



## Indiana Health Coverage Programs Quick Reference

Assistance, Enrollment, Eligibility, Help Desks, and Prior Authorization			
<b>ADVANTAGE Health Solutions<sup>SM</sup> Prior Authorization – Medical FFS</b> P.O. Box 40789 Indianapolis, IN 46240 1-800-269-5720 Fax: 1-800-689-2759	<b>Automated Voice Response (AVR) System</b> (including eligibility verification) (317) 692-0819 or 1-800-738-6770	<b>HP Member Hotline</b> (317) 713-9627 or 1-800-457-4584 Opt 1 = Member Services – English Opt 2 = Member Services – Spanish	<b>HP Customer Assistance</b> (317) 655-3240 or 1-800-577-1278 Opt 1 = Member Opt 2 = Pharmacy Provider Opt 3 = All Other Services
<b>HP Electronic Solutions Help Desk</b> (317) 488-5160 or 1-877-877-5182 <a href="mailto:INXIXElectronicSolution@hp.com">INXIXElectronicSolution@hp.com</a>	<b>HP Forms Requests</b> P.O. Box 7263 Indianapolis, IN 46207-7263	<b>HP Administrative Review Written Correspondence</b> P.O. Box 7263 Indianapolis, IN 46207-7263	<b>HP Omni Help Desk</b> (317) 488-5051 or 1-800-284-3548
<b>HP TPL</b> (317) 488-5046 or 1-800-457-4510 Fax: (317) 488-5217	<b>HP Provider Enrollment and Waiver</b> P.O. Box 7263 Indianapolis, IN 46207-7263 1-877-707-5750	<b>HP Provider Written Correspondence</b> P.O. Box 7263 Indianapolis, IN 46207-7263	<b>IHCP Provider and Member Concern Line (Fraud and Abuse)</b> (317) 234-7598 or 1-800-457-4515
<b>IHCP SUR Department</b> P.O. Box 531700 Indianapolis, IN 46253-1700 (317) 347-4527 or 1-800-457-4515	<b>Premium Collection Services Package C Payment Line</b> 1-866-404-7113  <b>Package C Payment Mailing Address</b> Hoosier Healthwise P.O. Box 3127 Indianapolis, IN 46206-3127	<b>M.E.D. Works</b> 1-866-273-5897  <b>M.E.D. Works Payment Mailing Address</b> P.O. Box 946 Indianapolis, IN 46206	
Pharmacy Services Contact Information			
<b>ACS Drug Rebate</b> <b>ACS State Healthcare</b> <b>ACS – Indiana Drug Rebate</b> P.O. Box 2011332 Dallas, TX 75320-1332	<b>HP Pharmacy Services Help Desk for POS Claims Processing</b> (317) 655-3240 or 1-800-577-1278 Opt 2 = Pharmacy <a href="mailto:INXIXPharmacy@hp.com">INXIXPharmacy@hp.com</a>	<b>HP Pharmacy Claims</b> P.O. Box 7268 Indianapolis, IN 46207-7268	<b>HP Pharmacy Claims Adjustments</b> P.O. Box 7265 Indianapolis, IN 46207-7265
<b>Pharmacy Benefit Management Inquiries</b> <a href="mailto:PDL@fssa.in.gov">PDL@fssa.in.gov</a>	<b>Indiana Administrative Review/Pharmacy Claims</b> <b>HP Pharmacy Claims Admin. Review</b> P.O. Box 7263 Indianapolis, IN 46207-7263	<b>PA for Pro-DUR and Preferred Drug List – ACS Clinical Call Center</b> 1-866-879-0106 Fax: 1-866-780-2198	<b>To make refunds to the IHCP for pharmacy claims, send check to:</b> <b>HP Pharmacy Refunds</b> P.O. Box 2303, Dept 130 Indianapolis, IN 46206-2303
Enrollment Broker Helplines (MAXIMUS)	Hoosier Healthwise Managed Care Organizations (MCOs)		
