

**BLUE CROSS AND BLUE SHIELD OF ILLINOIS  
POLICY**

<b>DEPARTMENT:</b> Network Provider Performance	
<b>POLICY NUMBER:</b> Administrative 44	<b>POLICY TITLE:</b> A Woman’s Principal Healthcare Provider
<b>EXECUTIVE OWNER:</b> Executive Director, Provider Performance	<b>BUSINESS OWNER:</b> Manager, Provider Performance
<b>ORIGINAL EFFECTIVE DATE (IF KNOWN):</b> 11/01/1999	<b>COMMITTEE APPROVAL DATE:</b> 10/24/2024

**I. SCOPE**

This Policy applies to Blue Cross and Blue Shield of Illinois (BCBSIL) Health Management Organization (HMO), and for the following lines of business and products:

Line of Business / Product Scope / Plan Scope/Contract Number (if applicable)	In Scope [x]
HMO Commercial	x
HMO IFM	x
PPO Commercial	
PPO Exchange	

**II. PURPOSE**

- A WPHCP is a physician licensed to practice medicine in all its branches specializing in Obstetrics and Gynecology (OB/GYN) or Family Practice, and who may also choose to act as a Primary Care Physician (PCP).
- To assure female HMO members the right to directly access the WPHCP of their choice within their selected IPA.
- To assure IPA accountability for WPHCP care.

**III. POLICY**

Blue Cross and Blue Shield of Illinois (BCBSIL) will offer female members both choice and direct access to all marketed Woman’s Principal Healthcare Providers (WPHCPs) within the Medical Group/Independent Physician Association or Physician Hospital Organization (hereinafter the “IPAs”) the female member selects.

**IV. CONTROLS/MONITORING**

The assigned Provider Network Consultant (PNC) for the IPA ensures the IPA understands WPHCP role as a PCP, resolves HMO member inquiries related to WPHCP and works with internal departments as needed.

Line of Business and/or Area	Control Requirements
HMO	HMO Medical Service Agreement defines the role of WPHCP

**V. RELATED DOCUMENTS**

Administrative 44A - A Woman’s Principal Healthcare Provider

**VI.IMPACTED BUSINESS AREAS**

- HMO Network
- HMO Utilization Management
- HMO Customer Assistant Unit
- BCBSIL Customer Service Centers

**VII. POLICY REVIEWERS**

Person Responsible for Review	Title	Date of Review
Jessica Whaley	HMO Provider Network Consultant	10/08/2024

**VIII. POLICY REVISION HISTORY**

Description of Changes	Revision Date
Revised Policy header	10/08/2024

**IX. POLICY APPROVALS**

Company, Division, Department and/or Committee	By: Name	Title	Approval date
Provider Performance	Geoff Guiton	Executive Director, Provider Performance	10/18/2024
BCBSIL P&P Committee			10/24/2024

## BLUE CROSS AND BLUE SHIELD OF ILLINOIS PROCEDURE

<b>DEPARTMENT:</b> Network Provider Performance	
<b>PROCEDURE NUMBER:</b> Administrative 44A	<b>PROCEDURE TITLE:</b> A Woman's Principal Healthcare Provider
<b>EXECUTIVE OWNER:</b> Executive Director, Provider Performance	<b>BUSINESS OWNER:</b> Manager, Provider Performance
<b>ORIGINAL EFFECTIVE DATE (IF KNOWN):</b> 11/01/1999	<b>COMMITTEE APPROVAL DATE:</b> 10/24/2024

### I. SCOPE

This Policy applies to Blue Cross and Blue Shield of Illinois (BCBSIL) Health Management Organization (HMO), and for the following lines of business and products:

Line of Business / Product Scope / Plan Scope/Contract Number (if applicable)	In Scope [x]
HMO Commercial	x
HMO IFM	x
PPO Commercial	
PPO Exchange	

### II. POLICIES IMPLEMENTED BY PROCEDURE

This Procedure implements the following Policy(ies):

Policy Name	Policy Number
A Woman's Principal Healthcare Provider	Administrative 44

### III. PROCEDURE

1. A female member may access a WPHCP for routine care without a referral from the PCP. However, the PCP and the WPHCP must both be within the member's selected IPA.
2. A female member may choose a WPHCP within the IPA they have selected for primary care services.
3. The IPA is required to inform the member of their right to choose a WPHCP and how to change a WPHCP via the new member Welcome letter.

### IV. CONTROLS/MONITORING

The assigned Provider Network Consultant (PNC) for the IPA ensures the IPA understands WPHCP role as a PCP, resolves HMO member inquiries related to WPHCP and works with internal departments as needed.

Line of Business and/or Area	Control Requirements
HMO	HMO Medical Service Agreement defines the role of WPHCP and referenced in Procedure.

#### V. AUTHORITY AND RESPONSIBILITY

The HMO member's assigned IPA is responsible for ensuring a female member has access to WPHCP for routine care without a referral from the PCP.

#### VI. IMPACTED BUSINESS AREAS

- HMO Network
- HMO Utilization Management
- HMO Customer Assistant Unit
- BCBSIL Customer Service Centers

#### VII. IMPACTED EXTERNAL ENTITIES

HMO Medical Groups

#### VIII. PROCEDURE REVIEWERS

Person Responsible for Review	Title	Date of Review
Jessica Whaley	HMO Provider Network Consultant	10/08/2024

#### IX. PROCEDURE REVISION HISTORY

Description of Changes	Revision Date
Revised Procedure header, added Section II: Policies Implemented by Procedure, deleted Related Documents	10/08/2024

#### X. PROCEDURE APPROVALS

Company, Division, Department and/or Committee	By: Name	Title	Approval date
Provider Performance	Geoff Guiton	Executive Director, Provider Performance	10/18/2024
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