The value of an HMO and the choice of where to get care

Access to care is important. That’s why this point of service health care plan provides the affordability and managed care benefits of an HMO, layered with provider choice without the need for a referral. Blue Elect Plus makes it easy for you to seek care, giving you access to BCN’s vast network with the flexibility of provider choice out of network. Once you select your primary care physician, you can seek care from other physicians and specialists without a referral. However, your PCP is your health partner; involving your PCP at the start means you have a knowledgeable professional focusing on your total health care.

If you live outside of Michigan

If you live outside of Michigan, you don’t need an assigned PCP and you also don’t need a referral. For in-network benefits, you need to see an out-of-state BlueCard® participating provider. However, we encourage you to see a BlueCard PCP to help coordinate routine and specialist care.

What you pay depends on where you go

In-network versus out-of-network providers for covered services

- **In-network providers** are BCN HMO contracted providers and out-of-state BlueCard-participating providers. You’ll pay less out of pocket when you’re seen by these providers.

- **Out-of-network providers** are other providers within the United States that aren’t BCN HMO contracted providers or out-of-state BlueCard-participating providers. You may get care from out-of-network providers, but you’ll pay more.

Doctors who aren’t in network may bill you for the difference between our payment and the doctor’s charges and you’ll be responsible for that amount. Some out-of-network providers may require you to pay for covered services in full and then you’ll need to seek reimbursement for BCN’s share of the cost.

To check if your doctor is in network, go to [bcbsm.com/find-a-doctor](http://bcbsm.com/find-a-doctor), or call the Customer Service number on the back of your BCN member ID card (TTY: 711). For BlueCard providers, call 1-800-810-BLUE(2583) or Customer Service.
Some services are only covered in network

Some services are only covered when received from an in-network provider (see the A list). But there are also preventive services that you can receive in or out of network (see the B list).

A. Services covered in network only

- Most preventive services as defined by the Affordable Care Act (see List B that follows for exceptions)
- Durable medical equipment
- Prosthetics and orthotics
- Diabetic supplies
- Weight reduction procedures
- Chiropractic services

B. Preventive services covered in and out of network

- Flu vaccine
- Colonoscopy
- Mammography
- Routine prenatal care

Approvals may be needed

Whether the doctor you see is in network or not, certain services require prior approval by BCN to be covered. Examples are hospitalization, certain radiology services, outpatient therapy and other services. For certain services in network, the doctor coordinates the approval process. When you go to a doctor who’s not in network, you’re responsible for having the out-of-network provider call the number on the back of your member ID card to request approval.

Questions?

If you have questions about your Blue Elect Plus coverage, call the Customer Service number on the back of your BCN member ID card (TTY: 711). Representatives are available from 8 a.m. to 5:30 p.m. Monday through Friday.