



PROVIDER NEWS



March 18, 2026

Is your practice information up to date?

It is important that we have updated information about your practice.

If any information related to your practice's operations or provider roster have changed, please complete the OhioHealth [Provider Change Form](#) and submit it to the fax number or email address shown on the form.

Pharmacy information

The formulary and prior authorization lists for both medical specialty drugs and pharmacy benefit drugs are posted on <https://www.ohiohealthyplans.com/providers/pharmacy/> under Medical Drug Formularies for medical benefit drugs or in the [Navitus Prescriber Portal](#) for the pharmacy benefit drugs.

Prior-authorization and claims submission steps

OhioHealthy has recently identified that some claims and prior-authorization requests are still being submitted to **Contigo**, our previous third-party administrator (TPA) from 2023. Please be advised that **Contigo is no longer the correct point of submission for any claims or prior-authorization requests.**

Submitting requests to the incorrect TPA may result in claims denial and more importantly, may impact timely access to care for patients.

As a reminder, when submitting claims to OhioHealthy please use the following:

- Claims EDI Number – 48116
- Claims Mailing Address – OhioHealthy, PO Box 4278, Clinton, IA 52733-4278

Tips for Successful Electronic Claim Filing

- **Stay Updated:** Keep abreast of changes in billing regulations, codes and payer requirements.
 - **Use Practice Management Software:** Utilize software that integrates electronic claims submission for efficiency.
 - **Maintain Documentation:** Keep thorough records of claims submitted, including confirmations and payment receipts.
 - **Educate Staff:** Ensure all staff members involved in billing are trained on electronic claim submission processes, EDI information and compliance.
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Prior-Authorization Submission Methods

To ensure efficient processing and avoid unnecessary delays, please review and follow the current prior-authorization submission guidelines outlined below. **We ask that all provider offices share this information with their teams to ensure compliance with the correct process.**

1. Provider Portal

- a. Use the message center within the Luminare Health provider portal to submit authorization requests.
- b. You can register for the portal [here](#). Once logged in, you can submit, track and manage authorizations online.

2. Phone

- a. For urgent or specific cases, call the provider services number on the patient's ID card.

3. Fax

- a. For individual medical provider pre-certification, fax supporting documentation to 717-295-1208.

Note: The instructions outlined above apply to providers located within the following 17 counties: Coshocton, Delaware, Fairfield, Franklin, Guernsey, Hocking, Licking, Madison, Marion, Morgan, Morrow, Muskingum, Noble, Perry, Pickaway, Richland, Union.

Authorization forms can be found on our [website](#).

Requests for specialty medications through the medical benefit should continue to go to Archimedes.

For Fax or Mail use the forms below:

Medical Drug Prior authorization and appeals form: [Archimedes Specialty Drug Authorization Form \(PDF\)](#)

Prior authorization and appeal requests can be submitted by:

- PHONE: (888) 504-5563
- MAIL: Archimedes, LLC 278 Franklin Rd. Ste 245 Brentwood, TN 37027
- FAX: (866) 491-6971

Questions on medical Benefit Drugs? Contact Archimedes Customer Service (888) 504-5563.

Continuing Education Credits Opportunity

Interested in learning more about continuous glucose monitoring (CGM) and earning **free continuing education credits** (ACCME, ACPE, ANCC, AAPA)?

Continuous Glucose Monitoring in Primary Care: Empowering Better Management of Type 2 Diabetes.

This continuing education is brought to you by OhioHealthy, in partnership with Partners for Advancing Clinical Education, the International Diabetes Center and HealthPartners Institute. **The activity is intended for physicians, nurse practitioners, physician assistants, pharmacists, or diabetes educators who care for patients with diabetes.**

During the initial presentations in November, faculty provided an overview of CGM and focus on clinician CGM guided management (CCGM) for people with T2D on insulin, practical aspects of integrating CGM technology into the clinic and a CGM-based case study.

Click [here](#) to access recordings of the live sessions until May 19, 2026.

Member Advocates are here to help

Experienced. Knowledgeable. And with you every step of the way.

OhioHealthy Member Advocates are your ally throughout the healthcare journey. They are health plan experts fully equipped to quickly resolve routine and complex inquiries any time you need them. Just refer to the number on the back of the member ID card.

Here are just a few of the things a Member Advocate provides:

- Assistance with claims, billing, and benefits
 - Cost estimates for common services
 - In-call language and translation services for over 250 languages
 - Claims and billing analysis for complex projects — including offline research and personal follow-up call and resolution
 - Assistance with the fully functional, web-based provider portal for provider self-service
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Visit our provider portal or reach out to us directly

- Visit OhioHealthyPlans.com to register for the new provider portal.
- Here you can connect with provider services and access self-service information to review claims, access patient coverage and check patient eligibility.
- Register for the portal by selecting the appropriate option under the login box.
- For more information on how to register for the provider portal click [here](#).

Any questions regarding the topics in this newsletter or any other can be directed to our Provider Relations team at:

ProviderRelations@OhioHealthyPlans.com

Credentialing questions can be emailed directly to:

OhioHealthCredentialing@OhioHealth.com

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[Politely take me off your list](#)