

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: 212-337-5711	7 days a week 8 am to 8 pm
Dental Services • Healthplex Dental Benefits Manager	Tel: 888-468-2183	Mon – Fri 8 am to 6 pm
Transportation Services (non-emergency) • National MedTrans Network Benefit Manager	Tel: 877-916-7999	Mon – Fri 8 am to 8 pm
Optometry/Vision Services • EyeQuest Vision Benefits Manager	Tel: 888-260-5152	Mon – Fri 8 am to 8 pm
Laboratory Services • Bio-Reference Laboratories • LabCorp • Accu Reference Medical Laboratory • Centers Laboratory	Tel: 800-229-5227 Tel: 800-222-7566 Tel: 877-733-4522 Tel: 718-837-5222	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

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

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 VCMAX 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.