

# In-Network Provider Claim Disputes

An in-network provider is one that has signed a contract to serve MDwise Excel members.

Submit dispute to MDwise: [cdticket@mdwise.org](mailto:cdticket@mdwise.org) (recommended) or mail to:

MDwise, Inc.  
P.O. Box 441423  
Indianapolis, IN 46225  
ATTN: Claim Dispute Team

## Contracted Providers:

MDwise Hoosier Healthwise  
MDwise Healthy Indiana Plan (HIP)  
MDwise Behavioral Health (Hoosier Healthwise and HIP)

## The following do not constitute a dispute:

- New Claims
- Corrected Claims
- Medical Record Requests
- Attachments (consent forms, invoices)
- Recoupments

## Examples of denials that may constitute a dispute include:

- Timely Filing
- Coding Issues

For these adjustments, please submit a Provider Claim Adjustment Request Form found at [mdwise.org/for-providers/forms/claims](http://mdwise.org/for-providers/forms/claims).

### Informal Claim Dispute 1<sup>st</sup> Level

#### Provider disagrees in writing with how the claim was adjudicated.

- Must be commenced within 60 days from the date on the Explanation of Payment (EOP).
- MDwise will reach a resolution and notify provider within 30 calendar days.



### Formal Dispute 2<sup>nd</sup> Level

#### Provider disagrees with 1<sup>st</sup> level resolution.

- Provider has 60 days from the date of the 1<sup>st</sup> level resolution.
- MDwise will compose a panel of persons not involved with the 1<sup>st</sup> level dispute to review the 2<sup>nd</sup> level dispute.
- MDwise will reach a resolution and notify provider within 45 calendar days.
- The panel's decision is MDwise's final action on the claim.

# Out-of-Network Provider Claim Disputes

An out-of-network provider is a plan provider that is not affiliated or contracted with MDwise Excel.

Submit dispute to MDwise: [cdticket@mdwise.org](mailto:cdticket@mdwise.org) (recommended) or mail to:

MDwise, Inc.  
P.O. Box 441423  
Indianapolis, IN 46225  
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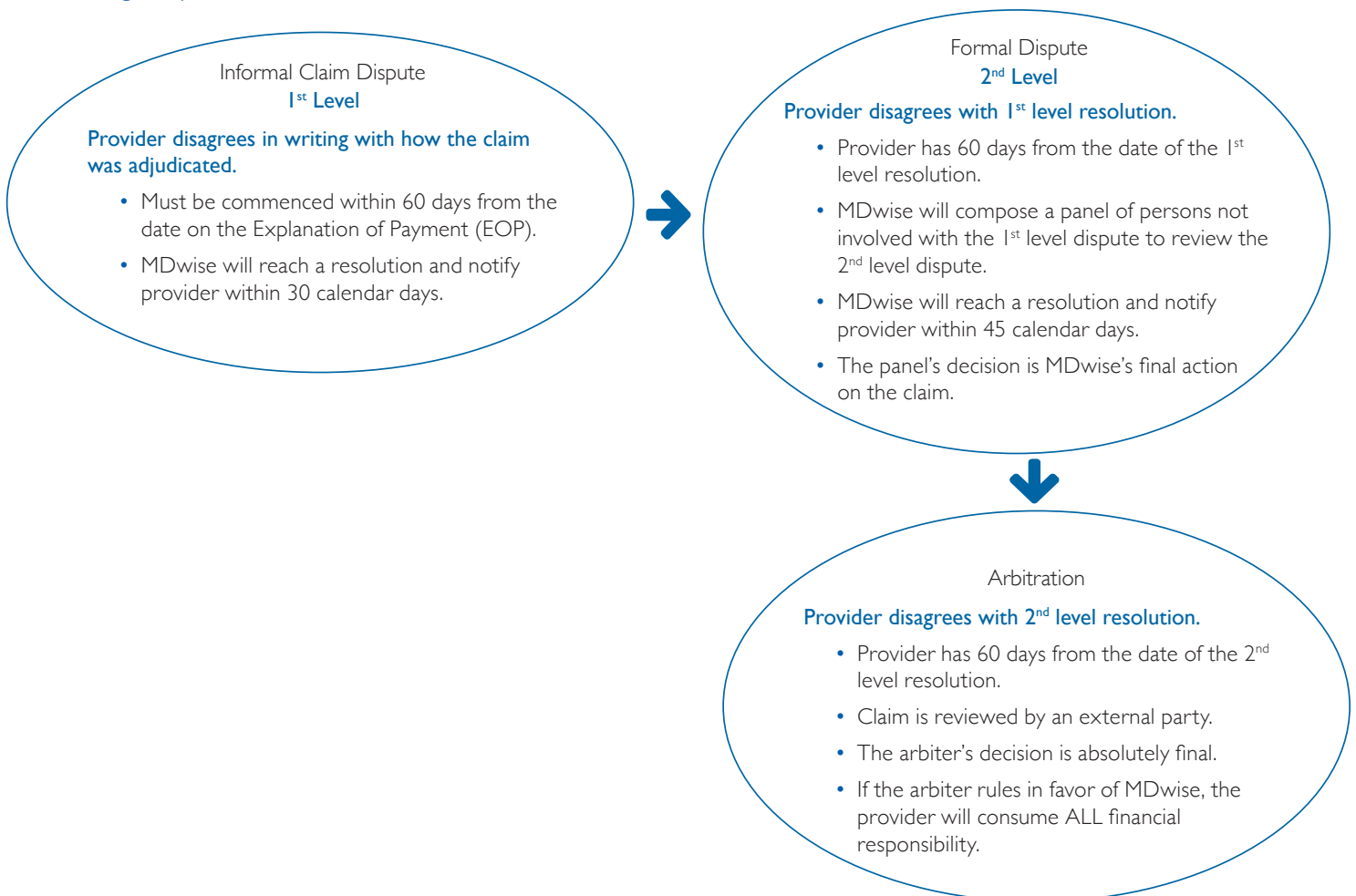
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# Appeals & Grievances

## Members file grievances (not disputes)

### Grievances

- A member's right
- A grievance is a member's complaint regarding anything related to MDwise 42 CFR 438.1400(b)

#### Examples:

- Complaints about services/quality;
- Rudeness of a doctor or MDwise Associate.

### Appeals

- An appeal is a review of an action; or a request to change a previous decision by MDwise. (Scope of Work)
- An action is: MDwise's denial of requested service; denial to pay for a service; or MDwise's failure to act within required timeframes.

#### Example:

- A provider appealing a Prior Authorization decision on behalf of a MDwise member.

# Disputes

## Providers file disputes (not grievances)

### Claim Inquiry

- Questions about claims.
- Providers call into the appropriate claims inquiry line.

### Claim Dispute

- A provider's disagreement with how a claim was adjudicated.
- Providers must file a claim dispute within 60 days from the date of the explanation of payment.
- MDwise will respond within 30 calendar days.
- Any adjudicated claim can be disputed.

#### Examples:

- Timely filing denials.
- Coding issues.
- Claims that are denied for authorization.