

AmeriHealth Caritas Next and First Choice Next Provider Website

Homepage



Welcome to the AmeriHealth Caritas Next and First Choice Next Provider Homepage at www.amerihealthcaritasnext.com.
Select your state to get started.



ENROLL CONTACT US LANGUAGE SEARCH

[View Our Plans](#) [For Members](#) [For Providers](#) [For Brokers](#) [Pick a State](#)



Pick your state
Get information specific to your state:

Pick your state

Go

Open Enrollment begins November 1!

You can start reviewing updates and new plans for 2027. Explore our plans to find the right fit for your budget and lifestyle.

[Explore our plans](#)



Providers Homepage

For Providers

On the Provider Homepage, we want you to have all the resources at your fingertips. These direct resources include:

- How to contact your Provider Network Management Account Executive
- Access Provider Training
- Exchange Provider Manual
- Claims and Billing Manual
- Provider Reference Guide
- Forms and Documents

The Plan's Payer ID is also listed on the Provider Homepage for easy reference when submitting claims.



Access information to help you complete vital tasks, such as:

- [Contact Provider Network Management](#) 
The best partnerships are formed by staying in touch. If you have questions about AmeriHealth Caritas Next, email us at INEXProviderNetworkRelations@amerihealthcaritas.com .
- [Join our provider network.](#)
Learn how you can join our dedicated network of providers.
- [Access provider training.](#)
Learn how to access our secure provider portal, submit electronic claims, select payment options, and much more.
- [Find a provider, pharmacy, or drug.](#)
Use our directories and other online tools to find providers and pharmacies in our network, as well as drugs in our formulary.
- [Access the Provider Manual \(PDF\).](#)
Get pertinent policies, procedures, and administrative functions relevant to your practice.
- [Access the Claims and Billing Manual \(PDF\).](#)
Use this guide to help avoid common claim errors and delays in the processing of your claims.
- [Read the Provider Reference Guide \(PDF\).](#)
Have important contact information and resources at your fingertips.
- [Learn about claims, billing, and payment.](#)
Find resources you need to help manage your submission of claims and receipt of payments.
- [Get information on prior authorizations.](#)
Get tools and support for submitting prior authorization requests.
- [Get forms and documents.](#)
Discover reference materials to help you when caring for our members.
- [Access tools and services.](#)
Get access to online tools like NaviNet.
- [Report fraud, waste, and abuse.](#)
Learn how you can help AmeriHealth Caritas Next monitor and report fraud, waste, and abuse.

If you have any questions, call AmeriHealth Caritas Next Provider Services at 1-844-280-9130.

Find a Provider,
Pharmacy, or Drug

Find a Provider, Pharmacy, or Drug

Access the Plan Network

Find health care providers, pharmacies, and covered medicines in the AmeriHealth Caritas Next and First Choice Next network.



Searchable Online Provider Directory



Online Pharmacy Locator



Searchable Formulary



Printable Formulary

Searchable Online Provider Directory

To find a provider for medical services, use our searchable online provider directory located at www.amerihealthcaritasnext.com > Pick Your State > For Providers > Find a Provider, Pharmacy, or Drug.

After the directory opens, enter the search location.

You can then search by name, specialty, place name, or place type.

Hello,
What are you searching for today?

 Doctors by name	 Doctors by specialty	 Places by name	 Places by type
Search all		Advanced search	

Hi there, let's get started!

Before you begin your search, we need your search location and plan information so we can find in-network providers nearby.

For this step, an address, city or zip code for searching and a health plan ID card will be helpful.

It just takes a couple of seconds to complete, and then you can search for doctors, hospitals, specialists and more.

Choose a location

The search results will provide all in-network providers within the search parameters indicated.

Find a Pharmacy



The AmeriHealth Caritas Next and First Choice Next online pharmacy locator provides a convenient way to find participating pharmacies within our nationwide network.

You can use our online pharmacy locator for all in-network pharmacy needs whether the member needs a local pharmacy, a pharmacy when they are traveling, a pharmacy to mail their prescriptions to their home, or a specialty pharmacy.



For a complete list of participating pharmacies, please use the online pharmacy locator located at www.amerihealthcaritasnext.com > For Providers > Find a Provider, Pharmacy, or Drug > Online Pharmacy Locator.

Searchable and Printable Formulary

Our plans have a list of covered drugs (formulary). We call it the “drug list” for short. The drug list helps providers identify which medications are covered under Marketplace plans. It also outlines any coverage restrictions that may apply to a member’s medication.

A printable drug list is also available for download.

After selecting the Searchable Drug List, then select the Plan option, and you can enter the Brand or Generic Name of the drug.

Search your plan's formulary or prescription drug list to find covered products and additional details.

