Please note: This PDF only has up to the first 250 providers of your search results. This is not a list of all providers.

IMPORTANT

While we make efforts to ensure that our lists of doctors and hospitals are up to date and accurate, providers do leave our networks from time to time, and these listings do change. There are hospitals, doctors or other providers who are not included in every plan network. **Please make sure you are searching the right network.** Logging in as a member is the most accurate method to search for providers in your plan network. You may also enter your Prefix (the first three values of your member number on your ID card). There may be higher costs to you if you visit a provider who is not in your plan network. We recommend you contact the provider to confirm that they are in your plan network and that the desired service is covered. Neither the Blue Cross and Blue Shield Association nor any of its Licensees shall be liable for any losses, damages, or uncovered charges as a result of using this provider locator web site or receiving care from a provider listed in this web site.

If you receive services from a network hospital, the hospital may arrange with physicians and other providers to assist in your care. Network hospitals are encouraged to hold those hospital-based providers to the same standards for member billing. However, if a hospital does not require its hospital-based providers to comply with the same standards, we cannot influence the manner or amount that you may be billed by the hospital-based provider.

This directory is for general information. Health benefit plans vary, so please consult your benefit plan document to determine what services and supplies are covered under your particular plan.

HOW WE CHOOSE DOCTORS AND HOSPITALS FOR OUR NETWORKS

Before providers join our networks, we check to see that they have the education, licenses and training to provide care. While we don’t have specific quality, member satisfaction or patient safety measures for selecting providers and hospitals to participate in our Marketplace networks, we monitor and promote quality of care within many of our networks using programs like Enhanced Personal Health Care (EPHC), Quality-In-Sights®: Hospital Incentive Program (Q-HIP®), Blue Distinction, Blue Physician Recognition, Blue Precision, Physician Quality Measurement (PQM), Anthem Quality-In-Sights®: Primary Care Program (AQI).

For more information, go to https://www.anthem.com/health-insurance/nsecurepdf/English_providerdirectory_choose_doctors, or call our Member Services Department using the telephone number on your ID card.

1 Not all programs are available in all states
Find a Hospital Search Results - Prepared Tuesday, April 09, 2019

| Provider Search Criteria: | Role/Specialty: Hospitals and Facilities, General/Acute Care Hospital | Location: 92521, 20 miles | Plan Type: PPOSTUD | Plan Name: UCSHIP PPO |

⚠️ Check the Provider Details for coverage information regarding Hospital Based Physicians.

If you are contemplating care from Sutter Health, a Northern California-based health system, please contact your employer to confirm that Sutter is still in network. Providers affiliated with Sutter Health may or may not have "Sutter" in their name.

