IHCP Quick Reference Guide – *Contact Information*

General Information for the Indiana Health Coverage Programs (IHCP)	Provider Customer Assistance 800-457-4584 Member Customer Assistance 800-457-4584 Member Applications 800-403-0864 Indiana Medicaid Website in.gov/medicaid	Provider Enrollment IHCP Provider Enrollment PO Box 50443 Indianapolis, IN 46250-0418 800-457-4584 *IHCP Provider Healthcare Portal* portal.indianamedicaid.com	Third-Party Liability (TPL) IHCP Third-Party Liability PO Box 50441 Indianapolis, IN 46250-0418 800-457-4584 Fax: 866-667-6579 INXIXTPLRequests@gainwelltechnologies.com *TPL Casualty* INXIXTPLCasualty@gainwelltechnologies.com	Fraud, Waste and Abuse Reporting Office of Medicaid Policy & Planning (OMPP) Program Integrity 402 W. Washington St., Room W374 Indianapolis, IN 46204-2739 ProgramIntegrity.FSSA@fssa.in.gov *IHCP Provider and Member Concerns Line* 800-457-4515	Long-Term Care Rate-Setting Long-Term Care Audits Myers and Stauffer 800-877-6927 Fax: 317-571-8481 myersandstauffer.com/client-portal/indiana

Fee-for-Service (FFS), Including Traditional Medicaid, Waiver, 590 Program and Other FFS Coverage

FFS Information (*Other than for Pharmacy and Nonemergency Medical Transportation [NEMT]*)	FFS Prior Authorization and Utilization Management (PA-UM) Contractor *PA Submission by Mail, Phone, Fax and Portal* For Medical, Dental and Substance Use Disorder (SUD): Acentra Health – Prior Authorization 6802 Paragon Place, Suite 440 Richmond, VA 23230 866-725-9991 Fax: 800-261-2774 Atrezzo Provider Portal: atrezzo.acentra.com *Disenrollment From Hoosier Healthwise for FFS Hospice* 866-725-9991 Fax: 800-922-9805	FFS Electronic Transactions *Electronic Data Interchange (EDI)* INXIXTradingPartner@gainwelltechnologies.com 800-457-4584 EDI payer ID for Gainwell is **IHCP** *Paper Attachments for Electronic Claims* Gainwell – Claim Attachments PO Box 50440 Indianapolis, IN 46250-0440 *IHCP Provider Healthcare Portal* portal.indianamedicaid.com *IHCP Portal Help Desk – Technical Assistance* INXIXElectronicSolution@gainwelltechnologies.com 800-457-4584 *Atrezzo Provider Portal (for PA-UM)* atrezzo.acentra.com	FFS Paper Claim Submission *Professional (Excluding Crossover)* Gainwell – *CMS-1500* Claims PO Box 50447 Indianapolis, IN 46250-0418 *Professional Crossover* Gainwell – *CMS-1500* Crossover Claims PO Box 50445 Indianapolis, IN 46250-0418 *Institutional (Inpatient Hospital, Home Health, Hospice, Long-Term Care, Outpatient Facility – Including Crossover)* Gainwell – *UB-04* Claims PO Box 50448 Indianapolis, IN 46250-0418 *Dental* Gainwell – Dental Claims PO Box 50446 Indianapolis, IN 46250-0418	FFS Adjustment Forms (No Refund Checks) Gainwell – Adjustments PO Box 50444 Indianapolis, IN 46250-0420 FFS Refunds Gainwell – Refunds PO Box 2303, Dept. 130 Indianapolis, IN 46206-2303 Uncashed FFS Check Returns Gainwell – Finance PO Box 50458 Indianapolis, IN 46250-0418	Form Requests Gainwell – Written Correspondence PO Box 50442 Indianapolis, IN 46250-0418 FFS Nonpharmacy and non-PA Provider Inquiries and Claim Administrative Review Requests Gainwell – Written Correspondence IHCP Provider Healthcare Portal *(In the IHCP Portal, click the **Secure Correspondence** link to submit a request)*

