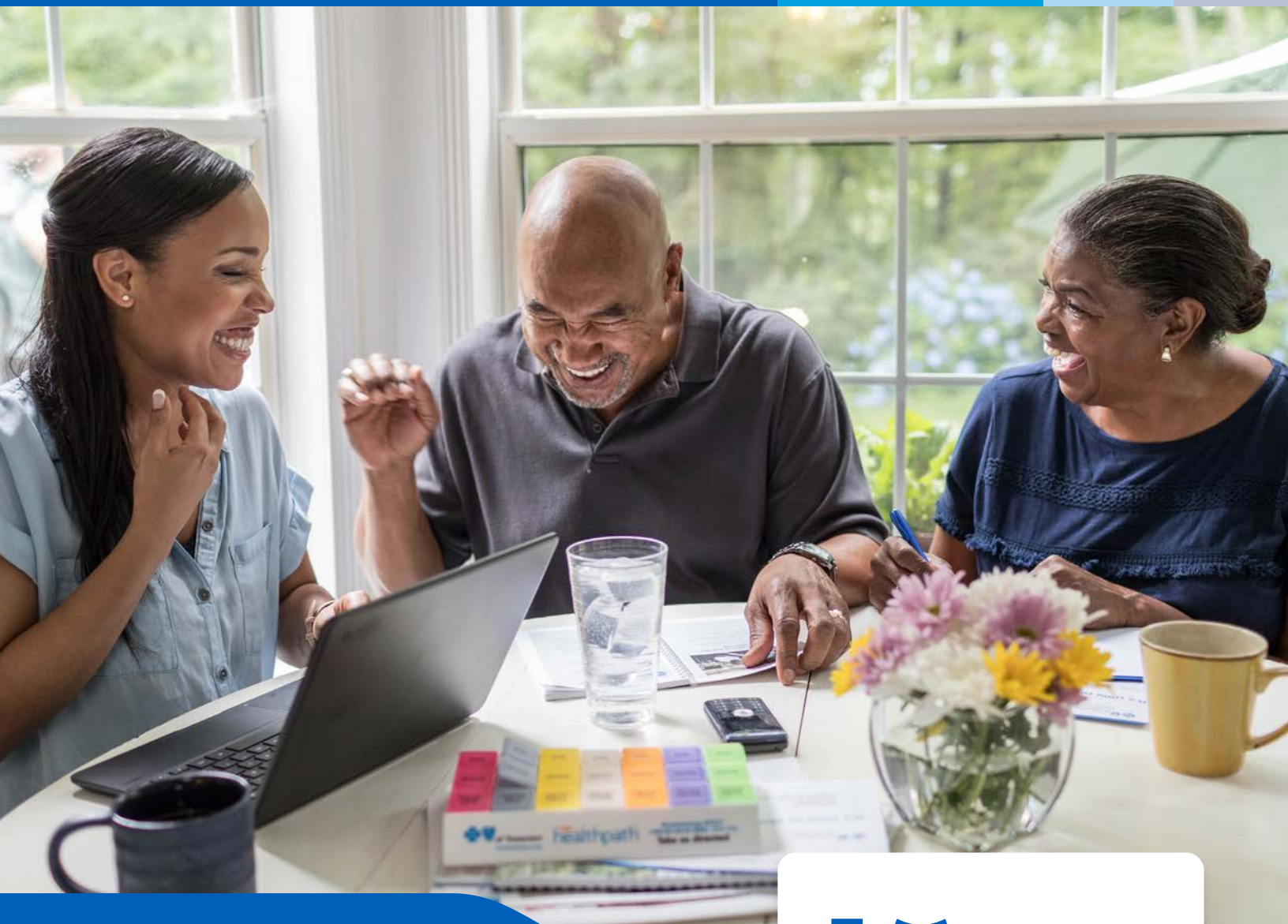


Your 2020 BlueAdvantage (PPO)SM Quick Reference Guide

Look inside for:

- Our rewards program
- Contact information
- Tips to save money
- Plan extras
- Network advice

my
healthpath[®]



Get in Touch with Us

If you have questions about your BlueAdvantage plan, give us a call. Your questions are important. We're right here to listen — and to help.

| | | |
|-------------------------------------|---------------------|--|
| BlueAdvantage Member Service | 8 a.m. to 9 p.m. ET | 1-800-831-BLUE (2583) (TTY: 711) bcbstmedicare.com |
|-------------------------------------|---------------------|--|

