

# MDwise Hoosier Healthwise Behavioral Health Contact Information

Corporate Office: 1099 N. Meridian St., Suite 320, Indianapolis, IN 46204-1038 · p: 317-630-2828 · f: 317-630-2835

## GENERAL INFORMATION

### CUSTOMER SERVICE & TRANSPORTATION

1-800-356-1204 or 317-630-2831  
Fax: 1-877-822-7190 or 317-829-5530

MDwise Hoosier Healthwise Customer Service  
P.O. Box 441423  
Indianapolis, IN 46244-1423

### PROVIDER SERVICES - Medical Services

1-800-356-1204 or 317-630-2831  
Fax: 317-630-2835

MDwise Hoosier Healthwise Provider Services  
1099 N. Meridian St., Suite 320  
Indianapolis, IN 46204-1038

### PROVIDER SERVICES - Behavioral Health BHMI (contracting and credentialing)

1-866-323-3464 or 317-237-5770  
www.InteCare.org

InteCare  
8604 N. Allisonville Road, Suite 325  
Indianapolis, IN 46250-1546

### CLAIM DISPUTES, GRIEVANCES & APPEALS

Behavioral Health Only

MDwise  
P.O. Box 441423  
Indianapolis, IN 46244-1423  
Attention: Grievances & Appeals

*Please see below and on the back for Delivery System's Prior Authorization and Claims Payment Information*

## DELIVERY SYSTEMS

### MDWISE HOOSIER ALLIANCE

Claims Inquiries: 1-800-581-2488  
Medical Management & Prior Authorization: 1-888-961-3100  
Fax: 1-888-465-5581  
Pharmacy Prior Auth: 1-800-558-1655  
Fax: 1-877-234-4274  
Claim Dept. Address: MDwise Hoosier Alliance  
P.O. Box 7303  
London, KY 40742  
EDI Payor ID: 20475  
mental/behavioral health eff. 1.1.09

### MDWISE METHODIST

Claims Inquiries: 317-871-8814/  
1-800-927-7927  
Medical Management & Prior Authorization: 317-962-2378/  
1-866-492-5878  
Fax: 317-962-6219  
Pharmacy Prior Auth: 1-800-558-1655  
Fax: 1-877-234-4274  
Claim Dept. Address: MDwise Methodist  
P.O. Box 68970  
Indianapolis, IN 46268-0970  
mental/behavioral health eff. 1.1.09

### MDWISE PROHEALTH

Claims Inquiries: 317-621-7565/  
1-800-344-8672  
Medical Management & Prior Authorization: 317-621-7546/  
1-800-344-8672  
Fax: 317-621-7984  
Pharmacy Prior Auth: 1-800-558-1655  
Fax: 1-877-234-4274  
Claim Dept. Address: MDwise ProHealth  
P.O. Box 50407  
Indianapolis, IN 46250  
EDI Payor ID: NEIC 35161  
mental/behavioral health eff. 1.1.09

Emdeon/WebMD Institutional Payor ID: 12K81  
Professional Claims: SX172

*For all claims submitted with dates of service prior to January 1, 2009, please submit claims to:*

CompCare  
Attention: Claims  
3405 W. Dr. Martin Luther King Jr., Blvd. Suite 101  
Tampa, FL 33607  
1-800-818-6872



# MDwise Hoosier Healthwise Behavioral Health Delivery System Contacts

Customer/ Provider Service and Transportation: 1-800-356-1204 or 317-630-2831 in Indianapolis area

Web Site: [www.MDwise.org](http://www.MDwise.org) (Preferred Drug List, member information, PA forms, Provider Manual, newsletters and more)

## DELIVERY SYSTEMS *cont.*

### MDWISE SAINT MARGARET MERCY

Claims Inquiries: 1-866-427-3197/  
317-596-7827

Medical Management &  
Prior Authorization 1-800-291-4140  
Fax: 1-800-747-3693

Pharmacy Prior Auth: 1-800-558-1655  
Fax: 1-877-234-4274

Claim Dept. Address: MDwise St. Margaret Mercy  
P.O. Box 501310  
Indianapolis, IN 46250  
Payor ID Emdeon 35199  
mental/behavioral health eff. 1.1.09

### MDWISE ST. CATHERINE

Claims Inquiries: 1-866-427-3197/  
317-596-7827

Medical Management  
Behavioral Health 1-866-770-0208  
Fax: 1-800-747-3693

Pharmacy Prior Auth: 219-392-7033  
Fax: 219-392-7090

Claim Dept. Address: MDwise St. Catherine  
P.O. Box 50888  
Indianapolis, IN 46250  
Payor ID Emdeon 35199  
mental/behavioral health eff. 1.1.09

### MDWISE ST. FRANCIS

Claims Inquiries: 317-596-7827/  
1-866-427-3197

Medical Management &  
Prior Authorization 317-570-6816/  
1-800-291-4140  
Fax: 317-570-6818

Pharmacy Prior Auth: 1-800-558-1655  
Fax: 1-877-234-4274

Claim Dept. Address: MDwise St. Francis  
P.O. Box 502090  
Indianapolis, IN 46250  
Payor ID Emdeon 35199  
mental/behavioral health eff. 1.1.09

*For all claims submitted with dates of service  
prior to January 1, 2009, please submit claims to:*

CompCare  
Attention: Claims  
3405 W. Dr. Martin Luther King Jr., Blvd. Suite 101  
Tampa, FL 33607  
1-800-818-6872

### MDWISE SELECT HEALTH NETWORK

Claims Inquiries: 574-283-5912

Medical Management &  
Prior Authorization 574-283-5939/  
1-800-634-9585  
Fax: 574-283-5940/  
1-800-214-0033

Pharmacy Prior Auth: 1-800-558-1655  
Fax: 1-877-234-4274

Claim Dept. Address: MDwise Select  
Health Network  
P.O. Box 853921  
Richardson, TX 75085-3921  
EDI Payor IDs:  
WebMD 64157  
McKesson 1761  
mental/behavioral health eff. 1.1.09

### MDWISE ST. VINCENT

Claims Inquiries: 317-871-8814

Medical Management &  
Prior Authorization 317-860-2736  
Fax: 317-860-2734/2735

Pharmacy Prior Auth: 1-800-558-1655  
Fax: 1-877-234-4274

Claim Dept. Address: MDwise St. Vincent  
P.O. Box 68970  
Indianapolis, IN 46268-0970  
mental/behavioral health eff. 1.1.09

All Medical Claims: Emdeon/WebMD Institutional  
Payor ID: 12K81 Professional Claims: SX172

### MDWISE WISHARD

Claims Inquiries: 317-871-8814

Medical Management &  
Prior Authorization 317-860-2736  
Fax: 317-860-2734/2735

Pharmacy Prior Auth: 1-800-558-1655  
Fax: 1-877-234-4274

Claim Dept. Address: MDwise Wishard  
P.O. Box 68970  
Indianapolis, IN 46268-0970  
mental/behavioral health eff. 1.1.09

All Medical Claims: Emdeon/WebMD  
Institutional Payor ID: 12K81 Professional Claims: SX172