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

#### **Interpreter Services**

1-833-613-2262

#### North Carolina Behavioral Health Crisis Lines

#### Pharmacy Services (PerformRx<sup>SM</sup>)

#### PerformRx Pharmacy

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

After hours, Saturdays, Sundays, and holidays, please call the 24/7 **PerformRx General Assistance** number at **1-844-211-0968**.

- 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

Behavioral health

prior authorization	

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

# Evolent (high-tech imaging prior authorizations)

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.

#### 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 7417

London, KY 40742-7417

Fax:1-844-211-0973

#### Provider complaints and disputes

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 provider complaints and disputes by mail to:

**AmeriHealth Caritas Next** 

**Attn: Provider Complaints and Disputes** 

P.O. Box 7412

London, KY 40742-7412

#### **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

#### **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

- NCDOI mailing address: NCDOI 1201 Mail Service Center Raleigh, NC 27699-1201



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