


AmeriHealth Caritas VIP Care, a Medicare Advantage Dual Special Needs plan, is pleased to announce we began enrolling members in Florida 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 Advantage Dual Special Needs plan?	A Dual Special Needs Plan (D-SNP) is a type of Medicare Advantage plan designed for individuals who are entitled to both Medicare and medical assistance from a state plan under Medicaid.		
What services are covered under this plan?	This is a Medicare part C plan, which covers the same services as Medicare parts A and 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. We are also contracted with the Agency for Health Care Administration (AHCA) to administer payment of Medicaid benefits.		
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			
Provider Network Management	For contracting or credentialing questions contact an Account Executive at: DSNP_INQUIRIES@AMERIHEALTHCARITASFL.COM		
Provider Services	1-833-350-3477	Website	www.amerihealthcaritasvipcare.com
Claims and Provider Correspondence Address	AmeriHealth Caritas VIP Care PO Box 7155 London, KY 40742-7155	Provider Portal	NaviNet - www.navinet.net
		Timely Filing Deadline	365 calendar days from the date of service.
Electronic Claims / EFT / ERA	Visit Change Healthcare at www.changehealthcare.com or call: Electronic billing: 1-877-363-3666 EFT/ERA enrollment: 1-866-506-2830	Payer ID	88232
What claims to file and how	<ul style="list-style-type: none"> For services covered by both Medicare and Medicaid, please submit only one claim, filing it as you would to Medicare. We will process the Medicare benefit and automatically crossover the claim to process under the Medicaid benefit. For services covered only by Medicaid, file the claim as you would file it to Medicaid. 		
Prior Authorization Phone/Fax Numbers	Medical: 1-833-435-8686 Behavioral health: 1-833-727-3301 Radiology contact NIA: 1-800-424-4922	Fax: 1-833-329-3586 Fax: 1-833-329-3524 www.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.		