



# Louisiana



**PRECISION  
BLUE**



FRANCISCAN  
MISSIONARIES  
OF OUR LADY  
HEALTH SYSTEM

INDIVIDUAL QUALIFIED  
HEALTH PLANS

**2024**

SELECT NETWORK PRODUCT DESIGNED FOR THE GREATER BATON ROUGE AND GREATER MONROE/WEST MONROE MARKETS

01MK7088 R04/24

Precision Blue plans are products of HMO Louisiana, Inc., a subsidiary of Blue Cross and Blue Shield of Louisiana. Both companies are independent licensees of the Blue Cross Blue Shield Association.

# BEFORE YOU CONTINUE...

## **Precision Blue is a Select Network product. Members have access to Franciscan Missionaries of Our Lady Health System (FMOLHS), Affinity Health Group and other participating providers.**

Select Network products have become the go-to health insurance solution for many individuals and families. That's because they offer big cost savings and high-quality, coordinated care in your community. Please read this guide and talk with an agent before buying Precision Blue to make sure this is the right health plan for you and your family.



### **Top-Quality Doctors**

Blue Cross and Blue Shield of Louisiana partners with major healthcare systems and providers to give Select Network members access to a full network of top-quality primary care doctors, specialists, hospitals and clinics in your local community.



### **Lower Premiums**

Top-quality primary care doctors coordinate care, allowing members with Select Network plans to have better health outcomes and lower costs.



### **Care Close to You**

Our defined networks of healthcare providers focus on offering care that's close to members' homes and work.



### **Excellent Benefits**

Select Networks offer members in-network and out-of-network benefits and all essential health benefits, including comprehensive major medical and prescription drug benefits. Telehealth, zero dollar drug program and cost transparency services are available to improve member health and experience.



### **Innovative Care Programs**

Select Network members can take part in wellness and care management programs with health coaching, education and hands-on support to help members with chronic conditions or serious illnesses get stronger.

## It is a perfect fit for some, and not for others.

### **Precision Blue may be a good fit if you:**

- Are willing to seek care from high-quality providers in a defined network in exchange for lower premiums.
- Are willing to choose a primary care physician and work with them to get the most value from your plan.
- Are willing to check our provider directory at [www.bcbsla.com/precision-blue](http://www.bcbsla.com/precision-blue) before a doctor visit or hospital stay to find providers in the Precision Blue network.

### **You may want to look at other types of health plans if you:**

- Are willing to pay higher monthly premiums to have a broader network and avoid unexpected out-of-pocket expenses.
- Need to seek care outside of the Precision Blue network.

### **Blue Cross and Blue Shield of Louisiana and HMO Louisiana, Inc., are Qualified Health Plan Issuers on the Health Insurance Marketplace.**

If there is any discrepancy between the information in this brochure and the policy, the policy prevails. Premium will vary with the level of benefits chosen. For complete information, please refer to the policy.

Benefits are based on allowable charges. Allowable charge is defined as the lesser of the billed charge or the amount established or negotiated by Blue Cross and Blue Shield of Louisiana and HMO Louisiana, Inc., as the maximum amount allowed for all provider services covered under the terms of the policy.

NOTICE: HEALTHCARE SERVICES MAY BE PROVIDED TO YOU AT A NETWORK HEALTHCARE FACILITY BY FACILITY-BASED PHYSICIANS WHO ARE NOT IN YOUR HEALTH PLAN. YOU MAY BE RESPONSIBLE FOR PAYMENT OF ALL OR PART OF ANY FEES FOR THOSE OUT-OF-NETWORK SERVICES, IN ADDITION TO APPLICABLE AMOUNTS DUE FOR COPAYMENTS, COINSURANCE, DEDUCTIBLES AND NON-COVERED SERVICES.

SPECIFIC INFORMATION ABOUT IN-NETWORK AND OUT-OF-NETWORK FACILITY-BASED PHYSICIANS CAN BE FOUND AT [WWW.BCBSLA.COM/HBP](http://WWW.BCBSLA.COM/HBP) OR BY CALLING THE CUSTOMER SERVICE PHONE NUMBER ON YOUR ID CARD.

Utilization Management decision-making is based only on appropriateness of care and service and existence of coverage. Practitioners or other individuals are not specifically rewarded for issuing denials of coverage. Financial incentives for Utilization Management decision makers do not encourage decisions that result in underutilization.



## Precision Blue: *Get More, Spend Less!*

Your Select Network plan is designed to save you money. In exchange for these savings, you must be willing to seek care from primary care doctors, specialists and local hospitals in your network. There's no correlation between cost and quality – *a limited number of providers doesn't mean limited services*. Select Network plans offer the same level of care and benefits as other broader network plans, including emergency room services.

### What's special about Precision Blue?

- **Your network of doctors and hospitals is more defined** than other insurance plans. But you still have a full network of primary care doctors, specialists and other healthcare providers in your area.
- **You have a coordinated care team** of healthcare professionals who talk to each other and help you get the right care in the right place.
- **Staying in-network is very important!** As long as you get care within your Precision Blue network, you will always pay less than if you get care outside of the network.
- **In-network tiering offers more value.** Precision Blue members with copayment plans have two in-network tiers of cost sharing for provider visits: Enhanced Tier 1 and Tier 1. Enhanced Tier 1 includes FMOLHS and Affinity Health Group primary care physicians (PCPs) and specialists. For the best value, you will pay the least when you visit PCPs and specialists in Enhanced Tier 1. You will pay more when you visit providers (participating PCPs, specialists and facilities) in Tier 1, and the most when you visit out-of-network providers. For your convenience, providers are identified by tier in our online provider directory. Please search for participating providers at [www.bcbsla.com/precision-blue](http://www.bcbsla.com/precision-blue).

