





It is **IMPORTANT** for members accessing DHP to utilize DHP providers and facilities.


If you have any questions regarding participation, please contact us.


**Participating Networks**  
Entire DHP Network (network name or logo required)







**Participating Networks**  
Partial DHP Network (network name or logo required)











**Insurance Companies**  
Partial DHP Network (company name or logo required)











**DHP Contact Information**

<b>Main Switchboard</b>	812-450-7265	<b>Main Fax</b>	812-450-2030
<b>Toll Free</b>	800-374-8993	<b>Credentialing Fax</b>	812-450-7215

**Credentialing Department - New Applications**

Angela Wilson	812-450-2962	<a href="mailto:angela.wilson@deaconess.com">angela.wilson@deaconess.com</a>	Lisa Tyler	812-450-2218	<a href="mailto:lisa.tyler@deaconess.com">lisa.tyler@deaconess.com</a>
Heather Brown	812-450-1064	<a href="mailto:heather.brown@deaconess.com">heather.brown@deaconess.com</a>	Tani Carter	812-450-7472	<a href="mailto:tani.carter@deaconess.com">tani.carter@deaconess.com</a>

**Recredentialing**



Brenda Farney	812-450-7347	<a href="mailto:brenda.farney@deaconess.com">brenda.farney@deaconess.com</a>	Kimberly Ludwig	812-450-2031	<a href="mailto:kimberly.ludwig@deaconess.com">kimberly.ludwig@deaconess.com</a>
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**Provider Relations Department**

Jolee Miller	812-450-3151	<a href="mailto:jolee.miller@deaconess.com">jolee.miller@deaconess.com</a>
Jane Lasher	812-492-2247	<a href="mailto:jane.lasher@deaconess.com">jane.lasher@deaconess.com</a>

## INSURANCE COMPANIES




COMPANY NAME OR LOGO REQUIRED ON CARD

Service Area ED1 #	Logo & Website	Insurance Company	Contract Includes:
<p>National</p> <p>ED1 #: 60054</p>	 <p><a href="http://www.aetna.com">www.aetna.com</a></p>	<p><b>AETNA</b></p> <p>effective 8/1/2006</p>	<ul style="list-style-type: none"> <li>◆ DHP physicians, NPs and PAs in the areas listed below</li> <li>◆ Various DHP ancillary providers (NOT facilities) in these areas:                             <ul style="list-style-type: none"> <li>IN—Counties of Vanderburgh, Posey, Warrick, Pike, Gibson or Knox</li> <li>KY—Counties of Henderson or Union</li> <li>IL—Cities of Carmi, Fairfield, Olney, Mt. Carmel, Grayville or Lawrenceville</li> </ul> </li> <li>◆ Verify participation by calling Aetna at <a href="tel:888-632-3862">888-632-3862</a></li> <li>◆ *180-day filing limit</li> <li>◆ Claims address: P.O. Box 981106, El Paso, TX 79998-1106</li> <li>◆ Claim issues: <a href="tel:1-888-MD-Aetna">1-888-MD-Aetna</a></li> <li>◆ Accepts DHP effective dates for new providers and changes to existing providers.</li> <li>◆ NP and PA services are paid at 85 % of the physician fee schedule. *</li> <li>◆ Behavioral health counselors, PsyD, PhD services are paid at 100 % of the physician fee schedule. *</li> </ul>
<p>National</p>		<p><b>AETNA</b></p> <p><b>Medicare Advantage</b></p> <p>effective 12/1/2001</p>	<ul style="list-style-type: none"> <li>◆ Only includes providers who have signed a DHP Medicare Addendum and are a participating Medicare provider.</li> <li>◆ Requires Annual attestation submitted for code of conduct training. Please visit <a href="http://www.deaconess.com/Deaconess-Health-Plans/Compliance-Training-Attestation">www.deaconess.com/Deaconess-Health-Plans/Compliance-Training-Attestation</a></li> <li>◆ Medicare Customer Service line <a href="tel:800-624-0756">800-624-0756</a>.</li> </ul>

\* Filing limits are not guaranteed by DHP but are based on information provided by the insurance companies and networks and these limits are subject to change. This chart is not a guarantee of reimbursement for services provided. Benefit coverage will vary by the employer's benefit plan. The percentage quoted is not a guarantee; percentage is subject to change. Have questions? **Please call the "eligibility/benefits" phone # on the ID card.**

