

Exclusive Specialty Pharmacy Network

The pharmacies in our Exclusive Specialty Pharmacy Network provide our members with self-administered specialty drugs at discounted rates. Many of these pharmacies will ship your medications directly to your home. Your available pharmacies depends on the state where you live.

Pharmacy	Phone
Florida	
Caremark Specialty Pharmacy	1-800-237-2767
Jackson Pharmacy Solutions	1-423-926-6154
Publix Pharmacy	1-800-242-1227
Scripts	1-321-841-8251
University of Florida Health System	352-733-0111

Minnesota	
Caremark Specialty Pharmacy*	1-800-237-2767
Noble Health Services	888-843-2040
Transcripts Pharmacy	516-777-7040

Pharmacy	Phone
Oklahoma	
Caremark Specialty Pharmacy*	1-800-237-2767
Encompass Rx	866-455-9198
Noble Health Services	888-843-2040
Transcript Pharmacy	516-777-7040

Tennessee	
Caremark Specialty Pharmacy*	1-800-237-2767
Encompass Rx	866-455-9198

West Virginia	
Caremark Specialty Pharmacy*	1-800-237-2767
West Virginia University Hospital System	1-855-988-2273

All Other States	
Caremark Specialty Pharmacy*	1-800-237-2767

If you have questions about your Exclusive Specialty Pharmacy Network, just give us a call at the Member Service number on the back of your Member ID card.

*Pharmacy ships to all 50 states

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.

ATTENTION: If you speak English, free language assistance services and appropriate auxiliary aids and services are available to you. Please call the Member Service number on the back of your Member ID card or 1-800-565-9140 (TTY: 1-800-848-0298).

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma, así como ayudas y servicios auxiliares adecuados. Llame al número de Servicio de atención a miembros que figura en el reverso de su tarjeta de identificación de miembro o al 1-800-565-9140 (TTY: 1-800-848-0298).

اتباه: إذا كنت تتحدث العربية، فستوفر لك خدمات المساعدة اللغوية المجانية والخدمات والأدوات المساعدة المناسبة. يرجى الاتصال برقم خدمة الأعضاء الموجود على ظهر بطاقة هوية العضو الخاص بك أو بالرقم 1-800-565-9140 (الهاتف النصي: 1-800-848-0298)

注意: 如果您說中文, 我們提供免費的語言協助服務, 以及適當的輔助協助和服務。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)。

LUU Y: Nếu quý vị nói tiếng Việt, quý vị sẽ được cung cấp các dịch vụ hỗ trợ ngôn ngữ miễn phí và các dịch vụ và công cụ hỗ trợ phù hợp. Vui lòng gọi đến số của bộ phận Dịch vụ Hội viên ở mặt sau Thẻ ID Thành viên của quý vị hoặc số 1-800-565-9140 (TTY: 1-800-848-0298).

주의: [한국어]를 사용하시는 경우, 무료 언어 지원 서비스 및 적절한 보조 기구와 서비스가 제공됩니다. 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 gratuits d'assistance linguistique et des aides et services auxiliaires appropriés sont à votre disposition. Veuillez appeler le numéro du Service adhérents indiqué au dos de votre carte d'assuré adhérent ou le 1-800-565-9140 (TTY/ATS : 1-800-848-0298).

ਐਂਗਲਿਸ਼: ਆਪਣੀ ਮਾਤਾ ਬਾਸ਼ਾ ਵਿਚ, ਮੈਂਬਰਸ਼ਿਪ ਆਈਡੀ ਕਾਰਡ ਦੇ ਪਿੱਛੇ ਦੇ ਨੰਬਰ 'ਤੇ ਜਾਂ 1-800-565-9140 (TTY: 1-800-848-0298) 'ਤੇ ਸੰਪਰਕ ਕਰੋ।

ማሰገንዘቢያ:- አማርኛ የሚናገር ከሆነ፣ ነጻ የቋንቋ እርዳታ አገልግሎቶች እና ተገቢ ረዳት መርዳታችን እና አገልግሎቶችን ለእርስዎ ይገኛሉ። በአገልግሎት መተወደድያ ጀርባ ላይ በሚገኘው የአገልግሎት አገልግሎት ቁጥር ወይም 1-800-565-9140 (TTY: 1-800-848-0298) ይደውሉ።

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistentendienste und geeignete Hilfsmittel und Dienstleistungen zur Verfügung. Bitte rufen Sie die Nummer des Mitgliederdienstes auf der Rückseite Ihrer Mitglieds-ID-Karte oder 1-800-565-9140 (TTY: 1-800-848-0298) an.