Search by drug name

Drug name

Please have the name and dosage of your medication on hand. Some names may differ from the label on your prescription; for example, Levothyroxine may show as Levothyroxine Sodium.

Search by category

[Browse drugs alphabetically >](#)

[Browse drugs by therapeutic class >](#)

When reviewing the drug, it indicates the dosage, tier status, as well as any restrictions. See example on right.

Levothyroxine sodium tab 25 mcg

Generic 25 MCG Tablet Brand Name: Synthroid

TIER 01 - PREFERRED GENERIC

Restrictions

Limitations on drug coverage

Prior authorization	No
Step therapy	No
Quantity limit	No
Specialty medication	No

Claims and Billing

Claim Guidelines

Providers can find claim submission tools and resources on the Claims and Billing webpage.

AmeriHealth Caritas Next and First Choice Next Payer ID

Please use the correct payer ID, found on the Claims and Billing webpage, when submitting claims to help support timely payment.

Claims submitted to the incorrect health plan may be denied or experience payment delays.

Timely Filing Limits:

- **Initial claims:** Must be submitted to the plan within 180 calendar days of the date of service.
- **Resubmissions and corrections:** Must be submitted within 365 calendar days of the original date of service.
- **Claims with explanation of benefits (EOBs) from primary insurers:** When applicable, claims with Explanation of Benefits (EOBs) from primary insurers must be submitted within 60 days of the date of the primary insurer's EOB (claim adjudication).

Claims Payment Schedule:

- Medical payment cycles run every Monday, Wednesday, and Friday.
- Pharmacy payment cycles run twice a month: on the 15th and on the last day of the month.

The Claims and Billing Manual can be found at www.amerihealthcaritasnext.com > For Providers > Claims and Billing > Claims and Billing Manual.

Note: Exceptions may be reflected in the provider's executed contract.

Claim Submission

Additional tools and resources to help manage claim submissions are available in our Claims and Billing Manual.



If you can send EDI claims directly or through another clearinghouse/vendor, you may submit them electronically to the Plan. Enrollment with one of our clearinghouses is not required.



The plan accepts 275 claim attachments. To submit electronically, contact your practice management system vendor or EDI clearinghouse.



Providers who have limited ability to submit claims through their practice management or hospital information systems may also submit manual/direct-entry claims through Optum/Change Healthcare or PCH Global*.



While the Plan accepts paper claims, providers are encouraged to submit claims electronically for faster, more efficient processing and payment. The claim mailing address can be found in the Claims and Billing Manual.

Electronic Reimbursement

AmeriHealth Caritas Next and First Choice Next work with ECHO Health Inc. (ECHO®) to offer providers more electronic payment options.



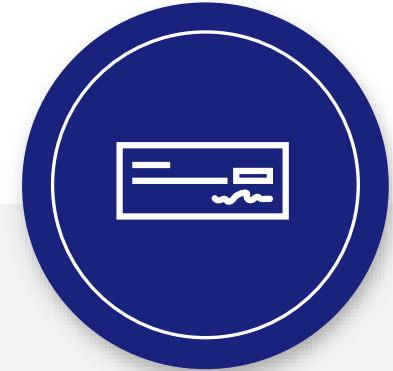
Electronic Funds Transfers (EFT)

Electronic funds transfers (EFT) allows direct payment into your designated bank account. You will automatically receive electronic remittance advices (ERAs) for those payments.



Virtual Credit Card

Virtual Credit Cards are temporary, randomly generated credit card numbers sent to providers by fax or mail for claims reimbursement. Providers can access payment the day the VCC is received.



Paper Check

To receive paper checks and paper explanations of payment, providers must opt out of Virtual Card Services by contacting ECHO Health after receiving their first virtual card payment.

Claim Tools and User Guides



Several of the available resources on the Claims and Billing webpage include:

Claim Resources

- Availity Claims Attachment Quick Reference Guide
- NaviNet Appeals and Claim Disputes User Guide
- NaviNet Claims Investigation User Guide
- NaviNet Claims Overpayment and Recovery User Guide

Optum/Change Healthcare ConnectCenter

- Connect Center Electronic Fund Transfer FAQ's
- Claims- Getting Started
- Keying an Institutional and Professional Claim
- Remits- Getting Started

For a complete list of resources, please visit the Claims and Billing webpage found at www.amerihealthcaritasnext.com > Pick Your State > For Providers > Claims and Billing > Claims and Billing Manual.

Prior Authorization

Prior Authorizations and Notifications

Prior Authorizations and Notifications can be submitted the following ways:

Online

For online prior authorization, providers can use the Medical Authorizations feature inside [our secure provider portal \(NaviNet\)](#).

