



BlueCross BlueShield
of Texas



How to Use Your Health Plan

How to Use Your Plan Benefits

The best way to use your coverage is to understand it.

Scan the QR code or visit bcbstx.com/member-guide to access your:

- **Point of Service and HMO Overviews**, which say how to:
 - View benefits in your plan booklet
 - Check on claim payments and copays
 - Find a doctor or hospital
 - Find information on medical emergencies and after-hours care
 - Work with Health Management Programs
 - Find FAQs and additional resources about POS or HMO plan information, claims, payments, membership, finding care and more
- **Member Rights and Responsibilities**
- **PDF Member Guide**



**No time to download?
Read on to get started.**



Manage Your Membership Checklist



Access your account online.

Set up your online account and the mobile application.

- Register on your desktop or mobile device.
- Go to bcbstx.com or text BCBSTXAPP to 33633* to download the BCBSTX App.



Make your premium payments.

- Go to PayBlueTX.com to make a single payment.
- Sign up for Auto Bill Pay at any time in your online account or call Customer Service at **1-888-697-0683**.



Bring your member ID card.

- Please allow 10 days after enrolling for your member ID card to arrive in the mail.
- Access your digital member ID card in your online account.



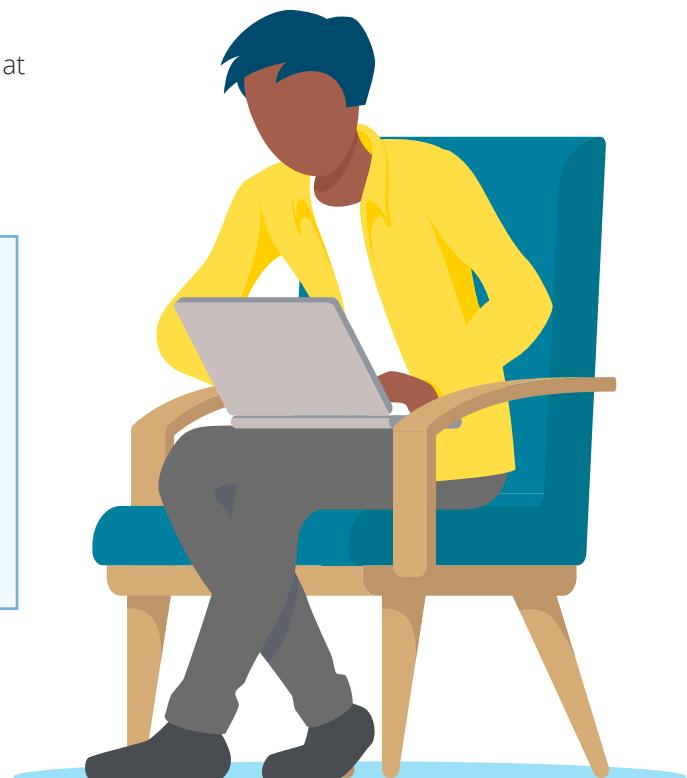
Read your Explanations of Benefits.

- Review Explanations of Benefits (statements of your claims) in your online account or when you receive them by mail.
- Report claims that do not appear accurate to **1-800-543-0867**.



Reach the right resources for help.

