

## MCO Contact Tables

### May 2023

3-HAB	www.3hab.com	10013
To Report an Injury	To Submit Medical	To Send Bills
<p><b>Phone</b> 513-221-3422, or 800-869-1871</p> <p><b>FAX</b> 513-221-2338 800-869-1872</p>	<p><b>Address</b> 3-HAB Attn. Care Coordinator P.O. Box 429540 Cincinnati, Ohio 45242-9540 <a href="mailto:info@3hab.com">info@3hab.com</a></p> <p><b>Medical Documentation Fax:</b> 513-221-2338 800-869-1872</p> <p><b>Case Management Supervisor:</b> Nicole C. 800-869-1871 ext.3207</p> <p><b>Provider Relations Contact:</b> Jennifer R. 800-869-1871 <a href="mailto:Jenniferr@3hab.com">Jenniferr@3hab.com</a></p>	<p><b>Address</b> 3-HAB Attn. Billing Coordinator P.O. Box 429540 Cincinnati, Ohio 45242-9540 <a href="mailto:info@3hab.com">info@3hab.com</a></p> <p><b>Billing Fax:</b> 513-221-2338 800-869-1872</p> <p><b>Billing Supervisor</b> Melony R. <a href="mailto:melonyr@3hab.com">melonyr@3hab.com</a> 800-869-1871 ext 3252</p> <p><b>Electronic Billing Info:</b> Clearinghouse: Alveo Formats accepted: 5010 Contact: Brigott Dawn 800-327-1213 <a href="mailto:bdawn@alveohealth.com">bdawn@alveohealth.com</a></p>
<p><b>General Information: 800-869-1871</b>  <b>Email Address: <a href="mailto:info@3hab.com">info@3hab.com</a></b></p>		

AultComp MCO, Inc.		10016
To Report an Injury	To Submit Medical	To Send Bills
<p><b>Phone:</b> 888-738-5800 or 330-830-4919</p> <p><b>Fax:</b> 330-830-4900 877-738-0058</p>	<p><b>Address:</b> Aultcomp PO Box 36149 Canton, OH 44735-6149</p> <p><b>Medical Documentation Fax:</b> 330-830-4900 877-738-0058</p> <p><b>Case Management Supervisor:</b> Vicki Bouscher 330-830-4919</p> <p><b>Provider Relations Contact:</b> Cindy Moyer 888-738-5800 <a href="mailto:vocrehab@aultcompmco.com">vocrehab@aultcompmco.com</a></p>	<p><b>Address:</b> Aultcomp PO Box 36149 Canton, OH 44735-6149</p> <p><b>General Billing Inquiries:</b> 888-738-5800 330-830-4900</p> <p><b>Billing Contact:</b> Lisa O. <a href="mailto:lisa.o.1@aultcompmco.com">lisa.o.1@aultcompmco.com</a> 330-830-4919 x117</p> <p><b>Billing Fax:</b> 330-830-4902 877-738-0058</p> <p><b>Electronic Billing Info:</b> Clearinghouse used: Alveo Formats accepted: ANSI 837</p> <p><b>Contact:</b> Todd Cropper 888-738-5800 ext. 112 Brigott Dawn 800-327-1213</p>
<p><b>General Information: 330-830-4919</b></p>		

CorVel Ohio MCO, Inc.		www.corvel.com	10008
To Report an Injury		To Submit Medical	To Send Bills
<b>Phone:</b> 800-275-6463  <b>Fax:</b> 877-677-6756	<b>Address:</b> CorVel Ohio MCO, Inc. P.O. Box 3758 Dublin, Ohio 43016-0389  <b>Medical Documentation Fax:</b> 877-677-6756  <b>Utilization Management Phone:</b> 800-275-6463  <b>Case Management Manager:</b> Jane Hook 800-275-6463 ext. 62657 <a href="mailto:Jane.Hook@corvel.com">Jane.Hook@corvel.com</a>  <b>Provider Relations Contact:</b> Candace Davis 800-275-6463 ext. 62688 <a href="mailto:Candace.Davis@corvel.com">Candace.Davis@corvel.com</a>	<b>Address:</b> CorVel Corporation P.O. Box 3758 Dublin, OH 43016  <b>General Phone Number:</b> 800-275-6463  <b>Billing Fax:</b> 877-677-6756  <b>Billing Manager:</b> Carla Geary, CPC, Bill Review Manager T 800-275-6463 F 877-677-6756 <a href="mailto:ohiomcobilling@corvel.com">ohiomcobilling@corvel.com</a>  <b>Electronic Billing Info:</b> Clearinghouse: Insuraware Data Services, Trizetto/Cognizant Formats accepted: NSF 2003; X.12 formats 837, 835, 276, 277, 278, 824; versions 3051, 5010, 6010 Contact: Christine Herrington	
<b>General Information: 800-275-6463</b> <b>Email Address: <a href="mailto:Chris.Herrington@corvel.com">Chris.Herrington@corvel.com</a></b>			

