

Access to Care Nationwide

If you are traveling or live outside of your plan's network, using our travel networks, and following a few simple steps, may significantly reduce your out-of-pocket expenses when you travel or are out of your plan's network service area.



Nationwide Coverage

We offer two networks beyond the PacificSource Network, depending on where you need care: First Choice Health™ Network and First Health® Network.

Both networks are national healthcare provider networks that include physicians, hospitals, and other outpatient care facilities. You can access these networks when you need medical care and are outside of your plan's network.

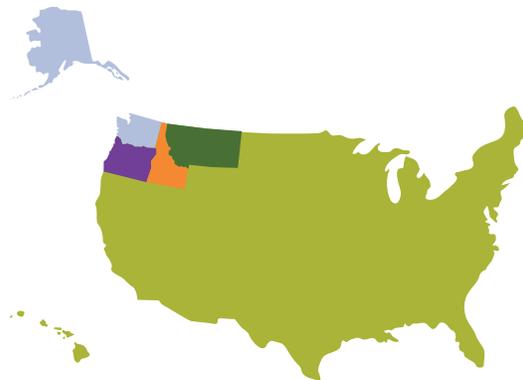
First Choice Health Network

You can use this network in Alaska and Washington, except for Clark, Cowlitz, Klickitat, Pacific, Skamania, and Wahkiakum counties, which are included in the PacificSource Network in Washington.

First Health Network

You can use this network when you are in any other state, except Alaska, Idaho, Montana, Oregon, and Washington.

You will receive your plan's participating level of benefits when you use providers and facilities from these networks for urgent or emergency care needs.



-  First Choice Health Network
-  First Health Network

Access to Providers

You can find up-to-date provider information by visiting PacificSource.com/find-a-provider. On this page, you'll find links to First Health Network and First Choice Health Network, below the service area map.

You also can find First Choice Health and First Health providers by phone:

- First Choice Health (800) 231-6935, ext. 2102
- First Health (800) 226-5116

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Idaho

Direct: (208) 333-1596
Toll-free: (800) 688-5008

Montana

Direct: (406) 442-6589
Toll-free: (877) 590-1596

Oregon

Direct: (541) 684-5582
Toll-free: (888) 977-9299

TTY

Toll-free: (800) 735-2900

En Español

Direct: (541) 684-5456
Toll-free: (866) 281-1464

Email

cs@pacificsource.com

PacificSource.com



Frequently Asked Questions

What if the provider I want to use is not a member of the network?

If the provider doesn't participate (is not contracted with your plan's network or our travel networks, and a network provider is available in that area), you will receive your plan's out-of-network provider benefits, unless it is a true medical emergency. If you have a true medical emergency, go directly to the nearest emergency room or appropriate facility, and there will be no reduction in benefits.

If you would like to request that a provider join either network, you may contact our Customer Service Department for a nomination form. Or visit PacificSource.com > Find a Doctor for a link to a form. Give the form to the provider to complete and return to PacificSource. Keep in mind, that sending in a nomination form doesn't mean the provider will automatically be added to the network. The nomination process may take up to nine months, and not all providers are approved.

What if there are no network providers where I live?

The networks are growing and adding new providers all the time. If a network provider is not available where you live, your plan pays your covered expenses based on usual, customary, and reasonable charges for that area.

What if I need nonemergency hospitalization?

You may check with the network for your area to find out if there is a participating hospital nearby. Then, check with your physician to see if he or she has hospital privileges with that hospital. Finally, have your physician preauthorize your admission by calling our Health Services Department at (888) 691-8209.

How are my claims paid when I receive treatment?

When you use a First Choice Health or First Health provider, simply show your PacificSource member ID card. The provider will send your claim to us automatically, and you won't have to file any paperwork.

If you go to an out-of-network provider, the provider may or may not bill us directly. If they don't bill us directly, you'll need to pay for the services up front, then send PacificSource a claim for reimbursement. Your claim must include a copy of the provider's itemized bill, along with your name, member ID number, group name and number, and the patient's name. If you were treated for an accidental injury, please also include the date, time, place, and circumstances of the accident.

How do providers obtain information on benefits, preauthorization, and eligibility?

Show your PacificSource member ID card to the provider office when obtaining services. It contains important provider information. For preauthorizations, providers should contact our Health Services Department. Our Customer Service Department can verify benefits and member eligibility for them.

What if I'm traveling in another country?

If you experience a medical emergency while traveling 100 or more miles from home or abroad, you can access services provided by Assist America® Global Emergency Services at no cost. Services include medical consultation and evaluation, medical referrals, foreign hospital admission guarantee, critical care monitoring, and when medically necessary, evacuation to a facility that can provide treatment.

For more information, visit PacificSource.com/assist-america.