

### PROVIDER RELATIONS

**1-800-595-9631 Option 2**  
**Marina Gonzalez, Network Manager** 1-800-595-9631 Ext. **4212**  
**gonzalezm@healthnetworkone.com**

### MEMBER ELIGIBILITY VERIFICATION

Providers are responsible for verifying member eligibility prior to rendering services. You may contact MMM of Florida at 1-888-722-7559 or via their Web Portal at: **https://mmm-fl.innovamd.com**

### PRE-AUTHORIZATIONS

**All members** must be referred to the specialist by their PCP for their initial office visit with the specialist.

**Routine office visits do not require** a pre-authorization from HN1.

**Surgical and diagnostic procedures** must be requested from HN1 by faxing the HN1 Service Request Form to 866-646-1772 or via Phone at 800-595-9631, Option 1 .

For surgical procedures and diagnostics **not performed in office**, the specialist must obtain a facility authorization from MMM of FL via phone, fax or web portal.

**Phone:** 833-992-9909 **Fax:** 833-523-2627 **Web Portal:** <https://mmm-fl.innovamd.com>

### CLAIMS SUBMISSION

**EDI:** HN1 selected Clearinghouse is Change Healthcare (f/k/a Emdeon) **PAYER ID: 65062**

**PAPER:** HN1, P.O. Box 21608, Fort Lauderdale, FL 33316-1608

Medical Notes are required if billing the highest level exam codes: **99204-05, 99214-15, 99223, 99233 AND 99274-75**; or claim may be adjudicated and reimbursed at a lower level of complexity. **ALL PAPER CLAIMS** must be billed on a CMS 1500 claim form and submitted along with the supporting documentation

### CONTESTED CLAIMS DECISIONS

A provider may contest a claim decision by submitting the following documentation to claims P.O. Box:

1. Brief cover letter describing the reason for the request along with supporting documentation
2. Copy of the originally submitted and adjudicated claim
3. HN1 EOP

The above documentation must be received within thirty-five (**35**) days of your receipt of the EOP from HN1 or in accordance to applicable network health plan guidelines; otherwise, dispute rights and compensation are waived. A separate claim review must be submitted for each patient and claim.

### CLAIMS STATUS INQUIRIES

All claims status inquires must be made via the **HN1 Provider Web Portal**.

If you do not have a web portal account with HN1, you can request an account at: **healthnetworkone.com/pwp**. If you do not have access to the internet, you may also make any claims status inquires telephonically at **(877) 372-1273**.

### EXCLUDED SERVICES

- Medical Equipment
- Facility Fees (Hospital, ASC, Surgical Suite, etc.)
- Tertiary Services
- Capsule Endoscopies
- Endoscopic Ultrasonography
- Double Balloon Enteroscopy
- Colorectal surgery and any other non-Gastroenterology specialty services
- Diagnostic services that are not performed in a participating provider's office

### LAB/PATHOLOGY/DME/ DRUG ACQUISITION

**LAB/PATHOLOGY/DME/DRUG ACQUISITION (I.E. INJECTABLES): THESE SERVICES ARE NOT COVERED BY HN1.**

Please contact MMM of Florida at **1-888-722-7559** or via their website at: **https://www.mmm-fl.com** for a listing of the participating providers.