



Oklahoma Higher Education  
Employee Insurance Group

Through It All.® →



OKLAHOMA HIGHER EDUCATION EMPLOYEE INSURANCE GROUP  
EMPLOYEE BENEFITS

**2014**



**BlueCross BlueShield  
of Oklahoma**





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# WELCOME

→ **Welcome** to Blue Cross and Blue Shield of Oklahoma, and to your benefit enrollment period. This is your opportunity to select health benefits for you and your family for the coming year.

For more than 70 years, Blue Cross and Blue Shield of Oklahoma (BCBSOK) has delivered high value products and unrivaled customer service to more Oklahomans than any other health insurance plan. And our nationwide network of physicians and hospitals, coupled with local resources and friendly service, keeps you connected to your health care coverage no matter where you are.

We are pleased to offer benefits that give you and your family the best care possible and services that allow you to put your health care decisions and health education closer to your fingertips. Please take a few minutes to look through this summary guide and review the options that are available to you. You may also visit [bcbso.com/okhee/](https://bcbso.com/okhee/) for more information. It is our desire during the enrollment period that you gain a clear understanding of each option and to help you decide what is best for you and your family.

Being a member of BCBSOK doesn't just provide you with traditional insurance coverage; you also have a complete suite of health and wellness resources and tools at your fingertips, to encourage healthier living and smarter health decisions. Blue Cross and Blue Shield of Oklahoma is a health care industry leader in creating and promoting wellness programs that you and your family can conveniently integrate into your daily life. Merging technology and medical management with online resources, education, one-on-one coaching, rewards and multiple touch points, BCBSOK's Blue Care Connection<sup>®</sup> program aims to ultimately improve you and your family's health and wellness.

BCBSOK offers many tools to help you manage your personal wellness and encourage healthier behaviors. These are outlined later in this document.

Our goal at Blue Cross and Blue Shield of Oklahoma is to provide you with first class service, and to do the job right the first time, every time. We appreciate the opportunity to serve you.

Sincerely,



Linza Jones  
Vice President, Marketing and Sales  
Blue Cross and Blue Shield of Oklahoma



OKHEEI is committed to providing a healthy environment including health care insurance for employees and dependents. The continual rising cost of health care has added challenges for consumers, employers and the government. In addressing these costs, OKHEEI has had to make adjustments to ensure flexible and affordable options are available for all of our employees and their dependents.

Preventive care and wellness benefits are important to promote well being and to help limit the cost of health care. Our health care program with Blue Cross and Blue Shield of Oklahoma offers insurance coverage and wellness programs to help us achieve and maintain a healthier lifestyle.

## ELIGIBILITY

### Health Care Insurance Plan Options

With OKHEEI, you will be able to choose between two health insurance plans: High Option and Basic Option. The following pages provide an overview of the health benefits of these options. These are only summaries – not the actual plan descriptions. If you have questions that aren't answered in the summary information in this booklet, please contact customer service at 800-672-2567 or review the detailed Summary Plan Descriptions located on our website, [bcbsok.com/okheei/](http://bcbsok.com/okheei/). Dental care and vision benefits are also highlighted in this benefit guide.

### Benefit Enrollment & Making Changes During the Year

During the open and new member enrollment period, you can add or drop dependents from your health care coverage without a qualifying event. The enrollment period is the time to make sure all of your eligible dependents are enrolled and that Human Resources has all the correct information about your dependents on file.

The health care plan options you select during the enrollment period will remain in effect during the calendar year. In order to change benefit elections outside of the enrollment period, the employee must have:

1) Experienced an Applicable Qualifying Event, as defined by the Internal Revenue Service (IRS). Changes based on financial reasons alone are not allowed under the current IRS regulations.

AND

2) The request for a change of benefits must be made within 31 days of the Applicable Qualifying Event. Within the context of changing benefits, "Applicable" refers to a change that is directly related to the individual experiencing the qualifying event.

A qualifying event includes:

- A birth or adoption
- Marriage, divorce or legal separation
- Death
- Child loses eligibility because of age
- Employee's spouse gains or loses coverage through employment
- Significant change in the financial terms of health benefits provided through a spouse's employer or another carrier

Except for coverage of a newborn or adopted child, all other changes in coverage begin the first day of the month following the qualifying event. Coverage for the newborn is effective on the child's date of birth. Coverage for an adopted child is effective on the date of placement. In both instances, the employee must initiate and complete the appropriate paperwork.

