

Save time and money — Connect with Independence!



Looking for a simple way to get the most from your Independence Blue Cross health plan? Connect with us by signing up for email or text alerts to get:



Personalized reminders about your health
for when it's time for an annual visit or screening



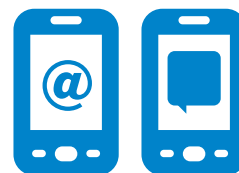
Notifications to help you access important plan information
like a link to your digital ID card, or the ability to reach Customer Service with one tap



Alerts on how to get the most out of your health plan
with information about available benefits you may not be using or how you can save money when you need health care

Visit **ibx.com/getconnected**

Be sure to have your member ID card handy — you'll need your ID number from the front of the card.



**Stay up to date. Save money.
Maximize your benefits.**

Visit **ibx.com/getconnected**
to sign up for email or
text alerts



Get \$150 back!

Complete 120 workouts at an approved fitness center

Looking for motivation to exercise?

The Healthy LifestylesSM fitness program will reimburse you \$150 for working out regularly.

Four easy steps

1. Join an approved fitness center. Choose a full-service fitness center that includes amenities for continuous cardiovascular, flexibility, and resistance training.
2. Exercise at your fitness center regularly. Work out at your approved fitness center 120 times during a 365-day period.
3. Record your workouts. After you complete 120 workouts, you can request a reimbursement. Your logged workouts must be at least eight hours apart.
4. Submit your documentation and request reimbursement. Log in to ibx.com/reimbursements and upload copies of the following documentation:
 - Proof of payment
 - Record of your workouts

Start your well-being journey today!

Visit ibxpress.com or download the IBX mobile app.

Once all your documentation is submitted, you can request your reimbursement to be paid by direct deposit or American Express rewards card.*

Achieve Well-being

Our personalized online tools and resources help you achieve what's important in a way that's simple, easy, and fun. Visit ibxpress.com to get started today.

*Please note that American Express charges a fee of \$4.00 plus three percent of reimbursement amount.

Fitness Program guidelines

Eligible members

Participants must be 18 or older.

Selecting an approved fitness center

To be eligible for the fitness center reimbursement, you must choose a full-service fitness center that offers a variety of cardiovascular, flexibility, and resistance training in a supervised setting.

Eligible fitness centers

Eligible full-service fitness centers generally feature most of the following amenities:

- Group exercise classes (e.g. aerobics, spinning, body sculpting, kickboxing)
- Resistance training equipment (e.g., weight machines)
- Free weights
- Cardiovascular training equipment (e.g., treadmills, stationary bicycles, elliptical trainers)
- Pool for swimming laps
- Track for running/walking

Ineligible fitness centers

Membership at athletic clubs that feature a single competitive or recreational sports activity are not eligible for reimbursement, including programs and facilities focused on:

- Tennis/squash/racquetball
- Basketball
- Golf
- Pilates/yoga class
- Martial arts/karate class
- Sports leagues
- Recreational swim clubs
- Dance instruction
- Outdoor "boot camp" style program
- Sculling/style program rowing
- Chiropractic services

Lifetime fitness center memberships

If you purchase a lifetime membership at a fitness center, you are eligible to receive a reimbursement of up to \$150 of the membership fees paid once per calendar year as long as the required number of workouts are completed.

Family fitness center memberships

Family memberships are subject to the following conditions:

- Each family member who requests the reimbursement must be listed on the membership contract.
- Each family member who requests the reimbursement must individually participate in the Fitness Program and fulfill all Fitness Program reimbursement requirements. Each eligible family member may receive reimbursement of up to \$150 of his or her portion of the total annual membership fees once per calendar year.

Example:

- Family fitness center annual contract fee is \$700.
- Four family members are listed on the family fitness facility contract.
- Two family members are 18 or older and, therefore, are eligible for reimbursement.
- $\$700 \div 2 = \350 (each eligible family member's portion of the total contract fee).

In this example, if the two eligible family members complete all Fitness Program requirements, each will receive up to \$150 (his or her portion of the family fitness facility annual contract fee). If only one eligible member completes all Fitness Program requirements, the family member will receive up to \$150 (his or her portion of the family fitness facility annual contract fee).

