

## Important 2024 Contact Information

<b>HealthTeam Advantage Hours of Operation</b>	October 1 – March 31, 8AM - 8PM EST, 7 days a week; April 1 – September 30, 8AM - 8PM EST, Monday - Friday		
<b>Phone for PPO and HMO</b>	<b>888-965-1965 (TTY 711)</b>		
Fax	800-820-0774		
Website	<a href="http://www.htanc.com">www.htanc.com</a>		
Address	HealthTeam Advantage 300 E. Wendover Ave., Ste. 121 Greensboro, NC 27401		
<b>Utilization Management</b>			
<b>Phone</b>	<b>844-806-8217 option 3 (Monday to Friday 8AM – 5PM)</b>		
After Hours Phone	336-207-2095		
Fax	844-873-3163		
Provider Portal	<a href="https://acuityconnect.conehealth.com">https://acuityconnect.conehealth.com</a>		
<b>Care Management</b>			
<b>Phone</b>	<b>844-806-8217 option 6 (Monday to Friday 8AM – 5PM)</b>		
After Hours Phone	877-229-8614 (24-hour nurse line)		
Fax	844-873-3163		
<b>Provider Benefits &amp; Eligibility Verification</b>			
<b>Phone</b>	<b>844-806-8217 option 1</b>		
Provider Portal	<a href="https://htaprd-provider.nirvanahealth.com">https://htaprd-provider.nirvanahealth.com</a>		
Payer ID	<b>88250</b>		
Email	<a href="mailto:providerbenefitseligibility@htanc.com">providerbenefitseligibility@htanc.com</a>		
<b>Provider Concierge</b>			
<b>Phone</b>	<b>844-806-8217 option 5</b>		
Email	<a href="mailto:providerconcierge@htanc.com">providerconcierge@htanc.com</a>		
<b>Claims</b>			
<b>Phone</b>	<b>844-806-8217 option 2</b>		
Payer ID	<b>88250</b>		
Provider Portal	<a href="https://htaprd-provider.nirvanahealth.com">https://htaprd-provider.nirvanahealth.com</a>		
Mailing Address	HealthTeam Advantage Claims Department PO Box 1264 Westborough, MA 01581		
Email	<a href="mailto:htaclaims@htanc.com">htaclaims@htanc.com</a>		
<b>Zelis</b>			
<b>Phone (Enrollment)</b>	<b>855-496-1571</b>		
<b>Phone (Support)</b>	<b>844-292-4066</b>		
<b>Pharmacy Services (Nirvana/RxAdvance)</b>			
<b>Phone (Pharmacy Help Desk)</b>	<b>PPO/Cardinal: 800-237-1992 (TTY 711) HMO: 800-459-0984 (TTY 711)</b>		
Phone (Coverage Determinations/Appeals)	<b>PPO/Cardinal: 800-237-1992 (TTY 711) HMO: 800-459-0984 (TTY 711)</b>		
Fax (Coverage Determinations/Appeals)	<b>Part D Coverage Determinations: 866-871-8565</b>		
	<b>Part D Appeals: 866-836-8043</b>		
Cover My Meds	<a href="http://www.covermymeds.com">www.covermymeds.com</a>		
Website (Formulary and Medication lookup):	<a href="https://healthteamadvantage.com/prescription-drugs/2024-pharmacy-information/2024-medication-look-up/">https://healthteamadvantage.com/prescription-drugs/2024-pharmacy-information/2024-medication-look-up/</a>		
<b>Routine Supplemental Benefit Providers</b>	<b>Dental: Delta Dental</b>	<b>Vision: VSP</b>	<b>Hearing: TruHearing</b>
<b>Phone</b>	<b>855-253-4721</b>	<b>800-877-7195</b>	<b>866-202-2271</b>
<b>Compliance, Ethics, Fraud Waste and Abuse (FWA)</b>			
<b>Phone</b>	<b>855-741-4518</b>		
Website	<a href="http://www.hta.ethicspoint.com">www.hta.ethicspoint.com</a>		
<b>Medicare (CMS) Contact Information</b>			
<b>Phone</b>	<b>800-MEDICARE or 800-633-4227 (TTY 877-486-2048)</b>		
Website	<a href="http://www.medicare.gov">www.medicare.gov</a>		