

Participating Carrier/Network List 9.1.24

INSURANCE CARRIER & NETWORKS	PAR WITH	REFRL REQ	OUT OF NTWRK BNFTS	COMMENTS / NOTES
ADMINISTRATIVE CONCEPTS (ACI)	NO	NO	YES	
AETNA MANAGED CARE	YES			
HMO	??	YES	NO	Some plans don't par w/-need to verify
Medicare Advantage	YES	NO	NO	Golden, Golden Choice & Open PFFS only
Out of State Plans	NO	YES	NO	Need to verify if card says Aetna of *** (state name)
POS	YES	NO	YES	
PPO (incl. Affordable Health Choices)	YES	NO	YES	
Premier Care Network	NO		NO	
Traditional Choice/Indemnity	YES	NO	YES	
Worldwide Health	NO	NO	YES	Primarily for out of state/country students
Workers Compensation Program	NO		NO	WILL NOT BE PAID/DO NOT ACCEPT
ALTA HEALTH & LIFE (aka Cigna)	YES	per card	per card	
AMERICAN HEALTH PLAN	YES	per card	per card	
AMERICAN PROGRESSIVE *see Today's Options*	*	*	*	
ANTHEM HEALTH NETWORK	YES	per card	per card	
ARCADIA	NO	YES	YES	
ARCHCARE ADVANTAGE	YES	YES	NO	
BEECHSTREET (Multiplan Network)(Medichoice)	NO	per card	per card	
BLUE CHOICE ROCHESTER OPTIONS	YES	YES	NO	Medicaid Managed care product
BLUE SHIELD CNY/EXCELLUS	YES			See Excellus product tab
BLUE SHIELD UTICA-WATERTOWN	YES			
CCN (Community Care Network)	YES	per card	per card	
CDPHP (Capital District Physicians Health Plan)	YES			HMO plans require referral
Commercial (all products)	YES			
Health Exchange	YES			
Medicare (all products)	YES			
Medicaid (all products)	YES			
CHAMPVA	YES	per card	per card	Secondary payer to all except Medicaid
CIGNA MANAGED CARE (MVP)	YES	per card	per card	*** MUST have MVP logo on card ***
EPO	NO	NO	NO	
Healthy NY	NO	NO	NO	
HMO-Manged Care	NO	YES	YES	*Requires non-par out of network referral *
Indemnity Plan	NO	NO	NO	
Medicaid/Government Products	NO	YES		*Requires non-par out of network referral *
Medicare Advantage	NO			
POS Open Access-HMO	NO	NO	NO	
POS-Managed Care	NO	NO	NO	
CNA HEALTH PARTNERS (Healthscope)	YES	per card	per card	
PCN	YES	per card	per card	
PPO (Alcoa ONLY)	YES	NO	per card	
DEPT. OF CORRECTIONS	YES	YES	NO	Inmates in County Facilities - referral from facility
EMBLEM HEALTH (GHI)	YES	NO	NO	
Affinity Medicare Advantage	YES	NO	per card	Effective 01.01.19 (ID begins w/ letter 'K')
Bridge Network	YES	NO	NO	
Emblem Healthcare Medicare	NO	NO	NO	
Child Health Plus	NO	YES	YES	*Requires non-par out of network referral *
GuildNet Gold	NO	YES	YES	*Requires non-par out of network referral *
HARP (Healthier Life)	NO	YES	YES	*Requires non-par out of network referral *
Health Exchange	NO	NO	NO	
HIP	NO	YES	if authd	*Requires non-par out of network referral *
Medicare Advantage Plans	NO	YES	NO	*Requires non-par out of network referral *
Network Access	YES	per card	per card	
PPO Commercial	YES	NO	YES	
Prime Network	NO	NO	NO	
Select Care (Bronze, Silver, Gold)	NO	YES	YES	*Requires non-par out of network referral *
EMPIRE BLUE CROSS BLUE SHIELD				NOT Health Exchange
PPO / Blue Choice	YES	NO	YES	SUNY Research Employees
EMPIRE PLAN (United HealthCare)	YES	NO	YES	
EXCELLUS BCBS (see separate tab)				See Excellus Products tab
FIDELIS				
Child Health Plus	YES	NO	NO	
Dual Coverage	YES	NO	NO	
Essential Health Plans (E1, E2, E3 & E4)	YES	NO	NO	
Family Health Plus	YES	NO	NO	
Fidelis Care	YES	NO	NO	has Medicaid CIN #
HARP (Healthier Life)	YES	NO	NO	
Health Exchange (Metal Plans)	YES	NO	NO	Card will say Gold, Silver, Bronze etc...
Medicare Advantage	YES	NO	NO	
FIRST HEALTH(Coventry Health)	NO			
FIRST OPTION HEALTH PLAN	YES	per card	NO	
GEHA	NO			
Medicare	NO			
w/ Aetna logo	NO			
w/ UHC logo	YES			
w/ MVP logo	YES			
GEISINGER HEALTH PLAN	NO	NO	NO	
GREAT WEST NETWORK	NO	NO	NO	Even if logo appears on Cigna card/NO
HEALTH FIRST	NO			SELF PAY
HEALTH REPUBLIC/HEALTH EXCHANGE	NO	NO	NO	Even if w/ Cigna logo
HEALTHNOW NETWORK	NO			
HUMANA-PPO	NO	per card	per card	Out of network benefits available
HUMANA-Commercial	NO	per card	NO	
HUMANA-Medicare	NO	per card	per card	
HUMANA Military	YES	YES	per card	PRIME always requires referrals
INDEPENDENT HEALTH	NO	NO	NO	No products or plans
INDIAN HEALTH SERVICES	YES	YES	NO	Inpatient services only

