

## IMPORTANT TELEPHONE NUMBERS

### **NURSE ADVICE LINE: 1-800-919-8807**

Members may call this number to speak to a nurse  
**24** hours a day, **7** days a week.

### **COMMUNITY CONNECTIONS HELPLINE: 1-888-860-1605**

Provides WellCare of North Carolina (WellCare) members with assistance obtaining food, rent assistance, and other resources.  
Monday through Saturday, 7 a.m. to 6 p.m.

### **BEHAVIORAL HEALTH CRISIS LINE: 1-833-207-4240**

Members may call this number **24** hours a day for a Behavioral Health Crisis. For non-crisis related concerns, please call Member Services.

### **PROVIDER SERVICES: 1-866-799-5318**

Interactive voice response system for provider inquiries, authorizations, and more.

## PROVIDER RESOURCES

Access the following resources and more on our website [WellCareNC.com](http://WellCareNC.com):

- Provider Resources
- Provider Reference Guide
- Provider Manual
- Clinical Guidelines
- Provider Newsletters
- Payment Policies
- Coding Information and Tip Sheets
- Known Issue Log

The following information is available via the website by logging into the secure portal:

- Member Eligibility
- Claims Submission
- Claims Inquiry
- Request Prior Authorization

## MEMBER SERVICES

Members can visit our website to access our Member Handbook and learn more about our programs and services. For more information regarding member benefits, please visit [WellCareNC.com](http://WellCareNC.com).

Member Services is available Monday – Saturday, 7 a.m. to 6 p.m. EST at **1-866-799-5318** (TTY: **711**) to answer questions regarding the following issues for your patients:

- Find a Doctor
- PCP Changes
- Replacement ID cards
- Benefit and Eligibility
- and more

## ADDITIONAL BENEFITS

### **Vision Services:**

#### **Envolve Vision**

Phone: **1-800-334-3937**

[visionbenefits.envolvehealth.com](http://visionbenefits.envolvehealth.com)

### **Non-Emergency Transportation Services:**

#### **MTM**

Phone: **1-877-598-7602**

[mtm-inc.net](http://mtm-inc.net)

### **MemberConnections™**

An educational outreach program designed to educate members about how to access healthcare services and benefits. The program conducts one on one education with members to ensure they understand their benefits, the role of the Medical Home (PCP) and why it's important to establish and maintain a relationship with the Medical Home. Contract Member Services if you have a patient that needs help understanding the program.

**Start Smart for Your Baby®** Is our special program designed to educate women who are pregnant.

The following for lifestyle management:

- Puff Free Pregnancy
- Tobacco Cessation
- Back Pain



## CLAIMS SERVICES

### Electronic Claims Submission:

WellCare encourages providers to file claims electronically through a clearing house partner or our secure web portal.

WellCare's preferred EDI gateway is Availity. If you need assistance in making a connection with Availity or have any questions, please contact Availity client services at **1-800-282-4548**.

To register, submit the request to [availity.com/essentials-portal-registration](https://availity.com/essentials-portal-registration).

Providers can also use their own vendor/clearinghouse to submit electronically. WellCare Payer ID 14163. Support from Provider Services: **1-866-799-5318**.

