

New address and fax number for clinical appeal requests

Going forward, the new address and fax number to utilize when submitting a written **clinical** appeal request/request form is:

Healthy Blue, BlueChoice HealthPlan of SC
Grievance and Appeals Department
P.O. Box 62429
Virginia Beach, VA, 23466-2429
Fax number: 1-866-216-3482

For claims issues, the Healthy Blue provider reconsideration process/form, also known as the claim payment reconsideration or claim payment appeals process, is the same.

Providers are encouraged to submit their claim disputes using one of these methods:

- **Call** the Customer Care Center at **866-757-8286**
- **Login online** through Availity at <https://www.availity.com> or
- **Write** to us at the following address:

Healthy Blue
ATTN: Medicaid Claims Payment Dispute Unit
P.O. Box 100124
Columbia, SC 29202-3124

For more details, visit <https://provider.healthybluesc.com/south-carolina-provider/manuals-and-guides> and review the provider manual.

Thank you for your continued partnership and efforts in providing the highest quality care to our members – your patients.

www.HealthyBlueSC.com