

**Driscoll Children's Health Plan**  
**Quick Reference Tool**  
**CHIP**

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**Address:** 615 N Upper Broadway, Suite 1621, Corpus Christi, Texas 78401-0764  
**Hours of Operation:** 8 a.m. to 5 p.m. (CST), Monday – Friday (Except State Holidays)

**Important Phone Numbers:**

<b>Member Services:</b>	1-877-451-5598	<b>UM Questions:</b>	1-877-455-1053
<b>Provider Services:</b>	1-877-DCH-DOCS, option #1	<b>24 Hr Behavioral Health Hotline:</b>	1-877-330-3312
<b>Vision Member Services:</b>	1-888-268-2334	<b>Vision Provider Services:</b>	1-866-838-7616
<b>Case Management:</b>	1-877-222-2759	<b>Waste Abuse Fraud Hotline:</b>	1-877-324-7543

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**Important Information**

1. Always confirm eligibility of each CHIP member **PRIOR** to providing treatment or making a referral. (**See Section 3 of the Provider Manual.**) This includes checking membership information on the CHIP ID Card and CHIP effective dates. Call Member Services to verify:

**1-877-451-5598** or go on line at [www.dchpkids.com](http://www.dchpkids.com)

2. For claims, send a completed claim form (CMS 1500 or UB04) to:

**DCHP CHIP, P.O. Box 3668, Corpus Christi, Texas 78463-3668** Claims must be submitted within 95 days of the date of service. Electronic claims are also accepted through Emdeon Payer ID #74284. For questions regarding claims, call.....**1-877-DCH-DOCS [324-3627] – OPTION #1.**

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**Referrals to all Specialists are required and must be Prior Authorized.\*\***

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**The Following Services Require Prior Authorization**

- All inpatient admissions, including skilled nursing, rehab, mental health and chemical dependency\*\*
- 48 Hour Observations\*\*
- Non-ER Outpatient Ambulatory Surgical Procedures
- Outpatient Rehabilitation (physical, speech and occupational visits, including initial evaluation and re-evaluation)
- DME >\$300, and all DME rentals
- Incontinence supplies
- Pain Management Referral
- TMJ Treatments
- Radiological procedures which require admissions for observation
- Sleep Studies / Sleep labs / Pneumograms
- Chiropractic Services
- Tobacco Cessation Program
- Request for services for non-contracted providers
- Prosthetics
- Specialist to Specialist referral requires prior auth or must be referred back to PCP
- Referral to a Specialist for the following will require Medical Director review: Dermatology Procedure Codes, and Plastic Surgery Procedure Codes.
- Mental Health psychological testing
- Podiatry Care
- Assistant Surgeons for outpatient/ambulatory surgery
- Orthotics
- Home health services (including home IV therapy, home PT, speech, OT, or SNV)
- Transplants
- Injectable drugs over \$300
- Alternative medicine forms of treatment
- Hospice Care
- PET Scans and Non-ER MRIs & CT Scans
- Use of an ambulance for medical transportation (not emergency)
- Allergy testing for children <2 years of age
- Immunotherapy for children <5 years of age
- NICU transfers from hospital to hospital
- Ultrasounds
- Nuclear Cardiac Studies, and Echocardiography

\*\* Services which do not require prior authorization: Referral to DCH Pediatric Specialty Care Physician; All OB In-Network for – D&C for missed or incomplete abortion, OB care, admissions for routine OB deliveries, observations related to OB care; Ophthalmology visits; dietary consults/nutritional counseling; ECI services.

**For Prior Auth or Referral requests, call 1-877-455-1053 or fax request to 1-866-741-5650**  
**Eff 5/1/12: For Radiology Prior Auth requests, call 1-888-693-3211 or fax request to 1-888-693-3210**

**Driscoll Children's Health Plan**  
**Quick Reference Tool**  
**STAR / Medicaid – Nueces SDA**

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**Important Phone Numbers:**

<b>Member Services:</b>	1-877-220-6376	<b>UM Questions:</b>	1-877-455-1053
<b>Provider Services:</b>	1-877-DCH-DOCS, option #1	<b>24 Hr Behavioral Health Hotline:</b>	1-888-244-4142
<b>Vision Member Services:</b>	1-866-838-7614	<b>Vision Provider Services:</b>	1-866-838-7616
<b>Case Management:</b>	1-877-222-2759	<b>Waste Abuse Fraud Hotline:</b>	1-877-324-7543

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**Important Information**

1. Always confirm eligibility of each STAR/Medicaid member **PRIOR** to providing treatment or making a referral. **(See Section 3 of the Provider Manual.)** This includes checking membership information on the STAR ID Card and STAR effective dates. Call Member Services to verify.

**1-877-220-6376** or go on line at [www.dchpkids.com](http://www.dchpkids.com)

2. For claims, send a completed claim form (CMS 1500 or UB04) to:

**DCHP STAR, P.O. Box 3668, Corpus Christi, Texas 78463-3668** Claims must be submitted within 95 days of the date of service. Electronic claims are also accepted through Emdeon Payer ID #74284. For questions regarding claims, call.....**1-877-DCH-DOCS [324-3627] – OPTION #1.**

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**For Prior Auth or Referral requests, call 1-877-455-1053 or fax request to 1-866-741-5650**  
**Eff 5/1/12: For Radiology Prior Auth requests, call 1-888-693-3211 or fax request to 1-888-693-3210**