Reimbursement rules and requirements

- You must complete 120 workouts during a 365-day Fitness Program period. However, the 365-day time period does not need to be within the same calendar year as the reimbursement. For example, you could get a reimbursement paid out in January 2019 for 120 workouts documented in 2018.
- You must have coverage with Independence at the time of your request for reimbursement.
- You are only eligible for one reimbursement per program, per calendar year.
- Dependents must be at least 18 years old to be eligible for reimbursement.
- Logging in for another member at a fitness center is prohibited.
- Falsification of information in order to receive your reimbursement is strictly prohibited.

How to record your workouts

- Record workouts using the logbook: To record workouts using the logbook on page 4, ask a fitness center representative to sign and date the logbook each time you work out. You may also use the logbook to record your workouts when you visit a fitness center other than your primary fitness center (e.g., when you work out while traveling or vacationing out of town).
- Record workouts using a fitness center's computer printouts: You may choose to use your fitness center's computer printout as your primary method of logging workouts. However, keep in mind that Independence cannot assume any responsibility for the reliability of fitness center computer systems. For this reason, if you select a fitness center computer printout as your primary method of logging workouts, you also accept the risk that all your workouts may not be credited

Other important information

- Independence does not guarantee the solvency of any fitness center and, therefore, has no liability should a fitness center close.
- For members other than those enrolled in a Medicare Advantage plan, Healthy Lifestyles programs are value-added. They are not part of the health care benefits you have purchased and, therefore, are subject to change without notice.
- At Independence, we encourage all of our members to adopt and maintain a regular fitness program. However, if you are 40 or older, overweight, have a history of high blood pressure or heart disease, or have any other health concerns related to exercise, you are encouraged to consult your doctor before beginning any exercise program.
- If you are unable to complete workouts due to a medical procedure, please call [1-800-590-8880](tel:1-800-590-8880).

Questions?

Call Healthy Lifestyles at [1-800-590-8880](tel:1-800-590-8880)



Get \$150 back!

Complete a tobacco cessation program

You probably know many of the reasons why you should quit smoking — it can help you breathe easier, live longer, and protect the health of those around you. Quitting isn't easy, and many people try more than once before they succeed, but it's worth it.

To help you quit for good, our Healthy LifestylesSM Tobacco Cessation Program will reimburse you up to \$150 for completing an approved tobacco cessation program.*

How it works

1. Sign up for an approved tobacco cessation program.
2. Complete the approved program.
3. Submit documentation and request your reimbursement.

Log on to ibx.com/reimbursements and submit the following documentation:

- Proof of your participation in an approved tobacco cessation program or a certificate of completion
- All program receipts and receipts for nicotine replacement products or medications prescribed to you to help you quit

Start your well-being journey today!

Visit ibxpress.com or download the IBX mobile app.

Once all of your documentation is submitted, you can request your reimbursement to be paid by direct deposit or American Express rewards card.[†]

Achieve Well-being

Our personalized online tools and resources help you achieve what's important in a way that's simple, easy, and fun. Visit ibxpress.com to get started today.

* If you're 18 or older and your program costs less than \$150, you can apply the difference toward reimbursement of nicotine replacement products or medications prescribed to you to help you quit.

[†] Please note that American Express charges a fee of \$4.00 plus three percent of the reimbursement amount.

Approved tobacco cessation programs include those that focus on behavior modification and provide frequent and regular support.

Tobacco Cessation Program guidelines

Selecting a tobacco cessation program

No matter who you are, you can find a program that will give you the type of support and encouragement you need to kick the habit. Eligible programs include those that focus on behavior modification and provide frequent and regular support such as weekly meetings or telephone-based sessions. Work with your health care provider to determine which method is best for you. You can opt for an individual approach, or choose a program that offers group support. Some programs can even help you manage stress, avoid weight gain, and overcome barriers to quitting. You can also choose a program offered by a network hospital in your area. Search for a network hospital in your area at ibxpress.com or call **1-800-ASK-BLUE** for more information.

The following are not reimbursable:

- Copays, coinsurance, deductibles
- Hypnosis
- Acupuncture
- Dietary supplements; injections
- Electronic cigarettes

You are only eligible for one reimbursement per program, per calendar year.

For more information, please contact Healthy Lifestyles at **1-800-590-8880**.

Support for quitting other forms of tobacco

There are 28 known cancer-causing substances in chewing tobacco, spit tobacco, and other smokeless tobacco products. All smokeless tobacco contains nicotine, so it's just as addictive as cigarettes. And if you use any form of smokeless tobacco, you put yourself at an increased risk for serious health conditions including tooth decay, gum disease, and oral cancers of the lip, tongue, cheeks, gums, throat, and floor and roof of your mouth. If you're using smokeless tobacco, make a commitment to quit today. Many of the tobacco cessation programs that are eligible for our reimbursement also support individuals who want to quit using smokeless tobacco.

