

# Your 2021 Healthcare Benefit Guide

---

DISTRICT OF COLUMBIA GOVERNMENT

*for employees hired after October 1, 1987*



# WELCOME


We're glad you're considering CareFirst BlueCross BlueShield (CareFirst). We know there's a lot of information to review when selecting your health plan. We hope this simplified guide provides information that makes choosing CareFirst an easy decision.

Inside, you'll find information that'll help you select the plan that's best suited to your needs. Whichever plan you choose, you'll have coverage that's recognized and accepted by more top doctors than any other network. Plus, you'll know that you have the support of a team that's working everyday to improve the healthcare experience of every member.


## Ready to explore your 2021 benefits?

Let's find the best health plan for you. There are two CareFirst plans to choose from.

**National Plan**  
**BluePreferred PPO**




Higher per visit costs




Flexibility to see any doctor, anywhere

**Regional Plan**  
**BlueChoice HMO**  
**Open Access**



Lower per visit costs



In-network coverage only



**Your Open Enrollment dates are November 9 through December 14, 2020.**

# WHAT'S INSIDE?

- 3 WELCOME
- 4 WHAT'S INSIDE?
- 5 NARROW YOUR CHOICES
- 6 CONSIDER WHAT OTHERS CHOSE
- 7 MEDICAL PLAN HIGHLIGHTS
- 8 PRESCRIPTION DRUG PLAN HIGHLIGHTS
- 9 PERKS INCLUDED WITH EVERY PLAN
- 10 PATIENT-CENTERED MEDICAL HOME
- 10 CAREFIRST SERVICE AREA
- 11 TELEMEDICINE OPTIONS
- 11 WELLNESS PROGRAM
- 12 FIND A DOCTOR
- 12 MY ACCOUNT BENEFITS
- 12 TREATMENT COST ESTIMATOR
- 13 BLUE REWARDS INCENTIVE PROGRAM
- 14 AWAY FROM HOME CARE® (REGIONAL PLAN)
- 14 BLUECARD & BLUE CROSS BLUE SHIELD GLOBAL® CORE (NATIONAL PLAN)
- 15 KNOW BEFORE YOU GO
- 15 MENTAL HEALTH SUPPORT
- 16 COST COMPARISON WORKSHEET
- 17 NEXT STEPS

## It helps to understand some key terms

**CareFirst member cost:** The maximum amount providers can charge CareFirst members for a specific service.

**Deductible:** Depending on your plan, you'll need to pay for some services on your own until you reach your deductible. Then your plan starts helping with the cost of your care.

**Out-of-pocket maximum:** The most you'll pay for covered services in a plan year. After you spend this amount on care costs, your plan will pay 100% of the CareFirst member costs for the rest of the plan year.

# NARROW YOUR CHOICES

To help narrow your choices, answer these questions:

With the exception of a college student living out of state, does your family routinely visit doctors in our region (Maryland, Washington, D.C. and Northern VA)?

☐ YES

☐ NO

Do you or any member of your family need the flexibility to see a doctor anywhere and still have a portion of your cost covered?

☐ YES

☐ NO

Do you want to choose a plan that doesn't require you to meet an individual nor family deductible?

☐ YES

☐ NO

Would you rather pay more with paycheck deductions for the flexibility to see any doctor, anywhere?

☐ YES

☐ NO

Would you rather pay less with lower paycheck deductions and only visit doctors in our region?

☐ YES

☐ NO

☐ **National Plan**

If most of the answers you checked are orange, the National plan may be more your style. This is a plan for people who:

- Don't mind having a medical plan with a deductible
- Want the ability to see doctors outside the network and have a portion of their cost covered
- May need out-of-network coverage

☐ **Regional Plan**

If most of the answers you checked are blue, the Regional plan may be the best fit. This plan is for people who:

- Want a medical plan without a deductible
- Plan to receive care inside of the Maryland, District of Columbia and Northern Virginia area (see page 10 for service area map)
- Don't need out-of-network coverage

# CONSIDER WHAT OTHERS CHOSE

---

“My wife and I are hoping to get pregnant this year so we enrolled in the Regional plan which offers lower out-of-pocket costs for maternity care.”  
—Miguel (34), married



“I spend a few months every year in Florida and I want to make sure I am covered wherever I am, even out-of-network, so I chose the National plan.”  
—Renata (56), single

“I live in D.C. and I don’t have a car. All of my doctors are just a Metro ride away so the Regional plan is perfect for me.”  
—Jim (29), single



“I picked the National plan because I am living with a chronic condition and need the ability to see any specialist, even if they are out-of-network.”  
—Matt (41), single

“I feel like every other week my kids need something new for school. I chose the Regional plan because my family has the coverage we need and I pay less per paycheck, which lets me save a little money.”  
—Rose (34), married mom of three



*The personas and quotes in this decision guide were created by CareFirst in order to provide an example of the benefits described and are not real members.*

# MEDICAL PLAN HIGHLIGHTS

Let’s look at some of the in-network costs for common services with these plans.

