



# YOUR GROUP ENROLLMENT GUIDE

Everything you need to find the right  
health coverage.



**BlueCross BlueShield**  
of Vermont

An Independent Licensee of the Blue Cross and Blue Shield Association.

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01

# WHY US?

For over 30 years we've been Vermont's, community-based health care company.

We're not just a health care company—we're your friends and neighbors and we're dedicated to supporting you, our members, partners and communities not just today, but tomorrow and for years to come.

Be certain to follow us on Twitter, LinkedIn, Facebook and Instagram so you can stay engaged with emerging health care trends and any upcoming Blue Cross and Blue Shield of Vermont community events.

## Making a difference in our communities

We believe that community is central to health and wellness. To support this, we work directly with key community members through our community advisory boards to help us understand local issues in Vermont communities. These boards have proved to be fertile ground to pilot many successful programs.

Our programs and events bring people together around our state, emphasize the importance of shared wellness, and demonstrate that health can be fun. Our events reach Vermonters of all ages, interests and abilities.

02

# GETTING STARTED

Your employer has selected Blue cross and Blue Shield of Vermont to provide your health benefits. This guide gives general information about your coverage. Please note that this guide does not give all of the limitations and exclusions of your coverage.



**DON'T ACCIDENTALLY TOSS YOUR ID CARD.**

After your renewal, be certain to bring your new card with you the next time you need care or to fill a prescription.



## AFTER YOU ENROLL

# 1

### Keep an eye on the mail

If you're new to Blue Cross, you'll need your new ID card to access services. Many people accidentally throw out their ID cards. So, remember at the time of your group's renewal we will send you an:

- ID card
- Outline of coverage

Always have the most up to date ID card because it grants you access to the care you need, while your outline of coverage explains what you can expect to pay for certain services and supplies.

# 2

Once you receive your new card(s), register on our member resource center.

To do so, visit [bcbsvt.com/member](https://bcbsvt.com/member). When you register, you'll gain access to:

- **Benefit Details:** covered services and what you'll pay for those services
- **Claims:** view your claims and how we paid them
- **Plan Materials:** order replacement ID cards, print proof of coverage, view your summary plan description or certificate of coverage. You may request hard copies, if you wish, by calling our customer service team at the number listed on the back of your ID card.

## 03

# ESSENTIAL BENEFITS

From the care you want, to the experience you deserve, at Blue Cross and Blue Shield of Vermont, the difference is in our products, our network and our personalized service.

### PRIMARY CARE

Your plan may require you to select a primary care provider (PCP). A PCP coordinates your care and guides you to network specialists.

Even if your plan doesn't require you to select a primary care provider, we encourage you to develop a relationship with a single health care provider who knows about your health and can help you make decisions about your care. To select a primary care provider, please visit [bcbsvt.com/findadoctor](https://bcbsvt.com/findadoctor).

To learn more about our networks, see "Network providers" on page 9.

### OFFICE VISITS

Your plan covers services in an office setting.

This means, for example, you're covered when you need:

- an examination, diagnosis and treatment for an injury or illness
- injections
- diagnostic services, such as X-rays
- nutritional counseling
- surgery
- therapy services

Once enrolled, you will receive either a Certificate of Coverage or Summary Plan Description, which will detail all covered benefits, limitations and general exclusions. Please read your Certificate of Coverage or Summary Plan Description carefully; it governs your benefits.



#### URGENT CARE

If your condition is not life threatening, but needs attention, an urgent care facility may be the most appropriate option. Urgent care facilities are located throughout Vermont and offer many of the same services your PCP offers. Most urgent care facilities have regularly scheduled hours.

#### EMERGENCY CARE

Your plan covers emergency services regardless of where you are when you experience a true emergency.

If you experience an emergency medical condition that places your health, or the health of an unborn child or dependent, in serious jeopardy, seek care immediately. Emergency rooms are open 24 hours a day, seven days a week and offer a wide range of services.

#### PRESCRIPTION DRUG COVERAGE

If your employer offers a prescription drug plan through us, you will receive benefits through Vermont Blue Rx and our network of pharmacies in Vermont and nationwide.

For more details on your prescription drug coverage, please visit [bcbsvt.com/vermontbluerx](https://bcbsvt.com/vermontbluerx).

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### SERVICES YOUR PLAN MAY NOT COVER

You can be confident that your health plan covers a broad array of necessary services and supplies. The following points highlight some of the services that our health plans generally do not cover:

- Services that are investigational, experimental, cosmetic or not medically necessary as defined in your Certificate of Coverage or Summary Plan Description.
- Services that should be covered by another source, such as another type of insurance or an employer.
- Providers who are not approved to provide a particular service or who don't meet the definition of "provider" in your Certificate of Coverage or Summary Plan Description.

