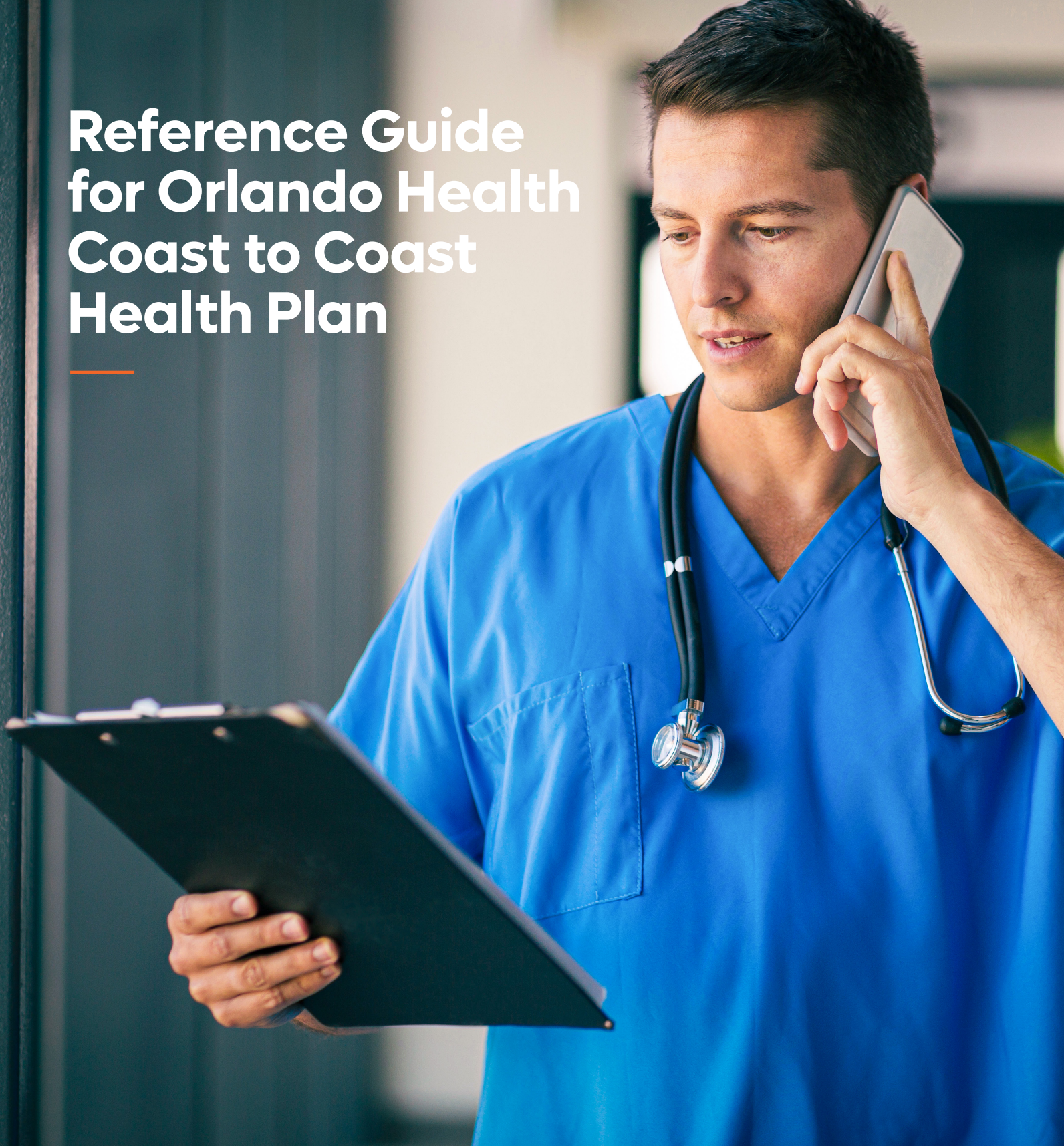


Reference Guide for Orlando Health Coast to Coast Health Plan



**BAYFRONT
HEALTH**

Network

Bayfront Health Network

Please contact the Bayfront Health Network if you want to:

- Submit or inquire about professional credentialing
- Request a copy of your contract
- Request a provider fee schedule
- Update the Provider Directory

Contact:

(321) 843-6700

(321) 843-6895 fax

OrlandoHealthNetwork@OrlandoHealth.com



ID Cards


ID cards were issued to Team Member Health Plan members for 2024. Below are samples of what the card should look like.

