

STAR+PLUS/LTSS Quick Reference Guide



General Information	
Provider Services 1-877-391-5921 Relay Texas (TTY): 1-800-735-2989 or 711	Website SuperiorHealthPlan.com
Member Services and After Hours (24-Hour Nurse Advice Line) 1-877-277-9772 Relay Texas (TTY): 711	Secure Provider Portal Provider.SuperiorHealthPlan.com
State Fair Hearing Requests Hotline 1-877-398-9461	Secure Provider Portal Help Desk Phone: 1-866-895-8443 Email: TX.WebApplications@SuperiorHealthPlan.com
Provider Contracting	
Phone: 1-866-615-9399, ext. 22534 Email: SHP.NetworkDevelopment@SuperiorHealthPlan.com Web: SuperiorHealthPlan.com/JoinOurNetwork	
Claims Submission – Acute Care Services and LTSS (Non-dual)	
Providers may submit claims in three ways: 1. Secure Provider Portal: Provider.SuperiorHealthPlan.com 2. EDI: 1-800-225-2573, ext. 25525, Payor ID: 68069 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 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 To register for this free service, call 1-877-331-7154 or visit payspanhealth.com/ .	

STAR+PLUS/LTSS Quick Reference Guide



Prior Authorization – LTSS Service Coordination (E.g. PAS, DAHS, ERS)	
Phone: 1-877-277-9772 Fax : All LTSS (Fax) - Day Activity and Health Services (DAHS): 1-877-441-5811 - STAR+PLUS Medicare-Medicaid Plan (MMP): 1-855-277-5700 - STAR+PLUS (Medicaid): 1-866-895-7856 - Medical Necessity Level of Care (MNLOC) Physician's Signature and Provider Statement of Need (PSON) forms only: 1-866-703-0502	
Prior Authorization - Acute Care Services (Non-Dual) (E.g. In-home skilled nursing, PDN, most DME)	Prior Authorization - Acute Care Services (Dual) (E.g. In-home skilled nursing, PDN, most DME)
MMP (Fax): - Inpatient: 1-877-259-6960 - Outpatient (standard): 1-877-808-9368 - Incontinence: 1-800-690-7030 - BH (Inpatient): 1-866-900-6918 - BH (Outpatient): 1-855-772-7079 Expedited (Phone): 1-800-218-2508 STAR+PLUS (Fax): - Inpatient: 1-877-650-6942 - Outpatient: 1-800-690-7030 - Behavioral Health (Inpatient): 1-866-900-6918 - Behavioral Health (Outpatient): 1-855-772-7079	Medicare (Fax): - Inpatient: 1-877-808-9368 - Concurrent: 1-877-259-6960
Electronic Visit Verification	
Web: https://hhs.texas.gov/laws-regulations/handbooks/evvp/h/section-2000-programs-services-billing Email: Electronic_Visit_Verification@hhsc.state.tx.us	
For the most current Provider Manual and Prior Authorization list, please visit SuperiorHealthPlan.com .	