

December 2020 ProviderPost



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Fraud Tip Hotline

1-866-833-9718, 24 hours a day, seven days a week.

Secure and confidential. You may remain anonymous.





Prior Authorization Lookup tool available on plan website

Beginning **December 14, 2020**, confirming authorization requirements is as simple as entering a Current Procedural Terminology (CPT) code or a Healthcare Common Procedure Coding System (HCPCS) code and clicking "submit."

AmeriHealth Caritas Delaware is excited to introduce the new **Prior Authorization Lookup tool**. This new, user-friendly resource allows users to enter a CPT or a HCPCS code to verify authorization requirements in real time before delivery of service.

The Prior Authorization Lookup tool was designed to help reduce the administrative burden of calling Provider Services to determine whether prior authorization is required. The tool is easy to use and offers general information for outpatient services performed by a participating provider.

To try the Prior Authorization Lookup tool, visit www.amerihealthcaritasde.com/provider/resources/prior-authorization-lookup.aspx.

Prior authorization requests **cannot** be submitted through the tool and should continue to be requested through your current process. We would like to remind you that you can submit your requests electronically via NaviNet. Through your single login to NaviNet, you can request prior authorization and view authorization history. If you are not already a NaviNet user, visit https://navinet.secure.force.com/ to sign up.

If you have questions about the tool, please contact your Provider Account Executive or the Provider Services department at **1-855-707-5818**. If you have questions related to a procedure code or prior authorization, please call **1-855-396-5770**.

Our mission
We help people:



Get care



Stay well



Build healthy communities

We believe everyone should have access to quality health care and services.



Important reminder: Grievance process

Providers should direct members who have a concern or question regarding the health care services they have received under AmeriHealth Caritas Delaware to contact Member Services at the toll-free number on the back of the member ID card.

To file a grievance:

· Call:

DSHP Member Services:

1-844-211-0966 (TTY 1-855-349-6281).

DSHP Plus Member Services:

1-855-777-6617 (TTY1-855-362-5769).

Write to:

AmeriHealth Caritas Delaware Attn: Complaints and Grievances P.O. Box 80102 London, KY 40742-0102

AmeriHealth Caritas Delaware will send the member an acknowledgment letter within five business days of receiving the grievance. The plan will send a decision letter within 30 calendar days of receiving the request. In some cases, the plan may need additional time to obtain more information. Reasonable efforts will be made to give the member prompt verbal notice of the delay and a written notice will be sent to the member within two calendar days explaining why an extension is needed.

Member Services hours of operation: 24 hours per day, 7 days per week.





www.amerihealthcaritasde.com