



2025 PROVIDER & PHARMACY DIRECTORY

DIRECTORIO DE PROVEEDORES Y FARMACIAS Region 5 | Región 5

Manatee • Sarasota



This directory is current as of 11/13/2024. This directory provides a list of Ultimate Health Plans' current network providers and pharmacies for Manatee and Sarasota counties. Changes to our provider and pharmacy network may occur during the benefit year. To access Ultimate Health Plans' updated online provider and pharmacy directory, you can visit www.ChooseUltimate.com. For more recent information or any questions about the information contained in this directory, please call Ultimate Health Plans Member Services at 1-888-657-4170 (TTY: 711), 8:00 am to 8:00 pm, Monday through Friday. Between October 1 and March 31, we are available Monday through Sunday from 8:00 am to 8:00 pm or visit www.ChooseUltimate.com. You can get this information for free in other formats, such as large print, braille, or audio. Call our toll-free number at 1-888-657-4170. Your request for the provider directory in an accessible format or language will be applied on a standing basis unless you request otherwise.

Este es el directorio actual desde el 11/13/2024. Este directorio incluye una lista de los proveedores y farmacias actuales de la red de Ultimate Health Plans en los condados de Manatee y Sarasota. Nuestra red de proveedores y de farmacias podría sufrir modificaciones durante el año de beneficios. Para acceder al directorio actualizado de proveedores y de farmacias en línea de Ultimate Health Plans, puede visitar www.ChooseUltimate.com. Para obtener información más actualizada o si tiene preguntas sobre la información incluida en este directorio, comuníquese con nuestro Departamento de Servicio para Miembros al 1-888-657-4170 (TTY:711) de 8:00 am a 8:00 pm, de lunes a viernes. Entre el 1 de octubre y el 31 de marzo, estamos disponibles de lunes a domingo de 8:00 am a 8:00 pm o visite www.ChooseUltimate.com. Puede obtener esta información gratis en otros formatos, como letra grande, braille o audio. Llame a nuestra línea gratis al 1-888-657-4170. Su solicitud para obtener el directorio de proveedores en un formato o idioma accesible se aplicará de manera constante, a menos que pida otra cosa.

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Section 1 - Introduction

This directory provides a list of Ultimate Health Plans' network providers and pharmacies. To get detailed information about your health care coverage or to get a complete description of your prescription coverage, including how to fill your prescriptions, please review the Evidence of Coverage and Premier by Ultimate (HMO)'s, Advantage Care by Ultimate (HMO C-SNP)'s, Advantage Care COPD by Ultimate (HMO C-SNP)'s, Advantage Plus by Ultimate (Partial) (HMO D-SNP)'s, and Advantage Plus by Ultimate (Full) (HMO D-SNP)'s formulary.

How to access our plan's providers and pharmacies

You will have to choose one of our network providers listed in this directory to be your Primary Care Provider (PCP). If you do not choose a PCP, one will be selected for you. Generally, you must get your health care services from your PCP. Your PCP is a physician who meets state requirements and is trained to give you medical care. Your PCP serves as your medical home, and you will get your routine or basic care from your PCP. The types of providers that may act as a PCP are General Practice, Geriatrics, Family Practice, and Internal Medicine physicians.

You may choose your PCP from the Provider & Pharmacy Directory. You may also view the most up-to-date Provider & Pharmacy Directory online at www.ChooseUltimate.com. To change your PCP, or if you require assistance in choosing your PCP, please contact Member Services (phone numbers can be found on the covers of this booklet).

The network providers listed in this directory have agreed to provide you with your health care services. You may go to any of our network providers listed in this directory; however, some services may require a referral and/or prior authorization from your PCP. Your PCP will coordinate and provide referrals for certain covered services you get as a member of our plan. In some cases, you may get covered services from out-of-network providers. Please refer to your Evidence of Coverage for more information.

Some provider services require prior authorization. In addition to providing you referrals to a specialist when needed, your PCP will obtain prior authorization (approval in advance) from Ultimate Health Plans for certain services and items. Please refer to your Evidence of Coverage for a complete list of the services that may require Ultimate Health Plans' approval in advance.

Your selected PCP may use certain specialists to which they refer. If there are specific specialists you want to use, we encourage you to find out whether your PCP sends patients to these specialists. It is strongly encouraged to discuss any specific specialists and/or hospitals you wish to use for care with your PCP. If you have been going to one network provider, you are not required to continue going to that same provider.

We call the pharmacies on this list our "network pharmacies" because we have made arrangements with them to provide prescription drugs to plan enrollees. In most cases, your prescriptions are covered under our plan only if they are filled at a network pharmacy or through our mail-order pharmacy service. Once you go to one pharmacy, you are not required to continue going to the same pharmacy to fill your prescription but can switch to any other of our network pharmacies. We will fill prescriptions at out-of-network pharmacies under certain circumstances as described in your Evidence of Coverage.

All network pharmacies may not be listed in this directory. Pharmacies may have been added or removed from the list after this directory was printed. This means the pharmacies listed here may no longer be in our network, or there may be newer pharmacies in our network that are not listed. This list is current as of the

date printed on the cover of this booklet. For the most current list, please contact us. Our contact information appears on the front and back cover pages.

