



BlueCross BlueShield of Illinois



Blue Cross Community
Family Health PlanSM

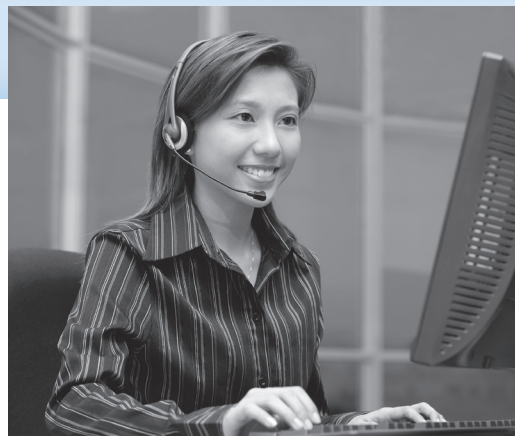
Welcome

Effective October 2014


www.bcbsilcommunityfamilyhealthplan.com

Contact us

We are glad you chose Blue Cross Community Family Health PlanSM as your health plan! We want you to get the health care you need, when you need it. This guide will help you get started. Keep it handy to answer some of your most common health plan questions.



IF YOU HAVE QUESTIONS AFTER REVIEWING THE INFORMATION IN YOUR WELCOME KIT OR ABOUT YOUR FAMILY HEALTH PLAN, WE ARE HERE TO HELP!

 **CALL**
Member Services **1-877-860-2837 • TTY/TDD 711**
(for information on medical, behavioral health, dental, vision, and prescription drugs)

We are open:

October 1 to February 14
8 a.m. to 8 p.m., Central time
Seven (7) days a week

February 15 to September 30
8 a.m. to 8 p.m., Central time
Monday through Friday

Alternate technologies (for example, voicemail) will be used on the weekends and federal holidays.
The call is free.

24/7 Nurseline **1-888-343-2697**

Nonemergency transportation reservations **1-877-860-2837**

 **WEB** **www.bcbsilcommunityfamilyhealthplan.com**

CALL 911 IF YOU HAVE AN EMERGENCY.

As a new member of the Plan, you will have 90 days from the date of your first enrollment to try it. During the first 90 days, if you want to change plans for any reason, call the Illinois Client Enrollment Services (ICES) at **1-877-912-8880** (TTY/TDD **1-866-565-8576**). Clients can only change one (1) time during the first 90 days of the initial enrollment. After 90 days, if you are still eligible, you will stay enrolled in the current Plan for the next nine months.

PLEASE NOTE:

For help to translate or understand this item, please call **1-877-860-2837** TTY/TDD **711**.

You can get this document in Spanish, or speak with someone about this information in other languages for free. Call **1-877-860-2837**. The call is free.

Usted puede obtener este documento en español o hablar con alguien, de forma gratuita, acerca de esta información en otros idiomas. Llame al **1-877-860-2837**. La llamada es gratuita.

Your Primary Care Provider (PCP)

YOUR PRIMARY CARE PROVIDER (PCP)

Your PCP is your main health care provider. You can see a BCBSIL in-network specialist without a referral from your PCP, but it is important that your PCP knows which doctors you see.

A PCP can be a:

- Pediatrician
- Family or general practitioner
- Obstetrician/gynecologist (OB/GYN)
- Internist (Internal Medicine)
- Nurse Practitioner (NP) or Physician Assistant (PA)
- A clinic such as Federally Qualified Health Centers (FQHCs) or Rural Health Clinics (RHCs) can also be PCPs

TO DO:

You must choose a PCP from the Community Family Health Plan Provider Network.

Look in the Provider Directory to:

- Choose a PCP for your child under Family Practice, Pediatrics or General Practice
- Choose a PCP for a pregnant member under OB/GYN, Family Practice, Internal Medicine or General Practice
- Choose a PCP for adults in your family under Family Practice, Internal Medicine or General Practice

You can call **Member Services** for help choosing a PCP. You can also ask Member Services to mail you a Provider Directory. The website has an online directory and a tool called Provider Finder®.

YOUR CARE COORDINATOR

As a Blue Cross Community Health Plan member, you can get care coordination support. Within 60 days of joining the Plan, we will call and ask you some health-related questions. This Health Risk Assessment (HRA) will be done at least once a year after that.

The HRA helps us find the level of care coordination support you may need and could mean we provide you with a Care Coordinator. A Care Coordinator will work with you and others involved in your care, like your PCP, to help with your health care needs. These resources are called an Interdisciplinary Care Team. They work with you to find out what your needs are and make a Care Plan that helps you reach your health care goals.

