

Important Information

About Three-Tier Benefit Plans



Blue Cross and Blue Shield of Nebraska (BCBSNE) helps address the rising cost of health care by offering health plans with three tiers (or levels) of benefits. These health plans use a select provider network called Select BlueChoice. When you use a Select BlueChoice provider, you will receive Select In-network (Tier I) benefits. These benefits provide all the advantages of In-network (Tier II) benefits, but with the addition of lower deductibles, coinsurance and copays.

You already know about health plans with two-tiers, or levels, of benefits: in-network and out-of-network. A three-tier plan is similar to that, but it has an additional tier (or level) that offers the lowest cost sharing (or deductible, copayments, and coinsurance) available in your plan. This tier, called a Select In-network Tier, allows us to team with select health care systems to offer you quality care at a more affordable cost.

You may access any provider in any of the tiers. However, if you use providers in the Select In-network Tier, you will receive all the advantages of an In-network provider, as well as pay the lowest deductible and copayment or coinsurance amounts available under your plan.

Both Tier I and Tier II providers are considered in-network. In-network providers have agreed to accept our benefit payment for covered services as payment in full, except for any deductible, copays, coinsurance amounts, as well as charges for non-covered services. In-network providers can't bill you for amounts over our benefit allowance. **Out-of-network providers can bill patients for amounts in excess of our benefit allowance, or what we pay the provider.**



The three tiers offer three levels of cost sharing:

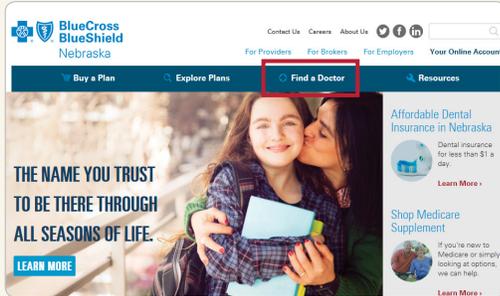
| NETWORK | CONSISTS OF | COST SHARING ¹ (deductible/copayment/coinsurance) |
|-----------------------------------|--|---|
| Select In-network (Tier I) | Providers in the select health care system | Lowest |
| In-network (Tier II) | All other NETWORK BLUE providers contracting as a Tier II provider, as well as BlueCard ² providers | Moderate |
| Out-of-network (Tier III) | Providers not contracting as Tier I or Tier II network provider | Highest |

NOTE: CHI Health is not participating as a Tier I or Tier II provider in our three-tier plan options.

How to Search for In-network (Tier I and Tier II) Providers

Check your Blue Cross and Blue Shield of Nebraska member ID card for your network name.

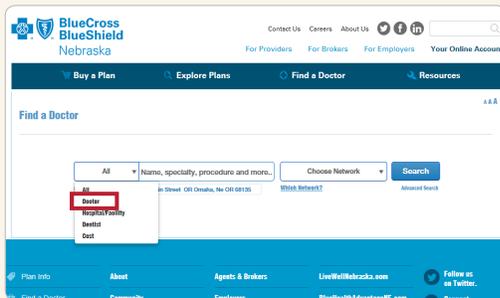
1 At www.nebraskablue.com, select FIND A DOCTOR.



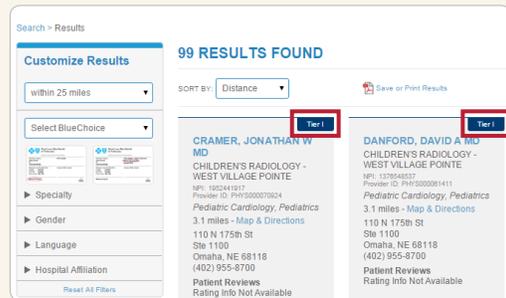
2 Then, choose DOCTOR AND HOSPITAL.



3 In the first field of the FIND A DOCTOR page, select the drop down arrow and click on the type of provider you would like to search. Enter the provider's name or specialty, procedure, etc. Then, enter your location (ZIP code, city/state or full address). Choose your network from the CHOOSE NETWORK drop down menu. Then, select SEARCH.



4 Your search results will show providers with a Tier I (Select In-network) or Tier II (in-network) indicator. You may obtain services from either type of provider, but using Tier I providers gives you access to the lowest cost share levels on your medical plan. If you would like to view only the Tier I providers, use the TIER filter on the left hand side to choose Tier I.



Frequently Asked Questions

Common scenarios members may incur for health services and how the claims would be processed.

Hospital Services and Related Professional Services

- Q** Nancy is an inpatient at a Select In-network (Tier I) hospital. One of the physicians that provides Nancy's services while in the hospital is not a Select In-network provider. How will Nancy's claims be covered for that physician?
- A** Because Nancy is using a Tier I hospital, all of the professional services she receives in that hospital will be subject to the Tier I level of benefits.

- Q** Brett uses a Select In-network (Tier I) specialist for a surgery he needs and the surgeon schedules the surgery at an in-network (Tier II) hospital. How will Brett's claims be covered for the facility and related health care providers?
- A** While the surgeon's claim will be subject to the Tier I level of benefits, the hospital will be subject to the Tier II level of benefits. Tier I providers will be subject to Tier I level of benefits, and other health care providers that may be Tier II or Tier III will be subject to the Tier II level of benefits (same as the hospital).

