

### Important Telephone

<b>Provider Services</b> Eligibility Verification, Claims, Utilization Management, Provider Complaints, Language Line and Dental Services				<b>Risk Management</b> WellCare's Fraud, Waste and Abuse Hotline <b>1-866-678-8355</b> Florida Medicaid Program Integrity Hotline <b>1-888-419-3456</b>	
<b>Staywell</b>		<b>1-866-334-7927</b>		<b>Nurse Advice Line</b> <b>1-800-919-8807</b>	
<b>Staywell Kids</b>		<b>1-866-698-5437</b>		Members may call this number to speak to a nurse 24 hours a day, 7 days a week.	
<b>Care and Disease Management Referrals</b>				<b>Crisis Hotline</b> <b>1-855-606-3622</b>	
<b>Non-MMA Members</b>		<b>1-866-635-7045</b>		<b>TTY</b> <b>711</b>	
TTY 711		Fax <b>1-866-287-3286</b>			
Hours		M-F 8-6 p.m. Central			
<b>MMA Members</b>		<b>1-888-421-7690</b>		<b>Provider Resource Guide</b>	
<b>Long Term Care Members</b>		<b>1-888-351-8732</b>			

### Claim Submission Inquiries

**Submission Inquiries:** Support from Provider Services: Questions related to claim submissions **Staywell 1-866-334-7927** or **Staywell Kids 1-866-698-5437**

For inquiries related to your electronic submissions to WellCare, please contact our EDI team at [EDI-Master@wellcare.com](mailto:EDI-Master@wellcare.com).

**Electronic Funds Transfer & Electronic Remittance Advice:**

Register online using the simplified, enhanced provider registration process: [PaySpan.com](http://PaySpan.com) or call **1-877-331-7154**. For more details on PaySpan®, please refer to your [Provider Manual](#).

**Clearinghouse Connectivity**

WellCare has partnered with Change HealthCare, formerly known as RelayHealth, as our preferred EDI Clearinghouse. You may connect directly with Change HealthCare or in some cases, your existing clearinghouse, billing service or trading partner may maintain existing reciprocal agreements with Change HealthCare. We encourage you to contact your claims vendor and determine if they have connectivity to Change HealthCare. If not, you may want to consider contacting Change HealthCare to establish free connectivity to WellCare for your EDI transactions.

Change Healthcare offers Submitter/client Connectivity Services at **1-877-411-7271**. All Clearinghouses, Practice Management Vendors, or Billing Services may call Change HealthCare, formerly known as Relay Health at **1-800-527-8133** for connectivity services.

**Connect Center™ for physicians** offers a web browser for direct data entry (DDE) and the upload ability to submit electronic submissions **at no cost to you**. To sign up go to: <https://connect.relayhealth.com>. For registry questions, submitter/clients may contact Provider Connectivity Services at **1-877-411-7271**. Any questions regarding functionality of ConnectCenter should be directed to the Clearinghouse at **1-800-527-8133, opt 2**.

- Providers will be required to enter a credit card upon initial enrollment to verify them as a valid submitter.
- Only WellCare submissions are free of charge, and please ensure you use vendor code 212750 when you register.

**CHANGE HEALTHCARE CLEARINGHOUSE PAYER IDS (CPIDS)**

Claim Type	Fee-for-Service	Encounter
Professional	1844	3211
Institutional	8551	4949

**WELLCARE PAYER IDs** – If your clearinghouse or billing system is not connected to Change HealthCare and requires a 5-digit Payer ID, please use the following according to the file type (Fee-for-Service or Encounters):

Claim Type	FFS	Encounter
Professional or Institutional	14163	59354

**Paper Submission Guidelines:**

WellCare follows the Centers for Medicare & Medicaid Services (CMS) guidelines for paper claims submissions. Since Oct. 28, 2010, WellCare accepts only the original "red claim" form for claim and encounter submissions. WellCare does not accept handwritten, faxed or replicated forms.

Claim forms and guidelines may be found on our website at: [www.wellcare.com/Florida/Providers/Medicaid/Claims](http://www.wellcare.com/Florida/Providers/Medicaid/Claims)

Mail paper claim submissions to:

**WellCare Health Plans, Inc.**  
**Attn: Claims Department**  
**P.O. Box 31372**  
**Tampa, FL 33631-3372**

**LONG TERM CARE HOME HEALTH SERVICES**

The HHAX online provider portal allows long term care home health providers and direct service workers (DSWs) to submit electronic claim submissions as well as accept and review authorizations. The website can be accessed at: <https://hhaexchange.com/>.

**Long Term Care Claim Submissions Choices:**

1. **Recommended:** Submit electronic submissions through the HHAX online provider portal (will be required by these providers beginning 10/1/2019)
2. Paper claim address shown above is optional until 10/1/2019.

**Long Term Care Electronic Funds Transfer & Electronic Remittance Advice:**

1. PaySpan registration for electronic funds transfer and electronic remittance shown above is optional until 10/1/2019.

### Claim Payment Disputes

The Claim Payment Dispute process is designed to address claim denials for issues related to untimely filing, incidental procedures, unlisted procedure codes, non-covered codes, etc. Claim payment disputes must be submitted in writing to WellCare within one year of the date on the EOP. Mail or fax all claim payment disputes with supporting documentation to:

**WellCare Health Plans, Inc.** Fax **1-877-277-1808**  
**Attn: Claim Payment Disputes**  
**P.O. Box 31370**  
**Tampa, FL 33631-3370**

*Note: Any appeals related to a claim denial for lack of prior authorization, services exceeding the authorization, insufficient supporting documentation or late notification must be sent to the Appeals (Medical) address in the section below. Examples include Explanation of Payment Codes DN001, DN004, DN0038, DN039, VSTEX, DMNNE, HRM16, and KYREC; however, this is not an all-encompassing list of Appeals codes. Anything else related to authorization or medical necessity that is in question should be sent to the Appeals P.O. Box with all substantiating information like a summary of the appeal, relevant medical records and member-specific information.*

For your convenience, language on this QRG in **bold, underlined** fonts are hyperlinks to supporting WellCare Provider Job Aids, Resource Guides and Forms when the Quick Reference Guide is viewed in an electronic format. NOTE: This guide is not intended to be an all-inclusive list of covered services under WellCare Health Plans, Inc., but it substantially provides current referral and prior authorization instructions. Authorization does not guarantee claims payment. All services/procedures are subject to benefit coverage, limitations and exclusions as described in the applicable plan coverage guidelines. (Revised June 2018)