

Alameda Alliance Wellness (HMO D-SNP) 2026 Quick Reference Sheet



Please use this guide to assist with offering the best possible care.



Thank you for joining the Alameda Alliance for Health (Alliance) provider network! This Quick Reference Sheet is intended to provide you with the information and requirements to navigate our health plan and to assist you with offering the best possible care to our Alameda Alliance Wellness Health Maintenance Organization Dual Special Needs Plan (HMO D-SNP) members.

Claim Submission Information

Claims Status and Inquiries:

- Claim status can be verified for providers using our online Provider Portal.
- Questions? Please call the Alliance Provider Services Department at **1.510.747.4510**.

Timely Filing Guidelines:

- Unless otherwise indicated, contracted providers must submit claims within 180 calendar days post-service.
- Non-participating (non-contracted) providers must submit claims within 365 calendar days post-service.

Paper Claims

Behavioral Health (BH) Services Claims <i>Includes mental health and applied behavioral analysis.</i>	Alameda Alliance for Health PO Box 2460 Alameda, CA 94501-0460
Institutional Services Claims <i>I.e., Hospital, Skilled Nursing Facility (SNF), Long-Term-Care, etc.</i>	Alameda Alliance for Health PO Box 2460 Alameda, CA 94501-0460
Professional Medical Service Claims	If the member/patient is assigned to an Alameda Alliance Wellness or CHCN PCP: Alameda Alliance for Health PO Box 2460 Alameda, CA 94501-0460

Electronic Claims Submission

Electronic Data Interchange (EDI)	Alliance Provider Services Department Phone Number: 1.510.747.4510
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Medicare Secondary Payer or Third Party Liability (TPL)

Third Party Liability (TPL) – Please notify the Alliance if you become aware that a member has other health coverage besides Alameda Alliance Wellness or has a potential TPL case.	Attn: Claims Department Alameda Alliance for Health PO Box 2460 Alameda, CA 94502-0460 Fax: 1.877.747.4506
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Authorizations

Authorizations: Medical and Behavioral Health	Alliance Utilization Management (UM) Department Phone Number: 1.510.747.4540 Prior Authorization e-Fax: 1.855.891.7174 Concurrent Review: Admission Fax: 1.855.313.6306 Clinical Information Fax: 1.855.891.7409
Referral and Prior Authorization Grid	For more information, please view the Alliance Covered Services Benefits Guide at www.alamedaalliance.org/providers/authorizations

Pharmacy Services

<u>Rx BIN</u> 019587	<u>Rx PCN</u> PRX11820	<u>Rx GRP</u> 2026
Authorizations	PerformRx Standard Fax: 1.855.508.1714 Urgent Prior Authorization Fax: 1.855.806.6237 Phone Number: 1.833.793.3767	
Formulary Lookup	www.alamedaalliance.org/members/pharmacy-and-medication-benefits/medication-formulary	
Mail Order	Walgreens Mail Service 8350 S River Parkway Tempe, AZ 85284 Phone Number: 1.800.345.1985	
Pharmacy Benefit Manager (PBM)	PerformRx Toll-Free: 1.833.793.3767	
Pharmacy Lookup	www.alamedaalliance.org/help/find-a-pharmacy	

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Key Contact Information

Eligibility	Alliance Automated Eligibility Verification Line Phone Number: 1.510.747.4505 24 hours a day, 7 days a week
Fraud, Waste, and Abuse (FWA)	Alliance Compliance Department Toll-Free Hotline: 1.844.587.0810 Email: compliance@alamedaalliance.org
Member Services	Alameda Alliance Wellness Member Services Department Phone Number: 1.888.88A.DSNP (1.888.882.3767) If you cannot hear or speak well, use TTY or call 1.800.735.2929 Seven (7) days a week, 8 am – 8 pm, including holidays
Provider Search	www.alamedaalliance.org/providers
Provider Portal	https://secure.healthx.com/aah.provider
Provider Directory Changes	Alliance Provider Services Department Phone Number: 1.510.747.4510

To learn more, please contact:
Alliance Provider Services Department
Monday – Friday, 7:30 am – 5 pm
Phone Number: **1.510.747.4510**
www.alamedaalliance.org/alliancewellness

Alameda Alliance Wellness is an HMO D-SNP plan with a Medicare contract and a contract with the California State (Medi-Cal) Medicaid Program. Enrollment in Alameda Alliance Wellness depends on contract renewal.

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