

Quick Reference Guide

JANUARY 2024



YouthCare is a specialized healthcare program of the Illinois Department of Healthcare and Family Services for current and former youth in care aged birth through 21. YouthCare provides medical, behavioral health, dental, vision, and pharmacy coverage, and is part of the Meridian family of brands. Meridian provides government-sponsored managed healthcare services to families, children, seniors, and individuals with complex medical needs.

Contact Us

844-289-2264 (TTY: 711), Monday through Friday, 8 a.m. to 6 p.m.

ILYouthCare.com

Secure Provider Portal: Provider.IYouthCare.com

[YouthCare Provider Manual](#)

Rapid Response Team

Contact for urgent operational matters such as access to care, member eligibility, provider contracting needs or pharmacy and payment issues.

844-289-2264 (TTY: 711)

ILYouthcare@centene.com

Secure Provider Portal

Check member eligibility, submit and view the status of claims, reconsiderations, and prior authorizations, view quality reports and member care gaps, and download patient lists using our secure provider portal:

Provider.IYouthCare.com

Update your practice information with the Meridian provider updates tool: bit.ly/MeridianProvUpdates

Prior Authorization

Services requiring Prior Authorization (PA) can be determined with our online [Pre-Auth Tool](#). PAs can be submitted electronically through the [Provider Portal](#). Portal submission is the fastest, most efficient method for PA processing.

Vendor Solutions	
Dental	Envolve Dental
MRA, MRI, PET, CT Scans, Cardiac Imaging, Pain Management, Speech, Occupational and Physical Therapy, and effective February 1, 2024, Musculoskeletal Services	NIA
Oncology/Supportive Drugs for Members Aged 18 and Older	New Century Health
Post-acute facility (SNF, IRF, and LTAC)	CareCentrix – Fax: 877-250-5290

Billing & Claims

General billing information can be found in the YouthCare [Provider Manual](#). Refer to our website (ILmeridian.com/providers/known-issues.html) for updated information on claims processing and alerts. The timely filing limit is 180 days from the date of service. Billing and claims processing information can also be found in the Illinois Association of Medicaid Health Plan's (IAMHP) [Comprehensive Billing Guide](http://iamhp.net/providers) on iamhp.net/providers.

Electronic Payer ID

68069

Meridian Clearinghouse

Availity

800-282-4548

PaySpan

PaySpan is a free solution that simplifies administrative tasks for electronic payments and automatic reconciliation. If you are not registered, create a new account at payspanhealth.com or by calling **877-331-7154**, option 1.

Mailing Address for Paper Claims

YouthCare

Attn: Claims

PO Box 4020

Farmington, MO 63640-4402

If you are re-submitting a claim for a status or a correction, please indicate "Status" or "Claims Correction" on the claim.

Medical Necessity Appeals

A medical necessity appeal is the first and only level of plan appeal for the member and provider related to medical necessity determinations (authorization denial). Appeals may be requested within 60 days of YouthCare's notice of adverse action. A verbal request for appeals must be followed by a written request. Providers, with the member's consent, may request an appeal related to a medical necessity decision made during the authorization or concurrent review process.

Written appeals may be submitted to:

YouthCare

Attn: Prior Auth Appeal

PO Box 733

Elk Grove Village, IL 60009-0733

Provider Claim Disputes

A claim dispute is related to a claim payment denial, including a claim denied for authorization when the provider failed to obtain a required authorization, and claim processing or payment discrepancies. Requests for reconsideration and disputes must be received within 90 calendar days of the original determination or explanation of payment (EOP). Meridian's claim dispute policy does not routinely allow retroactive authorization reviews and overturning of claim denials when a required prior authorization has not been obtained. Submit a claim dispute using our secure provider portal; it is the preferred and fastest method. Provider.ILYouthCare.com



Medical Claim Refunds/Recoupments

If you would like to reverse a claim without sending a refund you may log into the secure provider portal, identify the claim, and choose the void/recoup function. Your claim will be recouped.

To submit a refund check, please mail the check and supporting documents to:

YouthCare-Meridian Health

Attn: Refunds

PO Box 856407

Minneapolis, MN 55585-6407

Refer to the [YouthCare Provider Manual](#) or the [IAMHP Comprehensive Billing Guide](#) for more information.

Member Appeals

An appeal is a request for review of a decision made by YouthCare to deny, reduce, or terminate a requested service. Members have 60 days from the adverse benefit determination letter to submit an appeal. An authorized representative of the member such as a provider, family member, friend, or attorney may file an appeal on the member's behalf with the member's written permission. Appeals may be submitted verbally or in writing to:

YouthCare

Attn: Grievances and Appeals

PO Box 733

Elk Grove Village, IL 60009-0733

Fax: **833-920-1747**

Email: gareferrals@centene.com

Transportation - MTM

MTM is our non-emergent transportation vendor. Non-emergent non-ambulance transportation services can be arranged by the member or their provider by calling **844-289-2264** (TTY: **711**). Youth under the age of 18 years old cannot ride independently. Members must be accompanied by an adult age 18 years or older.

Pharmacy

For medications that require prior authorization or for a drug that is not on the preferred drug list, submit electronically via [CoverMyMeds](#) or complete a [Medication Prior Authorization Request Form](#) and fax to **844-205-3384**. For urgent or after-hours requests, contact **800-424-3700**. For pharmacy resources visit ILYouthCare.com/providers/pharmacy.html.

Please note, YouthCare's pharmacy benefit manager will be Express Scripts beginning January 1, 2024. Contact numbers for prescribers will not change.

ILYouthCare.com

Our website hosts a variety of resources and self-service tools. Bookmark the links to access key information quickly.

<p>For Providers ILYouthcare.com/providers.html</p>	<p>The <i>For Providers</i> page offers links to provider notices, online provider enrollment, forms, manuals, guides and our pre-auth tool.</p>
<p>Secure Provider Portal Provider.IYouthCare.com</p>	<p>YouthCare’s secure provider portal makes doing business with us easier. It is the fastest and most secure way to check member eligibility, submit claims, view claims status and reconsiderations, prior authorizations and download patient lists.</p>
<p>Pre-Auth Tool ILYouthcare.com/providers/preauth-check/medicaid-pre-auth.html</p>	<p>Prior authorization is required before certain services are rendered to confirm medical necessity. Use the tool by answering questions and following the prompts.</p>
<p>YouthCare Preferred Drug List (PDL) ILYouthCare.com/providers/pharmacy.html</p>	<p>The YouthCare PDL is a guide to help providers choose clinically fit and cost-effective products that include facts about covered drugs.</p>
<p>HEDIS® Quick Reference Guide https://www.ilyouthcare.com/providers/quality-improvement/hedis.html</p>	<p>Find guidance for all lines of business in the <i>HEDIS® MY 2023 Quick Reference Guide</i> to increase your practice’s HEDIS rates and address care opportunities for your patients.</p>
<p>Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Provider Toolkit ILYouthCare.com/providers/provider-resources/forms-resources.html</p>	<p>The EPSDT program is Medicaid’s federally mandated comprehensive and preventive health program for individuals younger than 21 years old. Use the tool kit to learn about early prevention and treatments.</p>