





Enrollment Guide For Group Employees

Making the Important Choices Easier.

Enrolling in your benefits

When your employer offers Blue Cross and Blue Shield of Florida benefits, we put you in the driver's seat.

Today's health care decisions are based on balance—and no one knows the needs of you and your family better than you. We're here to help you make the best decisions for your health care coverage with this easy-to-understand benefit overview. All that you need to do is make your choice and then enroll. So we'll be with you every step of the way in your pursuit of health.

Getting the most from your benefits

It pays to plan ahead so you can decide what's best for your care. Why not take the time to shop and compare? Throughout this booklet, you'll find smart ways to use your benefits and save money. And we can help you understand your choices whenever you need medical care. Over the phone, online or in person, we give you the information you need to make it easier for you to decide where to go.



Shop, compare and estimate your costs

We can help you save time and money.



Call

Speak with a Care Consultant at 1-888-476-2227.





What's inside?

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- 4-5 Finding a doctor or hospital in your network at bcbsfl.com
- Pharmacy programs and benefits
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- 9 How to shop, compare and estimate your health care costs
- Terms and definitions
 Before you begin, you may want to familiarize

yourself with some common insurance terms, on page 10, that are used throughout this guide.

How to enroll

Before you enroll in a plan...



- Consider how other plans or coverage have worked for you—too much, too little or just right?
- Review your last year's spending including premiums, out-of-pocket medical costs and prescription drug costs.
- Think about how you or your family's health care needs might be different during the upcoming year.

Choosing a plan that's right for you

Whether you need a health benefit plan¹ for coping with seasonal allergies, comprehensive coverage, or simply for emergencies and hospitalization, our plans offer flexibility and affordability.

The BlueChoice® Preferred Patient Care (PPO) plan offers you the freedom to choose any doctor and hospital for care. You also have the option to receive care from any physician or hospital participating in our Traditional provider network.

 Adult wellness including women's annual exams and mammograms, colonoscopies, as well as, well child care, immunizations and routine checkups for children are covered at 100%.

- Choosing doctors and hospitals in the PPO provider network means no claims filing and no balance billing.
- All Blue plans give you access to help when you need it (online, over the phone or face-to-face at a Florida Blue center)—with personal service in the language of your choice.
- Save big money with member-only discounts for health-related programs and services.

Important

You can find more details on the actual plan(s) being offered by referring to the **Benefit Summary(ies)**, which include the covered benefits and the expenses you may have to pay out of your pocket (also called copays, coinsurance or deductibles).

Your **dependents** may be covered as long as you maintain your policy with us. Ask for complete details.

Tax savings plans

Along with a wide range of health plans, you may have tax-free options to pay for some health care expenses and budgeting for the future. Financial accounts that work with specific health plans, such as a Health Reimbursement Account (HRA), or a Flexible Spending Account (FSA)², can allow you to set aside tax-free money to use for qualified medical expenses. Check with your employer to find out if a financial plan option is included.

¹ Exclusions and limitations may apply. The amount of benefits provided depends upon the plan selected, and the premium will vary with the amount of benefits selected.

² The FSA and HRA programs are financial reimbursement plans, not insurance programs.



How to find a doctor

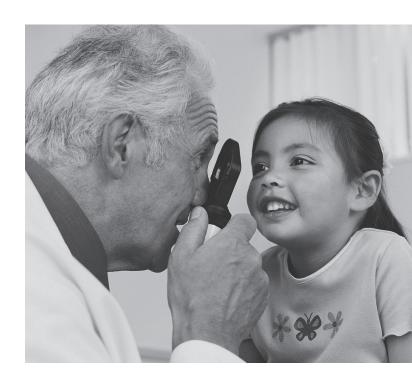
Go online to bcbsfl.com and select the Find a Doctor and More tab, to find a physician, health care facility, pharmacy or specialist in your health plan's network.

This online provider directory is also available in Spanish.

Start with the basics

The doctor you see for care is very important. When you enroll, you don't have to tell us which doctor will be taking care of you, but choosing one to know all about you is ideal. Who you see for routine office visits will determine what you pay. For the lowest out-of-pocket costs, choose a doctor who participates in the extensive PPO Provider network.

To find providers that participate in your plan's network, you can log on to our online provider directory at bcbsfl.com, or bcbs.com for out-of-state. You can find doctors, specialists, hospitals, phamacies, labs, even urgent care centers or find out-of-town providers when you are traveling. You can even learn about a doctor's admitting privileges, the medical school they attended, their gender, their specialty, and their office locations.





