

Fill your prescriptions without emptying your wallet.

**PAY ONLY \$3 FOR MOST
GENERIC MEDICATIONS.**



All you need to do is talk to your doc.

Review the attached list of medications with your doctor to find out if a generic prescription would be right for you. If the answer is yes, you'll pay a discounted rate for up to a 90-day supply when you refill at your local pharmacy or by mail. Either way, your plan ensures that you can get your medications for a reduced cost. Just another perk of being a Highmark member.

Which drugs qualify?

The list of generic medications includes many common drugs that are prescribed today, including:

- Antibiotics, like amoxicillin.
- Blood pressure medications.
- Blood thinners, like warfarin.
- Corticosteroids, like prednisone.
- Thyroid medications.

Keep reading to review all the drugs that qualify as of January 1, 2023.

You can also find the complete and most current list* at:

<https://shop.highmark.com/sales/#!/brochures/genericdruglist/NEPA>

Check to see if your medications are covered.

Drug name	Dosage	Strength
Arthritis, gout, and pain		
Allopurinol	Tablet	100 mg
Allopurinol	Tablet	300 mg
Diclofenac sodium	Tablet, enteric coated	75 mg
Ibuprofen	Tablet	400 mg
Ibuprofen	Tablet	600 mg
Ibuprofen	Tablet	800 mg
Indomethacin	Capsule	25 mg
Indomethacin	Capsule	50 mg
Meloxicam	Tablet	7.5 mg
Meloxicam	Tablet	15 mg
Naproxen	Tablet	250 mg
Naproxen	Tablet	375 mg
Naproxen	Tablet	500 mg
Antibiotics		
Amoxicillin	Tablet, chewable	125 mg
Amoxicillin	Tablet, chewable	400 mg
Amoxicillin	Tablet	500 mg
Amoxicillin	Tablet	875 mg
Amoxicillin	Capsule	250 mg
Amoxicillin	Capsule	500 mg
Amoxicillin	Suspension, Reconstituted, Oral (ml)	125 mg/5 ml
Amoxicillin	Suspension, Reconstituted, Oral (ml)	250 mg/5 ml
Amoxicillin	Suspension, Reconstituted, Oral (ml)	200 mg/5 ml
Amoxicillin	Suspension, Reconstituted, Oral (ml)	400 mg/5 ml
Amoxicillin-clavulanate	Tablet	875-125 mg
Amoxicillin-clavulanate	Tablet	500-125 mg
Ampicillin trihydrate	Capsule	250 mg
Azithromycin	Tablet	250 mg
Azithromycin	Tablet	500 mg
Cefuroxime	Tablet	250 mg
Cefuroxime	Tablet	500 mg
Cephalexin	Capsule	250 mg
Cephalexin	Capsule	500 mg

Drug name	Dosage	Strength
Ciprofloxacin HCl	Drops	0.3%
Ciprofloxacin HCl	Tablet	250 mg
Ciprofloxacin HCl	Tablet	500 mg
Ciprofloxacin HCl	Tablet	750 mg
Doxycycline hyclate	Tablet	100 mg
Doxycycline hyclate	Capsule	100 mg
Doxycycline monohydrate	Capsule	100 mg
Gentamicin sulfate	Drops	0.3%
Isoniazid	Tablet	100 mg
Isoniazid	Tablet	300 mg
Levofloxacin hemihydrate	Tablet	250 mg
Levofloxacin hemihydrate	Tablet	500 mg
Levofloxacin hemihydrate	Tablet	750 mg
Metronidazole	Tablet	250 mg
Metronidazole	Tablet	500 mg
Penicillin V potassium	Solution, Reconstituted, Oral	125 mg/5 ml
Penicillin V potassium	Solution, Reconstituted, Oral	250 mg/5 ml
Penicillin V potassium	Tablet	250 mg
Penicillin V potassium	Tablet	500 mg
SMZ-TMP DS	Tablet	800-160 mg
Sulfamethoxazole/Trimethoprim	Tablet	400-80 mg
Sulfamethoxazole/Trimethoprim	Tablet	800-160 mg
Anticoagulants		
Jantoven	Tablet	1 mg
Jantoven	Tablet	2 mg
Jantoven	Tablet	2.5 mg
Jantoven	Tablet	3 mg
Jantoven	Tablet	4 mg
Jantoven	Tablet	5 mg
Jantoven	Tablet	6 mg
Jantoven	Tablet	7.5 mg
Jantoven	Tablet	10 mg
Warfarin sodium	Tablet	1 mg

