

## FAQS FOR EXTERNAL USE (WEBSITE & OTHER)

### BCBSIL TERMINATED OSF

**Q: Why did Blue Cross and Blue Shield of Illinois (BCBSIL) terminate OSF?**

**A:** On October 2, BCBSIL terminated the contracts with three OSF hospitals effective January 1, 2018. For thirty years, BCBSIL has received discounted rates in exchange for a volume commitment to OSF. The proper balance between volume and rates is important to all hospitals and is particularly important for those providing the most sophisticated neonatal, cardiac, neurological, and other expensive and high-end services. BCBSIL unilaterally decided to end its volume commitment while at the same time insisting on paying OSF potentially lower rates. OSF has been and remains interested in a BCBSIL PPO agreement that provides for fair rates that allows OSF to maintain the same high quality of care and broad variety of services across the care continuum.

**Q: Is it true that OSF demands exclusive contracts and would not allow BCBSIL to enter into agreements with other hospitals?**

**A:** No. BCBSIL has long been free to negotiate and enter into agreements with any providers it chooses.

**Q: When is the BCBSIL termination effective?**

**A:** Effective January 1, 2018, all OSF hospitals in Illinois, except for OSF HealthCare Saint Anthony's Health Center in Alton, will not be included in the BCBSIL commercial PPO networks. Unless they have other coverage, patients enrolled in BCBSIL PPO network products would have to use their out-of-network benefit for care at the OSF hospitals.

**Q: Which of OSF Illinois hospitals in Illinois are part of this BCBSIL termination?**

**A:** The following OSF entities are affected by the BCBSIL termination:

- OSF HealthCare Saint Anthony Medical Center, Rockford
- OSF HealthCare Saint James-John W. Albrecht Medical Center, Pontiac
- OSF HealthCare Saint Elizabeth Medical Center, Ottawa
- OSF HealthCare Saint Paul Medical Center, Mendota
- OSF HealthCare St. Joseph Medical Center, Bloomington
- OSF HealthCare Saint Francis Medical Center, Peoria
- OSF HealthCare St. Mary Medical Center, Galesburg
- OSF HealthCare Holy Family Medical Center, Monmouth
- OSF HealthCare Saint Luke Medical Center, Kewanee

OSF HealthCare Saint Anthony's Health Center in Alton, Illinois, is **NOT** affected by this BCBSIL termination.

**Q: BCBSIL terminated three of the OSF hospitals, so why has OSF terminated six other hospitals?**

**A:** Blue Cross and Blue Shield of Illinois (BCBSIL) announced plans to drop three OSF hospitals in Peoria, Rockford, and Galesburg, Illinois from its PPO network as of January 1, 2018. By removing these hospitals from its network, BCBSIL eliminates important referral centers and patient access to advanced, critical services within OSF HealthCare. This action by BCBSIL reduces the ability to care for the sickest and most vulnerable patients and, as such, left OSF no choice but to terminate agreements with most of its other hospitals.

**Q: What BCBSIL products were terminated?**

A: The BCBSIL Commercial, PPO, EPO and Blue Choice products were all part of the termination.

**Q: How many people are affected by this termination?**

A: BCBS is the largest commercial insurance company in Illinois. Accordingly, BCBS is the largest non-governmental (i.e., Medicaid and Medicare) payer for OSF providers and hospitals. OSF HealthCare remains hopeful that an agreement can be reached so that we can continue to provide high quality care to these patients.

**Q: Do you anticipate coming to agreement with BCBSIL prior to termination?**

A: OSF is open to future discussions with BCBSIL, but is too early to anticipate the outcome of this termination by BCBSIL. BCBSIL gave notice of this termination in the midst of ongoing discussions and without providing any advance notice. It is our hope that BCBSIL will realize the value of having OSF hospitals in its network for its members, and enter into a new agreement. The care of our patients is our top priority—and will remain so—as we continue efforts to reach an agreement that includes OSF hospitals in BCBSIL PPO network products.

**EFFECT OF TERMINATION**

**Q: Are services considered out-of-network on or after January 1 if a patient comes to an OSF facility that was terminated?**

A: BCBSIL must cover emergency services even at out-of-network facilities in accordance with all state and federal laws. However, absent special authorization by BCBSIL, for all other services the BCBSIL terminated facilities will be considered out-of-network.

**Q: What are my hospital options following this announcement?**

A: OSF clinicians will continue to work with patients and their insurance companies to accommodate the best care recommended, according to clinically appropriate transfer or discharge protocols. This would include all available options, whether in-network or out-of-network. OSF will always do what is best for our patients' care with minimal disruption to their healing process.

**Q: If a patient needs to have a procedure, can their doctor send them to their local OSF hospital?**

A: A patient's doctor can send them to a local OSF hospital. However, unless the individual has other applicable coverage, the costs associated with the procedure will be considered out-of-network and may not be covered by BCBSIL.

**Q: Does this termination also affect outpatient hospital services?**

A: Yes, the termination by BCBSIL will affect all outpatient hospital departments and locations, including, but not limited to diagnostic testing, audiology, sleep studies, rehabilitation, and ambulatory surgery. Outpatient services provided at non-hospital facilities should not be affected by the BCBSIL terminations.

**Q: Are the OSF physician providers still in network for BCBSIL?**

A: We anticipate that many OSF physicians will remain in the BCBSIL network, but some physicians may be unable to participate in the BCBSIL PPO products based upon the hospitals where they have admitting privileges. We will be discussing this with BCBSIL to determine which, if any, physicians will be impacted.

