New Program Promotes Patient Health Literacy

Univera Healthcare is pleased to let you know about Ask Me 3™, a program created by the Partnership for Clear Health Communication™ to promote patient health literacy.

Ask Me 3 is an effective tool designed to improve health communication between patients and their physicians and other healthcare providers through the use of simple approaches and techniques to encourage patients to ask questions and take an active role in their health care.

In the United States, the average person reads at the eighth or ninth grade level, but most health information is written at reading level that is much higher. It is crucial that each patient understand what is being asked of him/her and why the question is important. Ask Me 3 encourages practitioners to make sure that each patient understands the answers to the following three questions before he/she leaves an office visit:

1. What is my main problem?
2. What do I need to do?
3. Why is it important for me to do this?

The Ask Me 3 Web site is a valuable resource for your office. The site contains statistics and information on low health literacy, research studies, a list of literacy resources, and helpful tips and communication tools to assist you in your practice. You may download and print Ask Me 3 educational brochures, fact sheets and posters free of charge directly from the Web site. You may also order these educational materials in bulk for delivery to your office. Please visit www.askme3.com for more details.

We hope you find this new tool helpful as you deliver care to our members.

Care Disparities Need Special Attention

We have a mutual mission to improve the health and quality of life of our members and all segments of the communities we serve. This includes addressing inequalities in health and wellness that have been identified locally. National efforts to reduce health disparities identify racial and ethnic minorities, low-income groups, rural residents and those with special healthcare needs as priority populations for outreach efforts.

National data concludes that African-Americans experience higher rates of asthma, diabetes, heart disease, hypertension, obesity and prostate cancer. African-Americans have proven to be more prone than other populations to elevated blood pressure and an 80 percent higher death rate associated with stroke due to hypertension.

Locally, preliminary analysis of the latest Western New York HEDIS data indicates race and income factors may be resulting in lower rates

(Continued page 12)

Updating Information Now Just a Click Away

You now have the ability to inform our Provider File Maintenance department of demographic changes to your practice via a secure Web link.

Taking advantage of this fast and efficient process for updating your practice information is as simple as logging on to our Website, univera-healthcare.com and following the simple directions for setting up a secured account.

If you experience difficulty completing the steps, please call our Web help desk at 1 (800) 278-1247 for assistance.

Once the account is established, you will just need to enter your User and Password identification to access the secured area of the Web site.
Univera Healthcare announced recently that it has expanded its free Generic Trial Program to encourage members to first try a generic medication, rather than a more expensive name brand drug.

As you likely are aware, our organization has long provided members with an initial two-week trial of selected generic medications at no cost. Now, members can receive their first 30-day supply free of charge. The trial program includes nine generic medications used to treat acid reflux, high blood pressure, high cholesterol and depression. These conditions account for 41 percent of all prescriptions written for our members.

We have all heard time and time again that the increasing cost of prescription drugs is a contributing factor to rising healthcare costs. According to the Centers for Medicare & Medicaid Services, personal spending on prescription drugs in New York State rose from $2.97 billion in 1990 to $9.83 billion in 2000.

If your patient has been taking a certain brand medication and has stabilized, we understand that likely it would not be prudent to redirect your course of treatment. We do ask, however, that whenever you write a “new start” prescription or provide patients with drug samples that you check if there is a generic version of the medication or an alternative form of treatment that offers a generic option. Generics are safe, effective, and have the lowest-tier copayment.

Univera Healthcare is working diligently to educate members about the high cost of name brand drugs and their effect on the overall cost of health care. We also take every opportunity to educate members about the advantages of generics and to encourage them to request a generic alternative when they are issued a prescription.

It is important that we all do our part to contain healthcare costs. Using generics is one of the most effective means for achieving this goal.

— Jay I. Pomerantz, M.D.

Univera Healthcare is working diligently to educate members about the high cost of name brand drugs and their effect on the overall cost of health care.”

For details about Univera Healthcare’s Generic Trial Program, please contact our Pharmacy Services Consultant Linda O’Donnell at (716) 857-6140.

On a side note, the summer months often bring a myriad of seasonal illnesses and accidents. Please take a moment to review summertime safety with your patients including the potential dangers of heat exhaustion and heatstroke, over exertion and sun exposure, as well as lawn mower and pool safety. In our haste to make the most of Western New York’s brief encounter with warm weather and sunshine, we sometimes forget our common sense. Here’s wishing you a great summer.

Zocor®, Zoloft®, Patents Expire; Generics Now Available

The patents for Zoloft and Zocor have expired and generic equivalents are now available. Current users of Zoloft (sertraline) and Zocor (simvastatin) will be switched to the generic automatically when filling their prescriptions unless “DAW” appears on the prescription.

Simvastatin is the third statin available generically, preceded by pravastatin (Pravachol®) in April 2006, and lovastatin (Mevacor®) in 2003. Current medical evidence suggests that there is no one statin better at preventing or treating coronary artery disease when NCEP goals are reached. It is, therefore, expected that the clinical needs of up to 75-85 percent of patients can be met through the use of one of these generics. Consequently, lowering cholesterol levels to “goal” is now more affordable than ever!