	National Plan	Regional Plan
Costs to consider		
Employee Monthly Contribution from Paycheck	Self Only: \$211.90 Self + One: \$404.72 Family: \$620.86	Self Only: \$187.64 Self + One: \$369.65 Family: \$542.28
In-network Deductible You'll pay the full CareFirst member cost for some services until you reach your deductible	\$750 individual/\$1,500 family	None
Out-of-pocket Maximum The most you'll pay for covered in-network services in a plan year	Medical: \$1,500 ind./ \$3,000 family Rx: \$5,100 ind./\$10,200 family	Combined Medical & Rx: \$3,500 ind./ \$9,400 family
Plan Includes Out-of-network Coverage	Yes	No
Staying healthy		
Annual Physical Exam (including Screenings and Immunizations)	\$0 per visit	\$0 per visit
Well child care (including Immunizations)		
Feeling under the weather?		
Primary Care Doctor	\$15 per visit	\$10 per visit
Specialist (e.g. Dermatologist)		\$20 per visit
Mental Health Professional—Office		\$10 per visit
Urgent Care	\$25 per visit	\$20 per visit
Emergency Room	\$100 per visit (this charge waived if admitted)	\$100 per visit (this charge waived if admitted)
Following doctor's orders?		
Allergy Shots	\$15 per visit	\$10 PCP/\$20 Specialist per visit
Imaging (MRA/MRS, MRI, PET & CT Scans) (non-hospital facility)	After deductible is met, 15% of the CareFirst member cost	\$0 per visit
Labs (non-hospital facility)		
X-rays (non-hospital facility)		
Physical, Speech and/or Occupational Therapy		\$10 per visit
Chiropractic		\$50 per visit
Outpatient Surgery (surgical center)		
Inpatient Surgery (including maternity)		\$100 per admission
Assisted Reproductive Technology	After deductible is met, 50% of the CareFirst member cost	50% of the CareFirst member cost
Durable Medical Equipment	After deductible is met, 15% of the CareFirst member cost	

Costs shown are for care received in-network and, except for emergency room, at non-hospital locations. See your Summary of Benefits for limitations and plan details.

# PRESCRIPTION DRUG PLAN HIGHLIGHTS

Here are your costs for prescription drugs from a participating pharmacy.

	Prescription Drug Plan
Prescription Drug Formulary	Formulary 3
Prescription Deductible	\$0
Up to 34-day supply	
Generic Drugs (Tier 1)	\$20
Preferred Brand Drugs (Tier 2)	\$40
Non-preferred Brand Drugs (Tier 3)	\$55
Preferred Specialty Drugs (Tier 4)*	\$40
Non-preferred Specialty Drugs (Tier 5)*	\$55
90-day supply	
Generic Drugs (Tier 1)	\$20
Preferred Brand Drugs (Tier 2)	\$40
Non-preferred Brand Drugs (Tier 3)	\$55
Preferred Specialty Drugs (Tier 4)*	\$40
Non-preferred Specialty Drugs (Tier 5)*	\$55

\* Specialty drugs only available when purchased by Mail Order.  
Visit [carefirst.com/rx](https://carefirst.com/rx) for the most up-to-date drug lists.

## Restricted Generics

Generic drugs will be used for all your prescriptions. If you prefer the brand, you'll pay the non-preferred brand copay in addition to the difference between the generic and the brand drug. If a generic version is not available, or DAW (dispense as written) is noted by your doctor, you will only pay the copay.

## Specialty Pharmacy Coordination Program

Members taking high-cost drugs for complex health conditions receive one-on-one care support.

## CVS Caremark Mail Service

Sign up for a 90-day supply by mail and you'll only pay the cost of a 34-day supply. Save money and time by refilling prescriptions with CVS Caremark Mail Service Pharmacy.

# PERKS INCLUDED WITH EVERY PLAN



Achieve your wellness goals with the help of programs for weight loss, tobacco cessation and more



Enjoy exclusive discounts through our Blue365 Program on things like fitness gear, gym memberships, meal delivery services, hotels and travel



Earn up to \$175 by completing healthy activities through your wellness and incentive program



Pay nothing for annual in-network preventive care, 24-Hour Nurse Advice Line, routine vision and dental care for children under age 18

"I take advantage of the hotel discounts through Blue365."



