

For you.
With you.



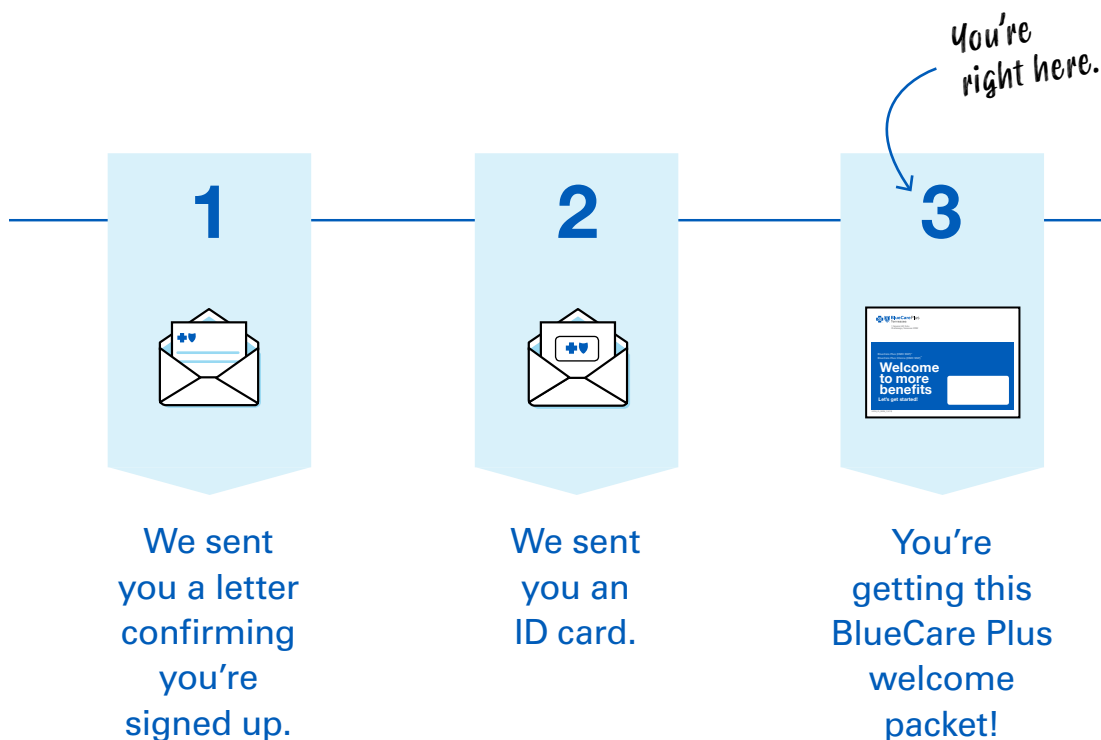
2020 BlueCare Plus Choice (HMO SNP)SM
Dual Eligible Special Needs Plan

Welcome to more benefits

You're here! We're so glad.

If you're brand new to us, or if you've been with us a while, we're here to walk with you on your health journey. Your health plan comes with lots of benefits, but we know it's a lot to take in. So for now, we're just going to cover the basics.

Ready to get started? We'll take the next steps together.



For you.
With you.



Having a doctor is an important part of your health journey.

4



Complete the things we recommend doing first on page 4.

5



We'll call you to complete your health survey. After that, you'll get a **\$50 gift card**.



Yay!

6



We'll send a letter confirming who your Primary Care Provider (PCP) is. You can call us if you ever need to change doctors.

Go ahead and add our number into your phone.

> First things first

You may not think about your health plan until it's time to see the doctor or get your medicine. But we don't want you to miss out on the best we have to offer, so here are some things we recommend doing first.



- **Answer our first phone call.** We'll call you soon to get to know you and ask you some questions about your health needs. If we can't reach you, we'll mail you those questions. We'll send you a **\$50 gift card** just for answering them!



- **Go for your Annual Wellness Visit.** We'll send you a **\$50 gift card** just for getting your Annual Wellness Visit.



- **Be on the lookout for a SilverSneakers® membership card.** Don't miss out on your free fitness benefit! You can visit **SilverSneakers.com** for more info. Or you can give us a call.



- **Sign up for BlueAccess.SM** Visit us online at bluecareplus.bcbst.com/blueaccess.asp to set up your account. It's an easy way for you to check on claims and benefits, refill your medicine, and find out where you can go to get care.



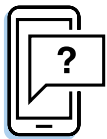
- **Download our MyBlueTNSM phone app.** It's everything you can find and do on BlueAccess. We've put it in an app to make it easy for you to get to quickly.

*We're with you
wherever you go.*

> For you. With you.

Ever wish you had someone who knows you and could talk to your doctors and help plan the best care for you? Someone who could explain your health to you and tell you how all your medicines work together? Someone to remind you of things your doctors said you need to be doing?

If that's your wish, it just came true. We're your care team, and that's exactly what we do.



Questions? Please call us.
1-855-339-6071 (TTY: **711**)



Benefits that make a real difference.

