



BlueCross BlueShield
of North Carolina

BlueAdvantage[®]

BlueHomeSM
with Novant Health

BlueHomeSM
with UNC Health Alliance

BlueLocalSM
with Atrium Health

BlueValueSM



2024 HEALTH PLANS | For individuals and families

WHY CHOOSE BLUE

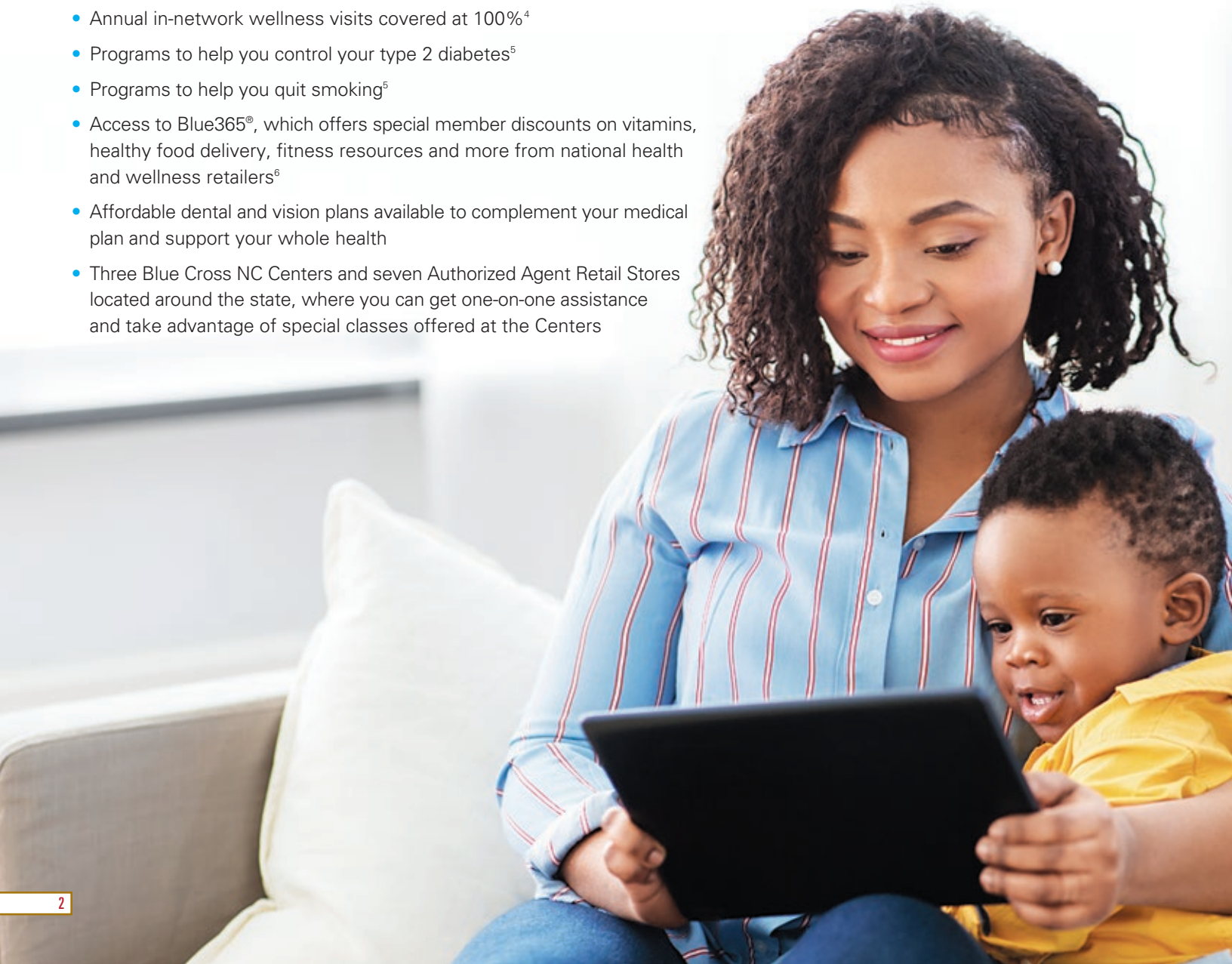


There's a lot to think about when it comes to choosing health insurance. As the only homegrown, local insurer in all 100 counties of the state, Blue Cross and Blue Shield of North Carolina (Blue Cross NC) is here for you. With 90 years of experience in the market and our broad range of plans,¹ you can find the coverage that's right for you.

