



Provider News

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WellCare of Kentucky supports relief efforts for communities hit by tornadoes

By: Darren Levitz

\$225,000 in funds will be distributed to support immediate and long-term needs of communities in Eastern Kentucky

www.wellcareky.com, a Centene Corporation company, announced its support for relief efforts to help meet immediate and long-term needs of communities affected by tornados in Eastern Kentucky.

WellCare, with additional funding support from the [Centene Foundation](#), is providing assistance focused on housing support, rebuilding projects, dispersing financial assistance, and distributing essential goods to help survivors recover post-disaster.



The total donations are being distributed to local organizations focused on direct, ongoing relief to those affected by the devastating tornadoes. \$50,000 of the donation, contributed by the Centene Foundation, has been allocated to the [Team Kentucky Storm Relief Fund](#), a program established by Governor Andy Beshear, to assist those impacted by severe weather systems.

WellCare will invest the remaining funds in four Laurel

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WellCare associates welcome residents of London, KY to a free hot meal.

Relief efforts, continued

County-based organizations providing continued support to tornado survivors in their region:

Come-Unity Cooperative Care

- **Christian Appalachian Project** (CAP) – Disaster Relief
- Roscoe's Daughter, Inc
- **Upper Cumberland Community Foundation**

"Severe storms and tornados have had a devastating impact on Kentucky communities, and recovery from extreme weather events like this one takes all of us," said WellCare Plan President and CEO Corey Ewing. "Since 2022, WellCare has provided more than \$1.2 million in donations to community partners and providers to address community needs following multiple natural disasters. Both WellCare and the Centene Foundation are committed to ongoing efforts to help our friends and neighbors rebuild their lives."

To date, WellCare has supported this crisis by providing essential needs like food, shelter, and medical care and will continue to monitor overall recovery efforts. Within the first week of the recent severe storms, WellCare supported affected communities by:

- Communicating to thousands of affected members via text, automated phone messages, and social media channels to connect them with emergency community support and advise that emergency prescriptions lost in the storm would be replaced.
- Reaching out with personal phone calls to high-risk members.
- Providing both a 24-hour Crisis and a Nurse Advice Hotline.
- Providing access to 24-hour behavioral and mental health services.
- Delivering thousands of personal care and hygiene items to people in temporary shelters.
- Volunteering to serve hot meals to local residents and first responders.

Donated funds are being used to secure emergency shelter and access to hot meals as well as critical medical treatment. Additional needs will be met by purchasing generators, beds, transportation, and food. Funding will also be used restore, refurbish, and even rebuild homes for thousands of affected residents.



Our volunteers helped prepare much needed meals.



We were happy to serve up hot meals to local residents and first responders.



Getting to Know WellCare's Plan Chief Operating Officer Marc Nyarko

What led you to joining WellCare of Kentucky? Meeting with Corey was a pivotal moment in my decision to join WellCare of Kentucky. From our first conversation, I was struck by the organization's unwavering commitment to a member-first culture. It was clear that this wasn't just a slogan—it was a deeply embedded value that guided every decision and interaction. That alignment with my own passion for making a meaningful impact in people's lives made the choice to join WellCare both natural and exciting.

What are the key priorities for WellCare of Kentucky in the coming year? Our focus for the year ahead is clear and purposeful. We are committed to:

- **Driving cost efficiency** to ensure we deliver high-value care while being responsible stewards of healthcare resources.
- **Ensuring quality** across all aspects of our services, with a continued emphasis on improving health outcomes for our members.
- **Engaging with our provider partners** to strengthen collaboration and deliver more coordinated, effective care.
- **Taking care of our associates**, recognizing that a supported and empowered team is essential to fulfilling our mission.

These priorities reflect our ongoing dedication to putting our members first while building a stronger, more sustainable healthcare system for Kentucky.

Talk about the importance of the WellCare/Provider relationship.

We recognize that our provider partnerships are essential to our success. These relationships are the foundation of our ability to deliver high-quality, cost-effective care to our members. By working closely with our providers, we can better coordinate services, improve health outcomes, and ensure that care is both accessible and efficient. Together, we share a commitment to putting members first—and it's through strong collaboration that we can truly make a difference in the lives of those we serve.