By fax

Physical Health Prior Authorization (PDF) and Behavioral Health Prior Authorization (PDF) forms are available on the Prior Authorization webpage at www.amerihealthcaritasnext.com > Pick Your State > For Providers > Prior Authorizations.

By phone

Call our Utilization Management (UM) department from 8 a.m. to 5 p.m. ET, Monday to Friday.

Utilization Management's contact information can be found at www.amerihealthcaritasnext.com > Pick Your State > For Providers > Prior Authorizations.

Prior Authorization Lookup Tool

To support prior authorization requests, the Plan offers a Prior Authorization Lookup Tool hyperlink on the Prior Authorization webpage.

This tool includes the most current list of services that require prior authorization. Providers can enter a CPT or HCPCS code to determine whether prior authorization is needed for a specific service.

For additional questions, providers may contact Utilization Management. Their contact information can be found at www.amerihealthcaritasnext.com > Pick Your State > For Providers > Prior Authorizations.

Prior Authorization Lookup Tool

Find out if a service needs prior authorization. Type a Current Procedural Terminology (CPT) code or a Healthcare Common Procedure Coding System (HCPCS) code in the space below to get started.

Important notice

This tool provides general information for outpatient services performed by a participating provider.

The following services **always** require prior authorization:

- Elective inpatient services
- Urgent inpatient services
- Services from a nonparticipating provider. ([Join Our Network](#))

If you have questions about this tool or a service, or to obtain an authorization, contact Utilization Management at 1-844-486-2801 or fax to the appropriate number:

- Physical Health: 1-833-704-1183
- Behavioral Health: 1-833-301-3327

Vendor authorization rules

For codes that are delegated to a third-party vendor, codes requiring authorization are listed in the following documents:

- [Evolent \(formulary National Imaging Associates\) Utilization Review Matrix 2027 \(PDF\)](#)

Directions

1. Enter a CPT/HCPCS code in the space below.
2. Click Submit.
3. The tool will tell you if that service needs prior authorization.

Prior Authorization Lookup Tool coming Fall 2026.

Enter CPT/HCPCS Code & Expected Service Date	
CPT/HCPCS code	08/10/2026
Submit	

Advanced Diagnostic Imaging Services

The Prior Authorization webpage also includes information about the Plan's diagnostic imaging vendor- Evolent.



AmeriHealth Caritas Next and First Choice Next have an agreement with Evolent to manage diagnostic imaging services.



The program will require prior authorization from Evolent for nonemergent outpatient:

- CT/CTA
- CCTA
- MRI/MRA
- PET scan
- MUGA scan
- Myocardial perfusion imaging (MPI)



Providers can request prior authorization via [Evolent's RadMD tool](#) or by calling Evolent.

Evolent's contact information can be found on the Prior Authorizations webpage located at www.amerihhealthcaritasnext.com > Pick Your State > For Providers > Prior Authorizations.

Pharmacy Prior Authorization



There are several ways to submit Pharmacy Prior Authorizations:

- **Electronically** - please submit an Electronic Prior Authorization (ePA) through your Electronic Health Record (EHR) software or either of the following online portals:
 - [CoverMyMeds](#)
 - [Surescripts](#)
- **By phone** - Call our Pharmacy Clinical Prior Authorization department. Their contact information can be found at www.amerihealthcaritasnext.com > Pick Your State > For Providers > Prior Authorizations.
- **By fax** -
 - For medical pharmacy drug prior authorization requests (buy-and-bill), please complete the Healthcare Common Procedure Coding System (HCPCS) Authorization Form (PDF).
 - For all other pharmacy prior authorization requests please complete the Pharmacy Prior Authorization Form (PDF).

These forms can be found at www.amerihealthcaritasnext.com > Pick Your State > For Providers > Prior Authorizations.
- **Through NaviNet** - access the Pharmacy Prior Authorization portal to submit and check real-time prior authorization statuses

HEDIS and Care Gaps

Quality Corner

The HEDIS and Care Gap webpage offers insight on how providers can improve their HEDIS scores and the importance of closing Care Gaps.

This page also includes a link to our **Quality Corner – Coding Spotlight**, a resource featuring specialty articles with documentation guidance for routine screenings, chronic conditions, and more.

Coding Spotlight



Quality Corner

Coding Spotlight Articles

These are featured spotlight articles and downloadable PDFs highlighting codes that may be helpful to you when providing care.