### COVERED SERVICES

In general, all of our plans include services that fall under these categories of health benefits:

- chiropractic care
- diabetes services
- emergency services
- hospice services
- hospitalizations
- maternity and newborn care
- medical equipment and supplies
- mental health and substance use treatment services
  - office visits
- outpatient services, such as diagnostic tests and minor surgeries
  - rehabilitation
  - specialist visits like nutritional counseling and OBGYN services
- telemedicine services
  - therapy services
- urgent care services

### PRIOR APPROVAL

Your plan requires prior approval for certain services and drugs even when you use network providers.

- Network providers get prior approval for you.
- If you see an out-of-state provider, you may need to get prior approval before seeking care. Any provider may help you fill out the form and give you other information you need to submit your request.
- Our plans do not require prior approval for emergency medical services, regardless of where you seek care.
- For the most recent prior approval list, visit [www.bcbsvt.com/priorapproval](http://www.bcbsvt.com/priorapproval) or call the customer service number on the back of your ID card.

04

# NETWORK PROVIDERS

Every one of our plans provide access to the largest network of providers in Vermont and the U.S. and to hospitals in more than 200 countries and territories around the world through the Blue Cross Blue Shield Global<sup>®</sup> Core Program.

Our plans give you access to the largest network of doctors and hospitals in Vermont. Our BlueCard<sup>®</sup> program includes access to health care networks across the United States and around the world.

To view a list of doctors in our network, visit [bcbsvt.com/findadoctor](https://bcbsvt.com/findadoctor).



## HOW WE PROTECT YOUR PRIVACY

The law requires us to maintain the privacy of your health information by using or disclosing it only with your authorization or as otherwise allowed by law. You have the right to gain access to your health information and to information about our privacy practices. We make a complete copy of our Notice of Privacy Practices available on our website, [bcbsvt.com/privacypolicies](https://bcbsvt.com/privacypolicies).

05

# UNDERSTANDING PREVENTIVE CARE

Each of our plans cover preventive health services\*, received in-network, at no cost to you.

## EXAMPLES OF PREVENTIVE SERVICES INCLUDE:

- **Check-ups:** wellness visits for you and your family
- **Screenings:** blood pressure, cholesterol and more
- **Standard immunizations:** influenza, tetanus, MMR, etc.

For a full list of current preventive care services and supplies, and the corresponding billing codes (these are codes your provider submits to us), please visit [bcbsvt.com/preventivecare](https://bcbsvt.com/preventivecare).

\* As defined by state and federal law



06

# CASE MANAGEMENT

Our team of registered nurses, licensed social workers, and behavioral health counselors can help you get the health care you need.

Whether it's the exciting moments like discovering you're pregnant, the challenge of understanding a new diagnosis, managing your medications, or coping with an ongoing condition that impacts your daily life, we're here for you. We'll create a personalized plan for improving your health and well-being and connect you to important resources so you can get the support you need. Our case management health care services are free and available to all our members. They are designed to support the 'whole' you—both your physical and mental well-being and happiness.

LEARN MORE ABOUT OUR SERVICES

CONTACT OUR TEAM

Call:

(800) 922-8778, option 3

Visit:

[bcbsvt.com/casemanagement](https://bcbsvt.com/casemanagement)

Message:

Use the Member Resource Center, located at [bcbsvt.com/mrc](https://bcbsvt.com/mrc) to send a secure message to Case Management.

ADDICTION

Many Vermonters know someone affected by substance abuse. If you or a loved one is struggling with addiction, please reach out for help. Our team can connect you to the providers, community and care you need to help fight addiction.

CANCER CARE

Being diagnosed with cancer is a life-changing event—one that affects you physically as well as emotionally. Our team is here to help you and your family during this challenging time.

CHRONIC CONDITION AND DISEASE MANAGEMENT

Our team is standing by to guide you through dealing with long-term health conditions. These include asthma, COPD, diabetes, heart disease, seizures, rheumatoid arthritis, Crohn's, colitis, and many others.

END OF LIFE

When facing end of life decisions, it is important to know the options and the available resources and support for you or your loved one.

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#### MENTAL HEALTH

If you are struggling with anxiety, stress, depression, or other mental health conditions, you're not alone. Our team can connect you with professionals and resources to help you cope and feel better.

