

CLAIMS & ELIGIBILITY QUICK REFERENCE GUIDE						
Paper Submissions	Individual, small, group, and large group claims	True Health New Mexico P.O. Box 211468 Eagan, MN 55121		 Filing deadline is 90 days from the date of service. Professional services (CPT) must be submitted on a CMS-1500 claim form. Inpatient services must be submitted on a UB-04 claim form. Handwritten submissions will be rejected. Do not use labels, stickers, or stamps on the claim form. Do not send duplicate copies of any forms or supporting information. 		
	Federal employee claims	UPDATED NOVEMBER 2022! True Health New Mexico P.O. Box 37200 Albuquerque, NM 87176				
Electronic Submissions	Individual, small, group, and large pr		N 2022! er ID Prefixes: 700, 00, GS8 IDs: THNMHIX, OFF01, 500 (SHOP , GT0 (small group & roup prefix)	Payer ID for individual, small, and large groups: 82288		
		NEW IN 2022! Member ID Prefix: GS8 Group ID: GTAPS01		Payer ID for Albuquerque Public Schools: 85600		
	All claim types			X12 837 format is accepted.Version 5010 compliance required.		
				we are no longer accepting electronic claims see Paper Submissions section above.		
Claim Status Inquiries	True Health New Mexico Customer Service: 1-844-508-4677			Limited to five claim inquiries per call.		
Claim Re- Assessment/ Adjustment Form	Submit re-assessment and adjustment requests using the form located at truehealthnewmexico.com/provider-forms-and-other-resources.		True Health New Mexico P.O. Box 211468 Eagan, MN 55121	Access forms via the Provider Portal or at truehealthnewmexico.com/provider-forms-and-other-resources.		
Appeal and Grievance Submissions	Submit appeals and grievances using the form located at truehealthnewmexico.com/member-forms.		True Health New Mexico P.O. Box 37200 Albuquerque, NM 87176	Access forms via the Provider Portal or at truehealthnewmexico.com/member-forms.		

THNM-ID0157-1222 Page 1 of 2

MEMBER ELIGIBILITY & PRIOR AUTHORIZATIONS						
Member Eligibility Verification	 Online: truehealthnewmexico.com/providers Telephonically: Eligibility Verification Line (IVR) or Customer Service: 1-844-508-4677 Paper identification forms Member ID card 					
Prior Authorization	Contact True Health New Mexico Medical Management: Phone: 1-844-508-4677 Fax: 1-866-446-3774	 Members are required to have in-network primary care providers. Referrals to in-network specialists DO NOT require prior authorization. Prior Authorization request form and information is available at truehealthnewmexico.com/prior-authorization-requests. 				

PHARMACY SERVICES

Contact True Health New Mexico Pharmacy Services by phone at 1-866-823-1606 or by fax at 1-866-718-7938.

VISION CLAIMS

Contact VSP at 1-800-877-7195.

OTHER RESOURCES

Provider Services	1-844-508-4677	Provider Services is available Monday-Friday, 8:00 a.m5:00 p.m.
-------------------	----------------	---