

Missouri Medicare Quick Reference Guide

January 2027

wellcare.homestatehealth.com



CONVENIENT SELF-SERVICE

Wellcare by Allwell partners with **Availity Essentials**, a multi-payer portal, to offer secure provider portal services. Availity Essentials is the fastest way to get help with routine tasks. In addition to Availity Essentials, our current secure **Provider Portal** will continue to remain active and available to you.

	Availity	Portal	(IVR) Interactive Voice Response
Authorization Requirements/Status	<u>Fastest Result</u>	<u>Fastest Result</u>	Available
Authorizations Request	<u>Fastest Result</u>	<u>Fastest Result</u>	N/A
Benefit/Copayment Information	<u>Fastest Result</u>	<u>Fastest Result</u>	Available
Claims Status	<u>Fastest Result</u>	<u>Fastest Result</u>	Available
Claim Reconsiderations Status	N/A	<u>Fastest Result</u>	Available
Eligibility Verification	<u>Fastest Result</u>	<u>Fastest Result</u>	Available
Submit Corrected Claims	<u>Fastest Result</u>	<u>Fastest Result</u>	N/A
Submit Claim Reconsiderations	N/A	<u>Fastest Result</u>	N/A

HELPFUL LINKS

[Availity Portal Registration](#)

[Portal Registration](#)

[Joining our Network](#)

[Availity Portal Training](#)

[Portal Training](#)

[Resources](#) (Manuals and Forms)

PROVIDER SERVICES PHONE (IVR): HMO: 1-800-977-7522 (TTY: 711) | HMO SNP: 1-844-796-6811 (TTY: 711)

OTHER PHONE NUMBERS

CARE AND DISEASE MANAGEMENT REFERRALS

Phone: **1-866-635-7045** (TTY: 711) | Fax: **1-866-287-3286**

Hours: Monday–Friday, 8 a.m.–7 p.m. Eastern Standard Time

RISK MANAGEMENT FRAUD, WASTE & ABUSE HOTLINE

1-866-685-8664

COMMUNITY CONNECTIONS HELP LINE

1-866-775-2192

BEHAVIORAL HEALTH CRISIS

24 hours a day, members should call Member Services.

NURSE ADVICE LINE

1-800-977-7522 (TTY: 711) (24 hours)

HEALTH PLAN PARTNERS

Contracted Networks

HEARING

TruHearing

Phone: **1-800-334-1807**

VISION

Premier

Phone: **1-866-419-1765**

DENTAL

Centene Dental Services

Phone: **1-855-434-9240**

TRANSPORTATION

Centene Dental Services

Phone: **1-855-434-9240**

CLIENT SERVICES

Availity

Phone: **1-800-AVAILITY (282-4548)**

NOTE: Please refer to the member ID card to determine appropriate authorization and claims submission process.

This guide is not intended to be an all-inclusive list of covered services under the Health Plan.

CLAIM SUBMISSION INFORMATION

SUBMISSION INQUIRIES

EDI team email: EDIBA@centene.com

Phone: 1-800-225-2573

PREFERRED EDI CLEARINGHOUSE

Availity: 1-800-282-4548

WEB PORTAL FOR DIRECT DATA ENTRY (DDE) CLAIMS

availability.com/Essentials-Portal-Registration

PAYER ID: 68069

Visit our [Resources](#) page to locate claim forms, PaySpan information and other important information.

Timely Filing guidelines: 180 days from date of service.

EFT

Register: payspanhealth.com or call 1-877-331-7154.

Email: providersupport@payspanhealth.com

EOP can be accessed via [Availity Essentials](#)

[Remittance Viewer](#).



MAIL PAPER CLAIMS TO:

Wellcare By Allwell

Attn: Claims Department

P.O. Box 3060

Farmington, MO 63640-3822

PHARMACY SERVICES

PHARMACY SERVICES

Phone: 1-800-867-6564

Rx BIN

Rx PCN

Rx GRP

610014

MEDDPRIME

2FFA

SPECIALTY PHARMACY

AcariaHealth™

Phone: 1-800-511-5144 (TTY: 711)

Fax: 1-877-541-1503

Monday–Friday, 8 a.m. to 10 p.m. ET

Saturday, 9 a.m. to 3 p.m. ET, Sunday, 8 a.m. to Noon ET



AcariaHealth™ Pharmacy #26, Inc.

8715 Henderson Rd.

Tampa, FL 33634

MEDICATION APPEALS

Fax: 1-866-388-1766

Submit a **Medication Appeal Request form** with supporting documentation by fax or mail within 60 days from the date of the denial notice.



Wellcare By Allwell

Attn: Medicare Pharmacy Appeals

P.O. Box 31383

Tampa, FL 33631-3383

MAIL ORDER

Express Scripts®

Phone: 1-833-750-0201 (TTY: 711)

24 hours a day, 7 days a week

MEDICAL ONCOLOGY SERVICES

Evolent

Phone: 1-800-424-4825

COVERAGE DETERMINATION REQUESTS

Fax: 1-866-226-1093

Electronic Prior Authorization (ePA):

account.covermymeds.com

Access the [Pharmacy Benefits](#) tab for Pharmacy related information, including:

- **Coverage Determination Request Form** and exceptions
- Prior Authorization Information
- **Pharmacy Forms**, including Injectable Infusion
- **Formulary**
- ExpressScripts **Mail Order Service**
- Home Infusion/Enteral Services
- and more

PRIOR AUTHORIZATION (PA) LIST

A **Pre-Auth Needed tool** is available to determine if prior authorization is required. Detailed Prior Authorization list and important PA information can be found in the **Prior Authorization Guide**. Most current information can be found within the Pre-Auth tool.

For fastest results, pre-authorization submissions and status checks can be submitted through [Availity Essentials](#) using the associated **PA forms**.

Medical Fax: 1-844-280-2630

Behavioral Health Fax: 1-877-725-7751

Pharmacy Medicare Part B (Buy & Bill) Fax: 1-844-235-5090

Urgent Authorization Requests and Admission Notifications: Call 1-800-977-7522 and follow the prompts.

Notification is required for Inpatient Hospital admissions **by the next business day** (except normal maternity delivery admissions). Phone authorizations must be followed by a fax submission of clinical information.

Wellcare By Allwell does not accept handwritten, faxed or replicated claim forms. Wellcare By Allwell does not accept media storage devices such as CDs, DVDs, USB storage devices or flash drives.