Coast to Coast Plus Plan

 A UnitedHealthcare Company ORLANDO HEALTH Issuer (80840) 911-39026-02 Member ID: 39110441 Group Number: 76-413548 Member: ERIC SAMPLE 00 MED		COAST-TO-COAST CARE PLUS PLAN Optum Rx® Rx BIN: 610127 Rx PCN: 01960000 Rx GRP: 01962791 ORLANDO HEALTH Network
TIER 1: \$30 PCP; \$50 SPECIALIST; \$50 URGENT CARE TIER 2: \$45 PCP; \$75 SPECIALIST; \$75 URGENT CARE RX: GEN 20% (\$20 MAX); PREF 20% (\$60 MAX) NON-PREF 20% (\$120 MAX); SPECIALTY 20% (\$200 MAX)		Self-funded plan administered by UMR

This card must be presented each time services are requested. Printed: 09-26-2023		
Medical: Tier 1 Ded: \$750 OOPM: \$4,000* <small>*includes pharmacy</small>	Tier 2 \$1,250 \$4,000*	Out of Net \$4,000 \$8,000
Call UMR CARE at the customer service number listed on this ID Card for plan required prior authorization. FAILURE TO CALL FOR PRIOR AUTHORIZATION MAY REDUCE BENEFITS. For Members: 844-614-8435 go.umr.com/CoasttoCoast-OrlandoHealth Orlando Health Virtual Visits: orlandohealth.com/virtual-visit		
For Providers:	www.umr.com	844-614-8435
Claims: EDI # 39026, UMR, PO Box 30541, Salt Lake City, UT 84130-0541 Choice Plus Network: For use only outside the Orlando Health Network		
UnitedHealthcare® Choice Plus Network		ORLANDO HEALTH Virtual Visit
Pharmacists & Members: 877-559-2955		

Coast to Coast HSA Plan

 A UnitedHealthcare Company ORLANDO HEALTH Issuer (80840) 911-39026-02 Member ID: 39110448 Group Number: 76-413548 Member: RONALD SAMPLE 00 MED Dependents: SPOUSE SAMPLE 01 MED		COAST-TO-COAST HSA CARE PLAN Optum Rx® Rx BIN: 610127 Rx PCN: 01960000 Rx GRP: 01962791 ORLANDO HEALTH Network
Rx - Applies towards Deductible and OOP Max		Self-funded plan administered by UMR

This card must be presented each time services are requested. Printed: 09-26-2023		
Medical: Tier 1 Ded: \$6,000* OOPM: \$9,100/\$10,000* <small>*includes pharmacy</small>	Tier 2 \$6,000* \$10,000*	Out of Net \$14,000 \$14,000
Call UMR CARE at the customer service number listed on this ID Card for plan required prior authorization. FAILURE TO CALL FOR PRIOR AUTHORIZATION MAY REDUCE BENEFITS. For Members: 844-614-8435 go.umr.com/CoasttoCoast-OrlandoHealth Orlando Health Virtual Visits: orlandohealth.com/virtual-visit		
For Providers:	www.umr.com	844-614-8435
Claims: EDI # 39026, UMR, PO Box 30541, Salt Lake City, UT 84130-0541 Choice Plus Network: For use only outside the Orlando Health Network		
UnitedHealthcare® Choice Plus Network		ORLANDO HEALTH Virtual Visit
Pharmacists & Members: 877-559-2955		

Important Information

UMR

UMR is the claims administrator for our medical plan. **Our Group Plan number is 76-413548.**

To verify coverage or benefits or to check a claim status, call our Customer Service team at **(844) 614-8435.**

Submit claims, appeals, payment and verify patient eligibility:

UMR

P.O. Box 30541 | Salt Lake City, UT 84130-0541

EDI Payor #: 39026

Provider.umr.com



Orlando Health Network and United Healthcare Choice Plus

Orlando Health Network and United Healthcare Choice Plus are the Health Plans.

