

*Section 1: Blue Care Network
Health Care System*



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Blue Care Network's health care system

Michigan Statute regarding HMOs

BCN is certified pursuant to the Michigan Insurance Code and regulated by the state Office of Financial and Insurance Regulation.

You may obtain copies of the statute on the Web at **Michigan.gov/ofis**.

Office of Financial and Insurance Regulation
Michigan Department of Consumer and Industry Services
611 W. Ottawa, Second Floor
Lansing, MI 48909-7720
Tel: 1-877-999-6442

What we do

Blue Care Network contracts with physicians, hospitals and other providers to deliver care and provide service to members.

In addition to providing basic health care financing and customer services, we help promote the delivery of quality care in a cost-effective manner by supporting the efforts of our affiliated providers with a variety of wellness and chronic care programs.

Approach to care management

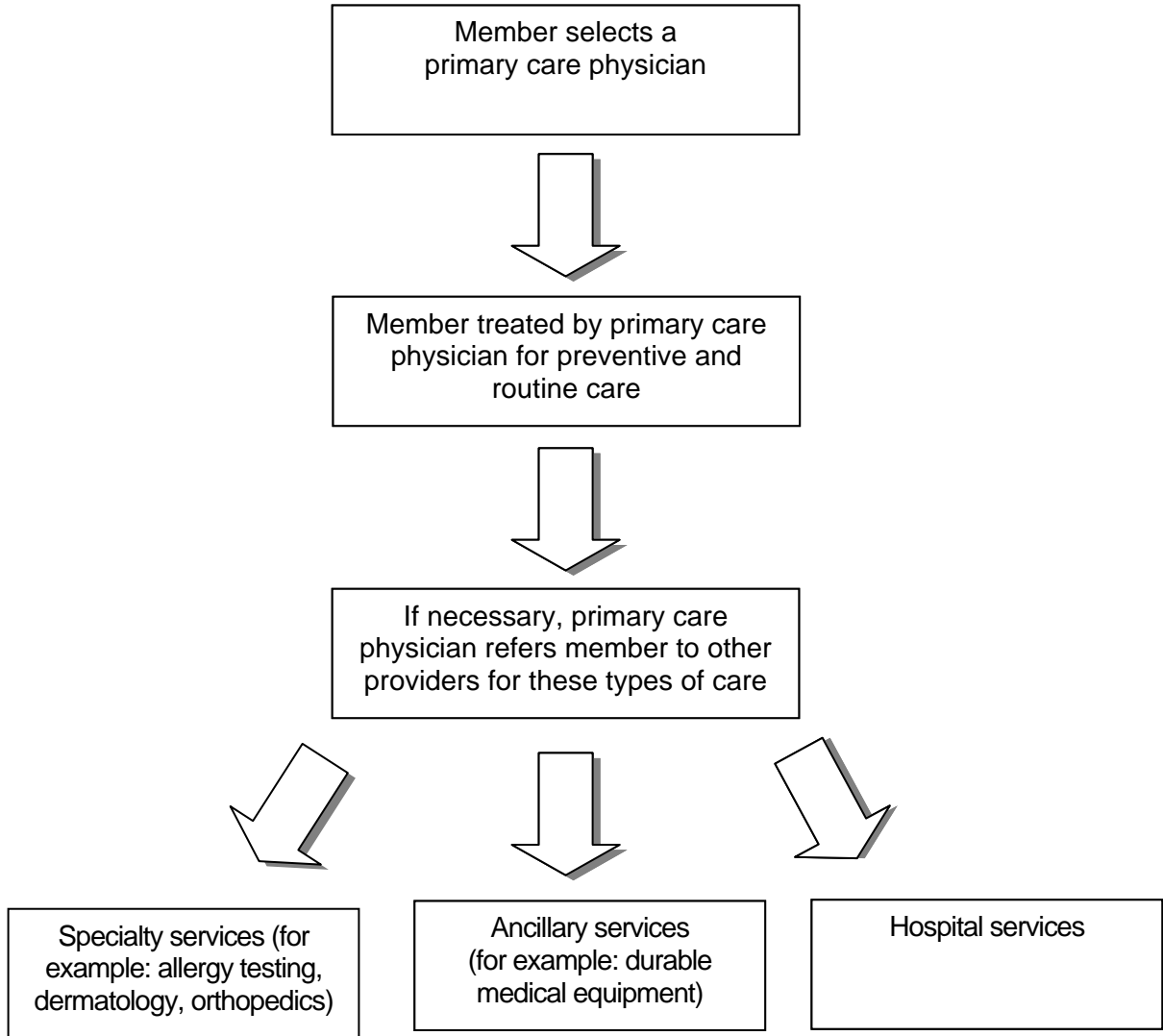
Blue Care Network's health care system is based on primary care physicians who provide and manage medical care for our members.

