



Second Opinions

Can I request a second opinion about my diagnosis or medical care?

As a member of Western Health Advantage (WHA), you may request a second medical opinion regarding any diagnosis and/or any medical procedure or treatment that your primary care physician (PCP) or specialist recommends. For specialty second opinions, you may choose any WHA participating network doctor with the appropriate specialty to render the opinion, but certain restrictions may apply so you should always check with your PCP for guidance before you make an appointment. All second opinions performed by **non-participating** (non-network) providers require prior authorization (pre-approval) from WHA at the corporate level to make sure the costs will be covered under your health plan benefits.

How do I obtain a second opinion?

WHA requires its contracted medical groups (groups) to allow you a second opinion upon your request or when your doctor thinks you should get one, as long as the service is provided by an appropriately qualified network doctor with the same specialty as the doctor who gave you the first opinion. For example, if your gynecologist recommends surgery, the doctor you should see for the second opinion must also be a gynecologist. Your request for a second opinion appointment will be approved and made available to you in a reasonable amount of time, and provided even sooner if the doctor treating you requests expedited (fast) handling because your medical condition and treatment requires urgent handling. Timeframes for approving, modifying or denying a second opinion request and other specialty referrals, are mandated by state law to protect patient rights. You and your doctor(s) will be notified in writing of the decision, and provided with information about your appeal rights.

All requests for second medical opinions should go through your primary care physician (PCP), who is responsible for submitting a referral to his/her (your) affiliated medical group. Second opinions are approved or denied by the group within the following timelines if all relevant information is available to make a decision:

- Urgent situation requiring a fast response – within 72 hours (must meet criteria to qualify)
- Non-urgent/elective request – within five (5) working days

Who can provide me with a second opinion?

In addition to asking for a second opinion from a specialist when appropriate, you may also receive a second opinion from another PCP when your assigned PCP makes recommendations. If you want a second opinion from another PCP, s/he must be in your own doctor's affiliated group. This means you cannot go to a PCP outside your group as you may with a specialist, even if the PCP is in WHA's provider network.

Public document: This fact sheet is a general guide only. Consult your Evidence of Coverage (EOC) booklet for a detailed description of benefits and limitations.

If you want a second opinion about findings or recommendations made by a specialist, you have more options available because of WHA's *Advantage Referral Program*. Under this program, you may get a second opinion from an appropriate specialist outside your PCP's affiliated group if the doctor participates in WHA's *Advantage Referral* program. Specialists who do not participate in the *Advantage Referral* program are identified in WHA's Provider Directory by a special symbol next to their name. You may also check with WHA's Member Service department or go onto WHA's Web site to find out which doctors currently participate.

Is pre-approval always required when obtaining a second opinion?

Prior authorization (pre-approval) is always required when you want a second opinion from a specialist outside the WHA network. These decisions are made by WHA's Chief Medical Officer, a physician, and are made on a case-by-case basis and must meet certain criteria. Second opinion requests may be denied if you request to see a specialist outside the provider network and there is an appropriately qualified specialist available within the network to render the opinion.

Where can I find more information?

You can view our website at www.westernhealth.com for more information about WHA's services and member rights.

TDD/TTY service is available for the hearing or speech-impaired, Monday through Friday, 8:00 am to 5:00 pm in either English or Spanish, by calling: (888) 877-5378, or you can dial 711. Should you have need for a translator face-to-face or over the phone, contact the **WHA Member Services department**, Monday through Friday, 8:00 am to 5:00 pm, (888) 563-2250 toll free.

IMPORTANTE: ¿Puede leer este documento? Si no, nosotros le podemos ayudar a leerlo. Además, usted puede recibir el documento escrito en español. Para obtener ayuda gratuita, llame ahora mismo a Western Health Advantage al (888) 563-2250, de lunes a viernes de 8am a 5pm.

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