Nicotine replacement and medication prescribed to assist with tobacco cessation

You may be eligible to obtain nicotine replacement medications under your pharmacy plan with a prescription from your doctor.

Independence Blue Cross offers products through its subsidiaries Independence Hospital Indemnity Plan, Keystone Health Plan East and QCC Insurance Company, and with Highmark Blue Shield — independent licensees of the Blue Cross and Blue Shield Association.



Get \$150 back!

Enroll in a weight management program



Support from others can make weight loss feel more manageable. Enroll in Weight Watchers®, Weight Watchers® Online, or an approved weight management program at a network hospital and the Healthy LifestylesSM Weight Management Program will reimburse you up to \$150.

How it works

1. Sign up for an approved weight management program.
2. Attend the approved program.
3. Submit documentation and request your reimbursement.

Log on to ibx.com/reimbursements and submit the following documentation:

- If attending Weight Watchers in person, you will need to submit receipts and copies of your booklets.
- If participating in Weight Watchers Online, you should submit screen prints to show proof of payment and progress in the program.
- If attending a hospital-based or youth program, proof of payment and participation is required.

Start your well-being journey today!

Visit ibxpress.com or download the IBX mobile app.

Once all of your documentation is submitted, you can request your reimbursement to be paid by direct deposit or American Express rewards card.*

Achieve Well-being

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Weight Management Program guidelines

Selecting an approved weight management program

Choose Weight Watchers and attend weekly meetings, or opt for an approved weight management program based at a network hospital. Some weight management programs for members under age 18 may also be eligible for reimbursement. If you like, you may join more than one program per year; however, the maximum reimbursement you can receive is \$150 per year issued once per calendar year.

Weight management with Weight Watchers

The Weight Watchers program combines in-person group sessions, education, and tools to help you make the nutrition and exercise decisions that are right for you. With Weight Watchers Online, you can create a customized weight loss plan and use online and mobile tools to help you track your progress anywhere you go.

Weight management at network hospitals

Many of our network hospitals offer weight management classes to the community. Programs and schedules vary from hospital to hospital. For more information about available programs, contact the community health education department of your local hospital.

Weight management programs designed for youth and adolescents

Reimbursement is available to help with the cost of programs designed for minors. The program must focus on behavior modification, nutrition education, and have a goal of losing weight. Youth programs are commonly available through YMCAs, community centers, and hospitals.

Use the *Find a Doctor tool* on **ibx.com** to locate a network hospital in your area, or call **1-800-ASK-BLUE**.

Not reimbursable:

- Dietary supplements
- Plans that require the purchase of food products designed for use with the plan
- Injections
- Meal plans; liquid meals

Weight loss programs that are not reimbursable:

- Any online program other than Weight Watchers Online
- Any programs offered at a medical practice other than a hospital

You are only eligible for one reimbursement per program, per calendar year.

For more information, please contact Healthy Lifestyles at **1-800-590-8880**.

® Weight Watchers is a registered trademark of Weight Watchers International, Inc., an independent company.

Independence Blue Cross offers products through its subsidiaries Independence Hospital Indemnity Plan, Keystone Health Plan East and QCC Insurance Company, and with Highmark Blue Shield — independent licensees of the Blue Cross and Blue Shield Association.

Discrimination is Against the Law

This Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. This Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

This Plan provides:

- Free aids and services to people with disabilities to communicate effectively with us, such as: qualified sign language interpreters, and written information in other formats (large print, audio, accessible electronic formats, other formats).
- Free language services to people whose primary language is not English, such as: qualified interpreters and information written in other languages.

If you need these services, contact our Civil Rights Coordinator. If you believe that This Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with our Civil Rights Coordinator. You can file a grievance in the following ways: In person or by mail: ATTN: Civil Rights Coordinator, 1901 Market Street, Philadelphia, PA 19103, By phone: 1-888-377-3933 (TTY: 711) By fax: 215-761-0245, By email: civilrightscordinator@1901market.com. If you need help filing a grievance, our Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.



