Welcome to Blue Cross Medicare Advantage.

It’s a new world and you probably have questions. It’s OK. We’re here to help.

Feeling a little nervous about changing to your new plan? We understand. Medicare is new to you now, but soon you’ll get to know and be comfortable with it. You may even like it better! We hope to answer your basic questions here. If you need more information or just want a little help understanding your benefits or the Medicare rules, call us at the number listed on the back of your new Blue Cross Medicare Advantage member ID card.

Look for your member ID card and Welcome Kit in the mail.

You will be getting mail from Blue Cross Medicare Advantage very soon. First will be your member ID card. Look it over to be sure everything is correct. You’ll find our customer service number on the back of your card. Call us whenever you have a question. Your Welcome Kit will arrive separately. It has lots of tips to help you get the most from your plan.

Call us before calling Medicare!

Because Blue Cross Medicare Advantage is now your Medicare plan, you should call the plan with all your questions. Our customer service team will let you know if your question can only be answered by Medicare.

Call the customer service number listed on the back of your member ID card.

We are open 8 a.m. - 8 p.m., local time, 7 days a week. If you are calling from February 15 through September 30, alternate technologies (for example, voicemail) will be used on weekends and holidays.

You can get this document in Spanish, or speak with someone about this information in other languages for free. Call 1-877-299-1008. The call is free.

You’re moving to Medicare!

Here’s what you can expect from your new plan.

*Other pharmacies are available in our network. This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits, premiums and/or co-payments/co-insurance may change on January 1 of each year. The formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary.

Blue Cross Medicare Advantage HMO plan in Montana, HMO and HMO-POS plans in Illinois and New Mexico, and PPO plans in Illinois, Montana, New Mexico, and Oklahoma are provided by Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC). Blue Cross Medicare Advantage PPO plans in Texas are provided by HCSC Insurance Services Company (HISC). Blue Cross Medicare Advantage HMO plans in Texas are provided by GHS Insurance Company (GHS). Blue Cross Medicare Advantage HMO and HMO-POS plans in Oklahoma are provided by GHS Health Maintenance Organization, Inc. d/b/a BlueLincs HMO (BlueLincs) and by GHS Managed Health Care Plans, Inc. (GHS-MHC). HCSC, HISC, GHS, GHS-MHC, and BlueLincs are Independent Licensees of the Blue Cross and Blue Shield Association. HCSC, HISC, GHS, GHS-MHC, and BlueLincs are Medicare Advantage organizations with a Medicare contract. Enrollment in Blue Cross Medicare Advantage plans depends on contract renewal.
You’re going to hear from us.

You may get more attention from your new plan than you’re used to. That’s because our goal is to help our Medicare members manage their health. One of the first things you will get in the mail is a voluntary health risk questionnaire. The questions are simple to answer and will help us to understand your needs. Based on your answers, we may reach out to you about your health to help you better manage it.

The formulary may be different.

Blue Cross Medicare Advantage covers a broad range of prescription drugs. The formulary may be different from what you’re used to and it is always available to view online. Share the formulary with your doctor and talk about the drugs you take now. You may find you can save money by choosing generic drugs. Ask if this is an option for you.

Drugs are placed into tiers.

In Medicare Advantage plans, prescription drugs are placed into tiers. The costs for drugs in each tier are different. Tier 1 drugs will cost less than Tier 5 drugs. The tiers are:

- **Tier 1**: Preferred Generic Drugs
- **Tier 2**: Generic Drugs
- **Tier 3**: Preferred Brand Drugs
- **Tier 4**: Non-Preferred Brand Drugs
- **Tier 5**: Specialty Drugs

You have options when getting your prescriptions.

Blue Cross Medicare Advantage has pharmacies across the country. This means you can have peace of mind when you are away from home. To get the most from your plan, use our network pharmacies or our easy-to-use mail-order service, except in an emergency. Blue Cross Medicare Advantage preferred network pharmacies include:

- CVS/Pharmacy
- Walgreens
- Walmart
- and more*

You may have to follow rules for Prior Authorization and Step Therapy.

Before you can be covered for some medications, your doctor will need to get authorization from the plan. You may first need to try other clinically appropriate or cost-effective drugs.

You will use a provider from the plan network.

To get the most from your benefits, you will use providers in our large network. Your current doctors may be in the network. It includes local primary care providers and a wide range of specialists. If you have an HMO plan, you must choose a primary care provider.

We’ll work closely with your doctor to deliver the best care.

Certain high cost medical services that have more cost-effective alternatives may require your doctor to receive prior authorization before prescribing procedures and treatments. Our plans follow CMS guidelines in this area to ensure you receive the most appropriate, cost-effective care available.

Questions?

Call us at the customer service number listed on the back of your member ID card.