



Transition of Care Worksheet

Use this worksheet for your own personal reference to make sure you know how to get the care you need.

If you or a covered family member is being treated for a medical condition and your current provider is **not** in the new network, you may be able to temporarily continue care with your current provider(s) at the in-network rate once your new medical coverage begins.

My Condition: _____
(If you're not sure how to describe your condition or the treatment required, call your doctor and ask.)

Call your insurance carrier for answers to these questions:

? Are the treatments/procedures I need covered and eligible for transition of care?

Notes: _____

? What do I or my doctor need to do to get a transition-of-care request approved?

Notes: _____

? How long will I be able to continue seeing my current doctor at the in-network rate after the new plan year begins?

Notes: _____

? How do I find a new in-network doctor?

Notes: _____

? How can I check ratings/reviews of doctors?

Notes: _____

Call your doctor for answers to these questions:

? What is the treatment transition plan? What do I need to do? What do you need to do?

Notes: _____

? Can you recommend any doctors in my new network?

Notes: _____



Applies to Orthodontia Too

If you will have a new dental carrier and you or your covered family members will continue receiving ongoing orthodontic treatment in the new plan year, call your new dental insurance carrier as soon as possible to ask for help with "transition of care."