



2023 BlueCare Plus Choice (HMO D-SNP)[™] Dual Eligible Special Needs Plan

Welcome! We're glad you're with us.



Wouldn't it be nice to have someone who knows you? Someone to help you talk to your doctors? Someone who could help you with questions about your health and tell you how your medications work together? Someone to help you with things your doctors said you need to be doing?

We're your care team, and that's exactly what we do.

The chart on the right is a reminder of how your CHOICES services work. Then, we'll go over your benefits and how to get started with BlueCare Plus Choice.



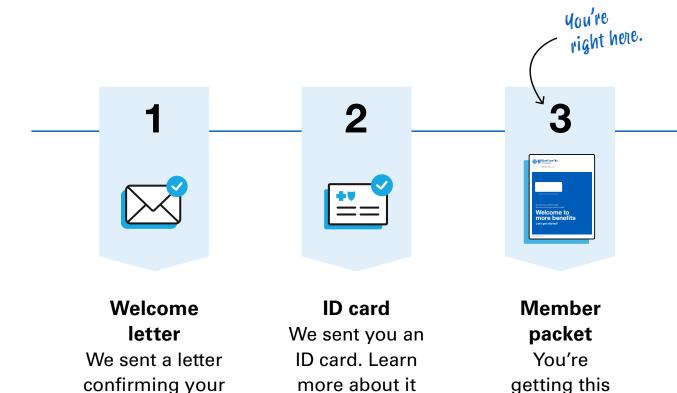
CHOICES services by group

WHAT'S COVERED	GROUP 1	GROUP 2	GROUP 3
Nursing facility care	✓	Short-term only (up to 90 days)	Short-term only (up to 90 days)
Community-based residential living		✓	(Specified community- based residential alternative services and levels of reimbursement only. See below) ¹
Personal care visits (up to two visits per day at intervals of no less than four hours between visits)		✓	✓
Attendant care (up to 1,080 hours per calendar year; up to 1,400 hours per full calendar year only for persons who require covered assistance with household chores or errands in addition to hands-on assistance with self-care tasks)		✓	✓
Home-delivered meals (up to one meal per day)		✓	✓
Personal emergency response systems (PERS)		✓	✓
Adult day care (up to 2,080 hours per calendar year)		\	✓
In-home respite care (up to 216 hours per calendar year)		✓	✓
In-patient respite care (up to nine days per calendar year)		\	✓
Assistive technology (up to \$900 per calendar year)		✓	✓
Minor home modifications (up to \$6,000 per project; \$10,000 per calendar year; and \$20,000 per lifetime)		✓	✓
Pest control (up to nine units per calendar year)		✓	✓

¹ CBRAs for which Group 3 members are eligible include only: Assisted Care Living Facility services, Community Living Supports 1 (CLS1) and Community Living Supports-Family Model 1 (CLS-FM1)

Let's get started!

We want to make getting started with your plan as easy as possible. Here's what you can expect.



on **page 10**.

member packet.

enrollment.















Set up texting

Get quick updates on the go by calling 1-844-274-5818 to sign up for texts.

Health Needs Assessment call

We'll call to talk about your health needs. You'll get a gift card for this through our rewards and incentives program.

We'll send a letter confirming your **Primary Care** Provider (PCP).

Don't worry — if you ever want to change your PCP, just give us a call.



Add our number (into your phone.

Benefits that make a difference

Here's a glance at your 2023 benefits.



premiums, deductibles and medical/Part D drug copays



\$3,000

combined allowance per year for select hearing and vision services



allowance per month for healthy food and over-the-counter items



free, one-way rides per year for doctor and pharmacy visits



\$100

allowance per month for housing utilities



56 Meals

delivered after an inpatient hospital or skilled nursing facility stay

You must continue to pay your Medicare Part B premium each month. Costs shown are for providers in our network. We provide members with a flex card to use for select hearing and vision services; housing utilities; and over-the-counter/healthy food items. Value of the flex card is preloaded with certain amounts, according to benefits. The allowances for healthy food and housing utilities are part of a special supplemental program for people living with chronic health conditions. Not all members qualify. Value of card may be zero. Card may not be used at all merchants or providers. Merchants and providers must accept major credit cards. Purchases may be restricted to certain types of items and services. Benefit limits may apply. Check your Evidence of Coverage for details. Or give us a call.

