

CAREPLUS

360 West 31st Street New York, NY 10001

<http://www.careplus.net/>

PURPOSE	MEDICAID	CHILD HEALTH PLUS	PLUS
For Claims, rosters, supplies, Policies and Procedures	Provider Relations 800 563-5581 Option #4	Provider Relations 800 563-5581 Option #4	Same as CHP
Eligibility Verification	Verify through EMEVS or call Member Services 877-692-8669 Option #1	Eligibility Verification call Member Services 877-692-8669 Option #1	Same as CHP
Pre-Authorization, Admissions Services that require Pre-Authorization	PRE-AUTHORIZATION REQUIRED 800 477-3150 Inpatient Admissions* Radiation Oncology Ambulatory Surgery Oxygen Equipment Transplant Evaluations Speech Therapy GI Endoscopy Chemotherapy Non Emergency Ambulance Obstetrical Services Hearing Aids *Elective Admissions require pre-authorization 7 days prior to admission	Case Management 800 477-3150 Same Pre-Authorization Requirements as Medicaid	Same as CHP
Ancillary Services	<u>Radiology*</u> UHB may provide inpatient & outpatient radiology services	<u>Laboratory</u> UHB may provide inpatient & outpatient laboratory services	Same as Medicaid Same as CHP
Referral to Network Providers	All other services require a referral from the PCP	Same as Medicaid	Same as CHP
Dental	InteleDent 212-563-9255	InteleDent 212-563-9255	Same as CHP
Vision	Davis Vision 800 999-5431 One self referral every 1 yr and One pair of eyeglasses every 2 yrs.	Davis Vision 800 999-5431 One self referral every 1yr. and One pair of eyeglasses every 1yr.	Same as CHP
Hearing	All hearing services require a referral Hear X call 800 477-3150 for contact Must use participating vendor found in directory	All hearing svc req. referral Hear X Same as Medicaid	Same as CHP
Mental Health/Substance Abuse	Must use CHCS 800 922-3626 One self referral per 12 months	Same as Medicaid One self referral per 12 months	Same as CHP
Patient Questions About Programs	800 535-5618	800 535-5618	Same as CHP