You can get prescription drugs shipped to your home through our network mail-order delivery program. For more information, please contact us or see the mail-order section of this provider and pharmacy directory.

This directory is for Manatee and Sarasota counties, including the area in which you live. However, we cover a larger service area, and there are more pharmacies where your prescriptions may be covered by our Plan. For information on more pharmacies in our plan network not listed in this directory, please call member service at 1-888-657-4170 (TTY users should call 711).

We also list pharmacies that are in our network but are outside of Manatee and Sarasota counties, the area in which you live. You may also fill your prescriptions at these pharmacies. For more information, please see the section in this directory on Network Pharmacies outside of Manatee and Sarasota counties.

If you have questions about any of the above, please see the first and last cover pages of this directory for information on how to contact us.

Services that don't require approval in advance

Referrals from your PCP are not required for emergency care or urgently needed care. You can also get some other kinds of care without having approval in advance from your PCP, such as preventive services, routine women's health care, covered dermatology, podiatry, and chiropractic services, covered mental health services, flu shots, and vaccinations.

What to do if you get a bill from a non-contracted provider

There may be times when you get a bill from a non-contracted provider for the full cost of medical care you have received. You should send this bill to us instead of paying it. We will look at the bill and decide whether the services should be covered. If we decide they should be covered, we will pay the provider our share of the cost directly. You will be responsible for paying your share of the cost. For more information on situations in which you may need to ask us for reimbursement or to pay a bill you have received from a provider (including where to send your request for payment), please see Chapter 7 of your Evidence of Coverage (Asking us to pay our share of a bill you have received for covered medical services or drugs).

Getting care if you have a medical emergency

A "medical emergency" is when you, or any other prudent layperson with an average knowledge of health and medicine, believe that you have medical symptoms that require immediate medical attention to prevent loss of life, loss of a limb, or loss of function of a limb. The medical symptoms may be an illness, injury, severe pain, or a medical condition that is quickly getting worse.

You may get covered emergency medical care whenever you need it, anywhere in the world. If you have a medical emergency, get help as quickly as possible. Call 911 for help or go to the nearest emergency room or hospital. Call for an ambulance if you need it. Our plan covers ambulance services in situations where getting to the emergency room in any other way could endanger your health. You do not need to get approval or a referral first from your PCP. If you have an emergency, we will talk with the doctors who are giving you emergency care to help manage and follow up on your care. The doctors who are giving you emergency care will decide when your condition is stable, and the medical emergency is over. After the emergency is over, you are entitled to follow-up care to ensure your condition continues to be stable. Our plan will cover your follow-

up care. If out-of-network providers provide your emergency care, we will try to arrange for network providers to take over your care as soon as your medical condition and the circumstances allow.

What if you are outside the plan's service area and need care?

When you are outside the service area and cannot get care from a network provider, our plan will cover urgently needed care that you get from any provider within the United States. Our plan does not cover urgently needed care or any other non-emergency care if you receive the care outside the United States. You must use network providers except in emergency or urgent care situations or for out-of-area renal dialysis or other services. If you obtain routine care from out-of-network providers, neither Medicare nor Ultimate Health Plans will be responsible for the costs.

What is the service area for Ultimate Health Plans?

The counties in our service area are listed below.

- The service area for Premier by Ultimate is Citrus, Hernando, Hillsborough, Indian River, Lake, Manatee, Marion, Orange, Osceola, Pasco, Pinellas, Polk, Sarasota, Seminole, St. Lucie, and Sumter counties.
- The service area for Advantage Care by Ultimate is Citrus, Hernando, Hillsborough, Indian River, Lake, Manatee, Marion, Orange, Osceola, Pasco, Pinellas, Polk, Sarasota, Seminole, St. Lucie, and Sumter counties.
- The service area for Advantage Care COPD by Ultimate is Citrus, Hernando, Hillsborough, Indian River, Lake, Manatee, Marion, Orange, Osceola, Pasco, Pinellas, Polk, Sarasota, Seminole, St. Lucie, and Sumter counties.
- The service area for Advantage Plus by Ultimate is Citrus, Hernando, Hillsborough, Indian River, Lake, Manatee, Marion, Orange, Osceola, Pasco, Pinellas, Polk, Sarasota, Seminole, St. Lucie, and Sumter counties.

How do you find Ultimate Health Plans providers and pharmacies that serve your area?

Find Doctors, Hospitals, Skilled Nursing Facilities, Outpatient Mental Health, and Ancillary Providers

Ultimate Health Plans' providers are listed by specialty in Section 2. The PCPs are listed first, followed by specialists listed by specialty type in alphabetical order, then hospitals, skilled nursing facilities, outpatient mental health providers, and ancillary providers (ambulatory surgical centers, durable medical equipment suppliers, home health agencies, etc.). Within each specialty, the provider locations are listed under the corresponding County and City. Providers are also listed alphabetically in the Index of Providers at the back of this directory.

