

# AmeriHealth Caritas Delaware

## Provider Reference Guide

### www.amerhealthcaritasde.com

<b>Provider Services</b>	<b>1-855-707-5818</b> Fax: <b>1-855-396-5790</b>
<b>For assistance with:</b> <ul style="list-style-type: none"> <li>• Eligibility checking.</li> <li>• Claims status inquiry.</li> <li>• Electronic data exchange (EDI) technical support.</li> <li>• Reporting demographic data changes.</li> <li>• Filing an informal complaint.</li> </ul>	

<b>Delaware Medicaid Enterprise System (DMES)</b>
<a href="https://medicaid.dhss.delaware.gov/provider">https://medicaid.dhss.delaware.gov/provider</a>

<b>AmeriHealth Caritas Delaware Member Services</b>
<ul style="list-style-type: none"> <li>• Diamond State Health Plan (DSHP) and Delaware Healthy Children Program (DHCP) .....1-844-211-0966 (TTY 1-855-349-6281)</li> <li>• DSHP-Plus and DSHP-Plus LTSS .....1-855-777-6617 (TTY 1-855-362-5769)</li> <li>• Member Services fax .....1-855-396-5780 Member Services is available 24 hours a day, seven days a week.</li> </ul>

<b>NaviNet</b>	<b>1-888-482-8057</b> <a href="http://navinet.navimedix.com">navinet.navimedix.com</a>
----------------	---

<b>Bright Start® (maternity services)</b>	<b>1-833-669-7672</b> Fax: <b>1-855-558-0488</b>
Admission notification of obstetric deliveries and neonatal intensive care.	

<b>Rapid Response and Outreach Team</b>	<b>1-844-623-7090</b> Fax: <b>1-855-806-6242</b>
Call Monday – Friday, 8 a.m. to 6 p.m., for support with care coordination and member access to services, including HealthCheck; Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services; and Individuals with Disabilities Education Act (IDEA) services. <a href="http://www.amerhealthcaritasde.com/provider">www.amerhealthcaritasde.com/provider</a>	

<b>Credentialing</b>	<b>1-866-423-1444</b> Fax: <b>1-215-863-6369</b>
Email..... <a href="mailto:delawareprovidernetwork@amerhealthcaritas.com">delawareprovidernetwork@amerhealthcaritas.com</a>	

<b>Vision (Avesis)</b>	<b>1-833-241-4243</b>
------------------------	-----------------------

<b>Long-Term Services and Supports (LTSS) Personal Care Connector Team</b>	<b>1-855-260-9544</b>
--	-----------------------

<b>24/7 Nurse Call Line for members</b>	<b>1-844-897-5021</b>
---	-----------------------

<b>Peer-to-peer</b>	<b>1-855-396-5770</b>
---------------------	-----------------------

<b>Pharmacy services (PerformRx)</b>
<b>PerformRx Pharmacy Member Services</b> <ul style="list-style-type: none"> <li>• DSHP and Delaware Healthy Children Program (DHCP).....1-877-759-6257 (TTY 1-885-809-9206 or 711)</li> <li>• DSHP-Plus and DSHP-Plus LTSS .....1-855-294-7048 (TTY 1-885-809-9206 or 711)</li> </ul> <b>PerformRx Pharmacy Provider Services</b> Hours of operation: 8 a.m. to 7 p.m. <ul style="list-style-type: none"> <li>• DSHP and DHCP.....1-855-251-0966</li> <li>• DSHP-Plus and DSHP-Plus LTSS.....1-888-987-6396</li> </ul> Pharmacy fax .....1-855-829-2872 Formulary and forms ..... <a href="http://www.amerhealthcaritasde.com">www.amerhealthcaritasde.com</a>

<b>Non-emergency medical transportation</b>
Covered by Delaware Health and Social Services.

<b>Fraud and abuse hotline</b>	<b>1-866-833-9718</b>
--------------------------------	-----------------------

<b>Emergency room (ER) policy</b>
AmeriHealth Caritas Delaware does not require prior authorization for emergency services provided by network or non-network providers when a member seeks emergency care.