Drug name	Dosage	Strength
Anticoagulants (cont.)		
Warfarin sodium	Tablet	2 mg
Warfarin sodium	Tablet	2.5 mg
Warfarin sodium	Tablet	3 mg
Warfarin sodium	Tablet	4 mg
Warfarin sodium	Tablet	5 mg
Warfarin sodium	Tablet	6 mg
Warfarin sodium	Tablet	7.5 mg
Warfarin sodium	Tablet	10 mg
Antifungals		
Fluconazole	Tablet	150 mg
Terbinafine HCl	Tablet	250 mg
Antihistamines		
Hydroxyzine HCl	Tablet	10 mg
Hydroxyzine pamoate	Capsule	25 mg
Hydroxyzine pamoate	Capsule	50 mg
Antihyperglycemics		
Glimepiride	Tablet	1 mg
Glimepiride	Tablet	2 mg
Glimepiride	Tablet	4 mg
Glipizide	Tablet	5 mg
Glipizide	Tablet	10 mg
Glipizide ER	Tablet, extended release 24 hr	2.5 mg
Glipizide ER	Tablet, extended release 24 hr	5 mg
Glipizide XL	Tablet, extended release 24 hr	2.5 mg
Glipizide XL	Tablet, extended release 24 hr	5 mg
Metformin HCl	Tablet	500 mg
Metformin HCl	Tablet	850 mg
Metformin HCl	Tablet	1000 mg
Metformin HCl ER	Tablet, extended release 24 hr	500 mg
Antiparkinson drugs		
Benzotropine mesylate	Tablet	0.5 mg
Benzotropine mesylate	Tablet	1 mg
Benzotropine mesylate	Tablet	2 mg
Trihexyphenidyl HCl	Tablet	2 mg
Antivirals		
Acyclovir	Capsule	200 mg
Acyclovir	Tablet	400 mg
Acyclovir	Tablet	800 mg

Drug name	Dosage	Strength
Blood pressure and cardiac health		
Amlodipine besylate	Tablet	2.5 mg
Amlodipine besylate	Tablet	5 mg
Amlodipine besylate	Tablet	10 mg
Atenolol	Tablet	25 mg
Atenolol	Tablet	50 mg
Atenolol	Tablet	100 mg
Atorvastatin calcium	Tablet	10 mg
Atorvastatin calcium	Tablet	20 mg
Atorvastatin calcium	Tablet	40 mg
Atorvastatin calcium	Tablet	80 mg
Benazepril HCl	Tablet	5 mg
Benazepril HCl	Tablet	10 mg
Benazepril HCl	Tablet	20 mg
Benazepril HCl	Tablet	40 mg
Carvedilol	Tablet	3.125 mg
Carvedilol	Tablet	6.25 mg
Carvedilol	Tablet	12.5 mg
Carvedilol	Tablet	25 mg
Clonidine HCl	Tablet	0.1 mg
Clonidine HCl	Tablet	0.2 mg
Clonidine HCl	Tablet	0.3 mg
Fenofibrate	Capsule	67 mg
Furosemide	Tablet	20 mg
Furosemide	Tablet	40 mg
Furosemide	Tablet	80 mg
Hydralazine HCl	Tablet	10 mg
Hydralazine HCl	Tablet	25 mg
Hydralazine HCl	Tablet	50 mg
Hydrochlorothiazide	Capsule	12.5 mg
Hydrochlorothiazide	Tablet	12.5 mg
Hydrochlorothiazide	Tablet	25 mg
Hydrochlorothiazide	Tablet	50 mg
Isosorbide mononitrate ER	Tablet, extended release 24 hr	30 mg
Isosorbide mononitrate ER	Tablet, extended release 24 hr	60 mg
Lisinopril	Tablet	2.5 mg
Lisinopril	Tablet	5 mg
Lisinopril	Tablet	10 mg
Lisinopril	Tablet	20 mg
Lisinopril	Tablet	30 mg
Lisinopril	Tablet	40 mg
Lisinopril-HCTZ	Tablet	20-25 mg