[Learn more about HEDIS](#)

- [HEDIS Breast Cancer Screening Provider Education Tip Sheet \(PDF\)](#)
- [HEDIS Cervical Cancer Screening Provider Education Tip Sheet \(PDF\)](#)
- [HEDIS Colorectal Cancer Screening Provider Education Tip Sheet \(PDF\)](#)
- [HEDIS Diabetes EED, GSD, KED Provider Education Tip Sheet \(PDF\)](#)
- [Follow-Up After Hospitalization for Mental Illness \(FUH\) \(PDF\)](#)
- [Follow-Up After Emergency Department Visit for Substance Use \(FUA\) \(PDF\)](#)
- [Follow-Up After Emergency Department Visit for Mental Illness \(FUM\) \(PDF\)](#)
- [HEDIS IET Provider Education Tip Sheet \(PDF\)](#)
- [Coding Spotlight — Focus on Diabetes \(PDF\)](#)
- [Coding Spotlight — Focus on HIV and AIDS \(PDF\)](#)
- [Coding Spotlight — Focus on Hypertension \(PDF\)](#)
- [Coding Spotlight — Focus on Chronic Kidney Disease \(PDF\)](#)
- [Coding Spotlight — Focus on Vascular Conditions \(PDF\)](#)

News and Updates

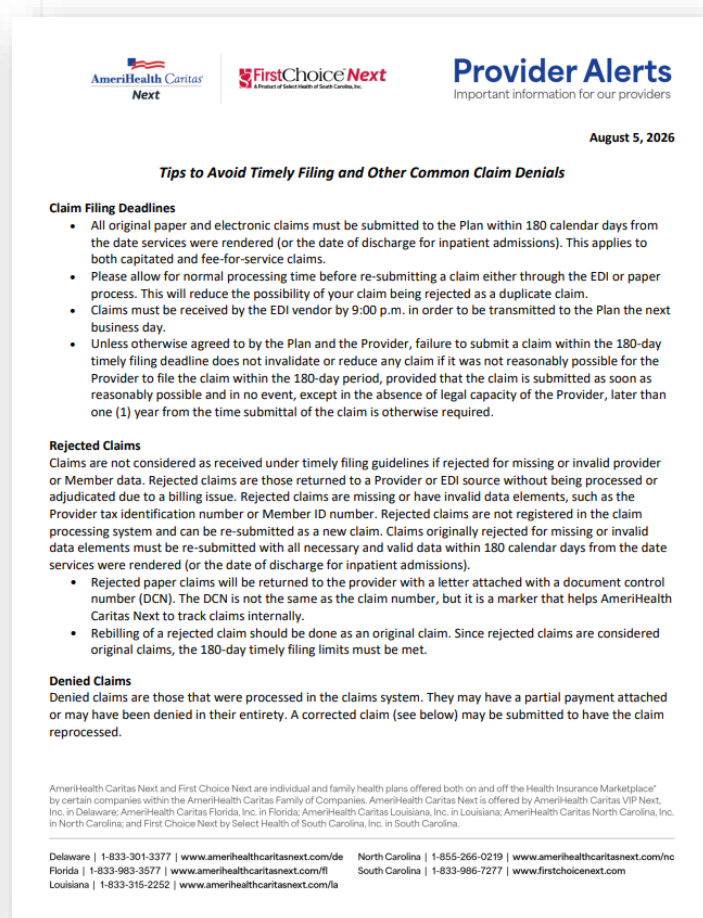
Provider Alerts and Connections

Provider Alerts

Provider Alerts are fax blasts that serve as the primary method of communication and are used to share quarterly reminders, ad hoc updates, enterprise initiatives, and timely, consistent messaging with providers. To support easy reference, past alerts are archived on the webpage.

Connections

The annual *Connection* newsletter is an important resource for keeping network providers and office staff informed of key operational, clinical, and policy updates that support efficient patient care and accurate claims processing.



Forms and Documents

Provider Forms and Resources



Advance directives instructions and forms



Let Us Know Member Intervention form



Delivery Notification and Obstetrical Needs Assessment forms



Medical, Behavioral, and Pharmacy Prior Authorization forms



Provider enrollment updates and demographic notification resources

Provider Training

Educational Opportunities

Our provider educational materials can assist you in providing care to our members.

AmeriHealth Caritas Next and First Choice Next is pleased to invite providers to learn more about our company and our individual and family health plans.

Provider Orientation Module and Video

The provider orientation provides general information about the company, claim submission, select payment options, obtaining prior authorizations, and much more.

Cultural Awareness and Responsiveness Training

Providers are encouraged to complete the free eLearning cultural competency training offered by the U.S. Department of Health and Human Services (HHS) Office of Minority Health. This training offers up to nine continuing education units (CEUs).

Clinical Resources and Reimbursement Policies

Industry Guidance

AmeriHealth Caritas Next and First Choice Next is committed to delivering comprehensive, outcomes-driven health solutions for our members.

Clinical Resources

We've used the latest scientific evidence and research to create our policies, which represent the latest in current professional standards.

