Behavioral Health Insourcing Frequently Asked Questions (FAQ) - EXTERNAL

Your Guide to Common Inquiries for B2B and commercial member audiences

As Blue Shield transitions behavioral health benefit management and member support in-house from its current Mental Health Service Administrator (MHSA), we know you'll have questions about what's changing, what's staying the same, and how to guide clients through the updates.

Table of Contents

Behavioral Health Insourcing Strategy

How does this transition position Blue Shield for future behavioral health innovation?

Bringing behavioral health in-house will simplify the member experience, improve care quality, and better connect physical and mental health. It also gives Blue Shield greater visibility and control over member and provider experience, clinical quality, and healthcare affordability.

How does this change enable Blue Shield to integrate behavioral health more closely with medical programs to support our members?

Contracting directly with behavioral health providers and in-house care management allows Blue Shield to integrate behavioral health with programs like chronic care, maternity, and pharmacy benefits.

For example, when a care coordinator identifies a behavioral health need in musculoskeletal (MSK) and chronic pain care, the transfer can happen internally. Direct contracts also allow us to expand the Collaborative Care Model (CoCM), where primary care and behavioral health providers work closely together to create a comprehensive care plan that addresses all member needs. The team then utilizes a case tracker to closely monitor symptoms over time and update the care plan and appropriate referrals as needed.

Benefits of CoCM include:

- Better identification and treatment of behavioral health in primary and acute settings
- Improved access for those who may not recognize they have a condition or avoid care due to stigma or barriers
- Coordinated escalation to higher level mental health or substance use disorder treatment when needed
- Stronger medication management and monitoring and support in primary care

Blue Shield of California's Behavioral Health Provider Network

What safeguards are in place to ensure network adequacy throughout the transition?

Blue Shield already has a robust state-wide behavioral health network of providers and facilities supporting its Medi-Cal, Medicare, and self-funded members. We are expanding and adding to that network for our fully insured members. This network is very robust and we anticipate very little member disruption. Blue Shield continues to

build and develop its direct Applied Behavioral Analysis (ABA) network for both self-insured and fully insured commercial members. We have a dedicated team of experienced behavioral health network specialists, focused on ensuring the network is adequate to ensure our members leveraging ABA can access high-quality care.

Our behavioral health provider network team continues to:

- Expand our provider network through recruitment and new contracts
- Accelerate credentialing with a dedicated Blue Shield behavioral health team
- Automate the contract processing to manage higher volumes
- Continuously conduct disruption analysis to identify members at risk and recruit providers to diminish any member disruption in care.

How robust is the Blue Shield's Behavioral Health network?

Blue Shield already has a robust state-wide behavioral health network of providers and facilities supporting its Medi-Cal, Medicare, and self-funded members. Blue Shield is actively working to add high-quality providers to the network and more closely manage existing providers for quality and performance.

What is the impact to other programs previously provided by MHSA?

Some programs will change vendors or move in-house:

- LifeReferrals 24/7: vendor will change, but benefits, pricing, phone numbers, and website remain the same
- Musculoskeletal (MSK) and chronic pain care management: moving in-house
- Behavioral Health Case Management (BHCM): This program will be discontinued. All members will be referred to comparable care through appropriate programs, and we anticipate low impact from this change.

Will members still have access to popular online provider networks and platforms such as Rula Health, Equip, Headspace Care and Grow Therapy through the Blue Shield of California Behavioral Health Network?

Yes. Blue Shield will continue to provide access to groups such as Rula Health, Equip, Headspace Care, and Grow Therapy, for virtual care options. When possible, these

groups will appear in Find a Doctor. The Blue Shield behavioral health customer support team will be available to direct members to the appropriate care options.

Member Support

What customer service improvements can members expect with the transition to in-house behavioral health support?

Members will have access to a dedicated behavioral health customer support team trained in escalations, referrals and the breadth of offerings from self-service and digital tools to more acute care options.

Additionally, the broker support team will also be trained in call management guidance and transfer protocols to support smoother interactions.

Provider Experience

Why is Blue Shield's behavioral health network attractive to providers and what drives providers to partner with us?

Blue Shield is improving the provider experience with stronger support and simpler processes. Enhancements include a dedicated provider relations team, expanded training and communication, upgraded online resources, and automation for faster contracting and credentialing. These changes make it easier for providers to work with us and remain engaged.

