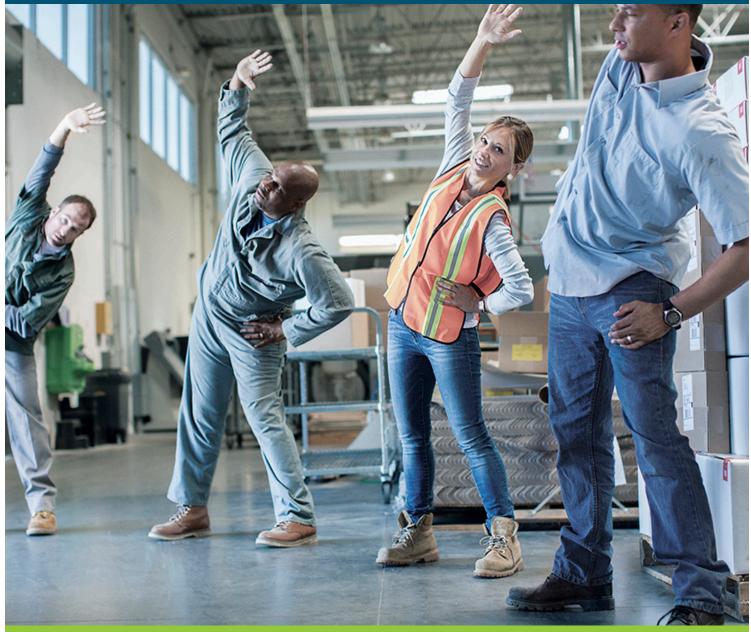
MEMBER GUIDEBOOK





GO PAPERLESS! To receive your Member Guidebook (or other available documents) electronically, simply update your account settings on our website or mobile app. Register or login at ExcellusBCBS.com/login It's easy!



TABLE OF CONTENTS

- PAGE 2 -

Sign up. Stay informed.
This is your 2021 guide
Make the most of your
health plan
Keep your contact information
current

- PAGE 3 -

We emphasize quality for you We speak your language COVID Support: We're here for you Get help Go paperless!

- PAGE 4 -

Manage your health and well-being Quitting smoking Coverage wherever you go Going away to college or on vacation?

- PAGE 5 -

Expand access to care through telehealth! After office hours Urgent care is convenient care When it's an emergency

- PAGE 6 -

Enjoy HealthyPerks™ and healthy savings
Establishing care with a new PCP
Need to find a doctor?
24/7 nurse call line
When you visit a specialist...
Have Arthritis? Check these online decision-making tools

- PAGE 7 -

Well-child visits keep kids healthy Caring for you Give your baby the right start Lead poisoning CDC recommends HPV vaccine for preteens and teens

- PAGE 8 -

Preventive health visits by age Recommended immunization schedule

- PAGE 9 -

Are you eligible for special insurance enrollment Adult preventive care

- PAGE 10 -

4 steps to better health Consider taking a risk health assessment Prescription coverage Have pharmacy coverage through Excellus BCBS?

- PAGE 11 -

HIV/AIDS/STI: What you should know Protecting your health information

- PAGE 12 -

Experimental and investigational procedures are not covered Know the facts
Advance care planning
Health plan medical policies available online

- PAGE 13 -

Important information about your plan

How to submit a complaint or grievance

You have the right to appeal Get updates throughout the year—online

- PAGE 14 -

You should know

- PAGE 15 -

Notice of nondiscrimination

- BACK COVER -

We're online Live Fearless

THIS IS YOUR 2021 GUIDE

This guidebook is published yearly for members whose health plan benefits are provided through a self-insured employer plan. The information contained here is not intended to provide medical advice or to take the place of medical care.

This document does not contain all the specifics about your health insurance plan - those can be found when you login to your member account at ExcellusBCBS.com.

Any questions you have should be brought to the attention of your health care provider.

Please send comments or suggestions to: Editor, Member Guidebook

Excellus BlueCross BlueShield

165 Court St. Rochester, NY 14647



At Excellus BCBS, we provide tools and support to make it easy to manage your plan—and live a healthier lifestyle.

Visit us online or download the mobile app. Get started at ExcellusBCBS.com/login or download our mobile app today!

- View member card(s), benefits, coverage and claims
- Estimate medical costs and check drug prices*
- Learn how to save on prescriptions and get wellness discounts

Plus, you can quickly connect to care:

- Find a doctor, urgent care center, hospital, or other provider
- Use Wellframe® mobile app to connect with your care manager, dietitians, and more*
- Call the 24/7 nurse call line (no cost)
- *Features may vary by your plan's selected benefits as will the related features on the website and/or mobile app; talk to your employer's benefits administrator to see if this program is available to you.

KEEP YOUR CONTACT INFORMATION CURRENT

Have you moved or changed your phone number?

It's important to keep us informed of changes to your mailing address and other telephone number(s), so we may communicate with you regarding your health plan, member account and/or premium bills (if applicable).

Visit ExcellusBCBS.com, or call the telephone number on your member card and our Customer Care representatives are happy to assist you.



Stay healthy and informed about your health insurance. Signup for our email newsletter at ExcellusBCBS.com/email to receive updates and articles to help you make better health care decisions for you and your family.



Our Marketplace plans are accredited by the National Committee for Quality Assurance



Our Medicaid and Medicare HMO plans are accredited by the National Committee for Quality Assurance



Our Medicare PPO and Commercial plans are accredited by the National Committee for Quality Assurance

WE EMPHASIZE QUALITY FOR YOU

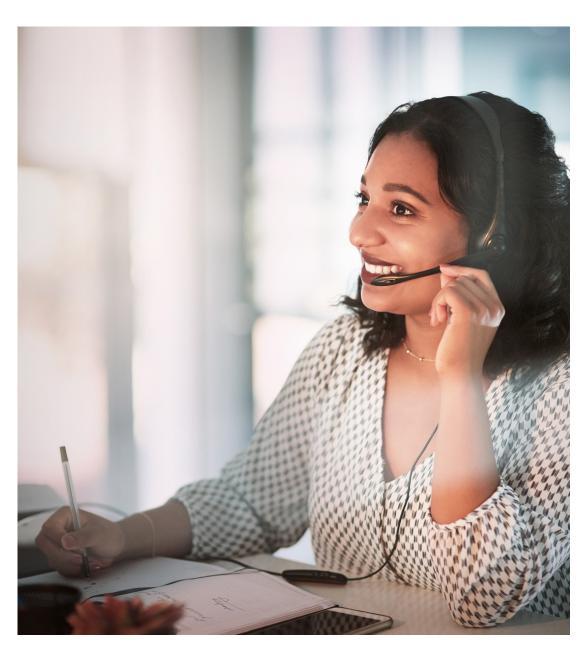
We have a plan to meet your needs.

