

QUICK REFERENCE GUIDE 2023.



AMERIGROUP CUSTOMER SERVICE

For verification of eligibility and benefits please contact **Amerigroup Customer Service** at **(844) 946-1873** for SNP plans. **All other plans: (844) 946-1875**

PRIOR AUTHORIZATION

Phone: **(520) 274-4421**
Fax: **(520) 274-4943**

CARE MANAGEMENT

Phone: **(520) 392-8975**
Fax: **(520) 393-3244**
Email: **CareTeamAZ@P3HP.org**

PHARMACY PRIOR AUTHORIZATION

Phone: **(800) 788-2949**
Fax: **(858) 790-7100**
24 hours a day / 7 days a week

CREDENTIALING

Email applications:
providerrelations@P3HP.org
Questions:
P3Credentialing@P3HP.org

CLAIM/ENCOUNTER SUBMISSION

P3 Health Partners Arizona
PO Box 211095
Eagan, MN 55121

ELECTRONIC CLAIMS SUBMISSION

EDI Payer ID: **58375**
Professional, Institutional and Hospital Claims

CLAIMS STATUS

Call to check claims status if claim has not been processed within 30 days of the initial submission.

Phone: **(520) 867-6776**
Email: **claims@P3HP.org**
Monday - Friday
8:00AM - 5:00PM PST

CLAIMS RECONSIDERATIONS

Requests for review must be submitted within 180 days of the Remittance Advice for denials, underpayment, etc.

P3 Health Partners - Arizona
ATTN Claims Reconsiderations
PO Box 211095
Eagan, MN 55121

Effective January 1, 2023

QUESTIONS? Contact P3 PROVIDER RELATIONS at (520) 392-8680 or email providerrelations@P3HP.org

ANCILLARY VENDORS.



<p>DIALYSIS</p>	<p>Northwest Tucson Dialysis LLC Tucson Central Dialysis Tucson South Central Dialysis Tucson West Dialysis Tucson East Dialysis Swan Dialysis Oro Valley Dialysis Rita Ranch Dialysis Pascua Yaqui Tribe Dialysis Nogales Dialysis Sells Dialysis</p>
<p>DURABLE MEDICAL EQUIPMENT (DME)</p>	<p>Preferred Homecare (520) 888-4002 Sound Health Medical Supply (520) 694-0118 RXO2 Oxygen & Medical Equipment Supply (520) 751-1929</p>
<p>HEALTH & FITNESS PARTNER</p>	<p>Silver and Fit (877) 427-4788 Monday - Friday 5:00AM - 6:00PM www.silverandfit.com</p>
<p>HOME HEALTH</p>	<p>Professional HealthCare Network (PHCN) Phone: (480) 359-3834 Fax: (877) 612-7066 www.professionalcares.com</p>
<p>HOME INFUSION</p>	<p>SISU Healthcare Solutions, Inc. Phone: (480) 999-4488 Fax: (480) 999-6163</p>
<p>LABORATORY</p>	<p>Laboratory Corporation</p>
<p>MAIL ORDER PHARMACY</p>	<p>CarelonRx (previously IngenioRx) (833) 419-0530</p>
<p>MAMMOGRAPHY</p>	<p>Radiology Limited radltd.com Assured Imaging assuredimaging.com Simonmed Imaging simonmed.com</p>
<p>MOBILE URGENT CARE SERVICES</p>	<p>DispatchHealth dispatchhealth.com Every day 8:00AM - 10:00PM</p>
<p>OSTOMY SUPPLIES</p>	<p>Edgepark Medical Supplies (800) 321-0591 my.edgepark.com</p>

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RADIOLOGY	Radiology Limited Radltd.com Simonmed Imaging Simonmed.com
SKILLED NURSING FACILITY	Santa Rita Care Center (520) 625-0178 Handmaker Jewish Services for Aging (520) 881-2323 Haven Health Tucson (520) 299-7088 Devon Gables Rehabilitation Center (520) 296-6181 Life Care Center of Tucson (520) 575-0900 Catalina Post Acute and Rehab (520) 795-9574 Foothills Rehabilitation Center (520) 733-8700 Sapphire Estates Rehab Centre (520) 300-6115
URGENT CARE	NextCare Urgent Care Southern Arizona Urgent Care TMC Urgent Care
UROLOGICAL SUPPLIES	Edgepark Medical Supplies (800) 321-0591 my.edgepark.com
WOUND CARE SUPPLIES	Edgepark Medical Supplies (800) 321-0591 my.edgepark.com

MEDICATION THERAPY MANAGEMENT PROGRAM (MTM)

The MTM program helps the patient and primary care doctor evaluate the effectiveness of a patients' medications.

You may qualify for the MTM Program if:

- ♥ YOU HAVE 3 OR MORE CHRONIC HEALTH PROBLEMS. THESE MAY INCLUDE:
 - > CHRONIC HEART FAILURE (CHF), DIABETES, HIGH BLOOD FAT LEVELS (HIGH CHOLESTEROL), HIGH BLOOD PRESSURE (HYPERTENSION), RHEUMATOID ARTHRITIS (RA)
- ♥ YOU TAKE 5 OR MORE DAILY MEDICINES IN THE FOLLOWING MEDICARE PART D DRUG CLASS:
 - > ANTIHYPERLIPIDEMICS, DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS), ANTIHYPERTENSIVES, INSULINS, ORAL HYPOGLYCEMICS
- ♥ YOU ARE SPENDING \$4,935 OR MORE IN 2023 ON PART D COVERED MEDICATIONS

* Additionally, members that are enrolled in their Health Plan's Drug Management Program(s) may be auto-enrolled in the MTM Program.

HOW TO ENROLL?

Members will automatically be enrolled into the program by the plan if they meet the above requirements.

HOW TO GET STARTED?

The member will receive a call from the plan's vendor to schedule a comprehensive medication review with the member.



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2023 ID CARDS.



An Anthem Company



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Amerivantage Classic Plus (HMO)

PCP: [REDACTED]
PCP Phone: [REDACTED]
P3 Health Partners Arizona

Member ID [REDACTED]


Issuer ID: 80840
RxBIN: 020115
RxPCN: IS
RxGRP: WM2A
RxID: [REDACTED]

Office Visit Copay: \$0
Specialist Visit Copay: \$35
Emergency Room Copay: \$120
Preventive Copay: \$0
livehealthonline.com

CMS H1423-PBP: 004-000

MedicareRx
Prescription Drug Coverage

X8108272.00014





An Anthem Company

Members: Present this ID card to your healthcare provider before you receive services or supplies. See your Evidence of Coverage for covered services.
Providers and Hospitals: Prior authorization is required for all non emergency admissions and certain services. For emergency admissions, please call within 24 hours of treatment.

Claims: P3 Health Partners Arizona
P.O. Box 211095
Eagan, MN 55121
Payer ID: 58375
Pharmacy Claims: P.O. Box 52077
Phoenix, AZ 85072-2077

amerigroup.com/medicare

Customer Service: 1-844-946-1875
TTY: 711
Pharmacy Member Svcs: 1-833-498-1582
Help for Pharmacists: 1-833-377-4266
Providers: 1-520-867-6776
Dental: 1-888-700-0992
24/7 NurseLine: 1-866-805-4589
SilverSneakers: 1-855-741-4985

Use of this card by any person other than the member is fraud 10/05/2021

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People. Passion. Purpose.