

Provider Update

Effective May 1, 2016: knee and hip arthroplasty to require prior authorization for Medicaid

Summary: Effective May 1, 2016, knee and hip arthroplasty will require prior authorization (PA).

✦ **What this means to you:** For dates of service on or after May 1, 2016, you will need to submit a knee and hip arthroplasty PA request for review.

What is the impact of this change?

We will require PA for knee and hip arthroplasty beginning May 1, 2016. For specific procedure codes and detailed authorization requirements, please refer to the provider self-service tool at providers.amerigroup.com/MD.

To request PA, please fax your request to 1-800-964-3627 or call us at 1-800-454-3730.

What if I need assistance?

If you have questions about this communication, received this fax in error or need assistance with any other item, call Provider Services at 1-800-454-3730.

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