January 2025 wellcare.com/Illinois/Providers/Medicare

CONVENIENT SELF-SERVICE

Wellcare understands that having access to the right tools can help you and your staff streamline day-to-day administrative tasks. **The Provider Portal is the fastest way to get help with those routine tasks.** Keep this Guide accessible to make pre-visit planning and post-visit tasks quick and easy.

	Portal	Chat	(IVR) Interactive Voice Response
Authorization Requirements/Status	<u>Fastest Result</u>	<u>Available</u>	Available
Authorizations Request	Fastest Result	<u>Available</u>	N/A
Benefit/Copayment Information	Fastest Result	<u>Available</u>	Available
Claims/Reconsiderations/ Appeals Status	<u>Fastest Result</u>	<u>Available</u>	Available
Eligibility Verification	<u>Fastest Result</u>	<u>Available</u>	Available
Submit Appeals/Claims/ Claims Disputes/Corrections	<u>Fastest Result</u>	<u>Available</u>	N/A

HELPFUL LINKS

<u>Portal Registration</u> Portal Training Joining our Network Forms (AOR, Auth, Claims and more) **<u>Resources</u>** (Manual and Guides)

PROVIDER SERVICES PHONE (IVR): 1-855-538-0454 (TTY: 711)

OTHER PHONE NUMBERS

CARE AND DISEASE MANAGEMENT REFERRALS Phone: **1-866-635-7045** (TTY: **711**) | Fax: **1-866-287-3286** Hours: M–F, 8 a.m.–7 p.m. Eastern Standard Time

RISK MANAGEMENT FRAUD, WASTE

& ABUSE HOTLINE

1-866-685-8664

COMMUNITY CONNECTIONS HELP LINE 1-866-775-2192

BEHAVIORAL HEALTH CRISIS

24 hours a day, members should call Member Services.

NURSE ADVICE LINE 1-800-581-9952 (24 hour



NOTE: Please refer to the member ID card to determine appropriate authorization and claims submission process.

This guide is not intended to be an all-inclusive list of covered services under the Health Plan.



CLAIM SUBMISSION INFORMATION

SUBMISSION INQUIRIES

EDI team: **EDIBA@centene.com** or call Provider Services.

PREFERRED EDI CLEARINGHOUSE

Availity: **1-800-282-4548**. Web portal for direct data entry (DDE) claims: **availity.com/Essentials-Portal-Registration**.

PAYER IDs: 14163 (CH – Chargeable) 59354 (RF – Reporting only)

Visit our <u>Claims</u> page to locate detailed claims information, addresses, claim forms and guidelines.

Timely Filing guidelines: 180 days from date of service.

EFT

Register: **payspanhealth.com** or call **1-877-331-7154**. Email: **providersupport@payspanhealth.com**.



MAIL PAPER CLAIMS TO:

Wellcare Attn: Claims Department P.O. Box 31372 Tampa, FL 33631-3372

PHARMACY SERVICES

PHARMACY SERVICES

 Rx BIN
 Rx PCN

 610014
 MEDDPRIME

 610014
 MAC

Rx GRP 2FFA

2FHU (MA only)

Phone: 1-855-538-0454

MAIL ORDER

Express Scripts[®]

Phone: **1-833-750-0201** (TTY: **711**) 24 hours a day, 7 days a week

SPECIALTY PHARMACY

<u>AcariaHealth</u>™

Phone: **1-866-458-9246** (TTY: **1-855-516-5636**) Monday–Thursday, 8 a.m. to 7 p.m., Friday, 8 a.m. to 6 p.m. ET. Fax: **1-866-458-9245**



AcariaHealth™ Pharmacy #26, Inc. 8715 Henderson Rd. Tampa, FL 33634

MEDICAL ONCOLOGY SERVICES

<u>New Century Health</u>

Phone: 1-888-999-7713

Submit a **Medication Appeal Request form** with supporting documentation by fax or mail within 60 days from the date of the denial notice.

Wellcare Attn: Pharmacy Appeals Department P.O. Box 31383 Tampa, FL 33631-3383

COVERAGE DETERMINATION REQUESTS

Fax: 1-866-388-1767

Fax: 1-866-388-1766

Electronic Prior Authorization (ePA):

account.covermymeds.com

MEDICATION APPEALS

Access the **<u>Pharmacy page</u>** for Pharmacy related information and forms, including:

- Coverage Determination Request Form and exceptions
- Other Request forms such as Injectible Infusion
- Formulary
- Express Scripts Mail Order Service
- Home Infusion/Enteral Services
- and more

PRIOR AUTHORIZATION (PA)

A **<u>Pre-Auth Needed tool</u>** is available to determine if prior authorization is required. Detailed Prior Authorization list and important PA information can be found in the **<u>Prior Authorization Guide</u>**. Most current information can be found within the Pre-Auth tool.

For fastest results, submit requests **<u>online</u>** using the associated **<u>PA forms</u>**.

Medical Fax: 1-833-562-7172

Behavioral Health Fax: Outpatient 1-855-710-0160; Inpatient 1-855-710-0159

Pharmacy Medical Requests Fax: 1-888-871-0564

Urgent Authorization Requests and Admission Notifications: Call 1-855-538-0454 and follow the prompts.

Notification is required for Inpatient Hospital admissions **by the next business day** (except normal maternity delivery admissions). Phone authorizations must be followed by a fax submission of clinical information.

Wellcare does not accept handwritten, faxed or replicated claim forms. Wellcare does not accept media storage devices such as CDs, DVDs, USB storage devices or flash drives.

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