The benefits that are important for getting and staying healthy are at the core of all of our plans. Advantages of health care coverage with Blue Cross NC include:

- No referrals needed to see a specialist
- Coverage in- and out-of-network on some plans
- 24/7 telehealth care options for behavioral and physical health, available in English and Spanish²
- Convenience of 90-day coverage of prescription mail-order option
- No waiting periods for pre-existing conditions³
- Annual in-network wellness visits covered at 100%⁴
- Programs to help you control your type 2 diabetes⁵
- Programs to help you quit smoking⁵
- Access to Blue365®, which offers special member discounts on vitamins, healthy food delivery, fitness resources and more from national health and wellness retailers⁶
- Affordable dental and vision plans available to complement your medical plan and support your whole health
- Three Blue Cross NC Centers and seven Authorized Agent Retail Stores located around the state, where you can get one-on-one assistance and take advantage of special classes offered at the Centers

Blue Cross NC offers
health insurance plans
in every county across
the state.



With our plans you'll enjoy:

- **Preventive care and essential health benefits** – For all Blue Cross NC individual plans mentioned in this brochure, preventive services are covered at no charge when you go to an in-network provider.⁴ These covered services include annual exams, screenings for diabetes, mammograms and more. See [BlueCrossNC.com/Preventive](https://www.bluecrossnc.com/Preventive) for a list of preventive care services. All Blue Cross NC plans mentioned in this brochure also provide coverage for essential health benefits including mental health, maternity and pediatric dental/vision.* For a complete list, visit [BlueCrossNC.com/Essential](https://www.bluecrossnc.com/Essential).
- **Telehealth services** – Provides 24/7 access to doctors and convenient access to behavioral health practitioners via live consultations.²
- **Online member tools⁷** – Blue ConnectSM provides the tools and information you need to manage your plan and make the best decisions about your health care. Through the Blue Connect MobileSM app, you can access your digital member ID card,⁸ claim status, coverage details and much more.
- **Customer Service to make using insurance easier** – You can reach us by phone, send a secure inbox message or use our live chat feature. Additionally, face-to-face assistance is available in our Retail Stores across the state.
- **Coordinated care from high-quality doctors** – With access to a network of high-quality providers, you can select and establish a relationship with a primary care provider (PCP) to serve as your medical “home” – or the quarterback of your entire health care team. From routine preventive care to occasional sick visits, having a primary doctor can help you take better control of your health and coordinate the care you need. Go to [BlueCrossNC.com/ChooseMyPCP](https://www.bluecrossnc.com/ChooseMyPCP) as soon as your plan is active to select your PCP on Blue Connect. If you have any dependents, do the same from their account(s) too.

Other products to complement your health plan

DentalBlue
for Individuals™

Blue20/20
for Individuals™

Your oral health and vision health play an important role in your overall health. Blue Cross NC offers separate, affordable, high-quality dental⁹ and vision¹⁰ plans for individuals and families. You may purchase dental or vision coverage at any time throughout the year, with or without the purchase of Blue Cross NC health coverage.

Learn more at [BlueCrossNC.com/DentalBlue](https://www.bluecrossnc.com/DentalBlue) and [BlueCrossNC.com/Blue2020](https://www.bluecrossnc.com/Blue2020).

* In- and out-of-network coverage is dependent upon type of plan selected.





