

BlueAdvantage[®]

BlueValue[™]

BlueLocal[™]
with Atrium Health

BlueLocal[™]
with Wake Forest Baptist Health

BlueHome[™]
with UNC Health Alliance



2020 HEALTH PLANS | For individuals and families



WHY CHOOSE BLUE



There's a lot to think about when it comes to choosing health insurance. As the only homegrown, local insurer in all 100 counties of the state, Blue Cross and Blue Shield of North Carolina (Blue Cross NC) is here for you. With over 85 years of experience in the market and our broad range of plans¹, you can find the coverage that's right for you.

The benefits that are important for getting and staying healthy are at the core of all of our plans. Advantages of health care coverage with Blue Cross NC include:

- + No referrals needed to see a specialist
- + 24/7 Telehealth care options for behavioral and physical health, available in English and Spanish²
- + Access to a 24-hour nurse hotline
- + Convenience of 90-day prescription mail order option
- + No waiting periods for pre-existing conditions³
- + Annual wellness visits
- + Coverage in- and out-of-network
- + Programs to help you stop smoking, including counseling and nicotine replacement therapy like patches, gum, and lozenges
- + Access to Blue365® deals and discounts from top health and wellness retailers around the country⁴

Blue Cross NC offers
health insurance plans
in every county across
the state



With our plans you'll enjoy:

- + **Preventive care and essential health benefits** – For all Blue Cross NC individual plans mentioned in this brochure, preventive services are covered at no charge when you go to an in-network primary care provider (PCP).⁵ These covered services include annual exams, screenings for diabetes, mammograms and more. See [BlueCrossNC.com/Preventive](https://www.bluecrossnc.com/Preventive) for a full list of preventive care services. All Blue Cross NC plans mentioned in this brochure also provide coverage for essential health benefits including mental health, maternity, and pediatric dental/vision. For a complete list, visit [BlueCrossNC.com/Essential](https://www.bluecrossnc.com/Essential).
- + **Online member tools** – Blue ConnectSM is your gateway and guide to the tools and information you need to make the best decisions about your health care and plan. Through the Blue ConnectSM mobile app, you can access your digital member ID card, claim status, coverage details and much more.
- + **Customer service to make using insurance easier** – With our digital support options, such as secure inbox and live chat, members can gain quality resolutions in a swift and convenient manner. Our locally based customer service professionals are ready to answer your questions quickly and accurately. Our customer service options are available in both English and Spanish.
- + **Coordinated care from high-quality doctors** – With access to a network of high-quality providers, you can select and establish a relationship with a PCP to serve as your medical “home” – or the quarterback of your entire health care team. From routine preventive care to occasional sick visits, having a primary doctor can help you take better control of your health and coordinate the care you need.

Other products to complement your health plan

Blue20/20[™]
for Individuals[™]

DentalBlue[™]
for Individuals[™]

DentalBlue[™]
for Individuals[™] PPO

Blue Cross NC offers separate dental⁶ and vision⁷ plans providing coverage at an additional cost to your health plan premium. You may purchase dental or vision coverage with or without the purchase of Blue Cross NC health coverage.

Learn more at [BlueCrossNC.com/DentalBlue](https://www.bluecrossnc.com/DentalBlue) and [BlueCrossNC.com/Blue2020](https://www.bluecrossnc.com/Blue2020).





YOUR CHECKLIST

for buying health insurance

How to sign up, step-by-step:

- ✓ Enroll between November 1 and December 15, 2019 during the open enrollment period.
- ✓ Find out if you may receive a subsidy to help pay for your health insurance.⁸ Contact your local authorized Blue Cross NC agent for help.
- ✓ Check the map on the next page to see which plans are available where you live.
- ✓ Think about your health care needs. Visit [BlueCrossNC.com/FindDoctors](https://www.bluecrossnc.com/FindDoctors) to verify which doctors and hospitals are in network for the selected plan.
- ✓ Submit your application.
- ✓ Pay for your plan. Your new health insurance plan will not become effective until Blue Cross NC receives and processes your first month's premium.
- ✓ Once open enrollment ends you may be able to buy health insurance if you qualify for a special enrollment period. If you get married, have a new baby, or lose your health coverage, you may qualify.⁹ Documentation will be required.

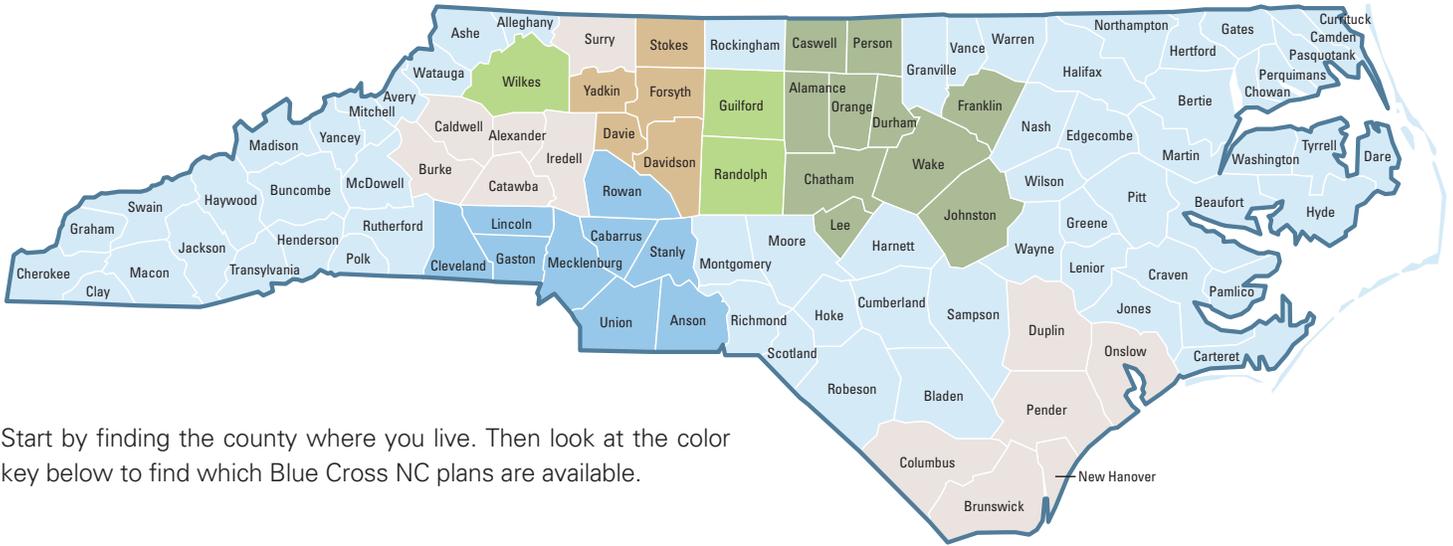
Two plan options:

