





For more than 80 years, Louisianians have trusted their health insurance needs to Blue Cross and Blue Shield of Louisiana. As the leading health insurer in the state, we take our mission of improving the health and lives of Louisianians to heart.

We are here to help you protect your health and that of your loved ones — and your peace of mind. With eight offices located around the state, we're always ready to serve you. We know many people have never had to shop for health insurance, so we are here — along with our agents — to answer questions and to support you.

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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** or by calling the customer service phone number on your ID card.

Healthcare Reform:What Does it Mean to You?

Healthcare changed when the Affordable Care Act (ACA) – also known as healthcare reform – went into effect in 2010. Here's what you need to know:

1. You must have health coverage.

Plain and simple, it's the law. If you don't have health insurance, you may have to pay a tax penalty. The penalty for not having insurance increases each year.

2. You might qualify for help from the government.

If you qualify based on your income, you can get subsidies – also known as advanced premium tax credits – from the federal government to help you pay for your health insurance. If you qualify, these subsidies are available when you buy a plan through the Marketplace and may help lower your health insurance costs significantly. To find out if you qualify for help paying your premiums, visit www.bcbsla.com/whatyoupay.

3. You can't be denied coverage.

Even if you're sick or have a pre-existing condition, you can't be charged more or denied coverage.



What All Plans Cover

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

Essential Health Benefits

Office visits

A visit to a clinic or physician'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 health care and substance abuse disorder services, including behavioral health treatment

Care to evaluate, diagnose and treat mental health and substance abuse 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.

Contraceptive coverage

Contraceptive methods and counseling for all women, as prescribed by a health care provider.

^{*}Certain limitations and exclusions apply.



Preventive and Wellness Benefits

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** for a full list of services that are covered.

No Lifetime Maximums

There are no lifetime dollar maximums on any Blue Cross individual medical plans.

Prescription Drug Benefits

Prescription drugs are a regular medical expense for many people, and are the most-used part of any health insurance plan. Prescription benefits are managed by Express Scripts* and include:

- A broad nationwide pharmacy network
- A specialty pharmacy network
- A mail order program

^{*}Express Scripts, Inc. is an independent company that provides pharmacy benefit management service to Blue Cross and Blue Shield of Louisiana.

Why Choose Blue?

We are committed to offering value with our health insurance plans. As a customer, you can take advantage of innovative health programs focused on keeping you well. Plus, you get value-added wellness programs and exclusive discounts on wellness services such as gym memberships, spas and more.

Quality Blue Primary Care

We work with primary care doctors around the state to help you get the best care possible. Through our Quality Blue Primary Care (QBPC) program, we share data and information with doctors enrolled in our program that help them give you focused care. This program is already getting great results for patients, particularly those with chronic conditions.

What is better with Quality Blue Primary Care program?

Health coaching

If you have a condition such as high blood pressure, diabetes, heart disease or chronic kidney disease, you may receive helpful calls and extra attention from our Blue Cross nurses between your doctor's appointments to help you stay healthy.

Lower or free copays!

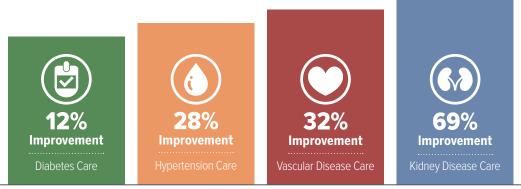
If your doctor is in the Quality Blue Primary Care program and your health plan has a copayment for primary care doctor visits, your copayment could be reduced or waived for office visits with your doctor/nurse practitioner. Please see the benefit grid located in this brochure for your particular plan information.

QBPC is part of any Blue Cross member's benefits. Check out **www.bcbsla.com/myQBPC** to learn more about how this program helps you.

Is my doctor in Quality Blue Primary Care?

QBPC participants currently include major health systems such as Baton Rouge General Physicians Group, The Baton Rouge Clinic, Ochsner Health System, Gulf South Quality Network, Shreveport Family Doctors, and others. Look up your doctor's name in our directory at **www.bcbsla.com/findcare**. QBPC doctors have a blue **Q** next to their names.

