracted Amerigroup provider who will submit the claim.
- If the request is urgent, mark the **Urgent** box on the prior authorization form.
- Submit your request and save the fax confirmation page in the member’s record.
- Allow the entire 14-day turnaround time for nonurgent request processing.

What if I need assistance?

If you have questions about this communication or need assistance with any other item, contact your local Provider Relations representative or call Provider Services at 1-800-454-3730.

<https://providers.amerigroup.com>

