

Pennsylvania Medicare Quick Reference Guide

January 2025

wellcare.pahealthwellness.com



CONVENIENT SELF-SERVICE

Wellcare By Allwell 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/Copayment Information	<u>Fastest Result</u>	Available
Claims/Reconsiderations/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](#)

[Joining our Network](#)

[Forms](#)
(AOR, Auth, Claims and more)

[Resources](#)
(Manual and Guides)

PROVIDER SERVICES PHONE (IVR): HMO/PPO: 1-800-977-7522 (TTY: 711) | HMO SNP: 1-844-796-6811 (TTY: 711)

OTHER PHONE NUMBERS

CARE AND DISEASE MANAGEMENT REFERRALS

Fax: **1-844-259-4568**

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

COMMUNITY CONNECTIONS HELP LINE
1-866-775-2192

BEHAVIORAL HEALTH CRISIS

24 hours a day, members should call Member Services.

NURSE ADVICE LINE (24 hours)
HMO/PPO: 1-800-977-7522 (TTY: 711)
HMO SNP: 1-844-796-6811 (TTY: 711)

HEALTH PLAN PARTNERS

Contracted Networks

HEARING

HCS

Phone: **1-866-344-7756**

VISION

Premier

Phone: **1-866-419-2382**

DENTAL

DentaQuest

Phone: **1-833-206-6298**

TRANSPORTATION

ModivCare

Phone: **1-877-718-4201**

SKILLED HOME HEALTH

tango

Phone: **1-888-224-1409**

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

Phone: **1-800-225-2573, Ext. 6075525**

PREFERRED EDI CLEARINGHOUSE

Availity: **1-800-282-4548**.

Web portal for direct data entry (DDE) claims:

availability.com/Essentials-Portal-Registration.

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 or call **1-877-331-7154**.

Email: providersupport@payspanhealth.com.



MAIL PAPER CLAIMS TO:

Wellcare By Allwell

Attn: Claims Department

P.O. Box 3060

Farmington, MO 63640-3822

SKILLED HOME HEALTH CLAIM SUBMISSION

SUBMISSION INQUIRIES

Phone: **1-888-224-1409**.

ACCEPTED EDI CLEARINGHOUSES

- Ability
- Experian
- Transunion
- Availity
- Smart Data Solutions
- Waystar
- eSolutions
- Quadax

PAYER ID: 26748

Please submit an **837I formatted** claim.

Timely Filing guidelines: 90 days from date of service for non-PAR providers. Per contract for PAR providers.

EFT

Form: tangocare.com/providers/provider-materials/

Required documents: 1) **W-9** and 2) **Voided Check**

Email: credentialing@tangocare.com



MAIL PAPER CLAIMS TO:

tango claims

7600 North 16th Street

Suite 140

Phoenix, Arizona 85020

PHARMACY SERVICES

PHARMACY SERVICES

Phone: **1-800-867-6564**

Rx BIN

610014

610014

Rx PCN

MEDDPRIME

MAC

Rx GRP

2FFA

2FHU (MA only)

SPECIALTY PHARMACY

AcariaHealth™

Phone: **1-855-535-1815** (TTY: **1-855-516-5636**)

Monday–Thursday, 8 a.m. to 7 p.m.,

Friday, 8 a.m. to 6 p.m. ET.

MEDICATION APPEALS

Fax: **1-866-388-1766**

Submit a **Medication Appeal Request form** with supporting documentation by fax or mail within 60 days from the date of the denial notice.



Wellcare By Allwell

Attn: Pharmacy Appeals Department

P.O. Box 31383

Tampa, FL 33631-3383

MAIL ORDER

Express Scripts®

Phone: **1-833-750-0201** (TTY: **711**)

24 hours a day, 7 days a week

MEDICAL ONCOLOGY SERVICES

Evolent

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

COVERAGE DETERMINATION REQUESTS

Fax: **1-866-226-1093**

Electronic Prior Authorization (ePA):

account.covermymeds.com

Access the **Pharmacy Benefits** tab for Pharmacy related information, including:

- **Coverage Determination Request Form** and exceptions
- **Prior Authorization Information**
- **Pharmacy Forms**
- **Formulary**
- Express Scripts **Mail Order Service**
- Home Infusion/Enteral Services
- and more

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**.

Medical Fax: 1-877-808-9362

Behavioral Health Fax: 1-877-725-7751

Pharmacy Prior Authorizations Fax: 1-866-226-1093

Home Health Authorizations: Please refer to **tango's provider page**.

Post Acute Facility Authorizations (SNF, IRF, LTACH): Please refer to **WellSky's provider page**.

Urgent Authorization Requests and Admission Notifications: HMO/PPO: 1-800-977-7522 | HMO SNP: 1-844-796-6811

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.