



# Filing an Authorization-Related Claims Appeal for WellCare Medicare Providers



This process is for all claim denials for lack of prior authorization, services exceeding authorization, lack of supporting documentation and late notification.

## Guidelines

1. WellCare encourages providers to contact the **Provider Hotline at 1-866-579-8006** to resolve any issues that may arise.
2. If an issue cannot be resolved, WellCare has established a unique Claims Appeal process that permits providers to dispute WellCare's decisions on claims denials for authorization-related reasons. (A separate process exists for claims appeals that are not authorization-related.)

▶ *Claims appeals must be filed, in writing, to the Appeals department within 90 days of the date of the Explanation of Benefits or the Provider Administrative Denial letter.*

## Two ways to file:

### MAIL

WellCare Health Plans Inc.  
Attn: Appeals  
P.O. Box 31368  
Tampa, FL 33631-3368

### FAX

1-866-201-0657

## Authorization-Related Claims Appeals Process

- Step 1** WellCare completes a thorough investigation of every authorization-related claims appeal received using applicable statutory, regulatory and contractual provisions.
- Step 2** If the appeal is found lacking adequate information to make a decision, WellCare notifies the provider, in writing, of the information needed. The provider has 60 days from the date of that notification to forward the necessary information to WellCare.
- Step 3** WellCare notifies the provider of the outcome of the claims appeal, in writing, via a determination letter within 30 business days of receiving the request. If the decision is adverse to the provider, a provider appeal uphold letter is sent to the provider.
- Step 4** WellCare processes and finalizes all appealed claims to a paid or denied status within 30 business days of receipt of the appealed claim.

Please see the WellCare Provider Manual for additional information. Visit our Web site at [www.wellcare.com](http://www.wellcare.com) for regular updates.