

## **Quick Reference Guide for Providers**

## The VillageCareMAX Provider Portal

As a reminder, the VillageCareMAX Provider Portal is a quick, convenient and secure way to verify member eligibility, review claim status, verify authorization status, and much more. The portal is available 24 hours a day, 7 days a week and can be accessed by visiting https://vcm.guidingcare.com/AuthorizationPortal.

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Department	Contact Information	Hours of Operation	Information	
Member Enrollment & Eligibility Verifications	EMEDNY toll-free: 1-800-997-1111  Member Services Fax: 212-337-5711*  * Any member or provider communication other than authorization, grievance and appeals	24 hours / 7 days Mon-Fri, 9 am - 5 pm	Verify VCMAX Enrollment on EMEDNY:  MLTC Plan Code: VL  MA Plan Code: H2168  MAP Plan Code: VM  To facilitate care management, VCM requests notification to UM of all hospital admissions in accordance with the following timeframes: -Elective: 5 days prior to admission but no later than 1 business day after admission -Emergent: within 1 business day of emergent admission	
Claims/ Provider Services	Tel: 855-769-2500	Mon – Fri 9 am to 5 pm		
Authorizations	Tel: 800-469-6292	All Fax Numbers should be requests related to authorization changes, authorization changes, authorization maclinical & supporting documprior authorization forms.  Inpatient admissions; UR redischarge Summaries.  Outpatient Services (CHHA Outpatient OT, PT, ST, Nurse Home Infusions) including Name Continuing Service Requests.  PCA and CDPAS including Requests.  SADC, ADHC, PERS, Home Meals, and Home Modificated Requests for all new & exises Medical Necessity, Prescription All requests related to grieve appeals.  All requests related to authorize appeals.  All information regarding Sk Facility Admissions, including Short Term Rehab Requests	All Fax Numbers should be used for requests related to authorizations including authorization changes, authorization corrections, authorization modifications, clinical & supporting documentation, and prior authorization forms.	
» Inpatient Admissions	Fax: 212-402-4468		Inpatient admissions; UR requests, Clinical, Discharge Summaries.	
» Outpatient Services	Fax: 978-367-1872		Outpatient Services (CHHA, In-Home & Outpatient OT, PT, ST, Nursing Services, Home Infusions) including New & Continuing Service Requests.	
» LHCSA/CDPAS/Personal Care	Fax: 646-618-8997		PCA and CDPAS including Overtime Requests.	
» Long Term Support Services	Fax: 646-362-2004		SADC, ADHC, PERS, Home-Delivered Meals, and Home Modifications.	
» DME	Fax: 718-517-2709		Requests for all new & existing DME/ Medical Necessity, Prescriptions.	
» Grievance and Appeals	Fax: 347-226-5180		All requests related to grievance and appeals.	
» Part B	Fax: 917-243-9997			
» Skilled Nursing Facility Admissions	Fax: 978-967-8030		All information regarding Skilled Nursing Facility Admissions, including: PRI and Short Term Rehab Requests, Clinicals, Discharge Summaries, Requests for Continuity of Care, etc.	
Pharmacy Services  » MedImpact Pharmacy Benefits  Manager	Tel: 888-807-6806, TTY 711.	Mon - Fri, 8 am - 8 pm	-VCMAX MLTC members obtain prescription drugs through their Medicare Prescription Drug Plan (Part D) and/or NYS MedicaidVCMAX MA and MAP members obtain prescription drugs through the VCMAX plan. Pharmacy network and prescription drug benefits are administered by MedImpactThe formulary (including prior authorization and other requirements) as well as a listing of participating providers and pharmacies can be found via www.villagecaremax.org.	

Dental Services  » LIBERTY Dental Benefits Manager	Tel: 833-276-0853	Mon - Fri, 8 am - 8 pm	
Transportation Services (non-emergency)			
Sentry Management Solutions	Tel: 844-573-6879	Mon – Sat, 7 am - 9 pm Sun, 8 am - 5 pm	
Optometry/Vision Services  » Superior Vision (Versant)	Tel: 866-819-4298	Mon - Fri, 8 am - 8 pm	
Audiology/Hearing Services  » HearUSA (audiology)	Tel: 855-898-1320	Mon - Fri 8 am - 8 pm	
Laboratory Services			
Bio-Reference Laboratories	1. Tel: 800-229-5227	1. 24 hours / 7 days	
2. LabCorp	2. Tel: 800-222-7566	2. Mon – Fri 8 am to 5 pm	
Accu Reference Medical	3. Tel: 877-733-4522	3. Mon – Fri, 8am-5pm,	
Laboratory	4. Tel: 718-837-5222	Sat – Sun, 10 am to 4 pm	
4. Centers Laboratory	5. Tel: 866-98-LENCO	4. Mon- Sun, 9 am to 5 pm	
5. Lenco Lab	(866-985-3626)	5. Mon - Sat 8 am to 5 pm	

## **Prior Authorization List**

The following services require prior authorization (contact Utilization Management). For a complete list of services with additional details, please see the VillageCareMAX Provider Manual, Section 10. For a complete list of DME codes that require prior authorization, please see Appendix 10 in the Provider Manual.

Frequently utilized MLTC Services	Frequently utilized MA & MAP Services	
» DME     » Nursing Home Care     » Home Health Care     » Adult Day Health Care & Social Day Care     » Non-emergency Transportation     » Rehabilitation Therapy (PT, OT, ST)	<ul> <li>DME</li> <li>Hospital admissions</li> <li>Skilled Nursing Facility admissions</li> <li>Surgeries</li> <li>Outpatient Behavioral Health services         <ul> <li>Auth required after 20 visits for non-physician services</li> </ul> </li> </ul>	
<ul> <li>» Respiratory Therapy</li> <li>» Nutrition</li> <li>» Social and Environmental Supports</li> <li>» Home Delivered &amp; Congregate Meals</li> <li>» Private Duty Nursing</li> <li>» Community-based Long-Term Services and Supports (LTSS)</li> <li>» Respite services</li> <li>» Tele-Monitoring</li> </ul>	<ul> <li>Alcohol and Substance Abuse services</li> <li>Rehabilitation Therapy (PT, OT, ST, Cardiac &amp; Pulmonary)         <ul> <li>Auth required for all visits- change in 2022</li> </ul> </li> <li>Home Health Care</li> <li>Organ Transplant</li> <li>Chiropractic services</li> <li>Diagnostic Services (MRI/MRA, EMG, PET Scan, Nuclear Medicine, Discogram/Myelogram)</li> </ul>	
» Home Infusion	<ul> <li>Mobile Radiology</li> <li>Acupuncture visits for lower back pain</li> <li>Acupuncture "Supplemental Benefit" – change in 2022</li> <li>MAP: limit 5 visits/month –max 50/year</li> <li>DSNP: limit 4 visits/month –max 34/year</li> </ul>	

## **Claims** Mail paper claims (CMS-1500 or UB-04) and Electronic claims submissions: claims correspondence, including Claims Appeals to: Use VillageCareMAX ILS - VillageCareMAX Change HealthCare payer ID: 26545 P.O. Box 21516 • Eagan, MN 55121

- For MLTC claims, if VillageCareMAX is not primary, submit the claim within 90 days of the date on the Explanation of Payment (EOP)/Remittance Notice and include EOP with your claim.
- For MAP claims, VillageCareMAX is the payer for all covered services.
- For MA claims, VillageCareMAX is the primary payer.
- NPI and Tax ID must be included on all claims.

