

# PROVIDER DIRECTORY

## REASON 23

Our online Provider Directory makes finding in-network providers easy. Visit **SeniorCarePlus.com** to find a provider.

For the healthiest reasons.

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### MEDICARE ADVANTAGE PLANS

## Comprehensive • Encompass

CLARK COUNTY

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Senior Care  
Plus 

*A Medicare Advantage Plan from Hometown Health.*





*A Medicare Advantage Plan from Hometown Health.*



## **Senior Care Plus Comprehensive and Encompass (HMO) Plans Provider and Pharmacy Directory**

This directory is current as of 12/01/2022. Some network providers may have been added or removed from our network after this directory was printed. We do not guarantee that each provider is still accepting new members.

This directory provides a list of Senior Care Plus's network providers for members enrolled in the Senior Care Plus Comprehensive and Encompass (HMO) Plans.

This directory is for Senior Care Plus members that reside in Clark County, Nevada.

To access Senior Care Plus's online provider directory, you can visit [www.SeniorCarePlus.com](http://www.SeniorCarePlus.com). For any questions about the information contained in this directory (hardcopy or online), please call our Customer Service Department at 888-775-7003. TTY users should call the State Relay Service at 711. Telephone hours are Monday-Sunday, 7am-8pm (October 1st - March 31st); and Monday-Friday, 7am-8pm (April 1st - Sept 30th). We will be closed on all Federal holidays. You may also visit [www.SeniorCarePlus.com](http://www.SeniorCarePlus.com).

To get the most up-to-date information about Senior Care Plus's network providers in your area, please visit [www.SeniorCarePlus.com](http://www.SeniorCarePlus.com) or call our Customer Service Department at the phone numbers listed above.

Senior Care Plus is a Medicare Advantage organization with a Medicare contract. Enrollment in Senior Care Plus depends on contract renewal.

This information is available for free in other languages. Please call our Customer Service number at 888-775-7003. TTY users should call the State Relay Service at 711. (We are not open 7 days a week all year round) Hours are 8:00 a.m. to 8:00 p.m., 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday to Friday (except holidays) from April 1 through September 30.

Esta información está disponible gratis en otros idiomas. Llame a Servicio al Cliente al 888-775-7003 para obtener información adicional. (Los usuarios de TTY deben llamar al Servicio estatal de retransmisión de mensajes al 711). El horario de atención es de lunes a domingo, de 8:00 a. m. a 8:00 p. m. (del 1.º de octubre al 31 de marzo), y de lunes a viernes, de 8:00 a. m. a 8:00 p. m. (del 1.º de abril al 30 de septiembre). Cerramos todos los feriados federales.

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ATTENTION: If you speak Spanish, language assistance services are available to you free of charge. Call 888-775-7003, (We are not open 7 days a week all year round) Hours are 8:00 a.m. to 8:00 p.m., 7 days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday to Friday (except holidays) from April 1 through September 30 TTY users should dial 711.

This document is available in other formats such as Braille and large print.

Senior Care Plus complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

The provider network may change at any time. You will receive notice when necessary.

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## **Section 1 – Introduction**

This directory provides a list of Senior Care Plus’s network providers. To get detailed information about your health care coverage, please see your Evidence of Coverage (EOC). For the most up to date provider and pharmacy listings, please visit [www.SeniorCarePlus.com](http://www.SeniorCarePlus.com).

### **Choosing a Primary Care Provider (PCP)**

As a member of the Senior Care Plus Comprehensive or Encompass (HMO) Plans, you will have to choose one of our network providers who are listed in this directory to be your **P**rietary **C**are **P**hysician (PCP). The term “PCP” will be used throughout this directory. Generally, you must get your health care coverage from your PCP.

#### **What Is a “PCP”?**

A PCP is a physician or health care professional who meets state requirements and is trained to give basic medical care. You can receive routine or basic care from your PCP. A PCP can also coordinate the rest of the covered services you need. A referral is not required from your PCP to see a Network Specialist on our plan for a routine office visit.

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

### **What If You Use Out-of-Network Providers To Get Covered Services?**

“Out-of-network providers” are providers that are not part of Senior Care Plus and are under no obligation to treat Senior Care Plus enrollees, except in emergencies. For members enrolled in the Comprehensive or Encompass (HMO) Plans, care or services received from out-of-network providers will not be covered, except for ambulance services and emergency care, including post-stabilization care, urgently needed care, renal dialysis (kidney), and any services which were ordered covered through an appeals process. For cost sharing information, see your “Evidence of Coverage.”

