CLAIMS, DISPUTES & RECOVERY/CCU GUIDE

ambetter. FROM | WellCare of New Jersey

Using digital tools is the fastest way to manage claims. The **Provider Portal** supports claim disputes, while **Availity Essentials** provides self-service for claim submission, claim corrections, and claim status inquiries

Claim Submission Information

Submission Inquiries

For inquiries related to your electronic or paper submissions to Ambetter, please contact our EDI team at **EDIBA@centene.com**.

Electronic Funds Transfer and Electronic Remittance Advice

Register online using the simplified, enhanced provider registration process at **payspanhealth.com** or call **1-877-331-7154**.
Email: **providersupport@payspanhealth.com**

Clearinghouse Connectivity

Ambetter has partnered with Availity as our preferred EDI Clearinghouse. You may connect directly to Availity or continue to use your existing vendor/biller/clearinghouse. If you need assistance in making a connection with Availity or have any questions, please contact Availity client services at **1-800-282-4548**.

Free Direct Data Entry (DDE)

Availity Essentials offers providers a web portal for direct data entry (DDE) claims that will submit to Ambetter electronically at no cost to you. To register, submit the request to **availity.com/Essentials-Portal-Registration**.

Payer ID: 68069

Mail paper claim submissions to:

Ambetter
Attn: Claims
P.O. Box 5010
Farmington, MO 63640 -5010

Timely Filing

The Claim Payment Dispute Process is designed to address claim denials for issues related to untimely filing, unlisted procedure codes, non-covered codes etc. Claim payment disputes must be submitted in writing to **Ambetter within the specified number of calendar days from the date on the EOP**.

Initial Claims	Reconsiderations/ Claim Disputes/ Appeals	Coordination of Benefits
Par: 180 calendar days	Par: 180 calendar days	Par: 180 days
Non-Par: 180 calendar days	Non-Par: 180 calendar days	Non-Par: 180 days

Submit all claims payment disputes with supporting documentation via the secure provider portal or by mail.

Claim payment disputes:

Ambetter
Attn: Claims Disputes/Appeals
P.O. Box 5010
Farmington, MO 63640-5010

AmbetterHealth.com/en/NJ

Ambetter from WellCare of New Jersey is underwritten by WellCare Health Insurance Company of New Jersey, Inc., which is a Qualified Health Plan issuer in the New Jersey Health Insurance Marketplace.

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Refunds and Overpayments

Refund(s)

Ambetter routinely audits all claims for payment errors. Claims identified as underpaid or overpaid will be reprocessed appropriately. Providers are responsible for reporting overpayments or improper payments to Ambetter. Providers have the option of requesting future offsets to payments or may mail refunds and overpayments, along with supporting documentation (copy of the remittance advice along with affected claims identified), to the following address:

Ambetter
Attn: Claims Dept — Refunds and Overpayments
P.O. Box 5010
Farmington, MO 63640-5010

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