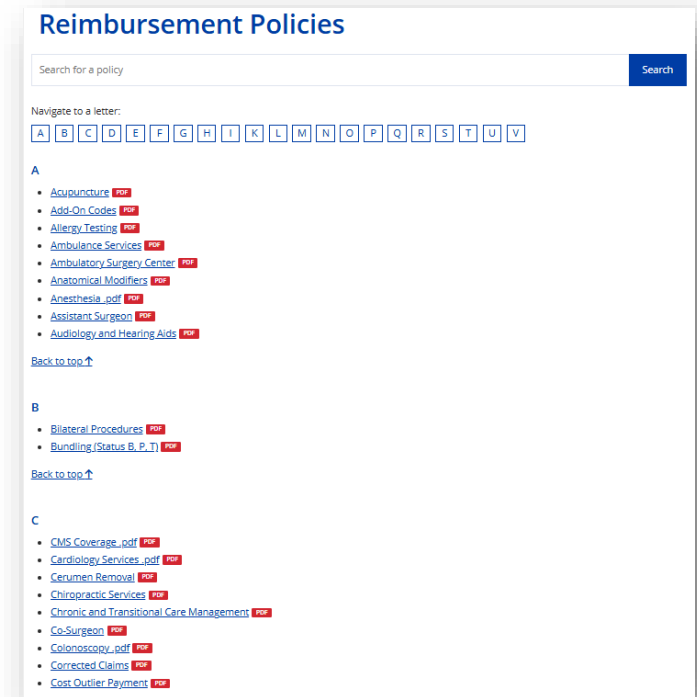
While these policies are intended to inform, they aren't intended to replace a physician's clinical judgment. The physician remains responsible for determining the applicable treatment for each individual.

AmeriHealth Caritas Next and First Choice Next has adopted clinical practice guidelines for use in guiding the treatment of plan members, with the goal of reducing unnecessary variations in care.

- Clinical policies
- Clinical practice guidelines (PDF)

Reimbursement Policies

AmeriHealth Caritas Next and First Choice Next develops its reimbursement policies and related edits using guidance from recognized industry sources, including the Centers for Medicare & Medicaid Services (CMS), the American Medical Association (AMA), state and federal regulatory agencies, and medical specialty professional societies.



Behavioral Health

Integrated Care



AmeriHealth Caritas Next and First Choice Next's integrated behavioral and physical health supports whole-person care and improves outcomes for individuals with chronic, co-occurring, and complex health needs.

Key benefits of integrated care:

- Early detection and intervention
- Reduced stigma around behavioral health services
- Increased patient engagement and satisfaction
- Improved quality of care and health outcomes

Population Health Model:

- Connects care coordination and population health management
- Creates individualized, person-centered care plans
- Supports both physical and behavioral health needs
- Helps improve outcomes through coordinated care for members and families

For care coordination support, contact the Rapid Response and Outreach Team or submit a Member Intervention Request Form. The Rapid Response and Outreach Team's contact information can be found at www.amerihhealthcaritasnext.com > Pick Your State > For Providers > Tools and Services > Let Us Know Program.

Fraud, Waste, and Abuse

Defining Fraud, Waste, and Abuse

The Plan has a dedicated Program Integrity department charged with preventing, detecting, investigating, and reporting fraud, waste, and abuse (FWA).



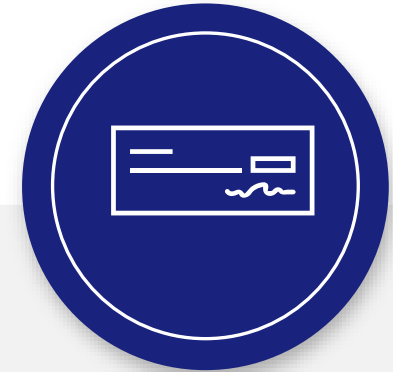
Fraud

Fraud is when a person knowingly provides false and/or misleading information to obtain some benefit for themselves or some other person that they are not eligible for. Providers should be aware of applicable federal and state laws, which detail specific acts that constitute fraud.



Waste

Waste is an overutilization of services or other practices that results in preventable costs. Waste is not considered to be caused by criminally negligent actions, but rather is the misuse of resources.



Abuse

Abuse consists of practices that do not make sense from a financial, business, or medical standpoint and which cause federally funded programs to provide unnecessary funds.

Tools and Services

User-friendly Tools

The Provider Tools and Services webpage provides quick links to many provider friendly tools and resources including:

Provider Manual

Provider
Reference
Guide

Claims, Billing,
and Payment

Prior
Authorization
Lookup Tool

Online Medical
Authorizations

NaviNet

Member
Benefits

Let Us Know
Program

Language
Access Flow
Chart

Member Rights
and
Responsibilities

Provider Tools and Services

Our user-friendly tools and resources are designed to support AmeriHealth Caritas Next's providers and staff in giving our members excellent and efficient health care.

