

# Member Information



This information is about your health plan and how it works. To learn more about any of these topics, visit [members.bluecrossmn.com](http://members.bluecrossmn.com) or call customer service at the phone number on the back of your member ID card. Customer service can also help you obtain information in another language.

## Rights and responsibilities

You have rights as a health plan member. You also have responsibilities. Visit [members.bluecrossmn.com](http://members.bluecrossmn.com) to learn more.

## Your privacy matters

Our privacy rules protect your personal health information. We obey federal and state laws that protect your information, whether on paper, the Internet, by phone or orally. When state laws do more to protect your privacy, we will follow that law. All Blue Cross and Blue Shield of Minnesota (Blue Cross) employees, providers and vendors must follow our strict rules and procedures.

Generally, we can't release personal information without your signed approval. Personal information includes health records, claims and other information that identifies you. You have the right to approve or deny any request to release that information.

If you approve the release of information, your consent will describe what will be shared, how it will be used and how long the consent is valid. If you are unable to sign an approval to release personal information, Blue Cross will request approval from your legally authorized representative (parent, guardian or conservator who holds your power of attorney). Proof of identity is required before your personal information will be released.

There are some exceptions allowed by law. For example, your approval isn't required to release certain personal information to:

- Your health care providers, to confirm your coverage or to review their performance. (Our contracts with health care providers include strict requirements that protect your privacy.)

- Blue Cross employees and/or vendors who process applications and claims, conduct utilization review and quality improvement activities as permitted by law.
- Your employer (if your health plan is self-insured), to review claims data or conduct an audit. All information that could be used to identify specific participants is removed unless such identification is reasonably necessary.
- Health researchers or people doing insurance studies.

If we take part in a research study with an external research organization that requires individually identifiable information, we first write to you to explain the study and allow you to choose whether you want to be included. For all other studies, researchers can only access data that does not identify you.

If you think your privacy rights were violated, or you disagree with a decision regarding your personal health information, you may:

1. Call us at the number on the back of your member ID card.
2. Send your written concerns to our privacy officer at the address on the back of your member ID card.
3. Call the Minnesota Department of Commerce at **(651) 296-2488** or **1-800-657-3602**.

## Your personal records

For a copy of your medical records, contact your doctor or clinic. If you'd like a copy of the information Blue Cross has on file, please send a written request to:

Blue Cross and Blue Shield of Minnesota  
Customer Service Department  
P.O. Box 64560  
St. Paul, MN 55164-0560

If your doctor believes that your records are sensitive, we may not share them with you.

To learn more about our privacy procedures, privacy and legal information visit [members.bluecrossmn.com](http://members.bluecrossmn.com) or call customer service.

## Benefits and services that are covered and not covered

Be sure to read your plan materials before you get care. These materials explain your benefits, eligibility, notification procedures, covered expenses and expenses that are not covered. If you need a copy of your benefits or have questions about them, contact customer service.

## How to get care when traveling

In an emergency, call 911 or go to the nearest emergency facility. For other care that can't wait until you return home, take advantage of the BlueCard® program. Call **1-800-810-BLUE (2583)** to find a health care provider that's part of the local Blue Cross and Blue Shield plan\*. Show your member ID card. In most cases, you'll avoid paying any charges over the allowed amount. Though benefits may be paid at the out-of-network level, claims will be filed for you.

Outside the country, you can use the BlueCard Worldwide® program for inpatient hospital and physician care. Before you travel, call **1-800-810-BLUE (2583)** to find out which providers in the carefully screened international network match your travel plans. Or sign in to the myBlueCross member center at **members.bluecrossmn.com**. Search "doctors & facilities" and select the BlueCard Worldwide network.

Be sure to carry your member ID card when you travel and show it when you need care. Outpatient care outside of the country is considered an out-of-network service, and you will be responsible for filing a claim for your care.

Students can take advantage of the BlueCard program, too. Consider scheduling routine care at their regular clinic when home for visits.

\*Each Blue plan is an independent licensee of the Blue Cross and Blue Shield Association.

## Filing claims

Network providers take care of filing all claims for you. You need to file a claim only if you see a health care provider who doesn't contract with Blue Cross. Call customer service if you need a claim form. Or sign in to the myBlueCross member center at **members.bluecrossmn.com** and see the member support area.

Your health plan may not cover all your health care expenses. Read your plan materials carefully to determine which expenses are covered.

## Prescription drug coverage through Prime Therapeutics

### *Where can I have my prescriptions filled?*

If you have your prescription drug coverage through Blue Cross, take your prescription to any pharmacy that's part of our nationwide pharmacy network. More than 60,000 pharmacies participate. Call toll free at **1-800-509-0545** to find a pharmacy near you or sign in to myBlueCross member center and search "pharmacies."

