

New Outpatient Provider Appeals Mailing Address

To assist in expediting the appeals process, AmeriHealth Mercy has established a new Post Office Box for Outpatient Provider Appeals.

- **Effective immediately, please mail all requests for Outpatient First or Second Level Appeal reviews to:**

**Provider Appeals Department
AmeriHealth Mercy Health Plan
P.O. Box 7316
London, KY 40742**

Please clearly indicate “First (or Second) Level Outpatient Formal Appeal” at the top of the request.

- **Inpatient First or Second Level Provider Appeal reviews should continue to be mailed to:**

**Provider Appeals Department
AmeriHealth Mercy Health Plan
P.O. Box 7307
London, KY 40742**

Please clearly indicate “First (or Second) Level Inpatient Formal Appeal” at the top of the request.

**Any questions, please call AmeriHealth Mercy Provider Services at
800-521-6007**