

Member Guide

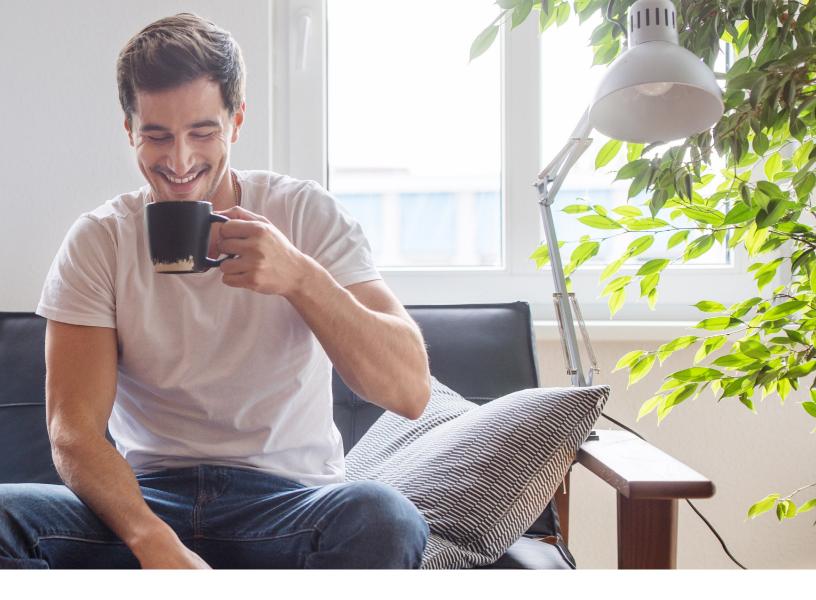
Get the most out of your plan.





Welcome to BlueCross

We're glad you're part of our BlueCross BlueShield of Tennessee community, and we're ready to show you around your new insurance plan. We've covered the basics in this book. If you ever need help or more detailed information, just let us know.



We're Here to Help

Your Member Care Team is happy to support your care goals and answer questions as you get started with your new plan. If you need help using your benefits, getting care or understanding how things work, we're right here for you.



Online: **bcbst.com**Manage your account and chat with us to get answers



Phone: **1-800-565-9140** TTY: **1-800-848-0298** 8 a.m. to 6 p.m. ET, Monday through Friday

We offer help in 150 different languages.

If you'd like help in a language other than English, just call 1-800-565-9140.



Let's Get Started

If you're new to BlueCross, you may be wondering what you need to do first. We can help with that. Below are three important steps to get you started using your plan. You'll need your Group Number and Subscriber ID, which are on your Member ID card.

1

Set up your online account

We give you two ways to manage your plan anytime, anywhere: **bcbst.com/welcome** and our free **BCBSTN**SM app. You can log in to both from the same account. Scan the QR code below with your smartphone's camera to download the app.

- Live Online Chat
- All Your Details in One Place
-) Digital ID Card
- Find Care and Costs
- View Your Claims



2

Get coverage updates faster

You can get account updates faster by opting in to digital communications. Just go to **Account** and then choose **Communication Settings**. You'll still receive some documents by mail, but you'll get emails or texts anytime they're available.

3

Tell us if you have any other insurance (even if you don't)

We need this information so we can pay your claims correctly and on time. We need to hear from you, even if you don't have other insurance. You can do this in the **Benefits & Coverage** section of your online account.

Where to Go for Care

We work with certain doctors, hospitals and specialists to give you the best rates for care. We call this your provider network. When you choose to get care inside that network, you spend less on care. Before you get care, make sure your provider is in your network. Ask them, or, check for yourself using the Find Care tool at **bcbst.com**.

