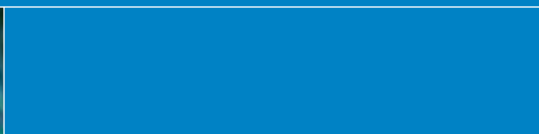




**BlueCross BlueShield
of Illinois**

BlueChoice Select[®]



Enrollment Guide

**Blue Cross and Blue Shield
of Illinois**

- 1 Learn about us
- 3 Benefits, an overview
- 8 Questions frequently asked
- 9 How to enroll



Enrolling

IN BLUECHOICE SELECT

Joining is easy - just follow your employer's instructions.
Welcome to *BlueChoice* Select!



Learn ABOUT US



A Leader in Health Care Benefits

Blue Cross and Blue Shield of Illinois

Selecting a reliable and affordable health plan is one of the most important decisions you can make, whether for yourself or for your family.

When considering your options, turn to Blue Cross and Blue Shield of Illinois (BCBSIL), a leader in health care benefits. We offer innovative health care coverage options, and provide our members with the information they need to make informed choices about their health care.


With nearly one in three Illinois residents getting their health care benefits from BCBSIL, we cover more people than any other insurer in the state. BCBSIL is one of the most trusted health insurance companies around, and a name you can look to for your health care benefit needs.

BlueChoice Select - The Choice is Yours

With *BlueChoice Select*, you have access to a wide scope of benefits and a broad provider network, any time you need care.

There are many advantages to joining *BlueChoice Select*. You do not need to select a primary care physician to coordinate your care and you never need a referral to see a specialist. In addition, you have the freedom to visit any physician you choose, with benefits paid at a higher level when you stay within the network.

If you're looking for an affordable health plan that provides a broad range of benefits and providers with the flexibility to self-direct your care, then *BlueChoice Select* is the plan for you.

A man with short dark hair, wearing a blue polo shirt and khaki pants, is sitting in a server room. He is smiling and looking towards the camera. He is holding a blue CD case in his hands. The background shows rows of server racks with various components and cables. The lighting is bright, highlighting the man and the server equipment.

With *BlueChoice Select*,
**you don't have to select a
primary care physician and you never
need a referral to see a specialist.**



Benefits

A N O V E R V I E W



When you join BlueChoice Select, you have access to a network of contracting providers, including hospitals, physicians and specialists, as well as Blue Cross' medical management advisors and nurse educators.

Your benefits are paid at the highest level when you receive care from a contracting provider. A nominal copayment will be required at the time of service. You can obtain care from a provider outside the network, but your benefits will be paid at a lower level and your out-of-pocket cost will be significantly higher. You may also be required to pay fees for out-of-network medical services upfront and be subject to balance billing.

The Network

Network Hospitals

BlueChoice Select provides you access to a contracting hospital network that was created by considering geographic accessibility, the number of board certified physicians on staff and status with the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). In addition, clinical care indicators developed by the Agency for Healthcare Research and Quality (AHRQ), an agency of the U.S. Department of Health and Human Services, were also taken into account when developing the network.

Finding a Physician

To find a physician in your area, visit our online Provider Finder® at www.bcbsil.com or use the provider directory. Each covered family member can receive care from any physician or provider in the network. You do not need to inform Blue Cross of your physician choice or when you change physicians, for either primary or specialty care services.

Medical Care

Your benefits include coverage for:

- [physician office visits](#)
- [inpatient hospital services](#)
- [outpatient hospital services](#)
- [outpatient surgery and diagnostic tests](#)
- [maternity services](#)
- [hospital emergency medical and accident treatment](#)
- [breast cancer screenings](#)
- [muscle manipulation services](#)
- [physical, occupational and speech therapy services](#)

Additional benefit coverage may include:

- [prescription drug benefits](#)
- [mental health and chemical dependency coverage](#)

Check your group plan for specific coverage.

Benefits An Overview *continued*



Preventive Care

BlueChoice Select provides full coverage for services that can help keep you and your covered family members healthy. To receive coverage at the highest benefit level, these services must be provided by a network physician. Preventive care services include prenatal care, routine child care and immunizations, and an annual physical exam for adults and a yearly gynecological exam.

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. In a life-threatening situation, call 911 or other community emergency resources to obtain immediate assistance. When a medical emergency occurs, we recommend you first consider calling your physician, as he or she may be able to treat you in the office.

