AmeriHealth Caritas Next North Carolina

Provider Reference Guide

www.amerihealthcaritasnext.com/nc

Provider Services

1-855-266-0219 Fax: 1-833-559-2262

Here is a partial list of the types of assistance you can expect from Provider Services:

- Eligibility checking
- · Claims status inquiry
- Electronic data interchange (EDI) technical support
- Reporting demographic data changes
- · Filing an informal complaint

AmeriHealth Caritas Next Member Services

- Member Services (toll-free)...... 1-833-613-2262 (TTY 711)
- Member Services fax1-844-201-6792

Member Services is available Monday through Friday, 8 a.m. to 6 p.m.

Interpreter Services

1-833-613-2262

24/7 Behavioral health crisis lines

- Members experiencing a mental health crisis can call or text:
 HOPE4NC: 1-855-587-3463, or text "hope" to 1-855-587-3463

Pharmacy Services (PerformRxSM)

PerformRx Pharmacy Member Services

PerformRx Member Services......1-844-211-0968

PerformRx Pharmacy Provider Services

Hours of operation: 8 a.m. to 6 p.m.

After hours, Saturdays, Sundays, and holidays, please call the 24/7 Pharmacy Member Services number at **1-844-211-0968**.

- PerformRx Provider Services......1-844-280-9131
- Formulary and forms.....www.amerihealthcaritasnext.com/nc

Bright Start® (maternity services)

1-833-643-2262 Fax: 1-844-411-0577

- · Admission notification of obstetric deliveries and neonatal intensive care
- Referrals

Rapid Response and Outreach Team

1-833-643-2262 Fax: 1-844-411-0577

Call Monday through Friday, 8 a.m. to 5 p.m., for support with care coordination and member access to services, including care management and the Let Us Know program.

Mail Health Risk Assessment forms to:

AmeriHealth Caritas Next

Rapid Response and Outreach Team

P.O. Box 7418

London, KY 40742-7418

www.amerihealthcaritasnext.com/nc

Fraud, Waste, and Abuse Hotline

1-866-833-9718

Emergency prior authorization

AmeriHealth Caritas Next does not require prior authorization for emergency services provided by network or non-network providers when a member seeks emergency care.

Physical health utilization management

1-833-702-2262 Fax: 1-844-412-7890

- Prior authorization
- Discharge planning

1-833-702-2262 Fax: 1-855-243-6352

Evolent prior authorization

1-800-424-4792 or www.radmd.com

Concurrent review

1-833-702-2262 Fax: 1-844-341-7647

Peer-to-peer

1-833-583-2262



Credentialing

1-855-266-0219

Arranging electronic claim submission and payment options

Electronic claims submission: For those interested in electronic claim filing, contact your EDI software vendor or one of the clearinghouses:

- Optum/Change Healthcare's Provider Support Line, available via online chat or by calling 1-800-527-8133, option 2, Monday through Friday, 7 a.m. to 5:30 p.m. CT.
- Availity Client Services at 1-800-AVAILITY (282-4548). Assistance is available Monday through Friday, 8 a.m. to 8 p.m. ET.

Electronic payment options

Change Healthcare partners with **ECHO Health Inc.** to offer electronic payment options. To sign up for electronic funds transfer, virtual credit card, or MedPay, contact **ECHO** at **1-888-492-5579**, **option 2**.

- Electronic claims submission (EDI)
- · Electronic funds transfer (EFT)
- Electronic remittance advice (ERA)

EDI Technical Support

1-855-266-0129

Timely claims filing

In-network:

- Original submission: no more than 180 days from date of service
- Rejected claims: no more than 180 days from date of service
- · Denied claims: 365 days from date of service
- Corrected claims: must be submitted within 365 days of the original date of service

Out-of-network:

• No more than 180 days from the date of service.

Claims submission

AmeriHealth Caritas Next electronic payer ID number: 83148

AmeriHealth Caritas Next

Attn: Provider Claims Processing

P.O. Box 7412

London, KY 40742-7412

For detailed information, reference the AmeriHealth Caritas Next Claims Filing Instructions found at https://www.amerihealthcaritasnext.com/nc/providers/claims-and-billing/claims-billing-payment.aspx.

Provider appeals (on behalf of a member)

Submit the appeal on behalf of a member.

Mail to:

AmeriHealth Caritas Next

Attn: Provider Appeal (on behalf of a member)

P.O. Box 7415

London, KY 40742-7415

Fax:1-844-211-0973

Provider complaints and appeals

Providers are encouraged to settle complaints by phone or in person with their dedicated Account Executive, or by calling Provider Services at **1-855-266-0219**.

Submit complaints or appeals by mail to:

AmeriHealth Caritas Next

Attn: Provider Complaints and Appeals

P.O. Box 7414

London, KY 40742-7414

Claims inquiry

If a provider has concerns regarding any claim issue, claims status information is available by:

- Electronic claims submission (EDI)
- Opening a claims investigation via NaviNet, https://www.navinet.net, with the claims adjustment inquiry function
- Calling Provider Services at **1-855-266-0219** and following the prompts
- · Calling your account executive for assistance

Claims disputes

Use one of the following methods to dispute a claim:

- Open a Claims Dispute via https://www.navinet.net using the Forms and Dashboards function in upper left-hand corner of the Plan Central Page.
- Complete the Provider Claim Dispute form found in the forms section of the website and send to:

AmeriHealth Caritas Next

Claim Dispute

PO Box 7412

London, KY, 40742-7412

NaviNet

1-888-482-8057 https://www.navinet.net

Log on to https://www.navinet.net for web-based solutions for electronic transactions and information.

Other important contact information

• North Carolina Department of Insurance (NCDOI)

......1-855-408-1212 (toll-free)

https://www.ncdoi.gov/

NCDOI mailing address:

NCDOI

1201 Mail Service Center Raleigh, NC 27699-1201



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