

Availity Provider Portal and VillageCareMAX-Altruista Health Provider Authorization Portal

The Availity Provider Portal is a quick, convenient, and secure way to verify member eligibility, review claims status, and more. The portal is available 24 hours a day, 7 days a week and can be accessed by visiting: <https://apps.availity.com/>. The VillageCareMAX-Altruista Health Provider Authorization Portal integrates with GuidingCare Care Management and allows providers to electronically submit authorizations, check on status of authorizations, update and add additional information to an authorization and can be accessed by visiting: <https://vcm.guidingcare.com/AuthorizationPortal/>.

Department	Contact Information	Hours of Operation	Information
Member Enrollment & Eligibility Verifications	EMEDNY toll-free: 1-800-997-1111 (Medicaid) 1-855-769-2500 (Medicare) 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 -Urgent: any time 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	Medicare Tel: 1-855-296-8800 Medicaid Managed Long Term Care Tel: 1-800-469-6292 Please use the fax numbers below to send auth requests:	7 days/week 8 am - 8 pm	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.
» DME	Fax: 978-577-5451		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: 978-367-1872		All requests related to authorizations for Part B Drugs, including New & Continuing Service Requests.
» Skilled Nursing Facility Admissions	Fax: 212-402-4468		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 Medicaid. -VCMAX MA and MAP members obtain prescription drugs through the VCMAX plan. Pharmacy network and prescription drug benefits are administered by MedImpact. -The 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 1. Bio-Reference Laboratories 2. LabCorp 3. Accu Reference Medical Laboratory 4. Centers Laboratory 5. Lenco Lab	1. Tel: 800-229-5227 2. Tel: 800-222-7566 3. Tel: 877-733-4522 4. Tel: 718-837-5222 5. Tel: 866-98-LENCO (866-985-3626)	1. 24 hours / 7 days 2. Mon – Fri 8 am to 5 pm 3. Mon – Fri, 8am-5pm, Sat – Sun, 10 am to 4 pm 4. Mon- Sun, 9 am to 5 pm 5. Mon - Sat 8 am to 5 pm	
Behavioral Health Services » Carelon Behavioral Health	Tel: 800-397-1630	Mon - Fri 8:30 am - 8 pm	Effective 3/1/23, Beacon Health Options became Carelon Behavioral Health
Durable Medical Equipment 1. Integra Partners 2. Valmar Surgical Supplies	1. Tel: 888-729-8818 2. Tel: 516-596-3070	1. Mon - Fri, 8 am - 8 pm 2. Mon - Fri, 9 am - 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
<ul style="list-style-type: none"> » DME » Nursing Home Care » Home Health Care » Adult Day Health Care & Social Day Care » Non-emergency Transportation » Rehabilitation Therapy (PT, OT, ST) » Respiratory Therapy » Nutrition » Social and Environmental Supports » Home Delivered & Congregate Meals » Private Duty Nursing » Community-based Long-Term Services and Supports (LTSS) » Respite services » Tele-Monitoring » Home Infusion 	<ul style="list-style-type: none"> » DME » Hospital admissions » Skilled Nursing Facility admissions » Surgeries » Outpatient Behavioral Health services » Alcohol and Substance Abuse services » <i>Rehabilitation Therapy (PT, OT, ST, Cardiac & Pulmonary)</i> <ul style="list-style-type: none"> » Auth required for all visits » Home Health Care » Organ Transplant » Chiropractic services » Diagnostic Services (MRI/MRA, EMG, PET Scan, Nuclear Medicine, Discogram/Myelogram, CT Scan, EEG) » Mobile Radiology » Acupuncture visits

Claims (Not Applicable for Behavioral Health Claims)

<p>Mail paper claims (CMS-1500 or UB-04) and claims correspondence, including Claims Appeals to:</p> <p>VillageCareMAX Claims P.O. Box 3238 • Scranton, PA 18505</p>	<p>Electronic Claims Submissions (All Claims DOS): Use VillageCareMAX payer ID: 26545</p>
<ul style="list-style-type: none"> • 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. 	