From **Oct. 1 to March 31**, you can call us 7 days a week from 8 a.m. to 9 p.m. ET. From **April 1 to Sept. 30**, you can call us Monday through Friday from 8 a.m. to 9 p.m. ET. If you call outside these hours or on a holiday, our automated phone system will answer your call. You can leave a message for us, and we will call you back the next business day.

| | | |
|---|--|--------------------------|
| BlueCross BlueShield of Tennessee Medicare Website | | bcbstmedicare.com |
|---|--|--------------------------|

| | | |
|------------------------|-------------------------------|--|
| Express Scripts | 24 hours a day, 7 days a week | 1-877-680-4878 (TTY: 1-800-716-3231) |
|------------------------|-------------------------------|--|

| | | |
|---|--|---|
| EyeMedSM (Vision network) | Oct. 1 to March 31 8 a.m. to 11 p.m. ET. 7 days a week. | 1-844-261-9034 (TTY: 711) |
| | April 1 to Sept. 30 Monday – Saturday, 8 a.m. to 11 p.m. ET. Sunday 11 a.m. to 8 p.m. ET. | |

| | | |
|----------------------|-------------------------------|-----------------------|
| Fraud Hotline | 24 hours a day, 7 days a week | 1-888-343-4221 |
|----------------------|-------------------------------|-----------------------|

| | | |
|------------------|-------------------------------|---|
| Nurseline | 24 hours a day, 7 days a week | 1-866-275-1660 (TTY: 711) |
|------------------|-------------------------------|---|

| | | |
|---|-------------------------------|-----------------------|
| PhysicianNow[®] powered by MDLive[®] | 24 hours a day, 7 days a week | 1-888-991-1374 |
|---|-------------------------------|-----------------------|

| | | |
|---|------------------------------------|-----------------------|
| The Silver&Fit[®] Program American Specialty Health | 8 a.m. to 9 p.m., ET Monday-Friday | 1-888-797-8091 |
|---|------------------------------------|-----------------------|

| | | |
|-------------------------------|--------------------------------|---|
| TruHearing[™] | 8 a.m. to 8 p.m. Monday-Friday | 1-844-330-8543 (TTY: 711) |
|-------------------------------|--------------------------------|---|

Remember, in case of an emergency, you should always call 911.

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Thank you for being a BlueAdvantage Plan member.

We're glad you're part of our BlueCross community. If this is your first time with our plan – or you've been with us for a while – you may have questions about how your plan works. We've covered basic information in this book to help you make the most of your plan.

As your Medicare Advantage plan, we work hard to give you great benefits at a great value, plus a few extras to help you live well. Your plan offers:



Broad network of doctors and hospitals
No referrals required to see a specialist
Dental, hearing and vision benefits



No Part D drug deductible
Drug Copays as low as \$1
Lower copays for 90 day prescription fills



A free Silver&Fit fitness membership
An included exercise program that lets you visit fitness centers nationwide



Member discounts through Blue365®



Online access to your plan information

If you have additional questions after reviewing this booklet, let us know. We're right here.

Best of Health,

J. Todd Ray
Senior Vice President and General Manager, Senior Products

Join the My HealthPath[®] Wellness and Rewards Program

You already know the benefits of staying healthy—but here's another reason to stay on that path. With My HealthPath, you can earn gift cards just by taking care of your health. You can use the gift cards at many retail locations.

It's Easy to Join!



The fastest way to enroll is online.
Go to bcbstmyhealthpath.com.

—OR—



You can sign up with your smartphone.
Just go to your phone's app store and download the [AlwaysOn[®] Wellness](#) app.

my
healthpath[®]

Earn \$50 in gift cards for completing your Health Needs Assessment and Annual Wellness Visit.

You can also enroll by filling out and mailing in the enrollment form we mailed you or by calling us at **1-800-831-BLUE (2583)**, (TTY: **711**).



myhealthpath® Frequently Asked Questions

Q. How do I start earning gift cards?

A. Sign up for My HealthPath and start earning gift cards for your Annual Wellness Visit and other certain preventive screenings you may need.

Your plan covers your Annual Wellness Visit and other preventive screenings for a \$0 copay. But other types of tests and lab work (like chest x-rays and routine blood tests) might have a copay attached to them — even if you get them during your Annual Wellness Visit.

Schedule and complete your Annual Wellness Visit by **Dec. 31, 2020** and earn a **\$30 gift card**.

Q. Can I earn a gift card for completing my Health Needs Assessment?

A. You'll earn a **\$20 gift card** when you complete your assessment online at **bcbstmyhealthpath.com** in the "My Journey" section. You may also complete the assessment by phone or by mail.

