

# WELCOME TO BLUE



Your guide to all the tools,  
resources and knowledge you  
need to maximize your benefits.



**BlueCross BlueShield  
of Alabama**

*We cover what matters.*

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*Please note benefits and services described herein may vary by health plan.*

# REGISTER FOR *myBlueCross*

*myBlueCross* provides 24/7 access to personalized tools and resources to help you save time and efficiently manage your account. Plus, you'll be able to take charge of your health with information on diet, exercise, nutrition and lifestyle habits.

With *myBlueCross*, you will find plan details within your benefit booklet and Summary of Benefits and Coverage. You can also:

- ▶ View/email a virtual ID card
- ▶ View claim statements
- ▶ View your contract and dependent information
- ▶ Estimate and compare treatment and procedure costs
- ▶ Find in-network providers and facilities
- ▶ Rate your doctor
- ▶ View covered immunizations
- ▶ View preventive services

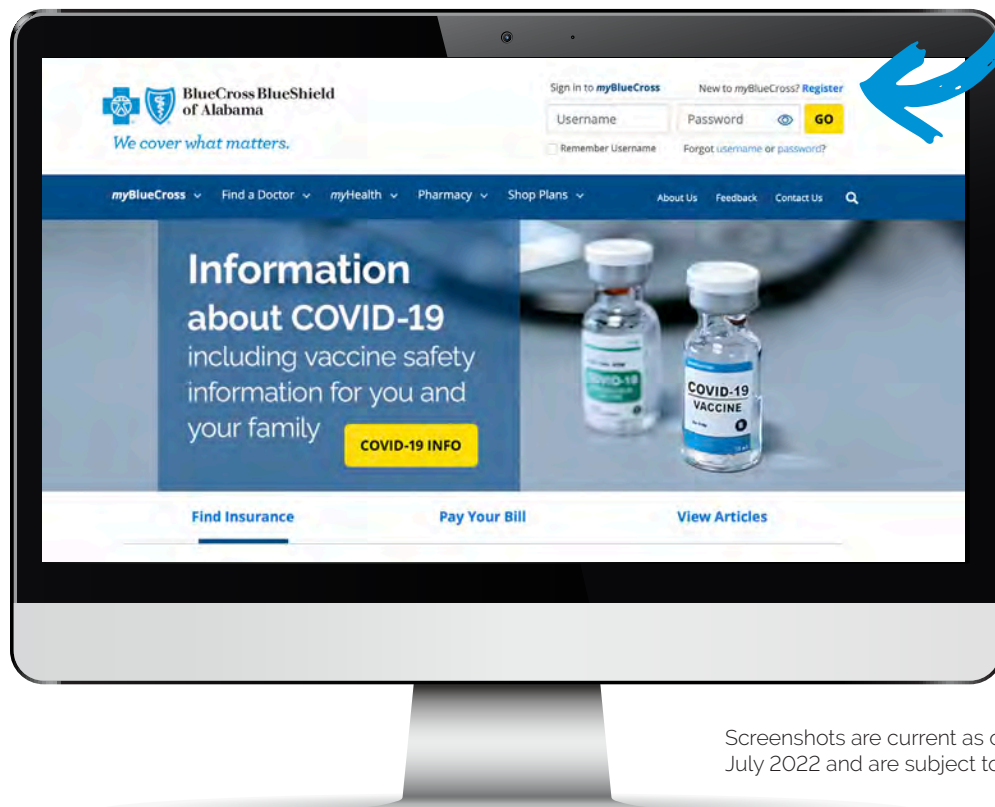
**Need help? Contact us at 855-249-3803.**

## [AlabamaBlue.com/Register](https://alabamablue.com/register)

To register for your *myBlueCross* account:

1. Visit [myahpcare.com](https://myahpcare.com) and search for your school
2. Click Additional Resources, and then click Account Information. Under the Account Information section, follow the steps to find your Group and Contract Number.
3. Visit [AlabamaBlue.com/Register](https://alabamablue.com/register) and enter the required information

