

General Information				
Website Utilize the Superior HealthPlan website to find:  Training and manuals.  Preferred drug lists.  Provider news.  Network requests or updates.  Fraud, waste and abuse reporting.  Contact information (inquiries and complaints).  Your dedicated Account Manager.	Website SuperiorHealthPlan.com			
Secure Provider Portal Please visit the Secure Provider Portal 24/7 for questions on electronic claim submission, claim appeals and claim status checks and member eligibility verification.	Secure Provider Portal Provider.SuperiorHealthPlan.com			

## **Account Management**

Account Managers provide training, education, assist with questions or help troubleshoot complex issues. Account Managers work to make doing business with Superior HealthPlan easy. Superior HealthPlan's Behavioral Health Providers can reach out to <a href="Manager-Manag

## Trainings:

# **Behavioral Health Clinical Trainings**

https://www.superiorhealthplan.com/providers/training-manuals/behavioral-health-clinical-trainings.html

## **Provider Training Calendar:**

SuperiorHealthPlan.com/ProviderCalendar

Provider Services	STAR, CHIP, STAR+PLUS, STAR Kids, STAR+PLUS MMP, Wellcare By Allwell	1-877-391-5921
Please contact Provider Services for questions on member eligibility and claim adjustment requests.	STAR Health	1-877-391-5921
	Ambetter	1-877-687-1196
Member Services  Members can contact Member Services for help with:  Benefit inquiries.  Assistance with locating a network provider.  Transportation assistance.  General inquiries and complaints.  Abuse, neglect and exploitation reporting.  Behavioral health crisis hotline.	STAR, CHIP	1-800-783-5386
	STAR+PLUS	1-877-277-9772
	STAR Kids	1-844-590-4883
	STAR Health	1-866-912-6283
	STAR+PLUS MMP	1-866-896-1844
	Wellcare By Allwell (HMO and HMO DSNP)	1-877-826-5520
	Ambetter	1-877-687-1196
	Relay Texas (TTY)	1-800-735-2989
Provider Complaints Provider complaints may be submitted through the Superior website, by mail or fax.	Complaints (By Web) SuperiorHealthPlan.com/ComplaintProcedures  Complaints (By Mail) Superior HealthPlan Provider Complaints 5900 E. Ben White Blvd. Austin, Texas 78741  Complaints (By Fax) 1-866-683-5369	



# **Superior HealthPlan Care Manager or Discharge Planner**

Contact Member Services at the numbers listed above

# Teladoc

- 24-hour access to in-network providers for nonemergency health issues
- For members 18 years of age or older
- Online: <a href="https://member.teladoc.com/superior-healthplan">https://member.teladoc.com/superior-healthplan</a>
- Phone: 1-800-835-2362

### Tejas Healthy at Home

- For Medicaid [STAR, STAR Health, STAR Kids, STAR+PLUS (non duals)] and CHIP members
- Phone: 1-512-279-9375
- Online: healthyathome@tejashma.org

# Discharge Planning for Substance Use Disorder after Behavioral Health

Providers are required to schedule a follow up appointment with in 7 and 30 Days after a member has been discharged from an Inpatient Psychiatric Facility. Members should be scheduled with their current OP provider.

If a member has not been working with an OP provider, please schedule an appointment with one of the following:

# **Claims Submission and Claims Payment**

#### Paper claims should be mailed to:

Superior HealthPlan Behavioral Health Claims P.O. Box 6300 Farmington, MO 63640-6806

Wellcare By Allwell
Attn: Claims
PO BOX 3060
Formington, MO 63640 3

Farmington, MO 63640-3822

Ambetter Attn: Claims PO Box 5010

Farmington, MO 63640-5010

Paper claims must be submitted on CMS standardized claim forms, using a CMS-1500 or CMS-1450/UB-04 claim form.

# Electronic claims can be submitted through the following:

- Secure Provider Portal: <u>Provider.SuperiorHealthPlan.com</u>
  - Availity Clearinghouse: Medicaid/CHIP Payer ID: 68068
  - Ambetter, Wellcare By Allwell and STAR+PLUS MMP Payer ID: 68069

Phone: 1-877-344-8446Website: Availity.com

• Texas Medicaid and Healthcare Partnership (TMHP) Portal: secure.tmhp.com/TexMedConnect



Claim Appeals and Corrected Claims can be submitted on paper or electronically.

Paper claim appeals should be mailed to:

Superior HealthPlan:

Attn: Behavioral Health Appeals, P.O. Box 6000, Farmington, MO 63640-3809

Electronic claim appeals can be submitted through Superior's Secure Provider Portal: Provider.SuperiorHealthPlan.com

Must be received by Superior within 120 Days from the date the claim was finalized for reconsideration.