Q. Can I earn gift cards for the preventive screenings that I need?

A. Yes. Your My HealthPath custom page will tell you which screenings you need and which ones are eligible for gift cards. Log in to **bcbstmyhealthpath.com** and click on "Eligible Activities".

Q. How long before I receive my gift cards for the screenings and tests I get?

A. It takes us eight to ten weeks to process your gift cards after we get your claim from your doctor. When we process the claim, we'll send you a gift card.

Q. Why do I need an Annual Wellness Visit?

A. Annual Wellness Visits are a great way to protect your health - and get to know your doctor. Plus, they're included at no extra cost as part of your health plan.

Q. Are all members eligible for gift cards?


A. Yes. We'll send you a personalized wellness report outlining the preventive screenings you need for 2020 — the gift cards you can earn. Or you can check your My HealthPath page at **bcbstmyhealthpath.com**.

You'll earn gift cards if you are eligible and get the services in 2020. See pages 6 and 7 for eligibility requirements.

Q. How do I know which preventive screenings I need?

A. Talk with your health care provider, and check your records for the dates you last completed the recommended tests. You can also log in to **bcbstmyhealthpath.com** to see your custom page with the preventive screenings you need. And, we'll mail you a wellness report soon that will tell which preventive screenings you need. If you have questions call us at **1-800-831-BLUE (2583)**, (TTY: **711**).

Q. Can I do my screenings at home?

A. Yes. You can get many of the exams, tests and screenings you need in the privacy of your own home. Look for the  beside the screenings listed on the following pages.

Q. How do I get started on the online portal?

- Log in to the member wellness portal at **bcbstmyhealthpath.com**.
- Take your Health Needs Assessment, found in the "My Journey" section.
- Find screenings you're eligible for by clicking "Eligible Activities." Found at the top left of your screen.

If you have questions, give us a call.

Q. Are there other benefits of signing up for My HealthPath?

A. Absolutely. Being a My HealthPath participant gives you the ability to easily keep track of the preventive screenings you've received and those that you may need. With your online account, you'll have access to wellness programs, health challenges and a community working to get healthier every day. You can:

- Take self-directed classes about topics like nutrition, strength or stress
- Track progress toward your goals
- Sync your wearable fitness devices and track your activity

Which screenings and tests can help me earn gift cards?

There are many tests and screenings that are recommended at each stage in life for both men and women. These tests and screenings not only help to keep you healthy, but also in control of your health. **While we encourage you to get your screenings as recommended by your doctor, gift card eligibility is based on age, claims history and diagnosis as defined by Healthcare Effectiveness Data and Information Set (HEDIS).**


Why Colorectal Cancer Screening?


Colorectal cancer is the third most common type of cancer affecting both men and women in the United States. The American Cancer Society estimates that there were nearly 97,000 new cases of colorectal cancer in 2018. Fortunately, the death rates for colorectal cancer have been declining over the past few decades due in part to screening and early detection.

Screening Options

The most accurate and comprehensive screening option is a colonoscopy. You may be hesitant to choose this type of screening because of the preparation needed prior to the test. Today, there are several different prep options as well as other screening options. The most important thing is to get screened. You can talk to your health care provider about which screening option is best for you.

Members ages 51-75 are eligible for incentive

| Screening or Exam Needed | Acceptable Screening | Incentive Amount |
|-----------------------------|--|---|
| Colorectal Cancer Screening | Colonoscopy every 10 years ¹ | \$75 gift card (provider facility only) |
| | Flexible Sigmoidoscopy every 5 years | \$50 gift card |
| | CT Colonography every 5 years | \$50 gift card |
| | FIT-DNA every 3 years | \$30 gift card |
| |  FOBT (in-home test kit) every year | \$20 gift card |

 Screenings offered in-home. ¹Qualifies for gift card only if you have not had a colonoscopy in the previous nine years or sigmoidoscopy in the previous four years.



Before I went to the screenings, I had no symptoms whatsoever. I was fully expecting to be healthy. But they found stage 4 colorectal cancer during my screening. If it wasn't for my screening, I wouldn't be here."

R. Stubblefield, *BlueAdvantage Member*

Why Breast Cancer Screening?

Many women with breast cancer have no symptoms. That's what makes screening so important. A mammogram can catch breast cancer early – when it's easier to treat.




Female Members ages 52-74 are eligible for incentive

| Screening or Exam Needed | Acceptable Screening | Incentive Amount |
|--------------------------|-------------------------|-----------------------|
| Breast Cancer Screening | Mammogram every 2 years | \$50 gift card |

Why Diabetes Care Screenings?