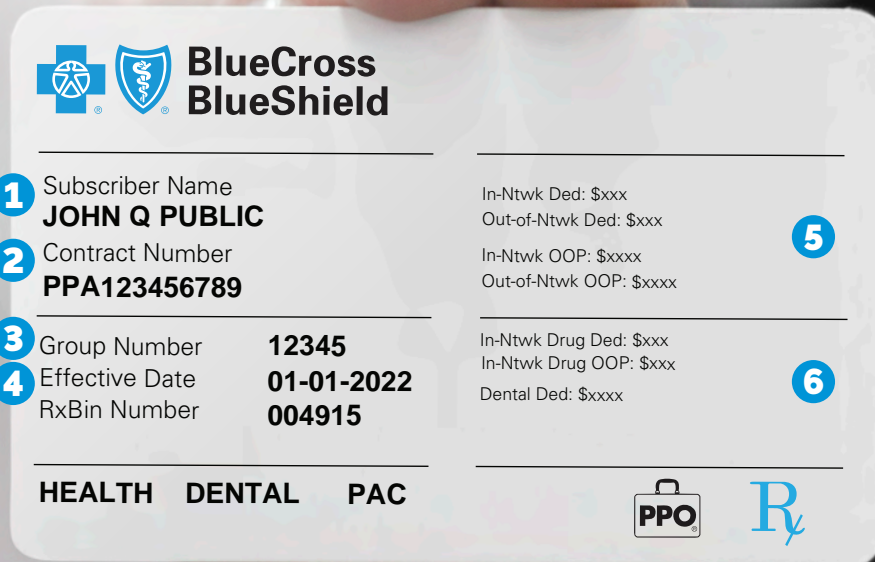
**NOTE:** *myBlueCross* registration typically requires a Social Security Number or Individual Taxpayer Identification Number; however, some schools may instead require a Student ID. If you are unsure about which to enter, contact your school's administration.



Screenshots are current as of July 2022 and are subject to change.

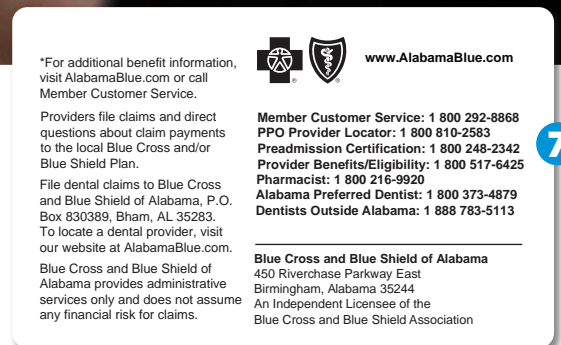


# GET TO KNOW YOUR BLUE CROSS ID CARD



- 1 The contract holder's name will appear on the card, but any covered family members may use it.
- 2 The contract number is unique to the contract holder's health plan (with or without any covered family members).
- 3 The group number is unique to the health plan.
- 4 The effective date is the start of current plan benefits.
- 5 The health plan's in- and out-of-network deductibles and out-of-pocket maximums appear here.
- 6 The prescription drug plan's in-network deductible and out-pocket maximum along with the dental plan's deductible appear here (if applicable).
- 7 This has our contact information for use by the contract holder and any covered family members plus contact information for use by providers.

Back of  
card



## VIEW OR EMAIL YOUR CARD

### Online

Log in to your *myBlueCross* account with your mobile device or computer. Click on the "ID Cards" link under the "Account Summary" section. You may view your card online, or choose to have it emailed to you.

### Alabama Blue mobile app:

Authenticate and click *ID Cards* along the bottom.

# TAKE BLUE WITH YOU

We understand students are busy and need access to health plan information quickly and easily—without having to call us first. Think of the Alabama Blue app as *myBlueCross* on the go, offering 24/7 access to health plan information. The Baby Yourself app helps expectant moms track their journey and connect with their Blue Cross nurse. See page 12 for more information about the Baby Yourself program.

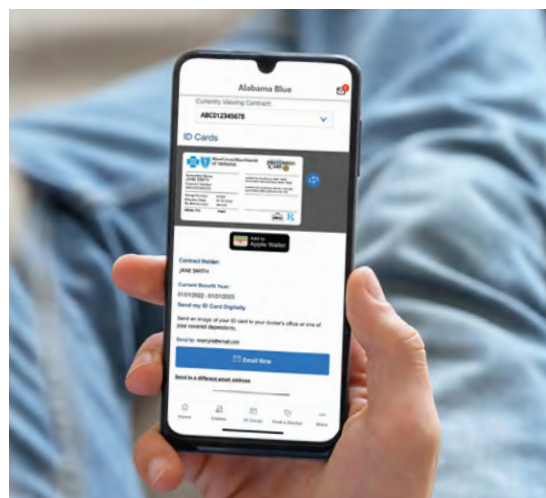
Both mobile apps are free and available for Apple and Android devices.



