

Introducing the AvMed Medicare National Choice Plan

New for 2024 and in partnership with Miami-Dade County, AvMed now offers the AvMed Medicare National Choice plan. This unique, custom group plan is only available to retirees who are enrolled in Medicare and have a plan through their former employer, Miami-Dade County.

AvMed Medicare National Choice has a national service area, which allows members to see any provider that accepts original Medicare and does not require referrals to visit a Specialist. Read below on how AvMed makes it easy for Members to continue seeing their Providers under this plan, regardless of whether they are in-network.

What you need to know

- If you currently contract with AvMed for its Medicare Advantage plans, the terms of your agreement will apply.
- If you are not currently contracted with AvMed for its Medicare Advantage plans, no contract is required to see patients enrolled in the AvMed Medicare National Choice Plan, and claims will be paid at the in-network benefit level.
- This plan covers all original Medicare benefits and more, including many preventive services.
- Referrals are not required, and Members are not required to select a PCP.
- The Medicare fee schedule and Medicare limiting charges will apply.
- Pre-authorization is required for certain services, such as hospitalizations and surgeries, among other procedures. Feel free to call the AvMed number listed below for additional information.
- Billing is simple, submit claims to AvMed and receive remittance.

Paying providers

We pay Medicare-allowable rates for clean claims on covered services less any patient cost share noted under the patient's plan.

How to submit claims

Claims will be processed based on:

- Medicare billing rules
- Medicare fee schedule and limiting charges
- All prospective payment system requirements
- Local and national coverage determinations
- The patient's plan documents, including the Evidence of Coverage
- For bundling/unbundling logic, we use the National Correct Coding Initiative (NCCI); the link to NCCI is on the Centers for Medicare & Medicaid Service (CMS) website, at:
www.cms.gov/national-correct-coding-initiative-ncci

Electronic claims submissions: Use our electronic payer ID: 59274

Paper claims submissions:

Submit all paper claims for covered services to:
AvMed Claims Dept.
PO Box 569000
Miami, FL 33256-9000

Pre-certification/authorization number: 1-800-782-8633

Provider Service Number: 1-800-452-8633