BCN performs administrative and support functions that help maintain the quality of care provided to members, while controlling the cost of services. These functions include provider contracting, quality management, peer review, claims processing and payment, disease management, member inquiry and utilization management.

The flow chart on the next page shows how the BCN managed care system works

continued

Blue Care Network's health care system (continued)



Blue Care Network's health care system (continued)

Partners in care Some BCN services are provided through subcontracted arrangements with vendors. The following table describes the BCN services provided by statewide vendors

Service	Contracted Vendor
Outpatient durable medical equipment, prosthetics and orthotics	Northwood Inc. provides the statewide network for most DME/P&O covered services and is contracted by BCN to serve as third-party administrator and authorize and pay for all DME/P&O covered services.
Outpatient diabetic materials	J&B Medical Supply Company partners with BCN to provide diabetic materials, including insulin pumps, blood glucose meters, test strips and lancets.
Outpatient laboratory services	Joint Venture Hospital Laboratories provides the statewide network for BCN covered outpatient laboratory services and serves as third-party administrator.
Pharmacy (for services provided under the member's pharmacy benefit)	<p>Medco</p> <ul style="list-style-type: none"> • Operates pharmacy help desk • Processes prescription claims • Provides national pharmacy network • Conducts pharmacy audits • Provides mail service pharmacy program <p>Walgreens Specialty Pharmacy</p> <ul style="list-style-type: none"> • Handles mail order prescriptions (30-day supply) for specialty drugs used to treat complex or rare conditions such as arthritis, asthma, multiple sclerosis, hepatitis C

Primary care physicians

Primary care physician

A primary care physician is a medical doctor or a doctor of osteopathic medicine licensed in the state of Michigan whose practice is primarily:

- **Family or general practice:** These physicians provide comprehensive health care for all members of a family, regardless of age or gender.
 - **Pediatrics** — Pediatricians specialize in the treatment of infants, children and adolescents 21 years and younger.
 - **Internal medicine:** Internists specialize in the diagnosis and medical treatment of diseases in adults, age 14 or older. Internists do not perform surgery or deliver babies.
 - **Internal medicine/pediatrics:** These physicians have dual training and treat infants, children, adolescents and adults.
-

How the PCP works with members

The primary care physician provides and coordinates medical care and services for members. To access their benefits, members must select a participating primary care physician as soon as they join BCN. Our Web site and physician directories list primary care physicians and specialists across the state.

Every primary care physician in our network meets BCN affiliation and credentialing requirements.

Primary care physicians (continued)

PCP provides care

BCN's primary care physicians provide the following types of care to members:

- Office visits for sick and well care
 - Health maintenance exams
 - Preventive care and related services
 - Health education
 - Inpatient consultation
 - Follow-up on emergency room treatment
-

PCP coordinates care

The primary care physician is also responsible for issuing referrals for, and coordinating the delivery of, care that cannot be provided in the primary care office. Primary care physicians coordinate the following types of member care:

- Hospitalization
- Post-hospital care
- Specialty treatment
- Ancillary and specialty services, using BCN-contracted vendors
- Referrals to disease and case management
- Prescription medications, following BCBSM/BCN Custom Formulary
- Referrals to health education programs

Note: BCN members with Blue Elect Self-Referral Option are able to self-refer for services, but they pay more out of pocket when their primary care physician doesn't provide or coordinate care.

PCP DOES NOT coordinate care for these

The primary care physician does not need to coordinate:

- Woman's Choice (see Page 1-14)
- Pediatric Choice (see Page 1-14)
- Behavioral health services
(Members call 1-800-482-5982 to arrange this care.)

Primary care physicians (continued)

Members must choose a PCP

All members must choose a BCN participating primary care physician. If enrolled members or their dependents do not select a physician in the BCN provider network, BCN assigns one for them.

Note: A family can choose one primary care physician for the whole family (must be family, general practice or internist/pediatrician), or each family member can select a different primary care physician.

Finding a PCP

Members can find a doctor online using the provider search tool at **MiBCN.com/find**. BCN also offers printed provider directories that are organized by county, by specialty and by provider name. These are available on request from Customer Service, using the main number, 1-800-662-6667, or the number on the back of their ID card.

