



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 **BCBSTNSM** 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 **bcbst.com/accountsettings**. 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. Just go to **bcbst.com/otherinsurance** to tell us if you have other insurance.

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 save money. Before you get care, make sure your provider is in your network. Ask them, or, check for yourself at **bcbst.com/findcare**.

Your Care Options	When to Use Them	Cost
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.	\$\$
Virtual Care	Some network providers offer virtual visits for routine, non-emergency care. Your plan covers them at the same cost as a regular office visit.	\$\$
Urgent and Convenient Care	Use urgent or convenient care when your PCP isn't available, but it's not an emergency.	\$\$\$
Emergency Room (ER)	If you need care right away for a medical emergency or life-threatening health condition, go to the ER.	\$\$\$\$

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 **bcbst.com/coverage**. 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.



Just visit **bcbst.com/costs** to estimate costs.



Extras for Healthier Living

Living better shouldn't cost you more. That's why we've got you covered with discounts on health and fitness services, programs and gear to help you fit more healthy choices into your budget.



Free Screenings Keep You Healthy

Keeping an eye on your health — even when you're feeling fine — could save you money in the long run. When health problems are found early (before they become more serious), they're often easier and less costly to treat.

Most plans cover yearly checkups with an in-network doctor at no cost. This checkup may also include immunizations and lab tests to check for common health problems.



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**.

One-on-One Help When You Need It

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.



To learn more or sign up for this extra help, call us at **1-800-818-8581** or visit **[bcbst.com/CareTN](https://www.bcbst.com/CareTN)**.



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:

1. 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
3. 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:

1. 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

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 sex¹. BlueCross does not exclude people or treat them less favorably because of race, color, national origin, age, disability or sex.

BlueCross:

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

If you need these reasonable modifications, appropriate auxiliary aids and services, or language assistance 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 Grievance; 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>.

You can contact BlueCross's Nondiscrimination Coordinator at 423-535-1010 (TTY: 1-800-848-0298 or 711); Nondiscrimination_CoordinatorGM@bcbst.com (email); or Corporate Compliance, 1 Cameron Hill Circle, 1.4, Chattanooga, TN 37402.

This notice is available at BlueCross's website: bcbst.com.

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.

¹ Consistent with the scope of sex discrimination described at 45 CFR 92.101(a)(2)

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 انكليزية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. إذا كنت عضواً، فاتصل برقم خدمة الأعضاء الموجود على ظهر بطاقة هوية العضو أو بالرقم 1-800-565-9140 (الهاتف النسي: 1-800-848-0298).

注意: 如果您使用繁體中文，您可以免費獲得語言援助服務。若您為會員，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,ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ຖ້າທ່ານເປັນສະມາຊິກ, ໃຫ້ທ່ານເບິ່ງຂອງຝ່າຍບໍລິການສະມາຊິກທີ່ມີຢູ່ດ້ານຫຼັງບັດ ID ສະມາຊິກຂອງທ່ານ ຫຼື 1-800-565-9140 (TTY: 1-800-848-0298).

ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም አርዳታ ድርጅቶች፣ በነጻ ሊያግኙዎት ተዘጋጅተዋል፡ አባል ከሆኑ፣ በአባልነት መታወቂያ ጀርባ ላይ በሚገኘው የአባልነት አገልግሎት ቁጥር 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 સેવા 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 िंदी बोलते हैं तो आपके िला 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 (TTY: 1-800-848-0298).

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. در صورتیکه عضو هستید، با شماره خدمات اعضا در پشت کارت شناسایی عضو خود یا 1-800-565-9140 (TTY: 1-800-848-0298) 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 nínizin: Díí saad bee yánílti'go Diné Bizaad, saad bee áká'ánida'áwo'déé', t'áá jiik'eh, éí ná hóló. Naaltsoos bee ná ha'dit'éego, Naaltsoos Bá Hada'dit'éhígíí ninaaltsoos nít'i'izi bee nééhozinígíí bine'déé' Naaltsoos Bá Hada'dit'éhígíí Bee Áka'anida'áwo'í bíbéesh bee hane'í biká'ígíí bee hodílnih doodago 1-800-565-9140 (Doo Adinits'agóógo q TTY: 1-800-848-0298) bee hodílnih.

WICHDIH: Wann du Deutsch schwetzschst un witt en Translator, kenne mer eener grieghe fer dich unni as es dich ennich ebbes koschte zellt. Wann du en Member bischt, ruf der Member Service Number uff as uff die hinnerscht Seit vun dei Member ID Card is odder ruf 1-800-565-9140 (TTY: 1-800-848-0298) uff.

FAAMATALAGA: Afai e te tautala i le Gagana Samoa, o lo'o avanoa mo oe auaunaga fesoasoani i le gagana e leai se togoti. Afai o oe o se sui, fa'amolemole vala'au le numera o le Member Service o lo'o i tua o lau pepa ID po'o le 1-800-565-9140 (TTY: 1-800-848-0298).

ATENSHUN: Gare iga gogal Kapasal Falawasch, ye fri ngalug yamem bwe tepangung rel iye kepat kaale. Nge gare iga gel gosa fasiul log bwe semal member, gosa kol yegili nampal Member Service woal pak rel Member ID kard la yamw gare kol yegili 1-800-565-9140 (TTY: 1-800-848-0298).

ATENSION: Kumu membro hao, pot fabot agang i Setbision Membro na numeru gi santatin iyomu ID card Membro pat 1-800-565-9140 (TTY: 1-800-848-0298).

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** or
through the free **BCBSTNSM** app