Changes in provider networks (for example, your doctor leaving the network) are not considered acceptable reasons for you to be able to change your product election outside of the enrollment period.

### Available Health Care Plans

With OKHEEI, you may select one of two BlueChoice plans:

- High Option
- Basic Option

BlueChoice is a preferred provider organization type of plan. Blue Cross and Blue Shield of Oklahoma has negotiated discounts with medical providers to reduce the cost of health care. The discount is applied before there is any payment for services from you or from BCBSOK. The two plans offered also give you the flexibility to choose a non-PPO, "out-of-network" provider with whom BCBSOK does not have a contract. The cost of services is usually lower and the benefits you receive higher if you use a PPO provider.

You will want to consider the plan best suited for you and your family. There are important differences between the plans that should be considered. Details of the benefits and plans are listed on the following pages for easy comparison. Here are some factors to keep in mind.

**Benefit design** – There are notable differences between the plans, which impact the coverage and the out-of-pocket costs you'll have when you utilize your benefits.

Both plans promote wellness and offer preventive care and have unlimited lifetime maximums. The BlueChoice High Option and Basic Option plans are different in office copays, deductibles, coinsurance and out-of-pocket maximums.

**Premium cost** – The Basic Plan is the lowest cost plan and has higher out-of-pocket costs than the High Option plan.

**Provider access** – The BlueChoice network is Blue Cross Blue Shield of Oklahoma's largest network in the state. You can verify that your current physicians are in the network for the plan you are considering by checking the provider listing on [bcbsok.com/okheei/](http://bcbsok.com/okheei/).

All members (BlueChoice) have nationwide access to contracting providers through the BlueCard® Program when you or your covered family members live, work, or travel anywhere in the country. Additionally, when you travel outside the United States, PPO members have access to contracting providers in more than 200 countries through BlueCard Worldwide®.

## PRESCRIPTION DRUG PROGRAM

The High Option and Basic Option plans include the same prescription drug plan.

In order to provide greater discounts, Blue Cross and Blue Shield of Oklahoma has negotiated discounts with drug companies. A list of prescription drugs, both generic and brand names, compose the drug formulary. The purpose of the formulary is to offer less costly medications. The drug formulary is divided into three tiers: tier 1 includes generic drugs, tier 2 includes preferred brand drugs and tier 3 includes non-preferred brand drugs. Visit [myprime.com](http://myprime.com) to view the drug formulary and to find out which tier your medication(s) falls. Specialty drugs are handled by a separate drug program administered through Prime.

Blue Cross and Blue Shield's national pharmacy network includes most national chains and independent pharmacies across the country. When you fill your prescription drugs at retail, your pharmacy copayment depends on the formulary tier to which the drug has been classified. You will pay the cost up to the tier copay for a 102 day supply limit or 300 quantity limit per copay.

You may receive up to a three month supply for most maintenance drugs, but you will pay **one copay for each month's supply**.

Blue Cross and Blue Shield also offers a mail order pharmacy program and an extended supply network that may provide discounts for maintenance drugs. For more information about PrimeMail or to view a list of maintenance drugs, visit [myprime.com](http://myprime.com).



### *Nourish to flourish.*

People sometimes turn to popular diets to achieve quick weight loss. For lasting changes and healthy eating, balance what you eat to meet your need for nutrition and enjoyment. Enjoy a variety of foods while keeping key food groups in mind and use moderation when choosing less nutritious foods.

## BLUE CHOICE

You have access to an extensive network of providers and hospitals throughout the country, including therapists, chiropractors, behavioral health professionals and other specialists.

You are not required to select a Primary Care Physician, and no referrals are required. You can select any covered provider for care within the BlueChoice network or outside the network. When you receive care from in-network providers, you receive the highest level of benefits. To find a medical provider in the BlueChoice network, go to [bcbsok.com/okheei/](https://bcbsok.com/okheei/) and use the provider directory or call BlueCard Access at 800-810-BLUE (2583).

When you receive care from out-of-network providers, you not only receive a lower level of benefits, but you may also be subject to out-of-pocket costs for amounts the provider charges that are above the maximum allowable charge.

Finding out which network your providers are located in is easy! Simply visit [bcbsok.com/okheei/](https://bcbsok.com/okheei/) and click on "Find a Doctor." Search by a doctor's name, location, network, etc. You'll find a choice of providers that meet your needs. Or, call BlueCard Access at 800-810-BLUE (2583).

