Blue Shield Continuity of Care

What is continuity of care?

Blue Shield of California understands the importance of maintaining your relationship with your doctor when you have a serious medical condition.

If you are currently under care with a provider who is not in the Blue Shield network, you can request for continuity of your care. Continuity of care allows you to continue to see your current non-network provider during the course of your treatment while still receiving the network level of benefits.

How does it work?

The continuity of care allows eligible members to continue to see your current non-network provider during the course of your treatment while still receiving the network level of benefits. To request continuity of care, please call Blue Shield Member Services at **(800)** 642-6155 Monday through Friday, 7a.m – 7p.m.

To help Blue Shield obtain the medical records required to make a decision about your condition as quickly as possible, you should contact your physician and complete their applicable medical release form. This will help Blue Shield obtain the records required to complete your request

Who is eligible and what type of conditions qualify for transition assistance?

If you are newly enrolling in Blue Shield through your employer or your provider has discontinued contracting with Blue Shield you may apply for continuity of care. The following conditions may qualify for continuation of care with your current treating physician:

- An acute condition that has a limited duration.
- A serious chronic condition.
- Pregnancy, including the immediate postpartum period.
- Care for a child, from newborn to 36 months of age.
- A surgery or other treatment that was previously recommended and documented by your doctor to take place within 180 days of the effective date of coverage.
- A terminal illness that has a high probability of causing death within one year or less is covered for the duration of the terminal illness.

I just found out my employer is changing health plans and I have a scheduled surgery at a hospital that isn't in the Blue Shield network. What do I do?

You may be eligible for continuity of care. To request continuity of care, please call Blue Shield Member Services at **(800) 642-6155** Monday through Friday, 7a.m – 7p.m.

Will I need to contact my provider regarding my continuity of care request? Will I need to complete a medical release form for my provider to release records to Blue Shield?

To help Blue Shield obtain the required medical records to make a decision about your condition as quickly as possible, you should contact your physician and complete their applicable medical release form. This will help Blue Shield obtain the records required to complete your request.

What if I have a chronic condition?

If you need ongoing care for a chronic condition and you're not in an acute phase of your illness needing special treatment, you should select a provider from the Blue Shield network. If you need help locating a new provider, please call Blue Shield Member Services (800) 642-6155 Monday through Friday, 7a.m – 7p.m..

How do I apply for continuity of care? Where do I get my application?

Please call Blue Shield Member Services at (800) 642-6155 Monday through Friday, 7a.m - 7p.m.

They can assist you with completing the Continuity of Care Application. You can also download the Continuity of Care Application by going to **blueshieldca.com** and searching for Continuity of Care.

What happens after I've sent in my request for continuity of care?

Once Blue Shield has received **all information** needed to make a decision, they will notify you and your provider by mail no later than 5 business days of the determination.

If I am currently enrolled in an HMO, will I still be able to see the same specialists if my Medical Group and PCP are in the Blue Shield network?

If your current PCP and Medical Group are in Blue Shield's network, then you can continue to see all of your Medical Group specialists.

What if I don't want to change my doctor, but I don't qualify for continuity of care?

HMO plan members only have access to covered services through a network of physicians and facilities as directed by their Personal Physician. If you choose to seek care from non-network providers, then you will need to pay for all treatment costs. If you are seeing a specialist that is part of a medical group in the Blue Shield network, Blue Shield can help you find a Personal Physician within the same network medical group. Blue Shield can also help you find a network doctor that can provide the care you need if your current doctor is not part of the Blue Shield network.

If you are a **PPO member** and choose to see a provider who is not part of the Blue Shield network, you will need to pay for services at the non-network level of care. Typically, you will have to pay a coinsurance amount as well as the difference between the non-network provider's cost and the amount Blue Shield allows for that service.

Blue Shield Member Services can also help you find a network provider. Just call your dedicated team at **(800) 642-6155**.

Who do I call if I have questions?

For more information on the continuity of care or transition process, please call Blue Shield Member Services at **(800) 642-6155** Monday through Friday, 7a.m – 7p.m.