



Member tips

Referrals

Note: This information applies to members with Medica Elect® or Medica EssentialSM plans only.

QUESTIONS	ANSWERS
What is a referral?	A referral is a written recommendation from your primary care provider to see or receive care from another specialist outside your designated care system.
When do I need a referral?	When you receive care within your care system, you won't need a referral. When you receive care outside your care system, you may need a referral from your primary care provider. See the grid on the reverse page for more guidance on when referrals are needed.
What happens when I receive a referral from my primary care provider?	If your primary care provider determines that you need care from a specialist outside the care system you selected, the referral will identify the specialist, the type of service, the number of visits, and the date range in which you should see the specialist. Your primary care provider will notify Medica that you have received a referral.
What questions should I ask my primary care provider when I get a referral?	Which specialist do you recommend and why? How many visits are authorized? When can I see the specialist? What follow-up care is included by the specialist? Your primary care provider can authorize the specialist to: <ul style="list-style-type: none"> ■ Consult ■ Consult and diagnose ■ Consult, diagnose and treat
Do I always need a referral?	You do not need a referral for physical therapy, occupational therapy or speech therapy if you have been directed by your primary care provider to receive these services. Other examples of when you don't need a referral include: Emergency or urgent care, OB/GYN doctors affiliated with your primary care clinic/care system, network mental health/substance abuse providers, and network optometrists or network ophthalmologists (for a once-a-year preventive eye exam). See the grid on the reverse page for additional examples. Check your benefit document or call Customer Service at the number on your Medica ID card if you have questions.
What happens if I see a specialist without getting a referral?	The amount you have to pay may be significantly higher. In some cases, you may be responsible for paying 100% of the bill. In addition, if you receive services from a provider that is not in the network, the bill you will be responsible for paying may be 5 to 25 times higher than if you received those services from a network provider.
Can a specialist refer me to another specialist?	No. All care is coordinated and directed by your primary care provider. However, if the primary care provider has indicated that the specialist can "Consult, diagnose and treat," then the specialist may order additional ancillary services such as physical therapy, X-rays, MRI, CT scan, out-patient surgery, etc.

WHEN DO I NEED A REFERRAL?

When you receive care **within your care system**, you won't need a referral. Check with your care system first to find out their referral requirements. When you receive care **outside your care system**, you may need a referral from your primary care clinic. The following grid outlines when referrals are and are not required.

Please note: If you receive care **outside your network**, your costs will be significantly higher, and you may be responsible for paying the entire cost of the services you receive. Before receiving out-of-network care, your primary care clinic will need to request prior authorization from Medica for those services. If the services are approved, you'll also need a referral from your primary care clinic.

REFERRAL REQUIRED*	NO REFERRAL REQUIRED, BUT SERVICES MUST BE ORDERED BY YOUR PHYSICIAN	NO REFERRAL REQUIRED
Before seeing one of the following types of specialists outside your selected care system , you'll need a referral.	You don't need a referral to receive the following types of services; however, your primary care clinic, physician, OB/GYN or nurse practitioner will first need to arrange for the services at the facility.	You may access the following types of care or services directly, as long as they are in your network.
<ul style="list-style-type: none"> ■ Allergist ■ Cardiologist ■ Colon and rectal surgeon ■ Dermatologist ■ Endocrinologist ■ Family practice provider ■ Gastroenterologist ■ Hematologist ■ Infectious disease specialist ■ Internist ■ Nephrologist ■ Neurologist ■ OB/GYN (if not affiliated with your care system) ■ Oncologist ■ Ophthalmologist/Optomtrist (for non-routine services such as illness or injury) ■ Orthopedist ■ Otolaryngologist ■ Pediatrician ■ Plastic surgeon ■ Podiatrist ■ Pulmonary disease specialist ■ Rheumatologist ■ Surgeon ■ Thoracic surgeon ■ TMJ specialist ■ Urologist ■ Vascular surgeon 	<ul style="list-style-type: none"> ■ Anesthesiology ■ Audiology ■ Non-emergency ambulance ■ Occupational therapy ■ Outpatient hospital services ■ Outpatient lab and pathology ■ Physical therapy ■ Radiology services ■ Skilled nursing facility care ■ Speech therapy ■ Surgery center services ■ Therapeutic radiology 	<ul style="list-style-type: none"> ■ Chiropractic care ■ Durable medical equipment ■ Emergency ambulance ■ Emergency care ■ Mammograms (routine) ■ Mental health/substance abuse (call Medica Behavioral Health at 1-800-848-8327 to obtain services) ■ OB/GYN affiliated with your care system ■ Ophthalmologist/Optomtrist (for annual routine eye exam only) ■ Oral surgery ■ Urgent care

*Keep in mind that primary care clinics will only refer outside their care system if there is no care available within their system. The clinic will make the determination whether there is care within the system and direct care to the most appropriate place.

If you have questions regarding referrals or prior authorization, call Medica Customer Service at the number on the back of your ID card.