Blue Advantage HMO SM

Whether choosing a new Primary Care Provider (PCP) or locating a specialist or other health care professional, this directory can help. It lists the doctors, specialists, hospitals and other professionals who participate in the **Blue Advantage HMO** network. Like other Blue Cross and Blue Shield of Texas (BCBSTX) network products, support and guidance tools are available to help our members make informed decisions and maximize their benefits.

You can also use “Find a Doctor or Hospital”, available at www.bcbstx.com, for the most up-to-date list of **Blue Advantage HMO** independently contracted network doctors, hospitals and other health care providers.

Just visit www.bcbstx.com and follow these steps:

- Select “Find a Doctor or Hospital”.
- Under the Guest search section, refer to the Step-by-Step PDF.

or

- Use Member Login, once registered — all you need are your group and identification numbers, found on your BCBSTX member ID card.
    - Select “Doctors & Hospitals”
    - You can browse by category or search by Name or Specialty

If you need help finding a network provider or have questions about your benefits, call the toll-free number on the back of your ID card.

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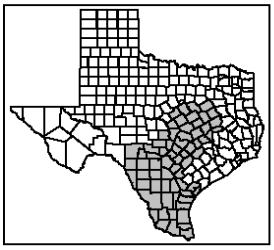
*Please Note: The following specialties are located in the Specialists section: Audiologists, Occupational Therapy, Physical Therapy and Speech/Language Pathology.

Service Area Map

The **Blue Advantage HMO** service area includes all 254 counties in Texas; therefore, you have access to providers in all counties.

This directory contains **Blue Advantage HMO** providers located in the **Central** territory, as shown in the map below. For **Blue Advantage HMO** providers in other territories, check “Find a Doctor or Hospital” at www.bcbstx.com or call Customer Service if you are an individual member call **1- 888-697-0683**, (Monday through Friday from 8a.m.- 8 p.m. CST) or if you receive your health care coverage through your employer, call **1-877-299-2377** (Monday through Friday from 8 a.m.- 8 p.m. CST).



Member Notice of Rights

You have the right to:

- Select and/or change your primary care physician/provider (PCP), and know the qualifications, titles and responsibilities of the professionals responsible for your health care.
- Be provided with information about your HMO; health care benefits; copayments, copayment limitations and/or other charges; service access; changes and/or termination in benefits and participating providers; exclusions and limitations.
- Receive prompt and appropriate treatment for physical or emotional disorders and participate with your providers in decisions regarding your care.
- Express opinions, concerns, complaints and appeals regarding any aspect of the HMO program in a constructive manner.
- Be treated with dignity, compassion and respect for your privacy.
- Receive timely resolution of complaints or appeals through Customer Service and the HMO complaint procedure.
- Have all medical and other information held confidential unless disclosure is required by law or requested in writing by you.
- Have access to review by an Independent Review Organization.
- Make recommendations regarding your Blue Essentials and Blue Advantage HMO rights and responsibilities policies.
- Right to refuse treatment and be informed of the medical consequences as a result of this decision.
- Have a candid discussion of appropriate or medically necessary treatment options for your condition, regardless of cost or benefit coverage.

Notice of Rights Out-Of-Network Physicians and Providers

- A health maintenance organization (HMO) plan provides no benefits for services you receive from out-of-network physicians or providers, with specific exceptions as described in your evidence of coverage and below.
- You have the right to an adequate network of in-network physicians and providers (known as network physicians and providers).
- If you believe that the network is inadequate, you may file a complaint with the Texas Department of Insurance at: www.tdi.texas.gov/consumer/complfrm.html.
- If your HMO approves a referral for out-of-network services because no network physician or provider is available, or if you have received out-of-network emergency care, the HMO must, in most cases, resolve the out-of-network physician's or provider's bill so that you only have to pay any applicable in-network copayment, coinsurance, and deductible amounts.
- You may obtain a current directory of network physicians and providers at the following website: www.bcbstx.com, or by calling 1- 888-697-0683 if you are an individual member or 1-877-299-2377 if you receive your health care coverage through your employer, for assistance in finding available network providers. If you relied on materially inaccurate directory information, you may be entitled to have a claim by an out-of- network physician or provider paid as if it were from a network physician or provider, if you present a copy of the inaccurate directory information to the HMO, dated not more than 30 days before you received the service.

Using This Directory to Select a PCP

Primary Care Providers

Primary Care Provider (PCP) means the participating Physician, Physician Assistant (PA) or Advanced Practice Registered Nurse (APN) who primarily provides a member's health care. PCP specialties include family practice, general practice, internal medicine, obstetrics & gynecology and pediatrics.