Working with AmeriHealth Caritas Next

We offer the following resources to assist you and your staff:

- [Provider manual \(PDF\)](#)
This manual will help you and your office staff provide services to our members.
- [Provider reference guide \(PDF\)](#)
Print and use this document to have important plan contact information right at your fingertips.
- [Reimbursement policies](#)
Reimbursement policies ensure providers are aware of guidelines governing claims submission and payment.
- [Claims, billing, and payment](#)
Electronic claims submission and electronic payment options.
- [Member benefits](#)
This section includes information on the 10 essential benefits, metal-level benefits, and summaries of coverage.
- [Fraud, waste, and abuse](#)
Learn how you can help report fraud, waste, and abuse.
- [Online Medical Authorizations](#)
AmeriHealth Caritas Next has worked with NantHealth | NaviNet to bring you Medical Authorizations — a robust, intuitive, and streamlined online authorizations workflow.
- [Let Us Know Program](#)
Collaborate in engaging our members and managing their health care.
- [NaviNet](#)
NaviNet is an easy-to-use, secure portal that links providers to AmeriHealth Caritas Next at no cost to them.
- [Prior Authorization Lookup Tool](#)
A fast, easy way to find out if a service requires prior authorization.
- [Quality Assurance and Performance Improvement \(QAPI\) program](#)
AmeriHealth Caritas Next's Quality Assurance and Performance Improvement (QAPI) program provides a framework for the evaluation of the delivery of health care, behavioral health care, and services provided to members. Learn how to help us with our quality-related efforts.

Member care

- [Language access flow chart \(PDF\)](#)
- [Member rights and responsibilities](#)

Provider Manual

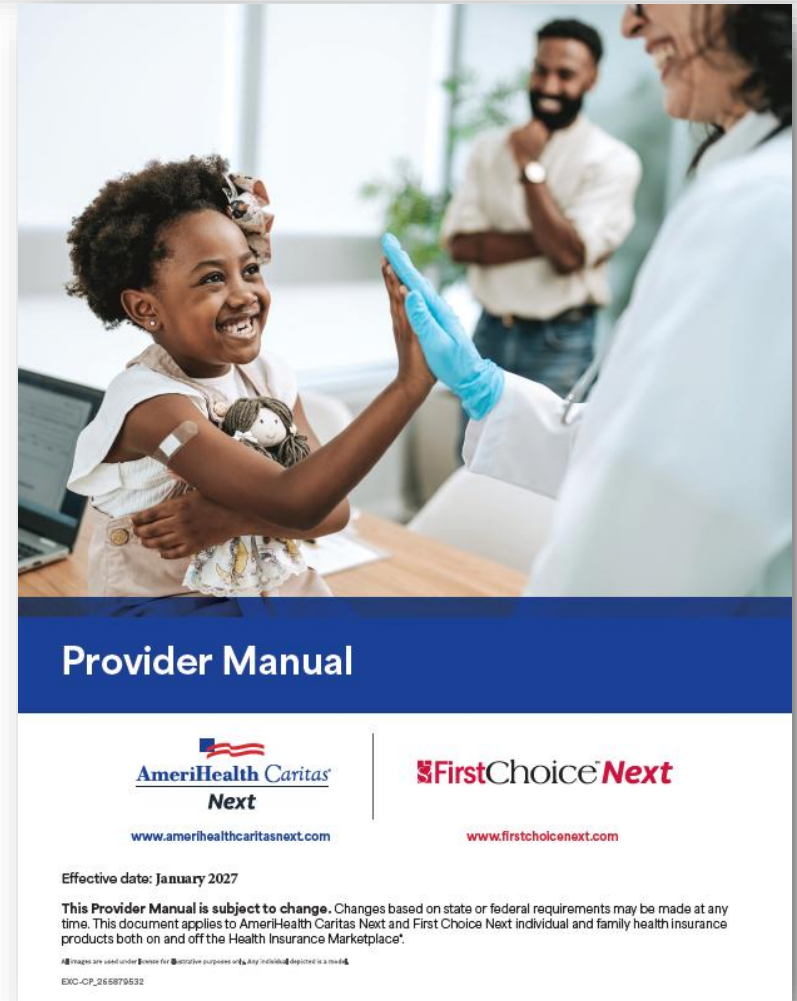
Plan Guidance

This Provider Manual is updated regularly to provide key policies, procedures, and administrative guidance for delivering medically necessary covered services to our members, your patients.

