

AgeWell New York, LLC
LiveWell (HMO)
PlanWell (HMO)
FeelWell (HMO SNP)
CareWell (HMO SNP)
2019 Provider and Pharmacy Directory

This directory is current as of December 1, 2019

This directory provides a list of AgeWell New York's current network providers.

This directory is for Bronx, Kings (Brooklyn), Nassau, New York (Manhattan), Queens, Suffolk, and Westchester, New York.

To access AgeWell New York's online provider directory, you can visit www.agewellnewyork.com. For any questions about the information contained in this directory, please call our Member Service Department at 1-866-586-8044, 7 days a week from 8:00 am to 8:00 pm. TTY users should call TTY 1-800-662-1220.

AgeWell New York, LLC is a Health Maintenance Organization (HMO) plan with a Medicare contract and a Coordination of Benefits Agreement with New York State Department of Health. Enrollment in AgeWell New York, LLC depends on contract renewal.

ATTENTION: If you speak Spanish, language assistance services, free of charge, are available to you. Call 1-866-586-8044 (TTY: 1-800-662-1220).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1- 866-586-8044 (TTY: 1-800-662-1220).

Assistance services for other languages are also available free of charge at the number above.

Section 1 – Introduction

This directory provides a list of AgeWell New York’s network providers. To get detailed information about your health care coverage, please see your Evidence of Coverage (EOC).

You will have to choose one of our network providers listed in this directory to be your **Primary Care Provider (PCP)**. Generally, you must get your health care services from your PCP. A Primary Care Provider (PCP) is a practitioner, such as an Internist or Nurse Practitioner, who gives you routine health care.

The network providers listed in this directory have agreed to provide you with your health care services. You may go to any of our network providers listed in this directory; however, some services may require prior authorization. If you have been going to one network provider, you are not required to continue to go to that same provider. In some cases, you may get covered services from non-network providers.

Out-of-Network Providers

AgeWell New York does not cover out of network services unless previously authorized by our Management team. You must use network providers except in emergency or urgent care situations or for out-of-area renal dialysis or other services. If you obtain routine care from out-of-network providers, neither Medicare nor AgeWell New York will be responsible for the costs.

If an out-of-network provider sends you a bill that you think we should pay, you should send the bill to us for processing and determination of liability at the address provided below:

AgeWell New York
Attention: Claims Department
1991 Marcus Ave, Suite M201
Lake Success, NY 11042

Emergency care or Urgent Care

If you have a medical emergency get help as quickly as possible. Call 911 for help or go to the nearest emergency room or hospital. Call for an ambulance if you need it. You do not need to get approval or a referral first from your PCP. As soon as possible, make sure that our plan has been told about your emergency. We need to follow up on your emergency care. You or someone else should call to tell us about your emergency care, usually within 48 hours. Please call Member Services at 1-866-586-8044 from 8:00 am to 8:00 pm, 7 days a week, TTY users should call 1-

800-662-1220, the Member Services contact numbers can be found on the back of your member ID card.

What is the service area for AgeWell New York?

The counties in our service area for LiveWell (HMO), PlanWell (HMO), and FeelWell (HMO SNP), are listed below.

Bronx, Kings (Brooklyn), Nassau, New York (Manhattan), Queens, and Westchester

The counties in our service area for CareWell (HMO SNP) are listed below.

Bronx, Kings (Brooklyn), Nassau, New York (Manhattan), Queens, Suffolk, and Westchester

How do you find AgeWell New York providers in your area?

This is a county specific directory which is sorted by specialty and alphabetical order, so that you can easily find a plan provider that is in your area and fits your medical needs.

If you have questions about AgeWell New York, or require assistance in selecting a PCP, please call our Member Service Department at 1-866-586-8044, 7 days a week from 8:00 am to 8:00 pm TTY users should call 1-800-662-1220, or, visit www.agewellnewyork.com.

Section 2 – List of Network Providers

The provider and pharmacy directory lists the following types of providers: Hospitals, PCPs, Specialists, Outpatient Mental Health Providers, Skilled Nursing Facilities, Ancillary Providers and Pharmacies. Types of providers and pharmacies can be identified and located according to the table of contents. Providers identified with an asterisk also accept Medicaid.

Pharmacy Section

Section 3 – Pharmacy Introduction

This booklet provides a list of AgeWell New York’s network pharmacies. To get a complete description of your prescription coverage, including how to fill your prescriptions, please review the Evidence of Coverage and AgeWell New York’s formulary.

We call the pharmacies on this list our “network pharmacies” because we have made arrangements with them to provide prescription drugs to Plan members. In most cases, your prescriptions are covered under AgeWell New York only if they are filled at a network pharmacy or through our mail order pharmacy service. Once you go to one pharmacy, you are not required to continue going to the same pharmacy to fill your prescription but can switch to any other of our network pharmacies. We will fill prescriptions at non-network pharmacies under certain circumstances as described in your Evidence of Coverage.

All network pharmacies may not be listed in this directory. Pharmacies may have been added or removed from the list after this directory was printed. This means the pharmacies listed here may no longer be in our network, or there may be newer pharmacies in our network that are not listed. This list is current as of December 1, 2019. For the most current list, please contact us. Our contact information appears on the front and back cover pages.

