



WellCare Health Plans, Inc.
The WellCare Group of Companies

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WELL-CARE OF CONNECTICUT, INC. ♦ HARMONY BEHAVIORAL HEALTH, INC. ♦ HARMONY HEALTH PLAN OF ILLINOIS, INC. ♦ WELL-CARE OF LOUISIANA, INC.
WELL-CARE OF GEORGIA, INC. ♦ WELL-CARE PRESCRIPTION INSURANCE, INC. ♦ WINDSOR HEALTH PLANS, INC. ♦ WINDSOR HEALTH GROUP, INC. ♦ STERLING LIFE INSURANCE COMPANY

CONFIDENTIAL COMMUNICATION

Fax Transmittal Cover Sheet

To: Fax Recipient

Company:

Fax: 8453331041

Phone:

From:

Fax:

Phone:

General Fax:

General Phone: 1-800-960-2530 or 813-290-6200

Note: If you have questions about this fax transmittal cover sheet, please contact the individual who is listed above, in the FROM section. Thank You.

NOTES: PA-8971932-Fax-Provider Auth Approval FAC Copy-01072021-122520

CONFIDENTIAL

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WellCare Health Plans, Inc.
Privacy Office
1-888-240-4946

Date and time of transmission: Thursday, January 7, 2021 12:25:46 PM
Number of pages including this cover sheet: 04



Fax Cover Sheet

From: WellCare Health Plans To: - GARNET HEALTH MEDICAL CENTER

Sender's Fax #: (877) 892-8215 Recipient's Fax #: (845) 333-1041

Pages (Including cover page): 3 Date: 01/07/2021

Subject: Approved

Message:

DID YOU KNOW?

The fastest and most efficient way to request an authorization is through our secure Provider Portal. You can submit authorization requests and download or print a summary report for your records.

Not registered yet? It only takes a few moments to sign up for an account. Visit www.wellcare.com to register and start benefitting from the many useful features available.

Privacy Notice: This facsimile message and any attachments are intended for the exclusive use of the addressee(s) and may contain information that is proprietary, confidential and/or exempt from disclosure and may be Protected Health Information. If you are not the intended recipient, please notify us immediately by calling the number below, return the original message to us at the fax number below, and shred the original message. If you are unable to fax or shred the original message, please mail it to the address below via the U.S. Postal Service. We will reimburse you for your postage. If you are a regular recipient of our faxes, please notify us if you change your fax number. Thank you.

WellCare Health Plans, Inc. | P.O. Box 31415 | Tampa, FL 33631-3415 | Phone: 1-866-485-8434 | Fax: 1-866-291-3183



P.O. Box 31370
Tampa, FL 33631-3370

01/07/2021

RE: Authorization Determination

Dear Provider:

The request submitted by STEFAN CHEVALIER, DO NY148490 for DELIA RODRIQUEZ ACEVEDO, 10/29/1954, ID# 28311626, has been approved.

Remember, the fastest and most efficient way to request an authorization is through our secure Provider Portal.

Authorization Number: 133354180
 Authorization: Outpatient Hospital Services
 Place of Service: On Campus-Outpatient Hospital
 Facility: - GARNET HEALTH MEDICAL CENTER 605472

Service Details: Outpatient Hospital Services

Effective Date	Expiration Date	Code	Description	Quantity
01/06/2021	03/07/2021	19342	DELAYED BREAST PROSTHESIS	1

Please notify the member of this authorization determination.

If you are the requesting provider, please ensure that the treating provider and/or facility is aware of this information. The health plan does not coordinate these services.

If you are the treating provider, please communicate treatment status and care outcome to the member's primary care physician on a periodic basis.

Obtaining authorization does not guarantee payment, but rather only confirms whether a service meets WellCare's determination criteria at the time of the request. WellCare retains the right to



review benefit limitations and exclusions, beneficiary eligibility on the date of service, the medical necessity of services, and correct coding and billing practices.

Claims submitted for payment should include all necessary, complete and compliant data including the authorization number, CPT and ICD-10 codes.

To all MEDICARE providers: Members may be responsible for a sum of copays when receiving certain diagnostic services in addition to a consult or procedure, depending on how your office bills for those services.

Sincerely,

WellCare Health Plans