QBPC Is Already Getting Better Health Results



Source: QBPC Quality Measures data from January through October 2014

Care Management

We offer care management programs to help members with chronic conditions or serious injuries such as diabetes, heart disease, and chronic lung conditions like asthma. If you have any of these conditions, these programs help you move through the medical system and get the best possible care in a timely manner.

BlueCare: Greater Access Through Telemedicine

BlueCare makes it easy and convenient to get care with virtual, online doctor visits through a partnership with American Well*. You can "meet" with a doctor anytime and anywhere, without having to drive to a clinic.

- BlueCare appointments take place using a home or office computer, smartphone, tablet or other internet-accessible device
- Your doctor or clinician can review your clinical information, speak with and see you as a patient and even prescribe certain medications if needed

Download the **BlueCare app** to your mobile device today or visit **www.BlueCareLA.com**

*American Well is an independent company providing telehealth services to Blue Cross and Blue Shield of Louisiana and HMO Louisiana, Inc. members.



Blue365®

Blue 365° 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:

- Gym memberships
- Diet programs
- Sports, clothing and shoes
- Eye care
- Elective procedures (ex. LASIK)
- Hearing aids

Register for your online account at **www.blue365deals.com/BCBSLA** to access these exclusive discounts!



Blue Dental for Individuals and Families

Oral health is about more than a good smile. It's an important component of overall health. That's why we offer Blue Dental plans to individuals and families. It's just another way we help connect you to a life of better overall health. Contact your agent or visit **www.bcbsla.com/bluedental** for more information.

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 more than 200 countries and territories worldwide through a single electronic network.

- With Blue *Max* and Blue *Saver*, if you go to a PPO provider in another state or country, your plan will pay in-network as if you were at home.
- With Blue Point-of-Service, unless it is emergency care, care obtained outside your Louisiana HMO network will be paid at the out-of-network benefit level.

GeoBlue®: Products for the Unique Needs of International Travelers

GeoBlue products are international health plans designed to help business travelers and leisure travelers access trusted doctors and hospitals across 180 countries. Individual plans are available for you if you are U.S. citizen who lives or travels abroad.

GeoBlue offers service such as:

- Live customer service open 24 hours a day, 7 days a week, 365 days a year
- Worldwide community of English-speaking physicians trained in western medicine
- A GeoBlue global health coordinator to schedule doctor appointments, guarantee payments for cashless access to care, and arrange for any necessary follow-up treatment.
- Mobile tools to help members decide what level of care to seek and help quickly identify the best and most convenient options.
- To view all of the GeoBlue plans visit www.bcbsla.com/geoblue

How Your Plan Works

Your Cost Share

These are the terms you need to know to help you understand the benefit charts in this brochure.

Premium

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

Copayments

If your plan has a copayment, 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.

Deductibles

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 will also have 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 paid 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-max will apply for services you receive out of your network.

Your Plan's Network Coverage

Blue Cross and Blue Shield of Louisiana has one of the largest doctor and hospital networks in the region. This means you have access to the care you need at a lower price. In order to get the most out of your health plan and keep your costs as low as possible, it's important that you get care from a provider in your network.

It's easy to look up doctors and hospitals in your network. Just go to **www.bcbsla.com/findcare** and choose your plan's network directory.

Your Prescription Drug Coverage

Prescription drug benefits are included in all plans. How much you pay depends on the plan you choose and the drug you buy. Your plan may also have a separate drug deductible. Prescription drug benefits are managed by Express Scripts.*

Some health plans have a four-tier copayment structure for prescription drugs.

Tier	Description	Depending on the plan you buy, the amount you pay for a 30-day supply will be either: -OR-	
1	Value Drugs - Primarily generic drugs (and certain brand-name drugs)	\$7	\$15
2	Preferred Brand Drugs - Selected for this tier based on clinical effectiveness and safety.	\$30	\$40
3	Non-Preferred Brand/Generic Drugs - Primarily generic brand- name drugs that may have therapeutic alternatives as a Tier 1 or Tier 2 drug, although some generic drugs may fall into this category. Covered compounded drugs are included in this tier.	\$70	\$70
4	Specialty Drugs - High-cost brand-name or generic drugs and biotechnology drugs that are identified as specialty drugs.	10% of cost of drug, up to a \$150 max, per fill	10% of cost of drug, up to a \$150 max, per fill

Other plans have a two-tier structure, where a coinsurance amount will apply once your medical deductible is met.