Your Care Options	When to Use Them			
Primary Care Provider	For routine, non-emergency care, try your PCP first. A PCP gets to know you and your health needs and can coordinate your care with other providers to make sure you get the care that's right for you.			
Telehealth and Virtual Visits	Some network providers offer telehealth visits, and your plan covers them at the same cost as a regular office visit.			
Teladoc™ Health	Teladoc Health lets you talk with board-certified doctors 24/7 about common, non-emergency conditions on your phone or device.			
Nurseline	Free 24/7 support from registered nurses about non-emergency conditions, symptoms, where to go for care and more.			
Urgent and Convenient Care	Use this option when your PCP isn't available, but it's not an emergency.			
Emergency Room (ER)	Go to the ER when you need care right away for a medical emergency or life-threatening health condition.			

Important Things to Keep in Mind

Using your insurance is as simple as showing your Member ID card when you go to the doctor, hospital or pharmacy. But knowing a few things up front can help you save money and get the most out of your benefits.

Some Services May Need Approval

Before you get care, it's a good idea to make sure your plan covers it. You can find out by visiting the **Benefits & Coverage** section of your account. If something needs approval, your doctor will need to check with us before you get the care so you don't have to pay unexpected costs. You or your provider should ask us for approval by calling **1-800-924-7141** before you get care including:

- Surgeries
- MRIs, CT scans or PET scans
- Stays in the hospital
- Renting or buying medical equipment

How Much Will Your Care Cost?

You can better plan for your share of health care costs when you get an estimate first. Our **HealthCare Cost Estimator** tool lets you see cost estimates for more than 1,400 common procedures. You can even use it to compare different doctors and facilities, and see how other members rated them.



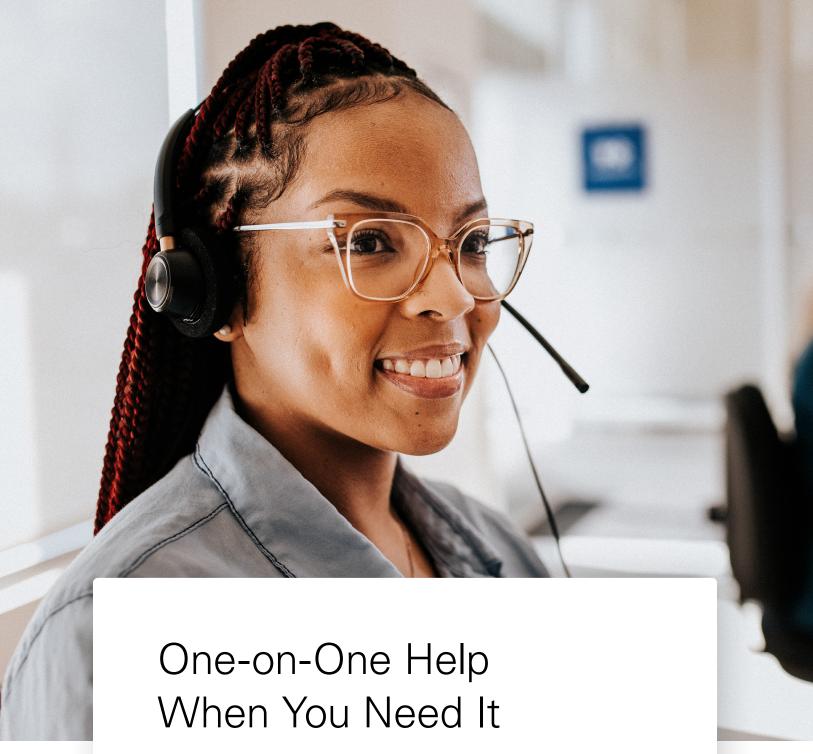
Log in to your **bcbst.com** account.



Click on Find Care & Estimate Costs.

Medical Care and Insurance Help Under One Roof

Get medical care for your whole family and your insurance needs covered, all in one stop, at Blue of Tennessee with Sanitas Medical Center. See your Sanitas primary care provider or pediatrician and get urgent care, mental health care, screenings, lab tests and X-rays. Then meet with BlueCross staff to answer your questions, get help with claims or shop for plans. Find out more at **bcbst.com/BlueofTennessee**.



Feeling good and staying healthy aren't always easy. Sometimes, you need a hand from someone who understands what you're going through and can connect you to the right care.

