



MASSACHUSETTS

Quick Start Guide

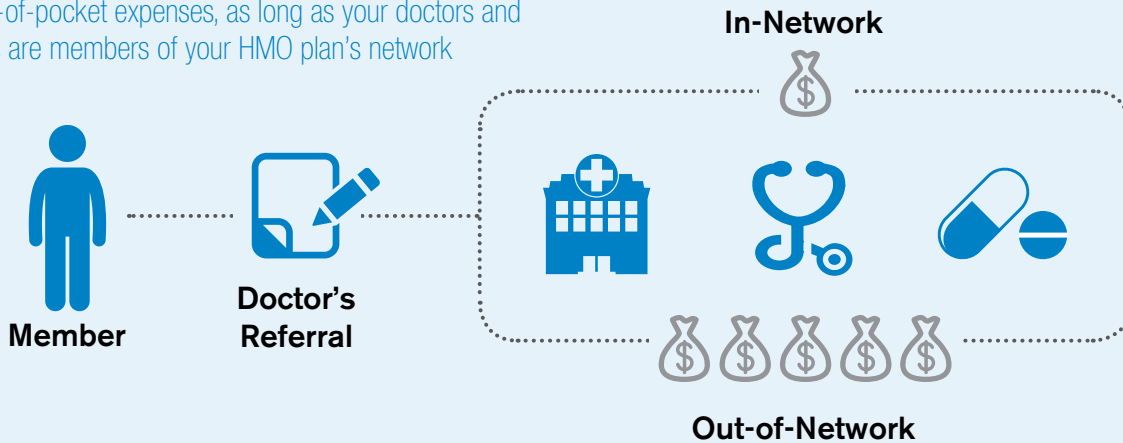


HMO Blue Options v.5

This health plan includes a tiered provider network called HMO Blue Options v.5. Members in this plan pay different levels of cost share (copayments, co-insurance, and deductibles) depending on the benefits tier of the provider furnishing the services. A provider's benefits tier may change. Overall changes to the benefits tiers of providers will happen no more than once each calendar year. For help in finding the benefits tier of a provider, visit the online provider search tool at bluecrossma.com/findadoctor and search for HMO Blue Options v.5.

HMO: Health Maintenance Organization

- You choose a primary care provider (PCP) from within a health plan's network
- Your PCP coordinates all your care and refers you to medical specialists when needed
- Low out-of-pocket expenses, as long as your doctors and hospitals are members of your HMO plan's network



Your Primary Care Provider

You must choose a PCP for you and each member of your family. Each member may choose a different primary care provider if they wish, as long as he or she is in the HMO Blue network.

It's important to consider the tier of both your PCP and the hospital where your provider has admitting privileges before you receive care.

- For example, if you require hospital care and your Enhanced Benefits Tier PCP refers you to an Enhanced Benefits Tier hospital, you pay the lowest cost share for both your PCP and hospital services.
- If your Enhanced Benefits Tier PCP refers you to a Basic Benefits Tier hospital, you pay the lowest cost share for PCP services, but the highest cost share for hospital services, except in an emergency.



Enhanced Benefits Tier

This includes Massachusetts hospitals and PCPs that meet the standards for quality and low cost relative to our benchmark.



Standard Benefits Tier

This includes Massachusetts hospitals and PCPs that meet the standards for quality and are moderate cost relative to our benchmark, and hospitals that don't meet the standards for quality but are low or moderate cost relative to our benchmark. Also includes providers without sufficient data for measurement on one or both benchmarks. To ensure members have provider access in certain geographic areas, the Standard Benefits Tier includes some providers whose scores would otherwise put them in the Basic Benefits Tier.



Basic Benefits Tier

This includes Massachusetts hospitals that are high cost relative to our benchmark and PCPs that don't meet the standards for quality or are high cost relative to our benchmark.

Frequently Asked Questions

Q: Are specialists included in the benefits tiers?

A: No. You'll be responsible for the specialist-level copay, typically equal to that of a Basic Benefits Tier PCP.

Q: Are mental health and substance misuse providers included in these tiers?

A: No. Mental health and substance misuse providers aren't currently tiered. The copay for behavioral health providers is typically equal to that of Enhanced Benefits Tier providers.

Q: How can I tell what the copay is for each tier?

A: The easiest way to tell what your costs will be is to look at the benefits summary or other plan information you received from your employer. If you didn't receive that information, you can create an account and log into MyBlue at bluecrossma.com/myblue and select Review My Benefits.