If you could share one piece of information with our providers, what would it be? If there's one thing I'd love our providers to know, it's how much work happens behind the scenes to support them in caring for our members. From sending electronic appointment reminders to making outreach calls that help close care gaps, our teams are constantly working to ensure members stay engaged and on track with their health.

These efforts are all about making it easier for providers to focus on what they do best—delivering excellent

care—while we help ensure that no member falls through the cracks.

What do you believe is the most important quality for a successful team?

I believe that the strength of any team lies in its ability to work together toward a shared goal. Collaboration means more than just working side by side—it's about listening, supporting one another, sharing ideas, and building trust. When we collaborate effectively, we break down silos, solve problems faster, and create better outcomes for our members, our providers, and each other.

What was your first job, and what did you learn from it? My first job was working in the mailroom at a computer company. It might not have seemed glamorous, but it taught me one of the most important lessons early on: accountability. I quickly realized that others were depending on me to do my job well—whether it was delivering important documents on time or making sure nothing got lost in the shuffle. That sense of responsibility and understanding how my role fit into the bigger picture has stayed with me throughout my career.

What motivates you? For me, it's the opportunity to make a difference. Whether it's improving a process, supporting a colleague, or helping a member get the care they need,

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Marc Nyarko, continued

knowing that my work has a positive impact is what drives me every day. It's incredibly rewarding to be part of a mission that truly matters—and to contribute to something bigger than myself.

What is your favorite go-to midnight snack? Chocolate Chip Cookies—I can't know they're in the house

What TV show are you currently binge-watching? MobLand

What's the best advice you've ever received? "Life isn't a test run—stop waiting for things to be perfect and go for it." It was a powerful reminder that waiting for the "right moment" can often hold us back. Progress, growth, and opportunity come from taking action—even when things aren't perfectly lined up. That mindset has encouraged me to take chances, embrace challenges, and keep moving forward with confidence.

Nominations are open for WellCare of Kentucky's 6th annual Community Health Champions celebration

Here's your chance to honor Kentucky's community heroes who are the embodiment of service, volunteerism, and being and advocate for others.

WellCare's 6th Annual Community Health Champions program will select a winner from each of three categories: Provider, Behavioral Health, and Hospital. A \$3,000 grant will be made to each of these winner's chosen non-profit organization.

We invite you to nominate a community hero you consider deserving of this award (yourself included) by completing the [WellCare Community Health Champion nomination form](#) by August 2, 2025.

The event will take place on Wednesday, September 24 at Churchill Downs in Louisville. Winners, nominators, and guests are welcome to attend. The ceremony will include a catered lunch.

Before you nominate, please take a minute to consider:

What makes this person/organization a Community Health Champion? Please describe the nominee's achievements, including quantitative and qualitative examples.

What sets this person/organization apart from other nominees? Tell us about their volunteer work and/or what they do to go above and beyond their objectives?

Please share this information far and wide to help us hear about the amazing people/organizations working so hard to support communities throughout Kentucky.



Resumption of Utilization Management Policies (Prior Authorization, Concurrent Review, and Retrospective Review) for Behavioral Health Services

Dear Providers and Staff,

Thank you for your continued partnership in serving WellCare of Kentucky Medicaid members. We have some important information to share with you related to recently passed legislation—House Bill (HB) 695.

HB 695, enacted by the 2025 General Assembly, restores utilization management requirements for behavioral health services that were suspended by the Department for Medicaid Services during the COVID pandemic.

In accordance with HB 695, WellCare is re-instating the utilization management requirements that were in place in January 2020 on outpatient behavioral health services, inpatient psychiatric admissions, and psychiatric residential treatment facility admissions. The effective date of this change will impact claims with dates of service 6/25/25 forward. Any claim submitted for a service(s) rendered to a WellCare of Kentucky Medicaid member that requires authorization after 6/25/25, must have the appropriate authorization approval or the claim will deny.

