



BlueCross BlueShield of Illinois



## Enrollment Guide

Illinois Educators Risk Management Program

BCS, PPO & HSA

January 1, 2024

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation,  
a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association





# Get the Most from Your Health Plan

Welcome to Blue Cross and Blue Shield of Illinois (BCBSIL), a leader in health care benefits. We have been helping people like you get the most from their health care plans for many years.

Read this guide to learn about benefits your employer is offering. Think about how you and your family will use these benefits. Learn more about products, services and how to be a smart health care user at [bcbsil.com](http://bcbsil.com).

## **Your ID Card**

After you enroll, you will get a member ID card in the mail. Show this ID card when you see a doctor, visit the hospital or go to any other place for care. The back of the card has phone numbers you might need.

## **Blue Access for Members<sup>SM</sup>**

Go to [bcbsil.com/member](http://bcbsil.com/member) and sign up for the secure member website, Blue Access for Members. Find the "Log In" tab and click "Register Now." Use the information on your ID card to complete the process. On this site, you can check your claims, order more ID cards, get health information and much more.

## **Save Money – Stay In-Network**

Using independently contracted network providers can help you save. Look at your ID card to find your network. Then go to [bcbsil.com](http://bcbsil.com) to look for doctors, hospitals and other places for care.

## **Call Customer Service for Help**

Our team knows your health plan and can help you get the most from your benefits. Just call the toll-free number on the back of your ID card.







# The PPO Plan

## With the PPO plan, you can choose any doctor whenever you need care

The PPO plan offers a wide range of benefits and the flexibility to choose any doctor or hospital when you need care. The plan includes an annual deductible that you must satisfy before your benefits begin. Qualified medical expenses are applied toward your deductible.

### PPO Network

Access to the large network of contracting providers is one of the many reasons to select the PPO plan. The network includes hospitals, physicians, therapists, behavioral health professionals and alternative care practitioners.

You and your covered dependents can receive care from any licensed doctor, hospital or other provider. However, when you use a contracting network provider, you will pay less out of pocket, you won't have to file any claims and you will receive the highest level of benefits. If you use a doctor outside the network, you'll still be covered, but your out-of-pocket costs may be significantly higher.

### Medical Care

Your benefits may include coverage for\*:

- physician office visits
- breast cancer screenings
- cervical cancer screenings
- inpatient hospital services
- muscle manipulation services
- outpatient hospital services
- physical, speech and occupational therapies
- outpatient surgery and diagnostic tests
- infertility treatment
- maternity care
- behavioral health and substance abuse
- hospital emergency medical and accident treatment

To find a contracting doctor or hospital, just go to **bcbsil.com** and click on the Find a Doctor or Hospital tab to use the Provider Finder® tool, or call BlueCard® Access at **800-810-BLUE (800-810-2583)** for help. Once you become a member, you can also call the toll-free Customer Service number on the back of your member ID card.

# Confused About Where to Go for Care?

SmartER Care<sup>SM</sup> options may save you money.

If you aren't having an emergency, deciding where to go for medical care may save you time and money.

You have choices for where you get non-emergency care — what we call SmartER Care. Use this chart to help you figure out when to use each type of care.

When you use in-network providers for your family's health care, you usually pay less for care. Search for in-network providers in your area at **bcbsil.com** or by calling the Customer Service number on your member ID card.



## Doctor's Office

- Office hours vary
- Generally the best place to go for non-emergency care
- Doctor-to-patient relationship established and therefore able to treat, based on knowledge of medical history
- Average wait time is 18 minutes<sup>1</sup>

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## Retail Health Clinic

- Based on retail store hours
- Usually lower out-of-pocket cost to you than urgent care
- Often located in stores and pharmacies to provide convenient, low-cost treatment for minor medical problems

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## Urgent Care Center

- Generally includes evenings, weekends and holidays
- Often used when your doctor's office is closed, and you don't consider it an emergency
- Average wait time is 16-24 minutes<sup>2</sup>
- Many have online and/or telephone check-in

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## Hospital ER

- Open 24 hours, seven days a week
- Average wait time is 35-49 minutes (variable)<sup>3</sup>
- If you receive emergency room (ER) care from an out-of-network provider, you may have to pay more. Providers outside the network may "balance bill" you, which means they may charge you more than your health plan's fee schedule.
- Multiple bills for services such as doctors and facility

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## Freestanding ER

- Open 24 hours, seven days a week
- Could be transferred to a hospital-based ER depending on medical situation
- Services do not include trauma care
- Often freestanding ERs are out-of-network. If you receive care from an out-of-network provider, you may have to pay more. Providers outside the network may "balance bill" you, which means they may charge you more than your health plan's fee schedule.
- All freestanding ERs charge a facility fee that urgent care centers do not. You may receive other bills for each doctor you see.<sup>4</sup>

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If you need emergency care, call **911** or seek help from any doctor or hospital immediately.

<sup>1</sup> Vitals Annual Wait Time Report, 2017.

<sup>2</sup> Wait Time Trends in Urgent Care and Their Impact on Patient Satisfaction, 2017.

<sup>3</sup> National Center for Health Statistics, Centers for Disease Control and Prevention, 2019.






<sup>4</sup> The Texas Association of Health Plans.

Note: The relative costs described here are for independently contracted network providers. Your costs for out-of-network providers may be significantly higher. Wait times described are just estimates.

The information provided in this guide is not intended as medical advice, nor meant to be a substitute for the individual medical judgment of a doctor or other health care professional. Please check with your doctor for individualized advice on the information provided. Coverage may vary depending on your specific benefit plan and use of network providers. For questions, please call the number on the back of your member ID card.

# Deciding Where to Go?

Doctor's Office, Retail Clinic, Urgent Care or ER.

	Doctor's Office	Retail Health Clinic	Urgent Care Center	Hospital ER	Freestanding ER
					
Who usually provides care	Primary Care Doctor	Physician Assistant or Nurse Practitioner	Internal Medicine, Family Practice and Pediatric	ER Doctors, Internal Medicine, Specialists	ER Doctors
Sprains, strains	■	■	■	<ul style="list-style-type: none"> <li>Any life-threatening or disabling conditions</li> <li>Sudden or unexplained loss of consciousness</li> <li>Major injuries</li> <li>Chest pain; numbness in the face, arm or leg; difficulty speaking</li> <li>Severe shortness of breath</li> <li>High fever with stiff neck, mental confusion or difficulty breathing</li> <li>Coughing up or vomiting blood</li> <li>Cut or wound that won't stop bleeding</li> <li>Possible broken bones</li> </ul>	<ul style="list-style-type: none"> <li>Most major injuries except for trauma<sup>†</sup></li> <li>May also provide imaging and lab services but do not offer trauma or cardiac services requiring catheterization<sup>‡</sup></li> <li>Do not always accept ambulances</li> </ul>
Animal bites	■	■	■		
X-rays			■		
Stitches			■		
Mild asthma	■	■	■		
Minor headaches	■	■	■		
Back pain	■	■	■		
Nausea, vomiting, diarrhea	■	■	■		
Minor allergic reactions	■	■	■		
Coughs, sore throat	■	■	■		
Bumps, cuts, scrapes	■	■	■		
Rashes, minor burns	■	■	■		
Minor fevers, colds	■	■	■		
Ear or sinus pain	■	■	■		
Burning with urination	■	■	■		
Eye swelling, irritation, redness or pain	■	■	■		
Vaccinations	■	■	■		

## Urgent Care Center or Freestanding ER – Knowing the Difference Can Save You Money

Urgent care centers and freestanding ERs can be hard to tell apart. Freestanding ERs often look a lot like urgent care centers, but costs may be higher. A visit to a freestanding ER often results in significantly higher medical bills than the rate charged by urgent care centers for the same services.

Here are some ways to know if you are at a freestanding ER:

- Looks like urgent care centers, but have the word "Emergency" in their name or on the building.
- Is open 24 hours a day, seven days a week.
- Is not attached to and may not be affiliated with a hospital.
- Is subject to the same ER member share which may include a copay, coinsurance and applicable deductible.

Find urgent care centers<sup>1</sup> near you by texting<sup>2</sup> **URGENTIL** to **33633**.

<sup>1</sup>"Freestanding ED 101: What you need to know" July 2016, The Advisory Board Company.

<sup>2</sup> The closest urgent care center may not be in your network. Be sure to check Provider Finder<sup>®</sup> to make sure the center you go to is in-network.

<sup>3</sup> Message and data rates may apply. Read terms, conditions and privacy policy at [bcbstl.com/mobile/text-messaging](http://bcbstl.com/mobile/text-messaging).

# BlueEdge HSA<sup>SM</sup> and BlueEdge Select HSA<sup>SM</sup> Plans



## Why Choose BlueEdge<sup>SM</sup>?

BlueEdge HSA is a consumer-directed health care plan (CDHP) that helps you meet your health and financial goals. It blends a qualified high-deductible health plan with a health savings account (HSA) where you decide to either pay for qualified health care costs with tax-free dollars or let the funds grow as savings.

Deposits to the account can be made by you, your employer or anyone else.

### BlueEdge HSA helps you with:

**Affordability** – Use health savings account funds to help meet your deductible, or leave them untouched to grow as savings.

**Tax savings** – Health savings account funds that are used for qualified health care costs are tax-exempt.

**Portability** – Your health savings account belongs to you. Unused funds can roll over at the end of the year, or you can take the money with you if you change health plans or your job, or if you retire.

**Control** – You decide how, when and where your health care dollars are spent. The savvier a consumer you are, the more you stretch how far your health savings account will take you.

**Freedom and choice** – Choose any doctor when you need care, but choosing a network doctor means you get the highest level of benefits.

### Network Information

Use Provider Finder® at **bcbsil.com** to see if your doctor is in the network or to search for another network provider. You may also call BlueCard® Access toll-free at **800-810-BLUE (800-810-2583)** for provider information. Once you become a member, you can call the toll-free Customer Service phone number on the back of your member ID card for help.

### There's more to BlueEdge:

**Preventive care and wellness visits** – Adults and children are covered at 100 percent when you use network providers\*. You don't need to meet the deductible to enjoy these benefits.

**Online decision tools** – Personalize how you use your health care and your health care spending. Log in to Blue Access for Members<sup>SM</sup>, a safe, secure website at **bcbsil.com** to:

- Manage your benefits
- Search for a network provider
- Estimate the cost of a procedure or treatment
- Find health and wellness information and support
- Ask health care professionals for help with your concerns through 24/7 Nurseline



# Health Savings Account Administration

Your health savings account is administered by a separate custodian — not Blue Cross and Blue Shield of Illinois. Your employer will give information about your account custodian.

## Special Notice about HSAs

Under IRS regulations, anyone enrolling in this health plan should be aware that any adult can contribute to a health savings account (HSA) if he/she:

- Has coverage under an HSA-qualified high deductible health plan (HDHP)
- Has no other first-dollar medical coverage (other types of insurance such as specific injury insurance or accident, disability, dental care, vision care, or long term care insurance are permitted)
- Is not enrolled in Medicare
  - An individual can be Medicare-eligible and have an HSA. However, once enrolled in Medicare, contributions to the HSA must stop. The individual can keep funds in the account before enrolling in Medicare and use those funds to pay for qualified medical costs tax-free.
- Cannot be claimed as a dependent on someone else's tax return

There are other regulations about contributions and distributions. If you are enrolling in a plan that includes a health savings account, you should first seek professional tax counsel to determine if your individual situation permits use of an HSA. If you have a flexible spending account (FSA), or a health care account (HCA), check with your employer to confirm that you are eligible for an HSA. Both the FSA and HCA are considered a limited purpose account that can only be used for certain expenses.



# How It Works

## BlueEdge HSA Example

Ben and Aileen and their two children have BlueEdge Select HSA family coverage through Aileen's employer. The plan is paired with a health savings account that includes a debit card and checks from the HSA administrator\*. At the beginning of the year, Ben and Aileen put \$3,000 into their health savings account (the contribution cannot exceed the maximum determined annually by the IRS).

### Year One

- **Aileen's health savings account annual contribution = \$3,000**
- **Aileen's annual family deductible = \$3,000**

Ben and Aileen had physicals and preventive care lab tests<sup>†</sup>.

- \$580 was paid by the preventive care benefit.

Both children had annual physicals and routine immunizations.

- \$320 was paid by the preventive care benefit.

Ben tore a ligament in his knee that required surgery.

- Charges of \$675 for the emergency room visit were paid with the health savings account debit card, which counts toward the deductible<sup>††</sup>.
- Surgery charges were \$6,000. Ben paid \$2,325 with the debit card. With this, the \$3,000 family deductible had been satisfied and health plan benefits began. Of the remaining \$3,675, the health plan paid 80 percent (\$2,940) and Ben paid his 20 percent coinsurance (\$735).

Aileen saw a dermatologist and had several moles removed.

- Charges were \$1,200. The health plan paid 80 percent (\$960), and Aileen paid her 20 percent coinsurance (\$240).

All of the health savings account money was spent so there was no amount to roll over to next year.

### Year Two

- **Ben and Aileen decide to contribute \$3,000 once again to their health savings account at the beginning of the year.**

Ben and Aileen had physicals and preventive care lab tests.

- \$525 was paid by the preventive care benefit.

Both children had annual physicals.

- \$275 was paid by the preventive care benefit.

Aileen saw her dermatologist for a follow-up visit.

- She paid for the \$175 visit with the HSA debit card, which also counted toward the deductible.

Ben participated in a smoking cessation program.

- The program cost \$450 and he paid for it with a check from the health savings account. This expense did not count toward the deductible.

At the end of year two, \$2,375 remains in the health savings account and this rolls over to the next year.

\*The provider should first submit your claim for processing so that you receive benefits at the Blue Cross and Blue Shield of Illinois negotiated rate. You may then use the debit card or checks to pay any balance due to the provider.

†In these examples, in-network preventive care is covered at 100%. Not all groups cover preventive care. Ask your employer for details.

††Funds must be available in your health savings account before you can use them to pay for medical services. Ask your employer when funds will be deposited to your account (each pay period, quarterly, annually, etc.).

# Frequently Asked Questions About BlueEdge HSA

## What is a health savings account?

If you have a qualified high-deductible health plan (HDHP), you can establish a tax-exempt health savings account with your own funds, those from your employer or both. You can use the funds to pay for qualified medical care services. Qualified expenses also count toward your annual deductible. Balances roll over from year to year and the account is portable, which means you keep it if you change benefit plans, jobs or if you retire.

## How can I decide if BlueEdge HSA is right for me?

Comparing covered benefits, network providers, the cost of coverage and other out-of-pocket expenses are important when choosing a health plan. For more information on HSAs, visit the U.S. Treasury's website at [treasury.gov](https://www.treasury.gov).

## Who is eligible to open a health savings account?

Only eligible individuals may open an HSA. To qualify for an HSA, you:

- Must be enrolled in an HSA-compatible HDHP as of the first day of the month;
- May not have other coverage that is not an HSA-compatible HDHP, including Medicare coverage (certain exceptions apply);
- May not be claimed as a dependent on another person's tax return.

## How is the HSA account funded?

IRS rules for contributions include, but are not limited to the following:

Any person (an employer, a family member or any other person) may make contributions to an HSA for an eligible individual.

## Is there a specific health plan design for HSAs?

Yes. HSA law and IRS guidance have focused on four parts of the HDHP plan design:

- The deductible
- The out-of-pocket maximum
- Preventive care
- The overall benefit design must provide "significant benefits" at all times to those covered by the HDHP







# Blue Choice Select PPO<sup>SM</sup> Plan

**Blue Choice Select offers a full range of benefits to help keep you and your covered dependents healthy.**

Blue Choice Select includes all the features of a PPO plan, such as a wide range of benefits and the flexibility to self-direct your care. You do not need to choose a primary care physician to provide or coordinate your care and you do not need a referral to see a specialist. However, the Blue Choice Select<sup>SM</sup> network is smaller than the PPO network.

## Network Information

Blue Choice Select offers access to a specific, geographically-focused network of physicians and hospitals. To enroll in Blue Choice Select, you must live in the Blue Choice Select service area. To receive the highest level of benefits, you should use these providers for health care services. You can receive care from a provider outside the network, but your benefits will be paid at a lower level and your out-of-pocket costs may be significantly higher. You may also be required to pay fees for out-of-network medical services up front and be subject to balance billing.

## Medical Care

Your benefits may include coverage for\*:

- physician office visits
- inpatient hospital services
- outpatient hospital services
- outpatient surgery and diagnostic tests
- maternity care
- hospital emergency medical and accident treatment
- breast cancer screenings
- cervical cancer screenings
- muscle manipulation services
- physical, speech and occupational therapies
- infertility treatment
- behavioral health and substance abuse

To find a contracting doctor or hospital, go to **bcbsil.com** and click on the Find a Doctor or Hospital tab to use the Provider Finder<sup>®</sup> tool. You may also call BlueCard<sup>®</sup> Access toll-free at **800-810-BLUE (800-810-2583)** for provider information. Once you become a member, you can also call the toll-free Customer Service telephone number on the back of your member ID card for assistance.





# Medical Plan Frequently Asked Questions

## **Q. Are my medical records kept confidential?**

A. Yes. Blue Cross and Blue Shield of Illinois (BCBSIL) is committed to keeping all specific member information confidential. Anyone who may have to review your records is required to keep your information confidential. Your medical records or claims data may have to be reviewed (for example, as part of an appeal that you request). If so, precautions are taken to keep your information confidential. In many cases, your identity will not be associated with this information.

## **Q. Who do I call with questions about my benefits?**

A. Call the toll-free Customer Service number on the back of your member ID card.

## **Q. How do I find a contracting network doctor or hospital?**

A. Go to **bcbsil.com** and use Provider Finder®, or call Customer Service at the toll-free number on the back of your member ID card.

## **Q. What do I do when I need emergency care?**

A. Call 911 or seek help from any doctor or hospital. BCBSIL will coordinate your care with the emergency provider.

Some options for non-emergency care include:

- **Your doctor's office** for health exams, routine shots, colds, flu and other minor illnesses or injuries.
- **Walk-in retail health clinics** available in retail stores. Many have a physician assistant or nurse practitioner who can help treat ear infections, rashes, minor cuts and scrapes, allergies, colds and other minor health problems.
- **Urgent or immediate care clinics** for more serious health issues, such as when you need an X-ray or stitches.

### **Urgent Care or Freestanding Emergency Room?**

Urgent care centers and freestanding ERs can be hard to tell apart. Freestanding ERs often look a lot like urgent care centers, but costs are higher, just as if you went to the ER at a hospital. Here are some ways to know if you are at a freestanding ER.

