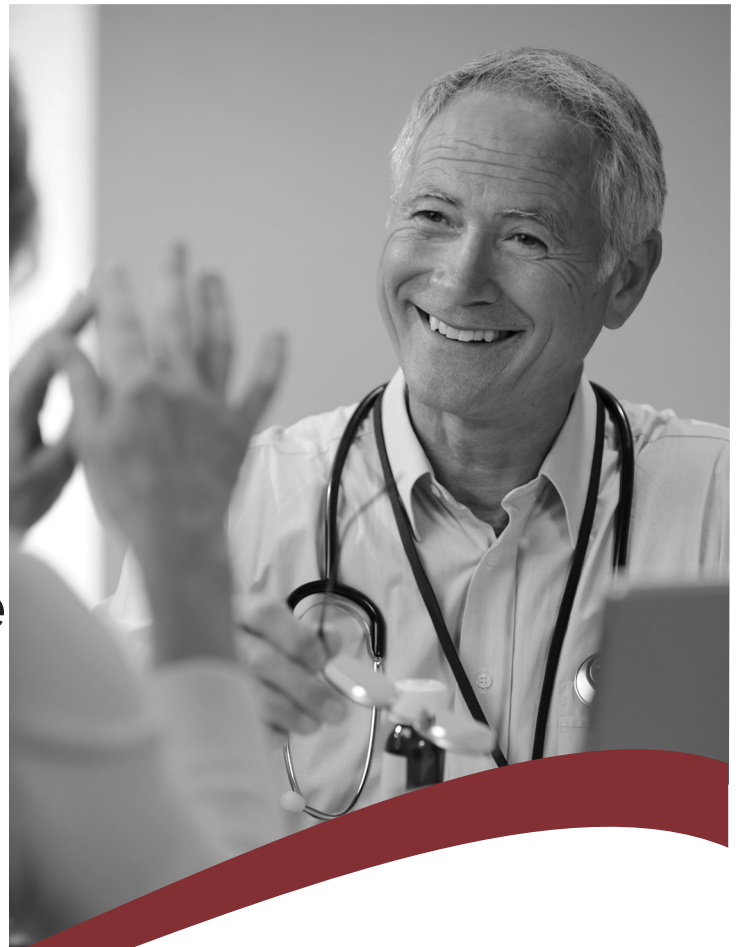




# 2018 Generations Medicare Advantage Plans

## Provider & Pharmacy Directory



This Provider & Pharmacy  
Directory was updated on  
<September 30, 2017>

For more recent information or  
other questions, please contact  
GlobalHealth Customer Care at  
1-844-280-5555 or,  
for TTY users, 711

8 a.m. to 8 p.m., 7 days a week from  
October 1 - February 14

8 a.m. to 8 p.m., Monday - Friday from  
February 15 - September 30

or visit

[www.GlobalHealth.com/Medicare](http://www.GlobalHealth.com/Medicare)

GlobalHealth is an HMO plan with  
a Medicare contract. Enrollment in  
GlobalHealth depends on contract  
renewal.

# **GlobalHealth's Generations HMO Plans Provider & Pharmacy Directory**

This directory is current as of <09/30/2017>.

This directory provides a list of GlobalHealth's current network providers and pharmacies. For more recent information or other questions, please contact Customer Care Department at 1-844-280-5555 (toll-free, 8:00 a.m. to 8:00 p.m., seven days a week, from October 1 – February 14, and 8:00 a.m. to 8:00 p.m., Monday – Friday, from February 15 – September 30. TTY users should call 711.

This directory is for the following counties in Oklahoma:

Adair, Alfalfa, Blaine, Caddo, Canadian, Cherokee, Cleveland, Cotton, Craig, Creek, Dewey, Garfield, Garvin, Grady, Grant, Haskell, Hughes, Jefferson, Kingfisher, Kiowa, Lincoln, Logan, Major, Mayes, McClain, McIntosh, Muskogee, Noble, Nowata, Okfuskee, Oklahoma, Okmulgee, Osage, Pawnee, Pittsburg, Pontotoc, Pottawatomie, Pushmataha, Rogers, Seminole, Tillman, Tulsa, Wagoner, Woods.

To access GlobalHealth's online provider directory, you can visit [www.GlobalHealth.com/medicare](http://www.GlobalHealth.com/medicare). For any questions about the information contained in this directory (hardcopy or online), please call our Customer Care Department at 1-844-280-5555 (toll-free, 8:00 a.m. to 8:00 p.m., seven days a week, from October 1 – February 14, and 8:00 a.m. to 8:00 p.m., Monday – Friday, from February 15 – September 30. TTY users should call 711.