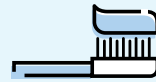
This is just a glance at your 2020 benefits. If you need more details, you can call **1-800-332-5762** (TTY: **711**) or you can go online and log in to BlueAccess.



**Premiums
& copays**
\$0
per year



**Over-the-Counter
Items**
\$1,200
allowance per year



Dental Care
\$5,000
allowance per year



Hearing aid
\$2,500
allowance per year



Transportation
100 rides
for select services; unlimited
for medical services



**Large Network
Wide Choice**
of doctors, dentists
and hospitals



Vision
\$325
allowance per year



Pharmacy
\$0
drug deductible



**Care Team
Support**
to help you get the
care you need.

Costs shown are for in-network providers. Check to make sure your provider is in our network. Also, BlueCare Plus may need to approve some services before you have them.

What's covered	What you pay
Monthly Premium	\$0
Inpatient Hospital Care	\$0
Skilled Nursing Facility	\$0
Home Health Care	\$0
Primary Care and Specialist Office Visits	\$0
Outpatient Surgical Services	\$0
Ambulance	\$0
Emergency Care	\$0
Urgently Needed Care	\$0
Outpatient Rehabilitation	\$0
Durable Medical Equipment / Prosthetics	\$0
Medicare Part B Diabetic Supplies	\$0
Lab Tests and X-rays	\$0
Preventive Care	\$0
Dialysis	\$0
Personal Emergency Response System (PERS)	\$0
Telehealth	\$0
SilverSneakers - fitness membership	\$0
What's covered	What you get
Mom's Meals	2 meals per day for 7 days after a stay in the hospital or nursing facility
Dental Services (Preventive and Comprehensive)	\$5,000 allowance
Hearing Services - routine	\$2,500 allowance
Over-the-Counter items from our catalog	\$1,200 allowance (\$300 per quarter)
Vision Services - eyewear	\$325 allowance
Transportation	100 one-way trips for select services; unlimited for medical services.



Your prescription drugs benefits

What's covered		What you pay
Monthly Premium		\$0
Deductible The amount you pay before your plan begins to pay.		\$0
Initial Coverage Limit You'll pay these copays until your total costs for prescriptions reaches \$6,350 .	Generic	\$0, \$1.30 or \$3.60 copay
	Brand	\$0, \$3.90 or \$8.95 copay
Catastrophic Coverage Once your out-of-pocket costs reach \$6,350 .		\$0

> Taking medicine the right way

The medicine your doctor gives you to treat your health conditions is meant to help you. But when medicine isn't taken the right way, it doesn't work like it should.

It's a good idea to take every medicine exactly the way your doctor said to — the right amounts at the right times. Your medicine works over time to make you healthier, so, you'll want to keep taking it even if you feel good.

If a medicine causes any side effects, tell your doctor. They may decide to change your medicine, but it's important to make that decision with them—not on your own.



Try these tips!

- Keep a list of the medicines you take.**
- Use a pill box to make it easier to remember.**
- Get auto refills.** Let the pharmacy auto-refill your prescriptions. They'll reach out to remind you when to pick them up.
- Ask about 90-day supplies.** Some medicines you take long-term can be filled for 90 days at a time. That's fewer trips to the pharmacy for you.



Your dental benefits

We want to make sure you know what's covered in the **\$5000 allowance** and what's not. That way, you won't be surprised. These two pages explain your dental benefits in a bit more detail.



Give us a call before you have any treatment.

We can tell you if it will be covered.

1-800-332-5762 (TTY: **711**)

Coverage A

This is for your regular dental checkups, cleanings and x-rays. We've listed the limits in the chart, and also in your Evidence of Coverage.

Exams and Cleaning	<ul style="list-style-type: none">▪ One periodic exam every six months▪ Emergency exams are covered once in any 12-month period▪ One cleaning or periodontal maintenance every six months
X-rays	<ul style="list-style-type: none">▪ 1 set of bitewing films per 12-month period (up to 4 bitewing films)▪ 1 panoramic or full mouth x-ray per 36-month period

Coverage B

This is for basic treatments for your teeth, like fillings, root canals, having a tooth pulled and certain treatments for your gums. Not every service your dentist recommends will be covered. And there are limits to how often some procedures can be done.

Restorative Services	<ul style="list-style-type: none">Amalgam and Composite FillingPalliative Treatment (Emergency relief of pain)
Endodontics (pulp of teeth)	<ul style="list-style-type: none">Root canal treatment
Periodontics (tissue and bone that supports teeth)	<ul style="list-style-type: none">Full mouth debridementPeriodontal scaling and root planing
Oral Surgery	<ul style="list-style-type: none">Extractions; Oral Surgery

Coverage C

This is for major treatments for your teeth. It'll include things like crowns, dentures, bridges and some surgeries. There are rules for when we'll cover certain treatments. And there are limits for how often some procedures can be done.