Many people control their diabetes with lifestyle changes and medications. However, having diabetes puts you at risk for other complications and that's why eye exams as well as blood and urine laboratory tests are so important. Regularly checking your blood sugar and taking your medicines as recommended by your PCP are the most important ways to keep your diabetes under control. There are several screenings that can help you and your PCP assess your treatment plan.

Diabetic Members ages 18-75 are eligible for incentive (must have documented diagnosis of diabetes with claim history)

| Screening or Exam Needed | Acceptable Screening | Incentive Amount |
|---------------------------|---|--|
| Blood Sugar Control |  HbA1C Test (Annual) | \$25 gift card (in-home test kit, provider office, BlueCross community outreach event) |
| Eye Exam |  Retinal Eye Exam by an Eye Care Professional (Annual) | \$50 gift card (in-home exam, PCP office or BlueCross community outreach event or ophthalmologist/optometrist) |
| Kidney Function Screening |  Urine Nephropathy Screening (Annual) | \$15 gift card (in-home test kit or provider office) |



Exercise can play a big role in managing diabetes.
Regular exercise can help your cells respond to insulin better.
It'll improve your overall health and how you feel."

Source: American Diabetes Association - diabetes.org/fitness

Get the Care and Support You Need

Our Member Care Team works to make sure you're getting the care and support you need by pairing you with a Care Manager who can help you understand your conditions. If you are eligible, you'll participate in a program based on your specific needs that is designed to help you maintain or improve your health. Programs available include:

- Complex medical or behavioral health needs
- Chronic care management
- Transplant needs
- Social work
- Nutritional management

We're here to make managing your health easier. We'll contact you from time to time. But, when we can't get in touch with you, we'll use other resources like health care companies who can help you get the screenings and tests you need. If you get a call from one of them, talk with them. They want to help you.



People You May Hear From

We want to make sure you're getting the most out of your benefits. We may call you from time to time to tell you about programs or benefits you'll get with your plan such as certain preventive screenings at no cost to you and information about your medications. We contract with vendors who may administer a specific benefit for your plan, or who may provide a specific service under your plan. They may call you or send you letters as well. When you receive calls or information from us or our vendors, please feel comfortable knowing we're here to help you.



Did you know?

Your plan comes with a Silver&Fit membership with access to YMCAs and fitness centers nationwide. Find out more on page 16.



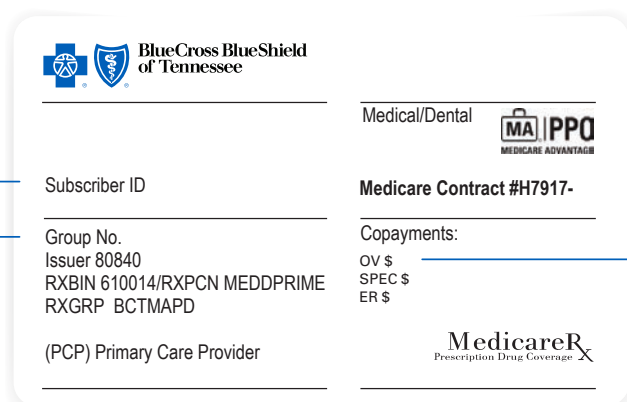
Your Member ID Card

Your member ID card lets providers know you're enrolled, so you should always keep it with you. Your card may look different from the card pictured depending on your coverage, but the basic information on the card will be the same.

FRONT

Your ID number

Your group number



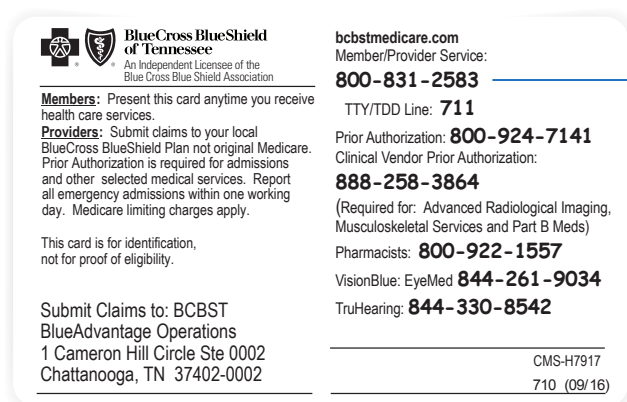
Your copay amounts for common types of care

OV= Office Visit to PCP

SPEC= Specialist visit (like a Cardiologist)

ER= Emergency Room

BACK



Call this number if you have questions/need help.

Activate your online account

Visit us online at bcbstmedicare.com to activate your BlueAccessSM account. It's fast and easy, and once you're registered, you'll have 24/7 access to your account information and tools that make keeping up with your health care more convenient.

