







BlueEdge Product Description	BlueEdge Provider Network	BlueEdge Membership	Deductibles and Coinsurance	Precertification Requirements	Billing and Reimbursement
<p>BlueEdge is a high deductible health plan with access to the PPO network. With BlueEdge, there are two types of spending accounts.</p> <p>1. The employer can establish a Health Care Account (HCA) for each employee enrolled in BlueEdge:</p> <ul style="list-style-type: none"> <li>▪ The employer funds a specific dollar amount per year for initial health care costs, for example, \$750 for an individual and \$1500 for a family.</li> <li>▪ First dollars spent are paid from the HCA, and applied toward the deductible (employer and member share the deductible amount).</li> <li>▪ Covered services are paid from the HCA until balance is spent.</li> </ul> <p>2. Health Spending Account (HSA) can be funded by the employee, employer, or both. The HSA must accompany a high deductible health plan. The HSA is an account that members may put money into to save for future medical expenses. The money may be used for qualified medical expenses specified by the IRS. This includes most medical care and services.</p> <p><b>HCA/HSA Features:</b> Preventive wellness and routine care are covered at 100% in-network even before the deductible is met.</p> <p>BlueEdge benefits (same benefits as standard PPO) are effective when HCA/HSA funds are spent and deductible met.</p> <ul style="list-style-type: none"> <li>▪ Comprehensive benefits apply for services from PPO network providers.</li> <li>▪ A reduction in benefits for services from out-of-network providers.</li> </ul>	<p>The BlueEdge Network is the same as the standard PPO Network. (no additional contract is necessary).</p> <p><b>Local and National</b> PPO network providers can easily be located at <a href="http://www.bcbsil.com">www.bcbsil.com</a> by selecting Provider Finder<sup>®</sup> or call BlueCard Access at (800) 810-BLUE (2583).</p> <p><b>International</b> PPO providers can be located by calling BlueCard Access at (800) 810-BLUE (2583).</p>	<p>Appeals to members who:</p> <ul style="list-style-type: none"> <li>▪ Want an active role managing their healthcare.</li> <li>▪ Want access to information through the Web.</li> <li>▪ Want the freedom and flexibility to choose any PPO provider.</li> </ul> <p>Note: Coverage amounts differ for out-of-network.</p>	<p>BlueEdge claims are paid by BCBSIL from the HCA/HSA until the amount allocated is spent.</p> <p>The amount paid from the HCA/HSA goes toward meeting the deductible. The member becomes responsible for the deductible, as well as the coinsurance, when the HCA/HSA funds are spent.</p> <p>Any amount not spent from the HCA/HSA rolls over to be added to the next yearly HCA/HSA amount.</p> <p>There is no deductible for preventive/wellness visits. These services may be paid at 100%.*</p> <p><b>*Preventive/wellness Visits:</b></p> <ul style="list-style-type: none"> <li>▪ Physicals and routine check-ups</li> <li>▪ Diagnostic tests               <ul style="list-style-type: none"> <li>-Routine lab</li> <li>-Routine x-ray</li> <li>-Mammograms</li> </ul> </li> <li>▪ Well child care and immunizations</li> </ul> <p>Coinsurance amounts vary according to employer requirements.</p> <p><b>Note:</b> Most accounts do not have office visit copayments; however members belonging to some custom groups may have a copayment. It is important to verify eligibility and benefits prior to rendering services.</p>	<p>Like most PPO contracts, plan notification and MSA approval is required for inpatient hospitalization and obstetrical inpatient admission.</p> <p>Some employers require notification for certain outpatient procedures.</p> <p>Specific time frames for notification vary according to employer requirements. This information is listed on the back of the identification card. You may also access NDAS Online to obtain the information. (See reverse side)</p> <p>Mental Health and Chemical Dependency services require notification and approval.</p>	<p>Claims are submitted to BCBSIL in the CMS-1500 (08/05) or UB-04 formats.</p> <p>Services are reimbursed directly to PPO providers:</p> <ul style="list-style-type: none"> <li>▪ Professional providers are paid the PPO SMA allowance.</li> <li>▪ Facility providers are paid their PPO contractual allowance.</li> <li>▪ Subsequent to receipt of the PCS, the patient may be billed for any remaining deductible and coinsurance amount.</li> </ul>

## BlueEdge Identification Card

PPO members are identified by the letter **F** in the third position of the alpha prefix (**XOF**). The letter **F** means that the coverage is portable. Note: PPO members can also have the alpha prefix **XOC**. Note: Blue Cross and Blue Shield of Illinois employees who have PPO coverage have an alpha prefix of BCS.

 	
<b>DOE, JOHN</b>	
Identification No. <b>XOF112223333</b>	
Group No. <b>212345</b> BS Plan Code <b>621</b> BC Plan Code <b>121</b>	
	<b>PRIME</b> BIN: 011552 PCN: ILDR 

**To the Member:** Member must call Medical Services Advisory (MSA) to pre-notify one business day in advance for inpatient hospital stays, skilled nursing facility admissions, home health care and private duty nursing services or within two business days for emergency or maternity admissions.

**Healthy Expectations:** Members must call MSA within first trimester of pregnancy to enroll into the mandatory program.

**Medical Services Advisory (MSA):** 1-800-672-3089

**Mental Health/Chemical Dependency:** 1-800-851-7498; Member must call prior to hospital admission or within two days of emergency admission.

**FAILURE TO CONTACT EITHER MSA OR MENTAL HEALTH/CHEMICAL DEPENDENCY UNIT MAY REDUCE YOUR AVAILABLE BENEFITS**

**Provider Location:** To find a PPO Provider in your service area or when traveling, please call: 1-800-810-BLUE (2583) or use the provider finder at [www.bcbsil.com](http://www.bcbsil.com).

**To Hospital/Physician:** Please file all claims with your local BlueCross BlueShield Plan.

**To the Member:** If a provider does not submit your claim on your behalf, please contact your Customer Service Unit for assistance.

**Customer Service:** 1-800-409-8462

**BlueAccess for Members at:** [www.bcbsil.com](http://www.bcbsil.com) for claims and eligibility information.

**Pharmacy Program:** 1-800-423-1973

BlueCross BlueShield of Illinois, an independent licensee of the BlueCross and BlueShield Association, provides administrative claims payment service only and does not assume any financial risk or obligation with respect to claims.

## Verifying Eligibility and Benefits

Specific benefits and coinsurance amounts may vary for each employer group. To determine eligibility and specific benefits you may access:

1. NDAS Online: NDAS Online is a fast and convenient free online resource to help you with a variety of every day tasks. If you do not have access to NDAS Online and are interested, log on to [www.bcbsil.com/provider/index.htm](http://www.bcbsil.com/provider/index.htm) to receive information on how to sign up for this free service.
2. You may also call the Provider Telecommunications Center (PTC) at (800) 972-8088 to verify eligibility and benefits. Note before calling:
  - Know the member's group and identification numbers, including the three-letter alpha prefix
  - Have the beginning/ending dates of service for each claim
  - Have your National Provider Identifier (NPI) number ready

## General Information

Log on to the BCBSIL Provider Web site at [www.bcbsil.com](http://www.bcbsil.com) for more specific BlueEdge product information. Once you reach the BCBSIL Home Page, choose Providers to enter the Provider site. Visit the Provider Library to find various forms, reference guides, manuals and the *Blue Review* archives. It's a quick and easy way to get the information and resources you need to assist in managing your business practices.

Visit our Training section at <http://www.bcbsil.com/provider/training.htm> to register for one of our free provider workshops.

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