



Frequently Asked Questions for StudentBluesm Participants – Volume #1

1. Why is Mission Health leaving Blue Cross and Blue Shield of NC's network?

Mission Health and Blue Cross and BlueShield of North Carolina (BCBSNC) cannot come to an agreement concerning fees under their service contract. As a result, Mission Health announced its intent to terminate its contract with BCBSNC which means Mission Health providers and facilities will no longer be a part of the BCBSNC network beginning Oct. 5, 2017. As of today, the two parties are no longer in negotiations. However, the two parties have until midnight on Oct. 4, 2017 to negotiate and sign a new agreement.

2. When is the change effective?

If an agreement is not reached by Oct. 4, 2017, all Mission hospitals, outpatient facilities and most health care providers will no longer be part of the BCBSNC network beginning Oct. 5, 2017.

Some Mission health care providers – mostly therapists – may stay in-network until March 2, 2018. (See question 7 for a list of facilities that will remain within the BCBSNC network through March 2, 2018.)

You should contact Mission Health to see when your health care provider is leaving the BCBSNC network.

3. If I use the Student Health Center for all my health care needs, do I need to do anything?

No. If you are enrolled in StudentBlue and only visit the Student Health Center for your health care needs, you do not need to do anything. The change from in-network to out-of-network for Mission Health providers does not affect the services provided through the Student Health Center.

4. If I am receiving care from a Mission Health provider, do I need to do anything?

Yes. If you currently are enrolled in StudentBlue and are receiving health care services through a Mission Health provider/facility, you will need to make some decisions prior to Oct. 5 in regards to your health care needs.

- Contact your provider to see if/when he/she is leaving the BCBSNC network. **Note:** Some Mission Health providers – mostly therapists – may stay in-network until March 2, 2018.
- Decide if you would like to stay with your same provider or choose a new provider.
 - If you decide to remain with a Mission Health provider, you will not need to take any action. Beginning Oct. 5, services provided by your provider will be reimbursed at out-of-network levels, which will mean more out-of-pocket costs to you.
 - If you want to choose a new provider that is part of the BCBSNC network, visit bcbsnc.com and be sure that the physician is accepting new patients.



5. Where do I go in case of an emergency?

In an emergency, you should always go to the nearest hospital. Prior authorization is never required for emergency care. **Emergency care is always covered as an in-network benefit.** If, upon admission and treatment, the treating physician determines you are stabilized yet require additional continued inpatient care, BCBSNC may request that you be transferred to participating facility.

For urgent, non-emergency care, you may go to a Mission Health urgent care center or provider but services will be reimbursed at the out-of-network level beginning Oct. 5, 2017. To find an urgent care or primary care provider near you that is part of the BCBSNC network, visit bcbsnc.com.

6. What hospitals are considered in-network in the BCBSNC network?

The following hospitals in western North Carolina are considered in-network BCBSNC facilities.

Location	Hospital(s)
Sylva (Jackson County)	<ul style="list-style-type: none"> Harris Regional Hospital
Clyde (Haywood County)	<ul style="list-style-type: none"> Haywood Regional Medical Center
Hickory (Catawba County)	<ul style="list-style-type: none"> Frye Regional Hospital Catawba Valley Medical Center
Hendersonville (Henderson County)	<ul style="list-style-type: none"> Pardee Hospital Park Ridge Health
Morganton (Burke County)	<ul style="list-style-type: none"> Carolinas HealthCare System Blue Ridge-Morganton
Valdese (Burke County)	<ul style="list-style-type: none"> Carolinas HealthCare System Blue Ridge-Valdese
Boone (Watauga County)	<ul style="list-style-type: none"> Watauga Medical Center

Please note: *In an emergency, you should always go to the nearest hospital. Emergency care is always covered as an in-network benefit. Prior authorization is never required for emergency care.*

7. Where can I find a listing of providers/facilities that are part of the BCBSNC network?

If you need assistance in choosing a new hospital and/ or provider, please contact BCBSNC's Customer Service Department at the number listed on your ID card or visit www.bcbsnc.com, and search the database for an in-network hospital and or provider.



8. What happens if I continue to use Mission Health facilities?

You can receive benefits for services at a Mission health care provider for non-emergency use. However, services will be reimbursed at the out-of-network level which means:

- **You will pay more money for that care.** And usually, the price is much higher for out-of-network care than in-network care.
- BCBSNC will pay you for the allowed amount of care, and you will be responsible for paying the health care provider.

9. Which Mission Health facilities are remaining in the BCBSNC network until March 2, 2018?

Below is a list of centers that will remain part of the BCBSNC network until March 2, 2018.