- You can see what care is covered
- Check your balances and claims status
- Order and refill prescriptions
- Activate your My HealthPath account
- See which doctors and providers are in the BlueAdvantage network



Ways to Save on Your Prescriptions

1 90 Day fills

You'll save money when you get a 90-day supply of your prescriptions. For example, a 90-day supply of generic medication will cost the same as a 30-day supply.

3 Mail Order

Save time and money when you use your mail order benefit. You get preferred pharmacy savings plus standard shipping at no additional cost to you. Call Express Scripts Customer Service at **1-877-680-4878** (TTY: **1-800-716-3231**) 24 hours a day, 7 days a week.

2 Preferred Pharmacies

Your prescription copays will be less at a preferred pharmacy than at a standard pharmacy.

4 Generics

Preferred Generics are only a \$1 copay for a 30, 60 or 90-day supply. You only pay a 30-day copay for any Generic prescriptions at a preferred pharmacy whether you order a 30, 60 or a 90-day supply.



Mailing me a 90 day supply of my prescription makes my medicine something I don't have to deal with. I just call the number, it comes in the mail and I'm good for three months. I like that."

BlueCross BlueAdvantage Member



Prescription benefits

Your plan comes with **\$0 copay** for Select Care Drugs through the coverage gap. These drugs are commonly prescribed for people with diabetes. You can see the list of covered drugs at **bcbstmedicare.com**.



When You Need a Little More Help

Some members are eligible for our Medication Therapy Management Program at no cost to them. In this program, we'll help you understand your medications and how they work. You may be eligible for this program if you have certain chronic conditions like diabetes, high blood pressure, or asthma. If we find you meet the program's requirements, we'll call to let you know and talk about next steps.



Medication Adherence Outreach Program

Prescriptions can be confusing. But it's important to take your drugs the way your doctor says to. We're here to help make living well a little easier. We may call you to check in and make sure that you're on the right track and don't have any problems filling your medications.



Extra Benefits to Help You Stay Healthy

Dental*

Your plan includes an annual allowance for both preventive and comprehensive dental services to help keep you healthy. You'll spend less and get more out of your benefits when you go to providers in your BlueAdvantage Dental network. Your plan benefits provide any combination of these services up to your maximum plan allowance.

- Routine oral exam (up to 2 per year)
- Cleaning (up to 2 per year)
- Bitewing x-ray (1 per year)
- Fillings (1 per tooth surface per year)
- Crowns (1 per tooth per 5 years)
- Extractions
- Bridges (1 every 5 years)
- Dentures (1 set every 5 years)

Hearing Aid Coverage

Your plan includes hearing aid benefits. It covers up to two Premium or Advanced hearing aids per year (1 per ear) when purchased through TruHearing™. Your copay includes:

- 3 follow-up visits with a TruHearing provider for fitting and adjustment of hearing aids
- 45-day trial risk-free
- 3-year manufacturer warranty for repairs and one-time loss and damage replacement*
- 48 batteries per aid (for all non-rechargeable models)

To get started, call TruHearing at **1-844-330-8543** (TTY: **711**), 8 a.m. to 8 p.m. Monday through Friday to schedule a hearing exam.

TruHearing™

**Additional fees may apply for office visits related to repair or replacement of equipment*



I'm grateful that my plan offers this program. My hearing aids have changed my outlook and given me back my self confidence in a group of people."

BlueCross BlueAdvantage Member

Please see your Evidence of Coverage for full benefit details.



Vision

You'll get the most from your benefits and spend less by using an in-network BlueAdvantage Vision provider for your routine vision and eyewear services. We have negotiated prices with our BlueAdvantage Vision providers to save you money. Your vision benefit will go further if you choose an in-network provider.

You can find a provider in your network by visiting bcbstmedicare.com and clicking the Find a Doctor tool. Or you can call **1-844-261-9034** (TTY: **711**).

- **Oct. 1 to March 31**

8 a.m. to 11 p.m. ET. 7 days a week.

- **April 1 to Sept. 30**

Monday - Saturday, 8 a.m. to 11 p.m. ET

Sunday 11 a.m. to 8 p.m. ET

Our vision network has two easy ways to shop online for eyewear:

- Visit glasses.com for glasses
- Visit contactsdirect.com for contact lenses

You can visit a provider that is outside of our network, but you may pay more.

