Community Health Plan

Member News...

The Community Health Plan is a state-licensed (1985), federally-qualified Health Maintenance Organization (1988)

December 2002 County of Los Angeles Department of Health Services

How to See a Specialist

Last month we talked about *routine care*. *Routine care* is obtained by making an appointment and receiving a regular health check-up from your *Primary Care Physician (PCP)*. A *PCP* is your personal doctor. This month we will discuss *how to see a specialist*.

What is a Specialist?
A *specialist* is a doctor who takes care of special health problems. A *specialist* has training, knowledge and skill in one field of medicine. For example, a Cardiologist is a heart specialist who has years of training dealing with heart problems.

When do I see a Specialist?
If your *PCP* thinks it is *medically necessary* for you to see a specialist, they will send you to one. *Medically necessary* means services provided to treat an illness or injury according to established and accepted medical practice standards.

What is *Prior Authorization* and when do I need a *Referral*?
Except for the services listed below, your *PCP* must approve all health care services before you receive them. This is called *prior authorization*. A *referral* is a request for health care services that your *PCP* does not normally provide.

Do I always need a *Referral?*
Some services do not require a referral. These services are:

- Child Health and Disability Prevention (CHDP)
- Confidential HIV testing
- Emergency services (conditions identified in your Member Handbook as emergencies)
- Family planning services
- Immunizations
- Certain OB/GYN services including pregnancy-related services. Go to the OB/GYN Section in your Member Handbook for more information.
- Sexually Transmitted Disease (STD) services
- Women, Infants and Children (WIC) services
- Native American Indians who receive health care from Indian Health Centers or a Native American Health Clinic. Go to "Special Services for Native American Indians" Section in your Member Handbook for more information.

For more information on the referral process, please refer to the CHP Member Handbook.

All health services are reviewed, approved or denied according to medical necessity. If you would like a copy of the policies and procedures CHP uses to decide if a service is medically necessary, call the Community Health Plan (CHP) Member Services Department at 1-800-475-5550. For TTY/TDD access, please dial 1-626-299-7265 or 1-626-299-7266.

Los Angeles County - Community Health Plan is an affiliate of L.A. Care Health Plan in providing Medi-Cal Managed Care coverage in Los Angeles County.

Things to Remember:

If you cannot keep your appointment, call your PCP right away. When an appointment is cancelled in advance, it is possible for another patient to be seen in your place. Try to cancel at least 3 to 4 days before your appointment. Even if you are unable to cancel your appointment in advance, do not hesitate to call and reschedule.

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It is our mission to assure that the health services provided to the communities we serve are through a managed integrated delivery system, which assures access, quality and cost effectiveness.

This publication is designed to inform and advise members of current events and human interest stories only and should not be considered as policy or used as medical advice.

Also, look for the Community Health Plan ***Health News***, a quarterly publication to provide members with health education articles.