



VillageCareMAX Managed Long Term Care (MLTC)

VillageCareMAX Medicare Health Advantage Plan (HMO D-SNP)

VillageCareMAX Medicare Total Advantage MAP Plan (HMO D-SNP)

## Quick Reference Guide for Providers

### 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: <b>MLTC Plan Code: VL</b> <b>MA Plan Code: H2168</b> <b>MAP Plan Code: VM</b>	24 hours / 7 days
Utilization Management Medical and Behavioral	<b>Tel:</b> 800-469-6292 <b>Fax:</b> 718-517-2709	7 days a week 8 am to 8 pm
Claims/ Provider Services	<b>Tel:</b> 855-769-2500	Mon – Fri 9 am to 5 pm
Care Management	<b>Tel:</b> 800-469-6292 <b>Fax:</b> 212-337-5711	Mon – Fri 9 am to 5 pm *Call Member Services during other hours for assistance
Pharmacy Services • MedImpact Pharmacy Benefits Manager	<b>Tel:</b> 888-807-6806	Mon – Fri 8 am to 8 pm
Member Services	<b>Tel:</b> 800-469-6292 <b>Fax:</b> 212-337-5711	7 days a week 8 am to 8 pm
Dental Services • Healthplex Dental Benefits Manager	<b>Tel:</b> 888-468-2183	Mon – Fri 8 am to 6 pm
Transportation Services (non-emergency) • National MedTrans Network Benefit Manager	<b>Tel:</b> 877-916-7999	Mon – Fri 8 am to 8 pm
Optometry/Vision Services • EyeQuest Vision Benefits Manager	<b>Tel:</b> 888-260-5152	Mon – Fri 8 am to 8 pm
Laboratory Services • Bio-Reference Laboratories • LabCorp • Accu Reference Medical Laboratory • Centers Laboratory	<b>Tel:</b> 800-229-5227 <b>Tel:</b> 800-222-7566 <b>Tel:</b> 877-733-4522 <b>Tel:</b> 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"><li>• DME</li><li>• Nursing Home Care</li><li>• Home Health Care</li><li>• Adult Day Health Care &amp; Social Day Care</li><li>• Non-emergency Transportation</li><li>• Rehabilitation Therapy (PT, OT, ST)</li><li>• Respiratory Therapy</li><li>• Nutrition</li><li>• Social and Environmental Supports</li><li>• Home Delivered &amp; Congregate Meals</li><li>• Private Duty Nursing</li><li>• Community-based Long-Term Services and Supports (LTSS)</li><li>• Respite services</li><li>• Tele-Monitoring</li><li>• Home Infusion</li></ul>	<ul style="list-style-type: none"><li>• DME</li><li>• Hospital admissions</li><li>• Skilled Nursing Facility admissions</li><li>• Surgeries</li><li>• Outpatient Behavioral Health services<ul style="list-style-type: none"><li>• Auth required after 20 visits for non-physician services</li></ul></li><li>• Alcohol and Substance Abuse services</li><li>• Rehabilitation Therapy (PT, OT, ST)<ul style="list-style-type: none"><li>• Auth required after 20 visits</li></ul></li><li>• Cardiac &amp; Pulmonary Rehabilitation<ul style="list-style-type: none"><li>• Auth required after 20 visits</li></ul></li><li>• Home Health Care</li><li>• Organ Transplant</li><li>• Chiropractic services</li><li>• Diagnostic Services (MRI/MRA, EMG, PET Scan, Nuclear Medicine)</li><li>• Mobile Radiology</li></ul>

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 MediImpact. (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](http://www.villagecaremax.org).

## Claims

Mail paper claims (CMS-1500 or UB-04) and claims correspondence to: <b>ILS - VillageCareMAX</b> <b>P.O. Box 21516 • Eagan, MN 55121</b>	Electronic claims submissions: Use VillageCareMAX <b>Change HealthCare payer ID: 26545</b>
<ul style="list-style-type: none"><li>• 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.</li><li>• For MAP claims, VillageCareMAX is the payer for all covered services.</li><li>• For MA claims, VillageCareMAX is the primary payer.</li><li>• NPI and Tax ID must be included on all claims.</li></ul>	