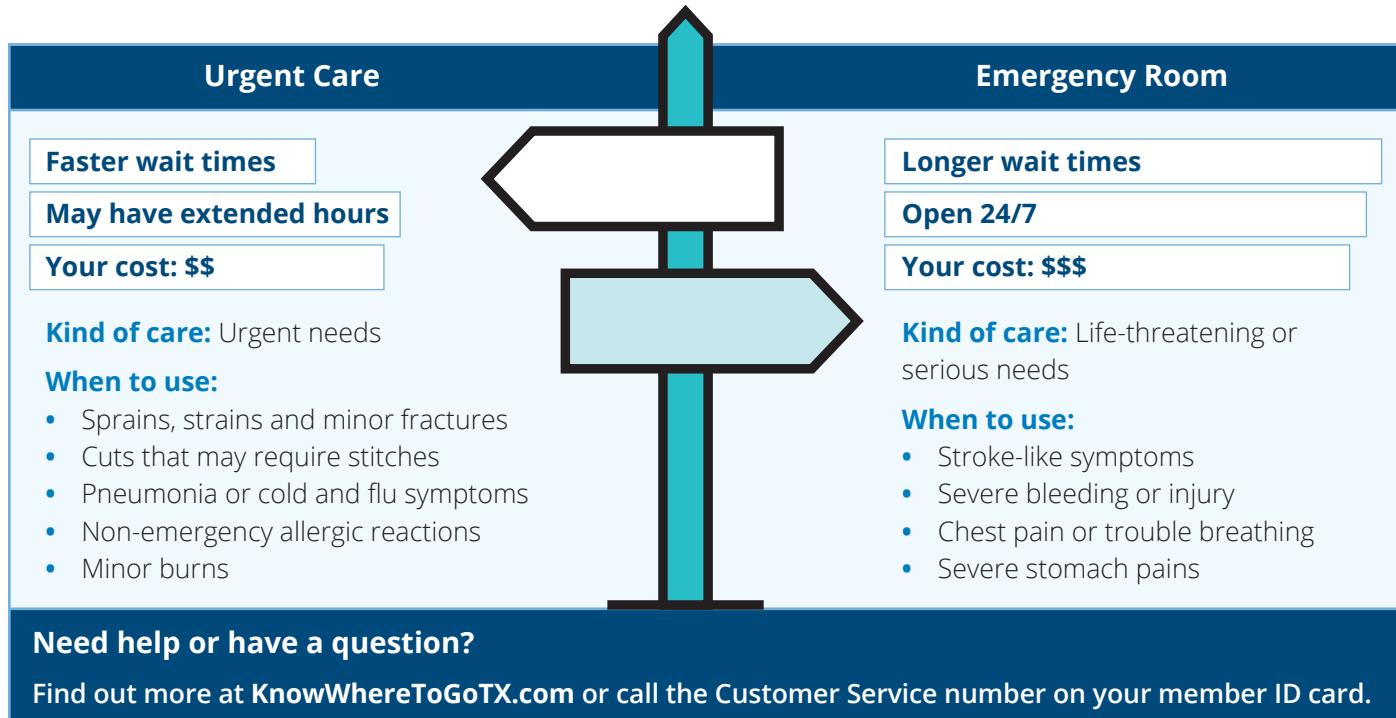
- Go to ContactUsTX.com to find who to contact for a range of plan and account questions.
- Manage your communications preferences at mybam.bcbstx.com.



Connect to Care

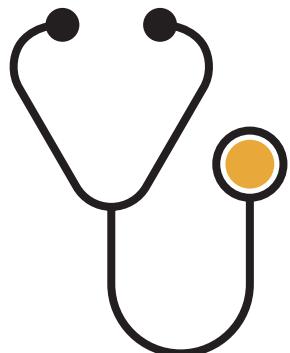
Members with a qualifying health condition may receive an invitation to a digital support program by email or text message. A clinician may also reach out by phone to invite those members. Invitations to those members with a qualifying health condition will include instructions on how to sign up and start the program.

Save Time and Money. Save the ER for Emergencies.



Next, Manage Your Health

You have your member account in order (see previous page).
Now what?



Go ahead! Schedule preventive care.

Your plan includes a \$0 annual exam and many preventive screenings.

- Schedule annual checkup
- Schedule any off-site screenings your primary care provider orders (like blood draws at a lab)

Why get a checkup?

Staying current with preventive care is worth your time.

- Develop a relationship with your doctor(s). Good communication supports good care.
- Results year over year show trends. Simple changes can take you from good to better.

Tip: Ask about extended office hours or virtual options.

Tip: Look in your online account for wellness tools and discounts included with your plan.

What if your PCP finds something?

No one wants to find issues in annual checkups, but sooner is usually better.

- Fix or manage less serious problems to minimize any long-term damage.
- Work with your doctor to set a plan in motion.

Manage Your Health (continued)

If you are ill or injured

HMO Members

Start with your PCP. Your member ID card will show their medical group name and telephone number.

- They are your primary source for care. Call their office or after-hours phone number for any health care needs.
- Your PCP **must** coordinate all your non-emergency care. They will refer you to urgent care or specialists as needed. If you have a life-threatening issue and need to go to the nearest emergency facility, contact your PCP as soon as you can to let them know



Emergency care benefits are available out of network for HMO plans.