#### **Freestanding ERs:**

- Look like urgent care centers, but have **EMERGENCY** in the facility name.
- Are separate from a hospital but are equipped and work the same as an ER.
- Are staffed by board-certified ER physicians and are subject to the same ER copay.
- Find urgent care centers<sup>1</sup> near you by texting<sup>2</sup> **URGENTIL** to **33633** and then type in your ZIP code.

### **Q. What should I bring to my first appointment with a new doctor?**

A. Your first appointment is an opportunity to share information about your health with your new doctor. Bring as much medical information as possible, including:

- **Medical records and insurance card** — If you are undergoing treatment at the time you change doctors, your medical records are important to your new doctor. Your insurance card provides information about copayments, billing and Customer Service phone numbers.
- **Medications** — Give your new doctor information about prescription and over-the-counter medications, including any herbal medications you take. Be sure to include the name of the medication, the dosage, how often you take it and why you take it.
- **Special needs** — Make a list of any equipment or devices you use including wheelchairs, oxygen, glucose monitors and the glucose strips. Be prepared to explain how you use them, not only to make sure you have the equipment you need, but also to make sure that there is no disruption in your care.

### **Q. What questions should I ask if I am selecting a new doctor?**

A. In addition to preliminary questions you might ask a new doctor — such as “Are you accepting new patients?” — here are some questions to help you evaluate whether a doctor is right for you.

- What is the doctor’s experience in treating patients with the same health problems that I have?
- Where is the doctor’s office? Is there convenient and ample parking, or is it close to public transportation?
- What are the regular office hours? Does the office have drop-in hours if I have an urgent problem?
- How long should I expect to wait to see the doctor when I’m in the waiting room?
- Are routine lab tests and X-rays performed in the office, or will I have to go elsewhere?
- Which hospitals does the doctor use?
- If this is a group practice, will I always see my chosen doctor?
- How long does it usually take to get an appointment?
- How do I get in touch with the doctor after office hours?
- Can I get advice about routine medical problems over the phone or by email?
- Does the office send reminders for routine preventive tests like cholesterol checks?

### **Q. What if I’m already in treatment when I enroll and my provider isn’t in the network?**

A. We’ll work with you to provide the most appropriate care for your medical situation, especially if you are pregnant or receiving treatment for a serious illness. You may still be able to see your out-of-network provider for a period of time. Call the toll-free Customer Service number on the back of your member ID card for more information.

<sup>1</sup> The closest urgent care center may not be in your network. Be sure to check Provider Finder to make sure the center you go to is in-network.

<sup>2</sup> Message and data rates may apply. Read terms, conditions and privacy policy at [bcbsil.com/mobile/text-messaging](http://bcbsil.com/mobile/text-messaging).



Blue Access for Members<sup>SM</sup>

# Health care at your fingertips.

Blue Cross and Blue Shield of Illinois (BCBSIL) helps you get the most from your health care benefits with Blue Access for Members (BAM<sup>SM</sup>). You and all covered dependents age 18 and up can create a BAM account.

## With BAM, you can:

- Find care – search for in-network doctors, hospitals, pharmacies and other health care providers
- Get your digital member ID card
- Check the status or history of a claim
- View or print Explanation of Benefits statements
- Sign up for text or email alerts

## It's easy to get started.

Use your member ID card to create a BAM account at **bcbsil.com**, or text\* **BCBSILAPP** to **33633** to download our mobile app.



Scan this QR code to visit **bcbsil.com**.





# Other Benefits for Non-HMO Plans

**Your health care benefit plan travels with you wherever you go – across the country or around the world.**

## **Preventive Care**

Your coverage may include preventive care benefits for children and adults, including physical exams, diagnostic tests and immunizations. Check your group plan for specific coverage.

## **Emergency Care**

If you, as a prudent layperson (with an average knowledge of health and medicine) need to go to the emergency room of any hospital, your care will be covered subject to your plan's deductible and any applicable copayments or coinsurance. In an emergency, you should seek care from an emergency room or other similar facility. Call 911 or other community emergency resources to obtain assistance in life-threatening situations. Your group plan may require that you, a family member or friend contact Blue Cross and Blue Shield of Illinois (BCBSIL) if you are admitted to the hospital.

## **National Coverage**

You have nationwide access to contracting providers in networks linked through the BlueCard® program when you or your covered dependents live, work or travel anywhere in the country. The national network includes most physicians and hospitals in the country. Be sure to use a BlueCard network provider to receive the highest level of benefits.

With the BlueCard program, there are two ways to locate contracting doctors and hospitals:

- Visit the website at **bcbsil.com** and click on the Find a Doctor or Hospital tab to use the Provider Finder® tool or call BlueCard® Access at **800-810- BLUE (800-810-2583)** for help. Maps and driving directions are also available.
- Call Customer Service at the toll-free number on the back of your member ID card.





## Reconstructive Surgery Following a Mastectomy

Federal and State of Illinois legislation require group health plans and health insurers to provide coverage for reconstructive surgery following a mastectomy. Specifically, these laws state that health plans that cover mastectomies must also provide coverage in a manner determined in consultation with the attending physician and patient for reconstruction of the breast on which the mastectomy has been performed, surgery and reconstruction of the other breast to produce a symmetrical appearance, and prostheses and treatment of physical complications for all stages of mastectomy, including lymphedemas.

Your coverage may also include benefits for baseline and annual mammograms. Check your group plan documents for details.

## Illinois Dependent Eligibility Mandate

Under Federal law, your dependents are eligible for health and dental coverage up to the dependent limiting age and may not be denied coverage due to marital, student or employment status before age 26. Check with your employer for additional details regarding eligibility requirements. In addition, eligible military personnel may not be denied coverage before age 30 under Illinois law. If you elect Blue Choice Select<sup>SM</sup> coverage, your dependents must live within the defined service area.

This Illinois law applies to all individual plans and insured group medical and dental plans, as well as self-insured municipalities, counties and schools. The law does not apply to self-funded national account groups or local non-municipal self-funded groups. If you have questions about this law, contact your benefits administrator.

## International Coverage

When you travel outside the United States and need medical assistance services, call **800-810-BLUE (800-810-2583)** or call collect to **804-673-1177** for information. Blue Cross and Blue Shield has contracts with doctors and hospitals in more than 190 countries. An assistance coordinator, in conjunction with a medical professional, can arrange your doctor's appointment or hospitalization, if necessary.

Providers that participate in the Blue Cross Blue Shield Global<sup>®</sup> Core<sup>®</sup> program, in most cases, will not require you to pay up front for inpatient care. You are responsible for the out-of-pocket expenses such as a deductible, copayment, coinsurance and non-covered services. The doctor or hospital should submit your claim.

You also have coverage at non-contracting hospitals, but you will have to pay the doctor or hospital for care at the time of service, then submit an international claim form with original bills. Call Customer Service at the toll-free customer service number on your member ID card for the address to send the claim. You can get a claim form from your employer, Customer Service or online at **bcbsil.com**.

# Peace of Mind While Traveling

## BlueCard® PPO Has You Covered



### Use BlueCard PPO When You're Away From Home

Through the BlueCard PPO Program, Blue Cross and Blue Shield (BCBS) plans work together to help ensure you receive reliable, affordable health care when you need it while traveling in the U.S. You have access to an established PPO network of doctors, hospitals and other health care providers throughout the country.

### How BlueCard Works

1. Always carry your most current Blue Cross and Blue Shield of Illinois (BCBSIL) ID card.
2. When you're outside of your local BCBSIL service area and need health care, refer to your ID card and call BlueCard Access at 800-810-BLUE (2583) or visit the BlueCard Doctor and Hospital Finder at [bcbs.com](http://bcbs.com) for information on the nearest PPO doctors and hospitals. In an emergency, call 9-1-1 or go to the nearest hospital.
3. You are responsible for calling BCBSIL for precertification, when necessary. Refer to the precertification phone number on your ID card, which is different than the BlueCard Access number above.
4. When you arrive at the doctor's office or hospital, present your ID card, and the office or hospital staff will verify your membership and coverage information.
5. After you receive medical attention, your claim will be routed to BCBSIL for processing by the provider. All doctors and hospitals are paid directly, so you won't have any paperwork.
6. You should not have to pay up front for medical services, except for the usual out-of-pocket expenses (non-covered services, deductibles, copayments and/or coinsurance). BCBSIL will provide you with an Explanation of Benefits (EOB) statement.

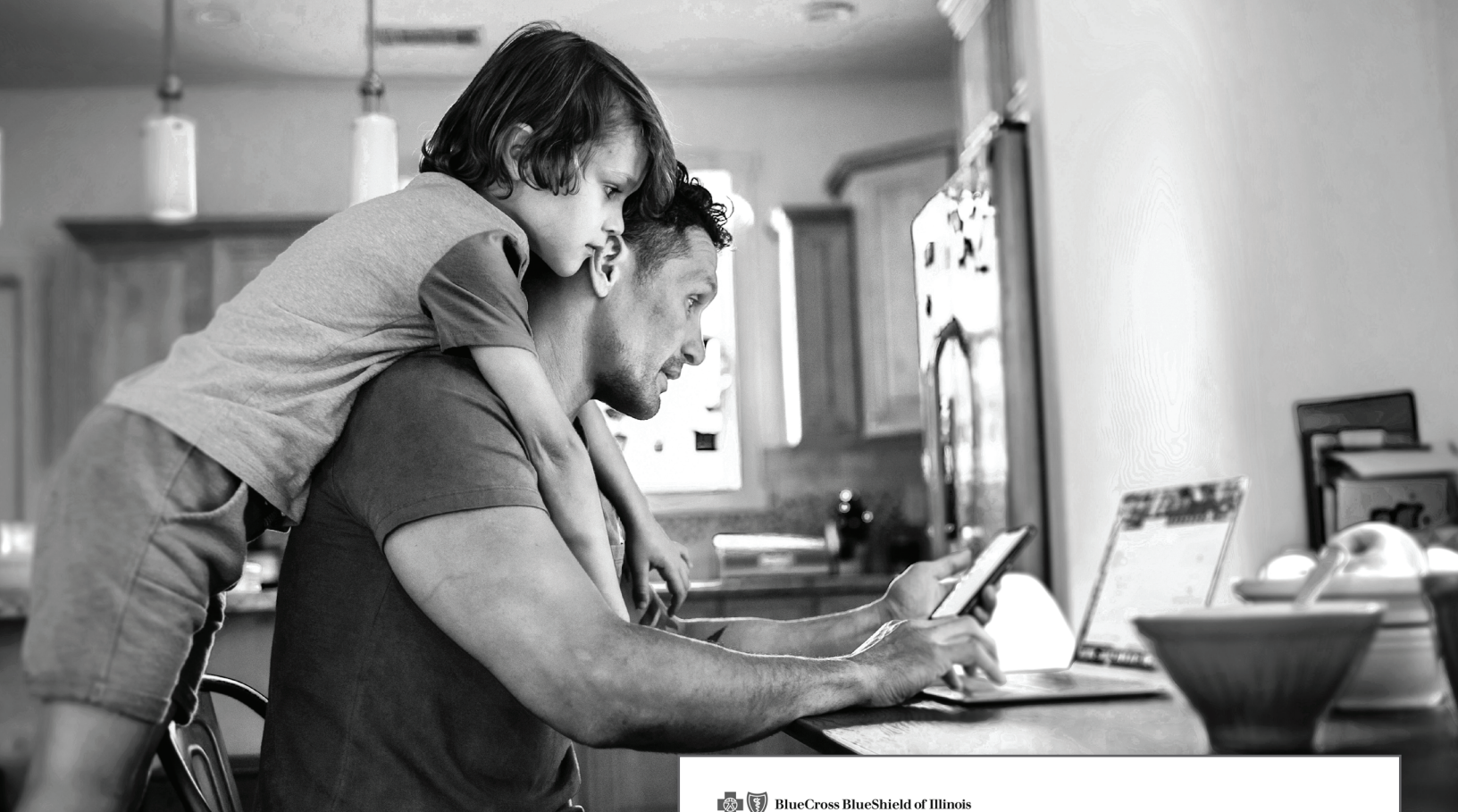
### Get access to network providers when you're on the go:

**Freedom of choice:** You can choose your provider. To receive the maximum benefits allowed under your health care plan, though, choose contracted network providers whenever possible.

**Coast-to-coast care:** Get access no matter where in the U.S. you travel.

**No paperwork or claims to file:** When visiting a PPO provider, all you need to do is show your ID card.





# Understanding Your Explanation of Benefits

Your **Explanation of Benefits (EOB)** lets you know when and how we process your claims. It isn't a bill. It gives you a detailed look at the covered services and shows how much you may owe your provider after we apply your benefits.

## Page One Covers the Basics

- A.** Confirm your policy ID.
- B.** Learn how to download the mobile app and access your claims online.
- C.** Find helpful contacts and a glossary.

 **BlueCross BlueShield of Illinois**

PO Box 7344  
Chicago, IL 60680-7344

John Smith  
1234 Cedar Road  
APT #2  
Any Town, IL 76065

Sample

### EXPLANATION OF BENEFITS

**A** Log into **Blue Access for Members**™ at [bcbsil.com](http://bcbsil.com)

- View plan and claim details
- Contact us through our secure Message Center
- Sign up for digital health plan info
- Search for health care providers

**B** Text\* **BCBSILAPP** to 33633 to download the mobile app.

**C** Have questions about this EOB? Customer Advocates are here to help! XXX-XXX-XXXX

#### SUBSCRIBER INFORMATION

##### GROUP NAME

Member ID#: XXXXXXXXX777V Group #: 000012345

Dear John Smith,

An Explanation of Benefits (EOB) is a statement showing how claims were processed. **This is not a bill.** Your provider(s) may bill you directly for any amount you may owe. **KEEP FOR YOUR RECORDS.**

#### HELPFUL INFORMATION

##### Want Your Health Care Info Digitally?

To get this EOB and other health care info on our mobile app, text\* BCBSILAPP to 33633 to download the app. You can also go digital by logging in at [bcbsil.com/member](http://bcbsil.com/member). Go to My Account and choose Profile and Preferences, then click Go Paperless.

##### Health Care Fraud Hotline: 800-543-0867

Health care fraud affects health care costs for all of us. If you suspect any person or company of defrauding or attempting to defraud Blue Cross and Blue Shield of Illinois (BCBSIL), please call our toll-free hotline. All calls are confidential and may be made anonymously. For more information about health care fraud, please go to [bcbsil.com](http://bcbsil.com).

**GLOSSARY OF TERMS - We have described some of the terms used here to help you understand them, but you should make sure to read your benefit plan materials if you have questions.**

**Amount Billed:** The amount your provider billed for the service(s) rendered.

**Amount Covered (Allowed):** Discounts, reductions, and amount covered (allowed) reflect the terms of your plan, and in the case of an in-network provider, the savings we have negotiated with your provider. Your deductible, coinsurance and copay are based on the allowed amount and the terms of your plan. Your share of coinsurance is a percentage of the allowed amount after the deductible is met.

**Coinsurance:** The percentage of the allowed amount you pay as your share of the bill. For example, if your plan pays 80% of the allowed amount, 20% would be your coinsurance.

**Copay Amount (Also known as Copayment):** The set fee you pay each time you receive a certain service. Some plans do not have copayments.

**Deductible:** The amount, if any, you must pay before we start paying contract benefits. You do not send this amount to us. We subtract this amount from covered expenses on claims you and health care professionals send us. Some services can be covered before the deductible is met.

**Non-Participating Provider:** An out-of-network provider who does not accept rates for services we set to keep your costs down.

**Out-of-Pocket Limit (Maximum):** Once you pay this amount in deductibles, copayments and coinsurance for covered services, we pay 100% of the allowed amount for covered services for the rest of the benefit period.

**Participating Provider:** An in-network or out-of-network provider who accepts agreed-upon rates for services.

**Your Total Costs:** This is the sum of your copay, deductible and coinsurance. It also includes any amounts not covered by your health plan. Amounts that a non-participating provider may bill you are not part of this.

\*Message and data rates may apply. Terms & Conditions and Privacy Policy [bcbsil.com/member/account-access/mobile/text-messaging](http://bcbsil.com/member/account-access/mobile/text-messaging). Blue Cross and Blue Shield of Illinois provides administrative claims payment services only and does not assume any financial risk or obligation with respect to claims.

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

**CLAIM DETAIL (1 OF 1)**
**PATIENT:** JOHN SMITH

**PROVIDER:** RALPH JOHNSTON M.D.

**CLAIM #** XXXXXXXXXXXXX

# Sample

**DATE PROCESSED:** 06/20/2022

**F SUBSCRIBER INFORMATION**
**GROUP NAME**

Member ID#: XXXXXXXX777V Group #: 000012345

Customer Advocates are here to help! 8XXX-XXX-XXXX

**O<sup>2</sup>**

Amount Billed	\$7,850.00
Discounts and Reductions	- \$3,930.00
Health Plan Responsibility	- \$2,219.00

**O<sup>3</sup>**

Paid from your HCA Account	- \$0.00
<b>You may owe your health care provider for these services</b>	<b>\$1,701.00</b>

Service Description	Service Dates	YOUR BENEFITS APPLIED				YOUR RESPONSIBILITY				Your Total Costs
		Amount Billed	Discounts and Reductions	Amount Covered (Allowed)	Health Plan Responsibility	Deductible Amount	Copay Amount	Coinsurance	Amount Not Covered	
Surgical Charges	04/04/2022	G 4,000.00	H (1) 1,800.00	I 2,200.00	J 960.00	K 1,000.00	L	M 240.00	N	O 1,240.00
Recovery Room	04/04/2022	900.00	(1) 410.00	490.00	392.00			98.00		98.00
Med/Surg Supplies	04/04/2022	300.00	(1) 140.00	160.00	128.00			32.00		32.00
Med/Surg Supplies	04/04/2022	100.00							(2) 100.00	100.00
Laboratory Services	04/04/2022	1,200.00	(1) 820.00	380.00	304.00			76.00		76.00
Laboratory Services	04/04/2022	400.00	(1) 270.00	130.00	72.00		50.00	8.00		58.00
MRI Outpatient	04/04/2022	950.00	(1) 490.00	460.00	363.00		15.00	82.00		97.00
<b>CLAIM TOTALS</b>		<b>\$7,850.00</b>	<b>\$3,930.00</b>	<b>\$3,820.00</b>	<b>\$2,219.00</b>	<b>\$1,000.00</b>	<b>\$65.00</b>	<b>\$536.00</b>	<b>\$100.00</b>	<b>\$1,701.00</b>

**Total covered benefits approved for this claim: \$2,219.00 to Ralph Johnston M.D. on 06-20-22.**
**Notes about amounts under "YOUR BENEFITS APPLIED" and "YOUR RESPONSIBILITY"**

- (1) The amount billed is greater than the amount allowed for this service. Based on our agreement with this provider, you will not be billed the difference.
- (2) Your Health Care Plan does not provide benefits for surgical assistant services when billed by the same physician who performed the surgery or administered the anesthesia. No payment can be made.

