Transition of Care form

Welcome to Geisinger Health Plan! As your new health insurance provider, Geisinger Health Plan is working to ensure you continue to receive the care you need. When you become a new member of a Geisinger Health Plan medical benefits plan and a doctor you are being treated by is not in the Geisinger Health Plan network, allow us to assist you with your transition to the new plan.

If any of the situations below apply to you or dependents covered under your health insurance, complete this form and provide the information to us as soon as possible by any of the following methods:

Fax: 570-271-5534Phone: 800-544-3907

Mail: Use business reply envelope or mail to:

Attn. MM Associates 32-18 Geisinger Health Plan PO Box 900 Danville, PA 17821-9989

The medical management department will contact you upon receipt of this form to discuss your needs and help you make an easy transition to Geisinger Health Plan.

Check any/all that apply for you and/or your dependents:

0	I currently have an authorization for a course of tre was authorized by my previous health insurance of	·
0	I am currently pregnant and receiving care from a provider that is not in the GHP network	
0	I am currently under the care of a specialty provider that is not in the GHP network	
0	I am currently receiving physical therapy, occupational therapy or speech therapy	
0	I am currently in a nursing home and receiving skilled care	
0	I am currently receiving home health services	
0	I currently have durable medical equipment in my home (ex: oxygen, CPAP, BiPAP, hospital bed, nebulizer machine, etc.)	
Your name:		Birth date:
Phone number:		Best time to call:
Questions? Contact the medical management department at 800-544–3907 weekdays from 8 a.m. – 5 p.m.		