Patient is Transferred Outside of Tier I

- Q** Jane had a baby in a Select In-network (Tier I) hospital. The baby was born with special needs and is transferred to an in-network (Tier II) hospital for specialized care. How will the hospital claims be covered for the newborn once the baby is transferred to the Tier II hospital?
- A** The newborn's claims will be subject to the same level of benefits as the hospital network status. So, in this example the newborn's hospital and professional claims (once transferred to the Tier II hospital) would be subject to the in-network (Tier II) level of benefits.

Physician Referral Outside of Tier I

- Q** Sally's Select In-network (Tier I) primary care physician refers her to an in-network (Tier II) specialty physician for additional services. If Sally uses the referred physician, how will her claims be covered?
- A** If Sally uses a Tier II provider, her covered services will be subject to the Tier II level of benefits even if she was referred by a Tier I provider. Similar, if she used a Tier III provider, her covered services would be subject to the Tier III level of benefits.

BCBSNE encourages you to know who is in the Select (Tier I) network. Please view the online provider directory at nebraskablue.com.

Specialty Provider Not Available in Tier I

- Q** Kelly notices a certain type of specialty provider is not available in the Select In-network (Tier I) network. If Kelly receives services from an in-network (Tier II) specialty provider because the provider was not available in the Tier I network, how will these services be covered?
- A** Kelly's services will be subject to the same level of benefits as the specialty provider's physician network status. In this example, Kelly's covered benefits will be subject to the Tier II level of benefits.

Independent Laboratory Tests

- Q** Fred visits his Select In-network (Tier I) provider and has diagnostic lab tests performed. The lab tests are sent to an in-network (Tier II) independent lab to process. How will the independent labs be covered?
- A** Independent labs are subject to the same level of benefits as the physician's network status. In this example, Fred's independent labs would be subject to the Select In-network (Tier I) level of benefits.

Emergency Room Services

- Q** Joe has an accident and is taken to the nearest hospital which happens to be a Select In-network (Tier I) hospital. How will Joe's emergency room services be covered?
- A** Covered emergency room hospital services will be subject to the same level of benefits as the network status of the hospital. In Joe's case, the claim would be subject to the Select In-network (Tier I) level of benefits. Other health care provider claims would be subject to the same level of benefits as the facility (Tier I).
- Q** Jim is out of town and has an accident. He is taken to the nearest hospital which happens to be an in-network (Tier II) hospital. How will Jim's emergency room services be covered?
- A** Covered emergency room hospital services will be subject to the Tier II level of benefits as shown on Jim's Schedule of Benefits Summary. Other health care provider claims (in-network and out-of-network) would be subject to the same level of benefits as the facility.
- Q** Lisa has an accident and is taken to the nearest hospital which happens to be an out-of-network (Tier III) facility. All of Lisa's related health care services are also provided by out-of-network (Tier III) providers. How will Lisa's emergency room services be covered?
- A** Covered emergency room hospital services will be subject to the in-network (Tier II) level of benefits as shown on Lisa's Schedule of Benefits Summary. Other health care provider claims would be subject to the same level of benefits as the facility (Tier II). Even though the claims are covered at the in-network (Tier II) level of benefits, they are subject to the out-of-network allowance. The providers could choose to bill Lisa for any amount in excess of our benefit allowance, or what we pay the provider.

Ambulance Services

- Q** Greg has an accident and is taken by an out-of-network (Tier III) ground ambulance service to the closest hospital, which happens to be an in-network facility (Tier II). How will Greg's ambulance and hospital claims be covered?
- A** Ground ambulance services will be subject to the Tier II level of benefits as shown on Greg's Schedule of Benefits Summary. Covered hospital services will be subject to the same level of benefits as the network status of the hospital. The providers could choose to bill Greg for any amount in excess of our benefit allowance, or what we pay the provider.



If you are a BCBSNE member and have questions about three-tier benefit plans, please contact our Member Services Department at the number shown on the back of your BCBSNE member ID card.

If you are not yet a BCBSNE member, please call (402) 390-1820 or (888) 592-8961.

¹ The amounts you pay to meet your plan's Select in-network (Tier I) deductible, coinsurance and out-of-pocket limits are also applied to help satisfy your plan's in-network (Tier II) deductible, coinsurance and out-of-pocket limits (and vice versa). The out-of-network (Tier III) deductible, coinsurance and out-of-pocket limits are separate and do not help satisfy your plan's Select in-network (Tier I) or in-network (Tier II) deductible, coinsurance and out-of-pocket limits.

² BlueCard providers are providers who participate in the Blue Cross and Blue Shield Association BlueCard® Program. If you or your covered family members live or travel outside of Nebraska, you can obtain covered services at the in-network level through the BlueCard Program. This program makes obtaining in-network care easy. All you have to do is use hospitals and doctors in the local Blue Cross and Blue Shield Plan's BlueCard PPO network. When you do, you will also enjoy the discount and claim filing arrangements Blue Cross and Blue Shield Plans across the country have negotiated with BlueCard network hospitals and doctors in their area.