



FROM



# 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	<b><u>Fastest Result</u></b>	Available
Authorizations Request	<b><u>Fastest Result</u></b>	N/A
Benefit/Co-payment Information	<b><u>Fastest Result</u></b>	Available
Claims and Appeals Status	<b><u>Fastest Result</u></b>	Available
Eligibility Verification	<b><u>Fastest Result</u></b>	Available
Submit Appeals/Claims/ Claims Disputes/Corrections	<b><u>Fastest Result</u></b>	N/A

### Helpful Links

#### **Portal Registration**

**Forms** (AOR, Auth, Claims and more)

#### **Joining our Network**

**Resources** (Manual and Guides)

Provider Services Phone (IVR):

**1-833-705-2175 (TTY: 711)**

### Important Numbers

#### Care and Disease Management Referrals

Phone: **1-833-705-2175**

Fax: **1-833-959-3828**

#### 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

**1-833-705-2175 (24 hours)**

### Health Plan Partners - Contracted Networks

Vision

**Centene Vision Services**

Dental

**Centene Dental Services**

**[Ambetter.WellCareKy.com](http://Ambetter.WellCareKy.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 WellCare of Kentucky is underwritten by WellCare Health Plans of Kentucky, Inc., which is a Qualified Health Plan issuer in the Kentucky Health Insurance Marketplace.

## Claim Submission Information

### Submission Inquiries

EDI team: [EDIBA@centene.com](mailto: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-par providers.

### EFT

Register: [payspanhealth.com](https://payspanhealth.com) or call **1-877-331-7154**  
Email: [providersupport@payspanhealth.com](mailto: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	2CZA

### Mail Order

**Express Scripts®** Phone: **1-833-750-2422 (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.account.covermy meds.com)

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

## Appeals/Reconsiderations and Grievances



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

Email:

[ambetter\\_centralized\\_Grievances\\_Appeals@CENTENE.com](mailto:ambetter_centralized_Grievances_Appeals@CENTENE.com)

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 Fax: **1-833-959-3828**

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

**Urgent Authorization Requests and Admission Notifications:**

Call **1-833-705-2175** 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.**