All listed Providers have been contracted with Ultimate Health Plans to provide services for Medicare and Medicaid beneficiaries.

Providers identified with a ★ (star) achieved a 5-star HEDIS score in 2023. HEDIS (Healthcare Effectiveness Data and Information Set) refers to a government measurement tool used by more than 90 percent of health plans in the U.S. to measure performance on important aspects of care and service that a provider or health plan provides.

Find Dental, Vision, Hearing, Behavioral (Mental) Health, Fitness Program Providers, and Pharmacies

Dental: To find a dentist or for help scheduling an appointment, you may call 1-800-340-8869 from 8 am to 8 pm Monday through Sunday. TTY users should call 711.

Vision: A referral from your PCP for routine vision services is not required. Ophthalmology providers are assigned based on your residential zip code. For questions regarding this assignment or assistance in finding a routine vision care provider or accessing your vision benefit, you may call 1-800-210-5511 from 8 am to 8 pm Monday through Sunday. TTY users should call 711.

Hearing: To find a provider or for help in scheduling an appointment, you may call 1-800-313-2763 from 8 am to 8 pm, Monday through Sunday. TTY users should call 711.

Behavioral (Mental) Health: A referral is not required from your PCP or Ultimate Health Plans for behavioral health services included in your benefit plan. To locate a provider, you may call 1-800-627-1259, 24 hours a day, 7 days a week. TTY users should call 711.

Fitness Program: We have arranged with Tivity Health to bring you the SilverSneakers® Fitness Program. A referral is not required from your PCP; however, speaking with your PCP before starting any exercise program is advisable. The fitness centers in this network can be found by calling 1-888-423-4632, or you can also visit the SilverSneakers® website at www.silversneakers.com to find a fitness class, product, or program near you.

Pharmacies: Network pharmacies are listed in the back of Section 2. They are arranged by type of pharmacy (i.e., Retail, Mail Order, Long-Term Care, etc.) and then listed alphabetically by name under their corresponding county and city. To find a pharmacy, look for its pharmacy type and then locate it in the corresponding alphabetic listing.

If you have questions about Ultimate Health Plans or require assistance in selecting a PCP, please call our Member Services Department at 1-888-657-4170 (TTY: 711), 8:00 am to 8:00 pm, Monday through Friday. Between October 1 and March 31, we are available Monday through Sunday from 8:00 am to 8:00 pm. You can also visit www.ChooseUltimate.com.

Sección 1: Introducción

Este directorio tiene una lista de los proveedores y las farmacias de la red de Ultimate Health Plans. Para obtener información detallada sobre su cobertura de atención médica o para obtener una descripción completa de su cobertura de medicamentos con receta, incluyendo cómo surtir sus recetas, consulte la Constancia de Cobertura y los formularios de los planes Premier de Ultimate (HMO), Advantage Care de Ultimate (HMO C-SNP), Advantage Care COPD de Ultimate (HMO C-SNP), Advantage Plus de Ultimate (parcial) (HMO D-SNP) y Advantage Plus de Ultimate (completo) (HMO D-SNP).

Cómo acceder a los proveedores y farmacias de nuestro plan

Deberá elegir uno de los proveedores de nuestra red que están en este directorio para que sea su proveedor de atención primaria (PCP). Si no elige un PCP, se seleccionará uno por usted. En general, usted debe recibir sus servicios de atención médica de su PCP. Su PCP es un médico que cumple los requisitos estatales y está capacitado para darle atención médica. Su PCP cumple la función de su hogar médico, ya que le dará la atención básica o de rutina. Los tipos de proveedores que pueden ser PCP son los médicos de medicina general, geriatría, medicina familiar y medicina interna.

Puede elegir su PCP del directorio de farmacias y proveedores. También puede ver el directorio de farmacias y proveedores en línea más actualizado en www.ChooseUltimate.com. Para cambiar de PCP, o si necesita ayuda para elegir uno, por favor comuníquese con Servicios para Miembros (puede consultar los números de teléfono en las portadas de este cuadernillo).

Los proveedores de la red listados en este directorio aceptaron prestarle servicios de atención médica. Puede recurrir a cualquiera de los proveedores de nuestra red listados en este directorio; sin embargo, es posible que para algunos servicios sea necesaria una remisión y/o autorización previa de su PCP. Su PCP coordinará determinados servicios cubiertos que reciba como miembro de nuestro plan y lo remitirá a estos. En algunos casos, podrá recibir servicios cubiertos de proveedores fuera de la red. Consulte su Constancia de Cobertura para obtener más información.

Para algunos servicios de los proveedores es necesaria una autorización previa. Además de remitirlo a un especialista cuando sea necesario, su PCP obtendrá una autorización previa (aprobación con antelación) de Ultimate Health Plans para determinados servicios y artículos. Consulte su Constancia de Cobertura para obtener una lista completa de los servicios para los que podría necesitar una aprobación con antelación de Ultimate Health Plans.