The cost of the generics is expected to drop substantially after they have been on the market for six months—approaching $15-$25 per month, compared to more than $100 for their brand equivalents.

If you prescribe a branded statin such as Lipitor®, consider simvastatin, pravastatin or lovastatin for existing patients and new starts. Switching your patients immediately will save them money now and as new generics become available. It also will help you transition a large patient population.

Watch for additional information about new generics in upcoming editions of the Examiner.
Why Choose the Quit for Life™ Program?

Quit For Life is a scientifically based and proven program based on 20 years of published research and clinical experience. This award-winning tobacco cessation program can help your patients quit - TODAY.

When your patients enroll in the Quit For Life Program they will receive:

• One-on-one phone sessions scheduled at their convenience
• Toll-free access to Quit Coaches seven day a week
• Medication recommendations, if appropriate
• Free nicotine replacement products (patch or gum) and delivery to their home, if recommended
• A “Quit Guide” to help them stay on track between phone sessions

The Quit For Life Program is FREE to all eligible members 18 years or older. Have your patients call 1 (800) 483-3075 to get started or to determine the best treatment option available to meet their needs.

CDC Initiative Focuses on Improving Adolescent Health

Increasing adolescent health risk factors have prompted the Centers for Disease Control and Prevention to institute a National Initiative to Improve Adolescent Health by the year 2010 (NIIAH 2010). In preparation, new measures have been added to the Quality Assurance Reporting Requirements (QARR).

Among the health risks that endanger young people:

• More than one in five U.S. high school students are smokers
• Almost 80 percent of high school students do not eat the recommended five servings of fruits and vegetables a day
• Only 28 percent of high school students participate in daily physical education classes
• Nearly one in three children and adolescents are overweight or at risk of becoming overweight
• Every year, more than 870,000 adolescents become pregnant and more than 3 million become infected with a sexually transmitted disease
• People aged 13-24 account for 12 percent of HIV cases reported in areas with confidential reporting
• Young people miss 14 million school days a year because of asthma
• The additional QARR measures are designed to address these risks by focusing on documentation that includes:
  • BMI screening;
  • Screening for depression
  • Assessment/counseling/education about nutrition and exercise, risk behaviors associated with sexual activity, risks of tobacco use, and risks of substance abuse including alcohol

During an office visit with an adolescent patient, it is important to capture the teaching, counseling and assessment that that has been completed. An effective way to document is by using a trigger questionnaire, which helps to identify any areas of concern and can be completed by the teen while waiting for an exam or completed by the practitioner and teen as part of an interview.

To obtain a copy of a trigger questionnaire, please visit our Web site, univerahealthcare.com. For more information regarding the NIIAH 2010, please visit the CDC Web site at www.cdc.gov/HealthyYouth/AdolescentHealth/NationalInitiative.

HEDIS™, QARR Data Collection Complete

Thank you to all the physicians and office staff who participated in our 2006 annual data collection process. Our Quality Management department representatives visited approximately 2,500 physician offices and completed more than 15,000 medical record reviews.

Analysis of this data will be very helpful to us as we work to identify opportunities for quality initiatives that will enable us to improve the health and well being of our members. Additionally, the National Committee for Quality Assurance (NCQA) and the New York State Department of Health require us to report specific measures annually. The 2005 Health Plan Employer Data & Information Set (HEDIS) and Quality Assurance Reporting Requirements (QARR) define these measurements.

We appreciate your time and cooperation with this initiative. Please watch future editions of this newsletter for a report of our findings.
Behavioral Health Survey Results Reported

Behavioral Health practitioners performed well in two key areas of the self-reported 2005 Continuity of Care survey.

The community-wide Behavioral Health Practitioner Quality Advisory Committee considers practitioners to be in compliance with continuity of care performance standards when the aggregate score for each measure is 85 percent. Survey results were:

• Exchange of Information with Other Practitioners as deemed necessary—91 percent
• Consent for Release of Information—93 percent

An opportunity for improvement was identified in the category of Exchange of Information with the Primary Care Physician. The score was 79 percent. Please remember that coordinating care with the patient’s PCP and other behavioral health practitioners is important to the patient’s overall care and also helps to build a positive relationship between the behavioral health practitioner and medical practice.

Sample tools for continuity of care, as well as our Behavioral Health Continuity and Coordination of Care policy are available on our Web site, univerahealthcare.com. If you would like a copy mailed to you, please contact Ellen George LCSWR, Behavioral Health Quality Management, Univera Healthcare, 205 Park Club Lane, Buffalo, NY 14221.

BH Appointment Availability Survey Results Excellent

Univera Healthcare behavioral health practitioners performed excellently on the 2005 Appointment Availability Survey.

Practitioners surveyed achieved 100 percent compliance for urgent-care access and 96 percent compliance for routine-care access appointments.

The Behavioral Health Access and Availability Standards require appointment access for established or current patients within 48 hours for an urgent-care appointment and within 10 business days for routine-care appointment follow-up.

For further information about the standard, please visit our Web site, univerahealthcare.com.