Tier	Description	Depending on the plan you buy, the amount you pay for a 30-day supply after deductible will be either: -OROROROR-						
1	Generic Drugs	0%	0%	20%	30%	40%	50%	
2	Brand-name Drugs	0%	20%	40%	50%	60%	50%	

^{*}Express Scripts is an independent company that provides pharmacy benefit management service to Blue Cross and Blue Shield of Louisiana.

Choose the Plan That's Right for You

Your Plan's Metal Level

Blue Cross offers healthcare plans in three metal levels – bronze, silver and gold. Plans in each metal level have similar benefits, but differ on how the costs of the benefits are applied.

Bronze \$	This level has the lowest monthly premium, but also has the highest out of pocket cost.
Silver \$\$	This level has slightly higher monthly premiums than bronze, but also richer benefits. If you are eligible for cost sharing reductions, you will want to choose a silver level Marketplace plan.
Gold \$\$\$	This level has even richer benefits than silver, but also a higher monthly premium.



Plans Sold on the Health Insurance Marketplace by Metal Level

We're proud to offer a range of plans to suit your needs and your budget. You may enroll in any of our plans as early as November 1, 2015. You can receive coverage as early as January 1, 2016.

Bronze \$	Silver \$\$	Gold \$\$\$
BlueSaver 60/40 \$3,600	Blue <i>Saver</i> 80/60 \$1,900	Blue <i>Saver</i> 100/80 \$1,700
Blue <i>Saver</i> 100/80 \$5,550	BCBSLA \$2,250, a Multi-State Plan	Blue POS copay 80/60 \$1,000
Community Blue copay 80/60 \$6,750	Blue <i>Max</i> copay 70/50 \$2,500	Community Blue copay 80/60 \$1,000
Blue Connect copay 80/60 \$6,750	Blue<i>Saver</i> 100/80 \$3,000	Blue Connect copay 80/60 \$1,000
Blue <i>Max</i> 80/60 \$5,000	Blue POS copay 70/50 \$3,000	Blue <i>Max</i> 100/80 \$1,800
Blue <i>Max</i> copay 80/60 \$6,250	Community Blue copay 70/50 \$3,500	BCBSLA \$1,900, a Multi-State Plan
BlueSaver 100/100 \$6,450	Blue Connect copay 70/50 \$3,500	
Blue POS 70/50 \$4,500	Blue <i>Max</i> 80/60 \$3,000	
Blue POS 60/40 \$6,500	Blue <i>Max</i> 100/100 \$4,000	
Community Blue 70/50 \$4,500	Blue POS copay 80/60 \$4,500	
Blue Connect 70/50 \$4,500	Blue POS 100/80 \$3,500	

Your Choice of Products

Blue Max

- A comprehensive health plan offered statewide, with extensive coverage for your peace of mind.
- Several copayment, coinsurance and deductible plan options to meet your needs.
- A four-tier copayment structure or a two-tier coinsurance structure will apply for prescription drugs, depending on the plan you buy. Some plans may also have a separate drug deductible.
- Accesses the Preferred Care PPO network.

BlueSaver

- A qualified high-deductible health plan, which means you can put taxfree money in a Health Savings Account (HSA) that will help you pay your deductible and your share of covered medical expenses.
- Several deductible and coinsurance options are available to meet your needs; no copayments apply.
- A two-tier coinsurance structure applies for prescription drugs. Once your medical deductible is met, the amount of your coinsurance depends on the plan you buy.
- Accesses the Preferred Care PPO network.

