

Florida

# BLUE

BLUECARE EDITION  
Fall/Winter 2006

**Mini-clinics**

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**New tools**

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**Some referrals eliminated**

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**New** and  
**improved**  
solutions  
for **you**

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## Member Services

If you have any comments or questions about this magazine, write to:

Pam Cashes

Blue Cross and Blue Shield of Florida

P.O. Box 44269

Jacksonville, FL 32231-4269

E-mail: [pamela.cashes@bcbsfl.com](mailto:pamela.cashes@bcbsfl.com)

Please include your contract number and complete address when corresponding with us.

Florida

# BLUE

BLUECARE EDITION

Fall/Winter 2006



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# what's new?

## Mini-clinics expand access

We continue to expand our networks to provide you with affordable health care choices. This fall we will begin to offer mini-clinics as participating providers in all our networks.

Mini-clinics, or retail clinics, are ambulatory centers that treat common, low-intensity illnesses. They are situated in kiosks located in retail businesses, like pharmacies and grocery stores. Usually, they are open for 12 hours on weekdays and six to eight hours on Saturdays and Sundays.

Care is provided by a master's level nurse practitioner (ARNP). A supervising community physician provides medical oversight. ARNPs operate under a set of clinical protocols that define the conditions they can treat. Only a limited number of diagnoses are treated (e.g., strep throat, ear infections, bronchitis, gastroenteritis, etc.). The nurse practitioners redirect any patients who don't meet their treatment profile to a physician or another medical facility.

To find a mini-clinic in your area, look under Convenient Care Centers on our provider directory at [www.bcbsfl.com](http://www.bcbsfl.com), Find a Doctor or Hospital.

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## Join today and you could win a \$10 gift card

Blue Cross and Blue Shield of Florida is seeking current members interested in joining our "BlueCollaboration" online member panel, and we'd like to invite you to participate. Participants will:

- Tell us about their experiences as members
- Provide input into the development of new products, services and capabilities, as well as advertising and informational materials

All the information provided will be kept strictly confidential and used for marketing purposes only.\*

Space on the panel is limited. So, the sooner you apply, the better you

chance of being selected! The first 500 people who qualify and join the BlueCollaboration panel will receive a \$10 gift card to [amazon.com](http://amazon.com).

To apply, complete the short questionnaire at <http://join.bluecollaborationfl.com>.

\*To ensure total privacy, individual answers will be grouped together with those of others who completed the same survey, and the information each participant provides will be used for statistical purposes only. No personal information will be released to any other companies or organizations.

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## Technology closes information gap

Soon your treating physicians will have secure online access to your health records<sup>1</sup> from any location. We are placing at their fingertips a consolidated view of health care claims showing what medical services you have received.

This information supports improved patient care and safety, and can help eliminate unnecessary duplicate



## U.S. prepares for avian flu

Birds migrating from nations infected with avian flu are expected to reach the continental United States shortly. Although there have been 246 human cases of avian flu reported since 2005, including 144 fatalities,\* most cases have resulted from people having direct or close contact with infected poultry or contaminated surfaces. The United States maintains trade restrictions on the importation of poultry and poultry products from countries where the avian influenza strain has been detected in commercial or traditionally raised poultry.

so we can continue to serve our members in the event an avian flu outbreak occurs.

The situation can change at any time upon short notice. Public information about avian flu and checklists to help individuals and families prepare are available from the Department of Health and Human Services, which has set up a website dedicated to a possible flu pandemic.

### Find Out More

[www.pandemicflu.gov](http://www.pandemicflu.gov)

\*Source: World Health Organization, as of Sept. 14, 2006

The good news is that human transmission has been “limited, inefficient and unsustainable,” according to the Centers for Disease Control and Prevention. These cases involved spread of the virus within a family. No spread outside the exposed family was documented or suspected.

Health care professionals across the country are developing plans for any possible pandemic. We’ve prepared, too. Blue Cross and Blue Shield of Florida has expanded its business continuity plan, including plans of action covering a range of scenarios,

medical procedures. That can prove invaluable as you and your doctors discuss treatment options, particularly in the aftermath of a catastrophic event. Certain information will not be shared, in accordance with state and federal rules. This includes HIV/AIDS, sexually transmitted diseases and claim information associated with mental health and/or substance abuse conditions.

