



WELCOME TO YOUR PLAN



2027 BlueCare Plus Choice (HMO D-SNP)SM



**BlueCare Plus
Tennessee**



Welcome

Let's take a look at your 2027 plan.

Here are your steps to get started.

- Read the welcome letter we already sent you.
- Be on the lookout for your Member ID card and a letter telling you your primary care provider's (PCP) name.
- Review this welcome packet.
- Answer our welcome call.
- Answer a few health questions to help us understand your needs. Go to myhealthyrewards.healthmine.com to get started.
- Learn more about your CHOICES benefits on page 9.

Let's Connect Digitally

1 Set up or log in to your online account



Visit bluecareplus.bcbst.com and click Member Log In. Then log in or register your account. Or scan the QR code to get started. You can use it to see your benefits, get a digital ID card, check your claims and more.

2 Download our BCBSTNSM app

You can use the app to access your account or digital ID card on the go. Just search **BCBSTN** in your phone's app store.

3 Sign up for texts and emails

Go to your account and choose **Communication Settings**. Then choose which texts and emails you'd like.

Here are some in-network benefit highlights of your plan

Broad network of doctors, hospitals and pharmacies

\$0 premiums, deductibles and medical copays

\$352 monthly allowance for healthy food* and over-the-counter items

100 one-way rides to health-related locations approved by your plan

\$400 yearly supplemental vision care allowance

\$3,000 yearly comprehensive dental care allowance

* The healthy food allowance is a Special Supplemental Benefit for the Chronically Ill (SSBCI). Not all members qualify.

You must continue to pay your Medicare Part B premium each month. Costs shown are for providers in our network. We provide members with a flex card to use for select plan benefits. The flex card is preloaded with certain amounts, according to benefits. Value of card may be zero. Monthly flex card allowance doesn't roll over from month to month. Card may only be used with merchants and providers that accept major credit cards. Purchases may be restricted to certain types of items and services. Benefit limits may apply. Check your Evidence of Coverage for details. Or call us.

More Value From Your Plan

Your plan includes more than medical coverage. Log in to your bluecareplus.bcbst.com account to learn more.



Hearing Coverage

Your plan includes:

- One routine hearing exam each year with a TruHearing® provider
- Two TruHearing-branded hearing aids (one per ear) every three years



Free Fitness Program

Your plan includes Silver&Fit. It's a free fitness program with:

- Access to standard fitness centers nationwide
- Group classes
- Online workout videos



Meal Delivery

You can get 28 meals delivered to your home after a qualifying inpatient hospital or skilled nursing facility stay.



Virtual Care

Get non-emergency care anytime for **\$0** from Teladoc Health®.

You can also call the Nurseline to talk with a nurse anytime for help with health questions. Call **888-747-8951**, TTY **711**, to talk with a nurse 24/7.



Your Prescription Coverage

Your drug costs depend on what tier they're in and what level of Extra Help you get. We'll only cover your drugs if you get them from a pharmacy in our network or through our mail-order service.

Covered Drug List

The covered drug list tells you what drugs we cover and what tier they're in.

Pharmacies To Use

CVS Caremark® manages your drug coverage. But you don't have to use a CVS pharmacy. You can choose any pharmacy in our network.

Mail Order

Save money and time by getting your drugs through mail order. You may pay a lower copay, and shipping doesn't cost extra.

Coverage Limits

Prior authorization means you'll need approval from us before we'll cover a drug. If you don't get approval, we may not cover the drug. Step therapy means you need to try a different drug before we'll cover another drug. Learn more in your Evidence of Coverage on bluecareplus.bcbst.com.

Your Prescription Drug Benefits

What's Covered		What You Pay
Initial Coverage Phase	Tier 1 – Preferred Generic Drugs	25% coinsurance
	Tier 2 – Generic Drugs	
	Tier 3 – Preferred Brand Drugs	
	Tier 4 – Non-Preferred Drugs	
	Tier 5 – Specialty Drugs	
	Tier 6 – Select Care Drugs	\$0
Catastrophic Coverage Phase		\$0

Once you've spent **\$2,400** out of pocket on covered drugs, you'll move from the initial coverage phase to the catastrophic coverage phase. Then you'll pay **\$0** for all covered Part D drugs.



Visit bluecareplus.bcbst.com/pharmacy to see your covered drugs, find a pharmacy and learn more about your coverage.



Your Flex Card

We'll send you a prepaid flex card you can use for plan benefits.

You get a **\$352 monthly allowance** to use on approved over-the-counter (OTC) items like cold medicine and vitamins.

Members with certain long-term health conditions may also be able to use this allowance on approved healthy food* items.

You can learn more about how to qualify for the healthy food benefit in your welcome kit. Or visit bluecareplus.bcbst.com.

* Allowance doesn't roll over from month to month. Benefit limits, exclusions and eligibility requirements may apply. Please see your Evidence of Coverage for details. Or call us. The healthy food allowance is a Special Supplemental Benefit for the Chronically Ill (SSBCI). Not all members qualify.

Your Dental Benefits

We cover routine dental services at no extra cost to you. That includes things like cleanings, X-rays and exams.

