

PPO

Participating Provider Option



Your Guide to the
National Participating Provider Option Plan

Blue Cross and Blue Shield

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URAC Accreditation

Blue Cross and Blue Shield of Illinois has been awarded accreditation for Utilization Management by the American Accreditation HealthCare Commission/URAC. URAC is a non-profit agency that promotes accountability in managed care.

PPO | Gives You Choices



A Leader in Health Care Benefits

When you choose Blue Cross and Blue Shield coverage, you get an affordable health care benefit plan and the resources to make informed decisions about your health.

The PPO plan from Blue Cross and Blue Shield of Illinois (BCBSIL) gives you freedom of choice, flexibility, a broad range of benefit options and access to a large provider network. There is no need to select a primary care physician because you can choose a doctor whenever you need care. You do not need a referral to see a specialist or to get another opinion about a medical condition. The provider choice is *always yours*.

When you receive care from a PPO network provider, there are no claim forms to complete and no balance billing because contracting PPO providers have agreed to accept our negotiated rates as payment in full. Once you meet the annual deductible, there are no up front payments for medical services with the exception of applicable copayments, coinsurance and charges for non-covered services. Check your employer's group plan for details about your specific coverage.

Across the country, about
one in three Americans
put their trust in a
Blue Cross and Blue Shield Plan
for coverage locally
and when they travel.





A kid at college
or a family trip –

PPO provides coverage
when you're
away from home.



Benefits | Overview

PPO members have access to nearly 500,000 contracting physicians and specialists and more than 5,000 contracting hospitals across the country.

The PPO plan includes an annual deductible that you must satisfy before your benefits begin. Qualified medical expenses, such as copayments, coinsurance, office visits and inpatient care are applied toward your deductible.

PPO Network

Among the advantages of joining the PPO plan is the large network of contracting providers in the national BlueCard® provider network. When you join the PPO plan, you have access to contracting health care providers that include hospitals, physicians, therapists, behavioral health professionals and alternative care practitioners.

To find a contracting doctor or hospital, just go to our Web site at www.bcbsil.com and use the Provider Finder.® Once you become a member, you can also call the toll-free customer service number on the back of your member ID card. Your employer may have a printed directory of contracting PPO providers.

When you receive care from PPO network providers, your benefits are paid at the highest level. You always have the option to receive care outside the network, but your benefits will be paid at a lower level and you may be subject to balance billing from the doctor or hospital.

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 and cervical cancer screenings
- muscle manipulation services
- physical, speech and occupational therapies
- mental health and chemical dependency treatment

Check your employer's group plan for your specific coverage.

Benefits Overview *continued*

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 us if you are admitted to the hospital.

Call the toll-free customer service number on the back of your ID card if you have questions about your benefits.





National and International Coverage

National

You have nationwide access to contracting providers in PPO networks through the BlueCard Program when you or your covered dependents live, work or travel anywhere in the country. The national PPO network includes more than 85 percent of all physicians and hospitals in the country. Be sure to use a PPO network provider to receive the highest level of benefits.

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

- Visit our Web site at www.bcbsil.com to find provider names and locations using the Provider Finder. Maps and driving directions are also available.
- Call the toll-free customer service number on the back of your ID card.

International

When you travel outside the United States and need medical assistance services, call (800) 810-BLUE (2583) or call collect to (804) 673-1177 for information. Blue Cross and Blue Shield has contracts with doctors and hospitals in more than 200 countries. An assistance coordinator, in conjunction with a medical professional, can arrange your doctor's appointment or hospitalization, if necessary.

At BlueCard Worldwide® hospitals, in most cases, you will not have 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 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 the toll-free customer service number on your ID card for the address to send the claim. You can get a claim form from your employer, customer service or online at www.bcbsil.com.

PPO members have access to care anywhere they live, work or travel – across the country and around the world.

Benefits Overview *continued*

Online Tools Help You Manage Your Health and Your Health Care

To help determine if PPO is the right health care benefit plan for you, use the *Health Plan Cost Estimator* and *Which Plan is Right For Me* plan selector tools at www.bcbsil.com. These will help answer questions about your health and health care expenses to see how the PPO plan fits your budget and your lifestyle.

After you've enrolled, you can use *Blue Access® for Members*, our secure online service, to check the status of a claim, view your explanation of medical benefits and confirm who is covered under your plan. Another feature gives you the option of receiving an e-mail when a claim for you or a dependent has been finalized by Blue Cross and Blue Shield. You can access Explanation of Benefits (EOB) information online for up to 12 months and opt out of receiving paper copies.

Other tools for members:

- *Hospital Comparison Tool* — access individual hospital's outcome data for specific diagnoses and procedures. Quickly compare hospital performance factors such as average length of stay, how many procedures the hospital has performed, complication rates and the cost of various procedures.
- *Treatment Cost Advisor* — obtain cost information for common health care services based on demographic and geographic data.

An array of online tools help PPO members get the most from their health care benefit plan.





Blue Care® Connection

Blue Care Connection provides personalized attention, support, online resources and health advocacy, helping members find the right resources, optimize their health care benefits and manage their medical conditions.

Utilization and Case Management

These programs, also known as the Medical Services Advisory, can help you understand your benefits and identify health care resources. Your plan may require you or your physician to call before being admitted for inpatient hospital care, after being admitted in an emergency and for maternity care (after you learn the expected date of delivery and after admission for delivery). The toll-free number and notification requirements are on your ID card. If you or your physician do not call within the required timeframe, your benefits may be reduced and you may have higher out-of-pocket costs.

