

Zing Health Providers' Quick Reference Guide





Important Contact Information

Department	Phone Number	Fax	Email
Customer Service	1-866-946-4458 (TTY: 711) Mon.-Fri., 8 a.m.-5 p.m.	1-312-239-8304	member.services@myzinghealth.com
Pharmacy (Elixir Crafted Rx Solutions)	1-866-946-4458		
Behavioral Health	1-833-946-4458	1-844-946-4458	prior_auth@myzinghealth.com
Prior Authorization	1-833-946-4458	1-844-946-4458	prior_auth@myzinghealth.com
Appeals	1-866-946-4458	1-844-917-4458	appeals@myzinghealth.com



Visit us on the web at myzinghealth.com.

Vendor Contact Information

Vendor	Phone Number
Liberty Dental (dental benefits)	1-866-946-4458
EyeMed (vision benefits)	1-866-946-4458
NationsHearing (hearing benefits)	1-877-391-8637
American Specialty Health (ASH) Silver&Fit (fitness benefits)	1-877-427-4788
Elixir (pharmacy benefits)	1-855-476-6993
NationsOTC (over-the-counter benefits)	1-866-946-4458
MD Live (telehealth benefits)	1-800-657-6169
24/7 nurse advice line	1-855-494-6877

Sample Medical ID Card (varies by plan)

Contract: H7330
PBP: 001

Zing Choice IL (HMO)
A Medicare Health Plan with Prescription Drug Coverage

Member: **First & Last Name**
Member ID#: **Z0000000XX**
Effective Date: **9/19/2022**
PCP: **Last name, First Name**
PCP Phone: **1-XXX-XXX-XXXX**

RxBIN: 012312
RxPCN: PARTD
RxGRP: ELZING001
RxID:

MedicareRx
Prescription Drug Coverage

Copays: PCP: \$0 Spec: \$25 Emergency Room: \$125
If Member has full Medicaid, no balance billing

Customer Service:
Members, Providers, Dental,
Vision and Hearing
1-866-946-4458 TTY/TDD: 711

Pharmacy Providers
Help Desk: 1-855-476-6993

24/7 Nurse Hotline
1-855-494-6877

MD Live (TeleHealth)
1-855-494-6877

Payer ID Number: 83248

Medical Paper Claims
Zing Health
PO Box 981718
El Paso, TX 79998-1718

www.myzinghealth.com



Claims

Timely filing notice: Timely filing is 365 days from the date of service or the date of discharge unless otherwise specified in the provider agreement.

EDI Trading Partner - Availity

Check eligibility, submit claims, and check claims status

Payor: Zing Health

Payor ID: 83248

1-800-AVAILITY

Clearinghouse Connectivity: Zing Health has partnered with Availity as its preferred EDI clearinghouse. You may connect directly with Availity. In some cases, your existing clearinghouse, billing service, or trading partner may have existing reciprocal agreements with Availity.

Medical and Behavioral Health Claims



Paper Submissions

Zing Health
P.O. Box 240599
Apple Valley, MN 55124



Electronic Submissions

EDI Trading Partner - Availity
[availity.com/edclearinghouse](https://www.availity.com/edclearinghouse)

Submitting Corrected Claims



Paper Submissions

Attn: Claims

Zing Health
P.O. Box 240599
Apple Valley, MN 55124

Timeframe: Corrected claims should be submitted within 60 days from the date of the Explanation of Payment (EOP).



Claim Payment Disputes

Attn: Claim Payment Dispute
Zing Health
Fax: 1-844-918-4458
Email: provider.services@myzinghealth.com

Timeframe: Provider claim disputes should be submitted within 60 days from the date of the Explanation of Payment (EOP).

Prior Authorization

A list of tests, procedures, and services requiring prior authorization is available on our website here: [Authorization Request Form Provider Instructions and Form.pdf \(myzinghealth.com\)](#).