### **Bills from Non-Plan Providers That You Think Should Be Paid By Senior Care Plus**

If an out-of-network provider asks you to pay for covered services, please contact us at: Senior Care Plus, 8930 W. Sunset Road, #200, Las Vegas, NV 89148. You should never pay any provider more than what is allowed by Medicare. The out-of-network provider has a right to get his/her fees, but does not have a right to get them from you. Ask the non-plan provider to bill us first. If you have already paid for the covered services, we will reimburse you for our share of the cost. If you get a bill for the services, you can send the bill to us for payment. We will pay your out-of-network provider for our share of the bill and will let you know what, if anything, you must pay.

## **Getting Care When Traveling or Away From the Plan's Service Area**

You can get care when you are outside the service area. If you get your care outside the service area from a non-plan provider, you may have to pay more. However, you won't have to pay more for emergency or urgently needed care whether it is provided by in or out-of-network providers. For additional information about medical emergencies and urgently needed care, see "Getting Care If You Have a Medical Emergency or an Urgent Need for Care". If you have questions about medical costs when traveling, please call Customer Service at 888-775-7003, Monday-Sunday, 7am-8pm (October 1st - March 31st); and Monday-Friday, 7am-8pm (April 1st - Sept 30th). TTY users should dial 711. We will be closed on all Federal holidays.

## **Getting Care in a Medical Emergency or an Urgent Need for Care**

### **What Is a Medical Emergency?**

A situation is a medical emergency if you reasonably believe that your health is in serious danger. It means that every second counts. Some examples of medical emergencies are severe pain, a bad injury, a serious illness, or a medical condition that is getting worse.

### **What to Do If You Have a Medical Emergency?**

If you have a medical emergency:

- Get medical help as quickly as possible. Call 911 for help or go directly to the nearest emergency room. In any emergency, you never need to contact any plan provider, even your own PCP, for either permission (authorization) or referral (approval in advance).
- However, as soon as possible, you or someone else should contact Senior Care Plus about your emergency. Our telephone number is on your membership card. Senior Care Plus needs to know about your emergency because we will help manage and follow-up on your emergency care. Please try to contact Senior Care Plus about your emergency within 48 hours.

## **Senior Care Plus or Your PCP Will Help Manage and Follow-Up On Emergency Care**

It is important to know that every emergency has two stages.

When the doctors, or hospital, providing emergency care consider your condition stable, the first stage of the medical emergency ends. However, even after your condition is stabilized, you are still considered in an emergency situation and Senior Care Plus must still pay for post-stabilization treatment provided by the hospital (whether or not this hospital is in or out-of-network). The second stage of the emergency, after your condition is stabilized, is called post-stabilization.

Generally, the hospital or doctors providing emergency care will try to talk to Senior Care Plus. This helps the plan arrange for in-network providers to take over your care

as soon as your condition gets better. Once Senior Care Plus or your PCP takes over your care, or agrees with the attending hospital on an appropriate course of action (or once you are discharged if you are fully-recovered), you are no longer in an emergency or post-stabilization situation.

Although you are past the emergency and post-stabilization, you may still need follow-up care. Your plan is responsible for your follow-up care. Your plan will only pay for follow-up care after your emergency and post-stabilization if you follow the plan rules. You will need to use plan providers to get authorization and/or referrals (approval in advance) if necessary.

### **What Is Covered If You Have A Medical Emergency?**

- You can get covered emergency medical care whenever you need it anywhere in the world.
- Ambulance services are covered in situations where other means of transportation would endanger your health anywhere in the world.

### **What If It Wasn't Really A Medical Emergency?**

To have your plan pay for your emergency care, you do not have to be certain that it is an emergency. For example, you might go in for emergency care—thinking that your health is in serious danger—but the doctor may disagree and not consider it a medical emergency. If this happens, you are still covered for the diagnostic treatment and care you received to determine what was wrong, provided that you thought your health was in serious danger as explained in the section above. Please note that:

- If you get any extra care after the doctor says it was not a medical emergency, the amount of the covered extra care that we pay will depend on whether you get the care from in-network providers.
- If you get the care from in-network providers, your costs will usually be lower than if you get the care from out-of-network providers.

### **What Is “Urgently Needed Care”? (This Is Different From A Medical Emergency.)**

Urgently needed care refers to a non-emergency situation where you are temporarily absent from the plan's authorized service area, you need medical attention right away for an unforeseen illness, injury, or condition, and it isn't reasonable given the situation for you to obtain medical care through Senior Care Plus's participating provider network. Note: Under unusual and extraordinary circumstances, care may be considered urgently needed when you are in the service area, but in-network providers are temporarily unavailable or inaccessible.

## **The Difference between “Medical Emergency” And “Urgently Needed Care”**

The two main differences between urgently needed care and a medical emergency are in the danger to your health and your location. A medical emergency occurs when you reasonably believe that your health is in serious danger whether you are in or outside of the service area. Urgently needed care is when you need medical help for an unforeseen illness, injury, or condition, but your health is not in serious danger and you are generally outside of the service area.

