

Quick Reference Guide

ATRIO Health Plans | Oregon



Prescription Drug Information

FORMULARY LOOKUP

Online atriohp.com - go to "Find a Drug"
Call ATRIO 1-888-272-6211,
Monday - Friday, 8a.m. to 5p.m.

MEDIMPACT

Phone (for after hours) 1-800-681-9571; Option 4
Any pharmacy questions, email:
pharmacy@atriohp.com

Supplemental Benefit Contact

More information can be found online at
atriohp.com/extra-benefits

DENTAL

Phone 1-877-672-8620 (TTY 711)
8 a.m. – 8 p.m. Daily

TELEHEALTH – Partnered with Teladoc

Phone 1-800-835-2362
24 hours 7 days a week

Online teladoc.com
Mobile App: Teladoc

VISION – Partnered with VSP

Phone 1-844-344-0572 (TTY 1-800-428-4833)
Mon. – Fri. 8a.m. to 5 p.m., PST

ROUTINE HEARING – Partnered with Amplifon

Phone 1-866-375-0563 (TTY 711)
8 a.m. to 8 p.m. Daily

OVER-THE-COUNTER (OTC) – Catalogs and
retail network store listings can be found only at
atriohp.com/extra-benefits

Phone 1-855-253-5768 (TTY 711)
Monday - Friday, 8 a.m. to 11 p.m., EST

TRANSPORTATION – Partnered with SafeRide Health

Phone 1-888-617-0467 (TTY 711)
6 a.m. to 6 p.m. local time, Monday - Friday

FLEX CARD – Includes dental, fitness, and OTC

Phone 1-800-371-2119 (TTY 711)
Monday - Friday, 8a.m. to 11p.m., EST

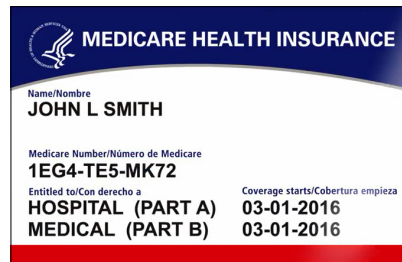
CHIROPRACTIC/ACUPUNCTURE/NATUROPATHY –

Partnered with American Specialty Health (ASH)

Phone 1-800-678-9133 (TTY 711)
October 1st – March 31st:
5 a.m. to 10 p.m. (PDT), 7 days a week
April 1st – September 30th: 5 a.m. to 8 p.m.
(PDT), Monday – Friday.

SAMPLE CARDS

MEDICARE



ATRIO MEDICARE ADVANTAGE



FLEX CARD



**members will not be able to use this card for copays*

Provider Information

PROVIDER CUSTOMER SERVICE

Phone 1-877-672-8620

8 a.m. - 5 p.m. (except major holidays)

PROVIDER PORTAL

Visit the Provider Portal by clicking on the MyATRIO button on the homepage.

atriohp.com/provider-portals/

- Check member eligibility and benefits
- Submit electronic claims
- Request prior authorization

PROVIDER LOOKUP

Online atriohp.com

CLAIMS SUBMISSION

Payer IDs can be found at atriohp.com/oregon/providers/provider-resources

Electronic Claims

Submit within 180 days of service

Paper Claims

Mail: ATRIO Health Plans
338 Jericho Turnpike #135

For provider use only. Do not distribute to members.

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APPEALS/ RECONSIDERATIONS/ PAYMENT DISPUTES

Phone 1-877-672-8620 (TTY 711)

Fax 1-866-339-8751

The Provider Appeal form can be found here:

atriohp.com/provider-appeal-form

PRIOR AUTHORIZATION REQUESTS

Online atriohp.com/oregon/providers/prior-authorizations

Medical

Phone 1-877-672-8620 (TTY 711)

8 a.m. – 8 p.m. Daily

Part B Drugs

Submit request via fax (posted online)

atriohp.com/oregon/providers/part-b-pa-st-grid/

For clinical questions email:

ATRIO_Prior_Auth@atriohp.com

Part D Drugs

Submit ePA at covermymeds.com/main/prior-authorization-forms/atrio-health-plans/

Submit the completed form via fax at
1-858-790-7100

Phone 1-800-788-2949 (Medimpact)

MODEL OF CARE TRAINING

Please complete the required Model of Care training at atriohp.com/Providers/Provider-Resources.