"I lost 30 lbs. with the help of my coach and the weight loss program."



"I like knowing I can call the 24-hour nurse line at any time."



# PATIENT-CENTERED MEDICAL HOME

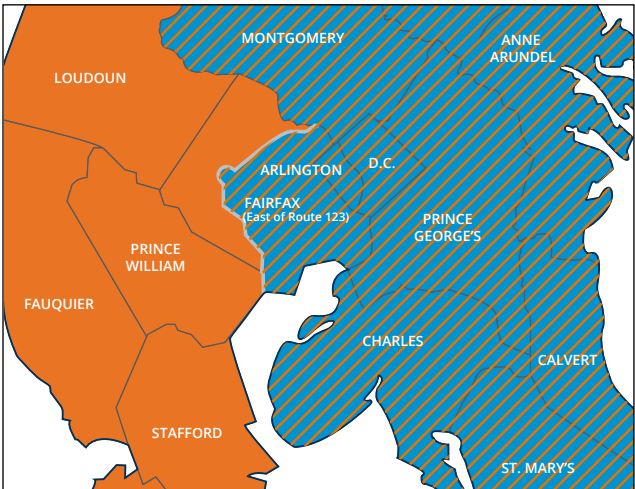
Our Patient-Centered Medical Home (PCMH) program focuses on the relationship between you and your primary care provider (PCP)—whether a physician or nurse practitioner. It's designed to provide your PCP with a more complete view of your health and of the care you're receiving from other providers.

## With the CareFirst PCMH Program, your PCP will:

- Coordinate your care with all your healthcare providers, including specialists, labs, pharmacies and mental health facilities
- Proactively manage how your care for one condition may impact other health needs or healthcare services that you have
- Help you get access to the most appropriate and affordable care based on your needs
- Review your medications and possible drug interactions with you
- Review your health records for duplicate tests or services already ordered or performed by another provider

*The PCMH Program is available only within the CareFirst service area.*

# CAREFIRST SERVICE AREA



## The CareFirst service area includes:

Maryland, District of Columbia, the cities of Alexandria and Fairfax, the town of Vienna, Arlington County, the areas of Fairfax and Prince William Counties in Virginia lying east of Route 123. Members receiving care within the service area can choose either the Regional or National plan.

## This area is outside the CareFirst service area and includes:

The areas of Fairfax and Prince William Counties in Virginia lying west of Route 123. Members receiving care outside of the service area should choose the National plan.

# TELEMEDICINE OPTIONS

Advances in technology have made it easier and more convenient to get care wherever and whenever you need it.

## CareFirst Video Visit

Video Visit securely connects you with a doctor, day or night, through your smartphone, tablet or computer. You can also schedule visits for other needs such as therapy or counseling, nutrition or breastfeeding. Visit [carefirstvideovisit.com](https://www.carefirstvideovisit.com) to learn more.



## 24-Hour Nurse Advice Line

Registered nurses are available through our 24-Hour Nurse Advice Line. Call **800-535-9700** to talk to a nurse about your symptoms and the most appropriate steps to take.

# WELLNESS PROGRAM

Your CareFirst wellness program—brought to you in partnership with Sharecare, Inc.—can help you be your healthiest. Offering a wide array of engaging, easy-to-use tools and personalized content, plus specialized programs for extra support, the program includes:

- **RealAge®:** Find out if your healthy habits are truly making an impact by taking the RealAge® health assessment.
- **Health coaching:** Trained professionals provide one-on-one support to help you reach your wellness goals.
- **Weight management program:** Improve your overall health, reach a healthier weight and reduce your risk for pre-diabetes and associated chronic diseases.
- **Tobacco cessation program:** Our program's expert guidance, support and online tools make quitting easier than you might think.
- **Financial well-being program:** Whether you want to stop living paycheck to paycheck, get out of debt, or send a child to college, this program can help.

## FIND A DOCTOR

CareFirst has one of the world's largest networks of participating providers—over one million in all. Whether you're looking for a primary care physician, a specialist or a care facility, we can help you find one that's right for you.



Try it for yourself. Visit **[carefirst.com/doctor](https://carefirst.com/doctor)**. You'll be able to search by name, location, specialty and a host of other options. You can even find participating doctors and facilities outside of the U.S.