**To Report an Injury**

**Phone:**  
800-447-6250  
ext. 17672

**Fax:**  
610-964-5227  
888-275-9719

**To Submit Medical**

**Address (Utilization/Medical Management):**  
GENEX Care for Ohio  
11590 Century Blvd., Suite 202  
Cincinnati, OH 45246

**Phone:**  
800-447-6250 ext. 17637

**Medical Documentation Fax:**  
Fax: 610-964-5227  
888-275-9719

**Case Management Supervisor:**  
Cheryl Henderson RN, CCM  
[Cheryl.Henderson@genexservices.com](mailto:Cheryl.Henderson@genexservices.com)  
800-447-6250 ext. 17658

**Manager:**  
Angela Houston, RN, CCM  
[Angela.houston@genexservices.com](mailto:Angela.houston@genexservices.com)  
800-447-6250 ext. 17655

**Provider Relations Contact:**  
Don Dudash, CPC  
[Donald.dudash@genexservices.com](mailto:Donald.dudash@genexservices.com)  
800-447-6250 ext. 17638

**To Send Bills**

**Address:**  
GENEX Care for Ohio  
11590 Century Blvd., Suite 202  
Cincinnati, OH 45246

**For Billing Customer Service Phone:**  
800-447-6250 ext. 17638

**Billing Fax:**  
610-964-5227  
888-275-9719

**Billing Contacts:**  
Don Dudash, CPC  
[Donald.dudash@genexservices.com](mailto:Donald.dudash@genexservices.com)  
800-447-6250 ext. 17638

Val Miller  
[Valerie.miller@genexservices.com](mailto:Valerie.miller@genexservices.com)  
800-447-6250 ext. 17672

**Electronic Billing Info:**  
Clearinghouse: Jopari Acct. # J1895  
Formats accepted: EDI ANSI X12 837  
versions 4010 and 5010  
Contact: Colleen Berry, Director,  
Payer Technologies  
925-429-4821

**General Information:** 513-488-1962 ext. 17666 or 800-447-6250 ext. 17666

**Email Address:** [michelle.pate@genexservices.com](mailto:michelle.pate@genexservices.com)

Minute Men OhioComp		10041
To Report an Injury	To Submit Medical	To Send Bills
<p><b>Phone</b> 888-644-6266 216-426-0646</p> <p><b>FAX</b> 216-426-0651 888-644-7339</p>	<p><b>Address</b> Minute Men OhioComp 3740 Carnegie Ave., Suite B200 Cleveland, OH 44115</p> <p><b>Medical Documentation Fax:</b> 216-426-0651 888-644-7339</p> <p><b>Case Management Supervisor:</b> Lynn Popovich, RN, BSN, CCM Phone: 216-426-0646 ext. 1184</p> <p><b>Provider Relations Contact:</b> Joan Kafiti Phone: 1- 888-644-6266 ext. 1333 Email: <a href="mailto:joan.k@minutemenmco.com">joan.k@minutemenmco.com</a> Fax: 1-888-644-7339</p>	<p><b>Address</b> Minute Men OhioComp 3740 Carnegie Ave, Suite B200 Cleveland, OH 44115</p> <p><b>Billing Fax:</b> 216-426-0651 888-644-7339</p> <p><b>Billing Department</b> Megan Washington Phone: 1-888-644-6266 ext. 1376 Email: <a href="mailto:billinginquiries@minutemenmco.com">billinginquiries@minutemenmco.com</a></p> <p><b>Electronic Billing Info:</b> Clearinghouse: Quadax or Relay Health Formats accepted: 837 v5010 Contact: Len Stusek (Quadax) 440-777-6300 800-527-8133 #2 <a href="mailto:DLDBQTSHInsuranceSupportDBQ@changehealthcare.com">DLDBQTSHInsuranceSupportDBQ@changehealthcare.com</a></p>
<p><b>General Information: Phone: 888-644-6266</b> <b>Email Address: <a href="mailto:info@minutemenmco.com">info@minutemenmco.com</a></b></p>		