Drug name	Dosage	Strength
Blood pressure and cardiac health (cont.)		
Lisinopril-HCTZ	Tablet	20-12.5 mg
Lisinopril-HCTZ	Tablet	10-12.5 mg
Losartan potassium	Tablet	25 mg
Losartan potassium	Tablet	50 mg
Losartan potassium	Tablet	100 mg
Losartan-Hydrochlorothiazide	Tablet	50-12.5 mg
Losartan-Hydrochlorothiazide	Tablet	100 m-25 mg
Losartan-Hydrochlorothiazide	Tablet	100-12.5 mg
Lovastatin	Tablet	10 mg
Lovastatin	Tablet	20 mg
Lovastatin	Tablet	40 mg
Metoprolol tartrate	Tablet	25 mg
Metoprolol tartrate	Tablet	50 mg
Metoprolol tartrate	Tablet	100 mg
Pravastatin sodium	Tablet	10 mg
Pravastatin sodium	Tablet	20 mg
Pravastatin sodium	Tablet	40 mg
Simvastatin	Tablet	5 mg
Simvastatin	Tablet	10 mg
Simvastatin	Tablet	20 mg
Simvastatin	Tablet	40 mg
Simvastatin	Tablet	80 mg
Spironolactone	Tablet	25 mg
Spironolactone	Tablet	50 mg
Spironolactone	Tablet	100 mg
Triamterene w/HCTZ	Capsule	37.5-25 mg
Triamterene w/HCTZ	Tablet	75-50 mg
Triamterene w/HCTZ	Tablet	37.5-25 mg
Verapamil HCl	Tablet	80 mg
Verapamil HCl	Tablet	120 mg
Gastrointestinal		
Famotidine	Tablet	20 mg
Famotidine	Tablet	40 mg
Metoclopramide HCl	Tablet	5 mg
Metoclopramide HCl	Tablet	10 mg
Omeprazole	Capsule, delayed release	20 mg
Omeprazole	Capsule, delayed release	40 mg
Ondansetron HCL	Tablet	4 mg

Drug name	Dosage	Strength
Ondansetron HCL	Tablet	8 mg
Pantoprazole	Tablet	40 mg
Promethazine HCl	Tablet	12.5 mg
Promethazine HCl	Tablet	25 mg
Ranitidine HCl	Tablet	150 mg
Ranitidine HCl	Tablet	300 mg
Corticosteroids		
Dexamethasone	Tablet	0.5 mg
Dexamethasone	Tablet	0.75 mg
Dexamethasone	Tablet	1 mg
Dexamethasone	Tablet	1.5 mg
Dexamethasone	Tablet	6 mg
Prednisone	Tablet	2.5 mg
Prednisone	Tablet	5 mg
Prednisone	Tablet	10 mg
Prednisone	Tablet	20 mg
Prednisone	Tablet	50 mg
Muscle relaxants		
Baclofen	Tablet	10 mg
Cyclobenzaprine HCl	Tablet	5 mg
Cyclobenzaprine HCl	Tablet	10 mg
Tizanidine	Tablet	2 mg
Tizanidine	Tablet	4 mg
Psychotherapeutic drugs		
Amitriptyline HCl	Tablet	10 mg
Amitriptyline HCl	Tablet	25 mg
Bupirone HCl	Tablet	5 mg
Bupirone HCl	Tablet	10 mg
Bupirone HCl	Tablet	15 mg
Citalopram hbr	Tablet	10 mg
Citalopram hbr	Tablet	20 mg
Citalopram hbr	Tablet	40 mg
Fluoxetine HCl	Capsule	10 mg
Fluoxetine HCl	Capsule	20 mg
Fluoxetine HCl	Capsule	40 mg
Imipramine HCl	Tablet	10 mg
Imipramine HCl	Tablet	25 mg
Imipramine HCl	Tablet	50 mg
Lithium carbonate	Capsule	150 mg
Lithium carbonate	Capsule	600 mg
Nortriptyline HCl	Capsule	10 mg
Nortriptyline HCl	Capsule	25 mg
Nortriptyline HCl	Capsule	50 mg
Paroxetine HCl	Tablet	10 mg