## Alabama Blue

Register for *myBlueCross* to get enhanced features using Alabama Blue

- Use Touch or Face ID recognition
- Check your claims and benefits
- View or email your ID card
- Track your deductible and out-of-pocket spend
- Find a doctor in your network
- Compare quality and cost of providers



## BABY YOURSELF®

Tracks your baby's growth and your personal journey to motherhood

- Enroll in the Baby Yourself Program right from the app
- One-button dialing to access your physician and/or Baby Yourself Nurse\*
- Photo gallery
- Use our trackers to track kicks, contractions, symptoms, etc.
- Daily pregnancy and parenting tips

\* For this service, you must be a Blue Cross and Blue Shield of Alabama member and enrolled in the Baby Yourself Maternity Program.



**NOTE: There is no charge from Blue Cross and Blue Shield of Alabama to download, but rates from your wireless provider may apply. This information is for educational purposes only and is not a substitute for personal care from a licensed physician. Please consult your physician for diagnosis and treatment options.**

# KNOW WHERE TO GO

It's important to understand your options when seeking medical care. Non-emergency care for a condition that is not life threatening is generally provided by your physician. Even after-hours care is generally coordinated by your physician who can instruct you on how to receive medical care outside of normal business hours, on weekends and on holidays.

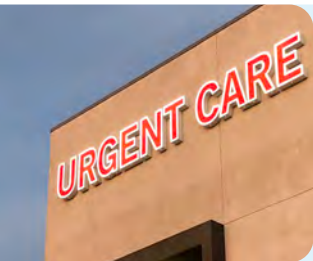


## PRIMARY CARE PHYSICIAN

Go to your Student Health Center\* / Primary Care Physician to help manage total care and to seek treatment for **non-life threatening** conditions.

### Examples include:

- Annual wellness visit
- Cold/flu symptoms
- Diabetes management
- Fever
- High blood pressure
- Minor sprains
- Skin rash
- Stomach ache



## URGENT CARE

Go to an Urgent Care facility **after hours** or when your Student Health Center/Primary Care Physician is otherwise **unavailable**.

- Bladder infection
- Body aches
- Ear infection
- Excessive vomiting
- Headache
- Minor burns
- Pink eye
- Sore throat



## EMERGENCY ROOM

Go to the ER immediately for **severe** and **life-threatening** conditions.

### Examples include:

- Broken bones
- Chest pain
- Head/neck injury
- Loss of consciousness
- Serious burns
- Symptoms of stroke
- Uncontrolled bleeding
- Vomiting blood

Help keep ERs available for people who need life-saving treatment. You'll save both time and money by knowing where to go for appropriate care.

**If poison is ingested, call the Poison Control Center immediately:**

**1-800-222-1222 Alabama**

**1-800-292-6678 Nationwide**

\* If applicable to your plan benefits

**NOTE: The health plan may not pay for certain healthcare services if a referral is required and you don't get one - even if the provider is in-network. If you are in severe pain or your condition is life threatening, call 911 or go to an emergency room. This information is for educational purposes only and is not a substitute for personal care from a licensed physician. Please consult your physician for diagnosis and treatment options.**

# APPRECIATE THE VALUE OF IN-NETWORK SERVICES

## Using in-network providers helps you save money.

In-network providers are contracted to accept your health plan, which means they agree to a fixed amount for their services, known as the allowed amount.

Consider the effect network status can have on a \$200 service:

	IN-NETWORK Plan Pays <b>80%</b> of Allowed Amount (COINSURANCE)	OUT-OF-NETWORK Plan Pays <b>60%</b> of Allowed Amount (COINSURANCE)	OUT-OF-NETWORK Plan Pays Nothing
Full Billed Amount	<b>\$200</b>	<b>\$200</b>	<b>\$200</b>
Allowed Amount	<b>\$110</b>	<b>\$110</b>	-
<b>1</b> Network Discount	<b>\$90</b>	-	-
Plan Pays Coinsurance	<b>\$88</b> <b>2</b>	<b>\$66</b> <b>3</b>	-
You Pay Coinsurance	<b>\$22</b>	<b>\$44</b>	-
Balance You Could be Billed by Provider	<b>\$0</b>	<b>\$90</b> <b>4</b>	<b>\$200</b>

For illustrative purposes only. Assumes deductible is met. Does not account for any applicable copays you may owe at the time of service.

**1** The amount the provider has agreed to waive from the full billed amount to remain in-network. There is no discount with out-of-network providers, so you could be billed the full amount.

**2** The Plan pays 80% of the allowed amount, and you pay 20%.

**3** The Plan pays 60% of the allowed amount, and you pay 40%.

**4** The amount the provider is not contractually bound to waive from the full billed amount due to being out-of-network.

## Find in-network providers

We keep your costs low by making in-network, high quality healthcare easy for students to find - at school, at home or while traveling.