Blue Cross and Blue Shield of Florida is the first health insurer to bring a *payer-based health record* to Florida. We want your doctors to have the tools necessary to offer you personalized service and care. It’s another way Blue can help you.

First offered this year in the Tampa area, the capability will be available statewide in 2007. Before implementation in your area, you will receive more detailed information, including how you can restrict use of this service for yourself and/or family members.

<sup>1</sup>We have complied with all applicable privacy and electronic security laws.

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# use your benefits to stay healthy

An ounce of prevention is worth a pound of cure. How can you apply that old maxim to your health insurance? By taking advantage of your BlueCare HMO plan's emphasis on prevention and early detection of serious illnesses and diseases.

Your comprehensive plan includes coverage for a wide range of preventive services. And you pay no deductible! We want you to stay healthy. That's why we've designed your plan to encourage you to use these benefits.

## Well-Child Care

Dependent children covered under your plan are entitled to coverage for regular pediatric office visits and immunizations (through age 16). You are responsible only for your regular office visit copayment or applicable coinsurance, depending on your plan.

## Adults

Once every 12 months, you are covered for a routine physical. Your primary care physician will ensure you get all the necessary tests. There is no charge for laboratory tests or X-rays. You pay only your applicable office visit copayment or coinsurance, depending on your plan.

If you have a family history of colon cancer or are age 50 or older, ask your doctor about colon cancer screening. If determined by your physician to be medically necessary

and your plan includes a wellness benefit, it is covered. (See page 7.)

Adults also are covered for certain immunizations, such as a tetanus booster every 10 years. And if you have a chronic medical condition or are age 50 or older, don't forget a flu shot. You are particularly at risk for seasonal influenza and its complications. When you receive the shot from your primary care physician, you pay only your regular office visit copayment or applicable coinsurance.

## Women

Schedule an annual gynecological exam. It's the best way to detect problems early. You also are fully covered for regular screening mammograms (see related article on page 7), a Pap test every three years beginning at age 18 (if sexually active) and chlamydia screening (recommended annually through age 25 for young women who are sexually active).

## Men

Prostate cancer is a leading cause of cancer death among men. It can be cured if caught early. For members with a preventive health benefit, the prostate-specific antigen (PSA) test is covered for diagnostic or monitoring purposes.

The *For Your Information* guide inserted in this issue includes a breakdown of recommended preventive services by age as established by the U.S. Preventive Services Task Force. If you have any questions about coverage for wellness services, feel free to call the telephone number on your BlueCare ID card.

## Special Programs

You also can take advantage of the special programs we offer members—at no additional charge—like Healthy Addition®. This voluntary program is designed to help educate expectant women who have risk factors that may cause a complicated pregnancy. If you become pregnant, see your doctor for prenatal care and call us at **(800) 955-7635**, option 6.

Members with chronic conditions, such as asthma, congestive heart failure or diabetes, can get help, too. Through Health Dialog® we offer programs to help improve both your understanding and self-management of your condition, in accordance with your physician's plan of treatment. Call **(800) 877-789-2583**, day or night, 365 days a year to speak privately with an experienced Health Dialog health coach who can answer your questions and provide educational material. Or visit the Dialog Center® on our website, Health Dialog's online information resource. It's chock-full of useful information about hundreds of medical topics.

## Find Out More

[www.bcbsfl.com](http://www.bcbsfl.com)  
Click on Members, then Health and Wellness

\*BCBSF has entered into an arrangement with Health Dialog® whereby Health Dialog has agreed to provide BCBSF members with care decision support services and information. BCBSF has not certified or credentialed, and cannot guarantee or be held responsible for, the quality of services provided by Health Dialog. All decisions that require or pertain to independent professional medical/clinical judgment or training, or the need for medical services, are solely your responsibility and that of your Physicians and other health care Providers. Neither BCBSF nor Health Dialog Services Corporation shall be deemed to be providing medical care or advice.

# women:

## Have you had a mammogram recently?

Breast cancer is the most common cancer among women, other than skin cancer, and it is the second leading cause of cancer death in women, after lung cancer.

Fortunately, according to the American Cancer Society, breast cancer rates are going down—a decline that’s probably the result of finding breast cancer earlier and improved treatment.