<table>
<thead>
<tr>
<th>Hospital Name</th>
<th>In-Network Status</th>
<th>Distance</th>
<th>Address</th>
<th>Telephone</th>
</tr>
</thead>
<tbody>
<tr>
<td>RIVERSIDE COMMUNITY HOSPITAL</td>
<td>✓ Hospital In-Network</td>
<td>2.7 miles</td>
<td>4445 Magnolia Ave Ste M12, Riverside, CA 92501</td>
<td>951-788-3000</td>
</tr>
<tr>
<td>REDLANDS COMMUNITY HOSPITAL</td>
<td>✓ Hospital In-Network</td>
<td>8.4 miles</td>
<td>350 Terracina Blvd, Redlands, CA 92373</td>
<td>909-335-5500</td>
</tr>
<tr>
<td>KINDRED HOSPITAL RIVERSIDE</td>
<td>✓ Hospital In-Network</td>
<td>12.9 miles</td>
<td>2224 Medical Center Dr, Perris, CA 92571</td>
<td>951-436-3535</td>
</tr>
<tr>
<td>KINDRED HOSPITAL ONTARIO</td>
<td>✓ Hospital In-Network</td>
<td>19.0 miles</td>
<td>550 N Monterey Ave, Ontario, CA 91764</td>
<td>909-391-0333</td>
</tr>
<tr>
<td>LOMA LINDA UNIVERSITY CHILDRENS HOSPITAL</td>
<td>✓ Hospital In-Network</td>
<td>11.4 miles</td>
<td>2101 N Waterman Ave, San Bernardino, CA 92882</td>
<td>909-883-8711</td>
</tr>
<tr>
<td>ST BERNARDINE MEDICAL CENTER</td>
<td>✓ Hospital In-Network</td>
<td>15.2 miles</td>
<td>800 S Main St, Corona, CA 92882</td>
<td>951-737-4343</td>
</tr>
<tr>
<td>CORONA REGIONAL MEDICAL CENTER</td>
<td>✓ Hospital In-Network</td>
<td>19.3 miles</td>
<td>28400 Mccall Blvd, Sun City, CA 92585</td>
<td>951-679-8888</td>
</tr>
<tr>
<td>LOMA LINDA UNIVERSITY MEDICAL CENTER</td>
<td>✓ Hospital In-Network</td>
<td>11.0 miles</td>
<td>1805 Medical Center Dr, San Bernardino, CA 92411</td>
<td>909-887-6333</td>
</tr>
<tr>
<td>KINDRED HOSPITAL RANCHO</td>
<td>✓ Hospital In-Network</td>
<td>16.1 miles</td>
<td>10841 White Oak Ave, Rancho Cucamonga, CA 91730</td>
<td>909-581-6400</td>
</tr>
<tr>
<td>MENIFEE VALLEY MEDICAL CENTER</td>
<td>✓ Hospital In-Network</td>
<td>19.3 miles</td>
<td>28400 Mccall Blvd, Sun City, CA 92585</td>
<td>951-679-8888</td>
</tr>
<tr>
<td>SAN ANTONIO REGIONAL HOSPITAL</td>
<td>✓ Hospital In-Network</td>
<td>19.5 miles</td>
<td>999 San Bernardino Rd, Upland, CA 91786</td>
<td>909-985-2811</td>
</tr>
</tbody>
</table>

While we make efforts to ensure that our lists of doctors are up to date and accurate, doctors do leave our networks from time to time, and these listings do change. There may be higher fees associated with visiting a doctor who is not in our network or for obtaining a service that is not covered by your plan. You may be responsible for those costs. To avoid higher fees we recommend that you confirm your doctor is in network and that the desired service is covered when scheduling your appointment.
If you see the "Coverage Disclaimer" element next to a facility name, you are strongly encouraged to contact us to verify whether the provider involved in your care is a participating or non-participating provider. For more information regarding this, please contact the toll-free customer service number located on the back of your member ID card.

Blue Distinction Centers (BDC) met overall quality measures, developed with input from the medical community. A Local Blue Plan may require additional criteria for providers located in its own service area; for details, contact your Local Blue Plan. Blue Distinction Centers+ (BDC+) also met cost measures that address consumers’ need for affordable healthcare. Each provider’s cost of care is evaluated using data from its Local Blue Plan. Providers in CA, ID, NY, PA, and WA may lie in two Local Blue Plans’ areas, resulting in two evaluations for cost of care; and their own Local Blue Plans decide whether one or both Blue Distinction Provider Directory Display Guidelines cost of care evaluation(s) must meet BDC+ national criteria. National criteria for BDC and BDC+ are displayed on www.bcbs.com. Individual outcomes may vary. For details on a provider’s in-network status or your own policy’s coverage, contact your Local Blue Plan and ask your provider before making an appointment. Neither Blue Cross and Blue Shield Association nor any Blue Plans are responsible for non-covered charges or other losses or damages resulting from use of Blue Distinction or other provider finder information or care received from Blue Distinction or other providers.

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Counseling services for breast feeding (lactation) can be provided or supported by an in-network (participating) provider such as a pediatrician, ob-gyn, family medicine doctor, and hospitals with no member cost-share expense (deductible, copay, coinsurance). Contact the provider to determine if lactation counseling services are available.

Found inaccurate, incomplete or misleading information in this directory? If so, call us at 1-844-839-4049. Send an email to ProviderDirectoryDiscrepancy@Anthem.com. Or use our online reporting tool. Members who have relied on inaccurate, incomplete or misleading information can also file a complaint online or call the Member Services number on their ID card.

Additional information on standard waiting times are available in our Timely Access to Care brochure.

To receive benefits, some services must be reviewed to determine medical necessity. A request for service may be denied because it’s not medically necessary at a certain level-of-care or at a certain facility. When this happens the service may be requested again using a different provider or facility. If you have any questions, please call the member services number on your member ID card.