

We accept Clover Health!

Quick Reference Guide

cloverhealth.com/providers is the simplest, quickest way to check member eligibility and benefits, submit or check on a prior authorization request, check the status of a claim, find other Clover providers, access documents and forms, and much more. Be sure to have your National Provider Identifier (NPI) handy.

FREQUENTLY USED SERVICES	QUICK LINKS	
To submit a claim If you need to make any changes to an original claim, you can resubmit a corrected claim using one of the channels to the right.	interconnect via Change Healthcare: Payer ID#: 13285	via mail: Clover Health P.O. Box 981704 El Paso, TX 79998-1637
To find an in-network provider	cloverhealth.com/findprovider	
To view prior authorization criteria	cloverhealth.com/preauth	
To set up electronic payments	Go to changehealthcare.com or call 1-866-371-9066 to set up an account. Enter Clover Health's payer ID #13285.	
To verify patient eligibility, benefits, and copays	navinet.navimedix.com	
For all other routine forms and documents	cloverhealth.com/providerforms	
For Part D prior authorization criteria	cloverhealth.com/en/members/formulary (under relevant links)	
To submit a Part D prior authorization electronically	covermy meds.com/main/	
For any Clover Assistant inquiries/support	call: 1-800-619-5541 email: cloverassistantsupport@cloverhealth.com	

If you need additional assistance, you can call or fax using the numbers below.

DEPARTMENT	CONTACT	
Provider Services	T: 1-877-853-8019	F: 1-866-201-3008
Care Management	T: 1-888-995-1689	
Authorization Requests (UM)	T: 1-888-995-1690	F: 1-800-308-1107
Pharmacy (CVS Caremark®)	T: 1-855-479-3657 (PPO) 1-844-232-2316 (HMO)	F: 1-855-633-7673
CVS Caremark Coverage Determinations & Appeals	T: 1-855-344-0930	
Appeals & Grievances	T: 1-888-657-1207	F: 1-732-412-9706 (Appeals)
		F: 1-551-227-3962 (Grievances)
Member Services	T: 1-888-778-1478	

New Correspondence Addresses

Clover has new mailing addresses! On August 1st, 2020, Clover launched 5 new P.O. boxes in order to more effectively route incoming mail to our various departments. We request that your office use the addresses listed below for your future mailings to Clover.

<p>Non-Clinical Claims Payment Disputes If you have attachments (e.g., medical records) you will need to mail or fax in the Claims Payment Dispute form and supporting documents regardless of when the claim was processed. THIS ADDRESS IS NOT FOR CLAIMS SUBMISSIONS.</p>	<p>Clover Health Attn: Disputes P.O. Box 2092 Jersey City, NJ 07303</p> <p>Email: PO_Box_2092@cloverhealth.com Fax: 1-888-240-7243</p>
<p>Clinical Claims Payment Disputes Use except when mailing eviCore appeals; see eviCore denial letter for address. If you have attachments (e.g., medical records) you will need to mail or fax in the Claims Payment Dispute form and supporting documents regardless of when the claim was processed. THIS ADDRESS IS NOT FOR CLAIMS SUBMISSIONS.</p>	<p>Clover Health Attn: Appeals P.O. Box 2091 Jersey City, NJ 07303</p> <p>Email: PO_Box_2091@cloverhealth.com Fax: 1-732-412-9706</p>
<p>Payment Integrity (Pre-Pay) Please include a copy of the audit letter you received with your dispute.</p>	<p>Clover Health Attn: Payment Integrity – Pre-Pay P.O. Box 2044 Jersey City, NJ 07303</p> <p>Email: PO_Box_2044@cloverhealth.com Fax: 1-866-509-4325</p>
<p>Payment Integrity (Post-Pay) Please include a copy of the audit letter you received with your dispute.</p>	<p>Clover Health Attn: Payment Integrity – Post-Pay P.O. Box 2045 Jersey City, NJ 07303</p> <p>Email: PO_Box_2045@cloverhealth.com Fax: 1-866-509-4325</p>
<p>General mailing Please use only when the recipient is unknown.</p>	<p>Clover Health P.O. Box 471 Jersey City, NJ 07303</p> <p>Email: PO_Box_471@cloverhealth.com Fax: 1-866-508-0865</p>