



## **Provider Refund Check Process**

Do you need to submit a refund to Delaware Physicians Care?  
We would like to remind our providers of the correct process for check refunds.  
All provider refund checks must be sent directly to the address below, with supporting documentation.

Delaware Physicians Care, Incorporated (DPCI)  
P.O. Box 61145  
Phoenix AZ 85082-1145

To ensure your refund check is processed quickly and correctly, please include the following information:

- Copy of DPCI original remittance advice (it contains all the information needed to identify the claim to which the refund should be applied to)
- If you do not have the original remittance advice, please provide:
  - Member name
  - Member ID
  - Date of service
  - DPCI claim number
  - Reason for refund
  - Amount of refund
- Attach a copy of the other carrier's Explanation of Benefits (EOB), if applicable

Please contact your Provider Relations representative with any questions about this process at 1-800-287-9860.