October is Breast Cancer Awareness Month. If you’re between 35 and 40 years of age, get a baseline mammogram. And if you’re 40 or older and it’s time for your regular screening, call your doctor. Schedule a mammogram today.

### Coverage for Screening Mammograms\*

- Baseline at age 35 or later
- Biannually between ages 40 and 49
- Annually from age 50+

#### Find Out More

American Cancer Society  
[www.cancer.org](http://www.cancer.org)  
**(800) ACS-2345**



\*Benefits may vary by plan. Always check your benefits before receiving services.

## Breast reconstruction surgery is covered

If you have a mastectomy, you can choose to have breast reconstruction surgery, either at the same time as the mastectomy or later. Reconstruction involves using implants and/or tissue from other parts of your body, which is called autologous tissue reconstruction.

You are covered for reconstruction of the breast on which the mastectomy was performed, as well as surgery and reconstruction on the other breast to produce a symmetrical appearance. In addition, your health plan covers prosthesis and treatment of physical complications at all stages of the mastectomy, including lymphedemas. The manner of procedures is determined in consultation between you and the attending physician. Coverage is subject to the regular requirements of your plan.

# 50+?

## Consider a colorectal cancer screening

Blue Cross and Blue Shield of Florida has been working with the American Cancer Society on a campaign to raise awareness of the need for everyone over age 50 to be tested for colorectal cancer. It’s estimated that more than 148,000 new cases will be diagnosed in the United States this year, with 9,900 new cases in Florida—and more than 3,700 men and women in the state will die of the disease this year.

In addition to communicating with the general population about the importance of colorectal screening, the joint collaborative effort has targeted physicians and other health care providers with educational brochures, seminars and free online

continuing medical education (CME) programs.

“Screening saves lives,” said Michael Kasper, M.D., chairman of the board and president, American Cancer Society’s Florida Division. “It can prevent colon cancer altogether by identifying precancerous growths, and it can detect cancer at its earliest, most treatable stages.”

There are a variety of colorectal screening tests:

- Fecal occult blood test
- Flexible sigmoidoscopy
- Screening colonoscopy
- Barium enema

If you are over age 50 and have not had a screening test for colon cancer, we urge you to visit your doctor to discuss scheduling one. Your doctor will determine which test is best for you based on your age, medical and family history, and any symptoms you may be experiencing. Check your benefits handbook for information about coverage under your plan.

Want more information on colon cancer and colorectal screenings? For your convenience, we’ve posted a link to the American Cancer Society on our website’s home page.

#### Find Out More

[www.bcbfsl.com](http://www.bcbfsl.com)

# Do you understand the **ins** and **outs** of your network?

None of us want to spend money if we don't have to. That's why it's important to understand how your health plan works, so you can get the most benefit from your plan and avoid unnecessary out-of-pocket expenses.

Following are answers to some frequently asked questions about the BlueCare HMO plan to help you understand your benefits. If you have any other questions, please call the Customer Service number on your member ID card. We're here for you.



## What's the best way to control my out-of-pocket costs?

**A** First, always stay within Health Options' extensive network of participating doctors, hospitals and other health care providers. To make sure you're using an in-network provider, check the provider directory on our website, [www.bcbsfl.com](http://www.bcbsfl.com), under "Find a Doctor or Hospital." We try to keep our online provider directory as current as possible, but we strongly recommend you confirm network participation when you schedule an appointment.

Second, prior authorization is not required for emergency services and care. But if a determination is made that an emergency medical condition does not exist, follow-up care may be denied. Go to the hospital only in a

life-threatening situation. If you need care for an acute condition outside of your primary care physician's office hours, you can go to an urgent care center that participates with Health Options.

## What should I do if I get billed from my doctor for an outstanding balance?

**A** You are responsible only for your regular copayment, deductible and applicable coinsurance, depending on your plan. As long as you always use doctors and other health care providers who participate in BlueCare, you should not be balance billed. If you do receive a bill from a participating Health Options doctor, call the Customer Service number listed on your BlueCare ID card.



If you have to go to a non-participating hospital emergency room while away from the service area, the hospital may bill you directly. In that case, simply send the unpaid bill to Health Options at the address on your BlueCare ID card, along with an explanation regarding the nature of the emergency. Please refer to your Agreement for the emergency services and care copayment.

