

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://secure.healthx.com/villagecareprovider>.

Department	Contact Information	Hours of Operation
Member Enrollment & Eligibility Verifications	Verify VillageCareMAX Enrollment on EMEDNY: MLTC Plan Code: VL MA Plan Code: H2168 MAP Plan Code: VM	24 hours / 7 days
Utilization Management Medical and Behavioral	Tel: 800-469-6292 Fax: 718-517-2709	7 days a week 8 am to 8 pm
Claims/ Provider Services	Tel: 855-769-2500	Mon – Fri 9 am to 5 pm
Care Management	Tel: 800-469-6292 Fax: 212-337-5711	Mon – Fri 9 am to 5 pm *Call Member Services during other hours for assistance
Pharmacy Services • MedImpact Pharmacy Benefits Manager	Tel: 888-807-6806	Mon – Fri 8 am to 8 pm
Member Services	Tel: 800-469-6292 Fax Numbers: Provider/member communication: 212-337-5711 Hospitalization notifications/DC summaries 212-402-4468 Any other service requests: 718-517-2709	7 days a week 8 am to 8 pm
Dental Services • LIBERTY Dental Benefits Manager	Tel: 833-276-0853	Mon – Fri 8 am to 8 pm
Transportation Services (non-emergency) • ModivCare (formerly Logisticare) Network Benefit Manager • Sentry Management Solutions	Tel: 877-916-7999 Tel: 844-573-6879	Mon - Fri 8 am to 8 pm 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 to 8 pm
Audiology/Hearing Services • HearUSA (audiology)	Tel: 855-898-1320	Mon - Fri 8 am to 8 pm
Laboratory Services • Bio-Reference Laboratories • LabCorp • Accu Reference Medical Laboratory • Centers Laboratory • Lenco Lab	Tel: 800-229-5227 Tel: 800-222-7566 Tel: 877-733-4522 Tel: 718-837-5222 Tel: 866-98-LENCO (866-985-3626)	24 hours / 7 days Mon – Fri 8 am to 5 pm Mon – Fri, 8am-5pm, Sat – Sun, 10 am to 4 pm Mon- Sun, 9 am to 5 pm 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
<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<ul style="list-style-type: none">• Auth required after 20 visits for non-physician services• Alcohol and Substance Abuse services• Rehabilitation Therapy (PT, OT, ST)<ul style="list-style-type: none">• Auth required after 20 visits• Cardiac & Pulmonary Rehabilitation<ul style="list-style-type: none">• Auth required after 20 visits• Home Health Care• Organ Transplant• Chiropractic services• Diagnostic Services (MRI/MRA, EMG, PET Scan, Nuclear Medicine)• Mobile Radiology• Acupuncture visits for lower back pain

To facilitate care management, VillageCareMAX requests notification to Utilization Management of all hospital admissions in accordance with the following timeframes:

- Elective Admissions: 5 days prior to the admission
- Urgent Admissions: any time prior to the admission but not later than 1 business day after admission
- Emergent Admission: within 1 business day of the emergent admission

Pharmacy Services

- VillageCareMAX MLTC members obtain prescription drugs through their Medicare Prescription Drug Plan (Part D) and/or New York State Medicaid.
- VillageCareMAX MA and MAP members obtain prescription drugs through the VC MAX plan. Pharmacy network and prescription drug benefits are administered by MedImpact. (888) 807-6806 TTY 711.
- 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.

Claims

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

- 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.