BlueCare Plus Choice Benefits:	What you pay:	
Ambulance	\$0 cost share	
Dialysis	\$0 cost share	
Durable Medical Equipment / Prosthetics	\$0 cost share	
Emergency Care	\$0 cost share	
Home Health Care	\$0 cost share	
Inpatient Hospital Care	\$0 cost share	
LabTests and X-rays	\$0 cost share	
Medicare Part B Diabetic Supplies	\$0 cost share	
Monthly Premium	\$0 – You pay nothing	
Outpatient Surgical Services	\$0 cost share	
Outpatient Rehabilitation	\$0 cost share	
Preventive Care	\$0 cost share	
Primary Care and Specialist Office Visits	\$0 cost share	
Skilled Nursing Facility	\$0 cost share	
Telehealth	\$0 cost share	
Urgently Needed Care	\$0 cost share	
Hearing and Vision — \$3,000 combined allowance per year for hearing and vision services we cover	included at no additional cost	
Fitness Program	included at no additional cost	
Housing Utilities — \$100 allowance per month	included at no additional cost	
Meals — 56 meals delivered after an inpatient hospital or skilled nursing facility stay	included at no additional cost	
Over-the-Counter/Healthy Food Items — \$280 allowance per month, no roll-over	included at no additional cost	
Transportation — 60 free, one-way rides to plan-approved locations	included at no additional cost	

PART D **Your prescription** drug benefits

You'll pay different amounts for your covered drugs based on what level of "Extra Help" you receive.

WHAT'S COVERED		WHAT YOU PAY	
Initial Coverage Limit You'll pay this much for each drug until you've paid \$7,400 per year.	Generic	^{\$} 0, ^{\$} 1.45 or ^{\$} 4.30 copay	
	Brand	^{\$} 0, ^{\$} 4.15 or ^{\$} 10.35 copay	
Catastrophic Coverage After your yearly out-of-pocket drug costs (including drugs purchased through retail pharmacy and mail order) reach \$7,400, you pay nothing for all drugs.		\$0	



PART D

Important things to know

We want to make using your pharmacy benefits as easy as possible. And that means getting to know some ins and outs of your Medicare Part D prescription drug coverage.

How We Provide Your Coverage

CVS Caremark® helps us manage your prescription drug coverage. They may contact you from time to time, so please open any mail you get from them as if it were from us.

We may also mention CVS if you need to do something with them. This doesn't mean you have to use a CVS Pharmacy[®]. You have many choices for nearby pharmacies in our network. This includes mail order, local pharmacies, national retail drugstores and many grocery store pharmacies.

you may hear from CVS.

Our Pharmacy Network

Just like with providers, your plan has a pharmacy network. In most cases, your prescription drugs are covered only if they're on our drug list and they're filled at a network pharmacy or through our mail order pharmacy service.

Understanding Drug Costs

According to the U.S. Food and Drug Administration (FDA), a generic drug is an approved drug that has the same active ingredients as the brand name drug. Generally, generic drugs cost less than brand name drugs.

What Are Prior Authorization and Step Therapy?

Prior authorization means you'll need to get approval from us before we'll cover the drug for you. If you don't get this approval, your drug might not be covered. Step therapy means you may need to try a different drug to treat the same condition before we'll cover another drug.

ONE CARD. MULTIPLE BENEFITS.

Your flex card

We make it easier to get the things you need. We give you one prepaid card to use for multiple plan benefits.

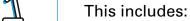


If you haven't got your flex card yet, don't wonly. you'll get yours soon.



Hearing and Vision

Get a \$3,000 combined yearly allowance for the hearing and vision services we cover.



- Your annual hearing exam with a TruHearing[®] provider
- One TruHearing Advanced hearing aid per ear, per year (batteries included)
-) Glasses, frames and contacts



Housing Utilities

Get a \$100 monthly allowance for plan-approved housing utilities. If you're eligible, you can use this allowance to pay for utilities like water, natural gas, electric and cable/internet.



Healthy Food and OTC Items

Get a \$280 monthly allowance for approved healthy food and over-the-counter (OTC) items. This includes wellness products like vitamins and cold medicine. And if you're eligible, it also includes food like fruit, veggies, canned goods, dairy products and more.

Benefit limits, exclusions and eligibility requirements may apply. Please see your Evidence of Coverage for full details. Or give us a call.



Stay healthy. Earn gift cards.

You've got another good reason for taking care of your health.

We'll send you a gift card for getting certain preventive screenings as part of our rewards and incentives program.

We've included a list of some of the screenings included in this program below. Not everyone needs all of them. So you'll only earn gift cards for the ones you're eligible for based on your age, health history, and past screenings and rewards.

Preventive screenings in our rewards and incentives program include:



- Completion of the Health Needs Assessment
- ☐ Annual Wellness Visit
- Colorectal cancer
- □ Breast cancer
- ☐ Some diabetic screenings and tests (such as an annual HbA1c test, retinal eye screening and urine test)

Questions? Give us a call. We can tell you about these screenings, which ones you're eligible for and what limitations apply. The screenings listed here are for the 2023 plan year.

