

IHCP Quick Reference Guide



IHCP General Information	<p>Provider Customer Service 1-800-457-4584</p> <p>Member Customer Service 1-800-457-4584</p> <p>Member Applications 1-800-403-0864</p>	<p>Member Premium Payment Services <i>Package C Payment Address/Telephone</i> Hoosier Healthwise P.O. Box 3127 Indianapolis, IN 46206-3127 1-866-404-7113</p> <p><i>MED Works Payment Address/Telephone</i> MED Works P.O. Box 946 Indianapolis, IN 46206 1-866-273-5897</p>	<p>Third Party Liability (TPL) DXC – TPL P.O. Box 7262 Indianapolis, IN 46207-7262 1-800-457-4584 Fax 1-866-667-6579</p> <p>TPL Casualty INXITPLCasualty@hpe.com</p> <p>Provider Enrollment IHCP Provider Enrollment P.O. Box 7263 Indianapolis, IN 46207-7263 1-800-457-4584</p>	<p>Fraud and Abuse Reporting Program.Integrity@fssa.in.gov FSSA Program Integrity P.O. Box 636297 Cincinnati, OH 45263-6297</p> <p>IHCP Provider and Member Concern Line 1-800-457-4515</p>	<p>Long-Term Care Rate-Setting Long-Term Care Audits IN/MSLC.com Myers and Stauffer 1-800-877-6927 Fax (317) 571-8481</p>
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Fee-for-Service

FFS Nonpharmacy Information	<p>Prior Authorization – FFS Medical Cooperative Managed Care Services (CMCS) P.O. Box 56017 Indianapolis, IN 46256 cmcs-indy.com 1-800-269-5720 Fax 1-800-689-2759</p> <p>FFS IHCP Portal Claims Provider Healthcare Portal</p> <p>FFS Electronic Claim Attachments DXC – Claim Attachments P.O. Box 7259 Indianapolis, IN 46207-7259</p>	<p>IHCP Portal Help Desk Technical Assistance 1-800-457-4584</p> <p>Electronic Data Interchange (EDI) INXIElectronicSolution@hpe.com 1-800-457-4584</p> <p>FFS CMS-1500 Claims <i>(Single/Attachment Claims, Including 590/Waiver)</i> DXC – CMS-1500 P.O. Box 7269 Indianapolis, IN 46207-7269</p> <p>FFS CMS-1500 Crossover Claims (Including 590/Waiver) DXC – CMS-1500 Crossover P.O. Box 7267 Indianapolis, IN 46207-7267</p>	<p>FFS Institutional Claims <i>(Crossover/UB-04 Inpatient Hospital, Home Health, Outpatient, Long-Term Care)</i> DXC – Institutional Claims P.O. Box 7271 Indianapolis, IN 46207-7271</p> <p>FFS Dental Claims DXC – Dental P.O. Box 7268 Indianapolis, IN 46207-7268</p>	<p>FFS Adjustment Forms (No Refund Checks) DXC – Adjustments P.O. Box 7265 Indianapolis, IN 46207-7265</p> <p>FFS Refunds DXC – Refunds P.O. Box 2303, Dept. 130 Indianapolis, IN 46206-2303</p> <p>Uncashed FFS Check Returns DXC – Finance Unit 950 North Meridian Street Suite 1150 Indianapolis, IN 46204-4288</p>	<p>Forms Requests DXC – Forms P.O. Box 7263 Indianapolis, IN 46207-7263</p> <p>Provider Inquiries and Administrative Review Requests DXC – Written Correspondence P.O. Box 7263 Indianapolis, IN 46207-7263</p>
FFS Pharmacy Information	<p>FFS Pharmacy Inquiries and Prior Authorization OptumRx OptumRx Clinical and Technical Help Desk 1-855-577-6317 Fax 1-855-577-6384</p>	<p>FFS Pharmacy Claims Filing OptumRx Manual Claims Department #620 P.O. Box 968022 Schaumburg, IL 60173-6801</p>	<p>FFS Pharmacy Claims Voids/Reversals OptumRx – Void/Reversals Department #620 P.O. Box 968022 Schaumburg, IL 60173-6801</p> <p>FFS Pharmacy Benefit Management Inquiries PDL@FSSA.in.gov</p>	<p>FFS Pharmacy Administrative Review of Claims Requests OptumRx Department 620 P.O. Box 968022 Schaumburg, IL 60173-6801</p> <p>Indiana Drug Rebate Correspondence OptumRx 3025 Windward Plaza, Suite 200 Alpharetta, GA 30005 indiana.rebates@optum.com</p>	<p>FFS Pharmacy Refunds <i>Courier Mail</i> JP Morgan Chase ATTN: OptumRx Claims LBX26594 131 South Dearborn – 6th Floor Chicago, IL 60603</p> <p><i>First-Class Mail</i> OptumRx Claims 26594 Network Place Chicago, IL 60673-1265</p>