Care Coordinators also do these things:

- Plan in-person visits or phone calls with you
- Listen to your concerns
- Help get you or your family the services you need, like transportation
- Help set up care with doctors and other health care team members
- Help you, your family and your caregiver better understand your health condition(s), medications, and treatments

MAKING AN APPOINTMENT

To make an appointment, please follow these steps:

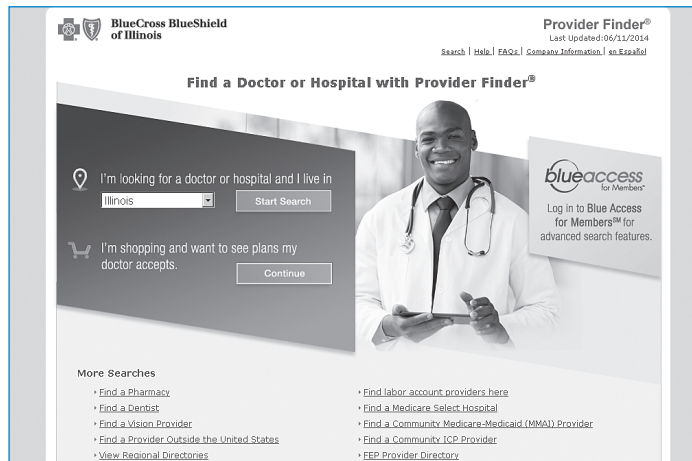
- Call your PCP's office ahead of time.
- Tell the office that you are a Blue Cross Community Family Health Plan member and have your ID card and Illinois Healthcare and Family Services (HFS) medical card handy.
- You may also contact your assigned Care Coordinator if you have one, for assistance.

If you go to a provider's office without an appointment, the provider may not be able to see you. Please call your provider before you go to the office.

Provider Finder®

The Provider Finder lets you search for providers and hospitals in the Blue Cross Community Family Health Plan network. Go online to use Provider Finder: www.bcbsilcommunityfamilyhealthplan.com

- Search by name, city, state, or ZIP code; specialty, or service
- Search for providers who are accepting new patients
- Get a list of provider names, phone numbers, and addresses
- Learn the providers' specialties, languages they speak, and genders
- Google Maps™ lets you see the provider's location and get directions
- Select *en Español* to view the Provider Finder in Spanish



Getting Medical Care

WHAT DO I DO IF MY CHILD OR I NEED TO SEE A DOCTOR RIGHT AWAY?

1. Call your PCP's office. Ask if he or she can see you that day.
2. If you can't see your PCP right away, call the **24/7 Nurseline at 1-888-343-2697**. You can talk to a registered nurse. The nurse can talk with you about your options.
3. If you still need to see a doctor, you can also go to an urgent care provider. Call **Member Services at 1-877-860-2837** if you need help finding a provider.

If waiting to be seen by a doctor would endanger your health or seriously harm you, call **911** or go to the nearest emergency room (ER).

WHEN I SHOULD GO TO THE ER?

Go to the ER or call **911** if you or a covered family member has any of these symptoms:

- Chest pain
- Shortness of breath or severe trouble breathing
- Heavy bleeding
- Is about to deliver a baby
- Fainting or seizures
- Intense or sudden pain
- Sudden dizziness, weakness, or change in vision, speech, or mental state
- Severe or persistent vomiting or diarrhea
- Coughing or vomiting blood
- Head, neck, or traumatic injury (such as a gunshot or stab wound)
- Major broken bones
- Severe burns
- Poisoning or drug overdose

If you go to the ER, be sure to bring:

- Your member ID card
- Your PCP's name and phone number

If you can, also bring:

- A list of any medicines you take
- A list of any medical conditions and drug allergies you have

Seeing your PCP regularly can help reduce your chances of needing to go to the ER. You can also call the **24/7 Nurseline** at **1-888-343-2697**. The nurses can help you decide if you should see your doctor, go to urgent care, or go to the ER.

Do not use the ER for routine care. If you do, you may have to pay for those services. We do not cover ER visits for routine care.

WHAT IS PREVENTIVE CARE?

Preventive care helps keep you healthy and is covered by your health plan. Preventive care includes:

- Regular checkups
- Eye exams
- Immunizations
- Mammograms, Pap tests, and other cancer screenings
- Other services described in your Member Handbook

To get preventive care, make an appointment with your PCP.

NETWORK PROVIDERS AND PRIOR AUTHORIZATION

WHAT IS AN IN-NETWORK PROVIDER?

In-network providers are providers that have contracted with us to provide services to members in our plan. When you see a network provider, you pay nothing. To have your services paid by Blue Cross Community Family Health Plan, you must use network providers, unless you have a prior authorization from us.

There are certain services that are covered when you use an out-of-network provider such as emergency or urgent care services. See your Member Handbook for details and exceptions.

WHEN DO I NEED PRIOR AUTHORIZATION?

You will need prior authorization from Family Health Plan to go outside of the plan network of providers, to be admitted to the hospital, or to receive certain services, such as home health care. Contact **Member Services** for a complete listing. Blue Cross Community Family Health Plan may not approve the request. If the request for these types of services is denied, you and your provider will be contacted and the reason for the denial will be explained.

HOW DO I GET PRIOR AUTHORIZATION?

Your PCP will know what procedures need prior authorization and will contact the Blue Cross Community Family Health Plan for you. To find out if your prior authorization has been approved, call **Member Services** at **1-877-860-2837**. See your Member Handbook for details.

WHAT IS A SPECIALIST?

Specialists treat special medical conditions. Examples include heart problems, allergies, and diabetes. The specialist must be an in-network provider to be covered.

