

Continuity of Care Program

Blue Shield of California's Continuity of Care Program helps eligible members remain under the care of a current provider. Read on to learn how to qualify for continuity of care services after your plan changes.

Maintaining continuity of care

Blue Shield knows it's important to maintain a strong doctor-patient relationship when you change healthcare plans. This includes staying with a provider while getting care for a serious medical condition.

That's why Blue Shield created the Continuity of Care Program. We're excited about recent legal changes that expanded eligibility for these services to more members.

Continuity of care for newly enrolled members

If you or your covered dependents are new enrollees in a Blue Shield plan and are currently getting care for a qualifying medical condition from a healthcare provider that does not belong to Blue Shield's provider network, you may be eligible for completion of care with your current provider. Note: The Continuity of Care Program is not available to all new enrollees of Blue Shield plans.

Who is eligible?

You may qualify for continuity of care services:

- You are a current subscriber or enrolled dependent currently getting care for a qualifying medical condition from a provider no longer in your health plan's network.
- You or your covered dependent are newly enrolled and are currently getting care for a qualifying medical condition from a healthcare provider outside of Blue Shield's network.
- You are a member whose employer group made a plan change. Your group no longer offers coverage for you to complete your current course of care with a network provider.
- You or your covered dependents had constant health coverage. Your last health plan prior to enrolling with Blue Shield withdrew from the health plan market.

 You are a Blue Shield plan subscriber or a covered dependent getting care for a qualifying medical condition from a non-network provider. Your Blue Shield plan offers no non-network benefits.

Qualifying medical conditions

Medical conditions that qualify for continuity of care services may include:

- Acute conditions that need prompt medical attention for a limited time
- Serious chronic conditions, until a course of care is completed so that you can be transferred to a Blue Shield network provider
- Pregnancy and postpartum care
- · Infant care from newborn to 36 months old
- Maternal mental health conditions during pregnancy, around the time of birth, or postpartum, up to one year after delivery
- Surgery or other care recommended and documented by a provider no longer in your plan's network. The surgery must occur within the allowed time frames per state and federal laws.
- Terminal illness which may exceed 12 months from the contract termination date or the effective date of coverage for a new enrollee.

The time that continuity of care services are available depends on the qualifying medical condition. Services must be approved by Blue Shield. Your non-network provider of services must accept Blue Shield's network (contracted) rate. They must also agree to collect only the related copayments or coinsurance.

Non-network providers cannot charge members the difference between Blue Shield's contracted rate and the out-of-network rate. This is known as balance-billing.

Who is not eligible?

Eligibility requirements for continuity of care have not been met if:

- You are a new Blue Shield subscriber or dependent who has non-network benefits.
- You are a new Blue Shield subscriber or dependent who has had no previous constant health plan coverage.
- You are a member who has not established treatment with a non-network provider prior to your enrollment date with Blue Shield.
- You are a member who does not have a qualifying medical condition.
- You are a member whose non-network provider is not willing to accept Blue Shield's network contracted rate.
- As a current Blue Shield member, you voluntarily change your plan; your current provider is not part of the new plan's network.
- You are a member who is enrolled in a selffunded group; your employer does not offer continuity of care services.

Services not eligible for continuity of care

- Supporting services like radiology, laboratory, audiology and hearing services, cardiac monitoring, sleep laboratory services, and dialysis centers
- Routine exams, vaccinations, and health assessments
- · Specialty assessments for a new clinical concern
- Chronic conditions that can be monitored: diabetes, arthritis, allergies, asthma, kidney disease and hypertension
- Minor illnesses like colds, sore throats, and ear infections
- Elective services and procedures not scheduled prior to the provider termination
- Second opinions
- Home care services (home health, home infusion, skilled nursing, private duty nursing, personal care assistant services)
- Medical day care (adult and pediatric)
- Transportation services
- Durable Medical Equipment (DME) like orthotics and prosthetics

Other considerations

Mental health services

You can access continuity of care if you are currently getting services for a serious mental health condition. To learn more, contact our mental health service administrator at the Mental Health Customer Service number on your Blue Shield member ID card.

Dental services

If you are currently getting services for a serious dental condition, and you or your employer purchased extra dental plan benefits from Blue Shield, you may be eligible to continue care with your current dental provider.

To learn more, contact our dental plan administrator at the Customer Service number on your Blue Shield member ID card.

