Network Health Medicare Advantage Billing and Coverage

Information for Providers

Network Health has Medicare Advantage, Dual-Eligible Special Needs (D-SNP) and Group Medicare Advantage plans. These are **Preferred Provider Organization (PPO)** plans which provide coverage for members throughout the United States and its territories.

Network Health also offers a **Medical Savings Account (MSA)** plan that does not have a designated network of providers.

Nationally, Network Health is the only Medicare Advantage Prescription Drug PPO plan to achieve both a 5 Star Rating from the Centers for Medicare & Medicaid Services (CMS) in 2025, and a 5 Star health plan rating from the National Committee for Quality Assurance (NCQA).* We look forward to working with you.

With a Network Health Medicare Advantage plan,

- Members can seek care at any provider's office or facility that accepts Medicare.
- For PPO plans, out-of-network providers receive reimbursement at 100% of Medicare rates following Medicare payment and reimbursement rules and regulations. This also applies to the MSA plan, however they do not have a network of providers and can see any doctor.
- Referrals or prior authorization are **not** required for out-of-network providers.

Claims

Submit claims for all members services to Network Health electronically or by mail. Claims are processed within 30 days of receipt of a clean claim.

Electronic Claims Submission Payer ID: 77076

Mail Claims Submission

Network Health MA Plans PO Box 568 Menasha, WI 54952

Additional Information

network YYYY Plan Name 🔎 health PPO networkhealth.com Member Network <JOHN Q PUBLIC> Copays In Out \$ <0> PCP \$ <0> Member ID PC Specialist \$ <0> \$ <0> <123456789>^{PC} Rx BIN: 003858 RxPCN: MD Health Plan (80840) RxGrp: NHPA Group 2001899 H5215 010 MedicareR,



Medicare limiting charges apply For plans that have Pick Your Perks

Contact us directly for information on eligibility, benefits, or claims payment.

- Call our provider line at 855-580-9935, Monday-Friday from 8 a.m. to 5 p.m.
- Access our provider portal at networkhealth.com. Click on My Login to register.

Provider Resource Page

Our provider resource page has helpful information on how to submit claims, how to obtain rejected claims reports and payment policies. Visit **networkhealth.com/provider-resources/index**.

Single Case Agreement

If a single case agreement is required, please email **nhpmanagedcarecontracting@networkhealth.com**. A contract manager will contact you to provide the necessary information.



*Based on CMS Star Rating data available at cms.gov and health plan rating data available at **ncqa.org**. Every year, Medicare evaluates plans based on a 5 Star rating system. Y0108_**5457**-02-0625_C