You get a **\$3,000** yearly allowance for covered comprehensive dental services like:

- Fillings
- Extractions
- Dentures

This list isn't all-inclusive. Benefit limits may apply. You can find more info about your dental coverage in the dental benefit guide or your Evidence of Coverage. Or call us.



Call us before you get dental care.

We can tell you if it's covered. **866-238-2627, TTY 711**

Monday through Friday, 8 a.m. to 9 p.m. ET

Healthy Actions Can Pay Off

When you join the MyHealthy Rewards program, you can earn gift cards* for completing eligible screenings.

Activities to Earn Rewards

Health needs assessment

Annual wellness visit

Colorectal cancer screening

Breast cancer screening

Diabetic eye exam

Log in to your account to see what rewards you can earn.



How It Works

- 1** Sign up at myhealthyrewards.healthmine.com.
Or call MyHealthy Rewards at **866-267-3367**, TTY **711**, Monday through Friday from 9 a.m. to 6 p.m. ET.
- 2** Answer the health questions in your health needs assessment to start earning gift cards.
- 3** Get certain screenings your provider says you need.
- 4** Your provider sends us the claim.
- 5** We'll send your gift card within 90 days.

* Certain restrictions may apply with reward use.

Your ID Cards

Here's a quick guide to what cards you should keep with you.

Carry your BlueCare Plus Choice Member ID card and your flex card with you. You'll show your BlueCare Plus Choice ID card when you get care or prescriptions.

You don't need to carry your red, white and blue Original Medicare card or your BlueCare Tennessee Card with you.

Your CHOICES benefits

This plan is for people who have Medicare, full TennCare (Medicaid) benefits with BlueCare Tennessee and qualify for TennCare Long-Term Services and Supports (LTSS) CHOICES groups 1-3 or Employment and Community First CHOICES groups 4-8.

What is CHOICES?

It's a program for adults age 21 and older with a physical disability and for seniors age 65 and older. This program provides services to help you live, work and be active in your home or in the community. These services are called Home and Community-Based Services. You can get services at home, at work or in the community. You can also get nursing home care if you need it.

Employment and Community First CHOICES is for people of all ages with an intellectual or developmental disability. This program helps people live more independently. You can get support to live with your family or in the community, not in a care facility. If you don't live with your family, you can get residential supports.

Help with your plan

You can call your care coordinator for help with questions or your care. You don't need to wait for a scheduled home visit or phone call. And if you need help after business hours that can't wait until the next day, call us at 877-715-9503, TTY 711. We're available Monday through Friday from 8 a.m. to 6 p.m. ET.

Here when you need us.



Online

bluecareplus.bcbst.com



Phone

800-332-5762, TTY 711

Oct. 1 to March 31, 8 a.m. to 9 p.m. ET, seven days a week

April 1 to Sept. 30, 8 a.m. to 9 p.m. ET, Monday through Friday



BCBSTN App

Download the BCBSTN app for 24/7 access to your health insurance info.

The healthy food benefit listed is a special supplemental benefit for members with certain chronic conditions. Qualifying chronic conditions include, but aren't limited to, cardiovascular disorders, diabetes mellitus, obesity, chronic lung disorders and chronic gastrointestinal disorders. Additional qualifying conditions exist. See plan materials for complete list. Not all members (even those with a qualifying condition) qualify. Eligibility is based on meeting the CMS definition of "chronically ill enrollee" and all applicable plan coverage criteria.

Gift cards are available to eligible members as part of the BlueCare Plus Tennessee Rewards and Incentives Program. Certain restrictions may apply with reward use. Total rewards and health actions are dependent on eligibility for specific activities, which will vary by individual. Members may not qualify for all health activities. One reward per healthy activity per year. Dates of service must be in the current plan year. Rewards will be administered once the claim is processed, which can take up to 90 days. Activities that earn rewards are subject to change.

TruHearing is an independent company that provides hearing products and/or services for BlueCare Plus Tennessee. TruHearing does not provide BlueCare Plus Tennessee branded products and/or services. TruHearing is solely responsible for the products and/or services they provide. This information is not a complete description of benefits. Benefit limits may apply.

Member Service: 8 a.m. to 9 p.m. ET, 7 days a week
(Oct. 1–March 31); 8 a.m. to 9 p.m. ET, M–F (April 1–Sept. 30).

BlueCare Plus Tennessee complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex¹.

¹ Consistent with the scope of sex discrimination described at 45 CFR 92.101(a)(2)

ATTENTION: If you speak English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 800-332-5762 (TTY: 711) or speak to your provider.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 800-332-5762 (TTY: 711) o hable con su proveedor.

تنبيه: إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجانًا. اتصل على الرقم 800-332-5762 (الهاتف النصي: 711) أو تحدث إلى مقدم الخدمة.



BlueCare Plus
Tennessee

1 Cameron Hill Circle | Chattanooga, TN 37402 | bluecareplus.bcbst.com

BlueCare Plus Tennessee, an Independent Licensee of the Blue Cross Blue Shield Association

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