

INSURANCE NAME PRODUCT LINES	PRE-CERTIFICATION NUMBER	MAIN NUMBER	CLAIMS	SERVICES REQUIRING PRECERTIFICATION	SERVICES REQUIRING NOTIFICATION	SERVICES REQUIRING REFERRAL BY PCP
EMPIRE BLUE CROSS BLUE SHIELD						
622 Third Ave New York NY 10017 http://www.empireblue.com PRODUCTS AND NETWORKS *HMO (HMO /DIRECT HMO/ DIRECT PAY HMO/ DIRECT PAY HMO/POS) *PPO/EPO *CHILD HEALTH PLUS *HEALTHY NEW YORK *INDEMNITY *SENIOR CARE SPECIAL PROGRAMS * <u>Empire BabyCare</u> - a maternity management program * <u>Empire Centers of Excellence</u> - a provider network offering state-of-the-art medical technology * <u>Empire HEALTHLINE</u> * <u>Empire Case Management</u> * <u>The Behavioral Health Care Management Program</u> * <u>Empire Pharmacy Management Program</u> * <u>HMO USA</u> * <u>BlueCard PPO</u>	*HMO (DIRECT PAY HMO/POS)			PRECERTIFICATION GUIDE FOR EMPIRE EPO/EMPIRE PPO *Acute inpatient rehabilitation *Scheduled inpatient hospital admissions *Ambulatory Surgery *Speech therapy *MRI/MRA *Emergency Admission (within 24hrs or as soon as reasonably possible) *Maternity Admissions (within the FIRST three months of pregnancy and again within 24hrs of delivery date) *Cardiac Rehabilitation *Hospice *Skilled Nursing Facilities *Vision therapy (orthoptic therapy) <u>Durable Medical Products and Home HealthCare</u> *DME (Select items only) *Prosthetics/Orthotics (select items only) *Home Health Care *Home Infusion Therapy <u>Behavioral Health and Substance Abuse Services</u> *Behavioral health care - in/out patient *Alcohol or Subs abuse detox - inpatient *Alcohol or Subs abuse treatment - outpatient	EMPIRE MGD. CARE HMO AND POS EMPIRE'S MEDICAL MANAGEMENT PROGRAM MUST BE CALLED IN ADVANCE BY THE PCP OR PROVIDER <u>RENDERING SERVICES TO PREAUTHORIZE:</u> *Inpatient admissions to hospitals and facilities* (skilled nursing facilities, hospice, birthing centers, rehabilitation facilities) (2 weeks in advance) *Ambulatory surgery* (2 weeks in advance) *Inpatient admissions of sick newborns *Home Care**, home infusion therapy** *Referrals to nonparticipating providers *All transplants *Air ambulance transport services *Cardiac rehabilitation *Durable Medical Equipment** (select items only) (see list of participating providers) *Prosthetics/Orthotics** (select items only) *Physical/Occupational/Speech/vision therapies *Magnetic Resonance Imaging (MRI/MRA) *Maternity care (during first trimester of pregnancy) *Hospice Care	REFERRAL/PRECERTIFICATION GUIDE FOR EMPIRE MGD. CARE HMO AND POS PCPs COMPLETE A REFERRAL FORM FOR: *Participating specialists' services, including office-based procedures. NOTE: referrals not required for Direct Connection HMO. <u>Referrals Forms are NOT required for:</u> *Participating laboratory and radiology services (including mammograms) *Initial pediatric exam of well newborns (inpatient) *Routine vision exams, eyeglass lenses, and frames (member's responsibility) *Routine OB/GYN exams; office-based care resulting from the exams; treatment of acute gynecological conditions; maternity care. ***FAX REFERRAL FORMS TO 800-522-5793 <i>IF QUESTIONS CONTACT EMPIRE'S MEDICAL MANAGEMENT PROGRAM CALL: FOR HMO: 800-441-2411 FOR POS: 800-845-4741</i>
	Behavioral Health Care Management Program 800-626-3643		Empire HealthChoice PO BOX 1407, Church St. Station New York, NY 10008-1407 Include YLN,YLP,YLE, or unique prefix			
	*HMO (HMO /DIRECT HMO/ DIRECT PAY HMO)					
	Behavioral Health Care Management Program 800-635-6626		Empire HealthChoice PO BOX 1407, Church St. Station New York, NY 10008-1407 Include YLN,YLP,YLE, or unique prefix			
	*CHILD HEALTH PLUS					
	Behavioral Health Care Management Program 800-635-6626		Empire HealthChoice PO BOX 1407, Church St. Station New York, NY 10008-1407 Include YLN,YLP,YLE, or unique prefix			
	*SENIOR CARE					
	Behavioral Health Care Management Program 800-395-7792		Empire HealthChoice PO BOX 1407, Church St. Station New York, NY 10008-1407 Include YLN,YLP,YLE, or unique prefix			
	*PPO/EPO					
	Behavioral Health Care Management Program 800-626-3643		Empire HealthChoice PO BOX 1407, Church St. Station New York, NY 10008-1407 Include YLB,YLD,YLE, or unique prefix			
*BlueCard PPO (For Out-of-Area Members ONLY)						
NOT APPLICABLE		Empire HealthChoice BlueCard PPO Program PO BOX 3877, Church St. Station New York, NY 10008-3877				
*TRADITIONAL INDEMNITY						
REFER TO MEMBER'S ID CARD		Empire HealthChoice PO BOX 1407, Church St. Station New York, NY 10008-1407 Include YLA or unique prefix				
REFER TO MEMBER'S ID CARD						