



Subject: Benefit Limit Exception Form

Scope: Unison MedPLUS

The Benefit Limit Exception Form has been revised and relocated on the Unison Health Plan website. Please use this updated form for all benefit limit exception requests. The form can be accessed by going to www.unisonhealthplan.com. After you select Pennsylvania as the state and Unison MedPLUS plan, please select the command “For Providers.” On the left-hand side of the web page, click on the “Forms/Manuals/EDI” section. The form is listed on the right of the screen. Additional forms are also displayed in this section for your convenience.

Should you have any questions, please contact our Provider Services Department at 1-800-600-9007.

*******Utilize Emdeon for batch and real-time EDI transactions****Payer ID 25175*******

Unison utilizes a clearinghouse (Emdeon, AKA WebMD) to receive electronic claims from providers and send electronic remittance advices to providers. Please access our website at www.unisonhealthplan.com to obtain more information regarding EDI and view our companion guides for electronic claim submissions.
