



Commercial Insurance Referral Process

Do you have questions about referrals? Let us answer them.

Dean Health Plan (DHP) requires members to choose a Primary Care Practitioner (PCP) or a primary clinic. In most cases, your medical care can be provided by your PCP. However, you may need to obtain a referral request to visit a specialist.

The referral process helps us to ensure you receive appropriate, high quality care in a cost effective manner.

As a DHP member, it is your responsibility to obtain a valid referral request. Please keep in mind—a referral request does not authorize payment of non covered or exhausted benefits. Services are subject to all benefit maximums, policy limitations, and eligibility requirements. Please refer to your Member Certificate and Schedule of Benefits for benefit limitations.

We want to make the Referral Process as easy and convenient as possible. Here is a check list that you may find helpful when you are receiving services away from your Primary Care Practitioner (PCP) or outside your Primary Care Clinic.

1. Is the service a covered benefit?

- Check your Member Certificate/Schedule of Benefits or call our Customer Service Department.
- If yes, proceed to #2.
- If no, you will be financially responsible for services that are not a covered benefit of your policy.

2. Does the service require a referral request?

- If you are unsure, please call our Customer Service Department.
- If yes, did your PCP submit the referral request to Dean Health Plan? Proceed to #3.
- If no, and services are with a plan provider, you can receive services without a referral.

3. Is the referral request to a plan provider?

- If yes, no referral request is needed.
- If no, see #4.

4. Is the referral request to a non plan provider?

- Check your Provider Directory, call our Customer Service Department, or visit our [online provider directory](#) to determine if the provider is a plan or non plan provider.



- If yes, your PCP or Dean Health Plan specialist must submit a referral request and you must wait for approval from us before you obtain services. If we have a plan provider available to treat your condition, we will redirect you to this provider.

If your original referral request was modified by DHP, this will be noted on your copy of the processed request. Please review the information carefully. If you have questions, please contact our Customer Service Department at (608) 828-1301 or (800) 279-1301.

To assist us in keeping your health care information confidential, please notify us of address changes.

Q. What is a referral request and when is it needed?

A. A referral request is a Dean Health Plan (DHP) form that is completed by your Primary Care Practitioner (PCP) and submitted to DHP for review. It is needed when your PCP is recommending services with a non-plan provider. Please be aware that a verbal request does not take the place of a written Referral Request Form and requests to non-plan providers must be approved by DHP before receiving services. Please see the "How do I get a referral request to a non-plan provider?" section.

A referral request may be written by your PCP for up to a 12 month period. It may be limited to a specific number of visits or time period and expires when either limit is reached. For example, you may receive a referral for three visits to a specialist over the next three months. If only two visits were used and the three months have elapsed, the remaining visit is not approved. Or, if three visits were used in two months time, the referral is not valid for the remaining month. Before seeking additional health care services, your PCP should be contacted for subsequent referral requests.

Q. How do I get a referral request to a non-plan provider?

A. In situations where your PCP recommends services with a provider who is not part of the DHP Provider Network, your PCP will complete the Referral Request Form and submit it to DHP for review. We will notify you of our decision by mail, and by phone if your request is urgent. If approved, you can then see the non plan provider. If not approved, we will offer other options for treatment or providers.

Please note, only services that are not available with our plan providers are considered for approval with non plan providers. You must wait to receive written notice that your request has been approved before seeing this provider. If you have not received written notice before your scheduled appointment, check with our Customer Service Department to determine the status to avoid financial responsibility.

Q. If Dean Health Plan is my secondary insurance or the services may be covered by Worker's Compensation, do I still need a referral?

A. Yes, in order for services to be covered, you must get a referral when necessary. This also or a liability insurance company in the case of an accident.



Urgent and Emergency Follow-Up Care

If you need urgent or emergency care, a referral request is not necessary, however you need to observe the following guidelines for follow up care:

Out of Area Care:

Follow up care for an emergency or urgent condition by a non plan provider must be approved by DHP before receiving services and will be covered according to the provisions outlined in your Member Certificate in the [Your benefit Information section](#) of this website.

For more information, please refer to your Member Certificate or call our Customer Service Department at (608) 828-1301 or (800) 279-1301.