



Managed Care List

Hawaii
Genzyme Genetics
MC Info Line: (888) 202-1675
Last Update: July 1, 2010
(Information Subject to Change)

Provider TIN #: 061047163

beside Plan Name indicates unique provider number

Plan Name

ACS - Ancillary Care Services*	Humana
Aetna 5121562	IHP - Integrated Health Plan*
Aetna HMO 859858	Interplan Health Group (IHG)*
American CareSource*	Mail Handlers/Coventry National Network
American Medical Security/UnitedHealthcare	MDM - Medical Diagnostic Management.*
AmeriChoice/UnitedHealthcare	Medicare
Beech Street*	Midwest Security/United Healthcare
Benefit Panel Services (BPS)	Multiplan*
CHA - Corporate Health Admin.*	National Provider Network*
CHAMPUS	NPPN - National Preferred Provider Network*
ChoiceCare Network*	PacifiCare/UnitedHealthcare
CIGNA Healthcare 6687483	PHCS*
Consolidated Association of Railroad Employees*	PHS(+) - Prime Health Services, Inc.*
Coventry Health Care (National Network product only)	PPO Next (formerly HealthStar)
Definity Health Plan/UnitedHealthcare	PPO USA
DirectCare America	Preferred Health Network (PHN)
EHN - Employers Health Network*	ProAmerica Managed Care*
Evercare/UnitedHealthcare	PRONET - Provider Networks of America*
Evolutions Healthcare Systems	PSI - Provider Select, Inc.*
First Health Network	Secure Horizons by UnitedHealthcare
FPN-Fortified Provider Network	Select Providers PPO ANC-00-0172
Galaxy Health Network	Three Rivers Provider Network*
GEHA (through PPO USA network only)	Tricare 061047163
Golden Rule/UnitedHealthcare	Unicare
Great-West Healthcare/Cigna	UnitedHealthcare
Health Net	University Health Alliance PPO
HealthSmart Preferred Care (HSPC)*	USA Health Network*
HealthStar, Inc. (PPO Next)	
HMAA - Hawaii Management Alliance Assoc.*	
HMN - Health Management Network*	
HMSA - Hawaii Medical Service Assoc *	
HMSA - Quest HMO	

Participating provider with all products, including HMO, unless otherwise noted. Ask about other contracts in your area.

Genzyme Genetics will bill your patients for any applicable co-pay, deductible, co-insurance or non-covered services as directed by the patient's plan.

* Group/Employer/TPA Name and Number must be provided when submitting Genzyme Genetics requisition.

** Out of Network or Secondary Network Benefits May Apply

For the latest list go to Managed Care Organizations on
www.genzymegenetics.com