The BlueChoice PPO network is one of the largest in the state, with more than 5,600 physicians and specialists and over 120 hospitals contracting with Blue Cross and Blue Shield of Oklahoma. The National PPO network includes more than 800,000 doctors and 5,000 hospitals contracting with Blue Cross and Blue Shield Plans nationwide.

You can easily locate PPO network doctors and hospitals at [bcbsok.com/okheei/](https://bcbsok.com/okheei/) or by calling BlueCard Access at 800-810-BLUE (2583).





## NATIONAL AND INTERNATIONAL COVERAGE

With Blue Cross, you have nationwide access to contracting providers through the BlueCard® Program when you or your covered family members live, work or travel anywhere in the country. You can easily locate network doctors and hospitals at [bcbsok.com/okheei/](http://bcbsok.com/okheei/) or by calling BlueCard Access at 800-810-BLUE (2583). When you use BlueCard providers, you receive the highest level of benefits. You usually do not have to pay up front or file claim forms, and you take advantage of the savings the local plan has negotiated with area providers.






When you travel outside the United States, you have access to contracting providers in more than 200 countries through BlueCard Worldwide®. If you receive care from a non-BlueCard Worldwide provider, you will have to pay the doctor or hospital for care at the time of service and then submit a claim for reimbursement.


## ID CARDS

You should present your ID card when visiting a physician's office or hospital, and verify that they have the correct insurance information on file for you. Your card will resemble the card below, and will be customized with your name and plan information. Additional cards can be ordered through customer service or online via the Blue Access for Members' Website at [bcbsok.com/okheei/](http://bcbsok.com/okheei/).

You can print a temporary ID card and order a replacement card on Blue Access for Members (BAM) if you ever lose or misplace your card.

The magnetic stripe on the back of the ID card will allow BCBSOK and your providers to take advantage of emerging "card-reading" technologies. For providers who have card readers, office staff will be able to "swipe" your ID card when registering your new insurance information, and in real time, he/she can verify your eligibility and benefits (such as copayment amounts). Currently, the magnetic stripe on your ID card only includes your general information (such as name, birth date, ID number and group ID number) and can be read only by health care providers with certain card readers, software, and connectivity.

	<b>BlueCross BlueShield</b>		
Subscriber: <b>John Q. Sample</b> Identification Number: <b>ABC12345678</b>	Oklahoma Higher Education Employee Insurance Group	Office Visit Copay:	Specialist Copay:
Group Number Effective Date Benefit Network	Rx Copay:	 	

<a href="http://www.bcbsok.com">www.bcbsok.com</a>	
	<b>BlueCross BlueShield of Oklahoma</b>
Some services must be preauthorized before you receive them. Your benefit booklet has more information. Network coverage is available through participating network providers. Non-network services will be covered at a lower level. All mental health and chemical dependency treatment must be preauthorized.	Customer Web Address: <b>www.bcbsok.com/okheei/</b> Customer Service: <b>1-877-XXX-XXXX</b> Pharmacy: <b>1-877-XXX-XXXX</b> 24/7 Nurseline: <b>1-877-XXX-XXXX</b> Provider Locator: <b>1-877-XXX-XXXX</b>
A Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association	



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## MEDICAL PLAN COMPARISON CHART

