

Change of Address

Update your demographics online using the Provider Data Change Form. Sign in to www.MagellanProvider.com and choose “Display/Edit Practice Information.”

Credentialing and Contracting Status

Call the Provider Services Line at 1-800-788-4005, Monday – Friday, 6 a.m. to 3:30 p.m. (Pacific).

Join the Network/New Contract Questions

Call the Provider Services Line at 1-800-788-4005 for assistance, Monday – Friday, 6 a.m. to 3:30 p.m. (Pacific).

Mailing Address, Customer Service and Claims Contact Information

Line of Business	Customer Service/ Telephone Number	Address
Blue Shield of CA (BSC)/ MHSA	1-877-263-9952	Claims Mailing Address Blue Shield of California Mental Health Service Administrator (MHSA) P O Box 710400 San Diego, CA 92171
	1-800-424-6064	Appeals and all other Correspondence Blue Shield of California Mental Health Service Administrator (MHSA) P O Box 719002 San Diego, CA 92171
	1-800-424-5999, option 3	Discharge Review
State of CA (SOC)	1-866-327-4762	Claims Mailing Address PO Box 710430 San Diego, CA 92171
Health Plan of San Mateo (HPSM)	Customer Service 1-800-750-4776	Claims Mailing Address PO Box 710520 San Diego, CA 92171
	Clinical 1-800-424-4134	Appeals Health Plan of San Mateo ATTN: Claims Department 801 Gateway Boulevard South San Francisco, CA 94080