**For your up-to-date Medical Spending summary, visit Blue Access for Members<sup>SM</sup> on our website, the BCBSIL Mobile App or call the phone number on the back of your ID card.**

JOHN SMITH - Benefit Period: 01-01-22 Through 12-31-22 To date this patient has met \$2,900.00 of her/his \$2,900.00 Out-of-pocket Expense.

Benefit Period: 01-01-22 Through 12-31-22 To date \$3,870.78 of the Family \$5,800.00 Out-of-pocket Expense has been met.

## On Page Two You Can:

### At a glance, confirm the:

**D.** Patient      **E.** Provider      **F.** Policy Information

### Get the Details

**YOUR BENEFITS APPLIED** – This section shows your list of services and how they're covered.

**G.** Amount Billed is the total amount your provider billed for the services.

**I.** Amount Covered (Allowed) is the amount billed (G) minus any discounts or reductions (H).

**J.** Health Plan Responsibility is the portion we paid to your provider.

### See Your Cost Share

**YOUR RESPONSIBILITY** – This section shows your member cost-share amounts, including:

**K.** Deductible      **L.** Copays      **M.** Coinsurance

**O.** Your Total Costs details the amount shown in O<sup>2</sup>, and is the sum of your copay, deductible and coinsurance. You may owe less if your provider collected any of these payments up front. It also includes amounts not covered by your health plan (N). It does not include charges that a non-participating provider may bill you. If your benefits feature a Health Care Account (HCA), or other Health Savings Account (HSA), any payments from those accounts will be reflected in this line (O<sup>3</sup>). HCAs and HSAs do not apply to all benefit plans.

### Get More Information

Your EOB may include a little more information about:

**J<sup>2</sup>.** Total covered benefits approved – This is the amount and the date we paid your provider. The total matches the total in the Health Plan Responsibility column (J).

**P.** See discounts and reductions (H), and any amounts that aren't covered (N).

**Q.** Track your yearly out-of-pocket totals so you'll know when your patient cost-shares are met.

Sign up to get your EOBs online on **Blue Access for Members<sup>SM</sup>** or text\* **BCBSILAPP to 33633** to download the mobile app.

\* Message and data rates may apply. See terms and conditions and our privacy policy at [bcbasil.com/member/account-access/mobile/text-messaging](https://www.bcbasil.com/member/account-access/mobile/text-messaging).

EOB samples are for illustrative purposes only. Not all EOBs are the same. The format and content of an EOB depends on your benefit plan and the services provided.

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# We're with you wherever you go



## Download the Blue Cross and Blue Shield of Illinois (BCBSIL) App to manage your health wherever you are.

- Find an in-network doctor, hospital or urgent care facility
- Access your claims, coverage and deductible information
- View or print your member ID card
- Log in securely with your fingerprint or face recognition\*
- View your Explanation of Benefits

## Then, Manage Your Preferences

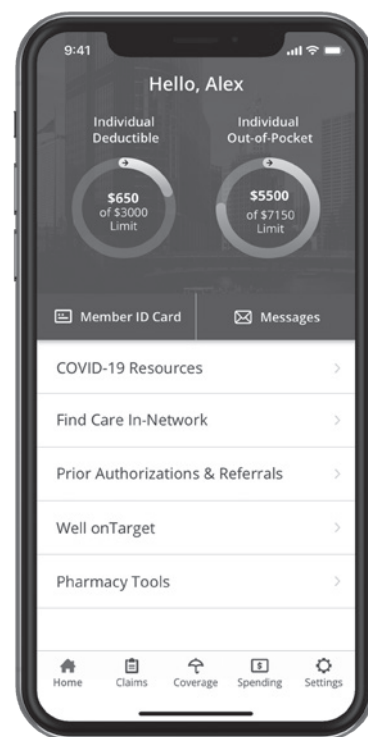
### In the BCBSIL App:

- Update your profile with your mobile number.
- Set your notification preferences to text.

### Choose the messages and information you want to get:

- Claims, prior authorization or referral updates
- New documents to review
- Secure message notifications
- Find out about new benefits and services

**Ready to get started?** Text **BCBSILAPP** to **33633\*\*** to get the app.



Available in Spanish



\* Availability varies by device.

\*\* Message and data rates may apply. Terms and conditions and privacy policy at [bcbsil.com/member/account-access/mobile/text-messaging](https://bcbsil.com/member/account-access/mobile/text-messaging).



## Virtual Visits: **Get Cost-Effective, 24/7 Care**

With Virtual Visits from MDLIVE®, the doctor is always in. This Blue Cross and Blue Shield of Illinois (BCBSIL) benefit gives you access to 24/7 non-emergency care from a board-certified doctor or therapist by phone, online video or mobile app from almost anywhere.

Skip expensive ER bills and waiting to see a doctor. You can speak with a Virtual Visits doctor within minutes.

Services are available in both English and Spanish with translation services available in other languages.

Powered by  
**MDLIVE**

## Why Virtual Visits?

- 24/7 access to an independently contracted, board-certified doctor or therapist
- Access via phone, online video or mobile app from almost anywhere
- Average wait time of less than 20 minutes
- Doctors can send e-prescriptions to your local pharmacy

## The Virtual Visits benefit is a convenient alternative for treatment of more than 80 health conditions, including:

- Allergies
- Cold/Flu
- Fever
- Headaches
- Nausea
- Sinus infections

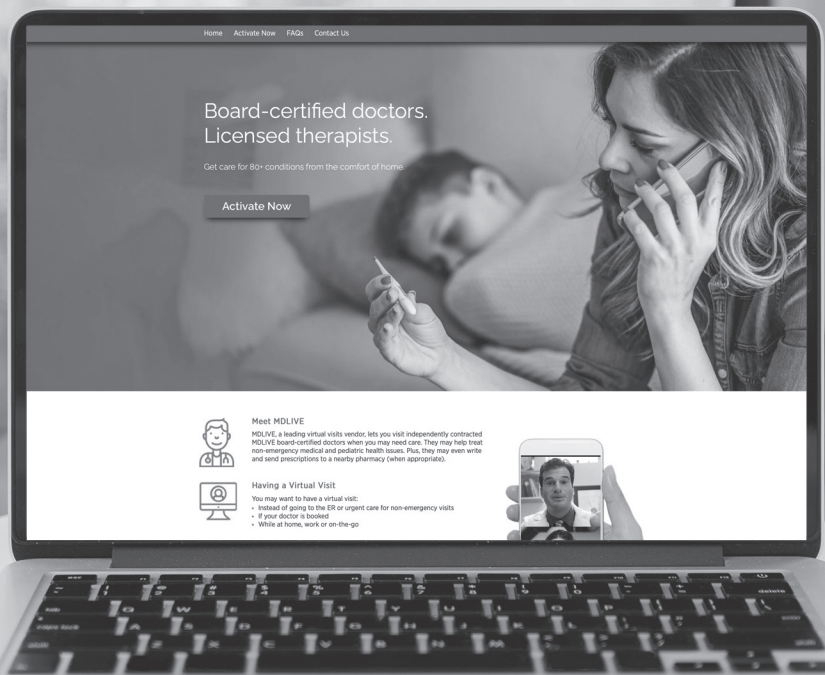
## Virtual Visits sessions with licensed behavioral health therapists are available by appointment. Get virtual care for:

- Depression
- Eating disorders
- ADHD
- Substance use disorders
- Trauma and PTSD
- Autism spectrum disorder

**First, call your doctor's office; they may also offer telehealth consultations by phone or online video. If you have any questions about this or any other BCBSIL benefit, please call the number on the back of your ID card.**

## Activate your Virtual Visits account today:

- Call 888-676-4204
- Go to [MDLIVE.com/bcbsil](https://MDLIVE.com/bcbsil)
- Text BCBSIL to 635-483
- Download the app



Virtual Visits may be limited by plan. For providers licensed in New Mexico and the District of Columbia, Urgent Care service is limited to interactive online video; Behavioral Health service requires video for the initial visit but may use video or audio for follow-up visits, based on the provider's clinical judgment. Behavioral Health is not available on all plans.

MDLIVE is a separate company that operates and administers Virtual Visits for Blue Cross and Blue Shield of Illinois. MDLIVE is solely responsible for its operations and for those of its contracted providers. MDLIVE® and the MDLIVE logo are registered trademarks of MDLIVE, Inc., and may not be used without permission.

Blue Cross®, Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.





# Choosing Quality Care for You and Your Family

Under your plan, you have access to designated specialty care facilities that have met national measures for quality and cost-efficient care. When you use a Blue Distinction® Center doctor or hospital, you will receive the most from your benefits and know that the doctor or hospital has a record of providing proven, effective specialty care.

Blue Distinction® Specialty Care services include:

- **Blue Distinction® Centers for Bariatric Surgery:** Postoperative care, follow-up and patient education
- **Blue Distinction® Centers for Cardiac Care:** Cardiac rehabilitation, cardiac catheterization and cardiac surgery
- **Blue Distinction® Centers for Cellular Immunotherapy (CAR-T):** Treat certain blood cancers with chimeric antigen receptor T cell therapies (CAR-T)
- **Blue Distinction® Centers for Fertility Care:** Focused on in vitro fertilization (IVF)
- **Blue Distinction® Centers for Gene Therapy:** Focus on treatment used for inherited conditions such as ocular disorders
- **Blue Distinction® Centers for Knee and Hip Replacement:** Knee and hip replacement surgeries and services
- **Blue Distinction® Centers for Maternity Care:** Childbirth services, including both vaginal and cesarean deliveries
- **Blue Distinction® Centers for Substance Use Treatment and Recovery:** Residential, inpatient, intensive outpatient, or partial hospitalization services
- **Blue Distinction® Centers for Spine Surgery:** Spine surgery services, including discectomy, fusion and decompression procedures
- **Blue Distinction® Centers for Transplants:** Transplant and support services





**Blue Distinction Centers (BDC):** Doctors or hospitals recognized for their expertise in delivering specialty care.

**Blue Distinction Centers+ (BDC+):** Doctors or hospitals recognized for their expertise and efficiency in delivering specialty care.

## High Quality, Lower Cost

At a BDC or a BDC+ facility, you may get a better outcome and may have lower out-of-pocket costs,\* depending on your plan. Although your plan may require you to get treatment at a BDC or BDC+ facility, you may still be covered at a non-BDC facility, but your out-of-pocket costs will usually be higher.

## Nationwide Access

There are approximately 2,620 Blue Distinction Specialty Care facilities and providers nationwide. To find a BDC near you, log in to Blue Access for Members<sup>SM</sup> (BAM<sup>SM</sup>) at **bcbsil.com/member**. To register for a BAM account, all you need are your group and identification numbers, found on your member ID card. BAM is secure and easy to use. When you search for providers in BAM, it will take you directly to network providers only.

By logging in to BAM you can also use Provider Finder<sup>®</sup> to:

- Estimate the cost of over 1,700 procedures, treatments and tests, including your out-of-pocket expenses
- View patient reviews
- See how industry experts rate your doctor
- Review providers' certifications and recognitions
- Rate your doctor or hospital after your visit

For basic provider searches, you can also access Provider Finder without logging in to BAM. Just visit **bcbsil.com** and click on the **Find Care** tab. Or, download the BCBSIL app at the App Store or Google Play.

If you need help finding a network provider or have questions about your benefits, call the toll-free number on the back of your ID card.



## Learn more about Blue Distinction.

Visit **bcbs.com/why-bcbs/blue-distinction/** or call the Customer Service number on the back of your member ID card.

\*Costs vary. Please see your benefit booklet for details.

Note: Designation as BDC means these facilities' overall experience and aggregate data met objective criteria established in collaboration with expert clinicians' and leading professional organizations' recommendations. Individual outcomes may vary. To find out which services are covered under your policy at any facilities, please call your local Blue Cross and Blue Shield Plan. Call your provider before making an appointment to verify the most current information on its network participation status. Neither Blue Cross and Blue Shield Association nor any of its licensees are responsible for any damages, losses or noncovered charges that may result from receiving care from a provider designated as a Blue Distinction Center.

225363.0423



# Blue Cross and Blue Shield Global® Core

## You're Never Far from Health Care Services – Even When You're Far from Home

Like your passport, always carry your Blue Cross and Blue Shield of Illinois (BCBSIL) ID card with you when you travel or live abroad. Through the Blue Cross and Blue Shield Global Core program, you have access to doctors, hospitals and other health services in nearly 200 countries and territories around the world.

### How Blue Cross and Blue Shield Global Core Works

To take advantage of the Blue Cross and Blue Shield Global Core program, review this information:

- Before you leave home, contact BCBSIL for coverage details. Your coverage outside the United States may be different.
- Always carry your BCBSIL ID card.
- In an emergency, go directly to the nearest hospital.
- The Blue Cross and Blue Shield Global Core Service center is available 24 hours a day, seven days a week toll free at **800-810-BLUE (2583)** or by calling collect at **804-673-1177**.

**Blue Cross and Blue Shield Global Core is there if you need medical care in a foreign country.**



### Call the Service Center in these situations:

- **You need to locate a doctor or hospital or need medical services.** An assistance coordinator, in conjunction with a medical professional, will arrange a physician appointment or hospital stay.
- **You need inpatient care.** After calling the Service Center, you should also call BCBSIL Customer Service for precertification or pre-approval. You can find the telephone number on the back of your ID card. This number is different than the Blue Cross and Blue Shield Global Core Service Center number shown here.

# Blue Cross and Blue Shield Global Core

## Payment Information

### For participating Blue Cross and Blue Shield Global Core hospital

In most cases, you should not need to pay up front for inpatient care at participating hospitals except for the usual out-of-pocket expenses (non-covered services, deductibles, copayments and/or coinsurance). The hospital should submit the claim on your behalf.

### For doctors and/or non-participating hospitals

You will need to pay up front for services. Then you can complete a Blue Cross and Blue Shield Global Core international claim form and send it with the bill(s) to the Blue Cross and Blue Shield Global Core Service Center at the address on the form. You can also submit your claim online or through the Blue Cross and Blue Shield Global Core mobile app. The claim form is available from your Blue Cross and Blue Shield company or online at **bcbsglobalcore.com**.

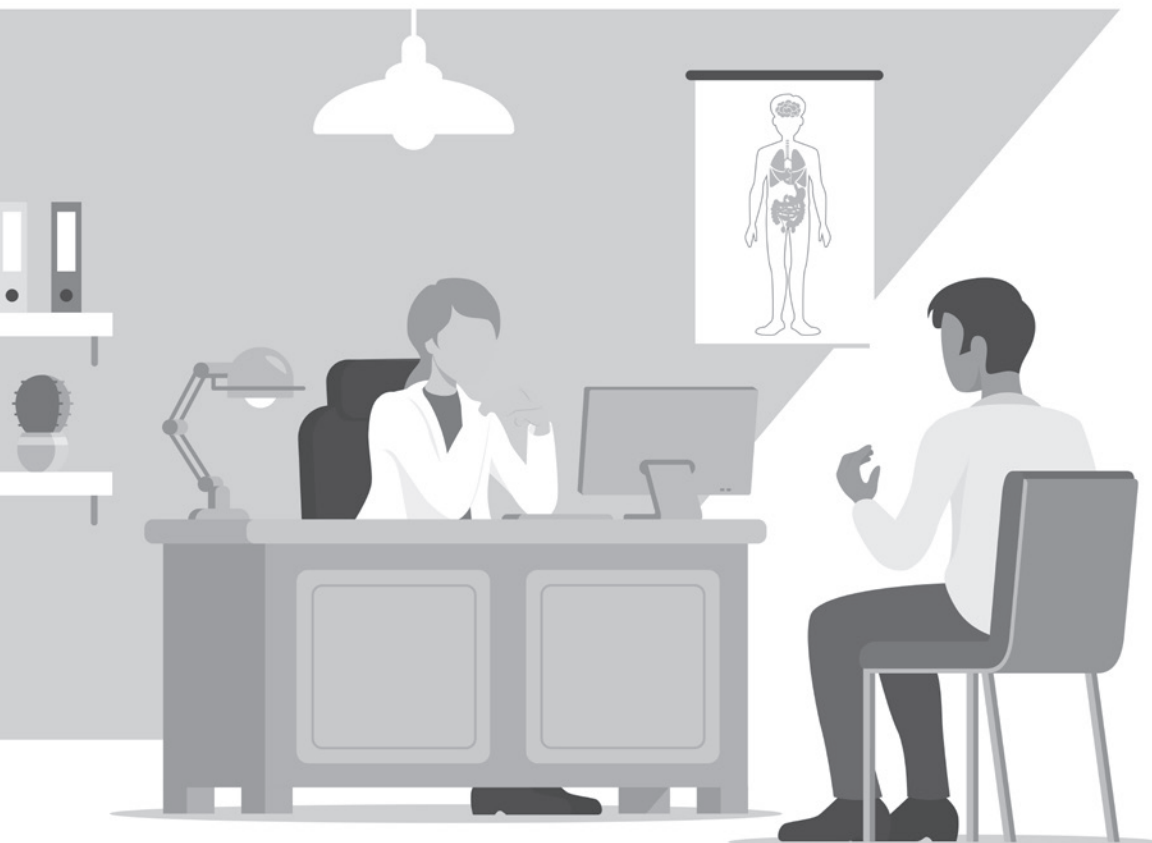
## Claim Filing

**The hospital will file your claim** if the Blue Cross and Blue Shield Global Core Service Center arranged your hospital stay. You will need to pay the hospital for the usual out-of-pocket expenses.

**You must file the claim** for outpatient and doctor care or inpatient care not arranged through the Blue Cross and Blue Shield Global Core Service Center. You will need to pay the health care provider and submit an international claim form with the original bill(s).

## Claim Forms

International claim forms are available from BCBSIL, the Service Center or **bcbsglobalcore.com**.



