



# Medical

Medical coverage will continue with BCBS of Texas. To find an in-network provider, please visit: <https://www.bcbstx.com/find-a-doctor-or-hospital>. To find participating pharmacies, please visit: <https://www.myprime.com/en/find-pharmacy.html>

	<b>PPO</b> <i>IN-NETWORK BENEFITS SHOWN BELOW</i>	<b>HMO</b> <i>NO COVERAGE OUT-OF-NETWORK EXCEPT FOR EMERGENCIES</i>
<b>NETWORK</b>	Blue Essentials	Blue Choice
<b>ANNUAL CALENDAR YEAR DEDUCTIBLE</b>		
INDIVIDUAL	\$5,000	\$5,000
FAMILY	\$10,000	\$10,000
<b>HEALTH REIMBURSEMENT ARRANGEMENT (HRA)</b> <i>Medical City Management reimburses a portion of your deductible</i>		
	<i>Your Total Deductible &amp; Out-of-Pocket:</i>	<i>Your Total Deductible &amp; Out-of-Pocket:</i>
INDIVIDUAL	\$1,000	\$1,000
FAMILY	\$3,000	\$3,000
	<i>MCD Pays This Portion of Your Deductible:</i>	<i>MCD Pays This Portion of Your Deductible:</i>
INDIVIDUAL	\$4,000	\$4,000
FAMILY	\$7,000	\$7,000
<b>COINSURANCE</b>		
WHAT YOU PAY	0%	0%
<b>ANNUAL OUT-OF-POCKET MAXIMUM</b>		
INDIVIDUAL	\$5,000	\$5,000
FAMILY	\$10,000	\$10,000

# Medical



PPO / HSA Plan	HMO
<i>IN-NETWORK BENEFITS SHOWN BELOW</i>	<b>NO COVERAGE OUT-OF-NETWORK EXCEPT FOR EMERGENCIES</b>

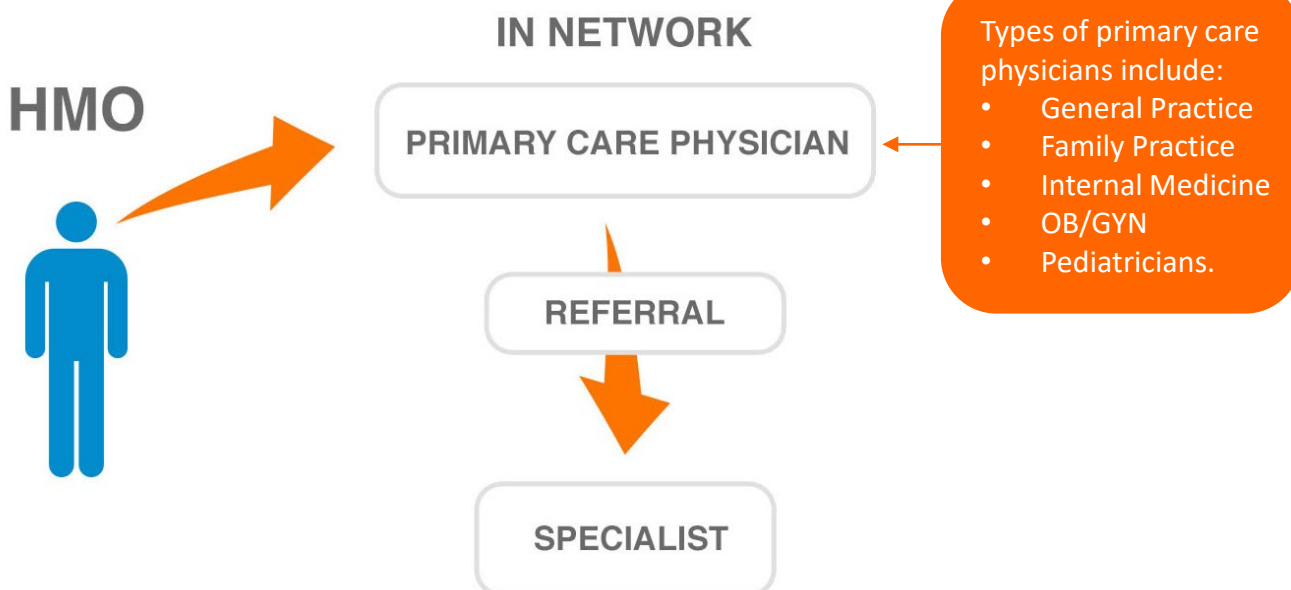
## COPAYS/COINSURANCE (YOU PAY)

