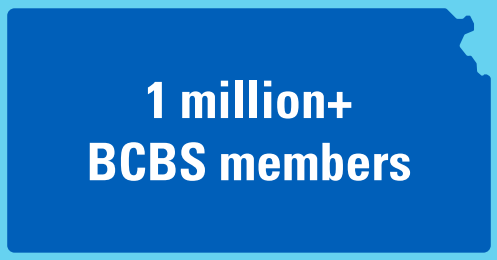
# EPO Members: What to do if your local hospital or provider leaves the Blue Cross and Blue Shield of Kansas network

If your hospital or provider decides to leave the Blue Cross and Blue Shield of Kansas (BCBSKS) network, you can still receive in-network care through the end of the calendar year. At the start of the next calendar year, services and providers will not be covered. Please review your plan benefits for complete information. NOTE: This does not apply to Medicare or any BCBSKS Medicare products, or any emergency services.

## Current Process Through **Dec. 31**

- Who?




### When you visit your local hospital or provider

- Pay member out-of-pocket.
- Provider/Hospital will submit insurance claim to BCBSKS for the service or care you receive.

## Process Beginning **Jan. 1**

- Who? BCBS EPO members

### If you continue seeing your existing provider

- You are responsible for paying all charges.
- There are instances where services provided by an out-of-network provider could be covered as in-network.
  - If the member is seen in an emergency room or seen in the emergency room and admitted as inpatient.
  - Professional services associated with inpatient admissions will be eligible for in-network benefits from the date of admission to the date of discharge. Follow-up care received out of network is not covered.

To maximize your health benefits, we encourage you to find an in-network provider. Our award-winning BCBSKS Customer Service staff is ready to assist. Use the contact information below, or visit bcbsks.com/find-a-provider.

## Any questions?

Call **1-800-432-3990** (toll-free) **785-291-4180** (in Topeka) **1-800-766-3777** (for hearing impaired customers)
7 a.m. – 4:30 p.m., Mon. – Fri.

BlueCross BlueShield Kansas

1133 SW Topeka Blvd, Topeka, KS 66629

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An independent licensee of the Blue Cross Blue Shield Association.