Make the call

and talk to your designated Registered Nurse Health Coach



Whether you have a general health question, need help managing a chronic health condition like diabetes, or have a more complex health situation like cancer, support from an Independence Blue Cross Health Coach is just a phone call away. All calls with your Health Coach are completely confidential, and Health Coaches are available 24/7, whenever you need their help.

What is a Health Coach?

An Independence Blue Cross Health Coach is a registered nurse whom you can call to discuss health concerns and get the help and support you need to reach your health goals. Health Coaches are available 24/7, and all calls are completely confidential. Health Coaches may also call you to offer you help.

How can a Health Coach help?

Your designated Health Coach can help you:

- Manage a chronic condition like asthma, diabetes, or heart disease
- Cope with a serious illness, like cancer or a stroke
- Prepare and coordinate services for a planned admission or procedure
- Review your doctor's discharge instructions with you
- Answer questions related to health issues, treatment instructions, tests, or procedures
- Understand your medications, and why and how to take them
- Work with you and your doctor to address health concerns

*This is a free and confidential service.

†Standard message and data rates may apply. Text STOP to stop and HELP for help. Terms and Conditions available at myhelpsite.net/ibx. Notification messages within IBX Wire™ are sent via automated SMS. Enrollment in IBX Wire™ is not a requirement to purchase goods and services from IBX.

Make the call today!

To speak with an available Health Coach 24/7, call **1-800-ASK-BLUE (1-800-275-2583; TTY: 711)**.* When prompted for a call reason, say "Health Coach."

Stay on top of personal health information, screening reminders, health tips, and more!†

Visit ibx.com/getconnected or text **IBX** to **73529** to sign up.



Know before you go with the Care Cost Estimator

Our Care Cost Estimator tool helps you save money and avoid unplanned expenses, just like you'd want to for any important purchase. Now you can compare providers side-by-side and estimate out-of-pocket costs — all based on your specific health plan.

Avoid surprises and save

Make informed decisions about how to spend your health care dollars.

Did you know that higher cost doesn't always mean better care? Certain factors like where you receive care can affect the cost of procedures, such as common surgeries, X-rays, and MRIs. For example, a simple X-ray can cost twice as much at a hospital than at a local imaging center. And the more your covered services cost, the more you could be responsible for paying out of your own pocket.

Log in to **ibxpress.com** or the **IBX mobile app** to estimate your out-of-pocket costs before your next appointment.

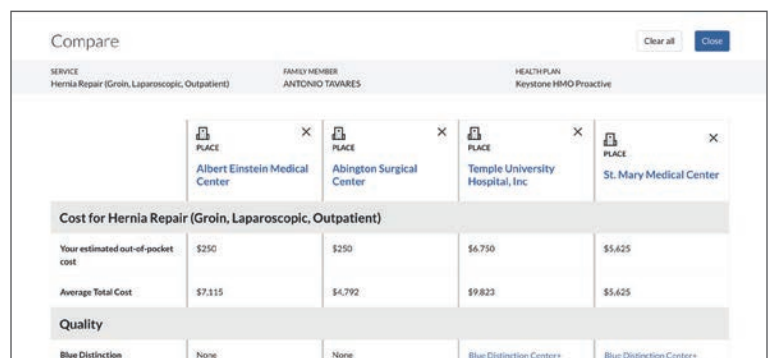
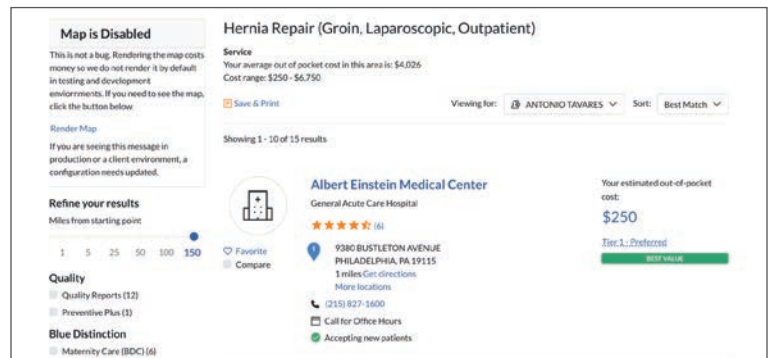
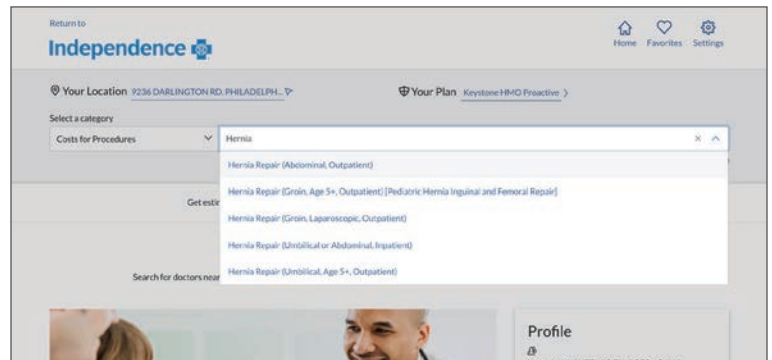
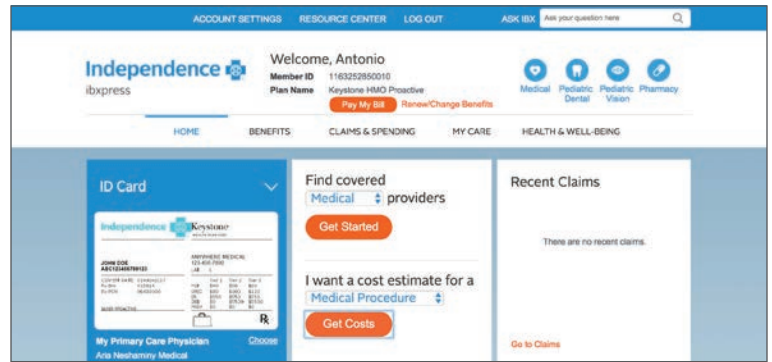
Before you schedule your next visit or procedure, use the Care Cost Estimator to search and compare providers by estimated price based on your health plan.