Copayment plans offer a fixed copayment (or copay) for things like office visits and prescriptions. While you'll know what you're going to pay with copay plans, they come at a higher monthly premium cost. These plans are ideal for someone who wants predictable costs and doesn't mind paying more in premiums.

Deductible and coinsurance plans have lower premiums than copayment plans. If you don't expect a lot of medical expenses, this may be a good choice for you. With these plans, you pay the full cost of your medical expenses until you meet your deductible. After meeting your deductible, you will pay a coinsurance percentage for health care. This means you will share your health care costs with Blue Cross NC until you reach your out-of-pocket limit. Once you reach your out-of-pocket limit, Blue Cross NC pays all covered costs.



CHOOSE THE NETWORK that's right for you



Start by finding the county where you live. Then look at the color key below to find which Blue Cross NC plans are available.

Legend

- Blue Advantage
- Blue Value, Blue Local with Atrium Health
- Blue Advantage, Blue Value
- Blue Home with UNC Health Alliance
- Blue Advantage, Blue Value, Blue Local with Wake Forest Baptist Health
- Blue Advantage, Blue Local with Wake Forest Baptist Health

PLAN	DOCTOR AND HOSPITAL NETWORK
Blue Advantage SM	Full statewide network with the most provider choice
Blue Value SM	Limited statewide network that balances access and cost
Blue Local SM <small>with Atrium Health</small>	Local network using only Atrium Health and its affiliates
Blue Local SM <small>with Wake Forest Baptist Health</small>	Local network using only Wake Forest Baptist Health and its affiliates
Blue Home SM <small>with UNC Health Alliance</small>	Local network using only UNC Health Alliance and its affiliates

For more information

Contact your local authorized Blue Cross NC agent.

CHOOSE your plan



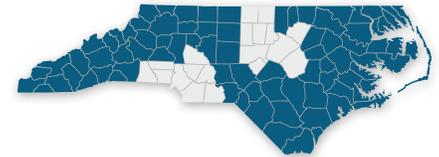
Blue Advantage®

Blue Advantage gives you access to our largest statewide network. This is a good option if you want a broad choice of in-network doctors, specialists and hospitals.

BLUE ADVANTAGE offers:

+ More than 97% of doctors and 99% of the hospitals in North Carolina are in-network¹⁰

Product Availability



■ Available ■ Not Available

Blue Advantage is available in all North Carolina counties **except**:

- + Alamance
- + Anson
- + Cabarrus
- + Caswell
- + Chatham
- + Cleveland
- + Durham
- + Franklin
- + Gaston
- + Johnston
- + Lee
- + Lincoln
- + Mecklenburg
- + Orange
- + Person
- + Rowan
- + Stanly
- + Union
- + Wake

IN-NETWORK BENEFIT				
DEDUCTIBLE & COINSURANCE PLANS*	Individual Deductible (Family=2x)	Individual Out-of-Pocket Max (Family=2x)	Coinsurance	Prescription Drug Benefit
BLUE ADVANTAGE CATASTROPHIC^{11**}	\$8,150	\$8,150	0%	Integrated ^{***}
BLUE ADVANTAGE BRONZE 8150	\$8,150	\$8,150	0%	Integrated ^{***}
BLUE ADVANTAGE BRONZE 6900¹² (HSA-ELIGIBLE)	\$6,900	\$6,900	0%	Integrated ^{***}

IN-NETWORK BENEFIT							
COPAY PLANS	Individual Deductible (Family=2x)	Individual Out-of-Pocket Max (Family=2x)	Coinsurance	Primary Care Provider Copay	Specialist/ Urgent Care Copay	Prescription Drug Deductible	Prescription Drug Benefit
BLUE ADVANTAGE BRONZE 7500	\$7,500	\$8,150	40%	\$45	\$115	\$700	\$10/\$25/\$40/ \$80/25%/35%
BLUE ADVANTAGE SILVER 7500	\$7,500	\$8,150	40%	3 x \$0/\$50	\$150	\$550	\$10/\$25/\$40/ \$80/25%/35%
BLUE ADVANTAGE SILVER 4500	\$4,500	\$8,150	30%	3 x \$0/\$10	\$50	\$350	\$10/\$25/\$40/ \$80/25%/35%
BLUE ADVANTAGE GOLD 3000	\$3,000	\$8,150	20%	3 x \$0/\$5	\$30	\$200	\$4/\$10/\$35/ \$80/25%/35%

*All covered services are subject to the deductible and coinsurance, unless otherwise noted.