### What's the difference between an emergency room and an urgent care center?

**A** If you're experiencing a life-threatening condition (can't breathe, broken bones, head trauma, heart attack, etc.), go to the nearest hospital emergency room. If your condition isn't life-threatening and your doctor's office is closed, go to a participating urgent care center. These walk-in clinics offer late and weekend hours and can significantly reduce your out-of-pocket costs compared to a hospital emergency room; your copayment will be the same as if you saw a specialist. Consult our online provider directory at [www.bcbsfl.com](http://www.bcbsfl.com) or call the telephone number listed on your BlueCare ID card to locate your nearest participating center.

### If I have an emergency and go to the hospital, do I need to do anything?

**A** After you receive treatment, call your primary care physician (PCP) or have someone call for you as soon as possible. Follow-up care to treat your emergency condition must be coordinated by your treating physician (PCP or specialist). If follow-up care is not provided by,

or coordinated by, your treating physician, coverage for that care may be denied and you may be responsible for the costs of that care. Do not seek follow-up care at the emergency room.

### What if I get sick when I'm out of town on business or vacation? Am I covered even if it isn't an emergency?

**A** For short trips, the BlueCard® Program gives you access to doctors and hospitals almost everywhere. Non-emergency services rendered outside the service area must be authorized in advance by Health Options in order to be covered. You can find local participating providers on the BlueCard Doctor and Hospital Finder website at [www.bcbs.com](http://www.bcbs.com), or call BlueCard Access at **(800) 810-BLUE [2583]**. When you arrive at the local Blue plan participating provider, present your BlueCare ID card. After you receive care from a participating provider, you should not have to complete any claim forms. Nor should you have to pay for medical services other than your usual out-of-pocket expenses (noncovered services, deductible, copayment and/or coinsurance).

### If I need laboratory testing, how can I make sure I'm covered?

**A** Use Quest Diagnostics for all your laboratory services. They are the participating lab for BlueCare members. To locate the nearest Quest facility, consult our online provider directory at [www.bcbsfl.com](http://www.bcbsfl.com) or call the telephone number listed on your BlueCare ID card.

### Can I change my PCP? If so, how do I do that?

**A** You may change your PCP by selecting a new one from our online provider directory. By using MyBlueService, our member self-service center, you can submit the request online anytime, day or night. Or you can call Customer Service during regular business hours at the telephone number on your BlueCare ID card to make the change.

If you make the change before the 15th day of the month, the effective date will be the first day of the following month. For requests made after the 15th, the change will not be effective until the first day of the second month. For example, if you request the change on November 10, the effective date of the change will be December 1. If you request the change on November 20, the effective date of the change will be January 1.

### Can I use the Internet to communicate with my doctors?

**A** Yes, if you and your doctor have signed up for our e-Medicine program. Blue Cross and Blue Shield of Florida is the first health plan in the state to offer you totally secure and confidential Internet access to your doctors for nonurgent medical needs. Hundreds of doctors are already participating. If your doctor's office is participating, you can schedule or change an appointment, ask a simple question, get a referral when applicable for a specialist, receive lab and test results, request medication refills and receive targeted preventive

*continued on page 14*

# save money with these special offers



Besides the many benefits of your health coverage, we offer members—at no extra charge—special savings on health-related products and services through our BlueComplements<sup>SM</sup> program. Many services are available throughout Florida and, in some cases, nationwide.

## The eyes have it with Vision One<sup>®</sup>

You pay \$55 for eyeglass exams and receive up to 60 percent off retail prices for frames and lenses through the Vision One program offered by Cole Managed Vision. Participating centers include Pearle Vision Centers and optical departments at Sears, JCPenney and Target, as well as many independent practitioners.

To find a network location near you, visit our website at [www.bcbsfl.com](http://www.bcbsfl.com), click on Discount Programs, BlueComplements, Enhanced Vision Care, then Cole Managed Vision. Or call Vision One at **(800) 793-8622**.

## TruVision<sup>™</sup> offers true value

If you've been thinking of having laser vision correction services but were deterred by the cost, think again. Through our arrangement with TruVision, you will pay only \$895 per eye for LASIK or PRK procedures (custom LASIK at an additional fee), including:

- A preoperative exam
- Retreatment warranty
- 12-month, no-interest financing with approved credit

For more information, call toll-free **(877) 747-2020** to schedule a pre-operative exam or to receive a free telephone screening to determine if you are a good candidate for PRK, LASIK or custom LASIK.

