

## Privacy is a Priority

PCMH is a voluntary program

When you agree to participate, you'll be asked to sign an **Election to Participate** form. This allows your primary care provider (PCP) – whether physician or nurse practitioner and CareFirst BlueCross BlueShield or CareFirst BlueChoice, Inc. (CareFirst) to share your claims history and medical information electronically with one another, and with other health care professionals who are providing your care, to help monitor and coordinate the services you receive.



We have strict privacy policies to protect our members. Anyone with access to your records is required by law to maintain the privacy of your medical information according to federal and state laws, including HIPAA privacy rules.

By signing an **Election to Participate** form for the Program, your medical information will be shared for the purposes of enhancing and coordinating your care. Any mental health records, including drug and alcohol abuse records, psychotherapy notes and other information protected under federal, state and local privacy laws will not be shared without your written consent.

When you elect to participate in the program

- you pay no additional premium\*
- there is no change in your benefits\*\*
- there is no change to your health plan requirements
- you can opt-out at any time without penalty and without changing your PCP and/or NP

\*If you have a high deductible health plan, certain charges may apply until you meet your deductible. \*\*You may be eligible for cost-share for certain services or programs.

Note: The doctors and other medical providers are independent providers making their own medical determinations and are not employed by CareFirst BlueCross BlueShield or CareFirst BlueChoice, Inc.

## How Do I Get Started?

Simply sign the **Election to Participate** form and return it to your PCP. You can get the form from your PCP or you can download it from the *Participate in PCMH* section at **www.carefirst.com/memberpcmh.** 

By signing the election form, you agree to participate in the Program and give your PCP access to your health information on file with CareFirst. This includes data from claims and notes from any CareFirst programs in which you have participated. Again, any mental health records, including drug and alcohol abuse records, psychotherapy notes and other information protected under federal, state and local privacy laws will not be shared without your written consent.

If you do not want your treating providers to receive and/or share your medical information and data, you must fill out an **Opt-Out of Information Sharing** form and return it to the CareFirst Privacy Office using the address listed on the form. This form can also be found at **www.carefirst.com/memberpcmh**.

It is important to understand that when you submit the Opt-Out of Information Sharing form, your treating providers will not be able to access medical information and data about you for the purposes of enhancing or coordinating your care. This means you will also be optingout of any CareFirst programs or activities that require data sharing (including PCMH, Care Management, Care Coordination, Disease and Case Management etc.).



Having a PCP who knows your health history makes it easier and faster to get the care you need.

## Why a PCP is So Important to Your Health

By visiting your PCP for routine visits as recommended, you can build a relationship, and your PCP will get to know you and your medical history.

A PCP is concerned with your overall health. If you have an urgent health issue, having a PCP who knows your health history often makes it easier and faster to get the care you need. Your PCP can sometimes provide advice over the phone or fit you in for a visit. That helps you avoid long lines and expensive charges at the emergency room.

When you visit your PCP for screenings and preventive services, he or she can detect health concerns in the early stages, when they are easier and less costly to treat.