Q: If my plan has a deductible, how does it work?

A: If your plan includes deductibles, they generally don't apply to care with Enhanced Benefits Tier providers, giving you the lowest copay. Typically you'll pay a deductible for care with providers on the Standard Benefits Tier and a higher deductible for care with providers on the Basic Benefits Tier.

Q: Is the coverage for emergency room services the same for providers across all tiers?

A: Yes. Because you may not be able to choose your hospital in emergency situations, the copay for emergency room treatment is the same regardless of the hospital tier. If you're admitted through the emergency room, you'll be responsible for the Enhanced Benefits Tier hospital copay, regardless of the hospital tier.

Q: My doctor is referring me to a Basic Benefits Tier facility. What should I do?

A: Talk to your doctor about the tier of the facility where you'll be obtaining other services, such as inpatient care or surgery. The facility's tier will help determine your out-of-pocket costs.

Q: My hospital or provider is in the Basic Benefits Tier. Does that mean that they're not good?

A: PCP and general hospitals in the Basic Benefits Tier have scored below our quality benchmark or below our moderate cost benchmark. However, all our network providers are credentialed according to our quality criteria, which meet or exceed nationally recognized standards and requirements.

A provider's tier level should be one of several resources you use to evaluate a particular provider or hospital. The tier level for PCP who practice together is based on a combination of their group's performance on certain quality-of-care measures and a cost comparison with other providers in their geographic region or peer group.

You can find more information about our cost and quality benchmarks at bluecrossma.com/blueoptions.

Q: What happens if my PCP is unavailable on the day of my appointment?

A: A provider covering for your PCP will likely see you, but be aware: you're responsible for your copay based on the tier of the covering provider. PCPs in the same practice are typically in the same tier, but be sure to check with the covering provider to avoid unexpected costs.

Q: How do I know if my PCP or hospital has changed tiers?

A: To check which tiers your doctors and hospitals are in or to search for a new PCP by tier, use the Choose Providers section of our website at bluecrossma.com/blueoptions. We periodically update PCPs and hospital tiers.

Q: How does Blue Cross ensure the accuracy of its quality and cost information?

A: We perform an internal data check based on our PCP Incentive Program and other quality-related measures. We allow provider groups to review their performance results before publishing them. Also, provider groups can submit corrections, which are reviewed against measurement specifications. Corrections that meet the measurement criteria are incorporated to produce an accurate report.

Make Informed Health Care Decisions

Within the HMO Blue Options v.5 network, hospitals and groups of PCPs are ranked in three benefits tiers based on cost and nationally accepted quality performance criteria.

Where you receive care will determine your out-of-pocket costs for most services under the plan.

HMO Blue Options v.5 rewards you with lower costs for choosing Enhanced Benefits and Standard Benefits Tier hospitals and PCPs in Massachusetts. Network PCPs and general hospitals in Massachusetts are assigned to one of three tiers based on certain quality and cost measures, as shown on the previous page. You can check how PCPs and hospitals performed against these quality and cost benchmarks by using the Choose Providers section of our website, bluecrossma.com/blueoptions.

Getting Started with Your Plan

To start taking advantage of HMO Blue Options v.5, you can research which tiers your PCP and hospital are in or search for a new PCP or hospital by tier.

To Find a PCP or Check the Tier of Your PCPs or Hospitals:

- Visit our website at bluecrossma.com/findadoctor
- Call our Physician Selection Service at 1-800-821-1388

To Find Other Providers:

To find other network providers who aren't tiered, such as specialists, dentists, behavioral health providers, hospitals, or other health care providers, you can:

- Visit our website at bluecrossma.com/findadoctor
- Call Member Service at the number on the front of your ID card

Referral Information for Medical Services

If you and your PCP decide you need to see a specialist, you'll be referred to one your PCP feels is right for your specific treatment. It's an important decision, and the top priority is keeping you healthy. When making or confirming your appointment, you should make sure your PCP has contacted the specialist's office and has provided the referral, if needed.

Examples of services that don't require a referral:

- Routine OB/GYN care provided by a network provider
- One routine eye exam every 24 months provided by a network provider
- Emergency care

Because your out-of-pocket costs in Massachusetts are determined by where you get service, ask your doctors about their referral relationships. You can check the tier of any hospital and provider at bluecrossma.com/findadoctor.

Emergency Care

If you have a medical or behavioral health emergency, call **911** (or your local emergency number) or go directly to the nearest medical facility. Be sure to contact your PCP within 48 hours, so that he or she can evaluate your condition and coordinate any follow-up care.

