



Clear Spring Health

2020 Quick Reference Guide

Need to contact us? Use this reference guide for quick access to a variety of helpful resources.



Clear Spring Health Online Link

Use provider portal to perform secure transactions such as checking member eligibility and benefits, managing claims and requesting prior authorization. To sign in to Link, go to www.ClearSpringHealthCare.com or eligibility verification line can be reached at [877-384-1241](tel:877-384-1241). To learn more about using Link, please visit www.ClearSpringHealthCare.com



Provider Services

Phone: [877-384-1241](tel:877-384-1241)

- Confirm member eligibility and benefits
- Provide care coordination notification
- Check claims status
- Request prior authorization
- Update facility/practice data

TTY/TDD (for all departments)
711



Member Services

Phone: [877-384-1241](tel:877-384-1241)



Vision

Phone: IL 844-254-9491
Phone: CO, NC, VA 844-824-2014



Dental

Phone: CO 855-225-1731
Phone: IL 800-508-6780
Phone: NC 844-831-9098
Phone: VA 844-822-8109



Behavioral Health Services

Phone: [866-689-8761](tel:866-689-8761)



Fitness Program

Phone: [888-423-4632](tel:888-423-4632)



Over the Counter Program (OTC)

Phone: [877-234-4806](tel:877-234-4806)



Hotline to report Fraud and Abuse or Compliance Concerns

Phone: [866-467-6958](tel:866-467-6958)



Prior Authorization Requests and Care Coordination / Case Management

Phone: [866-689-8761](tel:866-689-8761)
Inpatient Fax: [866-611-1957](tel:866-611-1957)
Inpatient Email: inpatientutilization@eonhp.com
Outpatient Fax: [866-613-0157](tel:866-613-0157)
Outpatient Email: outpatientutilization@eonhp.com



No Referrals Required



Electronic Payments & Statements Enrollment

Change Healthcare
EDI Payer ID Number: [66009](tel:66009)



Pharmacy

Phone: Illinois [833-478-6372](tel:833-478-6372)
Phone: CO, NC, VA [833-459-4412](tel:833-459-4412)



Part D Prescriber Appeals

Phone: [877-384-1241](tel:877-384-1241)



Hearing

Phone: [877-234-4761](tel:877-234-4761)

Addresses

Claims Address (All)
Clear Spring Health
Attn: Claims
P.O. Box 4048
Scranton, PA 18505

Claims Inquiries and Administrative Review
Clear Spring Health
Attn: Provider Disputes/Claims
P.O. Box 4107
Scranton, PA 18505

Appeals and Grievances
Clear Spring Health
Attention: Grievances
P.O. Box 4107
Scranton, PA 18505
Fax – 855-382-6674

Clear Spring Health Member ID Cards

Each Clear Spring Health member will receive an ID card. Each card is issued once, unless cards are requested or reissued due to a demographic, PCP or plan change. ID Cards are good for as long as the person is a member of Clear Spring Health.

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