



# AMBETTER QUICK REFERENCE GUIDE

## COORDINATED CARE CORPORATION

### JANUARY 2026

#### Convenient Self-Service

Ambetter understands that having access to the right tools can help you and your staff streamline day-to-day administrative tasks. **The Provider Portal is the fastest way to get help with those routine tasks.** Keep this Guide accessible to make pre-visit planning and post-visit tasks quick and easy.

|                                                       | Portal                       | (IVR) Interactive Voice Response |
|-------------------------------------------------------|------------------------------|----------------------------------|
| Authorization Requirements/Status                     | <b><u>Fastest Result</u></b> | Available                        |
| Authorizations Request                                | <b><u>Fastest Result</u></b> | N/A                              |
| Benefit/Co-payment Information                        | <b><u>Fastest Result</u></b> | Available                        |
| Claims and Appeals Status                             | <b><u>Fastest Result</u></b> | Available                        |
| Eligibility Verification                              | <b><u>Fastest Result</u></b> | Available                        |
| Submit Appeals/Claims/<br>Claims Disputes/Corrections | <b><u>Fastest Result</u></b> | N/A                              |

#### Helpful Links

##### **Portal Registration**

**Forms** (AOR, Auth, Claims and more)

##### **Joining our Network**

**Resources** (Manual and Guides)

Provider Services Phone (IVR):

**1-877-687-1197 (TTY: 711)**

#### Important Numbers

##### Care and Disease Management Referrals

Phone: **1-877-687-1197**

Fax: **1-855-218-0586**

##### Risk Management Fraud, Waste & Abuse Hotline

**1-866-685-8664**

##### Community Connections Help Line

**1-866-775-2192**

##### Behavioral Health Crisis Line

Members should call Member Services, **24 hours** a day.

##### Nurse Advice Line

**1-877-687-1197 (24 hours)**

#### Health Plan Partners - Contracted Networks

Vision (Pediatric only)

**Centene Vision Services**

**[AmbetterHealth.com/en/wa](https://AmbetterHealth.com/en/wa)**

**NOTE: Please refer to the member ID card to determine appropriate authorization and claims submission process.**

This guide is not intended to be an all-inclusive list of covered services under the Health Plan.

Ambetter from Coordinated Care is underwritten by Coordinated Care Corporation, which is a Qualified Health Plan issuer in the Washington Health Benefit Exchange.

## Claim Submission Information

### Submission Inquiries

EDI team: **EDIBA@centene.com**  
or call **1-800-225-2573 ext. 6075525**.

### Preferred EDI Clearinghouse

Availability: **1-800-282-4548**.  
Web portal for direct data entry (DDE) claims:  
**Availity.com/Essentials-Portal-Registration**.

Payer ID: **68069**

Visit our **Provider Resources** page to locate claim forms and information.

**Timely Filing guidelines:** 180 days from date of service for participating providers. 90 days for non-participating providers.

### EFT

Register: **payspanhealth.com** or call **1-877-331-7154**  
Email: **providersupport@payspanhealth.com**  
For more details on PaySpan, please refer to the **EFT Features Guide**.



Mail paper claims to:  
**Ambetter**  
**Attn: Claims Department**  
**P.O. Box 5010**  
**Farmington, MO 63640-5010**

## Pharmacy Services

### Pharmacy Services **1-866-399-0929**

|        |        |        |
|--------|--------|--------|
| Rx BIN | Rx PCN | Rx GRP |
| 003858 | A4     | 2DTA   |

### Mail Order

**Express Scripts®** Phone: **1-833-750-4284 (TTY: 711)**  
24 hours a day, 7 days a week

### Preferred Specialty Pharmacy

**AcariaHealth™** Phone: **1-800-511-5144 (TTY: 711)**  
Fax: **1-877-541-1503**  
Monday–Thursday, 8 a.m. to 7 p.m.,  
Friday, 8 a.m. to 6 p.m. ET.

### Medical Oncology Services

**Evolent** Phone: **1-888-999-7713**



**Ambetter**  
**Attn: Pharmacy Appeals**  
**P.O. Box 10341**  
**Van Nuys, CA 91410**

### Coverage Determination Requests

Electronic Prior Authorization (ePA)

**Account.CoverMyMeds.com**

Access the **Drug Coverage page** for the Formulary information and Pharmacy forms.

## Appeals/Reconsiderations and Grievances

Mail grievances to:  
**Ambetter**  
**Attn: Grievances Department**  
**P.O. Box 10341**  
**Van Nuys, CA 91410**

Mail appeals to:  
**Ambetter from Coordinated Care**  
**Attn: Appeals Department**  
**1145 Broadway, Suite 700**  
**Tacoma, WA 98402**

Email:  
**ambetter\_centralized\_Grievances\_**  
**Appeals@CENTENE.com**

Appeals Fax: **1-855-218-0589**  
Grievances Fax: **1-833-886-7956**

## Prior Authorization (PA)

A **Pre-Auth Needed tool** is available to determine if prior authorization is required. Detailed Prior Authorization list and important PA information can be found in the **Prior Authorization Guide**. Most current information can be found within the Pre-Auth tool.

For fastest results, submit requests **online** using the associated **PA forms**.

### Medical and Behavioral Health Fax:

Outpatient **1-855-218-0592**; Inpatient **1-855-218-0587**  
**Pharmacy Medical Requests Fax: 1-800-977-4170**

**Urgent Authorization Requests and Admission Notifications:**  
Call **1-877-687-1197** and follow the prompts.

Notification is required for Inpatient Hospital admissions **by the next business day** (except normal maternity delivery admissions). Phone authorizations must be followed by a fax submission of clinical information.

**Ambetter does not accept handwritten, faxed or replicated claim forms. Ambetter does not accept media storage devices such as CDs, DVDs, USB storage devices or flash drives.**