Montgomery County Government
Point of Service Product is Now Open Access

CareFirst is thrilled to announce that beginning January 1, 2004, your Point of Service Plan will include an Open Access feature!

What does Open Access mean?
No referrals from a primary care physician (PCP) needed to access specialists!

See the specialists you choose, without a referral.
With Point of Service Open Access, you and your dependents choose a Primary Care Physician (PCP) to coordinate your care, but you are free to visit specialists such as dermatologists, podiatrists and others, without a referral. This can save you time and paperwork. Which puts important health care decisions where they belong — back in your hands.

Choice means more with so many providers to choose from.
The CareFirst BlueChoice/MPOS networks includes over 4,000 PCPs, 20,000 specialists and 75 area hospitals throughout Maryland, D.C. and Virginia. Which means that when you self-refer, you’ll also have a choice of health care providers that are convenient to you.

No PCP Referrals
◆ There are no in-network referrals – hassle free & no paperwork
◆ Members can still self-refer out of the CareFirst BlueChoice/MPOS networks
◆ While lab work and radiology services will not require a referral, a requisition will still be required for lab services and a prescription is still required for radiology services for our network providers.

The Freedom to:
◆ See specialists without a PCP referral
◆ Access a large network of physicians and hospitals throughout Maryland, D.C. and Virginia
◆ Seek care in or out of network

Freedom to See Any Provider
◆ Members pay less out-of-pocket when they receive care from BlueChoice/MPOS providers.
◆ Members can go to any provider out of the BlueChoice/MPOS networks and will pay a higher out-of-pocket cost.

Frequently Asked Questions
What procedures require a pre-approval and/or authorization?
Certain services require Plan approval, such as infertility treatments and services performed in the outpatient department of a hospital. Chiropractic services require Plan authorization from the first date of service.

What if I don’t get prior approval or a referral?
You do not need a PCP referral to seek in or out-of-network care. However, in cases where you need an authorization and you or your provider do not obtain one, benefits for covered services will be considered at the out-of-network level.