



**Allergy, Asthma, Arthritis
Center of Central Florida**

Jose Andrade M.D.
NPI # 1356330252

www.andrademd.com

Tel.: (407) 658-7882

Fax: (407) 658-7995

Orlando Office
5412 Curry Ford Rd
Orlando, FL 32812

Kissimmee Office
322 W Oak Dr.
Kissimmee, FL 34741

<u>INSURANCE LIST</u>	
AARP	
ACORDIA	
AETNA HMO	AUTHORIZATION REFERRAL REQUIRED *WITH CPT CODES OR 99499/GOOD FOR 1 YR*
AETNA PPO	NO REFERRAL REQUIRED
AMERICAN MEDICAL SECURITY	
AMERIGROUP	SCRIPT REFERRAL *REFERRAL GOOD FOR 1YR.*
AMERIBEN	NO REFERRAL REQUIRED
ASSURANT HEALTH	
AVMED	NO REFERRAL REQUIRED
BEECH STREET	
BENEFIT MANGEMENT (BMC)	
BENESIGHT	
BCBS HMO/PPO AND HEALTH OPTION	NO REFERRAL REQUIRED
BCBS HMO, MEDICARE HMO	AUTHORIZATION REFERRAL REQUIRED *FROM THE WEBSITE OF BCBS*
BRMS	
CAREPLUS	AUTHORIZATION REFERRAL REQUIRED/ *HAS ITS OWN EXPIRATION DATE & CPT CODES*
CENTRAL BENEFITS (PHCS)	
CHAMPVA	NO REFERRAL REQUIRED
CIGNA HMO	SCRIPT REFERRAL *GOOD FOR 1 YR*
CIGNA PPO	NO REFERRAL REQUIRED
CCN	
CMS title 21	
CMS title 19:	
COVENTRY COMMERCIAL ONLY	
CORESOURCE	NO REFERRAL REQUIRED
EVOLUTIONS HEALTHCARE SYSTEM	
FIRST HEALTH	
FLORIDA HEALTHCARE SYSTEM (FHHS)	NO REFERRAL REQUIRED



**Allergy, Asthma, Arthritis
Center of Central Florida**

Jose Andrade M.D.
NPI # 1356330252

www.andrademd.com

Orlando Office
5412 Curry Ford Rd
Orlando, FL 32812

Tel.: (407) 658-7882
Fax: (407) 658-7995

Kissimmee Office
322 W Oak Dr.
Kissimmee, FL 34741

FLORIDA HEALTH PLUS	AUTHORIZATION REFERRAL REQUIRED
FREEDOM	AUTHORIZATION REFERRAL REQUIRED *IN FREEDOM FORM*
GEHA	NO REFERRAL REQUIRED
GHI	NO REFERRAL REQUIRED
GOLDEN RULE	NO REFERRAL REQUIRED
GREAT WEST	NO REFERRAL REQUIRED
HEALTHEASE	SCRIPT REFERRAL *GOOD FOR 1 YR*
HUMANA HMO	AUTHORIZATION REFERRAL REQUIRED *HAS ITS OWN EXPIRATION/ CPT CODE*
HUMANA PPO	NO REFERRAL REQUIRED
MAIL HANDLERS MANGED CARE OF AMERICA	NO REFERRAL REQUIRED
MAGELLAN	SCRIPT REFERRAL *GOOD FOR 1 YR*
MERITIAN HEALTH	
MOLINA	SCRIPT REFERRAL *GOOD FOR 1 YR*
SIMPLY HEALTHCARE	SCRIPT REFERRAL *GOOD FOR 1 YR*
STAYWELL	SCRIPT REFERRAL *REFERRAL GOOD FOR 1YR*
STRAIGHT MEDICAID	NO REFERRAL REQUIRED
MEDICARE	NO REFERRAL REQUIRED
MEDICARE (HMO): BCBS HMO HUMANA CARE PLUS SIMPLY FREEDOM WELLCARE	LOOK ON THE SIDE OF EACH INSURANCE FOR DETAILS
MEDICAID (HMO): STAYWELL HEALTHEASE AMERIGROUP	SCRIPT REFERRAL * REFERRAL GOOD FOR 1 YR* *EXCEPT FOR AMERIGROUP*
MULTIPLAN	
PRESTIGE	SCRIPT REFERRAL



Allergy, Asthma, Arthritis
Center of Central Florida

Jose Andrade M.D.
NPI # 1356330252

www.andrademd.com

Tel.: (407) 658-7882

Fax: (407) 658-7995

Orlando Office
5412 Curry Ford Rd
Orlando, FL 32812

Kissimmee Office
322 W Oak Dr.
Kissimmee, FL 34741

ONE HEALTH PLAN PPO/HMO	
PEDICARE	AUTHORIZATION REFERRAL REQUIRED *WITH A UM #*
PRINCIPAL HEALTHCARE	
TRICARE STANDARD	NO REFERRAL REQUIRED
TRICARE PRIME	AUTHORIZATION REFERRAL REQUIRED *HAS ITS OWN EXPIRATION DATE*
UMR	NO REFERRAL REQUIRED
UNICARE	
UNIVERSAL	AUTHORIZATION REFERRAL REQUIRED
W/C DISNEY	NEED TO FAX <u>MEDICAL RECORDS</u> BEFORE SCHEDULING APPOINTMENT
WELLCARE	SCRIPT REFERRAL *GOOD FOR 1 YR*

INSURANCE THAT WE ARE NOT ACCEPTING:

- BCBS -BLUE SELECT
- BCBS -MY BLUE
- CIGNA LOCAL PLUS
- CIGNA CENTRAL FLORIDA NETWORK
- SUNSHINE STATE
- UNITED HEALTHCARE (Only OC & Medicaid)
- ORLANDO REGIONAL HOSPITAL EMPLOYEE

Our Emails:

billingoffice@andrademd.com

frontoffice@andrademd.com

-We also have a patient portal on our website and our EMR is with eCW. ******DR. ANDRADE ONLY ATTENDS TO PATIENTS WITH ALLERGY, ASTHMA OR IMMUNOLOGICAL CONDITIONS. HE NO LONGER PRACTICE RHEUMATOLOGY (Arthritis) ******* January 2017 mbv/it