Congratulations for a job well done.

NYS Law Requires Reporting of Pesticide Poisoning

Now that summer is here, please be aware of the possibility of pesticide-related health effects and your obligation to report any suspected or confirmed cases.

According to New York State regulations, physicians and healthcare facilities are required to report suspected or confirmed cases of pesticide poisoning. Clinical laboratories are required to report depressed blood cholinesterase levels or abnormally high levels of pesticides in human tissue samples.

Physicians should report the case to the Pesticide Poisoning Registry at 1 (800) 322-6850 within 48 hours of treating any patient with suspected pesticide poisoning.

Poisonings may result from structural applications, yard applications, manufacturing or formulation settings, farm settings or any other location where pesticides are used and stored. Some New York State counties apply pesticides to control mosquito populations related to West Nile Virus.

How’s Our Service?

Our goal is to constantly improve the service we provide to you, our valued participating practitioners.

If you’ve received exceptional service from a department or employee of Univera Healthcare, we’d like to hear from you.

Please email Examiner at maria.valvo@univerahealthcare.com
Formulary Now Same for CHP and FHP

The closed formulary that is in place currently for Family Health Plus members will also in include Child Health Plus members effective August 1, 2006.

You should have received a correspondence from Univera Community Health in June, which also contained a copy of the formulary and other important information.

A copy of the formulary also is available on our Web site, univeracommunityhealth.org or by calling Provider Service at (716) 857-4444 or 1 (800) 617-1114.

Annual Eye Exam Essential to Diabetes Care

Diabetes is one of the four leading causes of blindness in the United States and is the leading cause of legal blindness in adults between the ages of 20 and 74. Approximately 4.1 million people in the United States age 40 and older have diabetic retinopathy with one in 12 having advanced vision-threatening retinopathy.

A public awareness campaign continuing through the month of May encourages people with diabetes to have an annual dilated eye exam. You can do your part by encouraging your patients with diabetes to have this important exam as recommended by Univera Healthcare’s Clinical Guidelines.

Early diagnosis and timely treatment have proven to prevent vision loss in more than 90 percent of patients, yet 50 percent of patients are diagnosed too late for effective treatment. Our data tells us that our community’s compliance rate is approximately 50 to 65 percent. The current spotlight on public awareness provides a great opportunity to improve.

For further information about our diabetes clinical guideline, please see our Web site, univerahealthcare.com

Prenatal Guidelines Now Include Criteria for High Risk Case Referrals, Consultations

As you are aware, assessment of maternal and fetal risk factors throughout the prenatal period should be ongoing and include an analysis of individual characteristics affecting pregnancy, such as genetic, nutritional, psychosocial and emerging obstetrical and medical surgical risk factors.

Univera Community Health prenatal guidelines now include criteria for identifying situations in which consultation with a qualified physician or other healthcare practitioner is recommended. Also, the criteria identifies situations in which primary responsibility of the patient should be transferred to a qualified obstetrician, family practice physician, physician’s assistant, licensed midwife or nurse practitioner.

Additionally, women who have nutritional risk factors, e.g., gestational diabetes, anemia, digestive disorders, are still nursing from a prior pregnancy, are developing teens, etc. should be referred to a nutritionist or registered dietician for counseling, monitoring and follow-up.

For further information, see the Univera Community Health Participating Provider Manual or our Web site, univeracommunityhealth.org. If you do not have Web access, you can obtain a copy of the criteria by calling the Quality Management department at 1 (800) 574-2390.

New ID Cards Issued

Univera Community Health Child Health Plus and Family Health Plus members have received new identification cards.

The Child Health Plus and Family Health Plus product names have been removed from the cards and replaced with the Group Code C (Child Health Plus) or F (Family Health Plus). No other changes to the cards were made. Members with PlusMed coverage did not receive new cards.

WNYDOC 7186
Helpful Information for Patients with Diabetes

Living with diabetes can be challenging especially for patients who may be newly diagnosed. Please be aware that there are several resources available to patients free of charge including educational programs, Web sites and local support groups. Following is a list of some of resources available in Western New York. Please share this information with your patients.

**Education and Information**

**Allegany County**
- Jones Memorial Hospital, (858) 596-4035

**Cattaraugus County**
- Olean General Hospital, (716) 375-6271

**Chautauqua County**
- WCA Hospital, (716) 664-8380

**Support Groups**

**Allegany County**
- Jones Memorial Hospital, (858) 596-4035

**Cattaraugus County**
- Olean General Hospital, (716) 375-6271

**Niagara County**
- Lockport Memorial Hospital, (716) 514-5800 ext. 5652
- Mount St. Mary’s Hospital, (816) 298-2297

**Erie County**
- Bertrand Chaffee Hospital, (716) 592-2871 ext. 1489
- Catholic Health System, (716) 447-6205
- Kaleida Health, (716) 887-4935

**Niagara County**
- Niagara County Chapter of the American Diabetes Association, (716) 283-3717

**Educational Web sites**
- www.diabetes.org/education/edustate2.asp
- www.nal.usda.gov/fnic/etext/fnic.html

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**Medicaid News**

**Service Documentation Requirements**

Medicaid requires that patient medical records document medical necessity supporting the ordering and provision of services. Only licensed healthcare professionals can evaluate and document the medical necessity for ordered services. In certain circumstances, providers may be instructed to collect and maintain this documentation from the ordering practitioner or other healthcare professionals in their files and provide it to the New York State Department of Health upon request.

