

# 2021 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 Texas 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 inquires
- 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](http://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](mailto:CHP.ProviderNetwork@christushealth.org)

## RESOURCES

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

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

[www.cms.gov](http://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](mailto:TXBrokerSupport@christushealth.org)



## NETWORK DEVELOPMENT

Prospective Providers **ONLY**

[CHP.NetworkDevelopment@christushealth.org](mailto:CHP.NetworkDevelopment@christushealth.org)

## AUTHORIZATION INFORMATION

The list of services are subject to change. Please visit [www.christushealthplan.org](http://www.christushealthplan.org) for the most up-to-date listing.

The Prior Authorization List may not include all services that require or do not require prior authorization. Please contact us at **1-844-282-3025** for questions related to the 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:** 1-800-277-7562

## FRAUD AND ABUSE

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

CHRISTUS Health Plan  
**ATTN: SIU Coordinator**  
919 Hidden Ridge Drive  
Irving, TX 75038

[christushealthplansiu@christushealth.org](mailto: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](mailto:Christus.Hp.AppealsandGrievances@christushealth.org)

## CLAIMS SUBMISSIONS

The deadline to file claims is **120** 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

Corrected claims must be submitted within 180 days from date of CHRISTUS Explanation of Payment

## CLAIMS ADDRESS

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

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](http://www.christushealthplan.org).

## CREDENTIALING VERIFICATION UNIT

Non Delegated providers and groups  
[christus.hp.credentialing@christushealth.org](mailto:christus.hp.credentialing@christushealth.org)  
Delegated Providers  
[christusdsodelegation@christushealth.org](mailto:christusdsodelegation@christushealth.org)

## ELIGIBILITY AND ENROLLMENT

**\*Open Enrollment 11/01-12/15**

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](mailto: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](mailto:Christus.HP.memberservice.inquiry@christushealth.org)

## 24 HOUR NURSE LINE

**Phone:** 1-844-581-3175

## BEHAVIORAL HEALTH

- Case management
- Prior authorizations

**Phone:** 1-844-282-3025

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

DENTEGRA

**Member Services Phone:** 1-877-745-9687

**Website:** [www.Dentegra.com](http://www.Dentegra.com)



## VISION BENEFIT

Superior Vision

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

**Provider Services Phone:** 1-866-819-4298

**Website:** [www.superiorvision.com](http://www.superiorvision.com)