Su PCP seleccionado puede usar ciertos especialistas a los que se refiere. Si hay especialistas específicos que desea utilizar, le recomendamos que averigüe si su PCP envía pacientes a estos especialistas. Se recomienda encarecidamente hablar con su PCP sobre los especialistas y/u hospitales específicos que desea utilizar para su atención. Si ha ido a un proveedor de la red, no es necesario que continúe yendo a ese mismo proveedor.

Llamamos a las farmacias de esta lista “farmacias de la red” porque tienen acuerdos con nosotros para que los miembros de nuestro plan reciban medicamentos recetados. En la mayoría de los casos, nuestro plan cubre sus recetas solo si se surten en una farmacia de la red o mediante nuestro servicio de farmacia de venta por correo. No tiene la obligación de ir siempre a la misma farmacia para obtener los medicamentos recetados, sino que puede ir a cualquiera de las farmacias de nuestra red. Surtiremos medicamentos recetados en farmacias fuera de la red en determinadas circunstancias, según lo establecido en su Constancia de Cobertura.

Es posible que no todas las farmacias de la red figuren en este directorio. Puede que se hayan agregado o eliminado de la lista algunas farmacias después de que se haya impreso el directorio. Esto significa que las farmacias listadas aquí pueden no estar más en nuestra red, o puede que haya farmacias nuevas en nuestra red que no estén en la lista. Esta lista se actualizó a la fecha que está impresa en la portada de este cuadernillo. Para obtener la lista más actualizada, póngase en contacto con nosotros. Nuestra información de contacto está en la cubierta y en la contracubierta.

Puede recibir medicamentos recetados en su casa mediante el programa de entrega por correo de nuestra red. Para obtener más información, comuníquese con nosotros o consulte la sección de venta por correo de este directorio de proveedores y farmacias.

Este directorio es para los condados de Manatee y Sarasota, incluyendo el área donde vive. Sin embargo, cubrimos un área de servicio más grande y hay más farmacias en las que nuestro plan podría cubrir sus recetas. Para obtener información sobre otras farmacias de la red de nuestro plan que no estén en este directorio, llame al Servicio para Miembros al 1-888-657-4170 (los usuarios de TTY deben llamar al 711).

También listamos las farmacias que están en nuestra red pero que están fuera de los condados de Manatee y Sarasota, el área donde vive. También puede surtir sus recetas en esas farmacias. Para obtener más información, consulte la sección de este directorio sobre farmacias de la red fuera de los condados de Manatee y Sarasota.

Si tiene preguntas sobre alguno de los temas de arriba, consulte la cubierta y contracubierta de este directorio para obtener nuestra información de contacto.

Servicios que no necesitan autorización previa

No necesita obtener una remisión de su PCP para recibir atención de emergencia ni atención de urgencia. También puede recibir otros tipos de atención sin tener la aprobación previa de su PCP, como servicios preventivos, atención ginecológica de rutina, servicios de dermatología, podología y quiropráctica cubiertos, servicios de salud mental cubiertos, vacunas de la gripe y otras vacunas.

Qué debe hacer si recibe una factura de un proveedor no contratado

En algunas ocasiones, es posible que reciba una factura de un proveedor no contratado por el costo total de la atención médica que recibió. Deberá enviarnos la factura en lugar de pagarla. Nosotros la analizaremos y decidiremos si se deben cubrir los servicios. Si decidimos que están cubiertos, le pagaremos directamente al proveedor nuestra parte. Usted será responsable de pagar su parte. Para obtener más información de las situaciones en que puede que deba solicitarnos un reembolso o el pago de una factura que recibió de un proveedor (incluyendo a dónde enviar su solicitud de pago), consulte el capítulo 7 de su Evidencia de Cobertura (Cómo solicitar que paguemos nuestra parte de una factura que recibió por servicios médicos o medicamentos cubiertos).

Cómo recibir atención si tiene una emergencia médica

Se considera una “emergencia médica” cuando usted, u otro lego prudente con un conocimiento medio de salud y medicina, cree que tiene síntomas que requieren atención médica inmediata para prevenir la muerte, la pérdida de una extremidad o la pérdida de la función de una extremidad. Los síntomas pueden ser una enfermedad, una lesión, dolor intenso o una condición médica que empeora rápidamente.

Puede recibir atención médica de emergencia cubierta cuando lo necesite, en cualquier lugar del mundo. Si tiene una emergencia médica, pida ayuda lo antes posible. Llame al 911 para pedir ayuda o vaya a la sala de

emergencias u hospital más cercano. Llame a una ambulancia si la necesita. Nuestro plan cubre servicios de ambulancia en situaciones en las que ir a una sala de emergencias de otra manera podría poner en riesgo su salud. No es necesario que obtenga una aprobación o una remisión del PCP primero. Si tiene una emergencia, nos pondremos en contacto con los médicos que le estén prestando atención de emergencia para gestionar su atención y darle seguimiento. Los médicos que le presten atención de emergencia decidirán cuándo su condición sea estable y la emergencia médica haya pasado. Después de que la emergencia haya pasado, usted tiene derecho a recibir atención de seguimiento para asegurarse de que su condición continúe estable. Nuestro plan cubrirá su atención de seguimiento. Si recibe atención de emergencia de proveedores fuera la red, intentaremos que proveedores de la red se encarguen de su atención en cuanto su condición médica y las circunstancias lo permitan.