Orlando Health Network is the Tier 1 Provider. United Healthcare is the Tier 2 Provider.

To verify if a provider is in the Orlando Health Network or the United Healthcare Network:

- Call **(844) 614-8435.**
- Visit the UMR website for Orlando Health Network providers at **go.umr.com/OrlandoHealth.**
- Visit the UMR website for United Healthcare Choice Plus Network providers at **umr.com/oss/cms/UMR/Find_a_provider-choiceplus.html.**



OptumRx

OptumRx is the prescription drug vendor. Pharmacists and members can call OptumRx Customer Service at **(877) 559-2955.**

Rx BIN #: 610127

Rx PCN #: 019600000

Rx GRP #: 01962791





Prior Authorization Requirements

The following services require prior authorization by UMR before care is provided from Bayfront Health affiliated physicians and facilities.

- Applied behavioral analysis (ABA) therapy (must establish medical necessity)
- Bariatric surgery (member must be covered on medical plan for minimum of 12 consecutive months to be eligible for this benefit)
- Botox injections
- Clinical trials
- Dental anesthesia
- Durable medical equipment:
 - \$500 for rental
 - \$1,000 for prosthetics
 - \$1,500 for purchase
- Gender reassignment services and surgeries
- Genetic testing
- Genetic testing for hereditary cancer risk (must receive genetic counseling provided by a Bayfront Health certified genetic counselor prior to genetic testing for hereditary cancer risk screening)
- High-end radiology: positron emission tomography (PET), computed tomography angiography (CTA), magnetic resonance angiography (MRA), and single-photon emission computed tomography (SPECT) only
- Home health care
- Inpatient hospitalization:
 - Inpatient mental health and substance use disorder
 - Inpatient long term acute care (LTAC)
 - Inpatient maternity stays over 48 hours for normal delivery and 96 hours for cesarean delivery
 - Intensive outpatient treatment
 - Transplant and transplant related services
- Intravenous immune globulin (IVIG)
- Jaw surgeries
- Rhinoplasty, septoplasty, and other nasal structure surgeries
- Non-emergent air ambulance
- Outpatient rehabilitative therapies (prior authorization required after 24th visit):
 - Occupational therapy
 - Physical therapy
 - Speech therapy
- Partial hospitalization program
- Enteral feeding
- Pulmonary rehabilitation
- Reconstructive surgery (including breast reconstruction not due to cancer or a burn)
- Residential treatment
- Skilled nursing facility (extended care facilities)
- All specialty medications found on the following listing, regardless of place of service: www.umrwebapps.com/SpecialtyInjectable/
- Specialty medications administered in a physician's office that exceed \$2,000 per dose (even if the medication is not found on the specialty medication listing)
- Specialty prenatal genetic lab testing (must receive genetic counseling provided by a Bayfront Health certified genetic counselor prior to genetic testing for specialty prenatal genetic lab testing)
- Treatment of varicose veins of the extremities (sclerotherapy)