**Remember to take this information with you when you travel or live outside the U.S.**

Blue Cross and  
Blue Shield Global Core  
Service Center

**Toll Free:** 800-810-2583

**Collect:** 804-673-1177



# How Much Does That Cost?

## Navigate your plan with Provider Finder®

There's a lot to think about when deciding where to get health care. Look at the table below to see how much prices can change for the same procedure in the same area. Provider Finder is a tool that helps you make the best health care decisions.

Procedure	Provider A	Provider B	Difference
MRI of the Brain	\$682 <sup>1</sup>	\$3,849 <sup>1</sup>	<b>\$3,167</b>
Hysterectomy	\$12,371 <sup>2</sup>	\$20,578 <sup>2</sup>	<b>\$8,207</b>
Hernia Repair	\$4,142 <sup>2</sup>	\$11,692 <sup>2</sup>	<b>\$7,550</b>
Knee Replacement	\$16,997 <sup>1</sup>	\$55,155 <sup>1</sup>	<b>\$38,158</b>

Note that costs are examples and may not apply to every member's situation

### Provider Finder allows members to:

**Check costs before your appointment:** Find quality, independently contracted health care providers who charge less.

**Find and compare doctors and facilities:** Discover local doctors in your network. Check if a facility has been recognized for providing quality care.

**Understand your benefits:** Learn what you may need to pay based on your plan's copay, coinsurance, deductible and other benefits.\*

**Learn more about your providers:** Read reviews and ratings from other members and share your own.



### Go Digital

To use Provider Finder, visit **bcbsil.com** and register or log in to Blue Access for Members<sup>SM</sup>. Click on the **Find Care** tab, and click on the **Find a Doctor or Hospital** link.

1. Allowable in-network cost data from providers within a 50-mile radius of Chicago, Illinois. Costs are examples and may not apply to every member's situation.

2. Allowable in-network cost data from providers within a 50-mile radius of Springfield, Illinois. Costs are examples and may not apply to every member's situation.

\* Available for most networks and plans





# Prescription Drug and Wellness Information





# A home delivery (mail order) pharmacy service you can trust.

Express Scripts® Pharmacy delivers your long-term (or maintenance) medicines right where you want them. No driving to the pharmacy. No waiting in line for your prescriptions to be filled.

## Savings and Convenience

- Express Scripts® Pharmacy delivers up to a 90-day supply of long-term medicines.<sup>1</sup>
- Prescriptions are delivered to the address of your choice, within the U.S., with free standard shipping.
- You can order from the comfort of your home — through your mobile device, online or over the phone. Your doctor can fax, call or send your prescription electronically to Express Scripts® Pharmacy.
- Tamper-evident, unmarked packaging protects your privacy.

## Support and Service

- You can receive notices by phone, email or text — your choice — when your orders are placed and shipped. You will be contacted, if needed, to complete your order. To select your notice preference, register online at [express-scripts.com/rx](https://express-scripts.com/rx) or call **833-715-0942**.
- 24/7 access to a team of knowledgeable pharmacists and support staff.
- You can choose to receive refill reminder notices by phone or email.
- Multiple pharmacy locations across the U.S., for fast processing and dispensing.



**Medicines may take up to 5 business days to deliver after Express Scripts® Pharmacy receives and verifies your order.**

# Getting Started with Express Scripts® Pharmacy Mail Order

## Online and Mobile

You have more than one option to fill or refill a prescription online or from a mobile device:

- Visit **express-scripts.com/rx**. Follow the instructions to register and create a profile. See your active prescriptions and/or send your refill order.
- Log in to **myprime.com** and follow the links to Express Scripts® Pharmacy.

## Over the Phone

Call **833-715-0942**, 24/7, to get started with mail order, transfer a current prescription or to refill. Please have your member ID card, prescription information and your doctor's contact information ready.

## Through the Mail

To send a prescription order through the mail, visit **bcbsil.com** and log in to Blue Access for Members<sup>SM</sup>. Complete the mail order form. Mail your prescription, completed order form and payment to Express Scripts® Pharmacy.

## Talk to Your Doctor

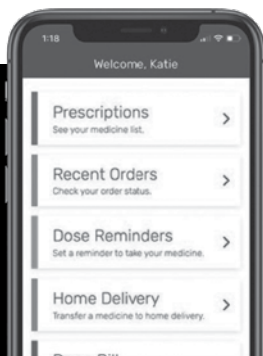
Ask your doctor for a prescription for up to a 90-day supply of each of your long-term medicines.<sup>1</sup> You can ask your doctor to send your prescription electronically to Express Scripts® Pharmacy, call **888-327-9791** for faxing instructions or call the pharmacy at **833-715-0942**. If you need to start your medicine right away, request a prescription for up to a one-month supply you can fill at a local retail pharmacy.

## Refills Are Easy

Refill dates are shown on each prescription label. You can choose to have Express Scripts® Pharmacy remind you by phone or email when a refill is due. Choose the reminder option that best suits you.

## Questions?

Visit **bcbsil.com**. Or call the phone number listed on your member ID card.



## Use the mobile app to manage your prescriptions

- Refill prescriptions
- Track your order
- Make payments
- Set reminders to take medicines and more

1. Prescriptions of up to a 90-day supply, or the most amount allowed by the benefit plan.

Express Scripts® Pharmacy is a pharmacy that is contracted to provide mail pharmacy services to members of Illinois. The relationship between Express Scripts® Pharmacy and Blue Cross and Blue Shield of Illinois is that of independent contractors. Express Scripts® Pharmacy is a trademark of Express Scripts Strategic Development, Inc.

Prime Therapeutics LLC is a pharmacy benefit management company, contracted by BCBSIL to provide pharmacy benefit management and related other services. BCBSIL, as well as several independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics LLC. MyPrime.com is an online resource offered by Prime Therapeutics, LLC.





# Q&A: Prescription Drug List

## What is a prescription drug list?

Your prescription drug benefit plan is based on the Blue Cross and Blue Shield of Illinois drug list. It is a list of drugs routinely reviewed and chosen based on the recommendations of a group of people from throughout the country who hold a medical or pharmacy degree. U.S. Food and Drug Administration (FDA)-approved drugs are chosen based on their safety, cost and how well they work.

The Enhanced Drug List is a smaller version of the Basic Drug List. It has mostly generic and select preferred brand drugs.

The Balanced Drug List, Performance Drug List, Performance Select Drug List and 2024 Drug List (for Metallic plans) show all covered drugs.

Major drug classes are covered on all drug lists. To learn more about your drug list, please call the number on your ID card.

## Why should I use the drug list?

Your prescription drug list has many levels of coverage, called tiers. Each tier has its own cost. As a rule, your copay/coinsurance amount will be less for covered drugs in the lower tier. For example, the cost for preferred brand drugs is often lower than for non-preferred brand drugs.

If your benefits are based on the Basic or Enhanced Drug List, most medicines may be covered that are not on the drug list, but you may pay more out of pocket. If your benefits are based on the Balanced Drug List, Performance Drug List, Performance Select Drug List or 2024 Drug List (for Metallic plans), medicines that are not shown on these drug lists are not covered. You will need to pay for the full cost of the medicine.

The drug list is a source for your doctor when prescribing medicines. But it is up to you and your doctor to decide the medicine that is best for you.

## Why use generic drugs?

Generics are medicines that are safe and work just as well as a brand drug. Generics often cost less than a

brand drug. A generic can usually be substituted for a brand drug if it has the same active ingredients, the same strength and dosage and gives the same results. Talk to your doctor or pharmacist to find out if a generic drug is right for you.

## How do I know if a drug is on the drug list and what my cost will be?

The other side of this flier lists some commonly prescribed generic and preferred brand drugs. If a drug you are looking for is not on this flier, search the full drug list at [bcbasil.com/rx-drugs/drug-lists/drug-lists](https://bcbasil.com/rx-drugs/drug-lists/drug-lists) or call customer service at the number on your BCBSIL member ID card.

How much you may pay out of pocket will be based on your plan benefits and what tier the drug is on your drug list. To find out what you will pay, log in to your Blue Access for Members<sup>SM</sup> (BAM<sup>SM</sup>) account at [bcbasil.com](https://bcbasil.com) or call customer service at the number on your BCBSIL member ID card.

**Please note:** Drugs that call for a health care provider to give them to you (often in a hospital, doctor's office or other health care setting) may be covered under your health plan's medical benefit instead of your pharmacy benefits. These drugs are not on the drug list. If you have questions about these drugs, please call customer service at the number on your BCBSIL member ID card.

## What are dispensing limits?

Some drugs listed on the drug list may have additional requirements, or extra steps to take before getting your prescription filled. One of those requirements is dispensing limits. This means you may only be able to get a certain amount of your drug at one time. For example, the osteoporosis drug Actonel® (risedronate) can only be filled as 30 tablets per 30 days because the FDA-approved labeling recommends the dose of one 5 mg tablet taken daily by mouth.

## What if I have questions?

Call customer service at the number on your ID card, 24 hours a day, 7 days a week, or visit [bcbasil.com](https://bcbasil.com).

# January 2024 Commonly Prescribed Drugs

This list is a sample of commonly prescribed generic and preferred brand drugs. See the full and up-to-date BCBSIL prescription drug lists at [bcbsil.com/rx-drugs/drug-lists/drug-lists](https://www.bcbsil.com/rx-drugs/drug-lists/drug-lists). The online drug list (Balanced Drug List, Basic Drug List, Enhanced Drug List, Performance Drug List, Performance Select Drug List and 2024 Drug List for Metallic plans) may be changed as often as four times a year, based on your prescription drug benefit plan. Some online drug lists (Annual versions) may only be changed once a year, based on your plan benefits. The drug list may show medicines not covered under your prescription drug benefit plan. Also, prescription versions of over-the-counter (OTC) medicines may not be covered based on your plan. If you have questions about your benefits, call the number on your ID card.

## ANTIHYPERTENSIVES

### Angiotensin Converting Enzyme (ACE) Inhibitors and Combinations

benazepril hcl tab  
enalapril maleate tab  
enalapril maleate-hydrochlorothiazide tab  
fosinopril sodium tab  
lisinopril tab  
lisinopril-hydrochlorothiazide tab  
quinapril hcl tab  
ramipril cap  
trandolapril tab

### Angiotensin II Receptor Antagonist (ARBs) and Combinations

candesartan cilexetil tab  
candesartan cilexetil-hydrochlorothiazide tab  
irbesartan tab  
irbesartan-hydrochlorothiazide tab  
losartan potassium tab  
losartan potassium-hydrochlorothiazide tab  
olmesartan medoxomil tab  
olmesartan medoxomil hydrochlorothiazide tab  
telmisartan tab  
valsartan tab  
valsartan-hydrochlorothiazide tab

### Beta Blockers and Combinations

atenolol tab  
atenolol-chlorthalidone tab  
bisoprolol fumarate tab  
bisoprolol-hydrochlorothiazide tab  
carvedilol tab  
labetalol hcl tab  
metoprolol succinate tab  
metoprolol tartrate tab  
propranolol hcl tab  
sotalol hcl

### Calcium Channel Blockers and Combinations

amlodipine besylate tab  
amlodipine besylate-benazepril hcl cap  
diltiazem hcl tab  
felodipine tab er 24hr  
nifedipine tab er 24hr osmotic release  
verapamil hcl tab

### Other Antihypertensives

clonidine hcl tab  
hydralazine hcl tab  
minoxidil tab  
prazosin hcl  
terazosin hcl cap

## ASTHMA/COPD

ADVAIR HFA  
albuterol sulfate  
ANORO ELLIPTA  
ARNUITY ELLIPTA  
ASMANEX HFA  
ASMANEX TWISTHALER 120 ME  
BREO ELLIPTA  
BREZTRI AEROSPHERE  
COMBIVENT RESPIMAT  
DULERA  
FASENRA PEN  
fluticasone-salmeterol diskus  
INCRUSE ELLIPTA  
ipratropium bromide inhal soln  
ipratropium-albuterol nebu soln  
levalbuterol hcl soln nebu conc  
montelukast sodium  
NUCALA  
QVAR REDIHALER  
SEREVENT DISKUS  
SPIRIVA HANDIHALER  
SPIRIVA RESPIMAT  
STIOLTO RESPIMAT  
STRIVERDI RESPIMAT  
SYMBICORT  
TEZSPIRE  
theophylline tab er 24hr  
TRELEGY ELLIPTA  
XOLAIR

## CHOLESTEROL

atorvastatin calcium tab  
colesevelam hcl  
ezetimibe tab  
fenofibrate micronized cap  
fenofibrate tab  
gemfibrozil tab  
lovastatin tab  
pravastatin tab  
rosuvastatin tab  
simvastatin tab

## DEPRESSION

amitriptyline hcl tab  
bupropion hcl tab  
citalopram  
doxepin hcl  
duloxetine hcl  
escitalopram tab  
fluoxetine hcl  
imipramine hcl tab  
mirtazapine tab  
nortriptyline hcl cap  
paroxetine hcl tab  
sertraline hcl  
trazodone hcl tab  
venlafaxine hcl tab

## DIABETES

acarbose tab  
BAQSIMI ONE PACK  
BYDUREON BCISE  
FARXIGA  
FIASP  
glimepiride tab  
glipizide tab  
glipizide-metformin hcl tab  
GLUCAGON EMERGENCY KIT  
glyburide micronized tab  
glyburide tab  
glyburide-metformin tab  
GLYXAMBI  
GVOKE PFS  
HUMULIN R U-500  
INSULIN GLARGINE-YFGN  
JANUMET  
JANUMET XR  
JANUVIA  
JARDIANCE  
LEVEMIR  
LEVEMIR FLEXPEN  
metformin hcl tab  
MIGLITOL  
MOUNJARO  
nateglinide tab  
NOVOLIN 70/30  
NOVOLIN N  
NOVOLIN R  
NOVOLOG  
OZEMPIC  
pioglitazone hcl-metformin hcl tab  
pioglitazone hcl tab  
repaglinide tab  
RYBELSUS  
SEMGLEE  
SOLIQUA 100/33  
SYNJARDY  
SYNJARDY XR  
TOUJEO MAX SOLOSTAR  
TRESIBA  
TRIJARDY XR  
TRULICITY  
XIGDUO XR  
XULTOPHY 100/3.6  
ZEGALOGUE



# Understanding Your Coverage Options

## with the Member Pay the Difference prescription drug benefit.

Through Blue Cross and Blue Shield of Illinois (BCBSIL), your prescription drug benefit uses a Member Pay the Difference pharmacy benefit designed to encourage members to use medicines that have been shown to be safe and cost-effective.

### How does Member Pay the Difference work?

When you fill a prescription through a contracting pharmacy\* for a covered brand name drug where a **generic equivalent** is available, you may pay more. You will pay the copay/coinsurance amount **plus** the difference in cost between the brand drug and its generic equivalent.\*\*

This may apply even if your doctor writes “do not substitute” on your prescription.

### What is a generic drug?

A generic drug is a version of a brand-name drug, and is also approved by the U.S. Food and Drug Administration (FDA). When compared to the brand drug, a generic drug is the same, is as safe, and works just as well in the body for most people. But the generic drug often costs less.

There are two types of generics:

- A **generic equivalent** is made with the same active ingredient(s) at the same dose as the brand drug.
- A **generic alternative** is often used to treat the same condition, but the active ingredient(s) differs from the brand drug.

Your pharmacist can often substitute a generic equivalent for its brand counterpart without a new prescription from your doctor. But only you and your doctor can decide if a generic alternative is right for you. Please note that the Member Pay the Difference benefit does not apply to generic alternatives.

### Get the most from your pharmacy benefit.

Consider using generic drugs, and follow these tips to help you get the most from your benefits:

- View the BCBSIL Drug List. Ask your doctor to check this list when recommending prescription drug options for you.
- Use online pharmacy resources to get information about your out-of-pocket cost for a prescription, view your claims history and more.

Go to [bcbsil.com](https://bcbsil.com) and log in to Blue Access for Members<sup>SM</sup> (BAM<sup>SM</sup>) to learn more about your prescription drug benefit and access online resources.

### What if I have questions?

Ask your doctor or pharmacist about the choices you have and which drug is right for you. Remember, treatment decisions are always between you and your doctor.

If you have any questions about your prescription drug benefit, see your plan materials or call the number on your member ID card.

\* The relationship between Blue Cross and Blue Shield of Illinois (BCBSIL) and contracting pharmacies is that of independent contractors, contracted through a related company, Prime Therapeutics LLC. Prime Therapeutics also administers the pharmacy benefit program. BCBSIL, as well as several independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics.

\*\* Your out-of-pocket costs are determined by your particular benefit plan, your plan's prescription drug list, the date of the prescription and/or the date you filled your prescription. Coverage is always subject to the exclusions and limitations of your benefit plan.





## Do You Need Specialty Medications?



Blue Cross and Blue Shield of Illinois (BCBSIL) supports members who need self-administered specialty medication and helps them manage their therapy. Accredo® is the specialty pharmacy chosen to do just that.<sup>1</sup>

Specialty drugs are often prescribed to treat complex and/or chronic conditions, such as multiple sclerosis, hepatitis C and rheumatoid arthritis.

Specialty drugs often call for carefully following a treatment plan (or taking them on a strict schedule). These medications have special handling or storage needs and may only be stocked by select pharmacies.

Some specialty drugs must be given by a health care professional, while others are approved by the FDA for self-administration (given by yourself or a care giver). Medications that call for administration by a professional are often covered under your medical benefit plan. Your doctor will order these medications. Coverage for self-administered specialty drugs is usually provided through your pharmacy benefit plan. Your doctor should write or call in a prescription for self-administered specialty drugs to be filled by a specialty pharmacy.

Your plan may require you to get your self-administered specialty drugs through Accredo or another in-network pharmacy. If you do not use these pharmacies, you may pay higher out-of-pocket costs.<sup>2</sup> Your doctor may also order select specialty drugs that must be given to you by a health professional through Accredo.

# Do You Need Specialty Medications?

## Examples of Self-administered Specialty Medications

This chart shows some conditions self-administered specialty drugs may be used to treat, along with sample medications. This is not a complete list and may change from time to time. Visit [bcbsil.com](https://www.bcbsil.com) to see the up-to-date list of specialty drugs.

