

PROVIDER UPDATE

An Update for Highmark Delaware Health Options Providers and Clinicians

Important Announcement – Appeals and Grievances Department

Effective July 5th, 2020 there will be changes to the contact information for both Member Appeals & Provider Grievances and Clinical Appeals submissions. The changes are as follows:

	CURRENT CONTACT	*NEW CONTACT – EFFECTIVE 7/5/2020*
Member Appeals & Grievances Fax Number	412-255-4503	833-841-8074
Provider Clinical Appeals Fax Number	855-501-3904	833-841-8075
Mailing Address	PO BOX 22278, Pittsburgh, PA 15222	PO BOX 106004 Pittsburgh, PA 15230

The phone numbers to speak with a representative will not change. Please continue to use the following methods to reach an agent with questions or to initiate a request:

- Member Services (Non-LTSS): 1-844-325-6251
- Member Services (LTSS): 1-855-401-8251
- Provider Services: 1-844-325-6251
- Member Advocates: 1-855-430-9852

There will be no changes to the processing times or exchange of information. If you have any questions or concerns about these changes, please reach out to Provider Services or your Provider Network Contact.

