Contact us by telephone - Phone numbers

Jurisdiction H (JH) includes Arkansas, Colorado, Louisiana, Mississippi, New Mexico, Oklahoma, Texas, Indian Health and Tribal facilities as well as Veterans Affairs.

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|  A/B | Department / Specialty area  | JH telephone numbers  | Fax number  |
| AB | Provider inquiries ([1](#First)) | 855-252-8782  |  877-439-5479 |
| AB | Provider interactive voice response (IVR) (claims and eligibility information) ([2](#Second)) | 855-252-8782options 1, 2 or 5  |   |
| AB | EDI Helpdesk ([1](#First)) – Please have your PTAN, NPI and Tax ID available when calling. | 855-252-8782option 3  | 877-439-5479  |
| AB | Novitasphere Helpdesk –PTAN, NPI and Tax ID available when calling. | 855-880-8424 |  |
| AB | Provider enrollment (e.g., general enrollment questions, site visit questions, etc.) ([1](#First))Note: The Provider Enrollment Help Line should not be used for checking the status of an application. For status, please visit the Provider Enrollment Status Inquiry Tool. You can also directly contact the credentialing specialist, as was referenced on your acknowledgement or development letter. | 855-252-8782option 4  |  877-439-5479 |
| AB | Teletypewriter (TTY) ([3](#Third)) | 711 |   |
| B | Automated claim corrections ([4](#Fourth)) | 855-252-8782option 1, then option 2  |   |
| B | Submitting documentation prior to EMC claims via fax ([5](#Fifth)) |   | 877-439-5479  |
| A/B | Prior authorization ([6](#BM6)) | 855-340-5975 | 877-439-5479  |

Don't see it? View telephone numbers for other agencies and links to other web sites.

If you are a beneficiary or calling on behalf of a beneficiary, please call 1-800-MEDICARE (800-633-4227); TTY: 711.

If you need to reach us electronically, please refer to our general inquiry form (Part A) (Part B) or email contact list (Part A) (Part B).

To reach our leadership team, please refer to the Contact listing for Novitas Solutions leadership team.

To reach us via U.S. mail, please refer to our postal mailing addresses (Part A) (Part B).

1. Our single toll-free telephone customer service units, including provider services, EDI helpdesk and enrollment are available Monday – Friday, 8 a.m. – 4 p.m. CT and MT.
2. Our IVR system enables you to receive information without representative intervention. The IVR provides quick and accurate responses to routine inquiries.

IVR hours of availability (Part A) (Part B)

IVR User Guide (Part A) (Part B)

1. A Teletypewriter (TTY) is a special device that allows hearing and speech impaired callers to type messages back and forth.

After dialing 711, callers will provide the 711-relay representative with our JH toll-free number (1-855-252-8782). To connect with a representative, you will provide the relay representative with the line of business (Part A or Part B) and then indicate you are requesting a live agent.

If your inquiry involves PHI/PII, then you will need to have the provider’s PTAN, NPI, and TIN as well as the beneficiary’s MBI, name, and DOB (for eligibility inquiries) or DOS (for claim inquiries) readily available.

1. Our unlimited automated claim corrections via the IVR provide an opportunity to have your Medicare claims reviewed over the telephone. This is a faster and more efficient process for you, rather than submitting your request in writing.
2. This fax to image technology will allow you to fax medical documentation for Part B electronic claims (i.e., 835 professional transactions) to us. This fax number is available 24 hours a day seven days a week.

[Fax Cover Sheet for Submitting medical documentation for EDI claims for Medicare Part A](https://www.novitas-solutions.com/webcenter/content/conn/UCM_Repository/uuid/dDocName%3A00004751)

[Fax Cover Sheet for Submitting medical documentation for EDI claims for Medicare Part B](https://www.novitas-solutions.com/webcenter/content/conn/UCM_Repository/uuid/dDocName%3A00004752)

1. Our toll-free telephone prior authorization unit is available Monday – Friday, 8 a.m. – 6 p.m. ET.

Provide your correct PTAN when contacting provider customer service.

The Provider Transaction Access Number (PTAN) is your unique Medicare identification number. This number is assigned to providers once their enrollment has been approved. Although the National Provider Identifier (NPI) is used to submit claims to Medicare, the PTAN is required to authenticate a provider’s identity for all transactions relating to eligibility, billing, and enrollment ([IVR](https://www.novitas-solutions.com/webcenter/portal/MedicareJH/pagebyid?contentId=00004409), [Novitasphere](https://www.novitas-solutions.com/webcenter/portal/Novitasphere_JH), [enrollment requests](https://www.novitas-solutions.com/webcenter/portal/Enrollment_JH), provider contact center inquiries, etc.).

For this reason, it is important that you provide the correct PTAN when required to do so in the proper format. For example, all PTANs that have double zeroes as a prefix (00XXXXX) should be provided with those zeroes, followed by the remaining digits. If your PTAN is composed of numbers and letters, be sure to provide the appropriate format and order, without confusing letters and numbers. For example, do not enter the letter “O” in place of the number “0” and vice versa.

When you call our provider contact center, our customer service representatives will require your PTAN to respond to any eligibility and claim-related inquiries. Please be sure to have the correct PTAN readily available. The PTAN of the claim where information is being requested, must be provided.