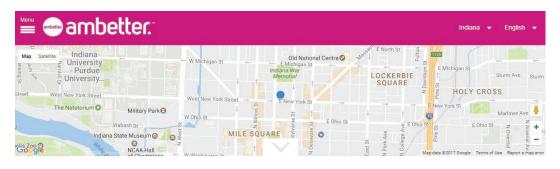
Ambetter Health Exclusive Provider Network



Ambetter Health is an Exclusive Provider Network Benefit Plan

- Members enrolled in Ambetter must utilize in-network participating providers and practitioners except in the case of emergency services.
- When referring a member to another provider or practitioner, please make sure that the referral is contracted with Ambetter.
- If a non-contracted provider or practitioner is utilized, except in the case of emergency services, the member will be responsible for charges that exceed the allowed amount. *This could mean hundreds of dollars in out-of-pocket expenses for the member*.
- Contracted providers and practitioners can be identified by visiting our website at ambetterhealth.com/en/in and clicking on Find a Provider.



Find a HealthCare Provider







Thank you for protecting our members from unnecessary out-of-pocket expenses!

How to Secure Prior Authorization



Pre-Auth Needed Tool

Use the Pre-Auth Needed Tool at ambetter.mhsindiana.com to quickly determine if a service or procedure requires prior authorization.

Submit Prior Authorization

If a service requires authorization, submit via one of the following three ways:





BEHAVIORAL HEALTH 1-855-283-9094

After normal business hours and on holidays, calls are directed to the plan's 24-hour nurse advice line. Notification of authorization will be returned phone, fax or web.



Exclusive Provider Network Benefit Plan

PLEASE NOTE:

- 1. Members must utilize in-network participating providers and practitioners except in the case of emergency services.
- Emergency and urgent care services DO NOT require prior authorization.All out-of-network (non-par) services, providers and practitioners DO require prior authorization.
- 3. Failure to complete the required authorization or certification may result in a denied claim.