As a **Blue Advantage HMO** member, your first step is to select a PCP who is contracted with the **Blue Advantage HMO** network. Your PCP is important because he or she provides or coordinates your health care. The PCP oversees your' routine care and refers you to a specialist if necessary.

Members must live or work in the network coverage area to enroll in this plan.

Blue Advantage HMO offers members access to a select set of hospitals and doctors in the county coverage area above.

This directory can be used to select a PCP by following these steps:

- Use the "Primary Care Providers" section to locate PCPs by city and specialty or use the index to search alphabetically by name. You may choose a different PCP for each covered family member, or you may select the same one for the entire family.
  Important note: In addition to selecting a PCP, a woman may also select an obstetrician or gynecologist to provide both gynecological and obstetrical care. However, a woman may choose to receive gynecology and/or obstetrical care from their PCP, provided the PCP is qualified to provide gynecological and/or obstetrical services. Additionally, women can obtain services without PCP referral from a network obstetrician or gynecologist for health care services within the scope of the professional specialty practice of a properly credentialed obstetrician or gynecologist.
- Call the PCP's office to confirm that they are accepting new patients.
- Make note of the PCP number that's shown in the doctor's listing—you'll need it when you enroll or change your PCP.
- To select a PCP for the first time, just follow your enrollment instructions. To change your PCP, log into your Blue Access for Members℠ (BAM℠) account, go to my coverage and update the PCP box or call Customer Service at 1-877-299-2377 (Monday through Friday from 8 a.m.- 8 p.m. CST). Your change will be effective on the first day of the month after your request is received.

or

- Visit www.bcbstx.com, select "Find a Doctor or Hospital". Use Member Login, once registered — all you need are your group and identification numbers, found on your BCBSTX member IDcard.
  - Select "Doctors & Hospitals"
  - You can browse by category or search by Name or Specialty.

If you need help finding a network provider or have questions about benefits, call the toll-free number on the back of your ID card.

IF YOU'RE CONSIDERING BLUE ADVANTAGE HMO

If you're thinking about enrolling in **Blue Advantage HMO**, read the next few pages to discover the ease and convenience of the plan. Then, review the provider listings to locate network doctors and other providers in your area.

MORE INFORMATION IS JUST A CLICK AWAY

The [name, address, telephone number, specialty, website and network status] information contained in this provider directory was accurate on the date it was published. Providers may leave or join networks or their information may change. Network providers may not be listed in this version of the directory if the provider has not verified the accuracy of their information within 90 days of the time of printing. Please go to our website at www.bcbstx.com to obtain the most current provider directory information. BCBSTX members can also log into Blue Access for Members or call the number on the back of your IDcard. If you are not a member, you can call Customer Services at **1-877-299-2377**. Always check with your provider to confirm location and network status prior to obtaining services. To report inaccurate information, send it to **Provider_Directory_Changes_TX@bcbstx.com**or call 1-877-299-2377 for assistance.

Providers Joining the Network or Location

The dates located under the provider's information indicate that the provider will be joining the network and/or location soon. Services provided may not be covered until the provider is active in the network.

Providers Leaving the Network or Location

The dates located under the provider's information indicate that the provider will be leaving the network and/or location soon. Services provided after departure will be out-of-network

For the most up-to-date information, check Provider Finder® at **www.bcbstx.com**

- Find the doctor's, hospital's or other health care provider's address and phone number
- Send the information directly to your phone.
- See if the provider is accepting new patients
- Review the profile:
    - Highlights
    - Specialties and Expertise
    - Ratings and Reviews
    - Affiliations
    - Awards and Recognitions
    - Practice limitations, languages spoken, gender

What You Should Know About Provider Networks

Specialty Care

A PCP referral is required to receive covered care from hospitals, specialists and other providers listed in this directory. However, there are a few instances where self-referral can be made to specialists or other providers:

- Emergencies (see “What To Do In An Emergency” section below)
- Obstetrical and gynecological services (The OB/GYN must be in the same Provider Network as the PCP.)
- The patient, PCP or behavioral health professional must prior authorize all mental health/chemical dependency services prior to delivery of care. To obtain prior authorization, check benefits, eligibility, claims status/problems or verification of benefits call **Magellan** at 1-800-729-2422.
- Annual diabetic retinal eye exams

Getting Health Care When You Need It

Before you get sick, it’s a good idea to make an appointment with your PCP to establish a doctor- patient relationship. By doing so, your PCP can get to know you and your medical history.