TruVision also offers a contact lens mail-order service with prices, on average, 15 percent lower than other national contact lens mail-order programs. And you get free shipping to your home in five to seven days. For more information or to place an order, call toll-free **(877) 747-2020**.

The products, services and information provided through the BlueComplements program are made available as a courtesy to our members and are not a part of insurance coverage, and are not a substitute for medical advice. BCBSF does not endorse and is not responsible for the products, services or information provided by the vendors that are a part of the BlueComplements program.



## HEARx has the prescription for your hearing loss

Members with hearing loss can understand their options for improved hearing through a program administered by HEARx and HearUSA Hearing Care Network, the largest hearing care organization accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). You'll receive a free screening, including tolerance testing, speech discrimination and risk consultation. Plus you'll get 25 percent off the retail price of any hearing aid purchased at a HEARx center, or special promotional prices that provide even greater savings. Try it for two months free! HEARx offers up to a 60-day trial period and a one-year warranty on their products. In addition, you'll get a one-month supply of batteries, annual cleaning and check of hearing aids—all free with purchase.

Call HEARx toll-free at **(800) 333-3389**.

## Listen to what TruHearing™ has to offer

Get up to 60 percent off the manufacturer's suggested retail cost on state-of-the-art digital hearing aids through TruHearing. Plus, receive a free comprehensive hearing exam using the latest diagnostic equipment, and three follow-up office visits following your initial appointment.

There's more! TruHearing will give you a free one-year supply of batteries, a one-year lost or damaged instrument replacement and two-year limited product warranty.

For more information, call toll-free **(866) 814-4327**.

## Ride safely with SafeTech™

Don't forget to don that helmet before climbing aboard your bike. And now you can get helmets that meet national impact and safety standards for every family member at savings of 40 percent or more off the retail price. Both child- and adult-size helmets are available at a cost of \$8 and \$9.75 (plus \$6 for shipping and handling for the first helmet, \$3 for each additional helmet). Helmets include reflective decals for night safety and sizing pads for custom fit.

You can download an order form from our website, [www.bcbsfl.com](http://www.bcbsfl.com). Click on Discount programs, BlueComplements, Bike Helmets. Questions about SafeTech helmets? Call **(800) 288-4280**.

## More savings available for you

Other great discounts and savings await you. Check out our website for information on:

- Discounts on chiropractic, acupuncture and massage therapy providers in Florida and nationwide, health and wellness products, and more through Healthy Alternatives<sup>SM</sup>.
- Discounts of up to 50 percent off Jenny Craig<sup>®</sup> Gold and Platinum weight-management programs
- Fitness club membership at 20 to 60 percent discounts at more than 1,500 GlobalFit<sup>™</sup> Network fitness clubs locally and nationwide. (A one-time enrollment fee applies.)

### Find Out More

[www.bcbsfl.com](http://www.bcbsfl.com)  
Click on members, Discount Programs, then BlueComplements



# pharmacyfolio

## Allergy or drug side effect? Is there a difference?

An estimated 50 million Americans suffer from some type of allergy. Each year allergies account for more than 17 million outpatient office visits, according to the Asthma and Allergy Foundation of America (AAFA).

As a result of the immune system overreacting to an allergen (foreign substance), you may experience coughing, sneezing, itching, runny nose and sore throat, for example. A severe reaction can cause rashes, hives, lower blood pressure, difficulty breathing, asthma attacks and even death.

### Drug allergies

Drug allergies are less common than drug side effects, and most people may never experience an allergy. Symptoms of a drug allergy may occur quickly (within minutes) or several days after taking the drug. Half of all allergic reactions occur just one week after starting the drug, and symptoms usually disappear three to five days after stopping the drug.

