

NORTH CAROLINA MEDICAID PROVIDER QUICK REFERENCE GUIDE



PROVIDER SERVICES CONTACT NUMBER

Toll Free 1-833-552-3876

PROVIDER PORTAL

Providers may use Availity Essentials or the Carolina Complete Health Secure Portal:

Carolina Complete Health Secure Provider Portal: provider.carolinacompletehealth.com

Availity Essentials: www.availity.com/

- Submit and manage claims
- Manage prior authorizations
- Verify member eligibility
- Prior-authorization needed tool
- Provider manual
- Member resources
- And more!

PRIOR AUTHORIZATIONS / NOTIFICATIONS

Use the Prior-authorization needed tool on the carolinacompletehealth.com website to determine if prior authorization is required. Submit prior authorizations via:

- [Secure Provider Portal](#) or [Availity Essentials](#)
- OR Fax: 1-833-238-7694
- OR Provider Services: Toll Free 1-833-552-3876

MEMBER SERVICES / ELIGIBILITY

Check member eligibility via:

- Secure Web Portal or [Availity Essentials](#)
- OR Provider Services: Toll Free 1-833-552-3876

CLAIMS / EDI

Timely Filing guidelines: 365 days from date of service. Claims can be submitted via:

- Secure Web Portal or [Availity Essentials](#)
- Clearinghouses: EDI Payor ID 68069
- Mail paper claims to:

Carolina Complete Health
Attn: Claims, PO Box 8040
Provider Service
Farmington, MO 63640-8040



CLAIM DISPUTES AND APPEALS

Timely Filing:

- **Claim Disputes:** Contracted providers must submit claim disputes within 90 calendar days from the date of the EOP or ERA.
- **Claim Appeals:** Must be filed within 60 calendar days from the original authorization decision date.

Claim Disputes and Appeals can be filed in one of the following ways:

- [Secure Provider Portal](#)
- Mail Claims Disputes and Appeals Form to:
Carolina Complete Health
Attn: Medicaid Claim Disputes/Appeals Department
PO Box 8040, Farmington, MO63640-8040

PHARMACY

Outpatient Pharmacy and Home Infusion Therapy Prior Authorizations may be submitted via:

- CoverMyMeds Portal: www.covermymeds.com/main/prior-authorization-forms/
- Phone: 1-833-585-4309
- Fax: 1-833-404-2393

The Preferred Drug List, Prior Authorization Criteria, and forms can be found by visiting:

<https://network.carolinacompletehealth.com/pharmacy>

PHARMACY, CONTINUED

Physician Administered Drug Program (PADP) off-label requests may be submitted for a case-by-case review via:

- [Secure Provider Portal](#)
- Fax: 1-833-465-1703

NURSE LINE

Main Call Center Member Services
Toll Free 1-833-552-3876

BEHAVIORAL HEALTH CRISIS

Behavioral Health Crisis Line (24 hours, 7 days/week)
Toll Free 1-844-784-8906

TRANSPORTATION

Medical Transportation Management (MTM) can assist with arranging Non-Emergency Transport to and from medical appointments or medically related services.



MTM: Toll Free 1-844-784-8931 (TTY: 711)

INTERPRETER SERVICES

For assistance with the following interpreter services.
Language Line:

Toll Free 1-866-998-0338
Account Number 13982
Medicaid PIN #6329

ID CARDS

 MEDICAID ID#: [012345678901] EFFECTIVE DATE: [MM/DD/YYYY]													
Member: [Member Full Name]													
	Plan: Medicaid Member Date of Birth: [MM/DD/YYYY] AMH/Primary Care Provider Name: [AMH Group Name] [AMH Address Line 1] <AMH Address Line 2> [Provider City], [Provider State] [Zip] AMH/PCP Phone: [1-XXX-XXX-XXXX]												
Carolina Complete Health [1701 North Graham St., Suite 101] [Charlotte, NC 28206]	RXBIN: [003858] RXPCN: [MA] RXGRP: [2ERA]												
carolinacompletehealth.com For a full listing of details of carved out services, see your member handbook.													
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If you suspect a doctor, clinic, hospital, home health services or any other kind of medical provider is committing Medicaid fraud, report it. Call [1-919-881-2320] .													
All Medical Claims: [Carolina Complete Health, PO Box 8040, Farmington, MO 63640-8040]. Pharmacy Paper Claims: [P.O. Box 989000, West Sacramento CA 95798]													
FOR EMERGENCIES: Dial 911 or go to the nearest Emergency Room													

PATIENT CARE GAPS

Find recommended services that a member has not completed.

1. Visit the [Secure Provider Portal](#).
2. Review patient information for any gaps in care.
3. Plan to address care gaps during future appointments.