#### **Claim Disputes**

Ambetter:

Attn: Claims Dispute, P.O. Box 5000, Farmington, MO 63640-5000

#### Wellcare By Allwell:

Attn: Claim Dispute, P.O. Box 4000, Farmington, MO 63640-4400

#### **Claim Payment**

- o Providers can receive paper or electronic payments and remittance.
- o Electronic Funds Transfer (EFT) and Electronic Remittance Advice (ERA) is a free service for providers.
- To register for this service, call 1-855-496-1571 or visit zelis.com

#### **Claim Status**

- Claim status can be obtained through the Secure Provider Portal at <u>Provider.SuperiorHealthPlan.com</u>.
- For questions about a claim, call Superior Provider Services.

Secure Provider Portal / Health Passport Help Desk		
Secure Provider Portal Help Desk	Phone: 1-866-895-8443 Email: TX.WebApplications@SuperiorHealthPlan.com	
Health Passport Help Desk (for STAR Health)	Phone: 1-866-714-7996 Email: TX.PassportAdministration@SuperiorHealthPlan.com	

# **Provider Contracting**

Providers can contact Superior for contracting opportunities by:

- Completing the Network Participation Request by visiting <u>SuperiorHealthPlan.com/JoinOurNetwork</u>.
- Sending an email to <a href="mailto:SHP.NetworkDevelopment@SuperiorHealthPlan.com">SHP.NetworkDevelopment@SuperiorHealthPlan.com</a>.

## **Provider Credentialing**

Email: Credentialing@SuperiorHealthPlan.com

Fax: 1-866-702-4831

Mail: Credentialing Department, Superior HealthPlan, 5900 E. Ben White Blvd., Austin, TX 78741

## **Prior Authorizations**

Prior Authorization forms can be found by visiting SuperiorHealthPlan.com/ProviderBehavioralHealth.

Providers may submit authorizations by:

- 1. Secure Provider Portal: Provider.SuperiorHealthPlan.com
- 2. Phone:
  - a.1-844-744-5315 (Superior phone)
  - b.1-844-259-3934 (Ambetter phone)
  - c.1-800-424-4812 (Magellan HealthCare Applied Behavioral Analysis Services)
- Fax:
  - a. Ambetter Prior Authorization: 1-844-307-4442 (Outpatient) or 1-800-732-7562 (Inpatient)
  - b. Medicaid Prior Authorization: 1-866-570-7517 (Outpatient) or 1-800-732-7562 (Inpatient)
  - c. Wellcare By Allwell Prior Authorization: 1-855-772-7079 (Outpatient) or 1-866-900-6918 (Inpatient)
  - d. Applied Behavioral Analysis: Magellan HealthCare Prior Authorization: 1-888-656-0368 (Outpatient/Inpatient)



Quick Reference	Guiac		neddiptan.		
Covered Behavioral Health Services	Prior Authorization Requirement	Frequency Limitations	Associated Fax Forms		
Psychological Testing and Neuropsychological Testing	Required (STAR, STAR Health, STAR Kids, STAR+PLUS, CHIP exemption: Participating providers limited to 8-hours per calendar year per member without authorization)	Based on medical necessity	Outpatient Prior Authorization Form and Medicaid Outpatient Neuropsychology and Psychological Testing		
Inpatient Admissions (including Detox)	Required	Based on medical necessity	N/A		
Outpatient Detox	Required	Based on medical necessity	Outpatient Prior Authorization Form		
Transcranial Magnetic Stimulation (Ambetter only)	Required	Based on medical necessity	Outpatient Prior Authorization Form		
Applied Behavior Analysis (Ambetter only)	Required	Based on medical necessity	Outpatient Prior Authorization Form		
Electroconvulsive Therapy (ECT) - Inpatient/Outpatient	Required	Based on medical necessity	Outpatient Prior Authorization Form (required) and Ambetter, Medicaid or Medicare ECT Inpatient or Outpatient Request Form (optional)		
Outpatient facility services (PHP/IOP/Day Treatment)	Required	Based on medical necessity	N/A		
Residential Treatment	Required	Based on medical necessity	N/A		
Crisis Stabilization Services (Ambetter Only)	Required after 3 hours or if per diem	Based on medical necessity	N/A		
All Non-Participating Providers	Required	Based on medical necessity	Outpatient Prior Authorization Form		
Pharmacy Benefit Information					
Bin Number: 003858; Group ID: 2FDA					
Prior Authorization Requests	Phone: 1-866-399-0928 Fax: 1-833-423-2523 Website: SuperiorHealthPlan.com/ProviderPharmacy				
Superior Pharmacy Appeals	Phone: 1-877-398-9461 Fax: 1-866-918-2266				