# Your Precision Blue Network

The Precision Blue network offers select doctors and hospitals at a lower price than our traditional PPO plans. By visiting only in-network providers, Precision Blue members receive outstanding, coordinated personal care while keeping healthcare expenses as low as possible.

## Precision Blue Service Areas

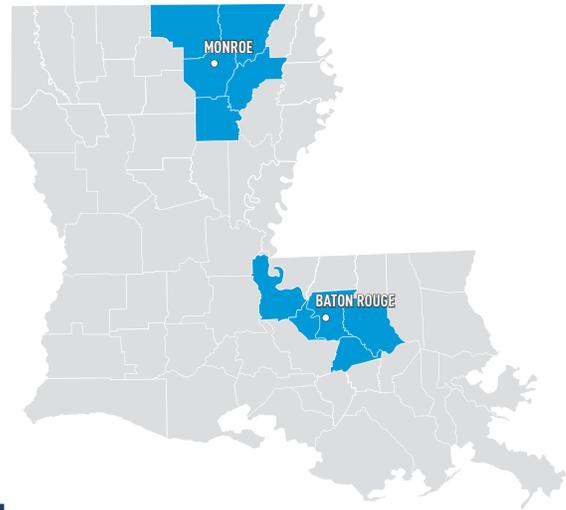
Precision Blue is available in the Greater Baton Rouge and Greater Monroe/West Monroe areas. You must live in one of these parishes to purchase Precision Blue:

### Greater Baton Rouge

Ascension, East Baton Rouge, Livingston, Pointe Coupee or West Baton Rouge

### Greater Monroe/West Monroe

Caldwell, Morehouse, Ouachita, Richland or Union



## Precision Blue Doctors and Hospitals

Precision Blue members have access to Franciscan Missionaries of Our Lady Health System (FMOLHS), Affinity Health Group and other participating providers.

**The Franciscan Missionaries of Our Lady Health System** includes Our Lady of the Lake, its nationally recognized medical center and physicians, and many clinical programs and affiliated facilities. St. Francis Medical Center is also part of the FMOLHS. These premier providers are further supported by their participation within **Health Leaders Network**, the accountable care organization dedicated to improving clinical quality, patient experience and lower costs. By partnering for coordinated and personalized care management, these doctors and hospitals are working together to help each member reach his or her ideal health.



**Affinity Health Group, L.L.C.**, a wholly-owned subsidiary of Vantage Health Plan, Inc., is one of the largest group medical practices with over 30 locations in the Monroe area. The physicians, nurse practitioners and physician assistants of Affinity have combined their resources to provide patients enhanced access to quality healthcare. In addition, Affinity has several clinics staffed with professional and certified medical personnel who provide care from a pediatric level to primary care, and many specialties in between.



While the Precision Blue product is offered only in the Baton Rouge and Monroe areas, Precision Blue members may also access Precision Blue network providers located in other parishes.

## Precision Blue Network Providers\*

Precision Blue offers the Greater Baton Rouge and Greater Monroe/West Monroe areas one of the most comprehensive and clinically advanced network of doctors, hospitals and care services. The list below includes some of the key participating providers in Precision Blue, but there are more. The best way to make sure a provider is in-network is to search the online provider directory at [www.bcbsla.com/precision-blue](http://www.bcbsla.com/precision-blue).

### Greater Baton Rouge

- Our Lady of the Lake Regional Medical Center
- Our Lady of the Lake Children's Hospital
- Our Lady of the Lake Ascension
- Our Lady of the Lake Livingston
- Our Lady of the Lake Physician Group
- Mary Bird Perkins Center
- Lake After Hours and Urgent Care
- Lake Imaging Center
- Lake Surgery Center
- Baton Rouge Physical Therapy-Lake
- Surgical Specialty Center of Baton Rouge
- Pinnacle Home Health
- Pinnacle Hospice
- The Baton Rouge Clinic
- Louisiana Women's Healthcare
- Woman's Hospital



### Greater Monroe/West Monroe

- Affinity Health Group
- St. Francis Medical Center
- Monroe Surgical Center

*\*Always check the online provider directory for the most up-to-date providers in each network. Providers are subject to change.*





## Understand Your Plan

Precision Blue offers care from select doctors and hospitals at a lower premium price than our traditional PPO plans. When you choose care within the plan's network, your cost sharing is lower than if you select out-of-network care. Precision Blue offers two tiers of in-network benefits. Here's how it works:

- **Enhanced Tier 1** – Enhanced Tier 1 includes FMOLHS and Affinity Health Group primary care physicians (PCPs) and specialists. For the best value, members on a copayment plan will pay the least when you visit PCPs and specialists in Enhanced Tier 1.
- **Tier 1** – Tier 1 includes FMOLHS and Monroe Surgical Center facilities, as well as in-network participating PCPs and specialists that are not in Enhanced Tier 1. For Precision Blue members on a copayment plan, they will pay more to see a PCP or specialist in Tier 1 than Enhanced Tier 1.

Our online provider directory makes it easy to identify Enhanced Tier 1 and Tier 1 providers. Please visit [www.bcbsla.com/precision-blue](http://www.bcbsla.com/precision-blue).

## Selecting a Primary Care Physician

Precision Blue is designed with an innovative, coordinated care model at its core. For this reason, you must pick a primary care physician (PCP) in your network to handle most of your medical needs when sick or injured. This is a doctor practicing in General Practice, Family Practice, Internal Medicine or Geriatrics for adults, or Pediatrics for children. You may also select a Nurse Practitioner (NP) or Physician Assistant (PA) as your PCP if he or she is set up in our system as a network primary care physician.

You must choose a PCP. If you do not choose a PCP, one will be chosen for you. You can change your PCP at any time by logging onto your account at [www.bcbsla.com/login](http://www.bcbsla.com/login) or by calling the Customer Service number on the back of your ID card.

