



## MEMBER QUICK REFERENCE GUIDE

### VERIFY USFHP MEMBER ELIGIBILITY

- Always carry your US Family Health Plan identification card.
- Always present your card to your providers and ask them to make a copy of the front and back.

### CO-PAYMENTS FOR OFFICE VISITS

- Active duty dependents: \$ 0
- Retirees (regardless of age)
  - WITH Medicare Part B: \$ 0
  - WITHOUT Medicare Part B: \$12



### CO-PAYMENTS FOR PHARMACY

Prescription pharmacy drugs (up to 90 day supply)  
\$3 generic/\$9 brand/\$22 third tier

### EXCEPTION TO CO-PAYMENTS (USE PAR PROVIDER)

#### No co-payments collected for:

- Annual preventative health exam (1 every 12 months)
- Annual preventative eye examination (1 every 12 months)
- Annual preventative Gynecology exam (1 every 12 months)
- Well-baby care up to age 6 years
- Well-child care age 6 and older (1 every 12 months)
- Obstetrical care
- Immunizations, Laboratory, Radiology
- Chemotherapy & Radiation Treatments
- Hospice
- Home Care

### REFERRALS

- Referrals to specialists must be obtained from your Primary Care Provider (PCP).
- Referrals are valid for 6 months from date of referral. First visit must be within sixty (60) days.
- Referrals should be made to participating providers. You can find network providers using the provider locator on our website at [www.usfhp.net](http://www.usfhp.net) or by calling Customer Service at 800-241-4848.
- **Referrals to Out of Network Providers require Pre-authorization from Utilization Review in addition to a referral from your PCP. Your PCP is responsible to initiate the request.**

### MEMBER PORTAL ON WEBSITE

- Used to verify Benefits, Claims or Authorization Status information. First time users need to select a user ID Name and password. Access the portal at [www.usfhp.net](http://www.usfhp.net).

### CLAIMS FILING

- Your provider should not bill Medicare, Medicaid, or the other TRICARE Programs.
- If you have Other Commercial Health Insurance (other than Medicare) it is primary to US Family Health Plan.
- Claims Address (medical):
  - US Family Health Plan
  - PO Box 830745
  - Birmingham, AL 35283-0745

### DURABLE MEDICAL EQUIPMENT (DME)

**Apria** is the Preferred Provider for most DME, including but limited to: home oxygen systems, respiratory equipment and systems, ambulatory equipment, hospital beds, infusion therapy. Contact **Apria** at **800-294-2275**.

### LABORATORY

ALL lab work should be done at a Labcorp Service Center or participating hospital. Contact **Labcorp** at **800-788-9091** for local service centers and any other questions or visit [www.labcorp.com](http://www.labcorp.com).

### AUTHORIZATIONS

Pre-authorization is required for the following:

- **Inpatient Elective Admissions**
- **Select Outpatient or Ambulatory Surgery:**
  - All Home Health Care Services
  - All Hospice Care Services
  - Many Prosthetics, Orthotics & DME not obtained from Apria.
  - For a list of outpatient and facility services that require prior authorization, please refer to the back of this document.

**Providers can call 866-390-0933 to pre-authorize services.**

### PHARMACY

- Call **Maxor Plus** at **800-687-0707** for questions about the preferred drug list or if medication is denied.
- Members should carry a copy of the Preferred Drug List (located in member newsletter or at [www.usfhp.net](http://www.usfhp.net)) to all medical appointments.
- Maintenance medication must be obtained through
- Maxor Mail Order at **866-408-2459, ext. 3**.

**24 HOUR NURSE ADVICE LINE: 866-390-0933**

**CASE MGMT/DISEASE MGMT: 866-390-0933**

**BEHAVIORAL HEALTH: 866-390-0933**

**ORTHONET (outpatient PT/OT): 800-401-0062**

## Authorizations

All services below require prior authorization.

- adjunctive dental
- arthroscopy
- augmentative communication device (ACD)
- biofeedback
- cardiac rehabilitation
- carpal tunnel surgery
- carotid angiography
- chelation therapy
- coronary angiogram
- cosmetic/plastic surgical procedures
- CT angiography
- dental anesthesia and related institutional services
- diabetic education
- dialysis
- electrophysiologic (EP) Study/Ablation
- endoscopic retrograde cholangiopancreatography (ERCP)
- gamma knife radiosurgery
- hearing aid and hearing aid services (benefit limited to active duty dependents)
- home birth
- home infusion therapy
- Hyperbaric Oxygen Therapy
- Indium Pentetreotide (Octreoscan) Scintigraphy
- Injectibles, select and covered under medical benefit
- laminectomy/microdiscectomy
- laparoscopic procedures, select
- lithotripsy (except renal lithotripsy)
- Magnetic Resonance Angiography (MRA)
- Magnetic Resonance Imaging (MRI)
- medical transport, non-emergent
- meniscectomy
- Mental health/behavioral health (except first 8 visits with PAR BH provider)
- NCI trial participation (phase I, II and III)
- Neuropsychological testing
- nutritional therapy infusion
- pain management services
- percutaneous transluminal coronary angioplasty (PTCA)
- PET scans
- psychological testing
- pulmonary rehabilitation
- septoplasty/rhinoplasty
- single Photon emission Computer Tomography (SPECT)
- speech therapy
- stereotactic radiosurgery
- vertebroplasty
- virtual colonoscopy (CT colonoscopy)

## General Exclusions

Refer to your Member Handbook for a complete list of exclusions

- Services provided or charges incurred prior to or after the effective date of coverage under the Plan
- Care or treatment as a result of being engaged in an illegal occupation or commission of, or attempted commission of, a felony or assault
- Charges or services for which you or your covered dependent(s) are not legally required to pay, or that would not have been made if coverage had not existed
- Charges for missed appointments, telephone consultations, or the completion of medical reports or certification services
- Services and drugs not prescribed or authorized by your primary care physician (PCP) or a specialist to whom you were referred
- Services not considered medically necessary for your diagnosis and treatment, or services that are experimental/investigational or are of a research nature
- Any services provided for education, employment, licensing, immigration, elective travel, or other administrative reasons
- Custodial Care
- Chiropractic Care
- Complimentary Alternative Medicine
- Smoking Cessation Programs