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Managed Care



Enrollment Broker Helplines	Hoosier Healthwise 1-800-889-9949	HIP 1-877-438-4479	Hoosier Care Connect 1-866-963-7383	
Hoosier Healthwise	<p>Anthem <i>Provider Services</i> Anthem.com 1-866-408-6132 Fax 1-866-408-7087</p> <p><i>Member Services</i> 1-866-408-6131</p> <p><i>Claims</i> Anthem Provider Manual</p> <p><i>Prior Authorization-Medical</i> Anthem Provider Manual 1-866-408-6132 Fax 1-866-406-2803</p> <p><i>St. Francis Health Network</i> Provider Services 1-866-427-3197 Fax 1-888-616-9979 PA 1-800-291-4140 Fax 1-800-747-3693</p> <p><i>Pharmacy Services</i> PBM: Express Scripts Pharmacy Information Claims 1-800-716-3751 PA 1-866-408-6132 PA Fax 1-855-875-3627</p> <p><i>Dental Services</i> DBM: DentaQuest DentaQuest Provider Portal 1-855-453-5286 Fax 1-262-834-3589</p>	<p>MDwise <i>Provider Services</i> MDwise.org 800-356-1204 Fax 1-877-822-7190 or (317) 829-5530</p> <p><i>Member Services</i> 1-800-356-1204</p> <p><i>Claims</i> Quick Contact Guide 1-800-356-1204</p> <p><i>Prior Authorization-Medical</i> See Quick Contact Guide</p> <p><i>Pharmacy Services</i> PBM: MedImpact Pharmacy Information Claims 1-844-336-2677 PA 1-800-788-2949 PA Fax 1-858-790-7100</p> <p><i>Dental Services</i> DBM: DentaQuest DentaQuest Provider Portal 1-855-453-5286 Fax 1-262-834-3589</p>	<p>MHS <i>Provider Services</i> MHSIndiana.com 1-877-647-4848 Fax 1-866-753-7240</p> <p><i>Member Services</i> 1-877-647-4848</p> <p><i>Claims</i> MHS Provider Guides</p> <p><i>Prior Authorization-Medical</i> Medicaid Pre-Authorization 1-877-647-4848 Fax 1-866-912-4245</p> <p><i>Pharmacy Services</i> PBM Claims: CVS Health PBM PA: US Script Pharmacy Information Claims 1-800-378-0815 PA 1-866-399-0928 PA Fax 1-866-399-0929 (standard) PA Fax: 1-855-678-6976 (specialty)</p> <p><i>Dental Services</i> DBM: Envolve Dental Envolve Dental Provider Portal 1-855-609-5157</p>	<p>CareSource <i>Provider Services</i> CareSource.com 1-844-607-2831</p> <p><i>Member Services</i> 1-844-607-2829</p> <p><i>Claims</i> CareSource.com 1-844-607-2831</p> <p><i>Prior Authorization-Medical</i> Medicaid Prior Authorization 1-844-607-2831 Fax 1-844-432-8924</p> <p><i>Pharmacy Services</i> PBM Claims: CVS Health Pharmacy Information Claims 1-800-980-6765 PA 1-844-607-2831 PA Fax 1-844-432-8924</p> <p><i>Dental Services</i> CareSource Dental 1-844-607-2831</p>

