

COVERED CALIFORNIA: Know Your Participation Status

In late April 2014, the California Medical Association (CMA) surveyed physicians about their contracting experience with Covered California plans. Eighty percent of respondents reported that they had been confused about their participation status in a Covered California plan and that they believed such confusion had negatively impacted patient care. (For the full survey results, [click here](#).)

Unfortunately, checking your practice’s participation status is not as straightforward as it might seem. Plagued with inaccuracies, Covered California took down its cross-plan provider directory earlier this year. Add to that the fact that some exchange plans have used vague contract terms and amendments that rope physicians into participating in their exchange networks, often without their express consent or knowledge, and you’ll see that “do you take my insurance” is not always an easy question to answer.

Verify Your Participation Status

Physicians are encouraged to verify their participation status on the individual exchange plans’ online provider directories. When searching, it’s important to select the correct exchange product type, as Anthem Blue Cross and Blue Shield of California are utilizing significantly narrowed networks for their exchange products.

Plan Name and Website	Exchange Product Name
Anthem Blue Cross* www.anthem.com/ca (click “Find a Doctor”)	Under “Plan Type/Network” select one of the following: Pathway X – HMO/Individual via Exchange Pathway X – PPO/Individual via Exchange Pathway X Tiered (EPO)/Individual via Exchange
Blue Shield of California* www.blueshieldca.com (click “Find a Provider”)	Under “select a plan” select one of the following: 2014 Individual and Family EPO Plans (including Covered California) 2014 Individual and Family PPO Plans (including Covered California)

* The Anthem Blue Cross and the Blue Shield websites will require you to also select a specific plan tier (e.g., gold, silver, etc.) to complete the provider search function. Select any tier **except** the HSA tier.

Plan Name and Website	Exchange Product Name
Health Net www.healthnet.com/portal/home (click “Provider Search”)	Under “Plan” scroll down and under “Covered California” select one of the following: HMO – CommunityCare Network PPO – Individual & Family PPO – Small Business (this is the SHOP)
Molina Health Plan www.molinahealthcare.com (click “Find a Doctor or Pharmacy”)	Under “Coverage” select Molina Marketplace

Sharp Health Plan, Western Health Advantage, Contra Costa Health Plan, Valley Health Plan, and L.A. Care Health Plan are only offering HMO products and all are likely delegating to IPAs/medical groups. Practices will need to contact the plans directly to determine to which IPAs/medical groups the plans may have delegated their exchange business, allowing the practice to then determine whether it may be contracted for exchange business via that IPA/medical group.

Exchange Plans and Products

To find out which exchange plans and products are being offered in your area, [click here](#) (click “Ctrl” + “F” keys together, enter your county and click “Enter”).

What if I Have Questions about My Participation Status?

If you show as participating and aren’t sure how/why, contact the plan directly and ask that it provide a copy of the notice sent to you, including the terms such as (e.g., reimbursement rates, termination/opt out provision, etc.).

If you are not listed as participating and are interested in joining the network, inquire with the plan about how to join its exchange networks.

Plan	Contact Information
Anthem Blue Cross	Network Relations: (855) 238-0095 or networkrelations@wellpoint.com
Molina Health Plan	Provider Services: (800) 258-3091
Health Net of California	Provider Services: (800) 641-7761 or provider_services@healthnet.com
Western Health Advantage	Member Services: (888) 563-2250
Sharp Health Plan	Provider Support Department: (858) 499-8330
Contra Costa Health Services	Provider Relations: (925) 313-9501
Valley Health Plan	Provider Relations: (408) 885-2221 option #1
L.A. Care Health Plan	Provider Information Line: (866) LACARE6 (522-2736)
Chinese Community Health Plan	Delegating to Chinese Community Healthcare Association (IPA): (415) 216-0088 ext 2806
Molina Health Plan	Provider Relations: (888) 665-4621

When Scheduling Appointments

It is important that front office staff have a clear understanding of their physicians' participation status. With all of the new exchange plans added to the mix, it is no longer satisfactory to simply accept "I have Blue Shield" as an indication of whether the patient can be seen in-network. It is important, when scheduling, to determine in advance if the physician is indeed in the patient's network. When scheduling an appointment, practices should request that the patient provide the office with a copy of the front and back of their insurance ID card. Having a copy of the ID card in advance will allow the practice to clearly identify whether they are in the patient's network and also to verify patient eligibility before the visit. Taking these steps could help patients avoid out-of-network costs for and frustration from patients when they are faced with larger than expected bills.

Having Trouble Finding an in Network Provider or Facility?

Patients who are having trouble finding an in-network physician or facility are encouraged to contact the Department of Managed Health Care's Help Center at (888) 466-2219 for assistance.

We also ask that physicians notify CMA if they are experiencing difficulties finding in-network providers to whom they can refer patients so that we may raise the issue with the plan, Covered California and the appropriate regulator. Contact CMA's physician helpline at (888) 401-5911 or economicservices@cmanet.org.