- Log in to your *myBlueCross* account on [AlabamaBlue.com](https://alabamablue.com) or the Alabama Blue mobile app and click "Find a Doctor." Only your Plan's in-network providers display when you are logged in.
- If you have questions about finding in-network providers, please call the member Customer Service number on the back of your Blue Cross ID card.

*Before you seek non-emergency healthcare,*

*it's a good idea to call the provider to make sure your health plan is accepted. Always choose an in-network provider to pay the lowest out-of-pocket cost for your healthcare.*

**NOTE:** The health plan may not pay for certain healthcare services if a referral is required and you don't get one - even if the provider is in-network. If you are in severe pain or your condition is life threatening, call 911 or go to an emergency room.

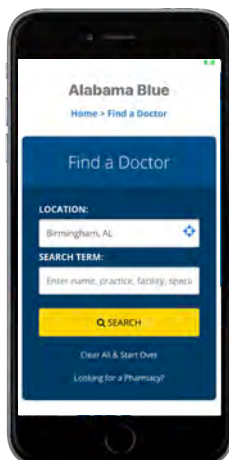


# FIND A DOCTOR

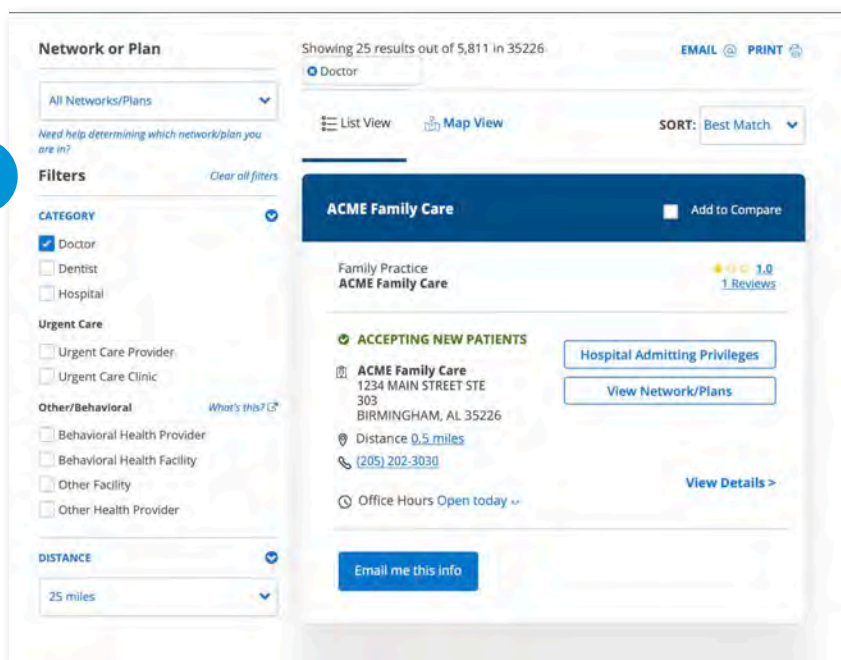
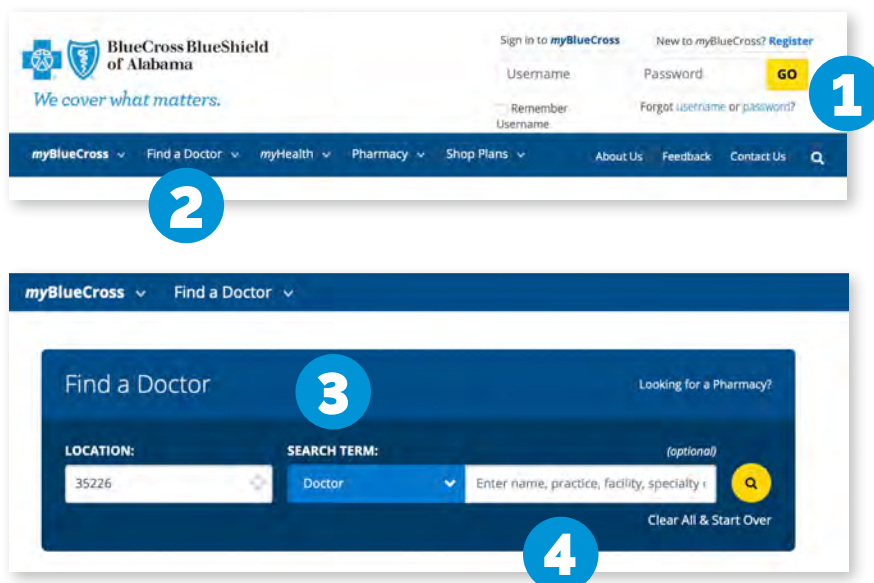
- 1 Visit [AlabamaBlue.com](https://alabamablue.com). Log in to or register for *myBlueCross* in the top right corner. Only your Plan's in-network providers display when you are logged in.
- 2 Click *Find a Doctor* in the menu bar.
- 3 Once logged in, your location will automatically populate based on the contract holder's address; however, you can change the location you want to search.
- 4 Select a search category from the drop down menu and/or enter a search term. Then click the magnifying glass icon.
- 5 Narrow your search with the filters on the left.

