Has your Retina Specialist Been Dropped from Your Medicare Advantage Plan?

If So, the American Society of Retina Specialists Wants to Hear From You

Insurers across the country are increasingly dropping physicians and other health care providers from their Medicare Advantage plans without cause.

These no-cause terminations put seniors in Medicare Advantage plans at risk from accessing highly specialized physicians, like retina specialists.

The American Society of Retina Specialists (ASRS) and other organizations want to protect seniors by instituting policies that would make it more difficult for Medicare Advantage plans to drop physicians from their networks in the middle of the year without cause. Medicare Advantage plans should also be required to provide timely and adequate notice to their patients about changes to their provider network and to ensure that patients do not experience gaps in care when their physician is dropped.

ASRS wants to hear from patients. If your retina specialist has been dropped from your Medicare Advantage plan, please provide as much information as you can regarding your physician's termination. If needed, you can fill out the attached form multiple times.

Your name is not required. However, should you choose to include your name, ASRS may contact you for more information. All contact information provided will be kept confidential.
Medicare Advantage Plan Network Termination
Patient Reporting Form

Please provide as much information as you can regarding your physician’s termination from a Medicare Advantage network. If needed, you can fill out the form multiple times. When completed, please fax or mail to ASRS (see contact information below).

Contact Information

Full name

________________________________________

City/State/Zip

________________________________________

Email address

________________________________________

Phone number

________________________________________

Can we contact you directly if more information is needed?
○ Yes
○ No

Medicare Advantage Plan Information

Plan name

________________________________________

Insurance company name

________________________________________

City/State

________________________________________

Type of Medicare Advantage Plan (check all that apply):
○ Preferred Provider Organization (PPO)
○ Health Maintenance Organization (HMO)
○ Provider Sponsored Organization (PSO)
○ Medicare Savings Account (MSA)
○ Private Fee-for-Service (PFFS)
○ Religious Fraternal Benefits (RFB)

Name of physician dropped from plan

________________________________________

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Did you receive a notification letter from the insurance company?
○ Yes
○ No

Date you learned your doctor was dropped (mm/dd/yy) / / 

Were you given a referral to a retina specialist?
○ Yes
○ No

Were you able to schedule a timely visit?
○ Yes
○ No

Is traveling to this retina specialist more, less or equally convenient?
○ More
○ Less
○ Equal

Did you issue a complaint with the Centers for Medicare and Medicaid Services (CMS)? Their contact information is 1-800-MEDICARE.
○ Yes
○ No

Please provide any other information you think may be helpful:

Are you considering changing health plans based on your physician being terminated from the plan?
○ Yes
○ No

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