FFS NEMT Information	Verida Trip Reservation Line 855-325-7586 *Member Portal:* member.verida.com *Member Webpage:* myverida.com/member-resources	Verida Provider Assistance Line 855-325-7611 *Provider Portal:* provider.verida.com *Provider Webpage:* myverida.com/transportation-providers	Verida Facility Dispatch Line 888-822-6104 *Facility Portal:* facility.verida.com *Facility Webpage:* myverida.com/facilities	Verida Facility Assistance Line (standing orders) 855-325-7588 Verida Website verida.com	Request Administrative Review INClaims@verida.com Claim Processing Verida 4751 Best Rd., Suite 300 Atlanta, GA 30337 Claim Appeals Verida Claims 843 Dallas Highway Villa Rica, GA 30180

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FFS Pharmacy Information	FFS Pharmacy Inquiries and Prior Authorization	FFS Pharmacy Paper Claim Filing	FFS Pharmacy Claim Voids/ Reversals	FFS Pharmacy Administrative Review of Claim Requests	FFS Pharmacy Refunds
	Optum Rx Clinical and Technical Help Desk 855-577-6317 Fax: 855-678-6976 PA Fax: 855-577-6384 Optum Rx – PA PO Box 44085 Indianapolis, IN 46244-0085	Optum Rx – Manual Claim Processing PO Box 29044 Hot Springs, AR 71903 **Optum Rx Indiana Medicaid website** inm.pharmacy.optum.com	Optum Rx – Void/Reversals Manual Claim Processing PO Box 29044 Hot Springs, AR 71903 **FFS Pharmacy Benefit Management Inquiries** PDL@fssa.in.gov	Optum Rx – Manual Claim Processing PO Box 29044 Hot Springs, AR 71903 **Optum Rx Indiana Drug Rebate Operations** 2100 RiverEdge Parkway Suite 400 Atlanta, GA 30328 indiana.rebates@optum.com	*Courier Mail* JP Morgan Chase Optum Rx Claims LBX 26594 131 South Dearborn – 6th Floor Chicago, IL 60603 *First-Class Mail* Optum Rx Claims 26594 Network Place Chicago, IL 60673-1265

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Managed Care

Healthy Indiana Plan (HIP)	Anthem	CareSource	Managed Health Services (MHS)	MDwise
Enrollment Broker (Maximus) Helpline: 877-438-4479 Fax: 317-238-3120	*Provider Services* Anthem.com 844-533-1995 Fax: 866-408-7087 *Member Services* Anthem Medicaid Insurance in Indiana 866-408-6131 *Claims* Anthem Reimbursement *Prior Authorization – Medical and Substance Use Disorder (SUD)* Anthem PA 844-533-1995 Fax (Physical Health Inpatient and Outpatient): 866-406-2803 Fax (Behavioral Health Inpatient): 877-434-7578 Fax (Behavioral Health Outpatient): 866-877-5229 *Pharmacy Services* Anthem Pharmacy Information PBM: CarelonRx Claims: 833-205-6007 PA: 844-533-1995 PA Fax (Retail Pharmacy): 844-864-7860 PA Fax (Medical Injectable): 888-209-7838 Help for Pharmacists: 833-217-1320 *Dental Services* DentaQuest Provider Portal DBM: DentaQuest 855-453-5286 Fax: 262-834-3589 *Vision Services* Superior Vision VBM: Superior Vision 877-235-5317 Fax: 518-556-7707	*Provider Services* CareSource.com 844-607-2831 *Member Services* 844-607-2829 *Claims* CareSource Claims *Prior Authorization – Medical and SUD* CareSource PA 844-607-2831 Fax: 844-432-8924 *Pharmacy Services* CareSource Pharmacy Information PBM Claims: Express Scripts (ESI) Pharmacy Help Desk: 800-440-0474 PA: 844-607-2831 Pharmacy Benefit PA Fax: 866-930-0019 Physician-Administered Drugs (Medical Benefit) PA Fax: 888-399-0271 *Dental Services* CareSource Dental 844-607-2831 *Vision Services* CareSource Vision Services VBM: Superior Vision Provider Customer Service: 800-507-3800 Utilization Management (PA): Fax: 855-313-3106 superiorvision.com	*Provider Services* MHSIndiana.com 877-647-4848 Fax: 866-912-1629 *Member Services* 877-647-4848 *Claims* MHS Payment Policies *Prior Authorization – Medical and SUD* MHS PA 877-647-4848 Fax (Physical Health Inpatient and Outpatient): 866-912-4245 Fax (Behavioral Health Inpatient): 844-288-2591 Fax (Behavioral Health Outpatient): 866-694-3649 *Pharmacy Services* MHS Pharmacy Information PBM Claims: Express Scripts PBM PA: Centene Pharmacy Services Claims: 855-772-7125 PA: 833-750-4430 (for pharmacist only) PA Fax: 833-645-2742 *Dental Services* Centene Dental Services Portal DBM: Centene Dental Services 855-609-5157 *Vision Services* Centene Vision Benefits VBM: Centene Vision Services 844-820-6523	Email any questions to providerservices@mdwise.org.

