

2025 BROKER QUICK REFERENCE GUIDE

Health Insurance Marketplace - Louisiana

MEMBER SERVICES

Phone: **844-282-3025** Fax: **210-766-8851**
Christus.HP.memberservices.inquiry@christushealth.org

CHRISTUS Health Plan TX - EX	
Member	Medical Plan
Subscriber Name: JOHN SAMPLE Subscriber ID: 0000000000 Group Number: 66252TX02800006 Effective Date: 04/01/2025 PCP Name: Jane Doe PCP Phone: 555-555-5555	PCP Office Visit: \$0 Specialist Office Visit: \$10 Emergency Room: 25% Urgent Care: \$5 OOP Max: \$1800/\$3600 INN Deductible Combined: \$0/\$0 QHP TDI HMO
Dependents: JANE SAMPLE 0000000001 JIMMY SAMPLE 0000000002	Pharmacy Plan RxBIN: 003858 RxPCN: A4 RxGRP: CHPHCRE Preferred Generic Drug: \$0 Generic Drug: \$0 Brand Drug: \$15 Non Preferred Brand Drug: \$50 Specialty Drug: \$150

Provider Services	Member Services
Submit Medical Claims to: P.O. Box 561123 Dallas, TX 75356 Payor ID: 52106	Member Services 1-844-282-3025 TTY 711 Superior Vision 1-800-879-6901 Delta Dental 1-833-459-1167 Pharmacy for Members 1-844-569-2830 TDD Pharmacy 1-800-759-1089
Submit Dental Claims to: P.O. Box 1809 Alpharetta, GA 30023-1809	Assistance 24/7 Nurse Line: 1-844-581-3175
Submit Vision Claims to: 939 Elkridge Landing Rd, Ste 200 Linthicum, MD 21090	

CHRISTUS Health Plan is a licensed HMO in Texas. CHRISTUS Health Plan is also the sole owner of CHRISTUS Health Plan Louisiana, a licensed HMO in Louisiana which operates under the registered trade name of CHRISTUS Health Plan. Please visit www.christushealthplan.org for more information about your plan and to find information on how to locate an in-network provider.

MEMBER PORTAL URL

<https://christushealthmember.healthtrioconnect.com>

Reprint ID cards, change PCP, view benefits, check eligibility and more

"How to Register for the Portal" VIDEO

<https://www.christushealthplan.org/member-resources>

SALES & MARKETING

TXBrokerSupport@christushealth.org

Phone: **833-889-4357**

Broker/Prospect Inquiries, Marketing Events

CARENET 24-HOUR NURSE LINE

Phone: **844-581-3175**



CARE MANAGEMENT

Phone: **800-446-1730** (ext 2)

The Care Management program plans and manages the care of members with complex and/or chronic needs and those whose needs are acute, episodic, or short term in nature.

There is no cost to the member.

Members can be referred for a care management evaluation by calling the number above. Members will then be contacted to enroll.

COMPLAINTS AND APPEALS

ChristusCAG@christushealth.org

Phone: **844-282-0380** Fax: **866-416-2840**

Appeals deadline: **180** days from the date of the last disposition

Mail to: CHRISTUS Health Plan

ATTN: Complaint and Appeals

P.O. Box 169009

Irving, TX 75016

ELIGIBILITY AND ENROLLMENT

Christus.HP.Eligibility@christushealth.org

Phone: **844-282-0380** Fax: **866-416-2840**

Open Enrollment 11/01/2024 - 01/15/2025

PHARMACY BENEFIT MANAGER

Express Scripts, Inc. (ESI) **1-800-949-8779**

Pharmacy Help Desk **1-800-922-1557**

*Single Sign-On (SSO) available in Member Portal



DENTAL BENEFIT VENDOR

Delta Dental www.deltadentalins.com

Member Services **1-833-459-1167**

*Single Sign-On (SSO) available in Member Portal



VISION BENEFIT VENDOR

Superior Vision www.superiorvision.com

Member Services **1-800-879-6901**



FITNESS VENDOR

(Plus plans ONLY)

Active&Fit www.activeandfit.com

Member Services **877-771-2746** (TTY 711)

Monday - Friday, 5 am - 6 pm



FRAUD, WASTE AND ABUSE

ChristusHealthPlanSIU@christushealth.org

FWA HOTLINE: **855-771-8072**

Secure Fax: **210-766-8849**

CHRISTUS Health Plan

ATTN: Special Investigations Unit

5101 N. O'Connor Blvd.

Irving, TX 75039