Depending on your search criteria, your results may include:

- Address and directions
- Phone number
- Network participation
- Doctor specialties
- Hospital admitting privileges for doctors
- Office hours
- Quality information and designations
- Lower member cost share hospitals within Alabama



Our *Find a Doctor* tool on [AlabamaBlue.com](https://alabamablue.com) makes it easy to find the right healthcare providers in your area. Plus, you can use the *Alabama Blue* mobile app when you're on the go.



*Before you seek non-emergency healthcare, it's a good idea to call the provider to make sure your health plan is accepted. Always choose an in-network provider to pay the lowest out-of-pocket cost for your healthcare.*

Screenshots are current as of July 2021 and are subject to change.



# ESTIMATE YOUR TREATMENT COSTS

Save time and money with the online Treatment Cost Estimator. You can look up more than 1,600 in-patient and out-patient procedures to make more informed decisions about where to go.

## The Treatment Cost Estimator makes it easy to:

- ▶ Estimate the costs of treatment prior to having the procedure
- ▶ Compare search results by cost, location, provider or facility name
- ▶ Understand your out-of-pocket cost and anticipate future expenses for a particular treatment
- ▶ Know the coinsurance or copay amount you will pay by facility or physician

## To access the Treatment Cost Estimator:

- ▶ Log in to your *myBlueCross* account online or via the Alabama Blue mobile app
- ▶ Click the *myBlueCross* tab in the blue banner, and then click "Account Summary"
- ▶ Click "Treatment Cost Estimator" under the *Saving Money* section on the right of the screen
- ▶ Search for a treatment or condition

Refine your results

Miles from starting point

1

5

25

50

100

150

Patient Age

All ages

Tiered Networks

☐ Tier 1 Lower Member Cost Share (13)

Languages Spoken by Provider

☐ English (17)

Specialty

☐ General Acute Care Hospital (13)

☐ Ambulatory Surgical Center (4)

☐ Rehabilitation Hospital (2)

Languages Spoken by Staff

☐ English (17)

Provider Type

☐ Facilities (17)

ACME SURGICAL CENTER

Ambulatory Surgical Center

1

123 SOUTH STREET

BIRMINGHAM, AL 35244

7.7 miles [Get directions](#)

(205) 444-5555

Call for Office Hours

ABC HOSPITAL

Rehabilitation Hospital, General Acute Care Hospital

2

4567 UNIVERSITY STREET

BESSEMER, AL 35022

10.1 miles [Get directions](#)

(205) 555-4444

Call for Office Hours

XYZ MEDICAL CENTER

General Acute Care Hospital

3

8910 STONERIDGE PARKWAY

BIRMINGHAM, AL 35244

13.6 miles [Get directions](#)

(205) 555-1234

Call for Office Hours

Your estimated out-of-pocket cost:

\$200

Average Total Cost: \$6,359

Your estimated out-of-pocket cost:

\$200

Average Total Cost: \$8,331

Tier 1 Lower Member Cost Share

BEST COVERAGE

Your estimated out-of-pocket cost:

\$200

Average Total Cost: \$9,127

Tier 1 Lower Member Cost Share

BEST COVERAGE

Sample search results listed above are for an ACL repair. The example above displays benefits based off an average price of the facility charges listed and a plan benefit subject to a \$200 deductible. **Please Note:** the amount of the cost estimate that you are responsible for paying is based on your benefit plan, including any deductible and coinsurance requirements.

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# HOW TO READ YOUR CLAIM STATEMENTS

A Claim Statement is generated every time you or a covered family member uses your health insurance plan. It provides an at-a-glance record of each occurrence, detailing how much was charged, how much your plan paid and how much you may owe.

for John Doe

450 Riverchase Parkway East  
Birmingham, AL 35244-2855  
AlabamaBlue.com

**1** Claim statement as of <06/01/22>  
Contract number: <12345678901234>  
<Group Name>  
Services for: <John Q. Member>

**2** <John Q. Member>  
<202 Summerset>  
<Apartment 123>  
<Birmingham, AL XXXXX>

**3** This is not a bill.  
It's an explanation of how your health plan handles your medical service.  
<Check enclosed for \$XX.XX>

**4** How do I use the claim statement?  
• See what your health plan paid.  
• See how much you owe or may have paid for each medical service you received.