¿Qué sucede si usted está fuera del área de servicio de su plan cuando tenga una necesidad urgente de atención?

Cuando esté fuera del área de servicios y no pueda recibir atención de un proveedor de la red, nuestro plan cubrirá la atención médica de urgencia que reciba de cualquier proveedor. Nuestro plan no cubre la atención de urgencia ni ninguna otra atención que no sea de emergencia si la recibe fuera de los Estados Unidos. Deben atenderlo proveedores de la red, salvo en situaciones de emergencia o de atención urgente, o para diálisis u otros servicios fuera del área. Si recibe atención de rutina de proveedores fuera de la red, ni Medicare ni Ultimate Health Plans serán responsables de los costos.

¿Cuál es el área de servicios de Ultimate Health Plans?

Los condados en nuestra área de servicios se listan abajo.

- El área de servicio del plan Premier de Ultimate incluye los condados de Citrus, Hernando, Hillsborough, Indian River, Lake, Manatee, Marion, Orange, Osceola, Pasco, Pinellas, Polk, Sarasota, Seminole, St. Lucie y Sumter.
- El área de servicio del plan Advantage Care de Ultimate incluye los condados de Citrus, Hernando, Hillsborough, Indian River, Lake, Manatee, Marion, Orange, Osceola, Pasco, Pinellas, Polk, Sarasota, Seminole, St. Lucie y Sumter.
- El área de servicio del plan Advantage Care COPD de Ultimate incluye los condados de Citrus, Hernando, Hillsborough, Indian River, Lake, Manatee, Marion, Orange, Osceola, Pasco, Pinellas, Polk, Sarasota, Seminole, St. Lucie y Sumter.
- El área de servicio del plan Advantage Plus de Ultimate incluye los condados de Citrus, Hernando, Hillsborough, Indian River, Lake, Manatee, Marion, Orange, Osceola, Pasco, Pinellas, Polk, Sarasota, Seminole, St. Lucie y Sumter.

¿Cómo puede encontrar proveedores y farmacias de Ultimate Health Plans que atiendan en su zona?

Encuentre médicos, hospitales, centros de enfermería especializada, proveedores de atención de salud mental ambulatoria y proveedores complementarios.

Los proveedores de Ultimate Health Plans están listados por especialidad en la sección 2. Los PCP están primero; a continuación, están los especialistas según el tipo de especialidad por orden alfabético, después los hospitales, los centros de enfermería especializada, los proveedores de atención de salud mental ambulatoria y los proveedores complementarios (centros de cirugía ambulatoria, proveedores de equipos médicos

duraderos, agencias de atención médica a domicilio, etc.). En cada especialidad, se indican los lugares donde atiende cada proveedor, bajo el condado y la ciudad correspondientes. Los proveedores también están listados por orden alfabético en el Índice de proveedores, en la parte de atrás de este directorio.

Todos los proveedores enumerados han sido contratados con Ultimate Health Plans para brindar servicios a los beneficiarios de Medicare y Medicaid.

Los proveedores identificados con una ★ (estrella) lograron una puntuación HEDIS de 5 estrellas en 2023. HEDIS (Conjunto de datos e información sobre la eficacia de la atención médica) se refiere a una herramienta de medición del gobierno utilizada por más del 90 por ciento de los planes de salud en los Estados Unidos para medir el desempeño en aspectos importantes de la atención y el servicio que brinda un proveedor o plan de salud.

Encuentre farmacias y proveedores de atención dental, atención de la vista, atención de la audición, salud conductual (mental) y programas de actividad física

Atención dental: Para encontrar un dentista u obtener ayuda para programar una cita, puede llamar al 1-800-340-8869 de lunes a domingo de 8 a. m. a 8 p. m. Los usuarios de TTY deben llamar al 711.

Atención de la vista: No se necesita una remisión de su PCP para recibir servicios para la vista de rutina. Los proveedores de oftalmología se asignan según el código postal de su casa. Si tiene preguntas sobre esta asignación o si necesita ayuda para encontrar un proveedor de atención de la vista de rutina, o para acceder a su beneficio de la vista, puede llamar al 1-800-210-5511 de lunes a domingo de 8 a. m. a 8 p. m. Los usuarios de TTY deben llamar al 711.

Atención de la audición: Si necesita encontrar un proveedor u obtener ayuda para programar una cita, puede llamar al 1-800-313-2763 de lunes a domingo de 8 a. m. a 8 p. m. Los usuarios de TTY deben llamar al 711.

Atención de la salud conductual (mental): No necesita una remisión de su PCP o Ultimate Health Plans para los servicios de salud conductual incluidos en su plan de beneficios. Para saber dónde atiende un proveedor, puede llamar al 1-800-627-1259 las 24 horas del día, los 7 días de la semana. Los usuarios de TTY deben llamar al 711.