Occupational Health Link Inc.		www.oehtmco.com	10017
<b>To Report an Injury</b>		<b>To Submit Medical</b>	<b>To Send Bills</b>
<b>Phone:</b> 888-844-0039  <b>Fax:</b> 614-318-1095 888-240-6381	<b>Address:</b> Occupational Health Link 445 Hutchinson Ave., Suite 205 Columbus, OH 43235  <b>Medical Documentation Fax:</b> 614-318-1095 888-240-6381  <b>Case Management Supervisor:</b> Bryony Burton 888-844-0039 ext. 1014 <a href="mailto:bryonyb@oehtmco.com">bryonyb@oehtmco.com</a>  <b>Provider Relations Contact:</b> Crystal Webb, CPC <a href="mailto:providerrelations@oehtmco.com">providerrelations@oehtmco.com</a> 888-844-0039 ext. 1035	<b>Address:</b> Occupational Health Link 445 Hutchinson Ave., Suite 205 Columbus, OH 43235  <b>Phone:</b> 888-844-0039  <b>Billing Fax:</b> 614-318-1095 877-605-8311  <b>Billing Team Email:</b> Crystal Webb, CPC <a href="mailto:crystalw@oehtmco.com">crystalw@oehtmco.com</a> 888-844-0039 ext. 1035	
<b>General Information: 888-844-0039 Email</b> <b>Address: <a href="mailto:karenc@oehtmco.com">karenc@oehtmco.com</a></b>			

ProMedica Medical Management		www.promedicamco.com	10006
To Report an Injury	To Submit Medical	To Send Bills	
<p><b>Phone:</b> 614-799-0898 or 888-202-3515 (8:00 a.m. - 5:00 p.m.) After hours, select option 3</p> <p><b>Address:</b> ProMedica Medical Management 2545 Farmers Drive, Suite 400 Columbus, OH 43235</p> <p><b>Corporate Address:</b> 1901 Indian Wood Circle Maumee, OH 43537</p> <p><b>Fax:</b> 614-889-6246 888-303-6294</p>	<p><b>Address:</b> ProMedica Medical Management 2545 Farmers Drive, Suite 400 Columbus, OH 43235</p> <p><b>Medical Documentation Fax:</b> 614-889-6246 888-303-6294</p> <p><b>Case Management:</b> Anne Cszasz 888-202-3515 ext. 300507 <a href="mailto:annec@promedicamco.com">annec@promedicamco.com</a></p> <p><b>Provider Relations Contact:</b> Gail Nicholas, CPC Phone: 888-202-3515 ext. 330563 Email: <a href="mailto:gailn@promedicamco.com">gailn@promedicamco.com</a></p>	<p><b>Address:</b> ProMedica Medical Management 2545 Farmers Drive, Suite 400 Columbus, OH 43235</p> <p><b>Billing Fax:</b> 614-889-6246 888-303-6294</p> <p><b>Billing Contact:</b> Anne Cszasz 888-202-3515 ext. 300507 <a href="mailto:annec@promedicamco.com">annec@promedicamco.com</a></p> <p><b>Electronic Billing Info:</b> Contact: Michael Pulsfort (614)889-8061</p>	
<p><b>General Information: 888-202-3515</b> <b>Email Address: <a href="mailto:annec@promedicamco.com">annec@promedicamco.com</a></b></p>			