Blue Point of Service

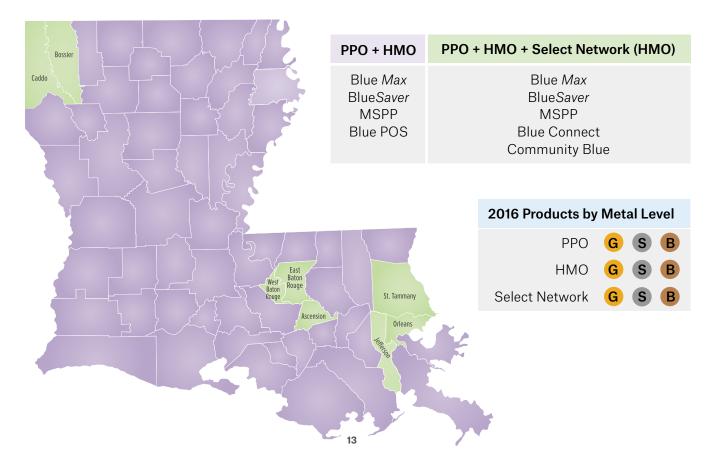
- Offered through our subsidiary, HMO Louisiana, Inc. These plans are now available statewide.
- You pay a set copayment for most benefits when you get care from a network provider.
- A four-tier copayment structure or a two-tier coinsurance structure will apply for prescription drugs, depending on the plan you buy. Some plans may also have a separate drug deductible.
- Accesses the statewide HMO Louisiana network.

Select Network Plans (Community Blue and Blue Connect)*

- Our select network plans may be a good fit for you if you want to pay less each
 month for your premium, have reviewed the provider directory and are willing to
 see doctors, clinics, and hospitals in your network, and want waived copays for
 your office visits with a Quality Blue Primary Care doctor.
- Several copayment, coinsurance and deductible plan options to meet your needs.
- A four-tier copayment structure or a two-tier coinsurance structure will apply for prescription drugs, depending on the plan you buy. Some plans may also have a separate drug deductible.
- Accesses either the Community Blue (Baton Rouge and Shreveport communities) or Blue Connect (New Orleans communities) network.

2016 Products by Area

Find the Products Available to You



^{*}Please refer to our separate Community Blue and/or Blue Connect brochures for more information.

Your covered benefits are:*		Plans with deductibles:		
METAL LEVEL		GOLD	SILVER	
		Deductible: \$1,800	Deductible: \$2,500	
Plan name		100/80 \$1,800	Copay 70/50 \$2,500	
Deductible options for benefit period	Single	\$1,800	\$2,500	
in-network	Family	\$5,400	\$7,500	
Max out-of-pocket including deductible, copayments &	Single	\$6,850	\$6,350	
coinsurance	Family	\$13,700	\$12,700	
Coinsurance in-network	We pay	100%	70%	
	You pay	0%	30%	
Coinsurance out-of-network	We pay	80%	50%	
	You pay	20%	50%	
	Primary		\$40	
If you go to a doctor's office	QBPC	Deductible	\$25	
Specialist			\$55	
Urgent care You pay		Deductible	\$55	
If you go to an outpatient ambulatory	surgical center			
If you go to an emergency room		Deductible	Deductible then 30% coinsurance	
If you are admitted as an inpatient to a	a hospital			
Drug deductible per member		No separate drug deductible; medical deductible applies	\$500 separate drug deductible	
	.,	Generic 0% after deductible	\$15 \$40	
Prescription drugs per fill	You pay	Brand 20% after deductible	\$70 10% of drug cost, up to 150 max	
Preventive care services		Plan pays 100% in-network		
Pregnancy care office visit	Pregnancy care office visit		\$55	
Physical, occupational, speech therapy rehabilitation services		Deductible	Deductible then 30% coinsurance	
Montal hoolth 9 authors - alives	Inpatient			
Mental health & substance abuse	Outpatient			
Pediatric dental & vision			e dental and routine eye exams & hardware n a network provider	

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^{*}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 subscriber contract (policy) for a complete list of services covered, as well as limitations and exclusions.