Medically Necessary covered services not available in network may be referred to an out-of-network provider and be reimbursed at the in-network rate. After you enroll, you will get a Benefit Book with more information about Medically Necessary covered services.

Point of Service Plans

- With a Point of Service plan, you are not required to go through your PCP. However, we recommend that you do so that they may coordinate your care.
- With a Point of Service plan, you save money when you use doctors, hospitals and other providers in your network. Once you hit your out-of-pocket maximum, your health plan pays qualified medical expenses.



Manage Your Health (continued)

Convenient Care

Taking care of yourself, physically and mentally, is important. Some plans may include Virtual Visits powered by MDLIVE®. Virtual Visits let you get health care from board-certified doctors, pediatricians and therapists 24/7 by video or phone.¹

What can Virtual Visits help with?

Depending on your plan, MDLIVE's doctors and therapists can treat many non-emergency issues, like those listed below. Plus, did you know Virtual Visits may cost less than going to an urgent care clinic or the emergency room?

New in 2026: MDLIVE E-Treatment²

Point of service and PPO plans will now offer urgent care without requiring an appointment or live connection. Submit a questionnaire about symptoms and get back a diagnosis and prescription, if medically appropriate³, from the same board-certified physicians available through Virtual Visits. Users typically hear back within an hour.⁴

Log in to your account at mybam.bcbstx.com to check which benefits and services are included in your coverage.

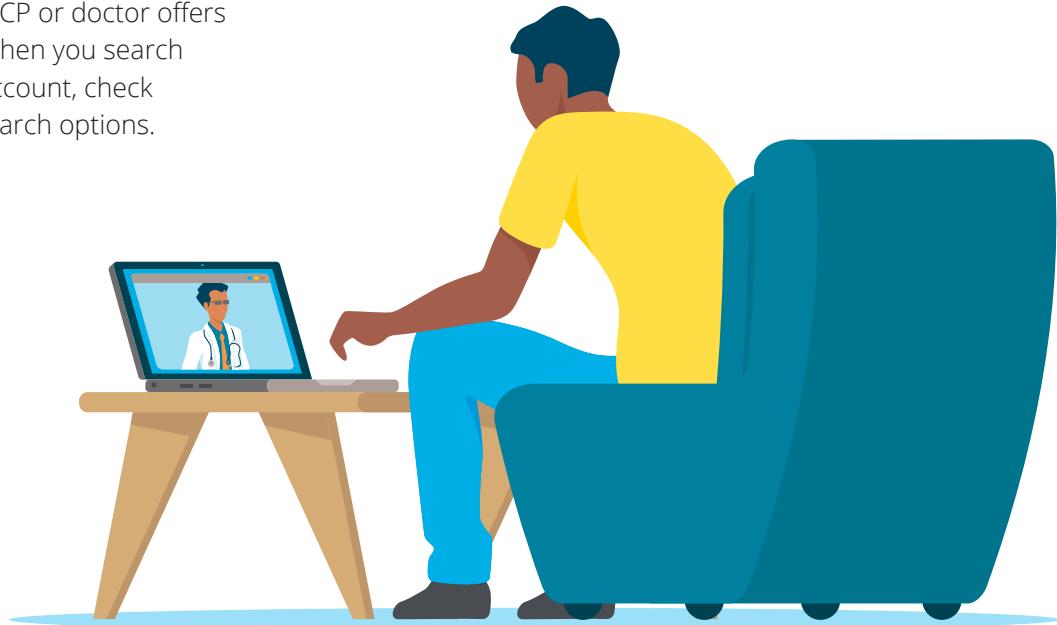
Find virtual options for urgent care like:

- Allergies
- Cold and flu
- COVID-19⁵
- Pink eye
- Sinus problems
- Sore throat

Find virtual care for behavioral health issues like:

- Anxiety
- Depression
- Grief
- Life changes
- Stress

You can also check if your PCP or doctor offers telehealth appointments. When you search "Find Care" in your online account, check "Offers Telehealth" in the search options.