IHCP Quick Reference Guide – *Contact Information*

Hoosier Care Connect **Enrollment Broker (Maximus) Helpline:** 866-963-7383 Fax: 317-238-3120	**Anthem** *Provider Services* Anthem.com 844-284-1798 Fax: 888-859-3046 *Member Services* Anthem Medicaid Insurance in Indiana 844-284-1797 *Claims* Anthem Reimbursement *Prior Authorization – Medical and Substance Use Disorder (SUD)* Anthem PA 844-284-1798 Fax (Physical Health Inpatient and Outpatient): 866-406-2803 Fax (Behavioral Health Inpatient): 877-434-7578 Fax (Behavioral Health Outpatient): 866-877-5229 *Pharmacy Services* Anthem Pharmacy Information PBM: CarelonRx Claims: 833-235-2024 PA: 844-284-1798 PA Fax (Retail Pharmacy): 844-864-7860 PA Fax (Medical Injectable): 888-209-7838 Help for Pharmacists: 833-217-1322 *Dental Services* DentaQuest Provider Portal DBM: DentaQuest 855-453-5286 Fax: 262-834-3589 *Vision Services* Superior Vision VBM: Superior Vision 877-235-5317 Fax: 518-556-7707	**Managed Health Services (MHS)** *Provider Services* MHSIndiana.com 877-647-4848 Fax: 866-912-1629 *Member Services* 877-647-4848 *Claims* MHS Payment Policies *Prior Authorization – Medical and SUD* MHS PA 877-647-4848 Fax (Physical Health Inpatient and Outpatient): 866-912-4245 Fax (Behavioral Health Inpatient): 844-288-2591 Fax (Behavioral Health Outpatient): 866-694-3649 *Pharmacy Services* MHS Pharmacy Information PBM Claims: Express Scripts PBM PA: Centene Pharmacy Services Claims: 855-772-7125 PA: 833-750-4441 (for pharmacist only) PA Fax: 833-645-2742 *Dental Services* Centene Dental Services Portal DBM: Centene Dental Services 855-609-5157 *Vision Services* Centene Vision Benefits VBM: Centene Vision Services 866-599-1774	**UnitedHealthcare** *Provider Services* UnitedHealthcare Community Plan of Indiana 877-610-9785 *Member Services* UnitedHealthcare Community Plan 800-832-4643 *Claims* UnitedHealthcare Claims 877-610-9785 Mailing address: UnitedHealthcare Community Plan PO Box 5270 Kingston, NY 12402-5270 Electronic Payer ID: 87726*Prior Authorization – Medical and SUD* United Healthcare Prior Authorization 877-610-9785 Fax: 844-897-6514 *Pharmacy Services* UnitedHealthcare Pharmacy Information PBM: Optum Rx Claims: 866-215-5046 PA: 800-310-6826 PA Fax: 866-940-7328 *Dental Services* SKYGEN Dental Hub Portal DBM: UHC Dental 844-402-9118 *Vision Services* MARCH Vision Care VBM: MARCH Vision Care 844-486-2724