When care is needed, just follow these steps:

1. Call your PCP’s office to make an appointment.
2. If it’s the first visit, get to the appointment early to complete any required paperwork
3. Pay the applicable copayment at the time of your visit. This will be the only out-of-pocket expense for the visit. However, if a bill is received for any covered services from any physician or provider, please contact Customer Service at 1-877-299-2377 (Monday through Friday from 8 a.m.- 8 p.m. CST).
4. If your PCP determines that specialty care is necessary, he or she will coordinate the referral process.

Hospital and Facility-Based Physicians

Hospital admissions may include services rendered by an anesthesiologist, pathologist, radiologist, emergency medicine physician or neonatologist. BCBSTX makes every effort to contract with facility-based physicians that routinely provide services at **Blue Advantage HMO** network facilities.

The information in this directory can help determine which facility has contracted facility-based physicians, which can help minimize out-of-pocket costs. These costs will be higher if care is received from anesthesiologists, pathologists, radiologists, emergency medicine physicians and/or neonatologists who do not participate in the **Blue Advantage HMO** network.

Although Health Care Services may be or have been provided to you at a Health Care Facility that is in network with your health benefit plan; other professional services may be or have been provided at or through the facility by physicians and other health care practitioners who are not contracted with that network. The non-network facility-based physician or other health care practitioner may balance bill you for amounts not paid by the health benefit plan; if you receive a balance bill, please contact BCBSTX at the number on the back of the ID card.

To confirm the hospital you may choose includes anesthesiologists, pathologists, radiologists, emergency medicine physicians and neonatologists that participate in the **Blue Advantage HMO** network, refer to the Hospital-Based Physicians section of this directory.

In addition, your physician or provider may refer to laboratory or diagnostic imaging service providers that are not in-network to laboratory or diagnostic imaging service providers that are not in-network. The non-network laboratory or diagnostic imaging service may balance bill you for amounts not paid by the health benefit plan; if you receive a balance bill, please contact BCBSTX at the number on the back of the ID card.

What to do in an Emergency

If an emergency occurs, call 911 or go to the nearest emergency care facility. Emergency care means health care services provided in a hospital emergency facility (emergency room), freestanding emergency medical care facility or comparable emergency facility to evaluate and stabilize medical conditions of a recent onset and severity, including, but not limited to, severe pain that would lead a prudent layperson, possessing an average knowledge of medicine and health, to believe that the person's condition, sickness, or injury is of such a nature that failure to get immediate care could result in:

- Placing the patient's health in serious jeopardy
- Serious impairment of bodily functions
- Serious dysfunction of any bodily organ or part
- Serious disfigurement
- In the case of a pregnant woman, serious jeopardy to the health of the fetus

Call your PCP within 48 hours of the emergency treatment or when admitted to the hospital from the emergency room. For behavioral health emergency care, call **Magellan** at 1-800-729-2422.

Please note: Emergency room services that are part of the initial medical screening exam or that are necessary to stabilize the emergency condition are covered benefits. Additional services provided after the emergency condition has been stabilized that are not preapproved by your PCP or authorized by **Blue Advantage HMO** may not be covered benefits.

Laboratory Services

Statewide In-Network Clinical Labs for **Blue Advantage HMO** members include:

- Clinical Pathology Laboratory (CPL) - contact CPL at **1-800-595-1275** orvisit CPL's website
- Laboratory Corporation of America® (LabCorp) - contact LabCorp at **1-888-522-2677** or visit LabCorp's website
- Quest Diagnostics, Inc.® - contact Quest at **1-888-277-8772** or visit Quest's website

Refer to Provider Finder for other **Blue Advantage HMO** in-network lab providers.

Blue Advantage HMO members and participating providers are required to use participating lab facilities.

Essential Community Providers

There are various types of essential community providers (ECPs) that participate in the **Blue Advantage HMO** Network. Many ECPs are providers that have received government support to provide health care to many local communities. The ECPs identified in this directory include federally qualified health centers, specific types of hospitals, family planning providers, and various other ECP types.

Vision Care

Blue Advantage HMO members will receive eye screenings which may be performed in the PCP's office. For health plans requiring a referral, eye screenings, medically related eye care provided by an ophthalmologist or by a therapeutic optometrist, must be referred by your PCP. You can call **EyeMed Vision Care** at 1-844-684-2255 for assistance in selecting a participating provider or go to the BCBSTX website at www.bcbstx.com and select “Find a Doctor or Hospital”.

Pediatric Vision Care

Pediatric Vision Care may be part of your **Blue Advantage HMO** health care plan for children under age 19. You can call **EyeMed Vision Care** at **1-844-684-2255** for assistance in selecting a participating provider. If Pediatric Vision Care is part of your plan, children under age 19 will receive their annual eye exam and eye wear (exams, lenses and contacts) from EyeMed Vision Care. A referral from your PCP is required for routine vision care.