**Catastrophic plans have 3 primary care provider visits at \$35 copay.

***Prescription drug costs applied to medical deductible and coinsurance.

Blue Advantage Silver 7500 not available in the following counties: Alexander, Brunswick, Burke, Caldwell, Catawba, Columbus, Duplin, Iredell, New Hanover, Onslow and Pender.

Out-of-network (OON) deductible is two times the in-network deductible. OON out-of-pocket maximum (OOPM) is two times the in-network OOPM.

Member pays 30% more coinsurance when seeking services out-of-network.

Prescription drug deductible must be met before your plan begins to pay for prescriptions.

Emergency room copay is \$500 on the Gold plan, \$650 on the Silver 4500 plan, Silver 7500 plan, and the Bronze 7500 plan after the deductible is met.

Emergency room visits are subject to deductible and coinsurance on Bronze deductible and coinsurance plans and the Catastrophic plan.

PCP Step Down Benefits available for Gold and Silver Metallic co-pay Plans only: 3 x \$0 for any combo of PCP office and/or telehealth visits, followed by standard PCP benefit (at the member level); 3 x \$0 Mental Health (MA)/Substance Abuse (SA) for any combo of MH/SA office and/or telehealth visits, followed by standard benefit (at the member level).

PCP/Telehealth cannot be combined with MH/SA visits.

BlueValue™

Blue Value is a good fit if you are flexible about which doctors you see – or if your doctor or hospital is part of this smaller network. The network is statewide, making it easy to get in-network care if you travel or have a child away at college.

BLUE VALUE offers:

- + A limited statewide network for savings
- + Network includes, but is not limited to, CaroMont Health, Frye Regional, New Hanover Regional, Novant Health, UNC Health Alliance and Wake Forest Baptist Health
- + The following doctor/hospital networks are considered out-of-network for Blue Value: Atrium Health, Catawba Valley Health System, Duke Health and WakeMed

Product Availability



■ Available ■ Not Available

Blue Value is available to residents of these North Carolina counties:

- + Alexander
- + Anson
- + Brunswick
- + Burke
- + Cabarrus
- + Caldwell
- + Catawba
- + Cleveland
- + Columbus
- + Davidson
- + Davie
- + Duplin
- + Forsyth
- + Gaston
- + Iredell
- + Lincoln
- + Mecklenburg
- + New Hanover
- + Onslow
- + Pender
- + Rowan
- + Stanly
- + Stokes
- + Surry
- + Union
- + Yadkin

IN-NETWORK BENEFIT				
DEDUCTIBLE & COINSURANCE PLANS*	Individual Deductible (Family=2x)	Individual Out-of-Pocket Max (Family=2x)	Coinsurance	Prescription Drug Benefit
BLUE VALUE CATASTROPHIC^{11**}	\$8,150	\$8,150	0%	Integrated ^{***}
BLUE VALUE BRONZE 8150	\$8,150	\$8,150	0%	Integrated ^{***}
BLUE VALUE BRONZE 6900¹² (HSA-ELIGIBLE)	\$6,900	\$6,900	0%	Integrated ^{***}

IN-NETWORK BENEFIT							
COPAY PLANS	Individual Deductible (Family=2x)	Individual Out-of-Pocket Max (Family=2x)	Coinsurance	Primary Care Provider Copay	Specialist/ Urgent Care Copay	Prescription Drug Deductible	Prescription Drug Benefit
BLUE VALUE BRONZE 7500	\$7,500	\$8,150	40%	\$45	\$115	\$700	\$10/\$25/\$40/ \$80/25%/35%
BLUE VALUE SILVER 7500	\$7,500	\$8,150	40%	3 x \$0/\$50	\$150	\$550	\$10/\$25/\$40/ \$80/25%/35%
BLUE VALUE SILVER 4500	\$4,500	\$8,150	30%	3 x \$0/\$10	\$50	\$350	\$10/\$25/\$40/ \$80/25%/35%
BLUE VALUE GOLD 3000	\$3,000	\$8,150	20%	3 x \$0/\$5	\$30	\$200	\$4/\$10/\$35/ \$80/25%/35%

*All covered services are subject to the deductible and coinsurance, unless otherwise noted.

**Catastrophic plans have 3 primary care provider visits at \$35 copay.

*** Prescription drug costs applied to medical deductible and coinsurance. Out-of-network (OON) deductible is five times the in-network deductible.

Blue Value Silver 4500 not available in the following counties: Alexander, Brunswick, Burke, Caldwell, Catawba, Columbus, Duplin, Iredell, New Hanover, Onslow and Pender.

OON out-of-pocket (OOP) limit has no maximum. This means you will always pay your OON coinsurance amount to an OON provider.

Member pays 30% more coinsurance when seeking services out-of-network.

Prescription drug deductible must be met before your plan begins to pay for prescriptions.

Emergency room copay is \$500 on the Gold plan, \$650 on the Silver 4500 plan, Silver 7500 plan, and the Bronze7500 plan after the deductible is met. Emergency room visits are subject to deductible and urance on Bronze deductible and coinsurance plans and the Catastrophic plan.

PCP Step Down Benefits available for Gold and Silver Metallic co-pay Plans only: 3 x \$0 for any combo of PCP office and/or telehealth visits, followed by standard PCP benefit (at the member level); 3 x \$0 Mental Health (MA)/Substance Abuse (SA) for any combo of MH/SA office and/or telehealth visits, followed by standard benefit (at the member level).

PCP/Telehealth cannot be combined with MH/SA visits.

Blue Local with Atrium Health¹³ is a good option if you wish to get care from Atrium Health (and its affiliated doctors and hospitals). Since the majority of doctors in this plan are in the same health care system, it's easier for them to work together on your behalf.

