



## Fax Cover Sheet

### Superior HealthPlan Provider Services

Fax number: 1-866-461-9462

Phone number: 1-877-391-5921

<b>Provider Name:</b>	<b>Contact at Provider's Office:</b>
<b>Provider Phone Number:</b>	<b>Contact at SHP:</b>
<b>Provider Tax ID Number and NPI:</b>	<b>Reference Case #:</b>

Reason for Fax:

- Claim status (Please list number of claims in the comments section and attach claim status form.)
- Request to update financial address (W9 must be attached and have recent signature)
- Request to update Provider set up (demographic form and/ supporting documentation must be attached. (For example TPI letters, contract letters from DADS)
- Authorization Issue (Please attach Confirmation letter from Medical Management or list authorization number and member information, date of service and units under the comments section.
- Other: (Please enter information in the comments section).

Comments:
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Do not complete the shaded areas:

<b>Date Received</b>	<b>Date Due</b>	<b>Reviewed By</b>
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