

**QUICK REFERENCE GUIDE  
HMC HEALTHWORKS**

<b>Important Information on Departments</b>	
<p><b>Provider Relations</b> Provider complaints, information on provider application, fee schedules, credentialing status, etc.</p>	<p>HMC HealthWorks Attn: Provider Relations 5840 Banneker Rd, Ste. 110 Columbia, MD 21044 Phone: 855.487.8914 Fax: 860.785.4860 Email: <a href="mailto:providerrelations@hmcebs.com">providerrelations@hmcebs.com</a></p>
<p><b>Appeals</b> For appeals, providers may file an appeal in writing via email or fax within 180 days for initial denial (level 1).</p>	<p>HMC HealthWorks Attn: Appeals 5840 Banneker Rd, Ste. 110 Columbia, MD 21044 Fax: 443-583-4830</p>
<p><b>Claims</b></p> <p><b>Submissions - Paper</b> Submit original “red claim” form for claim and encounter submissions. No handwritten claims will be accepted.</p>	<p>Phone: 877-746-7471</p> <p>HMC HealthWorks P.O. Box 981605 El Paso, Texas 79998-1605</p>
<p><b>Claims Submissions - Electronic</b></p>	<p>Preferred EDI Partner: Change Healthcare Payer ID: 75318</p>