Changes to our provider and pharmacy network may occur during the benefit year. An updated Provider & Pharmacy Directory is located on our website at [www.GlobalHealth.com/medicare](http://www.GlobalHealth.com/medicare). You may also call Customer Care for updated providers.

GlobalHealth is an HMO plan with a Medical contract. Enrollment in GlobalHealth depends on contract renewal.

The provider and/or pharmacy network may change at any time. You will receive notice when necessary.

*Available in Large Print.*

H3706\_DIRECTORY\_2018\_NM

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## **Section 1 – Introduction**

This directory provides a list of GlobalHealth’s network providers and pharmacies. To get detailed information about your health care coverage, please see your Evidence of Coverage. To get a complete description of your prescription coverage, including how to fill your prescriptions, please review the Evidence of Coverage and GlobalHealth’s Generations HMO plans formularies.

You should use this directory to select a PCP. Your PCP will not only provide basic and routine services, but also coordinate any specialty care for covered services you may need. In most cases, you will need to see your PCP to get a referral for covered services. For more information on services you may obtain without a referral from your PCP, please see Chapter 4 of your Evidence of Coverage.

You will have to choose one of our network providers listed in this directory to be your **Prietary Care Provider (PCP). Generally, you must get your health care services from your PCP.**

The network providers listed in this directory have agreed to provide you with your health, vision and/or dental services. You may go to any of our network providers listed in this directory; however, some services may require a referral. 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. Other physicians/providers are available in our network.

In cases where non-contracting providers submit a bill directly to the enrollee, the enrollee should not pay the bill, but should submit it to the plan for processing and determination of enrollee liability, if any.

You may get covered emergency medical care whenever you need it, anywhere in the United States and territories. Our plan covers ambulance services in situations where getting to the emergency room in any other way could endanger your health. For more information, see the Chapter 4 of your Evidence of Coverage.

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 GlobalHealth will be responsible for the costs.

When you are outside the service area and cannot get care from a network provider, our plan will cover urgently needed services that you get from any provider. Our plan does not cover emergency or urgently needed services or any other services if you receive the care outside of the United States.

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 our plan 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 <09/30/2017>. For the most current list, please contact us. Our contact information appears on the front and back cover pages.

You can go to all the pharmacies on this list, but your costs for some drugs may be less at pharmacies in this list that offer preferred cost-sharing. We have marked these pharmacies to distinguish them from other pharmacies in our network that offer standard cost-sharing.

[This directory is for <geographic area> which includes the area in which you live. However, we cover a larger service area, and there are more pharmacies where your prescription may be covered by our Plan. For information on more pharmacies in our plan network not listed in this directory, please call us at 1-866-494-3927 or 711 (TTY).]

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

We also list pharmacies that are in our network but are outside the area in which you live. You may also fill your prescriptions at these pharmacies. For more information, please call us at 1-866-494-3927 (toll-free) or 711 (TTY).

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.

## What is the service area for GlobalHealth?

The counties in our service area are listed below.

Adair	Creek	Kingfisher	Noble	Pottawatomie
Alfalfa	Dewey	Kiowa	Nowata	Pushmataha
Blaine	Garfield	Lincoln	Okfuskee	Rogers
Caddo	Garvin	Logan	Oklahoma	Seminole
Canadian	Grady	Major	Okmulgee	Tillman
Cherokee	Grant	Mayes	Osage	Tulsa
Cleveland	Haskell	McClain	Pawnee	Wagoner
Cotton	Hughes	McIntosh	Pittsburg	Woods
Craig	Jefferson	Muskogee	Pontotoc	

## How do you find GlobalHealth providers in your area?

Providers in this directory are listed alphabetically by county and then by name. To find a provider closest to your home, you may either review the list of providers in your county, or visit [www.GlobalHealth.com/medicare](http://www.GlobalHealth.com/medicare) to search for a provider near you.

If you have questions about GlobalHealth or require assistance in selecting a PCP, please call our Customer Care Department at 1-844-280-5555 (toll-free, 8:00 a.m. to 8:00 p.m., seven days a week, from October 1 – February 14, and 8:00 a.m. to 8:00 p.m., Monday – Friday, from February 15 – September 30. TTY users should call 711. You can also visit [www.GlobalHealth.com/medicare](http://www.GlobalHealth.com/medicare).

