

VIVIDA HEALTH

**** New 2021 Updates**

IMPORTANT PHONE NUMBERS

	2020	2021
Member Services	(844) 243-5131	(844) 243-5131
Utilization Management	(844) 824-8653	(844) 824-8653
Utilization Management - Inpatient Fax	(888) 669-1763	(888) 522-6740
Utilization Management - Outpatient Fax	(888) 669-1763	(888) 522-6740
Utilization Management - Concurrent Review	(844) 824-8653	(844) 824-8653
Utilization Management - Retrospective Review	(844) 824-8653	(844) 824-8653
Appeal/Complaint Fax	(888) 847-3801	(888) 879-9557
IVR Automated System	(844) 243-5131	(844) 243-5131
Pharmacy Prior Authorization	(844) 716-5385	(844) 716-5385
Vivida Compliance Hotline	(800) 695-1476 Code: VHP	(800) 695-1476 Code: VHP
Vivida Compliance Hotline Fax	(888) 419-3456	(888) 419-3456
Provider Relations	(239) 245-9760	(844) 243-5175
Provider Relations Fax	(888) 396-1226	(888) 396-1226
Pregnancy Notification Fax	(888) 518-5333	(888) 854-3929
Florida Abuse Hotline	(800) 962-2873	(800) 962-2873

VENDOR/SUBCONTRACTORS

	2020	2021
Behavioral Health—Beacon Health Options	(888) 710-2316 (24 hours/7 days/week)	(888) 710-2316 (24 hours/7 days/week)
Transportation (Non-emergent)—OneCall	(877) 848-5993 (24 hours/7 days/week)	(877) 848-5993 (24 hours/7 days/week)
Transportation (Non-emergent)—OneCall Fax	(844) 418-0531 (Fax)	(844) 418-0531 (Fax)
DME/Home Health/Infusion Pharmacy—Coastal Care Services, Inc.	(855) 481-0505 (24 hours/7 days/week)	(855) 481-0505 (24 hours/7 days/week)
DME/Home Health/Infusion Pharmacy—Coastal Care Services, Inc. Fax	(855) 481-0606 (Fax)	(855) 481-0606 (Fax)
Nurse Advice Line—Health Dialog	(844) 865-7920 (24 hours/7 days/week)	(844) 865-7920 (24 hours/7 days/week)
Over-the-Counter Supplies—OTCHS (CVS)	(833) 331-1571 (toll free)	(833) 331-1571 (toll free)
Over-the-Counter Supplies—OTCHS (CVS) Fax	(866) 682-6733 (Fax)	(866) 682-6733 (Fax)
Vision—ICARE Health Solutions	(855) 373-7627 (toll-free)	(855) 373-7627 (toll-free)
Vision—ICARE Health Solutions Fax	(305) 675-8195 (Fax)	(305) 675-8195 (Fax)

CLAIMS

	2020	2021
Claims Submission Payer ID	Payer ID: 45488	Payer ID: A0102
Claims Paper Submission PO Box	Vivida Health PO BOX 211251 Eagan, MN 55121	Vivida Health PO BOX 211290 Eagan, MN 55121
Claims Payment Disputes	Vivida Health 6630 Orion Drive Fort Myers, FL 33912	Vivida Health 6630 Orion Drive Fort Myers, FL 33912
Electronic Claims Submission	Change HealthCare (800) 845-6592	AVAILITY - https://www.availity.com/contact-us/ [availity.com] or (800) 282-4548
Electronic Funds Transfers (EFT)	INSTAMED - connect@instamed.com or (866) 945-7990	Link to form provided by ILS