



MDwise MARKETPLACE

Quick Contact Guide *effective 1-1-14*

Medical and Behavioral Health Claims

1-855-417-5615

MDwise
P.O. Box 830120
Birmingham, AL 35283-0120

Family Planning Claims

P.O. Box 830120
Birmingham, AL 35283-0120

WebMD/Emdeon/Zirmed/TK Software

Institutional Payer ID: I2K81
Professional Payer ID: SX172

McKesson/Relay Health

Institutional Payer ID: 4976
Professional Payer ID: 4481
Additional payer IDs will be added soon

Claims Disputes, Grievances and Appeals

1-855-417-5615
MDwise Marketplace
P.O. Box 441099
Indianapolis, IN 46244-1099

Provider Services

317-822-7300 ext 5800
Fax: 317-822-7535
MDwise Marketplace Provider Services
1200 Madison Avenue, Suite 400
Indianapolis, IN 46225

Provider Services: Behavioral Health Contracting and Credentialing

317-822-7300 ext 5800
Fax: 317-822-7535
MDwise Marketplace
1200 Madison Avenue, Suite 400
Indianapolis, IN 46225

Fraud and Abuse

1-855-417-5615

Customer Service

1-855-417-5615
Fax: 1-855-269-1843
MDwise Marketplace Customer Service
P.O. Box 441099
Indianapolis, IN 46244-1099

PerformRX Pharmacy Services Pharmacy Claim Billing

RxBIN: 600428
RxPCN: 06590000

PerformRx Preferred Drug List

MDwise.org/pharmacy

PerformRx Prior Authorization

Standard (2 Business Day Maximum)
Fax: 1-855-811-9324
Urgent Request (1 Calendar Day Maximum)
Fax: 1-855-881-9325

For Pharmacy Issues (claims inquiries,
formulary questions, etc.)
PerformRx Provider Line: 1-855-491-0633
Pharmacy PA Denial Disputes: 1-855-417-5615

Walgreens Mail Service Pharmacy (for members only)

Customer Care: 1-800-345-1985
Prescriber Fax Line: 1-800-332-9581

Vision Services

VSP Member Customer Service Line: 1-855-868-4561
vsp.com

MDwise and VSP provide vision coverage for
children only. Marketplace vision claims inquiries
are handled by VSP.

(see next page for delivery system information)

MDwise.org/providers

MDwise, Inc. is a Qualified Health Plan issuer in the Health Insurance Marketplace



MDwise Marketplace Delivery Systems

MDwise Hoosier Alliance

Claims Inquiries

1-855-417-5615

Claims Department Address

P.O. Box 830120
Birmingham, AL 35283-0120

Medical Management and Prior Authorization

1-855-202-0030
Fax (Marketplace Prior Authorization): 317-829-7881
Fax (Marketplace IP/Concurrent Review): 317-829-7882
Fax (Behavioral Health Prior Authorization): 317-829-7883

Provider Relations

1-855-202-0030
Fax: 317-829-7885

MDwise Select Health Network

Claims Inquiries

1-855-417-5615

Claims Department Address

P.O. Box 830120
Birmingham, AL 35283-0120

Medical Management and Prior Authorization

1-855-326-2239
Fax: 1-855-326-9657

Provider Relations

574-283-5925 and 574-283-5926
Fax: 574-283-5950

MDwise Indiana University Health (formerly MDwise Methodist)

Claims Inquiries

1-855-417-5615

Claims Department Address

P.O. Box 830120
Birmingham, AL 35283-0120

Medical Management and Prior Authorization

317-962-2378
Fax: 317-962-6219

Provider Relations

317-963-9875 and 317-963-1826