Blue Care Advisor

Registered nurses can assist you with questions about chronic conditions. They can help you navigate the health care system and provide information about your condition.

24/7 Nurseline

Call the 24/7 Nurseline at (800) 299-0274 for answers to your health-related questions 24 hours a day, seven days a week. Plus, you have the option to learn about more than 1,200 health topics over the phone using the audio library system.

Blue Care Connection gives PPO members information and resources to make informed health care decisions.





The 24/7 Nurseline
is available whenever
you have a
health question.

Benefits Overview *continued*



Healthy Expectations®

Healthy Expectations helps pregnant members better understand and manage their pregnancies by providing educational materials and support, including pregnancy risk assessment and monitoring. You also have access to a 24-hour, toll-free BabyLine staffed by maternity nurses.

Personal Health Manager

Numerous online tools and information help you manage your health care, whether you want to improve your overall health, manage a chronic health condition or prepare for a specific medical treatment. You can:

- Complete a health risk assessment to identify your possible health risks.
- Create a personal health record for you and your family. With your permission, providers, family members and BCBSIL nurses can access your health records to help facilitate your care.
- Access multiple online health libraries to research health and medical information, including wellness tracking tools, videos and interactive tutorials – many personalized to your interests.
- Find information on exercise, nutrition and lifestyle issues in the For Your Health section.
- Receive targeted wellness information via e-mail to help manage specific medical conditions, including alerts for screening tests, and set up reminders for medical appointments and medication refills.

Go to Blue Access for Members at www.bcbsil.com to find these resources under the My Health tab. Click on the Personal Health Manager icon for

- Ask A Nurse: health issues
- Ask A Trainer: exercise advice
- Ask A Dietitian: nutrition questions
- Ask A Life Coach: manage stress, workplace conflicts and more

Benefits Overview *continued*

Vision Discount Program

You are eligible for discounts on eye exams and eyewear, including frames, lenses, lens options and permanent contact lenses through a contractual arrangement with EyeMed Vision Care.[†] You have access to a national network of contracting providers, including ophthalmologists, optometrists and opticians, as well as optical retailers, including LensCrafters®. There are no deductibles to meet or claim forms to fill out, and no limit to the number of times you can use the program. Find a network provider at our Web site or call EyeMed customer service toll free at (866) 273-0813.

Discounts on laser vision correction surgery and disposable contact lenses are available through a contractual arrangement with TruVision's network providers.[†] Visit our Web site or call TruVision customer service toll free at (866) 484-2020.





Hearing Aid Discount Program

Digital hearing aids are available to you and your dependents, as well as to your parents and grandparents who are not enrolled in a BCBSIL plan. For more information, contact TruHearing toll free at (866) 687-2020 or www.TruHearing.com.[†]

Reconstructive Surgery Following 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 annual mammograms. Check your group plan documents for details.

Vision and hearing aid discount programs are available to all PPO members.

Fraud Hot Line

We encourage you to report any information about health care fraud. Our fraud hot line is available 24 hours a day, seven days a week toll free at (800) 543-0867. For more information about our fraud awareness program, go to www.bcbsil.com/sid.

[†]The relationships between Blue Cross and Blue Shield of Illinois and EyeMed Vision Care, TruVision and TruHearing are those of independent contractors.

FAQ | *Frequently Asked Questions*

I don't live in Illinois, but my Explanation of Benefits and other information refers to Blue Cross and Blue Shield of Illinois. Why?

Printed materials and the Web site say “of Illinois” because Blue Cross and Blue Shield of Illinois is the claims administrator for your employer's benefit program. This means Blue Cross and Blue Shield of Illinois will process your claims and answer your questions regardless of where you live. You have access to PPO network providers across the country through the BlueCard® Program, which includes more than 85 percent of all physicians and hospitals. By using PPO network providers, you receive the highest level of benefits and have fewer out-of-pocket costs.

Whom do I call with questions about my benefits?

Call customer service at the toll-free number on your ID card.

How do I find a doctor in the PPO network?

Go to www.bcbsil.com and use the Provider Finder or call customer service. Your employer may also have a printed directory.

Do I need a referral from my doctor to see a specialist?

No. With the PPO plan you can see any doctor at any time without a referral. If you see a specialist who is part of the PPO contracting provider network, your benefits will be paid at the highest level. You can also see a specialist who is not part of the network, but your benefits will be paid at a lower level.

What if my doctor says I need to go into the hospital for surgery?

You may need to call us prior to your scheduled inpatient admission. Check your group plan for specific requirements. The toll-free number is on the back of your ID card.

What happens if I am admitted to the hospital in an emergency?

Treatment of your emergency condition is always the priority. If you are admitted to the hospital following your emergency room visit, you or someone you designate may need to call us at the toll-free number on your ID card. Check your group plan for specific requirements.

Are my medical records kept confidential?

Yes. We are 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 and Blue Shield 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). If so, we will take every precaution to keep your information confidential. In many cases, your identity will not be associated with this information.



Enrolling in the PPO Plan

Joining the PPO plan is simple – just follow your employer's instructions. For more information, visit our Web site at www.bcbsil.com. Once you are a member, you can call the toll-free number on the back of your ID card to speak with a customer advocate.

Welcome to PPO!





BlueCross BlueShield of Illinois