Orlando Health Directory

Bayfront Health St. Petersburg

603 7th St. South | St. Petersburg, FL 33701

(727) 823-1234

BayfrontHealth.com

Bayfront Health Emergency Room – Crossroads

1800 66th St. North | St. Petersburg, FL 33710

Bayfront Health Emergency Room – Pinellas Park

3070 Grand Ave. | Pinellas Park, FL 33782

Orlando Health Arnold Palmer Hospital for Children

92 W. Miller St. | Orlando, FL 32806

(321) 843-7777

ArnoldPalmerHospital.com

Orlando Health Dr. P. Phillips Hospital

9400 Turkey Lake Rd. | Orlando, FL 32819

(407) 351-8500

OrlandoHealth.com/DrPPhillipsHospital

Orlando Health – Health Central Hospital

10000 W. Colonial Dr. | Ocoee, FL 34761

(407) 296-1000

OrlandoHealth.com/HealthCentralHospital

Orlando Health Cancer Institute

1400 S. Orange Ave. | Orlando, FL 32806

(321) 841-1869

OrlandoHealthCancer.com

Orlando Health Horizon West Hospital

17000 Porter Rd. | Winter Garden, FL 34787

(407) 407-0000

OrlandoHealth.com/HorizonWestHospital

Orlando Health Orlando Regional Medical Center

52 W. Underwood St. | Orlando, FL 32806

(321) 841-5111

OrlandoHealth.com/ORMC

Orlando Health South Lake Hospital

1900 Don Wickham Dr. | Clermont, FL 34711

(352) 394-4071

SouthLakeHospital.com

Orlando Health South Seminole Hospital

555 W. State Road 434 | Longwood, FL 32750

(407) 767-1200

OrlandoHealth.com/SouthSeminoleHospital

Orlando Health St. Cloud Hospital

2906 17th St. | St. Cloud, FL 34769

(407) 892-2135

OrlandoHealth.com/StCloud

Orlando Health Winnie Palmer Hospital for Women and Babies

83 W. Miller St. | Orlando, FL 32806

(321) 843-1110

WinniePalmerHospital.com

Orlando Health Emergency Room – Lake Mary

380 Rinehart Rd. | Lake Mary, FL 32746

(321) 842-0550

Orlando Health Emergency Room – Osceola

1001 E. Osceola Pkwy. | Kissimmee, FL 34744

(321) 842-1267

Orlando Health Emergency Room – Randal Park

10155 Dowden Rd. | Orlando, FL 32832

(321) 842-2280

Orlando Health South Lake Hospital Emergency Room – Blue Cedar

22316 US Highway 27 | Leesburg, FL 34748

(352) 536-8831

Orlando Health South Lake Hospital Joe H. and Loretta Scott Emergency Room – Four Corners