Our mission is to improve the quality of life in the communities that we serve. We strive to empower members to become active participants in their personal health across their life's journey through educated and informed decision making.

We collaborate with hospitals, primary care practitioners and specialists in all the communities we serve striving to ensure the safe, high quality and cost-effective care for you, our members.

We routinely evaluate the quality of health care services and your experience/satisfaction rating of the health care services you received across our provider network.

You can find information about our Quality Improvement Program and the progress made toward meeting its goals by visiting us at ExcellusBCBS.com or by calling Customer Care at the phone number on your member card.



WE SPEAK YOUR LANGUAGE We offer a service that translates members' questions

and medical providers' and/or doctors' answers into more than 150+ languages. Call Member Services at 1-800-650-4359 or TTY/ TTD, 1-800-662-1220 to talk to an interpreter.

COVID SUPPORTWE'RE HERE FOR YOU

We want you to know that we are here for you and can help when you have guestions.

We also have a COVID-19 website to give you easy access to updates, helpful tips and more.

Please share the following link with your family and friends: ExcellusBCBS.com/covid19

GET HELP

You can visit our website at **ExcellusBCBS.com** to find a participating provider or doctor. Printed directories are available by request by calling the number on your member card.

You can also log in using your member account, to view or request a member card(s), check the status of claims or referrals, view benefits and coverage, and more.

MORE QUESTIONS? Call the phone number or your member card and our Customer Care advocates are happy to assist you.

YOU CAN ALSO CALL THE APPROPRIATE NUMBER BELOW:

For claims, benefits, and all other questions:

• Call the number on your Member Card for personalized care.

Don't have your card handy?

• Call 1-800-499-1275 Hours: Monday—Thursday, 8 a.m. to 7 p.m., Fridays, 9 a.m. to 7 p.m.

For TTY/TDD: Call 1-800-662-1220

GO Paperless!

To receive your Member Guidebook (or other available documents) electronically, simply update your accounts settings on our website or mobile app.

Register or login at ExcellusBCBS.com/login

It's easy!

MANAGE YOUR HEALTH AND WELL-BEING

If you or a family member have a chronic condition, or need behavioral or mental health support, our care managers are experienced health care professionals available to quide you and help you navigate today's health care system, feel more in control, and support your wellbeing.

Our Experienced Care Managers

Doctors, registered nurses, care managers, behavioral health clinicians, registered dietitians, social workers, respiratory therapists, pharmacists, and other specialists.

SINGLE POINT OF CONTACT

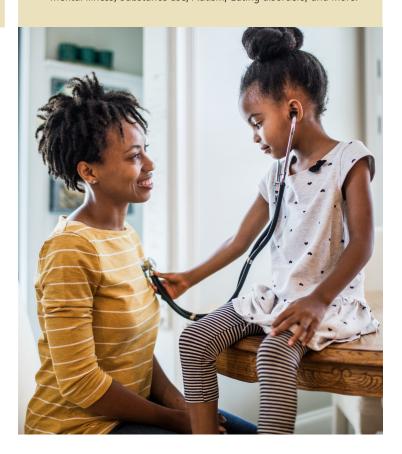
Your experienced care manager can help you:

- Identify and reach goals to maintain or improve your health, and identify barriers preventing health goals from being met.
- Find answers to questions and provide education about conditions, treatment, or keeping up with your treatment plan.
- Understand your medications and taking them as directed by your health care provider.
- Provide education and support for self-care and decision-making.
- Find services, resources, and care you may need, including referrals to programs or community resources, and support you and your family may need.
- Arrange access to care and help navigate your insurance benefit information.
- Talk with your health care provider to assist with arranging the best care for you.

Contact a Care Manager at 1-800-860-2619 (8 a.m. to 4:30 p.m. EST), TTY 1-800-662-1220, or email us at Case.Management.Referral@excellus.com, help manage chronic or complex medical conditions. For Behavioral Health conditions, please call: 1-800-277-2198, TTY 1-800-662-1220. Your care manager will contact you the next business day. You can opt in or out of the care management program anytime.

Conditions

Physical, Mental and Emotional Health Preventive Care, Asthma, Diabetes, Heart disease or Depression Complex chronic conditions (e.g., HIV, COPD, cancer, stroke, spinal cord injury) Anxiety, Depression, Mental illness, Substance use, Autism, Eating disorders, and more.



QUITTING SMOKING

The New York State Smokers' Quitline offers useful and proven resources to help people who want to quit smoking. Call the Quitline at **1-866-NY-QUITS (1-866-697-8487)** or visit their website at: www.nysmokefree.com

Not In New York state? Quitline services in all U.S. states can be accessed through a toll-free national portal number provided by the National Cancer Institute at **1-800-QUIT NOW** (1-800-784-8669).

Callers can access additional, language-specific quitline services via **1-855-DÉJELO-YA** for service in Spanish **(1-855-335-3569)**, other languages are also available.





COVERAGE WHEREVER YOU GO

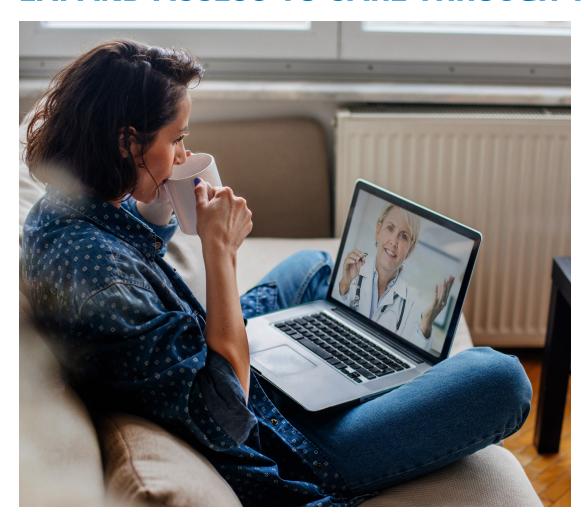
With Excellus BlueCross BlueShield, you'll never have to worry about your insurance coverage. Regardless of where you live or travel, the BlueCard® Program goes with you. To find a participating doctor or hospital, call 1-800-810-BLUE (2583) or find a doctor online at ExcellusBCBS.com.

