



HEALTH INSURANCE HURDLES GOT YOU DOWN? LOOK NO FURTHER.

HEALTH CARE CAN BE COMPLICATED. **BLUESIMPLICITYSM MAKES IT SIMPLE!**

Why BlueSimplicity? Maybe you should ask “Why not?”



NO WAITING! With no deductible, your benefits start day one. So go ahead, go to the doctor.



NO SURPRISES! Ever wonder why you got multiple bills from multiple doctors for ONE hospital stay? Well, with no coinsurance and straight-forward copays, you'll know your costs up-front.



THE ESSENTIALS ARE COVERED. You can count on all the essential health benefits being covered under your plan — services like:

- Preventive care
- Prescription drugs
- Emergency services
- Hospitalization
- Mental health and more



YOU'LL NEVER PAY FULL PRICE. Who doesn't like discounts? Wellmark members get discounted rates for medical services from in-network providers. So, if the discounted service is less than your copay, you'll only pay the cost of the service.



YOU'LL LIKE THIS LIMIT. Nobody likes limits — unless it's a limit on how much you owe. Every dollar you spend on a covered benefit adds up to your out-of-pocket maximum (OPM). That means every copay for a trip to the doctor or pharmacy helps you reach the point where you don't have to pay anymore.



WE'RE IN ALL 99 COUNTIES. That's right, you can seek and receive in-network benefits across Iowa. That means BlueSimplicity is welcomed in 100 percent of the hospitals and 97 percent of providers state-wide. And don't worry, you're still covered in case of an emergency out of state, too.

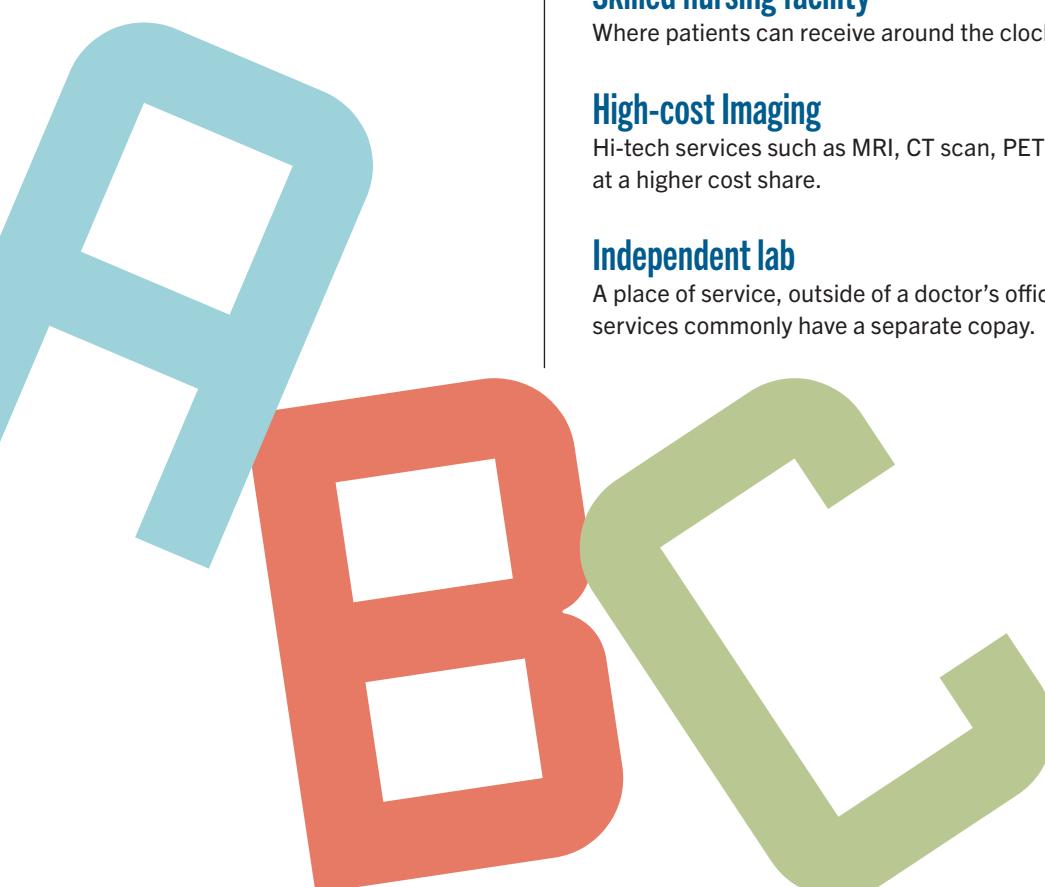


WE'VE GOT 65,000 PHARMACIES. Whether you're at home or on vacation, you can use your pharmacy benefits at more than 65,000 pharmacies nationwide. And your specialty drugs can be picked up at any Hy-Vee or CVS.



IT MAKES YOU SMARTER. This plan is so simple, you'll have the highest health care IQ on the block. You'll have the tools, and know the questions to ask your doctor to know your costs up-front.

