



‘Ohana Health Plan

Redetermination (Appeal) for a Medication Benefit Process Changing Effective January 1, 2010

December 31, 2009

Dear Provider,

‘Ohana Health Plan (‘Ohana) would like to inform you of a change in how redeterminations (appeals) will be processed beginning January 1, 2010.

In order to facilitate redetermination requests and to offer better service to our providers and members, ‘Ohana has made the decision to have medical benefit claim redeterminations and medication benefit redeterminations processed separately.

Beginning January 1, 2010, if you would like to request a redetermination (appeal) for a medication benefit, please utilize the following contact information to submit a redetermination request.

To request a **medication appeal** for a Medicare member:
‘Ohana Health Plan Fax: 1-866-388-1766
Attn: Pharmacy Appeals
P.O. Box 31383
Tampa, FL 33631-3383

You may also contact us regarding any questions or concerns you have regarding medication appeals by using the Customer Service phone number on the Quick Reference Guide (QRG) found on www.ohanahealthplan.com.

Redetermination requests for **medical benefits** and claims will be handled in the same manner as in the past.

Sincerely,

‘Ohana Health Plan
Pharmacy Department

94-450 Mokuola Street, Suite 106
Waipahu, HI 96797