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## Frequently Asked Questions

**1. Q: What is happening between Salinas Valley Health and Anthem Blue Cross?**

**A:** Salinas Valley Health is in active negotiations with Anthem Blue Cross, and has been since before the current contract expired on August 1, 2023. Our goal is to initiate a new contract that would allow us to continue providing services as an in-network provider to Anthem Blue Cross members at our facilities and with our affiliated physicians. We are working diligently to secure sustainable reimbursement to counter rapidly rising costs of care.

**2. Q: Why haven't you been able to come to a resolution with Anthem Blue Cross?**

**A:** To continue to serve as a reliable source for high-quality, convenient care for our community, we need sustainable reimbursement from Anthem Blue Cross and other health insurance companies for all of our entities – including our Medical Center inpatient and outpatient facilities, and our clinics. Healthcare providers across the country are experiencing the crushing weight of rising costs and inflation.

While Anthem recognizes the continued surge in costs facing healthcare providers, they have been unwilling to pay all of our entities fairly for the care we provide. We need Anthem to put the health of our community first, just as we are, by providing reimbursement rates that ensure we can continue to be there for our patients whenever and wherever they need us.

**3. Q: Which Anthem Blue Cross health plans are affected by an Anthem Blue Cross termination?**

**A:** Anthem Blue Cross Aspire HMO  
Anthem Blue Cross of California – Commercial  
Anthem Blue Cross (Pathways)  
Anthem Medicare Advantage

**4. Q: What is the difference between in-network and out-of-network?**

**A:** “In-network” means Salinas Valley Health has an existing contract with Anthem Blue Cross to see patients at a contracted rate for services. “Out-of-network” means Salinas Valley Health does not have a contract with Anthem Blue Cross. In the interest of protecting our patients, Salinas Valley Health will continue to honor the lower, in-network rates for the foreseeable future, even though we are out of network.



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**5. Q: How are Anthem Blue Cross PPO, HMO, and Medicare patients affected?**

**A:** Salinas Valley Health will continue to welcome Anthem Blue Cross PPO, HMO, and Anthem Medicare Advantage patients. Even though we will be out of network, we will continue to honor Anthem Blue Cross's in-network rates for all services and care at our inpatient and outpatient facilities and clinics. This means that your out-of-pocket costs should not be more than Anthem Blue Cross's in-network amounts for services and care. We have adopted this policy for our Medical Center and Clinics to ensure patients and families will not have any major changes to the cost of their care.

**6. Q: What if I have a procedure scheduled at a Salinas Valley Health facility? Should I cancel that and any other upcoming appointments?**

**A:** Salinas Valley Health will continue to provide the services you need at an in-network rate in our Medical Center and Clinics.

**7. Q: Should I change my physician?**

**A:** You do not need to change your physician. All providers at Salinas Valley Health Medical Center and Clinics will honor Anthem's in-network rates so that you do not have to pay a higher share of costs.

**8. Q: Can I still use Salinas Valley Health's Emergency Room?**

**A:** Yes. By law, patients always have access to our emergency room, regardless of our contract status with Anthem Blue Cross. If you experience an emergency, you should visit the nearest emergency room.

**9. Q: I am a new patient. Can I receive care?**

**A:** Yes, you can receive care from any of Salinas Valley Health's facilities. Whether you are a new patient or an existing patient, we will honor in-network rates.

**10. Q: How long could Anthem Blue Cross patients be out of network?**

**A:** Unfortunately, there is no timeline for a successful renegotiation with Anthem Blue Cross. We intend to continue negotiating in good faith for a fair and equitable agreement that keeps Salinas Valley Health in network and accessible for Anthem Blue Cross members. We will be transparent and keep our community updated throughout the negotiations.

**11. Q: How can I stay up-to-date on the negotiations?**

**A:** As our negotiations with Anthem Blue Cross progress, we will continue to keep our patients informed through regular communication:

- Patient information line: 831-202-6870
- Website: YouDeserveCoverage.com.
- You may send an email question to [coverage@salinasvalleyhealth.com](mailto:coverage@salinasvalleyhealth.com).



