

Patients count on you to refer in network!

 pages.azblue.com/Out-of-network-services-require-prior-auth---SEPT-2021.html

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Patients appreciate the referrals they receive from trusted providers for services such as lab tests and high-tech imaging. However, when it turns out that the referral is to an out-of-network provider, the outcome can include no coverage, surprise bills, and patient dissatisfaction. To prevent this situation, Blue Cross® Blue Shield® of Arizona (BCBSAZ) requires network providers to refer members to providers contracted to be in-network for the member's specific benefit plan. We also offer prior authorization for out-of-network services in certain non-emergency circumstances.

 [In This Issue](#)

[September is Suicide Prevention Month: Mobilize AZSM offers patients and families mental health and support resources](#)

Exceptions for out-of-network care require prior authorization

When non-emergency covered services can't be provided within the network associated with the member's benefit plan, a referring provider must ensure that prior authorization is obtained for the use of an out-of-network provider. The referring provider must also advise the member of the treating provider's non-network status (except in emergency situations).

Help protect your patients from unauthorized out-of-network care

The referring or treating provider may initiate the out-of-network prior authorization request, which is separate from any prior authorization that may be required for the service itself. If BCBSAZ authorizes an exception, here's the good news for members:

- **Members with HMO plans** are covered for the authorized out-of-network service and held harmless against any balance billing.
- **Members with PPO plans** have an out-of-network benefit with higher out-of-pocket costs. The approved prior authorization will give the member the in-network level of coinsurance and deductible. The member is still responsible for any balance bill from the out-of-network provider.

Without the above protections through an approved prior authorization, members can be faced with no coverage and/or a substantial financial liability for an out-of-network service. Please take care with referrals to be sure your patients can maximize their healthcare benefits.

To check the network status of a provider, you can use the BCBSAZ directory at [azblue.com/directory](https://www.azblue.com/directory) and select the network associated with the member's plan (as displayed on the member ID card).

In This Issue:

- [Pfizer booster authorized for high-risk individuals](#)
- [Quick electronic prior auth for Rx medications](#)
- [Out-of-network services require prior auth](#)
- [Webinar: Help patients get behavioral health care](#)
- [Help reduce LANE visits to the emergency room](#)
- [Discussing fall risk and prevention with patients](#)

Our members can take a digital ID card with them wherever they go with the MyBlue AZSM mobile app.