BlueChoice PPO High Option		
	In-Network	Out-of-Network
General Plan Information		
<b>Network</b>	<b>BlueChoice</b>	
Calendar Year Deductible (CYD)	\$1,000 Ind. / \$3,000 Family	\$1,000 Ind. / \$3,000 Family
Calendar Year Out-of-pocket Max (includes deductible)	\$3,300 Ind. / \$9,900 Family	\$3,800 Ind. / \$11,400 Family
Co-Insurance	Plan Pays 80% after CYD	Plan Pays 50% after CYD
Lifetime Max - Medical	Unlimited	Unlimited
Lifetime Max - Pharmacy	Unlimited	Unlimited
Primary Care Office Visit	\$25 copay	50% after CYD
Specialist Office Visit	\$40 copay	50% after CYD
Diagnostic X-ray/Lab	80% after CYD	50% after CYD
Inpatient Hospital*	80% after CYD	Additional \$300 deductible per admit, then 50% after CYD
Outpatient Surgery	80% after CYD	50% after CYD
Well Baby Care	100%	50% after CYD
Adult Immunizations	100%	50% after CYD
Childhood Immunizations	100%	100%
Routine Health Exams	100%	50% after CYD
Routine Mammograms	100%, no age limit	100%, no age limit
Allergy Treatment/Testing (60 tests every 24 months)	80% after CYD	50% after CYD
Emergency Room	\$100 copay; then 80% after CYD (copay waived if admitted)	\$100 copay; then 80% after CYD (copay waived if admitted)
Health Assessment (HA) - \$250 deductible credit to employee or spouse (no children) upon completion	<b>HA deductible credit applies to 2014 plan year and must be completed between 01/01/14 and 12/31/14. HA must be completed and credited prior to claims payment. No retroactive claim adjustments will be allowed.</b>	
<b>Mental Health and Substance Abuse</b>		
Inpatient*	80% after CYD	Additional \$300 deductible, then 50% after CYD
Outpatient	80% after CYD	50% after CYD
General Plan Information	80% after CYD	50% after CYD
<b>Pharmacy</b>		
Generic & Preferred - Cost of Rx: \$100 or less	Member pays lesser of \$25 or actual cost	Member pays cost of Rx up to \$75 max plus dispensing fee
Generic & Preferred - Cost of Rx: Greater than \$100	Member pays 25% up to \$50 max	Member pays cost of Rx up to \$75 max plus dispensing fee
Non-Preferred - Cost of Rx: \$100 or less	Member pays lesser of \$50 or actual cost	Member pays cost of Rx up to \$125 max plus dispensing fee
Non-Preferred - Cost of Rx: Greater than \$100	Member pays 50% up to \$100 max	Member pays cost of Rx up to \$125 max plus dispensing fee
Out-of-pocket Maximum	\$2,500 per individual	No out-of-pocket maximum
102 day supply or 300 quantity limit per copay		
<b>Other Covered Services</b>		
Occupational and Speech Therapy (Each service limited to 60 visits per CY)	80% after CYD	50% after CYD
Physical and Chiropractic Therapy (Services combined limited to 60 visits per CY)	80% after CYD	50% after CYD
Hearing Screening (limited to one per CY)	100%	50% after CYD
Hearing Aids	Covered as DME up to age 18	Covered as DME up to age 18
Durable Medical Equipment (DME), Prosthetics and Orthotics	80% after CYD	50% after CYD
Skilled Nursing Facility (100 days per CY)*	80% after CYD	50% after CYD
Home Health Care (100 visits per CY)*	80% after CYD	50% after CYD
Hospice*	80% after CYD	50% after CYD

\*Requires Pre-Authorization

## BlueChoice PPO Basic Option

In-Network

Out-of-Network

1st Dollar Coverage: Plan pays 100% of the first \$500 of eligible charges for each individual then:

### BlueChoice

\$500 Ind. / \$1,000 Family

\$500 Ind. / \$1,000 Family

\$5,500 Ind. / \$11,000 Family

\$5,500 Ind. / \$11,000 Family

Plan Pays 50% after CYD

Plan Pays 50% after CYD

Unlimited

Unlimited

Unlimited

Unlimited

50% after CYD

50% after CYD

50% after CYD

50% after CYD

50% after CYD

50% after CYD

50% after CYD

Additional \$300 deductible per admit, then 50% after CYD

50% after CYD

50% after CYD

100%

50% after CYD

100%

50% after CYD

100%

100%

100%

50% after CYD

100%, no age limit

100%, no age limit

50% after CYD

50% after CYD

50% after CYD

50% after CYD

**HA deductible credit applies to 2014 plan year and must be completed between 01/01/14 and 12/31/14. HA must be completed and credited prior to claims payment. No retroactive claim adjustments will be allowed.**