Condition	Sample Medications <sup>3</sup>
Autoimmune Disorders	Cosentyx, Enbrel, Humira, Xeljanz
Osteoporosis	Forteo, Tymlos
Cancer (oral)	Gleevec, Nexavar, Sprycel, Sutent, Tarceva
Growth Hormones	Norditropin Flexpro, Nutropin AQ, Omnitrope
Hepatitis C	Daklinza, Epclusa, Harvoni, Mavyret, Sovaldi, Vosevi
Multiple Sclerosis	Betaseron, Copaxone, Rebif

## Support in Managing Your Condition: Accredo

Accredo carries roughly 99% of specialty drugs, which means you're more likely to get all of your specialty drugs from one pharmacy. Through Accredo, you can have your covered, self-administered specialty drugs delivered straight to you. When you get your specialty drugs through Accredo, you get:

- One-on-one counseling from 500+ condition-specific pharmacists and 600+ nurses
- Simple communication, including refill reminders, by your choice of phone, email, text or web<sup>4</sup>
- An online member website to order refills, check order status and track shipments, view order and medication history, set profile preferences and learn more about your condition
- A mobile app that lets you refill and track prescriptions, make payments and set reminders to take your medicine<sup>4</sup>
- Free standard shipping
- 24/7 support

## Ordering Through Accredo

You can order a new prescription or transfer your existing prescription for a self-administered specialty drug to Accredo. **To start using Accredo, call 833-721-1619.** An Accredo representative will work with your doctor on the rest.

Once registered, you can manage your prescriptions on [accredo.com](https://www.accredo.com) or through the mobile app.

## Receiving Specialty Medications

Since many specialty drugs have unique shipping or handling needs, shipments will be arranged with you through Accredo. Medications are shipped in plain, secure, tamper-evident packaging.

Before your scheduled fill date, you will be contacted to:

- Confirm your drugs, dose and the delivery location
- Check any prescription changes your doctor may have ordered<sup>5</sup>
- Discuss any changes in your condition or answer any questions about your health<sup>5</sup>

## One-on-One Support

Accredo has 15 Therapeutic Resource Centers® (TRCs), each focused on a specific specialty condition. Through your one-on-one counseling sessions, they'll discuss how to reduce your disease progression and achieve your treatment goals, manage any side effects from your drugs, help you stick to your regimen and monitor your progress. They can also offer support with any financial or insurance concerns you may have.

**Certain coverage exclusions and limits may apply, based on your health plan. For some medicines, members must meet certain criteria before prescription drug benefit coverage may be approved. Check your benefit materials for details, or call the customer service number listed on your ID card with questions.**

1. Blue Cross and Blue Shield of Illinois (BCBSIL) contracts with Prime Therapeutics to provide pharmacy benefit management and related other services. BCBSIL, as well as several independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics.

2. The BCBSIL specialty pharmacy network includes Accredo as well as other in-network specialty pharmacies for select specialty drugs. Based on the benefit plan, members may be responsible for the full cost of the specialty drug for not using an in-network specialty pharmacy. You can log in to your Blue Access for Members™ (BAM™) account to find an in-network specialty pharmacy near you.

3. Third-party brand names are the property of their respective owners.

4. Not all medicines can be refilled on the app, by text or email.

5. Treatment decisions are between you and your doctor.

Accredo is contracted to provide services for BCBSIL. Accredo is a trademark of Express Scripts Strategic Development, Inc.



# Generic Drugs May Save You Money

They are safe, effective and approved by the FDA. Talk to your doctor to see if using generic drugs is an option for you.

## What is a generic drug?

A generic drug is a version of a brand-name drug and is also approved by the FDA. When compared to the brand-name drug a generic drug is safe and works just as well in the body for most people. But the generic drug often costs less.

## There are two types of generics:

- A **generic equivalent** is made with the same active ingredient(s) at the same dose as the brand-name drug.
- A **generic alternative** is often used to treat the same condition, but the active ingredient(s) differ from the brand-name drug.

Your pharmacist can often fill a prescription with a generic equivalent without a new prescription from your doctor. But only you and your doctor can decide if a generic alternative is right for you. And if right for you, your doctor will need to write your prescription for that medicine.

## You may pay less for generic drugs.

Some benefit plans offered by Blue Cross and Blue Shield of Illinois (BCBSIL) use a prescription drug list, which is a list of drugs covered by your plan. If your plan is based on a drug list, how much you pay out-of-pocket for prescription drugs depends on whether the drug is on the list. Your drug list may also have different levels of coverage, called “tiers.” When you choose drugs in lower tiers, you may pay less. Generics are often in the lower tiers.

Members whose plan does not include a drug list often pay less out-of-pocket for generic drugs as well.

**Be informed. Talk to your doctor. Start saving now.**



## Generics are available for many brand drugs.

Generic alternatives are available for many brand drugs which may not currently have a generic equivalent, including those listed in the chart to the right. If you are taking one of these brand drugs, ask your doctor if a generic is right for you. This may save you money as well.

## Get the most from your pharmacy benefit.

Consider using generic drugs and follow these tips to help you get the most from your benefits:

- Ask your doctor to check the prescription drug list when recommending prescription drug options for you. Drugs on the list are chosen based on their safety, cost and how well they work.
- When you fill a prescription, use an in-network pharmacy and show your member ID card.
- Go to **bcbasil.com** and log into **Blue Access for Members<sup>SM</sup> (BAM<sup>SM</sup>)** for online pharmacy resources. You can get an estimate of your out-of-pocket cost for a prescription, view your claims history and more.

## What if I have questions?

Ask your doctor or pharmacist about the choices you have and which drug is right for you. As always, treatment decisions are between you and your doctor.

If you have questions about your prescription drug benefit, see your plan materials, visit BAM or call the number on your ID card.

## Examples of Brand Products with Generic Equivalents or Alternatives<sup>1</sup>

Brand Name <sup>2</sup>	Generic Equivalent or Alternative
<b>Acid Reflux Disease/Ulcer</b>	
Aciphex, Dexilant, Nexium, Prevacid, Prilosec, Protonix, Zegerid	lansoprazole, omeprazole, omeprazole/sodium bicarbonate, pantoprazole
<b>Depression</b>	
Celexa, Effexor, Effexor XR, Lexapro, Paxil, Paxil CR, Pristiq, Prozac, Zoloft, Wellbutrin/SR/XL	citalopram, bupropion, bupropion extended release, escitalopram, fluoxetine, fluoxetine delayed release, paroxetine, paroxetine extended release, venlafaxine, venlafaxine extended release
<b>High Cholesterol</b>	
Altoprev, Crestor, Lescol, Lescol XL, Lipitor, Pravachol, Tricor, Vytorin, Zetia, Zocor	atorvastatin, lovastatin, pravastatin, simvastatin
Niaspan	niacin extended release
<b>High Blood Pressure</b>	
Aceon, Altace, Atacand, Atacand HCT, Avalide, Avapro, Benicar, Benicar HCT, Cozaar, Diovan, Diovan HCT, Hyzaar, Mavik, Micardis, Micardis HCT, Teveeten, Univasc, Uniretic	benazepril, captopril, enalapril, fosinopril, lisinopril, moexipril, perindopril, quinapril, ramipril, trandolapril, all generic HCT combination products
Catapres-TTS	clonidine
Coreg, Inderal LA, Innopran XL, Toprol XL	atenolol, metoprolol, propranolol, sotalol, timolol
Norvasc	amlodipine, diltiazem, felodipine, isradipine, nicardipine, nifedipine, nimodipine, verapamil
<b>Insomnia</b>	
Ambien, Ambien CR, Edluar, Lunesta, Rozerem, Silenor, Sonata, Zolpimist	zaleplon, zolpidem

1. This list is for example only and is not all-inclusive. Drugs on this list may change from time to time. Not all listed drugs may be covered under all benefit plan designs.

2. Third-party brand names are the property of their respective owners.



# MedsYourWay<sup>®</sup> Connects You with Prescription Discounts

MedsYourWay<sup>1</sup> is a new prescription drug discount program that works with your Blue Cross and Blue Shield of Illinois (BCBSIL) pharmacy benefit. We're saving you time by finding lower prices for you.

## How it Works

1. Fill your prescription at a participating in-network retail pharmacy.
2. When you pick up your prescription, show your BCBSIL member ID card to your pharmacist.
3. MedsYourWay automatically compares prices from participating drug discount cards to your cost-share amount under your BCBSIL pharmacy benefits.
4. You pay the drug discount card price or your member cost-share, whichever is lower, for an eligible medicine.
5. Plus, what you pay will count toward your plan deductible and/or yearly out-of-pocket maximum amount if you have one.



**All you need is your  
BCBSIL member ID card.**



## It's Part of Your Benefit Plan

There's nothing you need to do to start using the MedsYourWay program. It's part of your benefit plan, and there's no sign-up. We're making it easy to help keep your family healthy and your out-of-pocket costs low.



**You can find in-network pharmacies and review your estimated drug costs by logging in to your Blue Access for Members<sup>SM</sup> (BAM<sup>SM</sup>) account or MyPrime.com account.**

1. MedsYourWay is not insurance. It is a drug discount card program that compares the drug discount card price for an eligible medication (up to a 90-day retail supply based on plan benefits) at select in-network retail pharmacies to the member's benefit plan cost share amount and then applies the lower available price. Eligible medications are subject to change and prescription prices may vary by location. Not all retail pharmacies may participate with MedsYourWay. MedsYourWay is administered by Prime Therapeutics, LLC, a separate pharmacy benefit management company contracted by BCBSIL to provide pharmacy benefit management and related other services. In addition, contacting pharmacies are contracted through Prime Therapeutics. The relationship between BCBSIL and contracting pharmacies is that of independent contractors. BCBSIL, as well as several independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics. MyPrime.com is an online resource offered by Prime Therapeutics LLC.





# Stay on Top of Your Prescriptions

Taking your medicine as prescribed – known as medication adherence – is important. It helps you control chronic health issues, treat short-term health problems, and stay well.

If you're having trouble taking your medicines as directed, you aren't alone. Some of the most common reasons can be:

- Finding time to take them
- Taking too many prescriptions
- Uncertainty that the medicine is working
- Fear of side effects
- Struggling to pay for them

## Find a Solution

Taking the **right amount** of your medicine, at the **right time** of day and the **right way** (as your doctor prescribed) can make a big difference in how well it works. The time of day a drug is taken may improve its ability to control health problems and lessen side effects. When you take your medicines the way they're meant to be used, you can avoid risks and get the biggest health benefits.

# What else can you do to help improve your adherence?

- If you have trouble remembering to take your medicine or are confused about the directions, set reminders on your phone or use pillboxes to help sort them.
- Talk to your pharmacist. They may be able to simplify your dosing choices.
- Use pharmacy reminder services or mobile phone apps.
- If you're feeling side effects from your medicine, talk to your doctor. There may be other options you can try that may lessen or prevent side effects so you can take your medicine as directed without worry.
- If your medicine is too costly, ask your doctor if there is a generic or less costly alternative that may work for you.



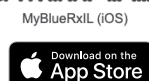
## Ask for Help

Your medicines play a vital role in keeping you healthy. If you're having trouble, ask for help. Your doctor or pharmacist can help you find a plan to stay on top of your prescriptions. You may also ask to speak with a pharmacist on BCBSIL's pharmaceutical care management team by calling the number on the back of your card.

**Scan a QR code to  
download the app**



Download the free pharmacy app, **MyBlueRxIL**, from the App Store or Google Play to better manage your prescriptions drugs on the go.



# It's All About Diabetes



Living with diabetes can be a challenge. But maintaining close-to-normal levels of blood sugar has been shown to reduce the risk of diabetes-related problems. That's why monitoring your blood sugar levels with a blood glucose meter is important for managing diabetes.

## Choosing a Blood Glucose Meter

When choosing a meter, it often comes down to the features you're looking for. Here are a few things to consider when making your choice:

- How does the meter score for accuracy? Does it come with a control solution or test strip to check for accuracy?
- Does the meter fit in your backpack, supplies kit or purse?
- How skillful are you at handling those test strips? You might want to try a meter that uses cartridges instead of individual strips.
- How much blood does the meter require? Less is better.
- Do you want to download results to a computer or email them to your doctor's office?
- Interested in alternative site testing? There are meters that can test samples from various places on the body.

## Checking Your Blood Glucose

Regular blood glucose checks and consistent record-keeping give you a good picture of where you are in your diabetes care.

Checks tell you how often your blood glucose levels are in your target range. Your target range is a personalized blood glucose range that you set with your doctor. Once you know how often and when to check, stick to the schedule and check at those times each day.

Keep a daily log recording your levels. Then take your log with you when you visit your doctor or other members of your diabetes care team. The information in your log will let them know how you are doing.

For more information about diabetes, go to **bcbsil.com**, log in to Blue Access for Members<sup>SM</sup> and click on 'Wellness', click on 'Articles' and then select 'Diabetes' from the options. Blue Cross and Blue Shield of Illinois offers certain blood glucose meters to members with diabetes at no additional charge.



# Glucose Meters Are Available to You

BCBSIL is offering you a choice of the blood glucose meters below at no additional charge for a limited time to help you manage your condition. This offer is available through December 31, 2024.\*

If you have BCBSIL prescription drug coverage, CONTOUR®NEXT or OneTouch® Verio test strips for the meters below are listed as preferred brands on your drug list. Coverage and payment levels for non-preferred brand test strips may vary, depending on your pharmacy benefit plan.

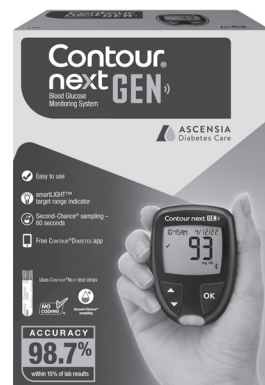
**Please review these options and ask your doctor which meter best fits your needs. You can use the coupon below to visit an in-network pharmacy and pick up your meter. Check [myprime.com](https://myprime.com) for a list of pharmacies if you have BCBSIL prescription drug coverage.**

## CONTOUR®NEXT Blood Glucose Monitoring Systems

To order a CONTOUR NEXT meter to be shipped directly to you, call **800-401-8440** and use the ID code **BDC-HCS**.

- CONTOUR NEXT GEN Blood Glucose Monitoring System
- CONTOUR NEXT EZ Blood Glucose Monitoring System

Visit [contournext.com](https://contournext.com) for more detailed descriptions on these meters.



## LifeScan OneTouch® Blood Glucose Meters

Use the coupon below to pick up your meter at an in-network pharmacy. For any questions regarding the OneTouch® glucose meters, call **1-800-277-8862**.

- OneTouch Verio Reflect®
- Verio Flex® Meter

Visit [onetouch.com](https://onetouch.com) for more detailed descriptions on these meters.



**Visit your local pharmacy to get your free meter today!**

## FREE CONTOUR®NEXT meter

**RxBin #:** 018844  
**PCN #:** 3F  
**Group #:** MGD CARE  
**ID #:** CNMC7246982  
**Exp. Date:** 12/31/2024

Transmit the claim on-line to RxSolutions. Processor requires Valid Prescriber ID#, Patient Name, and DOB to adjudicate claim. Please remove the ID# from the patient profile after claim is processed. For assistance in filing this claim, please call the Help Desk at 1-855-282-4888. Ascensia Diabetes Care reserves the right to change or terminate this program at any time without notice.

## FREE OneTouch® meter

**RxBin #:** 601341  
**PCN #:** OHS  
**Group #:** OH6504201  
**ID #:** NOCHARGEMETR  
**Exp. Date:** 12/31/2024

Submit this claim to Opus Health™ for reimbursement plus a dispensing fee. Offer valid for one meter per patient every 36 months. This offer from LifeScan, Inc. can only be redeemed where OneTouch® products are sold and prescriptions can be processed. Questions? Call 1-800-364-4767.

\*Offer valid for qualified patients with diabetes and subject to availability. Requires a valid prescription. Offer good while supplies last. Void where prohibited by law. Limit one meter per person. Products provided as a free sample may not be resold or submitted to any federal/state insurance or 3rd Party payer for reimbursement.

**RESTRICTIONS:** Offer not valid for prescriptions reimbursed under state or federal government funded program (including but not limited to Medicare, Medicare Advantage, Medicaid, Medigap, VA, DOD, or Tricare). If patient is eligible for drug benefits under such program, offer not valid.

**Disclaimer:** This information is not intended to be a substitute for professional medical advice. If you are under the care of a doctor and receive advice different from the information contained in this flier, follow the doctor's advice. See your doctor if you are experiencing any diabetes symptoms or health problems.

Third-Party brand names are the property of their respective owners. MyPrime.com is an online resource offered by Prime Therapeutics LLC, a pharmacy benefit manager contracted by Blue Cross and Blue Shield of Illinois to administer prescription drug benefits.

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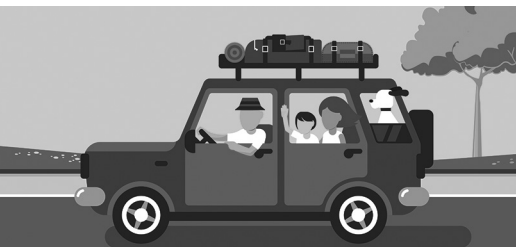


# Make More of Today and all Your Days!

## Use These Programs to Help You Live Healthier

Taking one, small, first step can set you on a path to better health throughout your life. Whether you need support for a specific health issue or you're looking to boost your overall wellbeing, you'll have help along the way. Here are a few things you can do with the tools included with your Blue Cross and Blue Shield of Illinois plan:

- Improve your mental health with digital programs for stress, depression, panic, resiliency and more
- Get help to manage your diabetes, high blood pressure or joint and spine pain
- Join a weight-loss program
- Download apps for support with fertility, menopause, pregnancy and parenting issues
- Talk with a nurse, any time, day or night
- Work with a coach or complete online programs to help reach your wellness goals
- Earn rewards for healthy activities
- Access a nationwide network of fitness centers\*



### Learn more about your health and wellness programs:

1. Go to [bcbsil.com](https://www.bcbsil.com).
2. Register for Blue Access for Members<sup>SM</sup>.
3. Click the Wellness tab.

