

2023 Health Insurance Marketplace Provider Quick Reference Guide - Louisiana

MARKETPLACE PROGRAM

CHRISTUS Health Plan began offering our affordable, high-quality individual health coverage on the health insurance marketplace to Louisiana consumers. Coverage is available to all, regardless of pre-existing conditions.

PROVIDER INQUIRIES

A representative is available to assist you Monday – Friday, 8 a.m. to 5 p.m.

- Claim inquiries
- Provider education
- Contract clarification
- Provider demographic changes

Phone: 1-844-282-3025

Fax: 1-210-766-8851

Pre-Authorizations Fax: 1-800-277-7562

PROVIDER WEB SITE

www.christushealthplan.org

- Provider resources
- Provider education
- Locate a provider
- Provider Portal
 - Verify member eligibility
 - Check claim status
 - Download EOPs

**Please send a request for portal access via email to*

CHP.ProviderNetwork@christushealth.org

RESOURCES

<https://www.regtap.info/>

<https://www.ldi.la.gov/>

www.cms.gov

SALES & MARKETING INQUIRIES

A representative is available to assist you Monday – Friday, 8 a.m. to 5 p.m. local time

Phone: 1-833-889-4357

- Sales and Marketing
- Broker contracting and assistance

Email: TXBrokerSupport@christushealth.org



NETWORK CONTRACTING

Prospective Providers **ONLY**

CHP.NetworkDevelopment@christushealth.org

AUTHORIZATION INFORMATION

The list of services are subject to change. Please visit www.christushealthplan.org for the most up-to-date listing.

Please contact us at **1-844-282-3025** for questions related to the Prior Authorization requirements. The list of services is subject to change. When updates occur, providers will be notified as required.

UTILIZATION MANAGEMENT

Phone: 1-844-282-3025

Fax: 1-844-357-7562

FRAUD AND ABUSE

It is your responsibility as a participating provider to report suspected fraud, waste, or abuse to CHRISTUS Health Plan.

FWA HOT LINE: 855-771-8072

CHRISTUS Health Plan
ATTN: SIU Coordinator
919 Hidden Ridge Drive
Irving, TX 75038
christushealthplansiu@christushealth.org

COMPLAINTS AND APPEALS

Appeals deadline: **180** days from the date of last disposition of a claim. Please note the reason for the appeal.

Mail to:

CHRISTUS Health Plan
Attention: Complaints and Appeals
P.O. Box 169009
Irving, Texas 75016
Phone: 1-844-282-0380
Fax: 1-866-416-2840
Christus.Hp.AppealsandGrievances@christushealth.org

CLAIMS SUBMISSIONS

The deadline to file claims is **45** days from the date of service. Check the ID cards for information on where to file. Call Member Services to verify eligibility.

**unless contract states otherwise*

CLAIMS RESUBMISSIONS

The resubmission filing deadline is 180 days from date of CHRISTUS Explanation of Payment

CLAIMS ADDRESS

CHRISTUS Health Plan Texas Exchange
P.O. Box 981654
El Paso, TX
79998-1654

For questions related to claims payment, please contact us at **1-844-282-3025**.

ELECTRONIC CLAIMS

Payor ID: 52106

Clearinghouse: Change Healthcare

MEMBER PAYMENTS

To make a payment, CHRISTUS Health Plan members may call Member Services. We are available Monday – Friday, from 8 a.m. to 5 p.m., **1-800-282-3025**.

Members may also submit payment through the telephone by calling Member Services, or use our online tools, which are available at www.christushealthplan.org.

CREDENTIALS VERIFICATION ORGANIZATION

Non Delegated providers and groups
christus.hp.credentialing@christushealth.org
Delegated Providers
christusdsodelegation@christushealth.org
Facilities and Ancillaries
Christus.HP.Facility@christushealth.org

ELIGIBILITY AND ENROLLMENT

***Open Enrollment 11/01/2022-01/15/2023**

Hours Monday – Friday, 8 a.m. – 5 p.m. local time

Phone: 1-844-282-3025

Fax: 1-210-766-8851

CHRISTUS.HP.Eligibility@christushealth.org

MEMBER SERVICES

We are available to assist our members Monday – Friday, 8 a.m. – 5 p.m. local time

- Help finding a doctor or specialist
- Verify member coverage and eligibility
- Claim Status

Phone: 1-844-282-3025

Fax: 1-210-766-8851

Christus.HP.memberservice.inquiry@christushealth.org

24 HOUR NURSE LINE

Phone: 1-844-581-3175

BEHAVIORAL HEALTH

- Case management
- Prior authorizations

Phone: 1-800-446-1730 (Option 2)

For claims, member services, eligibility, and provider contracting questions, contact CHRISTUS Health Plan directly.

PHARMACY BENEFIT MANAGER

Express Scripts, Inc. (ESI)

Phone: 1-844-569-2830

Rx BIN #: 003858

Rx Group#: CHPCRE

Rx PCN#: A4

Help Desk: 1-800-922-1557



DENTAL BENEFIT VENDOR

DENTEGRA

Member Services Phone: 1-877-745-9687

Website: www.Dentegra.com



VISION BENEFIT VENDOR

Superior Vision

Member Services Phone: 1-800-879-6901

Provider Services Phone: 1-866-819-4298

Website: www.superiorvision.com