The tool will display:

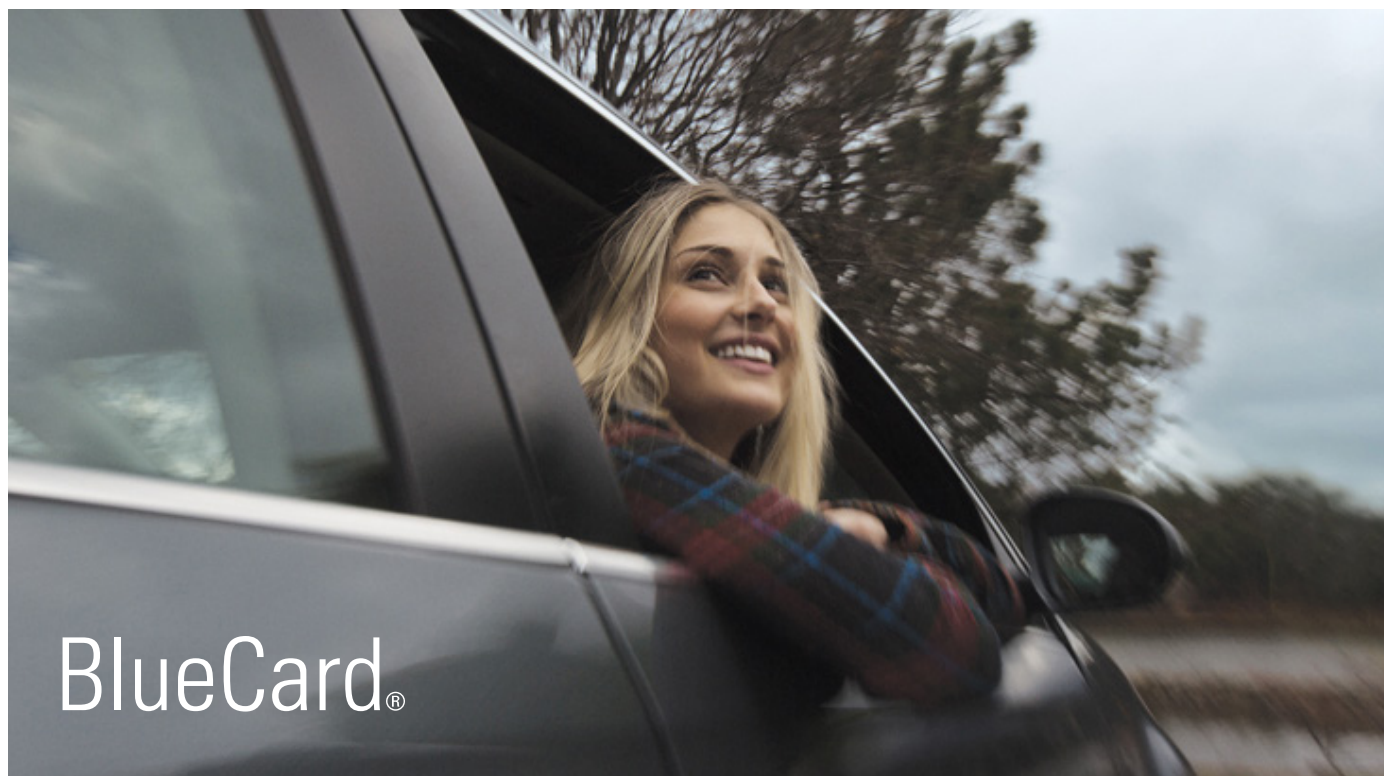
- Provider details
- Quality information, such as reviews
- Your estimated out-of-pocket costs for a wide range of common procedures and office visits

