

Network Referral Requirements Reminder

Blue Shield of California Promise Health Plan (Blue Shield Promise) is reminding Independent Physician Associations (IPAs) of existing referral requirements outlined in the Blue Shield Promise Medi-Cal Provider Manual, Section 7.1.1 – Physician, Member, and Provider Responsibilities.

The Blue Shield Promise Provider Manual states that providers must refer members within the Blue Shield Promise contracted network to the fullest and most reasonable extent possible. In alignment with this existing requirement, we ask you to please encourage participating providers to refer members to in-network providers for services whenever possible.

Referrals to out-of-network providers require prior authorization to be eligible for reimbursement.

Please share this reminder with your participating providers and make certain that appropriate referral and authorization processes are in place and well communicated.

For questions regarding these requirements, please contact Blue Shield Promise Provider Customer Service at (800) 468-9935, Monday through Friday, 6:00 a.m. – 6:30 p.m.

Resources

[Medi-Cal Provider Manual](#) (Section 7)