¹ Internet/WiFi connection is needed for computer access. Data charges may apply when using your tablet or smartphone. Check your phone carrier's plan for details.

² MDLIVE E-Treatment limited to patients six years old and up.

³ Prescriptions are available at the physician's discretion when medically necessary.

⁴ Average times from MDLIVE

⁵ MDLIVE doctors can prescribe the antiviral, Paxlovid, in the treatment of COVID-19 to patients ages 18 and older when medically appropriate. MDLIVE doctors cannot prescribe Molnupiravir or other medications beyond Paxlovid in the treatment of COVID-19.

Virtual Visits may be limited by plan. For providers licensed in New Mexico and the District of Columbia, Urgent Care service is limited to interactive online video; Behavioral Health service is available by video or audio on all plans that offer MDLIVE.

E-Treatment will be available in US states, except Kansas, Mississippi, New Mexico, West Virginia, and the District of Columbia. Patients who don't have E-Treatment available to them will not see it as an option in the MDLIVE patient portal.

If your MDLIVE doctor believes your condition requires a higher level of care, they can transfer you to a phone or video consultation so you don't have to start your visit over. E-Treatment is available seven days a week, 8 a.m. to 10 p.m. ET, excluding federal holidays.

MDLIVE operates and administers the Virtual Visit and E-Treatment programs and is solely responsible for its operations and that of its contracted providers. MDLIVE and the MDLIVE logo are registered trademarks of MDLIVE, Inc. and may not be used without written permission.

Manage Your Prescription Benefits



Use network pharmacies.

- You can save money by using an in-network pharmacy.
- Look under "Pharmacy" in your online account or visit Prime Therapeutics at myprime.com to search for a network pharmacy near you.



Check your drug list.

- The drug list is a list of covered medications.
- Check to see if your prescription is on the drug list at BlueRxTX.com under "Drug Lists."
- If your drug is not on the list, check with your doctor for a covered alternative to consider.

