



BAPTIST HEALTH PLAN®

Claims Addresses

Claims should be mailed to the following addresses by specialty type:

Providers:

*please consult member's ID card

Baptist Health Plan
P.O. Box 22738
Lexington, KY 40522-2738
859.269.4475 or 800.787.2680

OptumHealth Care Solutions:
(Chiropractic Claims)

P.O. Box 212
Minneapolis, MN 55440-0212
800.873.4575

OptumHealth Behavioral Solutions:
(Mental Health Services claims)

P.O. Box 30757
Salt Lake City, UT 84130-0757
877.369.2201

Prime Therapeutics, LLC
(Pharmaceutical/Prescription claims):

P.O. Box 21870
Lehigh Valley, PA 18002-1870
866.590.3029

Care Continuum
(Home Health/Home Infusion)

4750 E. 450 South
Suite 2130
Whitestown, IN 46075-8404
800.467.5410

If you are interested in filing claims electronically, please contact your Clearing House directly. Our electronic payor ID # is 61124.

If you have any questions, please contact Baptist Health Plan at 859.269.4475 or 800.787.2680.

To access claim status, member eligibility, member benefits, and authorization status on-line, please visit www.BaptistHealthPlan.com:

- Click on **Providers**
- Click on **Register and Login to the Provider Secure Portal**
- Log-in using your **username** and **password**, or
- If you need to create a log-in, click on **Register Here** to complete and fax the **Baptist Health Plan Secure Portal Provider Access Request Form** as indicated.
- This service is password-protected and HIPAA compliant.

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