



Plan Info	BIN: 004336 PCN: MCAIDADV RxGroup: RX5459, RX 5460 – CHIP599 Unborn	BIN: 610494, PCN: 4444, RxGroup: ACUNE (ACUNEUB – CHIP599 Unborn)	BIN: 020107 PCN: NE RXGroup: RX8474
Eligibility Line	1-844-385-2192	1-866-331-2243	1-833-388-1406
Help Desk #	1-888-321-2351	1-877-231-0131	1-833-388-1406
Prior Authorizations	Phone: 1-844-330-7852 Fax: 1-866-399-0929 Web: https://www.covermymeds.com/epa/envolverx	Phone: 1-800-310-6826, Fax: 1-866-940-7328 www.unitedhealthcareonline.com	Phone: 1-833-388-1406 Fax: 1-833-370-0702
PDL/Formulary	www.nebraskatotalcare.com/providers/pharmacy.html	https://www.uhccommunityplan.com/	provider.healthybluene.com/nebraska-provider/resources/prior-authorization
Vaccines	Covid-19, Flu, diphtheria, tetanus, pertussis, meningococcal, pneumococcal, human papillomavirus for 19 and older, Shingrix for 50 and older.	Flu and pneumococcal ages 19 and older (Incentive amount: \$10, Reason service code: MA)	Hepatitis A, Flu, MMR, Pneumococcal & Tetanus-Diphtheria covered for age 19 and up; Shingrix and Zostavax covered for age 50 and up; HPV/Gardasil covered for age 19 to 45
DME	OneTouch Verio meters and test strips are preferred. POS: Glucometers, Blood glucose testing strips, Lancets, Alcohol swabs, Needles and syringes, Sharps containers, Spacers, Diabetic Testing solution, Ketostix, Aerochambers, Respiratory Saline for nebulizer	One Touch is preferred. POS: Glucometers, Blood glucose testing strips, Lancets, Alcohol swabs, Needles and syringes, Spacers, Diabetic Testing solution, Ketostix, Aerochambers, Respiratory Saline for nebulizer.0.9%	Preferred Diabetic Meter/Monitors: True Metrix Monitors Preferred Diabetic Test Strip: True Metrix Test Strips Other DME Covered through Pharmacy POS: glucometers, blood glucose test strips, lancets, alcohol swabs, needles and syringes, spacers/aerochamber, ketostik , CGM supplies
MTM	1-877-237-0050 or https://www.outcomesmtm.com/	https://www.outcomesmtm.com/	In-house services
MAC Concerns	Access the Pharmacy Portal at: rxservices.cvscaremark.com Or email RxServices@CVSHealth.com	1-877-633-4701 (opt 7) or email: rxreimbursement@optum.com	833-370-0679



Specialty Pharmacy List	www.nebraskatotalcare.com/providers/pharmacy.html	In progress	Our specialty pharmacies include: PERFORMSPECIALTY LLC, CHI HEALTH SPECIALTY PHARMAY, INGENIORX SPECIALTY PHARMACY
Specialty Pharmacy Contracting	Email: RS4054@CVSHealth.com Pre enrollment questionnaire link: https://cvs.az1.qualtrics.com/jfe/form/SV_cvY0ohqT2VXyod?Q_JFE=qdg	email: orx_specialty_pharmacy_network_request@optum.com	Email Address to initiate enrollment in specialty network: AnthemSpecialtyNetworks@CVSHealth.com. Pharmacy should indicate pharmacy name, NCPDP #, contact information for pharmacy.
Retail Contracting	1-866-488-4708	1-877-633-4701 (opt 2) or email: provider.relations@optum.com	Enrollment Application: www.caremark.com/pharminfo If there are enrollment questions, pharmacies can use the "enrollment self-service/pharmacy provider question form" found at caremark.com/pharmacy
DME Contracting	844-385-2192 (ask for contracting) or email: networkmanagement@nebraskatotalcare.com	1-866-331-2243 or email: nebraska_pr_team@uhc.com	NENetworkDev@healthybluene.com
DME Web Submission Instructions	Web based claim submission is available to providers who are registered with NTC: https://www.nebraskatotalcare.com/providers.html	Web based claim submission is available to providers who are registered with UHC: http://www.uhccommunityplan.com/health-professionals/ne/members-information.html	Provider Manual (https://provider.healthybluene.com/docs/gpp/NE_CAID_ProviderManual.pdf?v=202101261648) Healthy Blue Provider Website Link: https://provider.healthybluene.com/nebraska-provider/resources/learn-about-availability
DME EDI Submission Instructions	Providers will set up an account through their clearinghouse utilizing the Nebraska Total Care EDI payer ID 68069.	Accepting several clearinghouses including: Web MD ENVOY, Medavant, and ENSHealth. Further information on support for the EDI claim submission is available at the following link: http://www.uhccommunityplan.com/health-professionals/ne/electronic-data-interchange.html United Health Care EDI Payer ID 87726	Clearinghouse Submission: You can submit electronic claims through Electronic Data Interchange (EDI). You must submit claims within 180 calendar days from the date of discharge for inpatient services or from the date of service for outpatient services. Because of the importance of Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) screenings and the collection of data related to these services, we encourage you to submit EPSDT claims as soon as possible within the timely filing period. For more information about how to exchange electronic transactions, call the EDI Hotline at 1-800-470-9630 Monday to Friday, from 8 a.m. to 4:30 p.m. Eastern time, or email e-solutions.support@healthybluene.com .
DME Paper Submission Instructions	Providers can submit paper claims with or without supporting documentation to the claims address below: Nebraska Total Care PO Box 5060 Farmington, MO 63640-5060	Paper claims with supporting documentation may be submitted to the following address: UnitedHealthcare PO Box 31365 Salt Lake City, UT 84131	Paper Claims Submission You must submit a properly completed CMS-1450 or CMS-1500 (02-12) claim form: Within 180 calendar days from the date of discharge for inpatient services or from the date of service for outpatient services; EPSDT screening claims should be filed as soon as possible within the timely filing period. On the original claim form with "drop out" red ink. Computer-printed or typed. In a large, dark font. Submit paper claims to: Healthy Blue, P.O. Box 61010 Virginia Beach, VA 23466-1010
DME Copays	No copay on DME products and supplies	No copay on DME products and supplies	Healthy Blue Prime members have a value-added benefit that waives co-pays for DME that are covered by NE Medicaid.