

INSURANCE/PAYERS CURRENTLY FILED BY TOWN PEDIATRICS 2018

AETNA ALL PLANS	GOLDEN RULE	OPTIMA HEALTH FAMILY CARE
ALLEGANT	GROUP BENEFIT SERVICES	OXFORD HEALTH PLANS
ALLSAVERS	GUARDIAN PCHS	PACIFIC SOURCE HEALTH PLANS
AMS-UNITED HEALTHCARE	HARVARD PILGRIM HEALTHCARE	PHCS
ANTHEM BLUESHIELD PPO	HCC MEDICAL INSURANCE SERVICES	PHCS CHRISTIAN CARE
ANTHEM FEDERAL EMPLOYEE PLANS	HEALTH EQUITY INC	PHCS/LOOMIS/PHCS QUALCHOICE
ANTHEM HEALTHKEEPERS HMO	HEALTHSCOPE	PREFERRED HEALTH PLAN
ANTHEM HEALTHKEEPERS PLUS	HEALTHSMART BENEFIT SOLUTIONS	PROVIDENCE HEALTH PLAN
ASSURANT HEALTH	HUMANA	QUALCHOICE
BLUESHIELD BLUESHIELD PPO	INFORMED	SELMAN & COMPANY ASI
CAREFIRST-ALL PLANS	INNOVATION HEALTH(AETNA)	SOUTHERN HEALTH SERVICES
CIGNA HMO	KAISER PPO-OUT OF NETWORK OPTION	TRICARE JOHNS HOPKINS HEALTHCARE-USFHP
CIGNA NALC	LHS/NEDCOST SOLUTIONS LLC	TRICARE-HUMANA MILITARY
CIGNA OPEN ACCESS	LUMENOS	UMR
CIGNA OPEN ACCESS LOCAL	MAILHANDLERS BENEFIT PLAN	UNITED HEALTHCARE CHOICE PLUS
CIGNA OPEN ACCESS PLUS	MED SENSE GUARANTEED ASSOCIATION	UNITED HEALTHCARE CHOICE
CIGNA POS	MEDISHARE	UNITED HEALTHCARE COMMUNITY PLAN
CIGNA PPO	MEDSENSE GUARANTEED PLAN	UNITED HEALTHCARE MDIPA
COMPASS ROSE HEALTH PLAN	MEGA LIFE AND HEALTH	UNITED HEALTHCARE OPTIMUM CHOICE
CORESOURCE/PHCS	MERITAIN HEALTH	UNITED HEALTHCARE OPTIONS PPO
COVENTRY HEALTH	MIDWEST HEALTH PLAN	VIRGINIA DMAS-MEDICAID
EVERGREEN HEALTH	MOAA MEDIPLUS	
FOREIGN SERVICE BENEFIT PLAN(AETNA)	MOUNTAIN STATE BLUE SHIELD	
FREEDOM LIFE	MULTIPLAN	
GEHA	OPTIMA CHOICE	

WE ARE NOT IN NETWORK WITH:

CIGNA CONNECT AND CIGNA SUREFIT PLANS
 AETNA BETTER HEALTH OF VIRGINIA
 KAISER HMO PLANS
 MAGELLAN COMPLETE CARE OF VIRGINIA(MEDICAID MANAGED CARE)
 VIRGINIA PREMIER(MEDICAID MANAGED CARE)
 ALL OUT OF STATE MEDICAID PLANS

This list contains Town Pediatrics most

commonly billed insurance carriers,

which is subject to change, and is not all

inclusive. Please inquire about other plans.

If you have any questions regarding a specific

insurance carrier, please contact our billing

office.



Town Pediatrics, PC



Patricia F. Rappaport, MD, FAAP
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ATTENTION MEDICAID APPLICANTS:

As a courtesy we will see your child while your application is pending approval by the Department of Medical Assistance Services. You must provide your child's Medicaid identification number within 30 days of their initial visit in our office. Should you fail to provide the information in a timely manner, all charges incurred at our office will be the responsibility of the parent/guardian. The charges will be due in full 30 days from the initial visit.

The Department of Medical Assistance Services, upon approval of your application will provide your child with a Medicaid policy. They will often then transition that policy to a Managed Care Organization. Once that occurs, you are required to provide the updated Managed Care policy information to our office as soon as the transition occurs. We can only treat patients who are enrolled in a Medicaid plan or an Anthem Healthkeepers Plus, INTotal Health, Optima Family Care, and UnitedHealthcare Community Plan managed care plans. Parents may designate which Managed Care Organization their child is enrolled in by contacting their social worker.

Participating Networks:

Medicaid FFS/FAMIS

Anthem Healthkeepers Plus, INTotal Health, Optima Family Care, UnitedHealthcare Community Plan

If your child is enrolled in any of the following plans at the time of the visit the parent/guardian will be responsible for paying for all charges incurred on that date of service.

Out of Network (MCO):

Aetna Better Health of Virginia

Magellan Complete Care

Virginia Premier

Patient Name _____ DOB _____

Parent/Guardian _____

Signature _____ Date _____