Providers are responsible for assuring that adequate and less costly alternatives for services have been evaluated. Additionally, NYSDOH regulations state that it is an unacceptable practice to order or furnish inappropriate, improper, unnecessary or excessive services. Providers engaging in unacceptable practices are subject to liability for overpayments or penalties and administrative action that could affect their continued participating in the program.

**Medical-Surgical Supply Billing**

Please remember that personal hygiene products such as disposable toothbrushes, disposable washcloths and menstrual pads can’t be billed to the Medicaid program using medical-surgical supply procedure codes such as skin barrier wipes, urinary incontinence pads or medical products.

**Billing Medicaid Recipients**

Medicaid recipients including Medicaid managed care and Family Health Plus enrollees cannot be billed for any service unless the provider and recipient agree prior to the delivery of the service that the patient will be seen as a private-pay patient. Medicaid recipients can be billed for any applicable copayments.

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**VFC Now Mandatory for Child Health Plus**

Please remember that effective August 1, 2006, the State Department of Health requires all physicians administering vaccines to children with Child Health Plus coverage to participate in the New York Vaccines for Children (VFC) program.

VFC provides the vaccines free of charge. Please continue to submit claims for the vaccine administration fee to Univera Community Health. It is important for you to continue to submit claims for the vaccines at $0 for childhood immunization quality reporting indicators.

Please refer to correspondence our organization sent to you in May for further information.
Accurate Practice Information is a Must

We constantly strive to achieve two important goals—providing you with important information necessary for you to conduct business with our organization and helping to ensure that our members always have access to the medical care and services you deliver.

We can't achieve these critical goals without the ability to deliver payments and other important information to you and without the ability to provide our members with accurate information about you, such as a new office location. It is imperative, therefore, that our records reflect accurate demographic information about your practice at all times. Please remember that we must also have accurate information for any nurse practitioner or physician assistant affiliated with your practice.

Notification is required for changes to:
- Address
- Addition/deletion of office location
- Phone or fax number
- Physician or provider name change
- Addition/deletion of physician or physician extender

Options for relaying this critical information to us include:
- A letter, preferably on your office letterhead and typed to ensure legibility.

In order for us to identify you, it is necessary to include your full name, provider identification number and tax identification number. Keep in mind that there are physicians and providers in our participating network who have the same or similar names; therefore, these additional identifiers will help ensure accuracy. Please send the letter to:

Univera Healthcare
205 Park Club Lane
Buffalo, NY 14221
Att: Provider File Maintenance

Completion of our Provider Information Form, available on our Web site: univerahealthcare.com. Please fax the form to us at 1 (800) 915-4574 or mail to the address listed above.
- On-line—our Web site now contains a secured area expressly for physicians and providers to notify us of demographic changes to their practice.

Thank you for your cooperation as we work every day to improve the service we provide to you and your patients.

If you have questions, please contact Provider Service at (716) 857-4444 or 1 (800) 617-1114.

Accuracy of W-9 Form Crucial

Information contained on the Internal Revenue Service’s Request for Taxpayer Identification Number and Certification Form (W-9) relates directly to income reported on tax form 1099. Accuracy of this information is critical.

If you have not submitted a W-9 form to Univera Healthcare in the past six months, please do so. This will help ensure that payments are processed correctly and income reported to the IRS is accurate.

Please send the form to:
Univera Healthcare
205 Park Club Lane
Buffalo, NY 14221

Att: Provider File Maintenance
fax: 1 (800) 915-4574

Please note that the IRS requires the “Name” field on the W-9 form to contain the name of the individual or practice as it has been registered with the IRS for obtaining a Tax Identification Number. If you are unsure of the name on your registration with the IRS, please check with your tax preparer.

The IRS also requires that the “address” field contain the address at which you receive your 1099 form. When mailing or faxing your W-9 form, please include a cover letter or notation on the W-9 form that includes the name and Provider Identification Number of the physician. This is important for our identification purposes particularly if the physician’s name differs from the practice name as it is registered with the IRS.

Thank you for your attention as we work to improve the accuracy of our records.
Tips for Efficient Paper Claims Submission

You can help us to process your paper claims more efficiently by remembering the following tips:

- Use original CMS 1500 forms that are printed in red. Please do not use photocopies.
- Please do not use red ink to fill in data fields or attachment information. OCR equipment does not recognize red ink. Data should be typed, not handwritten, in the form fields.
- Do not highlight fields on the form.
- Always bill using your complete provider identification number.
- For box 33, complete only the provider name, address and provider ID number. Do not key any additional codes or characters, such as GRP, in this field. Please bill your servicing provider number in the PIN section and the billing provider number in the GRP sections.
- Change the toner cartridge in your printer regularly.
- When billing multi-page claims, make sure the following data elements are the same on all pages: tax id, provider PIN number, patient account number and patient ID number.