### **Getting Urgently Needed Care in the Plan’s Service Area**

If you have a sudden illness or injury that is not a medical emergency and you are in the plan’s service area, please call your doctor or the Hometown Health Hotline at 775-982-5757 or toll free at 888-324-3243. The Hometown Health Hotline is a triage help line where registered nurses can review your symptoms and offer guidance for medical care. There is always a health professional on-call to help you. Keep in mind that if you have an urgent need for care while you are in the plan’s service area, you should get this care from plan providers. In most cases, you will pay more for urgently needed care that you get from an out-of-network provider while you are in the plan’s service area.

### **Getting Urgently Needed Care outside the Plan’s Service Area**

Senior Care Plus covers urgently needed care that you receive from out-of-network providers when you are outside the plan’s service area anywhere in the world. If possible, you should call Senior Care Plus if you need urgent care while you are outside the plan’s service area. If you are treated for an urgent care condition while out of the service area, we prefer that you return to the service area to get follow-up care from plan providers. However, we will cover follow-up care that you get from out-of-network providers outside the plan’s service area as long as the care you are getting still meets the urgently needed care definition.

We also cover dialysis (kidney) services that you get when you are outside the plan’s service area. You must use plan providers except in emergency or urgent care situations or for out-of-area renal dialysis. If you obtain routine care from out-of-network providers neither Medicare nor Senior Care Plus will be responsible for the costs.

## **What is the service area for Senior Care Plus?**

The counties in our service area are listed below.

- Clark County, Nevada

## **How do you find Senior Care Plus providers that serve your area?**

To select a PCP and find out which providers are accepting new patients, refer to this Provider Directory, access our website at [www.SeniorCarePlus.com](http://www.SeniorCarePlus.com), or call



Customer Service. You can change your PCP at any time, as explained later in this section.

If you have questions about Senior Care Plus or require assistance in selecting a PCP, please call our Customer Service Department at 1-888-775-7003, Monday-Sunday, 7am-8pm (October 1st - March 31st); and Monday-Friday, 7am-8pm (April 1st - Sept 30th). TTY users should dial 711. We will be closed on all Federal holidays. The most up-to-date provider listings are also available on our website at [www.SeniorCarePlus.com](http://www.SeniorCarePlus.com).

## **Receiving Care from Your PCP**

Usually, a PCP is seen first for most routine health care needs. If you see an out-of-network provider, your costs may be different from what is paid to see an in-network provider.

A PCP can help arrange or coordinate your covered services. This includes x-rays, laboratory tests, therapies, specialists, hospital admissions, and follow-up care. A PCP also contacts other plan providers for updates about your care and/or treatments. This means you may need a referral to see a specialist. In some cases, your PCP will also need to get prior authorization (approval in advance). A referral is not required from your PCP to see a Network Specialist on our plan for a routine office visit.

## **How to Change Your PCP**

You may change your PCP for any reason, at any time. To change your PCP, call Customer Service at 888-775-7003, Monday-Sunday, 7am-8pm (October 1st - March 31st); and Monday-Friday, 7am-8pm (April 1st - Sept 30th). TTY users should dial 711. We will be closed on all Federal holidays. When you call, be sure to tell Customer Service if you are seeing specialists or getting other covered services that need your PCP's approval (such as home health services and durable medical equipment). Customer Service will help make sure that you can continue with the specialty care and other services you have been receiving when you change to a new PCP. They will also check that the PCP you wish to switch to is accepting new patients. Customer Service will change your membership record to show the name of your new PCP and will tell you when the change to your new PCP will take effect.

Since your PCP will provide and coordinate your health care, you should have all of your past medical records sent to your new PCP's office. The law requires us to protect your privacy of your medical records and personal health information. For more information about privacy, see your Evidence of Coverage.

## **What If Your Doctor Or Provider Leaves Senior Care Plus?**

Sometimes a doctor, specialist, clinic, or other plan provider might leave the plan. If this happens, you will have to switch to another provider who is part of Senior Care Plus. If

your PCP leaves Senior Care Plus, we will notify you, and help you switch to another PCP so that you can continue getting covered services.

## **Getting Care from Specialists**

When your PCP thinks you need specialized treatment, they might refer you to a specialist. You don't need a referral from your PCP to see a specialist for routine office visits. A specialist is a doctor who provides health care services for a specific disease or part of the body. Some examples of specialists are oncologists, who treat cancer; cardiologists, who treat heart conditions; and orthopedists, which treat certain bone, joint, or muscle conditions. For some types of referrals to a specialist, your PCP may need to get approval in advance from Senior Care Plus. This is called prior-authorization.

