Anthem

Save money on chiropractic care

When you need chiropractic care, you can save on out-of-pocket costs by using American Specialty Health (ASH) as part of your Anthem Blue Cross (Anthem) plan. ASH is a national health services organization that manages chiropractic, acupuncture, and health and wellness provider networks. The ASH network has over 4,000 providers, and serves more than 32 million members nationwide.

Choose an in-network provider and save

When searching for a chiropractor, you'll save money by choosing one who is in the ASH network. Costs can vary if you choose a provider that is not in the ASH network. To view a list of chiropractors in the ASH network, go to **anthem.com/ca** and choose **Find Care**.

Your chiropractic care must be determined as "medically necessary" to be covered

ASH processes claims and reviews them to make sure services are medically necessary. You will receive Explanation of Benefits forms and letters about medical necessity directly from ASH.

- **If you use an in-network chiropractor** – Chiropractors should get approval from ASH to make sure care is medically necessary before they provide that care. They can send claims directly to ASH. You aren't responsible for the cost of a denied claim, so it's important that ASH gives their approval before you receive care. This authorization is needed for the chiropractor to be paid.

- **When you see out-of-network acupuncturists,** ASH will review to make sure your care is medically necessary. ASH will begin review for medical necessity after your fifth visit each year. Your chiropractor can help you submit the paperwork. If you don't follow the process and ASH can't decide if care is medically necessary, they will:

  — Deny your claim due to lack of information.

  — Ask for health records.

  — Work with the chiropractor to get more information.

  — Reprocess the claim once it has been able to determine medical necessity.

If ASH doesn't receive your health records, they can't review the claim. Unlike providers in your health plan's network, you have to pay the full cost of your care if a claim is denied.

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Frequently asked questions about claims

How long does a claim review take?

ASH will review within five days of treatment. If the treatment was already been given, ASH will review it within 30 days if all the paperwork has been sent.

How should information be sent to ASH for review?

Out-of-network chiropractors can fax all forms and paperwork to ASH at 877-304-2746 or go to ashlink.com and select Resources and Members. Then choose **Non-Participating Practitioner Claims Packets**.

How can I find a chiropractor?

Go to anthem.com/ca to find a chiropractor in your health plan or call the Member Services number on the back of your ID card. If in-network providers are not located near where you live or work, we'll work with ASH to find a provider close to you (on a case-by-case basis).

What if I need more care than my benefits allow?

ASH will review the type and amount of care before it is given to determine if it's medically necessary. Without a pre-authorization review, services may not be covered. Chiropractors should call ASH to ask for a pre-authorization review, or you can call the Member Service number on the back of your ID card.

What if I have Medicare or another health plan?

We will process your claims when Medicare or any other health plan is your primary insurance carrier.

Do other nonchiropractic providers follow this process if they offer chiropractic services?

No. We will review and process all claims for them — not ASH.

Where should claims go?

If you see a chiropractor that is not in your health plan, you or the chiropractor need to send your claim to:

American Specialty Health
P.O. Box 509001
San Diego, CA 92150-9001

What if a claim is sent to Anthem by mistake?

We will reject the claim and send it back.

What if the claim is for a service outside of California?

Chiropractors need to send claims to your local home plan.

How can I appeal a claim or file a grievance?

Follow the process on the back of your Explanation of Benefits or medical necessity letter that ASH provided to you.

Who should chiropractors call about a claim?

They should call ASH directly at **800-972-4226**.

We are here if you or your provider have questions

Our Member Services team can help you and call ASH, if needed. You can also view your claims at anthem.com/ca. Call the Member Services number on the back of your ID card if you have questions.

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