

PROVIDER QUICK REFERENCE GUIDE

Phone: 1-844-239-7387

Web: mmp.michigancompletehealth.com

PROVIDER SERVICES

Contact the Provider Services Department at 1-844-239-7387 for assistance with the following services:

- Answer questions regarding claim status
- Provider education
- Network participation
- Member eligibility
- Change, update, or correct demographic information

Providers can visit mmp.michigancompletehealth.com to access the following:




- Provider manual
- Provider forms
- Wellness information
- Clinical guidelines
- Provider Report newsletter

* If you are not able to access the Provider Portal, please contact Provider Services

The following information is available via the secure portal at provider.michigancompletehealth.com/sso/login:

- Member eligibility
- PCP verification
- Submit claims
- Claims inquiry
- Request prior authorization for service
- View PCP panel (patient list)

MEMBER IDENTIFICATION CARD

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|  |  |
| <p>Member name: Cardholder Name Member ID: Cardholder ID# Health Plan (80840): Card Issuer Identifier Beneficiary ID: Medicaid ID#</p> <p>PCP Name: PCP Name PCP Phone: PCP Phone</p> <p>MEMBER CANNOT BE CHARGED Copays: \$0 H9487 001</p> |  <p>RxBIN: 004336 RxPCN: MEDDADV RxGRP: RX8142</p> |

In case of emergency, call 911 or go to the closest emergency room. After treatment, call your Care Coordinator within 48 hours or as soon as possible.

Member Services: <1-844-239-7387 (TTY: 711)>
 24 Hour Nurse Advice Line: <1-844-239-7387 (TTY: 711)>
 Pharmacy Help Desk: <1-888-865-6567>
 Pharmacy Prior Auth: <1-800-867-6564>
 Website: <<https://mmp.michigancompletehealth.com>>
 Behavioral Health Services: <Wayne County: 1-800-241-4949
 or Macomb County: 1-855-996-2264 (TTY: 711)>
 24 Hr Behavioral Health Crisis Line: <Wayne County: 1-800-241-4949
 or Macomb County: 1-855-927-4747 (TTY: 711)>

Send Claims To: <Medical Claims: Michigan Complete Health
 PO Box 3060
 Farmington, MO 63640-3822
 Payer ID: 68069
 Pharmacy Claims: Michigan Complete Health
 PO Box 419069
 Rancho Cordova, CA 95741>

Claim Inquiry: <1-844-239-7387 (TTY: 711)>

CLAIMS SERVICES

Electronic Submission

For processing efficiency and cost savings to the providers, Michigan Complete Health encourages its providers to file claims electronically. The Payor ID is 68069.

Participating providers may receive Electronic Funds Transfers (EFT) and Electronic Remittance Advise (ERA) from Michigan Complete Health, to do so the provider must register with PaySpan by contacting 1-877-331-7154 or visit www.payspanhealth.com.

Paper Claims Submissions

Paper claims, corrections, requests for reconsiderations and claim disputes can be sent to:

Michigan Complete Health Medicare-Medicaid Plan
 Attn: (Claims, Correction, Request for Reconsideration, or Dispute)
 PO Box 3060
 Farmington, MO 63640

Corrected Claims

Corrected claims must be clearly marked as such to avoid denials as duplicate claim submission.

Request for Reconsideration

A request for reconsideration is a written communication from the provider about a disagreement in the way a claim was processed. The request must include sufficient identifying information which includes, at a minimum, the member name, patient ID number, date of service, total charges, provider name, and supporting documentation.

Claim Disputes

A claim dispute is to be used only when a provider has received an unsatisfactory response to a request for reconsideration. Submit original denial and necessary supporting documentation.

Timely Filing

Providers must submit all claims and encounters within 180 calendar days of the date of service. When Michigan Complete Health is the secondary payer, claims must be received within 180 calendar days of the final determination of the primary payer.

All requests for reconsideration, corrected claims, or claim disputes must be received within 60 calendar days from the date of notification of payment or denial is issued.

MEDICAL MANAGEMENT

The Medical Management team handles utilization management and care coordination. Authorizations must be obtained prior to the delivery of certain elective and scheduled services. For more information on services that require prior authorization, please visit our website at mmp.michigancompletehealth.com

Prior Authorization

Providers may utilize our secure portal, call Medical Management at 1-844-239-7387 or fax 1-833-783-3187 to obtain an authorization.

Care Coordination

The Care Coordinators work collaboratively with Primary Care Physicians (PCPs) and other members of the Intergrated Care Team. The Care Coordinators develop a person-centered treatment plan, provide services and supports to members, coordinate care, and expedite access to needed services. Michigan Complete Health also has specialized Care Coordinators that are trained to assist with the discharge planning process in collaborating with nursing facility staff, custodial care staff and hospital staff. Contact the Care Coordination team at 1-844-239-7387.

MEMBER SERVICES

Members can visit our website to access our Member Handbook and learn more about our programs and services. To talk to a representative, Member Services is available at 1-844-239-7387 Monday through Friday 8:00 AM to 8:00 PM

- Find a doctor
- Benefits
- Eligibility
- ID card replacement
- PCP changes

VENDOR SERVICES

You may access vendor services by calling 1-844-239-7387 and selecting the correct prompt or by using the direct number below:

Envolve - Pharmacy

Phone: 1-888-865-6567

RxBIN: 004336

Envolve Dental – Dental

Phone: 1-833-737-6655

LogistiCare - Transportation

Phone: 1-877-564-5905

NVA - Vision

Phone: 1-888-723-6009

Web: www.e-nva.com

Email: provider@e-nva.com

PaySpan – EFT/ERA

Phone: 1-877-331-7154

Web: www.payspanhealth.com

PIHP - Behavioral Health

Detroit - Phone: 1-800-241-4949

Macomb – Phone: 1-855-996-2264