MRL - NO change (for all except Medicare- MH handles that plan

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LIFETIME BENEFIT SOLUTIONS (aka RMSCO)	YES	NO	YES	
LITIGATION/LIABILITY	NO			bill private insurance or process as self-pay
MAGNA CARE	NO			
MARTIN'S POINT	YES	NO	YES	
MEDICAID (New York only)	YES	NO	NO	
MEDICAID (Out of State)	NO	NO	NO	Only w/ New York State Medicaid
MEDICARE	YES	NO	YES	
MEDIGOLD	NO			
MERITAIN HEALTH (plans w/ Aetna logo only)	YES			Card MUST have Aetna logo
MOLINA HEALTHCARE OF NY	YES	NO	NO	New York State Plans only
MULTIPLAN NETWORK	NO	per card	per card	
MVP HEALTH PLAN (Midstate IPA)				
ASO - HMO (self-funded)	YES	NO	NO	
ASO - POS (self-funded)	YES	NO	YES	
ASO - PPO	YES	NO	YES	
ASO - Indemnity	YES	NO	YES	
ASO - EPO	YES	NO	YES	
Basicare PPO	YES	NO	NO	
Comp Care	YES	YES	NO	Medicare plan/PCP required
Essential Health Plans (E1, E2, E3 & E4)	YES	NO	NO	
Gold PPO	YES	NO	YES	Medicare plan
Gold Anywhere PPO	YES	NO	YES	Medicare plan
Gold Value HMO-POS	YES	NO	NO	
Health Exchange	YES	per card	NO	
Health New York (HMO)	YES	YES	NO	
HMO	YES	YES*	NO	PCP required. If OON-need referral
HQ Net	YES	NO	NO	
MVP Medicaid Managed Care	YES	YES*	NO	Referral is sometimes required - call plan for confirmation
MVP Child Health Plus	NO	YES	NO	*Requires non-par out of network referral *
POS (Point of Service)	YES	NO	YES	PCP required
Preferred EPO	YES	NO	NO	
Preferred Gold HMO	YES	NO	YES	Medicare plan
Student Health Plan	YES	NO	NO	
USA Care	YES	NO	NO	
VIP Bold	YES	NO	see plan	Medicare plan
VIP Prime	YES	NO	see plan	Medicare plan
NALC - MVP LOGO ONLY	YES			
NASCENTIA HEALTH DUAL MEDICARE/MCAID	YES	NO	NO	Effective 03/01/19
NORTHEAST COMMUNITY CARE	NO	YES	YES	*Requires non-par out of network referral *
ONEIDA INDIAN NATION	YES	YES	NO	
ONONDAGA INDIAN NATION	YES	YES	NO	
PHCS NETWORK	NO			
POMCO	YES	NO	NO	Oswego CitySchools & Penn Traffice Req referral
PROACTIVE HEALTH	YES	YES	N/A	Justice, Jamesville, Hillbrook, Inmates
SIEBA W/ GHI LOGO ONLY	YES			
ST AID	YES	YES	NO	VOUCHER REQUIRED
ST. LAWRENCE-LEWIS COUNTY	NO	NO	YES	**Payment sent directly to patients**
TOUCHSTONE ADVANTAGE	NO		NO	