YOUR CHECKLIST

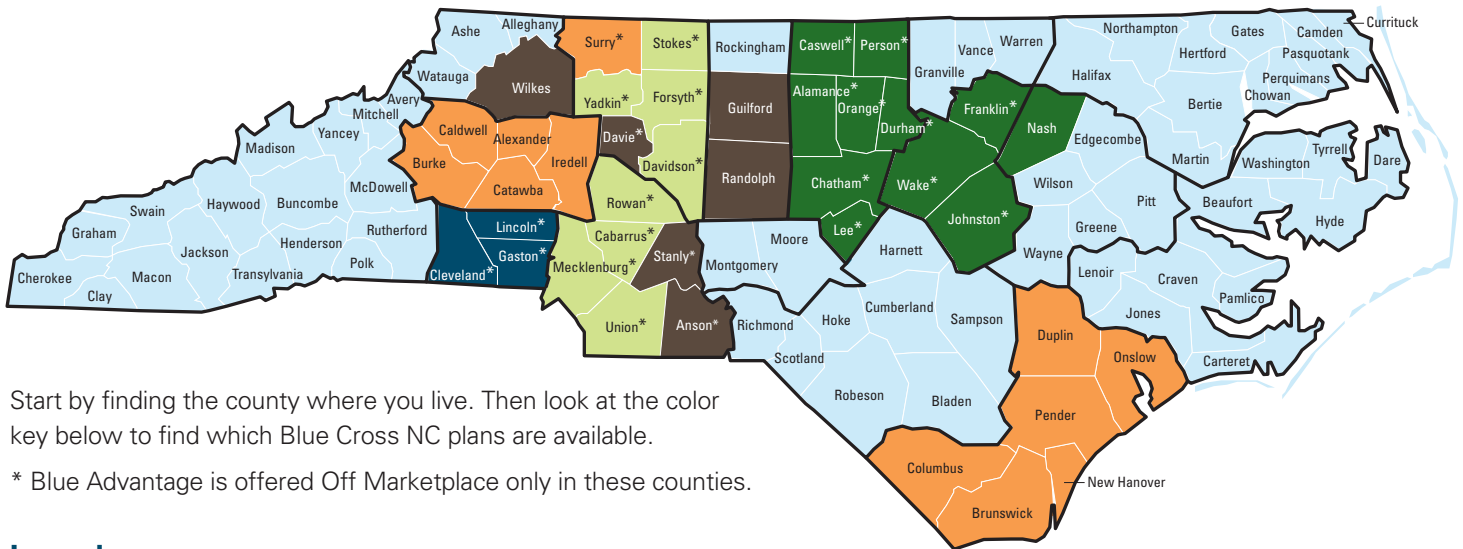
for buying health insurance

How to sign up, step-by-step:

- ✓ Enroll between Nov. 1 and Dec. 15, 2023, for a Jan. 1, 2024, effective date. Enroll between Dec. 15, 2023 and Jan. 15, 2024 for a Feb. 1, 2024, effective date. The Open Enrollment Period ends Jan. 15, 2024.
- ✓ Find out if you qualify for a subsidy to help pay for your health insurance.¹¹ Contact your local authorized Blue Cross NC agent for help.
- ✓ Check the map on page 5 to see which plans are available where you live.
- ✓ Think about your health care needs. Visit [BlueCrossNC.com/FindDoctors](https://www.bluecrossnc.com/FindDoctors) to verify which doctors and hospitals are in-network for your selected plan.
- ✓ Submit your application.
- ✓ Pay for your plan. Your new health insurance plan will not become effective until Blue Cross NC receives and processes your first month's premium.
- ✓ Go to [BlueCrossNC.com/ChooseMyPCP](https://www.bluecrossnc.com/ChooseMyPCP) during the first month your plan begins to select your PCP on Blue Connect. If you have any dependents, do the same from their account(s) too.
- ✓ Once Open Enrollment ends, you may be able to buy health insurance if you qualify for a Special Enrollment Period. You may qualify if you've had certain life events, including losing health coverage, moving, getting married, having a baby or adopting a child. See the full list of Qualifying Life Events and guidelines at the federal marketplace website [healthcare.gov](https://www.healthcare.gov).¹² Documentation will be required.



CHOOSE THE NETWORK that's right for you



Start by finding the county where you live. Then look at the color key below to find which Blue Cross NC plans are available.

* Blue Advantage is offered Off Marketplace only in these counties.

Legend

	Blue Advantage		Blue Advantage, Blue Local with Atrium Health, Blue Value		Blue Advantage, Blue Home with UNC Health Alliance
	Blue Advantage, Blue Value		Blue Advantage, Blue Local with Atrium Health		Blue Advantage, Blue Home with Novant Health, Blue Local with Atrium Health

Except for Blue Advantage plans, most providers outside of NC and the U.S. will be covered at the out-of-network benefit level for covered services, except emergency care.