## INSURANCE COMPANIES

COMPANY NAME OR LOGO REQUIRED ON CARD

Service Area ED1 #	Logo & Website	Insurance Company	Contract Includes:
<i>National</i>	  	<b>HUMANA</b> (CHOICECARE)  effective 1/1/2007  (CHOICECARE+)  effective 1/1/2007	<ul style="list-style-type: none"> <li>◆ All DHP hospitals</li> <li>◆ All DHP physicians</li> <li>◆ NPs and PAs (Specialist co-pay applies if NP/PA working under a specialist)</li> <li>◆ Behavioral Health carved out to Humana Behavioral Health, a Humana company.</li> <li>◆ Chiropractors in Illinois and Kentucky carved out to Tivity.</li> <li>◆ Various DHP ancillary providers (please verify participation with ChoiceCare by calling <a href="tel:800-626-2741">800-626-2741</a>)</li> <li>◆ *90-day filing limit</li> <li>◆ Accepts DHP effective dates for new providers and changes to existing providers.</li> <li>◆ Allied Health providers' services are paid at 75 % of the physician fee schedule.*</li> </ul>
<i>Regional</i>  ED1 #: 77950		<b>HEALTH ALLIANCE MEDICAL PLAN</b>  effective 11/1/2000	<ul style="list-style-type: none"> <li>◆ Entire DHP Network in Indiana, Kentucky and Illinois only (NPs and PAs accepted)</li> <li>◆ Claims address: PO Box 6003, Urbana, IL 61803</li> <li>◆ *90-day filing limit for HAMP claims</li> <li>◆ HAMP accepts DHP effective dates for new providers and changes to existing providers.</li> <li>◆ This plan has open access for any chiropractic care</li> <li>◆ Allied Health providers' services are paid at 100 % of the physician fee schedule.*</li> </ul>

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## PARTICIPATING NETWORKS

NETWORK NAME OR LOGO REQUIRED ON CARD

Service Area	Logo & Website	Network	Contract Includes:
<i>Local</i>	 <a href="http://www.deaconess.com/dhp">www.deaconess.com/dhp</a>	DEACONESS HEALTH PLANS  effective 1/1/2004	<ul style="list-style-type: none"> <li>◆ Entire DHP Network</li> </ul>
<i>Regional</i>	 <a href="http://www.encoreconnect.com">www.encoreconnect.com</a>	ENCORE PRIME  effective 1/1/2019	<ul style="list-style-type: none"> <li>◆ All Deaconess-employed physicians (regardless of location). Various DHP physicians in Vanderburgh, Gibson, Henderson, Posey and Warrick counties with privileges or admitting arrangements at Deaconess Hospital (please verify participation in Encore Prime by calling <a href="tel:812-450-7265">812-450-7265</a>)</li> <li>◆ Various DHP ancillary providers in Vanderburgh, Gibson, Henderson, Posey and Warrick counties (please verify participation in Encore Prime by calling <a href="tel:812-450-7265">812-450-7265</a>)</li> <li>◆ *120-day filing limit</li> <li>◆ Accepts DHP effective dates for new providers and changes to existing providers.</li> </ul>
<i>Regional</i>	 <a href="http://www.encoreconnect.com">www.encoreconnect.com</a>	ENCORE COMBINED  effective 10/1/2018	<ul style="list-style-type: none"> <li>◆ Entire DHP Network (Specialist co-pay applies for NP/PA working under a specialist)</li> <li>◆ *120-day filing limit</li> <li>◆ Accepts DHP effective dates for new providers and changes to existing providers.</li> </ul>