BLUE LOCAL with Atrium Health offers:

- + Atrium Health's smaller, local network of hospitals and providers
- + A provider network that includes Atrium Health Levine's Children's Hospital, which is nationally ranked in seven specialties;¹⁴ Carolinas Medical Center, the region's only Level 1 trauma center, which was named the "Best Hospital" in the Charlotte metro region for the third straight year,¹⁵ and more than 200 primary care and urgent care locations¹⁶
- + The following doctor/hospital networks are considered out-of-network for Blue Local with Atrium Health: Novant Health and CaroMont Health

Product Availability



■ Available ■ Not Available

Blue Local with Atrium Health is available to residents of these metro-Charlotte area counties:

- + Anson
- + Cabarrus
- + Cleveland
- + Gaston
- + Lincoln
- + Mecklenburg
- + Rowan
- + Stanly
- + Union

IN-NETWORK BENEFIT				
DEDUCTIBLE & COINSURANCE PLANS*	Individual Deductible (Family=2x)	Individual Out-of-Pocket Max (Family=2x)	Coinsurance	Prescription Drug Benefit
BLUE LOCAL WITH ATRIUM HEALTH CATASTROPHIC^{11**}	\$8,150	\$8,150	0%	Integrated ^{***}
BLUE LOCAL WITH ATRIUM HEALTH BRONZE 8150	\$8,150	\$8,150	0%	Integrated ^{***}
BLUE LOCAL WITH ATRIUM HEALTH BRONZE 6900¹² (HSA-ELIGIBLE)	\$6,900	\$6,900	0%	Integrated ^{***}

IN-NETWORK BENEFIT							
COPAY PLANS	Individual Deductible (Family=2x)	Individual Out-of-Pocket Maximum (Family=2x)	Coinsurance	Primary Care Provider Copay	Specialist/ Urgent Care Copay	Prescription Drug Deductible	Prescription Drug Benefit
BLUE LOCAL WITH ATRIUM HEALTH BRONZE 7500	\$7,500	\$8,150	40%	\$45	\$115	\$700	\$10/\$25/\$40/ \$80/25%/35%
BLUE LOCAL WITH ATRIUM HEALTH SILVER 7500	\$7,500	\$8,150	40%	3 x \$0/\$50	\$150	\$550	\$10/\$25/\$40/ \$80/25%/35%
BLUE LOCAL WITH ATRIUM HEALTH SILVER 4500	\$4,500	\$8,150	30%	3 x \$0/\$10	\$50	\$350	\$10/\$25/\$40/ \$80/25%/35%
BLUE LOCAL WITH ATRIUM HEALTH GOLD 3000	\$3,000	\$8,150	20%	3 x \$0/\$5	\$30	\$200	\$4/\$10/\$35/ \$80/25%/35%

*All covered services are subject to the deductible and coinsurance, unless otherwise noted.
 **Catastrophic plans have 3 primary care provider visits at \$35 copay. See benefit booklet for further information.
 ***Prescription drug costs applied to medical deductible and coinsurance. Out-of-network (OON) deductible is five times the in-network deductible. OON out-of-pocket (OOP) limit has no maximum. This means you will always pay your OON coinsurance amount to an OON provider.
 Member pays 30% more coinsurance when seeking services out-of-network. Prescription drug deductible must be met before your plan begins to pay for prescriptions. Emergency room copay is \$500 on the Gold plan, \$650 on the Silver 4500 plan, Silver 7500 plan, and the Bronze 7500 plan after the deductible is met. Emergency room visits are subject to deductible and coinsurance on Bronze deductible and coinsurance plans and the Catastrophic plan.
 PCP Step Down Benefits available for Gold and Silver Metallic co-pay Plans only: 3 x \$0 for any combo of PCP office and/or telehealth visits, followed by standard PCP benefit (at the member level); 3 x \$0 Mental Health (MA)/Substance Abuse (SA) for any combo of MH/SA office and/or telehealth visits, followed by standard benefit (at the member level).
 PCP/Telehealth cannot be combined with MH/SA visits.

Blue Local with Wake Forest Baptist Health¹⁷ is a good option if you wish to get care from Wake Forest Baptist Health and its affiliated doctors and hospitals. Since the majority of doctors in this plan are in the same system, it's easier for them to work together on your behalf.

BLUE LOCAL with Wake Forest Baptist Health offers:

- + Wake Forest Baptist Health's local network of hospitals and providers
- + A provider network that includes Wake Forest Baptist hospital, an academic medical center, four community hospitals, Brenner Children's Hospital, more than 300 primary care and specialty clinics, and one of only 49 comprehensive cancer centers in the country¹⁸
- + The following doctor/hospital networks are considered out-of-network for Blue Local with Wake Forest Baptist Health: Novant Health and Cone Health

Product Availability



■ Available ■ Not Available

Blue Local with Wake Forest Baptist Health is available to residents of these counties:

- + Davidson
- + Davie
- + Forsyth
- + Guilford
- + Randolph
- + Stokes
- + Wilkes
- + Yadkin

IN-NETWORK BENEFIT				
DEDUCTIBLE & COINSURANCE PLANS*	Individual Deductible (Family=2x)	Individual Out-of-Pocket Max (Family=2x)	Coinsurance	Prescription Drug Benefit
BLUE LOCAL WITH WAKE FOREST BAPTIST HEALTH CATASTROPHIC^{11***}	\$8,150	\$8,150	0%	Integrated***
BLUE LOCAL WITH WAKE FOREST BAPTIST HEALTH BRONZE 8150	\$8,150	\$8,150	0%	Integrated***
BLUE LOCAL WITH WAKE FOREST BAPTIST HEALTH BRONZE 6900¹² (HSA-ELIGIBLE)	\$6,900	\$6,900	0%	Integrated***

