



AmeriHealth Caritas VIP Care, a Medicare Advantage Dual Special Needs plan, is pleased to announce we began enrolling members in Delaware on January 1, 2023. As a participating provider in this plan, we wanted to welcome you. We are here to serve you, so we are hoping you will find the information below useful as you begin to see our members.

What is a Medicare	A Dual Special Needs Plan (D-SNP) is a type of Medicare Advantage plan designed for				
Advantage Dual Special	individuals who are entitled to both Medicare and medical assistance from a state plan				
Needs plan?	under Medicaid.				
What services are covered	This is a Medicare part C plan, which covers the same services as Medicare parts A and				
under this plan?	B, as well as part D and supplemental benefits, such as routine hearing/vision/dental,				
	transportation, OTC medications/supplies, fitness club membership and much more.				
Eligibility Verification	It is especially important to verify the eligibility of a dual eligible at every encounter due				
	to special enrollment guidance which allows them to change plans quarterly. You may				
	call Provider Services at the number below or verify in our provider portal, NaviNet.				
Identification Card	Ameriliaelth Carritad VIP Care	lealth Caritas VIP Care (HMO-SNP)	AmeriHealth Cavitas VIP Care	www.amerihealthcaritasvipcare.com/de	,
	Member ID# PCP P	Name> hone Number>	Members: Call Member Services at 1-833-433-3767 (TTY 711) or visit our website at www.amerihealthcaritasvipcare.com/de. Providers: Call 1-833-433-2177	Pharmacists: RX ID is the Member ID For Pharmacy Benefit Information: Members call: 1-833-879-3767 Pharmacies call: 1-833-376-7790	
	RX BI	iption Drug Info: I 019587 N PRX01815	DO NOT bill Original Medicare. Submit Claims Toc Processing Center P.O. Box 7125	Submit Prescription Claims To: PerformRv/AmeriHealth Caritas VIP Care P.O. Box 516 Essington, PA 19029	
	Cost sharing/copays: \$0 for doctor	dicareR	London, KY 40742-7125	Coverage by Amerikalth Find	
Provider Network	For contracting or credentialing questions contact an Account Executive at:				
Management	ACDEVIPNext@amerihealthcaritas.com				
Provider Services	1-833-433-2177	www.amerihealthcaritasvipcare.com			
Claims and Provider	AmeriHealth Caritas VIP Care Provider				
Correspondence	PO Box 7125	<u>.navinet.net</u>			
Address	London, KY 40742-7125 Portal				
Electronic Claims / EFT / ERA	Visit Change Healthcare at <u>www.changehealthcare.com</u> under				
	Enrollment Services or call:			Dever	07400
	Electronic billing: 1-877-363-3666			Payer ID	87406
	EFT/ERA enrollment: 1-866-506-2830				
What claims to file and how	 Submit claims for Medicare covered services only. 				
	Medicaid-only services and secondary payments (such as deductibles and				
	coinsurance) should be sent to the appropriate Medicaid payor.				
Timely Filing Deadline	365 calendar days from the date of service.				
Prior Authorization Phone/Fax Numbers	Medical: 1-833-637-3386 Fax: 1-833-329-8601				
	Behavioral health: 1-833-727-3301 Fax: 1-866-329-3324				
	Radiology contact NIA:1-800-424-1665www.radmd.com				
Balance Billing	Members in this plan are classified as Qualified Medicare Beneficiaries (QMBs) and				
	cannot be balance billed per Section 1902(n)(3)(B) of the Social Security Act, as				
	modified by 4714 of the Balanced Budget Act of 1997. Medicare providers cannot				
	collect Medicare Parts A and B deductibles, coinsurance, or copays from members				
	enrolled as a QMB.				