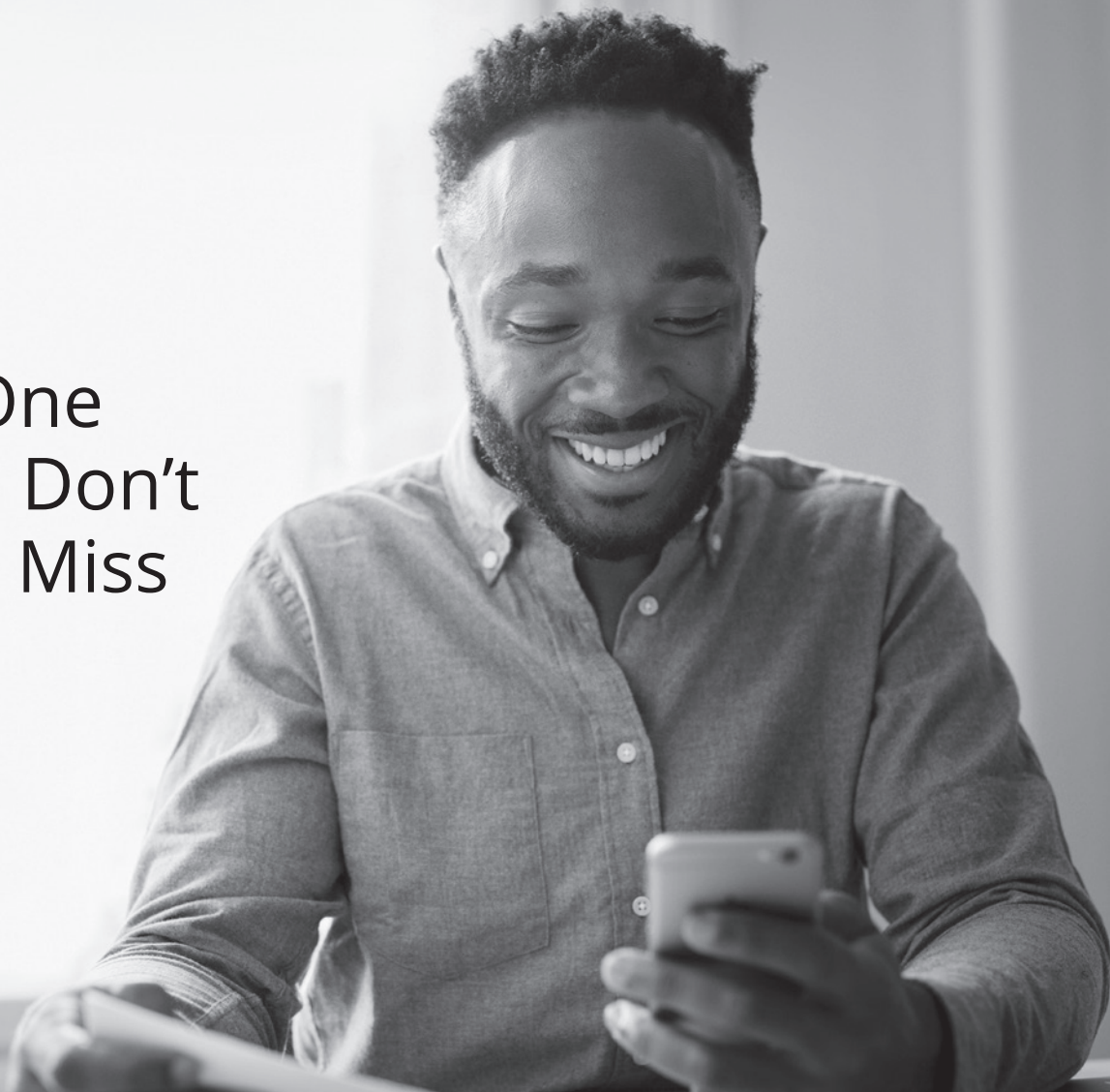
These programs do not replace the care of a doctor. Talk to your doctor about any health questions or concerns.

\*Fees apply. Individuals must be at least 18 years old to purchase a membership. The Fitness Program is provided by Tivity Health™, an independent contractor that administers the Prime Network of fitness centers. The Prime Network is made up of independently owned and operated fitness centers.

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# Here's One Call You Don't Want to Miss



If you get a call from Blue Cross and Blue Shield of Illinois (BCBSIL), we're calling to help you take good care of your health. Please answer or call us back.

Your health plan includes support for you and your covered family members from nurses and other medical professionals called health advisors.\* This extra help is at no added cost to you.

## **BCBSIL may call to help you:**

- Get the care you need for serious illnesses or injuries
- Have a healthy pregnancy and baby
- If you have been in the hospital or have had a major surgery

Calls from health advisors are not sales calls. We may ask you for information, like your name, date of birth or home address, to make sure that we are talking to the right person.

If we miss you, we will leave a message with a number for you to call us back at your convenience. We're here for you!

## **Connect with Us – Your Way**

You can set the time you want your health advisor to call or send them messages in your Blue Access for Members<sup>SM</sup> account.

They can also email or text you helpful information. Any information you share with BCBSIL is confidential, as required by law.





# 24/7 Nurseline

## Nurses available anytime you need them.

Health happens – good or bad, 24 hours a day, seven days a week. That is why we have registered nurses waiting to talk to you whenever you call our 24/7 Nurseline\*.

Our nurses can answer your health questions and try to help you decide whether you should go to the emergency room or urgent care center or make an appointment with your doctor. You can also call the 24/7 Nurseline whenever you or your covered family members need answers to health questions about:

- Asthma
- Dizziness or severe headaches
- Cuts or burns
- Back pain
- High fever
- Sore throat
- Diabetes
- A baby's nonstop crying
- And much more

Plus when you call, you can access an audio library of more than 1,000 health topics – from allergies to surgeries – with more than 500 topics available in Spanish.

So, put the 24/7 Nurseline phone number in your contacts today, because health happens 24/7.



Call the 24/7 Nurseline number on the back of your member ID card.

Hours of Operation:  
**Anytime**

A black and white photograph of a smiling pregnant woman being embraced from behind by her partner. They are both looking at each other and smiling. The woman is wearing a light-colored button-down shirt, and the man is wearing a patterned sweater. They are standing in front of a large window with multiple panes.

# Special Beginnings®

Give your baby a healthy start.

## It's never too early to start taking care of your baby.

That's why you should join the Special Beginnings program as soon as you know you are pregnant.

The **Special Beginnings** maternity program supports you from early pregnancy until six weeks after delivery. An experienced Blue Cross and Blue Shield of Illinois staff member will contact you and:

- Ask you questions to determine what support you will need
- Send you helpful information and a free e-book about having a healthy pregnancy and baby
- Answer any questions you have and help you plan your care with your doctor
- Assist you with managing high-risk conditions such as gestational diabetes and preeclampsia

**Take good care of yourself and your baby — join Special Beginnings today!**

**Enrollment is free, easy and confidential.**

**Call 888-421-7781, 8 a.m. - 4:30 p.m., CST, as soon as you find out you're pregnant.**



# It's Okay to Need Help

**Take care of your mental health to cope with what life brings your way.**

If you struggle with thoughts or feelings that make it harder to get through your day, you're not alone. About half of people in the U.S. will experience a mental health concern at some point in their lives.<sup>1</sup>

Care from a mental health expert can help you manage your emotions and deal with challenges.

## **Mental health is just as important as physical health.**

Your health plan includes access to mental health care like therapy and medicines that might help. You and your family members can get support for issues such as:

- Depression
- Anxiety and panic attacks
- Substance use
- Attention deficit (ADHD/ADD)
- Autism
- Bipolar
- Eating disorders

## **Your journey is one-of-a-kind.**

Whether you need support to get through everyday life or a major crisis, seeking help is the first step to getting better.

Find a provider who can help get you where you want to be. Many offer phone or video visits for your convenience.

- 1. Go to [bcbsil.com](https://bcbsil.com).**
- 2. Then, click **Find Care**.**





## More Resources for Your Mental Wellbeing

### Digital Mental Health

Help for stress, depression, panic, resilience and other mental health concerns is just a click away. Confidential online programs are available through Learn to Live<sup>2</sup> at no added cost to you. Log in at [bcbsil.com](https://bcbsil.com), then go to **Wellness** to learn more.

### When you're ready, we're here.

**Taking the first step isn't easy. But you don't have to take it alone. If you're facing a mental health issue, we have experts who can help you learn about your condition and treatment options. Your personal health details won't be shared with your employer. We can also help you find a provider and understand your mental health benefits.**

**Don't be afraid to reach out — call the Customer Service or behavioral health number on the back of your member ID card.**

1. Centers for Disease Control and Prevention, 2022. [cdc.gov/mentalhealth/learn/index.htm](https://cdc.gov/mentalhealth/learn/index.htm)

2. Learn to Live provides educational behavioral health programs; members considering further medical treatment should consult with a physician.

The Behavioral Health program is available only to those members whose health plans include behavioral health benefits through Blue Cross and Blue Shield of Illinois. Check your benefit booklet, ask your group administrator or call the Customer Service number on the back of your member ID card to verify that you have these services. Member communications and information from the program are not meant to replace the advice of health care professionals. Members are encouraged to seek the advice of their doctors or behavioral health specialist to discuss their health care needs. Decisions regarding course and place of treatment remain with the member and his or her health care providers.

Learn to Live, Inc. is an independent company that provides online behavioral health programs and tools for members with coverage through Blue Cross and Blue Shield of Illinois. BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.

Blue Cross®, Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.



# Experience Wellness Your Way

Well onTarget® gives you the tools and resources to create your personal journey — no matter where you may be on your path to wellness.

Well onTarget can give you the support you need to make healthy choices — while rewarding you for your hard work.

## Member Wellness Portal

The heart of Well onTarget is the member portal, available at [wellontarget.com](http://wellontarget.com)\*. It links you to a suite of inviting programs and tools.

- **Health Assessment (HA)**<sup>1</sup>: The HA presents a series of questions to learn more about you. After you take the HA, you will get a personal and confidential wellness report. The report offers you tips for living your healthiest life. Your answers will help tailor the Well onTarget portal with the programs that may help you reach your goals. If you choose, you can share this report with your health care provider.
- **Self-Management Programs**: These programs let you work at your own pace to reach your health goals. Learn more about nutrition, fitness, losing weight, quitting smoking, managing stress and more. Track your progress as you make your way through each lesson. Reach your milestones and earn Blue Points<sup>SM, 2</sup>.

Start experiencing the wellness portal today. Go to [wellontarget.com](http://wellontarget.com).

Well onTarget®

\*Members can use their Blue Access for Members<sup>SM</sup> credentials to access the [wellontarget.com](http://wellontarget.com) site.

- **Online Wellness Challenges:** Challenge yourself to meet your wellness goals.
- **Tools and trackers:** These resources can help keep you on course while making wellness fun. Use symptom checkers and health trackers.
- **Fitness Tracking:** Track your fitness activity using popular fitness devices and mobile apps.
- **Blue Points Program:** Blue Points can help motivate you to maintain a healthy lifestyle. Earn points for participating in wellness activities. You can redeem points in the online shopping mall.<sup>3</sup>
- **Health and wellness content:** Reader-friendly articles about conditions and medicines.

## Fitness Program

Fitness can be easy, fun and affordable. The Fitness Program gives you unlimited access to a nationwide network of more than 10,000 fitness locations. You can visit locations while you're on vacation or traveling for work.

Other program perks include:

- **No long-term contract:** Membership is month to month. Flexible plans from \$19 to \$99 per month and studio classes are available.<sup>4</sup>
- **Blue Points:** Get 2,500 points for joining the Fitness Program. Earn additional points for weekly visits.
- **Convenient payment:** Monthly fees are paid via automatic credit card or bank account withdrawals.
- **Web resources:** You can go online to search for locations and track your visits.
- **Complementary and Alternative Medicine (CAM):** Discounts Through the Whole Health Living Choices Program, a nationwide network of 40,000 health and well-being providers, such as acupuncturists, massage therapists and personal trainers. Register at [whlchoices.com](http://whlchoices.com).

It's easy to join the Fitness Program! Just call the toll-free number **888-762-BLUE (2583)** Monday through Friday, between 7 a.m. and 7 p.m. CT (6 a.m. and 6 p.m. MT).

## Wellness Program Questions?

Call Customer Service at **877-806-9380**.



## Take Wellness on the Go

Check out the AlwaysOn Wellness mobile app, available for iPhone® and Android™ smartphones. It can help you work on your health and wellness goals — anytime and anywhere.

1. Well onTarget is a voluntary wellness program. Completion of the Health Assessment is not required for participation in the program.

2. Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal at [wellontarget.com](http://wellontarget.com) for further information.

3. Member agrees to comply with all applicable federal, state and local laws, including making all disclosures and paying all taxes with respect to their receipt of any reward.

4. Taxes apply. Individuals must be at least 18 years old to purchase a membership. Dependents, 16-17 years old, can join but must be accompanied to the location by a parent/guardian who is also a Fitness Program member. Check your preferred location to see their membership age policy. Underage dependents can log in and join through the primary member's account as an "additional member."

The Fitness Program is provided by Tivity Health™ Services, LLC, an independent contractor which administers the Prime® Network of fitness centers. The Prime Network is made up of independently-owned and managed fitness centers. Prime is a registered trademark of Tivity Health, Inc. Tivity Health is a trademark of Tivity Health, Inc.

Blue Cross®, Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.





# Are You Living a Healthy Lifestyle?

## Take the Health Assessment and Find Out

### Answer a few questions to get your wellness report.

By keeping track of your goals and monitoring your current health status, you have a greater chance of seeing those goals through to completion. Your Health Assessment is the suggested starting point once you've registered on the portal. See logon instructions on page two.

### Can you spare some time for your health?

It's easy. You'll be asked a variety of basic lifestyle questions. Share some details about your diet, exercise, sleep and other daily activities.<sup>1</sup>

### You'll get feedback immediately.

Discover your healthiest habits along with top risks and strengths revealed in your Personal Wellness Report.

You can explore helpful tips, strategies and personalized digital tools to jump start your health journey.

After you log in, watch the Welcome video to learn more about the portal and valuable resources including: self-management programs, fitness and nutrition device integration, personal challenges and more.

You'll stay motivated by tracking your progress using the health trackers and self-progress check-in tools to help reach your personal health goals.

Well onTarget®

The Health Assessment (HA) consists of nine parts, which you can complete all at once or over time, as your schedule permits. These parts include questions about your:

- Diet
- Physical activity
- Tobacco use
- Emotional health
- Health at work and on the road

### Get started today.

You can earn 2,500 Blue Points<sup>SM2</sup> for taking your HA. With the Blue Points program, you will be able to earn points for regularly participating in many different healthy activities. You can redeem these points in the online shopping mall, which provides a wide variety of merchandise. Follow these simple steps to get started:

1. **Visit [wellontarget.com](http://wellontarget.com) and log in.** If you have an existing Blue Access for Members<sup>SM</sup> (BAM<sup>SM</sup>) account, use your BAM username and password. If you aren't a registered user yet, click "Register Now" to create an account.
2. **If you have not taken your HA, there will be a pop-up notification after you log in.** You can also take your HA by clicking on "Start" in the "Health Assessment" box at the top of your dashboard. Once you have completed the HA, your reports will be available in this section.

### How will the Health Assessment be personalized?

You will begin by answering a few basic questions. Then, you'll answer more detailed questions based on your answers to the first set of questions. Your health status and lifestyle will determine which questions you will be asked.

Your answers will help tailor the Well onTarget Member Wellness Portal with programs that could help you reach your health goals. You can take the HA twice a year to check your progress and earn Blue Points.



### Take Your Health Assessment on the Go

Check out the Well onTarget mobile app (AlwaysOn), available for iPhone® and Android™ smartphones. You can complete your HA and work on your health and wellness goals — anytime and anywhere.



### What should I do with my results?

After completing the HA, you will receive a confidential Personal Wellness Report. This can show you how you are doing currently and where and how you can improve.

When you know your risks, you can choose your best options to avoid them. When you know your strengths, you can decide to build on them.

**Have questions about the HA or the Well onTarget program? Call 877-806-9380.**

<sup>1</sup> Well onTarget is a voluntary wellness program. Completion of the Health Assessment is not required for participation in the program.

<sup>2</sup> Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal at [wellontarget.com](http://wellontarget.com) for further information. Member agrees to comply with all applicable federal, state and local laws, including making all disclosures and paying all taxes with respect to their receipt of any reward.

AlwaysOn is owned and operated by Onlife Health Inc. an independent company that provides digital health management for members with coverage through Blue Cross and Blue Shield Plans in Illinois, Montana, New Mexico, Oklahoma and Texas. No endorsement, representations or warranties regarding third-party vendors and the products and services offered by them are being made.





# Live Well with the Well onTarget Member Wellness Portal

The Well onTarget® Member Wellness Portal at **wellontarget.com** provides you with tools to help you set and reach your wellness goals. The portal is user-friendly, so you can find everything you need quickly and easily.

## Explore Your Wellness World

When you log in to your portal, you will find a wide variety of health and wellness resources, including:

- The Health Assessment (HA)
- Self-Management Programs
- Health trackers
- Trusted news and health education content

## See Your Stats in a Flash

Everything you want to see quickly is on your dashboard. The dashboard shows all of your Well onTarget programs. You can see where you are today compared with where you were when you started. You can also read the latest health news, check your activity progress and more.

## Take a Snapshot of Your Health

The HA asks you questions about your health and habits.<sup>1</sup> You then get a Personal Wellness Report. This report suggests ways to make positive lifestyle changes. Your report can also help you decide which Well onTarget program to start first to get the most benefit. You can even print a Provider Report to share with your doctor.

Well onTarget®



## Blue Points<sup>SM</sup> Program<sup>2</sup>

Small rewards may motivate you to make positive changes to meet your wellness goals. With Well onTarget, you can earn Blue Points for making healthy choices. If you enroll in the Fitness Program or take your HA, you earn points.<sup>3</sup> You can also earn points when you achieve milestones in the Self-Management Programs. Redeem your Blue Points in the online shopping mall, which offers a wide variety of merchandise.<sup>4</sup>

## Health Tools and Trackers

Knowing what you eat and how much you work out can help you reach your goals. But keeping track of all you do can be time-consuming. To make it easy, the portal has trackers that let you record how much sleep you get, your stress levels, your blood pressure readings and your cholesterol levels.

The portal also offers a symptom checker. When you don't feel well, this tool can help you decide if you should see a doctor.

## Self-Management Programs

These programs consist of:

1. Interactive programs with learning activities and content that focus on behavioral changes to reinforce healthier habits.
2. Educational programs that inform about symptoms, treatment options and lifestyle changes.

These two learning methods allow you to study on your own time and may help you get to the next level of wellness. Topics include nutrition, weight management, physical activity, stress management, tobacco cessation and more.

## Fitness Tracking

Earn Blue Points for tracking your fitness activity using popular fitness devices and mobile apps.



### Take Wellness on the Go

Check out the Well onTarget AlwaysOn Wellness mobile app, available for iPhone® and Android™ smartphones. It can help you work on your wellness goals — anytime and anywhere.

1. Well onTarget is a voluntary wellness program. Completion of the Health Assessment is not required for participation in the program.

2. Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal for more information.