Type of Claim	Address	Comment	
<b>Initial, Resubmission or Corrected Claim</b>	WellCare Health Plans Attn: Claims Department P.O. Box 31224 Tampa, FL 33631-3224	WellCare follows the Centers for Medicare & Medicaid Services (CMS) guidelines for paper claim submissions. Since October 28, 2010, WellCare accepts only the original "red claim" form for claim and encounter submissions. <b>WellCare does not accept handwritten, faxed or replicated claim forms.</b>	
<b>Request for Reconsideration</b>	WellCare of North Carolina Attn: Reconsideration P.O. Box 4050 Farmington, MO 63640-3829	This is a written communication regarding a disagreement in the way a claim was processed but does not require a claim to be corrected.	
<b>Claim Disputes</b>	WellCare Health Plans Claim Payment Disputes P.O. Box 31370 Tampa, FL 33631-3370	This is a written communication regarding a disagreement with how a claim was processed, but it does not require the claim to be corrected.	
<b>Claim Appeals</b>	WellCare Health Plans Attn: Appeals Department P.O. Box 31368 Tampa, FL 33631-3368	Providers may seek an appeal through the Appeals Department within <b>30 calendar days</b> of a claim denial for lack of prior authorization, services exceeding the authorization, insufficient supporting documentation, or late notification. Fax: <b>1-866-201-0657</b>	
<b>Refunds/Recovery</b>	WellCare Health Plans CCU Recovery P.O. Box 31584 Tampa, FL 33631-3584	Recovery due to overpayment can be disputed within 60 days. Fax: <b>1-813-283-3284</b>	
<b>Medical Record Reviews by Optum</b>		<b>BY MAIL (U.S. POSTAL SERVICE)</b> Phone: <b>1-844-458-6739</b> Fax: <b>1-267-687-0994</b>  <b>OPTUM</b> <b>P.O. Box 52846</b> <b>Philadelphia, PA 19115</b>	<b>BY DELIVERY SERVICES (FEDEX, UPS)</b>  <b>OPTUM</b> <b>458 Pike Road</b> <b>Huntingdon Valley, PA 19006</b>

## TIMELY FILING GUIDELINES

**Initial Filing and Corrected Claims:** Within 365 days of the date of service (as of July 1, 2023)

**Reconsiderations or Claims Disputes:** Within 90 days from the date of notification of payment or denial is issued. Please see the Provider Manual or Billing Manual for more detailed information.



## PRIOR AUTHORIZATION

### All services rendered by non-participating providers and facilities require authorization.

It is the responsibility of the provider rendering care to verify that the authorization request has been approved before services are rendered.

A searchable **Authorization Lookup Tool** is available.

### URGENT AUTHORIZATION REQUESTS AND ADMISSION NOTIFICATIONS – CALL 1-866-799-5318 AND FOLLOW THE PROMPTS.

- Notification of an **Inpatient** Hospital Admission is required on the next business day following admission (except delivery admissions). For all admissions, clinical information must be submitted to initiate the inpatient authorization process. Telephone authorizations must be followed by a fax submission of clinical information.
- **Outpatient** authorizations for urgent and time-sensitive services may be submitted by phone when warranted by the member's condition. Please add CPT and ICD-10 codes with your authorization request. Standard authorization requests may be submitted online or via fax to the numbers listed on the associated forms located here.
- **Web submissions are faster**, and if the procedure requested meets clinical criteria, the Web provides an approval that can be printed for easy reference.

The following services will be covered under **Evolent**:

- **National Imaging Associates (NIA)** authorizes high tech radiology imaging services as well as physical medicine, occupational therapy and speech therapy services.  
Phone: **1-866-249-1583**  
Website: [radmd.com](http://radmd.com)
- **New Century Health (NCH)** authorizes interventional Cardiology, Radiation Oncology and Medical Oncology services.  
Phone: **1-888-999-7713**  
Website: [my.newcenturyhealth.com](http://my.newcenturyhealth.com)

The following services will be covered under **eviCore**:

- **eviCore** provides authorizations for the following programs and clinical criteria can be accessed through the corresponding program links: **Lab Management** and **Sleep Diagnostics**.  
Phone: **1-888-333-8641**  
Website: [evicore.com](http://evicore.com)

## PHARMACY SERVICES



### Express Scripts (effective 1/1/2024)

Phone: **1-866-799-5318**

Rx BIN: **003858** PCN: **MA** RxGRP: **2ESA**



### Mailing address:

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



### Specialty Drugs:

#### AcariaHealth

Phone: **1-866-458-9246** (TTY: **1-855-516-5636**)

Fax: **1-866-458-9245**

Website: [acariahealth.com](http://acariahealth.com)



### Medication Appeals:

Mail or Fax **Request for Redetermination** with supporting documentation to:

Fax: **1-888-865-6531**

WellCare Health Plans  
Attn: Medication Appeals  
P.O. Box 31398  
Tampa, FL 33631-3398