Claims Status Process

MVP Health Care® (MVP) is dedicated to supporting our providers during the COVID-19 pandemic. The following information details how to determine the status of a claim.

The fastest way to obtain information about a submitted claim is through MVP's website. Any claim-related information can be obtained by logging in to your online provider account at **mvphealthcare.com/providers**, including:

- Status of a claim
- Amount paid
- Claim denial reasons
- Any additional related claim information

Should you believe the claim needs to be adjusted, providers also have the ability to submit a claim adjustment request form while logged into their account. If you have additional questions about a claim that cannot be answered on the website, call the MVP Customer Care Center for Provider Services at **1-800-684-9286**.

To request access to your online provider account, visit **mvphealthcare.com/ProviderRegister**. To view a tutorial for how to use your online provider account, visit **mpvhealthcare.com/providers/education**.

Additional ways to determine the status of a claim include:

1) Email claim status requests to **Providerclaimstatus@mvphealthcare.com**. Claims status will be completed and returned within two weeks.

2) Fax claim status requests to **585-327-5759**. Claims status will be completed and returned within two weeks.

All Faxed and emailed claim status requests must include the following:

- Provider or Facility Name
- Provider or Facility NPI
- Provider or Facility Tax ID
- Provider Email Address or Fax Number (where responses should be sent)
- Member Name
- Member ID
- Date of Service
- Billed Amount
- Indicate if it is a Behavioral Health Claim

To view a summary of all updates, visit **mvphealthcare.com/Providers/COVID19.**

To receive future FastFax messages by email, send a request to **MVPFastFax@mvphealthcare.com**.

Questions? Contact your MVP Professional Relations Representative or call the MVP Customer Care Center for Provider Services at **1-800-684-9286**.