- **CarePartners Outpatient Rehabilitation Center**
40 N. Merrimon Ave. Suite 115 Woodfin, NC 28804
- **CarePartners Outpatient Rehabilitation Center**
3 Town Square Boulevard Asheville, NC 28803
- **CarePartners Outpatient Rehabilitation Center**
68 Sweeten Creek Road Asheville, NC 28803
- **CarePartners Outpatient Rehabilitation Center**
534 Biltmore Avenue Asheville, NC 28801
- **CarePartners Outpatient Rehabilitation Center**
1 University Heights Asheville, NC 28801
- **CarePartners Outpatient Rehabilitation Center**
21 Hospital Drive Asheville, NC 28801
- **CarePartners Outpatient Rehabilitation Center**
1388 Sand Hill Road Candler, NC 28715

10. What happens if I am currently in a treatment plan for a condition?

Patients who are already in a treatment plan for certain conditions at a Mission facility may be able to keep receiving care as part of **BCBSNC's continuity of care**. If you qualify for this program, you will receive a letter from BCBSNC. You may also contact the BCBSNC's Customer Service Department at the number listed on your ID card or visit www.bcbsnc.com to complete a Continuity of Care form.

11. What is the Continuity of Care program?

Continuity of care is a process that allows you to continue receiving care from an out-of-network provider for an **ongoing special condition** at the in-network benefit level for a short time period; while your provider and BCBSNC help you transition to an in-network provider for your care. To be eligible for continuity of care, you must be actively treated by the out-of-network provider for your ongoing special condition, and your provider must agree to BCBSNC's requirements for continued care.



BCBSNC must authorize services in advance for you to continue to receive in-network benefits for care from an out-of-network provider. **You have 45 days from the provider termination date to request continuity of care.** Please contact BCBSNC's Customer Service Department to obtain a continuity of care request form, and return it to the fax number provided on the form. You will be contacted by a BCBSNC nurse to discuss your specific situation. If your continuity of care request is approved, you may continue to use Mission Health through the timeframe specified on the authorization.

Please note: *In-network payments for services approved for continuity of care on and after Oct. 5, 2017, will be paid directly to you, and you will be responsible for reimbursing Mission Health.*

12. What classifies as an ongoing special condition?

The following conditions may be eligible for continuity of care.

- **An acute illness**, which is a condition that is serious enough to require medical care or treatment to avoid a reasonable possibility of death or permanent harm.
- **A chronic illness or condition**, which is a disease or condition that is life-threatening, degenerative, or disabling, and requires medical care or treatment over a prolonged period of time.
- **A terminal illness**, which is when an individual has a medical prognosis of a life expectancy of six months or less.
- **Pregnancy**, which means the second and third trimester of pregnancy or completion of postpartum care.

13. If I choose to stay with a Mission Health provider, will my annual wellness visit be covered at 100%?

No. The visit will be covered at the out-of-network level. You must visit the Student Health Center or an in-network provider for your annual preventive visit to be covered at 100%.

14. I live far away from any BCBSNC network providers. Can I use a non-BCBSNC provider and pay for services at the in-network level?

BCBSNC is mandated to comply with Access to Care Standards which govern network adequacy and determine how far they can require a member to travel to get to a participating provider. If you are unable to locate an in-network provider within the [mileage guidelines](#), you will be allowed to see an out-of-network provider at the in-network benefit level.

15. It's hard for me to go to the Student Health Center. Are there any other affordable options for me to use to see a doctor?

Yes, you can see an in-network provider for your various health care needs. To find a provider near you that is part of the StudentBlue BCBSNC network, visit bcbsnc.com. If you visit an in-network provider for an office visit (other than preventive care which is covered at 100%), you will pay a \$25 copayment, then 20% of the remainder of the cost after you meet your annual deductible (\$500).



You also have access to MDLIVE. With MDLIVE, you can access a doctor from your home or on the go – 24 hours a day/7 days a week/365 days a year. Board Certified doctors can visit with you by secure video to help treat many non-emergency medical conditions such as:

- Cold and sore throat
- Sinus infection
- Bronchitis
- Allergies
- Pink eye
- Urinary tract infection

MDLIVE doctors can diagnose your symptoms, prescribe medication and send prescriptions to your pharmacy of choice.

To use MDLIVE, you must sign up and active an account by using one of the following methods:

1. Go online and visit: mdlive.com/ncvideodoc.
2. Call our toll free number: 1-888-657-9982.
3. Download the MDLIVE App, available on the iTunes store and Google Play.

If you visit a MDLIVE doctor, you will pay a \$25 copayment, then 20% of the remainder of the cost after meeting your annual deductible (\$500).