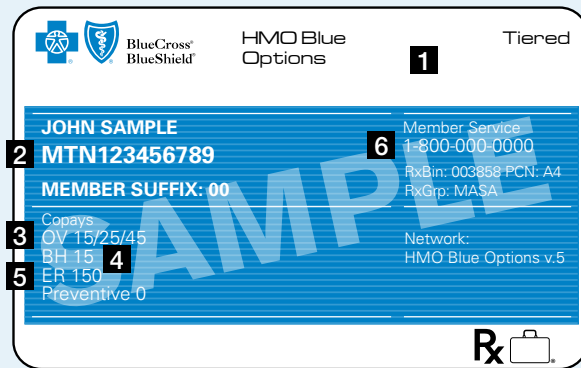
BlueCard® Program

Your Blue Cross ID card is widely recognized, and the BlueCard program allows you to receive urgent and emergency care services from any hospital or provider in the United States that participates in a Blue Cross plan. For a listing of participating providers and hospitals, call **1-800-810-BLUE (2583)**. For more information, visit the BlueCard website at provider.bcbs.com.

Know How to Read Your ID Card

Your member ID card contains important information, including our Member Service telephone number, your ID number, and your plan's copay for office visits, behavioral health visits, and emergency room visits. Be sure to always carry your ID card with you, and show it to all of your providers so they can update your records.

To the right is a sample ID card. Information shown on your ID card may be different based on your plan benefits. Check your ID card for your specific copay amounts.



- 1 Plan name
- 2 Your ID number
- 3 Office visit copay for Enhanced Benefits Tier/Standard Benefits Tier/Basic Benefits Tier or specialist
- 4 Behavioral health office visit copay
- 5 Emergency room copay (waived if admitted)
- 6 Number to call for questions about your plan

Get the Most from Your Plan



An easier way to access your health care plan and claims information. You can:

- View detailed plan information (benefits, deductible)
- View health financial accounts
- Access claims and review history in one convenient spot
- Quickly access commonly used tools and services

Register or log in now at bluecrossma.com/myblue.



Here you'll find interactive tools and comprehensive information that will help you assess your health and create a personalized action plan. You'll also be able to track your progress in real time. Learn more at ahealthyme.com.



Fitness and Weight-Loss Reimbursements

Interested in a healthier lifestyle? You may have access to reimbursements for participating in a qualified fitness or weight-loss program. For more information, check your benefit material, log in at bluecrossma.com/myblue, or call Member Service at the number on your ID card.



Telehealth—Real-Time Video Visits

Do you need care that is convenient and easy to access wherever you are? With Telehealth, you can have real-time video visits with a doctor or therapist using your computer, smartphone, or tablet. Telehealth can be a quality alternative to face-to-face doctor visits, and could help avoid costly emergency room trips for simple conditions. To see if you have coverage for Telehealth, please refer to your plan benefits or visit bluecrossma.com/telehealth to learn more.



MyBlue Member App

Get instant, secure access to your health care information from the convenience of your mobile device.

- Access an interactive ID card, and email a copy to your doctor
- Direct dial important phone numbers like Member Service
- Review recent claims, prescriptions, and doctor visits
- Find nearby doctors, dentists, and hospitals

Download the app from the App Store™ or Google Play™.



Go Digital

Whenever, wherever, it's easy to stay in touch with Blue Cross. Get the information and resources you need to keep up with important health topics, understand your benefits—and live a happier, healthier life. Connect with us on Facebook (facebook.com/BCBSMA) or Twitter (@BCBSMA)—or sign up for email by going to bluecrossma.com/email.



Blue365®

Because health is a big deal

Blue365 offers exclusive health and wellness deals, keeping you healthy and happy, every day of the year. From gym memberships and diet programs to family activities, we have just the deal for you. To see all that Blue365 has to offer, go to blue365deals.com.

continued

Get the Most from Your Plan (continued)



Living Healthy Babies®—From Preconception Through Your Baby's First Year

Have questions about pregnancy, labor, and what to expect during your baby's first year? We can help answer your questions. Visit livinghealthybabies.com today.

For More Information



Online Tutorials

View our engaging online tutorials to quickly and easily understand how your plan works at bluecrossma.com/tutorial.