If you receive emergency room care from a hospital, you will be required to pay a copayment and a percentage of the cost (coinsurance). The coinsurance percentage will be the same, whether in- or out-of-network. However, the cost of services may be higher at a non-network hospital, so your out-of-pocket expenses could be substantial. If the medical care you need requires you to be admitted to the hospital, then your copayment and coinsurance cost will be waived. Check your group plan or certificate of health care benefits for your copayment and coinsurance amounts.

If, as a result of your emergency, you are admitted to a non-network hospital, you must call the Medical Services Advisory (MSA) within two business days or your benefits will be reduced. The toll-free number is on the back of your Blue Cross ID card. See the MSA section for more information.

Prescription Drug Coverage

Your BlueChoice Select benefits may include prescription drug coverage. The prescription drug program uses an open formulary, meaning you have coverage for virtually all prescription drugs, even those not on the formulary. The formulary is a list of all generic drugs and a select group of brand name drugs chosen by a panel of physicians and pharmacists.

Payment is based on a three-tier structure. You pay the lowest copayment for generic drugs, the middle copayment for brand drugs on the formulary and the highest copayment for brand drugs not on the formulary. To view the formulary list, which is updated regularly, or to locate a network pharmacy, visit www.bcbsil.com. Check with your group plan for specific prescription drug coverage information.

Home Delivery

Members who use maintenance medications can take advantage of our convenient home delivery service. Get up to a 90-day supply of maintenance medications delivered to your home for a single copayment. Pre-registration for home delivery, prescription refills and updates to your patient profile can be made online at www.bcbsil.com.



Vision Discount Program

Members can receive discounts on eye exams, prescription lenses, permanent contact lenses and eyewear through a vision program administered by EyeMed Vision Care*. Simply present your ID card at one of the many contracting vision care providers to take advantage of the savings.

There is no limit to the number of times you can use this program. To locate a provider, call (866) 273-0813 or visit www.bcbsil.com.

Discounts on laser correction surgery and disposable contact lenses are available through a contractual arrangement with TruVision*. More information is on our Web site or call TruVision customer service at (866) 484-2020.

Coverage Away from Home

National

You and your eligible dependents are covered for medical care almost anywhere you live, work or travel. Should an emergency situation arise when traveling within the United States, try to contact your physician first, if possible. Then seek medical treatment immediately.

As a Blue Cross and Blue Shield member, your ID card includes a “suitcase” logo to show that your health care benefit plan travels with you wherever you go as part of the BlueCard® Program. If you (or a covered dependent) become ill while away from home, call BlueCard Access at (800) 810-BLUE (2583) to locate the nearest contracting doctor or hospital in the BlueCard PPO contracting provider network. You can also visit our Web site to find a provider. More than 85 percent of all physicians and hospitals across the country participate in the BlueCard PPO network, so finding a provider should be easy.

International

When you travel outside the United States and need urgent or immediate care, you are covered. Call (800) 810-BLUE (2583) or call collect to (804) 673-1177 for information on doctors, hospitals and other health care professionals.



*The relationship between Blue Cross and Blue Shield of Illinois and EyeMed Vision Care and TruVision is that of independent contractors.

Benefits An Overview *continued*



Enhanced Utilization Management (EUM)

Your Blue Cross coverage may also include benefits for mental health and chemical dependency. The Enhanced Utilization Management program helps you find mental health and chemical dependency treatment. Behavioral health professionals, including board-certified psychiatrists, clinical psychologists, psychiatric nurses, licensed clinical social workers and licensed marriage and family therapists staff the EUM program. Your situation will be evaluated to determine an appropriate course of treatment and to help you use your plan benefits most effectively. Staff members are available 24 hours a day at the toll-free number on the back of your ID card.

If you decide to access mental health or chemical dependency treatment, your care will be delivered with full confidentiality. Remember to inform your physician of any mental health or chemical dependency services you receive, especially to prevent adverse drug interactions.

Medical Services Advisory (MSA)

Blue Cross' Medical Services Advisory is a unit of health care professionals that includes registered nurses and licensed physicians who help you understand your health care benefits. The MSA reviews care for medical necessity (which includes appropriateness of care and services) and the availability of benefit coverage when your doctor recommends inpatient hospital treatment, when you are admitted to a hospital in an emergency or when you are expecting a baby. MSA staff will answer questions and work with you and your health

care providers, from your doctor's initial recommendation until your treatment is completed. By working with the MSA, you should receive the highest level of benefits available.

