

Care

A classic, comprehensive health insurance plan for families and individuals who want more predictable health care costs.



BlueCare

How it Works

With this classic health insurance plan from Blue Cross Blue Shield of North Dakota (BCBSND) you:

- Pay the same copayment (copay) each time you visit the doctor or pharmacy.
- Share costs with BCBSND for other services, depending on the coinsurance and deductible you choose.
- Can better predict your health care expenses.



Choose a health care provider in the Preferred Provider Organization (PPO) network.

In North Dakota, the network is the Preferred Blue PPO. If a family member resides outside of North Dakota, their network is the BlueCard PPO/EPO. You can see who's in network by using the "Find a Doctor" link at BCBSND.com. Providers who are not Preferred Blue or BlueCard PPO heath care providers are out-of-network. Services received out-of-network are paid at a lower level.

You can locate pharmacies anywhere in the United States by using the "RX Tools" link at BCBSND.com. Click on "Pharmacy Listings", Locate a Pharmacy" and you will be taken to BCBSND's pharmacy benefit manager, Prime Theraputics website. You can proceed to search pharmacies by ZIP code, city/state, or address.



When you go to the doctor or a specialist

You pay a copay for the visit. You may have to pay additional for extra tests, lab work or other medical services resulting from that visit.

The exception is preventive care, which is covered at 100%. There is no copay and no requirement to meet your deductible.



When you get prescription drugs

You pay a copay for your prescription drugs. Both brand name and generic drugs are covered, but you'll save money by using generics.



When you're admitted to the hospital

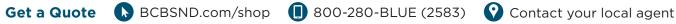
You pay toward the hospital costs until your deductible is met. After that, you and BCBSND share the medical costs (coinsurance) until your out-ofpocket maximum is met. Then BCBSND pays all your covered expenses.

Cost sharing amounts apply to covered services you receive within the Preferred Blue PPO network. For a family plan, an individual on the plan must meet the individual deductible before coinsurance begins.

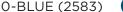
Actively manage your health and prevent diseases

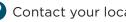


Earn rewards for taking active steps to improve your health and well being. Visit your BCBSND member portal to find out more.









Health care reform has changed some things about health insurance plans. First, most Americans are required to have health insurance coverage*. Second, everyone must be accepted for coverage, regardless of health history. And third, the federal government requires all insurance plans to cover 10 essential health benefits (designated below).

BlueCare from BCBSND meets all the government requirements, plus has the advantage of being provided by North Dakota's most preferred health insurance company.

10 Essential Health Benefits

Defined by the federal government, every health insurance plan must cover these 10 items:

- 1. Preventive and wellness services as well as chronic disease management
- 2. Prescription drugs
- 3. Maternity and newborn care
- 4. Laboratory services
- 5. Outpatient services
- 6. Hospitalization
- 7. Emergency services
- 8. Pediatric services, including dental and vision care
- 9. Mental health and substance use disorder services
- 10. Rehabilitative and habilitative services and devices

*Find out if you qualify for help paying your premiums. Go to BCBSND.com/shop

Plan Options



If you've had insurance before, you'll notice plans that meet the new government requirements may cost more. We offer you two ways to control your costs by choosing the level of deductible.

BlueCare Gold Plan

This option is part of a category the federal government deems a Gold Plans.

	Doctor visit Chiropractic care Physical, speech & occupational therapy	Preventive care		Prescription drugs	Deductible	Coinsurance	Emergency room visit	Hospitalization/ Exams/etc.	Out-of-pocket maximum
Option 1: BlueCare 70 2000	You pay \$25	You pay \$0	You pay	Generic - \$10 Preferred Brand - \$80 Non-preferred Brand - \$150 Specialty - 30% of total cost*	\$2,000 Individual \$4,000 Family	70/30 (BCBSND pays 70%; You pay 30%)	You pay \$500	30 % of total cost*	The most you would pay per year \$8,150 Individual \$16,300 Family

BlueCare Silver Plans

These options are part of a category the federal government deems a Silver Plans.