SILVE	ER	BRONZ	ZE
Deductible: \$3,000	Deductible: \$4,000	Deductible: \$5,000	Deductible: \$6,250
80/60 \$3,000	100/100 \$4,000	80/60 \$5,000	Copay 80/60 \$6,250
\$3,000	\$4,000	\$5,000	\$6,250
\$9,000	\$12,000	\$13,700	\$13,700
\$5,000	\$4,000	\$6,850	\$6,850
\$10,000	\$12,000	\$13,700	\$13,700
80%	100%	80%	80%
20%	0%	20%	20%
60%	100%	60%	60%
40%	0%	40%	40%
			\$50
Deductible then 20% coinsurance	Deductible	Deductible then 20% coinsurance	\$35
			Deductible then 20% coinsurance
Deductible then 20% coinsurance	Deductible		
Deductible then 20% coinsurance	Deductible	Deductible then 20% coinsurance	
\$250 separate drug deductible	No separate drug deductible; medical deductible applies	No separate drug medical deducti	deductible; ble applies
\$15 \$40	Generic 0% after deductible	Generic 20% afte	r deductible
\$70 10% of drug cost, up to 150 max	Brand 0% after deductible	Brand 40% after deductible	
	Plan pays 100	0% in-network	
Deductible then 20% coinsurance	Deductible	Deductible then 209	% coinsurance

Your covered benefits are:*		In-network deductibles/Plans with deductibles:		
METAL LEVEL		GOLD	SILVER	
		Deductible: \$1,700	Deductible: \$1,900	
Plan name	Plan name		80/60 \$1,900	
Deductible options for benefit period	Single	\$1,700	\$1,900	
in-network	Family	\$3,400	\$3,800	
Max out-of-pocket including deductible, copayments &	Single	\$6,450	\$4,600	
coinsurance	Family	\$12,900	\$9,200	
Coinsurance in-network	We pay	100%	80%	
	You pay	0%	20%	
Coinsurance out-of-network	We pay	80%	60%	
Consulance out-of-network	You pay	20%	40%	
	Primary			
If you go to a doctor's office	QBPC			
	Specialist			
Urgent care You pay		Deductible Deductible then 20% coins		
If you go to an outpatient ambulatory	surgical center			
If you go to an emergency room				
If you are admitted as an inpatient to a	a hospital			
Drug deductible per member		No separate drug deductible	e; medical deductible applies	
Prescription drugs per fill	You pay	Generic 0% after deductible	Generic 20% after deductible	
	. ,	Brand 20% after deductible	Brand 40% after deductible	
Preventive care services		Plan pays 100% in-network		
Pregnancy care office visit				
Physical, occupational, speech therapy rehabilitation services		Deductible	Deductible then 20% coinsurance	
Montal hoolth 9 autators a large	Inpatient			
Mental health & substance abuse	Outpatient			
Pediatric dental & vision		You will pay \$0 for diagnostic & preventive dental and routine eye exams & hardward when received from a network provider		

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^{*}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 subscriber contract (policy) for a complete list of services covered, as well as limitations and exclusions.

SILVER		BRONZE	
Deductible: \$3,000	Deductible: \$3,600	Deductible: \$5,550	Deductible: \$6,450
100/80 \$3,000	60/40 \$3,600	100/80 \$5,550	100/100 \$6,450
\$3,000	\$3,600	\$5,550	\$6,450
\$6,000	\$7,200	\$11,100	\$12,900
\$5,000	\$6,450	\$6,450	\$6,450
\$10,000	\$12,900	\$12,900	\$12,900
100%	60%	100%	100%
0%	40%	0%	0%
80%	40%	80%	100%
20%	60%	20%	0%
Deductible	Deductible then 40% coinsurance	Deductible	Deductible
	No separate drug deductible;	medical deductible applies	
Generic 0% after deductible	Generic 40% after deductible	Generic 0% after deductible	Generic 0% after deductible
Brand 20% after deductible	Brand 60% after deductible	Brand 20% after deductible	Brand 0% after deductible
	Plan pays 100%	ś in-network	
Deductible	Deductible then 40% coinsurance	Deductible	Deductible
	You will pay \$0 for diagnostic & preventive when received from		ıre