#### MATERNITY

Our popular Better Beginnings® program helps expectant moms create the healthiest, happiest start for their babies.

#### TRANSGENDER

Questions about gender affirmation services? Call to be connected to one of our case managers who can provide expert guidance and coordination.



From simple office visit benefits to personalized case management care with one of our case managers, we have you covered.



07

# PHARMACY BENEFITS VERMONT BLUE RX

This is your one-stop solution for prescription drug coverage.

From our trusted pharmacists, to easy-to-follow formularies and medication management programs, Vermont Blue Rx is designed to help you save money.

## WHAT YOU GET WITH VERMONT BLUE RX:

- Experts who are dedicated to reducing the cost of care
- Access to trusted local pharmacies and a nationwide network of retail pharmacies
- Support from our Personalized Rx Counselor program to help you manage chronic and special conditions—condition management, medication use, and healthy diet and exercise support offered
- This is your one-stop solution for prescription drug coverage.



## NEED HELP?

- Call the customer service number on the back of your ID card.
- Visit [bcbsvt.com/vermontbluerx](https://bcbsvt.com/vermontbluerx).

# 08 SPECIAL ENROLLMENTS

## OPEN ENROLLMENT

You may add dependents for any reason during your group's open enrollment period. We will make your enrollment changes effective the first day of your group's new plan year.

For example, if your open enrollment period is November 1 through November 30, and your group's effective date is January 1, you will be able to begin using your newly selected plan benefits on January 1.

## SPECIAL ENROLLMENT

If you are declining enrollment for yourself or your dependents because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose that other coverage. However, you must request enrollment within 31 days of the date your coverage or your dependents' other coverage ends.

You may also use a special enrollment period to enroll yourself and your dependents under this group's plan for the first time if one of the following events occur:

- Loss of other coverage
- Changes in family status
- Changes in employment status

We will not allow retroactive changes unless required by law.

If you marry, you have 60 days to add your spouse and his/her/their dependents onto your plan.

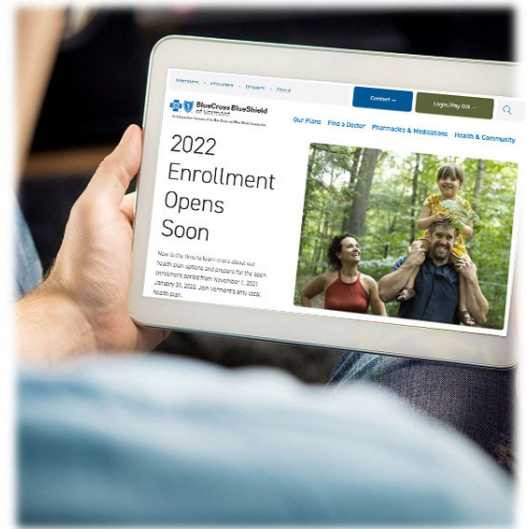
In the event of a birth or adoption, you have 60 days to add your new dependents to your plan\*.

If you fail to add new dependents within 60 days, you must wait until an open enrollment period to do so.

*\* If you already have a family membership, we cover your new child from the date of birth, legal placement, or adoption. You should, however, notify us in writing of your family addition within 60 days.*

# 09 OUR WEBSITE

Our website, [bcbsvt.com](https://bcbsvt.com), is our front door. Our site features up-to-date news on our company and upcoming events in your community. Many features contained in our website will prove very useful.



## WHAT CAN YOU DO AT BCBSVT.COM?

### Explore Coverage

Find medical policies that explain what's covered

### Find Forms and Applications

Download a claim form, application or other form you may need

### Keep Up-to-Date with News

Read the news section of our website, which contains news and legislative reports on health care-related issues



## FIND HELPFUL PLAN INFORMATION ON OUR MEMBER RESOURCE CENTER

The Member Resource Center is a secure site where you can:

- Read your subscriber plan documents such as your outline of coverage, which explains your cost-sharing requirements
- Change your address (please be sure to change this with your employer first)
- Change your primary care provider
- Order a new ID card
- Print a proof of coverage
- Estimate upcoming visit and prescription costs to help you save money.
- View your Summary of Health Plan Payments for the last 18 months
- Send us a secure email message and much more!

To access the Member Resource Center, visit [bcbsvt.com/member](https://bcbsvt.com/member), then follow the prompts to either log in or register as a new user.

# HELPING YOU PURSUE HEALTH ON YOUR OWN TERMS

(800) 247-2583 / [bcbsvt.com](https://bcbsvt.com)