GOING AWAY TO COLLEGE OR ON VACATION?

Don't forget to bring a copy of your Member Card. Your health plan can help you and your family obtain emergency care when needed. To request a duplicate Member Card, log on to ExcellusBCBS.com, check our mobile app, or call Customer Care at the number on your member ID card.



EXPAND ACCESS TO CARE THROUGH TELEHEALTH!



Visit with your primary care doctor or specialist via telehealth:

Providers can treat a variety of conditions from the comfort of your own home. Visits can be conducted via telephone or video. Call and ask your provider in advance if a telehealth visit is the best option for you.

Cost of a telehealth visit:

- Payment responsibilities will vary by group and plan
- Contact Excellus BCBS Customer Care to receive your benefit and cost for a telehealth visit.

Common telehealth services:

- Non-emergency
- Behavioral and mental health
- Dermatology
- Endocrinology
- Neurology
- And more!

AFTER OFFICE HOURS

If you get sick or hurt and need care after regular office hours, call your doctor's office first, unless it is an emergency medical condition. Your doctor/primary care provider (PCP) knows your medical history and is the best person to help you. Your PCP may use an answering service or another doctor who is on call to make sure you can get medical care when you need it.

Your PCP or the on-call doctor will decide if you need treatment right away or if you can wait for regular office hours. If you do need care, your doctor may see you at their office, send you to their on-call doctor, send you to an urgent or after-hours care center, or send you to an emergency room.

URGENT CARE IS CONVENIENT CARE

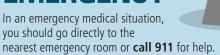
When a non-emergency medical issue doesn't require an emergency room visit, or if you can't get in to see your physician, you can visit an urgent care center and get the care you need.

Please ensure the provider you select is participating with your benefit plan. Contractual rules still apply.

For benefit information, log on to ExcellusBCBS.com or call Customer Care at the phone number on your Member Card.

For a location near you, call **1-800-810-BLUE (2583)** or go to ExcellusBCBS.com/UrgentCare.

WHEN IT'S AN EMERGENCY



You do not need prior authorization for treatment of emergency medical conditions.

However, it is best if you can have someone telephone your doctor/ primary care physician (PCP) as soon as possible so that he or she knows you are being treated.

Even if you can't make the call when you are being treated, please have someone notify your PCP that you were treated for an emergency medical condition as soon as possible, preferably within 48 hours. This will ensure that your PCP can help manage your health care.

If you are treated for an emergency medical condition while out of the service area, please refer to your benefit plan for follow-up care coverage information.

ENJOY HEALTHYPERKS™ AND HEALTHY SAVINGS

Living a healthy life means more than regular doctor visits. It's about staying active, eating well, and reaching out to experts when you need to. Our HealthyPerks™ makes all these aspects of health convenient—and less costly!



Blue365®

With this program, you get exclusive discounts on fitness gear, exercise programs, weight-loss programs, and more!



24/7 Nurse Call Line

Get convenient answers to your health care questions.



Expert Information Online

Instant access to many health topics.

Explore more at ExcellusBCBS.com

ESTABLISHING CARE WITH A NEW PCP

Are you a new member or are you planning to change your primary care physician (PCP)? If so, it is important for you to know the steps to good care:

- Select a PCP from the directory provided to you, or use the "Find Your Doctor or Hospital" tool on ExcellusBCBS.com.
- Call that PCP to determine if he or she is accepting new patients and whether they only accept patients in certain age ranges.
- Schedule an appointment to become established with the PCP and share your medical history. Ask your new physician's office to request records from your (or your child's) previous PCP in order to coordinate your care.
- Don't forget to ask your PCP whether they offer teleheath care and how it works.

Likewise, chronic conditions, such as asthma, diabetes, and hypertension, which require regular medications and monitoring by your physician, can also be assessed at this visit.

Your PCP is an important partner in keeping you healthy. They are responsible for managing and coordinating your medical care, including diagnosis, treatment, referrals to specialists, hospitalization, and follow-up care. Moreover, every member under your policy is required to list a PCP with us if you have Point of Service coverage. Not listing a PCP can result in a claim denial or reduced payment on a claim.

It is a good idea to establish a relationship with your doctor (PCP). Be sure to call them whenever you feel you need medical care. Your doctor or their on-call physician is available to you 24 hours a day. If your doctor determines that you need to see a specialist for treatment, he or she will refer you to a participating specialist. You may contact Customer Care at the phone number on your member card if you need additional information.

NEED TO FIND A DOCTOR?



Our website can help you. You'll find:

- Doctors
- Hospitals
- Centers of Excellence

- Dentists
- Urgent Care Centers

Search by specialty, location, hours, language spoken, credentials, and more. Our printed provider directories are updated regularly and the online lists are current

If you would like the most recent directory, visit the website on your member card, or call the Customer Care telephone number listed on the card if you do not have internet access.

24/7 NURSE CALL LINE

Your Health Plan wants to make sure you have the answers you need at the time you need them. Our nurse call line is available 24 hours a day, 7 days a week, and 365 days a year. It is offered to you at no additional cost because you are a member of our plan. Our experienced registered nurses are ready to help you any time of the day or night.

For questions about symptoms and care for you or a family member, call **1-800-348-9786**. The TTY number is **1-800-662-1220**. For additional languages, please ask for a translator when you are connected.

WHEN YOU VISIT A SPECIALIST...

Please be sure to ask your specialist to send a report to your primary care physician (PCP). This will help your PCP manage your health care.



HAVE ARTHRITIS? FACING A HIP OR KNEE REPLACEMENT? YOU HAVE OPTIONS.

Explore more at ExcellusBCBS.com. Review expert decision-making tools targeted to support people considering hip/knee replacement surgery.

These tools can help you to better understand your treatment options when you talk with your physician.



WELL-CHILD VISITS KEEP KIDS HEALTHY

Get in the habit of bringing your children to their doctor for routine checkups, even when they are well. Well-child visits give you and your child the opportunity to get to know the doctor, who can monitor your child's development and identify potential problems early on.

Your child's doctor will also advise you on injury prevention and healthy lifestyle issues appropriate for your child, including nutrition, exercise, dental health, tobacco use, alcohol and substance abuse, and prevention of sexually transmitted diseases. A school or sports physical does not qualify as a well-child visit.