Below are several resources available to confirm our authorization requirements and how to submit an authorization request:

Provider Manual and Quick Reference Guide (QRG):

Our provider manual and QRG provides detailed information and instructions as to where to review our authorization requirements and how to submit authorization requests are found on the [WellCare Medicaid Provider Overview page](#).

Prior Authorization List

WellCare's list of behavioral health services/ codes subject to prior authorization is published under "Authorizations" on the [WellCare Medicaid Provider Behavioral Health page](#).

Authorization Lookup Tool

Searching via WellCare's Authorization Lookup Tool is a convenient way to learn whether a given code is subject to prior authorization. The tool is available on the [secure Provider Portal.External Link](#)

Authorization Not Required for Emergency Services

Authorization is not required for emergency services; however, if the service is an inpatient psychiatric admission, you must send a notice to WellCare by the end of the business day that follows the admission day.

Authorization Required for Non-participating Providers

Effective 6/25/25, authorization is required for services rendered by all non-participating (out-of-network) providers.

Submitting Authorization Requests

Authorization requests, including all supporting clinical documentation, can be submitted through any of the following options:

- WellCare of Kentucky Medicaid [Provider Portal](#)
- Kentucky Inpatient Medicaid Fax: 1-877-338-3686
- Outpatient Medicaid Kentucky Fax: 1-877-544-2007
- [Availity Essentials–LoginExternal Link](#) or [Availity Essentials–RegistrationExternal Link](#), if you are new to Availity

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Resumption of Utilization Management Policies, continued

Authorization Forms

WellCare of Kentucky authorization request forms are available on the [Medicaid Provider Forms page](#).

Inpatient Psychiatric Hospitalization Authorizations and Urgent Authorizations Phone

Please call 1-855-620-1861 to request an inpatient psychiatric hospital authorization or to request urgent authorization.

If additional information is needed to complete the medical necessity review related to an authorization request, the WellCare behavioral health utilization team will reach out to you to request it.

Bi-weekly Provider Webinars

We also invite providers to join the bi-weekly provider webinar every other Friday at 1:00 p.m. EST hosted by our Provider Engagement team. These are one-hour meetings where we discuss current key topics, such as utilization management, and other topics requested by providers. To receive an invite to the webinar series, please send an email to Johnie Akers (Provider Engagement) at johnie.akers@wellcare.com.

Again, we thank you for your continued partnership in delivering quality healthcare to our members. If you have any questions regarding this notice, please contact your assigned Provider Engagement Account Manager.



Availity and Wellcare Provider Portals

By: Cathy Davis

The Availity portal can be used for tasks including, but not limited to, submitting new/corrected claims, checking member eligibility and benefits, requesting/viewing authorizations, reviewing RAs, and submitting dispute/appeals. If you are currently using Availity Essentials, you can update your account to include WellCare and Ambetter. If you are not a current user, you can create a free account using this link [Avail-ity Essentials](#). This link can also be used to view the crosswalk of features available for our health plans and targeted topic education.

The WellCare Portal can be used to check member eligibility and benefits, close Care Gaps, complete and submit Appointment Agendas, request member transfers, requesting/viewing prior authorizations, reviewing claim status, submitting initial claims, corrected and voided claims, submitting selective appeals/disputes, tracking grievances and taking selected training modules. You can create a free account using this link [WellCare Provider Portal](#)

Provider Satisfaction Survey

By: Lisa Guess

WellCare's 2025 Annual Provider Satisfaction Survey launched in May. If you received a survey, we hope you'll take a moment to share your feedback. This survey serves as the foundation for key improvement initiatives that we undertake each year, and your feedback is critical to making sure we address the issues that are important to you. We look forward to learning about how we can continue to improve your experience in doing business with us. You may receive a survey via mail, email or phone call. Please keep an eye out for this very important opportunity to tell us about your experience with WellCare.

