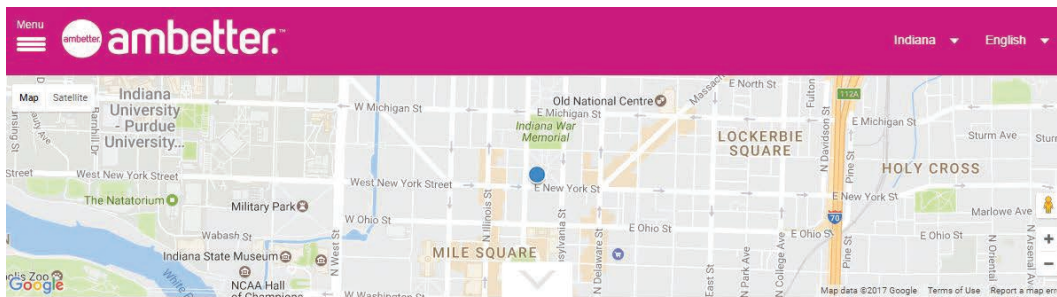


Ambetter from MHS Exclusive Provider Network



Ambetter from MHS is an Exclusive Provider Network Benefit Plan

- Members enrolled in Ambetter must utilize in-network participating providers and practitioners except in the case of emergency services.
- When referring a member to another provider or practitioner, please make sure that the referral is contracted with Ambetter.
- If a non-contracted provider or practitioner is utilized, except in the case of emergency services, the member will be responsible for charges that exceed the allowed amount. ***This could mean hundreds of dollars in out-of-pocket expenses for the member.***
- Contracted providers and practitioners can be identified by visiting our website at **ambetter.mhsindiana.com** and clicking on Find a Provider.



Find a HealthCare Provider



Quick Name
Search



Detailed
Search



My
Favorites

**Thank you for protecting our members from
unnecessary out-of-pocket expenses!**

How to Secure Prior Authorization



Pre-Auth Needed Tool

Use the Pre-Auth Needed Tool at ambetter.mhsindiana.com to quickly determine if a service or procedure requires prior authorization.

Submit Prior Authorization

If a service requires authorization, submit via one of the following three ways:



PHONE

1-877-687-1182



FAX

MEDICAL

1-855-702-7337

BEHAVIORAL HEALTH

1-855-283-9094

After normal business hours and on holidays, calls are directed to the plan's 24-hour nurse advice line. Notification of authorization will be returned phone, fax or web.



SECURE WEB PORTAL

provider.mhsindiana.com

Exclusive Provider Network Benefit Plan

PLEASE NOTE:

1. Members must utilize in-network participating providers and practitioners except in the case of emergency services.
2. Emergency and urgent care services DO NOT require prior authorization. All out-of-network (non-par) services, providers and practitioners DO require prior authorization.
3. Failure to complete the required authorization or certification may result in a denied claim.