



Welcome to your health plan



We're glad you're with us



Welcome to your Premera health plan. We are pleased to have you as a member and are dedicated to providing you with the peace of mind our members have come to expect from Premera Blue Cross.

This guide contains important information about your health plan, so keep this handy for quick reference when you need it.

And to help with your transition to Premera, here are some helpful resources:

- Your new provider network and how to see if your doctor is in it. **See page 3**
- Continuation of current health care. **See page 3**
- Prescription drug coverage. **See page 4**
- Prior authorization for procedures and prescription drugs. **See pages 4 and 5**
- Teladoc® – access to a doctor 24/7. **See page 7**

We look forward to providing you and your family with high quality health coverage and services. If you have any questions, call us at **800.722.1471**, Monday through Friday, 8 a.m. to 5 p.m., Pacific Time. We're here to help you.

Getting started with your health plan

FIND OUT IF YOUR DOCTOR IS IN THE NETWORK

Use the Find a Doctor tool on **premera.com** to see if your current provider is in the network. Or call us at **800.722.1471**.

- In Washington State: Select 'Heritage & Heritage Plus 1' or 'Heritage Prime' as your network.
- Outside Washington State: Select 'BlueCard PPO' as your network.

IF YOU ARE CURRENTLY RECEIVING ONGOING CARE

In the unlikely event that your current provider is not in the new network, your doctor can request an exception for you so you can receive in-network benefits while receiving care from your out-of-

network provider. Exceptions are reviewed on a case-by-case basis and are subject to established guidelines. Call us at **800.722.1471** for more information on submitting an exception.

IF YOU ARE...

In your 2nd or 3rd trimester of pregnancy	You may remain with your doctor through delivery and initial postpartum visit—generally up to eight weeks after delivery.
Involved in active ongoing treatment	You may be allowed to complete the current treatment plan. Such treatments may include: <ul style="list-style-type: none">• Active phase of chemotherapy• Active phase of radiation• Initial phase of anti-coagulation• Rapid titration of medications dose (e.g., steroids) This will be handled on a case-by-case basis. Please call Customer Service for assistance.
Receiving treatment or care for surgery or hospitalization that is scheduled after you have enrolled in your new Premera plan	This will be handled on a case-by-case basis. Call Customer Service for assistance.
Receiving treatment or care for recent major surgery or for surgery planned	This will be handled on a case-by-case basis. Call Customer Service for assistance.
Enrolled in a hospice program	You will be allowed to remain with your current provider.
Receiving mental health and/or substance abuse services	This will be handled on a case-by-case basis. Call Customer Service for assistance.

Know before you go

Talk to your provider before scheduling any medical procedures

Some services and procedures will need approval for coverage from Premera before you receive them. This is called prior authorization, and it helps you:

- > Avoid inappropriate or unnecessary medical treatment
- > Find out if you're covered for benefits before you have a procedure or treatment
- > Save money and avoid extra costs
- > Get an estimate of your out-of-pocket costs before you go

Your health-care provider is familiar with the process for getting prior authorization, so it's best to let your doctor contact Premera on your behalf. Your doctor has all of the medical information needed to request that your procedure or treatment be reviewed and approved for coverage. Always ask your doctor if prior authorization for your procedure is required, and if so, to submit one on your behalf.

Prescription drug coverage

Premera offers prescription drug benefits through Express Scripts,* a nationwide network of retail pharmacies and accompanying mail order prescription service. Most pharmacy chains and independent pharmacies participate in the Express Scripts retail network, ensuring you in-network convenience close to home.

In addition, you'll soon have access to online tools that you can use to price and research your current prescription medications. That service on **premera.com** begins on your plan's effective date; but if you need to check on the cost of a particular medication prior to that date, call Customer Service at **800.722.1471**.

Be sure to present your Premera member ID card at the pharmacy

There is no separate card for pharmacy. Presenting your Premera member ID card ensures you will receive the highest level of benefits for all your prescription purchases.

Speak with a pharmacist when you need more information

Whether you need to find a local pharmacy or ask a question about a prescription, you can call Express Scripts Member Services at **800.391.9701**. Beginning on your plan's effective date, customer service representatives and pharmacists are available to speak with you 24 hours a day, 7 days a week.

