## **Acute Care/Hospital Quick Reference Guide**



General Information			
Secure Provider Portal Please visit the Secure Web 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 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.	Relay Texas (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	TexasProviderComplaints@SuperiorHealthPlan.com		

### Claims Submission and Claims Payment

### Providers may submit claims in three ways:

- 1. Secure Web Portal Provider.SuperiorHealthPlan.com
- 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.

Initial, Resubmission, Corrected or Reconsiderations Superior HealthPlan P.O. Box 3003 Farmington, MO 63640-3803

Payor ID: 68069

Claim Appeals Superior HealthPlan 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)

### EFT/ERA - PaySpan Health

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

### Secure Provider Portal Help Desk

Phone: 1-866-895-8443

Email: TX.WebApplications@SuperiorHealthPlan.com

### **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 SuperiorHealthPlan.com/JoinOurNetwork

Network Development Email: <u>SHP.NetworkDevelopment@SuperiorHealthPlan.com</u>

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

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### **Provider Re-credentialing**

Email: <u>Credentialing@SuperiorHealthPlan.com</u>

Fax: 1-866-702-4831

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

#### **Provider Authorizations**

Providers may submit authorizations in three ways:

- 1. Secure Provider Portal: Provider.SuperiorHealthPlan.com
- 2. Fax: 1-800-690-7030
- 3. Call: 1-800-218-7508

NICU and Emergent I	lospital Admission I	Notification and	Authorization

STAR, STAR+PLUS, STAR Kids, STAR Health, CHIP  1-855-594-6103 STAR/CHIP Inpatient (fax): 1-877-650-6942	Products	Business Line
	STAR, STAR+PLUS, STAR Kids, STAR Health, CHIP	

### **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 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: RadMD.com

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

Effective January 1, 2021, 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: RadMD.com

### Musculoskeletal, Ear, Nose and Throat (ENT) and Sleep Study, and Cardiac Surgical Procedures

Prior authorization is required for certain Musculoskeletal Surgical, Ear, Nose and Throat (ENT) and Sleep Study, and Cardiac Surgical Procedures in both inpatient and outpatient settings. To verify if a service requires prior authorization, please visit SuperiorHealthPlan.com/PriorAuth.

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

### Pharmacy Benefits Manager – Envolve Pharmacy Solutions

Bin Number: 004336; Group ID: RX5458

<u>Envol</u>	EnvolveHealth.com/pharmacy	
	Phone: 1-866-399-0928	

Prior Authorization Requests

Fax: 1-866-399-0929

Website: SuperiorHealthPlan.com/ProviderPharmacy

Pharmacy Appeals

Phone: 1-800-218-7453, ext. 22168
Fax: 1-866-918-2266

Resolution Help Desk Phone: 1-800-460-8988

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

SuperiorHealthPlan.com

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