Non-network providers

If your treating physician or other healthcare provider (such as a hospital) does not belong to the provider network for your health plan, Customer Service will assess your continuity of care needs. If you are eligible, we will direct your Continuity of Care Services Request Form to the correct department.

Your provider of services must agree to certain conditions. This includes terms of reimbursement that are like those used by the plan for participating providers in the same pricing region as permitted by state law.

If your provider does not agree, your request for completion of care with the non-network provider will be denied. Blue Shield will notify you in writing of any special provisions and/or limitations.

Services covered under the Continuity of Care Program do not include benefits that are not covered under your Blue Shield plan contract or policy.

How to apply for continuity of care services

If your provider leaves your Blue Shield health plan's network and you believe you qualify for our Continuity of Care Program, contact Blue Shield Customer Service at the number on the back of your member ID card.

Blue Shield Customer Service can help you with network provider options and plan benefits. If needed, we can also help complete a Continuity of Care Request Form for processing. View the form at blueshieldca.com/bsca/member-forms.sp.

Blue Shield of California

Notice Informing Individuals about Nondiscrimination and Accessibility Requirements

Discrimination is against the law

Blue Shield of California complies with applicable state laws and federal civil rights laws, and does not discriminate on the basis of race, color, national origin, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age, or disability. Blue Shield of California does not exclude people or treat them differently because of race, color, national origin, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age, or disability.

Blue Shield of California:

- Provides aids and services at no cost to people with disabilities to communicate effectively with us such as:
 - Qualified sign language interpreters
 - Written information in other formats (including large print, audio, accessible electronic formats, and other formats)
- Provides language services at no cost to people whose primary language is not English such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact the Blue Shield of California Civil Rights Coordinator.

If you believe that Blue Shield of California has failed to provide these services or discriminated in another way on the basis of race, color, national origin, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age, or disability, you can file a grievance with:

Blue Shield of California Civil Rights Coordinator P.O. Box 629007 El Dorado Hills, CA 95762-9007

Phone: (844) 831-4133 (TTY: 711)

Fax: (844) 696-6070

Email: BlueShieldCivilRightsCoordinator@blueshieldca.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, our Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services 200 Independence Avenue SW. Room 509F, HHH Building Washington, DC 20201 (800) 368-1019; TTY: (800) 537-7697

Complaint forms are available at www.hhs.gov/ocr/office/file/index.html.



Notice of the Availability of Language Assistance Services Blue Shield of California

IMPORTANT: Can you read this letter? If not, we can have somebody help you read it. You may also be able to get this letter written in your language. For help at no cost, please call right away at the Member/Customer Service telephone number on the back of your Blue Shield ID card, or (866) 346-7198.

IMPORTANTE: ¿Puede leer esta carta? Si no, podemos hacer que alguien le ayude a leerla. También puede recibir esta carta en su idioma. Para ayuda sin cargo, por favor llame inmediatamente al teléfono de Servicios al miembro/cliente que se encuentra al reverso de su tarjeta de identificación de Blue Shield o al (866) 346-7198. (Spanish)

重要通知:您能讀懂這封信嗎?如果不能,我們可以請人幫您閱讀。這封信也可以 用您所講的語言書寫。如需免费幫助,請立即撥打登列在您的Blue Shield ID卡背面上的 會員/客戶服務部的電話,或者撥打電話 (866) 346-7198。(Chinese)

QUAN TRỌNG: Quý vị có thể đọc lá thư này không? Nếu không, chúng tôi có thể nhờ người giúp quý vị đọc thư. Quý vị cũng có thể nhận lá thư này được viết bằng ngôn ngữ của quý vị. Để được hỗ trợ miễn phí, vui lòng gọi ngay đến Ban Dịch vụ Hội viên/Khách hàng theo số ở mặt sau thẻ ID Blue Shield của quý vị hoặc theo số (866) 346-7198. (Vietnamese)

MAHALAGA: Nababasa mo ba ang sulat na ito? Kung hindi, maari kaming kumuha ng isang tao upang matulungan ka upang mabasa ito. Maari ka ring makakuha ng sulat na ito na nakasulat sa iyong wika. Para sa libreng tulong, mangyaring tumawag kaagad sa numerong telepono ng Miyembro/Customer Service sa likod ng iyong Blue Shield ID kard, o (866) 346-7198. (Tagalog)