## MY ACCOUNT BENEFITS

Your *My Account* page makes managing your CareFirst plan simple and easy. Everything you need to take the best care of yourself is right here. At *My Account*, you can:

- Check your plan's benefits and deductible
- View, order and print your member ID cards
- Review your claims status and Explanation of Benefits (EOB)
- Find in-network doctors, labs and hospitals
- Access your wellness program and other tools
- Send a secure message for member support

## TREATMENT COST ESTIMATOR

Our Treatment Cost estimator shows you what you'll pay for procedures, doctor's office visits, lab tests and surgery beforehand, so you can plan ahead and avoid surprises.



- Receive personalized estimates based on your plan
- Compare costs from different doctors and facilities

# BLUE REWARDS INCENTIVE PROGRAM

As part of your wellness program, Blue Rewards adds an incentive to your efforts to better your health. By completing a few healthy activities you can earn—and keep earning—as you continue to put your own care first. Each activity comes with its own reward.



**Earn \$50**

Take the RealAge® test, a brief questionnaire to determine your physical, rather than chronological age



**Earn \$100**

Select a primary care physician (PCP) and complete a health screening



**Earn \$25**

Retake the RealAge test after 6 months

Once you've completed one or more of the activities, you'll receive a CareFirst Blue Rewards Visa® Incentive Card with your rewards on it. This money can be used toward your annual deductible, out-of-pocket costs or other eligible expenses under your plan. Keep the card for as long as you're a member and other future incentives will be added to your balance as you earn them.

If you're a current CareFirst member, you can view your Blue Rewards incentives by logging into My Account at [carefirst.com/myaccount](https://carefirst.com/myaccount).



*"I took the RealAge test and learned how my everyday choices were affecting my overall health. The trackers and challenges keep me motivated to be more active."*

## AWAY FROM HOME CARE® (REGIONAL PLAN)

When you're away from home for 90 consecutive days or more, we've got you covered. Whether you're out-of-town on extended business, traveling or going to school out-of-state, you have access to routine and urgent care with our Away From Home Care program.

- You can see any affiliated Blue Cross Blue Shield HMO (Host HMO) provider when you are outside the CareFirst service area.
- You'll be considered a member of the Host HMO and receive care under their plan. Your cost may be different than when you're in the CareFirst service area.
- Once you're enrolled in the program and receive care, you don't have to complete claim forms, so there's no paperwork. And you're only responsible for out-of-pocket costs such as copays, deductibles, coinsurance and the cost of non-covered services.

## BLUECARD & BLUE CROSS BLUE SHIELD GLOBAL® CORE (NATIONAL PLAN)

With your Blue Cross and Blue Shield member ID card, you have access to doctors and hospitals almost anywhere. BlueCard gives you the peace of mind that you'll always have the care you need when you're away from home. And with Blue Cross Blue Shield Global® Core (BCBS Global® Core), you have access to care in more than 190 countries.

### BlueCard

- You'll have access to local Blue Cross Blue Shield Plan doctors and hospitals when you're outside the CareFirst service area.
- You'll be considered a member of the local BCBS plan when you receive care. Your cost may be different than when you're in the CareFirst service area.
- For care received in-network, you don't have to complete claim forms, so there's no paperwork.

### BCBS Global® Core

- In most cases, you shouldn't have to pay up front for inpatient care at hospitals in the BCBS Global Core Network.
- At hospitals outside the BCBS Global Core Network, you pay the doctor or hospital for inpatient care, outpatient hospital care and other medical services. You then complete an international claim form for reimbursement.

# KNOW BEFORE YOU GO

It's helpful to know where you can go for care before you need it. Becoming familiar with the information below can help you save time and money.



### Seeking advice: 24-Hour Nurse Advice Line

- General questions about health issues or where to go for care
- Registered nurses are available 24/7 by phone



### Need care soon: Primary Care Provider

- Diagnosis & treatment of illness, chronic conditions, check-ups
- Night/weekend hours & some may have 24-hour phone lines



### Want care quickly: CareFirst Video Visit

- Treatment for minor illnesses and injuries as well as therapy, psychiatry, diet and nutrition and breastfeeding support
- Board-certified doctors available by smartphone, tablet or computer



### Need care now: Urgent Care Center

- Non-life-threatening illness or injury requiring immediate care
- Open 7 days a week



### Emergency: 911 or Nearest ER

- Life-threatening illness or injury
- Open 24/7

# MENTAL HEALTH SUPPORT

It's common to face some kind of mental health challenge during your life. Our support team is made up of specially trained service representatives, registered nurses and licensed behavioral health clinicians, ready to:

- Help you find the right mental health provider(s) and schedule appointments
- Connect you with a care coordinator who will work with your doctor to create a tailored action plan
- Find support groups and resources to help you stay on track

When mental health difficulties arise for you or a loved one, remember you're not alone. Help is available 24/7. If you are in crisis, call **800-245-7013**.