Appointments with a Doctor on the Phone or Online

Your BlueAdvantage plan covers treatment for minor illnesses — things that might normally send you to urgent care — in the comfort of your own home. You'll be able to chat over the phone or by video with a doctor through our telehealth program. If your treatment requires medication, the doctor can issue certain prescriptions and send them to your pharmacy. No chronic or pain medication prescriptions are provided. There is no charge for setting up your account, and the copay will be the same as your PCP copay.

Here are some of the conditions you can get treatment for through the program:

- Joint aches and pains
- Sinus infection
- Urinary tract infection
- Bronchitis
- Colds and flu

Remember that this service shouldn't replace your PCP relationship. It's just another way you can get care.



Call 1-888-991-1374 (TTY: 711) 24 hours a day, 7 days a week to speak with a physician or download the PhysicianNow mobile app*



Powered by
MDLIVE®

Free Advice from a Registered Nurse

Nurseline gives you access to nurses 24/7 to help you with health-related concerns, such as questions about:

- Minor illnesses
- Immediate care needs
- Medications



Call 1-866-275-1660 (TTY: 711) to speak with a nurse now*

**Remember, in case of an emergency, you should call 911 immediately*

Discounts Exclusively for Members

Want to take steps toward better health — and save money while you're doing it? **Our Blue365 discount program can help.** You can get discounts of up to 50 percent on health-related products and services included in the discount program, such as:

- LASIK corrective vision surgery
- Vitamins, minerals and supplements
- And much more...

Visit bcbstmedicare.com to learn more about your discounts. New discounts are added regularly.

Discounts, products and services included in the discount program may change without notice.

The Silver&Fit Healthy Aging and Exercise Program

Your health plan comes with the Silver&Fit program — a free fitness membership available to you. The Silver&Fit program includes:

- Access to thousands of participating gyms and fitness centers and select YMCAs
 - Social events to connect you with other active adults
 - Group fitness classes
 - Free exercise videos online.
- Go to silverandfit.com.

Get the Green Light from Your Doctor.

If you've never exercised before, talk with your PCP about which exercise program is right for you. Exercise should keep you healthy and strong, so it's important for you to do it safely.

It's easy to find a Silver&Fit location near you.

Visit Silver&Fit online at silverandfit.com or call **1-888-797-8091** (TTY: 711) Monday through Friday, 8 a.m. to 9 p.m. ET.

Download the new ASHConnect™ app:

- Activity tracking on over 250 wearable fitness devices and apps, including Apple Watch®
- Virtual streaming group exercise videos
- Fitness center and YMCA search



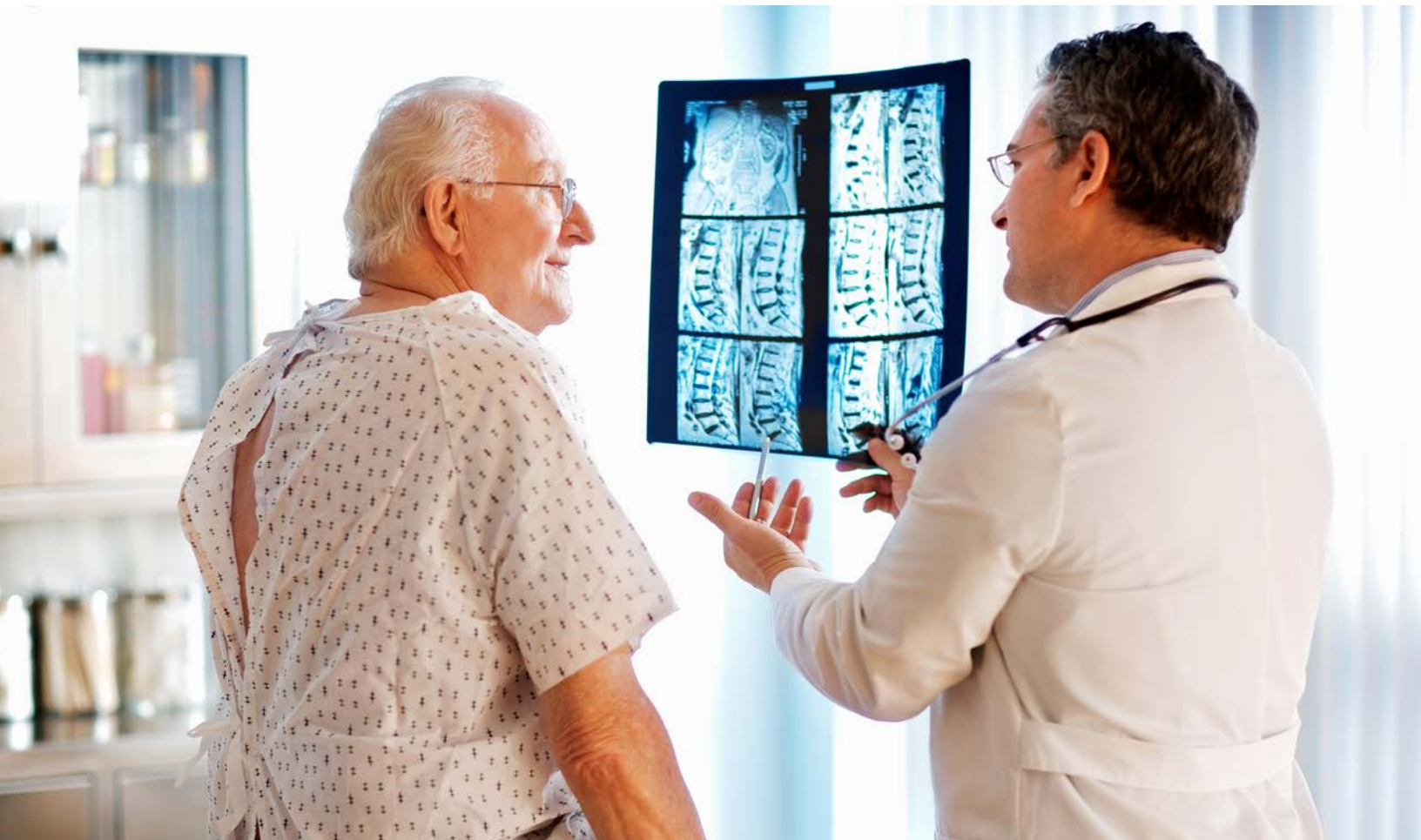
Choosing Where to Get Care Saves You Money

