

Claims Submission and Payment Addresses

List of Accounts managed by Mercy Managed Behavioral Health

Effective Date: 6/01/2024

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

PLAN	ADDRESS Electronic Claims Address	CLAIM STATUS/ PROVIDER RELATIONS	APPLICABLE STATE
Essence Healthcare MO/IL HMO & PPO	Essence Healthcare PO Box 5907 Troy, MI 48007 <i>Emdeon #20818, Gateway #57082 SSI Payer ID & Sub ID 99999-0648</i>	(866) 597-9560 Option 5, then Option 2	MO
IBEW Local 309 (IBEW-IL) Collinsville, Illinois	Meritain Health PO Box 853921 Richardson, TX 75085-3921 <i>WEBMD/Emdeon #41124 Mckesson/Relay Health #1761</i>	(618) 344-2002	MO IL
LHN (Labor Health Network)	Meritain Health PO Box 853921 Richardson, TX 75085-3921 <i>WEBMD/Emdeon #41124 Mckesson/Relay Health #1761</i>	(866) 209-3063	MO IL
Missouri - Mercy Co-Workers – Anthem Alliance Options PPO	<div style="border: 1px solid black; padding: 5px;"> MO ONLY: Anthem Alliance Options PPO Anthem PO Box 105187 Atlanta, GA 30348 </div> <i>Electronic Claim Submission:</i> www.anthem.com/edi Payor ID: 00241	(888) 571-9054	MO
Arkansas – Mercy Co-Workers – Anthem Alliance Options PPO	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 5px; width: 48%;"> AR – Tier One ONLY: Anthem PO Box 105187 Atlanta, GA 30348 </div> <div style="border: 1px solid black; padding: 5px; width: 48%;"> AR – Tier Two ONLY: File claims with the local Blue Cross and Blue Shield Plan in the state where services were provided. </div> </div> <i>Electronic Claim Submission:</i> www.anthem.com/edi Payor ID: 00241	(888) 571-9054	AR
Illinois, Oklahoma, Kansas – Mercy Co-Workers – Anthem Alliance Options PPO	<div style="border: 1px solid black; padding: 5px;"> Anthem Alliance Options PPO: File claims with the local Blue Cross and Blue Shield Plan in the state where services were provided. </div> <i>Electronic Claim Submission:</i> www.anthem.com/edi Payor ID: 00241	(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