PLAN	DOCTOR AND HOSPITAL NETWORK
Blue Advantage	Full statewide network with the most provider choice
Blue Home [™] with Novant Health	Local network using only Novant Health and its affiliates
Blue Home [™] with UNC Health Alliance	Local network using only UNC Health and its affiliates
Blue Local [™] with Atrium Health	Local network using only Atrium Health and its affiliates
Blue Value [™]	Limited statewide network that balances access and cost

For more information

Contact your local authorized Blue Cross NC agent.

TWO PLAN OPTIONS:



Copayment plans offer a fixed copayment (or copay) for things like office visits and prescriptions. While you'll know what you're going to pay for these services with copay plans, they come at a higher monthly premium cost. These plans are ideal for someone who wants predictable costs and doesn't mind paying more in premiums.



Deductible and coinsurance plans have lower premiums than copayment plans. If you don't expect a lot of medical expenses, this may be a good choice for you. With these plans, you pay the full cost of your medical expenses until you meet your deductible. After meeting your deductible, you will pay a coinsurance percentage for health care. This means you will share your health care costs with Blue Cross NC until you reach your out-of-pocket limit. Once you reach your out-of-pocket limit, Blue Cross NC pays all covered costs.

We offer a variety of plans to meet the needs of North Carolinians.



SUBSIDIES

See if you qualify¹¹

To help make health insurance more affordable, the federal government offers financial assistance, also called subsidies, to individuals and families who qualify based on their income and household size.

To qualify for a subsidy under the Affordable Care Act (ACA), you must:

- Have income above 100% of the Federal Poverty Level (FPL)
- Not be eligible for public coverage, such as Medicaid, the Children's Health Insurance Program (CHIP), Medicare or coverage through the Armed Services
- Not have affordable* access to insurance through an employer

There are two types of subsidies available:

Advanced Premium Tax Credit (APTC)

- Income above 100% FPL, not to exceed more than 8.5% of your income
- These subsidies reduce the monthly cost of a health insurance plan for those who qualify

Cost Sharing Reductions (CSRs)

- Income between 100% and 250% FPL
- These subsidies reduce the out-of-pocket medical and pharmacy costs for those who qualify¹¹

Poverty guidelines¹³

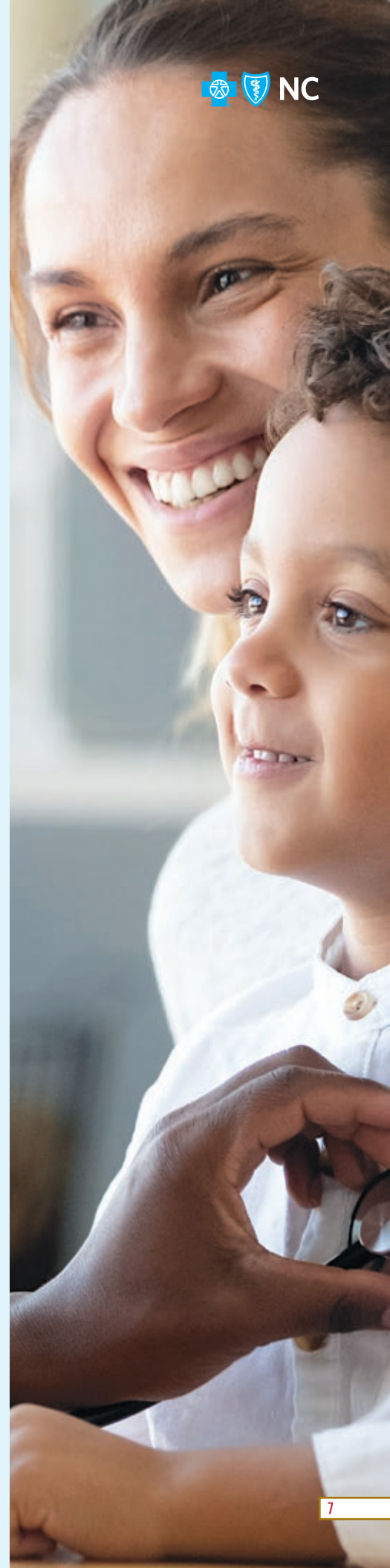
HOUSEHOLD SIZE	ANNUAL HOUSEHOLD INCOME FOR 2023				
	100% FPL	139% FPL	150% FPL	250% FPL	400% FPL
1	\$14,580	\$20,266	\$21,870	\$36,450	\$58,320
2	\$19,720	\$27,411	\$29,580	\$49,300	\$78,880
3	\$24,860	\$34,555	\$37,290	\$62,150	\$99,440
4	\$30,000	\$41,700	\$45,000	\$75,000	\$120,000
5	\$35,140	\$48,845	\$52,710	\$87,850	\$140,560
6	\$40,280	\$55,989	\$60,420	\$100,700	\$161,120
7	\$45,420	\$63,134	\$68,130	\$113,550	\$181,680
8	\$50,560	\$70,278	\$75,840	\$126,400	\$202,240