Members can select any primary care physician from our network no matter where they live or where the doctor is located. Their selection should be included with their enrollment application.

PCP information

BCN's provider search tool provides information about primary care physicians, such as where the doctor trained, the doctor's hospital affiliations and if the office accommodates languages other than English. If members want more information about a doctor, they can call the doctor's office or BCN's Customer Service using the main number, 1-800-662-6667, or the number on the back of their ID card.

Primary care physicians (continued)

Changing primary care physicians

We encourage members to build a long-term relationship with their primary care physicians. However, if a member wants to change his or her primary care physician, he or she has that option once every 30 days.

Members can change physicians by:

- Using the PCP search feature on our Web site:
MiBCN.com/find
- Calling Customer Service using the main number, 1-800-662-6667, or the number on the back of their ID card.
- Mailing a completed Physician Selection form (sample follows) to:

Blue Care Network — C411
P.O. Box 5043
Southfield, MI 48086-5043

Effective date of change

Primary care physician changes made by phone or online take effect immediately.

Changes mailed to us become effective two business days from the time BCN receives the Physician Selection form or the Enrollment/Change of Status form.

Physician Selection Form



Select your primary care physician by filling in the information below. You can choose a different primary care physician for each member of your family or one to care for your entire family. If you elect to have one doctor for your entire family, the doctor must practice family or general medicine. You cannot choose a specialist as a PCP.

If you are a new member to Blue Care Network, please list every family member on this form, contract holder first and then all dependents.

Last name, first name	Contract number	Date of birth	Primary care physician	Provider code number

Group/Employer's name _____

Physician change effective date _____

Member's signature _____ Date _____

Need information about available primary care physicians?

Our Web site MiBCN.com/find provides the most current information on BCN-affiliated primary care physicians. You can search for a doctor by family practice, general medicine, internal medicine, internal medicine/pediatrics, pediatrics and preventive medicine, city or hospital group.

Return this form to start your health care partnership

We encourage you to return this form as soon as you enroll so we can notify your doctor of your membership.

Fax your completed form to 248-799-6327, or mail to:

Blue Care Network
 Mail Code C411
 P.O. Box 5043
 Southfield, MI 48086-5043

Changing your primary care physician

Changes are limited to one every 30 days. All changes become effective two business days after we receive your request – unless you request a later effective date. You cannot select an earlier date when you change your primary care physician. If you change your primary care physician while you are being treated by a specialist, your new primary care physician must reauthorize the treatment you are receiving. Your treatment may not be covered until that occurs.

To make a change that is effective immediately, visit MiBCN.com/physicians, or call the Customer Service number on the back of your ID card.

Blue Care Network of Michigan is a nonprofit corporation and independent licensee of the Blue Cross Blue Shield Association.

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Provider responsibilities

PCP

It is the responsibility of the primary care physician to:

- Provide telephone access, 24 hours a day, seven days a week, with a triage mechanism directing members to an appropriately trained health professional for emergencies.
 - Accept a minimum number of BCN members and give 60 days written notice of a change in acceptance status.
 - Provide for member care at all times and ensure that covering or “on call” medical personnel are of like or similar specialty and are BCN-contracted providers who understand the procedures for managing BCN members.
 - Provide primary care services to members within the scope of the physician’s medical specialty and coordinate ancillary or specialty services, in or out of the hospital, as medically indicated.
-

Specialist

It is the responsibility of the specialist to:

- Accept referrals of BCN members from primary care physicians and provide services in a manner commensurate with the standards of practice for the physician’s specialty.
- Consult with and seek further authorization from the member’s primary care physician if treatment will exceed the dates of the initial referral.
- Provide a timely written report to the member’s primary care physician for inclusion in the member’s medical record.
- Use BCN-contracted agencies and facilities for tests or services provided to members, except as authorized by BCN.
- Allow primary care physicians, authorized BCN representatives, peer reviewers and government personnel access to the BCN member’s medical record upon request
- Provide for member care at all times and ensure that covering or “on call” medical personnel are of like or similar specialty and are BCN-contracted providers who understand the procedures for managing BCN members.

Provider responsibilities (continued)

Hospital and ancillary providers

BCN expects hospital and ancillary providers to:

- Accept referrals of BCN members from primary care physicians and, except in emergencies, provide only those services that were authorized.
- Consult with and seek further authorization from the member's primary care physician or BCN, if necessary, for the following situations:
 - Additional treatment or tests needed
 - Treatment will exceed the dates on the initial referral
- Use BCN-contracted providers and facilities for tests or services provided to members, except as authorized by BCN.