How to get started with the Care Cost Estimator

- 1 Visit ibxpress.com and login to your member account. Select *Get Costs* under *I want a cost estimate for a Medical Procedure*.
- 2 Begin to type the name of the procedure. As you type, a list of related procedures will display. Select the procedure description to find estimated out-of-pocket costs.
- 3 Search results display your out-of-pocket costs. To view additional cost information, you can select the cost located next to each search result. You can even compare providers and locations side-by-side based on their cost and quality scores by checking the *Compare* box next to the providers you'd like to select.
- 4 On the Compare screen, you'll see a side-by-side comparison of the providers you selected. Use this information to decide the best one for you and your budget.



Independence Blue Cross offers products through its subsidiaries Independence Hospital Indemnity Plan, Keystone Health Plan East and QCC Insurance Company, and with Highmark Blue Shield — independent licensees of the Blue Cross and Blue Shield Association.



Across the country and around the world...we've got you covered.

As a Blue Cross and Blue Shield member, you take your healthcare benefits with you — across the country and around the world. Your membership gives you a world of choices. Within the United States, you're covered whether you need care in urban or rural areas. Outside the United States, you have access to doctors and hospitals in more than 200 countries and territories around the world through the BlueCard Worldwide® Program.

Designed to save you money.

In most cases, when you travel or live outside your Blue Cross and Blue Shield company's service area, you can take advantage of savings the local BCBS company has negotiated with its doctors and hospitals. For covered services, you should not have to pay any amount above these negotiated rates and any applicable out-of-pocket expenses.

To locate doctors and hospitals wherever you or a covered dependent need care (have your member ID card handy):

- Visit the National Doctor & Hospital Finder at www.BCBS.com.
- Use the National Doctor & Hospital Finder app for Android,* iPhone, iPad and iPod Touch.** (Rates from your wireless provider may apply.)
- Call BlueCard Access® at 1.800.810.BLUE (2583).



Take charge of your health, wherever you are.

In the United States

- Always carry your current member ID card.
- If you're a PPO member, always use a BlueCard PPO doctor or hospital to ensure you receive the highest level of benefits.
- Call your BCBS company for precertification or prior authorization, if necessary. Refer to the phone number on the back of your member ID card.
- When you arrive at the participating doctor's office or hospital, show the provider your ID card. The provider will identify your benefit level through one of these symbols:



Traditional/
Indemnity
Benefits



PPO
Benefits

After you receive care, you should:

- Not have to complete any claim forms.
- Not have to pay upfront for medical services, except for the out-of-pocket expenses (noncovered services, deductible, copayment and coinsurance) you normally pay.
- Receive an explanation of benefits from your BCBS company.

In an emergency, go directly to the nearest hospital.

Independence



Around the world

- Always carry your current member ID card.
- Before you travel, contact your BCBS company for coverage details. Coverage outside the United States may be different.
- If you need medical assistance, call the BlueCard Worldwide Service Center at 1.800.810.BLUE (2583) or call collect at 1.804.673.1177, 24 hours a day, seven days a week. An assistance coordinator, in conjunction with a medical professional, will arrange a physician appointment or hospitalization, if necessary.

Inpatient claim: Call the BlueCard Worldwide Service Center if you need inpatient care. In most cases, you should not need to pay upfront for inpatient care at BlueCard Worldwide hospitals except for the out-of-pocket expenses (noncovered services, deductible, copayment and coinsurance) you normally pay. The hospital should submit the claim on your behalf.

