



Community Care Health (CCH) offers both an HMO and EPO product for both Large Group and Small Group benefit plans. The chart below provides a quick overview of the products.

There are two main differences between the HMO and EPO:

- (1) No primary care physician (PCP) selection/assignment is required for EPO; and
- (2) EPO members have open access to specialists within CCH's provider network (no PCP referral is required).

	HMO	EPO
PCP Selection/Assignment Required		X
PCP Referral Required for Specialty Care		X
Access to CCH Participating Providers	X	X
Access to Community Health System and Other Participating Hospitals in the Area	X	X
Services Must be Medically Necessary/Authorized	X	X
Authorized Care Outside of the Area	X	X
All Emergency and Urgent Care Covered at In-Network Benefit Level	X	X

Providers will be able to identify CCH HMO and EPO members by their member identification (ID) cards. Samples of the ID cards can be found in the CCH Provider Tool Kit, Quick Reference Guide by going to <https://communitycarehealth.org/for-providers>, Provider Toolkit.

- Quick Reference Guide EPO
- Quick Reference Guide HMO
- Provider Referral Form – HMO
- Prior Authorization Request Form
- Prior Authorization List
- Provider Operations Manual
- Quick Reference Guide – Pharmacy
- Provider Dispute Resolution Form

CCH also offers a Provider Portal for you/your office to check on eligibility/benefits and the status of claims. You can register for the provider portal at <https://communitycarehealth.org/for-providers> and scroll down to Portal Log In. CCH has dedicated staff available to answer your questions Monday through Friday, from 8 am – 5 pm at (559) 724-4995 or you can email your questions to providerrelations@communitycarehealth.org.

Sincerely,

Community Care Health Provider Relations