BlueCross BlueShield | Healthy Blue of North Carolina

Blue Cross® and Blue Shield® of North Carolina (Blue Cross NC) | Healthy Blue® | Medicaid

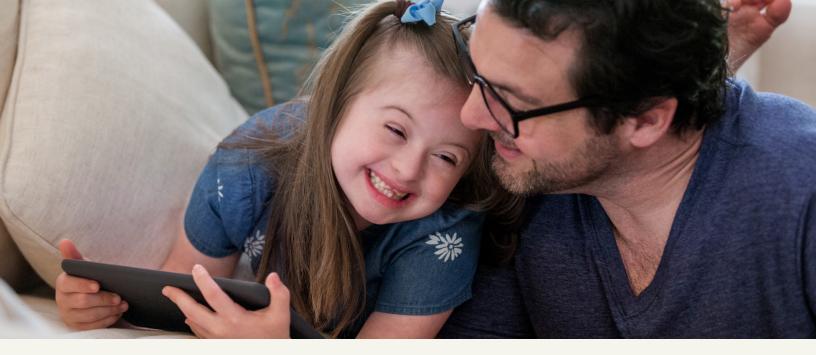
## Healthy Blue Provider Quick Reference Guide

Important phone numbers/addresses/websites for Standard Plan				
Provider Services	Phone:	<b>844-594-5072</b> Monday to Saturday, 7 a.m. to 6 p.m. ET; voice portal — 24/7		
Provider websites	Public website:	https://provider.healthybluenc.com		
	Secure website:	https://Availity.com		
	Phone:	844-594-5072		
Prior authorizations/ notifications (medical/behavioral health)	Fax:	<ul> <li>Inpatient:</li> <li>Medical: 855-817-5788</li> <li>Behavioral health: 844-439-3574</li> <li>All continued stay requests/discharge planning notifications/updates: 844-451-2694</li> <li>All skilled nursing facility/long-term acute care/inpatient rehabilitation requests: 844-451-2694</li> <li>Outpatient:</li> <li>Medical: 855-817-5788</li> <li>Behavioral health: 844-429-9636</li> <li>Durable medical equipment/home health infusions: 855-817-5788</li> </ul>		
	Forms:	https://provider.healthybluenc.com/ north-carolina-provider/forms		
	Online:	Authorization requests can also be sent through https://Availity.com.		

Important phone numbers/addresses/websites for Standard Plan (cont.)				
Member services/eligibility	Phone:	<b>844-594-5070</b> Monday to Saturday, 7 a.m. to 6 p.m. ET		
	Secure website:	https://Availity.com		
Pharmacy services	Phone:	<b>844-594-5084</b> Monday to Saturday, 7 a.m. to 6 p.m. ET		
24/7 NurseLine	Phone:	English: <b>844-545-1427</b> (Available 24/7, including state holidays) Spanish: <b>844-545-1428</b>		
Behavior Health Crisis Line	Phone:	<b>844-594-5076</b> (Available 24/7)		
Interpreter services/ translation	Phone:	<b>844-594-5072</b> 711 (TTY line)		
Grievance/claim inquiry (research and review) Note: This is not appeals.	Phone:	<b>844-594-5072</b> , select <b>Claims</b> prompt		
Fraud, waste, and abuse	Phone:	866-847-8247		



	Claims/Electronic Data Interchange		
Claims information	Phone:	844-594-5072, select Claims prompt	
<b>Paper claims submission</b> Timely filing is 365 calendar days from the date of service.	Address:	Blue Cross NC   Healthy Blue Claims P.O. Box 61010 Virginia Beach, VA 23466	
Electronic Data Interchange (EDI) — Availity Essentials services	Phone:	800-282-4548 Submitting Attachments Guidance	
Electronic payment enrollment	Phone:	877-882-0384	
Electronic payment services/ electronic remittance advice/ electronic funds transfer	Online:	https://enrollsafe.payeehub.org https://Availity.com	
	P	Provider appeals	
Provider medical necessity appeal	Address:	Blue Cross NC   Healthy Blue Appeals P.O. Box 62429 Virginia Beach, VA 23466-2429	
<b>Payment disputes</b> A payment dispute reconsideration must be filed online or by mail or over the	Address:	Blue Cross NC   Healthy Blue Payment Dispute Unit P.O. Box 61599 Virginia Beach, VA 23466-1599	
phone <b>60 days</b> from the date of Explanation of Payment (EOP).			
A claim payment appeal must be filed in writing within <b>30 days</b> from the first-level decision/resolution letter.	Online:	Use the secure provider Availity Payment Appeal Tool at <b>Availity.com</b> . Through Availity, providers can upload supporting documentation and will receive immediate acknowledgement of their submission.	
Note: Vision and non-emergent transportation appeals are managed by the respective vendor.		Claims Payment Appeal Form/Reconsideration Form found on: https://provider.healthybluenc.com	



		Vendors	
Non-emergent transportation ModivCare	Phone:	Reservations and ride assistance: <b>855-397-3602</b>	
<b>Vision</b> EyeMed	Fax:	513-492-3259	
	Email:	eyemedqa@eyemed.com	
Electronic visit verification	Phone:	855-782-5976	
CareBridge	Email:	ncevv@carebridgehealth.com	

## Healthy Blue member ID:

🖗 🗑 Healthy Blue			🚭 🗑 Healthy Blue	www.healthybluenc.com           Member Services:         844-594-5070           Provider Services:         844-594-5072           Pharmacy Member Services:         844-594-5084           Help for Pharmacists:         833-296-5037
Member Name: JOHN Q SAMPLE Identification #: Member ID #: 123456789 Effective Date: Date of Birth:	Primary Care Provider (PCP): Telephone #: Address: RXBIN: 020107 RXPCN: NC RXGRP: 8473	-	Members: Please carry this card at all times. Show this card before you get medical care (except emergencies). If you have an emergency, call 911 or go to the nearest emergency room. Affiliados: Livee esta tarjeta con usted en todo momento. Muestrela arties de recibir el cuidado la salud exception antes de recibir el cuidado emergencias más cercana. Providers/hospitals: For preaproval/billing information, call 844-594-5072. For emergency admissions, notify Healthy Biue within 24 hours after treatment. RXBIN: 20070; RXPCR: NC: RXSRP: 8473. Submit medical calims to: Availity, com or Healthy Biue P.O. Box 61010 Virginia Beach, VA 23466-1010 Nc01 0721	247 NurseLine: 844-545-1427 247 Behavioral Health Crisis: 844-594-5076 TTY: 711 Use of this card by any person other than the member is fraul. If you suspect a doctor, clinic, hospital, home health service or any other kind of medical provider is committing Medicaid fraud, report It. Call 919-881-2320.

Email for Electronic Inquiries: NC\_Provider@healthybluenc.com

## https://provider.healthybluenc.com

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