It includes pathways to website resources for detailed state-specific requirements and directs providers to primary source documents, such as the member's Evidence of Coverage (EOC) and Schedule of Benefits (SOB) to help locate the appropriate information.

The Provider Manual can be found at www.amerihhealthcaritasnext.com
> For Providers > Provider Manual.

Pathways can easily be bookmarked for later reference.



Evidence of Coverage

The **Evidence of Coverage** identifies the health care services and prescription drugs covered by the Plan. It also provides information regarding service exclusions, services requiring prior authorization, grievances and appeals, and member rights and responsibilities. The **Evidence of Coverage** is filed yearly with the state's Department of Insurance for review and approval.

2027 EVIDENCE OF COVERAGE

The Evidence of Coverage can be found at www.amerihealthcaritasnext.com > For Members > Forms and Documents > Evidence of Coverage.

Schedule of Benefits

The Schedule of Benefits provides information on any applicable copays, deductible, and coinsurance.

The member's Schedule of Benefits can be found at www.amerihealthcaritasnext.com > View Our Plans > View Our "Metal" Plans > Schedule of Benefits.

The member's metal plan can be found on NaviNet under Eligibility and Benefits.

Benefit Details

The following table provides basic information about your benefits under this plan.

Benefit	In Network	Out of Network
Primary & Specialist Office Visits		
Primary Care Visit to Treat an Injury or Illness	From 1 to 4 Visit - \$25 Copayment per visit Visit 5 and after - Deductible, then No Charge	Not Covered
Specialist Visit	Deductible, then No Charge	Not Covered
Other Practitioner Office Visit (Nurse, Physician Assistant)	Deductible, then No Charge	Not Covered
Routine Foot Care	Deductible, then No Charge	Not Covered
Virtual Care 24/7 <i>Virtual care visits offered through AmeriHealth Caritas Next Virtual Care 24/7 are covered at No Charge; your deductible does not apply. Otherwise, virtual care visits are subject to the same cost sharing responsibilities as office visits.</i>	No Charge	Not Covered
Preventive Care		
Newborn Hearing Screening	No Charge	Not Covered
Nutritional Counseling	No Charge	Not Covered
Preventive Care/Screening/Immunization	No Charge	Not Covered
Well Baby Visits and Care	No Charge	Not Covered

Provider Reference Guide

Provider Reference Guide

The Provider Reference Guide gives providers the ability to have important plan contact information right at their fingertips.

Key information includes:

- Provider Services Contacts
- Member Services Contacts
- Pharmacy Contacts
- Utilization management
- Claims and billing information
- Provider Disputes and Refunds

AmeriHealth Caritas Next in Delaware

Provider Reference Guide

www.amerhealthcaritasnext.com/de

Provider Services	1-833-301-3377 Fax: 1-855-329-3377
Provider Services is available Monday through Friday, 8 a.m. – 6 p.m. ET Here is a partial list of the types of assistance you can expect from Provider Services: • Eligibility checking • Reporting demographic data changes • Claims status inquiry • Filing an informal dispute (ED) technical support • Electronic data interchange (EDI) technical support Provider Correspondence Mailing Address: AmeriHealth Caritas Next Attn: Provider Correspondence P.O. Box 7428 London, KY 40742-7428	

AmeriHealth Caritas Next Member Services	
• Member Services.....	1-833-590-3300 (TTY 711)
• Member Services fax.....	1-866-329-3367
Member Services is available Monday through Friday, 8 a.m. – 6 p.m. ET	

Interpreter Services	1-833-590-3300
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Delaware Behavioral Health Crisis Line	
• Statewide 24/7 Crisis Response.....	1-800-969-HELP (4357)
• 988 Suicide & Crisis Lifeline.....	988

AmeriHealth Caritas Next Pharmacy Services	
Pharmacy Hours of operation: Monday to Friday, 8 a.m. to 6 p.m. ET After hours, Saturdays, Sundays, and holidays, please call the 24/7 Pharmacy General Assistance number at 1-833-733-7967. • Pharmacy Clinical Prior Authorization..... • Pharmacy prior authorization fax..... • Formulary and forms.....	

Bright Start® (maternity services)	1-866-577-0833 Fax: 1-833-329-7708
• Admission notification of obstetric deliveries and neonatal intensive care • Referrals	

Rapid Response and Outreach Team	1-866-577-0833 Fax: 1-833-329-7708
Call Monday – Thursday, 8 a.m. – 7 p.m., and Friday, 8 a.m. – 5 p.m. ET, for support with care coordination and member access to services, including care management and the Let Us Know program. Mail Health Risk Assessment forms to: AmeriHealth Caritas Next Attn: Rapid Response and Outreach Team P.O. Box 7418 London, KY 40742-7418 www.amerhealthcaritasnext.com/de	

Fraud, Waste, and Abuse Hotline	1-866-833-9718
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Emergency prior authorization	
AmeriHealth Caritas Next does not require prior authorization for emergency services provided by network or non-network providers when a member seeks emergency care.	