	Doctor visit Chiropractic care Physical, speech & occupational therapy	Preventive care		Prescription drugs	Deductible	Coinsurance	Emergency room visit	Hospitalization/ Exams/etc.	Out-of-pocket maximum
Option 2: BlueCare 70 5000	You pay \$50	You pay \$0	You pay	Generic - \$20 Preferred Brand - \$100 Non-preferred Brand - \$200 Specialty - 30% of total cost*	\$5,000 Individual \$10,000 Family	70/30 (BCBSND pays 70%; You pay 30%)	You pay \$300	30 % of total cost*	The most you would pay per year \$8,150 Individual \$16,300 Family
**Option 3: BlueCare 70 4200	You pay \$50	You pay \$0	You pay	Generic - \$20 Preferred Brand - \$100 Non-preferred Brand - \$200 Specialty - 30% of total cost*	\$4,200 Individual \$8,400 Family	70/30 (BCBSND pays 70%; You pay 30%)	You pay \$300	30% of total cost*	The most you would pay per year \$8,150 Individual \$16,300 Family

All cost sharing amounts apply to covered services you receive within the Preferred Blue PPO network. Covered services received out-of-network are paid at a lesser benefit amount or no benefit amount.

For a family plan, an individual on the plan must meet the individual deductible before coinsurance begins.

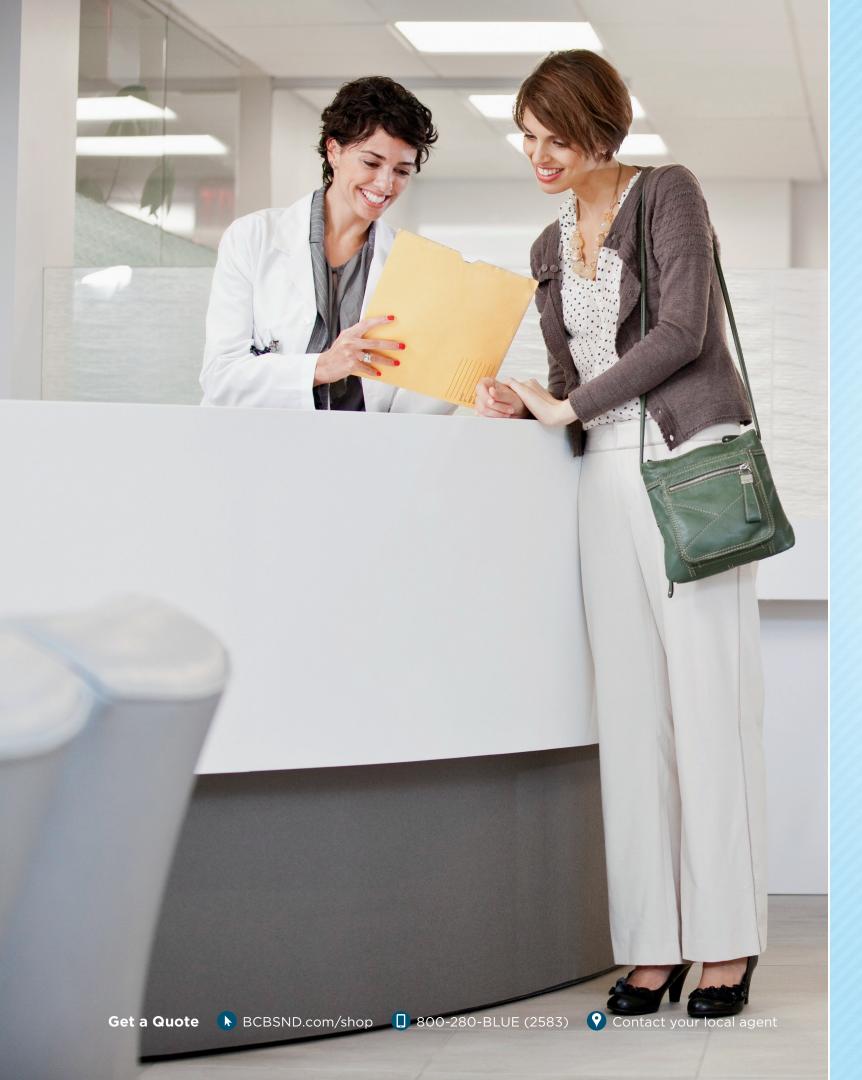
To locate a listing of participating providers, visit BCBSND.com and click on FIND A DOCTOR.

The BlueCare prescription drug coverage is considered creditable coverage.









Health Insurance is about Sharing Costs

Health insurance is a cost-sharing arrangement. Like your auto insurance, you pay a premium. Then if you need to use the insurance, you pay a portion of the expenses and the insurance company pays a portion. The cost-sharing terms you should know are defined below.