• You should know that if your doctor sends you for an X-Ray, CT scan, or MRI, it will generally cost you less to have that test at an independent, or "freestanding", in-network X-Ray/Imaging Center (Diagnostic Imaging)—rather than as an outpatient at a hospital. You can locate participating X-Ray/Imaging Centers through our Find a Doctor and More tab on bcbsfl.com.

We can help you **determine costs before you have an imaging service**—just call, click or visit us in person at a Florida Blue center.

• If you need to see a doctor, keep in mind the cost of your visit can vary depending on the location you choose. Not all locations charge the same. **Know before you go**.

It pays to stay in-network

Our coverage includes a strong network of quality providers located in the communities where you live and work.

- We've negotiated lower rates with our in-network providers to keep your out-of-pocket low and help you get the most value for every health care dollar.
- No referrals are required, so you'll find it convenient to access specialists for the care you need, while saving money, too.
- Plus, in-network providers usually obtain the prior authorizations for certain services and help protect you from balance billing.

Know your costs

At the doctor's office, your Member ID card has a magnetic stripe that works to quickly and easily get

an estimate of your out-of-pocket costs. With a swipe, participating physicians can review specific member eligibility and benefit information—so you'll know your cost right away.

When you travel, you're still covered

Wherever you go, through our BlueCard®3 program, your health care coverage goes with you. You'll get access to the participating providers of independent Blue Cross and/or Blue Shield organizations across the country and worldwide—and you shouldn't have to pay more than the rates they have negotiated with doctors and hospitals in their areas.

To find the participating doctors and hospitals outside of Florida, call 1-800-810-BLUE (2583) or visit bcbs.com and click on "Find a Doctor or Hospital".

How to find a doctor

³ The BlueCard Program is made available through the Blue Cross and Blue Shield Association (BCBSA). Neither Blue Cross and Blue Shield of Florida nor BCBSA shall be liable for losses, damages, or uncovered charges as a result of using the BlueCard Worldwide Service Center or receiving care from any provider listed on its website.



Pharmacy plans make medication easier to swallow

Your BlueChoice plan includes coverage for prescription drugs through either our **BlueScript®** or **MediScript™** pharmacy program.

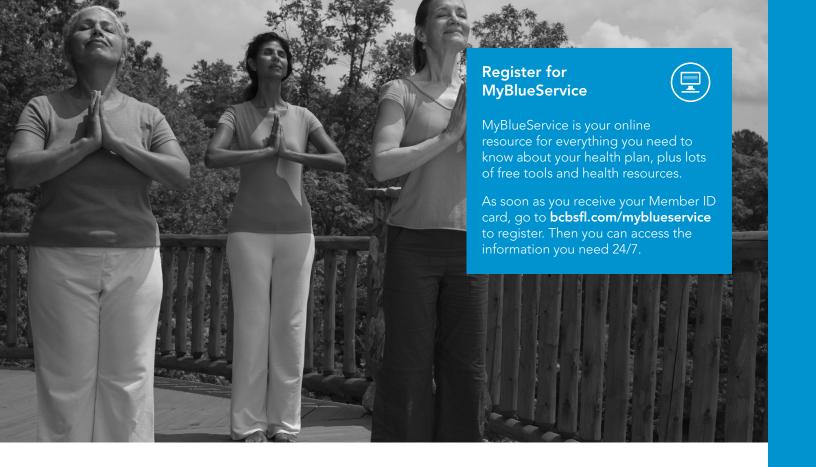
- The MediScript pharmacy benefit provides for claim reimbursement once deductible and coinsurance limits are met. Oral contraceptives and diaphragms purchased at participating pharmacies are covered.
- The **BlueScript** pharmacy benefit offers a choice of copayment combinations when prescription drugs are purchased at participating pharmacies. Through the mail order program, you get a full 90-day supply for an amount equal to a designated mail order copayment (which is generally more than one retail copayment and is identified in the pharmacy program schedule of benefits attached to your pharmacy endorsement).

To find a listing of brand and generic drugs that may be covered under your health plan, you can refer to the **Medication Guide**. And to help manage your expenses, you can see at-a-glance which drugs are on our Preferred Medication List if your doctor decides a prescription drug is necessary. Some drugs may require prior authorization in order to be covered under your plan.

With certain medications there are potential safety risks, such as overuse, which can be harmful to your health and costly to your wallet. These medications may be included in one or more of our **Responsible Rx programs** such as Prior Authorization, Responsible Steps or Responsible Quantity. The Medication Guide can provide additional details about medications that are included in these programs.



