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## Insurance Guide

Subject to change without notice

**\*\* We do NOT accept : Exchange plans or Standard Medicaid \*\***

**This is only a guide and we advise you to refer to your insurance company to confirm benefits and our participation in their network**

Insurance	Accepted Plan	Not Accepted Plan	Referral Requirements
<b>Aetna</b>	Commercial plans (through employer), PPO, POS, HMO Open Access Only, Aetna Medicare PPO, Aetna Medicare HMO	Some EPO plans are NOT in Network *Must check with Insurance carrier*	Referral mostly <b>NOT</b> required/Aetna Medicare requires a referral/authorization
<b>Avmed</b>	Commercial plans (through employer), Avmed Medicare HMO	NO Avmed Engage	Referral <b>NOT</b> required
<b>Blue Cross Blue Sheild</b>	Commercial plans (through employer), Blue Options PPO, POS, OOS PPO, BCBS Medicare PPO	My Blue, Blue Care, Blue Select, Florida Blue Cross Blue Sheild HMO	Referral mostly <b>NOT</b> required/BCBS Medicare PPO requires authorization for PFR
<b>Care Plus</b>	Medicare HMO	-	Referral/Authorization required
<b>Cigna</b>	Commercial plans (through employer), PPO, POS, HMO OPEN ACCESS ONLY	NO Cigna Local Access Plus	Referral/Authorization required
<b>Coventry</b>	PPO plans only	HMO plans	Referral/Authorization required
<b>Humana</b>	Commercial plans (through employer)	HMO plans (even through employer), Humana Gold Plus, Humana Medicare, Humana Medicaid	Referral/Authorization required
<b>Medicare</b>	Medicare primary and secondary (Part B)	-	Referral required
<b>Memorial Managed Health Plan</b>	Memorial Managed Care plan for employees	NO PFR	NO PFR
<b>United Healthcare</b>	Commercial plans (through employer), NHP Direct Access, Choice Plus, Options PPO, AARP Medicare Complete/Complete Choice, Golden Rule, UMR	-	Referral NOT required
<b>Golden Rule</b>	United Golden Rule/Navigate (Navigate must be activated)	-	Referral NOT required
<b>UMR</b>	UMR	-	Referral NOT required
<b>Simply</b>	Medicare <i>ONLY</i>	NO Medicaid	Referral required for office visits and authorization required for procedures
<b>Preferred Care Partners</b>	Medicare <i>ONLY</i>	-	Referral/authorization mostly <b>NOT</b> required, No PFR
<b>Medica</b>	Medicare <i>ONLY</i>	-	Referral required for office visits and authorization required for procedures
<b>Oscar</b>	PPO/HMO plans	-	Need to verify if we are <b>IN Network</b>
<b>NHP</b>	All Plans	NO Medicaid	Referral NOT required