Sometimes patients who are allergic to certain foods can experience an allergic reaction to the inactive ingredients in a drug product that contains traces of the allergens. Eight foods are responsible for 90 percent of food allergies. They are milk, soy, eggs, wheat, peanuts, tree nuts (walnuts, cashews), fish and shellfish. These can

be found in drug products. For example:

- The popular asthma inhalers Advair, Serevent and Foradil contain lactose, a product derived from milk.
- Children's Benadryl Allergy Fast-melt, an over-the-counter product, contains soy protein isolate.
- Vaccines for influenza and the measles, mumps, rubella (MMR) vaccine are made in cells from chick eggs.

### Drug side effects

A drug side effect is an expected normal response of the body to a medication at therapeutic doses caused by a drug's normal function. Every drug is capable of causing side effects. You may take a drug to relieve one symptom, but it may unintentionally, or in some cases intentionally, cause you to experience other symptoms or side effects. For example, antihistamines such as Benadryl commonly cause drowsiness; while antibiotics like penicillin can cause diarrhea. Diuretics, such as furosemide, are designed to produce frequent urination.

### Take action

Prevention is key. That's why it's important to communicate before you medicate. If you do have a reaction, whether a drug allergy or side effect, recognizing the symptoms and taking action can save your life. Consult your physician or pharmacist for recommendations on treatment or a course of action. Seek immediate medical attention if you are experiencing symptoms such as difficulty breathing or swelling of the lips, tongue or face.

### Find Out More

Food Allergies  
[www.nlm.nih.gov/medlineplus/ency/article/000817.htm](http://www.nlm.nih.gov/medlineplus/ency/article/000817.htm)

Drug Allergies  
[www.nlm.nih.gov/medlineplus/ency/article/ppp819.htm](http://www.nlm.nih.gov/medlineplus/ency/article/ppp819.htm)

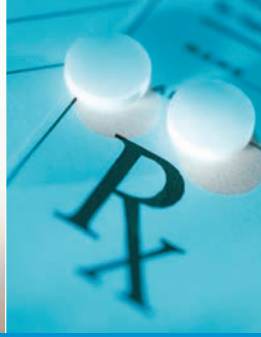
### Common Drug Side Effects

Nausea  
Vomiting  
Diarrhea  
Stomach cramps  
Light-headedness  
Increased heart rate  
Fatigue  
Frequent urination  
Hot flashes  
Insomnia

### Common Drug Allergies

Increased heart rate  
Skin rash  
Hives  
Itching of skin or eyes  
Wheezing  
Swelling of lips, tongue or face





## Prime Therapeutics to help manage Rx benefits

Prime Therapeutics LLC® (Prime) will support the management of pharmacy benefits for all Blue Cross and Blue Shield of Florida (BCBSF) and Health Options members beginning Jan. 1, 2007. In April, BCBSF purchased an equity interest in Prime, which is owned exclusively by 10 Blue Cross and Blue Shield plans and serves approximately 10 million people nationwide.

Rising prescription drug costs continue to put pressure on premium rates. To provide our members access to affordable health care choices, we continually seek provider agreements that best serve our members. We believe our members will benefit from this move. It will strengthen our pharmacy programs and enable us to increase coordination between those programs and our care and wellness programs.

Lowell Sterler, vice president, BCBSF Pharmacy Programs, explains, “Prime understands that each of its client markets is unique. This will enable us to apply a more customized, market-specific approach to pharmacy management.”

In addition to various clinical, administrative and claims processing services, Prime will provide the pharmacy mail-order service now

offered through Walgreens. Prior to Jan. 1, 2007, members currently using Walgreens’s mail order service will receive information explaining their benefits, instructions to set up their mail-order accounts and Prime’s customer service number.

Prime also maintains an expansive national pharmacy network for members traveling out of state who may need a prescription filled. Prime’s national network includes all our current national chains, as well as a large number of independent pharmacies.

As we draw closer to Jan. 1, those affected will receive additional information by mail. Also, check our website at [www.bcbsfl.com](http://www.bcbsfl.com) for updates.

## Preferred Medication List update

The Preferred Medication List is a guide for members with three-tier prescription plans. Quarterly, pharmacists and medical professionals review the list to ensure it includes safe, cost-effective medications and reflects changes in the availability of certain drugs. Unless otherwise indicated, the generic equivalents of brand-name drugs deleted continue to be covered at the lowest copayment. They are safe, effective and can save you money. Visit our website for the complete Preferred Medication List.

