



Centurion of Kansas - Inmate Billing Instructions

***** Effective for Dates of service on or after 1/1/2024 *****

****Inpatient claims should be submitted directly to Kansas Medicaid for those patients deemed eligible.****

Name: _____

Inmate ID: _____
(must be 10 digits, include leading zeros)

DOB: _____

Electronic Claims Submission:

EDI Payer ID -IHS11

For electronic billing questions – please contact: (877) 213-5225

Mailing address for Paper Claims:

Centurion of Kansas, LLC

PO Box 9693

Arnold, MD 21012

To submit claims via the Provider Portal:

Register for Availity Essentials at: <https://www.availity.com/essentials-portal-registration>

To check claim status or patient eligibility:

<https://hpitpa.com/your-resources/for-providers/check-claims-eligibility/>

Claims inquiries – 1-855-202-2134, option 2

For inpatient admissions associated with an ER visit – please contact the Centurion UM department at 1-855-202-2134, option 1.