

Provider Quick Reference Guide

Provider Network Account Executive: _____ Fax number: _____

Phone number: _____ AmeriHealth Caritas District of Columbia (DC) provider ID number: _____

www.amerihealthcaritasdc.com

Provider services **202-408-2237 or 1-888-656-2383**
Fax: 202-408-1277

For assistance with:

- Eligibility checking
- Claims status inquiry
- Electronic data exchange (EDI) technical support
- Reporting demographic data changes
- Filing an informal complaint

NaviNet **1-888-482-8057**
navinet.navimedix.com

Member Services

- Member Services — Medicaid202-408-4720
- Member Services — Alliance202-842-2810
- TTY/TDD1-800-570-1190

Member Services is available 24 hours a day, 7 days a week.

Interpretation services for members

AmeriHealth Caritas DC will provide members oral interpretation services if they need them, including at the hospital. For Medicaid members, please call Member Services at **202-408-4720** or toll free at **1-800-408-7511** to get interpretation services. For Alliance members, please call Member Services at **202-842-2810** or toll free at **1-866-842-2810** to get interpretation services. Members should call us before their provider appointments if they need interpretation services. Interpreter services are usually provided over the telephone. If a member needs an interpreter to be with him or her at his or her provider appointment, he or she must let us know two business days before the appointment.

Translation services for members

If members get information from AmeriHealth Caritas DC and need it translated into another language, they can call Member Services toll free:

- Member Services — Medicaid.....1-800-408-7511
- Member Services — Alliance1-866-842-2810

Behavioral Health Provider Services (PerformCare) **1-866-506-6590**

- D.C. Department of Mental Health Crisis Line1-888-793-4357

The Mental Health Crisis Line is available 24 hours, 7 days a week.

Bright Start® (maternity services) **1-877-759-6883**
Fax: 1-888-603-5526

Care coordination or Rapid Response and Outreach Team **1-877-759-6224**
Fax: 1-888-607-6405

Care coordination is available from 8 a.m. to 5:30 p.m., Monday – Friday, for support with care coordination and member access to services, including HealthCheck/Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and IDEA services.

Member Intervention Request Form available at
www.amerihealthcaritasdc.com/provider

Credentialing **1-877-759-6186**
Fax: 215-863-6369

Dental and vision **1-800-341-8478**

- Member Services — Medicaid202-408-4720
- Member Services — Alliance202-842-2810
- Dental Provider Services1-855-609-5170
or **providerportal@sciondental.com**
- Vision Provider Services 1-855-704-0437

Emergency room (ER) policy

AmeriHealth Caritas DC does not require prior authorization for emergency services provided by in-network or out-of-network providers when a Medicaid member seeks emergency care. District hospitals providing Medicaid-reimbursable emergency medical services to Alliance beneficiaries must submit those claims directly to the Department of Health Care Finance for reimbursement based on the primary diagnosis. You can find the list of these diagnosis codes on the D.C. Medicaid web portal, at **www.dc-medicaid.com**.

Fraud and abuse hotline **1-866-833-9718**

24/7 Nurse Call Line **1-877-759-6279**

Utilization management peer to peer **1-877-759-6274**

Behavioral health peer to peer **1-877-464-2911**

Pharmacy services (PerformRx)

- Pharmacy member services — Medicaid.....1-888-452-3647
- Pharmacy member services — Alliance1-888-987-5806
- Pharmacy TTY/TDD1-888-989-0073
- Pharmacy provider services — Medicaid1-888-602-3741
- Pharmacy provider services — Alliance1-888-987-5821
- Formulary and formswww.amerihealthcaritasdc.com

Lab services (LabCorp) **1-888-LABCORP**

Provider Quick Reference Guide

Transportation services — Medicaid only

- Reservation and ride status1-800-315-3485

Claims submission

AmeriHealth Caritas DC electronic payer ID number: 77002

AmeriHealth Caritas District of Columbia — Medicaid
 Attn: Claims Processing Department
 P.O. Box 7342
 London, KY 40742

AmeriHealth Caritas District of Columbia — Alliance
 Attn: Claims Processing Department
 P.O. Box 7354
 London, KY 40742

Remember to:

- Mark claims “resubmitted” or “corrected” as appropriate
- Match the dates and dollars on claims submitted with explanation of benefits (EOB) from another payer

Arranging electronic services (EDI, EFT, and ERA)

Contact your practice management or EDI vendor to arrange for electronic claims or remittance transmissions. Or contact Emdeon at the information below to arrange:

- Electronic claims submission (EDI)1-866-924-4634
- Electronic funds transfer (EFT)1-866-506-2830
- Electronic remittance advice (ERA)1-877-469-3263
- EDI Technical Support Unit1-888-656-2383

Utilization management

202-408-4823 or 1-800-408-7510
Fax: 202-408-1031 or 1-877-759-6216

Fax numbers:

- Prior authorization202-408-1031 or 1-877-759-6216
- Admission notification and concurrent review (excludes OB deliveries) 1-855-327-5440
- Admission notification (OB deliveries) and ONAF forms1-888-603-5526
- Discharge notification and discharge planning (includes discharge summary or instructions) 1-855-355-0700

Referrals to specialists

As of January 1, 2017, notification to AmeriHealth Caritas DC is not required when a primary care provider (PCP) refers a member to a participating specialist. Claims payment will no longer be tied to the presence of a referral; however, when submitting a claim for payment, the referring provider’s information must be included in the appropriate boxes of the CMS 1500 form as required by CMS.