At 400% or more of the FPL, the maximum cost you'll pay for coverage is 8.5% of your income.

For more information

Contact your local authorized Blue Cross NC agent.

* Affordable is defined yearly by the federal Marketplace based on the percentage of premium an employee is responsible for





TERMS

you'll want to know

Affordable Care Act (ACA) – Law intended to address issues with our health care system.

Allowed amount – The maximum amount that Blue Cross NC determines is reasonable for covered services provided to a member. The allowed amount includes any Blue Cross NC payment to the provider, plus any deductible, coinsurance or copayment.

Benefit period – The specified period of time during which charges for covered services provided to a member must be incurred in order to be eligible for payment.

Coinsurance – When you pay a percentage of the cost of a covered service, after you've met your deductible.

Copayment – A fixed dollar amount you may pay for a covered service at the time you receive it. Copayments can vary depending on the service.

Deductible – The amount you or your family owe for certain covered services during a benefit period before your health insurance begins to pay.

Federal Poverty Level (FPL) – An index of income level (by family size) that determines eligibility for premium tax credits.

Integrated prescription drug benefits – Your prescription drug benefits are subject to the same deductible and coinsurance as other medical services.

Marketplace – The federal Marketplace is an online insurance marketplace where individuals can compare and buy qualified health insurance plans.

Member – A member is a person in a health plan; someone with insurance coverage.

Network – The hospitals, doctors, pharmacies and other providers your health insurer or plan has contracted with to provide health care services.

Open Enrollment – The time period when you can sign up for health insurance.

Out-of-pocket limit – The maximum you will pay from your own funds for covered services in a benefit period. Once met, Blue Cross NC will pay 100% of your remaining covered services. Deductibles, copayments and coinsurance for covered medical and drug benefits apply to this limit. Premiums and non-covered services, as well as out-of-network charges beyond the allowed amount, do not apply.

Outpatient – Person who gets hospital care but is not admitted to the hospital.

PCP step-down benefits – A certain number of visits are covered at a lower copay or no cost. After the visit limit has been reached, any additional visits are covered at a different copay amount. For example: on some plans, members will have three visits to a PCP at no charge, either in-office or via telehealth; after three visits, standard PCP copay applies. Members will also have three mental health and/or substance use office visits at no charge; after three visits, standard copay applies.

Premium – A premium is the monthly payment made to Blue Cross NC to keep your health benefit plan active.

Primary Care Provider (PCP) – A physician, nurse practitioner, nurse specialist or physician assistant who provides or coordinates health care for patients.

Special Enrollment Period – A time outside the yearly Open Enrollment Period when you can sign up for health insurance based on certain life events, including losing health coverage, moving, getting married, having a baby or adopting a child.

Subsidies – Available from the federal government to help low- and middle-income Americans with their health insurance costs.



Blue Cross and Blue Shield of North Carolina (Blue Cross NC) provides free aids to service people with disabilities as well as free language services for people whose primary language is not English. Please contact the Customer Service number on the back of your ID card for assistance.

Blue Cross and Blue Shield of North Carolina (Blue Cross NC) proporciona asistencia gratuita a las personas con discapacidades, así como servicios lingüísticos gratuitos para las personas cuyo idioma principal no es el inglés. Comuníquese con el número que aparece en el reverso de su tarjeta del seguro para obtener ayuda.

