

## Insurance Contacts for Alaska (04/01/2023)

Lori Wing-Heier - Insurance Department on Director lori.wing-heier@alaska.gov

Chief Health Administrator - Emily Ricci emily.ricci@alaska.gov

Aetna	
CONTACT NAME	Lori O'Banion
Title	Aetna Sr. Network Manager-AK
PHONE	907-677-7690
FAX	860-754-2116
EMAIL	obanionl@aetna.com
MAILING ADDRESS LINE 1	600 University Street One Union Square
MAILING ADDRESS LINE 2	Suite 920
CITY, STATE, & ZIP	Seattle, WA 98101

Aetna	
CONTACT NAME	Christy Klein
Title	Network Account Manager - Alaska
PHONE	701-221-7490
FAX	860-262-9619
EMAIL	Christy.klein@aetna.com
MAILING ADDRESS LINE 1	600 University Street One Union Square
MAILING ADDRESS LINE 2	Suite 920
CITY, STATE, & ZIP	Seattle, WA 98101

Aetna	
CONTACT NAME	Heather Malsed
Title	Network Manager
PHONE	503-937-0646
FAX	860-262-9619
EMAIL	<a href="mailto:malsedh@aetna.com">malsedh@aetna.com</a>
MAILING ADDRESS LINE 1	600 University Street One Union Square
MAILING ADDRESS LINE 2	Suite 920
CITY, STATE, & ZIP	Seattle, WA 98101

AK Pipe Trade	
CONTACT NAME	
PHONE	800-716-0300
FAX	855-229-0720
EMAIL	
MAILING ADDRESS LINE 1	PO Box 5434
CITY, STATE, & ZIP	Spokane, WA 99205

ASD Risk Management	
CONTACT NAME	Paula- AKA ASD Work Comp
PHONE	
FAX	907-742-4373
EMAIL	
MAILING ADDRESS LINE 1	
CITY, STATE, & ZIP	

## Insurance Contacts for Alaska (04/01/2023)

Amerisafe	
CONTACT NAME	
PHONE	800-256-9052
FAX	337-460-3319 or 337-460-3343
EMAIL	
MAILING ADDRESS LINE 1	2301 Highway 190 West
CITY, STATE, & ZIP	Deridder, LA 70634

CIGNA	
CONTACT NAME	Rick Nakayama
Title	Director, Provider Contracting
PHONE	206-6548900
FAX	877-806-1566
EMAIL	rick.nakayama@cigna.com
MAILING ADDRESS LINE 1	920 Fifth Avenue
MAILING ADDRESS LINE 2	Suite 1350
CITY, STATE, & ZIP	Seattle, WA, 98104

CIGNA	
CONTACT NAME	Jim Fitzpatrick
Title	Vice President - Pacific Northwest
PHONE	206-625-8859
FAX	
EMAIL	<a href="mailto:james.fitzpatrick@cigna.com">james.fitzpatrick@cigna.com</a>
MAILING ADDRESS LINE 1	920 Fifth Avenue
MAILING ADDRESS LINE 2	Suite 1350
CITY, STATE, & ZIP	Seattle, WA, 98104

CIGNA	
New Credentialing	<a href="mailto:MedicalOnBoarding@CIGNA.com">MedicalOnBoarding@CIGNA.com</a>
New Credentialing	800-882-4462 option "Medical" then "Credentialing"
Status Requests	<a href="mailto:PSSCentral@CIGNA.com">PSSCentral@CIGNA.com</a>
Status Requests	800-882-4462 option "Network Participation"
Demographic Updates	<a href="mailto:Intake_PDM@CIGNA.com">Intake_PDM@CIGNA.com</a>
Provider Support	800-882-4462
Website	<a href="http://www.CignaForHCP.com">www.CignaForHCP.com</a>

Federal BCBS	
CONTACT NAME	
PHONE	
FAX	877-239-3390
EMAIL	
MAILING ADDRESS LINE 1	
CITY, STATE, & ZIP	

Federal BCBS		Care Management (Pre-Auth)
CONTACT NAME		
PHONE	877-342-5258	
FAX	800-843-1114	
EMAIL		
MAILING ADDRESS LINE 1	PO Box 327	
CITY, STATE, & ZIP	Seattle, WA 98777-0327	

## Insurance Contacts for Alaska (04/01/2023)

MEDICAID	
CONTACT NAME	Sherri LaRue, CPC, CHC-S, CMRS
Title	Medicaid Program Specialist 4
PHONE	907-334-2656
Cell	907-310-2773
EMAIL	<a href="mailto:sherri.larue@alaska.gov">sherri.larue@alaska.gov</a>
MAILING ADDRESS LINE 1	4601 Business Park Blvd, Bldg K
CITY, STATE, & ZIP	Anchorage, AK 99503

MEDICAID/Conduent	
CONTACT NAME	Marilee Reinhart-Davieau
Title	Publications @ Traing Manager
PHONE	907-644-6844
Cell	
EMAIL	<a href="mailto:marilee.reinhart-davieau@conduent.com">marilee.reinhart-davieau@conduent.com</a>
MAILING ADDRESS LINE 1	1835 S Bragaw Street, Ste 200
CITY, STATE, & ZIP	Anchorage, AK 99508