## **Section 2 – List of Network Providers**

Types of providers can be identified and located in this provider directory by:

- Type of provider
- Specialty (if applicable)
- County
- City
- Zip code
- Provider name, address, city, zip code, phone number, preferred status (if applicable)

### **[Primary Care Physicians (PCPs)]**

[Type]

[County]

[City]

[Zip Code]

[Specialist Name]

[Accepting New Patients? Yes/No]

[Specialist Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

[Specialists]

[Specialty Type]

[County]

[City]

[Zip Code]

[Specialist Name]

[Accepting New Patients? Yes/No]

[Specialist Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]



**[Hospitals]**

**[Acute Inpatient Hospitals]**

[County]

[City]

[Zip Code]

[Hospital Name]

[Hospital Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Acute Care Psychiatric Hospitals]**

[State]

[County]

[City]

[Zip Code]

[Hospital Name]

[Hospital Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Diagnostic Facilities]**

[County]

[City]

[Zip Code]

[Hospital Name]

[Hospital Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]  
[Term date for providers leaving network]

**[Emergency Care]**

[County]

[City]

[Zip Code]

[Hospital Name]

[Hospital Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Inpatient Substance Abuse]**

[State]

[County]

[City]

[Zip Code]

[Hospital Name]

[Hospital Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Long Term Acute Care]**

[County]

[City]

[Zip Code]

[Hospital Name]

[Hospital Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Outpatient Hospital]**

[County]

[City]

[Zip Code]

[Hospital Name]

[Hospital Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Residential Psychiatric]**

[State]

[County]

[City]

[Zip Code]

[Hospital Name]

[Hospital Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Residential Substance Abuse]**

[State]

[County]

[City]

[Zip Code]

[Hospital Name]

[Hospital Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Skilled Nursing Facilities (SNFs)]**

[County]

[City]

[Zip Code]

[SNF Name]

[SNF Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Outpatient Mental Health Providers]**

**[Specialty Type]**

**[State]**

**[County]**

**[City]**

**[Zip Code]**

**[Provider Name]**

**[Accepting New Patients? Yes/No]**

**[Provider Street Address, City, State, Zip Code]**

**[Phone number]**

**[Effective date for new providers]**

**[Term date for providers leaving network]**

**[Ambulatory Surgical Centers]**

**[County]**

**[City]**

**[Zip Code]**

**[Specialist Name]**

**[Accepting New Patients? Yes/No]**

**[Specialist Street Address, City, State, Zip Code]**

**[Phone number]**

**[Effective date for new providers]**

**[Term date for providers leaving network]**

**[Dentists]**

**[Endodontics]**

**[County]**

**[City]**

[Zip Code]

[Specialist Name]

[Accepting New Patients? Yes/No]

[Specialist Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Oral Surgery]**

[County]

[City]

[Zip Code]

[Specialist Name]

[Accepting New Patients? Yes/No]

[Specialist Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[General Dentistry]**

[County]

[City]

[Zip Code]

[Specialist Name]

[Accepting New Patients? Yes/No]

[Specialist Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Orthodontics]**

[County]

[City]

[Zip Code]

[Specialist Name]

[Accepting New Patients? Yes/No]

[Specialist Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Periodontics]**

[County]

[City]

[Zip Code]

[Specialist Name]

[Accepting New Patients? Yes/No]

[Specialist Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Prosthodontics]**

[County]

[City]

[Zip Code]

[Specialist Name]

[Accepting New Patients? Yes/No]

[Specialist Street Address, City, State, Zip Code]

[Phone number]



[Effective date for new providers]  
[Term date for providers leaving network]

**[Durable Medical Equipment Suppliers]**

[State]

[County]

[City]

[Zip Code]

[Specialist Name]

[Accepting New Patients? Yes/No]

[Specialist Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Federally Qualified Health Centers]**

[County]

[City]

[Zip Code]

[Specialist Name]

[Accepting New Patients? Yes/No]

[Specialist Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Home Health]**

[County]

[City]

[Zip Code]

[Specialist Name]

[Accepting New Patients? Yes/No]

[Specialist Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

### **[Urgent Care Facilities]**

[County]

[City]

[Zip Code]

[Specialist Name]

[Accepting New Patients? Yes/No]

[Specialist Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

### **[Vision]**

[County]

[City]

[Zip Code]

[Specialist Name]

[Accepting New Patients? Yes/No]

[Specialist Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]  
[Term date for providers leaving network]

**[Pharmacies]**

**[Retail]**

[County]

[City]

[Zip Code]

[Pharmacy Name]

[Pharmacy Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Mail Order]**

You can get prescription drugs shipped to your home through our network mail order delivery program.

