

OUT of NETWORK POLICY

PFFS

As a member of our plan, you can choose to receive care from out-of-network providers or any Medicare approved provider who agrees to accept the plans terms and conditions of payment except in an urgent or emergent situation. If you use an out-of-network provider, your share of the cost for your covered services may be higher. Our plan will cover services from providers, as long as the services are covered benefits and medically necessary. Non-network providers that do not have a signed contract with us must be a deemed provider as described in Section 2 of our Terms and Conditions. If you require additional information, refer to your Evidence of Coverage.