- As a member, you can **compare drug prices** online through MyBlueServiceSM. Use our prescription drug tool to view costs from selected pharmacies to get the lowest cost for your medications. Find out if there are lower cost generic equivalents or therapeutic alternatives, too.
- Ask your doctor or pharmacist if a **generic equivalent** of your prescription medication is appropriate for you—typically they're less expensive.
- Request a BlueSaver Prescription Savings Card⁴ so you're able to get special discounted pricing on brand name prescription drugs that are not covered under your pharmacy benefit. To obtain the BlueSaver Savings Card, go to bluesaverflorida.com and note Group #799 or call 1-866-895-1656 and a card will be mailed to you.



Your health benefits and living healthy information

When you want real-time support, helpful tips and answers 24/7, MyBlueService is your online self-service destination for everything you need. You can review your plan benefits, get up-to-date information on your out-of-pocket expenses, check claims, view your benefit booklet or request an ID card. Plus, get access to personalized information, proactive programs, and financial advantages to keep you in charge of your health and health care.

The more you know, the better you feel. And we have so many easy and convenient tools to help you understand the information you need to positively impact your health status.

- Take advantage of our enhanced member-exclusive WebMD[®] access and check out the most popular resources and tools.
- View health videos and read blogs.
- Make better choices for a healthier future with the help of lifestyle improvement programs that offer personalized support for weight management, stress management, nutrition, smoking cessation and exercise programs.
- Research your symptoms with the easy-to-use, interactive Symptom Checker.
- Use your Member Health Statement to track your health care expenses.

- Create a Personal Health Record so you can set up a secure, comprehensive online record of your medical history, allergies, prescriptions and current health status.
- You'll also find valuable coupons to help you save on health-related items.





Help is just a phone call away

Care Consultants—to get the best advice on quality and cost of services

1-888-476-2227

24-Hour Nurseline—for advice on everything from nutrition to illnesses

1-877-789-2583

Healthy Addition—for expectant moms

1-800-955-7635, option 6

Care Coordinator—to help with ongoing health conditions and disease management

1-800-955-5692, option 4

Through MyBlueService, you are able to schedule a call at a time convenient for you.

Personalized care online, on the phone and in person

Everyone is different, as are everyone's health care needs. Whether you're fit and looking for preventive guidance, just want routine checkups, treating a chronic condition or in need of urgent care, taking a **Personal Health Assessment** is the right first step.

Take your assessment online to help you define what you need to do now, as well as in the long-term—and how to ensure your budget can deal with it all. Register at bcbsfl.com/myblueservice and go to the Living Healthy tab to take the assessment.

Expert advice on call

- Our Care Consultants can help you understand your condition, plus help you explore your treatment options so you're able to make the choices that are best for you.
- For advice 24/7, our Nurseline⁵ is available for general health and prevention questions or for education and support on medical issues like diabetes, heart disease or surgeries.
- For assistance with disease management, surgeries and extended care procedures, make sure your treatment and recovery path are maximized by simplifying the process through our Care Coordination program.



- Our Healthy Addition® program is a prenatal education/ early intervention program designed to provide expecting moms information for healthy pregnancy and delivery.
- Stop by a local Florida Blue center to talk with a registered nurse for in-person guidance and support for all of your health needs. Check your health status and get one-on-one help creating a plan to import or maintain your health.

⁵ As a courtesy, BCBSF has entered into arrangements with various vendors to provide value-added features that include care decision support tools and services to its members. These programs are not part of insurance coverage. All decisions should be made in conjunction with the physician, since neither BCBSF nor its vendors provide medical care or advice.

Top 5 ways to save



- Choose a doctor who participates in-network.
- Seek care at an **in-network urgent care center** or a **walk-in clinic** for non-emergencies.
- For treatment or a procedure, ask your doctor to schedule it at an outpatient **ambulatory surgical center** instead of the hospital.
- Go online or call us to find a pharmacy that offers the **lowest cost** on your prescriptions.
- MyBlueService is your online health resource for everything you'll
 need to know about all the savings and discounts you want. Register
 at bcbsfl.com/myblueservice when you receive your Member ID card.



Shop, compare and estimate your costs

We can help you save time and money.

You have choices when it comes to the cost of your health care.

The quality and price of medical services can vary depending on where you go for office visits, imaging services, and surgery, including inpatient and outpatient care.