The current clinical guidelines for preventive health recommendations for children are shown on the next page.



When you're pregnant, your first concern is the health and welfare of your unborn baby. Getting complete prenatal care right from the start will help ensure that your baby is as healthy as possible. That's why regular prenatal visits are critical, even if previous pregnancies were problem-free.

Regular prenatal care visits provide you with childbirth education, counseling, and family support. It also includes a complete health screening and evaluation of risk factors that may affect your health and the health of your baby.

Details on the medical tests you'll have and the topics you'll discuss during your prenatal visits with your health care provider are available on our website.

Learn more about a healthy pregnancy. Visit ExcellusBCBS.com. Choose "Health and Wellness" and then choose "Preventive Health," then "Screenings and Immunizations," then "Recommended Screenings," then "Healthy Pregnancy."

LEAD POISONING: WHAT EVERY PARENT NEEDS TO KNOW

Lead is a very strong poison.

Children under age 6 are at the highest risk, but it can affect anyone. If you have questions or concerns, talk to your health care provider. Your physician may have asked you about the potential risk of lead exposure, but a blood lead test is the only way to know for sure. It was commonly used in gasoline and house paint. It has been banned in the United States for many years, but is still found in some older homes, toys from other countries and even old fishing sinkers.

The truth is that lead can be anywhere. Certain state laws and regulations require health care providers to:

- Assess all children ages 6 months to 6 years for risk of lead exposure at least annually as part of routine care, and obtain a blood lead test on all children found to be at risk.
- Obtain a blood lead test for all children at age 1 and again at age 2.

Learn more at health.ny.gov/environmental/lead/ or cdc.gov/nceh/lead/default.htm or ExcellusBCBS.com

CARING FOR YOU



Our plans have a process for reviewing health care services to ensure that they are evidence-based, medically necessary, and being performed at the right level of care by qualified professionals. This process is called utilization management (UM) and it is conducted by licensed health care professionals and practitioners.

UM decision-making is based solely upon the application of nationally recognized clinical criteria, transparent corporate medical policies, and the existence of coverage. We do not, in any way, encourage decisions that result in underutilization or reward UM decision makers for denials of coverage or limits on access to care.

CDC RECOMMENDS HPV VACCINE FOR PRETEENS AND TEENS

HPV vaccination is recommended at ages 11-12 to protect against cancers caused by HPV infection.

Human papillomavirus (HPV) vaccine protects against cancers caused by HPV infection.

HPV is a common virus that infects teens and adults. About 14 million people, including teens, become infected with HPV each year. HPV infection can cause cervical, vaginal, and vulvar cancers in women and penile cancer in men. HPV can also cause anal cancer, cancer of the back of the throat (oropharynx), and genital warts in both men and women.

Talk to your child's health care provider to learn more about HPV vaccine and the other vaccines that your child may need. You can also find out more about HPV vaccine at www.cdc.gov/hpv.



PREVENTIVE HEALTH VISITS BY AGE

Regular preventive health appointments with your child's health care provider help you track your child's development and give them an understanding of the importance of good health care. At each well visit age appropriate developmental/psychosocial/behavioral assessments, health screenings, and immunizations are completed. Compiled with information from the U.S. Centers for Disease Control and Prevention (CDC), 2021, www.cdc.gov/vaccines/ and American Academy of Pediatrics Bright Futures https://brightfutures.aap.org/

AGE	IMMUNIZATIONS	WELL VISIT SCHEDULE	ANTICIPATORY GUIDANCE
Birth	Hepatitis B: Dose 1	3 to 5 days	ALL AGES
1 to 2 months	Hepatitis B: Dose 2	1 month	Perform age-appropriate risk assessments, immunizations and medical screenings (blood pressure, head circumfer-
2 months	DTaP: Dose 1, Polio: Dose 1, Hib: Dose 1 PCV13: Dose 1, Rotavirus: Dose 1	2 months	ence, length, height, weight, depression, vision, hearing, lead, tuberculosis, anemia, oral health, blood pressure, dyslipidemia, HIV, alcohol/substance abuse and
4 months	DTaP: Dose 2, Polio: Dose 2, Hib: Dose 2 PCV13: Dose 2, Rotavirus: Dose 2	4 months	sexually transmitted infections) and measure and plot BMI percentile based on age and gender, metabolic syndrome, hypertension
6 months	DTaP: Dose 3, Hib: Dose 3, PCV13: Dose 3 Rotavirus: Dose 3, Influenza	6 months	 Social determinants of health Living situation and food security Family relationships and support
6 to 18 months	Polio: Dose 3 Hepatitis B: Dose 3		Parenting skills/ parent and family well-being/ family adjustment/ functioning
12 to 15 months	Influenza, Hib: Dose 4, PCV13: Dose 4 MMR: Dose 1, Varicella: Dose 1	1 year	 Healthy nutrition and feeding Overweight, obesity and eating disorders Oral/dental health: brush teeth/regular visits to
12 to 23 months	Hepatitis A: Dose 1, Hepatitis A: Dose 2- 6 months after 1st dose		dental provider • Effects passive smoking, anti-tobacco message
15 to 18 months	DTaP: Dose 4	15 months 18 months	 Media exposure and uses Safety seat (under 8 years), lap shoulder belt, child in back seat/ smoke detector/carbon monoxide detectors
2 years	Influenza	2 years	Safe storage of drugs, toxic substances, firearms and matches
3 years	Influenza	30 months 36 months	 Poisoning prevention/ activated charcoal, poison control number/ violence prevention Sun exposure/ sunscreen use/ heatstroke
4 to 6 years	Influenza, DTaP: Dose 5,Polio: Dose 4 MMR: Dose 2, Varicella: Dose 2	Yearly	 Measure and plot weight for length until 24 months and body mass index (BMI) beginning at 24 months
7 -10 years	Influenza	Yearly	Perform developmental/ behavioral/ psychosocial and autism screening and follow-up
11 to 12 years	Influenza, Tdap, MenACWY: Dose 1 HPV: Dose 1, HPV: Dose 2- 6 to 12 months after 1st dose	Yearly	IMMUNIZATION GUIDE DTaP: Diphtheria, Tetanus, Pertussis
13-15 years	Influenza	Yearly	IPV: Polio Hib: Haemophilus influenzae type b
16 years	MenACWY: Dose 2, Influenza	Yearly	Tdap: Tetanus, Diphtheria, Pertussis MenACWY: Meningococcal Disease HPV: Human Papillomavirus
17 years	Influenza	Yearly	PCV13: Pneumococcal Disease MMR: Measles, Mumps, Rubella Varicella: Chickenpox

ARE YOU ELIGIBLE FOR SPECIAL INSURANCE ENROLLMENT?