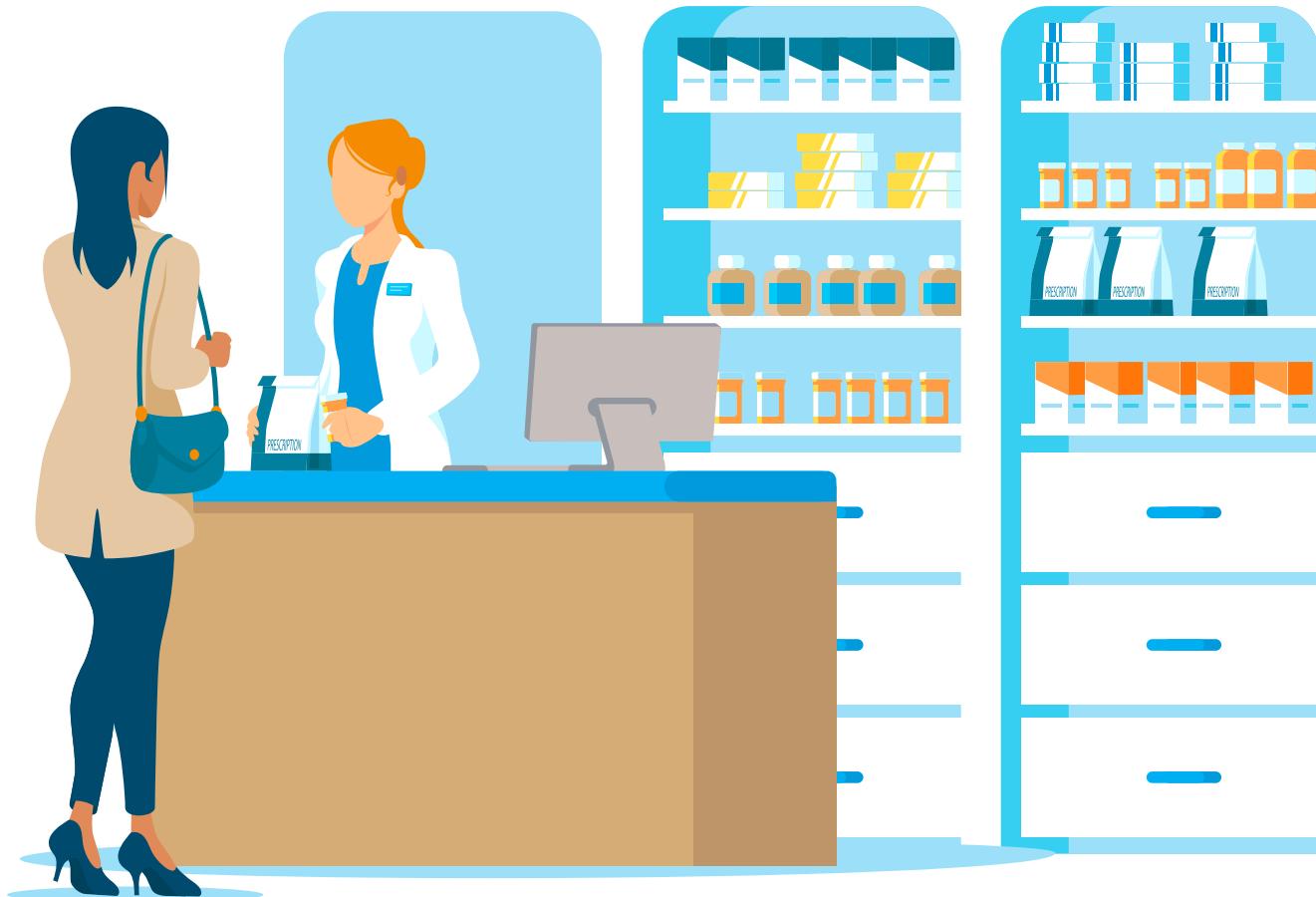


Ask your pharmacist how to take your prescriptions.

Prescription drugs come with guidelines about how to take them for best results and to avoid side effects.

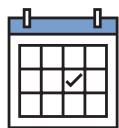
Your pharmacist can walk you through:

- Known drug or food interactions
- How to take it and when
- Any warnings or things to avoid



Manage Your Prescription Benefits

(continued)



Ask if you can get a 90-day supply or home delivery.

- If you are taking medication on a routine basis, you may be able to get more than a 30-day supply* or home delivery.
- Log in to your online account for details.



Ask if you need prior authorization.

In some cases, your doctor will need to send Blue Cross and Blue Shield of Texas a request for approval before your prescription drug may be covered.



Understand specialty medications.

- Specialty medications are used to treat serious or chronic conditions.
- They may have special handling or storage needs.
- They may not be stocked by retail pharmacies.

For more information on self-administered specialty drugs, call the number on your member ID card.

* Not all prescriptions can be filled for 90 days.



BCBSTX has a program with select local pharmacies called PHARMACISTS ADDING VALUE & EXPERTISE®.

- PAVE® pharmacies reach out to eligible members based on how they fill their prescriptions.
- BCBSTX and pharmacists work together with these members to help them take their medications at the right dose at the right time and in the right way for their needs.
- Members may learn more about their prescriptions and other possible resources for care.

To learn more or opt out, write to GPpharmacy@bcbsil.com.

Know your drug cost tiers.

Your health plan's prescription drug list has levels of coverage, called member payment tiers.

- Plans have either 4 or 6 tiers.
- Most often, the lower the tier, the lower your out-of-pocket costs will be for the drug.

Six-Tier Plans Drug Type		Four-Tier Plans Drug Type		Your Cost
6	Non-Preferred Specialty	4	Specialty	\$\$\$
5	Preferred Specialty			↑
4	Non-Preferred Brand	3	Non-Preferred Brand	
3	Preferred Brand	2	Preferred Brand	
2	Non-Preferred Generic	1	Generic	
1	Preferred Generic			\$

Manage Your Wellness and Discounts



Find wellness that works for you.

Well onTarget® offers a full range of programs.

Whether you want to read articles or track healthy habits, you will likely find a resource that fits your interest.

Register to:

- Take a health assessment.
- Record activity.
- Get help with nutrition.

You can also work on things like managing stress, quitting smoking, or managing blood pressure and cholesterol.

You can earn Blue PointsSM toward gift cards for participating and taking certain steps, even as simple as connecting a fitness tracker.

Get started in your online account or at wellontarget.com.



Cash in on your discounts.