While electronic submission is the preferred method for claims submission, adhering to the tips listed above will help us to process your paper claims accurately.

Clinical Editing Changes Coming

A goal of our clinical editing program is consistency for all physicians and providers across Univera Healthcare. We are installing an update to our clinical editing software program. The new coding updates will be effective for all claims processed on or after July 17, 2006.

Beginning November 1, 2006, we will edit Conscious Sedation as inclusive codes (99143-99150) when billed with a surgical procedure code (between 10000-69999) provided by the same physician.

Additionally, clinical editing will require the surgical medical record for all assistant surgeon claims where, based on CMS and/or CPT, an assist at surgery is not normally allowed.

If you have questions, please contact Provider Service at (716) 857-4444 or 1 (800) 617-1114.

Provider Service Unit Should Be 1st Stop for Most Information

For faster more efficient service, please remember that the Provider Service unit, (716) 857-4444 or 1 (800) 617-1114, is your best source for routine information, such as:

- Claim inquiries
- Supply requests
- Participating Provider Manuals
- Forms

Information about claim status, eligibility, copayment information and referrals is obtainable through WNYHealthNet, our HIPAA-compliant Web-based tool. If you do not have access to WNYHealthNet and would like to sign up, please call PCI at 1 (877) 895-4724.

Also, our Web site, univerahealthcare.com is a great source of information about our various programs and affords you the opportunity to view our newsletters, provider manual, change demographic information related to your practice and to print copies of our various forms.

Any questions regarding the Univera Healthcare Panel Model program should be directed to your Provider Relations representative.

Thank you for your cooperation as we strive to improve our service.

Paper Claim Address Change

Just a reminder that effective June 19, 2006, our mail operations for paper claims have been consolidated. Please send all paper claims to the following address:

Univera Healthcare
P.O. Box 23000
Rochester, NY 14692

Claims submitted to the previous address will be forwarded automatically to the new address for a 12-month transition period.

Thank you for your cooperation in this effort to streamline processes and procedures.
# Provider Reference Card

## Provider Service

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<thead>
<tr>
<th>Provider Service</th>
<th>Tel.</th>
<th>Fax</th>
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<tbody>
<tr>
<td>Univera Healthcare, SeniorChoice, Medicare PPO</td>
<td>(716) 857-4444, (800) 017-1114</td>
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<tr>
<td>Univera PPO, Traditional, 4Front™</td>
<td>(716) 857-4410, (800) 742-6153</td>
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<tr>
<td>SSA HealthChoice</td>
<td>(1888) 265-5983</td>
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<tr>
<td>SGA HealthChoice</td>
<td>(1888) 827-5016</td>
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## Member Eligibility Inquiry

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<tr>
<td>Most products: Requires registration</td>
<td>wnyhealthenet.com</td>
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<tr>
<td>Univera PPO, Traditional, 4Front™</td>
<td>(1888) 265-5083</td>
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<tr>
<td>SSA HealthChoice</td>
<td>(1888) 677-6016</td>
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<tr>
<td>Eligibility Phone Line, most products: Requires PIN</td>
<td>(716) 504-5600, (866) 782-9661</td>
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## Provider Participation

| Credentialed questions only | (716) 857-6208, (716) 504-5650 | |
| CAHQ | (866) 592-1777 | www.caqh.org/cred |
| Provider file maintenance (to update provider information) | (716) 857-4589 | |
| WNYHealthNet system admin. | (1877) 595-4724 | |

## Referrals

| For most products, To obtain an UCR referral: Requires registration | wnyhealthenet.com | |
| Referral Service | (716) 857-4500, (800) 010-1113 | |
| | (716) 857-4594, (800) 245-3370 | |

## Preauthorization

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<tr>
<td>SSA HealthChoice</td>
<td>See back of ID card</td>
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<tr>
<td>Other products</td>
<td>(716) 857-4400, (800) 610-1113</td>
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<tr>
<td>DME, Home Care, Hospice, Prosthetics, Orthotics, Vendor must obtain preauth.</td>
<td>(716) 857-4509</td>
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<tr>
<td>Imaging Services</td>
<td>(1888) 677-7731</td>
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<tr>
<td>(716) 857-6361, (866) 465-1373</td>
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<tr>
<td>Physical Therapy, Speech Therapy, Therapy, Therapist must obtain preauth.</td>
<td>(710) 857-4503, (800) 610-1113</td>
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<tr>
<td>(716) 857-4694</td>
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<td>Medical Specialty</td>
<td>(1888) 300-0151</td>
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<td>Drug Review Unit</td>
<td>(1888) 300-0100</td>
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<td>Surgical Preauthorization</td>
<td>(716) 857-4500, (800) 610-1113</td>
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<td>(716) 857-4694</td>
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<td>Transplants</td>
<td>(716) 857-4500, (800) 610-1113</td>
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<td>Care Options: Alternatives to hospitalization</td>
<td>(716) 857-0199</td>
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<td>Hospital Admissions, Facility must call for authorization</td>
<td>(716) 857-4500, (800) 610-1113</td>
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<tr>
<td>Skilled Nursing</td>
<td>(716) 857-4500, (800) 610-1113</td>
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<tr>
<td>Facility Admissions, Facility must call for authorization</td>
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## Case Management