Life changes that happen outside of an annual enrollment period, planned or unexpected, may make you (or your loved one) eligible to change your health insurance coverage.

- Getting married or divorced
- Having a baby or adopting a child
- Loss of eligibility for coverage on a parent's plan (turning age 26)
- Newly eligible for Medicare (turning age 65)
- A job loss, or other change in income, may make you eligible for other plans

Excellus BlueCross BlueShield is here for you with affordable, high-quality individual, family and Medicare health insurance plan options, and some peace of mind with coverage you know and trust:

The Essential Plan, as low as \$0 a month

Qualified Health Plans, with premium tax credits for those who qualify

Other free or low-cost plans for individuals and children

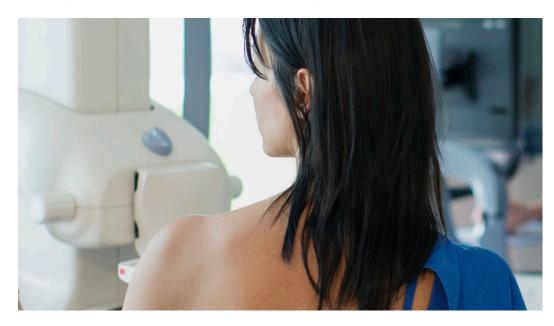
Medicare plans for those over age 65

Eligibility is based on New York state residency, age, income, family size and other criteria.

If you're under age 65, visit ChooseExcellus.com – or call us at the number on the back of your member card.

If you're age 65 or older: See what plan is right for you at **ExcellusforMedicare.com** or call us at 1-800-671-6081 (TTY: 1-800-662-1220).

ADULT PREVENTIVE CARE



Take Charge of your Health

For all adults it is important to schedule routine check-ups with your primary care physician to help identify risk factors and problems before they become serious.

These preventive care visits may include health services like age and gender specific health screenings, counseling discussions used to prevent illnesses, disease, and other health problems, or to detect illness at an early stage when treatment is likely to work best, for example, screening for hepatitis C for individuals born between 1945 and 1965, cancer screenings, immunizations and detection or management of chronic conditions such as diabetes, hypertension or cardiovascular disease.

Getting recommended preventive services and making healthy lifestyle choices are key steps to good health and well-being.

Breast Cancer Screening

The CDC defines how screening can help find breast cancer early, when it is easier to treat.

All women need to be informed by their health care provider about the best screening options for them.

Talk to your health care provider about which breast cancer screening tests are right for you, and when you should have them. The USPSTF (U.S. Preventive Services Taskforce) recommends that women who are 50 to 74 years old and are at average risk for breast cancer get a mammogram every two years. Women who are 40 to 49 years old should talk to their health care provider or other health care professional about when to start and how often to get a mammogram.

Colon Cancer Screening

Facts about Colon Cancer Screening: Tens of thousands of adults in upstate New York are choosing not to be screened for colon cancer. Colon cancer is the second-leading cause of cancer death among adults in the United States.

CDC Colorectal Cancer Screening Fast Facts

- If you are age 50 to 75 years old, you should get screened for colorectal cancer.
- The U.S. Preventive Services Task Force recommends screening beginning at age 50. Some groups recommend starting earlier, at age 45.

The vast majority of new cases of colorectal cancer (about 90 percent) occur in people who are 50 or older. Millions of people in the United States are not getting screened as recommended. They are missing the chance to prevent colorectal cancer or find it early, when treatment often leads to a cure.

4 STEPS TO BETTER HEALTH WHAT CAN YOU DO TO STAY WELL

AND PREVENT DISEASE?

SIMPLE. FOLLOW THESE STEPS:



Taking Medications

One of the most important things you can do to protect your health is to take your medications as directed by your health care provider. This is called medication adherence. In addition, our members have access to licensed, clinical pharmacists to ask questions about their medications through our Ask the Pharmacist program.



Nutrition

Eating healthy is about more than counting calories. From online tools to personal consults when needed from our nutrition experts, we'll help you feel your best with resources that help you make healthy eating a part of your lifestyle.



Immunization

We're committed to helping you stay healthy. Most preventive health screenings, such as mammograms and colonoscopies, as well as immunizations are covered at no additional cost to you. Not sure where to start? No matter which stage of life you're in, we'll help you determine which screenings are recommended.



Fitness

Whether you've been exercising your whole life or just starting your fitness journey, we have the resources to help you keep moving. All our members have access to online fitness tools. Many of our plans reward you for staying active.

Details on recommended medical tests and other health information are available under "Health and Wellness" on the website listed on your Member Card.

If you have any questions, contact your doctor.

CONSIDER TAKING A HEALTH RISK ASSESSMENT

Want to learn more about your health and options for improvement?

Please take a few minutes to complete your confidential Health Survey. You'll receive a Health Profile that will give you a snapshot of your health. Have your Member Card handy for quick and easy registration to the survey site.

- 1. Visit ExcellusBCBS.com and log in as a "Member."
- 2. Click the "Health and Wellness" drop down along the top.
- 3. Under "Health & Wellness Programs", select "Health Risk Assessment."
- 4. Click the "Begin Health Risk Assessment" button to start.



There are different types of prescription drug plans, and not all health insurance plans directly cover pharmacy benefits (they might be a separate type of coverage). If you have coverage of some type, here are some things to know and consider:

- If you have prescription drug coverage that includes different copayment or co-insurance amounts for generic and brand-name drugs, we encourage you to ask your doctor to prescribe generic drugs whenever possible to minimize your prescription drug costs.
- You can fill your prescription at any participating pharmacy in our nationwide pharmacy network, including national chains and most independents. Just show your Member Card at any participating pharmacy; it identifies you as having prescription drug coverage. You may also have the opportunity to save money by ordering your medications through our mail-service vendors.
- If your doctor wants you to use a medication that is not covered on our formulary, there is an exception process.

We are dedicated to providing our members who also have our pharmacy coverage with access to safe, effective drug therapy. Our Pharmacy and Therapeutics Committee, consisting of community doctors and clinical pharmacists, meets regularly to review prescription drugs, determine prescribing guidelines, and define coverage categories (formulary).