50% after CYD

Additional \$300 deductible, then 50% after CYD

50% after CYD

50% after CYD

50% after CYD

50% after CYD

Member pays lesser of \$25 or actual cost

Member pays cost of Rx up to \$75 max plus dispensing fee

Member pays 25% up to \$50 max

Member pays cost of Rx up to \$75 max plus dispensing fee

Member pays lesser of \$50 or actual cost

Member pays cost of Rx up to \$125 max plus dispensing fee

Member pays 50% up to \$100 max

Member pays cost of Rx up to \$125 max plus dispensing fee

\$2,500 per individual

No out-of-pocket maximum

102 day supply or 300 quantity limit per copay

50% after CYD

50% after CYD

50% after CYD

50% after CYD

100%

50% after CYD

Covered as DME up to age 18

Covered as DME up to age 18

50% after CYD

50% after CYD

50% after CYD

50% after CYD

50% after CYD

50% after CYD

50% after CYD

50% after CYD

## DENTAL PLAN COMPARISON CHART

Network	In-Network	Out-of-Network
Annual Deductible	\$25 Ind. / \$75 Family Applies to: • Basic Care • Major Care	\$25 Ind. / \$75 Family Applies to: • Preventative Care • Basic Care • Major Care
Preventative Care • Routine cleanings • Check-ups • X-rays • Fluoride treatments • Routine cleanings, check-ups and bitewing x-rays covered twice per year	100%, no deductible  NOTE: No charge for topical fluoride application - up to age 16.	100% after deductible  NOTE: No charge for topical fluoride application - up to age 16.
Basic Care • Fillings • Extractions • Endodontics • Periodontics	85% after deductible	70% after deductible
Major Care • Crowns • Bridges • Dentures	60% after deductible	50% after deductible
Orthodontic Care Available to children up to age 19	50%, no deductible 12-month waiting period	50%, no deductible 12-month waiting period
Maximums • Dental Care (Calendar Year) • Orthodontia (Dependent Children)	• \$2,000 per person • No maximum	• \$2,000 per person • No maximum

### Dental Customer Service: 888-381-9727

This benefit summary does not contain a complete list of benefits available to you nor does it contain a listing of exclusions, limitations, and conditions which apply to the benefits shown. Full information can be found only in the Group Contract and Certificate of Benefits.

Out of Network - Members may be balanced billed by the provider for charges over the allowable amount.

## VISION SUMMARY

### VSP® VISION CARE PLAN BENEFITS SUMMARY

#### A vision discount program available through VSP

**Value and Savings.** You'll get great benefits on your exam and eyewear at an affordable price.

**Personalized Care.** You'll get quality care that focuses on your eyes and overall wellness with a WellVision Exam from a VSP doctor.

When you see a VSP doctor, you'll get the most out of your benefit and have lower out-of-pocket costs. Plus, you'll be 100% happy with your eyecare and eyewear from a VSP doctor or VSP will make it right.

**Eyewear.** Choose the eyewear that's right for you and your budget.

**Choice of Providers.** With open access to see any eyecare provider, you can see the one who's right for you. Choose a VSP doctor or any other provider.

To find a VSP doctor, visit [vsp.com](http://vsp.com) or call **800-877-7195**.

Once your plan is effective, register on [vsp.com](http://vsp.com) to view a complete description of your benefits. To use our vision coverage, simply tell your eyecare provider that you have VSP. No ID card is necessary.

Visit [www.vsp.com/go/okheeigroup](http://www.vsp.com/go/okheeigroup) for more information.

### Your Coverage with a VSP Doctor

**WellVision Exam** focuses on your eye health and overall wellness

- \$10 copay.....every calendar year

#### Prescription Glasses

- \$25 copay

Lenses.....every calendar year

- Single vision, lined bifocal, and lined trifocal lenses
- Polycarbonate lenses for dependent children

Frame .....every calendar year

- \$150 allowance for a wide selection of frames
- 20% off the amount over your allowance

**-OR -**

#### Contact Lens Care

- No copay .....every calendar year
- \$150 allowance for contacts and the contact lens exam (fitting and evaluation).  
Current soft contact lens wearers may qualify for a special program that includes a contact lens exam and initial supply of replacement lenses.

### Extra Discounts and Savings

#### Glasses and Sunglasses

- Average 20-25% savings on all non-covered lens options
- 20% off additional glasses and sunglasses, including lens options, from any VSP doctor within 12 months of your last WellVision Exam

#### Contacts

- 15% off cost of contact lens exam (fitting and evaluation)

#### Laser Vision Correction

- Average 15% off the regular price or 5% off the promotional price. Discounts only available from contracted facilities.

### Your Coverage with Other Providers

Visit [vsp.com](http://vsp.com) for details. If you plan to see a provider other than a VSP doctor.

Exam.....	Up to \$45
Single vision lenses.....	Up to \$30
Lined bifocal lenses.....	Up to \$50
Lined trifocal lenses.....	Up to \$65
Frame.....	Up to \$70
Contacts.....	Up to \$105

VSP guarantees service from VSP doctors only. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail.