When You Have Extra Care Needs

We want to make sure you get the right care in the right place at the right time. We can help you:

- > Find tools and community resources to support you.
- Learn about taking your medicine the right way, eating healthy and exercising.
- > Create a plan to take care of your health using your doctor's advice.

When You Have a Long-Term Health Condition

You can work with a nurse or care manager if you have one or more of these health problems:

Coronary artery disease

Congestive heart failure

) Diabetes

- Asthma
- Chronic obstructive pulmonary disease
- Depression

When You Need Mental Health Support

Not all health concerns are physical. Our mental health team can connect you with:

- Counseling and treatment programs
-) Inpatient or outpatient care

Community resources

When You're Pregnant

From the start of your pregnancy until eight weeks after your baby is born, Healthy Maternity gives you:

- One-on-one advice from a maternity nurse or certified lactation counselor
- Online education and resources about having a healthy pregnancy and delivery
- Breast pump benefits when you sign up by your 21st week
- Support for taking care of your newborn and yourself after delivery



To learn more or sign up for this extra help, call us at **1-800-818-8581** or visit **bcbst.com/CareTN**. Once you've signed up, save (423) 535-8581 to your contacts so you'll know it's us calling.

Mental Health Benefits

Mental health is just as important as physical health. That's why your plan includes:

Teladoc Health

Teladoc lets you talk with a licensed therapist or social worker seven days a week by phone or online video chat. Use it from the comfort of your own home to talk about:

- Relationship issues
- Trauma and PTSD
-) Changes in mood
- Feeling overwhelmed
- Substance misuse

To start using Teladoc Health, log in to our BCBSTNSM app and tap **Talk to a Doctor Now**. Or go to **bcbst.com/Teladoc**.

AbleTo

AbleTo offers personalized virtual therapy programs. These eight-week programs help you learn skills you can use daily to enjoy more of life. You'll speak one-on-one with a coach, licensed therapist, or both who can help you manage feelings of anxiety, depression, and stress.

To get started, visit AbleTo.com/bcbst or call AbleTo at 1-844-951-3567.

Care Managers

Our Care Managers can also help you over the phone or through our free CareTN app. To get started, download CareTN from your phone's app store or call us at **1-800-818-8581**, ext. **7859**.

Earn Rewards for Healthy Decisions

You can earn up to \$400 in gift cards each year through our rewards program. Get started by taking a free Personal Health Assessment (PHA) at **bcbst.com/yourhealth**.

After you've taken your PHA, you can earn rewards by:

- Registering for and using Teladoc Health
-) Getting a flu shot
-) Getting an annual wellness exam
- Tracking your fitness
- Cancer screenings (mammogram, colorectal, cervical or prostate)
- Diabetes Management (A1C, urine test and kidney function)

Exclusive Discounts

Our member discount program lets you save on fitness-related products and services like gym memberships, workout gear, personal care, nutrition and more. Find out more at bcbst.com/ memberdiscounts.

Managing Your Health

Your plan includes lots of extras to help you stay well, from blog articles on nutrition and more to support for long-term health conditions. Find out more at bcbst.com/healthbenefits.

Your Rights & Responsibilities Explained

As a member, you have rights and responsibilities with your health plan. We're here to help you understand them.

You have the right to:

- Get information about us, like our services, the providers* and practitioners in our networks, and your member rights and responsibilities.
- 2. Be respected and treated with dignity, and have your private information kept private
- Make your own decisions about your health care based on an open, honest discussion with your health care providers and practitioners about all your treatment options, regardless of cost or whether your plan covers them
- 4. Make complaints or appeals about us or your care
- **5.** Recommend changes to our member rights and responsibilities policy

You have the responsibility to:

- Give us and your health care providers the details we need (as much as possible) to provide care that's right for you
- 2. Follow directions you and your providers have agreed to about your treatment
- 3. Work with your health care providers to understand your conditions and decide on a treatment and goal that you can agree on

To learn more about your rights and responsibilities, call us at the Member Service number on the back of your Member ID card.

*The National Committee for Quality Assurance (NCQA), an independent organization that offers accreditation for insurance companies, defines "providers" as facilities where you get care, and "practitioners" as people who provide care. In some documents, we use the term "providers" to refer to both.

