## Important Contact Information

### PROVIDER SERVICES

- **P.O. Box 5168**
- New York, NY 10274-5168
- **1-888-801-1660**
- Fax: 1-646-313-4634
- Monday to Friday 8:30am–5:30pm

### MEMBER SERVICES

- **P.O. Box 5165**
- New York, NY 10274-5165
- Healthfirst Essential Plans: **1-888-250-2220**
- Monday to Friday 8am–8pm
  (English, Spanish, Mandarin, Cantonese, Korean, and Russian)
- TTY: 1-888-542-3821
- TTY (Spanish): 1-888-867-4132
- MyHFNY.org

### PROVIDER SERVICE INTAKE

- **P.O. Box 5166**
- New York, NY 10274-5166
- **1-888-394-4327**
- Fax: 1-646-313-4603
- Monday to Friday 8am–5:30pm

### CARE MANAGEMENT

For members diagnosed with high-risk conditions or in need of care coordination: **1-800-404-8778**
- Monday to Friday 8am–6pm

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## Healthfirst Essential Plans PLUS Vision & Dental (as of June 1, both EP 1 & EP 2 include Vision and Dental)

- Essential Plan 1 PLUS Vision & Dental
- Essential Plan 2 PLUS Vision & Dental
- Essential Plan 3
- Essential Plan 4

## Secure Provider Portal: hfproviderportal.org

Access the secure provider portal to:
- Confirm member eligibility and member rosters
- Check claim status
- Check member copay/deductible/MOOP
- Review the Healthfirst plans you accept
- View authorization status
- Submit request to update demographic information
- Access the Telehealth Application and Assessment Tool
- And much more

## Public Website: hfproviders.org

Access provider resources and information for:
- Coronavirus (COVID-19)
- Provider Alerts
- Provider Directory: HFDocFinder.org
- Provider Formulary: healthfirst.org/formulary
- Provider Manual
- Telehealth
- And much more

## Access and Appointment Availability

Healthfirst members must be able to locate a Healthfirst participating provider or his/her designated covering provider. It is not acceptable to have an outgoing answering machine message that directs members to the emergency room in lieu of appropriate contact with the provider or covering provider. If an answering machine message refers a member to a second phone number, a live voice must answer that phone line.

<table>
<thead>
<tr>
<th>TYPE OF SERVICE</th>
<th>STANDARD(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Care</td>
<td>0–3+ hours</td>
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<tr>
<td>Urgent Care</td>
<td>0–30 mins upon presentation</td>
</tr>
<tr>
<td>Non-urgent “Sick” Visits</td>
<td>Visit must be scheduled within 48 to 72 hours of request as indicated by the nature of the clinical problem.</td>
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<tr>
<td>Routine Care</td>
<td>Appointment must be scheduled within 4 weeks of request.</td>
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<tr>
<td>Adult Baseline and Routine Physicals</td>
<td>Appointment must be scheduled within 12 weeks of enrollment.</td>
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<tr>
<td>Newborn Visits: Initial Visit to the PCP</td>
<td>Appointment must be scheduled within 2 weeks of hospital discharge. Healthfirst must be notified the next business day after birth.</td>
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<tr>
<td>Well-child Care Visits</td>
<td>Appointment must be scheduled within 4 weeks of request.</td>
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## Notification Requirements

- **All Emergent Admissions**: Called in no later than one business day after admission
- **Newborns**: Next business day following birth
Ancillary Authorizations

- Chiropractic services – ASH: 1-800-678-9133
- Specialty pharmacy – CVS Caremark: 1-866-814-5506
- Pharmacy prior authorization – CVS Caremark: 1-855-582-2022
- Routine vision care/eyewear – Davis Vision: 1-800-773-2847
- Radiology prior authorization – eviCore: 1-877-773-6964
- Routine dental care – DentaQuest: 1-888-308-2508
- PT, OT, ST services – OrthoNet: 1-844-641-5629

Preauthorization Guidelines

- For preauthorization or to notify Healthfirst of an admission, contact the Provider Service Intake department at 1-888-394-4327
- To find out if preauthorization is required for a service or procedure, log in to hfproviderportal.org and navigate to the “Online Authorization Tool” at the top of the page
- Policies are subject to change

Preauthorization is not a guarantee of payment. Payment by Healthfirst for services provided is contingent upon the member’s active membership in Healthfirst at the time the service or treatment was rendered

Member is responsible for any applicable cost-sharing such as copayments, coinsurance, or deductible amounts

Claims Guidelines

Claims Submissions: Claims must be submitted within 180 days of the date of service and should be done so either electronically or mailed as a hard copy to the addresses shown for the Claims department.

Electronic claim submissions must include the National Provider Identifier (NPI), the Healthfirst Member ID number, and the Healthfirst Payer ID Number 80141.

Paper claim submissions must include the NPI and should be mailed to the following address:
Healthfirst Claims Department, P.O. Box 958438, Lake Mary, FL 32795-8438

Healthfirst provides a two (2)-level process for providers to dispute a claim denial or payment which the provider believes was incorrect or inaccurate.

First-Level Dispute Requests:
Reviews and Reconsiderations – Requests can be made via our Provider Portal or in writing and, with supporting documentation, submitted within 90 calendar days from the paid date on the Explanation of Payment (EOP). This includes disputes pertaining to Readmission Denials. Electronic submissions are accepted through the Healthfirst secure Provider Portal at hfproviderportal.org, written submissions should be mailed to Healthfirst Correspondence Unit, P.O. Box 958438, Lake Mary, FL 32795-8438.

Second-Level Dispute Requests:
Provider Claims Disputes – Providers may dispute the outcome of a review and reconsideration via our Provider Portal or in writing, with supporting documentation, within 60 calendar days from the date listed on the reconsideration letter. This includes disputes pertaining to Readmission Denials. Electronic disputes are accepted through the Healthfirst secure Provider Portal at hfproviderportal.org, written submissions should be mailed to Healthfirst Provider Claim Disputes, P.O. Box 958431, Lake Mary, FL 32795-8431.

All questions concerning requests should be directed to Provider Services at 1-888-801-1660.

For further details on claims, submissions, and what to submit as acceptable support documentation, please refer to the Healthfirst Provider Manual at hfproviders.org – Provider Manual, Section 17.

Member Enrollment

- Healthfirst Essential Plans: 1-888-974-9901
  Note: After selecting your corresponding language, select the option for enrollment to speak with a representative in English, Spanish, Mandarin, Cantonese, Korean, or Russian
- Visit healthfirst.org/essential-plans/#2021 for more information on plan benefits
- Visit hfchoice.org/essential-plans/ for patients interested in scheduling an appointment for additional enrollment information

Compliance

Anonymously report compliance concerns and/or suspected fraud, waste, and abuse which involves Healthfirst at 1-877-879-9137 or at hfcompliance.ethicspoint.com.