



FROM



coordinated care

AMBETTER QUICK REFERENCE GUIDE

JANUARY 2025

Convenient Self-Service

Ambetter 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	(IVR) Interactive Voice Response
Authorization Requirements/Status	<u>Fastest Result</u>	Available
Authorizations Request	<u>Fastest Result</u>	N/A
Benefit/Co-payment Information	<u>Fastest Result</u>	Available
Claims and Appeals Status	<u>Fastest Result</u>	Available
Eligibility Verification	<u>Fastest Result</u>	Available
Submit Appeals/Claims/ Claims Disputes/Corrections	<u>Fastest Result</u>	N/A

Helpful Links

Portal Registration

Forms (AOR, Auth, Claims and more)

Joining our Network

Resources (Manual and Guides)

Provider Services Phone (IVR):

1-877-687-1197 (TTY: 711)

Important Numbers

Care and Disease Management Referrals

Phone: **1-877-687-1197**

Fax: **1-855-218-0586**

Risk Management Fraud,
Waste & Abuse Hotline

1-866-685-8664

Community Connections Help Line

1-866-775-2192

Behavioral Health Crisis Line

Members should call Member Services, **24 hours** a day.

Nurse Advice Line

1-877-687-1197 (24 hours)

Health Plan Partners - Contracted Networks

Vision (Pediatric only)

Centene Vision Services

Ambetter.CoordinatedCareHealth.com

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.

Ambetter from Coordinated Care is underwritten by Coordinated Care Corporation, which is a Qualified Health Plan issuer in the Washington Health Benefit Exchange.

Claim Submission Information

Submission Inquiries

EDI team: EDIBA@centene.com
or call **1-800-225-2573 ext. 6075525**.

Preferred EDI Clearinghouse

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

Payer ID: 68069

Visit our [Provider Resources](#) page to locate claim forms and information.

Timely Filing guidelines: 180 days from date of service for participating providers. 90 days for non-participating providers.

EFT

Register: payspanhealth.com or call **1-877-331-7154**
Email: providersupport@payspanhealth.com
For more details on PaySpan, please refer to the [EFT Features Guide](#).



Mail paper claims to:
Ambetter
Attn: Claims Department
P.O. Box 5010
Farmington, MO 63640-5010

Pharmacy Services

Pharmacy Services **1-866-399-0929**

Rx BIN	Rx PCN	Rx GRP
003858	A4	2DTA

Mail Order

Express Scripts® Phone: **1-833-750-4284 (TTY: 711)**
24 hours a day, 7 days a week

Preferred Specialty Pharmacy

AcariaHealth™ Phone: **1-800-511-5144 (711)**
Fax: **1-877-541-1503**

Monday–Thursday, 8 a.m. to 7 p.m.,
Friday, 8 a.m. to 6 p.m. ET.

Medical Oncology Services

Evolent Phone: **1-888-999-7713**



Ambetter
Attn: Pharmacy Appeals
P.O. Box 10341
Van Nuys, CA 91410

Coverage Determination Requests

Electronic Prior Authorization (ePA)

[Account.CoverMyMeds.com](https://www.accountcovermy meds.com)

Access the [Drug Coverage page](#) for the Formulary information and Pharmacy forms.

Appeals/Reconsiderations and Grievances

Mail grievances to:
Ambetter
Attn: Grievances Department
P.O. Box 10341
Van Nuys, CA 91410

Mail appeals to:
Ambetter from Coordinated Care
Attn: Appeals Department
1145 Broadway, Suite 700
Tacoma, WA 98402

Email:
ambetter_centralized_Grievances_Appeals@CENTENE.com

Appeals Fax: **1-855-218-0589**
Grievances Fax: **1-833-886-7956**

Prior Authorization (PA)

A **Pre-Auth Needed tool** is available to determine if prior authorization is required. Detailed Prior Authorization list and important PA information can be found in the [Prior Authorization Guide](#). Most current information can be found within the Pre-Auth tool.

For fastest results, submit requests **online** using the associated **PA forms**.

Medical and Behavioral Health Fax:

Outpatient **1-855-218-0592**; Inpatient **1-855-218-0587**

Pharmacy Medical Requests Fax: 1-800-977-4170

Urgent Authorization Requests and Admission

Notifications: Call **1-877-687-1197** 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.

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