



HARMONY HEALTH PLAN QUICK REFERENCE GUIDE – MISSOURI MEDICAID

Harmony Office Hours are Monday - Friday 8:00 am - 5:00 pm

Important Telephone Numbers

Utilization Mgmt (Authorizations)	(866) 822-1340	Member Services	(866) 822-1340
Swansea Office 13 Wolf Creek Drive- Suite 4 Swansea, IL 62226	(618) 641-4600- Local (888) 860-1607- Toll-free (618) 233-3621- Fax	Member Voice Mail	(877) 630-2225 – vm box #
Transportation Services	(866) 745-6714	FTP Reporting Password/IT assistance	(800) 960-2530 ext 2222
Mental Health & Substance Abuse	(888) 684-2026	Bridgeport Dental	(877) 394-9994
Pharmacy	(800) 392-8030	Enrollment Line	(800) 348-6627 #17
Provider Services Center • Eligibility verification • Claims inquiries • Provider issues	(866) 822-1340	WellCare Website • 24 hour access • Eligibility verification • Claims inquiries	www.harmonyhpm.com

Submitting Claims

EDI Payer ID Information: WebMD Payer ID#: 1416 <i>WebMD EDI Hotline: 800-845-6592</i> <i>EDI Point of Contact: 800-960-2530 ext. 1342</i> SSI Payer ID#: 14163 ACS Payer ID#: 77004	Paper Medical Claims Submissions: WellCare P.O. Box 31372 Tampa, FL 33631-3372
Behavioral Health/Substance Abuse Claims Submissions: Harmony Behavioral Health P.O. Box 31372 Tampa, FL 33631-3372	Online Services: www.harmonyhpm.com (800) 504-2766 Ext. 1346 for assistance (813) 262-2927 (Fax)

Managing the Referral Process

Fax all referrals for services listed below, as soon as possible, to Harmony Utilization Management at **the numbers below or call (866) 334-6876 with questions. When generating a referral, be very specific about the reason for the referral and the number of visits.**

General Referral Guidelines

- Physician and Hospital Providers can request Notifications and/or Authorizations.
- All requests for notification or authorization can be faxed to WellCare at:
 - ◆ **Inpatient Services: (877) 431-8860**
 - ◆ **Outpatient Services: (888) 865-6530**
 - ◆ **DME, PT, OT, ST: (888) 865-6532**
 - ◆ **Prenatal Care: (866) 480-0857**
- Routine office labs, office x-rays, PCP visits, participating specialist visits, immunizations and EKGs do **not** require notification or authorization.
- Routine non-surgical outpatient services at contracted hospitals do **not** require notification or authorization.

Authorization Required: Need to obtain authorization number from the plan

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| <ul style="list-style-type: none"> • <u>Advanced radiology: CT, CTA, MRA, MRI, PET and SPECT scans</u> • <u>All out-of-network and non-contracted services (physician, hospital, ancillary, outpatient)</u> • Adult day care • Air ambulance in non-emergent situations • Cardiac/pulmonary rehabilitation program • Contact lenses • Court ordered services • Dental services (through contracted vendor) • Durable medical equipment, orthotics, prosthetics over \$200 • Formula (medically necessary) • Genetic testing • Global OB care • Health education programs • Hearing services • Home health care services • Hospice care services • Hospital observation and admissions • Inpatient mental health and alcohol/substance abuse | <ul style="list-style-type: none"> • New technology and experimental procedure • Nutritional counseling • Occupational, physical and speech therapy services after initial 3 visits • Pain management • Personal care services • Rehabilitation facility admissions • Respiratory therapy services • Sterilization procedures (consent form required) • Skilled nursing facility admissions • Surgical procedures, including but not limited to, ambulatory surgery, cosmetic surgery, oral surgery <ul style="list-style-type: none"> ▪ Specific surgical procedures REQUIRE second opinion (Codes 66840-66920, 66983-66984) • Termination of pregnancy • Transplant Care • Vision tracking (92065) <p><i>Note: Authorizations are for medically necessary services only; not a guarantee of payment. Eligibility will be investigated prior to payment. Payment is subject to limitations and exclusions of the member's contract.</i></p> |
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**Notification Required: Request is for services with contracted, participating providers ONLY.
No authorization number is given by plan nor required for claims payment.**

- Dialysis (first visit only)
- Outpatient Physical, Occupational, and Speech Therapy (initial 3 visits with notification only; additional therapy subject to authorization)

Case Management

Notify Harmony's UM Staff about Members with acute or chronic conditions that would benefit from case management. Case managers improve patient compliance and keep providers informed of overall health progress.

Specific Disease Management programs exist for asthma, diabetes and CHF.
For information and/or enrollment in these programs, please call (866) 593-2538.

OB Notification/Harmony Hugs

Report all confirmed pregnancies to Harmony's UM staff as soon as you become aware of these.

Harmony offers a case management program for expectant Members called "Harmony Hugs". The "Harmony Hugs" program includes:
High risk screening and case management
Prenatal and infant care education
Gift incentives for keeping prenatal appointments

For information on Harmony Hugs, please call (866) 776-9876, option 3.

Laboratory Services

Harmony has contracted with several laboratories including its participating hospitals. To establish a Harmony Laboratory account, please contact any of the following laboratories. To obtain a list of additional laboratories contact Harmony Provider Services.

- Quest Diagnostic Laboratories (800) 323-5917
- Tri-Lab (800) 218-3899
- Diagnostic Cytology Laboratories (800) 854-4008
- LabCorp (800) 597-8026 x3130
- Medical Diagnostic Lab (MDI) (618) 233-0522

Reminder - Ask your laboratory representative to inform you about their services including, but not limited to, TURN AROUND TIME FOR TEST RESULTS, STAT TEST AND ROUTINE test. Also inquire about DRAW SITES and /or PATIENT SERVICE CENTERS AVAILABLE and SCHEDULE SPECIMEN PICK-UP TIMES.

Pharmacy Services

Pharmacy services are covered by the MHD Fee-For-Service Pharmacy Program.

- Members should contact the Participant Services Unit at 1-800-392-2161 with questions regarding their pharmacy benefits. The hours are Monday through Friday 8:00 a.m. to 5:00 p.m.
- Providers should contact the Pharmacy Help Desk at 1-800-392-8030. The hours are Monday through Friday 8:00 a.m. to 9:00 p.m., Saturday and Sunday 9:00 a.m. to 6:00 p.m.

For Appeals

Please submit appeals to the following address:

WellCare Health Plans, Inc.
P.O. Box 31368
Tampa, Florida 33631-3368
FAX: (866) 201-0657