

Physician/Provider Bulletin

Subject:	Benefit Changes		
Plan:	Coordinated Care Option 1	Bulletin Date:	September 26, 2014
Bulletin Number:	14-007	Effective Date:	November 1, 2014

The purpose of this bulletin is to inform all participating providers that updates have been made to the Coordinated Care Option 1 Benefits.

Effective November 1, 2014 members will be responsible for the following co-payments:

\$2.00 co-payment per PCP visit
\$10.00 co-payment per Specialist visit
\$25.00 co-payment per Emergency room visit*
*waived if visit results in a hospital admission

Providers are responsible for collecting the appropriate co-payments when services are rendered.

Effective January 1, 2015 members will be allowed a maximum of ten (10) Inpatient Hospital Days per calendar year.

If you have questions regarding this bulletin, please contact your Provider Representative at (561) 659-1002.

Please insert this bulletin into your Provider Handbook. The policies and procedures in this bulletin supersede any related policies and procedures within the handbook.