Physical health utilization management	1-833-533-8686 Fax: 1-844-486-3290
• Prior authorization • Discharge planning	

Organ transplant evaluation notification/prior authorization	1-833-983-7229 Fax: 1-844-796-1177
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Behavioral health prior authorization	1-833-533-8686 Fax: 1-833-779-3329
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Evolut (high-tech imaging prior authorizations)	1-800-327-1193 or www.radmd.com
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Concurrent review	1-833-533-8686 Fax: 1-844-332-9329
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Peer-to-peer	1-833-727-3329
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AmeriHealth Caritas Next

A product of AmeriHealth Caritas VP Next, Inc.

REV 20260623
EXC-CP 26001657 DE

www.amerhealthcaritasnext.com/de

Let Us Know Program

Clinical Resources

Use our Member Intervention Request Form (PDF) to let our Rapid Response and Outreach Team know of members whom we can assist with issues, such as:

Missing an appointment

Behavioral health assistance

Medication noncompliance

Care management engagement

Developmental screening issues

Emergency room misutilization

Limited to no knowledge of plan benefits

Needs related to social determinants of health

Tobacco cessation referral

LET US KNOW PROGRAM

AmeriHealth Caritas Next
A product of AmeriHealth Caritas Indiana, Inc.

Member Intervention Request Form

Date: _____

MEMBER INFORMATION	
Member name:	Date of birth:
Member ID number:	Phone number:
Preferred language:	Preferred contact method (optional; select all that apply): ☐ Phone ☐ Text ☐ Mail
Is the member aware of this referral (optional): ☐ Yes ☐ No	
Parent/guardian name (if applicable):	

PROVIDER INFORMATION	
Provider name:	Provider ID number:
Role in the member's care team: ☐ Primary care provider (PCP) ☐ Specialist	Office contact name:
Phone number:	Email/fax:
Best time to call back:	Follow-up preference: ☐ Fax ☐ Call ☐ Email

Please check the identified need or intervention:

☐ Assistance locating a specialty provider (e.g., physical health, behavioral health, trauma specific)
☐ Assistance with durable medical equipment (DME) (e.g., wheelchair)
☐ Assistance with translation services and preferred language materials
☐ Bright Start® maternity program referral
 Estimated date of delivery: _____
☐ Care Management referral
☐ Caregiver resources
☐ Coaching and education on health conditions
☐ Crisis follow-up resources (recent suicide attempt or bereavement after a death by suicide)
☐ Education on alternative and proper use of urgent care and emergency services
☐ Education on plan benefits and resources
☐ Frequent emergency room utilization
☐ Identified care gaps
☐ In need of dental provider
☐ Multiple missed appointments or follow-up care
☐ Nonadherence with treatment plan
☐ Pharmacy consult on controlled substances

☐ Assistance with scheduling and transportation (e.g., recent discharge or appointments)
☐ Recent exposure to trauma or stressful life events (e.g., natural disaster, bullying, violence, loss of job, or death in the support system)
☐ Risk of prescribed medication nonadherence
☐ Screening for mental health or substance use services
☐ Tobacco cessation
☐ Weight management
☐ Assistance identifying resources for the following social determinants of health (SDOH) and/or health-related social needs (HRSN):
☐ Food and nutrition
☐ Financial (budget/utilities)
☐ Housing resources
☐ Transportation
☐ Treatment plan coaching and education support
☐ Additional comments:

Please fax this form to the Rapid Response and Outreach Team at 1-833-728-7329.

This form may also be submitted via [NaviNet > Select Your Health Plan > Workflows for this Plan > Forms and Dashboards > Member Intervention Form](#).

For guidance on completing this form, or to inquire about a submission, please call 1-844-446-7708.

Internal use only:
Note: Rapid Response and Outreach Team to follow up with provider office staff after outreach to member to report interventions.

DEC 07_24544803

NaviNet

Secure Provider Portal



NaviNet is a secure, easy-to-use portal that connects providers with AmeriHealth Caritas Next and First Choice Next at no cost. Through NaviNet, providers and health plans can access and share key administrative, financial, and clinical information in one convenient location.

This tool can help you manage patient care with quick access to:

- Member eligibility and benefits information
- Panel roster reports
- Care gap reports to identify needed services
- Member clinical summaries
- Social determinants of health information
- Admission and discharge reports
- Medical and pharmacy claims data
- Electronic submission of prior authorization requests

Questions