You can get prescription drugs shipped to your home through our network mail order delivery program “which is called “EnvisionMail”. For more information, please contact us or see the mail order section of this pharmacy directory.

This directory is for Bronx, Kings (Brooklyn), Nassau, New York (Manhattan), Queens, Suffolk, and Westchester, New York, which includes the area in which you live. However, we cover a larger service area, and there are more pharmacies where your prescriptions may be covered by our Plan. For information on more pharmacies in our plan network not listed in this directory please contact AgeWell New York Member Services at 1-866-586-8044 or, for TTY users, 1-800-662-1220, 7 days a week from 8:00 am – 8:00 pm or visit www.agewellnewyork.com.

If you have questions about any of the above, please see the first and last cover pages of this directory for information on how to contact us.

Mail Order Pharmacy
EnvisionMail

1-866-909-5170 (TTY: 1-800-662-1220)

www.envisionpharmacies.com

You can get prescription drugs shipped to your home through our network mail order delivery program which is called “EnvisionMail”.

For refills of your mail order prescriptions, you have the option to sign up for an automatic refill program EnvisionMail. Under this program, we will start to process your next refill automatically when our records show that you should be close to running out of your drug. We will contact you prior to shipping each refill to make sure you are in need of more medication. You can cancel scheduled refills if you have enough of your medication or if your medication has changed. If you choose not to use the auto refill program, please contact us 10 days before you think the drugs you have on hand will run out to make sure your next order is shipped to you in time. To opt out of the automatic refill program, please contact us by calling 1-866-909-5170.

Typically, you should expect to receive your prescription drugs within 10 days from the time that the mail order pharmacy receives the order. If you do not receive your prescription drug(s) within this time, please contact us at our Toll-free number 1-866-909-5170 and TTY number/TRS Relay number 1-800-662-1220.

Home Infusion Pharmacies

Home Infusion Pharmacies specialize in provision of infusion therapies to patients in their homes or other alternate sites. To get the most up-to-date information about AgeWell New York’s Home Infusion Pharmacies please visit www.agewellnewyork.com or call our Member Service Department at 1-866- 586-8044 (TTY users should call 1-800-662- 1220) 7 days a week from 8:00 am to 8:00 pm.

Long-Term Care Pharmacies

Residents of a long-term care facility may access their prescription drugs covered under AgeWell New York through the facility’s long-term care pharmacy or another network long-term care pharmacy. To get the most up to date information about AgeWell New York’s Long Term Care Pharmacies, please visit www.agewellnewyork.com or call our Member Service

Department at 1-866- 586-8044 (TTY users should call 1-800-662- 1220) 7 days a week from 8:00 am to 8:00 pm.

Notice of Non-Discrimination

AgeWell New York complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. AgeWell New York does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. AgeWell New York provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages

If you need these services, contact AgeWell New York Member Services at 1-866-586-8044. If you believe that AgeWell New York has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

AgeWell New York
Civil Rights Coordination Unit
1991 Marcus Avenue Suite M201
Lake Success, New York 11042-2057
1-866-586-8044
TTY/TDD: 1-800-662-1220
Fax: 855-895-0778

Email: civilrightsunit@agewellnewyork.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordination Unit is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, TDD: 1-800-537-7697

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Multi-Language Insert

English:

ATTENTION: If you do not speak English, language assistance services, free of charge, are available to you. Call 1-866-586-8044 (TTY: 1-800-662-1220).

Spanish:

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1- 866-586-8044 (TTY: 1-800-662-1220).

Chinese:

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-866-586-8044 (TTY : 1-800-662-1220)。

Russian:

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1- 866-586-8044 (телетайп: 1-800-662-1220).

French Creole:

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1- 866-586-8044 (TTY: 1-800-662-1220).

Korean:

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-866-586-8044 (TTY: 1-1-800-662-1220)번으로 전화해 주십시오.

Italian:

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-866-586-8044 (TTY: 1-800-662-1220).

Yiddish:

אויפֿמערקזאָם: אויב איר רעדט אידיש, זענען פֿארהאן פֿאר אייך שפראך הילף סערוויסעס פֿריי פֿון אפצאל. רופ-1-866-586-8044 (TTY: 1-800-662-1220).

Bengali:

লক্ষ্য করুনঃ যদি আপনি বাংলা, কথা বলতে পারেন, তাহলে নিঃখরচায় ভাষা সহায়তা পরষিবো উপলব্ধ আছে। ফোন করুন ১-৮৬৬-৫৮৬-৮০৪৪ (TTY: ১-৮০০-৬৬২-১২২০)।

Polish:

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1- 866-586-8044 (TTY: 1-800-662-1220).

Arabic:

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-866-586-8044 (رقم هاتف الصم والبكم: 1-800-662-1220).

French:

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1- 866-586-8044 (ATS : 1-800-662-1220).

Urdu :

خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں 1-866-586-8044 (TTY: 1-800-662-1220).

Tagalog:

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-866-586-8044 (TTY: 1-800-662-1220).

Greek:

ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1- 866-586-8044 (TTY: 1-800-662-1220).

Albanian: KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në 1- 866-586-8044 (TTY: 1-800-662-1220).