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**12. Q: What can I do to ensure I have continued in-network access to Salinas Valley Health?**

**A: Contact Anthem today.** Email Beth Andersen, President, California Commercial Business/Anthem, [beth.andersen@anthem.com](mailto:beth.andersen@anthem.com) and urge Anthem to work with us to protect your in-network access to Salinas Valley Health.

- a. **Contact your broker.** If you acquired your plan through a broker, ask them about coverage options that will allow you to maintain in-network access to Salinas Valley Health.
- b. **Speak with your HR or benefits manager at work.** If you receive coverage through your employer, ask your HR or benefits manager about alternate or secondary coverage options that will protect your in-network access to Salinas Valley Health facilities and providers.
- c. **Select a new plan during the upcoming open enrollment period:** If you purchase your own insurance from the Health Insurance Exchange, you can select a new plan during California's upcoming open enrollment period to guarantee your in-network access to Salinas Valley Health. We are in-network with the following exchange plans for the full 2023/4 benefit year:

- Aetna- Commercial, Medicare, Medi-Cal
- Aspire – Medicare Advantage
- Blue Shield of California — Commercial – TRIO, non-TRIO, Covered California/Exchange
- Central California Alliance for Health (CAAH) – Medi-Cal
- Cigna - Commercial
- Coastal Health Administrators - Commercial
- Community Health Plan (CHP) - Commercial
- First Health – Commercial
- Health Smart/InterPlan - Commercial
- Humana Choice Care - Commercial
- Health Net – Commercial
- Multiplan Commercial
- Pacific Health Alliance (PHA) – Commercial
- Pinnacle TPA - Commercial
- Private Healthcare Systems, Inc. (PHCS) Commercial
- TriCare
- TriWest
- TRPN – Three Rivers Provider Network – Commercial
- United Healthcare - Commercial

## CONTINUITY OF CARE

### **13. Q: What are Continuity of Care Services?**

**A:** Certain patients, including those who are hospitalized, pregnant, or undergoing an active course of treatment prior to the contract expiration date may qualify for Continuity of Care services through Anthem Blue Cross.

### **14. Q: What if I am pregnant or receiving treatment for a special condition?**

**A:** Certain patients, including those who are hospitalized, pregnant or undergoing an active course of treatment, including outpatient oncology infusion services prior to the contract end date, may qualify for Continuity of Care through Anthem Blue Cross. If you think you may qualify, work with your provider to complete a Continuity of Care form.

### **15. Q: What are some examples of services that may be eligible for coverage under Anthem Blue Cross Continuity of Care program?**

**A:** Examples of conditions that may qualify for Continuity of Care services include those listed below.

| <b>Type of Problem or Condition</b>  | <b>How long you get continuity of care</b>   |
|--|--|
| Acute condition (for example, pneumonia)   | As long as the condition lasts   |
| Serious chronic condition (for example, severe diabetes or heart disease)                  | No more than 12 months. Usually until you complete a period of treatment and your doctor can safely transfer your care to another doctor |
| Pregnancy  | During Pregnancy and immediately after the delivery (the post-partum period)   |
| Terminal illness   | As long as the person lives  |
| Care of a child under 3 years  | For up to 12 months  |
| An already scheduled surgery or other procedure (for example, knee surgery or colonoscopy) | The surgery or procedure must be scheduled to happen within 180 days of your doctor or hospital leaving your health plan                 |

\*Source: California Department of Managed Healthcare

<https://www.dmhc.ca.gov/HealthCareinCalifornia/YourHealthCareRights/ContinuityofCare.aspx>



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**16. Q: How do I apply for Continuity of Care Services?**

**A:** Your provider's office will have a Continuity of Care form that you can submit to Anthem Blue Cross, and the form is available on our website at [www.YouDeserveCoverage.com](http://www.YouDeserveCoverage.com).

You can contact Anthem Blue Cross's customer service department at the phone number located on the back of your insurance card if you need more information. If you have further questions, you are encouraged to call the Department of Managed Health Care ("DMHC"), which protects consumers, by telephone at its toll-free number, 1-888-HMO-2219, or at a TDD number for the hearing impaired at 1-877-688-9891, or online at [www.hmohelp.ca.gov](http://www.hmohelp.ca.gov).