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<td>Behavioral Health</td>
<td>See Behavioral Health, below</td>
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<tr>
<td>Medical</td>
<td>(716) 943-7079, (800) 516-5254</td>
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<tr>
<td>CompassionNet, for children with life-threatening illnesses</td>
<td>(586) 211-333</td>
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<tr>
<td>Disease Management Programs</td>
<td>(716) 857-4666, (877) 995-4562</td>
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<tr>
<td>(For asthma, CAD, depression, diabetes, high blood pressure) and Care Calls</td>
<td>(716) 504-5650, (800) 060-2019</td>
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<tr>
<td>Telephonic member education for asthma, CHF, CAD, depression, diabetes</td>
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<tr>
<td>Health Coach: Telephonic education for Senior-Choice members</td>
<td>(800) 346-9786</td>
<td></td>
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<tr>
<td>(1877) 471-7033</td>
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## Behavioral Health

<table>
<thead>
<tr>
<th>Behavioral Health</th>
<th>Tel.</th>
<th>Fax</th>
</tr>
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<tbody>
<tr>
<td>For behavioral health providers</td>
<td>(716) 656-1344, (800) 330-8314</td>
<td></td>
</tr>
<tr>
<td>(716) 856-2361, (800) 430-9905</td>
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## Pharmacy

<table>
<thead>
<tr>
<th>Pharmacy</th>
<th>Tel.</th>
<th>Fax</th>
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<tbody>
<tr>
<td>FL Rx Help Desk, 6th floor, 165 Court Street, Rochester, NY 14647</td>
<td>(1800) 724-5033</td>
<td></td>
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<tr>
<td>Drug preauthorization</td>
<td>(1800) 956-2397</td>
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## RMS CO

<table>
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<tr>
<th>RMS CO</th>
<th>Tel.</th>
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<tbody>
<tr>
<td>For all inquiries</td>
<td>(1877) 300-9963</td>
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(continued on back)
Provider Reference Card

Claims

Electronic Submissions
Trading Partner Support
(585) 238-4618
1(877) 843-8620

Paper Submission
Universa Healthcare, SeniorChoice, Medicare PPO
Universa PPO, Traditional 4Front
SSA HealthChoice
Universa Healthcare
P.O. Box 23000
Rochester, NY 14692

Status inquiry
Universa Healthcare, SeniorChoice, Medicare PPO
wyhealthnet.com
(Registration required)

Fax
Submit Claim Status Request form to Universa Provider Service.

Universa PPO, Traditional 4Front
SSA HealthChoice
Call Provider Service for the product.

Universa Healthcare Web Site
www.univerahealthcare.com

To access:
- Product descriptions
- Provider forms
- Clinical guidelines
- Rx Online
- Medical policies
- Other information

Health Plan Privacy Officer
For complaints regarding member privacy
1(866) 584-2313

Customer Service: For Members' Questions

Universa Healthcare
(716) 857-4448
1(800) 337-3338

SeniorChoice
(716) 847-2091
1(800) 559-4320

Medicare PPO
1(800) 421-1220

Universa PPO, Traditional 4Front
1(888) 627-5018

GSA HealthChoice

Imaging Studies Requiring Preauthorization Managed Care

Computerized Axial Tomography (CAT)

Orbit 7U48U 7U481 7U482
Sinus (maxillotur) 7U486 7U487 7U488
Cervical spine 72125 72126 72127
Thoracic spine 72128 72129 72130
Lumbar spine 72131 72132 72133
Lower extremity 73700 73701 73702

Magnetic Resonance Imaging (MRI)

Breast 76094 (Bilateral) 76093 (Unilateral)
Cervical spine 72141 72142 72150
Thoracic spine 72146 72147 72157
Lumbar spine 72148 72149 72159
Lower extremity 73718 73719 73720
Lower extremity with joint 73721 73722 73723
TMJ 70336

Magnetic Resonance Angiography (MRA)

Spine 73259
Abdomen 74185
Neck 70547 70548 70549
Upper Extremity 73225
Lower Extremity 73725
Chest 71555
Pelvis 72198
Head 70544 70545 70546

*Positron Emission Testing (PET)/PET CT
*all codes

Rev. June 2006

Univera Healthcare
205 Park Club Lane
Buffalo, NY 14221-5239

WNYDOC 7/02
Provider Reference Card
Child Health Plus • PlusMed • Family Health

Provider Service
For providers' questions  
(716) 857-4444
1(800) 817-1114
FAX (716) 857-4610
1(800) 742-6153

Member Eligibility Inquiry
Requires registration. Univera Community Health information listed under Univera Healthcare
wmyhealthnet.com

Eligibility Phone Line. Requires PIN.:  
(716) 504-5600
1(888) 782-9661

Provider Participation
Credentialing questions only  
(716) 857-6208
(716) 857-8850
FAX (716) 857-5529
CAQH 1(888) 999-111
www.caqh.org/cred

