

ABA MCO TRANSITION FAQ

	AETNA	AMERIHEALTH CARITAS	HEALTHY BLUE	LOUISIANA HEALTHCARE CONNECTIONS	UNITED HEALTHCARE COMMUNITY PLAN
Credentialing	<p>Provider Services Department: Phone: 1-855-242-0802 Fax: 1-866-607-7657</p>	<p>Phone: 1-888-913-0349 Fax: 225-300-9199</p> <p>http://www.amerihealthcaritasla.com/provider/resources/credentialing/index.aspx</p>	<p><u>Credentialing Contact:</u> Yvonne Quincy, RPhT Credentialing Specialist Operations Healthy Blue 10000 Perkins Rowe, Suite G-150 Baton Rouge, LA 70810 Phone: 225-819-4893 Ext 82510 Fax: 888-708-2613 Email: yvonne.quincy@healthyblue.com</p> <p><u>Contracting Contact:</u> Lisa Latino 504-834-1271 Ext 88726</p>	<p>LHC_Provider_Credent@centene.com</p> <p>1-866-595-8133, Monday – Friday, 7AM – 7PM</p> <p>https://www.louisianahealthconnections.com/providers/become-a-provider.html</p>	<p>https://www.providerexpress.com</p> <p>Providers can also contact Courtney Banks-Turner via email at courtney.banks-turner@optum.com, phone at (763) 361-7776, or fax at (855) 838-9020</p>
Links to PA Forms	https://www.aetnabetterhealth.com/louisiana/providers/priorauth	http://www.amerihealthcaritasla.com/provider/resources/credentialing/index.aspx	https://providers.healthyblue.com/la/pages/prior-auth-info.aspx	https://www.louisianahealthconnections.com/providers/resources/forms-resources.html	https://www.providerexpress.com/content/open-provexpr/us/en/clinical-resources/autismABA/abaLA.html
TPL Instructions	<p>Electronic Claims Submission: 1-800-848-6592 (call to establish connectivity with Change Healthcare formerly Emdeon)</p>	<p>EDI billing is on 837P transaction Change Healthcare @ 877-363-3666 EDI Tech support hotline @ 866-428-7419 Email support @ edi@amerihealthcaritasla.com</p>	<p>Electronic Data Interchange (EDI) Provider Portal: Availity https://www.availity.com Call our EDI hotline at 1-800-590-5745 to get started. If you use a clearinghouse other than those identified, please contact your clearinghouse for instructions.</p>	<p>Electronic Claim Submission: Louisiana Healthcare Connections C/O Centene EDI 1-800-225-2573 Ext. 25525 Email: EDIBA@centene.com</p>	<p>EDI: Additional information available on www.UHCprovider.com</p>

	<p>Paper Claim Submission: Aetna Better Health of Louisiana P O Box 61808 Phoenix, AZ 85082-1808</p>	<p>Paper Claim Submission: Submitted on CMS 1500 AmeriHealth Caritas Louisiana Claims Processing Department PO Box 7322 London, KY 40742</p>	<p>Paper Claim Submission: Submit claims on original claim forms (CMS-1500 or CMS-1450) printed with dropout red ink or typed (not handwritten) in large, dark font. AMA- and CMS-approved modifiers must be used appropriately based on the type of service and procedure code. Mail to: Claims Department Healthy Blue P.O. Box 61010 Virginia Beach, VA 23466-1010</p>	<p>Paper Claim Submission: Louisiana Healthcare Connections ATTN: Claim Processing Dept. P.O. Box 4040 Farmington, MO 63640-3800</p>	<p>Paper Claim Submission: Required Claim Forms CMS-1500 Form Mail to: United Healthcare Community Plan Louisiana P.O. Box 31341 Salt Lake City, UT 84131-0341</p>
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<p>Claims and Billing Contact</p>	<p>Provider Services Department: Phone: 1-855-242--0802 Fax: 1-860-607-7657</p>	<p>Provider Claims Services: Phone:1-888-922-0007</p>	<p>Online Provider Website: https://providers.healthyblue.la.com</p>	<p>Provider Services: Phone: 1-866-595-8133 https://provider.louisianahealthconnect.com</p>	<p>Claims/Customer Service: Phone: 866-675-1607</p>
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<p>Payer ID</p>	<p>128LA</p>	<p>27357</p>	<p>Availity: 00661 Change Healthcare: 58532 SDS: 16730</p>	<p>68069</p>	<p>87726</p>
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Provider Manual Link	https://www.aetnabetterhealth.com/louisiana/providers/manual	https://www.amerihca.com/provider/resources/manual/index.aspx	https://providers.healthyblue.com/la/pages/manuals-directories-more.aspx	https://www.louisianahealthconnect.com/providers/resources/forms-resources.html	https://www.providerexpress.com/content/dam/operprovexpr/us/pdfs/clinResourcesMain/guidelines/stateAddendums/laMcadManual.pdf
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Values Supported for Corrections and Reversals	Provider Services Department: Phone: 1-855-242--0802 Fax: 1-860-607-7657	7= adjustment of prior claims 8=voided claim	Provider Relations: Phone: 504-836-8888 7= correction/replacement of prior claim	7=Replacement of prior claim 8=voided/cancel of prior claim	Claims/Customer Service Phone: 1-866-675-1607 7=resubmission of prior claim
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