16966 N. Cagan Ridge Blvd. | Clermont, FL 34714

(352) 536-8821

Orlando Health Emergency Room – Reunion Village

8011 Osceola Polk Line Rd. | Davenport, FL 33896

(407) 407-0200

2024 Bayfront Health Medical Benefits Overview

Medical Coverage	Coast to Coast Care Plus			Coast to Coast HSA Care		
	Tier 1 Network (OH Network Providers)	Tier 2 Network (UHC Providers)	Out-of-Network	Tier 1 Network (OH Network Providers)	Tier 2 Network (UHC Providers)	Out-of-Network
Annual Deductible Single/Family	\$750/\$1,500	\$1,250/\$2,500	\$4,000/\$8,000	\$3,000/\$6,000	\$3,000/\$6,000	\$7,000/\$14,000
Individual Per Family Pays	\$750	\$1,250	\$4,000	\$6,000	\$6,000	\$14,000
Out of Pocket Max, Single/Family	\$4,000/\$8,000	\$4,000/\$8,000	\$8,000/\$16,000	\$5,000/\$10,000	\$5,000/\$10,000	\$7,000/\$14,000
General Coinsurance	0%	20%	50%	20%	20%	0%
Office Visits						
Preventive Care	\$0	\$0	Deductible and Coinsurance	\$0	\$0	Deductible
Virtual Visit	\$0	\$45 PCP \$75 Specialist	Deductible and Coinsurance	Deductible	Deductible and Coinsurance	Deductible
Primary Care Physician (PCP)	\$30	\$45	Deductible and Coinsurance	Deductible and Coinsurance	Deductible and Coinsurance	Deductible
Specialist	\$50	\$75	Deductible and Coinsurance	Deductible and Coinsurance	Deductible and Coinsurance	Deductible
Maternity Care (Physician Services)	\$300	\$300 and Coinsurance	Deductible and Coinsurance	Deductible and Coinsurance	Deductible and Coinsurance	Deductible
Emergency Services						
Urgent Care Services	\$50 CareSpot \$75 Others	\$75	Deductible and Coinsurance	Deductible and Coinsurance	Deductible and Coinsurance	Deductible
Emergency Department Visit	Deductible, then \$250*	Deductible, then \$250*	**	Deductible and Coinsurance	Deductible and Coinsurance	**
Ambulance Services	\$250	\$250	**	Deductible and Coinsurance	Deductible and Coinsurance	**
Outpatient Services						
Minor Diagnostics (Labs)	\$25 OH \$40 Others	\$40	Deductible and Coinsurance	Deductible and Coinsurance	Deductible and Coinsurance	Deductible
Minor Diagnostics (X-rays)	\$25 OH \$40 Others	\$40	Deductible and Coinsurance	Deductible and Coinsurance	Deductible and Coinsurance	Deductible
Major Diagnostics	Deductible, then \$350	Deductible, then \$350 and Coinsurance	Deductible and Coinsurance	Deductible and Coinsurance	Deductible and Coinsurance	Deductible
Outpatient Surgery	Deductible, then \$350	Deductible, then \$350 and Coinsurance	Deductible and Coinsurance	Deductible and Coinsurance	Deductible and Coinsurance	Deductible
Durable Medical Equipment (DME)	Purchase \$75 Rental \$50	Purchase \$75 Rental \$50	Deductible and Coinsurance	Deductible and Coinsurance	Deductible and Coinsurance	Deductible
Inpatient Services						
Inpatient Services	Deductible, then \$500 daily, 3 day max	Deductible, then \$500 daily, 3 day max and Coinsurance	Deductible and Coinsurance	Deductible and Coinsurance	Deductible and Coinsurance	Deductible

*Waived if admitted. **Same as in-network, if true emergency.

Prescription Drug Plan

	Coast to Coast Care Plus		Coast to Coast HSA Care	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Annual Deductible – Single/Family	N/A		\$3,000/\$6,000	\$7,000/\$14,000
Prescription Drugs Retail (Up to 30-Day Supply)				
	Coinsurance	Maximum		
Tier 1 Generic	20%	\$20	Deductible and Coinsurance	File claim with OptumRX
Tier 2 Preferred Brand	20%	\$60	Deductible and Coinsurance	File claim with OptumRX
Tier 3 Non-Preferred Brand	20%	\$120	Deductible and Coinsurance	File claim with OptumRX
Tier 4 Specialty	20%	\$200	Deductible and Coinsurance	File claim with OptumRX
Prescription Drugs – Mail-Order or Advantage 90 (Mandatory for Maintenance Drugs)				
	Coinsurance	Maximum		
Tier 1 Generic	20%	\$50	Deductible and Coinsurance	File claim with OptumRX
Tier 2 Preferred Brand	20%	\$150	Deductible and Coinsurance	File claim with OptumRX
Tier 3 Non-Preferred Brand	20%	\$300	Deductible and Coinsurance	File claim with OptumRX
Tier 4 Specialty Medications	N/A	N/A	N/A	N/A
Specialty Medications and Prior Authorizations				

Certain medications, including specialty medications, require a prior authorization before they will be covered by your plan. Specialty medications will be limited to a 30-day supply and must be obtained from a Scripts Specialty Pharmacy.

If you are currently taking any specialty medications and need to request prior authorization, please call our clinical call center at (800) 711-4555.

Network Lab

Bayfront Health team members have a \$25 copay at this location for lab services.

Bayfront Health St. Petersburg

603 7th St. South
 St. Petersburg, FL 33701
(727) 823-1234



To learn more, visit OrlandoHealthNetwork.com

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HEALTH** | Network