Specialty Care Coordination & Referrals

If you believe you need to see a specialist, your first step is to make an appointment with a primary care provider at Student Health & Counseling Services.[1]

SHCS primary care providers possess a broad range of knowledge and skills and will work with you to provide continuity of care for any health issue you may encounter. For any condition, your provider will assess if a referral to a specialist or diagnostic testing is needed and guide you in obtaining that care outside SHCS.

Most services received outside SHCS require a referral from SHCS in order for the UC Student Health Insurance Plan (UC SHIP) to pay the claim. This applies to specialty-care follow-up visits as well. Out-of-pocket costs are the lowest if you select a UC Family provider or Anthem Blue Cross in-network provider. Referrals expire after 12 months and are limited to the number of visits indicated by your provider when writing the referral.

If you are referred to a specialist from an ER or Urgent Care visit, please call SHCS or schedule an appointment to discuss the referral with your primary care clinician and obtain the required referral. Please see ER/Urgent Care Claims [2] for more information.

When you are referred to a healthcare provider outside of SHCS, follow the steps below:

**Steps**

| Step 1: Bring Your Referral to Your Appointment | Bring your referral and your Anthem ID card to your appointment with the specialist. |
**Step 2: Give the Specialist Your Insurance Card**

If the specialist (only out-of-network providers do not bill the insurance company directly), then you will need to get reimbursed by the insurance company by completing the **Medical Claim Reimbursement Form** [3]. In this case, make a copy of your receipt and itemized bill, complete a claim form, and mail both to Anthem at P.O. Box 60007, Los Angeles, CA 90060-0007. If billing issues arise, please review the **Medical Billing Process** [4].

**Step 3: Get Follow-up Appointments Authorized**

Get any follow-up visits authorized. If your specialist requests follow-up visits or a referral to another specialist, make sure to ask the specialist’s office to fax SHCS the request(s) for authorization. Your specialist should also fax over any applicable doctor notes from your visit. Requests not authorized by SHCS will not be covered.

*All specialty care requires a co-payment per visit, and some visits require that you meet your annual deductible and pay a co-insurance fee. See **Medical Billing Process** [4] for more information.*