Blue Point of Service Plan Comparisons

Your covered benefits are:*		Plans with deductibles:
METAL LEVEL		GOLD
		Deductible: \$1,000
Plan name		Copay 80/60 \$1,000
Single Deductible options for benefit period		\$1,000
in-network	Family	\$3,000
Max out-of-pocket including	Single	\$5,000
deductible, copayments & coinsurance	Family	\$10,000
Coinsurance in-network	We pay	80%
Comsulance in-network	You pay	20%
Coinsurance out-of-network	We pay	60%
Computation out of network	You pay	40%
	Primary	\$40
If you go to a doctor's office	QBPC	\$25
	Specialist	\$60
Urgent care	You pay	\$60
If you go to an outpatient ambulatory	surgical center	Deductible then 20% coinsurance
If you go to an emergency room		\$150 copay per visit; waived if admitted
If you are admitted as an inpatient to a	a hospital	Deductible then 20% coinsurance
Drug deductible per member		\$500 separate drug deductible
Prescription drugs per fill	You pay	\$7 \$30 \$70 10% of drug cost, up to 150 max
Preventive care services		Plan pays 100% in-network
Pregnancy care office visit		\$60
Physical, occupational, speech therap services	y rehabilitation	\$40
Mental health & substance abuse	Inpatient	Deductible then 20% coinsurance
	Outpatient	Plan pays 100%
Pediatric dental & vision		You will pay \$0 for diagnostic & preventive dental and routine eye exams & hardware when received from a network provider

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^{*}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 subscriber contract (policy) for a complete list of services covered, as well as limitations and exclusions.

	SILVER		BRONZE		
Deductible: \$3,000	Deductible: \$3,500	Deductible: \$4,500	Deductible: \$4,500	Deductible: \$6,500	
Copay 70/50 \$3,000	100/80 \$3,500	Copay 80/60 \$4,500	70/50 \$4,500	60/40 \$6,500	
\$3,000	\$3,500	\$4,500	\$4,500	\$6,500	
\$9,000	\$10,500	\$13,500	\$13,500	\$13,700	
\$6,850	\$6,850	\$6,850	\$6,850	\$6,850	
\$13,700	\$13,700	\$13,700	\$13,700	\$13,700	
70%	100%	80%	70%	60%	
30%	0%	20%	30%	40%	
50%	80%	60%	50%	40%	
50%	20%	40%	50%	60%	
\$40		\$40			
\$25	Deductible	\$25			
\$60		\$60			
\$60	Deductible	\$60	Deductible then 30% coinsurance	Deductible then 40% coinsurance	
Deductible then 30% coinsurance	Deductible	Deductible then 20% coinsurance			
\$150 copay per visit; waived if admitted	Deductible	\$150 copay per visit; waived if admitted			
Deductible then 30% coinsurance	Deductible	Deductible then 20% coinsurance			
\$500 separate drug deductible	No separate drug deductible; medical deductible applies	\$500 separate drug deductible	No separate drug deductible	e; medical deductible applies	
\$15 \$40	Generic 0% after deductible	\$15 \$40	Generic 30% after deductible	Generic 40% after deductib	
\$70 10% of drug cost, up to 150 max	Brand 20% after deductible	\$70 10% of drug cost, up to 150 max	Brand 50% after deductible	Brand 60% after deductibl	
		Plan pays 10	00% in-network		
\$60	Deductible	\$60			
\$40	Deductible	\$40	Deductible then 30% coinsurance	Deductible then 40% coinsurance	
Deductible then 30% coinsurance Plan pays 100%	Deductible	Deductible then 20% coinsurance Plan pays 100%			

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

We're Here to Help

With Blue Cross and Blue Shield of Louisiana, you'll have the support you need to protect every day.



Broker

Get personal assistance from your broker, 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 a broker? 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** today to register for your account.



By Phone

Help is just a phone call away. Call Customer Service toll-free at **1 (800) 392-4087** from 8 a.m. to 5p.m. CST, Monday through Friday.

Online Convenience

Login or register for your online account at www.bcbsla.com, where you can:



Take Your Personal Health Assessment

Learn your risks, get access to a personalized action plan, and plan for a lifetime of good health.

Get Wellness Discounts

Find Blue365® discounts on gym memberships, workout clothes, diet programs, Lasik surgery and more.

Manage Your Account

Request an ID card, change your contact information, view claims data, and more.

Get Your Personal Health Record

Store and organize important health information in a secure, password-protected online record.

Mobile is the Way to Go

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



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