Programa de actividad física: Tenemos un acuerdo con Tivity Health para el programa de actividad física SilverSneakers®. Aunque no necesita una remisión de su PCP, se recomienda que hable con su PCP antes de empezar cualquier programa de ejercicios. Puede llamar al 1-888-423-4632 para encontrar los centros de esta red o puede visitar el sitio web de SilverSneakers®, www.silversneakers.com, para buscar una clase, producto o programa de actividad física cerca de usted.

Farmacias: Las farmacias de la red están listadas en la parte de atrás de la sección 2. Están organizadas según su tipo (es decir, de venta directa, de venta por correo, de atención de largo plazo, etc.) y están listadas por orden alfabético por nombre, bajo el condado y ciudad correspondientes. Para encontrar una farmacia, búsquela por tipo y luego encuentre la dirección en el listado alfabético correspondiente.

Si tiene preguntas sobre Ultimate Health Plans o necesita ayuda para elegir un PCP, llame a nuestro Departamento de Servicios para Miembros al 1-888-657-4170 (TTY:711) de 8:00 am a 8:00 pm, de lunes a viernes. Entre el 1 de octubre y el 31 de marzo, estamos disponibles de lunes a domingo de 8:00 am a 8:00 pm. También puede visitar www.ChooseUltimate.com.

Primary Care Physicians / Médicos de cuidados primarios	
English / Inglés	Spanish / Español
Family Practice	Medicina familiar
General Practice	Medicina general
Geriatrics	Geriatría
Internal Medicine	Medicina interna

Specialists / Especialistas			
English / Inglés	Spanish / Español	English / Inglés	Spanish / Español
Acupuncture	Acupuntura	Neurosurgery	Neurocirugía
Allergy / Immunology	Alergias / Inmunología	Obstetrics / Gynecology	Obstetricia / Ginecología
Behavioral Health Providers	Proveedores de salud mental para pacientes ambulatorios	Oncology	Oncología
Cardiology	Cardiología	Ophthalmology	Oftalmología
Chiropractic	Quiropráctica	Orthopedic Surgery	Cirugía ortopédica
Colorectal Surgery	Cirugía colorrectal	Otolaryngology	Otorrinolaringología
Critical Care	Atención crítica	Pain Management	Manejo del dolor
Dermatology	Dermatología	Physical Medicine and Rehabilitation	Fisiatría y rehabilitación
Endocrinology	Endocrinología	Plastic & Reconstructive Surgery	Cirugía plástica y reconstructiva
Female Pelvic Medicine and Reconstructive Surgery	Medicina pélvica femenina y reconstructiva Cirugía	Podiatry	Podología
Gastroenterology	Gastroenterología	Pulmonology	Neumonología
General Surgery	Cirugía general	Radiation Oncology	Radioncología
Gynecological / Oncology	Obstetricia / Ginecología	Rheumatology	Reumatología
Hematology	Hematología	Sports Medicine	Medicina del deporte
Infectious Disease	Enfermedades infecciosas	Thoracic Surgery	Cirugía torácica
Nephrology	Nefrología	Urology	Urología
Neurology	Neurología	Vascular Surgery	Cirugía vascular

Facilities / Centros	
English / Inglés	Spanish / Español
Hospitals	Hospitales
Urgent Care Centers	Centros de atención de emergencia
Skilled Nursing Facilities (SNFs)	Centros de enfermería especializada (SNF)
Ancillary Providers / Proveedores complementarios	
English / Inglés	Spanish / Español
Ambulatory Surgical Center	Centro quirúrgico ambulatorio
Dental	Dental
Diabetic Supplies - Mail Order	Suministros para diabéticos - Venta por correo
Diagnostic Radiology	Radiología diagnóstica
Diagnostic Testing	Pruebas de diagnóstico
Durable Medical Equipment	Equipos médicos duraderos
Durable Medical Equipment - Mastectomy Supplies	Equipos médicos duraderos - Suministros de mastectomía
Fitness Program	Programa de actividad física
Home Health	Salud en casa
Hearing	Audición
Laboratory	Laboratorio
Mammography	Mamografías
Occupational Therapy	Terapia ocupacional
Optometry - Routine Vision Providers	Optometría - proveedores de atención de la vista de rutina
Outpatient Dialysis	Diálisis
Oxygen	Oxígeno
Physical Therapy	Terapia física
Prosthetics and Orthotics	Prótesis y órtesis
Sleep Studies	Estudios del sueño
Speech Therapy	Terapia del lenguaje

Pharmacies / Farmacias	
English / Inglés	Spanish / Español
Retail Pharmacies	Farmacias de venta al por menor
Mail Order Pharmacy	Farmacia de pedidos por correo
Home Infusion Pharmacies	Farmacias con servicios de infusión a domicilio
Long Term Care Pharmacies	Farmacias de cuidado a largo plazo

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CLULOW, SCOTT K., DO

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COPPA, STEPHEN P., DO

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DUMORNE, NADERGE, MD

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French | Spanish | Creole | Haitian
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GREENFIELD, STEVEN, MD