Why It's Crucial for Healthcare Professionals to Maintain an Up-to-Date CAQH Profile

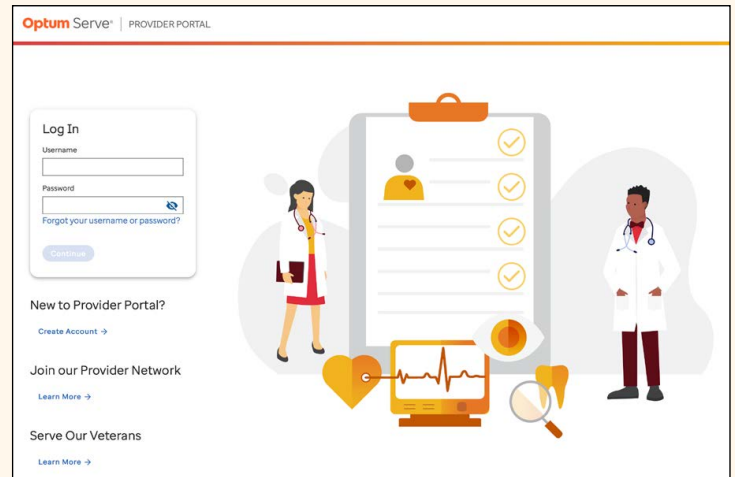
By: Misty Pack

Keeping your CAQH (Council for Affordable Quality Healthcare) profile current is essential for streamlining the credentialing and enrollment process with health plans and payers. CAQH serves as a central repository for your professional and practice information—used by most insurance companies to verify your credentials.

An up-to-date CAQH profile ensures:

- **Faster Credentialing & Recredentialing:** Payers pull information directly from CAQH, and outdated data can lead to delays, denials, or lapses in participation.
- **Fewer Administrative Burdens:** Keeping your profile current reduces the need for repetitive paperwork and back-and-forth communication with payers.
- **Timely Reimbursements:** Delays in credentialing can affect your enrollment and ultimately delay or deny claims and payments.
- **Compliance & Accuracy:** Maintaining accurate, verified information helps protect against audits, liability, and regulatory issues.

By proactively updating your CAQH profile every 120 days—or anytime there's a change in licensure, practice location, insurance coverage, or certifications—you help ensure seamless participation in networks, efficient operations, and uninterrupted patient care.



Optum Provider Portal Upgrades

By: Cathy Davis

We're Enhancing Provider Experience

We are excited to announce the launch of Optum's new Provider Portal, designed to streamline payment integrity processes and improve provider interactions.

Key Benefits of the New Portal:

- **Simplified Medical Record Management:** Providers can view and upload all medical record requests in one place.
- **Real-Time Status Updates:** Track the status of medical record submissions with ease.
- **Enhanced Communication:** Access Optum's review outcomes and rationale for better transparency.
- **Go Paperless!:** Providers can opt for digital communications for greater efficiency.

What's Changing? Providers will be directed to a new URL, found on Optum's medical record request letters, to upload their documentation. Providers can self-register to obtain full access for enhanced features or continue as non-registered users with the same current functionality.

The portal is live and ready for providers to use

Next Steps: Reach out to your Provider Relations Representative today to get started!



Understanding CAHPS & Behavioral Health Surveys (MHSIP, YSSF, OPMHS)

By: Heather Keeton

Improving Patient Experience Through Member Feedback

Member experience surveys such as **CAHPS**—and behavioral health-specific tools like **MHSIP**, **YSSF**, and **OPMHS**—help us measure and improve the quality of care by capturing how members experience access, communication, and behavioral health treatment.

Survey Timeline

- **CAHPS (Feb–May):** Evaluates access to care, communication, and overall satisfaction.
- **MHSIP & YSSF (Sept–Nov):** For adults and youth in behavioral health services; measure access, outcomes, and family engagement.
- **OPMHS (Aug–Sep):** Focuses on outpatient mental health care experiences, including respect and cultural responsiveness.

Key Findings & Opportunities

- **Strengths:** Members report respectful and compassionate provider interactions.
- **CAHPS Opportunities:**
 - » **Tobacco Cessation Support:** Many members are not discussing quitting, medications, or strategies with providers.
 - » **Rating of Health Care:** Members rate care lower when they experience delays or poor coordination. Improving **timely access to care**, especially for urgent needs, and enhancing **coordination between physical and behavioral health providers** can raise overall satisfaction.