## What Is Coordinated Care?

One of the main benefits of a Select Network plan is the coordinated care you'll receive. This means that all of your healthcare professionals will be working as a team to give you the right care, at the right time, in the right places to keep you healthy.

When you use in-network Precision Blue providers, your doctors and hospitals work together on your behalf to organize your care. This can result in better health outcomes and lower costs.

Coordinated care works best when you work with your doctors as an equal partner. With Precision Blue, you will get the best care when:

- You choose a primary care physician (PCP) in the Precision Blue network whom you will see when you're sick or injured.
- You take a Health Assessment, which will help your care team get a full picture of your overall health.
- You are proactive about your health by:
  - Seeing your in-network PCP regularly
  - Following your care plans and getting routine exams, checkups and tests
  - Taking medicines as they are prescribed to you
  - Taking advantage of the preventive and wellness services included in your plan at no additional cost to you
  - Letting your PCP know when you see other doctors



# Quality Blue Program

As a Blue Cross and Blue Shield of Louisiana customer, your health is important to us. That's why we are working with healthcare providers around the state through our Quality Blue (QB) program – together, we can help you have a better, easier healthcare experience. Our Quality Blue program is part of your health benefits. If you are seeing a Quality Blue provider, you are already included in the program.

## How does the Quality Blue program work?

Through our Quality Blue program, Blue Cross makes your health claims information available in a secure manner to your Quality Blue provider. This helps them learn more about your health history and anything that's happened since your last visit. This is to make sure you get what you need to stay on top of your health.

## What do I get out of seeing a Quality Blue provider?

- **Keeping up with care**

Seeing your Quality Blue provider can help you stay healthy and catch any problems early, when they are easier to treat. Everyone should have at least one checkup a year. If you have a long-term health condition, your provider may recommend you have visits more often.

- **Reminders**

Since Quality Blue providers have more information about your health history, they can send notices about important screenings, tests, or shots you might need.

- **Lower copays**

If you are on a Blue Cross health plan that has copayments for primary care office visits, you may get lower copayments for office visits with a Quality Blue provider.

## Is my doctor in the Quality Blue program?

Our Quality Blue program currently includes General Practice, Family Practice, Internal Medicine, Pediatrics, and Geriatrics providers. You can ask your provider if they are in the Quality Blue program or look them up in our directory at [www.bcbsla.com/precision-blue](http://www.bcbsla.com/precision-blue). Quality Blue providers have an indicator as shown below:

**QUALITY BLUE PROVIDER**

Check out [www.bcbsla.com/QualityBlue](http://www.bcbsla.com/QualityBlue) to learn more about how this program helps you. If you have questions about how Blue Cross may share your claims information with your provider's office, please call the Blue Cross Information Governance Office at (225) 298-1751.

# Your Cost Share

These are the terms you need to know to help you understand your plan.

- **Premium**

A premium is the monthly payment you have to pay for your plan.

- **Copayment**

If your plan has a copayment, or “copay,” this means that you pay a set dollar amount, or flat fee, for some kinds of care, such as at your doctor’s office or pharmacy. Your copayment will be a lower amount for a primary care doctor and higher for specialists.

- **Deductible**

If you choose a plan with a deductible, this is the amount you must pay up front before your insurance pays for your care. If your plan also has copayments, these copays will not count toward your deductible. Your plan may have an in-network deductible and a separate out-of-network deductible.

- **Coinsurance**

Once you’ve paid your deductible, you’ll pay a set percentage, or coinsurance, for your care. You will pay the lowest coinsurance amount when you stay in-network for care.

- **Maximum Out-of-Pocket**

What you pay toward your medical and pharmacy deductibles, copayments and coinsurance applies to your maximum out-of-pocket. Once you’ve reached your maximum out-of-pocket, your insurance will pay 100% of the cost of covered care for the remainder of the calendar year. A separate out-of-pocket-maximum will apply for services you receive out of your network.

- **Coordination of Benefits**

Dual health coverage is becoming more common because of working couples with dual incomes, working Medicare beneficiaries and the extension of dependent coverage to children up to 26. Blue Cross and Blue Shield of Louisiana has guidelines to determine which plan will pay primary and which plan will pay secondary. These rules are outlined in the “coordination of benefits” provisions in your contract, the document that explains your benefits and how they are determined.

# What All Individual Qualified Health Plans Cover

All individual Blue Cross qualified health insurance plans meet the rules set by the healthcare reform laws. Any plan you buy will offer key benefits and services, including:

## Essential Health Benefits

- **Office visits**  
A visit to your doctor's office.
- **Prescription drugs**  
Drugs prescribed by a doctor to treat an acute illness, like an infection, or an ongoing condition, like high blood pressure.
- **Preventive and wellness services and chronic disease management**  
These services include routine physicals, screenings and immunizations. Chronic disease management is an integrated approach to manage an ongoing condition, like asthma or diabetes.
- **Hospitalization**  
Care you receive as a patient in a hospital.
- **Emergency services**  
Care for conditions which, if not immediately treated, could lead to serious disability or death.
- **Lab tests, blood work, X-rays**  
Testing blood, tissues, etc. from a patient to help a doctor diagnose a medical condition and monitor the effectiveness of treatment.
- **Maternity and newborn care**  
Care provided to women during pregnancy and during and after labor; care for newly-born children.
- **Mental healthcare and substance use disorder services, including behavioral health treatment**  
Care to evaluate, diagnose and treat mental health and substance use disorder issues.
- **Pediatric dental and vision services**  
All plans include benefits for annual pediatric eye exams, glasses, dental exams, cleanings, fluoride treatment, fillings and oral surgery.
- **Rehabilitation services and devices**  
Services and devices to help people with injuries, disabilities or chronic conditions gain or recover mental and physical skills.