EDGAR H. PRICE JR. FAMILY &
CHILDREN HEALTHCARE CENTER
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Parrish, FL 34219
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HAIDER, ABDULLAH T., MD

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IDREES, ROZINA, MD

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KASSABOV, DANIELA Y., MD

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P: 941.747.2090 / F: 941.556.7785
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KHORSHID, MILENA, MD ★

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6110 State Rd 70 E
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KISHUN-JIT, NIRMALA, MD

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ID #: 200000047643-236828 (F) ✓

KONA, SUGUNA R., MD

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KUEHNE, RICHARD F., MD

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LEKOVIC, MIRSEN, MD

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 ID #: 200000047646-236357 (F) ✓

MANUEL JR., JOSE A., MD
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 Tamil
 ID #: 200000039878-182059 (F) X

ORTIZ-GONZALEZ, ELIZABETH, MD
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PEDROZA SIERRA, GERARDO A., MD
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 ID #: 200000045021-234976 (M) ✓

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 ID #: 200000047634-240593 (F) ✓

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SAN TUN, SABINE E., MD

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ID #: 200000047634-241180 (F) ✓

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ID #: 200000047634-241208 (F) ✓

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ID #: 200000047634-241238 (F) ✓

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ID #: 200000047634-241273 (F) ✓

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ID #: 200000047634-241817 (F) ✓

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BUTZ, STEFAN

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English

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P: 717.632.7493
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VARA, STEPHEN J., MD

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Ophthalmology**AHN, BYUNG-JOON, MD**

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English|Korean
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English | Korean
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English | Gujarati | Sindhi | Urdu
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BERGER, TODD, MD

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English
(M) ✓

BERGER, TODD, MD

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P: 941.792.2020 / F: 727.796.5029
English
(M) ✓

DAVIS, ROBERT, MD

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P: 941.792.2020 / F: 727.796.5029
English
(M) ✓

EL-JABALI, FAYSSAL, DO

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Arabic | English
(M) ✓

FOSTER, JOHN, MD

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English
(M) ✓

FOSTER, JOHN, MD

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English
(M) ✓

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English
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FRIEDMAN, ROBERT, MD

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English | Spanish
(M) ✓

KIERNAN, DANIEL, MD

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English
(M) ✓

KIERNAN, DANIEL, MD

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English
(M) ✓

KIERNAN, DANIEL, MD

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English
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KONKEL, COURTNEY, DO

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English
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KONKEL, COURTNEY, DO

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English
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English | Spanish
(F) ✓

MCCABE, CATHLEEN, MD

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English | Spanish
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MCCABE, CATHLEEN, MD

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English | Spanish
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English
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English
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O'NEILL, BRADLEY, DO

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English
(M) ✓

O'NEILL, BRADLEY, DO

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English
(M) ✓

Optometry - Medical Providers**BAUSBACK, HENRY, OD**

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English
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BAUSBACK, HENRY, OD

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English
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BAUSBACK, HENRY, OD

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English
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CAMP, MICHAEL, OD

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English
(M) ✓

CAMP, MICHAEL, OD

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English
(M) ✓

DUBIN, JAKE, OD

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English
(M) ✓

HAN, SCOTT, OD

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English
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HAN, SCOTT, OD

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English
(M) ✓

HAN, SCOTT, OD

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English
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HOSSENLOPP, CRAIG, OD

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English
(M) ✓

RUBIN, DAVID, OD

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English
(M) ✓

RUBIN, DAVID, OD

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(M) ✓

RUBIN, DAVID, OD

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English
(M) ✓

TRIM, LUCAS, OD

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English
(M) ✓

TRIM, LUCAS, OD

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English
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VANDENBERG, JOSEPH, OD

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English|Spanish
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VANDENBERG, JOSEPH, OD

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VANDENBERG, JOSEPH, OD

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English|Spanish
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Optometry - Routine Vision Providers

ARONSON, BARRY, OD

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English

BARJA, FERNANDO, OD

GLOBAL CARE OPTOMETRY
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English|Spanish

BLOM, THOMAS, OD

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English

BROOKS, KEVIN, OD

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BROOKS, KEVIN, OD

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English

BUI, CHRISTINE, OD

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CAPUTI, LORI, OD

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DEBELLO, EKATERINA, OD

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English|Spanish

FREY, ALEXA, OD

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English|Portuguese|Spanish

FURMAN, ADAM, OD

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English

GAUKHSHEYN, NATASHA, OD

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GEARY, AMANDA, OD

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English

GEORGY, KARIM, OD

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GRYNYK, BOGDAN, OD

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HANDY, NATASHA, OD

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English

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English

LEBLANC, ALLISON, OD

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English

LEWENSON, ROBERT, OD

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English

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English

LOHER, MEGHAN, OD

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English

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English

MARTINEZ GARCIA, VICTOR, OD

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English

MILLER, JOSEPH, OD

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English

MORRISON, CARYN, OD

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English

OCASIO, JOHN, OD

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English | Spanish

PARKINS, LISA, OD

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P: 941.217.7850 / F: 239.772.8783
English