Meritain	
CONTACT NAME	
PHONE	866-808-2609
FAX	763-582-5057
EMAIL	
MAILING ADDRESS LINE 1	PO Box 853921
CITY, STATE, & ZIP	Richardson, TX 75085

MODA	
CONTACT NAME	Rick Sanders, CHFP
Title	Regional Network Development Executive, Medical Professional Relations
PHONE	503-412-4203
FAX	503-243-3964
EMAIL	<a href="mailto:rick.sanders@modahealth.com">rick.sanders@modahealth.com</a>
MAILING ADDRESS LINE 1	PO Box 40384
CITY, STATE, & ZIP	Portland, OR 97240

MODA	
CONTACT NAME	Julie NicholSEN
Title	Providers Rep II, Medical Provider Relations
PHONE	541-716-8868
FAX	503-243-3964
EMAIL	<a href="mailto:julie.nicholsen@modahealth.com">julie.nicholsen@modahealth.com</a>
MAILING ADDRESS LINE 1	PO Box 40384
CITY, STATE, & ZIP	Portland, OR 97240

National General	
CONTACT NAME	Work Comp
PHONE	
FAX	336-759-3141
EMAIL	
MAILING ADDRESS LINE 1	
CITY, STATE, & ZIP	

## Insurance Contacts for Alaska (04/01/2023)

Polaris	
CONTACT NAME	
PHONE	
FAX	907-297-7379
EMAIL	
MAILING ADDRESS LINE 1	
MAILING ADDRESS LINE 2	
CITY, STATE, & ZIP	

Premera	
CONTACT NAME	Katherine Beard
Title	Provider Network Executive- Alaska Market
PHONE	425-918-814
FAX	
EMAIL	Katherine.Bead@Premera.com
MAILING ADDRESS LINE 1	7001 220th Street SW
MAILING ADDRESS LINE 2	MS 453
CITY, STATE, & ZIP	Mountlake Terrace, WA 98043

Premera	
CONTACT NAME	Kim Wolfe
Title	Senior Network Executive, Alaska Provider Network Management
PHONE	425-918-3264
FAX	
EMAIL	kim.wolfe@premera.com
MAILING ADDRESS LINE 1	7001 220th Street SW
MAILING ADDRESS LINE 2	MS 453
CITY, STATE, & ZIP	Mountlake Terrace, WA 98043

Premera	
CONTACT NAME	Lindsay Bland
Title	Provider Network Associate – Alaska Market
PHONE	425-918-6151
FAX	425-918-4332
EMAIL	lindsay.bland@premera.com
MAILING ADDRESS LINE 1	7001 220th Street SW
MAILING ADDRESS LINE 2	MS 453
CITY, STATE, & ZIP	Mountlake Terrace, WA 98043

PRE-AUTH	
CONTACT NAME	AK INDIVIDUAL PLANS
Title	Utilization Management
PHONE	844-996-0332
FAX	888-5848081
EMAIL	
MAILING ADDRESS LINE 1	
MAILING ADDRESS LINE 2	
CITY, STATE, & ZIP	

## Insurance Contacts for Alaska (04/01/2023)

Premera		Provider Relations
CONTACT NAME		
PHONE	877-342-5258 opt. 4	
FAX	425-918-4937	
EMAIL	provider.relationswest@premera.com	
MAILING ADDRESS LINE 1		
CITY, STATE, & ZIP		
Notes	Provide NPI #, Hours from 5am- 8pm better hold times in the AM or late afternoon	

TriCare		
CONTACT NAME		
PHONE	844-866-9378	
FAX	844-869-2812	
EMAIL		
MAILING ADDRESS LINE 1	PO Box 202112	
CITY, STATE, & ZIP	Florence, SC 29502-2113	

TriCare		Appeals
CONTACT NAME		
PHONE		
FAX	844-802-2527	
EMAIL		
MAILING ADDRESS LINE 1		
CITY, STATE, & ZIP		

TriWest (VA)		
CONTACT NAME	April Sinclair	
Title	Direct Contracting Manager - Alaska	
PHONE	907-531-8365	
Cell Phone	907-378-4383	
FAX	866-434-8162	
EMAIL	<a href="mailto:asinclair@triwest.com">asinclair@triwest.com</a>	
MAILING ADDRESS LINE 1		
MAILING ADDRESS LINE 2		
CITY, STATE, & ZIP		

TriWest (VA)		
CONTACT NAME	Josie Exendine	
Title	Direct Contracting Manager - Alaska	
PHONE	907-531-8352	
Cell Phone	907-671-7368	
FAX	866-434-8162	
EMAIL	<a href="mailto:jexendine@triwest.com">jexendine@triwest.com</a>	
MAILING ADDRESS LINE 1		
MAILING ADDRESS LINE 2		
CITY, STATE, & ZIP		

