Online Resources

Provider-Specific Information
http://swhp.org/en-us/prov

Provider Manual

Find a Provider
https://portal.swhp.org/#/search

Medical Authorizations

Medication Authorization Forms
http://swhp.org/en-us/prov/auth-referral/medications

Prescription Drug Lists
http://swhp.org/en-us/prov/resources/pharmacy-services/drug-list

Other Forms and Guides
The most commonly used provider forms can be found at:
http://swhp.org/en-us/prov/forms-guides

Contact Information

Provider Relations
Phone: (800) 321-7947, ext. 203064 or (254) 298-3064
Fax: (254) 298-3044
Email: swhpproviderrelationsdepartment@sw.org

Customer Advocacy
Phone: (800) 321-7947 or (254) 298-3000
Provider Portal

Login & Registration:
Verify member eligibility and check claims status.
Access the portal at: https://portal.swhp.org/ProviderPortal/#/login
First-time users must register by clicking, “To Register as a Provider click here.”

Verify Member Eligibility/Benefits:
1. Click the Member Search link at top of page.
2. Complete at least two of the required fields.
3. Click the Search button for results.

Check Claims Status:
1. Click the Provider Claims link at top of page.
2. Click the Claim Search link from drop-down.
3. Complete the required fields.
4. Click the Search button for results.

Enter more information to narrow your search results.

Prior Authorization (PA)

PA is required for any services provided by out-of-network providers, high-cost services, inpatient stays, and other medical services to ensure they are medically necessary and meet coverage criteria.

The PA lists and request forms are located online at: http://swhp.org/en-us/prov/auth-referral/medical.
The PA lists are also available in the Provider Portal.

Providers will need to contact the Health Services Division (HSD) with specific questions regarding PA requests that have been submitted. HSD can be contacted at (888) 316-7947 or (254) 298-3088.

Electronic Claims

To bill us electronically, AVAILITY must be used for both professional and institutional claims.

Payor ID: 88030

Filing Deadline: 365 days from date of service

Redeterminations Deadline: 90 days from date of final determination

More information about claims is available at: http://swhp.org/en-us/prov
Click on “Submit a Claim” from the drop-down menu.

Payments (Emdeon)

We offer the following methods of payment through Emdeon (vendor partner): Virtual Credit Card (VCC), Electronic Funds Transfer (EFT), Automatic Clearinghouse (ACH), and paper check. Providers are strongly encouraged to select VCC, EFT, or ACH method of payment.

Providers enrolling in ACH or EFT should contact Emdeon at (866) 506-2830 — select option 1. Providers opting out of the VCC method of payment should contact Emdeon at (855) 886-3863 — select option 1.