IN-NETWORK BENEFIT							
COPAY PLANS	Individual Deductible (Family=2x)	Individual Out-of-Pocket Maximum (Family=2x)	Coinsurance	Primary Care Provider Copay	Specialist/ Urgent Care Copay	Prescription Drug Deductible	Prescription Drug Benefit
BLUE LOCAL WITH WAKE FOREST BAPTIST HEALTH BRONZE 7500	\$7,500	\$8,150	40%	\$45	\$115	\$700	\$10/\$25/\$40/ \$80/25%/35%
BLUE LOCAL WITH WAKE FOREST BAPTIST HEALTH SILVER 7500	\$7,500	\$8,150	40%	3 x \$0/\$50	\$150	\$550	\$10/\$25/\$40/ \$80/25%/35%
BLUE LOCAL WITH WAKE FOREST BAPTIST HEALTH SILVER 4500	\$4,500	\$8,150	30%	3 x \$0/\$10	\$50	\$350	\$10/\$25/\$40/ \$80/25%/35%
BLUE LOCAL WITH WAKE FOREST BAPTIST HEALTH GOLD 3000	\$3,000	\$8,150	20%	3 x \$0/\$5	\$30	\$200	\$4/\$10/\$35/ \$80/25%/35%

*All covered services are subject to the deductible and coinsurance, unless otherwise noted.

**Catastrophic plans have 3 primary care provider visits at \$35 copay. See benefit booklet for further information.

***Prescription drug costs applied to medical deductible and coinsurance. Out-of-network (OON) deductible is five times the in-network deductible.

OON out-of-pocket (OOP) limit has no maximum. This means you will always pay your OON coinsurance amount to an OON provider.

Member pays 30% more coinsurance when seeking services out-of-network. Prescription drug deductible must be met before your plan begins to pay for prescriptions.

Emergency room copay is \$500 on the Gold plan, \$650 on the Silver 4500 plan, Silver 7500 plan, and the Bronze 7500 plan after the deductible is met.

Emergency room visits are subject to deductible and coinsurance on Bronze deductible and coinsurance plans and the Catastrophic plan.

PCP Step Down Benefits available for Gold and Silver Metallic co-pay Plans only: 3 x \$0 for any combo of PCP office and/or telehealth visits, followed by standard PCP benefit (at the member level); 3 x \$0 Mental Health (MA)/Substance Abuse (SA) for any combo of MH/SA office and/or telehealth visits, followed by standard benefit (at the member level).

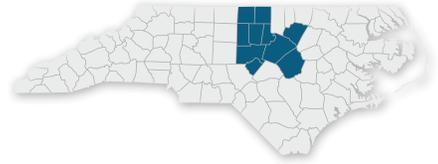
PCP/Telehealth cannot be combined with MH/SA visits.

Blue Home with UNC Health Alliance¹⁹ is a good option if you wish to get care from UNC Health Care’s provider network, UNC Health Alliance, and its affiliated doctors and hospitals. Since the majority of doctors in this plan are in the same network, it’s easier for them to work together on your behalf.

BLUE HOME with UNC Health Alliance offers:

- + UNC Health Alliance’s network of hospitals and providers, including over 860 primary care providers²⁰
- + A provider network that includes UNC Medical Center, nationally ranked in 5 adult and 7 pediatric specialties by *U.S. News*, along with UNC Rex, rated by *U.S. News* as high performing in 9 adult procedures and conditions²¹
- + The following doctor/hospital networks are considered out-of-network for Blue Home with UNC Health Alliance: Duke Health, WakeMed and Cone Health

Product Availability



■ Available ■ Not Available

Blue Home with UNC Health Alliance is available to residents of these counties:

- + Alamance
- + Caswell
- + Chatham
- + Durham
- + Franklin
- + Johnston
- + Lee
- + Orange
- + Person
- + Wake

IN-NETWORK BENEFIT				
DEDUCTIBLE & COINSURANCE PLANS*	Individual Deductible (Family=2x)	Individual Out-of-Pocket Max (Family=2x)	Coinsurance	Prescription Drug Benefit
BLUE HOME WITH UNC HEALTH ALLIANCE CATASTROPHIC^{11**}	\$8,150	\$8,150	0%	Integrated ^{***}
BLUE HOME WITH UNC HEALTH ALLIANCE BRONZE 8150	\$8,150	\$8,150	0%	Integrated ^{***}
BLUE HOME WITH UNC HEALTH ALLIANCE BRONZE 6900¹² (HSA-ELIGIBLE)	\$6,900	\$6,900	0%	Integrated ^{***}

IN-NETWORK BENEFIT							
COPAY PLANS	Individual Deductible (Family=2x)	Individual Out-of-Pocket Maximum (Family=2x)	Coinsurance	Primary Care Provider Copay	Specialist/ Urgent Care Copay	Prescription Drug Deductible	Prescription Drug Benefit
BLUE HOME WITH UNC HEALTH ALLIANCE BRONZE 7500	\$7,500	\$8,150	40%	\$45	\$115	\$700	\$10/\$25/\$40/ \$80/25%/35%
BLUE HOME WITH UNC HEALTH ALLIANCE SILVER 7500	\$7,500	\$8,150	40%	3 x \$0/\$50	\$150	\$550	\$10/\$25/\$40/ \$80/25%/35%
BLUE HOME WITH UNC HEALTH ALLIANCE SILVER 4500	\$4,500	\$8,150	30%	3 x \$0/\$10	\$50	\$350	\$10/\$25/\$40/ \$80/25%/35%
BLUE HOME WITH UNC HEALTH ALLIANCE GOLD 3000	\$3,000	\$8,150	20%	3 x \$0/\$5	\$30	\$200	\$4/\$10/\$35/ \$80/25%/35%

*All covered services are subject to the deductible and coinsurance, unless otherwise noted.