Getting Fair Decisions About Your Care

When we make decisions about what care we'll cover, our number one concern is your health. BlueCross BlueShield of Tennessee is a Qualified Health Plan Issuer in the Health Insurance Marketplace. We look at two things when we make these decisions:

- Is the requested care or service right for your condition and overall health?
- Does your plan cover it?

Independent Reviews of Our Decisions About Your Care

Most** of our members have the right to ask that someone else — who doesn't work for BlueCross — review medical necessity decisions we make. You can learn more about how we handle these reviews in the Grievance or Appeals section of your Evidence of

Coverage (EOC). You should have gotten your EOC when you signed up, but you can find it anytime by logging in to your **bcbst.com** account. Call us if you'd like us to send you a new copy.

**Grandfathered plans are not required to provide independent review.

The Grievance or Appeals section in your EOC has more details.

Making Sure You Get Quality Care

Every year, we look at the care our members receive to make sure you're getting:

- High-quality care and services
- Care that's right for you
- Access to high-quality providers, hospitals and other facilities

We've earned national accreditation from two independent organizations, URAC and the NCQA National Committee for Quality Assurance (NCQA). If you'd like to know more about our quality programs, write to us at:

BlueCross BlueShield of Tennessee Attn: Quality Management 2.3 1 Cameron Hill Circle Chattanooga, TN 37402

Your Care and Benefits After a Mastectomy

You have a right to get certain care and benefits after a mastectomy, including:

- Reconstruction and surgery to make the breasts symmetrical
- Prostheses
- Treatment for health complications that came from having a mastectomy, including lymphedema

You can read more details about these benefits and other covered health care services in your health plan materials.

Notice of Information Privacy Policies and Practices

BlueCross BlueShield of Tennessee, Inc. and some subsidiaries and affiliates are required to: Maintain the privacy of all health plan information, which may include your name, address, diagnosis codes, etc. as required by applicable laws and regulations; provide this notice of privacy practices to all members; inform members of the company's legal obligations; and advise members of additional rights concerning their health plan information.

Your health plan information may be used and disclosed for treatment, payment, and health care operations. A copy of this notice is included in your EOC. You may also request a copy of our privacy practices at any time. Please contact BlueCross at:

Phone: 1-888-455-3824

Email: Privacy_Office@bcbst.com

Mail: BlueCross BlueShield of Tennessee

The Privacy Office
1 Cameron Hill Circle
Chattanooga, TN 37402-0001

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Who We Share Your Information With

We don't share your private information with anyone unless it's both legal and necessary. But to help provide, process and pay for your health care, we may share your information with certain companies we do business with, like:

- Financial institutions
- Other insurance companies health plans and health care providers.
- Marketing partners
- Certain other third parties as needed

You can read our full Notice of Privacy Practices at **bcbst.com/privacy**.

Who Has Access to Your Information

The only BlueCross employees who can use and disclose your information are those who need it to do their job providing coverage for you. This includes claims processors, underwriters and customer service employees. We use physical, electronic and procedural protections to make sure no one else can access your information.

Where We Get Your Information

We receive information about your health care from:

- Information you provide on applications or other forms
- Information from your health records and transactions with us or other companies that we do business with

Are We Doing a Good Job With Your Coverage?

Making sure you get the care and service you deserve is important to us. We want you to be happy with us, so if there's any reason you're not, please tell us. We'll do everything we can if you have a complaint about:

- > The quality of your care
- Finding care
- Your relationship with your providers or with us
- Anything else related to your health plan

If you're not happy with any part of your care or your plan, we want to hear from you. Just give us a call at the Member Service number on the back of your Member ID card. If you'd rather write to us, please send it to us at:

BlueCross BlueShield of Tennessee Commercial Member Complaint Department 1 Cameron Hill Circle, Suite 0019 Chattanooga, TN 37402-0019

HIPAA Compliant

BlueCross BlueShield of Tennessee, Inc. is compliant with all requirements of the Health Insurance Portability and Accountability Act (HIPAA) of 1996.

