PROVIDER**ALERT**



To: AmeriHealth Caritas Louisiana Providers

Date: November 15, 2019

Subject: Removed Authorization Requirement on CPT Code 87389

Summary: AmeriHealth Caritas Louisiana updated its system to remove the authorization requirement on CPT code 87389.

AmeriHealth Caritas Louisiana updated its system to remove the authorization requirement on the following CPT code:

CPT Code	Description
87389	Human Immunodeficiency Virus 1/O/2 (HIV-1/O/2) Antigen/Antibody (Fourth Generation) Preliminary Test with Cascade Reflex to Supplementary Testing

The system update was completed on 10/29/19.

What do you need to do?

Providers do not need to take action. Claims for dates of service on and after January 1, 2018 that denied with denial code "X01 - No Precert/Preauth/Notification/Referral" will be automatically reprocessed.

Questions:

Thank you for your continued support and commitment to the care of our members. If you have questions about this communication, please contact AmeriHealth Caritas Louisiana's Provider Services department at 1-888-922-0007 or your <u>Provider Network Management</u> <u>Account Executive.</u>

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