Broker and Consultant Support

What resources will be available to support brokers and consultants during this transition?

The behavioral health transition will be featured in upcoming broker roadshows, where we will share key updates. We will also continue to share updates and materials as they become available. For client-specific needs, please contact your Blue Shield representative or Broker Services. Our broker support team has been trained in call management guidance and transfer protocols to support smoother interactions.

How will the behavioral health transition be managed for groups renewing mid-year?

For groups renewing off-cycle or mid-year, some communications may be sent after their renewal date. As the transition progresses,-all groups will be moved onto a unified communications calendar to ensure consistency and clarity.

Key touchpoints include:

- **October 2, 2025**: We will post a notice on blueshieldca.com about the transition of behavioral health networks, operations, and services. Members can use Find a Doctor to search for behavioral health providers who will be in network on January 1, 2026. Member Services will be ready to support questions and provider searches.
- **October 31, 2025**: We will send letters to members whose current providers are not contracted with Blue Shield beginning January 1,2026, with instructions for requesting Continuity of Care, if they qualify. We will have a dedicated phone number and support team to assist impacted members through this transition

Member FAQs (Not approved for Medicare audience)

What is changing for behavioral health?

Currently, Blue Shield's Mental Health Service Administrator (MHSA) manages the behavioral health benefit, which includes mental health and substance use disorder services, through its network of providers for some Blue Shield members including all members receiving applied behavioral analysis (ABA) services.

Beginning January 1, 2026, Blue Shield will directly manage the behavioral health benefit for all our members including those receiving ABA services. With Blue Shield Behavioral Health, members have access to an expanded, quality network of behavioral health providers.

Blue Shield Behavioral Health is bringing behavioral health in-house to simplify the member experience, improve care quality, and connect physical and mental health to improve outcomes.

What is Blue Shield Behavioral Health?

Blue Shield Behavioral Health manages the behavioral health benefit for members including the provider networks, operations and services for mental health and substance use disorders.

Having both medical and behavioral health services managed by Blue Shield simplifies the member experience, improves care quality, and connects physical and mental health to improve outcomes.

Can members continue to see their current providers?

Because of the significant overlap between Blue Shield and the MHSA's networks, in most cases, Blue Shield members will experience no difference in care, as their provider will be "in-network" for Blue Shield. If your provider is not in Blue Shield's network, you will receive a letter in early November 2025. If you receive this notice, Blue Shield customer support can help you find a new provider or request continuation of care with your current provider for certain health conditions.

Why is this change occurring?

Having both your medical and behavioral health services managed by Blue Shield can help us better coordinate your care. It also allows you to access an expanded, high-quality network of providers. Managing the behavioral health benefit for all members will simplify the member experience, improve care quality, and connect care for better outcomes.

What is NOT changing?

This change will not affect your plan benefits or your ability to get the care you need. Most providers within the MHSA network will be a part of the Blue Shield Behavioral Health network. If your current behavioral health provider is not part of the network, Blue Shield is here to support you in finding an in-network provider that meets your needs. We remain committed to providing our members with access to quality care at an affordable cost.

How will I know if my current provider will still be in-network?

You will be notified by Blue Shield if your provider will no longer be in-network in early November. If you receive this notice, you can request continuation of care with your current provider for certain health conditions. Visit blueshieldca.com-continuing care to learn more about our Continuity of Care process.

How can members request continuation of covered services?

Visit blueshieldca.com-continuing care to learn more about our Continuity of Care process.

My current provider is not appearing in the 2026 Find A Doctor search result. Does this mean they will not be in-network with Blue Shield?

Blue Shield is continuing to build out its network by reaching out to MHSA contracted providers that are seeing Blue Shield members. Any member whose behavioral health provider will not be in the Blue Shield network will receive a personal communication in early November 2025 informing them of the Continuity of Care process and their eligibility, and resources to help them find an in-network provider.

Since Blue Shield is actively growing its behavioral health network, it is possible that your provider may have joined the Blue Shield network but is not yet listed in the search results. Please check back as it gets closer to 2026 or contact the Blue Shield Customer Service at 800-308-9078 if you have questions about your providers' in network status.