PARNES, ROBERT, OD

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English

PHUNG, ANH, OD

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English | Spanish

RANEY, DENNIS, OD

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English

RANEY, DENNIS, OD

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English

SACKSTEDER, RYAN, OD

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English

SAMI, MUHAMMAD, OD

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English

SCHATZ, SCOTT, OD

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English

SIMEUS, ANGELINE, OD

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Sarasota, FL 34231
P: 941.925.2010 / F: 941.893.3304
English | Haitian Creole | Spanish

SMITH, KEVIN, OD

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Sarasota, FL 34231
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English

STUPP, ELLIOTT, OD

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English

THOMPSON, KEITH, OD

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English

TOFFOLI, NICHOLAS, OD

GLOBAL CARE OPTOMETRY
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Sarasota, FL 34243
P: 941.217.7850 / F: 239.772.8783
English | Spanish

TOFFOLI, NICHOLAS, OD

GLOBAL CARE OPTOMETRY
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English | Spanish

ULLAH, ROHEEDA, OD

GLOBAL CARE OPTOMETRY
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Sarasota, FL 34243
P: 941.217.7850 / F: 239.772.8783
English

VACHHANI, SONYA, OD

GLOBAL CARE OPTOMETRY
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Sarasota, FL 34243
P: 941.217.7850 / F: 239.772.8783
English | Gujarati

WOOLWINE, JOSHUA, OD

EYE DOCTORS OPTICAL OUTLETS
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Sarasota, FL 34231
P: 941.925.2010 / F: 941.893.3304
English

YOUNG, ARTHUR, OD

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English

Oral Surgery**BURNE, MARK**

COMFORTABLE CARE DENTAL
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2787 Sycamore Str Ste 106
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CELIS, VICTOR

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FREEMAN, ROSS T.

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FREEMAN, ROSS T.

ASPEN DENTAL
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FREEMAN, ROSS T.

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4246 S Tamiami Trail
Venice, FL 34293
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INGALLS, JEFFREY

SAGE DENTAL OF SIESTA ROW PLLC
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Sarasota, FL 34239
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KALSOW, OLEG E.

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5278 University Pkwy
Sarasota, FL 34243
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LAWSON, SCOTT D.

GREENBERG DENTAL
ORTHODONTICS- SARASOTA BEE
RIDGE
4280 Bee Ridge Rd
Sarasota, FL 34233
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OKASHA, MOHAMMAD

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Orthopedic Surgery**GONZALEZ, JULIO, MD**

ORTHOPAEDIC CENTER OF VENICE,
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Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-888-657-4170 (TTY: 711). Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic: إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على 1-888-657-4170 (TTY: 711). سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं। एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-888-657-4170 (TTY: 711) पर फोन करें। कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है। यह एक मुफ्त सेवा है।

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-888-657-4170 (TTY: 711). Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Portuguese: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-888-657-4170 (TTY: 711). Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-888-657-4170 (TTY: 711). Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatnie skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-888-657-4170 (TTY: 711). Ta usługa jest bezpłatna.

Japanese: 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、1-888-657-4170 (TTY: 711) にお電話ください。日本語を話す人者が支援いたします。これは無料のサービスです。



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This directory is current as of 11/13/2024. This directory provides a list of Ultimate Health Plans' current network providers and pharmacies for Manatee and Sarasota counties. Changes to our provider and pharmacy network may occur during the benefit year. To access Ultimate Health Plans' updated online provider and pharmacy directory, you can visit www.ChooseUltimate.com. For more recent information or any questions about the information contained in this directory, please call Ultimate Health Plans Member Services at 1-888-657-4170 (TTY: 711), 8:00 am to 8:00 pm, Monday through Friday. Between October 1 and March 31, we are available Monday through Sunday from 8:00 am to 8:00 pm or visit www.ChooseUltimate.com. You can get this information for free in other formats, such as large print, braille, or audio. Call our toll-free number at 1-888-657-4170. Your request for the provider directory in an accessible format or language will be applied on a standing basis unless you request otherwise.

Este es el directorio actual desde el 11/13/2024. Este directorio incluye una lista de los proveedores y farmacias actuales de la red de Ultimate Health Plans en los condados de Manatee y Sarasota. Nuestra red de proveedores y de farmacias podría sufrir modificaciones durante el año de beneficios. Para acceder al directorio actualizado de proveedores y de farmacias en línea de Ultimate Health Plans, puede visitar www.ChooseUltimate.com. Para obtener información más actualizada o si tiene preguntas sobre la información incluida en este directorio, comuníquese con nuestro Departamento de Servicio para Miembros al 1-888-657-4170 (TTY:711) de 8:00 am a 8:00 pm, de lunes a viernes. Entre el 1 de octubre y el 31 de marzo, estamos disponibles de lunes a domingo de 8:00 am a 8:00 pm o visite www.ChooseUltimate.com. Puede obtener esta información gratis en otros formatos, como letra grande, braille o audio. Llame a nuestra línea gratis al 1-888-657-4170. Su solicitud para obtener el directorio de proveedores en un formato o idioma accesible se aplicará de manera constante, a menos que pida otra cosa.