

The Preston Group implements a management system that permits **DELPHI CARD**[®] participants to receive care from any appropriately trained and experienced medical professional. Participants may access providers by contacting their RN Counselor.

DELPHI CARD[®] RN Counselors act as an advocate for both the participant and the medical professional, not the gatekeeper to health care services.

DELPHI CARD[®] Health Care Management concept is based on the premise that the participant, as the user of medical services, is responsible for the economic responsibilities of their health care.

The Preston Group, Inc.,
DELPHI CARD[®] Offices:

Corporate:

167 Country Commons Road
Cary, IL 60013
Phone: 847-516-9592
Fax: 847-516-0456

Marketing / Provider Relations:

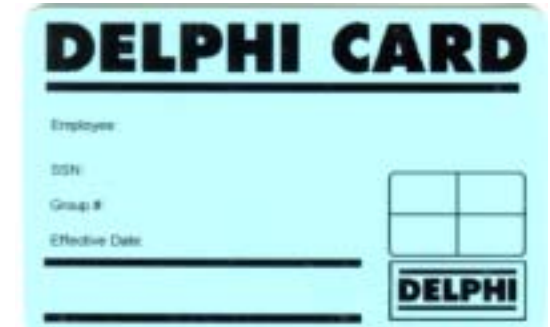
412 Gear Street
Galena, IL 61036
Phone: 815-777-6127
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Claims Address:

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Cary, IL 60013

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The Preston Group, Inc.

DELPHI CARD[®]
Cary, IL 60013

**Provider
Brochure**

VERIFICATION OF BENEFITS

To determine if a participant who presents you with a **DELPHI CARD**[®] is an eligible participant, call 1-800-382-4711. To determine eligibility, the following information is required:

- **Insured's Name**
- **Patient's Name**
- **Insured's Social Security #**
- **Employer's Name**

PRECERTIFICATION PROCESS

DELPHI CARD[®] reviews all elective hospital admissions, maternity, surgical procedures (inpatient/outpatient), and some specific outpatient procedures.

If precertification is not obtained, the participant will incur a financial penalty. To certify a procedure the participant will need to call 1-800-382-4711 and speak with his/her RN Counselor. The provider may be asked to provide clinical information through completion of a treatment plan or a precertification authorization request form. The provider can expect to receive a copy of precertification acknowledgement

letter which will indicate the services which have been certified.

THE FOLLOWING SERVICES REQUIRE PRECERTIFICATION:

- MRI and CAT Scans
- Chiropractic Services
- Emergency Admissions
- Surgery (inpatient/outpatient)
- Hospital Admissions
- Maternity Services
- Outpatient procedures which total \$750 or more
- Re-authorization (physical, occupational, and speech therapy, pulmonary or cardiac therapy, and pain treatment/or therapy).
- Durable Medical Equipment
- Home Health Services
- Any type of treatment occurring in a serious (vein sclerosing, headache clinics, psychiatric counseling).
- The **DELPHI CARD**[®] staff utilize various national standards when reviewing and completing the precertification process. The following criteria is utilized:

HCIA LOS Standards
Inter Qual Criteria
AHCPR Guidelines

REFERRALS

DELPHI CARD[®] does not require a gatekeeper or referral form to be completed to access a specialist. **DELPHI CARD**[®] participants may call and speak to his/her RN Counselor to locate the specialist in their area that accepts **DELPHI CARD**[®] benefit maximum as payment in full. A referral form is not required.

PROVIDER QUESTIONS:

If a provider questions a utilization or case management decision the RN Counselor will be available to review the criteria utilized.

If the provider has further questions or concerns and wishes to consult with a **DELPHI CARD**[®] medical advisor, the following step should be taken:

Submit your case analysis or medical position for review. Include, in detail, the clinical information which would justify your request for