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Hoosier Healthwise	Anthem	CareSource	Managed Health Services (MHS)	MDwise
Enrollment Broker (Maximus) Helpline: 800-889-9949 Fax: 317-238-3120	*Provider Services* Anthem.com 866-408-6132 Fax: 866-408-7087 *Member Services* Anthem Medicaid Insurance in Indiana 866-408-6131 *Claims* Anthem Reimbursement *Prior Authorization (PA) – Medical and Substance Use Disorder (SUD)* Anthem PA 866-408-6132 Fax (Physical Health Inpatient and Outpatient): 866-406-2803 Fax (Behavioral Health Inpatient): 877-434-7578 Fax (Behavioral Health Outpatient): 866-877-5229 *Pharmacy Services* Anthem Pharmacy Information PBM: CarelonRx Claims: 833-235-2023 PA: 866-408-6132 PA Fax (Retail Pharmacy): 844-864-7860 PA Fax (Medical Injectable): 888-209-7838 Help for Pharmacists: 833-217-1321 *Dental Services* DentaQuest Provider Portal DBM: DentaQuest 855-453-5286 Fax: 262-834-3589 *Vision Services* Superior Vision VBM: Superior Vision 877-235-5317 Fax: 518-556-7707	*Provider Services* CareSource.com 844-607-2831 *Member Services* 844-607-2829 *Claims* CareSource Claims *Prior Authorization – Medical and SUD* CareSource PA 844-607-2831 Fax: 844-432-8924 *Pharmacy Services* CareSource Pharmacy Information PBM Claims: Express Scripts (ESI) Pharmacy Help Desk: 800-416-3632 PA: 844-607-2831 Pharmacy Benefit PA Fax: 866-930-0019 Physician Administered Drugs (Medical Benefit) PA Fax: 888-399-0271 *Dental Services* CareSource Dental 844-607-2831 *Vision Services* CareSource Vision Services VBM: Superior Vision Provider Customer Service: 800-507-3800 Utilization Management (PA): Fax: 855-313-3106 superiorvision.com	*Provider Services* MHSIndiana.com 877-647-4848 Fax: 866-912-1629 *Member Services* 877-647-4848 *Claims* MHS Payment Policies *Prior Authorization – Medical and SUD* MHS PA 877-647-4848 Fax (Physical Health Inpatient and Outpatient: 866-912-4245 Fax (Behavioral Health Inpatient): 844-288-2591 Fax (Behavioral Health Outpatient): 866-694-3649 *Pharmacy Services* MHS Pharmacy Information PBM Claims: Express Scripts PBM PA: Centene Pharmacy Services Claims: 855-772-7125 PA: 833-750-4445 (for pharmacist only) PA Fax: 833-645-2742 *Dental Services* Centene Dental Services Portal DBM: Centene Dental Services 855-609-5157 *Vision Services* Centene Vision Benefits VBM: Centene Vision Services 866-599-1774	Email any questions to providerservices@mdwise.org.

