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Quick Reference Guide

Simplify Office Administrative Tasks

Keep our Quick Reference Guide nearby to make pre-visit planning and post-visit tasks quick and easy.

Website

SuperiorHealthPlan.com

- Patient care forms
- Pre-Auth Needed tool
- Provider news

- Provider manual
- Preferred drug list
- Member resources

Secure Provider Portal Provider.SuperiorHealthPlan.com

- Verify member eligibility
- Access patient health records •
- View patient care gaps
- Manage prior authorizations
 - Submit and manage claims
- Obtain provider resources

Check Member Eligibility

- Secure Provider Portal
- Provider Services: 1-877-391-5921
- TTY: 711

Patient Care Gaps

Find recommended services that a member has not completed.

- 1. Visit the Secure Provider Portal.
- 2. Review patient information for any gaps in care.
- 3. Plan to address care gaps during an upcoming office visit.

Pre-Visit Planning Checklist

✓ Verify member eligibility.

Check for patient care gaps and address them during an upcoming office visit.

Use Pre-Auth Needed tool to determine if prior authorization is needed before appointment.

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Prior Authorization

Use the Pre-Auth Needed tool on our website to determine if prior authorization is required.

Submit prior authorization requests via:

- Secure Provider Portal
- Medical Fax: 1-855-537-3535 (Inpatient) 1-877-808-9368 (Outpatient)
- Behavioral Health Fax: 1-866-900-6918 (Inpatient) 1-855-772-7079 (Outpatient)
- Phone: 1-800-218-7508

Claims

Timely Filing guidelines: 95 days from date of service.

Claims can be submitted via:

- Secure Provider Portal
- Clearinghouses: EDI Payor ID 68069
- Mail paper claims to:

Wellcare by Allwell Attn: Claims P.O. Box 3060 Farmington, MO 63640-3822

Other Partners

To contact our other health services partners:

- Dental: 1-855-586-1417
- Vision: 1-800-334-3937

Questions? Call Provider Services at 1-877-391-5921.