Notes:

- 1) Please check with your benefits administrator or related pharmacy benefits administrator for specific questions. Not all members have pharmacy benefits, so your administrator would know details.
- 2) Prescription drug coverage varies. Please check your benefit plan or call the Pharmacy Member phone number on your Member Card. You can also log onto ExcellusBCBS.com and click on the "Prescriptions" tab, to check your benefit plan/group certificate, verify your prescription coverage, get information on your mail order options, check our updated formulary drug list and find information about our pharmacy management procedures, including how, with a prescriber's supporting statement, to request a formulary exception.

HAVE RX COVERAGE THROUGH **EXCELLUS BCBS?**

Learn more online by logging on to ExcellusBCBS.com and click on "Save Money on Prescriptions" under the 'Prescriptions' tab.



HIV/AIDS/STI: WHAT YOU SHOULD KNOW

HIV (human immunodeficiency virus) is a virus that makes it hard for the body to fight infection and disease. AIDS (acquired immunodeficiency syndrome) is the last and most severe stage of the HIV infection. But having HIV does not mean you have AIDS.

New medications make it easier to manage the virus and can stop it from spreading. Keeping your viral load at an undetectable level can lead to a zero risk of passing the virus on to partners through sex. By taking care of yourself, you can also help to keep your partner safe and healthy. Remember: Undetectable = Untransmittable.

STI (sexually transmitted infection) symptoms and treatment may vary. People who are infected may not have any symptoms and may not know that they have an infection. The only way to know for sure is to get tested. STI Prevention screening is encouraged based on risk factors - see contact details below for the New York State HIV/STI Hotline or CDC Hotline for more information.

HIV/STIs are spread by:

- Sexual contact with a person who is infected.
- Sharing needles, syringes, or works (for drug injection, piercing or tattooing) with a person who is infected.
- Contact between broken skin or wounds with HIV/STI-infected blood.

Lower Your Risk:

- Always use a condom when having sex.
- Limit the number of people with whom you have sex.

• HIV/STI-infected women to their babies.

- Contact with HIV/STI-infected blood products on the job (such as in health care).
- Some STIs can also be spread through skin to skin contact.
- Limit or refrain from using drugs and alcohol before and during sex.
- Know your partner's HIV/STI status before you have sex

Getting Tested

Everyone should know their HIV status. The only way to know if you have HIV is to be tested.

It is advised that everyone between the ages of 13 and 64 get tested for HIV at least once. Testing is safe and easy. You can have a blood test or an oral test. An oral test doesn't use needles. Most clinics, health departments, and health care providers can do the test for HIV. The testing can be confidential or anonymous.

To get a free and confidential test for HIV or STIs please call:

- NYS 1-800-541-AIDS (1-800-541-2437)
- Nationwide CDC 1-800-CDC-INFO (232-4636) | 1-888-232-6348 TTY

Confidential testing requires that you give your name, and your results can be sent to your health care provider.

Anonymous testing means that you do not give your name and that there is no record of the test. If your test shows that you have HIV, you can choose to give your name at that time so that you can receive medical care.

HIV testing and treatment are especially important for pregnant women. It is much better to know your status early. This can allow you to make important decisions about your health and the health of your baby.

- If you do have HIV/STI or AIDS, it is important to get regular care. This can help you to manage your condition and decrease the risk of spreading the virus to your baby.
- If you do not have HIV/STI but are at high risk of becoming infected, talk to your health care provider about pre-exposure prophylaxis (PrEP). PrEP involves taking a specific HIV medicine every day to reduce the risk of HIV infection.

For more information about HIV/AIDS/STI:

- contact the NYS HIV/STI Hotline toll-free at 1-800-541-AIDS (2437) in English or 1-800-233-SIDA (7432) in Spanish
- go to the New York State HIV/STI Information Service website located at nyaidsline.org
- or call the CDC Hotline at 1-800-CDC-INFO (232-4636) | 1-888-232-6348 TTY
- or go to cdc.gov/std/hiv/default.htm



Protecting the privacy of your family's health information is important to us.

Regulations enacted under the Health Insurance Portability and Accountability Act (HIPAA) enhanced our procedures around the disclosure of our members' protected health information to anyone other than that specific individual, without prior written authorization, or as permitted by law.

Without a signed authorization on file with the health plan:

- Spouses cannot call and check on referrals for one another.
- A son or daughter cannot receive information about his or her elderly parent.
- Parents with dependent children ages 18 or older cannot get information about their child's claims.
- Parents with children younger than 18 can access their child's health information, although other privacy laws protect some specific medical information for children.

For members: You can file an authorization form by accessing our website at ExcellusBCBS. com, then as a Member to select "My Account," then under "My Information," select "Manage Privacy." If you do not have internet access, call the Customer Care phone number listed on your member card to request a paper authorization form.

EXPERIMENTAL AND INVESTIGATIONAL PROCEDURES ARE NOT COVERED

Because your safety is important to us, we don't cover treatments, procedures, drugs, devices, or any related hospitalization determined to be experimental or investigational.

We have a department of physicians and nurses who, along with a committee of regional board-certified physicians, determine medical policy and coverage of new technology and medical procedures. If you have Rx coverage through Excellus BCBS, new drugs are reviewed by our Pharmacy and Therapeutics Committee.

We use a variety of sources, such as the Food and Drug Administration (FDA), clinical practice guidelines, and peer-reviewed professional journals, in researching new technologies. Our medical policy department will only allow new technology to become a part of our benefit package after it has been thoroughly investigated and determined to be safe and effective.



KNOW THE FACTS

We have been working for many years to create a heightened awareness around critical health-related topics and conditions, and to educate and encourage people to make intelligent personal health decisions based on scientific studies and medical research.

To read more than 40 fact sheets on topics including diabetes, medications, fall prevention, and more, go to ExcellusBCBS.com/FactSheets.

Some of the recent postings include:

E-Cigarettes - What You Need to Know about Vaping

It is unsafe for young people to use any product containing tobacco or nicotine. Some e-cigarette cartridges have higher levels of nicotine than a pack of cigarettes.

Don't Forget About the Flu

The flu is a contagious respiratory disease that can lead to hospitalization and even death. Because of COVID-19, it's even more important to do everything you can to keep yourself and your family healthy.

