Automated Voice Response System (AVRS) 1-800-723-4337

The Automated Voice Response System (AVRS) allows enrolled providers to readily access detailed information on North Carolina Medicaid Direct, Prepaid Health Plan and Department of Public Health (DPH) topics using a touch-tone telephone:

- Prepaid Health Plan
- Recipient Eligibility
- Claim Status
- Checkwrite
- DPH Prior Authorization

Providers are granted access by entering either their National Provider Identifier (NPI) or Atypical Provider Number. Provider and Recipient must be in the same health/benefit plan for all inquiries on recipient eligibility. Have the required information (below) available before placing your call:

Main Menu		
Option	**Description**	**Required Information**
1	Provider Services	NPI or Atypical

Provider Main Menu		
Option	**Description**	**Required Information**
1	Prepaid Health Plan	N/A
2	Recipient Eligibility	Recipient ID, or SSN and DOB, and DOS
3	Claim Status	Recipient ID, and Date of Service or TCN
4	Checkwrite	N/A
5	DPH Prior Authorization	DPH Plan, PA Type and Recipient ID

Provider Prepaid Health Plan Menu	
Option	**Description**
1	Direct transfer to a Prepaid Health Plan
2	For Managed Care related inquiries: • Managed Care Claim Status • Managed Care Billing • Managed Care Checkwrite • Contracting with a Prepaid Health Plan and quality determinations • Prior Approvals and Transition of Care issues
3	For Fee for Service or Medicaid Direct related inquiries: • Fee for Service or Medicaid Direct claim status • Fee for Service or Medicaid Direct billing • Medicaid enrollment and member eligibility • Services covered under Medicaid, credentialing and prior approvals

Provider Prepaid Health Plan Menu	
Option	**Description**
4	For all other questions

Managed Care Menu	
Option	**Description**
1	Direct Transfer to Amerihealth Caritas • The phone number for Amerihealth Caritas is 888-738-0004
2	Direct Transfer to BlueCross Blue Shield Healthy Blue • The phone number for Healthy Blue is 844-594-5072
3	Direct Transfer to Carolina Complete Health • The phone number for Carolina Complete Health is 833-552-3876
4	Direct Transfer to United Healthcare • The phone number for United Healthcare is 800-638-3302
5	Direct Transfer to Wellcare • The phone number for Wellcare is 866-799-5318
6	To return to the Provider Main Menu

Check Recipient Eligibility Response Menu	
Option	**Description**
1	Recipient Eligibility Information (Medicaid and DPH)
2	Carolina Access Enrollment Information
3	Division of Health Benefits (DHB) Service Limits and Utilization

DHB Service Limit	
Option	**Description**
1	Outpatient Visits (Regular and Specialty)
2	Prescription Drugs
3	Therapeutic Leave Days
4	Home Health Services

Other Coverage/ Restrictions
Program of All-Inclusive Care for the Elderly (PACE)
Restrictive Coverage - Recipient is not eligible for Medicaid claims payment
Medicaid for Pregnant Women
Medicare Qualified Beneficiary

DHB Eligibility Playback Sequence			
1	Medicaid Program	12	Community Alternatives Program (CAP)
2		13	Third-Party Liability (TPL)
3	HMO Enrollment	14	Medicare
4	Family Planning Waiver	15	Prescription Drug Restrictions - Primary
5	Qualified Medicare Beneficiary (MQBB/MQBE) - Part B Premiums	16	Prescription Drug Restrictions - Specialty
6	Qualified Medicare Beneficiary (MQBQ) - Medicare Premiums, Deductibles, and Co-Pays	16a	Recipient Pharmacy Lock-in
7	Medicaid for Pregnant Women	17	Hospice
8	Incarcerated	18	Recipient Cost Sharing - Premiums, Deductibles, and Co-Pays
9	Carolina Access Response	19	Patient Monthly Liability
10	Behavioral Health Services	20	Health Check Screening
11	Behavioral Health Plan Innovations Waiver	21	Transfer of Assets
		22	Time Limit Override

The Division of Health Benefits (DHB) permits inquiries up to the end of the current month, and up to 36 months before the current month. The Division of Public Health (DPH) permits eligibility inquiries on the date of service only up to 12 months in the future and up to 36 months before the current month.

AVRS provides a reference number for DHB inquiries. Retain this number as verification of the eligibility response.