



Health Plan Choices:

- SISC PPO plan
- Tandem PPO plan
- HSA/ MEC plans



We want to help you better understand your health plan options.

Below is a high level overview of the health plans administered by Blue Shield of California. See the following pages of this brochure for more details on each of these plans.

Your plan choices

SISC PPO plan

- » Freedom to see network or non-network doctors
- » No specialist referrals needed

Tandem PPO plan

- » Affordable costs through a select network of providers
- » No specialist referrals needed
- » Discounts on fruits, vegetables and other eligible healthy foods at any participating grocery store with the Healthy Savings* program
- » Access to myStrength, a digital mental health treatment tool that can help you manage emotional and physical challenges and feel stronger.
- » Shield Concierge personalized service

HSA/ MEC plans » Freedom to see network or non-network doctors

- » No specialist referrals needed
-

SISC PPO plan highlights

For plan details, visit www.blueshieldca.com/sisc.

With the SISC PPO plan, administered by Blue Shield, you can see any doctor you choose for most services. You can also self-refer to specialists. You will usually pay less for services that are provided by PPO network providers.

For most services, you will need to meet the plan's deductible before Blue Shield begins coverage. Once your deductible is met, you'll pay a copayment or coinsurance for most services and your out-of-pocket costs will be based on whether you see network or non-network providers. You will usually pay less when you use network providers.

Plan features

Care away from home – You are covered for care across the United States and around the world through the BlueCard[®] and Blue Shield Global Core programs.

Emergency care – You're covered for emergency care around the world regardless of whether the provider is in your plan's PPO network.

Mental health and substance use disorder care – You have access to inpatient and outpatient care for issues such as depression, alcohol/substance use disorder and mental illness. You can access these services through Blue Shield's PPO network and non-network providers.

Preventive care – You have access to services defined as routine preventive care. You do not have to pay a copayment or meet the plan's deductible for these services. Visit blueshieldca.com/preventive to learn more.

Shield Concierge – Get support managing your health needs for a wide range of conditions from a team specially trained on the specific health benefits and programs available to you. You'll also receive personalized service for everything from finding a doctor to understanding benefits and claims.

Find your doctor

To find providers within California, go to www.blueshieldca.com/networkppo and select the type of provider you need. Enter your location, then click Continue.

To find providers outside of California go to provider.bcbs.com and enter LSK. Search for the type of provider you need.

Tandem PPO plan highlights

For plan details, visit www.blueshieldca.com/sisc.

The Tandem PPO plan, administered by Blue Shield, provides more affordable coverage through use of a smaller network of PPO providers, and the flexibility to see any doctor you choose for most services. You can also self-refer to specialists.

When you enroll in the Tandem PPO plan, you may be matched with a primary care physician (PCP) in the Tandem PPO Network. Having a PCP means you have a doctor you can turn to for healthcare advice. You don't need to visit your PCP first to receive care. And you can see any doctor or specialist that you want without a referral. If you prefer a different PCP, you can easily change your doctor online.

Plan features

Care away from home – You are covered for care across the United States and around the world through the BlueCard® and Blue Shield Global Core programs.

Emergency care – You're covered for emergency care around the world regardless of whether the provider is in your plan's PPO network.

Healthy Savings® program – Get discounts on fruits, vegetables and other eligible healthy foods with this program designed to help you eat healthier. Just scan your Healthy Savings card or app at the checkout counter of any participating grocery store for instant savings.

Mental health and substance use disorder care – You have access to inpatient and outpatient care for issues such as depression, alcohol/substance use disorder and mental illness. You can access these services through Blue Shield's PPO network and non-network providers.

myStrength – Get help managing stress, sleeping better, and more with this digital mental health treatment tool.

Preventive care – You have access to services defined as routine preventive care. You do not have to pay a copayment or meet the plan's deductible for these services. Visit blueshieldca.com/preventive to learn more.

Shield Concierge – Get support managing your health needs for a wide range of conditions from a team specially trained on the specific health benefits and programs available to you. You'll also receive personalized service for everything from finding a doctor to understanding benefits and claims.

Specialty care – You can access care through a specialist without a referral from your primary care physician.

Find your doctor

To find doctors within California, go to blueshieldca.com/networktandemppo and select the provider you are looking for. Enter your location, then click Continue.

