



It pays to stay in your Anthem PPO network

Save time and money when you see doctors in your PPO network

Here's why it makes sense to see doctors in your network, how you can find one and how much easier the claims process is when you get care within your network.

	When you stay in your network	When you go out of your network
How much do you pay?	Less. We negotiate rates with doctors, specialists and health care professionals so they agree on how much they charge when you see them.	More. Because these doctors, specialists and health care professionals don't have a negotiated rate with us, they can charge any price they want. Some services are not covered at all so you will be responsible for the entire cost.
Are you protected from additional charges from the doctor?	Yes, these doctors can't bill you for more than what they've agreed to accept from us.	No, you're not. You could be billed above the amount your benefits cover, which is usually much lower when you see these doctors. And some plans don't cover services from these doctors at all. Even in an emergency there may be additional charges from the doctor.
Do you have to fill out and send claim forms?	No, your doctor does the paperwork for you. And we pay the doctors directly.	Maybe. If your doctor doesn't file a claim for you, you'll have to file one after you receive the bill. ¹ Find claim forms at anthem.com/ca/SISC . Depending on your coverage, we'll send you a check for the amount allowed by your plan. Then you'll need to settle the bill with your doctor. ¹

Three ways to make sure you're using doctors in your network:

1. Log in at [anthem.com/ca/SISC](https://www.anthem.com/ca/SISC) or use our mobile app on a smartphone. Pick the **Find a Doctor** tool to search for doctors and facilities.
2. Remind your doctor and other health care professionals to refer you to doctors in your network only. At the hospital, it's important to ask if all the facility-based professionals (such as radiologists, anesthesiologists and pathologists) are part of your network.
3. Call the Member Services number on your ID card and ask them to check for you.

You can check the status of your claim or see your EOBs at [anthem.com/ca/SISC](https://www.anthem.com/ca/SISC).

How claims are paid when you stay in your network



How claims are paid when you go outside your network

Some doctors outside your network may file a claim for you. If they don't file the claim, here's what you'll need to do and what to expect.



If you used a doctor outside of your network but it was out of your control, you could owe less than if you deliberately chose to go outside of your network

Even when you do your best to see doctors, hospitals and other health care professionals in your network, sometimes it's not possible. If any of the following have happened to you, call customer service at the number on the back of your ID card. They can check and make sure that we've paid the highest amount possible, even though you received services outside of your network.

- You used a doctor outside your network in an emergency.
- You visited a hospital that's part of your network, but the hospital sent your lab work or tests to a health care professional outside your network.
- You had surgery at a hospital in the network with a surgeon in your network, but the hospital used an anesthesiologist outside your network.



¹ In some cases, we may negotiate with the doctor outside your plan for you. When this happens, you'll receive an EOB with the negotiated amount, the amount we paid to the provider and the amount you owe.
² An EOB isn't a bill. It's a summary of how we processed the claim and what (if anything) you owe the provider.

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