



Cleveland Clinic/Akron General Employee Health Plan

PRODUCT TYPE:

Cleveland Clinic/Akron General Employee Health Plan is a direct employer contract and a self-funded PPO plan administered by Mutual Health Services as of January 1, 2006. Employees of the Cleveland Clinic Health System and their dependents are eligible for coverage. This is a CHN non-risk contract effective January 1, 2003.

IDENTIFICATION CARDS:

All members should have an ID card. The member ID card is not proof of eligibility. Copay amounts if applicable are listed on the front of the member's ID card. For questions on a particular member, please call Mutual Health Services at 1-800-451-7929.

CUSTOMER SERVICE:

For questions regarding eligibility, benefits, claims status and coordination of benefits call Mutual Health Services at (800) 451-7929.

PRECERTIFICATION:

Precertification is required for all inpatient care and certain outpatient services. For preauthorization and precertification, please call 216-986-1050 or toll free 1-888-246-6648.

LABORATORY, X-RAY & OTHER ANCILLARY SERVICES:

Members will receive the maximum level of benefit coverage by utilizing in-network providers and facilities. Refer to the CHN website at <https://www.chnetwork.com> or call Mutual Health Services at 1-800-451-7929.

CLAIMS & BILLING:

Please submit completed HCFA 1500 and UB 92 to Mutual Health Services, P.O. Box 89472, Cleveland, OH, 44101-6472 or electronically EDI Payer ID 34192.

APPEALS:

All requests for appeals are to be submitted to: Mutual Health Services, P.O. Box 89472, Cleveland, OH 44101-6472. Appeals can also be faxed to Mutual Health Services: (440) 878-5451.