24-Hour NurseLine is ready to help! **800.841.8343**

Beginning on your plan's effective date, you can speak with a registered nurse about your health concerns. It's free, it's confidential, and it's available wherever and whenever you need it.

* Express Scripts is an independent company responsible for providing Premera members with access to a nationwide network of pharmacies, mail-order pharmacy services, and Accredo specialty pharmacy services. It does not provide Blue Cross Blue Shield products or services and is solely responsible for their own services.



PREVENTIVE DRUG LIST—DEDUCTIBLE STILL WAIVED

To maintain an HSA-compatible medical plan, the IRS requires that all medical treatment other than preventive care is subject to the deductible. Premera has developed a list of preventive medications that meet IRS criteria.

The list of preventive medications has changed.

To learn more about which preventive drugs are covered at 80% with the deductible waived, call us at **800.722.1471**

PRIOR AUTHORIZATION FOR CERTAIN PRESCRIPTIONS

Certain drugs you may be taking are subject to approval or prior authorization—to encourage safe, cost-effective medication use by allowing coverage when certain conditions are met. Even if you received prior authorization from your previous carrier, you may be asked to have your doctor recertify for certain drugs with Premera. Drug lists and therapy steps may differ.

For more information about prior authorization, go to **premera.com**. Click on the Pharmacy tab and select “Drugs requiring approval.” You can search for a specific drug under “Pharmacy Prior Authorization Drugs.” Or call us at **800.722.1471** and we'll help you sort it out.

Go paperless!

Log in at **premera.com** and choose to be notified by email when your Explanation of Benefits (EOB) statement is available for you to access online.

TRANSFERRING MAIL ORDER PRESCRIPTIONS

Many maintenance medications are available through Express Scripts Home Delivery—Premera's mail order pharmacy. You can get up to a 90-day supply and your out-of-pocket costs may be lower than what you pay at a retail pharmacy. Mail order prescriptions from your previous carrier will not be transferred to Premera, so it's a good idea to make sure you have enough medication to last during the transition. If you find yourself running low near the end of the plan year, place a final order to ensure that you have an uninterrupted supply.

To use mail order:

- 1 Download the mail order form from **premera.com** by clicking on the Member Services tab, then Forms, then Pharmacy, then Express Scripts Home Delivery Mail-Order Form. Mail order prescriptions from your previous carrier will not be transferred.
- 2 It can take up to two weeks to receive your prescription through Express Scripts Home Delivery; so ask your doctor to write two separate prescriptions:
 - One for a 30-day supply that you can fill right away at a local pharmacy.
 - One for a 90-day supply, or supply maximum allowed by your plan, that you can mail to Express Scripts two weeks prior to your medicine running out.
- 3 Ordering refills is easier once you register online with Express Scripts Pharmacy. Simply log in to **premera.com**, click on Pharmacy and then on the Mail Order Prescriptions tab. Or order your refills by calling Express Scripts Pharmacy at **800.391.9701**. Order your refill at least two weeks before you need it, to make sure you receive your medicine before it runs out.

TRANSFERRING SPECIALTY DRUG PRESCRIPTIONS

Many people with complex conditions like multiple sclerosis, rheumatoid arthritis, and cancer need special medications that are usually self-injected, expensive, and often times require special handling (such as refrigeration).

Premera has a program that focuses solely on the delivery of specialty drugs. If you take a specialty drug, it will only be covered if purchased through one of Premera's specialty pharmacy providers: Accredo (an Express Scripts specialty pharmacy) or Walgreens Specialty Pharmacy.* (Prices may vary.)

You can call Walgreens or Accredo after your plan's start date to get enrolled.



For a full list of specialty drugs and more information about the program, visit the pharmacy section on **premera.com**.

