

PROVIDER BULLETIN

PREFERRED IPA OF CALIFORNIA

1025 N. Brand Blvd.
Glendale, CA 91202

PHONE:

(800) 536-2867

Extensions:

Member Services	561
Provider Relations	562
Credentialing	224
Contracting	563
Capitation	216
Eligibility	254
Compliance	260

Utilization Management

Phone: (800) 874-2091

Authorizations: Option 1

Claims: Option 2

WEBSITE:

www.preferredipa.com

Important Update

“Wellcare By Health Net” DSNP Member Transition 2024

Wellcare Dual Special Needs (DSNP) members are beginning to transition to **Wellcare by Health Net** on January 1, 2024.

Health Plan Assignment Change

- Members that move to **Wellcare by Health Net** will receive new health plan ID cards that reflect their **Wellcare by Health Net** member identification number.
- If eligibility verification shows that your Wellcare Preferred IPA member transitioned to Preferred IPA **Wellcare by Health Net**, please keep and do not cancel scheduled appointments.

Existing Referral Authorizations:

- Authorizations issued by Preferred IPA under Wellcare will be honored for Preferred IPA members who transition to **Wellcare by Health Net**.
- There is no need to reschedule appointments or to resubmit the authorization.

New Referral Requests - Preferred IPA Portal Update

- Members will be added to the Preferred IPA portal upon receipt of the January eligibility list from the plan.
- If you would like to submit a referral and your patient is not yet in the portal with their **Wellcare by Health Net ID** number:
 - Submit Member Research Request so that our team can verify eligibility to process the referral request.

If you have questions, contact Provider Relations at x562.

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“Wellcare By Health Net” DSNP Member Transition 2024

Sample ID Card

Front



MEMBER INFORMATION
Name: <First MI Last>
Member ID#: <XXXXXXXX-XX>
Care Coordinator Phone: <1-800-431-9007>

PROVIDER INFORMATION
PPG Name: <Provider Group Name>
PPG Phone: <X-XXX-XXX-XXXX>
PCP Name: <Last, First Name>
PCP Phone: <X-XXX-XXX-XXXX>

MEMBER CANNOT BE CHARGED
PCP/Specialist Office Visit: \$X

FOR EMERGENCIES Dial 911 or go to the nearest Emergency Room (ER).

Wellcare By Health Net
Wellcare Dual Align 129
(HMO D-SNP)
CMS#: <H0562-129>
Effective Date: <MM/DD/YYYY>

PHARMACY INFORMATION

Medicare^{Rx}
Prescription Drug Coverage

Rx Claims Processor:
 <CVS Caremark®>
RxBIN: <004336>
RxPCN: <MEDDADV>
RxGRP: <RX6270>
RxID: <XXXXXXXXXX>

Back

www.wellcare.com/healthnetCA


FOR MEMBERS

Member Services:	<1-800-431-9007 (TTY: 711)>
Mental Health Benefits:	<1-800-646-5610 (TTY: 711)>
Nurse Advice Line:	<1-800-893-5567 (TTY: 711)>
Transportation:	<1-866-653-0975 (TTY: 711)>
Involve Vision (For Members and Members):	<1-866-392-6058 (TTY: 711)>

FOR PROVIDERS

 **For Member eligibility and Medical prior auth/referrals :** <1-800-431-9007>
Medical Claims: <Wellcare By Health Net> <Attn: Claims>
 Payor ID: <68069> <P.O. Box 9030 Farmington, MO 63640-9030>

Pharmacy prior auth: <1-800-867-6564>
 For help: (PHARMACY USE ONLY) <1-888-865-6567>

 **Submit Part D Drug Claims to:**<Wellcare By Health Net> <Attn: Member Reimbursement Dept> <P.O. Box 31577, Tampa, FL 33631-3577>