### Additions

Effective 4/01/06

Apidra  
Fortical  
Levemir  
Revlimid  
Sutent

Effective 5/01/06

Zemplar oral

Effective 8/01/06

Exjade  
ProAir HFA  
Tamiflu (limit 10 caps/6 months)

### Deletions\*

Effective 10/01/06

Accuneb 0.042%/3 ml  
Augmentin ES  
Cefzil oral tabs & suspension  
Clozaril  
Colestid packets  
Cyclogyl 1%  
Didronel oral tabs  
Effexor  
Elocon lotion  
Flonase  
Fortovase\*\*  
Grifulvin V susp  
Mebaral  
Mestinon 670 mg  
Parnate  
Pramosone cream (2.5%/1%)  
Pravachol (10, 20, 40 mg) tabs  
Rocaltrol oral solution  
Salagen 5 mg  
Terazol vaginal suppositories  
Theo-dur tabs  
T-Phyl tabs  
Zaditor  
Zithromax suspension  
Zocor  
Zonegran

\*Brand only deleted; generic remains.

\*\*Removed from the market by the manufacturer.

## Network Q&A

*continued from page 9*

care reminders when it's most convenient for you—any time of the day or night.

Depending on your particular BlueCare plan, you also may be covered for an online medical consultation, or webVisit®. If so, you will pay the same out-of-pocket amount as you would for a face-to-face office visit with your doctor. Your doctor may not complete the online consultation if he or she decides you need to be seen.

To sign up for the service, go to our website, [www.bcbsfl.com](http://www.bcbsfl.com), and click on Members, then Products, Plans & Services and e-Medicine.

### **If I want to get a second opinion, will the doctor's charges be covered?**

**A** Charges for a second medical opinion will be covered from a participating physician in your service area when certain circumstances apply:

- You disagree with Health Options, your PCP or a contracting specialist's opinion about the necessity of surgical procedures.
- You are subject to a serious injury or illness.

- You feel you are not responding satisfactorily to treatment.

In addition, Health Options may require you to get a second medical opinion. Please refer to your agreement for details.

If you want a second medical opinion from a non-participating physician, it must be authorized by your primary care physician prior to services being rendered.

### **My dependent child is away at college. Can she still be covered under my HMO plan even though she's out of the plan's service area?**

**A** Yes. In most areas she can be covered under the Away From Home Care® Program. It's designed to give you peace of mind if you have a dependent attending school out-of-state, have family members living in different service areas or have a long-term work assignment in another state—90 consecutive days or longer. Coverage is limited to another Blue Plan's HMO service area and available in most states. To sign up, simply call the Customer Service number on your BlueCare ID card.

## What's New

*continued from page 5*

### **Specialist visits no longer require a PCP referral**

Good news! You spoke, and we listened—we've made accessing specialists easier than ever for you. As of Oct. 1, you no longer need a referral from your primary care physician (PCP) to see specialists who participate in the Health Options network. If a specialist who is a non-contracting provider is required, your primary care physician will request a referral authorization from Health Options.

Please note, this does not change the participating Health Options provider's responsibility to obtain authorization for certain medical services.



# check out **BlueMedicare Rx**

## It may be just the right plan for your parent

If your parents are on Medicare, they may need help choosing a Medicare prescription drug plan for next year. The enrollment period is Nov. 15 to Dec. 31, for coverage beginning Jan. 1, 2007. When comparing plans, consider:

- Which drugs are covered
- Monthly premiums and other out-of-pocket costs
- Convenience in obtaining prescriptions

For 2007, we've made some big changes to BlueMedicare Rx, our Medicare prescription drug plan. Members will get more and pay less! We've enhanced many benefits, cut out-of-pocket costs and slashed premiums. What's more, we're adding a third option plan—one with even lower costs. It's ideal for those who don't take many prescribed drugs and/or are looking for lower costs. Medicare beneficiaries do not have to be enrolled in one of our Medicare HMO, PPO or supplement plans to be eligible to sign up.

