

**Premier Physician Network  
Frequently Asked Questions  
Dated: August 30, 2018**



**Overview**

Anthem Blue Cross was recently informed that the **Premier Physician Network satellite sites listed below will close and discontinue services effective December 1, 2018.**

- PPN United Care Medical Group (ADM001)
- PPN Avalon Medical Group (NFG001)
- PPN Huntington Park Mission Medical Group (NFI001) & (58J001)
- PPN AKM Medical Group (NFK001) & (Z9F001)
- PPN Family Health Alliance Medical Group (NFM001)
- PPN Exceptional Care-Greater San Gabriel Valley Physicians (NFN001)
- Mabuhay Medical Group (NFP001)
- PPN Mid-Cities IPA (NFR001)
- PPN Exceptional Care PCP-IPA (NFS001)
- Premier Physician Network/Valley Division (7DX001)

**How Members are Affected**

**1. What does the termination of the Premier Physician Network sites mean for members assigned to the medical group?**

Anthem Blue Cross will transition members from the Premier Physician Network sites to alternate medical groups effective December 1, 2018. When possible, members are reassigned to alternate medical groups with which their current PCPs are affiliated. Members who are not matched to their current PCP through another medical group are assigned to a new PCP or participating medical group near their home. Please note that the hospitals to which members may be admitted will vary according to the admitting privileges maintained by each physician. The hospitals primarily used by Premier Physician Network's doctors may be different than those used by a member's new medical group or PCP.

**2. What about members who need emergency medical care from a hospital that is not affiliated with the new receiving medical group?**

Emergency medical services do not require pre-authorization, regardless of where they are delivered. Hospitals must still provide services for members requiring emergency care. Coverage will be provided according to the member's policy benefits.

**3. Were members informed that they will be transferred to another medical group?**

Letters were mailed in advance of the December 1, 2018 closure date to subscribers who are affected by this change. The letters were mailed on August 30, 2018. Additionally, letters were sent to related Large Group clients and brokers as well as to ISG clients and agents informing them of the closure.

**4. Will affected members receive a new membership ID card?**

Yes, members affected by this contract termination will be sent a new ID card no later than five days before the December 1, 2018 termination effective date.

**5. What if a member does not want to transfer to the medical group to which they are being assigned and instead would prefer to self-select a new PCP and medical group?**

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When possible, members will be assigned to alternate medical groups with which their PCPs are affiliated. However, if a member wishes to choose another Anthem Blue Cross primary care physician and/or medical group (when available) within their service area, members can use the *Find a Doctor* feature available on [www.anthem.com/ca](http://www.anthem.com/ca). Members who need assistance in selecting a different PCP and/or medical group are encouraged to call the Anthem Blue Cross Customer Service department using the toll-free telephone number listed on their ID card.

**6. What Anthem Blue Cross products are affected by this termination?**

This termination affects Anthem Blue Cross members enrolled in Commercial HMO and POS plans and assigned to Premier Physician Network.

**Alternate Medical Groups**

**7. Do the receiving PCPs have capacity to accept Anthem's enrollees from the Premier Physician Network satellite site?**

In preparation of the closure of the Premier Physician Network sites, Anthem Blue Cross carefully considers physician panels and whether each provider has available capacity to accept additional patients. The PCPs to which the enrollees will be assigned are willing and capable of serving the health care needs of the Anthem Blue Cross enrollees being transitioned from Premier Physician Network.

**8. Will Anthem Blue Cross provide Continuity of Care / Transition Assistance services to members?**

Members wishing to request continuity of care should contact their new participating medical group or PCP. If an Anthem Blue Cross member began a course of treatment with Premier Physician Network before the contract termination date for one of the following conditions, he or she may be eligible to receive continuity of care:

- The member is in an active course of treatment for an acute medical condition, behavioral health condition, or serious chronic condition.
- The member is pregnant, regardless of trimester.
- The member has a terminal illness.
- The member is a child between the ages of birth and 36 months.
- The member has a surgery or other procedure that was authorized before August 23, 2018 and is scheduled within 180 days after the contract's termination date.

When a case is approved for continuity of care through Anthem's Transition Assistance Unit, the claim is processed at in-network benefit levels. Once a member is determined to be eligible for transition assistance, the member is only financially responsible for applicable deductibles, coinsurance and/or co-payments. If an Anthem Blue Cross member has one of the conditions that qualify for transition assistance listed above, but transition assistance does not approve the request (i.e. the member was not in a course of treatment with Premier Physician Network before the termination date), continuity of care will not be provided. In this situation, the provider will be considered out-of-network and the member, if he or she chooses to receive care from the provider, may incur significant out-of-pocket expense, depending on their benefit structure.