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**PARTICIPATING NETWORKS**  
NETWORK NAME OR LOGO REQUIRED ON CARD

Service Area	Logo & Website	Network	Contract Includes:
National	 <a href="http://www.firsthealth.com">www.firsthealth.com</a>	<b>FIRST HEALTH NETWORK</b>  effective 6/1/2011	<ul style="list-style-type: none"> <li>◆ <b>Entire DHP Network</b> (Specialist co-pay applies for NP/PA working under a specialist)</li> <li>◆ <b>All DHP physicians with privileges or admitting arrangements at a First Health network hospital</b> (hospitals are by direct contract with First Health)</li> <li>◆ <b>Various DHP ancillary providers</b></li> <li>◆ <b>NPs and PAs accepted (not listed in directory)</b> (please verify participation with First Health by calling <a href="tel:800-937-6824">800-937-6824</a>)</li> <li>◆ *Filing limit is 1 year from DOS for First Health</li> <li>◆ Accepts DHP effective dates for new providers and changes to existing providers.</li> </ul>
Regional NE Indiana	 <a href="http://totalhealth.parkview.com">totalhealth.parkview.com</a>	<b>PARKVIEW SIGNATURE CARE</b>  effective 1/1/2007	<ul style="list-style-type: none"> <li>◆ <b>Entire DHP Network</b></li> <li>◆ *Filing limits vary by payor, but no less than 120 days</li> <li>◆ Accepts DHP effective dates for new providers and changes to existing providers.</li> </ul>
National	 <a href="http://www.multiplan.com">www.multiplan.com</a>	<b>PRIVATE HEALTHCARE SYSTEMS (PHCS) &amp; MULTIPLAN</b>  effective 7/1/2005	<ul style="list-style-type: none"> <li>◆ <b>All DHP hospitals</b> (some by direct contract)</li> <li>◆ <b>All DHP physicians with privileges or admitting arrangements at a network hospital</b> (NPs and PAs accepted)</li> <li>◆ <b>Various DHP ancillary providers</b> (please verify participation with PHCS by calling <a href="tel:800-950-7040">800-950-7040</a>)</li> <li>◆ *120-day filing limit</li> <li>◆ Accepts DHP effective dates for new providers and changes to existing providers.</li> </ul>

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**Application Requests** for Deaconess Health Plans, Deaconess Hospital, and Evansville Surgery Center can be found on the Deaconess Health Plans website @ [www.deaconess.com/Deaconess-Health-Plans/For-Providers/Provider-Application-Request](http://www.deaconess.com/Deaconess-Health-Plans/For-Providers/Provider-Application-Request)

You may obtain updated fee schedule allowables by emailing up to 250 codes per tax ID # *with your billed charges* in an Excel spreadsheet to [dhpfeerequest@deaconess.com](mailto:dhpfeerequest@deaconess.com).

Code	Modifier	Charge
99213		\$ 100.00
76872	26	\$ 150.00
76872	TC	\$ 110.00

You will be asked to complete a **Provider Update Form** (PUF), which can be found on the Deaconess Health Plans website @ [www.deaconess.com/Deaconess-Health-Plans/For-Providers/Provider-Update-Form](http://www.deaconess.com/Deaconess-Health-Plans/For-Providers/Provider-Update-Form) for any of the following reasons:

- |   |                                 |                        |   |
|---|---------------------------------|------------------------|---|
| { | ◆ Address change                | ◆ Name change          | } |
|   | ◆ Adding practice location      | ◆ Specialty change     |   |
|   | ◆ Eliminating practice location | ◆ Provider termination |   |

DHP requires that a PUF be completed & submitted to DHP with **all** supporting documentation (CMS 1500 and W-9) before we will notify payors of the change. The PUF and supporting documentation must match **EXACTLY**.

## In Network Hospitals

<b>Hospital</b>	<b>City</b>	<b>County</b>	<b>State</b>
<b>Crossroads Community Hospital</b>	Mt Vernon	Jefferson	Illinois
<b>Daviess Community Hospital</b>	Washington	Daviess	Indiana
<b>Deaconess Cross Pointe Hospital</b>	Evansville	Vanderburgh	Indiana
<b>Deaconess Gateway Hospital</b>	Newburgh	Warrick	Indiana
<b>Deaconess Gibson Hospital</b>	Princeton	Gibson	Indiana
<b>Deaconess Heart Hospital</b>	Newburgh	Warrick	Indiana
<b>Deaconess Henderson Hospital</b>	Henderson	Henderson	Kentucky
<b>Deaconess Midtown Hospital</b>	Evansville	Vanderburgh	Indiana
<b>Deaconess Orthopaedic-Neuroscience Hospital</b>	Newburgh	Warrick	Indiana
<b>Deaconess Union County Hospital</b>	Morganfield	Union	Kentucky
<b>Deaconess Womens Hospital</b>	Newburgh	Warrick	Indiana
<b>Encompass Health Rehabilitation Hospital</b>	Newburgh	Warrick	Indiana
<b>Good Samaritan Hospital</b>	Vincennes	Knox	Indiana
<b>Hardin County Hospital</b>	Rosiclare	Hardin	Indiana
<b>Heartland Regional Hospital</b>	Marion	Johnson	Illinois
<b>Memorial Hospital &amp; Health Care</b>	Jasper	Dubois	Indiana
<b>Perry County Hospital</b>	Tell City	Perry	Indiana
<b>Red Bud Hospital</b>	Red Bud	Randolph	Illinois
<b>Union County Hospital</b>	Anna	Union	Illinois
<b>Wabash General Hospital</b>	Mt. Carmel	Wabash	Illinois