You may need your selected PCP's ID number when you enroll in the plan for the first time. To find this number, click on the doctor's name and then select View details under "Primary Care Physician ID."

To find doctors outside of California go to provider.bcbs.com and enter LSK. Search for the type of provider you need.

For plan details, visit www.blueshieldca.com/sisc.

Plan features

Care away from home – You are covered for care across the United States and around the world through the BlueCard® and Blue Shield Global Core programs.

Emergency care – You're covered for emergency care around the world regardless of whether the provider is in your plan's PPO network.

Mental health and substance use disorder care – You have access to inpatient and outpatient care for issues such as depression, alcohol/substance use disorder and mental illness. You can access these services through Blue Shield's PPO network and non-network providers.

Preventive care – You have access to services defined as routine preventive care. You do not have to pay a copayment or meet the plan's deductible for these services. Visit blueshieldca.com/preventive to learn more.

Shield Concierge – Get support managing your health needs for a wide range of conditions from a team specially trained on the specific health benefits and programs available to you. You'll also receive personalized service for everything from finding a doctor to understanding benefits and claims.

Specialty care – You can access care through a specialist without a referral from your primary care physician.

Find your doctor

To find providers within California, go to www.blueshieldca.com/networkppo and select the type of provider you need. Enter your location, then click Continue.

To find providers outside of California go to provider.bcbs.com and enter LSK. Search for the type of provider you need.

Programs and services

The following programs and services are offered with the plan(s) described in this document.

ID protection – Protecting your financial well-being is as important as protecting your health. This is why we offer identity protection services. These include credit monitoring, identity repair assistance and identity theft insurance.

Maternity Program – This program is designed to give you and your partner digital and virtual support for your pregnancy and postpartum needs.

Shield Support – Get support managing your health needs for conditions such as diabetes, depression, chronic pain, cancer and others. Services include personalized health coaching, care plan development, provider coordination and more.

Wellness discount programs – Get help saving money and living healthier with a wide range of discount programs* including fitness club memberships; acupuncture, chiropractic services and therapeutic massage; and eye exams, frames, contact lenses and LASIK surgery. Learn more at blueshieldca.com/wellnessdiscounts.

* These discount program services are not a covered benefit of your Blue Shield of California, Blue Shield of California Life & Health Insurance Company or self-insured health plan, and none of the terms or conditions of the Blue Shield, Blue Shield Life or self-insured health plan apply.

The networks of practitioners and facilities in the discount programs are managed by external program administrators, including any screening and credentialing of providers. Blue Shield does not review the services provided by discount program providers for medical necessity or efficacy, nor does Blue Shield make any recommendations, presentations, claims or guarantees regarding the practitioners, their availability, fees, services or products.

Some services offered through the discount program may already be included as part of the Blue Shield plan covered benefits. Members or self-insured plan participants should access those covered services prior to using the discount program.

Members or self-insured plan participants who are not satisfied with products or services received from the discount program may use the grievance process described in their Evidence of Coverage, Disclosure Form, Evidence of Coverage and Disclosure Form, Benefit Booklet or Certificate of Insurance/Policy. Blue Shield reserves the right to terminate this program at any time without notice.

Wellvolution is a registered trademark of Blue Shield of California. Wellvolution and all associated digital and in-person health programs, services, and offerings are managed by Solera, Inc., a health company committed to changing lives by guiding people to better health in their communities.

Glossary

Not sure what it means?

Use this glossary as a handy reference for some common health benefit terms.

Below are definitions related to Blue Shield health plan terms. Some terms may not apply to your plan. See your *Evidence of Coverage or Benefit Booklet* for details.

Allowable amount – The total dollar amount Blue Shield has established for the benefits the member has received. Physicians who have contracted with Blue Shield must accept this amount as payment in full. If a member chooses to go outside of our networks, he or she may be responsible for a much larger payment.

Benefits (covered services) – The medically necessary services and supplies covered by the health plan.

Copayment/coinsurance – The predetermined amount (copayment) or a percentage of the cost (coinsurance) for which you are responsible for paying, based on your plan benefits.

Deductible – The dollar amount you must pay for covered services each calendar year before Blue Shield starts paying benefits under your plan. You are responsible for this amount. Specific services, such as preventive care, are covered before you reach the calendar-year deductible.