<b>Hoosier Healthwise</b> <a href="http://www.healthcareforhoosiers.com">http://www.healthcareforhoosiers.com</a> 1-800-889-9949  <b>Care Select</b> <a href="http://www.indianacareselect.com">http://www.indianacareselect.com</a> 1-866-963-7383  <b>HIP</b> <a href="http://www.HIP.in.gov">http://www.HIP.in.gov</a> 1-877-438-4479  <b>Pharmacy Customer Assistance</b> (317) 655-3240 or 1-800-577-1278 Opt 1 = Pharmacy	<b>Anthem</b> <a href="http://www.anthem.com">http://www.anthem.com</a>  <b>Claims</b> 1-888-232-9613  <b>Member Services</b> 1-866-408-6131  <b>Medical PA</b> 1-866-408-7187 Fax: 1-866-406-2803  <b>Pharmacy PA</b> 1-866-879-0106 Fax: 1-866-780-2198  <b>Provider Services</b> 1-866-408-6132 Fax: 1-866-408-7087  <b>Prospective Providers</b> 1-800-618-3141 Fax: 1-866-408-7087  <b>Transportation</b> 1-800-508-7230	<b>MDwise</b> <a href="http://www.mdwise.org">http://www.mdwise.org</a>  <b>Claims, Member Services</b> <b>Medical PA /Medical Management, and Provider Services</b> (317) 630-2831 or 1-800-356-1204  <b>Pharmacy PA</b> 1-866-879-0106 Fax: 1-866-780-2198	<b>Managed Health Services (MHS)</b> <a href="https://www.managedhealthservices.com">https://www.managedhealthservices.com</a>  <b>Claims, Member Services, Medical PA/Medical Management, Provider Services, and Nursewise</b> 1-877-MHS-4U4U or 1-877-647-4848  <b>Pharmacy PA</b> 1-866-879-0106 Fax: 1-866-780-2198



## Indiana Health Coverage Programs Quick Reference

Care Select – Care Management Organizations (CMOs)		Healthy Indiana Plan (HIP) Organizations		
<b>ADVANTAGE Health Solutions<sup>SM</sup></b> <a href="http://www.advantageplan.com/">http://www.advantageplan.com/</a> <b>Member Services</b> 1-800-784-3981 <b>Provider Services</b> 1-866-504-6708 <b>Medical PA</b> 1-800-784-3981 Fax: 1-800-689-2759 P.O. Box 80068 Indianapolis, IN 46280 <b>Pharmacy PA</b> 1-866-879-0106 Fax: 1-866-780-2198 <b>Hospice Member Disenrollment</b> Fax: (317) 810-4488	<b>MDwise</b> <a href="http://www.mdwise.org">http://www.mdwise.org</a> <b>Member Services and Provider Services</b> 1-866-440-2449 <b>Member Services Fax</b> 1-877-822-7188 <b>Medical PA</b> 1-866-440-2449 Fax: 1-877-822-7186 P.O. Box 44214 Indianapolis, IN 46244-0214 <b>Pharmacy PA</b> 1-866-879-0106 Fax: 1-866-780-2198	<b>MDwise</b> <b>Healthy Indiana Plan</b> <a href="http://www.mdwise.org">http://www.mdwise.org</a> <b>Member Services and Provider Services</b> P.O. Box 44236 Indianapolis, IN 46244-0236 1-877-822-7196 or (317) 822-7196 Fax: 1-877-822-7192 or (317) 822-7192 <b>Medical Claims</b> P.O. Box 33049 Indianapolis, IN 46203-0049 Payer ID: MDWIS <b>Behavioral Health Claims/HIP</b> 1-800-818-6872 P.O. Box 33049 Indianapolis, IN 46203 Payer ID MDWIS <b>Customer Service/Provider Service</b> 1-877-822-7196 or (317) 822-7196 <b>Pharmacy PA</b> 1-866-879-0106 Fax: 1-866-780-2198	<b>Anthem</b> <a href="http://www.anthem.com">http://www.anthem.com</a> <b>Member Services</b> 1-800-553-2019 <b>Provider Inquiry</b> 1-800-345-4344 P.O. Box 37010 Louisville, KY 40233-7180 <b>Medical PA</b> 1-866-398-1922 <b>Pharmacy PA</b> 1-866-879-0106 Fax: 1-866-780-2198	