Provider file maintenance (to update provider information)  
(716) 857-4559
FAX 1 (800) 915-4574
WNYHealthNet system admin.  
1(877) 896-4724

Preauthorization
DME, Home Care, Hospice, Prosthetics, Orthotics. Vendor must obtain preauth.  
(716) 857-4500
1(800) 610-1113
FAX (716) 857-4694
1(800) 245-3370

Imaging Studies  
(716) 857-6303
1(888) 576-7783
FAX (716) 857-8381
1(888) 485-1373

PT, OT, Speech Therapy. Therapist must obtain preauth.  
(716) 857-4500
1(800) 610-1113
FAX (716) 857-4694
1(800) 245-3370

Medical Specialty Drug Review Unit  
1 (800) 396-0115
FAX 1 (800) 396-0188

Surgical Preauthorization  
(716) 857-4500
1(800) 610-1113
FAX (716) 857-4694
1(800) 245-3370

Facility Admissions
Care Options: Alternatives to hospitalization  
(716) 857-6199

Hospital Admissions. Facility must call for authorization.  
(716) 857-4500
1(800) 610-1113

Skilled Nursing Facility Admissions. Facility must call for authorization.  
(716) 857-4500
1(800) 610-1113

Facility Admissions
Pager (716) 443-9929
(After Hours)

Case Management
Behavioral Health  
See Behavioral Health, below
Medical  
(716) 843-7879
1(800) 519-3294
FAX (716) 847-0047
1(800) 404-1442

CompassNet for children with life-threatening illnesses  
(585) 214-1333

Health Management
Disease Management Programs  
(For asthma, CAD, depression, diabetes, high blood pressure) and 
Care Calls  
(Telephonic member education for asthma, CHF, CAD, depression, diabetes)

(716) 504-5580
1(800) 860-2619
FAX (716) 857-4666
1(677) 595-4502

Behavioral Health
For behavioral health providers  
(716) 656-1344
1(800) 330-9314
FAX (716) 566-7181
1(800) 430-9805

Pharmacy
FLRX Help Desk  
6th floor, 165 Court Street, Rochester, NY 14647
Drugs prior to authorization  
1(800) 724-5033
FAX 1(800) 966-2397

Customer Service
For members' questions  
(716) 847-1433
1(800) 893-3781

(continued on back)
# Provider Reference Card

**Child Health Plus • PlusMed •**

## Claims

<table>
<thead>
<tr>
<th>Request</th>
<th>Contact Information</th>
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<tbody>
<tr>
<td>Electronic Submission</td>
<td>(585) 238-1618 1(877) 843-8520</td>
</tr>
<tr>
<td>Paper Submissions</td>
<td>Univera Community Health P.O. Box 23000 Rochester, NY 14692</td>
</tr>
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</table>

## Status Inquiry

- **Internet, Requires registration:** wnyhealthenet.com
- **Fax or paper:** Submit Claim Status Request form to Provider Services 1(669) 284-2313

## Services Requiring Preauthorization

Please refer to Preauthorization Requirement list at www.univeracommunityhealth.org.

## Health Plan Privacy Officer

For complaints regarding member privacy 1(866) 284-2313

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## Univera Community Health Web Site

[www.univeracommunityhealth.com](http://www.univeracommunityhealth.com)

- Product descriptions
- Clinical guidelines
- Provider directory
- WNYHealthnet
- Other information

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## Imaging Studies Requiring Preauthorization by CPT code

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Code Range</th>
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<tbody>
<tr>
<td>CT (Abdomen)</td>
<td>70480-70489</td>
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<tr>
<td>Sinus (maxillofacial)</td>
<td>70480-70489</td>
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<tr>
<td>Cervical spine</td>
<td>72125-72127</td>
</tr>
<tr>
<td>Thoracic spine</td>
<td>72128-72130</td>
</tr>
<tr>
<td>Lumbar spine</td>
<td>72130-72133</td>
</tr>
<tr>
<td>Lower extremity</td>
<td>73700-73702</td>
</tr>
<tr>
<td>CT (Spine)</td>
<td>72140-72149</td>
</tr>
<tr>
<td>Thoracic spine</td>
<td>72145-72149</td>
</tr>
<tr>
<td>Lumbar spine</td>
<td>72149-72158</td>
</tr>
<tr>
<td>Lower extremity</td>
<td>73710-73720</td>
</tr>
<tr>
<td>Magnetic Resonance Imaging (MRI)</td>
<td>73720-73723</td>
</tr>
<tr>
<td>TMJ</td>
<td>70336</td>
</tr>
<tr>
<td>Magnetic Resonance Angiography (MRA)</td>
<td>72159-72159</td>
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<tr>
<td>Abdomen</td>
<td>74165</td>
</tr>
<tr>
<td>Neck</td>
<td>70545-70549</td>
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<tr>
<td>Upper Extremity</td>
<td>73225</td>
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<tr>
<td>Lower Extremity</td>
<td>73725</td>
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<tr>
<td>Chest</td>
<td>71555</td>
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<tr>
<td>Pelvis</td>
<td>72158</td>
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<td>Heart</td>
<td>70544-70545</td>
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</table>

*Positron Emission Testing (PET)/PET CT

**All codes**
Correct Member DOB Crucial to Claims Payment

Our claims system cannot process claims unless the member’s date of birth listed on the claim matches the date of birth listed in our system. A mismatch will cause the claim to deny automatically.