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<p>Healthy Indiana Plan</p>	<p>Anthem <i>Provider Services</i> Anthem.com 1-844-533-1995 Fax 1-866-408-7087</p> <p><i>Member Services</i> 1-866-408-6131</p> <p><i>Claims</i> Anthem Provider Manual</p> <p><i>Prior Authorization – Medical</i> Anthem Provider Manual 1-844-533-1995 Fax 1-866-406-2803</p> <p><i>Pharmacy Services</i> PBM: Express Scripts Pharmacy Information Claims 1-800-473-0694 PA 1-866-398-1922 PA Fax 1-855-875-3627</p> <p><i>Dental Services</i> DBM: DentaQuest DentaQuest Provider Portal 1-855-453-5286 Fax 1-262-834-3589</p>	<p>MDwise <i>Provider Services</i> MDwise.org 1-800-356-1204 Fax 1-877-822-7190</p> <p><i>Member Services</i> 1-800-356-1204</p> <p><i>Claims</i> Quick Contact Guide</p> <p><i>Prior Authorization – Medical</i> Quick Contact Guide</p> <p><i>Pharmacy Services</i> Pharmacy Resources PBM: MedImpact Claims 1-844-336-2677 PA 1-800-788-2949 PA Fax 1-858-790-7100</p> <p><i>Dental Services</i> DBM: DentaQuest DentaQuest Provider Portal 1-855-453-5286 Fax 1-262-834-3589</p>	<p>MHS <i>Provider Services</i> MHSIndiana.com 1-877-647-4848 Fax 1-866-753-7240</p> <p><i>Member Services</i> 1-877-647-4848</p> <p><i>Claims</i> MHS Provider Guides</p> <p><i>Prior Authorization – Medical</i> MHS Provider Information Resource Center 1-877-647-4848 Fax 1-866-912-4245</p> <p><i>Pharmacy Services</i> Pharmacy Information PBM Claims: CVS Health PBM PA: US Script Claims 1-800-311-0557 PA 1-866-399-0928 PA Fax 1-866-399-0929 (standard) PA Fax 1-855-678-6976 (specialty)</p> <p><i>Dental Services</i> DBM: Envolve Dental Envolve Dental Provider Portal 1-855-609-5157</p>	<p>CareSource <i>Provider Services</i> CareSource.com 1-844-607-2831</p> <p><i>Member Services</i> 1-844-607-2829</p> <p><i>Claims</i> CareSource.com 1-844-607-2831</p> <p><i>Prior Authorization – Medical</i> Medicaid Prior Authorization 1-844-607-2831 Fax 1-844-432-8924</p> <p><i>Pharmacy Services</i> Pharmacy Information PBM Claims: CVS Health Claims 1-800-342-5441 PA 1-844-607-2831 PA Fax 1-844-432-8924</p> <p><i>Dental Services</i> CareSource Dental 1-844-607-2831</p>
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<p>Hoosier Care Connect</p>	<p>Anthem <i>Provider Services</i> Anthem.com 1-844-284-1798 Fax 1-888-859-3046</p> <p><i>Member Services</i> 1-844-284-1797</p> <p><i>Claims</i> Anthem Provider Manual 1-866-408-6132</p> <p><i>Prior Authorization – Medical</i> Anthem Provider Manual 1-844-284-1798 Fax 866-406-2803</p> <p><i>Pharmacy Services</i> PBM: Express Scripts Pharmacy Information Claims 1-844-520-2680 PA 1-844-284-1797 PA Fax 1-855-875-3627</p> <p><i>Dental Services</i> DBM: DentaQuest DentaQuest Provider Portal 1-855-453-5286 Fax 1-262-834-3589</p>	<p>MHS <i>Provider Services</i> MHSIndiana.com 1-877-647-4848 Fax 1-866-753-7240</p> <p><i>Member Services</i> 1-877-647-4848</p> <p><i>Claims</i> MHS Provider Guides</p> <p><i>Prior Authorization – Medical</i> MHS Provider Information Resource Center 1-877-647-4848 Fax 1-866-912-4245</p> <p><i>Pharmacy Services</i> PBM Claims: CVS Health PBM PA: US Script Pharmacy Information Claims 1-800-378-0779 PA 1-866-399-0928 PA Fax 1-866-399-0929 (standard) PA Fax: 1-855-678-6976 (specialty)</p> <p><i>Dental Services</i> DBM: Evolve Dental Evolve Dental Provider Portal 1-855-609-5157</p>
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Care Management

<p>The Right Choices Program</p>	<p>Cooperative Managed Care Services (CMCS) – FFS 1-800-784-3981 Fax 1-877-392-6894</p>	<p>Anthem – HIP, Hoosier Healthwise, and Hoosier Care Connect 1-866-902-1690 – Opt. 3 Fax 1-866-387-2959</p>	<p>MDwise – HIP and Hoosier Healthwise 1-800-356-1204 Fax (317) 822-7500</p>	<p>MHS – HIP, Hoosier Healthwise, and Hoosier Care Connect 1-877-647-4848 Fax 1-866-753-7240</p>	<p>CareSource – HIP and Hoosier Healthwise 1-800-488-0134 (TTY: 1-800-750-0750) Fax 1-877-603-5119</p>
<p>HIP Employer Link</p>	<p>HIP Employer Link Paper Claims DXC – HIP Link Claims P.O. Box 1995 Indianapolis, IN 46207-1995</p>	<p>Provider Inquiries <i>Member Eligibility</i> 1-800-738-6770 <i>Pharmacy PA</i> 1-866-879-0106</p>	<p>Member Inquiries <i>Member Status Changes</i> 1-800-403-0864 <i>Medical and Pharmacy Questions</i> 1-800-457-4584</p>		