*Certain limitations and exclusions apply to Essential Health Benefits.*

## Preventive and Wellness Benefits

Many preventive and wellness services are covered at 100% when you go to a provider in your network. These covered services include annual exams, colonoscopies, mammograms and more. See [www.bcbsla.com/preventive](http://www.bcbsla.com/preventive) for a full list of services that are covered.

## Care Management

Members become STRONGER THAN EVER with our Care Management programs working for them. We offer care management programs with health coaching, education and hands-on support to help members with chronic conditions or serious illnesses. With a team of clinical professionals, including doctors, nurses, dietitians, pharmacists and social health coaches, we share personalized information to encourage members on their journey to optimal health. If you have diabetes, heart disease, other chronic conditions, traumatic injuries or serious illnesses, these programs help guide you through the healthcare system and get the services you need in a timely manner. Members do not pay anything to work with a health coach. Visit [www.bcbsla.com/stronger](http://www.bcbsla.com/stronger) to learn more.

## Telehealth for Convenient, Affordable Care

### What is telehealth?

Telehealth, also called virtual care, is an easy and convenient way to be treated for minor illnesses or to access behavioral health services and other forms of care through an online connection. For those with telehealth benefits, virtual care is a great way to access and stay connected with a network provider. Some providers volunteer to be recognized and searchable in the online Blue Cross and Blue Shield of Louisiana provider directory as providers of telehealth services. We recommend members reach out directly to their network provider for details on how to connect using telehealth. Blue Cross members can call the Customer Service number on their ID card to learn about their telehealth benefits.

If your regular provider does not offer telehealth options or is not available, Blue Cross and Blue Shield of Louisiana offers members access to BlueCare, our online virtual care platform with virtual medical care 24/7 and scheduled behavioral health appointments.



## **BlueCare:** *Get Care from Anywhere!*

Blue Cross members and any dependent who are covered on their plans can access online medical and behavioral health visits. All BlueCare providers are U.S.-trained, board-certified.

### **Medical Visits:**

- BlueCare costs less than ER and urgent care centers.
- BlueCare lets you see a doctor online, 24/7, to treat non-emergency, common conditions like fever, colds and cough, stomach bugs or pink eye.

### **Behavioral Health Visits:**

- Online appointments for behavioral health needs are available with BlueCare. Simply log in and schedule a visit with a psychology or psychiatry provider.
- BlueCare behavioral health appointments can be a good service for members who may be experiencing depression, grief, stress or anxiety, who are dealing with life transitions... and more.

Prescription drugs may be prescribed if needed. Prescription availability is defined by physician judgment; certain types of medication may not be prescribed. Before your BlueCare visit, you'll see what it will cost. This depends on your plan type and benefits. You can use any major credit card and even HSA or FSA cards to pay for BlueCare. Your card will not be charged until your visit is over.

To sign up, download the free BlueCare app or go to **[www.BlueCareLA.com](http://www.BlueCareLA.com)**. Have your Blue Cross ID card number handy.



*BlueCare is powered by Amwell, a vendor that provides the BlueCare telehealth platform for Blue Cross and Blue Shield of Louisiana and its subsidiaries.*



### **Blue365®:** *Healthy Discounts and Deals*

Blue365® offers you discounts on health and wellness resources, 365 days a year. Blue Cross and HMO members enjoy special discounts on many services, such as:

- Fitness memberships (in-person and virtual) and workout gear
- Wearable devices
- Meal delivery and nutrition deals
- Eye care
- Athletic footwear
- Hearing aids

Register for your free online account at [www.blue365deals.com/BCBSLA](http://www.blue365deals.com/BCBSLA) to access these exclusive discounts!

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## FREE Identity Protection Services

The Cross and Shield is here to protect you in good times and in challenging times. That's why we offer free identity protection services, in partnership with Experian, to all of our eligible customers. And the identity protection applies to all parts of life, not just healthcare.

- **Complete Identity Repair and Restoration**

If you are a victim of identity theft, an investigator will act as your guide and advocate until the issue is resolved and your identity is restored. This includes contacting creditors and other institutions involved.

- **Fraud Alerts with Credit Monitoring – enrollment required**

This service offers additional layers of protection, including credit monitoring, \$1 million identity theft insurance, an annual credit score and credit report, and ChildScan services for minors. You can also renew and remove fraud alerts on your credit file to help protect you from credit fraud.

Learn more at [www.bcbsla.com/idprotection](http://www.bcbsla.com/idprotection).

## The BlueCard® Program

Your healthcare benefits travel with you wherever you go – across the country and around the world. BlueCard® is a national program that allows you to receive healthcare services while traveling or living in another Blue Plan's service area. The program links participating healthcare providers with the independent Blue Plans across the country and in nearly 200 countries and territories worldwide through a single electronic network.

- With Select Network plans, unless it is emergency care, care obtained outside your Louisiana HMO network will be paid at the out-of-network benefit level.





## Also Available

- **Blue Dental for Individuals and Families**

Oral health is about more than a good smile. Having regular dental exams can help find dental problems and other health conditions in the body like diabetes, heart disease, osteoporosis and cancer. Dental providers in the Advantage Plus Network\* provide covered services at significant savings to you. Contact your agent or visit [www.bcbsla.com/shop-plans/dental](http://www.bcbsla.com/shop-plans/dental) for more information.

*\*Advantage Plus Network is administered by United Concordia Companies, Inc. United Concordia is an independent company that administers dental benefits on behalf of Blue Cross and Blue Shield of Louisiana and HMO Louisiana, Inc..*

- **GeoBlue®: Products for the Unique Needs of International Travelers**

Do you plan to travel, live or work outside the U.S.? Make sure you are protected with an international health plan that's backed by Blue Cross Blue Shield, a name you know and trust to provide access to quality care. GeoBlue provides the comprehensive coverage you need if you get sick or injured outside the U.S., with plans for short-term international vacation travel and living and working abroad. To view all of the GeoBlue plans, visit [www.bcbsla.com/geoblue](http://www.bcbsla.com/geoblue).

