

FREQUENTLY ASKED QUESTIONS

1. Does GRMC have a participating provider agreement with TakeCare?

- No. GRMC's contract with TakeCare was terminated effective September 9, 2026. GRMC is now a non-participating provider.

2. Why isn't GRMC in the TakeCare network?

- TakeCare determined that including GRMC is not financially beneficial for members or employer groups due to the impact on premiums. Both parties must mutually agree to contract terms, and an agreement was not reached.

3. Can I go to GRMC for emergency care?

- Yes. You can use GRMC for emergencies. You or your representative must notify TakeCare within 48 hours of receiving emergency care at GRMC to ensure coverage under your plan and the No Surprise Act. You just need to pay your applicable Emergency Care member share under your TakeCare plan.

4. What is considered a bona fide emergency?

- A bona fide emergency is a sudden, unexpected illness or injury that requires immediate care to prevent serious health risks, such as severe pain, risk to life, or serious impairment to bodily functions.

5. What if my condition is not an emergency?

- For non-emergencies, use in-network urgent care centers like FHP Urgent Care, which offers extended hours and a range of services for minor illnesses and injuries.

6. What if my doctor refers me to GRMC?

- Your provider must send the referral and medical records to TakeCare's Medical Management

Department for review. If approved, TakeCare may direct you to in-network or preferred off-island providers. If you still choose to go to GRMC, coordinate with TakeCare for payment and settlement of your bill with GRMC.

7. Do I need prior authorization for emergency care at GRMC?

- No prior authorization is needed for emergency care. However, you must notify TakeCare within 48 hours. Once stabilized, GRMC is required to transfer you to an in-network provider for further care. Any inpatient admission at GRMC after stabilization requires prior authorization for coverage.

8. What if I am admitted to GRMC?

- If admitted, your authorized representative should contact TakeCare as soon as possible. Coverage for hospital expenses at GRMC depends on prior authorization and approval. You are responsible for your plan's member share if services are approved.

9. How can TakeCare help during this transition?

- *Members will not have to navigate this alone. TakeCare can help you review your care, find in-network providers, understand continuity-of-care options, and avoid gaps in care. TakeCare understands members may feel concerned and we are committed to supporting our members with compassion and clear guidance.*