



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	VIP Care  Member Name P <member name=""></member>	meriHealth Caritas VIP Care (HMO-SNP)	VIP Care  Members Call Member Services at 1 1-4553-453-576 (TIP) or viet our veteble at www.amerblacharbanipacare.com/de.  Providers: Call 1-833-433-2177 DN NOT bill Original Medicare.  Submit Claims To: Submit Claims To:	www.amerihealthcaritasvipcare.com/de Pharmacists: RX ID is the Member ID For Pharmacy Benefit Information:	
	<123456789> <	PCP Number>		Members call: 1-833-879-3767 Pharmacies call: 1-833-376-7790	
	(80840) 7427051066 P	Prescription Drug Info: IX BIN 019587 IX PCN PRX01815		Submit Prescription Claims To: PerformRu/AmeriHealth Caritas VIP Care P.O. Box 516 Essington, PA 19029	b/AmeriHealth Caritas VIP Care 516
	Visits and hospital stays H0738_001	MedicareR		Coverage by Amerikealth First	
Provider Network	For contracting or credentialing questions contact an Account Executive at:				
Management	ACDEVIPNext@amerihealthcaritas.com				
Provider Services	1-833-433-2177 Website www.amerihealthcaritasvipcare.com				
Claims and Provider	AmeriHealth Caritas VIP Care				
Correspondence	PO Box 7125	NaviNet - www.navinet.net			
Address	London, KY 40742-7125  Portal				
Addiess	Visit Change Healthcare at <a href="https://www.changehealthcare.com">www.changehealthcare.com</a> under				
Electronic Claims / EFT / ERA	Enrollment Services or call:	'			
	Electronic billing: 1-877-363-3666				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: 1-800-424-1665 <u>www.radmd.com</u>				
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.				
		3 deductibles, o	coinsurance, or co	opays from mem	oers