oscar

Welcome to our New York Medicare Advantage 2022 Network.

We're excited to have you in our New York Medicare Advantage network for 2022.

For more information on working with Oscar please go to or call us at 855-672-2755 with any questions.

We look forward to working with you again.

From, The Oscar Provider Team

oscar



2022 MA Fine Print

Our plan

Our Medicare Advantage plan is an HMO (Health Maintenance Organization) plan, which means our members generally need to use in-network providers to get care.

We offer the following products in your market:

Medicare Advantage

Oscar also offers Individual and Family Plans (purchased on or off the Marketplace Exchange) in New York. If you are in-network for our commercial lines of business you will receive another welcome packet. If you have questions about your network status, please call 855-672-2755 for more information.

Our network

Our network is available to all Oscar plans in the following counties:

New York

Bronx Orange Rockland

Search for in-network providers, labs, pharmacies, and hospitals* on hioscar.com/search.

^{*}See Hospital and large physician group lists at the end of this packet for more details



Connect with us by phone

Call 855-672-2755, Mon-Fri: 8am-6pm EST.

Connect with us electronically

You can use Oscar's Provider Resources site and Provider Portal to find everything you need to work with Oscar. We built these sites to simplify your team's workflows so that you can focus on delivering great care to members.

Go to hioscar.com/providers to:

- Request to join the network.
- Review the provider manual for reimbursement policies, member rights and responsibilities, and more.
- Browse resources such as:
 - · Provider Manuals for all markets.
 - Policies (Clinical Guidelines, Reimbursement Policies, etc.) and forms.
 - Tutorials and How-To-Guides on using the provider portal.
- Search our provider directory for in-network specialists, lab facilities and more.
- Search our drug formulary to find out what medications Oscar covers.

Create a Provider Portal account to complete the following tasks online:

- Check member eligibility.
- Check status of claims.
- Submit prior authorizations electronically.
- Sign up for electronic payments.
- Review members' clinical information.
- Connect your staff to your organization (practice) account and grant permission to complete tasks in the Portal.

Note: If your office is unable to access the online resources and you would like a printed copy of any of the materials (provider manual, etc) faxed to you, please contact the Oscar Provider Team.855-672-2755.



Reporting Roster Changes to Oscar

Please tell us about any changes to information about your practice and providers, including:

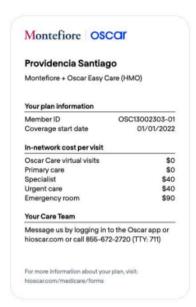
- Contact information, including phone and fax numbers, address (including suite numbers), email addresses
- Addition or removal of locations where you practice
- Practice name
- Whether you are accepting new patients or not
- Hospital affiliations

Report changes by calling 855-672-2755.



Navigate our MA Members' ID Cards

Here's a sample of our 2022 member ID cards:







Our Partners

Our network of medical providers is available through our hospital system and provider group partnerships. Our vendors for Behavioral Health and Substance Abuse, Pediatric Dental, Pediatric Vision, Pharmacy and Laboratory services are listed below. Providers must be in-network with these vendors for Oscar to cover these services.

Service	Vendor	Phone 877-614-0484	
Behavioral Health	Optum		
Dental	LIBERTY Dental	888-703-6999	
Vision	Davis Vision	800-773-2847	
Pharmacy	CVS/Caremark	855-796-7227	
Acupuncture and American Specialty Health Group Chiropractor		800-972-4226	

In 2022, Oscar's primary retail pharmacy locations will be CVS, Target, and Walmart.

Oscar has partnered with Capsule, a digital pharmacy that offers free, same-day prescription delivery for our members. If you're interested in partnering with Capsule for all your pharmacy needs, visit capsulecare.com/doctors. To find out if Capsule services your area visit capsule.com/locations.

For a complete list of in-network retail pharmacies, please visit hioscar.com/search.



Claims Submission

Our clearing house options are: Availity, Change Healthcare, and Eligible.

Service	Network Partner	Electronic Payer ID	Address
Medical Services	Oscar	OSCAR	P.O. Box 52146 Phoenix, AZ 85072-2146
Medicare Advantage Behavioral Health and Substance Abuse Services	Optum	87726	Optum P.O. Box 30760 Salt Lake City, UT 84130-0760
Dental Services	LIBERTY Dental	CX083	LIBERTY Dental Plan ATTN: Claims Department P.O. Box 26110 Santa Ana, CA 92799-6110
			Provider Portal: www.libertydentalplan.com Phone: 888-352-7924
Pharmacy	CVS/ Caremark	Please reference the Member ID card for pharmacy claim information	
Vision Services	Davis Vision	400000027	Vision Care Processing P.O. Box 1525 Latham, NY 12110
Acupuncture and Chiropractor	American Specialty Health Group Inc		American Specialty Health Group, Inc. ATTN: Claims Department P.O. Box 509001 San Diego, CA 92150-9001



Case Management

For comprehensive case management, including complex case management, refer patients to call 855-672-2755. Oscar's case managers provide dedicated support to our members who request or need extra assistance. This includes assistance with discharge planning, DME, medication adherence, disease specific education, and any other case management concerns your patient has.

For Behavioral Health Case Management, refer patients to Optum.

Prior authorization at a glance

Certain services at Oscar require prior authorization. The list of services subject to pre-authorization can be accessed online at hioscar.com/prior-authorization. It is important to submit any elective or pre-service requests in advance to ensure everything is in place for your patients to get the right care. To confirm requirements for a specific code or service, request authorization, or check the status of an existing authorization, reference the Authorization Procedure Lookup tool within Oscar's Provider Portal. To access or sign up for the provider portal, visit accounts.hioscar.com or call 855-672-2755. Authorization requests may also be submitted by faxing the authorization request form found in the Provider Manual to 833-554-9046. Please note that authorization requirements may be updated throughout the year.

To access the most up to date authorization requirements please reference Oscar's Provider Manual for your state by visiting hioscar.com/providers/resources.

Inclusion of a service in the Oscar Prior Authorization List is not a guarantee of benefit coverage. Coverage of these benefits may vary by plan, and the Prior Authorization list is subject to change. To verify coverage or prior authorization requirements, please call 855-672-2755.

If prior authorization is not obtained for a service that requires it, the service is subject to post- service (retrospective) review. Some services that may be part of an ongoing course of treatment may also be subject to concurrent review. Prior authorization requirements (including concurrent and/or retrospective review) for Behavioral Health and Substance Abuse are subject to the policies and procedures of Optum. Prior authorization requirements for Pharmacy are subject to policies and procedures of CVS/Caremark. Please reference the provider manual for Prior Authorization requirements for these and other Oscar vendors.