Sudden Signs of Stroke

Timely treatment can lower the risk of disability or death from a stroke. If you think someone may be having a stroke, act F.A.S.T.



ADVANCE CARE PLANNING

Conversations change lives. Start your conversation.

Advance Care Planning (ACP) is a process for planning for future medical care in case you are unable to make your own decisions. Your health plan has developed two successful programs to help make the ACP process easier.

- Community Conversations on Compassionate Care (CCCC) combines storytelling with "Five Easy Steps" to promote conversations that help all adults complete a Health Care Proxy and Living Will.
- The Medical Orders for Life-Sustaining Treatment (MOLST)
 Program is designed to improve the quality of care seriously ill people receive at the end of life.

For further information on CCCC and MOLST and to obtain free educational resources, visit CompassionAndSupport.org and MOLST.org, or call this toll-free number: 1-877-718-6709.

HEALTH PLAN MEDICAL POLICIES AVAILABLE ONLINE

Each month, your health plan's website is updated with new and revised medical policies that may affect the care you and your family receive. Medical policies are based on a systematic review of scientific evidence to determine the scientific merit of a medical technology. All medical policies are reviewed and finalized by the Corporate Medical Policy Committee, which includes your health plan's medical directors and practicing physicians.

Medical policies are used as a guide. Coverage decisions are made on a case-by-case basis and in accordance with your benefit plan. While a service may be medically appropriate, it may be excluded from your benefit plan. Always refer to your particular benefit plan to determine if a service may be considered for coverage under that plan and if a specific limitation or exception exists.

Be aware that these medical policies are written for health care practitioners and include medical and technical language. That's why it's important for you to review these policies with your health care provider.

To see the medical policies, visit the website address listed on your Member Card and search for "medical policies." If you don't have internet access, you may also call the phone number on your Member Card and ask for a printed copy of a particular policy.



IMPORTANT INFORMATION ABOUT YOUR PLAN

Each year, we notify our members of certain disclosure information as required by law. To find more information and documents related to the following topics, please go to our website at ExcellusBCBS.com, sign in as a member, select "Resources," then "Compliance Notices." You may also request a copy by contacting us by mail at the address on your Member Card, or by calling us at the telephone number listed on your Member Card.

Privacy Notice: This describes how medical information about you may be used and disclosed and how you can get access to this information.

Women's Health and Cancer Rights Act: Your plan, as required by the Women's Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prosthesis, and complications resulting from a mastectomy, including lymphedema.

Provider Directory: A current and searchable list of providers is available on our website, or you can request a printed copy.

New York State Consumer Guide to Health Insurers: The current guide is available from the New York State Department of Financial Services. The guide provides important consumer information on the performance of health maintenance organizations and other insurers. To view a copy of the guide online, visit https://www.dfs.ny.gov/system/files/documents/2020/09/cg_health_insurers_2020.pdf. You can request a hard copy of the guide by calling New York State Department of Financial Services at 1-800-342-3736. Find us in this guide under the name "Excellus Health Plan."

Third Party Designation: If you are 65 or older and enrolled in a direct payment product or Medicare supplement plan, you have the right to designate another person (family or friend), known as a "third party," to receive notices of nonpayment of premium and notices of cancellation due to nonpayment of premium. To do so, you must fill out our Third Party Designee form available as described above.



YOU HAVE THE RIGHT TO APPEAL

Self-insured members have the right to an internal appeal of any complete or partial benefits denial under their employer sponsored plan. For additional details, with respect to your right to an internal appeal as well as the procedures that must be followed, please contact your plan administrator or refer to your benefit booklet or summary plan description.

Self-insured members may also have external appeal rights available under the Patient Protection and Affordable Care Act (PPACA). If applicable, members will receive an external appeal application, along with a notice of final adverse determination when their internal appeal has been denied. For more information about this process, members can call Customer Care at the number on your Member Card.



HOW TO SUBMIT A COMPLAINT OR INTERNAL APPEAL

A complaint applies to any issues not related to a claim, an internal or external appeal.

An internal appeal applies to any complete or partial denial made by the health plan. Unless your benefit booklet or plan summary states otherwise, you can contact us by phone, in person, or in writing to file an appeal.

Commercial-Excellus BlueCross BlueShield

1-800-499-1275 Monday—Thursday, 8 a.m. to 6 p.m. Friday, 9 a.m. to 6 p.m. TTY toll free at 1-800-662-1220 Written complaints or appeals can be mailed to:

Excellus BlueCross BlueShield

CAU P.O. Box 4717 Syracuse, N.Y. 13221 Fax: 315-671-6656



GET UPDATES THROUGHOUT THE YEAR—ONLINE

Throughout the year, we post updates to many of the topics in this guidebook. Please log in at ExcellusBCBS.com periodically to get interactive updates and details on items such as:

- Your health plan benefits and copayments.
- How to find a doctor, specialist, or hospital.
- Your rights and responsibilities.
- Pharmacy directions and medication lists.
- How to submit a claim or grievance.
- Resources for managing your health and wellness.
- Privacy practices for your personal health information.

YOU SHOULD KNOW

As a member of our plan, you have certain rights and responsibilities, which are outlined below.

You have the right to:

- Receive all the benefits to which you are entitled under your benefit plan.
- Receive quality health care through your providers in a timely manner and in a medically appropriate setting.
- Considerate, courteous, and respectful care.
- Be treated with respect and recognition of your dignity and right to privacy.
- Information about services, staff, hours of operation, and your benefits, including access to routine services as well as after-hours and emergency services, practitioners and providers, and members' rights and responsibilities.
- Participate in decision-making with your physician about your health care.
- Refuse treatment as allowed by law, and be informed by your physician of the medical consequences.
- Refuse to participate in research.
- Confidentiality of medical records and information, with the authority to approve or refuse the re-disclosure by us of such information, to the extent protected by law.
- Receive all information needed to give informed consent for any procedure or treatment.
- Access your medical records as permitted by state law.
- Express concerns and complaints about the care and services provided by physicians and other providers, and have us investigate and respond to these concerns and complaints.
- Candid discussion of appropriate or medically necessary treatment options for your condition, regardless of cost or benefit coverage.
- Care and treatment without regard to age, race, color, sex, sexual orientation, religion, marital status, national origin, economic status, or source of payment.
- Voice complaints or appeals about care the organization provides and recommend changes in benefits and services to staff, administration and/ or the New York State Department of Financial Services or Department of Health, without fear of reprisal.
- Formulate advance directives regarding your care. To obtain a Health Care Proxy form, contact us, or download the form from our website, ExcellusBCBS.com.
- Contact us to obtain the names, qualifications, and titles of providers who are responsible for your care.
- All information about your health plan, its services and its providers and procedures.
- Make recommendations regarding the organization's members' rights and responsibilities.

