

Customer Service

1-800-953-8854

Monday - Friday
8 am to 5 pm, EST

On The Phone

- Claim status
- Request provider education and orientation session
- Network participation
- Member eligibility/ verification

On The Web

- Provider Manuals
- Provider Forms
- Quick Reference Guides and FAQs
- Prior Authorization Code Checker Tool
- Clinical Guidelines
- Health Plan News
- Change or update demographic information

On The Secure Portal

- Member Eligibility
- PCP Verification
- PCP Panel Lists
- Submit, Inquire, or Correct Claims
- Submit Authorizations or check Authorization status

Provider Relations

If you are a MPC provider, you have a designated Provider Relations Specialist. Find the Provider Relations Specialist territories map on the Provider Resources section of our website.

Interpreter Services

Providers may contact MPC Member Services Department at 1-800-953-8854, which will link your call to a translation service (telephonic only).

Claims

Timely Filing

180 days from date of service. When MPC is secondary, provider has 12 months from the date of service. COB claims are accepted up to 6 months after a remittance advice date up to 18 months from the date of service.

Secure Web Portal

Submit claims free of charge through our Secure Web Portal.

Electronic Clearinghouse

Emdeon - Payor ID 22348
1-866-506-2830

Paper Claims (after 7/1/17)

Mail to:
Maryland Physicians Care
P.O. Box 5080
Farmington, MO 63640-5080

Claims Payment

MPC uses PaySpan to provide Electronic Funds Transfer (EFT) and Electronic Remittance Advice (ERA). The service is free. To register, call:

1-877-331-7154.
www.payspanhealth.com

Medical Management

Scheduled Inpatient and Outpatient Prior Authorization

1-800-953-8856 (fax)

Notice of Admission

1-800-385-4169 (fax)

Concurrent Review / Clinical Information

1-877-535-0591 (fax)

Special Needs Coordinator

1-844-356-2083 (fax)

Verify and submit authorizations through the Secure Provider Portal at MarylandPhysiciansCare.com

Provider Claim Reconsideration or Appeal Process

Claim Reconsideration

Is a request for MPC to review a claim with additional (non-clinical) information submitted that was not previously submitted. Complete the claim reconsideration form which can be found at

MarylandPhysiciansCare.com

Reconsiderations must be submitted within 90 days of the claim Remittance Advice or it will be denied untimely.

Mail form and documentation for Claim Reconsiderations to: Maryland Physician Care MCO
Attn: Reconsideration
PO Box 5080
Farmington, MO 63640-5080

Claim Appeal

Claim appeals must be submitted within 90 working days of the decision or it will be denied untimely.

Mail form and documentation for Claim Appeal to: Maryland Physician Care MCO
Attn: Provider Appeals
PO Box 5080
Farmington, MO 63640-5080

Member Pre-Service Appeal

MPC requires a formal written request to reconsider a medical decision. Medical records should be attached. Complete the appeal form, which can be found online at: MarylandPhysiciansCare.com. Mail or fax form and documentation:

Maryland Physicians Care
1201 Winterson Rd, 4th Floor
Linthicum Heights, MD 21090

1-866-831-0790 (fax)

Specialty Services

High Tech Radiology Imaging Services

National Imaging Associates (NIA)
1-800-424-4836
www.radmd.com

Non Emergent Medical Transportation (NEMT)

1-800-953-8854

Routine Vision Services

Superior Vision
1-800-428-8789

Dental Services

DentaQuest (21 and older)
1-800-685-1150
Healthy Smiles Program (under 21 and pregnant women)
1-855-934-9812

Pharmacy Services

Express Scripts
Phone 1-800-953-8854
PA Fax 1-866-207-7231
RxBIN 610084

Member ID Card

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