■ Behavioral Health Survey Opportunities:

- » **Management & Personal Improvement (MHSIP):** Members want more help managing their mental health (e.g., “*Staff helped me obtain the information I needed...*”).
- » **Services & Treatment (YSSF):** Caregivers desire more involvement in their child’s treatment planning (e.g., “*I help to choose my child’s treatment goals.*”).

What Providers Can Do

- **Improve Access:** Offer flexible scheduling and reduce delays for routine and urgent care.
- **Coordinate Care:** Ensure smooth communication across care teams, especially between behavioral health and primary care providers.
- **Support Self-Management:** Empower patients with resources and education to manage their conditions.
- **Engage Families:** Involve caregivers actively in planning and goal-setting for youth services.
- **Discuss Tobacco Use:** Routinely talk with patients about cessation options, including medications and quit strategies.
- **Communicate with Care:** Use clear, culturally sensitive, and inclusive language.

Improving these key areas strengthens patient relationships, supports better health outcomes, and contributes to higher quality performance.



CIS Provider Tip Sheet (Childhood Immunization Status)

What is being measured?

This measure assesses the percentage of children who have had the complete vaccine series fulfilled **by their 2nd birthday**.

Why is this measure important?

At a time in their lives when they are most vulnerable to disease, childhood vaccines protect them from a number of serious and potentially life-threatening diseases (e.g., diphtheria, measles, meningitis, polio, tetanus, whooping cough). Immunizations are essential for disease prevention and are a critical aspect of preventable care for children. Vaccination coverage must be maintained to prevent a resurgence of vaccine-preventable diseases.

The National Committee for Quality Assurance (NCQA) recommends that all vaccines included in this measure should be given to children before their 2nd birthday.

Best Practices

- Educate members on the importance of obtaining timely vaccines.
- Encourage the parent or guardian to attend all scheduled visits.
- Submit claims and/or encounter data for each service rendered.
- Schedule the next appointment while the patient is in the office.
- Call members and remind them about upcoming appointments.
- Partner with WellCare Care Coordinators for outreach support.
- We may contact your office for the best number to reach our shared members.

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CIS Provider Tip Sheet, continued

Support – Partnering for Better Outcomes

Care Coordination Support from WellCare of Kentucky Medicaid

At WellCare of Kentucky Medicaid, we believe that strong partnerships with our provider community are essential to delivering high-quality, coordinated care.

Our **Care Coordination Services** are designed to support both members and providers by ensuring that every individual receives the right care, at the right time, in the right setting.

Here's how our Outreach and Care Coordination teams support your practice and our shared members:

- **Proactive Member Engagement:** We reach out to members through phone calls and home visits to discuss gaps in care, answer questions, and provide education on next steps and available SDOH resources.
- **Seamless Care Coordination:** Our team works closely with healthcare providers, community partners, and caregivers to align care activities with the member's evolving needs.
- **Assessment and Documentation:** Our team may conduct service assessments and screenings, document care needs, and maintain records in compliance with state and regulatory standards.
- **Compliance and Quality:** We follow best practices and regulatory guidelines to support quality care and meet contractual obligations.
- **Resource Navigation:** We help identify needs and connect members to Care Managers, Disease Management programs, and community-based organizations.
- **Education and Empowerment:** We provide members with information about their benefits and available resources to encourage informed decision-making.



Childhood Immunization Status (CIS)

- 4 diphtheria, tetanus, and acellular pertussis (DTaP)
- 4 pneumococcal conjugate (PCV)
- 3 haemophilus influenza type B (HIB)
- 3 hepatitis B (HepB)
- 3 polio (IPV)
- 2 influenza
- 2 or 3 rotavirus (RV)
- 1 hepatitis A (HepA)
- 1 measles, mumps, and rubella (MMR)
- 1 chicken pox (VZV)

We are committed to the care and well-being of our members. We are also committed to working with you as a partner to develop the best possible treatment plans for all patients.

Please view the Provider section of our website at <https://www.wellcareky.com/providers/medicaid.html> for additional tools and resources. You may also contact Provider Relations directly for support and education.

Together, we can make a meaningful difference in the lives of our members. Thank you for your continued partnership and commitment to quality care.

