



SEEING A DOCTOR AND OTHER PROVIDERS

Referrals and pre-approvals (*Prior Authorization*)

- To see a specialist or another provider, you usually need a referral from your primary care doctor and a pre-approval from MediExcel Health Plan.
- If you do not get the required referral and pre-approval and you get the service or treatment from a specialist, you will have to pay all of the cost.

The pre-approval process:

Your primary care doctor usually asks MediExcel Health Plan for a pre-approval. The care you want must be a covered benefit, and it must be necessary for your health. MediExcel Health Plan uses medical guidelines and policies to decide whether to approve or deny a referral.

- It can take up to 2 business days to get a pre-approval, depending on your medical condition and the treatment you need.
- If your health problem is urgent, MediExcel Health Plan may take up to (24 hours) to decide, depending on your medical condition and the treatment you need.
- MediExcel Health Plan will inform your provider what we decide within 24 hours after deciding.
- MediExcel Health Plan will send you and your provider a letter within 2 business days after MediExcel Health Plan has decided whether to approve or deny your request.
- Sometimes more information or other tests are needed before MediExcel Health Plan can decide. MediExcel Health Plan will inform your provider as soon as we know if more information or tests are needed. We will inform your provider no later than 2 business days after we receive the request for pre-approval (*or within 24 hours if your health condition is urgent*).

Your primary care doctor makes a referral:

- Your doctor may give you a written referral or may send the referral directly to the other provider. Your doctor will give you the name and telephone number of the specialist or other provider you will see.
- To make the appointment, call (619) 365-4346 in the U.S., or at (664) 633-8555 if dialing from Mexico.

You do NOT need a referral or pre-approval to:

- See your primary care doctor.
- See an OB-GYN in the MediExcel Health Plan network for preventive health care services. This includes prenatal/maternity care as well as cancer screening tests such as pap tests and mammograms.
- See an eye doctor in the MediExcel Health Plan network once a year for a vision exam if you are under age 17.
- Get emergency or urgent care. See "*Emergency Care*" and "*Urgent Care*" in your *Evidence of Coverage and Disclosure Form*.

Standing referrals:

A *standing referral* is a referral that allows you to see a specialist or go to a specialty care center without getting a new referral from your primary care doctor each time. It may be for a certain period of time and a specific number of visits.

- You may need a standing referral if you have a disabling condition or a serious condition that is getting worse or threatens your life, such as a heart condition or AIDS.
- Before MediExcel Health Plan pre-approve a standing referral, your primary care doctor, the specialist, and MediExcel Health Plan must agree that you need it.
- If you have AIDS, you can get a standing referral to a doctor who specializes in AIDS.

Getting a second opinion

You may ask for a second opinion from another doctor about a condition that your doctor diagnoses or about a treatment that your doctor recommends. Below are some reasons you may want to ask for a second opinion:

- You have questions about a surgery or treatment your doctor recommends.
- You have questions about a diagnosis for a serious chronic medical condition.
- There is a disagreement regarding your diagnosis or test results.
- Your Health is not improving with your current treatment plan.
- Your doctor is unable to diagnose your problem.

How to request a second opinion:

You must request a pre-approval from MediExcel Health Plan to get a second opinion. Your request will automatically be approved.

- You can ask for a second opinion from another primary care doctor in your doctor's medical group or from any specialist in the MediExcel Health Plan network.
- The section called "*the pre-approval process*" in your *Evidence of Coverage and Disclosure Form* explains how to request a pre-approval.