

Introducing the ACA StandardHealth with Health Choice plan for 2024

We're streamlining our Affordable Care Act (ACA) product options for 2024 to better serve our Blue Cross[®] Blue Shield[®] of Arizona (AZ Blue or BCBSAZ) members and make things simpler for providers. We're offering both PPO and HMO plans. Here's what you need to know about our HMO plans.

• Most of our 2024 HMO plans will be open-access plans that do not require PCP referrals for specialist office visits.

Note: Many of these plans were previously PCP Coordinated Care HMO (PCP-HMO) plans.

• For 2024, we will offer just one PCP-HMO plan. The plan will be administered by BCBSAZ Health Choice. The name of this plan is ACA StandardHealth with Health Choice. See below for more information.

What is the name of the 2024 PCP-HMO plan?

The name of this plan is ACA StandardHealth with Health Choice.

How do I know if I'm in-network for this plan?

You're in-network for the plan if you're participating in the new ACA Health Choice network. Contract amendments were sent to providers in April and September, 2023. Providers who received these amendments are considered in-network, unless they have notified us otherwise.

Is this plan an open-access HMO plan?

No. This plan is considered a PCP-HMO plan that supports PCP-coordinated care. It requires an assigned PCP and PCP referrals for specialist office visits. The referral information must be included on the specialist claim.

What is the member ID prefix for this plan?

The prefix at the beginning of the member ID is letters IAZ.

How can I identify a member with this plan?

On the front of the member ID card, you will see these key identifiers:

- Prefix IAZ (at the beginning of the member ID)
- Plan name: ACA StandardHealth with Health Choice
- Network name: ACA Health Choice Network

Here is a sample of the ID card for this plan:

BlueCross BlueShield An Indeemfer: Liarmage of the Rev Cross Bia Sheel Asecution	ACA StandardHeal with Health Choic	
MEMBER NAME IAZ987654321 Copay PCP \$40 Copay Specialist \$80 Copay Urgent Care \$60 Copay X Tier 1/2/3 \$20/40/4	Plan Year 20 In-Network Cost Share Deductible Individual \$5 Deductible Family \$1 OOP MAX Individual \$5 OOP MAX Family \$1	DU65)24 (1800)100 8200 ES
Rx BIN# 603017	See assigned PCP for servi and specialist referrals.	ces
PCP-HMO	AZDOI	

Who administers provider support for this plan?

The BCBSAZ Health Choice team is your point of contact for eligibility and benefits, prior authorization, medical policies, claim submission, claim status, reimbursement, appeals and grievances, and provider relations and network participation for this plan.

For resources and more information, call 1-800-322-8670.