

# AmeriHealth Caritas Next in Ohio Provider Reference Guide

[www.amerhealthcaritasnext.com/oh](http://www.amerhealthcaritasnext.com/oh)

**Provider Services** Phone: 1-855-336-3077  
Fax: 1-833-329-8225

Provider Services is available Monday through Friday, 8 a.m. – 6 p.m. ET

Here is a partial list of the types of assistance you can expect from Provider Services:

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

Provider Correspondence mailing address:

**AmeriHealth Caritas Next**  
**Attn: Provider Correspondence**  
P.O. Box 7448  
London, KY 40742-7448

## AmeriHealth Caritas Next Member Services

- Member Services..... 1-850-350-2177
- Member Services fax .....1-844-329-2252

Member Services is available Monday through Friday, 8 a.m. – 6 p.m. ET

**Interpreter Services** 1-844-350-2177

## Ohio Behavioral Health Crisis Line

- Statewide 24/7 Crisis Response.....1-800-720-9616
- 988 Suicide & Crisis Lifeline.....988

## AmeriHealth Caritas Next Pharmacy Services

### Pharmacy

Hours of operation: Monday to Friday, 8 a.m. to 6 p.m. ET

After hours, Saturdays, Sundays, and holidays, please call the 24/7

**Pharmacy General Assistance** number at 1-844-222-6439

- Pharmacy Clinical Prior Authorization.....1-844-614-1222
- Pharmacy prior authorization fax..... 1-833-977-7547
- Formulary and forms.....[www.amerhealthcaritasnext.com/oh](http://www.amerhealthcaritasnext.com/oh)

**Bright Start® (maternity services)** Phone: 1-844-977-6439  
Fax: 1-833-728-7329

- Admission notification of obstetric deliveries and neonatal intensive care
- Referrals

**Rapid Response and Outreach Team** Phone: 1-844-977-6439  
Fax: 1-833-728-7329

Call Monday – Thursday, 8 a.m. – 7 p.m., and Friday, 8 a.m. – 5 p.m. ET, for support with care coordination and member access to services, including care management and the Let Us Know program.

Mail Health Risk Assessment forms to:

**AmeriHealth Caritas Next**  
**Attn: Rapid Response Outreach Team**  
P.O. Box 7418  
London, KY 40742-7418

[www.amerhealthcaritasnext.com/oh](http://www.amerhealthcaritasnext.com/oh)

**Fraud, Waste, and Abuse Hotline** 1-866-833-9718

## Emergency prior authorization

AmeriHealth Caritas Next does not require prior authorization for emergency services provided by network or non-network providers when a member seeks emergency care.

**Physical health utilization management** Phone: 1-844-486-7701  
Fax: 1-844-314-0362

- Prior authorization
- Discharge planning

**Organ transplant evaluation notification/prior authorization** 1-833-983-7229  
Fax: 1-844-796-1177

**Behavioral health prior authorization** Phone: 1-844-486-7701  
Fax: 1-844-341-7620

**Evolut (high-tech imaging prior authorizations)** 1-800-327-1193 or  
[www.radmd.com](http://www.radmd.com)

**Concurrent review** Phone: 1-844-486-7701  
Fax: 1-844-249-9840

**Peer-to-peer** 1-833-727-6401



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## AmeriHealth Caritas Next Provider Reference Guide

### Credentialing

1-855-336-3077

### Arranging electronic claim submission and payment options

**Electronic claims submission:** For those interested in electronic claim filing, contact your EDI software vendor or one of the clearinghouses:

- **Optum/Change Healthcare's Provider Support Line**, available via online chat or by calling **1-800-527-8133, option 2**, Monday through Friday, 7 a.m. to 5:30 p.m. CT.
- **Availity Client Services at 1-800-AVAILITY (282-4548)**. Assistance is available Monday through Friday, 8 a.m. to 8 p.m. ET.

#### Electronic payment options

Change Healthcare partners with **ECHO Health, Inc.** to offer electronic payment options. To sign up for electronic funds transfer, virtual credit card, or MedPay, contact **ECHO** at **1-888-834-3511**.

- Electronic funds transfer (EFT)
- Electronic remittance advice (ERA)

### EDI Technical Support

1-855-336-3077

### Timely claims filing

#### In-network:

- Original submission: no more than 180 days from date of service
- Rejected claims: no more than 180 days from date of service
- Denied claims: 365 days from date of service
- Corrected claims: must be submitted within 365 days from date of service

#### Out-of-network:

- No more than 180 days from the date of service.

### Claims submission

AmeriHealth Caritas Next electronic payer ID number: **24353**

For paper claims submission, mail to:

**AmeriHealth Caritas Next**

**Attn: Provider Claims Processing**

P.O. Box 7448

London, KY 40742-7448

For detailed information, reference the AmeriHealth Caritas Next Claims and Billing Manual found at [www.amerhealthcaritasnext.com/oh](http://www.amerhealthcaritasnext.com/oh).

### Provider appeals (on behalf of a member)

Submit the appeal on behalf of a member.

Mail to:

**AmeriHealth Caritas Next**

**Attn: Provider Appeal (on behalf of a member)**

P.O. Box 7449

London, KY 40742-7449

Fax: **1-866-620-8844**

### Provider disputes and Provider refunds

Providers are encouraged to settle disputes by phone or in person with their dedicated Account Executive, by opening a dispute in NaviNet, or by calling Provider Services at **1-855-336-3077**.

Submit provider disputes by mail to:

**AmeriHealth Caritas Next**

**Attn: Provider Disputes OR Provider Refunds**

P.O. Box 7448

London, KY 40742-7448

### Claims inquiry

If a provider has concerns regarding any claim issue, claims status information is available by:

- Visiting the NaviNet provider website, our secure provider portal at [www.navinet.net](http://www.navinet.net), for web-based solutions for electronic transactions and information
- Opening a claims investigation via NaviNet by selecting the Investigate function within Claim Status Inquiry
- Calling Provider Services at **1-855-336-3077** and following the prompts
- Calling your Account Executive for assistance

### NaviNet

1-888-482-8057

<https://www.navinet.net>

Log on to <https://www.navinet.net> for web-based solutions for electronic transactions and information.

### Other important contact information

- Ohio Department of Insurance.....**1-800-686-1526** (toll-free)  
<https://insurance.ohio.gov/>
- **Ohio Department of Insurance**  
350 W. Town Street  
Suite 300  
Columbus, OH 43215



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