In addition to contacting the BlueCard Worldwide Service Center, call your BCBS company for precertification or preauthorization. Refer to the phone number on the back of your member ID card. *Note: this number is different from the BlueCard Worldwide Service Center phone numbers listed above.*

Professional claim: You may need to pay upfront for care received from a doctor and/or hospital. Complete a BlueCard Worldwide International claim form and send it with the bill(s) to the BlueCard Worldwide Service Center (the address is on the form). The claim form is available from your BCBS company or online at www.bluecardworldwide.com.

To learn more about the programs described here, visit www.BCBS.com or call your BCBS company.

Blue Cross, Blue Shield, the Blue Cross and Blue Shield symbols, BlueCard and BlueCard Worldwide are registered service marks of the Blue Cross Blue Shield Association, an association of independent Blue Cross and Blue Shield companies.

*Android is a trademark of Google Inc.

**Apple, the Apple logo, iPod, iPod Touch, and iTunes are trademarks of Apple Inc., registered in the U.S. and other countries. iPhone is a trademark of Apple Inc. App Store is a service mark of Apple Inc.

TheBlueCard®
Now, Home Is Where The Card Is®

Maximize your Keystone benefits by using designated providers

In a Keystone HMO, Point of Service (POS), or Direct Point of Service (DPOS) plan, members choose a primary care physician (PCP) from within Keystone's network. The PCP coordinates all care and refers members to network specialists when necessary. For certain specialty care services, such as laboratory, radiology, and physical & occupational therapy, your Keystone PCP has selected specific providers called designated providers. Below is additional information about designated providers.

Frequently Asked Questions

What is a designated provider?

Designated providers are providers that PCPs select to refer their patients to for certain specialty services.

Who is required to use a designated provider?


Members with a Keystone HMO, POS or DPOS plan are required to use designated providers for certain specialty services.

For which services will I need to use a designated provider?

Your PCP must select a designated provider for laboratory, radiology, and, physical & occupational therapy services. Your PCP's designated provider will be different for all of these services.

Can I find out who my PCP's designated providers are?

Your PCP should direct you to your designated provider for lab, radiology and, physical & occupational services. You can also use the Independence provider finder at www.ibx.com/providerfinder or log in to www.ibxpress.com then select the My Care tab. In addition, you are able to identify your designated Lab site on your ID card, as shown below.*

Independence		Keystone HEALTH PLAN EAST	
SAMPLE MEMBER		BUCKINGHAM FAM MEDICI 215-794-7471	
		LAB	L
Rx BIN	000000	PLAN	POS
Rx PCN	000000	PCP	\$15
		SPEC	\$25
		ER	\$35
		PREV	\$0
		 Rx	

What will happen if I don't use my PCP's designated provider?

If you don't use your PCP's designated provider for lab, radiology and, physical & occupational services, the services will be considered out-of-network for POS or DPOS plans, and not covered for an HMO plan.



Member
COMMUNICATION

*On July 1, 2014, Independence ended its contract with Quest Diagnostics®. This change may have had an impact on your PCP's designated provider for lab services. Most, but not all PCPs use LabCorp as their designated site. Please verify with your PCP or call the Customer Service number on the back on your ID card with questions.

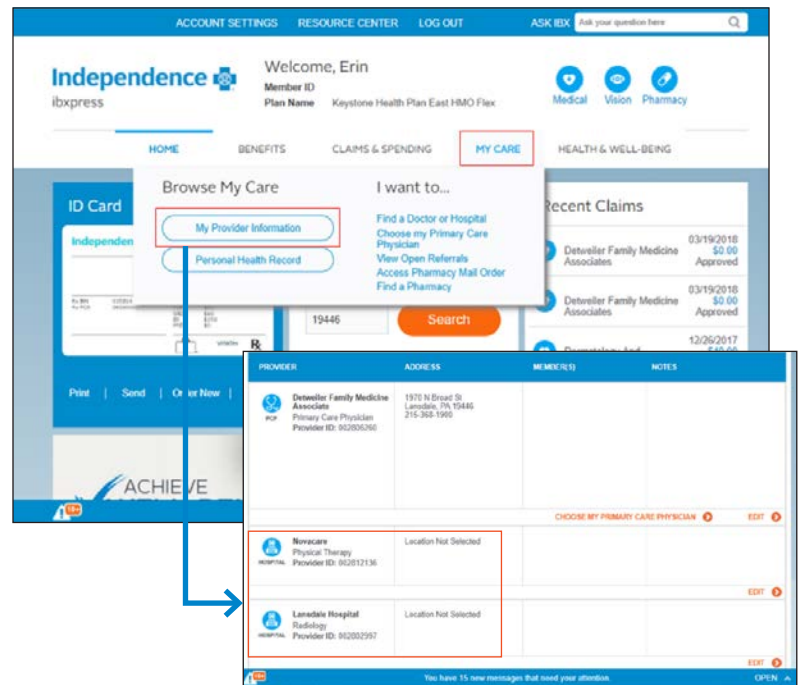
Maximize your benefits by using designated providers