Limitations & Exclusions

Like most health care plans, Blue Advantage, Blue Home with Novant Health, Blue Home with UNC Health Alliance, Blue Local with Atrium Health and Blue Value have some limitations and exclusions. Once you're enrolled, a Member Guide will be made available to you. It will contain detailed information about your plan benefits, exclusions and limitations.

This is a partial list of benefits and services that are not covered:

- Services for or related to assisted reproductive technology or for reversal of sterilization
- Treatment of sexual dysfunction not related to organic disease
- Services that are investigational in nature or obsolete, including any service, drug, procedure or treatment directly related to an investigational treatment, except as specifically covered by this health benefit plan
- Side effects and complications of non-covered services, except for emergency services in the case of an emergency
- Services that are not medically necessary
- Dental services provided in a hospital, except as specifically covered by your health benefit plan
- Services or expenses that are covered by any governmental unit except as required by federal law
- Services received from an employer-sponsored dental or medical department
- Services received or hospital stays before (or after) the effective dates of coverage
- Custodial care, domiciliary care or rest cures
- Eyeglasses or contact lenses or refractive eye surgery, except as specifically covered by your health benefit plan
- Routine eye examinations for adults
- Services for cosmetic purposes, except as specifically covered by your health benefit plan
- Services for routine foot care that is palliative or cosmetic
- Travel, except as covered by your health benefit plan
- Inpatient admissions that are primarily for physical therapy, diagnostic studies or environmental change
- Services that are rendered by or on the direction of those other than doctors, hospitals, facility and professional providers
- For any condition suffered as a result of any act of war or while on active or reserve military duty
- Services for which a charge is not normally made in the absence of insurance, or services provided by an immediate relative

- Non-prescription drugs, except as specifically covered by your health benefit plan
- Prescription drugs or refills which exceed the maximum supply
- Personal hygiene, comfort and/or convenience items
- Telephone consultations not provided through telehealth benefits, charges for failure to keep a scheduled visit, charges for completion of a claim form, charges for obtaining medical records and late payment charges
- Services primarily for educational purposes
- Services not specifically listed as covered services

Dental

This is a partial list of services that are not covered by Dental Blue for Individuals PPO, Dental Blue for Individuals PPO 1500 or Dental Blue for Individuals. Refer to the member booklet for a full list of exclusions. Your dental benefits plan does not cover services, supplies, drugs or charges that are:

- Orthodontic services
- Not clinically necessary
- Investigational in nature or obsolete, including any service, drugs, procedure or treatment directly related to an investigational treatment
- Received prior to the member's effective date
- Received on or after the coverage termination date, regardless of when the treated condition occurred or whether the care is a continuation of care received prior to the termination
- For complications or side effects arising from services, procedures or treatments excluded from coverage under this dental benefits plan
- In excess of the allowed amount

Vision

This is a partial list of services that are not covered by Blue 20/20 for Individuals. Refer to the member benefit booklet for a full list of exclusions.

- Lost or broken lenses, frames, glasses or contact lenses
- Non-prescription lenses, contact lenses or sunglasses
- Two pairs of eyeglasses in place of bifocals
- Medical and/or surgical treatment of the eye, eyes or supporting structures
- Any eye or vision examination or corrective eyewear ordered by a member's employer, including safety eyewear

Your coverage will automatically renew. Your coverage may be canceled by Blue Cross NC for fraud or intentional misrepresentation of material fact on your application or for nonpayment of premiums. Coverage for dependent children ends at the end of the month they become age 26. Members will be notified 30 days in advance of any change in coverage. This brochure contains a summary of the benefits only. It is not your insurance policy. Your policy and application are your contract. If there is any difference between this brochure and the policy, the provisions of the policy will control. Visit [BlueCrossNC.com](https://www.bluecrossnc.com) for more information.

The Blue Cross NC Utilization Management (UM) program works to ensure you get the care you need in the appropriate health care setting. Find details about our UM processes and how you can appeal a denied service at [BlueCrossNC.com/UMdetails](https://www.bluecrossnc.com/UMdetails).

Blue Cross NC works to protect the privacy of your health information every day. Learn how information is protected, what information may be shared externally, rights to approve the release of information and access to medical records at [BlueCrossNC.com/PrivacyDetails](https://www.bluecrossnc.com/PrivacyDetails).

