

### AIM Website(s) used only for Advanced Imaging Services

Function	Provider Workflow	BPR-specified Capabilities	'MET', Scheduled Date, or 'NA'	Comment
Checking Eligibility and Benefits	See Availity & Amergigroup website document for this information (Click on Medical Services in the Summary page)			
Determining whether Pre-Auth or Medical Necessity Review is required	See Availity & Amergigroup website document for this information (Click on Medical Services in the Summary page)			
Obtaining a Pre-Authorization	<u>Steps</u> <ul style="list-style-type: none"> <li>Enter required information into AIM site</li> <li>In cases of clinical questions, try to select the best answer based upon the information contained in the clinic notes.</li> <li>If auto-approved, enter the auth number into the EHR.</li> <li>If pended, note in the EHR.</li> <li>If pended, will fax supporting documentation. (However may still get a notification from AIM</li> </ul>	Provide an online form/web page for requesting pre-service review	<b>Met</b>	
		On form/web page - Allow specification of the "urgency" of the request	<b>NA</b>	Request might be auto-approved
		Identify the timeframe under which the request will be reviewed, somewhere in the process.		Some requests are auto-approved. No timeframe is given to requests that are not auto approved.
		On form/web page - Allow specification of ALL the services to be requested	<b>Met</b>	<p>Bilaterality cannot be indicated as a specific characteristic of the entered service. However, this information can be entered in 300 character notes section.</p> <p>For imaging of total spine, a pre-auth request for each component must be submitted separately in order for auto approval of all components. If all components are submitted together, the request will be pended for review.</p> <p>It is very helpful that either a CPT code or service description can be</p>

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	that clinicals are needed.)			entered.
		On form/web page - Include questions about any relevant professional restrictions (as applicable)	<b>NA</b>	
		If form/web page asks for clinical information, either offer check list selection of appropriate clinical information or allow providers to submit ALL clinical information relevant to the specific request for services, and not restrict provider from sending this relevant information		Questions are not always clear about what clinical information is required, and there is a 300 character limit on how much information can be submitted – which is not always sufficient.
		Allow for submission of form electronically or faxed with supporting documentation	<b>Met</b>	Documentation cannot be submitted electronically – and providers are told not to send documentation unless requested by review nurse. Documentation is sometimes faxed by providers, but receipt is not always acknowledged by AIM.
		Provide acknowledgement of receipt of the review request		A reference number is only provided if the request is authorized. No number is provided for requests that are not auto-authorized.
		Able to print the completed request form and/or review on-line the information submitted on the request.	<b>Met</b>	AIM provides online access to answers to clinical questions
		Perform review for ALL submitted services that are valid per the BPR, not just those requiring a pre-authorization -- including Unlisted Procedures, except for those listed on health plan website.		Only services that require a pre-auth will be reviewed by AIM. All others must be submitted by fax. Unlisted procedures need to be submitted to Amerigroup via fax or phone.
		Perform review without a provider signature on the request	<b>Met</b>	
		On web page, identify how changes are to be made to previous requests and how		

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		providers will be notified of decisions		
Checking Status of Request	<u>Steps</u> <ul style="list-style-type: none"> <li>For pended services, within 2 days of submitting the pre-auth request,,must check website and/or monitor for fax or call. Not responding to any AIM requests within two days will result in a denial (even if clinicals had previously been faxed).</li> <li>If a peer-2-peer is required, that must be obtained with two days as well.</li> <li>Any appeal of a denial must be made to Amerigroup (not AIM) with a consent form that is signed by parent or guardian.</li> </ul>	Provide status information on website per the BPR  Identify any information that is missing.		Only statuses are Pending, Approved and Denied. Other than 'under medical review', no information is provided about why a request is pended, e.g. what documentation is missing.
		Allow access to status information by the provider/organization that requested the services, the provider/organization that is doing the services and, as appropriate, the facility/organization where the services are to be done	<b>Met</b>	Can see type of exam that has been authorized.