Understanding the referral process

About referrals

When members need specialty care, their primary care physicians refer them to participating providers.

Extensive network of specialists

BCN offers a statewide network of specialty care physicians. Most primary care physicians will generally refer to specialists who:

- Are affiliated with their own physician group
 - Admit patients to the same hospital where the primary care physician is affiliated
 - The doctor knows and trusts
-

How referrals work

Here's how the primary care physician issues referrals:

- The member visits his or her primary care physician for an examination.
 - The physician determines the appropriate medical action.
 - If medically indicated, the primary care physician generates a referral to a BCN-contracted specialist.
-

Paper or electronic

A referral form may be given to the member or mailed to the specialist, depending upon the primary care physician's referral process. The referral must also be filed with BCN. This can be done electronically through BCN's e-referral process.

Global referrals

Global referral care

A global referral is authorization from the primary care physician to a specialist to conduct office visits, tests or procedures for a BCN member during a specified period of time.

- The referral authorizes most services performed in the provider's office that a specialist believes necessary to diagnose and treat a patient's condition. A referral can be valid for a minimum of 30 days to a maximum of 365 days.
 - Members who obtain specialty services without authorization will be responsible for the charges.
 - The specialist cannot refer the member to another specialist without an additional referral from the primary care physician.
 - A member who is receiving specialty care and changes primary care physicians must make an appointment to see the new primary care physician and obtain a new authorization. Referrals issued by the former primary care physician become invalid upon the effective date of the new primary care physician.
-

Regional referral differences

Blue Care Network's referral requirements vary based on where the member lives and the primary care group affiliation of the member's primary care physician.

East and Southeast service areas

For members whose primary care physician is in the East or Southeast service area, select services are payable from a global referral if they are performed in a physician's office. Plan notification is required when the service is performed in a facility outpatient setting.

Mid and West service areas

For members whose primary care physician is in the Mid or West service area, a paper referral is not required. However, all care must be coordinated by the primary care physician.

Plan notification

Referral not needed

Some services don't need referrals. These include:

- Routine OB-GYN services for female members that are provided by a contracted OB-GYN physician (**See Woman's Choice Pages 1-14 and 1-15**)
 - Mental health and substance abuse services (Members call 1-800-482-5982 to arrange this care.)
 - Services covered under Pediatric Choice guidelines (**see Page 1-14**)
-

BCN authorization

Primary care physicians and specialists must submit certain services to BCN for review before delivery of the service.

In addition all services to be performed in an outpatient facility setting (for example: surgical procedures) require BCN notification before the date of service.

When services require plan approval, BCN sends written authorization to the member and the referring physician.

Member choices

Pediatric Choice program

The parent of a BCN member under 18 may select either a pediatrician or a family or general practitioner as the minor's primary care physician. If a family or general practitioner is selected, the minor may also use a pediatrician for general pediatric services.

No referral is required to receive pediatric services from the pediatrician, even when the pediatrician is not the minor's primary care physician.

Woman's Choice program

Women have a choice. The Woman's Choice program allows all female BCN members to see affiliated obstetricians or gynecologists for many obstetric or gynecologic services without a referral. Members may also have their primary care physicians provide these services. The member does not need to contact BCN to request to be assigned to a Woman's Choice physician.

Interested members may select an OB-GYN or gynecologist

- On the BCN Web site **mibcn.com/find**
- From a *Provider Directory* for the Southeast or Greater Michigan regions (organized by county, by specialty and by provider name)
- By calling Customer Service, using the main number, 1-800-662-6667, or the number on the back of their ID card.

We recommend that members discuss their selection with their primary care physicians. We also recommend that the member select a Woman's Choice physician who has the same hospital affiliation as her primary care physician. This will facilitate hospital services when needed.