Disclaimers

Blue Cross NC has collaborated with Novant Health to bring you Blue Home with Novant Health. Blue Home with Novant Health is a health insurance plan offered by Blue Cross NC that provides access to a limited network of providers. Novant Health is an independent company that is solely responsible for the physicians and medical facilities it owns and operates. Novant Health does not offer Blue Cross or Blue Shield products or services.

Blue Cross NC has collaborated with UNC Health to bring you Blue Home with UNC Health Alliance. Blue Home with UNC Health Alliance is a health insurance plan offered by Blue Cross NC that provides access to a limited network of providers. UNC Health is an independent company that is solely responsible for the physicians and medical facilities it owns and operates. UNC Health does not offer Blue Cross or Blue Shield products or services.

Blue Cross NC has collaborated with Atrium Health to bring you Blue Local with Atrium Health. Blue Local with Atrium Health is a health insurance plan offered by Blue Cross NC that provides access to Atrium Health's limited network of providers. Atrium Health is an independent company that is solely responsible for the physicians and medical facilities it owns/operates and does not offer Blue Cross or Blue Shield products or services.

Amazon Pharmacy is an independent company that is solely responsible for the services they provide. Amazon Pharmacy does not offer Blue Cross or Blue Shield products or services. Amazon Pharmacy does not dispense controlled substances (Schedule 2 medications).

Teladoc is an independent company that is solely responsible for the telehealth services it is providing. Teladoc does not offer Blue Cross or Blue Shield products or services. Telehealth services are subject to the terms and conditions of the member's health plan, including benefits, limitations and exclusions. Telehealth services are not a substitute for emergency care. Teladoc interactive consultations are available 24 hours a day, 7 days a week. Availability depends on location at the time of consultation. Teladoc does not replace the primary care physician. Teladoc does not prescribe DEA-controlled substances, non-therapeutic drugs and certain other drugs which may be harmful because of their potential for abuse. In some states, laws require that a doctor can only prescribe medication in certain situations and subject to certain limitations. Teladoc physicians do not guarantee that a prescription will be written and reserve the right to deny care for potential misuse of services.

Footnotes

- 1 All information discussed in this brochure pertains to Blue Cross NC individual market, medical health insurance plans that are eligible for sale in 2024 and meet Affordable Care Act guidelines. The information contained does not apply to plans that are transitional, group, dental-only or other plan types. All details regarding plan benefits and design contained herein are for informational purposes only. Please see the product benefit booklet for all terms and conditions that apply.
- 2 Telehealth benefits are available on all plans either from Blue Cross NC or through the provider network. Blue Cross NC provides the telehealth program for your convenience and is not liable in any way for the goods or services received. Blue Cross NC reserves the right to discontinue or change the program at any time without prior notice. Decisions regarding your care should be made with the advice of a doctor. Depending on your plan, selected programs may not be available to you at this time. Check with Blue Cross NC Customer Service to determine your eligibility. Blue Cross NC has contracted with a third-party vendor independent from Blue Cross NC to bring you telehealth benefits.
- 3 Eligibility requirements apply. See benefit booklet for details.
- 4 Preventive care services as defined by recent federal regulations are covered at no charge to you in-network. Federal and state-mandated preventive services are available out-of-network, for which members will pay deductible and coinsurance, plus charges over the allowed amount. Visit [BlueCrossNC.com/Preventive](https://www.bluecrossnc.com/Preventive) for examples of preventive care services.
- 5 Blue Cross NC provides tobacco cessation and diabetes reversal programs for your convenience. Blue Cross NC is not liable in any way for the goods or services received through the respective vendors. Blue Cross NC reserves the right to discontinue or change the program at any time without prior notification. Decisions regarding your care should be made with the advice of your doctor. Check with Blue Cross NC Customer Service to determine your eligibility. Blue Cross NC has contracted with a third-party vendor independent from Blue Cross NC to bring you these offerings.
- 6 Blue365 offers access to savings on items that members may purchase directly from independent vendors, which are different from items that are covered under the policies with your Blue Cross NC plan. Any disputes regarding these products and services may be subject to the Blue Cross NC grievance process. The Blue Cross and Blue Shield Association (BCBSA) may receive payments from Blue365 vendors. BCBSA does not recommend, endorse, warrant or guarantee any specific Blue365 vendor or item. This program may be modified or discontinued at any time without prior notice.
- 7 Blue Cross and Blue Shield of North Carolina offers several decision support tools to aid you in making decisions around your health care experience. These tools are offered for your convenience and should be used only as reference tools. You should consult your own legal counsel, tax advisor or personal physician as applicable throughout your health care experience.
- 8 ID cards are for identification purposes only. They do not guarantee eligibility or payment of your claim.
- 9 The Dental Blue for Individuals core plan has a six-month waiting period for basic services and a 12-month waiting period for major services. There are no waiting periods on the Dental Blue for Individuals PPO preventive plan. Dental Blue for Individuals is not part of the covered health insurance benefits of any Blue Cross NC plan. Dental Blue for Individuals must be purchased separately. For costs and further details about Dental Blue for Individuals, including exclusions or limitations and terms under which the policy may be continued in force, contact Blue Cross NC or visit [BlueCrossNC.com/DentalBlue](https://www.BlueCrossNC.com/DentalBlue).
- 10 Blue 20/20 for Individuals is not part of the covered health insurance benefits of any Blue Cross NC plan. Blue 20/20 for Individuals must be purchased separately. For costs and further details about Blue 20/20 for Individuals, including exclusions or limitations and terms under which the policy may be continued in force, contact Blue Cross NC or visit [BlueCrossNC.com/Blue2020](https://www.BlueCrossNC.com/Blue2020).
- 11 Subsidies only available for plans purchased through the federal health insurance Marketplace. Eligibility for and actual amount of any subsidy is determined by the federal Marketplace. Visit [healthcare.gov](https://www.healthcare.gov) for more information.
- 12 You must have a qualifying life event to enroll in a plan on or off the Marketplace outside of the Open Enrollment Period. Documentation is required. The federal Marketplace will determine if you qualify for a Marketplace plan.
- 13 U.S. Department of Health & Human Services, <https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines> (Accessed August 2023). These 2023 Poverty guidelines are for the 48 contiguous states and The District of Columbia.