A Few Cost-sharing Terms You Should Know

Premium

The amount you pay each month for your health insurance plan.

Copayment (copay)

A fixed amount you pay for a covered health care service, typically paid at the time of the service. The amounts vary depending upon the service you receive.

Coinsurance

Your share of the costs of a health care service covered in your plan after the deductible is met

Deductible

The amount you owe for health care services before your insurance begins to pay. For example, if your deductible is \$1,000, you will pay all your expenses up to \$1,000. After that, the insurance company will share in the cost of covered services. Some services, such as preventive services, are paid right away, before you meet your deductible.

Out-of-pocket maximum

The most you would pay in a calendar year, including copays, before your health insurance begins to pay 100% of the allowed amount. The out-of-pocket maximum doesn't include your premium and charges that are over and above the allowed amount.

Cost-sharing Example

Under the new health reform law, here's an example of what cost sharing looks like. Chris has BlueCare 70 2000. With this plan Chris pays 30% coinsurance, has a \$2,000 deductible and an out-of-pocket maximum of \$8,150.

January 1st Beginning of calendar year December 31st End of calendar year



Early in the year, Chris breaks her arm and goes to the Emergency Room.

Chris pays \$500 (copayment); insurance pays the remaining amount.



Later, Chris' arm requires surgery.

Chris pays all expenses up to \$2,000 (her deductible). For the remaining amount, Chris pays 30% of the expenses (coinsurance); insurance pays 70%.



Eventually, Chris reaches her \$8,150 out-of-pocket maximum.

At this point, **insurance pays** the full cost of covered health care services for the rest of the calendar year.

Note: For a family plan, an individual on the plan must meet the individual deductible before coinsurance begins.

Why Choose Us for Your Health Insurance?

The Most Trusted Name in Health Insurance

- 98% of all doctors and 100% of all hospitals in North Dakota are BCBSND participating providers
- Enjoy protection when you travel within or outside the U.S.
- 80% of all providers in the U.S. participate with Blue Cross Blue Shield
- To find nearby doctors and hospitals, call BlueCard Access at 1.800.810.BLUE (2583) or visit the Blue National Doctor & Hospital Finder at www.BCBS.com.

When you arrive at the participating doctor's office or hospital, show the provider your ID card. The provider will identify your benefit level through this symbol:

Ease of Use

- Insurance that's easy to use is a top priority for our members, so we focus on convenience
- Service from local offices throughout North Dakota



- Claims paid and questions answered here in North Dakota
- Online self-service center available 24/7

A Strong, Local Company

 Members and health care providers in North Dakota appreciate the fact that they can rely on us

- Strong and stable North Dakota-based company
- 70+ years in North Dakota's unique health care market

Ways to Stay Healthy and Active

BCBSND believes in a preventive approach to health and wellness. To help you incorporate healthy choices into your everyday , we provide:

- HealthyBlue online wellness center with mobile app and incentive plan that rewards healthy behaviors like physical activity and setting and achieving goals.
- BlueAlliance, a partnership with North Dakota providers to improve quality, manage costs and enhance your experience
- Prenatal Plus to help facilitate healthy pregnancy

A Variety of Options

For individuals and families who don't purchase insurance from employers, BCBSND also offers:

- BlueDirect
- SimplyBlue

BlueEssential

Get a Quote



BCBSND.com/shop



800-280-BLUE (2583)



Contact your local agent



Do You Qualify for Help Paying Your Premium?

See how much your insurance will cost by answering a few questions. Visit BCBSND.com/shop.

This benefit grid presents a brief overview of covered services and payment levels of this product. It should not be used to determine whether your health care expenses will be paid. The written benefit plan governs the benefits available.

For premium rates and further details of the coverage, including definitions; exclusions; criteria for medically appropriate and necessary care; credentialing process; confidentiality policy; description of experimental drugs, medical devices or treatments; grievance and appeals process; provider listings; drugs eligible for coverage; reductions or limitations; and the terms under which this benefit plan may be continued, call, write or visit Blue Cross Blue Shield of North Dakota.

Blue Cross Blue Shield of North Dakota has entered into an agreement with CMS to provide health insurance coverage through Qualified Health Plans on the Health Insurance Marketplace.