Woman's Choice Program

Woman's Choice services that DON'T need referrals

- Pap smears
- Breast physical examinations
- Mammograms (in conjunction with BCN guidelines for adult health maintenance examinations)
- Gynecological examinations and nonsurgical treatment of gynecological disorders
- Diagnosis and treatment of all gynecological and bladder infections
- All obstetrical care including:
 - **All** obstetric diagnoses and treatment
 - Fetal nonstress test and maternal-fetal medical care when necessary
 - Laboratory and pathology services related to gynecological problems and all obstetric care
 - Maternity ultrasound (in conjunction with BCN guidelines for maternity ultrasound; If performed in a hospital, the OB/GYN must call BCN at 1-800-392-2512 for authorization before the date of service.)
 - Obstetric procedures including diagnostic laboratory work (at a BCN-authorized laboratory) and radiology
 - RhoGAM injections
 - Pregnancy terminations
 - Amniocentesis
 - Hospital admissions for delivery and all obstetrical care
 - Pelvic ultrasounds

Woman's Choice services that require authorization from the primary care physician

- In-office surgical procedures
- Infertility treatment
- Hospital admission for conditions other than delivery
- Radiology or diagnostic procedures not related to obstetrics
- Management of medical problems during pregnancy (for example, hypertension and diabetes) either in the hospital or by physician referral
- Outpatient surgical procedures which fall in the Female Genital CPT-4 procedure code range related to gynecological problems
- Care and treatment for suspected or confirmed malignancies
- Voluntary sterilization (when member has the benefit, it requires plan approval by BCN)
- Referrals to specialties other than obstetrics/gynecology
- Pregnancy terminations

Emergency care and urgent care

Emergency care

If a member experiences an immediate and unforeseen medical emergency and the time needed to contact his or her BCN primary care physician could result in permanent damage to the member's health, the member should seek treatment from the nearest emergency room or call 911.

BCN suggests, but does not require, that the member, the hospital, or someone acting on behalf of the member notify the member's primary care physician or BCN within 24 hours of the emergency treatment or as soon as it is medically reasonable to do so. This will help ensure that the member's primary care physician can arrange appropriate follow-up care.

Emergency and urgent care providers should send a written summary of the services provided and the treatment plan to the primary care physician within 30 days of the date of service.

If a member receives emergency care while traveling outside the United States and the care is not coordinated through BlueCard, he or she will need to submit:

- An itemized bill
- Proof of payment
- Any medical records for review

Urgent care

Urgent care is outpatient care provided when the medical condition is not an emergency but still requires prompt attention (such as high fever, unusual pain or a minor injury).

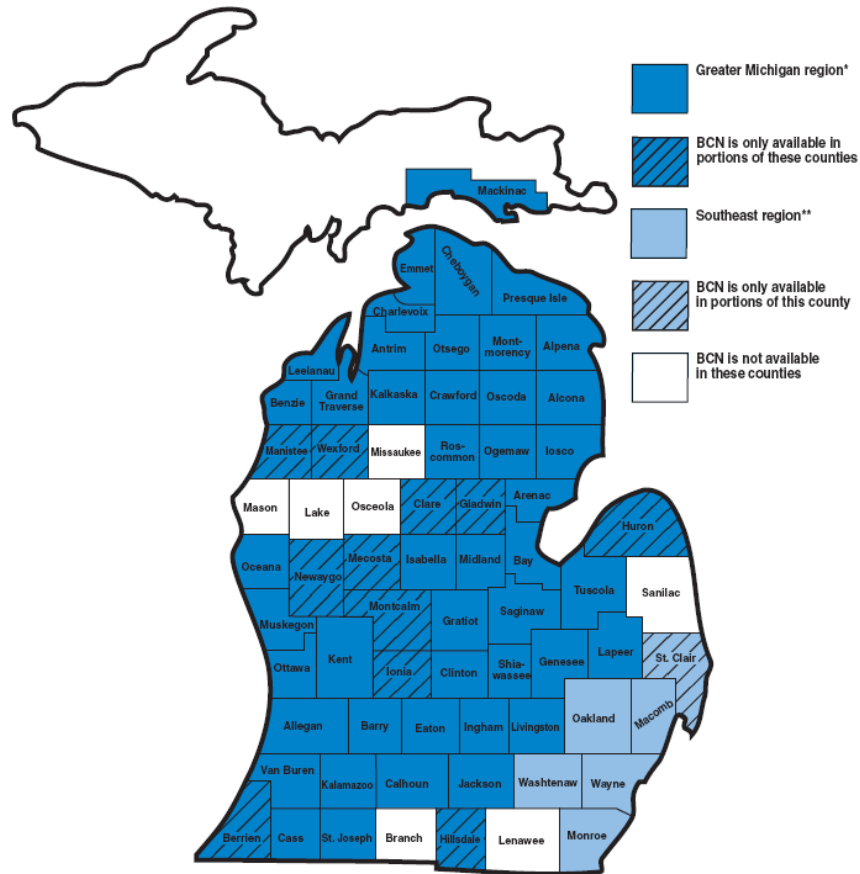
We encourage our members to contact their primary care physicians to assist in arranging urgent care services required after hours. It is not necessary to submit a referral to BCN for urgent or emergent services.