For refills of your mail order prescriptions, you have the option to sign up for an automatic refill program. 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 1-866-494-3927 (toll-free) or 711 (TTY).

Typically, you should expect to receive your prescription 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 1-866-494-3927 (toll-free) or 711 (TTY).

[County]

[City]

[Zip Code]

[Pharmacy Name]

[Pharmacy Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Home Infusion]**

[County]

[City]

[Zip Code]

[Pharmacy Name]

[Pharmacy Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Long Term Care (LTC)]**

Residents of a long-term care facility may access their prescription drugs covered under GlobalHealth through the facility's long-term care pharmacy or another network long-term care pharmacy.

[County]

[City]

[Zip Code]

[Pharmacy Name]

[Pharmacy Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Indian Health Service/Tribal/Urban Indian Health (I/T/U)]**

Only Native Americans and Alaska Natives have access to Indian Health Service / Tribal / Urban Indian Health Program (I/T/U) Pharmacies through GlobalHealth's pharmacy network. Those other than Native Americans and Alaskan Natives may be able to access these pharmacies under limited circumstances (e.g., emergencies).

[County]

[City]

[Zip Code]

[Pharmacy Name]

[Pharmacy Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

**[Network Pharmacies outside the Service Area]**

We have network pharmacies outside of the service area where you can get your drugs covered as a member of our plan.

[County]

[City]

[Zip Code]

[Pharmacy Name]

[Pharmacy Street Address, City, State, Zip Code]

[Phone number]

[Effective date for new providers]

[Term date for providers leaving network]

## **Multi-Language & Non-Discrimination Notice**

GlobalHealth complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. GlobalHealth does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

GlobalHealth:

- 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)
- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact Customer Care at 1-844-280-5555 (toll-free).

If you believe that GlobalHealth 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: Attn: Director, Compliance and Legal Services, 701 NE 10<sup>th</sup> St, Ste 300, Oklahoma City, OK 73104-5403, Fax: (405) 280-5894, or E-mail: [compliance@globalhealth.com](mailto:compliance@globalhealth.com). You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Customer Care 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, 800-537-7697 (TDD).

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

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-844-280-5555 (TTY: 711).

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-844-280-5555 (TTY: 711).

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1-844-280-5555 (TTY: 711)。

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-844-280-5555 (TTY: 711)번으로 전화해 주십시오.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-844-280-5555 (TTY: 711).

844-280-5555-1 ملحوظة 1: اتصل بالمجان لك تتوافر اللغوية المساعدة خدمات فإن اللغة، اذكر تتحدث كنت إذا: (برقم والبيكم الصم هاتف 711-1).

သတိပို့ရန်။ ။ ခုဒဗဆ ဗမာစကား စေဟတတုလုံငှ ဘာသာစကား လိုအပုမ; အကူအညီမဆားကို အခမဲ့ ၊ ဆော့ရကြိုပေးနေပါသည်။ ဖုန်းနံပါတ် 1-844-280-5555 (TTY: 711) ကို ခေငှိုငှပါသည်။

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-844-280-5555 (TTY: 711).

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-844-280-5555 (TTY: 711).

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-844-280-5555 (ATS: 711).

ໂບດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ ທ່ານ. ໂທ 1-844-280-5555 (TTY: 711).

เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-844-280-5555 (TTY: 711).

1-844-280-5555 (TTY: 711) - بيبى دستياب ميں مفت خدمات كى مدد كى زبان كو آپ تو بيبى، بولتے اردو آپ اگر: خبردار

Hagsesda: iyuhno hyiwoniha [tsalagi gawonihisdi]. Call 1-844-280-5555 (TTY: 711).

شما برای رایگان بصورت زبانی تسهیلات کنید، می گفتگو فارسی زبان به اگر: توجه  
بگیرید تماس با باشد می فراهم 1-844-280-5555 (TTY: 711)







This directory is current as of <September 30, 2017>  
For more recent information or other questions, please contact  
GlobalHealth Customer Care at  
1-844-280-5555 or, for TTY users, 711  
8 a.m. to 8 p.m., 7 days a week from October 1 - February 14  
8 a.m. to 8 p.m., Monday - Friday from February 15 -  
September 30  
or visit [www.GlobalHealth.com/Medicare](http://www.GlobalHealth.com/Medicare)