ਧਿਆਨ ਆਯੋ: ਜੇਕਰ ਤੁਸੀਂ ਆਪਣੀ ਮਾਤਾ ਬਾਸ਼ਾ ਵਿਚ, ਮੈਂਬਰਸ਼ਿਪ ਆਈਡੀ ਕਾਰਡ ਦੇ ਪਿੱਛੇ ਦੇ ਨੰਬਰ 'ਤੇ ਜਾਂ 1-800-565-9140 (TTY: 1-800-848-0298) 'ਤੇ ਸੰਪਰਕ ਕਰੋ।

お知らせ: 日本語をお話しになる場合は、無料の支援サービスと適切な補助器具・サービスがご利用いただけます。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。

PANSININ: Kung kayo ay nagsasalita ng Tagalog, magagamit para sa inyo ang libreng mga serbisyonang tulong sa wika at kaukulang mga karagdagang tulong at mga serbisyo. Mangyaring tawagan ang numero ng Serbisyo sa Miyembro na nasa likod ng inyong 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 निःशुल्क भाषा सहायता सेवाएँ और उपयुक्त सहायक साधन और सेवाएँ उपलब्ध हैं। कृपया अपने सदस्य ID कार्ड के पीछे दिए गए सदस्य सेवा नंबर या 1-800-565-9140 (TTY: 1-800-848-0298) पर कॉल करें।

ВНИМАНИЕ! Если Вы говорите по-русски, Вам будут предоставлены услуги языковой поддержки и соответствующие вспомогательные средства и сервисы на бесплатной основе. 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 صحبت می کنید، خدمات کمک زبانی رایگان و مساعدت ها و خدمات کمکی مناسب در دسترس شما هستند. در صورتیکه عضو هستید، با شماره خدمات اعضا در پشت کارت عضویت خود یا 1-800-565-9140 (TTY: 1-800-848-0298) تماس بگیرید.

ATANSYON: Si w pale Kreyòl Ayisyen, genyen sèvis asistans gratis pou lang ansanm ak èd pou sèvis oksilyè apwopriye k ap disponib pou ou. Tanpri rele nimewo Sèvis Manm ki sou do kat ID Manm ou an oswa 1-800-565-9140 (TTY: 1-800-848-0298).

UWAGA: Osoby posługujące się językiem polskim mogą bezpłatnie skorzystać z pomocy językowej oraz rozwiązań i usług pomocniczych. Prosimy zadzwonić pod numer działu obsługi ubezpieczonych podany na odwrocie karty identyfikacyjnej członka lub numer 1-800-565-9140 (TTY: 1-800-848-0298).

ATENÇÃO: Se você fala Português, serviços gratuitos de assistência linguística e recursos e serviços auxiliares apropriados estão disponíveis para você. Ligue para o número de 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: se parla italiano, sono disponibili per Lei servizi gratuiti di assistenza linguistica nonché aiuti e servizi ausiliari adeguati. 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).

BAA'áKOHWIINIDZIN: Diné bizaad bee yánłít'í go, t'áá jiik'eh saad bee áka'aná'awo' bee áka'anida'awo'í dóó t'áadoole'é binahj'í bee adahodooníłgíí diné bich'í' anidahazt'í'í bee bika'aanida'awo'í ná dahóló. T'áá shóódí Bít Ha'dít'éhí Bika'aná'awo' Bít Ha'dít'éhí ID naaltsoos nit'í'z'í bine'déé' binámbo bee hodíłn'ih doodago 1-800-565-9140 (TTY: 1-800-848-0298).

WICHDIICH: Wann du Deutsch schwetzschst un brauchschst Hilf fer communicat-e kenne mer dich helfe unni as es dich ennich eppes koschde zellt. Mir kenne differnti Sadde Schprooch-Hilf beigrigee aa fer nix. Ruf der Member Service Nummer uff die hinnerscht Seit vun dei Member ID Card uff odder 1-800-565-9140 (TTY: 1-800-848-0298).

FAASILASILAGA: Afai e te tautala i le faa-Samoa, o loo avanoa mo oe auanaga fesoasoani mo gagana e aunoa ma se tofogi faapea ma fesoasoani fa'aopo'opo ma auanaga talafeagai. Faamolemole vala'au le numera o le Member Service (Auanaga mo Tagata Auai) o lo'o i tua o lau pepa ID o le Member (Tagata Auai) po o le 1-800-565-9140 (TTY: 1-800-848-0298).

GAKIULA: Gare iga go kapetal Faluwasch, ye toore paliuwal yamem bwe tepangul rel gamatefal lane kapetal Faluwasch. Fale peshem kol yegili nampal Member Service ila yelog liugul tagurul Member ID kard la yam gare 1-800-565-9140 (TTY: 1-800-848-0298).

ATENSIÓN: Guaha setbisio siha para hãgu yanggen fifino' CHamoru hao, dibátde na setbisión inayudon fumino' CHamoru yan propriu na inasisten trastes yan setbisio siha. Put fabot ágang i numiron Setbision Membro gi santatten i kattá-mu Member ID pat 1-800-565-9140 (TTY: 1-800-848-0298).

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