*GeoBlue is the trade name of Worldwide Insurance Services, LLC (Worldwide Services Insurance Agency, LLC in California and New York), an independent licensee of the Blue Cross Blue Shield Association. GeoBlue is the administrator of coverage provided under insurance policies issued by 4 Ever Life International Limited, Bermuda, an independent licensee of the Blue Cross Blue Shield Association.*

# Your Precision Blue Benefits

Know before you go: Visit [www.bcbsla.com/precision-blue](http://www.bcbsla.com/precision-blue) or use the BCBSLA mobile app to search for participating providers in your network.

## When you need care, consider your options and costs:

- **Your primary care doctor or specialist** \$\$\$\$

If you are sick or injured, but it's not a life-threatening emergency, call your doctor and set up an office visit. Make sure that your primary care doctor is in your network, as well as any specialists you may see.

- **BlueCare: 24/7 online doctor** \$\$\$\$

With BlueCare telehealth, you can see a doctor online 24/7 for non-emergency, minor illnesses. It's easier, faster and cheaper than ER or urgent care centers. Visit [www.BlueCareLA.com](http://www.BlueCareLA.com) to enroll and learn more.

- **Urgent care center** \$\$\$\$

If you have an illness or injury that you need to have looked at quickly, but it's not an emergency, urgent care centers have doctors who can treat you. Most urgent care centers have night and weekend hours, and the doctors there can often do X-rays, lab work or stitches. The wait time will be less than in an emergency room, and you can save money. Call ahead to make sure the urgent care clinic is in your network.

- **Emergency room** \$\$\$\$

If you have a life-threatening or serious illness or injury, call 911 or go to the nearest emergency room. When it's a true emergency, your insurance will pay for your care no matter which hospital you choose. However, once you're stabilized, we may ask you to move to a hospital in your network.

Look for these signs to tell whether it's an emergency:

- Fainting or unconsciousness
- Breathing trouble or choking
- Nonstop bleeding
- Coughing or vomiting blood
- Chest pain
- Sudden or severe pain anywhere
- Sudden dizziness

- **Planned stays in the hospital**

**If you go to an in-network hospital:**

As long as you're staying at an in-network hospital and your doctor receives an authorization from us before your stay, then you will get in-network benefits.

**If you go to another hospital that is outside of the network:**

If the hospital is outside of your Precision Blue network, you will need prior authorization to determine whether your stay is medically necessary. You will pay higher out-of-network costs. You may also be balance billed.

- **Lab services**

Precision Blue has a select laboratory network. If you go to a lab in the network, you will pay less than you would for tests done by a lab outside of the network. If you have tests done outside of the network, you may have to pay higher costs, up to the billed charge.

- **Prior authorization**

Some kinds of care, including inpatient and outpatient services and supplies, require a prior authorization from us, which will determine the medical necessity of the service or supply. Your in-network provider will take care of the authorization for you.

For a list of services and supplies requiring prior authorization, please refer to your schedule of benefits.



# Your Prescription Drug Coverage

Prescription drug benefits are included in all plans. A mail order program is also available. Drug benefits are managed by Express Scripts.\* To get the most value from your drug benefits, you should take a drug that is covered under your plan.

## Covered Drug List

Your plan has a covered drug list, or formulary, that includes thousands of generic and brand drugs, but not every drug is covered. How much you pay for the drugs on the list depends on the plan you choose and the drug you buy. If you fill a drug that is not on the covered drug list, you could have to pay the full cost of the drug.

### Two things a covered drug list can tell you:

1. If there are other drugs you can take for your health problem that will cost you less.
2. If there are any rules that you must follow before a drug may be covered.

## Find out if your drugs are covered before you fill

You and your doctor can check to see if drugs you take are covered at [www.bcbsla.com/pharmacy](http://www.bcbsla.com/pharmacy). If your doctor orders a new drug for you, ask if the drug is on your covered drug list before you go to the pharmacy.

*\*Express Scripts is an independent company that provides pharmacy benefit management services to Blue Cross and Blue Shield of Louisiana, Inc., and HMO Louisiana, Inc.*

## Zero Dollar Drug Copay Program

Our \$0 Drug Copay Program offers \$0 copay for certain drugs used to treat certain chronic conditions. Members do not have to meet a deductible before getting program drugs for \$0. Drugs in this program are regularly recommended to treat asthma, chronic obstructive pulmonary disease (COPD), coronary heart disease, diabetes, heart failure and other common chronic conditions. The \$0 Drug Copay Program is available for copay-based pharmacy benefits. The program is not available for coinsurance-only pharmacy benefits. Go to [www.bcbsla.com/covereddrugs](http://www.bcbsla.com/covereddrugs) for a list of drugs in the program.



**Pay close attention to what your plan has.  
Is it a 2-tier or a 3-tier pharmacy plan?**

This means that your plan has either two cost tiers or three cost tiers for drugs. Drugs in the lower tiers cost less than drugs in the higher tiers. To save the most money, start with a drug in Tier 1. If that one doesn't work, you can talk to your doctor about a higher cost drug in a higher tier, and so on.

<b>2-Tier Pharmacy Plans</b>		
Coinsurance will apply once your deductible is met.		
<b>Tier 1</b>	<b>\$</b>	Generic Drugs
<b>Tier 2</b>	<b>\$\$</b>	Brand Drugs

<b>3-Tier Pharmacy Plans</b>		
A separate drug deductible may apply, then copayments or coinsurance.		
<b>Tier 1</b>	<b>\$</b>	Primarily generic drugs, although some brand-name drugs may fall into this category
<b>Tier 2</b>	<b>\$\$</b>	Includes traditional and specialty brands and generics and biosimilars
<b>Tier 3</b>	<b>\$\$\$</b>	Includes traditional and specialty brands and generics and biosimilars and covered compound drugs

# Compare Select Network Plans to Traditional PPO Plans

Trying to decide which plan is right for you? The chart below can help you compare networks, coverage and benefits, and your cost.