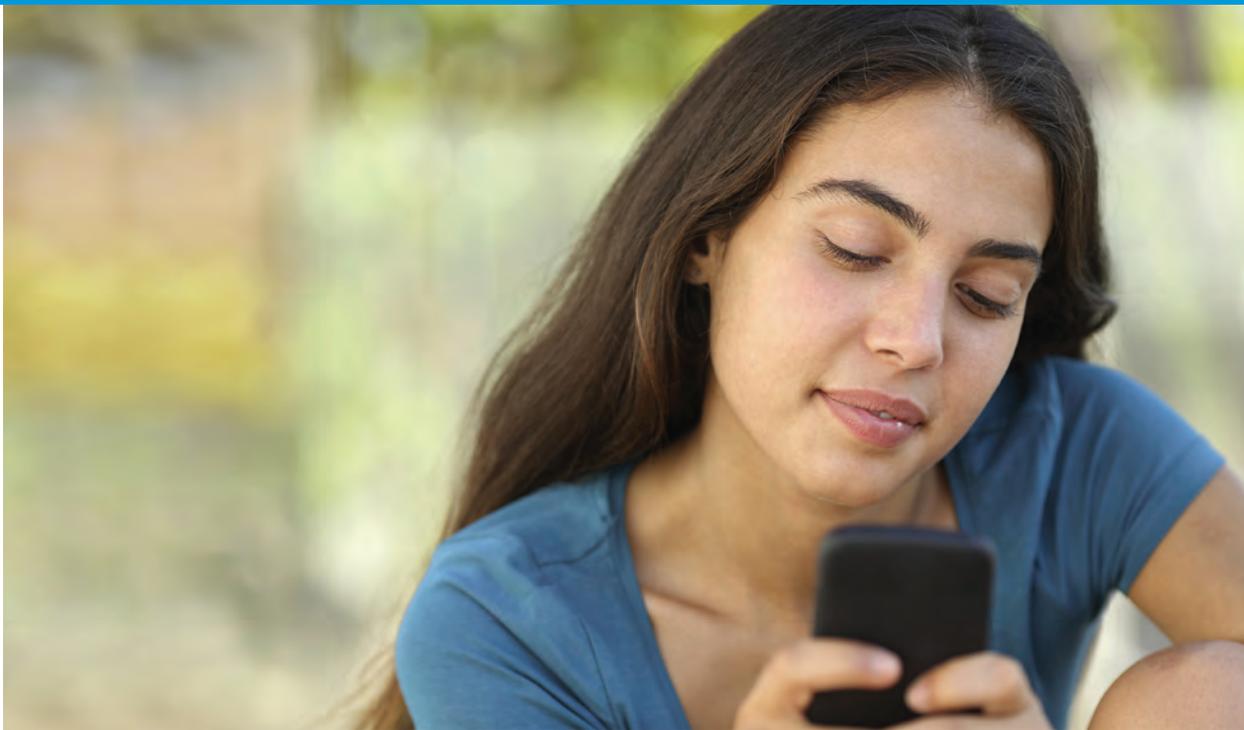
Accredo

- You or your provider can call an Accredo Specialty pharmacy representative directly at **877.244.2995** to enroll.
- Visit **accredohealth.com** to find out more about Accredo Health Group.

Walgreens Specialty Pharmacy

- You or your provider can call Walgreens Specialty Pharmacy directly at **877.223.6447** to enroll.
- Visit **walgreenshealth.com** to find out more about Walgreens Specialty Pharmacy.

* Walgreens Specialty Pharmacy is an independent company responsible for delivering Premera members with specialty pharmacy services, including injectable and biopharmaceutical medications with support services. It does not provide Blue Cross Blue Shield products or services and is solely responsible for their own services.



Get access to medical care anytime anywhere with Teladoc®

When your plan starts, you have access to Teladoc to get treated by U.S. board-certified doctors who are available to resolve many of your medical issues through phone or video consults.

Teladoc does not replace your family doctor or primary care physician. It's an affordable alternative to costly urgent care and ER visits when you need care now. Teladoc doctors can treat many medical conditions, including cold and flu symptoms, allergies, bronchitis, urinary tract infections, and more. A Teladoc doctor is just a call or click away.

The cost of your virtual care visit with Teladoc is based on your standard in-network office visit cost shares (copay or deductible and coinsurance).

GETTING STARTED WITH TELADOC

When your plan starts, it's quick and easy to set up your account:

- > Log in at **teladoc.com/premera** and select My Medical History.
- > Download the mobile app at **teladoc.com/mobile** and select My Health Record.
- > Call Teladoc at **855.332.4059**.

Providing your medical history

Your medical history provides Teladoc doctors with the information they need to make an accurate diagnosis.

Request a consult

After your account is set up, request a consult anytime you need to speak with a doctor.

Premera Blue Cross is an Independent Licensee of the Blue Cross Blue Shield Association

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