



IVR and Provider Portals for member information

Providers seeking information that is available through a self-service tool will be directed to those tools when calling the Provider Service center. Provider Service advocates will only address inquiries when self-service is not an option.

Interactive Voice Response System (IVR)*

- ▼ Benefit details except Skilled Nursing Facility (SNF)
- Claims status up to one year from date of service
- Deductible and out-of-pocket maximum
- Claims filing address
- Eligibility

Health Plan	IVR Phone Number		
Scott and White Health Plan	800.655.7947		
RightCare (Medicaid)	877.639.2447		
FirstCare Health Plans (including STAR and CHIP)	877.639.2447		

Provider Portal

- Benefit details
- Claims status
- Deductible and out-of-pocket maximum
- Eligibility
- Authorization request forms

- Provider registrations (add contracted providers)
- Claim denial reason codes
- Member network benefit information
- Reimbursement rates by code
- Authorization requirements by code

Depending on your patient, the Provider Portal will vary. The correct portal is shown on the back of the patient (member) ID card.

No ID card available?

The number of characters in the member's ID number will indicate which portal to use.

Member	Number of Digits in Member ID	Letters in Member ID	Portal	Claims Address	
Scott and White Health Plan					
RIGHTCARE MEDICAID	9		https:// rightcare.firstcare. com/Web/	RightCare from Scott and White Health Plan Attn: Claims P.O. Box 981727 El Paso, TX 79998-1727	
BAYLOR SCOTT & WHITE HEALTH EMPLOYEE PLAN	11		https:// portal.swhp.org/ ProviderPortal/#/ login	Scott and White Health Plan Attn: Claims P.O. Box 21800 Eagan, MN 55121-0800	
MARKETPLACE	12 including BSW	BSW	https:// swhpprovider. firstcare.com/ Web/	Scott and White Health Plan Attn: Claims P.O. Box 211342 Eagan, MN 55121	
RECENTLY TRANSITIONED (Includes TRS and members of commercial groups that have transitioned to new claims system)	11 or 12 digits		https:// swhpprovider. firstcare.com/ Web/	Scott and White Health Plan Attn: Claims P.O. Box 211342 Eagan, MN 55121	
ALL OTHERS (Includes members who have not transitioned to new claims system, such as Medicare and certain Group or Off-Exchange Individual members)	11		https:// portal.swhp.org/ ProviderPortal/#/ login	Scott and White Health Plan Attn: Claims P.O. Box 21800 Eagan, MN 55121-0800	
FirstCare Health Plans					
STAR MEDICAID	9		https:// my.firstcare.com/ Web/	Scott and White Health Plan Attn: Claims P.O. BOX 211342 Eagan, MN 55121	
СНІР	9		https:// my.firstcare.com/ Web/	Scott and White Health Plan Attn: Claims P.O. BOX 211342 Eagan, MN 55121	
MARKETPLACE	12 including HIM	НІМ	https:// my.firstcare.com/ Web/	Scott and White Health Plan Attn: Claims P.O. BOX 211342 Eagan, MN 55121	
ALL OTHERS	11		https:// my.firstcare.com/ Web/	Scott and White Health Plan Attn: Claims P.O. BOX 211342 Eagan, MN 55121	