Service Area

BCN service areas

A Blue Care Network service area is a county or portion of a county where health care coverage is offered. BCN serves a majority of Michigan counties, as shown in the map below.

For member convenience, we publish two directories, one for the Greater Michigan region and the second for the Southeast region. Each lists the primary care physicians and specialists for the counties in that region.



continued

Service Area (continued)

Out-of-area members BCN will accept out-of-area members if they live or work within 30 minutes of a BCN-contracted primary care physician. An out-of-area member is someone who meets full-time requirements as specified in the Group Enrollment and Coverage Agreement and resides in a county where BCN is not offered but is adjacent to a BCN service area. This individual agrees to obtain all health care except for emergencies in the BCN service area.

Out-of-area-counties See the map on Page 1-17 for the location of these out-of-area counties:

- Michigan counties that don't have BCN service:
Alger, Baraga, Branch, Chippewa, Delta, Dickinson, Gogebic, Houghton, Iron, Keweenaw, Lake, Lenawee, Luce, Marquette, Mason, Menominee, Missaukee, Ontonagon, Osceola, Sanilac, Schoolcraft
- Ohio counties bordering Michigan BCN service areas:
Lucas
- Indiana counties bordering Michigan BCN service areas:
Elkhart, LaGrange, Steuben, St. Joseph
- Windsor, Ontario, Canada

Care while traveling outside Michigan

Traveling outside Michigan

One of the many benefits of BCN is that coverage travels with the member.

Blue Care Network provides out-of-state care through BlueCard, a Blue Cross Blue Shield Association program that gives members access to physicians anywhere in the United States outside of Michigan where a Blue Plan is offered.

When members are out of state and need urgent care, follow-up care or care for an extended stay, they simply call the BlueCard 24-hour telephone line 1-800-810-BLUE (2583). A BlueCard representative provides members with the names of Blues participating providers at their travel destination.

Emergency care

No matter where the member may be traveling, he or she is always covered for emergencies. Members should go to the nearest emergency room or call 911. Members should also notify their primary care physician within 24 hours of their emergency treatment so the doctor can coordinate their follow-up care.

Urgent care out of Michigan

BlueCard helps members who need urgent care locate a provider at their travel destination.

Follow-up care out of Michigan

BlueCard helps members who need follow-up care locate a provider at their travel destination.

If members need follow-up care, they should contact their primary care physician before leaving home for a referral.

continued

Care while traveling outside Michigan (continued)

Extended stays out of state

Members who plan to live out of state for a period of time should contact BlueCard for a Blues-participating provider in the area where they will be located. College students or families who spend substantial time at a vacation home fall into this category.

Getting medications out of state

BCN members can have their prescriptions filled at any of the 60,000 pharmacies in our network, including chain and independently owned stores. They can visit **MiBCN.com** for participating pharmacies in Michigan, and call Customer Service (using the main number, 1-800-662-6667, or the number on the back of their ID card) for a list of participating pharmacies out of state.

Carry the card

Members should always carry their BCN ID cards when traveling. See the sample card below.



Care while traveling in Michigan

Emergency care in Michigan

No matter where the member may be traveling, the member is always covered for emergencies. Members should go to the nearest emergency room or call 911. Members should also notify their primary care physician within 24 hours of their emergency treatment so the doctor can coordinate their follow-up care.

Urgent care in Michigan

Urgent care is available throughout the state in any area where BCN is offered.

Follow-up care while traveling in Michigan

Members should call BCN's Customer Service, using the main number, 1-800-662-6667 or the number on the back of their ID card, to locate a physician at their travel destination.

Members should contact their primary care physician before leaving home for a referral.

In-Michigan care while living away from home

Sometimes members need to live away from home for a period of time. College students or families who spend substantial time at a vacation home fall into this category.

BCN makes getting care away from home easy. Members simply select a primary care physician at their temporary residence. Members can call BCN Customer Service, using the main number, 1-800-662-6667, or the number on the back of their ID card, to select a physician anywhere in the state where BCN is offered. (See the map on Page 1-17 for BCN service areas.)

BCN also has physician directories, organized by regions (see map), which may help in locating a physician before traveling.