TriWest (VA)		
CONTACT NAME	Kristine Krenz	
Title	Recoupment & Collections Analyst	
PHONE	602-564-2577	
Cell Phone		
FAX		
EMAIL	<a href="mailto:kkrenz@triwest.com">kkrenz@triwest.com</a>	
MAILING ADDRESS LINE 1		
MAILING ADDRESS LINE 2		
CITY, STATE, & ZIP		

TriWest (VA)		
CONTACT NAME	Pamela Coyle	
Title	Claims Resolution Specialist, Region 5 Alaska Operations	
PHONE	877-226-8479, opt 9	
Cell Phone		
FAX		
EMAIL	<a href="mailto:pcoye@triwest.com">pcoye@triwest.com</a>	
MAILING ADDRESS LINE 1		
MAILING ADDRESS LINE 2		
CITY, STATE, & ZIP		

## Insurance Contacts for Alaska (04/01/2023)

TriWest (VA)	Contracting
CONTACT NAME	
PHONE	866-286-4174
Cell Phone	
email	<a href="mailto:ccnprovider@triwest.com">ccnprovider@triwest.com</a>
EMAIL	<a href="mailto:providercontracting@triwest.com">providercontracting@triwest.com</a>
MAILING ADDRESS LINE 1	
MAILING ADDRESS LINE 2	
CITY, STATE, & ZIP	

Veterans Affairs	Alaska VA Healthcare System
NAME	
PHONE	877-881-7618
FAX	
EMAIL	
MAILING ADDRESS LINE 1	1201 N Mouldoon Road
MAILING ADDRESS LINE 2	
CITY, STATE, & ZIP	Anchorage, AK 99504

Veterans Affairs	VA Community Care (Referral Management)
Contact Name	Karen
PHONE	907-257-4828
FAX	907-375-2146
EMAIL	
MAILING ADDRESS LINE 1	1201 N Mouldoon Road
MAILING ADDRESS LINE 2	
CITY, STATE, & ZIP	Anchorage, AK 99504

Sedgwick	Work Comp
CONTACT NAME	
PHONE	
FAX	503-412-3990
EMAIL	
MAILING ADDRESS LINE 1	
MAILING ADDRESS LINE 2	
CITY, STATE, & ZIP	

United Healthcare	
CONTACT NAME	Nicole Carroll
Title	Provider Advocate - Alaska
PHONE	714-601-4205
FAX	
EMAIL	<a href="mailto:nicole.carroll@uhc.com">nicole.carroll@uhc.com</a>
MAILING ADDRESS LINE 1	
MAILING ADDRESS LINE 2	
CITY, STATE, & ZIP	

United Healthcare	
CONTACT NAME	
Title	Network Contract Support
PHONE	(866) 574-6088
FAX	
Website	<a href="http://www.UHCprovider.com">www.UHCprovider.com</a>
MAILING ADDRESS LINE 1	780 Shiloh Road, MS-1.700
MAILING ADDRESS LINE 2	
CITY, STATE, & ZIP	Plano, TX 75074

## Insurance Contacts for Alaska (04/01/2023)

United Healthcare	
CONTACT NAME	Markayla Corbin
Title	Network Contract Manager - Alaska
PHONE	714-601-4204
FAX	
EMAIL	<a href="mailto:markayla.corbin@uhc.com">markayla.corbin@uhc.com</a>
MAILING ADDRESS LINE 1	
MAILING ADDRESS LINE 2	
CITY, STATE, & ZIP	

United Healthcare	
CONTACT NAME	
Provider Portal	<a href="http://www.uhcprovider.com">www.uhcprovider.com</a>
Network Participation	<a href="mailto:networkhelp@uhc.com">networkhelp@uhc.com</a>
Demographic Changes	877-369-1302
D.C. Email	<a href="mailto:hpdemo@uhc.com">hpdemo@uhc.com</a>
MAILING ADDRESS LINE 1	
MAILING ADDRESS LINE 2	
CITY, STATE, & ZIP	

## BCBS PREFIX PHONE NUMBER LIST

### 2020 Individual Plans

**800-809-9361**

ZKM

ZXJ

ZZV

ZXL

ZXN

ZXV

ZZM

ZNV

PREFIX IF IT'S FOR A STATE OTHER THAN AK/WA IT'LL BE A BLUE CARD WITH LOCAL)

**888-261-9562**

VSA

XVG

WFQ

CXP

TYW

HPI

LAJ

UBR

OTQAN

CHH

U#V

H#B

### Premera

**800-508-4722**

ZKR

ZRK

ZRL

ZKV

ZKZ

ZKA

VMU

UNN

MUQ

UCB

LRR

HLU

ALV

### Shared Admin

**800-713-5373**

EGN

PBQ

HWY

TQA

INB

### PPO

**800-722-1474**

ZKF

SLH

ALK (AK AIRLINES 877-224-3525)



ANTHEM (IF ID HAS LETTERS IN THE MIDDLE)

855-653-4060

DPI-A

UBR-W

QDB-W

KROAN