If the amount you may owe shown on the following page(s) does not match what your doctor or hospital is billing you, you can reach out to us through our Message Center by logging in at AlabamaBlue.com or calling us at <888-258-1710> and we will work to resolve the issue.

**5** Your health plan benefits at a glance  
As a reminder, here is an overview of your benefits.

**6** YOUR COPAYS  
In-network Medical Services  
Primary Care Physician Visit \$30.00  
Specialist Visit \$60.00  
A copay is the dollar amount you pay for each visit to the doctor's office. For other services, coinsurance may apply. Some health plans also have CTR or inpatient copays.  
For information regarding preventive services covered at no cost, please visit <AlabamaBlue.com/copy>.  
Benefits are subject to the terms, limitations and exclusions of your plan. Please see your benefit booklet for a complete listing of your plan benefits.

**7** YOUR COINSURANCE  
In-network coinsurance  
Coinsurance is your share of the costs of a healthcare service. It's a percentage of the amount charged for services. You start paying coinsurance after you've paid your plan's deductible.

**8** Here is an overview of what you have paid out of pocket to your providers for covered health care services prior to your services detailed in this statement.  
It's an explanation of how your health plan handles your medical service.  
OUT-OF-POCKET MAXIMUM  
If you pay for these services, you will receive a bill from your provider. If the amount you may owe doesn't match what your doctor or hospital is billing you, you can reach out to us through our Message Center by logging in at AlabamaBlue.com or calling us at <888-258-1710> and we will work to resolve the issue.

**9** Summary of Services from <Provider Name> on <Date of Service>  
Claim Number <#####>

**10** Summary of Services from <Provider Name> on <Date of Service>  
Claim Number <#####>

**11** Summary of Services from <Provider Name> on <Date of Service>  
Claim Number <#####>

**12** Summary of Services from <Provider Name> on <Date of Service>  
Claim Number <#####>

**13** Summary of Services from <Provider Name> on <Date of Service>  
Claim Number <#####>

450 Riverchase Parkway East  
Birmingham, AL 35244-2855  
AlabamaBlue.com

450 Riverchase Parkway East  
Birmingham, AL 35244-2855  
AlabamaBlue.com

450 Riverchase Parkway East  
Birmingham, AL 35244-2855  
AlabamaBlue.com

DATE OF SERVICE	SERVICES (Code/Name)	BILLED CHARGES	MEMBER DISCOUNT PROVIDER RESPONSIBILITY	NONCOVERED CHARGES	ELIGIBLE CHARGES	HRA PAID	YOUR BENEFIT PAID/YOUR BENEFIT COVERED	OTHER INSURANCE PAID	COPY	COINSURANCE	APPLIED TO DEDUCTIBLE	YOU MAY OWE
05/20/22	Professional Visit Code XXXX	\$170.00	\$14.40	-	\$155.60	-	\$155.60	-	-	-	-	\$0.00
05/20/22	Vaccine Admin/Consult Code XXXX	\$121.03	\$96.61	-	\$24.42	-	\$24.42	-	-	-	-	\$0.00
05/20/22	Lab Test: Tissue Code XXXX	\$556.70	\$445.30	-	\$111.70	-	-	-	-	-	\$111.70	\$111.70
05/20/22	Service Name Code XXXX	\$170.00	\$14.40	-	\$155.60	-	\$155.60	-	-	-	-	-
TOTALS		\$1,428.73	\$178.03	-	\$650.76	-	\$650.76	-	-	-	-	-

- This is the date the Claim Statement is generated.
- This is the covered member who received the healthcare services listed on the Claim Statement.
- If applicable, this is the amount you are owed for overpaid healthcare services.
- This provides a brief summary of how your particular health plan works.
- This updates your progress towards meeting the plan year deductible and out-of-pocket maximum. NOTE: It does not include any out-of-pocket payments listed on the Claim Statement (only those made before the Claim Statement was generated).
- This provides a summary of charges and payments for the healthcare services listed.
- This provides detailed charges and payments for the healthcare services listed and the name of the provider.
- This is the amount the provider charged the health plan.
- This is the amount of the Billed Charges the provider agreed to waive.
- If applicable, this is the amount of the Billed Charges the health plan does not cover.
- This is the amount owed to the provider after subtracting discounts and adding any non-covered charges.
- These are the amounts the health plan(s) paid to the provider.
- If applicable, these are the amounts you pay out-of-pocket to the provider. You may still owe the provider, if these amounts were not collected in full at the time of service.