Health and Wellness

We provide you with resources to help improve and manage your health. To learn more about these resources, log in to bcbst.com/wellnesscenter or call the Member Service number on the back of Your Member ID card.

Decision Support Tools – With these resources, you can get help with handling health issues, formulating questions to ask your doctor, understanding symptoms and exploring health topics and wellness tips that matter to you most. We also offer a shopping and decision support program, and you can obtain information about the average amount paid to Network Providers and estimates of your out-of-pocket costs for certain items and services by using our healthcare cost estimator. You can access the Healthcare Cost Estimator by logging in at bcbst.com and clicking on Find Care, or by logging in to the BCBSTNSM mobile app and choosing Find Cost.

Incentive Programs – We may offer voluntary wellness or health improvement programs under which you may be able to earn rewards or incentives. Those rewards or incentives may include cash or cash equivalents, merchandise, gift cards, debit cards, Premium discounts or rebates, contributions toward Your health savings account (if applicable), or modifications to a Copayment, Coinsurance, or Deductible amount.

We will let you know if you have the opportunity to participate in a voluntary wellness or health improvement program or have the opportunity to earn incentives for choosing cost-effective providers.

Identity Protection

Your benefits include Experian credit monitoring at no extra cost. Sign in to your **bcbst.com** account to see the plans available and sign up.

BlueCross BlueShield of Tennessee (BlueCross) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. BlueCross does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

BlueCross:

- Provides free aids and services to people with disabilities to communicate
 effectively with us, such as: (1) qualified interpreters and (2) written
 information in other formats, such as large print, audio and accessible
 electronic formats
- Provides free language services to people whose primary language is not English, such as: (1) qualified interpreters and (2) written information in other languages.

If you need these services, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711).

If you believe that BlueCross has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance ("Nondiscrimination Grievance"). For help with preparing and submitting your Nondiscrimination Grievance, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711). They can provide you with the appropriate form to use in submitting a Nondiscrimination Grievance. You can file a Nondiscrimination Grievance in person or by mail, fax or email. Address your Nondiscrimination Grievance to: Nondiscrimination Compliance Coordinator; c/o Manager, Operations, Member Benefits Administration, 1 Cameron Hill Circle, Suite 0019, Chattanooga, TN 37402-0019; (423) 591-9208 (fax); Nondiscrimination_OfficeGM@bcbst.com (email).

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1–800–368–1019, 800–537–7697 (TDD). Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

BlueCross BlueShield of Tennessee, Inc., an Independent Licensee of the BlueCross BlueShield Association.

BlueCross BlueShield of Tennessee is a Qualified Health Plan Issuer in the Health Insurance Marketplace.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Si usted es miembro, llame al número de Servicio de atención a miembros que figura al reverso de su tarjeta de identificación de Miembro o al 1-800-565-9140 (TTY: 1-800-848-0298).

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بلامجان. إذا كنت عضوًا، فاتصل برقم خدمة الأعضاء الموجود على ظهر بطاقة هوية العضو أو بالرقم 1400-565-800-1 (الهاتف النصي: 828-848-808-1).

注意:如果您使用繁體中文,您可以免費獲得語言援助服務。

若您是會員,請撥打會員 ID 卡背面的會員服務部號碼或 1-800-565-9140 (聽障專線 (TTY): 1-800-848-0298)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Nếu quý vị là hội viên, hãy gọi đến số Dịch vụ Hội viên ở mặt sau thẻ ID Hội viên của quý vị hoặc 1-800-565-9140 (TTY: 1-800-848-0298).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 가입자의 경우, 가입자 ID 카드 뒷면의 가입자 서비스 전화번호 또는 1-800-565-9140(TTY: 1-800-848-0298) 번으로 전화하시기 바랍니다.

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Si vous êtes adhérent, appelez le numéro du Service adhérents indiqué au dos de votre carte d'assuré adhérent ou appelez le 1-800-565-9140 (TTY/ATS: 1-800-848-0298).