Lab work, Coumadin services, Diagnostic tests and X-rays:

It's a good idea to get these done at your PCP or Specialist's office. Generally, free-standing facilities that are not connected to a hospital, and services performed within a hospital carry a higher copay.

If you need lab work or Coumadin services, be sure to have it at your PCP or Specialist's office or a free-standing lab to take advantage of the **\$0 copay**. If you have lab work at an outpatient hospital setting, your copay will be higher.

When you have x-rays or diagnostic tests at your PCP office, you will also enjoy a lower copay. The copay will be higher at your specialist's office, free-standing facility and outpatient hospital setting.



Where Should You Go For Care?

| Your Primary Care Provider | Urgent/Convenient Care | The Emergency Room (ER) |
|--|---|--|
| Why go here? | | |
| For routine, non-emergency care, try your Primary Care Provider (PCP) first. Your PCP knows you and your medical history best. | When your PCP isn't available, but it's not an emergency. Urgent/Convenient care facilities are usually open even when your PCP isn't. | You need care right away for a medical emergency or life-threatening health condition. |
| What should you go here for? | | |
| <ul style="list-style-type: none"> ▪ Routine, scheduled care & checkups ▪ Preventive care ▪ Minor, non-emergency problems | <ul style="list-style-type: none"> ▪ Minor aches and pains ▪ Sore throat ▪ Cold or flu ▪ Small cuts and bruises ▪ Rashes | <ul style="list-style-type: none"> ▪ Shortness of breath: can't talk ▪ Strong chest or stomach pain that doesn't go away ▪ Not being able to move a leg or an arm ▪ Seizures or loss of consciousness ▪ A bad cut, broken bone or burn ▪ Bleeding that can't be stopped ▪ A drug overdose |
| Do I need an appointment? | | |
| Yes | No | No |
| How long is the wait? | | |
| If you have an appointment, your PCP should be able to see you quickly. | Longer than your PCP, but not as long as an ER (for non-emergency care). | ERs treat the sickest patients first, so if you don't have an emergency, you may have a long wait. |
| Cost: \$ | Cost: \$\$ | Cost: \$\$\$ |



If you need help finding a provider or urgent care, call the Member service number on the back of your member ID card.

This is intended as informational only. Consult with your physician about where you should go for care.

Common Insurance Words

Annual Wellness Visit

The goal of an Annual Wellness Visit is to put together a preventive care plan. This visit is different than your physical exam.

Copay

A flat fee you are required to pay for medical services and items or prescription drugs covered under your plan.

Deductible

The amount of your medical or prescription drug expenses that you pay each year before your plan starts to pay.

Donut Hole

The donut hole is a temporary limit on your prescription drug coverage. This limit goes into effect when your payments for the year plus the plan's payments total a certain amount.

Formulary

A list of prescription drugs covered by the plan. Also called a drug list. To find your plan's formulary, visit the Forms and Documents page on [bcbstmedicare.com](https://www.bcbstmedicare.com) in the Manage My Plan section.