## Access your Claim Statements

When you register for myBlueCross, you will receive emails when new Claim Statements are available to view online. Log in to your myBlueCross account. Click the myBlueCross tab in the blue banner, and then click "Claim Statements" under *Benefit Summary*. You have 24/7 access to two years of claims history.

Alternatively, you can choose to receive paper copies of Claim Statements. Log in to your myBlueCross account. Click the down arrow beside your avatar in the upper right of the screen. Click "View More Settings," and then click "Claim/Medical Preferences." Then click "Change Claim Statements Preference."



# MAKE HEALTHIER CHOICES

We engage, motivate and empower our members to live their best life possible. The following enhanced services

*go well beyond simply  
providing health coverage*

—all available to you at no additional  
out-of-pocket cost.



## Online Wellness Support

myBlueWellness is an enhanced online platform powered by WebMD® designed to promote your healthier lifestyle.

Online features include:

- ▶ Health assessment
- ▶ Personalized action plans with medical record archive
- ▶ Healthy yet flavorful recipes
- ▶ Lifestyle and behavioral change programs
- ▶ Educational videos

Visit [AlabamaBlue.com/myBlueWellness](https://AlabamaBlue.com/myBlueWellness) to get started today.



## Online Care Reminders

Always know which healthcare services are recommended for you. Care Reminders are based on national guidelines and information Blue Cross receives from your healthcare providers.

To access your Care Reminders, log in to your myBlueCross account. Click the myHealth tab in the blue navigation bar, and then click "Care Reminders." If using the Alabama Blue mobile app, select myHealth and then Care Reminders. If you have questions about your Online Care Reminders or need assistance scheduling an appointment, call the member Customer Service number on the back of your Blue Cross ID card.





## Case Management

This telephone-based program is designed to help you navigate the healthcare system if you have a complex, catastrophic or specialty condition. Case management programs are staffed by experienced registered nurses and include, but are not limited to, the following:

- ▶ **Transition of care:** educate and support following discharge to help reduce the risk of preventable ER visits and hospital readmissions
- ▶ **Catastrophic care:** coordinate care for members who have experienced a traumatic injury or condition requiring extended hospital stay or rehabilitation
- ▶ **Specialty care:** provides education, guidance and support for members and family by clinicians experienced in the fields of high risk OB, neonatal, transplant, oncology and pediatrics

There is no cost, and participation is voluntary and confidential.  
Call 1-800-821-7231 to speak with a nurse.



## At-Risk Health Coaching

This curriculum-based program focuses on obesity, hypertension and prediabetes. Health coaches can help you prevent or reverse the risks for developing a chronic condition by making healthy lifestyle changes.

They work with you to develop a customized action plan to:

- ▶ Set personal health goals
- ▶ Overcome challenges
- ▶ Develop a nutrition and exercise regimen
- ▶ Understand medications

Participation is free and confidential.  
Call 1-855-699-6168 or email  
HMHealthCoach@bcbsal.org.



## Chronic Condition Management

This telephone-based program incorporates a holistic, personalized approach to managing your healthcare. Our program includes these and other specialized conditions, as it continues to evolve:

- ▶ Asthma
- ▶ Chronic Obstructive Pulmonary Disease
- ▶ Congestive Heart Failure
- ▶ Coronary Artery Disease
- ▶ Diabetes (Types 1 and 2)
- ▶ Musculoskeletal pain
- ▶ Chronic Kidney Disease (CKD)

Clinicians will provide a health assessment for you and develop a patient profile. There is no cost, and participation is voluntary and confidential.  
Call 1-888-841-5741 to enroll.



## BABY YOURSELF<sup>®</sup> Maternity Management

The goal of this maternity program is to ensure expectant mothers and their babies receive the best possible healthcare during pregnancy. You'll receive telephone or e-mail support from an experienced registered nurse throughout your pregnancy.

The Baby Yourself mobile app provides additional information, trackers and easy access to your nurse through one-button dialing. Once your baby arrives, the Lactation Program provides encouragement, support and information designed to improve the well-being of infants and their families.

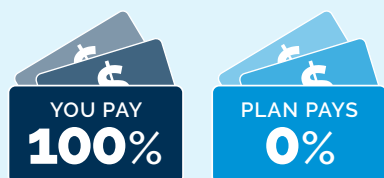
Call 1-800-222-4379 to enroll.

# UNDERSTAND DEDUCTIBLES & COINSURANCE

It's important to understand how your particular health plan works before you receive care so you know how much you will pay for it. Below is an example of how a typical health plan works.