**Q: Are PromptCare locations affected by this announcement?**

**A:** No. As with physician providers, PromptCare is not an outpatient hospital department and therefore is not included in the termination.

**Q: Are OSF Home Care providers still in-network for BCBSIL?**

**A:** Yes. OSF Home Care, including OSF Hospice, OSF Home Health, OSF Home Medical Equipment and OSF Home Infusion Pharmacy will remain in the BCBSIL network.

**Q: How does this affect the hospitals in Danville and Champaign that will be joining the OSF family in February?**

**A:** OSF HealthCare has no information at this time because these facilities are yet not part of OSF HealthCare. OSF HealthCare has been—and remains—interested in BCBS PPO agreements that provide fair rates and allow OSF to maintain the same high quality of care and broad variety of services across the care continuum in every region we serve.

**Q: What if a patient is currently getting treatment that will go past January 1?**

**A:** If a patient is currently receiving treatment that is scheduled to go past January 1, unless they have other potentially applicable coverage, they will need to contact BCBSIL to find out if they will continue to cover treatment at our facilities as part of in-network benefits. If the patient needs to switch providers, OSF will work collaboratively with BCBSIL and the new provider to ensure a safe and clinically appropriate transition of care.

**Q: How will this affect mothers due to deliver in 2018?**

**A:** After January 1, 2018, pregnant mothers, their babies in utero and their newborns may choose to receive care at OSF HealthCare hospitals according to their out of network benefits or other potentially applicable coverage they may have. Patients should consult with their insurance company on coverage. Patients referred or transferred for advanced care will be subject to out-of-network benefits.

**Q: What about OSF HealthCare Children's Hospital? If an individual has a high-risk pregnancy and is due to deliver at OSF Saint Francis because of their NICU, will this be covered?**

**A:** After January 1, 2018, BCBSIL PPO patients using the NICU at Children's Hospital will be out of network but will receive appropriate care under clinically appropriate discharge protocols. After discharge, these patients may continue to use OSF using their out of network benefits or other potentially applicable coverage they may have. Patients should consult with their insurance company on coverage.

**Q: How will this affect patient co-payment and deductibles?**

**A:** Co-pays and deductibles will vary for any out-of-network services depending on the specific plan selected. Individuals should reach out directly to their insurance provider to determine specific benefits available in order to keep care at one of these OSF hospitals.

**Q: What if an individual is in another Blue Cross plan that is outside of Illinois?**

**A:** BCBSIL networks accessed by BCBS plans outside of Illinois would be considered out-of-network for the OSF facilities affected by this BCBSIL termination as of the termination effective date.

**Q: I have a commercial plan with BCBS, but it is not “Blue Cross Blue Shield of Illinois”. Am I affected by these changes?**

**A:** Patients insured by any BCBS PPO product who receive care in Illinois access the BCBS of Illinois network, therefore services would be considered out-of-network for the OSF facilities affected by this BCBSIL termination.

**Q: Does this affect Medicare Select or Supplemental products?**

**A:** No, it does not affect Medicare Select or Supplemental products. Patients may continue to use OSF hospitals and their OSF physician as before. BCBSIL has terminated only commercial products, including all PPO, EPO and Blue Choice products. The Medicare Select products are supplemental products to traditional Medicare and are not affected by this termination.

**Q: Are federal employees with BCBSIL products affected?**

**A:** Yes, all patients in the BCBSIL commercial PPO networks are affected. Unless they have other coverage, patients enrolled in BCBSIL PPO network products would have to use their out-of-network benefit for care at the OSF hospitals.

**Q: What if an individual has BCBSIL Commercial, PPO/EPO, or Blue Choice as their secondary insurance?**

**A:** Individuals should review the BCBSIL website for determination of benefits and eligibility of coverage. Specific plan information can be obtained by dialing the phone number on the back of the individual’s insurance card. If they have other coverage, such as through a spouse’s employer or a government benefits program, OSF may be participating with that other insurance coverage. Therefore they may be able to access OSF hospitals on an in-network basis through that other coverage.

**Q: What should patients with BCBSIL products do?**

**A:** Patients who wish to use OSF hospitals can speak to their employer to learn what provisions are being made for employees who are BCBSIL members. Patients can visit the OSF [website](#) for a complete listing of other insurance companies and products accepted by the OSF hospitals. BCBSIL members can contact their local human resources department regarding other insurance company choices or express any concerns to the Blue Cross Blue Shield Customer Service phone number at (800) 538-8833.

**Q: How can a BCBSIL member request that Blue Cross allow participation of the OSF hospitals?**

**A:** We appreciate the desire to have access to our OSF hospitals and to the entire OSF HealthCare system of coordinated care that takes seriously the quality, cost, and experience for each one of our patients. BCBSIL members can contact their local human resources department regarding other insurance company choices or express any concerns to the Blue Cross Blue Shield Customer Service phone number at (800) 538-8833.

**Q: If an individual is in Open Enrollment, how do they switch to a new plan?**

**A:** If an employer has multiple options available during open enrollment, our OSF hospitals are participating in many other national and local managed care plans. Please refer to the OSF [website](#) for the list of the plans that OSF is participating with at this time.

**Q: If an individual is NOT in Open Enrollment, how do they switch to a new plan?**

**A:** If individuals are not currently in Open Enrollment, they will need to contact their employer's human resource department to determine their options. If they are able to change plans, they may refer to the OSF [website](#) for the list of other plans that OSF is participating with at this time.

**Q: What other managed care payers does OSF participate with?**

**A:** OSF participates in many national and local managed care payers, including most other major insurance companies. A full listing of our managed care contracts is available on the OSF [website](#).