Contact us [vsp.com](http://vsp.com) • **800-877-7195**

*Live a life of commitment.*



## TOOLS FOR HEALTHY LIVING

Health care is more than just insurance to help pay medical bills when you are sick or injured. Blue Cross and Blue Shield of Oklahoma provides additional resources to improve health and wellness.

### WELL ONTARGET<sup>SM</sup>

Well onTarget offers personalized tools and resources to help all members - no matter where you may be on the path to health and wellness.

#### Liveon Member Wellness Portal

The Liveon portal is the heart of the Well onTarget program. It uses the latest technology to offer you an enhanced online experience. This engaging portal links you to a suite of innovative programs and tools.

#### ▶ onmytime Self-directed Courses

Online courses let you work at your own pace to reach your health goals. Learn more about nutrition, fitness, weight management, tobacco cessation and stress. Track your progress as you make your way through each lesson. Reach your milestones and earn Life Points.

#### ▶ Health and Wellness Content

Health library teaches and empowers through evidence-based, user-friendly articles.

#### ▶ Tools and Trackers

Interactive tools help keep you on course while making wellness fun. Use food and workout diaries, health calculators and medical and lifestyle trackers.

#### onmyteam Wellness Coaching

Certified health coaches offer you guidance in nutrition, fitness and stress management. You can interact with your coach by phone or send a secured message through the portal.

#### onmyway<sup>TM</sup> Health Assessment (HA)

The HA features adaptable questions to learn more about you. After you take the HA, you will get a personal wellness report. The confidential record offers tips for living your healthiest life. Your answers will be used to tailor the Liveon portal with the programs that may help you reach your goals.

#### Life Points Program

Life Points will help motivate you to maintain a healthy lifestyle. Earn points by taking part in wellness activities. Points can be redeemed in the new online shopping mall. Real-time granting of points lets you instantly use your points. To earn a larger reward, you can add to your point total at checkout.

### BLUE CARE CONNECTION<sup>®</sup>

Through the Blue Care Connection program, you'll find tools and services that inform, support and motivate you on your journey to wellness.

#### Weight Management

##### Support for a slimmer, healthier you

The program offers guidance and support through behavioral and motivational coaching, personalized goal setting with an action plan, online tools and discounts to wellness-related products and services. To get started, call BCBSOK customer service.

#### Tobacco Cessation

##### Support for tobacco users who want to quit

The program provides personal coaching, online tools and discounts to wellness-related products and services. To participate call BCBSOK customer service.

### 24/7 Nurseline

Health concerns don't always follow a 9 to 5 schedule. Fortunately, you can call the toll-free 24/7 Nurseline 24 hours a day, seven days a week to get the information you need...when you need it.

The 24/7 Nurseline is staffed by registered nurses who can answer your general health questions and direct you to your doctor or encourage you to seek emergency services if necessary. In a matter of minutes, a nurse can help identify options and provide information to help you choose the appropriate care for your concerns. Plus, when you call, you also have the option to access an audio library of more than 1,000 health topics – from allergies to women's health – with more than 600 topics available in Spanish.

Call the 24/7 Nurseline toll free at 800-581-0407. This number is conveniently located on the back of your ID card for easy reference.

### Special Beginnings

#### **A healthy start for mothers and babies**

If you are expecting, this prenatal program can help guide you through your pregnancy and postpartum care. The program provides support and education, pregnancy risk assessment and ongoing attention/monitoring.

Enrolled members receive frequent, personal contact from obstetrical nurses who can help them better understand and manage their pregnancies. Educational materials promote healthy behaviors, preventive care, and identify warning signs of complications. Topics also include nutrition, fetal development and newborn care. Additionally, members can call a 24-hour toll-free Babyline staffed by maternity nurses.

For information on enrolling, call the toll-free Special Beginnings phone number at 877-904-2229.

#### **Blue Care Advisors**

If you have certain chronic health conditions or are at risk for medical complications, a Blue Care Advisor may contact you. Working with you through regularly scheduled telephone calls, these registered nurses and other health care professionals offer health counseling, coaching and support.

The Blue Care Advisor can help you learn to manage your condition more successfully, identify behaviors that may be barriers to better health, set goals for improving your health and help you adopt healthier habits.