	Traditional PPO	Precision Blue	
<b>What's the same?</b>	<ul style="list-style-type: none"> <li>• High-quality providers across a wide range of specialties</li> <li>• No referrals required</li> <li>• Preventive visits covered at 100%</li> <li>• Out-of-network coverage</li> <li>• ER services for life-threatening conditions covered as in-network</li> <li>• Wellness and care management programs</li> <li>• Essential health benefits</li> <li>• Blue365 health discounts and deals</li> <li>• Identity protection services</li> </ul>		
<b>What's different?</b>	<b>Premium</b>	\$\$\$	\$\$
	<b>Network**</b>	Broad, national network	Local, market-defined network
	<b>Primary Care Physician (PCP) Selection</b>	Encouraged, but not required	Yes PCP coordinates care to improve health and lower healthcare costs
	<b>Out-of-state coverage</b>	Covered as in-network (through BlueCard worldwide network)	In-network for emergencies, Out-of-network for non-emergencies, Add-on: Away From Home Care***

\*Each benefit's cost share varies by plan. Talk to your agent or see your contract booklet for full details.

\*\*Search for participating providers at [www.bcbsla.com/FindCare](http://www.bcbsla.com/FindCare).

\*\*\*Away From Home Care availability is subject to location. Contact your agent for more information.

# PLAN COMPARISONS\*

METAL LEVEL		GOLD	
		Deductible: \$1,000	
Plan name		Precision Blue Copay 80/60 \$1,000 (BR) (M)	
Deductible options for benefit period in-network	Single	\$1,000	
	Family	\$3,000	
Max out-of-pocket including deductible, copayments & coinsurance	Single	\$9,450	
	Family	\$18,900	
Coinsurance in-network	We pay	80%	
	You pay	20%	
Coinsurance out-of-network	We pay	60%	
	You pay	40%	
If you go to a doctor's office	Primary	Enhanced Tier 1: \$10 per visit Tier 1: \$25 per visit	
	Specialist	Enhanced Tier 1: \$50 per visit Tier 1: \$65 per visit	
Urgent care	You pay	\$65 per visit	
If you go to an outpatient ambulatory surgical center		Deductible then 20% coinsurance	
If you go to an emergency room		Deductible then 20% coinsurance	
If you are admitted as an inpatient to a hospital		Deductible then 20% coinsurance	
Drug deductible per member		\$500 separate drug deductible	
Prescription drugs per fill	You pay	Drug Deductible then: <b>Tier 1</b> Generic Drug: \$7 copay <b>Tier 2</b> Preferred Brand drug: 20% coinsurance (\$250 max) <b>Tier 3</b> Non-preferred brand drug: 30% coinsurance (\$250 max)	
Preventive care services		Plan pays 100% in-network	
Pregnancy care office visit		<b>Enhanced Tier 1:</b> \$50 per pregnancy <b>Tier 1:</b> \$65 per pregnancy	
Physical, occupational and speech therapy rehabilitation services		\$40 per visit	
Mental health & substance use disorder facility	Office	\$10 per visit	
	Inpatient	Deductible then 20% coinsurance	
	Outpatient	Deductible then 20% coinsurance	
Pediatric dental & vision		You will pay \$0 for diagnostic & preventive dental and routine eye exams & hardware when received from a network provider	

*Certain restrictions apply for Enhanced Tier 1.*

*\*This is only a partial list of benefits and services covered. Separate in- and out-of-network deductibles and maximum out-of-pocket will apply. Please see your contract for a complete list of covered services, benefits, limitations and exclusions, as well as how a member or ordering practitioner on behalf of a member may request a review for an override of coverage exclusions.*