TRICARE FOR LIFE	YES	NO	NO	
TRICARE/HUMANA MILITARY	YES	YES	NO	Active Duty & Prime require referrals
Reserve Select Health Plan	YES	NO	YES	
UMR (Previously Pomco)	YES	per card	YES	Some employer group plans require referral
UNITED HEALTHCARE				
Additional Network Benefit, W500 Directory	NO	NO	NO	
AARP Medicare Complete Plan 1	NO	YES		Effective 01/01/17; must have referral from PCP
AARP Medicare Complete Plan 2	NO	YES		Effective 01/01/17; must have referral from PCP
AARP Medicare Complete	NO	YES		Effective 01/01/17; must have referral from PCP
Community Care Plan	YES	NO	NO	
Compass, Compass Balance	NO	NO	NO	
Compass HMO, Compass Balance HMO	NO	YES	NO	
Compass Plus	NO	NO	NO	
Essential Health Plans (E1, E2, E3 & E4)	YES	NO	NO	
HMO	YES	YES	NO	
HRA - Definity (Health Reimbursement Acct)	YES	NO	YES	
HAS - Definity (Health Savings Acct)	YES	NO	YES	
Indemnity	YES	NO	NO	
MD IPA, MD IPA Preferred	NO	NO	NO	
Medicare Advantage (also Passport)	YES	NO	NO	
Medicare Complete (incl Passport plans)	YES	NO	NO	AARP, Secure Horizons
Navigate	YES	YES	YES	Prior auth/referral from PCP needed
Navigate Balanced	YES	YES	YES	Prior auth/referral from PCP needed
Navigate Plus	YES	YES	YES	Prior auth/referral from PCP needed
Optimum Choice HMO	NO	YES	NO	
Optimum Choice Preferred POS	NO	NO	NO	
Oxford United Healthcare (Choice Plus Ntwk)	NO	NO	Varies	United Healthcare card will say Oxford
Signature Value Plan	NO	NO	NO	
UHC Surest Plan	YES			
UHC OPTUM - VA ONLY	YES	YES		
UNIVERA	YES			
UNIVERA SENIOR CHOICE	YES	NO	NO	Medicare Product only
VETERANS ADMINISTRATION (VA)	YES	YES	YES	MUST have referral on site at time of appt
VA CCN Optum (Community Care Network)	YES	YES	YES	
WELLCARE HEALTH PLAN				(aka Today's Options/American Progressive)
Medicare Managed Care	YES	NO		
Medicaid/Medicare Advantage (Dual Plan)	YES	NO	NO	Medicare/Medicaid product
WELLPATH	YES	YES	N/A	Justice, Jamesville, Hillbrook, Inmates
WORKERS COMPENSATION	YES	NO	NO	
US Department of Labor	YES			Effective 9/1/24

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New Carrier is HCS Correctional Management for Onondaga County 8/31/24

