Claims Submission and Payment

<u>List of Accounts managed by Mercy Managed Behavioral Health</u> *Effective Date: 7/01/2021*

**Send claims directly to the third-party administrator.

PLAN	ADDRESS Electronic Claims Address	CLAIM STATUS/ PROVIDER RELATIONS	APPLICABLE STATE
Essence Healthcare	Essence Healthcare PO Box 5907 Troy, MI 48007 Emdeon #20818, Gateway #57082 SSI Payer ID & Sub ID 99999-0648	(314) 209-2700 or (866) 597-9560 Option 5, then Option 2	МО
IBEW Local 309 Collinsville, Illinois	Meritain Health PO Box 853921 Richardson, TX 75085-3921 WEBMD/Emdeon #41124, Mckesson/Relay Health #1761	(618) 344-2002	MO IL
IBEW Local No. 1 Health and Welfare	IBEW Local 1 Health & Welfare Fund PO Box 6088 St. Louis, MO 63139 Relay Health #44602 Trizetto / Office Ally / Practice Insight #44602	(314) 752-2330 or (877) 281- 2430	MO IL
LHN (Labor Health Network)	Meritain Health PO Box 853921 Richardson, TX 75085-3921 WEBMD/Emdeon #41124, Mckesson/Relay Health #1761	(866) 209-3063	MO IL
Missouri - Mercy Co-Workers – Anthem Alliance EPO & Blue Access Choice PPO	MO ONLY: EPO & PPO Product Anthem PO Box 105187 Atlanta, GA 30348 Electronic Claim Submission: www.anthem.com/edi	(888) 571-9054	МО

Arkansas – Mercy Co-Workers – Anthem Alliance EPO & Blue Access Choice PPO	AR - EPO ONLY: Anthem PO Box 105187 Atlanta, GA 30348 Electronic Claim Subm	AR – PPO ONLY: File claims with the local Blue Cross and Blue Shield Plan in the state where services were provided. mission:	(888) 571-9054	AR
Illinois, Oklahoma, Kansas – Mercy Co-Workers – Anthem Alliance Options PPO	www.anthem.com/edi Anthem Alliance PPO: File claims with the local Blue Cross and Blue Shield Plan in the state where services were provided. Electronic Claim Submission: www.anthem.com/edi		(888) 571-9054	IL OK KS

Direct contracts in network with Mercy Managed Behavioral Health

PLAN	ADDRESS Electronic Claims Address	CLAIM STATUS/ PROVIDER RELATIONS	APPLICABLE STATE
Direct Contracts – with various Employer Groups	Please see the back of the member's insurance card for the appropriate claim submission address.	Found on the back of the member's insurance card.	MO, IL, AR, KS, OK

MMBH is responsible for managing prior authorization requests on behalf of the Health Plan. If you have obtained prior authorization through MMBH and experience claim issues, your claim inquiry should be directed to the Health Plan, not MMBH. Please refer to the phone number on the back of the member's insurance card.

Please note:

- Failure to obtain prior authorization will result in a denied claim.
- **ABA ONLY**: Failure to include the modifier (HP/HO/HN/HM) may result in a denied claim.
- **NEW Providers** should hold their claims for 30 days from their assigned effective date listed on your Welcome Letter, to allow our TPA's time to get your information loaded into their claims payment system.