



# Managed Care List

South Carolina  
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*	Interplan Health Group (IHG)*
Aetna 5121562	Mail Handlers/Coventry National Network
Aetna HMO 859858	MDI healthcare Solutions
American CareSource*	MDM - Medical Diagnostic Management.*
American Medical Security/UnitedHealthcare	MedCost PPO*
AmeriChoice/UnitedHealthcare	Medicaid of South Carolina (excludes Genetic Counseling)
Beech Street*	Medical Partners of America (MPA)
Benefit Panel Services (BPS)	Medicare
Blue Cross Blue Shield of South Carolina	Midwest Security/United Healthcare
CHA - Corporate Health Admin.*	Multiplan*
CHAMPUS	National Provider Network*
ChoiceCare Network*	NPPN - National Preferred Provider Network*
CIGNA Healthcare 6687483	PacifiCare/UnitedHealthcare
Companion Health Care HMO 707800	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*	Preferred Plan PPO
Evercare/UnitedHealthcare	ProAmerica Managed Care*
Evolutions Healthcare Systems	PRONET - Provider Networks of America*
First Health Network	PSI - Provider Select, Inc.*
FPN-Fortified Provider Network	Secure Horizons by UnitedHealthcare
Galaxy Health Network	Select Providers PPO ANC-00-0172
GEHA (through PPO USA network only)	SuperMed PPO (Plus/Preferred/Professional only)
Golden Rule/UnitedHealthcare	Three Rivers Provider Network*
Great-West Healthcare/Cigna	Tricare 061047163
Health Net	Unicare
HealthSmart Preferred Care (HSPC)*	UnitedHealthcare
HealthStar, Inc. (PPO Next)	USA Health Network*
Humana	
IHP - Integrated Health Plan*	

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.genzyme genetics.com](http://www.genzyme genetics.com)