PREVENTIVE CARE	\$0 (deductible waived)	\$0 (deductible waived)
PRIMARY CARE VISIT	\$0	\$0 - PCP Selection Required
SPECIALIST OFFICE VISIT	\$0	\$0 - Referral Required*
LAB & X-RAY	\$0	\$0
IMAGING	\$0	\$0
INPATIENT*	\$0	\$0
OUTPATIENT*	\$0	\$0
EMERGENCY ROOM	\$0	\$0
URGENT CARE	\$0	\$0

## RETAIL PRESCRIPTIONS - 30 DAY / 90 DAY (YOU PAY)

TIER 1 - PREFERRED GENERIC	\$0 / \$0	\$0 / \$0
TIER 2 - NON-PREFERRED GENERIC	\$0 / \$0	\$0 / \$0
TIER 3 - PREFERRED BRAND	\$0 / \$0	\$0 / \$0
TIER 4 - NON-PREFERRED BRAND	\$0 / \$0	\$0 / \$0
TIER 5 - PREFERRED SPECIALTY	\$0 / \$0	\$0 / \$0
TIER 6 - NON-PREFERRED SPECIALTY	\$0 / \$0	\$0 / \$0

*\*See Plan documents for specific benefits associated with mental health, behavioral health, substance abuse and other types of inpatient and outpatient services*



- Select a Primary Care Physician (PCP) from the Blue Essentials network for yourself and each covered member of your family.
- Each member of the family can select a different physician and that physician may be changed at any time.
- The new PCP will become effective on the first day of the following month.
- All services, *except emergency care*, must be through a participating provider.
- All members must receive a referral from their PCP to see a network specialist physician.
- Certain services will require preauthorization.

## How the plan works:

Network physicians with required referral ----- > You receive network benefits  
 Network physicians **without** required referral ----- > No coverage \*  
 Non-Network care provider ----- > No coverage\*

\*Except for emergency services and related admissions

# Understanding Your Provider Network

Your Blue Cross and Blue Shield of Texas (BCBSTX) HMO plan gives you access to specific doctors and hospitals that make up your provider network. We want to help you understand your health plan and avoid charges for services that are not covered.

To make the most of your health plan, please keep these simple cost-saving tips in mind:

- **When you enrolled, you selected a primary care physician (PCP).** Your PCP's contact information is on the front of your ID card. Your PCP will manage your health care needs. You should make an appointment with your PCP as soon as possible to establish yourself as a new patient.
- **Make sure to get a referral from your PCP before you visit a specialist.** A specialist is a doctor who treats specific conditions. Dermatologists, neurologists, endocrinologists or orthopedists are all types of specialists. You may also need a referral for things like lab work or physical therapy. Your PCP will refer you to the type of doctor or other provider you need. It sometimes can take up to five days to get a referral approved.

## What Is a Provider Network?

With your HMO plan, you'll use your HMO's provider network. This means the participating doctors and hospitals that work together to provide a full range of health care services. These health care providers have agreed to work with your HMO plan to keep your costs lower. In most cases, you will be responsible for the full cost of the care provided if you use a doctor or facility that isn't in your HMO network.

Use our Provider Finder® online directory to find providers who best fit your needs. Log in or register for your member account, Blue Access for Members<sup>SM</sup>, at [bcbstx.com/member](http://bcbstx.com/member). Click on "Find a Doctor" to find the doctors who belong to your network.

## Team Up with Your PCP

When you enrolled, you chose a PCP. If you are a female member, you may have also selected an obstetrician-gynecologist (OB-GYN). PCPs specialize in general internal medicine (adults) or family medicine (adults and children). A pediatrician can serve as your child's PCP. An OB-GYN can serve as a female member's PCP. You do not need a referral from your PCP to see your OB-GYN.

- **It is important that you form a relationship with your PCP.** Your PCP is often a partner in keeping you healthy. Your PCP has the benefit of having the full picture, so be open about your diet, alcohol use, lifestyle habits and other health issues. Your PCP is trained in how certain drugs will interact with each other or how they could affect a health problem.

- **Always check with your PCP first for any non-emergency care you need.** In a non-emergency, your PCP will provide you with a referral to a specialist if you need to see one. If you need emergency care, you should go to the nearest emergency facility (ER). We will coordinate your care with the ER.