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ,ການບໍລິການຊ່ວຍເຫຼືອດ້ ານພາສາ, ໂດຍບໍ່ເສັງຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ຖ້າທ່ານເປັນສະມາຊິກ, ໃຫ້ໂທຫາເບີຂອງຝ່າຍບໍລິການສະມາຊິກທີ່ມີຢູ່ດ້ານຫຼັງບັດ ID ສະມາຊິກຂອງທ່ານ ຫຼື 1-800-565-9140 (TTY: 1-800-848-0298).

ማስታወሻ: የሚናንሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያግዝዎት ተዘጋጀተዋል፡ አባል ከሆኑ፣ በአባልነት መታወቂያዎ ጀርባ ላይ በሚንኘው የአባላት አንልግሎት ቁተር ወይም በ 1-800-565-9140 (መስማት ለተሳናቸው፣ TTY: 1-800-848-0298) ይደውሉ።

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Falls Sie ein Mitglied sind, rufen Sie die Nummer des Mitgliederdienstes auf der Rückseite Ihrer Mitglieds-ID-Karte oder 1-800-565-9140 (TTY: 1-800-848-0298) an.

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. જો તમે સભ્ય છો, તો તમારા સભ્ય આઈડી કાર્ડની પાછળના સભ્ય સર્વીસ નંબર ઉપર અથવા 1-800-565-9140 (TTY: 1-800-848-0298) પર કૉલ કરો.

注意事項:日本語を話される場合、無料の言語支援をご利用いただけます。 会員のお客様は、会員IDカードの裏面に記載の会員サービス番号あるいは1-800-565-9140 (TTY: 1-800-848-0298)まで、お電話にてご連絡ください。

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad.

Kung ikaw ay isang miyembro, tawagan ang numero ng Serbisyo sa Miyembro na nasa likod ng iyong Kard ng ID ng Miyembro o sa 1-800-565-9140 (TTY: 1-800-848-0298).

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। अगर आप सदस्य हैं तो अपने सदस्य आईडी कार्ड के पीछे दिए गए नंबर या 1-800-565-9140 (TTY: 1-800-848-0298) पर सदस्य सेवा नंबर पर फोन करें।

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Если Вы являетесь участником, позвоните в отдел обслуживания участников по номеру, указанному на обратной стороне Вашей идентификационной карты участника, или по номеру 1-800-565-9140 (ТТҮ: 1-800-848-0298).

.(800-848-U290). توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. درصورتیکه عضو هستید، با شماره خدمات اعضا در پشت کارت شناسایی عضو خود یا 9140-565-800-1 (820-848-0298) TTY: 1-تماس بگیرید.

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Si ou se yon manm, rele nimewo Sèvis Manm ki sou do kat ID Manm ou an oswa 1-800-565-9140 (TTY: 1-800-848-0298).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Członkowie mogą dzwonić pod numer działu Member Service podany na odwrocie karty identyfikacyjnej członka lub numer 1-800-565-9140 (TTY: 1-800-848-0298).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Caso seja membro, ligue para o telefone do serviço de Atendimento ao Membro informado no verso de seu cartão de identificação de membro ou para 1-800-565-9140 (TTY: 1-800-848-0298).

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Se è un membro, chiami il numero del Servizio per i membri riportato sul retro della Sua scheda identificativa del membro oppure il numero 1-800-565-9140 (TTY: 1-800-848-0298).

Díí baa akó nínízin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'dę́ę́', t'áá jiik'eh, éí ná hóló.

Naaltsoos bee ná ha'dít'éego, Naaltsoos Bá Hada'dít'éhígíí ninaaltsoos nith'ízí bee nééhozinígíí bine'déé' Naaltsoos Bá Hada'dít'éhígíí Bee Áka'anída'awo'í bibéésh bee hane'í biká'ígíí bee hodílnih doodago 1-800 -565-9140 (Doo Adinits'agóógo o TTY: 1-800-848-0298) bee hodílnih.

Get Answers to Your Questions



Call us at **1-800-565-9140** Monday – Friday, 8 a.m. – 6 p.m. ET



Chat with us at bcbst.com