Your plan includes access to Blue365® member discounts. Register at

Blue365deals.com/BCBCTX and start shopping to save on goods and services that help you care for your health and work on wellness.

Here are just a few of the categories:

- Dental care
- Eye exams and eyewear
- Nutrition programs and products
- Fitness apps, trackers and gear
- Mental wellness programs
- Hearing tests and devices



The preferred pharmacy network may not apply to all BCBSTX plans, such as 100% cost-sharing plans. See your Benefit Book for details or call the number on your member ID card if you have questions.

Prime Therapeutics LLC is an independent company contracted by BCBSTX to provide pharmacy solutions. BCBSTX, as well as several independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics LLC. MyPrime.com is a pharmacy benefit website offered by Prime Therapeutics LLC.

Well onTarget is a registered trademark of Health Care Service Corporation. Well onTarget is an informational resource provided to members and is not a substitute for the independent medical judgment of a health care provider. Members are instructed to consult with their health care provider before beginning their journey toward wellness. Participation in the Well onTarget program, including the completion of a Health Assessment, is voluntary and you are not required to participate. Visit wellontarget.com for complete details and terms and conditions.

Value-added products and services may be discontinued or changed at any time and may be subject to geographical availability.

Blue365 is a discount program only for members of BCBSTX. This is NOT insurance. Some of the services offered through this program may be covered under your health plan. Please check your Benefit Book or call the Customer Service number on your member ID card for specific benefit facts. Use of Blue365 does not change your monthly payment, nor do costs of the services or products count toward any maximums and/or plan deductibles. Discounts are only given through vendors who take part in this program. BCBSTX does not guarantee or make any claims or recommendations about the program's services or products. You may want to talk to your doctor before using these services and products. BCBSTX reserves the right to stop or change this program at any time without notice.

Blue Points program rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal at wellontarget.com for further information. Member agrees to comply with all applicable federal, state, and local laws, including making all disclosures and paying all taxes with respect to their receipt of any reward.

Non-Discrimination Notice

Health Care Coverage Is Important For Everyone

We do not discriminate on the basis of race, color, national origin (including limited English knowledge and first language), age, disability, or sex (as understood in the applicable regulation). We provide people with disabilities with reasonable modifications and free communication aids to allow for effective communication with us. We also provide free language assistance services to people whose first language is not English.

To receive reasonable modifications, communication aids or language assistance free of charge, please call us at 855-710-6984.

If you believe we have failed to provide a service, or think we have discriminated in another way, you can file a grievance with:

Office of Civil Rights Coordinator Attn: Office of Civil Rights Coordinator 300 E. Randolph St., 35th Floor Chicago, IL 60601	Phone: 855-664-7270 (voicemail) TTY/TDD: 855-661-6965 Fax: 855-661-6960 Email: civilrightscoordinator@bcbsil.com
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You can file a grievance by mail, fax or email. If you need help filing a grievance, please call the toll-free phone number listed on the back of your ID card (TTY: 711).

You may file a civil rights complaint with the US Department of Health and Human Services, Office for Civil Rights, at:

US Dept of Health & Human Services 200 Independence Avenue SW Room 509F, HHH Building Washington, DC 20201	Phone: 800-368-1019 TTY/TDD: 800-537-7697 Complaint Portal: ocrportal.hhs.gov/ocr/smartscreen/main.jsf Complaint Forms: hhs.gov/civil-rights/filing-a-complaint/index.html
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This notice is available on our website at bcbstx.com/legal-and-privacy/non-discrimination-notice

ATTENTION: If you speak another language, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 855-710-6984 (TTY: 711) or speak to your provider.

Español Spanish	ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 855-710-6984 (TTY: 711) o hable con su proveedor.
العربية Arabic	تنبيه: إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجاناً. اتصل على الرقم 855-710-6984 (TTY: 711) أو تحدث إلى مقدم الخدمة.