If the date of birth that appears on the identification card is incorrect, please advise the member to contact Customer Service at the number on the back of their card, as well as their employer.

Thank you for your assistance.

Univera Healthcare Now Offers Medicare Supplemental Plans

Please be aware that you may now be seeing Medicare patients who have Univera Healthcare supplemental insurance. Univera Healthcare has added supplemental insurance plans to its menu of healthcare products as part of our mission to meet all needs of the community we serve.

As a physician or other healthcare practitioner, you are not required to seek reimbursement under supplemental insurance directly; however, you are encouraged to do so. Claims should be submitted to the following address:

Univera Healthcare
P.O. Box 23000
Rochester, NY 14692

We are proud to bring another choice in healthcare coverage to Western New York. If you have questions, please contact Provider Service at (716) 857-4444 or 1 (800) 617-1114.

Alternative Sources of Identification

As you know, Social Security numbers no longer are incorporated into our member identification numbers in order to protect private information. We recognize, however, that at some times it may be necessary for you to request another source of identification other than the member identification card.

If your office requires a patient to present an alternative form of identification, the following are suggested sources:

• driver’s license number
• non-driver’s license number
• student identification card number

We hope you find this information helpful as you conduct your daily business.

Colorectal Cancer Screening Recommended for Patients Age 50

The U.S. Preventive Services Task Force recommends strongly that colorectal cancer screenings be performed on men and women age 50 or older.

Potential screening options include home FOBT, flexible sigmoidoscopy, the combination of home FOBT and flexible sigmoidoscopy, colonoscopy, and double-contrast barium enema.

Each option has advantages and disadvantages that may vary for individual patients and practice settings.

The choice of specific screening strategy should be based on patient preferences, medical contraindications, patient adherence, and available resources for testing and follow-up. We recommend that you discuss with your patient the benefits and potential harms associated with each option before selecting a screening strategy.

In patients at higher risk (for example, those with a first-degree relative diagnosed with colorectal cancer before 60 years of age), screening earlier is reasonable.

No Web Access? Contact Us for Medical Policies In Hard Copy

While the Web is the fastest, most efficient way to obtain important information such as the most up-to-date medical policies, we recognize that some offices do not have Web access.

If you are unable to access medical policies via our Web site, univerahealthcare.com, please contact Provider Services at (716) 857-4444 to request a paper copy.
**WNYHealthNet Earns Award**

Univera Healthcare is proud to announce that WNYHealthNet has been honored with the 2006 BETA Award. The award, presented by InfoTech Niagara, distinguishes WNYHealthNet for demonstrating outstanding regional collaboration in the area of health-care achievement.

WNYHealthNet, is a one-source, HIPAA-compliant, Web-based tool that offers physicians, providers and office staff access to a patient’s eligibility, benefit information, claims status and referrals.

The tool is the result of a unique collaboration among Univera Healthcare, Independent Health and BlueCross BlueShield of Western New York, as well as the Catholic Health System, Erie County Medical Center, Kaleida Health, and Roswell Park Cancer Institute.

If you are interested in signing up for WNYHealthNet, please call PCI at 1 (877) 895-4724.

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**Care Disparities Need Special Attention** *(Continued from page 1)*

for well-child visits, some health screenings and diabetes-related measures. Additionally, there is an apparent gap between African-American and Caucasian heart patients in cholesterol screening rates in Western New York where heart disease rates are particularly high.

Univera Healthcare is working to analyze local healthcare disparities to determine what steps can be taken to reduce apparent gaps.

As a physician or other healthcare practitioner, your assistance is critical in the effort to reduce any existing healthcare disparities due to race, ethnicity, income or other factors. You are encouraged to familiarize yourself as much as possible with the special needs of culturally diverse patients. When developing treatment plans, please take advantage of the many disease management programs offered by our organization, which are designed to assist you in the treatment of patients with such chronic conditions as asthma, heart disease, hypertension and diabetes. Information about these programs is available on our Web site, univerahealthcare.com

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**Univera Healthcare Mission:** To improve the health and quality of life of our members and the communities we serve.

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**Let Us Know Your Thoughts**

Univera Healthcare is committed to assuring that all participating physicians and providers are satisfied with daily operational plan functions such as network management and provider services relationships, resource management processes, quality improvement activities, and customer service.

To that end, we invite your comments, concerns and questions. Your feedback will help us know how we’re doing. Please contact Maria N. Valvo, Provider Communications Manager in writing at 205 Park Club Lane, Williamsville, NY 14221; via fax, (716) 857-4578 or by calling (716) 857-6269 should you wish to share your thoughts.

Univera Healthcare
205 Park Club Lane
Williamsville, NY 14221

Summer 2006