**Catastrophic plans have 3 primary care provider visits at \$35 copay. See benefit booklet for further information.

***Prescription drug costs applied to medical deductible and coinsurance. Out-of-network (OON) deductible is five times the in-network deductible.

OON out-of-pocket (OOP) limit has no maximum. This means you will always pay your OON coinsurance amount to an OON provider.

Member pays 30% more coinsurance when seeking services out-of-network. Prescription drug deductible must be met before your plan begins to pay for prescriptions.

Emergency room copay is \$500 on the Gold plan, \$650 on the Silver 4500 plan, Silver 7500 plan, and the Bronze 7500 plan after the deductible is met.

Emergency room visits are subject to deductible and coinsurance on Bronze deductible and coinsurance plans and the Catastrophic plan.

PCP Step Down Benefits available for Gold and Silver Metallic co-pay Plans only: 3 x \$0 for any combo of PCP office and/or telehealth visits, followed by standard PCP benefit (at the member level); 3 x \$0 Mental Health (MA)/Substance Abuse (SA) for any combo of MH/SA office and/or telehealth visits, followed by standard benefit (at the member level).

PCP/Telehealth cannot be combined with MH/SA visits.

SUBSIDIES

See if you qualify⁸

To help make health insurance more affordable, the federal government offers financial assistance, also called subsidies, to individuals and families who qualify based on their income and household size.

To qualify for a subsidy under health care reform, you must:

- + Be between 100% and 400% of the Federal Poverty Level (FPL).
- + Not be eligible for public coverage, such as Medicaid, the Children’s Health Insurance Program (CHIP), Medicare or coverage through the armed services.
- + Not have affordable* access to insurance through an employer.

There are two types of subsidies available:

Advanced Premium Tax Credit (APTC)

- + FPL range between 100-400%
- + These subsidies reduce the monthly cost of a health insurance plan for those who qualify.

Cost Sharing Reductions (CSRs)

- + FPL range between 100-250%
- + These subsidies reduce the out of pocket costs for those who qualify.⁹

Federal Poverty Level (FPL) guidelines²²

HOUSEHOLD SIZE	ANNUAL HOUSEHOLD INCOME		
	100% FPL	250% FPL	400% FPL
1	\$12,490	\$31,225	\$49,960
2	\$16,910	\$42,275	\$67,640
3	\$21,330	\$53,325	\$85,320
4	\$25,750	\$64,375	\$103,000
5	\$30,170	\$75,425	\$120,680
6	\$34,590	\$86,475	\$138,360

For more info

Contact your local authorized Blue Cross NC agent.

* "Affordable" is defined yearly by the federal marketplace based on the percentage of premium an employee is responsible for.





WORDS you'll want to know

Affordable Care Act (ACA) – Law intended to address issues with our health care system.

Allowed amount – The maximum amount that Blue Cross NC determines is reasonable for covered services provided to a member. The allowed amount includes any Blue Cross NC payment to the provider, plus any deductible, coinsurance or copayment.

Benefit period – The specified period of time during which charges for covered services provided to a member must be incurred in order to be eligible for payment.

Coinsurance – When you pay a percentage of the cost of a covered service, after you've met your deductible.

Copayment – A fixed dollar amount you may pay for a covered service at the time you receive it. Copayments can vary depending on the service.

Deductible – The amount you or your family owe for certain covered services during a benefit period before your health insurance begins to pay.

Federal Poverty Level (FPL) – An index of income level (by family size) that determines eligibility for premium tax credits.

Integrated prescription drug benefits – Your prescription drug benefits are subject to the same deductible and coinsurance as other medical services.

Marketplace – The Federal Marketplace is an online insurance marketplace where individuals can compare and buy qualified health insurance plans. Visit healthcare.gov.

Member – A member is a person in a health plan; someone with insurance coverage.

Network – The hospitals, doctors, pharmacies and other providers your health insurer or plan has contracted with to provide health care services.

Open Enrollment – The time period when you can sign up for health insurance.

Out-of-pocket limit – The maximum you will pay from your own funds for covered services in a benefit period. Once met, Blue Cross NC will pay 100% of your remaining covered services. Deductibles, copayments and coinsurance for covered medical and drug benefits apply to this limit. Premiums and non-covered services, as well as out-of-network charges beyond the allowed amount, do not apply.

Outpatient – Person who gets hospital care but is not admitted to the hospital.

PCP step-down benefits – A certain number of visits are covered at a lower copay. After the visit limit has been reached, any additional visits are covered at a different copay amount. For example: in 2020 Gold and Silver copay plans, members will have 3 \$0 visits to a PCP; after 3 visits, standard PCP copay applies. Also, members on Gold and Silver plans will have 3 \$0 visits for mental health and/or substance abuse office visits; after 3 visits, standard copay applies.

Premium – A premium is the monthly payment made to Blue Cross NC to keep your health benefit plan active.

Primary Care Provider (PCP) – A physician, nurse practitioner, nurse specialist or physician assistant who provides or coordinates health care for patients.

Special Enrollment Period – A time outside the yearly Open Enrollment Period when you can sign up for health insurance based on certain life events, including losing health coverage, moving, getting married, having a baby or adopting a child.

Subsidies – Available from the federal government to help low- and middle-income Americans with their health insurance costs.

Limitations & Exclusions

Like most health care plans, Blue Advantage, Blue Local with Atrium Health, Blue Local with Wake Forest Baptist Health, Blue Home with UNC Health Alliance and Blue Value have some limitations and exclusions. Once you're enrolled, a Member Guide will be made available to you. It will contain detailed information about your plan benefits, exclusions and limitations.