<b>SILVER</b>	<b>SILVER</b> <i>(Sold Off Exchange Only)</i>	<b>SILVER</b>	<b>BRONZE</b>
<b>Deductible: \$2,900</b>	<b>Deductible: \$3,200</b>	<b>Deductible: \$3,400</b>	<b>Deductible: \$4,550</b>
Precision Blue Copay 70/50 \$2,900 (M)	Precision Blue Copay 70/50 \$3,200 (BR) (M)	Precision Blue 80/60 \$3,400 (BR) (M)	Precision Blue 70/50 \$4,550 (BR) (M)
\$2,900	\$3,200	\$3,400	\$4,550
\$8,700	\$9,600	\$10,200	\$13,650
\$9,450	\$9,450	\$7,900	\$9,450
\$18,900	\$18,900	\$15,800	\$18,900
70%	70%	80%	70%
30%	30%	20%	30%
50%	50%	60%	50%
50%	50%	40%	50%
Enhanced Tier 1: \$15 per visit Tier 1: \$30 per visit	Enhanced Tier 1: \$15 per visit Tier 1: \$30 per visit	Deductible then 20% coinsurance Deductible then 20% coinsurance	Deductible then 30% coinsurance Deductible then 30% coinsurance
Enhanced Tier 1: \$55 per visit Tier 1: \$70 per visit	Enhanced Tier 1: \$55 per visit Tier 1: \$70 per visit	Deductible then 20% coinsurance Deductible then 20% coinsurance	Deductible then 30% coinsurance Deductible then 30% coinsurance
\$70 per visit	\$70 per visit	Deductible then 20% coinsurance	Deductible then 30% coinsurance
Deductible then 30% coinsurance	Deductible then 30% coinsurance	Deductible then 20% coinsurance	Deductible then 30% coinsurance
Deductible then 30% coinsurance	Deductible then 30% coinsurance	Deductible then 20% coinsurance	Deductible then 30% coinsurance
Deductible then 30% coinsurance	Deductible then 30% coinsurance	Deductible then 20% coinsurance	Deductible then 30% coinsurance
No separate drug deductible; medical deductible applies			
<b>Tier 1:</b> Medical deductible then 30% Generic coinsurance <b>Tier 2:</b> Medical deductible then 50% Brand coinsurance	<b>Tier 1:</b> Medical deductible then 30% Generic coinsurance <b>Tier 2:</b> Medical deductible then 50% Brand coinsurance	<b>Tier 1:</b> Medical deductible then 20% Generic coinsurance <b>Tier 2:</b> Medical deductible then 40% Brand coinsurance	<b>Tier 1:</b> Generic Drug: \$20 copay <b>Tier 2:</b> Preferred Brand Drug: Medical deductible then 50% coinsurance <b>Tier 3:</b> Non-preferred Brand Drug: Medical deductible then 50% coinsurance
Plan pays 100% in-network			
<b>Enhanced Tier 1:</b> \$55 per pregnancy <b>Tier 1:</b> \$70 per pregnancy	<b>Enhanced Tier 1:</b> \$55 per pregnancy <b>Tier 1:</b> \$70 per pregnancy	Deductible then 20% coinsurance	Deductible then 30% coinsurance
\$45 per visit	\$45 per visit	Deductible then 20% coinsurance	Deductible then 30% coinsurance
\$15 per visit	\$15 per visit	Deductible then 20% coinsurance	Deductible then 30% coinsurance
Deductible then 30% coinsurance	Deductible then 30% coinsurance	Deductible then 20% coinsurance	Deductible then 30% coinsurance
Deductible then 30% coinsurance	Deductible then 30% coinsurance	Deductible then 20% coinsurance	Deductible then 30% coinsurance

You will pay \$0 for diagnostic & preventive dental and routine eye exams & hardware when received from a network provider

*(BR)= plan sold in Baton Rouge market (M) = plan sold in Monroe market*

*NOTE: If there is any discrepancy between the information in this brochure and the contract, the contract prevails.*

## Online Convenience

Login or register for your online account at [www.bcbsla.com/login](http://www.bcbsla.com/login), where you can:



- **Manage Your Account**  
View an ID card, view statements and claims, access forms, look up your plan benefits and cost share, find a provider and more – all from a secure, password-protected online account.
- **Take Your Health Assessment**  
Learn your risks, get access to a personalized action plan and get set for a lifetime of good health.
- **Get Wellness Discounts**  
Find Blue365® discounts on gym memberships and virtual fitness programs, workout clothes, nutrition deals, Lasik surgery and more.
- **Choose to Go Paperless**  
Our Paperless program allows you to access your plan-related information conveniently through your online account. Any time a document that is part of the Paperless program becomes available to you, we will send you an email notification.
- **Read About Our Language Access Services**  
You can request this brochure in a language other than English. Check the bottom of any page at [www.bcbsla.com](http://www.bcbsla.com) and click the language of your choice for this and other services. You can also call the Customer Service number on your ID card. If you are hearing impaired call **1-800-711-5519** (TTY 711).

## Mobile Is the Way to Go

Download our BCBSLA app on your iPhone or Android and have your healthcare information at your fingertips!



- **Find a Doctor**  
Find urgent care, locate a doctor or hospital, get directions and save locations to any doctor or hospital.
- **View Your Claims and Digital ID Card**  
See all of your important health information, like claims, costs, balances, benefits and medical ID cards from your mobile device.
- **Contact Us**  
You can get maps and directions to any of our local offices or get phone numbers to talk to a Customer Service representative.

# We're Here to Help

With the Cross and Shield, you'll have the support and protection you deserve.



## Your Agent

Get personal assistance from your agent, who can answer your questions, help you choose the plan that's right for you and guide you through the enrollment process – at no cost to you! Don't have an agent? Give us a call and we can connect you with someone to help.



## Online

Your online account lets you manage your account, pay bills, order ID cards, review your benefits and see claims status. It also gives you exclusive access to wellness tools and discounts. Go to **[www.bcbsla.com/login](http://www.bcbsla.com/login)** today to register for your account. For answers to your questions online, visit **[www.bcbsla.com/contactus](http://www.bcbsla.com/contactus)** to submit a secure online inquiry form.



## By Phone

Help is just a phone call away. Call Customer Service toll-free at **800-392-4087** from 8 a.m. to 8 p.m. CST, Monday through Friday.

If you have questions about how Blue Cross will protect and may use or disclose your confidential/protected health information and individually identifiable health information, please visit **[www.bcbsla.com/privacy](http://www.bcbsla.com/privacy)**.





Blue Cross and Blue Shield of Louisiana  
HMO Louisiana  
Southern National Life

### **Nondiscrimination Notice**

Discrimination is Against the Law

Blue Cross and Blue Shield of Louisiana and its subsidiaries, HMO Louisiana, Inc. and Southern National Life Insurance Company, Inc., does not exclude people or treat them differently on the basis of race, color, national origin, age, disability or sex in its health programs or activities.

Blue Cross and Blue Shield of Louisiana and its subsidiaries:

- Provide free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (audio, accessible electronic formats)
- Provide 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, you can call the Customer Service number on the back of your ID card or email **MeaningfulAccessLanguageTranslation@bcbsla.com**. If you are hearing impaired call 1-800-711-5519 (TTY 711).