3. This does not apply to points you earn for completing Fitness Program activities.

4. Member agrees to comply with all applicable federal, state and local laws, including making all disclosures and paying all taxes with respect to their receipt of any reward.

The Fitness Program is provided by Tivity Health®, an independent contractor that administers the Prime Network of fitness centers. The Prime Network is made up of independently owned and operated fitness centers.



# Experience a New Kind of Wellness — Log In to the Well onTarget® Portal

Well onTarget is designed to give you the support you need to make healthy lifestyle choices — and reward you for your hard work.

## **Member Wellness Portal**

The Well onTarget Wellness Portal uses the latest technology to give you the tools you need for better health. Your wellness journey begins with a suggested list of activities based on the information you provided in the Health Assessment.\*

Well onTarget®

# Now you have a step-by-step plan to guide you on the way to living your best life.

The suite of programs and tools include:

- **Digital Self-management Programs:** Learn about nutrition, fitness, weight loss, quitting smoking, managing stress and more!
- **Health and Wellness Library:** The health library has useful articles, podcasts and videos on health topics that are important to you.
- **Blue Points<sup>SM</sup> Program:**\*\* Earn points for wellness activities. Redeem your points for a wide variety of merchandise in the online shopping mall.
- **Tools and Trackers:** These interactive resources help keep you on track while making wellness fun.
- **Health Assessment:** Answer some questions to learn more about your health and receive a personal wellness report.
- **Fitness and Nutrition Tracking:** Get Blue Points for tracking activity with popular devices and mobile apps.
- **Personal Challenges:** Join a personal challenge to help you reach your goals. There are over 30 challenges, so you can choose the best one to fit your wellness journey. Topics include stress, sleep, physical activity and more!

## How to Access the Portal

Use your Blue Access for Members<sup>SM</sup> (BAM<sup>SM</sup>) account:

- Log in to BAM at [bcbsil.com/member](https://bcbsil.com/member). If this is your first time logging in, you will need to register your account. Click **Create an Account** on the login screen.
- Once you are in BAM, click on the **Wellness tab**. Then click on Visit Well onTarget and you will be taken to the Well onTarget portal.

## Questions?

If you have any questions about Well onTarget, call Customer Service at **877-806-9380**.



**Log in to the Well onTarget  
Member Wellness Portal today!**

\*Well onTarget is a voluntary wellness program. Completion of the Health Assessment is not required for participation in the program.

\*\*Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal for further information. BCBSil makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.





# Prepare for Your Life-Changing Journey

## Women's and Family Health Pregnancy, Parenting and Menopause Support

Wherever you are in your journey, Blue Cross and Blue Shield of Illinois (BCBSIL) is here to support you at no extra cost.

- **Ovia Health™** apps are for tracking your cycle, pregnancy, parenting and menopause support. The apps are available in English and Spanish\*, and provide videos, tips, coaching and more.
  - **Ovia:** Track your cycle, predict when you are more likely to get pregnant or receive menopause support when the time comes.
  - **Ovia Pregnancy:** Monitor your pregnancy and baby's growth week by week leading up to your baby's due date.
  - **Ovia Parenting:** Keep up with your child's growth and milestones.
- **Well onTarget®** has self-guided courses about pregnancy that you can take online, covering topics such as healthy foods, body changes and labor.

Plus, if your pregnancy is high-risk, BCBSIL will provide support from maternity specialists to help you care for yourself and your baby. Having a baby changes everything, so use these tools to help you get ready.

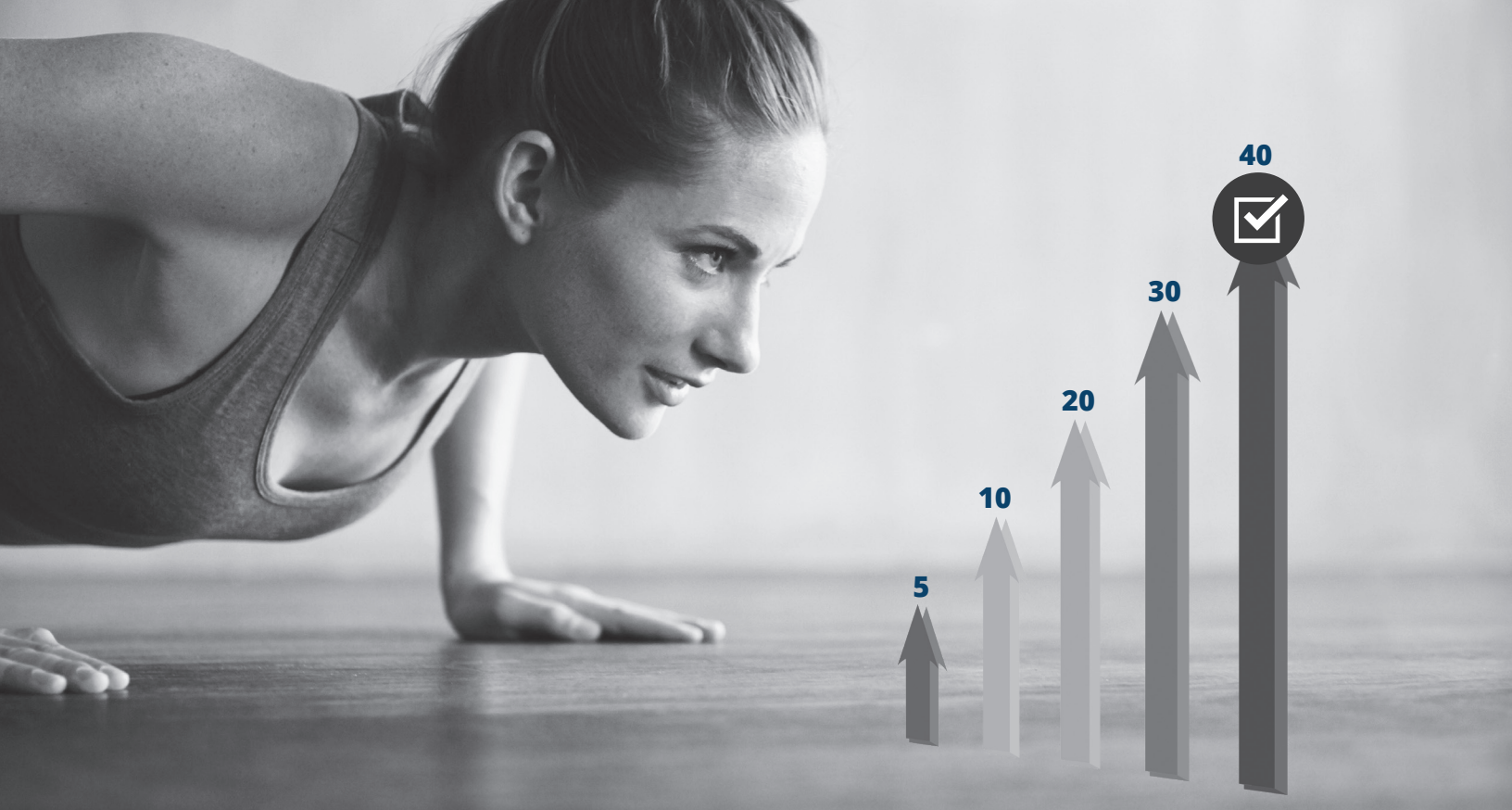


Download any of the Ovia Health apps from the Apple App

Store or Google Play. During sign-up, make sure to choose "I have Ovia Health as a benefit." Then select BCBSIL as your health plan and enter your employer name (optional). Also, visit [wellontarget.com](https://wellontarget.com) to explore our online courses. Please call 888-421-7781 if you have questions or want to learn more.

Ovia Health is an independent company that provides maternity and family benefits solutions for Blue Cross and Blue Shield of Illinois. Well onTarget is a voluntary wellness program. Completion of the Health Assessment is not required for participation in the program.

\*To access the Spanish version of the Ovia, Ovia Pregnancy and Ovia Parenting apps, you must select "Español" as the language preference in your mobile phone or device settings.



# Make Your Fitness Program Membership Work for You

## The Fitness Program gives you flexible options to help you live a healthy lifestyle.

Since you are a Blue Cross and Blue Shield of Illinois (BCBSIL) member, the Fitness Program is available exclusively to you and your covered dependents (age 16 and older).<sup>\*</sup> The program gives you access to a nationwide network of fitness locations. Choose one location close to home and one near work, or visit locations while traveling.

### Other program perks include:

- **Flexible Gym Network:** A choice of gym networks to fit your budget and preferences.<sup>\*\*</sup>

Options	Digital Only	Base	Core	Power	Elite
Monthly Fee	\$10	\$19	\$29	\$39	\$99
Gym Facility Network Size <sup>†</sup>	Digital Access Only	3,000	7,500	12,000	12,400
\$19 Enrollment Fee (No Enrollment fee for Digital Only Option)					

- **Studio Class Network:** Boutique-style classes and specialty gyms with pay-as-you-go option and 30% off every 10th class.
- **Family Friendly:** Expands gym network access to your covered dependents at a bundled price discount.
- **Convenient Payment:** Monthly fees are paid via automatic credit card or bank account withdrawals.

<sup>†</sup> Represents possible network locations. Check local listings for exact network options as some locations may not participate. Network locations are subject to change without notice.

## Features

- **Mobile App:** Allows members to access location search, studio class registration, location check-in and activity history.

Check out the Well onTarget Fitness mobile app, available from Apple® or Google Play™. It can help you work on your fitness goals — anytime and anywhere.

- **Real-time Data:** Provided to the mobile app and Well onTarget portals.
- **Complementary and Alternative Medicine (CAM) Discounts Through the WholeHealth Living Choices Program:** Save money through a nationwide network of 40,000 health and well-being providers, such as acupuncturists, massage therapists and personal trainers. To take advantage of these discounts, register at [www.whlchoices.com](http://www.whlchoices.com).\*\*\*
- **Blue Points<sup>SM</sup>:** Get 2,500 points for joining the Fitness Program. Earn additional points for weekly visits. You can redeem points for apparel, books, electronics, health and personal care items, music and sporting goods.\*\*\*\*
- **Web Resources:** You can go online to find fitness locations and track your visits.

- **Digital Fitness:** Stay active from the comfort of your own home. Access thousands of digital fitness videos and live classes including cardio, bootcamp, barre, yoga, and more through an online platform. Digital access is included with Base, Core, Power and Elite memberships. You can also join the Digital Only plan option if only interested in access to digital fitness options.

## Are You Ready for Fitness?

### It's easy to sign up:

1. Go to [bcbsil.com](http://bcbsil.com) and log in to Blue Access for Members<sup>SM</sup>.
2. Select the Wellness tab on the top navigation bar of the Dashboard page. Then scroll down to the Fitness Program section and click on **Learn More**.
3. Complete registration form.
4. Verify your personal information and method of payment. Print or download your Fitness Program membership ID card. You may also request to receive the ID card in the mail.
5. Visit a fitness location today!

Prefer to sign up by phone or have questions about the Fitness Program? Just call the toll-free number **888-762-BLUE (2583)** Monday through Friday, between 7 a.m. and 7 p.m., CT (6 a.m. and 6 p.m., MT).

## Find fitness buddies, take a digital class and try something new!

Join the Fitness Program today to help you reach your health and wellness goals.



\*Individuals must be 18 years old to purchase a membership. Dependents, 16-17 years old, can join but must be accompanied to the location by a parent/guardian who is also a Fitness Program member. Check your preferred location to see their membership age policy. Underage dependents can login and join through the primary member's account as an "additional member."

\*\*Taxes may apply. Individuals must be at least 18 years old to purchase a membership.

The Fitness Program is provided by Tivity Health™, an independent contractor that administers the Prime Network of fitness locations. The Prime Network is made up of independently owned and operated fitness locations.

The WholeHealth Living Choices program is administered by Tivity Health™ Services, LLC. This is NOT insurance. Some of the services offered through this program may be covered by a health plan. The relationship between these vendors and Blue Cross and Blue Shield of Illinois is that of independent contractors.

\*\*\*WholeHealth Living Choices is not available in Montana and Oklahoma.

Participation in the Well onTarget program, including the completion of a Health Assessment, is voluntary and you are not required to participate. Visit Well onTarget for complete details and terms and conditions.

Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal for more information.

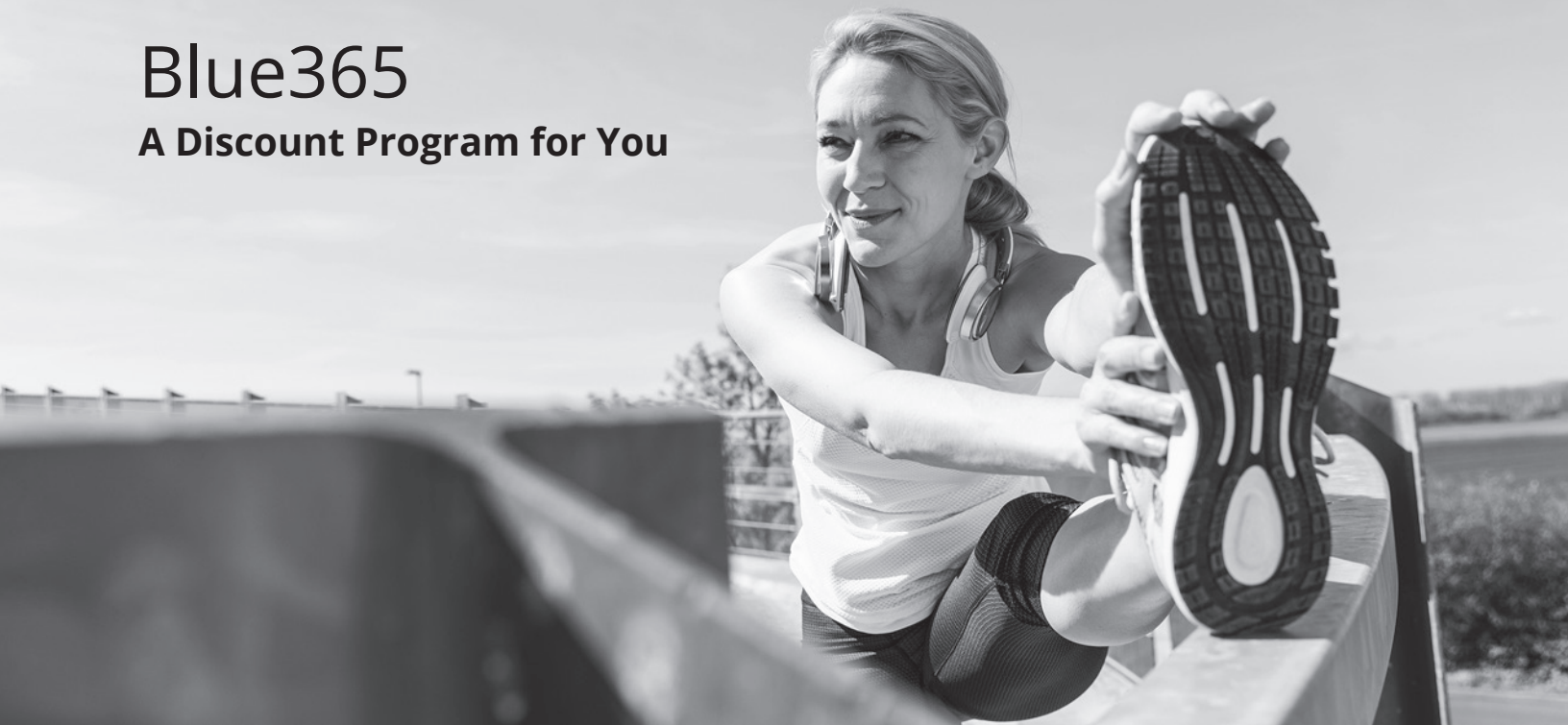
\*\*\*\*Member agrees to comply with all applicable federal, state and local laws, including making all disclosures and paying all taxes with respect to their receipt of any reward.

BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.



# Blue365

## A Discount Program for You



Blue365 is just one more advantage you have by being a Blue Cross and Blue Shield of Illinois (BCBSIL) member. With this program, you may save money on health and wellness products and services from top retailers that are not covered by insurance. There are no claims to file and no referrals or preauthorizations. Once you sign up for Blue365 at [blue365deals.com/bcbsil](https://blue365deals.com/bcbsil), weekly “Featured Deals” will be emailed to you. These deals offer special savings for a short period of time.

### Below are some of the ongoing deals offered through Blue365.

#### **EyeMed® | Davis Vision®**

You can save on eye exams, eyeglasses, contact lenses and accessories. You have access to national and regional retail stores and local eye doctors. You may also get possible savings on laser vision correction.

#### **TruHearing® | Beltone™ | Start Hearing**

You could get savings on hearing tests, evaluations and hearing aids. Discounts may also be available for your immediate family members.

#### **Dental Solutions<sup>SM</sup>**

You could get dental savings with Dental Solutions. You may receive a dental discount card that provides access to discounts of up to 50% at more than 70,000 dentists and more than 254,000 locations.\*

#### **Sun Basket | Nutrisystem®**

Help reach your weight loss goals with savings from leading programs. You may save on healthy meals, membership fees (where applicable), nutritional products and services.

**See all the Blue365 deals and learn more at [blue365deals.com/bcbsil](https://blue365deals.com/bcbsil).**





### **Fitbit®**

You can customize your workout routine with Fitbit's family of trackers and smartwatches that can be employed seamlessly with your lifestyle, your budget and your goals. You'll get a 20% discount on Fitbit devices plus free shipping.

### **Reebok | SKECHERS®**

Reebok, a trusted brand for more than 100 years, makes top athletic equipment for all people, from professional athletes to kids playing soccer. Get 20% off select models. SKECHERS, an award-winning leader in the footwear industry, offers exclusive pricing on select men's and women's styles. You can get 30% off plus free shipping for your online orders.

### **InVite® Health**

InVite Health offers quality vitamins and supplements, educational resources and a team of health care experts for guidance to select the correct product at the best value. Get 50% off the retail price of non-genetically modified microorganism (non-GMO) vitamins and supplements.

### **Livekick**

Livekick is the future of private fitness. Choose from training or yoga over live video with a private coach. Get fit and feel healthier with action-packed 30-minute sessions that you can do from home, your gym or your hotel while traveling. Get a free two-week trial and 30% off a monthly plan on any Live Online Personal Training.

### **eMindful**

Get up to a 50% discount on any of eMindful's live streaming or recorded premium courses. Apply mindfulness to your life including stress reduction, mindful eating, chronic pain management, yoga, Qigong movements and more.

