

ANTHEM/SCRIPPS HEALTH FAQs

The current contract between Anthem and Scripps Health ended on **12/31/2024**. Unfortunately, negotiations did not produce a new contract, so **Scripps Health is no longer an in-network provider with Anthem medical plans effective January 1, 2025**.

We understand that this creates disruption for many employees who seek treatment with Scripps Health providers. While Rady Children's has no influence in the negotiations between Scripps Health and Anthem, we will provide as much information as we can in order to support employees with next steps. Below are some FAQs based on our discussions with Anthem, along with information on switching to a different medical plan (and what to consider before finalizing that decision):

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PRIMARY CARE PHYSICIAN (PCP) AND ID CARDS:

I'm enrolled in the Priority Select HMO and I have a Scripps Health provider. Do I have a doctor I can see as of January 1, 2025?

Anthem assigned employees and any enrolled dependent(s) with a Scripps Health provider a new in-network PCP or Medical Group effective January 1, 2025, and updated ID cards were mailed to your home address on file. You can make an appointment with your new PCP starting in January.

Can I pick another PCP that's in-network with the Priority Select HMO? Or do I have to see the one that Anthem assigned to me due to the expiring contract with Scripps Health?

You and your enrolled dependent(s) can switch to a different in-network PCP or Medical Group at any time by calling Anthem at 1-833-913-2237. You can search for in-network providers with the Priority Select HMO by following the instructions [here](#) (make sure you choose Priority Select HMO when you search).

I have a Scripps Health provider and I haven't received a new ID card yet. What should I do?

Please contact the number on the back of your current Anthem ID card. You can also download digital ID cards on [anthem.com/ca](https://www.anthem.com/ca) or the Sydney mobile app. When you speak with Anthem, you may want to confirm the mailing address they have on file is correct. If it is incorrect, please make the appropriate updates in PeopleSoft Employee Self-Service and notify benefits@rchsd.org that your address has been updated.

I'm enrolled in the Priority Select HMO and received a new ID card, but there's no PCP listed. What should I do?

Please contact the number on the back of your current Anthem ID card so they can troubleshoot.

I'm enrolled in the Anthem HDHP and I see Scripps Health providers. Will I get a new ID card?

An assigned PCP or Medical Group is only required for HMO plans, so you will not receive a new ID card if enrolled in the HDHP. You can search for a new in-network PCP by following the instructions [here](#) (make sure you're searching the Prudent Buyer PPO network).

Since the HDHP allows out-of-network coverage, you can also continue to see your current Scripps Health providers, **but please be advised that your costs will increase, as out-of-network coinsurance/deductibles will now apply.**

You may also be balance billed for any charges that Anthem does not deem usual and customary for the type of service you receive since Scripps Health is no longer in-network/under contract. We recommend making sure you understand the cost implications of seeing Scripps Health providers out-of-network before proceeding with appointments, etc.

Is there an option to see Scripps Health providers out-of-network on the Priority Select HMO?

There is no out-of-network coverage on the Priority Select HMO, unless it is a life-threatening emergency.

CONTINUITY OF CARE:

I'm currently receiving medical treatment with my Scripps Health provider. Do I have any options to continue my care since the current contract expired 12/31/24?

If you are receiving certain forms of care from a Scripps Health provider, you may be eligible for something called Continuity of Care (COC). This would allow you to continue your treatment with Scripps at the in-network level (even if a new agreement is NOT reached) for a certain period of time so you can complete your care without disruption. You would then choose an updated in-network PCP in the Priority Select HMO after your care is complete. Examples of situations that are typically eligible for COC include:

- Pregnancy
- A serious chronic condition that requires specialized care
- An acute illness that requires specialized care
- A pre-scheduled nonelective surgery in 2025

If you think you or a family member enrolled in your health plan may qualify for COC, you should contact the number on the back of your Anthem ID card to start the application process as soon as possible. The COC form is also available on the Benefits intranet page [here](#). If you have questions about the COC process or what qualifies, please contact Anthem directly.

I was approved for Continuity of Care (COC). What happens now?

If you and/or an enrolled dependent are approved for COC, then the member can continue to see the approved Scripps Health providers at the in-network cost level until the approved COC period ends. **Please note that in-network cost sharing will only apply if you or an enrolled dependent are approved by Anthem for COC.**

I was approved for COC. Can my enrolled dependents continue to use Scripps Health providers at the in-network level during my COC period?

No. Only the members who are approved for COC by Anthem can continue to see Scripps Health providers at the in-network level.

Any other enrolled members will need to choose another in-network PCP or Medical Group effective January 1, 2025. The same is the case if one of your enrolled dependent(s) was approved for COC and you were not. You would need to choose another in-network PCP or Medical Group effective January 1, 2025.

What should I do when my approved COC period ends?

When your approved COC period ends, you may contact Anthem to see if you can apply for an extension of your COC. Otherwise, your in-network coverage with Scripps Health will end when the COC ends.

If you're enrolled in the Priority Select HMO, you and/or any enrolled dependent(s) will need to select another Priority Select in-network PCP or Medical Group at the time COC ends.