- Compare quality and cost before you go, and then decide what's best for your care. You could save hundreds of dollars, or more, on your health care services!
- Our cost estimator lets you compare up to five providers and tells you what your expected costs will be for services before you go. You can "know before you go" because you can check out costs, providers and quality of care ratings.
- Cost estimates are based on your plan and where you stand with your deductible. Your costs are lower after your deductible is met—pay only coinsurance or a copay for in-network services.

When you or your family members need care, consider your options, when you call, click or visit before you make your health care decision. Best of all, we offer this information and support to you for free!

Take advantage of member discounts

With our member-only discount program, Blue365^{®6}, you can get substantial savings on health and wellness products and services including:

- Vision care, glasses, contact lenses
- Hearing aids and care
- Fitness club memberships, exercise footwear and apparel
- Weight loss management
- Family care and eldercare services and much more

Find out more. Register at bcbsfl.com/myblueservice when you receive your Member ID card.

⁶ Blue365 offers access to savings on items that Members may purchase directly from independent vendors, which are different from items that are covered under your policy with your local Blue company, its contracts with Medicare, or any other applicable federal health care program. To find out what is covered under your policy, call your local Blue company. The products and services described herein are neither offered nor guaranteed under your local Blue company's contract with the Medicare program. In addition, they are not subject to the Medicare appeals process. Any disputes regarding these products and services may be subject to your local Blue company's grievance process. Blue Cross and Blue Shield Association (BCBSA) and local Blue companies may receive payments from Blue365 vendors. Neither any local Blue company nor BCBSA recommends, endorses, warrants or guarantees any specific Blue365 vendor or item.

Common insurance terms used throughout this guide

Allowed amount

The maximum dollar amount a provider within our network has agreed to accept for a covered service

Balance billing

The additional amount you may be billed if you seek care from a provider that is not within our network

Benefit period

The predetermined start and end date of your plan benefits

Copayment (copay)

The set amount you owe, if any, at the time of the medical service

Coinsurance

The percentage of the total charges you pay, if any, at the time of service

Covered services

Medical services that are eligible for payment under your health plan

Deductible

The amount, if any, per benefit period, you owe before we begin to pay for covered services

In-network

Refers to a provider (person or institution) who is participating in your plan's network; you should pay less if you receive covered services from in-network providers because of pre-negotiated rates

Out-of-network

Refers to a provider not in your network, where your out-of-pocket costs will generally be higher

Out-of-pocket

What you pay for medical expenses (copay, coinsurance, deductible, etc.)

Out-of-pocket maximum

The most you'll pay out of your pocket during your benefit period for any covered services you receive

Preferred Provider Organization (PPO)

The Preferred Provider Network, throughout the U.S., made up of independent hospitals, physicians, and ancillary providers who are considered participating providers for your health plan.

Provider

Any person or institution offering health care services, such as doctors, specialists, hospitals, labs, etc.



Checklist

Personal Information

Before enrolling, make sure you have all the information you need for you, your spouse and dependents that you cover:

Ш	Social	Security	Numbers
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Dates	$\circ f$	hi	rth

Other Insurance

If you or any family member has any additional insurance, you'll also need:

Name, mailing address and pl	hone	numbe	1
of the insurance company			

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		The	policy's	effective	date
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Special Note

If you do not wish to participate in your company's benefit program, you still need to complete the Refusal of Coverage section on the application.

What's Next?

After you enroll in one of our health benefit plans, you'll receive a welcome package that includes your Member ID card. Use it to register for MyBlueService at bcbsfl.com so you can take advantage of all the health resources, shopping tools and healthy living videos that can help you in your pursuit of health.



MyBlueService

Register at bcbsfl.com/myblueservice



Care Consultants

1-888-476-2227

Hours: weekdays 8 a.m. to 9 p.m. EST



Florida Blue centers

In-person support in select areas around Florida. Visit floridablue.com for locations or call 1-877-FL-BLUE-0 (1-877-352-5830) Hours: Monday-Saturday 10 a.m. to 8 p.m. EST



BlueCard Program

(National providers for when you travel) 1-800-810-BLUE (2583) bcbs.com



Health information on the go

Find a doctor, get health alerts, win prizes, download ringtones and so much more. From any Smartphone—a Blackberry, iPhone, Droid and even the iPad—just type bcbsfl.com into your mobile browser.



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Ph	armacy:	
	Call the number on the back of your Member ID card	
Group Nur	nber:	
Contract N	umber:	







