

Primary Care Provider Selection

Use this form to choose or change primary care providers for your BCBSM Physician Choice PPO or **BCN HMO**.



Nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association

Choose a primary care provider at enrollment

If you are enrolling in Blue Cross Blue Shield of Michigan Physician Choice PPO or Blue Care Network, you must select a primary care provider for yourself and each person on your contract. If you have more than four dependents, use additional copies of this form.

- You can choose a single PCP for your entire family, or different PCPs for different family members.
- Only family or general practice providers can serve as a PCP for the entire family.
- You cannot choose a specialist as your PCP.
- Subscribers must provide their Social Security number, if they are U.S. citizens, or tax identification number (TIN) if they are non-U.S. citizens.

Change your primary care provider

You may also change your primary care provider by logging onto your bcbsm.com account or using the bcbsm.com mobile app.

- If using this form, all changes become effective two business days after we receive this form, unless you request a later effective date. You cannot select an earlier date.
- If you change your primary care provider while being treated by a specialist, your new primary care provider must reauthorize the treatment you're receiving. Your treatment may not be covered until that occurs. You may ask to change your primary care provider effective immediately by calling the Customer Service number on the back of your Blue Cross or BCN ID card.

<input type="checkbox"/> Non-U.S. citizen	Subscriber Social Security/TIN number (required)	BCN/Blue Cross group number	BCN subgroup/Blue Cross division number	BCN class number
---	--	-----------------------------	---	------------------

Member Information						
	Member last name, first name	Provider last name, first name	Provider's NPI# <small>Can be found on bcbsm.com/find-a-doc</small>	Provider address	If changing PCPs, list reason	Seen in the last 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No
Subscriber						<input type="checkbox"/> Yes <input type="checkbox"/> No
Spouse						<input type="checkbox"/> Yes <input type="checkbox"/> No
Dep. 1						<input type="checkbox"/> Yes <input type="checkbox"/> No
Dep. 2						<input type="checkbox"/> Yes <input type="checkbox"/> No
Dep. 3						<input type="checkbox"/> Yes <input type="checkbox"/> No
Dep. 4						<input type="checkbox"/> Yes <input type="checkbox"/> No

Group/Employer name	Effective date of change:
I have read and understand the conditions of this form.	Subscriber signature SIGN
	Signature date

Need information about available primary care providers?

Our website, bcbsm.com/find-a-doctor, provides the most current information on Blue Cross and BCN-affiliated primary care providers, including the NPI# required above. You can search for a family practice, general medicine, internal medicine, pediatrics, preventive medicine, city or hospital group.

For Blue Cross Blue Shield of Michigan:

Mail completed form to:
Blue Cross Blue Shield of Michigan
Membership and Billing – M.C. 610I
P.O. Box 2260
Detroit, MI 48226

Fax to **1-866-900-2619**

For Blue Care Network:

Mail completed form to:
Blue Care Network
Membership and Billing – M.C. C300
P.O. Box 5043
Southfield, MI 48086-5043

Fax to **1-877-218-1466**