

Classic Blue Frequently Asked Questions

1. **Question:** Why is my current medical coverage changing to the Classic Blue product?
Answer: Your current indemnity product will be discontinued. We are replacing that product with a new indemnity product that is very similar to your current plan. The majority of the benefits will remain unchanged; however, we have added some enhancements.

2. **Question:** What are some of the benefit changes I can expect with Classic Blue?
Answer: Some of the benefit changes that can be expected with the Classic Blue product:
 - Annual routine physicals will be covered in full.
 - Medically appropriate adult immunizations will be covered in full.
 - Mental health care, chemical dependence and abuse rehabilitation will be covered in full, with no limits under the basic benefits.
 - There will be a new out-of-pocket maximum of \$200 individual/ \$600 family on the enhanced medical benefits rider. This means that after \$200 in coinsurance for individuals, \$400 for two persons and \$600 coinsurance for families have been met, services falling under deductible and coinsurance will be covered in full.

- For further detail regarding your benefits coverage, please contact Customer Service at 1 (800) 847-1200.

3. **Question:** When can I expect this change to take effect?
Answer: Your new Classic Blue benefits are effective January 1, 2011.

4. **Question:** Will my identification number be the same?
Answer: Yes, your nine-digit member identification number will remain unchanged; however, the three-letter prefix preceding your identification number **will** change, so please dispose of any old member ID cards and begin using your new card starting January 1, 2011.

5. **Question:** Will my new member identification cards look different from my current cards?
Answer: Yes, your new medical ID card will be made of a durable plastic material. In addition, covered dependents will not be listed on the card. This information is recorded in our internal systems. Please be assured that no changes will be made to their status.

6. **Question:** How many identification cards will I receive?
Answer: You will receive two plastic identification cards. If additional cards are required, you may order them through our Customer Service Department at 1 (800) 847-1200 or our website at myexcellusplan.com/feh.

7. **Question:** Will I receive any additional correspondence?
Answer: Yes, you will still receive several additional communications from us:
 - Your new plastic medical ID cards effective January 1, 2011.
 - Your new Classic Blue Subscriber Certificate, containing the detail of your specific benefit plan.
 - A Certificate of Coverage form outlining the time period of the coverage under your previous plan(s).

8. **Question:** What is a Certificate of Coverage and why am I getting it?
Answer: Your health insurance coverage was transferred from one claims processing system to another. To provide you with evidence of continued health insurance coverage for the time period prior to the effective date of your Classic Blue coverage, you will receive a Certificate of Coverage within the next several days. A Certificate of Coverage is a requirement of the NYS Insurance Department. It provides proof of coverage for members who have experienced any lapse in health insurance coverage. The COC you will receive will act as your proof of coverage as we transition your group from the old indemnity plan to the new Classic Blue plan.

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9. **Question:** Will correspondence that I receive about paid claims look different than what I am receiving now?
Answer: Yes, your Explanation of Benefits form will be different from what you presently receive. The EOB will be issued to the subscriber and will have the patient's name indicated.
10. **Question:** What will happen if my provider submits a claim in 2011 under my old plan information?
Answer: The claim will be denied and the provider will have to resubmit the claim with the correct member ID (including your new three-letter prefix). Please remember, it is very important that you show your new member ID card to any provider beginning January 1, 2011.
11. **Question:** What is included with the new covered in full routine adult physical benefit?
Answer: We will provide coverage for adult routine physical examinations, limited to one per adult member, per calendar year. We will also provide coverage for any laboratory, pathology, X-ray or other imaging services provided in connection with the routine examination.
12. **Question:** Does my new product have the HealthyRewards program or the lifestyle (gym reimbursement) benefit?
Answer: No, the Classic Blue product does not have the HealthyRewards program or lifestyle benefit; however, you do have access to Blue365[®]. Blue365 is a national program that is part of your membership. It gives you exclusive access to information, discounts, and savings, making it easier and more affordable to make healthy choices.
13. **Question:** What adult immunizations will be covered under Classic Blue?
Answer: We will provide coverage for adult (ages 19 years and older) immunizations when medically necessary, in accordance with prevailing medical standards. The preventive care of adults guideline includes immunization schedules and information for persons at "usual risk" and "at risk."
The following immunizations are currently included in the recommendations:
- Diphtheria-tetanus-pertussis
 - Hepatitis A
 - Hepatitis B
 - Human papilloma virus (Cervarix, Gardasil)
 - Influenza (seasonal)
 - Influenza A (novel H1N1, swine)
 - Measles, mumps, rubella
 - Meningococcal
 - Pneumococcal
 - Varicella
 - Varicella zoster (shingles)
14. **Question:** How can I locate a participating provider?
Answer: You can locate a participating provider by visiting our website at myexcellusplan.com/feh or by contacting our Customer Service Department at 1 (800) 847-1200. To easily find care when you're away from home, call 1 (800) 810-BLUE (2583) or visit bcbs.com.
15. **Question:** If I am retired and on Medicare, how will this change affect me?
Answer: Medicare will still be primary for all medical claims. Your benefits will be the same as the active employees and detailed on the attached summary of benefits.

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16. **Question:** If I am retired and eligible for Medicare, do I still need Medicare Part A and Part B?
Answer: At the time you turn 65, you will be enrolled in Medicare Part A (hospitalization) and Medicare Part B (physician) coverage. In most cases you receive coverage at no cost for your Part A coverage and you receive Part B coverage by paying a premium. Our payments are based on the remaining amount of allowable expenses after Medicare makes their payment determination, whether you have elected to retain Medicare Part B coverage or not. If you do not choose to keep your Medicare Part A and Part B coverage, you will be responsible for the out-of-pocket expenses that would typically be covered under the Part B coverage. It is in your best interest that you retain both Medicare Part A and Part B coverage.

SAMPLE MEMBER ID CARD



Please Note: This is a sample member ID card. There may be fields on the card that look slightly different on your card than what is outlined on the sample card below.

Front

000001

JOHN Q SAMPLE
123 ANY STREET
SYRACUSE, NY 13224

Excelsus
165 Court Street
Rochester, NY 14647

 BlueCross BlueShield	BlueCross BlueShield Enhanced Benefits
Subscriber Name SAMPLE, JOHN Q Subscriber ID ZFW 1234K5678	
Effective Date 01/01/2011 Plan Code 302/802 RxBIN 610475	Plan Indemnity
 Rx	

Back

Dear Member,
Thank you for the opportunity to provide you with health care coverage.
Attached are your new member identification cards. Always show your member ID card when visiting a health care provider to obtain services.
For more information, visit us online at excellusbcs.com or call the Customer Service number on the back of your new ID card.
Sincerely,
Excelsus BlueCross BlueShield


Learn more at excellusbcs.com:

- Find a doctor or specialist while you're home or far away.
- Get access to Step Up® our free fitness and nutrition program.
- Research over 6,000 health topics and more...

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A nonprofit independent licensee of the BlueCross BlueShield Association

Excelsus

 BlueCross BlueShield	www.excellusbcs.com Customer Service: 1-800-847-1200 Pharmacy Benefit: 1-800-724-5033 TTY: 1-877-398-2282
For an emergency medical condition go to an emergency facility or hospital.	
All providers: File Claims with your LOCAL BlueCross BlueShield Plan. Member: If you are billed directly for services submit the claims to Excelsus BlueCross BlueShield.	
Excelsus BlueCross BlueShield PO Box 22999 Rochester, NY 14692 A nonprofit independent licensee of the BlueCross BlueShield Association	
 Pharmacy benefits administrator	