This is a partial list of benefits and services that are not covered:

- + Services for or related to assisted reproductive technology or for reversal of sterilization
- + Treatment of sexual dysfunction not related to organic disease
- + Services that are investigational in nature or obsolete, including any service, drugs, procedure or treatment directly related to an investigational treatment, except as specifically covered by this health benefit plan
- + Side effects and complications of non-covered services, except for emergency services in the case of an emergency
- + Services that are not medically necessary
- + Dental services provided in a hospital, except as specifically covered by your health benefit plan
- + Services or expenses that are covered by any governmental unit except as required by federal law
- + Services received from an employer-sponsored dental or medical department
- + Services received or hospital stays before (or after) the effective dates of coverage
- + Custodial care, domiciliary care or rest cures
- + Eyeglasses or contact lenses or refractive eye surgery, except as specifically covered by your health benefit plan
- + Routine eye examinations for adults
- + Services for cosmetic purposes, except as specifically covered by this health benefit plan

- + Services for routine foot care that is palliative or cosmetic
- + Travel, except as covered by your health benefit plan
- + Inpatient admissions that are primarily for physical therapy, diagnostic studies or environmental change
- + Services that are rendered by or on the direction of those other than doctors, hospitals, facility and professional providers
- + For any condition suffered as a result of any act of war or while on active or reserve military duty
- + Services for which a charge is not normally made in the absence of insurance, or services provided by an immediate relative
- + Non-prescription drugs, except as specifically covered by your health benefit plan
- + Prescription drugs or refills which exceed the maximum supply
- + Personal hygiene, comfort and/or convenience items
- + Telephone consultations not provided through telehealth benefits, charges for failure to keep a scheduled visit, charges for completion of a claim form, charges for obtaining medical records and late payment charges
- + Services primarily for educational purposes
- + Services not specifically listed as covered services

Your coverage will automatically renew. Your coverage may be canceled by Blue Cross NC for fraud or intentional misrepresentation of material fact on your application or for nonpayment of premiums. Coverage for dependent children ends at the end of the month they become age 26. Members will be notified 30 days in advance of any change in coverage. The policy form number for Blue Value, Blue Local with Wake Forest Baptist Health, Blue Local with Atrium Health, and Blue Home with UNC Health Alliance is **ACAPOS-I, 5/19**. The policy form number for Blue Advantage is **NGFPPO-I, 5/19**. This brochure contains a summary of the benefits only. It is not your insurance policy. Your policy and application are your contract. If there is any difference between this brochure and the policy, the provisions of the policy will control. Visit BlueCrossNC.com for more information.

Footnotes

- 1 All information discussed in this brochure pertains to Blue Cross NC individual-market, medical health insurance plans that are eligible for sale in 2020 and meet Affordable Care Act guidelines. The information contained does not apply to plans that are transitional, group, dental-only or other plan types. All details regarding plan benefits and design contained herein are for informational purposes only. Please see the product benefit booklet for all terms and conditions that apply.
- 2 Telehealth benefits available to all plans either from Blue Cross NC or through the provider network. Blue Cross NC provides the telehealth program for your convenience and is not liable in any way for the goods or services received. Blue Cross NC reserves the right to discontinue or change the program at any time without prior notice. Decisions regarding your care should be made with the advice of a doctor. Depending on your plan, selected programs may not be available to you at this time. Check with Blue Cross NC Customer Service to determine your eligibility. Blue Cross NC has contracted with a third-party vendor independent from Blue Cross NC to bring you telehealth benefits.
- 3 Eligibility requirements apply. See benefit booklet for details.
- 4 Blue365® offers access to savings on items that Members may purchase directly from independent vendors, which are different from items that are covered under the policies with your Blue Cross NC. Any disputes regarding these products and services may be subject to the Blue Cross NC grievance process. Blue Cross and Blue Shield Association (BCBSA) may receive payments from Blue365 vendors. BCBSA does not recommend, endorse, warrant or guarantee any specific Blue365 vendor or item.
- 5 Preventive care services as defined by recent federal regulations are covered at no charge to you. Coverage for certain preventive care services (such as routine physical exams, well-baby and well-child care and immunizations) is limited to in-network benefits only. However, state-mandated preventive services are available out-of-network, for which members will pay deductible and coinsurance, plus charges over the allowed amount. Visit BlueCrossNC.com/Preventive for more details.
- 6 The Dental Blue for Individuals core plan has a six-month waiting period for basic services and a 12-month waiting period for major services.
- 7 There are no waiting periods on the Dental Blue for Individuals PPO preventive plan. Dental Blue for Individuals is not part of the covered health insurance benefits of any Blue Cross NC plan. Dental Blue for Individuals must be purchased separately. For costs and further details about Dental Blue for Individuals, including exclusions or limitations and terms under which the policy may be continued in force, contact Blue Cross NC or visit BlueCrossNC.com/DentalBlue.
- 8 Blue 20/20 for Individuals is not part of the covered health insurance benefits of any Blue Cross NC plan. Blue 20/20 for Individuals must be purchased separately. For costs and further details about Blue 20/20 for Individuals, including exclusions or limitations and terms under which the policy may be continued in force, contact Blue Cross NC or visit BlueCrossNC.com/Blue2020.
- 9 Subsidies only available for plans purchased through the federal health insurance Marketplace. Eligibility for and actual amount of any subsidy is determined by the federal Marketplace. Visit healthcare.gov for more information.
- 10 You must have a qualifying life event to enroll in a plan through the Marketplace outside of the open enrollment period. The federal Marketplace determines if you qualify.
- 11 Blue Cross NC Provider Internal Data; Percentages indicated represent Blue Cross NC's PPO Network as of July 8, 2019. Note: Not all plans are available in all areas.
- 12 You must be under 30 years of age when the plan begins or qualify for a hardship exemption through the federal government to be eligible for a Catastrophic plan. Visit <https://www.healthcare.gov/health-coverage-exemptions/2019-exemptions-catastrophic-coverage> for more details.
- 13 Members on a family HSA plan will have a family member deductible and a family total deductible. Any member of the family will only have to pay the family member amount to meet their deductible.
- 14 Blue Cross NC has collaborated with Atrium Health. Blue Local with Atrium Health is a health insurance plan offered by Blue Cross NC that provides access to Atrium Health's limited network of providers. Atrium Health is an independent company and is solely responsible for the physicians and medical facilities it owns/operates and does not offer Blue Cross NC products or services.
- 15 U.S. News & World Report, <http://health.usnews.com/best-hospitals/area/nc/levine-childrens-hospital-PAG360280> (Accessed June 2019).
- 16 Atrium Health, <https://atriumhealth.org/about-us/newsroom/news/2019/07/atrium-healths-carolinas-medical-center-named-best-hospital-in-charlotte> (Accessed July 2019).
- 17 Atrium Health, <https://atriumhealth.org/about-us> (Accessed July 2019).
- 18 Blue Cross NC has collaborated with Wake Forest Baptist Health to bring you Blue Local with Wake Forest Baptist Health. Blue Local with Wake Forest Baptist Health is a health insurance plan offered by Blue Cross NC that provides access to a limited network of providers. Wake Forest Baptist Health is an independent company that is solely responsible for the physicians and medical facilities it owns and operates. Wake Forest Baptist Health does not offer BlueCross or Blue Shield products or services.
- 19 Wake Forest Baptist Health, <https://newsroom.wakehealth.edu/-/media/WakeForest/Newsroom/Files/STATSJanuary2019.pdf> (Accessed July 2019)
- 20 Blue Cross NC has collaborated with UNC Health Care to bring you Blue Home with UNC Health Alliance. Blue Home with UNC Health Alliance is a health insurance plan offered by Blue Cross NC that provides access to a limited network of providers. UNC Health Care is an independent company that is solely responsible for the physicians and medical facilities it owns and operates. UNC Health Care does not offer Blue Cross or Blue Shield products or services.
- 21 UNC Health Care, <https://www.unhealthcare.org/health-alliance/> (Accessed July 2019).
- 22 UNC Health Care, <http://news.unhealthcare.org/news/2019/july/unc-health-care-hospitals-nationally-ranked-by-u-s-news-world-report> (Accessed August 2019).
- 23 U.S. Department of Health & Human Services, <https://aspe.hhs.gov/poverty-guidelines> (Accessed June 2019). These 2019 FPL guidelines are for the 48 contiguous states and Washington, D.C.

