

continuity of care

For Members

Premera Blue Cross has a plan to ensure your care continues when the doctor, provider or health-care facility you chose is no longer in our network.

To get the most out of your health-care benefits, seek care from a network physician, other provider or facility. Our Customer Service staff* will help you find a provider.

*Please call the number on the back of your health plan ID card if you think you need to see an out-of-network doctor or provider. To choose a new doctor or other provider, call us or check our online provider directory at www.premera.com.

Please refer to the table below to determine your care options.

OUTPATIENT DOCTOR VISITS / OTHER OUTPATIENT	WHAT YOU NEED TO DO TO KEEP YOUR HIGHEST LEVEL OF BENEFITS...
Physical exams, urgent health-care problems or regular follow-up visits	After 60 days, you need to select a new contracted provider for follow-up visits. This doctor/provider also should have admitting privileges to a contracted hospital.
Chronic medical condition involved in ongoing therapies (other than oral medications)	You may continue with your current provider for 60 days. You will need to select a new contracted provider for follow-up care after that time.
Scheduled for an elective procedure	We will review these on a case-by-case basis. If service is scheduled more than 60 days after the provider leaves our network, you will need to schedule service with a contracted provider.
Involved in active ongoing treatment	You may be allowed to complete the current treatment plan. Cases beyond 60 days will be evaluated individually. Such treatments may include: <ul style="list-style-type: none"> • Active phase of chemotherapy • Active phase of radiation • Initial phase of anticoagulation • Follow-up of reconstructive surgery • Rapid titration of medication dosed (e.g., steroids)
Physical, occupational and speech therapies	If treatment is expected to last beyond 60 days, you need to see a new provider.
Rehabilitation services	A contracted provider will re-evaluate the treatment plan, the need for treatment and the expected length of treatment.
HOME-CARE / HOSPICE SERVICES	WHAT YOU NEED TO DO TO KEEP YOUR HIGHEST LEVEL OF BENEFITS...
Members enrolled in a hospice program	Members enrolled in a hospice program and currently receiving services will be allowed to remain with their current providers.
Home-care services	We will help you find a contracted provider.
Home-care physical, occupational or speech therapies	We will help you find a contracted provider if therapies are expected to last longer than 6 weeks.
PREGNANCY CARE	WHAT YOU NEED TO DO TO KEEP YOUR HIGHEST LEVEL OF BENEFITS...
2nd and 3rd trimesters	You may remain with your doctor through delivery and initial postpartum visit, generally up to 8 weeks after delivery.
MENTAL-HEALTH / SUBSTANCE ABUSE	WHAT YOU NEED TO DO TO KEEP YOUR HIGHEST LEVEL OF BENEFITS...
Mental Health and Substance Abuse Inpatient Services	Services for inpatient mental health will be handled on a case-by-case basis.
Mental Health and Substance Abuse Outpatient Services other than Intensive Outpatient Programs (IOP)	Members can receive outpatient services for a maximum of 60 days and then Premera Blue Cross will help you find a new, contracted provider.
Mental Health and Substance Abuse Intensive Outpatient Programs (IOP)	Members may finish the program if you have already been in the program for 2 weeks and if the remaining time in the program does not exceed 8 weeks. If you have been in an Intensive Outpatient Program for less than 2 weeks, Premera Blue Cross will help you find a new, contracted provider.
HOSPITAL CARE	WHAT YOU NEED TO DO TO KEEP YOUR HIGHEST LEVEL OF BENEFITS...
Hospitalized when contract ends	If you are hospitalized, you can remain in the hospital until your episode of care is completed to discharge. For longer stays, we may have to transfer you to a contracted facility, depending on your medical stability and physician approval. Patients in the middle of a hospital stay may keep their attending physicians until discharge.

Please Note: Your plan may not cover all the services listed above. Please refer to your benefit booklet or contract, or contact Customer Service for specific details on your plan's benefits.