

# WellKids by PA Health & Wellness Quick Reference Guide

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PAWellKids.com



## CONVENIENT SELF-SERVICE

WellKids by PA Health & Wellness 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. Using a secure Provider portal is the fastest way. Log on to our Secure Provider Web Portal at [provider.pahealthwellness.com](http://provider.pahealthwellness.com) or Availity Essentials at [www.availity.com](http://www.availity.com).

	Secure Portal	(IVR) Interactive Voice Response
Authorization Requirements/Status	<a href="#">PHW Portal or Availity</a>	Available
Authorizations Request	<a href="#">PHW Portal or Availity</a>	N/A
Benefit/Copayment Information	<a href="#">PHW Portal or Availity</a>	Available
Eligibility Verification	<a href="#">PHW Portal or Availity</a>	Available
Submit Appeals/Claims/ Claims Reconsideration/Corrections	<a href="#">PHW Portal or Availity</a>	N/A

## HELPFUL LINKS

[PHW Portal Registration](#)

[Forms](#)

(AOR, Auth, Claims and more)

[Joining our Network](#)

[Resources](#)

(Manual and Guides)

[Availity Registration](#)

[Interpreter Request Form](#)

[www.chipcoverspakids.com](http://www.chipcoverspakids.com)

## IMPORTANT PHONE NUMBERS

**PROVIDER SERVICES PHONE (IVR)**  
1-855-445-1920 (TTY:711)

**CHILDLINE CHILD ABUSE HOTLINE**  
1-800-932-0313

**FRAUD, WASTE & ABUSE HOTLINE**  
1-866-685-8664

**NURSE ADVICE LINE (24 HOURS)**  
1-855-445-1920 (TTY: 711)

**INTERPRETER SERVICES**  
1-855-445-1920 (TTY:711)

**PENNSYLVANIA CHIP CUSTOMER SERVICE**  
1-866-550-4355

## HEALTH PLAN PARTNERS

### Contracted Networks

**VISION**

Phone: **1-844-788-4071**

**DENTAL**

Phone: **1-844-524-8255**

**PHARMACY**

Phone: **1-833-750-9898**

**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 email: [EDIBA@centene.com](mailto:EDIBA@centene.com)

Phone: **1-800-225-2573, Ext. 25525**

### PAYER ID: 68069

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

**Timely Filing guidelines:** 180 days from date of service.

### EFT

Register: [payspanhealth.com](http://payspanhealth.com) or call **1-877-331-7154**.

Email: [providersupport@payspanhealth.com](mailto:providersupport@payspanhealth.com).



### MAIL PAPER CLAIMS TO:

**WellKids by PA Health & Wellness**

**Attn: Claims Department**

**P. O. Box 5070**

**Farmington, MO 63640**

**WellKids by PA Health & Wellness does not accept handwritten, faxed or replicated claim forms. WellKids by PA Health & Wellness does not accept media storage devices such as CDs, DVDs, USB storage devices or flash drives.**

## PHARMACY SERVICES

### Rx BIN

003858

### Rx PCN

MACP

### Rx GRP

2FBA

Phone: **1-833-750-9898**

[pahealthwellness.com/providers/pharmacy.html](http://pahealthwellness.com/providers/pharmacy.html)

## PRIOR AUTHORIZATION (PA) LIST

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**.

**Inpatient Fax: 1-844-307-0997**

**Outpatient Fax: 1-844-307-0997**

**Behavioral Health Fax: 1-844-412-2269**

**Pharmacy Prior Authorizations: <https://www.covermymeds.health/prior-authorization-forms>**

**Urgent Authorization Requests and Admission Notifications: 1-855-445-1920 (TTY 711)**

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.

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

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## Bright Futures

Bright Futures is based on the recommendations of the American Academy of Pediatrics (AAP), American Dental Association (ADA) and the American Academy of Pediatric Dentistry (AAPD). All PCPs who provide services to members under age 19 are encouraged to provide comprehensive health care, screening, and preventive services. Network PCPs are required to provide all Bright Futures services in compliance with federal and state regulations and periodicity schedules. You can find the most recent periodicity guidelines at [AAP.GOV](http://AAP.GOV).

If you need assistance or are unsure who your Provider Representative is, email [phwproviderrelations@pahealthwellness.com](mailto:phwproviderrelations@pahealthwellness.com).