

MDwise St. Catherine Hoosier Healthwise

Provider Information Guide

2017

Eligibility and Benefits Verification: Claims Inquiry:

Phone: (317) 630-2831 or (800) 356-1204
<http://www.mdwise.org> and go to myMDwise login
IHCP Website
Phone: (800)738-6770

Claims Submission:

MDwise St. Catherine
PO Box 50888
Indianapolis, IN. 46250
Payer ID Emdeon 35199
Relay Health/McKesson
Professional Payer ID: 2235
Institutional Payer ID: 2911

Claim Disputes and Appeals:

Contracted Providers/Facilities
Attn: MDwise St Catherine Network
Appeals and Disputes Department
4321 Fir St.
East Chicago, IN. 46312

Non-Contracted Providers/Facilities

Send request to:
P.O. Box 441423
Indianapolis, IN 46244-1423
Attention: Grievance Coordinator

Provider Directory:

MDwise Provider Manual
<http://www.mdwise.org>

Member Services:

Refer member questions to: **MDwise**
Phone: (317) 630-2831 or (800) 356-1204

Medical Prior Authorization:

Services requiring authorization are listed on the reverse side. Call or fax Authorization Request form to: **St. Catherine Medical Management**
Phone: (219) 392-7066 (Hospital Auths only)
(219) 392-7072 (All Other Auths)
866-666-7327 (Toll Free Prior Auth)

Fax: (219) 392-7090 (All Other Auths)
(219) 392-7356 (Hospital Auths & UM info only)
Authorization Request Form can be obtained by calling the number above or at
<http://www.mdwise.org>

Rx Formulary:

Go to MDwise.org, select *For Providers* and select *Pharmacy Resources*

Transportation Assistance:

Members can call (800) 356-1204

Mental Health/Substance Abuse:

MDwise St. Catherine
P.O. Box 50888
Indianapolis, IN 46250
BH Provider Relations:
(800) 356-1204 or (317) 630-2831
BH Prior Authorization:
(866) 770-0208 or Fax: (800) 747-3693

Services Requiring Prior Authorization

Behavioral Health/Substance Abuse:

Effective 2/1/14

MDwise will no longer require Prior Authorization for Outpatient Behavioral Health Services for Hoosier Healthwise and Healthy Indiana Plan:

Individual Therapy: 90832, 90834, 90837

Family Therapy: 90846, 90847, 90849

Group Therapy: 90853

Psychological Testing, ABA Therapy, Intensive Outpatient Therapy, Partial Hospitalization, ECT, TMS, Vagus Nerve Stimulation, and Inpatient services will still require Prior Authorization. Out of Network providers are required to obtain Prior Authorization for all services.

The following is **NOT** an all-inclusive MDwise St. Catherine Hoosier Healthwise authorization list. If you have any questions, contact MDwise St. Catherine Network at (219) 392-7072 prior to scheduling any services.

	Auth Required	Auth Not Required		Auth Required	Auth Not Required
Out of network referrals	X		PET Scan	X	
Radiology		X	PFT		X
Radiation Oncology	X		Psychiatric Services	Delegated to CMCS	
Lab		X	Sleep Study	X	
IP Admissions	X		Tilt Test		X
Auditory Brain Stem Response		X	Transcranial Doppler		X
Computerized Dynamic Posturography		X	Non OB Ultrasound		X
CT Scan		X	Ultrasound (OB Level II)		X
Echocardiograms		X	Venous Doppler		X
EEG 24 hour		X	Outpatient Surgery	X	
EMG		X	Observation		X
Fetal Cardiac Echo		X	DME over \$250	X	
Fistulogram		X	Hearing Aids	X	
Hearing Testing		X	DME Rentals	X	
Heart Infusion Clinic	X		Emergency Room		X
Home Health	X		IV Infusion Services	X	
Hysterosonogram		X	Infusion Clinic	X	
MRI	X		Myelogram		X
Nerve Conduction Test		X	Nuclear Cardiac Stress Test		X
PT/OT/ST	X		Pain Management	X	

MDwise St. Catherine Medical Management

Business Hours: 8:00 a.m. to 5:00 p.m.

Phone: (219) 392-7072 Fax: (219) 392-7090