## DEDUCTIBLE

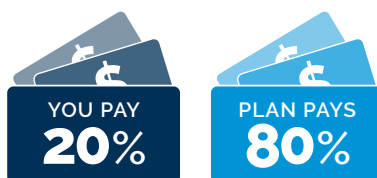
Until you meet your deductible, this is the amount you owe for covered services before your health plan begins to pay any portion.



FOR A \$200 SERVICE	
YOU PAY	PLAN PAYS
<b>\$200</b>	<b>\$0</b>

## COINSURANCE

Once your deductible is met, this is the amount the health plan and you owe for covered services.



FOR A \$200 SERVICE	
YOU PAY	PLAN PAYS
<b>\$40</b>	<b>\$160</b>

## OUT-OF-POCKET MAXIMUM

This is the most you owe during a plan year for covered services before the health plan begins to pay the full amount.



FOR A \$200 SERVICE	
YOU PAY	PLAN PAYS
<b>\$0</b>	<b>\$200</b>

For illustrative purposes only. Does not account for any applicable copays you may owe at the time of care service. Preventive services may be covered by the health plan at 100% with no deductible or copay. Review your particular benefits to determine coverage levels.

Keep in mind deductibles, coinsurance and out-of-pocket maximums will vary based on the health plan and whether services are provided in-network.

# COORDINATE BENEFITS WITH **MORE THAN ONE HEALTH PLAN**

It's important to understand how your benefits are coordinated when you have multiple health plans. You should also be aware of your rights during special enrollment periods.

## **Coordination of Benefits (COB)**

This affects your benefits when you or a covered family member also has another health plan. COB ensures the right plan processes your claims first and prevents overpayments. The goal is to keep costs down for everyone.

Please be sure we have current information about any other health plans you may have. This will help us process your claims correctly and promptly.

You may update your COB status online. Just have your Blue Cross member ID card ready.

1. Log in to your *myBlueCross* account
2. Click the *myBlueCross* tab in the blue banner, and then click "Account Summary"
3. Click "Other Insurance Coverage Information"





# Familiarizing yourself with these common health plan terms can help you better understand your benefits.

## **Allowed Amount**

The maximum amount on which payment is based for covered healthcare services. If an out-of-network provider charges more than the Allowed Amount, you may have to pay the difference (known as balance billing). You cannot be balance billed by in-network providers.

## **Coinsurance**

A type of coverage where you and the health plan split the amount paid for a covered service, generally after you have paid a set deductible. For example, you pay 20% and the health plan pays 80%.

## **Copay**

A fixed amount you pay for covered healthcare services, usually when you receive the service. The amount can vary by the type of service.

## **Deductible**

The amount you owe for covered healthcare services before your health plan begins to pay.

## **Network**

The facilities, providers and suppliers your health plan or its vendors have contracted with to provide healthcare services. In-network coinsurance and copay amounts are typically less than out-of-network.

## **Out-of-Pocket Maximum**

The most you pay during a policy period (usually a year) before your health plan begins to pay 100% of the Allowed Amount. This limit never includes your Premium, Balance Billing charges or healthcare services not covered by your health plan. Some health plans don't count all of your coinsurance, copays, deductibles, out-of-network payments or other expenses toward this limit.

## **Precertification or Preauthorization**

The procedures used by your health plan to determine that certain healthcare services, treatment plans, durable medical equipment or prescription drugs are medically necessary before you receive the services, except for emergency services. It is not a guarantee your health plan will cover the cost.

## **Premium**

The amount you pay monthly for your health plan.

## **Provider**

A physician, healthcare professional or healthcare facility licensed, certified or accredited as required by state law.

## **Referral**

A written/electronic order from your student health center\*/primary care physician for you to see a specialist or receive certain healthcare services. If your health plan requires it, and you don't get a referral, the health plan may not pay for the services.

## **Specialist**

A physician who focuses on a specific area of medicine or patient group to diagnose, manage, prevent or treat certain types of symptoms and conditions. A non-physician specialist is a provider who has more training in a specific area of healthcare.

## **Student Health Center/Primary Care Physician**

A provider who directly provides or coordinates a range of healthcare services for a patient.

\* If applicable to your plan benefits

**Since 1936**, we've helped our members live their best life possible by providing unmatched access to quality healthcare. We work hard to deliver the best value for your healthcare dollar with:

- ▶ the broadest choice of in-network doctors and hospitals
- ▶ the most comprehensive coverage at some of the lowest premiums in the country
- ▶ provider strategies to improve care quality and cost
- ▶ low, industry-leading operating costs

This guide will help you understand and make better use of your Blue Cross health plan. If you have any questions, please call the member Customer Service number on the back of your Blue Cross ID card. You can also visit us online at **AlabamaBlue.com**.



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