If you believe that Blue Cross, one of its subsidiaries or your employer-insured 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 have the right to take the following steps;

**1. If you are fully insured through Blue Cross, file a grievance with Blue Cross by mail, fax, or email.**

Section 1557 Coordinator  
P. O. Box 98012  
Baton Rouge, LA 70898-9012  
225-298-7238 or 1-800-711-5519 (TTY 711)  
Fax: 225-298-7240  
Email: Section1557Coordinator@bcbsla.com

**2. If your employer owns your health plan and Blue Cross administers the plan, contact your employer or your company's Human Resources Department. To determine if your plan is fully insured by Blue Cross or owned by your employer, go to [www.bcbsla.com/checkmyplan](http://www.bcbsla.com/checkmyplan).**

Whether Blue Cross or your employer owns your plan, you can file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights 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, 800-537-7697 (TDD)

Or

Electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

# NOTICE

Free language services are available. If needed, please call the Customer Service number on the back of your ID card. Hearing-impaired customers call 1-800-711-5519 (TTY 711).

Tiene a su disposición servicios lingüísticos gratuitos. De necesitarlos, por favor, llame al número del Servicio de Atención al Cliente que aparece en el reverso de su tarjeta de identificación. Clientes con dificultades auditivas, llamen al 1-800-711-5519 (TTY 711).

Des services linguistiques gratuits sont disponibles. Si nécessaire, veuillez appeler le numéro du Service clientèle figurant au verso de votre carte d'identification. Si vous souffrez d'une déficience auditive, veuillez appeler le 1-800-711-5519 (TTY 711).

Có dịch vụ thông dịch miễn phí. Nếu cần, xin vui lòng gọi cho Phục Vụ Khách Hàng theo số ở mặt sau thẻ ID của quý vị. Khách hàng nào bị suy giảm thính lực hãy gọi số 1-800-711-5519 (TTY 711).

我们为您提供免费的语言服务。如有需要，请致电您 ID 卡背面的客户服务号码。听障客户请拨打 1-800-711-5519 (TTY 711)。

الخدمات اللغوية متاحة مجاناً. يرجى، إذا اقتضى الأمر، الاتصال برقم خدمة العملاء المدون على ظهر بطاقة التعريف الخاصة بك. إذا كنت تعاني من إعاقة في السمع، فيرجى الاتصال بالرقم 1-800-711-5519 (TTY 711).

Magagamit ang mga libreng serbisyo sa wika. Kung kinakailangan, pakitawagan ang numero ng Customer Service sa likod ng iyong ID kard. Para sa mga may kapansanan sa pandinig tumawag sa 1-800-711-5519 (TTY 711).

무료 언어 서비스를 이용하실 수 있습니다. 필요한 경우 귀하의 ID 카드 뒤에 기재되어 있는 고객 서비스 번호로 연락하시기 바랍니다. 청각 장애가 있는 분은 1-800-711-5519 (TTY 711)로 연락하십시오.

Oferecemos serviços linguísticos grátis. Caso necessário, ligue para o número de Atendimento ao Cliente indicado no verso de seu cartão de identificação. Caso tenha uma deficiência auditiva, ligue para 1-800-711-5519 (TTY 711).

ພວກເຮົາມີບໍລິການແປພາສາໃຫ້ທ່ານພຣີ. ຖ້າທ່ານຕ້ອງການບໍລິການນັ້ນ, ກະລຸນາໂທຫາພະແນກບໍລິການລູກຄ້າຕາມເບີໂທທີ່ຢູ່ທາງຫຼັງຂອງບັດປະຈຳຕົວຂອງທ່ານ. ຖ້າທ່ານຫຼຸບໍ່ດີ, ຂໍໃຫ້ໂທເບີ 1-800-711-5519 (TTY 711).

無料の言語サービスをご利用頂けます。あなたのIDカードの裏面に記載されているサポートセンターの電話番号までご連絡ください。聴覚障害がある場合は、1-800-711-5519 (TTY 711)までご連絡ください。

زبان سے متعلق مفت خدمات دستیاب ہیں۔ اگر ضرورت ہو تو، براہ کرم اپنے آئی ڈی کارڈ کی پشت پر موجود کسٹمر سروس نمبر پر کال کریں۔ سمعی نقص والے کسٹمرز 1-800-711-5519 (TTY 711) پر کال کریں۔

Kostenlose Sprachdienste stehen zur Verfügung. Falls Sie diese benötigen, rufen Sie bitte die Kundendienstnummer auf der Rückseite Ihrer ID-Karte an. Hörbehinderte Kunden rufen bitte unter der Nummer 1-800-711-5519 (TTY 711) an.

خدمات رایگان زبان در دسترس است. در صورت نیاز، لطفاً با شماره خدمات مشتریان که در پشت کارت شناسایی تان درج شده است تماس بگیرید. مشتریانانی که مشکل شنوایی دارند با شماره 1-800-711-5519 (TTY 711) تماس بگیرند.

Предлагаются бесплатные переводческие услуги. При необходимости, пожалуйста, позвоните по номеру Отдела обслуживания клиентов, указанному на обратной стороне Вашей идентификационной карты. Клиенты с нарушениями слуха могут позвонить по номеру 1-800-711-5519 (Телефон с текстовым выходом: 711).

มีบริการด้านภาษาให้ใช้ได้ฟรี หากต้องการ โปรดโทรศัพท์ติดต่อฝ่ายการบริการลูกค้าตามหมายเลขที่อยู่ด้านหลังบัตรประจำตัวประชาชนของท่าน สำหรับลูกค้าที่มีปัญหาทางการได้ยิน โปรดโทรศัพท์ไปที่หมายเลข 1-800-711-5519 (TTY 711)



The Right **Card.** The Right **Care.**

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Customer Service

**800-392-4087**  
**help@bcbsla.com**

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**BATON ROUGE**

225-295-2527  
5525 Reitz Avenue  
Baton Rouge, LA 70809

**MONROE**

318-323-1479  
122 St. John St.  
Monroe, LA 71201

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**www.bcbsla.com**