Baa' ákohwiindzindooígí: Díí naaltsoosísh yííniłta'go bííníghah? Doo bííníghahgóó éí, naaltsoos nich'į' yiidóołtahígíí ła' nihee hóló. Díí naaltsoos ałdó' t'áá Diné k'ehjí ádoolnííł nínízingo bíighah. Doo bąah ílínígó shíká' adoowoł nínízingó nihich'į' béésh bee hodíilnih dóó námboo éí díí Blue Shield bee néího'dílzinígí bine'déé' bikáá' éí doodagó éí (866) 346-7198 ji' hodíílnih. (Navajo)

중요: 이 서신을 읽을 수 있으세요? 읽으실 수 경우, 도움을 드릴 수 있는 사람이 있습니다. 또한 다른 언어로 작성된 이 서신을 받으실 수도 있습니다. 무료로 도움을 받으시려면 Blue Shield ID 카드 뒷면의 회원/고객 서비스 전화번호 또는 (866) 346-7198로 지금 전환하세요. (Korean)

ԿԱՐԵՎՈՐ Է. Կարողանում ե՞ք կարդալ այս նամակը։ Եթե ոչ, ապա մենք կօգնենք ձեզ։ Դուք պետք է նաև կարողանաք ստանալ այս նամակը ձեր լեզվով։ Ծառայությունն անվձար է։ Խնդրում ենք անմիջապես զանգահարել Հաձախորդների սպասարկման բաժնի հեռախոսահամարով, որը նշված է ձեր Blue Shield ID քարտի ետևի մասում, կամ (866) 346-7198 համարով։ (Armenian)

ВАЖНО: Не можете прочесть данное письмо? Мы поможем вам, если необходимо. Вы также можете получить это письмо написанное на вашем родном языке. Позвоните в Службу клиентской/членской поддержки прямо сейчас по телефону, указанному сзади идентификационной карты Blue Shield, или по телефону (866) 346-7198, и вам помогут совершенно бесплатно. (Russian)

重要:お客様は、この手紙を読むことができますか?もし読むことができない場合、弊社が、お客様をサポートする人物を手配いたします。また、お客様の母国語で書かれた手紙をお送りすることも可能です。 無料のサポートを希望される場合は、Blue Shield IDカードの裏面に記載されている会員/お客様サービスの電話番号、または、(866) 346-7198にお電話をおかけください。 (Japanese)



مهم: آیا میتوانید این نامه را بخوانید؟ اگر پاسختان منفی است، میتوانیم کسی را برای کمک به شما در اختیارتان قرار دهیم. حتی میتوانید نسخه مکتوب این نامه را به زبان خودتان دریافت کنید. برای دریافت کمک رایگان، اطفاً بدون فوت وقت از طریق شماره تلفنی که در پشت کارت شناسی Blue Shield تان در ج شده است و یا از طریق شماره تلفن 7198-346 (866) با خدمات اعضا/مشتری تماس بگیرید. (Persian)

ਮਹੱਤਵਪੂਰਨ: ਕੀ ਤੁਸੀਂ ਇਸ ਪੱਤਰ ਨੂੰ ਪੜ੍ਹ ਸਕਦੇ ਹੋ? ਜੇ ਨਹੀਂ ਤਾਂ ਇਸ ਨੂੰ ਪੜ੍ਹਨ ਵਿਚ ਮਦਦ ਲਈ ਅਸੀਂ ਕਿਸੇ ਵਿਅਕਤੀ ਦਾ ਪ੍ਰਬੰਧ ਕਰ ਸਕਦੇ ਹਾਂ। ਤੁਸੀਂ ਇਹ ਪੱਤਰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿਚ ਲਿਖਿਆ ਹੋਇਆ ਵੀ ਪ੍ਰਾਪਤ ਕਰ ਸਕਦੇ ਹੋ। ਮੁਫ਼ਤ ਵਿਚ ਮਦਦ ਪ੍ਰਾਪਤ ਕਰਨ ਲਈ ਤੁਹਾਡੇ Blue Shield ID ਕਾਰਡ ਦੇ ਪਿੱਛੇ ਦਿੱਤੇ ਮੈਂਬਰ/ਕਸਟਮਰ ਸਰਵਿਸ ਟੈਲੀਫ਼ੋਨ ਨੰਬਰ ਤੇ, ਜਾਂ (866) 346-7198 ਤੇ ਕਾੱਲ ਕਰੋ। (Punjabi)