**For more great deals or to  
learn more about Blue365,  
visit [blue365deals.com/bcbsil](https://blue365deals.com/bcbsil).**

The relationship between these vendors and Blue Cross and Blue Shield of Illinois (BCBSIL) is that of independent contractors. BCBSIL makes no endorsement, representations or warranties regarding any products or services offered by the above-mentioned vendors.

\* Dental Solutions requires a \$9.95 signup and \$6 monthly fee.

Blue365 is a discount program only for BCBSIL members. This is NOT insurance. Some of the services offered through this program may be covered under your health plan. You should check your benefit booklet or call the customer service number on the back of your ID card for specific benefit facts. Use of Blue365 does not change monthly payments, nor do costs of the services or products count toward any maximums and/or plan deductibles. Discounts are given only through vendors that take part in this program and may be subject to change. BCBSIL does not guarantee or make any claims or recommendations about the program's services or products. Members should consult their doctor before using these services and products. BCBSIL reserves the right to stop or change this program at any time without notice.



# It's Okay to Need Help

**Take care of your mental health to cope with what life brings your way.**

If you struggle with thoughts or feelings that make it hard to get through your day, you're not alone. About half of all people in the U.S. will experience a mental health concern at some point in their lives.<sup>1</sup> Care from a mental health expert can help you manage your emotions and deal with challenges.

**Your mental health is just as important as your physical health.**

Remember, your Blue Cross and Blue Shield of Illinois plan includes access to mental health care like therapy and medicines that might help. You and your covered family members can get support for issues such as:

- Depression
- Anxiety and panic attacks
- Substance use
- Attention deficit (ADHD/ADD)
- Autism spectrum disorder
- Bipolar disorder
- Eating disorders

## Find a Mental Health Care Provider

Whether you need support to get through everyday life or a major crisis, seeking help is a step to getting better.

Find a provider who can help — in-person, telephone and video services are available.

1. Log in to **bcbsil.com**
2. Select **Find Care**



## Additional Resources for Your Mental Wellbeing

### Digital Mental Health<sup>2</sup>

Help for stress, depression, panic, resilience and other mental health concerns is just a click away. BCBSIL offers confidential online programs with optional coaching support through Learn to Live at no added cost to you. Log in at **bcbsil.com**, then go to **Wellness** to learn more.

### Virtual Care<sup>2</sup>

Skip the waiting room and meet with a mental health professional from the comfort of your own home. A board-certified therapist or psychiatrist can help with a variety of mental health concerns by phone or video. Visit **MDLIVE.com/bcbsil** or **teladoc.com/bcbsil** to schedule an appointment.

### Employee Assistance Program<sup>2</sup>

There may be a time when you need a little extra support through job stress, grief, legal or financial issues, or other life challenges. Your Employee Assistance Program, delivered through ComPsych GuidanceResources, has options for you at no added cost. Talk one-on-one with a counselor or use online resources. Learn more at **guidanceresources.com**, and use the Web ID BCBSILEAP.

### Well onTarget<sup>®2</sup>

Go to **wellontarget.com** to find articles, videos, tools and trackers to help you live healthy and well. Take a six-week, online course to learn to sleep better or handle stress.



Don't be afraid to reach out. Call the number on the back of your member ID card for help and to verify if your health plan benefits include these additional services. Your personal health details won't be shared with your employer.

1. U.S. Department of Health and Human Services, 2023

2. Some services may not be available with all plans. Call the number on the back of your member ID card to verify.

The Behavioral Health program is available only to those members whose health plans include behavioral health benefits through Blue Cross and Blue Shield of Illinois. Check your benefit booklet, ask your group administrator or call the Customer Service number on the back of your member ID card to verify that you have these services. Member communications and information from the program are not meant to replace the advice of health care professionals. Members are encouraged to seek the advice of their doctors or behavioral health specialist to discuss their health care needs. Decisions regarding course and place of treatment remain with the member and his or her health care providers.

Learn to Live provides educational behavioral health programs. Members considering further medical treatment should consult with a physician. Learn to Live, Inc. is an independent company that provides online behavioral health programs and tools for members with coverage through Blue Cross and Blue Shield of Illinois.

Virtual Visits may be limited by plan. For providers licensed in New Mexico and the District of Columbia, Urgent Care service is limited to interactive online video; Behavioral Health service requires video for the initial visit but may use video or audio for follow-up visits, based on the provider's clinical judgment. Behavioral Health is not available on all plans.

MDLIVE is a separate company that operates and administers Virtual Visits for Blue Cross and Blue Shield of Illinois. MDLIVE is solely responsible for its operations and for those of its contracted providers. MDLIVE<sup>®</sup> and the MDLIVE logo are registered trademarks of MDLIVE, Inc., and may not be used without permission.

Teladoc Health is an independent company that has contracted with Blue Cross and Blue Shield of Illinois to operate and administer the Virtual Primary Care program for members with coverage through BCBSIL. Teladoc Health is solely responsible for its operations and for those of its contracted providers.

ComPsych Corp. is an independent company that has contracted with Blue Cross and Blue Shield of Illinois to provide employee assistance services for members with coverage through BCBSIL.

BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.



Blue Cross and Blue Shield of Illinois (BCBSIL) is required to provide you a HIPAA Notice of Privacy Practices as well as a State Notice of Privacy Practices. The HIPAA Notice of Privacy Practices describes how BCBSIL can use or disclose your protected health information and your rights to that information under federal law. The State Notice of Privacy Practices describes how BCBSIL can use or disclose your nonpublic personal financial information and your rights to that information under state law. Please take a few minutes and review these notices. You are encouraged to go to the Blue Access for Members (BAM) portal at [BCBSIL.com](http://BCBSIL.com) to sign up to receive these notices electronically. Our contact information can be found at the end of these notices.

### **HIPAA NOTICE OF PRIVACY PRACTICES – Effective 9/23/13**

#### **YOUR RIGHTS. When it comes to your health information, you have certain rights.**

This section explains your rights and some of our responsibilities to help you.

##### **Get a copy of your health and claims records**

- You can ask to see or get a copy of your health and claims records and other health information we have about you. Ask us how to do this by using the contact information at the end of this notice.
- We will provide a copy or a summary of your health and claims records usually within 30 days of the request. We may charge a reasonable, cost-based fee.

##### **Ask us to correct health and claims records**

- You can ask us to correct your health and claims records if you think they are incorrect or incomplete. Ask us how to do this by using the contact information at the end of this notice.
- We may say “no” to your request. We’ll tell you why in writing within 60 days.

##### **Request confidential communications**

- You can ask us to contact you in a specific way or to send mail to a different address. Ask us how to do this by using the contact information at the end of this notice.
- We will consider all reasonable requests and must say “yes” if you tell us you would be in danger if we do not.

##### **Ask us to limit what we use or share**

- You can ask us **not** to share or use certain health information for treatment, payment or our operations. Ask how to do this by using the contact information at the end of this notice.
- We are not required to agree to your request, and we may say “no” if it would affect your care.

##### **Get a list of those with whom we’ve shared information**

- You can ask for a list (accounting) for six years prior to your request date of when we shared your information, who we shared it with and why. Ask us how to do this by using the contact information at the end of this notice.
- We will include all the disclosures except for those about treatment, payment, and our operations, and certain other disclosures (such as any you asked us to make). We will provide one accounting a year for free, but we may charge a reasonable, cost-based fee if you ask for another one within 12 months.

##### **Get a copy of this Notice**

- You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. To request a copy of this notice, use the contact information at the end of this notice and we will send you one promptly.

##### **Choose someone to act for you**

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices for you.
- We confirm this information before we release them any of your information.



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**File a complaint if you feel your rights are violated**

- You can complain if you feel we have violated your privacy rights by using the contact information at the end of this notice.
- You can also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by calling 1-877-696-6775; or by visiting [www.hhs.gov/ocr/privacy/hipaa/complaints/](http://www.hhs.gov/ocr/privacy/hipaa/complaints/) or by sending a letter to them at: 200 Independence Ave., SW, Washington, D.C. 20201.
- We will not retaliate against you for filing a complaint.

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**YOUR CHOICES. For certain health information, you can tell us your choices about what we share.**

If you have a clear preference on how you want us to share your information in the situations described below, tell us and we will follow your instructions. Use the contact information at the end of this notice.

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**In these cases, you have both the right and choice to tell us to:**

- Share information with your family, close friends, or others involved in payment for your care
- Share information in a disaster or relief situation
- Contact you for fundraising efforts

*If there is a reason you can't tell us who we can share information with, we may share it if we believe it is in your best interest to do so. We may also share information to lessen a serious or imminent threat to health or safety.*

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**We never share your information in these situations unless you give us written permission**

- Marketing purposes
- Sale of your information

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**OUR USES AND DISCLOSURES. How do we use or share your health information?**

We typically use or share your health information in the following ways.

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**Help manage the health care treatment you receive**

- We can use your health information and share it with professionals who are treating you.  
*Example: A doctor sends us information about your diagnosis and treatment plan so we can arrange additional services.*

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**Run our organization**

- We can use and disclose your information to run our organization and contact you when necessary.  
*Example: We use health information to develop better services for you.*

*We can't use any genetic information to decide whether we will give you coverage except for long-term care plans.*

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**Pay for your health Services**

- We can use and disclose your health information since we pay for your health services.  
*Example: We share information about you with your dental plan to coordinate payment for your dental work.*

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**Administer your plan**

- We may disclose your health information to your health plan sponsor for plan administration purposes.  
*Example: If your company contracts with us to provide a health plan, we may provide them certain statistics to explain the premiums we charge.*
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## How else can we use or share your health information?

We are allowed or required to share your information in other ways, usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information go to:  
[www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html)

### Help with public health and safety issues

- We can share your health information for certain situations such as:
  - Preventing disease
  - Helping with product recalls
  - Reporting adverse reactions to medications
  - Reporting suspected abuse, neglect or domestic violence
  - Preventing or reducing a serious threat to anyone's health or safety

### Do research

- We can use or share your information for health research.

### Comply with the law

- We will share information about you when state or federal law requires it, including the Department of Health and Human Services if they want to determine that we are complying with federal privacy laws.

### Respond to organ/tissue donation requests and work with certain professionals

- We can share health information about you with an organ procurement organization.
- We can share information with a medical examiner, coroner or funeral director.

### Address workers compensation, law enforcement, and Other government requests

- We can use or share health information about you:
  - For workers compensation claims
  - For law enforcement purposes or with a law enforcement official
  - With health oversight agencies for activities authorized by law
  - For special government functions such as military, national security, and presidential protective services or with prisons regarding inmates.

### Respond to lawsuits And legal actions

- We can share health information about you in response to an administrative or court order, or in response to a subpoena.

### Certain health information

- State law may provide additional protection on some specific medical conditions or health information. For example, these laws may prohibit us from disclosing or using information related to HIV/AIDS, mental health, alcohol or substance abuse and genetic information without your authorization. In these situations, we will follow the requirements of the state law.

## OUR RESPONSIBILITIES. When it comes to your information, we have certain responsibilities.

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that compromises the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing.

You may change your mind at any time. Let us know in writing if you change your mind.

Additional information about your Privacy Rights can be found @ <https://www.hhs.gov/hipaa/>

## STATE NOTICE OF PRIVACY PRACTICES – Effective 9/23/13

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Blue Cross and Blue Shield of Illinois (BCBSIL) collects nonpublic personal information about you from your insurance application, healthcare claims, payment information and consumer reporting agencies. BCBSIL:

- **Will not** disclose this information, even if your customer relationship with us ends, to any non-affiliated third parties except with your consent or as permitted by law.
- **Will** restrict access to this information to only those employees who perform functions necessary to administer our business and provide services to our customers.
- **Will** maintain security and privacy practices that include physical, technical and administrative safeguards to protect this information from unauthorized access.
- **Will** only use this information to administer your insurance plan, process your claims, ensure proper billing, provide you with customer service and comply with the law.

BCBSIL is able to share this information with certain third parties who either perform functions or services on our behalf or when required by law. These are some examples of third parties that we can share your information with:

- Company affiliates
- Business partners that provide services on our behalf (claims management, marketing, clinical support)
- Insurance brokers or agents, financial services firms, stop-loss carriers
- Regulatory agencies, other governmental entities and law enforcement agencies
- Your Employer Group Health Plan

You have a right to ask us what nonpublic financial information that we have about you and to request access to it.

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### CHANGES TO THESE NOTICES

We have the right to change the terms of these notices, and the changes we make will apply to all information we have about you. The new notices will be available upon request or from our website. We will also mail a copy of the new notices to you as required by law.

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### CONTACT INFORMATION FOR THESE NOTICES

If you would like general information about your privacy rights or would like a copy of these notices, go to:  
[www.bcbsil.com/important-info/hipaa](http://www.bcbsil.com/important-info/hipaa)

If you have specific questions about your rights or these notices, contact us in one of the following ways:

- Call us by using the toll-free number located on the back of your member identification card.
  - Call us at 1-877-361-7594.
  - Write us at Privacy Office Divisional Vice President  
Blue Cross and Blue Shield of Illinois  
P.O. Box 804836  
Chicago, IL 60680-4110
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**REVIEWED: January 2020**

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**Health care coverage is important for everyone.**

We provide free communication aids and services for anyone with a disability or who needs language assistance. We do not discriminate on the basis of race, color, national origin, sex, gender identity, age, sexual orientation, health status or disability.

To receive language or communication assistance free of charge, please call us at 855-710-6984.

If you believe we have failed to provide a service, or think we have discriminated in another way, contact us to file a grievance.

Office of Civil Rights Coordinator  
300 E. Randolph St.  
35th Floor  
Chicago, Illinois 60601

Phone: 855-664-7270 (voicemail)  
TTY/TDD: 855-661-6965  
Fax: 855-661-6960  
Email: [CivilRightsCoordinator@hcsc.net](mailto:CivilRightsCoordinator@hcsc.net)

You may file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, at:

U.S. Dept. of Health & Human Services  
200 Independence Avenue SW  
Room 509F, HHH Building 1019  
Washington, DC 20201

Phone: 800-368-1019  
TTY/TDD: 800-537-7697  
Complaint Portal: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>  
Complaint Forms: <http://www.hhs.gov/ocr/office/file/index.html>

If you, or someone you are helping, have questions, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 855-710-6984.

Español Spanish	Si usted o alguien a quien usted está ayudando tiene preguntas, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 855-710-6984.
العربية Arabic	إن كان لديك أو لدى شخص تساعدك أسئلة، فلدك الحق في الحصول على المساعدة والمعلومات الضرورية بلغتك من دون أية تكلفة. للتحدث مع مترجم فوري، اتصل على الرقم 855-710-6984.
繁體中文 Chinese	如果您，或您正在協助的對象，對此有疑問，您有權利免費以您的母語獲得幫助和訊息。洽詢一位翻譯員，請撥電話 號碼 855-710-6984。
Français French	Si vous, ou quelqu'un que vous êtes en train d'aider, avez des questions, vous avez le droit d'obtenir de l'aide et l'information dans votre langue à aucun coût. Pour parler à un interprète, appelez 855-710-6984.
Deutsch German	Falls Sie oder jemand, dem Sie helfen, Fragen haben, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer 855-710-6984 an.
ગુજરાતી Gujarati	જો તમને અથવા તમે મદદ કરી રહ્યા હોય એવી કોઈ બીજી વ્યક્તિને એસ.બી.એમ. કાયદકમ બાબતે પ્રશ્નો હોય, તો તમને વિના ખર્ચે, તમારી ભાષામાં મદદ અને માહિતી મેળવવાનો હક્ક છે. દુભાષિયા સાથે વાત કરવા માટે આ નંબર 855-710-6984 પર કોલ કરો.
हिंदी Hindi	यदि आपके, या आप जिसकी सहायता कर रहे हैं उसके, प्रश्न हैं, तो आपको अपनी भाषा में निःशुल्क सहायता और जानकारी प्राप्त करने का अधिकार है। किसी अनुवादक से बात करने के लिए 855-710-6984 पर कॉल करें।
Italiano Italian	Se tu o qualcuno che stai aiutando avete domande, hai il diritto di ottenere aiuto e informazioni nella tua lingua gratuitamente. Per parlare con un interprete, puoi chiamare il numero 855-710-6984.
한국어 Korean	만약 귀하 또는 귀하가 돕는 사람이 질문이 있다면 귀하는 무료로 그러한 도움과 정보를 귀하의 언어로 받을 수 있는 권리가 있습니다. 통역사가 필요하시면 855-710-6984 로 전화하십시오.
Diné Navajo	T'áá ni, éí doodago ła'da bika anánílwo'ígíí, na'ídlíkidgo, ts'ídá bee ná ahóótí'i' t'áá níí'k'e níká a'doolwoł dóó bina'ídlíkidgíí bee ní h odoonih. Ata'dahalne'ígíí bich'í' hodiílnih kwe'é 855-710-6984.
فارسی Persian	اگر شما، یا کسی که شما به او کمک می کنید، سوالی داشته باشید، حق این را دارید که به زبان خود، به طور رایگان کمک و اطلاعات دریافت نمایید. جهت گفتگو با یک مترجم شفاهی، با شماره 855-710-6984 تماس حاصل نمایید.
Polski Polish	Jeśli Ty lub osoba, której pomagasz, macie jakiegokolwiek pytania, macie prawo do uzyskania bezpłatnej informacji i pomocy we własnym języku. Aby porozmawiać z tłumaczem, zadzwoń pod numer 855-710-6984.
Русский Russian	Если у вас или человека, которому вы помогаете, возникли вопросы, у вас есть право на бесплатную помощь и информацию, предоставленную на вашем языке. Чтобы связаться с переводчиком, позвоните по телефону 855-710-6984.
Tagalog Tagalog	Kung ikaw, o ang isang taong iyong tinutulungan ay may mga tanong, may karapatan kang makakuha ng tulong at impormasyon sa iyong wika nang walang bayad. Upang makipag-usap sa isang tagasalin-wika, tumawag sa 855-710-6984.
اردو Urdu	اگر آپ کو، یا کسی ایسے فرد کو جس کی آپ مدد کر رہے ہیں، کوئی سوال درپیش ہے تو، آپ کو اپنی زبان میں مفت مدد اور معلومات حاصل کرنے کا حق ہے۔ مترجم سے بات کرنے کے لیے، 855-710-6984 پر کال کریں۔
Tiếng Việt Vietnamese	Nếu quý vị, hoặc người mà quý vị giúp đỡ, có câu hỏi, thì quý vị có quyền được giúp đỡ và nhận thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thông dịch viên, gọi 855-710-6984.







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