You may have two kinds of deductibles: medical and pharmacy. Your medical deductible applies to covered services such as physician office visits. Your pharmacy deductible applies to outpatient prescription drugs obtained from a participating provider.

Evidence of Coverage or Benefit Booklet – The official Blue Shield documents that describe member benefits, copayments or coinsurance, exclusions and limitations.

Network providers/participating providers/provider network – A provider (includes doctors, hospitals, urgent care centers, etc.) that has agreed to contract with Blue Shield to provide covered services to members of a given health plan. A participating provider has agreed to accept Blue Shield's contracted rate for covered services.

Out-of-pocket maximum – Your maximum copayment or coinsurance responsibility each calendar year for covered services. Copayments or coinsurance for a small number of covered services do not apply to the annual out-of-pocket maximum. You will continue to be responsible for copayments or coinsurance for these services even after you reach the out-of-pocket maximum.

Prescription drug formulary – The list of preferred medications maintained by Blue Shield for its prescription drug benefits. This list includes both generic and brand-name drugs approved by the Food and Drug Administration (FDA).

Prescription drug tiers – Prescription drugs in a formulary are typically grouped into tiers based on defined categories, such as generic drugs, preferred brand-name drugs, non-preferred brand-name drugs, and specialty drugs. The tier that your medication is in determines your portion of the drug cost. A typical drug benefit includes three or four tiers. You can find information about what you pay by drug tier in your health plan documents.

Prior authorization – Some services require prior authorization before treatment, in addition to your doctor's referral. A referral and a prior authorization are two different things. For example, when your primary care physician cannot give you the treatment you need, he or she refers you to a specialist. However, if you require a hospital stay or certain surgical procedures, radiological treatments, etc., Blue Shield of California must authorize these medical services before you can receive them. Before receiving such services, call the Member Services or Shield Concierge number on the back of your Blue Shield member ID card to obtain a prior authorization.

Have questions?

Get answers to your questions about the health plan(s) described in this brochure or request printed copies of plan documents.

Call Shield Concierge: **(855) 599-2657**, 7 a.m. to 7 p.m. PST, Monday through Friday.

Visit **blueshieldca.com/sisc**

Take us with you anywhere

Log in to our mobile app and keep your health plan at your fingertips. Our mobile app is available on the App StoreSM and Google PlayTM.



Find us on social media

Follow us on Facebook at facebook.com/BlueShieldCA, Twitter [@BlueShieldCA](https://twitter.com/BlueShieldCA) and Instagram [@BlueShieldofCA](https://instagram.com/BlueShieldofCA) for healthy tips, daily inspiration, member info and support. It's an easy way to stay connected.



Member confidentiality

Blue Shield protects the confidentiality and privacy of your personal and health information, including medical information and individually identifiable information such as your name, address, telephone number and Social Security number. To ensure this, Blue Shield requires a signed authorization form for you to access health information for your spouse or dependents over the age of 18.

To request an authorization form, call Blue Shield Member Services. Or, you can also download the form by going to blueshieldca.com. Just log in, select *Family Members* under "Who's Covered" and then choose *Manage Family*. Scroll to the bottom of the page to download the Authorization for Release of PHI form.

If you don't have access to the Internet, or you have questions about how Blue Shield protects your privacy and confidentiality, please call our Privacy Office directly at (888) 266-8080.

Apple and the Apple logo are trademarks of Apple Inc. App Store is a service mark of Apple Inc.

Google Play is a trademark of Google Inc.

Blue Shield and the Shield symbol are registered trademarks of the BlueCross BlueShield Association, an association of independent Blue Cross and Blue Shield plans.

Blue Shield of California complies with applicable state laws and federal civil rights laws, and does not discriminate on the basis of race, color, national origin, ancestry, religion, sex, marital status, gender, gender identity, sexual orientation, age, or disability. Blue Shield of California cumple con las leyes estatales y las leyes federales de derechos civiles vigentes, y no discrimina por motivos de raza, color, país de origen, ascendencia, religión, sexo, estado civil, género, identidad de género, orientación sexual, edad ni discapacidad. Blue Shield of California" 遵循適用的州法律和聯邦公民權利法律，並且不以種族、膚色、原國籍、血統、宗教、性別、婚姻狀況、性別認同、性取向、年齡或殘障為由而進行歧視。