Although specialty physician services will not require a referral form, AmeriHealth Caritas DC expects that primary care and specialty care providers will continue to follow and engage in a coordination of care process, in accordance with applicable laws and standards of care, which includes communication and sharing of information regarding findings and proposed treatments.

Provider appeals

1-877-759-6254

Written request for the reversal of a medical denial:
 AmeriHealth Caritas District of Columbia
 Attn: Provider Appeals Department
 P.O. Box 7359
 London, KY 40742

Claim disputes

Claim disputes must be submitted in writing within 60 days from the date of the denial or payment to:
 AmeriHealth Caritas District of Columbia
 Attn: Claim Disputes
 P.O. Box 7358
 London, KY 40742

Other important contact information

- D.C. Department of Health Care Financewww.dhcf.dc.gov
- HealthCheck/EPSDTwww.dchealthcheck.net
- D.C. Department of Mental Healthwww.dmh.dc.gov
- Addiction, Prevention, and Recovery Administration (APRA)www.doh.dc.gov/apra

Other direct access services (no referral required)

- Emergencies
 - Immunizations
 - Prenatal obstetrician (OB) visits
 - Routine obstetrician (OB)/gynecologist (GYN) visits and women’s preventive health care services
 - Routine family-planning services
 - Services for sexually transmitted diseases (STDs)
 - Routine dental services
- Additionally, AmeriHealth Caritas DC Medicaid members have direct access to:**
- Routine vision services
 - Initial 10 sessions of outpatient behavioral health counseling and therapy (individual, family, and group)

Services requiring prior authorization

The following services require prior authorization review for medical necessity and place of service:

- Elective or non-emergent air ambulance transportation
- All out-of-network services, except emergency services for AmeriHealth Caritas DC Medicaid members
Note: All out-of-network services are excluded from coverage for AmeriHealth Caritas DC Alliance members
- Inpatient services
- All inpatient hospital admissions, including medical, surgical, and rehabilitation
- Obstetrical admissions and newborn delivery care that exceeds 48 hours after vaginal delivery and 96 hours after cesarean section. Delivery admissions are excluded from coverage for AmeriHealth Caritas DC Alliance members.
- Elective transfers for inpatient and/or outpatient services between acute care facilities
- Long-term acute care
- Long-term care (for up to 30 consecutive days)
- Home-based services:
 - Home health care after six visits per calendar year for therapies or skilled nurse visits
 - Home health aide from start of service
 - Personal care services provided by qualified individuals (not family members) in the home when deemed medically necessary. Personal care services are excluded from coverage for AmeriHealth Caritas DC Alliance members.
 - Private-duty nursing services
 - Enteral feedings, including related durable medical equipment (DME)
- Therapy and related outpatient services:
 - Speech therapy, occupational therapy, and physical therapy, after 12 visits for each modality
 - Cardiac and pulmonary rehabilitation, from first visit
- Transplant surgery — organ, stem cell, and tissue — must be approved by D.C. Medicaid fee-for-service (FFS). Transplants are excluded from coverage for AmeriHealth Caritas DC Alliance members.
- All DME rentals in excess of \$750/month
- DME purchases for billed charges \$750 and over, including prosthetics and orthotics
- Repairs for purchased DME items and equipment
- Hearing services and devices that exceed \$750 purchase price, including hearing aids, FM systems, and cochlear implants and devices. Hearing services and devices are excluded from coverage for AmeriHealth Caritas DC Alliance members ages 21 years and older.

- Diapers and pull-up diapers for ages 3 years and older:
 - 200 or more per month, for either or both
 - Brand-specific diapers
- Hyperbaric oxygen
- Gastric restrictive procedures or surgeries
- 17-P and Makena® infusion for pregnancy-related complications
- Gastroenterology services (codes 91110 and 91111 only)
- Surgical services that may be considered cosmetic, such as:
 - Blepharoplasty
 - Mastectomy for gynecomastia
 - Mastopexy
 - Maxillofacial surgery
 - Panniculectomy
 - Penile prosthesis
 - Plastic surgery or cosmetic dermatology
 - Reduction mammoplasty
 - Septoplasty
- Inpatient hysterectomy
- Elective terminations of pregnancy
- Pain management — external infusion pumps, spinal cord neurostimulators, implantable infusion pumps, radiofrequency ablation, and nerve blocks
- Select radiological exams as outlined below. This excludes radiological studies that occur during inpatient, emergency room, and/or observation stays.
 - Positron emission tomography (PET) scans
 - Magnetic resonance imaging (MRI) and magnetic resonance angiography (MRA)
 - Nuclear cardiology diagnostic testing
 - Computed axial tomography (CT/CAT) scans and CT angiography
- All miscellaneous unspecified codes
- All services that may be considered experimental or investigational
- All services not listed on the D.C. Medicaid fee schedule
- Behavioral health care:
 - Mental Health Partial Hospitalization Program
 - Inpatient detoxification admissions
 - Mental health inpatient admissions
 - Neuropsychological testing
 - Psychological testing
 - Developmental testing
 - Behavioral health day treatment
 - Residential treatment
 - Electroconvulsive therapy