CareFirst members have access to specialized services and programs for depression, anxiety, drug or alcohol dependence, eating disorders and other mental health conditions.

# COST COMPARISON WORKSHEET

Use this worksheet to compare plans or to compare this year’s plan to your old plan.

Annual costs to consider	National Plan	Regional Plan
For each row, fill in the amounts from the benefit summary included in this guide, along with your company’s health insurance paycheck deduction for each plan.		
Annual paycheck deduction	\$_____ per month x 12 months = \$_____	\$_____ per month x 12 months = \$_____
Annual in-network deductible	\$_____ Individual \$_____ Family	\$_____ Individual \$_____ Family
Are any services covered before the deductible is met?	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Annual out-of-pocket maximum	\$_____ Individual \$_____ Family	\$_____ Individual \$_____ Family

Costs when using your plan	National Plan	Regional Plan
For each row, estimate how many visits you and your family generally expect to have each year along with the amounts for each service included in this guide.		
About how many times did you visit your primary care doctor (outside of annual wellness visits/physical) in the past year?	\$_____ per visit x _____ visits per year = \$_____	\$_____ per visit x _____ visits per year = \$_____
About how many times did you visit specialists in the past year?	\$_____ per visit x _____ visits per year = \$_____	\$_____ per visit x _____ visits per year = \$_____
In the past year, how many times did you go to urgent care?	\$_____ per visit x _____ visits per year = \$_____	\$_____ per visit x _____ visits per year = \$_____
In the past year, how many times did you go to the emergency room?	\$_____ per visit x _____ visits per year = \$_____	\$_____ per visit x _____ visits per year = \$_____
Is there anything coming up in the next 12-18 months that you didn't have to plan for last year?  If Yes, use this line to estimate the cost for that procedure	<input type="radio"/> Yes <input type="radio"/> No  \$_____ per visit x _____ visits per year = \$_____	<input type="radio"/> Yes <input type="radio"/> No  \$_____ per visit x _____ visits per year = \$_____
TOTALS	\$_____	\$_____

NEXT STEPS

I'm choosing the  
National Plan  
BluePreferred PPO

I'm choosing the  
Regional Plan  
BlueChoice HMO Open Access

Ready to enroll?

- Visit <https://ess.dc.gov/psp/essprod/?cmd=login&languageCd=ENG&>
- Complete the enrollment process
- Look for your member ID cards in the mail and be sure to download the CareFirst mobile app to access your plan on-the-go

Not ready to choose your plan just yet?

- If you need more detailed plan information, visit <https://dchr.dc.gov/>
- Set a reminder on your phone so you don't miss the deadline!

DECEMBER

14

Remember—  
you have until  
December 14, 2020  
to make or change  
your plan selection.



We're here to help! If you have additional questions, please call 833-556-3163 Monday–Friday 8 a.m. to 9 p.m.

Page 10 of 10





CONNECT WITH US:



**The examples provided in this booklet are meant to help you evaluate the benefits we offer. They are not meant to convey the exact terms of any one particular plan and do not create rights not given through the benefit plan. The details of your plan may vary.**

**The policies may have exclusions, limitations or terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, call CareFirst.**

**Notice of Nondiscrimination and Availability of Language Assistance Services**

CareFirst BlueCross BlueShield, CareFirst BlueChoice, Inc. and all of their corporate affiliates comply with applicable federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 855-258-6518.

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 855-258-6518。

This wellness program is administered by Sharecare, Inc., an independent company that provides health improvement management services to CareFirst members. Sharecare, Inc. does not provide CareFirst BlueCross BlueShield products or services and is solely responsible for the health improvement management services it provides.

CareFirst BlueCross BlueShield is the shared business name of CareFirst of Maryland, Inc. and Group Hospitalization and Medical Services, Inc. CareFirst BlueCross BlueShield Medicare Advantage is the business name of CareFirst Advantage, Inc. CareFirst BlueCross BlueShield Community Health Plan District of Columbia is the business name of Trusted Health Plan (District of Columbia), Inc. In the District of Columbia and Maryland, CareFirst MedPlus is the business name of First Care, Inc. In Virginia, CareFirst MedPlus is the business name of First Care, Inc. of Maryland (used in VA by: First Care, Inc.). CareFirst of Maryland, Inc., Group Hospitalization and Medical Services, Inc., CareFirst Advantage, Inc., Trusted Health Plan (District of Columbia), Inc., CareFirst BlueChoice, Inc., First Care, Inc., and The Dental Network, Inc. are independent licensees of the Blue Cross and Blue Shield Association. BLUE CROSS®, BLUE SHIELD® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.