Your group's MSA guidelines may require you to call the MSA before you are admitted to a hospital for inpatient care, after being admitted in an emergency or to deliver your baby. If pregnant, you should also contact the MSA as soon as you learn your baby's delivery date. Staff can provide educational materials to assist you during your pregnancy.

Each group plan has different requirements as to when to contact the MSA. The toll-free number to call is on the back of your ID card. Refer to your group plan documents for specific requirements.

NOTE: If you do not call the MSA within the required timeframe applicable to your health care benefit plan, your benefits may be reduced and you may have higher out-of-pocket costs. Check your group plan documents for details.

Nurse Educators

Nurse Educators* can answer your questions and help identify appropriate health care resources. They can explain the purpose and details of medical tests and procedures, and can provide you with pamphlets on disease processes, diagnostic tests and surgical procedures. Also available is information on community-based support groups and national foundations for specific conditions. You may call for information even if you don't need treatment or have a procedure scheduled.

*Nurse Educators provide health education and information to Blue Cross members and are not intended to take the place of a physician.



Reconstructive Surgery and Mammograms

Federal and State of Illinois laws require group health plans and insurers to provide coverage for reconstructive surgery following a mastectomy. 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 for physical complications for all stages of mastectomy, including lymphedemas.

Blue Cross and Blue Shield of Illinois provides coverage for mastectomies and the above procedures, subject to the terms of the member's applicable health care benefits coverage.

Mammograms are paid at the highest level when care is received from a contracting provider.

Customer Service

Our Customer Service representatives can answer questions about your health care benefit plan coverage and help you understand and use your benefits. The toll-free number is on the back of your ID card.

As a member, you have access to many resources via our Web site at www.bcbsil.com, including ordering a replacement ID card and downloading claim forms.

Within Blue Access for MembersSM, the secured portion of our Web site, you can get direct, confidential access to information about your medical claims. You can check the status of a claim, view an explanation of medical benefits, confirm who is covered under your plan and elect to receive e-mail notifications (rather than paper) when a claim has been finalized. Extended hours of availability allow you to access information at your convenience.

You also have access to a wide range of personalized health and wellness resources from Mayo Clinic*, with custom content provided exclusively for Blue Cross members.

The Hospital Comparison Tool, an additional feature within Blue Access for Members, allows you to search and compare individual hospital's outcome data based on specific diagnoses and procedures. You can quickly compare hospital performance factors such as length of stay, complications and how many procedures the hospital has performed.

Blue Access for Members regularly adds new features to make accessing claim and health and wellness information even easier. Log on to Blue Access for Members at www.bcbsil.com to learn more!



*The relationship between Blue Cross and Blue Shield of Illinois and Mayo Clinic is that of independent contractors.

Questions

F R E Q U E N T L Y A S K E D



How are hospitals selected for the network?

Geographic accessibility, the number of board certified physicians on staff and status with the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) were reviewed when establishing the contracting hospital network. In addition, clinical care indicators developed by the Agency for Healthcare Research and Quality (AHRQ), an agency of the U.S. Department of Health and Human Services, were also considered.

Do I need to select a primary care physician?

With BlueChoice Select, you do not need to inform Blue Cross of your physician choice or when you change physicians. You and your covered family members have the freedom to visit any doctor in the network whenever care is needed. If you obtain care from a provider outside the network, your benefits will be paid at a lower level and your out-of-pocket cost will be significantly higher.

How do I find a physician or hospital?

Visit our online Provider Finder® at www.bcbsil.com or use the provider directory. Members can also search and compare individual hospital's outcome data based on specific diagnoses and procedures by using the Hospital Comparison Tool within Blue Access for Members on our Web site.

Do I need a referral to see a specialist?

No, you can self-direct your care to a specialist of your choice. Your benefits will be paid at a higher level when you obtain care from a contracting specialist in the network.

How does the prescription drug benefit work?

Check with your employer if your BlueChoice Select coverage includes a prescription drug benefit. Our program uses an open formulary, so you are covered for nearly all prescription drugs. The copayment amount depends on whether the drug is on the formulary. View the formulary list at www.bcbsil.com/rx.

Whom do I call with questions about my benefits?

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

Are my medical records kept confidential?

Yes. Blue Cross is committed to keeping all specific member information confidential, especially your medical records. Anyone who may need to review the records, such as health care practitioners or Blue Cross staff, is required to keep your information confidential. We may need to review your medical record or claims data, for example, as part of an appeal that you request or a clinical quality improvement study. If so, we will take every precaution to keep your information confidential. In many cases, your identity will not be associated with this information.