ប្រការសំខាន់៖ តើអ្នកអាចលិខិតនេះ បានដែរឬទេ? បើមិនអាចទេ យើងអាចឲ្យគេជួយអ្នកក្នុងការអានលិ ខិតនេះ។ អ្នកក៍អាចទទួលបានលិខិតនេះជាភាសារបស់អ្នកផងដែរ។ សម្រាប់ជំនួយដោយឥតគិតថ្លៃ សូមហៅទូរស័ព្ទភ្លាមៗទៅកាន់លេខទូរស័ព្ទសេវាសមាជិក/អតិថិជនដែលមាននៅលើខ្នងប័ណ្ណសម្គាល់ Blue Shield របស់អ្នក ឬតាមរយៈលេខ (866) 346-7198។ (Khmer)

المهم: هل تستطيع قراءة هذا الخطاب؟ أن لم تستطع قراءته، يمكننا إحضار شخص ما ليساعدك في قراءته. قد تحتاج أيضاً إلى الحصول على هذا الخطاب مكتوباً بلغتك. للحصول على المساعدة بدون تكلفة، يرجى الاتصال الآن على رقم هاتف خدمة العملاء/أحد الأعضاء المدون على الجانب الخطفي من بطاقة الهوية Blue Shield أو على الرقم 7198 (866). (Arabic)

TSEEM CEEB: Koj pos tuaj yeem nyeem tau tsab ntawv no? Yog hais tias nyeem tsis tau, peb tuaj yeem nrhiav ib tug neeg los pab nyeem nws rau koj. Tej zaum koj kuj yuav tau txais muab tsab ntawv no sau ua koj hom lus. Rau kev pab txhais dawb, thov hu kiag rau tus xov tooj Kev Pab Cuam Tub Koom Xeeb/Tub Lag Luam uas nyob rau sab nraum nrob qaum ntawm koj daim npav Blue Shield ID, los yog hu rau tus xov tooj (866) 346-7198. (Hmong)

สำคัญ: คุณอ่านจดหมายฉบับนี้ได้หรือไม่ หากไม่ได้ โปรดขอคงามช่วยจากผู้อ่านได้ คุณอาจได้รับจดหมายฉบับนี้เป็นภาษาของคุณ หากต้องการความช่วยเหลือโดยไม่มีค่าใช้จ่าย โปรดติดต่อฝ่ายบริการลูกค้า/สมาชิกทางเบอร์โทรศัพท์ในบัตรประจำตัว Blue Shield ของคุณ หรือโทร (866) 346-7198 (Thai)

महत्वपूर्ण: क्या आप इस पत्र को पढ़ सकते हैं? यदि नहीं, तो हम इसे पढ़ने में आपकी मदद के लिए किसी व्यक्ति का प्रबंध कर सकते हैं। आप इस पत्र को अपनी भाषा में भी प्राप्त कर सकते हैं। नि:शुल्क मदद प्राप्त करने के लिए अपने Blue Shield ID कार्ड के पीछे दिए गये मेंबर/कस्टमर सर्विस टेलीफोन नंबर, या (866) 346-7198 पर कॉल करें। (Hindi)

ສິ່ງສຳຄັນ: ທ່ານສາມາດອ່ານຈົດໝາຍນີ້ໄດ້ບໍ? ຖ້າອ່ານບໍ່ໄດ້, ພວກເຮົາສາມາດໃຫ້ບາງຄົນຊ່ວຍອ່ານໃຫ້ທ່ານຝັງໄດ້. ທ່ານຍັງສາມາດຂໍໃຫ້ແປຈົດໝາຍນີ້ເປັນພາສາຂອງທ່ານໄດ້.ສຳລັບຄວາມຊ່ວຍເຫຼືອແບບບໍ່ເສຍຄ່າ, ກະລຸນາ ໂທຫາເບີໂທຂອງຝ່າຍບໍລິການສະມາຊິກ/ລູກຄ້າໃນທັນທີເບີໂທລະສັບຢູ່ດ້ານຫຼັງບັດສະມາຊິກ Blue Shield ຂອງທ່ານ, ຫຼືໂທໄປຫາເບີ(866) 346-7198. (Laotian)