If you're enrolled in the HDHP, you and/or any enrolled dependent(s) can select another in-network PCP or Medical Group at the time COC ends, or you can continue to see Scripps Health providers **at the out-of-network level, which will cost more** (see the question in the previous section about being enrolled in the HDHP and out-of-network coverage).

RADY CHILDREN'S MEDICAL PLANS:

I'm enrolled in the Priority Select HMO. Can I switch to another Anthem Medical Plan now that Scripps is an out-of-network provider?

We understand that you may have chosen the Priority Select HMO during Open Enrollment based on the assumption that Scripps Health would remain an in-network provider. Because of this, Rady Children's is allowing a **one-time administrative period where we will accept requests to switch to one of the other Anthem medical plans offered by Rady Children's** (Select HMO or HDHP Medical plan). If you want to switch to a different medical plan, **you must notify benefits@rchsd.org in writing no later than January 20, 2025**. However, we recommend you review the other in-network providers with the Priority Select HMO before making a final decision. Any changes in medical plan will be effective January 1, 2025.

If I switch to the Anthem Select HMO or HDHP, can I see Scripps Health providers?

If you switch to the Anthem Select HMO, you cannot see Scripps Health providers unless you have a life-threatening emergency. You would need to select one of the PCPs or Medical groups that are in-network with the Select HMO (e.g. Sharp or UCSD).

If you switch to the Anthem HDHP, you could see Scripps Health providers, but it would be at the **out-of-network coverage level, which will cost more**. We highly recommend you review the out-of-network deductible and coinsurance levels before choosing this option. In addition, you may also be balance billed for any charges that Anthem does not deem usual and customary for the type of service you receive since Scripps Health is no longer in-network/under contract.

The HDHP also operates differently than the HMO plans (e.g. you must pay the cost of the applicable deductible out of pocket before the plan starts helping to pay versus paying applicable copays for services), so we recommend you talk to [ALEX](#) to review the differences between HMOs and the HDHP.

If I switch medical plans now, can I switch back to the Priority Select HMO if Scripps Health and Anthem reach a deal later in the year?

No. If you switch to a different medical plan in January, **you cannot switch back to the Priority Select HMO until the next Open Enrollment period**, even if Scripps and Anthem reach a new contract at some point in 2025. This is because IRS rules do not allow multiple plan changes outside of Open Enrollment unless you have a qualifying life event (e.g. birth of a child, marriage). We recommend you review your option(s) carefully before making a final decision to switch medical plans during this one-time administrative period.

I was approved for Continuity of Care (COC). Can I switch to a different Anthem medical plan?

If you are enrolled in the Priority Select HMO and were approved for COC, you will need to remain in the Priority Select HMO so that you can see Scripps Health providers at the in-network level during the approved COC period. When your COC period ends, you would need to choose another in-network PCP or medical group that accepts the Priority Select HMO.

If I switch to the Select HMO or HDHP medical plan, will my employee premiums change?

Yes. You will need to pay the applicable employee premiums for those plan(s).

GENERAL QUESTIONS:

Can I still see Scripps Health providers in an emergency?

Yes. Care in a life-threatening emergency is covered whether a provider is in-network or out-of-network with Anthem.

My Scripps Health provider wrote a prescription for me, and I still have refills. Will I have to pay out-of-network costs for the refills?

No. If you have refills remaining on a prescription filled by a Scripps Health provider in 2024, you should be able to continue refilling the prescription at an in-network retail pharmacy (e.g. CVS). You will continue to pay the in-network Rx copays until the refills run out. Once the refills run out, you would need to get an updated prescription from your new in-network PCP.

Will Scripps and Anthem continue to negotiate now that the contract has expired?

There is nothing preventing negotiations continuing into 2025 to see if a new agreement can be reached. We will continue to keep you updated on any new developments.

If Scripps and Anthem don't reach a new contract, will Rady Children's explore medical plan options in 2026 that would allow Scripps Health to be an in-network provider again?

Yes, Rady Children's will consider whether our main San Diego health care networks (Scripps, Sharp, UCSD) are in-network with available medical carrier(s) when we begin medical plan renewal discussions for 2026 later this Spring.

Why isn't Rady Children's looking for other options that allow Scripps Health to remain an in-network provider?

We understand that this situation causes frustration and disruption for our employees. Unfortunately, Rady Children's does not have any influence over the negotiations between Anthem and Scripps Health, and we finalized the contract for our medical renewal at a point where negotiations were still underway, which is not unusual (similar to last year's negotiations between Anthem and UC Health).

As far as looking for alternate coverage, that's not as easy as it may seem. Rady Children's would have to go out to market, and another carrier (e.g. Cigna, Aetna) would need to agree to take on our business. If they did agree, this could come with cost increases and potential disruption to other employees if, for example, the new carrier does not have certain Sharp or UCSD doctors in their network. While there are no easy answers, as noted above, Rady Children's will consider whether our main San Diego health care networks (Scripps, Sharp, UCSD) are in-network with available medical carrier(s) when we begin medical plan renewal discussions for 2026 later this Spring.

What if I have a question that wasn't answered here?

Please reach out to benefits@rchsd.org or contact Claire Weatherford at cweatherford@rchsd.org.