

INSURANCE NAME / PRODUCT LINES	CONTACT NUMBERS	CLAIMS	SERVICES REQUIRING PRECERTIFICATION
<p align="center"><b>ELDERPLAN</b></p> <p>6323 Seventh Ave. Brooklyn, New York 11220  <a href="http://www.elderplan.org">www.elderplan.org</a></p> <p><b>MEDICARE</b></p> <p><b>Audiology Services</b>  One hearing examination every 12 months referral not required.</p> <p><b>Podiatry Services</b>  Members must select a Podiatrist for routine podiatry services. Appointments may be made directly to the Podiatrist without a referral from the PCP</p> <p><b>Gynecological Services</b>  Members may self refer annually for two well woman exams including pap smear and one mammogram. Additionally they are entitled to self refer for unlimited visits to a GYN for acute care as long as the GYN discusses the care with the members PCP</p>	<p align="center"><b>PROVIDER SERVICES</b> 718-921-8418</p> <p align="center"><b>MEMBER SERVICES</b> 718-921-7979 <b>TTY# (hearing impaired)</b> 718-491-7248</p> <p align="center"><b>GRIEVANCES AND APPEALS</b> 718-630-2564 fax-718-491-7226</p> <p align="center"><b>DISENROLLMENTS</b> 800-921-8418</p>	<p align="center"><b>Claims Processing Dept.</b> <b>P.O.BOX 190729</b> <b>BROOKLYN, NEW YORK</b> <b>11219</b></p> <p align="center">718-921-7889</p>	<ul style="list-style-type: none"> <li>*All inpatient admissions</li> <li>*Ambulatory surgical/invasive procedures</li> <li>*Chronic/extended care services</li> <li>*MRI,MRA,PET Scan</li> <li><b>Outpatient Services:</b></li> <li>*Cardiac rehab</li> <li>*Durable medical equipment</li> <li>*EMG</li> <li>*Certified home health services</li> <li>*Infusion therapy</li> <li>*PT/OT/Speech Therapy</li> <li>*Prosthetics/Orthotics</li> <li>*Nutritional Counseling</li> <li>*Medical necessary, non-routine foot care</li> <li>*Sleep studies</li> <li>*Pain Management</li> <li>*Transportation</li> <li>*Acupuncture services</li> <li>*Chiropractic services</li> <li>*Non-participating provider requests</li> </ul>