EASY STEPS to enroll



It's easy to apply for coverage!

Step 1

Contact your local authorized Blue Cross NC agent.* They will be happy to help you complete the application and select a plan.

Step 2

Your enrollment will not be complete and your policy will not become effective until your first month's premium payment has been received and processed.

Step 3

Once your enrollment is complete, your member ID card[®] will be mailed to you. After your effective date, register for a Blue Connect account to manage your plan and access the information you need to make the best health care decisions for you and your family.

Step 4

Go to BlueCrossNC.com/ChooseMyPCP in the first month your plan begins to select your PCP on Blue Connect. If you have any dependents, do the same from their account(s) too.

Open Enrollment is between Nov. 1, 2023, and Jan. 15, 2024

Open Enrollment is the only time you know for certain you can buy health insurance. **You must apply by Dec. 15 to get coverage that starts Jan. 1, 2024. Open Enrollment ends Jan. 15, 2024.** If you apply between Dec. 16, 2023, and Jan. 15, 2024, coverage will not start until Feb. 1, 2024.

Once Open Enrollment ends, you may be able to buy health insurance during a *Special Enrollment Period* if you have a qualifying life event. Documentation will be required.¹²

To be eligible for coverage, you must be a North Carolina resident and not be enrolled in Medicare.

For more information

Contact your local authorized Blue Cross NC agent.

* Importance of using Authorized Agents: Independent agents must satisfy the requirements of the Centers for Medicare and Medicaid Services and be authorized by Blue Cross and Blue Shield of North Carolina to sell, solicit and negotiate products and services. Blue Cross and Blue Shield of North Carolina only recognizes independent agents who have satisfied these requirements as a customer's Agent of Record. Blue Cross and Blue Shield of North Carolina does not provide training or support services to unauthorized independent agents.

BLUE CROSS[®], BLUE SHIELD[®], the Cross and Shield symbols, registered marks and service marks are marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield plans. All other trade names are the property of their respective owners. Blue Cross NC is an independent licensee of the Blue Cross and Blue Shield Association. NGFEP0-I, 5/23; NGFPP0-I, 5/23; ACAPOS-I, 5/23; M60, 6/23; INDVIS-EXAM, 6/22; INDVIS-EP, 6/22; U9144b, 8/23