Major Restorative and Prosthodontics	<ul style="list-style-type: none">Full and partial denturesCrowns and fixed bridgeDenture adjustments, relines or rebases. Dentures covered every 5 years.
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CHOICES Services by Group

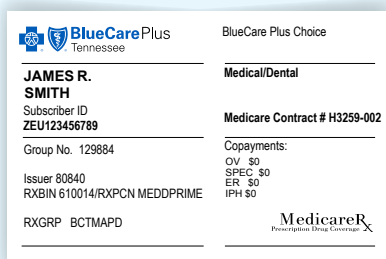
What's Covered	Group 1	Group 2	Group 3
Nursing facility care	✓	Short-term only (up to 90 days)	Short-term only (up to 90 days)
Community-based residential living		✓	(Specified CBRA services and levels of reimbursement only. See below) ¹
Personal care visits (up to 2 visits per day at intervals of no less than 4 hours between visits)		✓	✓
Attendant care (up to 1080 hours per calendar year; up to 1400 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)		✓	✓
Mom's Meals (up to 1 meal per day)		✓	✓
Personal Emergency Response Systems (PERS)		✓	✓
Adult day care (up to 2080 hours per calendar year)		✓	✓
In-home respite care (up to 216 hours per calendar year)		✓	✓
In-patient respite care (up to 9 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 9 units per calendar year)		✓	✓

¹ CBRA's 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)

Your ID cards

We've already sent you a new ID card. But you might still have other cards from your other insurance companies. Here's a quick guide to which ones you might need to keep in your wallet.

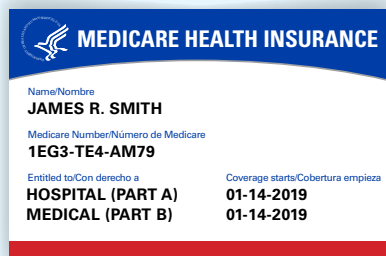
1



Carry with you.

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

2



Leave at home in a safe place.

Original Medicare (or Red, White and Blue) card

Also, take these with you to your doctor visits.



- Insurance card.
- Paper and a pen to take notes.
- A list of questions you might have.
- A list of all medicines and vitamins you take.
- The medicine bottles, if they don't need to be kept cold.

> Stay healthy. Earn gift cards.



We've got another good reason for taking care of your health. We'll give you a gift card when you are eligible for certain screenings your doctor says you need.

Not everyone needs all these tests, so you'll only get gift cards for the ones that apply to you. Questions about that? Call us.

Everyone

- \$50** - annual wellness visit
- \$50** - complete a health history and needs form

Men and women age 50-75*

- \$50** colonoscopy or flexible sigmoidoscopy
OR
- \$15** colorectal screening in your home

**Up to \$50 for colorectal screenings*

Women age 50-74

- \$25** - breast cancer screening every 24 months
- \$25** - bone density screening for women age 67-85 who suffer a fracture

People with diabetes*

- \$25** - diabetic HbA1C blood sugar screening
- \$15** - diabetic retinal eye exam at provider other than Ophthalmologist
- \$50** - diabetic retinal eye exam at Ophthalmologist or Optometrist
- \$10** - diabetic kidney function screening

**Up to \$85 for diabetic related screenings*

> Resources for you



When you have questions about your BlueCare Plus Choice plan, call our member service line. Your questions are important to us, and we're ready to listen and help.

BlueCare Plus Choice Member Service	1-800-332-5762 (TTY: 711)
BlueCare PlusSM website	bluecareplus.bcbst.com
Nurseline 24 hours a day, 7 days a week	1-888-747-8951 (TTY: 711)
Over-the-Counter Call to place your order.	1-800-400-6864 (TTY: 711)
Member Care Team Monday - Friday, 8 a.m. to 6 p.m., ET	1-855-339-6071 (TTY: 711)
Transportation Call for a ride to your doctor visit at least 72 hours before.	1-855-681-5032 (TTY: 711)
Lifeline See if you're eligible for help with your monthly phone or Internet bill.	lifelinesupport.org
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 7 days a week from 8 a.m. to 9 p.m. ET. From **April 1 to Sept. 30**, you can call us Monday through Friday from 8 a.m. to 9 p.m. ET. If you call us outside these hours or on a holiday, our automated system will answer your call. You can leave a message for us, and we will call you back as the next business day.

TennCare is not responsible for payment for these benefits, except for appropriate cost sharing amounts. TennCare is not responsible for guaranteeing the availability or quality of these benefits. Premium, copayments, co-insurance, and deductibles may vary based on the level of Extra Help you receive. Please contact the plan for further details. SilverSneakers is a registered trademark of Tivity Health, Inc. © 2019 Tivity Health, Inc. All rights reserved. This information is not a complete description of benefits. BLUE CROSS®, BLUE SHIELD® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans. BlueCare Plus Tennessee, an Independent Licensee of the Blue Cross Blue Shield Association.

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ملحوظة: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية تتوفر لك بالمجان. اتصل برقم 1-800-332-5762 (TTY: 711).