Member Service (See front of your ID card for phone number)

For general questions about your coverage, call Member Service, Monday through Friday, 8:00 a.m. to 6:00 p.m. E.T. TTY: 711. Twitter: [@BCBSMAservice](https://twitter.com/BCBSMAservice)



Find a Doctor & Estimate Costs

Our Find a Doctor & Estimate Costs tool makes it easy for you to find what you need.

- Search for doctors, dentists, hospitals, and other health care providers
- Get cost estimates for over 1,600 procedures
- Read and write reviews
- Compare up to ten doctors at a time
- And more

Put more control in your hands by visiting bluecrossma.com/findadoctor, or call Member Service at the number on the front of your ID card.

For questions about out-of-country provider access and services, call 1-800-810-BLUE (2583).



Stay Connected with the Blue Cross MA Message Wire

Blue Cross MA Message Wire is a new communication channel that sends important information—like wellness tips, screening reminders, member discounts, and plan information—straight to your phone. Sign-up is quick and easy. Text [bluecrossma](https://textbluecrossma.com) to 73529, or call 1-844-779-8813. Make sure to have your Blue Cross Member ID card ready.



Blue Care® Line 1-888-247-BLUE (2583)

Use this number for questions about your health if you're hurt or sick and not sure where to get care. Call us 24/7 to speak directly to a registered nurse who can help guide your care.



Lost Member ID Card 1-800-253-5210

Order a new member ID card by calling 1-800-253-5210, Monday through Friday, 8:00 a.m. to 6:00 p.m. E.T. You can also request a new ID card by logging into bluecrossma.com/myblue.



Mail Service Pharmacy 1-800-892-5119

If you have prescription drug coverage, call 1-800-892-5119 anytime, 24 hours a day, 7 days a week, to learn more.



MASSACHUSETTS

Nondiscrimination Notice

Blue Cross Blue Shield of Massachusetts complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity. It does not exclude people or treat them differently because of race, color, national origin, age, disability, sex, sexual orientation, or gender identity.

Blue Cross Blue Shield of Massachusetts provides:

- Free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other formats (large print or other formats).
- Free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages.

If you need these services, call Member Service at the number on your ID card.

If you believe that Blue Cross Blue Shield of Massachusetts has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity, you can file a grievance with the Civil Rights Coordinator by mail at Civil Rights Coordinator, Blue Cross Blue Shield of Massachusetts, One Enterprise Drive, Quincy, MA 02171-2126; phone at **1-800-472-2689** (TTY: 711); fax at **1-617-246-3616**; or email at civilrightscordinator@bcbsma.com.

If you need help filing a grievance, the Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, online at ocrportal.hhs.gov; by mail at U.S. Department of Health and Human Services, 200 Independence Avenue, SW Room 509F, HHH Building, Washington, DC 20201; by phone at **1-800-368-1019** or **1-800-537-7697** (TDD).

Complaint forms are available at hhs.gov.

Translation Resources

Proficiency of Language Assistance Services

Spanish/Español: ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma. Llame al número de Servicio al Cliente que figura en su tarjeta de identificación (TTY: 711).

Portuguese/Português: ATENÇÃO: Se fala português, são-lhe disponibilizados gratuitamente serviços de assistência de idiomas. Telefone para os Serviços aos Membros, através do número no seu cartão ID (TTY: 711).

Chinese/简体中文: 注意: 如果您讲中文, 我们可向您免费提供语言协助服务。请拨打您 ID 卡上的号码联系会员服务部 (TTY 号码: 711)。

Haitian Creole/Kreyòl Ayisyen: ATANSYON: Si ou pale kreyòl ayisyen, sèvis asistans nan lang disponib pou ou gratis. Rele nimewo Sèvis Manm nan ki sou kat Idantifikasyon w lan (Sèvis pou Malantandan TTY: 711).

Vietnamese/Tiếng Việt: LƯU Ý: Nếu quý vị nói Tiếng Việt, các dịch vụ hỗ trợ ngôn ngữ được cung cấp cho quý vị miễn phí. Gọi cho Dịch vụ Hội viên theo số trên thẻ ID của quý vị (TTY: 711).

Russian/Русский: ВНИМАНИЕ: если Вы говорите по-русски, Вы можете воспользоваться бесплатными услугами переводчика. Позвоните в отдел обслуживания клиентов по номеру, указанному в Вашей идентификационной карте (телетайп: 711).

Arabic/العربية:

انتباه: إذا كنت تتحدث اللغة العربية، فتتوفر خدمات المساعدة اللغوية مجاناً بالنسبة لك. اتصل بخدمات الأعضاء على الرقم الموجود على بطاقة هويتك (جهاز الهاتف النقي للصم والبكم "TTY": 711).