<b>LTSS prior authorization</b>	<b>1-855-260-9544</b> Fax: <b>1-855-843-1177</b>
---------------------------------	---



**Timely claims filing**

In network:

- Original submission: no more than 120 days from the date of service.
- Rejected claims: no more than 120 days from the date of service.
- Denied claims: 365 days from the date of service.
- Third-party liability (TPL) claims: 120 days from the date of the primary insurer's explanation of benefits (EOB).

Out of network:

- Within 120 days of the date of service.

**Electronic remittance advice (ERA)**

AmeriHealth Caritas Delaware offers ERAs (also referred to as 835 files) through Change Healthcare/ECHO Health.

To receive ERAs from Change Healthcare and ECHO, you will need to include both the AmeriHealth Caritas Delaware payer ID **77799** and the ECHO payer ID **58379** in your practice management system.

**For enrollment support, please contact ECHO Health Inc. at 1-888-834-3511.**

**Arranging electronic services (EDI, EFT, VCC, and ERA)**

Contact your practice management or EDI vendor to arrange for electronic claims or remittance transmissions. Or contact Change Healthcare/ECHO Health at 1-877-667-1512 or visit [www.changehealthcare.com](http://www.changehealthcare.com) to arrange:

- Electronic data interchange (EDI) claims submission.
- Electronic funds transfer (EFT).
- Virtual Credit Card (VCC).
- Electronic remittance advice (ERA).

For additional support regarding EDI, VCC, EFT, or ERAs, please reference our website at [www.amerhealthcaritasde.com/provider/claims-billing/electronic.aspx](http://www.amerhealthcaritasde.com/provider/claims-billing/electronic.aspx) or call the Echo Health Support team at 1-888-492-5579.

**Claims inquiry**

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

- Electronic data interchange (EDI) claims submission.
- Visiting the NaviNet provider website, our secure provider portal. Log on to [www.navinet.navimedix.com](http://www.navinet.navimedix.com) for web-based solutions for electronic transactions and information.
- You may open a claims investigation via NaviNet with the claims adjustment inquiry function.
- Calling Provider Services at 1-855-707-5818 and following the prompts.
- Calling your Account Executive for assistance.

**Claims submission**

AmeriHealth Caritas Delaware electronic payer ID number: 77799

AmeriHealth Caritas Delaware  
Attn: Claims Processing Department  
P.O. Box 80100  
London, KY 40742-0100

For detailed information, see the AmeriHealth Caritas Delaware Claims Filing Instructions.

**Behavioral health prior authorization** **1-855-301-5512**  
Fax: 1-877-234-4273

**Physical health utilization management** **1-855-396-5770**  
Fax: 1-866-423-0946

**Fax numbers:**

- Prior authorization.....1-866-497-1384
- Admission notification.....1-866-773-7892
- Discharge planning (or concurrent review).....1-866-773-7892

**Provider complaints and appeals**

For provider administrative (or medical) appeals:  
Call the Peer-to-Peer line by following the prompts at **1-855-396-5770**.

Or submit an appeal in writing to:  
AmeriHealth Caritas Delaware  
Attn: Provider Administrative/Medical Appeals Department  
P.O. Box 80105  
London, KY 40742-0105

For provider appeals (on behalf of a member and with written consent):  
Call **1-855-396-5770** and follow the prompts.

For provider complaints:  
Call Provider Services at **1-855-707-5818**.

Or submit a complaint in writing to:  
AmeriHealth Caritas Delaware  
P.O. Box 80101  
London, KY 40742-0101

Complaints about a claim must be submitted in writing, accompanied by the Provider Complaint form, within 365 days of the date of service.

**Other important contact information**

Delaware Department of Health and Social Services (DHSS)  
1901 North DuPont Highway  
New Castle, DE 19720

Provider Services.....1-800-999-3371, option 0, and then option 2  
Monday – Friday, 8 a.m. – 4:30 p.m. ET  
Email.....[delawarepret@dxc.com](mailto:delawarepret@dxc.com)

Report child abuse to Delaware Department of Services for Children, Youth, and Their Families.....1-800-292-9582

Report dependent-adult abuse to Delaware Aging and Disability Resource Center.....1-800-223-9074