### *What is the drug list (formulary)?*

The drug list or formulary is a list of generic and brand-name prescription drugs considered "best choices" based on their safety, effectiveness and cost. A panel of medical experts selects drugs for the list, which is regularly reviewed, updated and shared with pharmacists and network doctors.

For the complete drug list, sign in to the myBlueCross member center at **members.bluecrossmn.com** or call customer service for drug list information.

### *What if my doctor prescribes a drug that is not on the drug formulary?*

With some benefit plans, there are no benefits for drugs not on the drug list. Other plans require a higher copay for drugs not on the list. Check your plan materials for benefit details. If your doctor thinks a drug is necessary to treat your condition, he or she can request an exception. Exceptions are usually made if drugs on the list have failed to treat your condition or caused side effects that made you stop taking them.

### *What about generic drugs?*

Generic drugs are as safe and effective as their brand-name counterparts and cost much less. Ask your doctor or pharmacist if there is a generic drug right for you.

### *How does the prescription drug mail order program work?*

In most cases, you can purchase up to a 90-day supply of your prescription maintenance drugs for two times your retail copay when you use PrimeMail Pharmacy. This program makes it convenient for you to receive your prescriptions and saves you money.

Maintenance drugs are prescription drugs used on an ongoing or long-term basis to treat ongoing conditions such as arthritis, diabetes or high blood pressure.

Mail your first prescription to PrimeMail. (Call customer service or go to the myBlueCross member center at **members.bluecrossmn.com** for the mail order form.)

Your prescription drugs will be delivered postage-paid, direct to your home by first-class mail or UPS. Refills may be ordered by phone, mail or on the Internet.

Prime Therapeutics, LLC is an independent company providing pharmacy benefit management services.

## Copays and other charges

Check your plan materials for specifics about your plan including copays and other charges that you will need to pay when you receive health care services.

Your share of health care costs is based on:

- Your plan benefits (deductible, copay, coinsurance, out-of-pocket maximum)
- The network status of the provider you choose

You will almost always pay less when you use in-network providers. If you use out-of-network providers, your costs will be higher and could be much higher, depending on whether the provider has agreed to accept Blue Cross' allowed amount as payment in full. Check the status of your provider by visiting [members.bluecrossmn.com](https://members.bluecrossmn.com) and using the "find a doctor" tool or calling Blue Cross customer service.

## Primary care services

There's no need to choose one doctor or clinic for your care, but it's wise to build a relationship with your health care providers. That way, your doctors and clinic staff will get to know you and your health history without "starting over" each time you need care or advice.

Select your provider carefully because you will receive most of your care from these providers. Much of the care you and your family receive can be provided by doctors who specialize in:

- Family or general medicine – providing care for patients of all ages
- Pediatrics – caring for newborns and children
- Internal medicine – practicing general medicine for adults

If you are choosing a new primary care clinic, think about what is important to you and your family. Here are some things to consider:

- Cost savings to you of selecting an in-network provider
- Location

- Evening and weekend hours
- Hospital where the clinic admits patients
- Waiting time for routine care appointments
- Length of waiting room time
- Availability of nurses by phone

It is still a good idea to call the clinic with any questions you have. You can also sign in to the myBlueCross member center located at [members.bluecrossmn.com](https://members.bluecrossmn.com) and use the "find a doctor" tool. You can ask family, friends and neighbors if they have experience with the clinic and doctors you are considering.

Want to learn more about the professional qualifications of a specific health care provider? Call the provider or clinic directly.

## To see a specialist or get hospital care

Sign in to myBlueCross at [members.bluecrossmn.com](https://members.bluecrossmn.com) to view information about specialists and hospitals by using the "find a doctor" tool. You can see doctor information such as certifications, background checks and education. And for hospitals, you can check on services offered, patient safety, safe practices and others. You can also see facility-specific cost estimates for common procedures and surgeries.

### *Blue Distinction Centers for Specialty Care®*

Quality, cost and treatment results for bariatric surgery, cancer treatment, cardiac care, knee and hip replacement, spine surgery and transplants can vary greatly among health care providers. To help our members find the most effective providers for these types of care, Blue Cross and Blue Shield of Minnesota — together with the Blue Cross and Blue Shield Association\*\* and other Blue plans\* — have identified top providers nationwide. We call them Blue Distinction Centers®.

It's part of our effort to make information available to help you select the most appropriate care. Blue Cross evaluated hospitals on how well they performed against accepted standards of care. Each center's facilities and processes were thoroughly examined. Centers were also asked to show positive treatment results. Only high scorers were designated Blue Distinction Centers.

