

New provider orientation

IAPEC-0109-15

December 2015



Provider resources overview



Website



Key contacts: Provider Relations and more



Portal and Provider Services line

- Eligibility verification
- Claims inquiry
- Benefit verification
- PCP assistance
- Interpreter/hearing impaired services



Provider training



Provider communications





Medicaid provider website



How Can We Help You?

Amerigroup & You

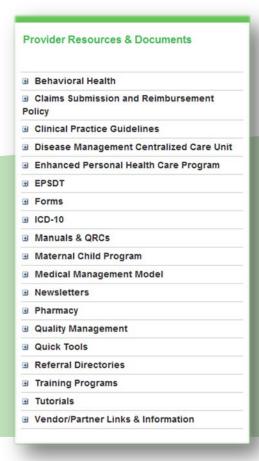
Providing care for those who need it most requires a team effort and there's no more critical person on this team than you the provider. Our challenge is to find ways to help you use your resources as efficiently and productively as possible. And that begins by listening to the problems you encounter and the ideas you have to make the system work better. Together we can find the real solutions that can make a difference in people's lives.

Login





Public website information



Registration and login not required for access to:

- Claims forms
- Precertification Lookup Tool
- Provider Manual
- Clinical Practice Guidelines
- News and announcements
- **Provider Directory**
- Fraud, waste and abuse
- **Formulary**



Verifying member eligibility

Providers can verify member eligibility as follows:

- Availability for real-time member enrollment and eligibility verification for all IA Health Link programs is 24 hours a day, 7 days a week. Or, use the website to determine the member's specific benefit plan and coverage:
 - Automated voice response: 1-800-338-7752
 - IA Health Link website: https://dhs.iowa.gov/ime/providers
- Contact Provider Services to verify enrollment and benefits for our members:
 - o Phone: 1-800-454-3730, Monday to Friday, 7:30 a.m.-6 p.m. Central time
 - On the Availity web portal at www.Availity.com.
 - You can also access Availity through our secure provider site
 (providers.amerigroup.com/ia), by selecting Eligibility and
 Benefits and clicking on the link to redirect to the Availity
 portal.

Precertification lookup tool online

Submit precertification requests via:







This tool: Is for outpatient services — inpatient Does not show benefits coverage —		TOTAL OF A TRANSPORT OF THE PROPERTY OF THE PR
* - Re Market * Line of Business * CPT/HCPCS Code or Code Description *	quired Field Select Market Select Line of Business	Check the status of your request on the website or by calling
	Find a Code	Provider Services.

Search by:

- Market
- Member product
- CPT code





Precertification requirements

- Cardiac rehabilitation
- Chemotherapy
- Chiropractic services
- Diagnostic testing
- Durable medical equipment (all rentals; see Provider Manual for purchase requirements)
- Home health
- Hospital admission
- Physical therapy (PT), occupational therapy (OT) and speech therapy (ST) treatment
- Sleep studies





Precertification requirements

Behavioral health

- Electroconvulsive therapy (ECT)
- Inpatient psychiatric treatment
- Inpatient substance abuse treatment for pregnant women
- Intensive outpatient treatment
- Psychiatric residential treatment
- Partial hospital treatment
- Psychological and neuropsychological testing
- Some community mental health center services





Required Medicaid ID number

- In order to get reimbursed for Medicaid, providers are required to have an Iowa Medicaid number.
- If a potential provider does not have a Medicaid number assigned, the health plan will work with the provider and the state to complete the necessary paperwork and assist the provider with obtaining a Medicaid number.
- Forms are available on the Iowa DHS website at: dhs.iowa.gov/ime/providers/enrollment



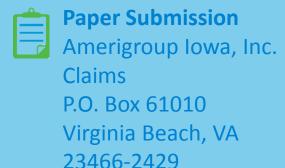
Claim submission

There are several ways to submit an Amerigroup Medicaid claim:





Electronically



Rejected vs. denied claims

Find claims status information:

- On the website at www.Availity.com
- By calling Provider Services at 1-800-454-3730

There are two types of notices you may get in response to your claim submission:

Rejected

Does not enter the adjudication system due to missing or incorrect information

Denied

Goes through the adjudication process but is denied for payment

Should you need to appeal a claim decision, please submit a copy of the explanation of payment (EOP), letter of explanation and supporting documentation.



Electronic payment services

Providers who enroll for electronic payment services:

- Receive electronic ERAs and import the information directly into their patient management or patient accounting system
- Route EFTs to the bank account of their choice
- Can use the electronic files to create their own custom reports within their office
- Access reports 24 hours a day, 7 days a week

Amerigroup uses EnrollHub™ -- the secure CAQH Solution® to enroll in electronic funds transfers (EFTs) and electronic remittance advices (ERAs). EnrollHub is available at no cost to all health care providers.

Amerigroup

Key contact information

Provider Services: 1-800-454-3730

Member Services: 1-800-600-4441

Amerigroup on Call: 1-866-864-2544

1-866-864-2545 (Spanish)

Precertification:

Phone: 1-800-454-3730

Fax: 1-800-964-3627

Pharmacy prior authorization:

Phone: 1-855-712-0104

Fax: 1-800-601-4829

Paper claims submission:

Amerigroup Iowa, Inc.

Claims

P.O. Box 61010

Virginia Beach, VA 23466-2429

Electronic claims submission:

Availity: Payer ID 26375

Emdeon: Payer ID 27514

Capario: Payer ID 28804

Smart Data Solution: Payer ID 81273

Website: providers.amerigroup.com/ia