### Benefit enhancements

BlueMedicare Rx offers a comprehensive list of covered drugs. In 2007, members enrolled in Option 1 or 2 will enjoy these great benefit enhancements:

- Significantly reduced premiums—by as much as 8 percent to 17 percent compared to the lowest cost Part D plans in 2006
- Zero deductible—we've eliminated the \$100 deductible on preferred and non-preferred brands
- \$25 copay for preferred brand-name drugs—a savings of \$5 per prescription
- \$40 fixed copay for non-preferred drugs instead of 40 percent coinsurance, so members will know their exact out-of-pocket cost

- Added coverage for certain generic drugs excluded under the Medicare Part D drug program, including prescriptions for cough and cold medications, anticonvulsants, barbiturates and benzodiazepines
- Option 2 also provides coverage for generic drugs through the coverage gap, including certain generic drugs excluded under Medicare Part D (listed above).

### New lower-cost option available

In response to our members' concerns about costs for prescription drug coverage, we are introducing a new lower-cost plan. BlueMedicare Rx Option 3 offers coverage for all drug categories required under Medicare Part D, plus:

- Significantly lower premiums than our Options 1 and 2

- \$5 copay for generic drugs with no deductible
- \$25 copay for preferred brand drugs after \$100 deductible
- \$50 copay for non-preferred brands after \$100 deductible

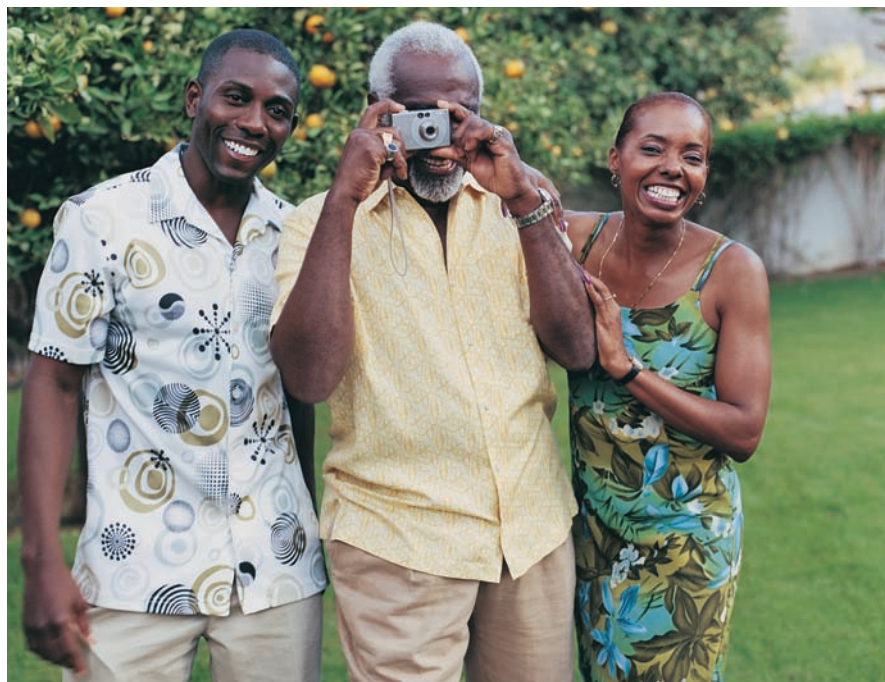
And, of course, for all three options we provide a vast network of local and nationwide participating pharmacies, including chain and independent pharmacies, as well as mail-order pharmacy services.

For more information about our new BlueMedicare Rx plans, call **(800) 926-6565**.

**Find Out More**

**(800) 926-6565**

Seven days a week,  
8 a.m.–9 a.m. ET  
TTY/TDD users, dial **711**



Approved by the Centers for Medicare & Medicaid Services. Blue Cross and Blue Shield of Florida (BCBSF) contracts with the federal government to administer the Medicare Part D Prescription Drug benefit in the state of Florida. This contract is renewed annually and availability of coverage beyond the end of the current contract year is not guaranteed.

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# Go Ahead and Smile...You Can Afford to

With **BlueDental** Group and Individual plans you can:

- Choose the type of coverage that's right for you – at a price you can afford
- Enjoy access to thousands of network dentists and specialists
- Get assistance from our dedicated customer service team (when you need it)

Ask your agent or employer about the **BlueDental** Insurance Policy that's right for you.



**Florida Combined Life**

An Independent Licensee of the Blue Cross and Blue Shield Association

For details of benefits and costs, visit [www.bcbsfl.com](http://www.bcbsfl.com), or call your local agent. Limitations and exclusions may apply.