For medically related eye care provided by an ophthalmologist or by a therapeutic optometrist, you must be referred by your PCP.

Pharmacy

If the **Blue Advantage HMO** Prescription Drug Program was selected as an additional benefit of your health care plan, always have covered prescriptions filled by one of the participating pharmacies. A participating pharmacy can be located by calling the number on the back of the Member ID card or go to the BCBSTX website at www.bcbstx.com and select “Find a Doctor or Hospital”. In most instances, prescriptions must be written by contracted providers to be covered.

INDEPENDENT CONTRACTORS

The contracted health care practitioners listed in this directory are independent contractors. They are not employees or agents of BCBSTX. BCBSTX enters into contracts under which these providers agree to provide certain covered health care services to members. In making decisions about member care and in providing or recommending health care services to members, these providers use their independent professional judgment, for which they are solely responsible.

Helping You Stay Healthy and Control Costs

Blue Advantage HMO encourages preventive care that can help identify health problems at an early stage. Preventive care benefits include coverage for services such as physical exams, well-woman exams and immunizations. If you aren’t sure of the preventive services that are right for you, talk to your PCP.

Blue Advantage HMO also offers a variety of resources to help members stay healthy and use their benefits wisely, such as Web and mobile tools, wellness programs, a social media community and Blue365, a program that offers discounts on fitness gear, eyewear, hearing aids, dental products and other health and wellness products and services.

And there’s more...

Quality Improvement Program:

Your **Blue Advantage HMO** plan also offers a variety of programs and services that help members with chronic illness, preventive and women’s health and behavioral health. Program initiatives include satisfaction surveys and birthday cards mailed to members in targeted age ranges as a reminder to obtain preventive services such as immunizations and mammography. Your **Blue Advantage HMO** monitors the types of services received by members and evaluates member satisfaction with these services.

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How Blue Cross and Blue Shield of Texas (BCBSTX) Chooses Providers for Its Networks

How BCBSTX Chooses Providers

We check the locations of all health providers in all of our networks to make sure our members have access to in-network providers. *It is very important to verify benefits of each network*. This includes the networks for the following plans:

- Blue Choice PPO℠
- Blue Advantage HMO℠
- Blue Advantage Plus℠ HMO
- Blue Cross Medicare Advantage PPO℠
- Blue Cross Medicare Advantage HMO℠
- Blue Essentials℠
- Blue High Performance Network℠ (BlueHPN℠)
- HealthSelect℠ of Texas
- Blue Premier℠
- Blue Premier Access℠
- MyBlue Health℠

BCBSTX wants to ensure providers are available and accessible to members. We may use member experience, quality or cost-related measures to choose providers for some of our networks.

Medical Providers

In-network providers offer service for the following specialties:

Allergy /Immunology	Internal Medicine	Orthopedic Surgery
Cardiology	Infectious Disease	ENT/Otolaryngology
Cardiothoracic Surgery	Nephrology	Pediatrics
Chiropractor	Neurology	Physiatry /Rehabilitative
Dermatology	Neurosurgery	Plastic Surgery
Endocrinology	Obstetrics & Gynecology	Podiatry
Family Practice	Oncology	Pulmonary
Gastroenterology	Oncology/Radiation	Rheumatology
General Practice	Ophthalmology	Urology
General Surgery	Orthopedics	Vascular Surgery

*This is not a complete list of provider specialties.

Behavioral Health Providers

These in-network providers offer service for the following:

- Psychiatry
- Clinical Psychology
- Licensed Clinical Social Work
- Licensed Counseling, including Clinical Counseling and Marriage and Family Therapy

*This is not a complete list of provider specialties.

Your BCBSTX plan may use a tiered network. BCBSTX may place providers into tiers such as:

- Tier 1: Members get the highest level of benefits and pay the lowest out-of-pocket costs
- Tier 2: Members get a reduced level of benefits and pay higher out-of-pocket costs

How BCBSTX Chooses Hospitals

We check the locations of all hospitals in all our networks to make sure our members have access to in-network hospitals. *It is very important to verify benefits of each network*. This includes the networks for the following plans:

- Blue Choice PPO
- Blue Advantage HMO
- Blue Advantage Plus HMO
- Blue Cross Medicare Advantage PPO
- Blue Cross Medicare Advantage HMO
- Blue Essentials
- BlueHPN
- HealthSelect of Texas
- Blue Premier
- Blue Premier Access
- MyBlue Health

BCBSTX wants to ensure hospitals are available and accessible to members. We may use member experience, quality or cost-related measures to choose hospitals for some of our networks.