

## **FOR DATES OF SERVICE BEGINNING 08/01/2019**:

IntegraNet Health through our agreement with Amerivantage/Amerigroup –all Medicare Advantage Plans, <u>except PPO</u>, for members of our Primary Care Physicians are delegated to IntegraNet Health for claims payment.

\*Note: Prior to 8/1/2019, claims should be filed with Amerivantage/Amerigroup

- Use Availity Provider Portal to verify eligibility and claims payor: <a href="https://www.availity.com/">https://www.availity.com/</a>
- Questions regarding the members Benefits Package contact Amerigroup: +1 (800)-600-4441
- ➤ Verify provider network status with IntegraNet visit our <u>Provider Directory</u> on our website
- > Timely filing for In-Network providers: 95 days from date of service

#### **CLAIMS PORTAL**

- Submit claims electronically
- Check the status of an existing claim
- Download EOP's and/or 835 remittances

- Check eligibility
- Available to Network and Non-Network providers

Self-Register: <a href="https://visibiledi.com/integranet/Account/Register">https://visibiledi.com/integranet/Account/Register</a>

Additional claims information – including the Enrollment Packet: <a href="https://www.integranethealth.com/">https://www.integranethealth.com/</a>

## **PAPER CLAIMS**

- ✓ Original, red and white CMS-1500 or CMS 1450 with black machine printed text
- ✓ Attachments must be on 8.5"x11" paper accompanied by valid claim form
- ✓ No photocopies or altered claims will be accepted.

HOW TO SUBMIT A NEW CLAIM, CORRECTED CLAIM, OR RESUBMIT A CLAIM		
Paper Claim	Electronic Claim	Payor ID
1813 W. Harvard Ave Suite 204	Provider Portal <a href="https://visibiledi.com/integranet/Account/Register">https://visibiledi.com/integranet/Account/Register</a>	INET1 INET2 – Trizetto Only
Roseburg, OR 97471		*Contact your clearing house directly for variations of this payor ID

Claims Processing Department Customer Service: (541)-464-6296

Problems with Provider Portal submit a web-ticket (not for claim submissions):

Provider portal & Appeal Status form INet Claims Appeals, Reconsiderations & Anthem Priority form

https://form.jotform.com/210288349839064 https://form.jotform.com/210314750232138

# DO NOT SUBMIT PAPER/ELECTRONIC CLAIMS TO APPEAL AND RECONSIDERATIONS THESE WILL NOT BE PROCESSED FOR PAYMENT

Appeals and Reconsiderations (also see Appeals FAQ): Fax (832)-320-7221

#### PRIOR AUTHORIZATION

Providers are solely responsible for and are strongly encouraged to verify authorization requirements <u>prior</u> to rendering service. All questions regarding prior authorization call: **Utilization Management: 281-591-5289.**Amerigroup's **PLUTO** tool can be used to determine the possible authorization requirements

https://providers.amerigroup.com/Pages/PLUTO.aspx \*\* this tool is NOT a guarantee of coverage\*\*

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