



Frequently Asked Questions

Primary Care Provider Selection

Rooted in the HMO-managed-care model, Blue Care Network controls costs, closes gaps in care and improves whole-person-health outcomes. We achieve this by delivering coordinated, preventive care to members in partnership with our strong provider network.

1. What is a primary care provider?

A primary care provider, or PCP, can be a doctor — such as a family physician, general practitioner or internist. Physician assistants or nurse practitioners may also be primary care providers. A person's primary care provider is the primary contact and coordinator of the person's health care needs and is usually the first health care provider the member sees for medical care.

2. What does a primary care provider do?

A primary care provider oversees a patient's whole-person health care, promotes healthy lifestyles and well-being, manages chronic conditions, and helps members navigate the health care system. This includes providing:

- Routine checkups
- Preventive care
- Treatment for common illnesses or injuries
- Maintenance of medical records
- Coordination of services such as specialty care, imaging and behavioral or mental health care when needed

3. Why is a primary care provider necessary for Blue Care Network members?

The primary care provider is the starting point for all BCN-member care, and BCN PCPs are responsible for providing referrals to specialists when required.

The relationship between a patient and primary care provider is powerful. It ensures getting medically necessary care at the right place, at the right time. And it ensures that BCN members receive comprehensive and continuing care.

4. Who must select a primary care provider?

All members with any type of BCN HMO plan must select a primary care provider. And all members residing inside Michigan with any type of Blue Elect PlusSM POS plan must select a primary care provider.

5. Who doesn't need to select a primary care provider?

BCN doesn't require members residing outside of Michigan with any type of Blue Elect Plus POS plan to select a primary care provider.

6. How does the primary care provider selection process work for HMO and POS members who live in Michigan?

- At enrollment, a member can designate a primary care provider on their enrollment form.
- After enrollment, a member can select a primary care provider by logging in to bcbsm.com or the mobile app and using the provider search tool. The member can also get help by calling the Customer Service number on the back of their BCN member ID card.

7. What happens if a member doesn't select a primary care provider?

If a member doesn't select a primary care provider, Blue Care Network auto-assigns a PCP.

8. How does BCN auto-assign primary care providers?

If we have information at the time of enrollment that indicates the member has a current relationship with an eligible PCP, we'll auto-assign that PCP to the member. Examples of the types of information we use include prior plan data, a spouse's PCP assignment and referrals or claims data.

If we don't have information that indicates any prior PCP relationship history within 60 days of the plan's start date, or if the member hasn't selected a PCP in that time frame, we'll auto-assign a PCP based on the member's location.

9. How can a member change an auto-assigned primary care provider or choose a new PCP?

After auto-assignment or anytime, a member can change their PCP by logging in to bcbsm.com or the mobile app and using the provider search tool. The member can also get help by calling the Customer Service number on the back of their BCN member ID card.

10. How can a member find primary care providers who participate in their plan and network?

A member can find participating PCPs by logging in to bcbsm.com or the mobile app and using the provider search tool. The member can also get help by calling the Customer Service number on the back of their BCN member ID card.

11. Can a member select any primary care provider?

No, primary care providers must meet certain eligibility criteria before a BCN HMO or POS member may select them as their designated provider.

12. What's the eligibility criteria for BCN primary care providers?

A PCP must be active in the BCN HMO network, participate with the member's specific plan, be available for selection based on the PCP's "accepting new patients" or "only accepting current patients" status and have signed a PCP agreement with BCN under a provider group or location. Only eligible providers show up in a bcbsm.com or mobile app provider search return and are selectable.

13. What do we need to know about PCPs who are "accepting new patients"?

When a PCP is "accepting new patients," a member may select that PCP, regardless of whether they have an existing relationship or not.

14. What do we need to know about PCPs who are "only accepting current patients"?

When a PCP is "only accepting current patients," a member may select that PCP if they have a prior relationship. The member needs to note the prior relationship with that PCP on the enrollment form.

15. Why is a BCN primary care provider in the directory showing up as in network but isn't available for selection?

When this happens, it means that the PCP signed BCN's PCP agreement, but didn't include a provider group or location. The member can call the provider's office to confirm if the provider participates with the member's BCN plan.

16. What if a member wants to meet or try out primary care providers before selecting one?

This is acceptable, but before visiting a prospective PCP, the member should log in to bcbsm.com or the mobile app and change their PCP selection to that provider. Otherwise, the member might be billed for a specialist visit instead of a PCP visit.

17. When will the member account show the new primary care provider selection?

A member must allow 24 hours for PCP selection changes to appear in their member account.

18. Can a representative walk a member through the selection process?

Yes, Customer Service representatives can help during the selection process. They can help members understand the specific criteria for selecting PCPs and the benefits associated with specific types of providers within the network.