中文 Chinese	注意：如果您说中文，我们将免费为您提供语言协助服务。我们还免费提供适当的辅助工具和服务，以无障碍格式提供信息。致电 855-710-6984（文本电话：711）或咨询您的服务提供商。
Français French	ATTENTION : Si vous parlez Français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 855-710-6984 (TTY : 711) ou parlez à votre fournisseur.
Deutsch German	ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistenzdienste zur Verfügung. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Rufen Sie 855-710-6984 (TTY: 711) an oder sprechen Sie mit Ihrem Provider.
ગુજરાતી Gujarati	ધ્યાન આપો: જો તમે ગુજરાતી બોલતા હો તો મફત ભાષાકીય સહાયતા સેવાઓ તમારા માટે ઉપલબ્ધ છે. ચોંગ ઓફિશિયલ સહાય અને એક્સેસિબલ ફોર્મેટમાં માહિતી પૂરી પાડવા માટેની સેવાઓ પણ વિના મૂલ્યે ઉપલબ્ધ છે. 855-710-6984 (TTY: 711) પર કોલ કરો અથવા તમારા પ્રદાતા સાથે વાત કરો.
हिन्दी Hindi	ध્યાન દें: યदि આપ હિન્દી બોલતે હોય, તો આપને લિએ નિઃશુલ્ક ભાષા સહાયતા સેવાએ ઉપલબ્ધ હોતી હૈ. સુલભ પ્રારૂપોમાં જાનકારી પ્રદાન કરને કે લિએ ઉપયુક્ત સહાયક સાધન ઔર સેવાએ ભી નિઃશુલ્ક ઉપલબ્ધ હૈ। 855-710-6984 (TTY: 711) પર કોલ કરો યા અપને પ્રદાતા સે બાત કરો।
Italiano Italian	ATTENZIONE: se parli Italiano, sono disponibili servizi di assistenza linguistica gratuiti. Sono inoltre disponibili gratuitamente ausili e servizi ausiliari adeguati per fornire informazioni in formati accessibili. Chiama l'855-710-6984 (tty: 711) o parla con il tuo fornitore.
한국어 Korean	주의: 한국어 를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. 855-710-6984(TTY: 711)번으로 전화하거나 서비스 제공업체에 문의하십시오.
Diné Navajo	SHOOH: Diné bee yániłti'gogo, saad bee aná'awo' bee áka'anída'awo'ít'áá jiik'eh ná hóló. Bee ahíł hane'go bee nida'anishí t'áá ákodaat'éhígíí dóó bee áka'anída'wo'í áko bee baa hane'í bee hadadilyaa bich'í' ahoot'í'ígíí éí t'áá jiik'eh hóló. Kohjí' 855-710-6984 (TTY: 711) hodílinih doodago nika'análwo'í bich'í' hanidzíih.
فارسی Farsi	توجه: اگر فارسی صحبت می کنید، خدمات پشتیبانی زبانی رایگان در دسترس شما قرار دارد. همچنین کمک ها و خدمات پشتیبانی مناسب برای ارائه اطلاعات در قالب های قابل دسترس، به طور رایگان موجود می باشند. با شماره 855-710-6984 (TTY: 711) تماس بگیرید یا با ارائه دهنده خود صحبت کنید.
Polski Polish	UWAGA: Osoby mówiące po polsku mogą skorzystać z bezpłatnej pomocy językowej. Dodatkowe pomoce i usługi zapewniające informacje w dostępnych formatach są również dostępne bezpłatnie. Zadzwoń pod numer 855-710-6984 (TTY: 711) lub porozmawiaj ze swoim dostawcą.
РУССКИЙ Russian	ВНИМАНИЕ: Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону 855-710-6984 (TTY: 711) или обратитесь к своему поставщику услуг.
Tagalog Tagalog	PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyon tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 855-710-6984 (TTY: 711) o makipag-usap sa iyong provider.
اردو Urdu	توجه دین: اگر آپ اردو بولتے ہیں، تو آپ کے لیے زبان کی مفت مدد کی خدمات دستیاب ہیں۔ قابل رسائی فارمیس میں معلومات فراہم کرنے کے لیے مناسب معاون امداد اور خدمات بھی مفت دستیاب ہیں۔ 855-710-6984 (TTY: 711) پر کال کریں یا اپنے فراہم کننہ سے بات کریں۔
Việt Vietnamese	LUU Ý: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số 855-710-6984 (Người khuyết tật: 711) hoặc trao đổi với người cung cấp dịch vụ của bạn.