

## **Check Reissue Request**

## Provider Guide

The purpose of this job aid is to provide guidance on submitting Check Reissue requests via Meridian Health's new 2025 Provider Concierge Inquiry Form.

1. Go to your web browser and type in the following link:

https://www.mimeridian.com/providers/provider-relations-intake-form.html

2. Left click on "Submit Provider Relations Inquiry Form (via Smartsheet).

Enrollment and Updates	~	Why This Process Matters
Provider Relations Intake Form		This updated workflow enhances coordination between Provider Relations and Data Management, focusing on:
Pre-Auth Check	~	Timely Issue Resolution: Ensuring concerns are addressed more efficiently.     Improved Inventory Management: Allowing for more accurate tracking and resolution of disputes.
Health Library		Our Commitment to You
Pharmacy		We aim to provide prompt and effective support. When you submit a request:
Provider Resources	~	You'll receive a response within 10 business days for MMP/Medicaid Items and 30 business days for Wellcare/Ambetter     Our response will include a detailed tracking ticket, clear next steps, and an expected timeline for resolution.
Provider Training	~	<ul> <li>Once the issue is resolved, we'll provide a root cause analysis to ensure transparency. If you have further concerns, you can request a virtual meeting with our team to discuss the resolution.</li> </ul>
Bulletins	~	Partnering Together
QI Program	~	To make the process seamless:
Coronavirus Information		Submit one issue per intake form.
Claims Project Status	~	2 Select the appropriate line of business (Medicaid, Meridian Complete[duals], Ambetter, or WellCare).
Vaccines for Children Program in Michigan		Include all requested details and relevant information in your submission to avoid delays or having to resubmit. This process is designed to strengthen our partnership and ensure your needs are met with efficiency and care. We appreciate your cooperation and look forward to continuing to support your work.
		Submit Provider Relations Inquiry Fordu(via Smartsheet) 🗗

3. Complete the inquiry form. Please ensure that the information provided is valid to avoid delays in processing.

	Provider Name *
	John Doe
	Date *
	02/19/2025
CENTENE	Contact Name *
Corporation	John Doe
2025 Provider Concierge	Email Address *
	john.doe@email.com
Meridian Provider Relations has introduced an enhanced intake form to better service all providers, including systems and PHOs. This streamlined process is	Phone Number *
designed to improve collaboration, ensure faster resolution times, and provide greater transparency.	888-888-8888
To make the process seamless, please ensure you are submitting 1 issue per	TAX ID *
intake form, select the appropriate line of business, and include all requested details to avoid delays or having to resubmit.	12:3456789
	Line of Business *
Please call our customer service team for any Medicaid effective date inquiries: 888-773-2647 (TTY711)	Medicaid •
Wellcare Medicare effective date inquiry: 1-855-538-0454 (TTY: 711)	Issue Category *
Meridian Complete effective date inquiry: 1-855-323-4578 (TTY 711)	Check Issue •
Ambetter effective date inquiry: 1-833-993-2426 (TTY Relay 711)	Check Concern Template
	https://www.mimeridian.com/content/dam/centene/meridian/mi/Centene-Check-Reissue- Template-2025 xlsx
We will respond to all inquiries in 5 business days.	





4. Once the form has been completed, a hyperlink for the Check Issue template will populate. Left click on the link and double click the downloaded file in the corner of your browser to open the spreadsheet.

	Provider Name * John Doe	Centene-Check-Reissue-Template-2025 (2).xdsx 44.4 K3 - Done
	Date *	
	02/19/2025	
	Contact Name *	
CENTENE	John Doe	
2025 Provider Concierge	iohn doe@email.com	
Maridian Dravidar Dalations has introduced an anhanced intake form to better	,	
service all providers, including systems and PHOs. This streamlined process is	Phone Number *	
designed to improve collaboration, ensure faster resolution times, and provide greater transparency.	000-000-0000	
To make the process seamless, please ensure you are submitting 1 issue per	TAX ID *	
intake form, select the appropriate line of business, and include all requested	12-3456789	
	Line of Business *	
Please call our customer service team for any Medicaid effective date inquiries:	Medicaid	•
888-773-2647 (TTY711)	Issue Category *	
Wellcare Medicare effective date inquiry: 1-855-538-0454 (TTY: 711)	Check Issue	•
Meridian Complete effective date inquiry: 1-855-323-4578 (TTY 711)		
Ambetter effective date inquiry: 1-833-993-2426 (TTY Relay 711)	Check Concern Template	(anter a dilation (ad (Contrast Charle Delation
	nups://www.mimendian.com/content/dam Template-2025.xlsx	vcentene/menutan/mi/Centene-Cneck-Reissue-
We will respond to all inquiries in 5 business days.	File United to	
	File Upid80 *	

5. Complete columns B-M, if necessary, you may add a note in column N.

B	с	D	E	F	G	н	1	J	к	L	м
meridia	n c	heck Reissue Ten	nplate								
TIN	PROVIDER NPI ON CLAIM	CLAIM NUMBER (Only one claim number from applicable check needed)	CHECK NUMBER	AMOUNT	DATE ISSUED	BILLING NAME	BILLING ADDRESS 1	BILLING ADDRESS 2	BILLING CITY	BILLING STATE	BILLING ZIP
5											
7											
8											
9											
0											
1											
2											
3											
4											
5											
6											
7											
8											
9											
0											
1											
2											



6. After completing and saving the template, upload the document to the inquiry form by either dragging and dropping or using the browse files feature.

	Provider Name *				
	John Doe				
	Date *				
	02/19/2025 🛅				
	Contact Name *				
CENTENE	John Doe				
	Email Address *				
2025 Provider Concierge	John.doe@email.com				
Meridian Provider Relations has introduced an enhanced intake form to better	Phone Number *				
designed to improve collaboration, ensure faster resolution times, and provide	888-888-8888				
greater transparency.	TAX ID *				
To make the process seamless, please ensure you are submitting 1 issue per intake form, select the appropriate line of business, and include all requested	12-3456789				
details to avoid delays or having to resubmit.	Line of Business *				
Please call our customer service team for any Medicaid effective date inquiries:	Medicaid •				
888-773-2647 (TTY711)	Issue Category *				
Wellcare Medicare effective date inquiry: 1-855-538-0454 (TTY: 711)	Check Issue				
Meridian Complete effective date inquiry: 1-855-323-4578 (TTY 711)					
Ambetter effective date inquiry: 1-833-993-2426 (TTY Relay 711)	Check Concern Template https://www.mimeridian.com/content/dam/centene/meridian/mi/Centene-Check-Reissue-				
	Template-2025.xlsx				
We will respond to all inquiries in 5 business days.					
	File Upload *				
	Drag and drap files have as browse files				
	Drag and drop files here or browse files				

7. After the file has been uploaded, you may now submit the inquiry form. Please allow 5 business days for followup from our Issue Management team.