# Primary Care Provider (PCP) Quick Reference Guide



Updated April 2021

| General Information  |   |                |
|--|---|----------------|
| Website Please visit the Secure Provider Portal 24/7 for questions on claim status, to verify eligibility, to request or check status of an authorization, and to submit general questions.  | Secure Provider Portal: Provider.SuperiorHealthPlan.com |                |
| Provider Services Please contact Provider Services for questions on claim payments, rejections, denials, to verify eligibility or for help escalating any issues you may have. For claims related questions, be sure to have your claim number available. HIPAA Validation will still occur. | STAR, STAR Kids, STAR<br>Health, STAR+PLUS and CHIP     | 1-877-391-5921 |
| Member Services and After Hours  Members can contact Member Services to change their PCP or for help with other questions. Our nurses are available to help members with urgent issues after hours and on holidays.  | RelayTexas(TDD/TTY)                                     | 1-800-735-2989 |
|  | STAR and CHIP   | 1-800-783-5386 |
|  | STAR+PLUS   | 1-877-277-9772 |
|  | STAR Kids   | 1-844-590-4883 |
|  | STAR Health   | 1-866-912-6283 |

### **Provider Complaints**

www.SuperiorHealthPlan.com/contact-us/complaint-form-information.html

## **Claims Submission and Claims Payment**

## Providers may submit claims in three ways:

- 1. Secure Provider Portal <u>Provider.SuperiorHealthPlan.com</u>
- 2. EDI 1-800-225-2573 ext. 25525, Payor ID: 68069, Behavioral Health Payor ID: 68068
- 3. Paper See address below under Initial, Resubmission, Corrected or Reconsiderations.

| Claim Appeals             |
|---------------------------|
| SuperiorHealthPlan        |
| P.O. Box 3000             |
| Farmington, MO 63640-3800 |
| Payor ID: 68069           |
|                           |

## **Timely Filing Deadline**

95 Days from the date of service

# Corrected Claims, Requests for Reconsideration or Claim Disputes

120 Days from the date of the Explanation of Payment (EOP)

### Electronic Funds Transfer (EFT)/Electronic Remittance Advice (ERA) - PaySpan

To register for this free service, call 1-877-331-7154 or visit <u>payspanhealth.com</u>.

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

# **Provider Contracting**

All contracting for new and existing providers is done through the Network Development and Contracting Management department. Contract packets can be requested by completing the Network Participation Request on our website at <a href="https://www.SuperiorHealthPlan.com/providers/become-a-provider.html">www.SuperiorHealthPlan.com/providers/become-a-provider.html</a>.

Network Development Email: SHP.NetworkDevelopment@SuperiorHealthPlan.com

Mail: Superior HealthPlan, ATTN: Contract Management, 7990 Interstate 10 West, Suite 300, San Antonio, TX 78230

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## **Provider Re-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**

Providers may submit authorization in three ways:

1. Secure Provider Portal:

Provider.SuperiorHealthPlan.com

2. Phone: 1-800-218-7508

3. Fax LinesSTAR/CHIP

Inpatient: 1-877-650-6942Outpatient: 1-800-690-7030

Behavioral Health (Inpatient): 1-866-900-6918Behavioral Health (Outpatient): 1-855-772-7079

LTSS/Pharmacy

Inpatient (standard/concurrent): 1-877-259-6960
 Outpatient (standard/concurrent): 1-877-808-9368

o Part B: 1-844-960-1785

Behavioral Health: 1-855-772-7079

## **High-Tech Imaging Prior Authorizations**

Radiology Services - National Imaging Associates (NIA): NIA will manage the prior authorization of non-emergent, advanced, outpatient imaging services rendered to Superior HealthPlan members such as CT/CTA, MRI/MRA, PET Scan, CCTA, Nuclear Cardiology/MPI, Echocardiography and Stress Echo.

Note: Echocardiography authorization is only required for STAR Kids and STAR+PLUS members.

Phone: 1-800-642-7554 Website: www.RadMD.com

## **Interventional Pain Management (IPM)**

Prior authorization for outpatient IPM procedures is required for:

Spinal Epidural Injections.

- Paravertebral Facet Joint Injections or Blocks.
- Paravertebral Facet Joint Denrvation (Radiofrequency Neurolysis).
- Sacroiliac Joint Injections.

Phone: 1-800-642-7554 Website: www.RadMD.com

## **Musculoskeletal Surgical Procedures**

Prior authorization is required for the certain Musculoskeletal surgical procedures in both inpatient and outpatient settings. To verify if a service requires prior authorization, please visit <a href="https://www.SuperiorHealthPlan.com/providers/preauth-check.html">www.SuperiorHealthPlan.com/providers/preauth-check.html</a>.

Telephonic Intake: 1-855-336-4391
 Facsimile Intake: 1-833-409-5393

# Bin Number: 004336; Group ID: RX5458 https://www.envolvehealth.com/pharmacy Prior Authorization Requests Pharmacy Appeals Pharmacy Appeals Pin Number: 004336; Group ID: RX5458 https://www.envolvehealth.com/pharmacy Phone: 1-866-399-0928 Fax: 1-866-399-0929 Website: www.SuperiorHealthPlan.com/providers/resources/pharmacy.html Phone: 1-800-218-7453, ext. 22168 Fax: 1-866-918-2266

For the most current Provider Manual and Prior Authorization list, please visit SuperiorHealthPlan.com.

Phone: 1-800-460-8988

Resolution Help Desk

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