## How Do I Change My PCP?

You can change your PCP at any time, except in the second or third trimester of pregnancy or while hospitalized. If you want to change your PCP, go online to Blue Access for Members or call the Customer Service number on the back of your ID card. Continue to see your current PCP until the date you are told the change is effective. BCBSTX will mail you a new card.

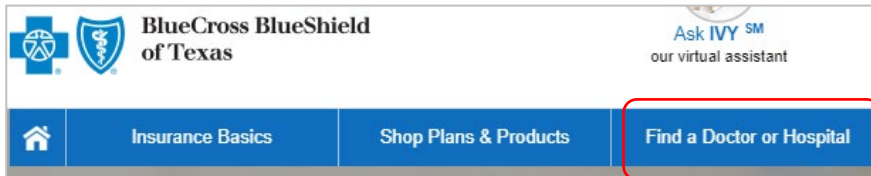
The diagram shows a sample ID card with the following information:

	<b>BlueCross BlueShield of Texas</b>	<b>Plan Type (HMO)</b> HMO
Member Name: <b>SAMPLE ABC</b>	Member ID: <b>XOL000123456</b>	<b>BAV</b>
Group No: IG1002 Effective Date: 05/01/14	PCP: 000 (847) 111-0000 02/01/2014	Dependent ABC SAMPLE
		<b>Plan and Provider Network Name</b> Plan Blue Prec GLD HMO BIN 011552 Rx PCN ILDR PCP/SPC \$0/\$0 Emergency \$0 Rx Generic \$0/\$0 Rx Brand \$0/\$0/\$0

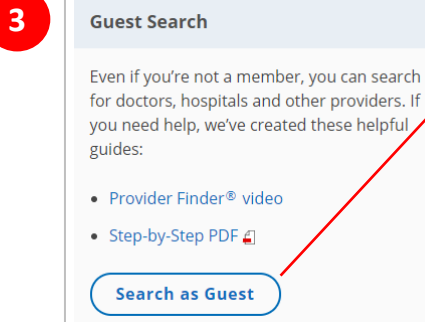


# BCBS HMO Provider Search

1 Go to [www.bcbstx.com](http://www.bcbstx.com)



Click on  
**Find a Doctor  
or Hospital**



Click on **Search as Guest** to  
learn if your doctor is in the  
HMO Blue Essentials network

4 Are You Shopping? Find a Provider by Name or Location

**Search All Providers**  
*Find Medicare or Medicaid providers, using the Helpful Links below.*

Click on  
**Search All  
Providers**

Enter doctor's name and city,  
zip code or address and click  
on **Find a Doctor or Hospital**

6 **Results 1 - 2 (of 2)**

Name	Specialty	Network Type
<b>Zebaida, Oren Y, MD</b> 7777 Forest Ln Ste C 300 Dallas, TX 75230 Phone: (972)566-6000	Internal Medicine <i>Board Certified</i>	Blue Advantage HMO <sup>SM</sup> Blue Premier <sup>SM</sup> Blue Premier Access <sup>SM</sup> Blue Premier Access <sup>SM</sup> Blue Essentials <sup>SM</sup> Blue Essentials Access <sup>SM</sup> Blue Choice PPO <sup>SM</sup>
<b>► Recognitions/Certification (s)</b>		

If **Blue Essentials** (not  
Blue Essentials Access) is  
listed under Network  
Type, doctor is In-  
Network on the HMO

Doctors in the PPO plan  
network are in **Blue  
Choice**

7 Call your doctor to confirm he or she is participating in the HMO **Blue Essentials** network. Do not rely solely on the BCBS website.

# Health Reimbursement Arrangement (HRA)



## Health Reimbursement Arrangement (HRA)

Your 2020 HRA will continue with the TaxSaver Plan. The HRA reimburses on the core medical plan for both individual and family in-network deductible charges.

### Health Reimbursement Arrangement Highlights

#### Total Individual Deductible \$5,000

Net Deductible \$1,000

Employee:  
Pays **first \$500** ---->

MCD:  
Reimburses **next \$4,000** -->

Employee:  
Pays **last \$500**

#### Total Family Deductible \$10,000

Net Deductible \$3,000

Employee:  
Pays **first \$500** ---->

MCD:  
Reimburses **next \$7,000** -->

Employee:  
Pays **last \$2,500**