Non-Discrimination and Accessibility Notice

Blue Cross and Blue Shield of North Carolina (Blue Cross NC) provides:

- Free aids and services to people with disabilities to communicate effectively with us, such as: qualified interpreters and/or written information in other formats (large print, accessible electronic formats, etc.)
- Free language services to people whose primary language is not English, such as: qualified interpreters and/or information written in other languages

If you need these services, call the Customer Service or TTY number on the back of your member ID card.

If you believe that Blue Cross NC has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with:

Blue Cross NC, P.O. Box 2291, Durham, NC 27702
Attention: Civil Rights Coordinator-Privacy,
Ethics & Corporate Policy Office
Call: 919-765-1663, 1-888-291-1783 (TTY)
Fax: 919-287-5613
Email: civilrightscoordinator@bcbsnc.com

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, the Civil Rights Coordinator-Privacy, Ethics & Corporate Policy Office is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at:

Online: <https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf>
Mail: U.S. Department of Health & Human Services
200 Independence Avenue, SW Room 509F
HHH Building Washington, D.C., 20201
Call: 1-800-368-1019, 1-800-537-7697 (TDD)
Complaint forms are available online at:
<http://www.hhs.gov/civil-rights/filing-a-complaint/index.html>

This notice and/or attachments may have important information about your application or coverage through Blue Cross NC. Look for key dates. You may need to take action by certain deadlines to keep your health coverage or help with costs. You have the right to get this information and help in your language at no cost. If you need these services, call the Customer Service or TTY number on the back of your member ID card.

Discrimination is Against the Law

Blue Cross NC complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex.

Blue Cross NC does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.



EASY STEPS to enroll

It's easy to apply for coverage!

Step 1

Contact your local authorized Blue Cross NC agent.* He or she will be happy to help you complete the application and select a plan.

Step 2

Your policy will not become effective until your first month's premium payment has been received and processed.

Step 3

Once your payment has been received and processed, your ID card will be mailed to you. After your effective date, register for a Blue Connect account to manage your plan and access the information you need to make the best health care decisions for you and your family.

Open enrollment is between November 1 and December 15, 2019

Open enrollment is the only time you know for certain you can buy health insurance. **You must apply by December 15 to get coverage that starts January 1, 2020.**

Once open enrollment ends, you may be able to buy health insurance during a *special enrollment period* if you have a certain life event. For example, if you get married, have a new baby or lose your health coverage, you may qualify.⁹ Documentation will be required.

To be eligible for coverage, you must be a North Carolina resident and not be enrolled in Medicare.

For more info

Contact your local authorized Blue Cross NC agent.

*Importance of Using Authorized Agents: Independent agents must satisfy the requirements of the Centers for Medicare and Medicaid Services and be authorized by Blue Cross and Blue Shield of North Carolina to sell, solicit and negotiate products and services. Blue Cross and Blue Shield of North Carolina only recognizes independent agents who have satisfied these requirements as a customer's Agent of Record. Blue Cross and Blue Shield of North Carolina does not provide training or support services to unauthorized independent agents.

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