You have the responsibility to:

- Be an active partner in the effort to promote and restore health by:
 - Openly sharing information about your symptoms and health history with your physician.
 - Listening.
 - Asking questions.
 - Becoming informed about your diagnosis, recommended treatment and anticipated or possible outcomes.
 - Following the plans of care you have agreed to (such as taking medicine and making and keeping appointments).
 - Returning for further care if any problem fails to improve.
 - Accepting responsibility for the outcomes of your decisions.
- Participate in understanding health problems and developing mutually agreed upon treatment goals.
- Have all care provided, arranged, or authorized by your primary care physician (PCP).
- Inform your PCP if there are changes in your health status.
- Obtain services authorized by your PCP.
- Share with your PCP any concerns about the medical care or services that you receive.
- Permit us to review your medical records in order to comply with federal, state, and local government regulations regarding quality assurance and to verify the nature of services provided.
- Respect time set aside for your appointments with providers and give as much notice as possible when an appointment must be rescheduled or canceled
- Understand that emergencies arise for your providers and that your appointments may be unavoidably delayed as a result.
- Respect staff and providers.
- Follow the instructions and guidelines given by your providers.
- Show your Member Card and pay your visit fees to the provider at the time the service is rendered.
- Become informed about our policies and procedures, as well as the office
 policies and procedures of your providers, so that you can make the best
 use of the services that are available under your benefit plan.
- Abide by the conditions set forth in your benefit plan.
- Inform the plan of changes in your residence, telephone, or other information affecting your health care.

NOTICE OF NONDISCRIMINATION

Our Health Plan complies with federal civil rights laws. We do not discriminate on the basis of race, color, national origin, age, disability, or sex. The Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

The Health Plan:

Provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

Provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages

If you need these services, please refer to the enclosed document for ways to reach us. If you believe that the Health Plan 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 with:

Advocacy Department

Attn: Civil Rights Coordinator

PO Box 4717 Syracuse, NY 13221

Telephone number: 1-800-614-6575 TTY number: 1-800-662-1220

Fax: 1-315-671-6656

You can file a grievance in person or by mail or fax. If you need help filing a grievance, the Health Plan's Civil Rights Coordinator is available to help you.

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.isf, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201 1-800-368-1019

Complaint forms are available at

http://www.hhs.gov/ocr/office/file/index.html.

Attention: If you speak English, free language help is available to you. Please refer to the enclosed document for ways to reach us.

Atención: Si habla español, contamos con ayuda gratuita de idiomas disponible para usted. Consulte el documento adjunto para ver las formas en que puede comunicarse con nosotros.

注意:如果您说中文,我们可为您提供免费的语言协助。请参见随附的文件以获取我们的联系方式。

Внимание! Если ваш родной язык русский, вам могут быть предоставлены бесплатные переводческие услуги. В приложенном документе содержится информация о том, как ими воспользоваться.

Atansyon: Si ou pale Kreyòl Ayisyen gen èd gratis nan lang ki disponib pou ou. Tanpri gade dokiman ki nan anvlòp la pou jwenn fason pou kontakte nou.

주목해 주세요: 한국어를 사용하시는 경우, 무료 언어 지원을 받으실 수 있습니다. 연락 방법은 동봉된 문서를 참조하시기 바랍니다.

Attenzione: Se la vostra lingua parlata è l'italiano, potete usufruire di assistenza linguistica gratuita. Per sapere come ottenerla, consultate il documento allegato.

ףליה רארפש עטסיזמוא זיא ,שידיא טדער ריא ביוא : פאזקרעמפיוא ן עז וצ טנעמוקאד ןטגיילעגייב פוצ טרירעפער עטיב רייא ראפ לבעליעווא זנוא טימ ןדניבראפ וצ ריז פינפוא.

নজর দনি: যদ আপন বিংলা ভাষায় কথা বলনে ভাহল আপনার জন্য সহায়ভা উপলভ্য রয়ছে। আমাদরে সঙ্গে যে গোয়া গে করার জন্য অনুগ্রহ কর সংযুক্ত নখ পিডুন।

Uwaga: jeśli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Patrz załączony dokument w celu uzyskania informacji na temat sposobów kontaktu z nami.

Remarque: si vous parlez français, une assistance linguistique gratuite vous est proposée. Consultez le document ci-joint pour savoir comment nous joindre.

ددم تفم کک ناابز ہےکا ہےک پآ وت سکہ ہےتالوب ودرا پآ رگا : ٹون کاں نےم کی باوی کی ہے کہ باعت سد کاں میں ہے ہای کی کانس نم ہے کی باعث کی ہے کہ باعث کی کانس نم ہے کانس کی کی کانس کی کانس کی کی کانس کانس کی کانس کانس

Paunawa: Kung nagsasalita ka ng Tagalog, may maaari kang kuning libreng tulong sa wika. Mangyaring sumangguni sa nakalakip na dokumento para sa mga paraan ng pakikipag-ugnayan sa amin.

Προσοχή: Αν μιλάτε Ελληνικά μπορούμε να σας προσφέρουμε βοήθεια στη γλώσσα σας δωρεάν. Δείτε το έγγραφο που εσωκλείεται για πληροφορίες σχετικά με τους διαθέσιμους τρόπους επικοινωνίας μαζί μας.

Kujdes: Nëse flisni shqip, ju ofrohet ndihmë gjuhësore falas. Drejtojuni dokumentit bashkëlidhur për mënyra se si të na kontaktoni.



Excellus BlueCross BlueShield ExcellusBCBS.com 165 Court Street Rochester, NY 14647 PRSRT STD U.S. POSTAGE PAID ROCHESTER, NY PERMIT NO. 201





LIVE FEARLESS

When was the last time you felt free of fear? Free of worry? It's time to uncover that feeling again.

Fearless is a state of mind—embracing something new, or simply giving it your best shot. It's about facing life with courage and rising to life's challenges.

With the compassion of the cross and the security of the shield, we've supported the power to Live Fearless for 85 years.

Go boldly. It's time to Live Fearless.

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