Network

A list of doctors, hospitals or pharmacies contracted with the plan for covered services. If you use providers outside of this list, you may pay more for their services or drugs.

Out-of-Pocket Maximum

The highest amount you are expected to pay for the year. After this max is reached, your plan will pay 100 percent of covered services. Some expenses do not apply, see your Evidence of Coverage for more information.

Physical Exam

A physical exam looks to see if there's a physical problem, or helps you manage any chronic conditions.

Preferred Pharmacy

A pharmacy that's part of a Medicare drug plan's network. You pay lower out-of-pocket costs if you get your prescription drugs from a preferred pharmacy instead of a standard pharmacy.

Premium

The set amount you pay every month for your insurance plan coverage.

Standard Pharmacy

A pharmacy that's part of a Medicare drug plan's network, but isn't a preferred pharmacy. You may pay higher out-of-pocket costs if you get your prescription drugs from a standard pharmacy instead of a preferred pharmacy.

Tier

A category of drugs on your list, or formulary. Tiers help show pricing differences.



Nondiscrimination Notice

BlueCross BlueShield of Tennessee (BlueCross), including its subsidiaries SecurityCare of Tennessee, Inc. and Volunteer State Health Plan, Inc. also doing business as BlueCare Tennessee, complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. BlueCross does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

BlueCross:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as: (1) qualified interpreters and (2) written information in other formats, such as large print, audio and accessible electronic formats.
- Provides free language services to people whose primary language is not English, such as: (1) qualified interpreters and (2) written information in other languages.

If you need these services, contact Member Service at the number on the back of your Member ID card or call 1-800-831-2583 (TTY: 711). From Oct. 1 to March 31, you can call us 7 days a week from 8 a.m. to 9 p.m. ET. From April 1 to Sept. 30, you can call us Monday through Friday from 8 a.m. to 9 p.m. ET. Our automated phone system may answer your call outside of these hours and during holidays.

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 Member Service at the number on the back of your Member ID card or call 1-800-831-2583 (TTY: 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 Compliance Coordinator; 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, 1-800-537-7697 (TDD), 8:30 a.m. to 8 p.m. ET. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

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Multi Language Services

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-831-2583 (TTY: 711).

ملحوظة: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية تتوفر لك بالمجان. اتصل برقم 1-800-831-2583 (TTY:711).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-831-2583 (TTY:711)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-831-2583 (TTY:711).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-831-2583 (TTY: 711) 번으로 전화해 주십시오.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-831-2583 (ATS : 711).

ເອົາໃຈໃສ່: ຖ້າທ່ານເວົ້າພາສາລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາແມ່ນມີໃຫ້ທ່ານໂດຍບໍ່ເສຍຄ່າ. ໂທ 1-800-831-2583 (TTY: 711).

ማሳሰቢያ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያግዝዎት ተዘጋጅተዋል፡ ወደ ሚከተለው ቁጥር ይደውሉ 1-800-831-2583 (መስማት ለተሳናቸው: 711)፡፡

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-831-2583 (TTY: 711).

સૂચના: જો તમે ગુજરાતી બોલતા હો, તો નશિલ્ક ભાષા સહાયતા સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-800-831-2583 (TTY: 711)

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。800-831-2583 (TTY:711) まで、お電話にてご連絡ください。

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-831-2583 (TTY:711).

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-800-831-2583 (TTY: 711) पर कॉल करें।

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-831-2583 (телетайп: 711).

توجه: اگر به زبان فارسی صحبت می کنید خدمات زبان و ترجمه به صورت رایگان برایتان فراهم می گردد. با 1-800-831-2583 (TTY:771) تماس بگیرید.

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-800-831-2583 (TTY: 711).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-800-831-2583 (TTY: 711).

ATENÇÃO: se fala português, encontram-se disponíveis serviços linguísticos grátis. Ligue para 1-800-831-2583 (TTY: 711).

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-831-2583 (TTY: 711).

Díí baa akó nínízin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éí ná hóló, kojí' hódíłnih 1-800-831-2583 (TTY: 711).

Have questions, we're right here.



BlueAdvantage Member Service
1-800-831-BLUE (2583), (TTY: 711).

From **Oct. 1 to March 31**, you can call us 7 days a week from 8 a.m. to 9 p.m. ET. From **April 1 to Sept. 30**, you can call us Monday through Friday from 8 a.m. to 9 p.m. ET. If you call us outside these hours or on a holiday, our automated system will answer your call. You can leave a message for us, and we will call you back the next business day.



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