<b>Pharmacy</b> See Pharmacy Services Contact Information above		<b>HIP – Enhanced Services Plan (ESP) Organizations</b>		
<b>HP Claims Providers</b> (317) 655-3240 1-800-577-1278 <b>Members</b> (317) 713-9627 1-800-457-4584		<b>ACS – Non-Pharmacy</b> P.O. Box 33077 Indianapolis, IN 46203-0077 1-866-674-1461 or (317) 614-2032 <b>PA – Medical</b> 1-877-217-7150	<b>Pharmacy PA ACS</b> 1-866-879-0106 Fax: 1-866-780-2198 <b>HP Pharmacy Claims</b> P.O. Box 7268 Indianapolis, IN 46207-7268 1-800-577-1278 or (317) 655-3240	
Paper Claim Filing				
<b>HP 590 Program Claims</b> P.O. Box 7270 Indianapolis, IN 46207-7270	<b>HP Adjustments</b> P.O. Box 7265 Indianapolis, IN 46207-7265	<b>HP Medical Crossover Claims</b> P.O. Box 7267 Indianapolis, IN 46207-7267	<b>HP Dental Claims</b> P.O. Box 7268 Indianapolis, IN 46207-7268	<b>HP CMS-1500 Claims</b> P.O. Box 7269 Indianapolis, IN 46207-7269
<b>HP Claim Attachments</b> P.O. Box 7259 Indianapolis, IN 46207-7259	<b>HP Waiver Programs Claims</b> P.O. Box 7269 Indianapolis, IN 46207-7269		<b>HP Institutional Crossover/UB-04 Inpatient Hospital, Home Health, Outpatient, and Nursing Home Claims</b> P.O. Box 7271 Indianapolis, IN 46207-7271	
Check Submission				
<b>To make refunds to the IHCP</b> <b>HP Refunds</b> P.O. Box 2303, Dept. 130 Indianapolis, IN 46206-2303	<b>To make refunds for CA-PRTF</b> <b>HP/CA-PRTF Refunds</b> P.O. Box 7247 Indianapolis, IN 46207	<b>To make refunds for MFP</b> <b>HP/MFP Refunds</b> P.O. Box 7194 Indianapolis, IN 46207	<b>To Return Uncashed IHCP Checks</b> HP Finance Department 950 N. Meridian St., Suite 1150 Indianapolis, IN 46204-4288	<b>Pharmacy</b> See Pharmacy Services Contact Information above
Right Choices Program (formerly the Restricted Card Program)				
<b>ADVANTAGE Health Solutions – Care Select and FFS</b> P. O. Box 40789 Indianapolis, IN 46240-0789 1-800-784-3981 Fax: 1-800-689-2759	<b>Managed Health Services – HHW</b> 1099 N. Meridian Street, Suite 400 Indianapolis, Indiana 46204-4287 1-877-647-4848 Fax: 1-866-753-7240	<b>MDwise – HHW</b> P.O. Box 441423 Indianapolis, IN 46244-1423 1-800-356-1204 Fax: (317) 829-5530 or 1-877-822-7190	<b>MDwise – HIP</b> P.O. Box 44236 Indianapolis, IN 46244-0236 1-877-822-7196 Fax: (317) 822-7192 or 1-877-822-7192	
<b>MDwise – Care Select</b> P.O. Box 44214 Indianapolis, IN 46244-0214 1-866-440-2449 Fax: (317) 822-7519 or 1-877-822-7188	<b>Anthem – HHW</b> P.O. Box 6144 Indianapolis, IN 46206-6144 1-866-902-1690 – Option 3 Fax: 1-866-387-2959	<b>Anthem – HIP</b> P.O. Box 6144 Indianapolis, IN 46206-6144 1-866-902-1690 – Option 3 Fax: 1-866-387-2959		