It is important to notify your PCP before you see a plan specialist. However, you don't need to get a referral (approval in advance) for certain services, see "Self-Referrals." If the specialist wants you to come back for follow-up visits, be sure to check that the follow-up services do not require authorization (approval in advance) from Senior Care Plus.

If there are specific plan specialists you want to use, find out whether your PCP sends patients to these specialists. You can change your PCP at any time if you want to see a plan specialist that your current PCP does not refer you to. If you want to change your PCP, see "Choosing a Primary Care Provider (PCP)." If there are specific hospitals you want to use, find out whether Senior Care Plus or your PCP uses these hospitals.

## **Self-Referrals**

In some cases, you can receive the services listed below without a referral or approval in advance from your PCP. Self-referred means you get services on your own. If you receive self-referred services, you still have to pay a copayment. If you get a self-referred service from an in-network provider, you will only have to pay the in-network copayment. If you go to an out-of-network provider for these services, you may have to pay for these services yourself.

The following services may be self-referred:

- You do not need a referral to see a physician on the plan for routine services.
- Routine women's health care, which includes breast exams, mammograms (x-rays of the breast), pap tests, and pelvic exams, is covered without a referral from your PCP only if you get it from an in-network provider.
- Flu, pneumonia, and Hepatitis B vaccines (only if you get them from a plan provider) or at a Renown, Hometown Health, or Senior Care Plus event.
- Emergency services, whether you get these services from in or out-of-network providers; see "Getting Care If You Have a Medical Emergency or an Urgent Need for Care."
- Urgently needed care that you get from out-of-network providers when you are temporarily outside the plan's service area. For more information about

urgently needed care, see “Getting Care If You Have a Medical Emergency or an Urgent Need for Care.” For more information about the plan’s service area, see “Introduction.”

- Dialysis (kidney) services that you get when you are temporarily outside the plan’s service area. If possible, please let us know where you are going before you leave the service area so we can help arrange for you to have maintenance dialysis while away.

If you have questions about what medical care is covered when you travel, please call Customer Service. See “Getting Care If You Have a Medical Emergency or an Urgent Need for Care,” for more information about how to fill your prescriptions when you travel or are away from the plan service area.

### **Medical Care When Your PCP’S Office Is Closed**

In an emergency, you can get care immediately. You do not have to contact your PCP or get authorization in an emergency. You can dial 911 for immediate help by phone, or go directly to the nearest emergency room, hospital, or urgent care center. For additional information about emergency or urgent needed care, see “Getting Care If You Have a Medical Emergency or an Urgent Need for Care.”

### **If It Is Not a Medical Emergency and Your PCP’s Office Is Closed**

If you need to talk with your doctor or get medical care when the PCP office is closed and it is not a medical emergency, call the Hometown Health Hotline at 775-982-5757 or toll free at 888-324-3243. The Hometown Health Hotline is a triage help line where registered nurses can review your symptoms and offer guidance for medical care. There is always a health professional on-call to help you. For more information about what to do if you have an urgent need for care, see “Getting Care If You Have a Medical Emergency or an Urgent Need for Care.”

## **Section 2- List of Providers**

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***CONCIERGE MEDICINE***

Providers who practice concierge medicine are available only to patients who pay an annual fee or retainer.

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**There are currently no contracted providers in this specialty/category. For the most up-to-date provider listings, please visit [www.SeniorCarePlus.com](http://www.SeniorCarePlus.com).**

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❖ = Board Certified

✕ = Not Accepting New Patients

[NPP] = Non-Physician Practitioner

*We make every effort to ensure our providers listings are as current and accurate as possible, but listings do change frequently. Please visit [www.SeniorCarePlus.com](http://www.SeniorCarePlus.com) for the most up-to-date provider listings.*

***HOME VISITS ONLY***

Providers in this section do not see patients at a physical office location. Services are provided in a home setting only.

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**There are currently no contracted providers in this specialty/category. For the most up-to-date provider listings, please visit [www.SeniorCarePlus.com](http://www.SeniorCarePlus.com).**

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***OPIOID TREATMENT PROGRAM PROVIDERS***

Opioid treatment program providers are certified by the Substance Abuse and Mental Health Services Administration (SAMHSA) and provide opioid use disorder treatment services.

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**There are currently no contracted providers in this specialty/category. For the most up-to-date provider listings, please visit [www.SeniorCarePlus.com](http://www.SeniorCarePlus.com).**

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***NON-CONTRACTED PROVIDERS***

Providers listed below are no longer contracted and are considered out-of-network providers. If applicable to your benefit plan, services provided by these providers will either be applied to out-of-network benefits or services could be denied. This is not a full list of out-of-network providers.

NON-CONTRACTED PROVIDERS			
PHYSICIAN NAME	GROUP NAME	ADDRESS	EFFECTIVE DATE

**NONE IN THE PAST MONTH**

**G**  
GroupLastName.....1,2,3,4