### *24/7 Nurseline: Around-the-Clock, Toll-Free Support*

Health concerns don't always follow a 9-to-5 schedule. Fortunately, registered nurses are on call at 800-581-0407 to answer your health questions, wherever you may be, 24 hours a day, seven days a week.

The 24/7 Nurseline's registered nurses can understand your health concerns and give general health tips. Get trusted guidance on possible emergency care, urgent care, family care and more.



### Case Managers

In the event that you or a covered family member experiences multiple or complex medical problems, our case management nurses – registered nurses with specialized training and clinical experience – can work with you.

**At a time that's usually stressful, case managers can be your advocate by:**

- ▶ Helping to explain your medical problems and treatment plans
- ▶ Facilitating communication among many health care providers
- ▶ Coordinating treatment plans
- ▶ Explaining your health care benefits and how to get the most out of them
- ▶ Helping you access the right resources and services
- ▶ Assisting with transitions from one health care setting to another

### THE BLUE 365® DISCOUNT PROGRAM

With Blue365, you can take advantage of discounts on health-related products and services that help support a healthy lifestyle. These discounts apply to health care products and services not usually covered by your health care benefits plan. Plus, there are no claims to file, no referrals or pre-authorizations and no additional fees to participate. To find out more about Blue365, visit [bcbsok.com/okhee1/](http://bcbsok.com/okhee1/).

**Blue365 provides discounts to:**

- ▶ Jenny Craig weight management program
- ▶ Complimentary Alternative Medicine items, such as vitamins, health and wellness magazines, gym memberships, massages, spas, acupuncture, yoga, tai chi and more
- ▶ Vision care and hearing aid products
- ▶ Proctor & Gamble (P&G) dental products





## OTHER RESOURCES TO HELP YOU

Blue Cross and Blue Shield of Oklahoma also provides other health and wellness information.

**Preventive Health Care Guidelines** are published each year and made available via [bcbsok.com/okheei/](http://bcbsok.com/okheei/). This is a good source of information on preventive care guidelines, which are based on recommendations set by national health agencies and medical associations. You can learn about recommended screenings, and immunizations and doctor visits for all ages, from prenatal care and infancy through the senior years.

**Be Smart. Be Well.** Is our website dedicated to raising awareness of largely preventable health and safety issues. You'll find in-depth information on a variety of issues, including traumatic brain injuries, drug interactions and mental health at [besmartbewell.com](http://besmartbewell.com).

**Glucose Meters** help members with diabetes manage their condition and can be ordered at no charge. For information on the meters that are available, call customer service at 800-672-2567.

**Start your journey to wellness today!**

## HOW TO REDUCE YOUR PHARMACY COSTS

Everyone is looking for ways to reduce medical costs. One of the most effective ways to do this, is manage your pharmacy costs. Here are some tips to make your medical dollars go further.

- ▶ Choose **generic medications** over brand name counterparts. Generic drugs are Food and Drug Administration-approved and are as safe and effective as their brand name equivalents. There was a time when people questioned generics, but most doctors and patients embrace them today. The FDA mandates that generics are made with the same active ingredients and are available in the same strength and dosage as their competitors. Most generics are dramatically cheaper than brand name drugs and many are manufactured by the same companies that make the original brand name drug.
- ▶ Employ the **step therapy program**. Step therapy is a pharmacy policy based on the concept of comparative effectiveness. Comparative effectiveness examines forms of treatment to determine which is best in a given situation. Many assume that the most expensive option is the best, but as generics prove, this is not always the case. Ask your doctor to explore less expensive treatments before resorting to more expensive drug therapies. If the first treatment fails, then the next will be explored, and so on.
- ▶ And as always, **prevention** is the best medicine. Taking care of yourself, eating well, exercising and general preventive health care will help keep your need for prescription drugs down overall.