If you have an HMO or POS plan, your primary care physician (PCP) will coordinate your care within the region's largest network of hospitals and doctors. Your PCP has chosen specific providers, known as designated providers, for certain specialty care services, such as lab work, radiology, and physical and occupational therapy.

How to find designated providers:

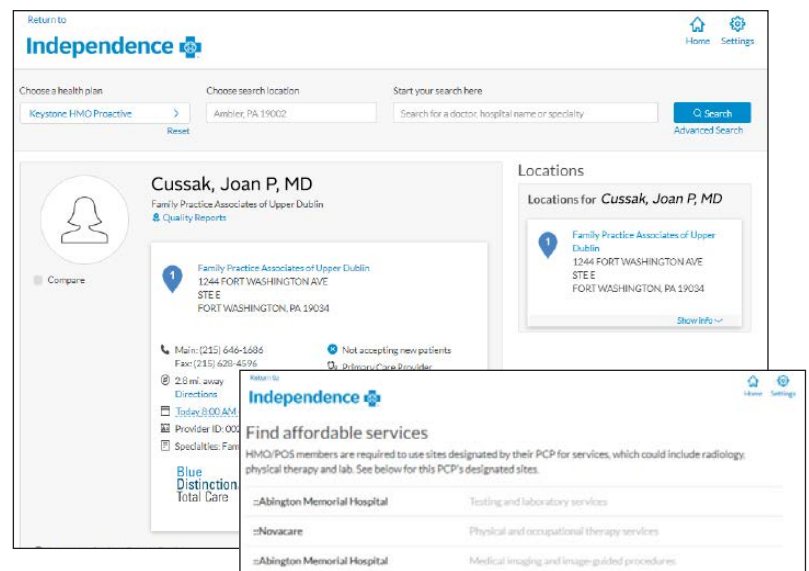
With ibxpress.com

1. Log in to ibxpress.com.
2. Select the *My Care* tab.
3. Select *My Provider Information*.
4. Scroll down to view designated sites for lab work, PT/OT, radiology.



With the Find a Doctor tool

1. Visit ibx.com/providerfinder.
2. Choose your health plan from the drop-down menu and enter your location and the name of your PCP.
3. Select your PCP.
4. Scroll down to view designated sites for lab work, PT/OT, radiology.



Frequently asked questions:

What is a designated provider?

Designated providers, also called designated sites, are providers your PCP has chosen to perform certain health services.

When do I need to use a designated provider?

Visit designated providers for radiology (such as X-rays), labs, and physical and occupational therapy. When you need any of these services, you are required to use your PCP's designated site. You may also need to ask your PCP for a referral or prescription.

How do I find my PCP's designated providers?

The easiest way is to ask your PCP. You can also use the Find a Doctor tool on ibxpress.com. Your designated lab for blood work is indicated on your Independence Blue Cross ID card.* Still not sure? Call the Customer Service number on the back of your ID card.

Do I have to use designated providers?

If you do not use designated providers, your health service may be considered out-of-network or not covered at all, depending on your plan. For the highest level of benefits, have your PCP refer you to their designated providers.

What if I don't like my PCP's designated providers?

You may choose a new PCP if you don't want to use your PCP's designated providers. Before you make your selection, use the Find a Doctor tool on ibxpress.com to search for PCPs in your area and to preview that PCP's designated sites.

Our Keystone Point-of-Service (KPOS) plan, for example, lets you maintain freedom of choice by allowing you to select your own doctors and hospitals. You maximize your coverage by having care provided or referred by your PCP. Of course, with KPOS, you have the freedom to self-refer your care either to a Keystone participating provider or to providers who do not participate in our network; however, higher out-of-pocket costs apply. This program may not cover all your health care services.

Know your designated providers

You'll save money and get the highest level of benefits. Ask your PCP today!

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