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PathWays	Anthem	Humana	UnitedHealthcare
Enrollment Broker (Maximus) Helpline: 877-284-9294 Fax: 317-238-3120	*Provider Network – Credentialing and Contracting* Anthem Provider Relations at INMLTSSProviderRelations@anthem.com *Provider Services* Anthem Indiana PathWays for Aging 833-569-4739 *Member Services* Anthem Medicaid Insurance in Indiana 833-412-4405 *Claims* availity.com Paper claims (initial only): Mailstop: IN999 Anthem Blue Cross and Blue Shield Claims PO Box 61010 Virginia Beach, VA 23466 *Prior Authorization* 844-284-1798 Fax: 866-406-2803 *Pharmacy Services* Anthem Pharmacy Information PBM: CarelonRx Claims: 844-691-2486 PA Fax (Retail Pharmacy): 844-864-7860 PA Fax (Medical Injectables): 888-209-7838 Help for Pharmacists: 844-691-2487 *Dental Services* DentaQuest Provider Portal DBM: DentaQuest 855-453-5286 Fax: 262-834-3589 For PathWays Dual Care: DBM: Liberty Dental Liberty Dental Provider Portal 888-352-7924 (Monday through Friday, 8 a.m. - 8 p.m. Eastern Time) Fax: 800-268-0154 *Vision Services* Superior Vision VBM: Superior Vision 877-235-5317 Fax: 518-556-7707	*Provider Network – Credentialing and Contracting* Humana Provider Relations at INMedicaidProviderRelations@humana.com *Provider Services* Humana Healthy Horizons in Indiana for Providers 866-274-5888 *Member Services* Humana Healthy Horizons in Indiana for Members 866-274-5888 INHealthyHorizons@humana.com *Claims* availity.com Paper claims must be mailed to: Humana Claims PO Box 14169 Lexington, KY 40512-4169 *Prior Authorization* All UM: 866-274-5888 (TTY: 711) Fax: 502-324-6376 *Pharmacy Services* PBM: Humana Pharmacy Solutions 800-555-CLIN (2546) Fax: 877-486-2621 *Dental Services* DBM: DentaQuest Submit claims via the DentaQuest web portal 855-398-8411 *Vision Services* VBM: EyeMed For Medicaid Members: 866-274-5888 Medicare/Duals: 888-289-0595	*Provider Network – Credentialing and Contracting* UnitedHealthcare Provider Relations at IN_ProviderServices@uhc.com *Provider Services* UnitedHealthcare Community Plan of Indiana 877-610-9785 *Member Services* UnitedHealthcare Community Plan 800-832-4643 IN_HPops@uhc.com *Claims* United Healthcare Claims 877-610-9785 Mailing address: UnitedHealthcare Community Plan PO Box 5240 Kingston, NY 12402-5240 Electronic Payer ID: 87726 *Prior Authorization* United Healthcare Prior Authorization 877-610-9785 Fax: 844-897-6514 *Pharmacy Services* UnitedHealthcare Pharmacy Information PBM: Optum Rx Claims: 866-215-5046 PA: 800-310-6826 PA Fax: 866-940-7328 *Dental Services* SKYGEN Dental Hub Portal DBM: UHC Dental 844-402-9118 *Vision Services* MARCH Vision Care VBM: MARCH Vision Care 844-486-2724

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Program of All-Inclusive Care for the Elderly (PACE)	For contact information, see the *Program of All-Inclusive Care for the Elderly* webpage at in.gov/fssa/da.

Care Management – Right Choices Program (RCP)

RCP Administrator	**Acentra Health – FFS Traditional Medicaid** 866-725-9991 Fax: 800-261-2774	**Anthem – HIP, Hoosier Care Connect, PathWays and Hoosier Healthwise** 866-902-1690, option 1 Fax: 866-387-2959	**MHS – HIP, Hoosier Care Connect and Hoosier Healthwise** 877-647-4848 Fax: 866-753-7240	**CareSource – HIP and Hoosier Healthwise** 844-607-2829 (TTY: 800-743-3333 or 711) Email: lockinprogram@caresource.com	**Humana – PathWays** 833- 410-2496 Fax: 502-996-8184	**UnitedHealthcare – Hoosier Care Connect and PathWays** 800-832-4643, (TTY and TDD: 711) Fax: 888-843-6007