Partnering with Sprinter Health to Bring Care Home to Our Members

We're excited to continue our partnership with **Sprinter Health**, a trusted in-home care provider helping us close care gaps and improve health outcomes for our Medicare and Medicaid members. Sprinter Health extends the reach of our care teams by delivering essential preventive and chronic care services directly to members in the comfort of their homes.

Through this collaboration, Sprinter offers **in-home visits** to support timely completion of important health screenings and assessments. Services provided include:

- **A1c testing and blood pressure monitoring** to support diabetes and hypertension management.
- **Colorectal cancer screening** (such as FIT tests)
- **Kidney Evaluation for Diabetes (KED) screening**
- **Care for Older Adults assessments**, including pain screening, medication review, and functional status evaluation
- **Assistance with mammogram scheduling** for targeted members
- **Pediatric screenings** like weight assessments, nutritional counseling, lead screenings, and anti-psychotic medication lab monitoring when clinically appropriate
- **Scheduling support for well-child visits** with a primary care provider



Sprinter Health focuses on closing gaps in key quality measures, especially those related to diabetes, hypertension, and preventive cancer screenings. Their team works closely with members and coordinates directly with the member's **Primary Care Provider (PCP)** by sharing results and supporting appropriate follow-up care.

This partnership ensures that critical health services are accessible for members who may face **transportation, mobility, or scheduling barriers**, all while reinforcing the role of the PCP. Sprinter is not a replacement for primary care but a valuable extension of the care team, helping to keep our members on track with the services they need.

We appreciate your continued collaboration and support in encouraging eligible members to participate in these convenient and impactful in-home visits.

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Protecting Adults and Pregnant Members: Immunizations Are Preventive Care

As healthcare partners, you play a critical role in ensuring adults and pregnant individuals receive recommended vaccines—protecting not only individual patients, but entire communities. Vaccination is **one of the most effective ways to reduce preventable illness, hospitalizations, and healthcare costs**, especially for our high-risk populations.

Recommended Vaccines for Adults

According to the **CDC’s Adult Immunization Schedule**, most adults should receive:

- **Annual influenza vaccine**
- **Tdap or Td booster** every 10 years
- **COVID-19 vaccine** (updated formulations)
- **Shingles vaccine** (for adults 50+)
- **Pneumococcal vaccine** (for adults 65+ or with certain chronic conditions)
- **Hepatitis B vaccine** (especially for those with diabetes, liver disease, or at risk of exposure)

Many adults are unaware they’re overdue for vaccines. A simple **review of immunization status at each visit** can lead to stronger protection and better outcomes.

Vaccinations During Pregnancy

Pregnant patients are especially vulnerable to complications from preventable diseases. The CDC and ACOG recommend:

- **Influenza vaccine** during any trimester
- **Tdap vaccine** between 27–36 weeks gestation to protect infants from pertussis
- **COVID-19 vaccine** to prevent severe illness and adverse pregnancy outcomes

Key Message to Share with Patients: “Vaccines during pregnancy protect you—and help protect your baby after birth.”



Flu Vaccination Is Vital

The **flu shot** reduces the risk of flu-related hospitalizations, especially for:

- Adults 65+
- Pregnant individuals
- People with diabetes, heart disease, or asthma

Flu can be **life-threatening for those with chronic conditions**. In the 2022–2023 season alone, flu vaccination **prevented over 1 million medical visits and 100,000 hospitalizations** in the U.S. (CDC, 2024).

Your Role in Closing the Gap

Your strong recommendation is the **#1 reason adults decide to get vaccinated**. Use every encounter to:

- **Check immunization status**
- **Educate patients** about vaccine safety and benefits
- **Offer vaccines onsite** or help with scheduling

If patients face **transportation or cost barriers**, our **Care Management team** and **Community Connections line** can help.

References

- **Centers for Disease Control and Prevention:** [Adult Immunization Schedule](#)
- **CDC:** [Flu Vaccine Effectiveness Estimates](#)
- **ACOG:** [Immunizations During Pregnancy](#)

Let us partner with you to improve adult and maternal vaccination rates—and protect the health of our members and your patients.

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