HEALTH INSURANCE CARDS

Your ID cards

Here's a quick guide to what health insurance cards you might need to keep in your wallet.





Carry with you.

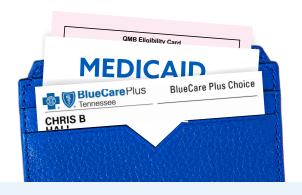
Your BlueCare Plus Choice health plan should be your first (or primary) insurance now. That means you'll always show this ID card when you get care or pick up prescriptions.





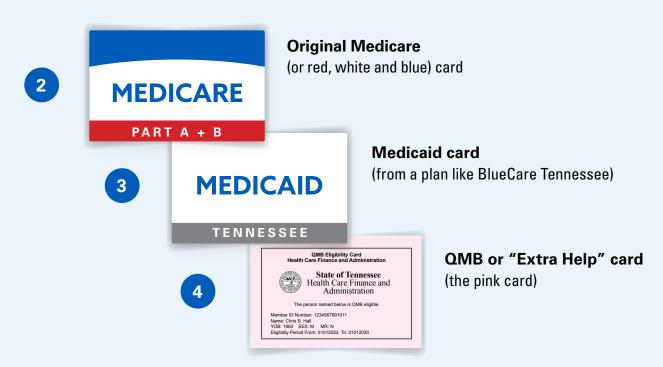
Don't forget your flex card!

You can use your flex card for multiple plan benefits. So you'll want to carry it with you too.



You may not have all of these cards, so don't wonly about the ones you don't recognize.

You don't have to carry these cards, but keep them in a safe place.



Here's how to connect with us and get plan info:



Set up your online account.

This is usually the fastest way to check on claims, benefits and medicine and find which providers are in our network. Go to bluecareplus.bcbst.com and click **Log in** at the top right corner of the website. You can then set up your account by clicking on register an account.

Once you've set up your account, you can:



Check to see if our network includes these things

- Your Primary Care Provider
- Any specialists you see
- Your pharmacy
- The hospitals and health facilities you use



Check our list of covered drugs

Our plan covers certain medications. It's a good idea to check to see if your prescribed medications are on our drug list.



Sign up for texting.*

Call 1-844-274-5818 to get started. You'll get appointment reminders, tools and other resources sent right to your phone.

^{*} These text communications aren't secure, so there's a possibility that someone else can read the information included in them. By signing up, you accept the risks associated with texting.

CONTACT INFO

Resources for you



When you have questions about your BlueCare Plus Choice plan, call us. Your questions are important to us, and we're here to help.

BlueCare Plus Tennessee Member Service	1-800-332-5762,TTY 711 See back cover for hours of operation.
BlueCare Plus Tennessee website	bluecareplus.bcbst.com
Member Care Team Monday–Friday, 8 a.m. to 6 p.m. ET	1-877-715-9503,TTY 711
Transportation Call for a ride to your doctor visit at least 72 hours before.	1-855-681-5032,TTY 711
Nurseline 24 hours a day, 7 days a week	1-888-747-8951,TTY 711
Over-the-Counter Call to place your order.	1-855 243-1186, TTY 711
Fraud Hotline 24 hours a day, 7 days a week	1-888-343-4221,TTY 711

For you. With you. We're right here.



Questions? Please call us. **1-800-332-5762**, TTY **711**



bluecareplus.bcbst.com



1 Cameron Hill Circle | Chattanooga, TN 37402 | bluecareplus.bcbst.com

From **Oct. 1 to March 31**, you can call us seven days a week from 8 a.m. to 9 p.m. ET. From **April 1 to Sept. 30**, you can call us Monday through Friday from 8 a.m. to 9 p.m. ET. If you call us outside these hours or on a holiday, our automated system will answer your call. You can leave a message for us, and we will call you back the next business day. TruHearing is an independent company that provides hearing products and/or services for BlueCare Plus Tennessee. TruHearing does not provide BlueCare Plus Tennessee branded products and/or services. TruHearing is solely responsible for the products and/or services they provide. This information is not a complete description of benefits. Benefit limits may apply. BlueCare Plus Tennessee does not discriminate on the basis of race, color, national origin, sex, age, or disability in its health programs and activities. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-332-5762, TTY 711.

ملحوظة: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية تتوفر لك بالمجان. اتصل برقم 5762-303-801. TTY 711.

BlueCare Plus Tennessee, an Independent Licensee of the Blue Cross Blue Shield Association