LEARN MORE



Plus, you can navigate the system like a champ when you know the jargon like you know the alphabet.

Preventive care

Care you receive to prevent illness or disease like a mammogram or an annual exam and immunizations.

Primary care physician (PCP)

A doctor or provider who typically delivers primary care — family practitioners, general practitioners, internal medicine, obstetrician/gynecologists, pediatrician, physician assistants or nurse practitioner.

Non-primary care physician (Non-PCP)

A doctor or provider who typically delivers specialty care like cardiologists or dermatologists.

Although chiropractors, physical therapists, occupational therapists, and mental health or chemical dependency providers are specialists, these provider types have the same cost share as a PCP.

Cost-share

The portion (of the total cost) that you owe. With BlueSimplicity, you only have a copay amount. There is no deductible or coinsurance. Wellmark covers the rest.

Ambulatory surgical center

Health care facility that focuses on providing same-day surgical care.

Skilled nursing facility

Where patients can receive around the clock care by nursing staff.

High-cost Imaging

Hi-tech services such as MRI, CT scan, PET scan, EKG and ultrasound. These often come at a higher cost share.

Independent lab

A place of service, outside of a doctor's office, that performs labs and/or X-rays. These services commonly have a separate copay.

UNCERTAINTY IS HISTORY

UNDERSTAND YOUR HEALTH COVERAGE EASILY WITH BLUESIMPLICITY



Your doctor just recommended a procedure or therapy that's going to improve your quality of life. "How soon can I get it done?"

But then you start thinking about your insurance coverage. How much will insurance pay? How much will you owe? With a traditional plan, you'd go in for the procedure or service and wait for the bills to roll in — one at a time. Then, you get your EOB (Explanation of Benefits) to see how much you owe — deductibles, coinsurance, copays. It's overwhelming.

With BlueSimplicity you won't have that cost uncertainty. You'll know your costs up-front by asking your doctor these five questions. And when you do, you'll feel confident in getting the information you need to make the decision that's right for you.

GET A GRASP ON YOUR COSTS BY ASKING THESE **FIVE** QUESTIONS:

- 1 Do you need to see a specialist or personal doctor/PCP?**
Why is this important? Specialist's fees are typically more than a PCP.
What you can do: You can save money on copays when you see a PCP. Ask your doctor if this is something that can be done in a PCP's office.
- 2 Will this be a preventive visit, office visit, outpatient service or an inpatient procedure?**
Why is this important? Each visit type is billed differently. For example, in the case of inpatient procedures, you'll have only one copay amount for all services, but outpatient services will have separate copays for providers and another for the facility (if applicable).
What you can do: By knowing the type of visit/service, you'll also know what level of copay you'll owe. If a service can be done in an office setting, you could save money. There is no more guessing how many bills you might get in the mail.
- 3 Where will you receive care?**
Why is this important? Copays differ depending on where you get care. Your PCP's office or a walk-in clinic is less costly than a surgical center or an ER.
What you can do: Knowing the difference between a walk-in clinic and a specialty care clinic, could save you in out-of-pocket costs. Make sure you aren't seeing a specialist unless you really need that care.
- 4 Are labs or advanced imaging part of the care? If so, are they performed at your provider's office or somewhere else?**
Why is this important? There will be a separate copay in the case of providers using an independent lab. In the case of advanced imaging, an additional copay may apply.
What you can do: Talk to your doctor about imaging options that could cost less such as X-rays. Or ask them if the labs will be sent out, so you understand your costs up-front.
- 5 Will there be any medications or additional care needed? (i.e. physical therapy)**
Why is this important? BlueSimplicitySM Rx copays will apply for most medications prescribed and picked up at your pharmacy. If you require additional care from other provider types, copays for those services also apply.
What you can do: In general, understanding the entire scope of care, will prepare you for the total cost out of pocket.

Wellmark complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: Si habla español, los servicios de asistencia de idiomas se encuentran disponibles gratuitamente para usted. Comuníquese al 800-524-9242 o al (TTY: 888-781-4262).

注意: 如果您说普通话, 我们可免费为您提供语言协助服务。请拨打 800-524-9242 或 (听障专线: 888-781-4262)。

ACHTUNG: Wenn Sie deutsch sprechen, stehen Ihnen kostenlose sprachliche Assistenzdienste zur Verfügung. Rufnummer: 800-524-9242 oder (TTY: 888-781-4262).



Wellmark Blue Cross and Blue Shield of Iowa is an independent licensee of the Blue Cross and Blue Shield Association.

Blue Cross®, Blue Shield® and the Cross® and Shield® symbols are registered marks and BlueSimplicity™ and Blue Simplicity™ Rx are service marks of the Blue Cross and Blue Shield Association, an Association of Independent Blue Cross and Blue Shield Plans. Wellmark® is a registered mark of Wellmark, Inc.

© 2016 Wellmark, Inc.