**You can help control your pharmacy costs with some thoughtful planning.**

## BENEFIT CONTRIBUTIONS

### Oklahoma Higher Education Employee Insurance

#### 2014 Monthly Premiums FOR ACTIVE EMPLOYEES AND DEPENDENTS

		Amounts represent monthly payroll deductions.				
		EMPLOYEE COST	SPOUSE ONLY	ONE CHILD ONLY	TWO OR MORE CHILDREN ONLY	SPOUSE AND CHILD(REN)
<b>Medical:</b>						
BLUECROSS/BLUESHIELD OF OK HIGH PLAN		0.00	557.10	212.30	424.50	981.60
BLUECROSS/BLUESHIELD OF OK BASIC PLAN		0.00	419.70	159.80	319.70	739.40
<b>Dental:</b>		Employee cost is already added to other categories:				
BLUECROSS/BLUESHIELD OF OK DENTAL		42.60	87.40	59.70	76.80	121.50
<b>Vision: (Voluntary)</b>		Employee cost is already added to other categories:				
VISION SERVICE PLAN		6.36	12.72	12.46	13.60	21.72

The University/College may pay for part of your premium. Check with your benefits department to confirm.

NOTE: RATES ARE SUBJECT TO CHANGE JAN. 1, 2015

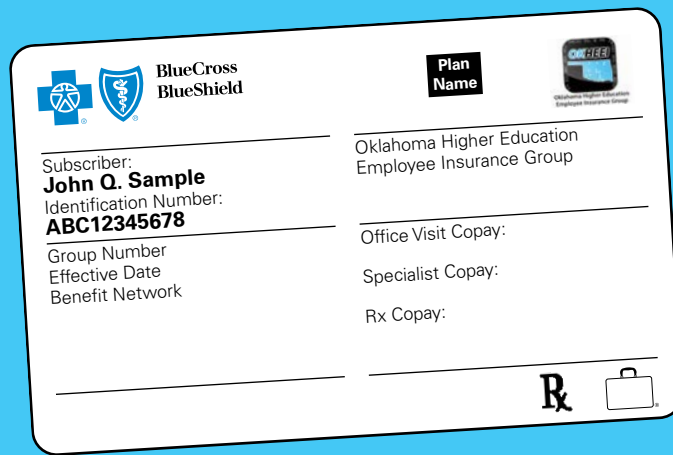
## ONLINE BENEFIT RESOURCES

Resource	Purpose	How to Access
<b>BCBSOK Website for OKHEEI</b>	<ul style="list-style-type: none"> <li>Log in to Blue Access for Members to access the Well onTarget portal or view claims</li> <li>View/print benefit brochures</li> <li>Locate a doctor or hospital</li> </ul>	<i>bcsok.com/okhee/</i>
<b>Blue Access for Members (BAM)</b>	Site provides: <ul style="list-style-type: none"> <li>Ability to print a temporary member ID card and order a new card</li> <li>View claim status and Explanation of Benefits (EOB)</li> <li>Find a doctor or hospital</li> <li>View Wellness Rewards points</li> <li>Access to Well onTarget</li> </ul>	Go to <i>bcsok.com/okhee/</i> <ul style="list-style-type: none"> <li>Enter Blue Access for Members user ID and password</li> <li>If you do not have a user ID and password, go to "Register Now".</li> </ul>
<b>Life Points</b>	Earn points, redeemable for rewards, for health-related activities	Go to BAM at <i>bcsok.com/okhee/</i> <ul style="list-style-type: none"> <li>Click on Well onTarget</li> </ul>
<b>Locate a Health Care Provider</b>	Find a doctor, specialist, or hospital in your area	Go to <i>bcsok.com/okhee/</i> <ul style="list-style-type: none"> <li>Click on Find a Doctor</li> </ul>
<b>OKHEEI Benefits Website</b>	Find benefit related information	<i>www.okhee.org/</i>
<b>Pharmacy</b>	<ul style="list-style-type: none"> <li>Compare drugs</li> <li>Find generic alternatives</li> <li>Obtain cost estimates</li> <li>View drug formulary</li> </ul>	<i>myprime.com</i>

## CONTACTS

This enrollment guide highlights OKHEEI's Benefits Program. A complete description of each benefit can be found in the legal documents governing the plans. Every effort has been made to provide an accurate summary of the plans in this guide. However, if there is a conflict between this material and the legal documents, the legal documents will govern. If you have any questions after reviewing your enrollment materials, please contact customer service at the number below.

Subject	Contact
<b>Medical Plan - Customer Service</b>	800-672-2567
<b>Dental Plan - Customer Service</b>	888-381-9727
<b>Pharmacy</b>	800-423-1973
<b>BlueCard</b>	800-810-BLUE (2583)
<b>24/7 Nurseline</b>	800-581-0407
<b>Special Beginnings</b>	877-904-2229
<b>Vision Plan - Customer Service</b>	800-877-7195



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