

HEALTH PLAN COMPARISON - DOCTOR SELECTION & REFERRAL

	Aetna	Anthem Blue Cross	Blue Shield of California	CalCPA Health	CaliforniaChoice®	Chinese Community Health Plan	Cigna + Oscar	E.D.I.S.	Health Net	Kaiser Permanente*
How often can members change their Primary Care Physician (PCP)?	<u>HMO:</u> Anytime. Change must be requested by the 15th of the month to be effective the 1st of the following month <u>MC, PPO & EPO:</u> No PCP selection is required	If the request is made between the 1st-7th of the month, Anthem can retro back to the 1st of current month. If request is made after the 7th, the change will be effective on the 1st of the following month. For PPO plans: No PCP selection is required.	Participants may change anytime by contacting Member Services. Change will be effective on the 1st day of month following notice of approval. Member can also change the PCP online at: www.blueshieldca.com . They must register first.	A member may change as frequently as desired with a first of the month following effective date. However, if a member is in the middle of a treatment plan, say physical therapy with a Medical Group, they may not switch to a different Primary Care Physician (PCP) until the treatment plan has ended.	Varies by Health plan. See PROVIDER INFORMATION starting on page 110	Anytime. The effective date will be the 1st day of the following month.	N/A - All plans are EPOs with no PCP requirement	N/A	A member may change as frequently as desired retro to the 1st of the current month as long as member has not had services with the currently assigned PCP. If services has been rendered, new PCP assignment will be effective the first of the following month.	Anytime - change is effective immediately
Can family members each choose a PCP from a different IPA/Medical Group?	Yes	Yes	<u>HMO:</u> Yes <u>PPO:</u> N/A	Yes	Varies by Health plan. See PROVIDER INFORMATION starting on page 110	Yes, but not recommended	N/A - All plans are EPOs with no PCP requirement	N/A	Yes	Yes: HMO: From Kaiser Permanente Physicians POS: From Private Healthcare Systems (PHCS)
Self-referral available?	No prior authorization or referral for OB/GYN (can be primary provider). The OB/GYN must be in the same medical group/ IPA as the PCP.	<u>HMO:</u> No prior authorization for OB/GYN. Other services: referral must be within the same medical group. <u>PPO:</u> Yes	<u>HMO:</u> No prior authorization or referral for OB/GYN (can be primary provider); Other services: if Access+ provider—yes All services: Specialist must be in same med. group/ IPA as PCP <u>PPO:</u> Yes	Available only if the medical group participates in the program. No prior authorization or referral for OB/GYN (can be primary provider)	Varies by Health plan. See PROVIDER INFORMATION starting on page 110	No prior authorization or referral for OB/GYN (can be primary provider). The OB/GYN must be in the same medical group/ IPA as the PCP.	N/A - All plans are EPOs with no referral requirement	Yes	<u>HMO:</u> Yes—OB/GYN visits only (OB/GYN must be in same medical group as PCP) <u>PPO:</u> Yes—no PCP selection required <u>HSP:</u> PCP is assigned, but members can self-refer <u>CommunityCare HMO:</u> Choose a primary care physician (PCP) contracted with the CommunityCare HP tailored network to coordinate their care. • Their PCP can refer to any specialist in the CommunityCare Network. • Care doesn't need to stay within the PCP's participating provider group (PPG).	No prior authorization or referral for OB/GYN (can be primary provider) Other Specialties: Yes—to certain specialties. Self-referral specialties list varies by geographical region
Express referral available?	No—see self-referral information above	No	No—see self-referral information above	Available only if the medical group participates in the program	Varies by Health plan. See PROVIDER INFORMATION starting on page 110	No	N/A - All plans are EPOs with no referral requirement	No	Yes—if a Rapid Access Provider	Yes - referral direct from physician

* Please note Kaiser Permanente summary information is contained herein but Kaiser Permanente has not reviewed the information contained within this guide and Word & Brown therefore cannot guarantee its accuracy. Please contact your Word & Brown sales representative in the event of any discrepancies. The information provided in this guide is not intended to describe all of the benefits included in each plan, nor is it designed to serve as the "Evidence of Coverage" or "Certificate of Insurance." The KFHP Evidence of Coverage and the KPIC Certificate of Insurance contain a complete explanation of benefits, exclusions, and limitations.

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	MediExcel Health Plan	National General	Oscar	Sharp Health Plan	SIMNSA Health Plan	Sutter Health Plus	Total Benefit Solutions	UnitedHealthcare	Western Health Advantage
How often can members change their Primary Care Physician (PCP)?	<i>Anytime - change is effective immediately</i>	<i>Unlimited</i>	<i>N/A - All plans are EPOs with no PCP requirement</i>	<i>Anytime - change is effective 1st of the following month</i>	<i>Members are not assigned to a PCP provider</i>	<i>Anytime – change is effective 1st of the following month.</i>	<i>N/A</i>	<i>HMO: As often as necessary (submit change request on or before the 15th in order to be effective the 1st of the following month)</i> <i>PPO: N/A</i>	<i>Once a month - changes are effective the first of the following month, provided the member is not in the course of treatment or hospitalized and no pending authorizations</i>
Can family members each choose a PCP from a different IPA/Medical Group?	<i>No</i>	<i>Yes</i>	<i>N/A - All plans are EPOs with no PCP requirement</i>	<i>Yes</i>	<i>Members are not assigned to a PCP provider.</i>	<i>Yes</i>	<i>N/A</i>	<i>HMO: Yes</i> <i>PPO: N/A</i>	<i>Yes</i>
Self-referral available?	<i>Yes - for OB/GYN visits</i>	<i>Yes</i>	<i>N/A - All plans are EPOs with no referral requirement</i>	<i>Yes - for OB/GYN visits if OB/GYN is in same IPA as PCP.</i>	<i>Yes, OB/GYN only</i>	<i>Yes, self-referral is available for health coaching, behavioral health services, and OB/GYN services.</i>	<i>N/A</i>	<i>HMO: Yes - for OB/GYN visits (OB/GYN must be in the same medical group/ IPA as your PCP)</i> <i>PPO: N/A</i>	<i>Yes – only for OB/GYN, annual eye exam, and behavioral health services</i>
Express referral available?	<i>Yes, direct from PCP Provider.</i>	<i>No referrals are required to see a specialist.</i>	<i>N/A - All plans are EPOs with no referral requirement</i>	<i>Yes - if available through medical group.</i>	<i>PCP provider will provide an express referral.</i>	<i>N/A</i>	<i>N/A</i>	<i>HMO: Yes - if an Express Referrals™ participating medical group. See Provider Directory or www.uhcwest.com for list of participating medical groups.</i> <i>PPO: Yes</i>	<i>N/A</i>