The benefit information provided is a brief summary, not a complete description of benefits. For more information refer to your Member Handbook included in your Welcome Kit.

Getting Medical Care

MEDICATIONS

DOES MY PLAN COVER PRESCRIPTION DRUGS?

Yes. Prescription drugs on the Blue Cross Community Family Health Plan Drug List (Formulary) are covered.

To be covered, you must get your prescription drugs from a Blue Cross Community Family Health Plan participating pharmacy with a prescription from an in-network provider.

If a brand name drug has a generic equivalent, you will be given the generic drug.

WHAT IF I NEED A PRESCRIPTION THAT IS NOT ON THE DRUG LIST?

Your doctor must get prior authorization from your health plan before you can get coverage for a drug that is not on the Drug List.

DOES MY PLAN COVER OVER-THE-COUNTER DRUGS?

Some nonprescription and over-the-counter drugs are covered with a prescription from your doctor, but they must be specifically listed as covered on the Drug List.

More details are in your Member Handbook and included on the Drug List. You may also call **Member Services**.



ARE VISION AND DENTAL CARE COVERED BY MY PLAN?

Blue Cross Community Family Health Plan covers the following dental and vision services:

- Dental checkups and X-rays
- Teeth cleanings (a standard benefit for members under age 21 and pregnant members, an added benefit for members 21 and over)
- Eye exams
- Eyeglasses

See your Member Handbook for more information about your vision and dental coverage, including benefit limits.

You can find a dentist or a vision provider by calling **Member Services** or visiting www.bcbsilcommunityfamilyhealthplan.com

The benefit information provided is a brief summary, not a complete description of benefits. For more information refer to your Member Handbook included in your Welcome Kit.

BEHAVIORAL HEALTH CARE

You and your covered dependents have benefits for behavioral health services. This includes mental and emotional problems, alcoholism, and drug-related problems. A Care Coordinator can help you find what services are covered and if prior authorization is needed for the service.

You can call **Member Services** at **1-877-860-2837**. They will help you find a provider or help you speak to a Care Coordinator to get further assistance.

In an emergency (such as if you feel like hurting yourself or others, or if you are not able to take care of yourself) call **911** or go to the ER.

See your Member Handbook for more information about your behavioral health coverage.

LONG-TERM SERVICES AND SUPPORT (LTSS)

As a Blue Cross Community Family Health Plan member, you may qualify for Long-Term Services and Support (LTSS). These services can help you live in your own home or in a community setting when you need on-going support.

Call **Member Services** and ask to speak with a Care Coordinator for assistance. You should also refer to the Member Handbook and LTSS information booklet.

TRANSPORTATION

WHAT IF I NEED A RIDE TO AN URGENT CARE VISIT, A SCHEDULED PROCEDURE, OR A DOCTOR'S APPOINTMENT?

Nonemergency transportation is provided by the plan. Call **Member Services** at **1-877-860-2837**, Monday through Friday, between 8 a.m. and 8 p.m., Central time, to make an appointment for transportation. You will need to provide:

- your complete address and ZIP code
- the provider's complete address, ZIP code, and phone number
- the date and time of the appointment

Be sure to call at least three (3) business days before your appointment. If you do not, it may not be possible to provide your transportation. If you have a same-day appointment for urgent care, the plan may be able to provide transportation.



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BlueCross BlueShield of Illinois

IMPORTANT BLUE CROSS COMMUNITY FAMILY HEALTH PLAN PHONE NUMBERS

24/7 Nurseline – 24-hour a day help line..... **1-888-343-2697, TTY/TDD 711**

Emergency Care..... **911**

Blue Cross Community Family Health Plan Member Services **1-877-860-2837, TTY/TDD 711**

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8 a.m. to 8 p.m., Central time

Monday through Friday

Alternate technologies (for example, voicemail) will be used on the weekends and federal holidays. The call is free.

Blue Cross Community Family Health Plan Special Investigation Department (SID)..... **1-877-272-9741**

National Poison Control Center..... **1-800-222-1222**

Calls are routed to the office closest to you.

Non-Emergency Medical Transportation..... **1-877-860-2837, TTY/TDD 711**

Dental (DentaQuest)..... **1-855-225-1733, TTY/TDD 711**

Vision (Davis Vision)..... **1-866-847-4661, TTY/TDD 711**

Transportation (MTM)..... **1-844-549-8348, TTY/TDD 711**

Behavioral Health Services..... **1-877-860-2837, TTY/TDD 711**

Pharmacy Services..... **1-877-860-2837, TTY/TDD 711**

Grievances and Appeals..... **1-877-860-2837, TTY/TDD 711**

Fraud and Abuse..... **1-800-543-0867, TTY/TDD 711**

Critical Incident Hotline..... **1-855-653-8127, TTY/TDD 711**

Adult Protective Services **1-866-800-1409, TTY 1-888-206-1327**

Nursing Home Hotline..... **1-800-252-4343, TTY 1-800-547-0466**

Department of Rehabilitation Services (DORS)..... **1-800-843-6154, TTY 1-800-447-6404**

Web..... **www.bcbsilcommunityfamilyhealthplan.com**