\*\* The Blue Cross and Blue Shield Association is an association of independent Blue Cross and Blue Shield plans.

## Behavioral health care providers

When you need care support for substance abuse or mental health, autism or eating disorders, you can see any of the inpatient or outpatient health care providers that are in network. To locate a provider, sign in to myBlueCross at [members.bluecrossmn.com](https://members.bluecrossmn.com) and use the “find a doctor” tool.

## How to get care after normal office hours

Call your primary care clinic. Most clinics have doctors who can help direct your care on call 24 hours a day. Some clinics offer extended evening and weekend hours. If you need to go to the hospital, your doctor will help you make arrangements. Be sure to check whether the hospital is in the network. If the hospital is not in the network, it will affect how much you have to pay.

A retail health clinic may be an option. Retail health clinics are medical clinics located inside a grocery store, pharmacy or discount store. They treat common health problems like sore throats, sinus infections, seasonal allergies, pink eye and deer tick bites. No appointment is needed and it may cost you less out of pocket than a regular clinic visit. Be sure to check if your local retail health clinic is a network provider. To find a retail health clinic, visit [members.bluecrossmn.com](https://members.bluecrossmn.com) and see “find a doctor.”

## In an emergency

If you believe that your symptoms indicate a medical emergency, get immediate care. Call 911 or go to the nearest emergency room. Benefits will be paid at the network benefit level. To receive continued benefits for follow-up care, call your primary care clinic as soon as possible (within 48 hours).

A medical emergency is a sickness or injury so serious that failure to get immediate care could put a person’s life in danger or cause serious harm. Examples are possible heart attack (severe chest pain or pressure), uncontrollable bleeding, breathing problems, poisoning and unconsciousness.

## Concerns about your plan

If you have any concerns about your health plan, please call Blue Cross at the number on the back of your member ID card. Or you can call **(651) 662-8000** or **1-800-382-2000** and ask for customer service. If you have

a concern about a medical necessity decision, you may appeal the decision by sending a written request to Blue Cross, or you may call **(651) 662-8000** or **1-800-382-2000** and ask for customer service. If you have a concern about your medical care, call your clinic directly, or call Blue Cross at the number on the back of your member ID card. The Minnesota Department of Commerce, which regulates fully insured commercial insurance in Minnesota, can be reached at **(651) 296-2488** or **1-800-657-3602**.

## Medical decisions

Decisions about health care services are based on what care is appropriate and what is included in your coverage at the time of care. Some services and supplies are not covered. All health services and supplies must be medically necessary for them to be covered. We do not reward doctors for making decisions that would result in less than appropriate care.

You have the right to request a copy of the benefit criteria, guideline or protocol used to make the denial decision, free of charge. After completing the internal Blue Cross appeal process, any member or anyone acting as an authorized representative on behalf of a member who has questions or concerns about a denial may submit a written request for an external review of the denial. The written notice of the Blue Cross appeal determination may include information about the right to external review. Check your plan for details. If an external review is included in your plan, it will be conducted by an independent organization under contract with the state of Minnesota. The written request for external review must include a filing fee of \$25, which may be waived in cases of financial hardship. Blue Cross will participate in the external review process.

## How health care coverage is determined

Who decides if new treatment or technology is covered by your health plan? Our Medical and Behavioral Health Policy Committee and their research staff. The members of this group are doctors from different specialties and one person from Blue Cross. The goal is to provide better care and protect members against unsafe or unproven treatments.

## Better care

The Blue Cross Quality Improvement (QI) program carries out many projects annually to improve members' health. The QI program has projects to improve the rates of preventive health services, such as immunizations and mammograms, reduce the occurrence of acute diseases like flu or improve the outcomes of chronic diseases such as diabetes or heart disease. It includes quality of clinical care, quality of service, patient safety and collaborative initiatives. Core documents describe our QI program, new and current projects for 2009 and evaluation of 2008 projects. If you'd like to learn more about the quality improvement program or to request copies of QI core documents, please call the customer service phone number on the back of your member ID card and ask for the Quality Improvement program.

## Clinical practice guidelines

Each year the Blue Cross Quality Council adopts guidelines that are used to support various programs and initiatives. The guidelines do not substitute for sound clinical judgment; however, they are intended to assist clinicians in understanding key processes for improvement efforts. The Institute for Clinical Systems Improvement (ICSI) is a well-recognized name in developing quality evidence-based clinical practice guidelines. ICSI has developed approximately 50 guidelines, all of which are available on its website at [icsi.org](http://icsi.org) for free. Blue Cross has also adopted guidelines from sources other than ICSI.



**BlueCross BlueShield  
of Minnesota**

An independent licensee of the Blue Cross and Blue Shield Association