Mon-Khmer, Cambodian/ខ្មែរ: ការជូនជំនាញ៖ ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ សេវាជំនួយភាសាឥតគិតថ្លៃ គឺអាចរកបានសម្រាប់អ្នក។ សូមទូរស័ព្ទទៅដុំនៃកាតសមាជិកតាមលេខនៅលើប័ណ្ណសម្គាល់ខ្លួនរបស់អ្នក (TTY: 711)។

French/Français: ATTENTION : si vous parlez français, des services d'assistance linguistique sont disponibles gratuitement. Appelez le Service adhérents au numéro indiqué sur votre carte d'assuré (TTY : 711).

Italian/Italiano: ATTENZIONE: se parlate italiano, sono disponibili per voi servizi gratuiti di assistenza linguistica. Chiamate il Servizio per i membri al numero riportato sulla vostra scheda identificativa (TTY: 711).

Korean/한국어: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 ID 카드에 있는 전화번호(TTY: 711)를 사용하여 회원 서비스에 전화하십시오.

Greek/λληνικά: ΠΡΟΣΟΧΗ: Εάν μιλάτε Ελληνικά, διατίθενται για σας υπηρεσίες γλωσσικής βοήθειας, δωρεάν. Καλέστε την Υπηρεσία Εξυπηρέτησης Μελών στον αριθμό της κάρτας μέλους σας (ID Card) (TTY: 711).

Polish/Polski: UWAGA: Osoby posługujące się językiem polskim mogą bezpłatnie skorzystać z pomocy językowej. Należy zadzwonić do Działu obsługi ubezpieczonych pod numer podany na identyfikatorze (TTY: 711).

Hindi/हिंदी: ध्यान दें: यदि आप हिन्दी बोलते हैं, तो भाषा सहायता सेवाएँ, आप के लिए नि:शुल्क उपलब्ध हैं। सदस्य सेवाओं को आपके आई.डी. कार्ड पर दिए गए नंबर पर कॉल करें (टी.टी.वाई.: 711)।

Gujarati/ગુજરાતી: ધ્યાન આપો: જો તમે ગુજરાતી બોલતા હો, તો તમને ભાષાીય સહાયતા સેવાઓ વિના મૂલ્યે ઉપલબ્ધ છે. તમારા આઈડી કાર્ડ પર આપેલા નંબર પર Member Service ને કોલ કરો (TTY: 711).

Tagalog/Tagalog: PAUNAWA: Kung nagsasalita ka ng wikang Tagalog, mayroon kang magagamit na mga libreng serbisyo para sa tulong sa wika. Tawagan ang Mga Serbisyo sa Miyembro sa numerong nasa iyong ID Card (TTY: 711).

Japanese/日本語: お知らせ:日本語をお話しになる方は無料の言語アシスタンスサービスをご利用いただけます。IDカードに記載の電話番号を使用してメンバーサービスまでお電話ください (TTY: 711)。

German/Deutsch: ACHTUNG: Wenn Sie Deutsche sprechen, steht Ihnen kostenlos fremdsprachliche Unterstützung zur Verfügung. Rufen Sie den Mitgliederdienst unter der Nummer auf Ihrer ID-Karte an (TTY: 711).

Persian/پارسیان:

توجہ: اگر زبان شما فارسی است، خدمات کمک زبانی ب صورت رایگان در اختیار شما قرار می گیرد. با شماره تلفن مندرج بروی کارت شناسایی خود با بخش «خدمات اعضا» تماس بگیرید (TTY: 711).

Lao/ພາສາລາວ: ຂໍຂວນໃສ່ໃຈ: ຖ້າເຈົ້າເວົ້າພາສາລາວໄດ້, ມີການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໃຫ້ທ່ານໂດຍບໍ່ເສຍຄ່າ. ໂທຫາຝ່າຍບໍລິການສະມາຊິກທີ່ໝາຍເລກໂທລະສັບຢູ່ໃນບັດຂອງທ່ານ (TTY: 711).

Navajo/Diné Bizaad: BAA ÁKOHWIINDZIN DOOÍGÍ: Diné k'ehjí yánílt'i'go saad bee yát'i' éi t'áájíik'e bee níká'a'doowólgo éi ná'ahoot'i'. Díí bee anítahígí ninaaltsoos bine'déé' nóomba biká'ígíjii' béésh bee hodíílnih (TTY: 711).