Sedgwick Managed Care Ohio		www.sedgwickmco.com	10005
To Report an Injury	To Submit Medical	To Send Bills	
<p><b>Phone</b> (24 hours) 888-627-7586 Option #2</p> <p><b>Fax:</b> 888-711-9284</p> <p><b>Website:</b> <a href="http://www.sedgwickmco.com/">http://www.sedgwickmco.com/</a></p>	<p><b>Address:</b> Sedgwick MCO P.O. Box 1040 Dublin, OH 43017</p> <p><b>Medical Documentation Fax:</b> 888-627-0074</p> <p><b>Customer Service Phone:</b> 888-627-7586</p> <p><b>Case Management Supervisor:</b> Deb Faulkner <a href="mailto:Debra.faulkner@sedgwickmco.com">Debra.faulkner@sedgwickmco.com</a> 513-774-5892</p> <p><b>Provider Relations Contact:</b> Peggy Morrison <a href="mailto:Peggy.Morrison@sedgwickmco.com">Peggy.Morrison@sedgwickmco.com</a> 614-376-5561</p>	<p><b>Address:</b> Sedgwick MCO P.O. Box 1040 Dublin, OH 43017</p> <p><b>Billing Customer Service Phone:</b> 888-627-7586 Option #3</p> <p><b>Billing Contacts:</b> Jennifer Amann <a href="mailto:Jennifer.Amann@sedgwickmco.com">Jennifer.Amann@sedgwickmco.com</a> 888-627-7586 513-774-5966</p> <p>Shelley Carson <a href="mailto:Shelley.carson@sedgwickmco.com">Shelley.carson@sedgwickmco.com</a> 888-627-7586 614-376-5508</p> <p><b>Billing Fax:</b> 888-627-0074</p> <p><b>Electronic Billing Info:</b> Clearinghouse: Change Healthcare Formats accepted: X12 837v5010 Contact: 615-932-3000 or <a href="http://www.changehealthcare.com">www.changehealthcare.com</a></p>	
<p><b>General Information: 888-627-7586</b> <b>Email Address: <a href="mailto:medical@sedgwickmco.com">medical@sedgwickmco.com</a></b></p>			



## To Report an Injury

## To Submit Medical

## To Send Bills

**Phone:**

888-743-2559 or  
513-618-1249

**Fax:**

513-326-8005  
888-626-2667

**Address:**

Sheakley UniComp One  
Sheakley Way Cincinnati, OH  
45246

**Medical Documentation Fax:**

513-326-8005  
888-626-2667

**Case Manager Team Leader:**

Shonda B.  
[shondab@sheakley.com](mailto:shondab@sheakley.com)  
888-743-2559 ext. 7222

**Provider Relations Contact:**

Debby M.  
[debbym@sheakley.com](mailto:debbym@sheakley.com)  
888-734-2559 ext. 7140

**Address:**

Sheakley UniComp One  
Sheakley Way Cincinnati, OH  
45246

**Billing Contact:**

Pamela Y.  
[pamelay@sheakley.com](mailto:pamelay@sheakley.com)  
888-743-2559 ext. 7208

**Billing Fax:**

513-326-8005  
888-626-2667

**Electronic Billing Info:**

Clearinghouse: Relay Health  
Formats accepted: 837 v5010  
Contact: Ammi K.  
888-743-2559 ext. 7104

**General Information: 888-743-2559**

**Email Address: [mco@sheakley.com](mailto:mco@sheakley.com)**

To Report an Injury	To Submit Medical	To Send Bills
<p><b>Phone:</b> 440-899-2400 800-542-9479</p> <p><b>Fax:</b> 440-899-2411 800-542-9480</p>	<p><b>Address:</b> Spooner Medical Administrators, Inc. 28301 Ranney Parkway Westlake, OH 44145</p> <p><b>Medical Documentation Fax:</b> 440-899-2411 800-542-9480</p> <p><b>Case Management Contact:</b> Ed S, RN, CCM 440-899-2400 ext. 231 <a href="mailto:eds@spoonermai.com">eds@spoonermai.com</a></p> <p><b>Provider Relations Contact:</b> Tonya O., CPC, CPC-H 440-899-2400 ext. 226 <a href="mailto:tonyao@spoonermai.com">tonyao@spoonermai.com</a></p>	<p><b>Address:</b> Spooner Medical Administrators, Inc. 28301 Ranney Parkway Westlake, OH 44145</p> <p><b>Billing Fax:</b> 440-899-2411 800-542-9480</p> <p><b>Billing Contact:</b> Tonya O., CPC, CPC-H 440-899-2400 ext. 226 <a href="mailto:tonyao@spoonermai.com">tonyao@spoonermai.com</a></p> <p><b>Electronic Billing Info:</b> Formats accepted: 837 v5010 Contact: Mike D. 440-899-2400 ext. 310 <a href="mailto:miked@spoonermai.com">miked@spoonermai.com</a></p>
<p><b>General Information: 800-542-9479</b> <b>Email Address:</b><a href="mailto:clientservices@spoonermai.com">clientservices@spoonermai.com</a></p>		