Drug name	Dosage	Strength
Psychotherapeutic drugs (cont.)		
Paroxetine HCl	Tablet	20 mg
Paroxetine HCl	Tablet	30 mg
Paroxetine HCl	Tablet	40 mg
Sertraline HCl	Tablet	50 mg
Sertraline HCl	Tablet	25 mg
Sertraline HCl	Tablet	100 mg
Sumatriptan succinate	Tablet	25 mg
Sumatriptan succinate	Tablet	50 mg
Sumatriptan succinate	Tablet	100 mg
Trazodone HCl	Tablet	150 mg
Trazodone HCl	Tablet	50 mg
Trazodone HCl	Tablet	100 mg
Skin conditions		
Hydrocortisone	Cream (gram)	2.5%
Hydrocortisone	Ointment (gram)	2.5%
Mometasone furoate	Ointment (gram)	0.1%
Mupirocin	Ointment (gram)	2%
Nystatin	Cream (gram)	10,000/g
Nystatin	Ointment (gram)	10,000/g
Nystatin	Suspension, oral (final dose form)	10,000/ml
Triamcinolone acetoneide	Cream (gram)	0.025%
Triamcinolone acetoneide	Cream (gram)	0.10%
Triamcinolone acetoneide	Cream (gram)	0.50%
Triamcinolone acetoneide	Ointment (gram)	0.025%
Triamcinolone acetoneide	Ointment (gram)	0.10%
Triamcinolone acetoneide	Ointment (gram)	0.50%
Triderm	Cream (gram)	0.10%
Thyroid therapies		
Levothyroxine sodium	Tablet	25 mcg
Levothyroxine sodium	Tablet	50 mcg
Levothyroxine sodium	Tablet	75 mcg
Levothyroxine sodium	Tablet	88 mcg
Levothyroxine sodium	Tablet	100 mcg
Levothyroxine sodium	Tablet	112 mcg
Levothyroxine sodium	Tablet	125 mcg
Levothyroxine sodium	Tablet	137 mcg

Drug name	Dosage	Strength
Levothyroxine sodium	Tablet	150 mcg
Levothyroxine sodium	Tablet	175 mcg
Levothyroxine sodium	Tablet	200 mcg
Methimazole	Tablet	5 mg
Methimazole	Tablet	10 mg
Women's health		
Estradiol	Tablet	0.5 mg
Estradiol	Tablet	1 mg
Estradiol	Tablet	2 mg
Estropipate	Tablet	0.75 mg
Medroxyprogesterone acetate	Tablet	2.5 mg
Medroxyprogesterone acetate	Tablet	5 mg
Medroxyprogesterone acetate	Tablet	10 mg
Other medical conditions		
Albuterol sulfate	Nebulizer vial	2.5 mg/3 ml
Alendronate sodium	Tablet	5 mg
Alendronate sodium	Tablet	10 mg
Alendronate sodium	Tablet	35 mg
Alendronate sodium	Tablet	70 mg
Donepezil	Tablet	5 mg
Donepezil	Tablet	10 mg
Finasteride	Tablet	5 mg
Oxybutynin chloride	Syrup	5 mg/5 ml
Oxybutynin chloride	Tablet	5 mg
Tamsulosin HCl	Capsule, sustained release 24 hr	0.4 mg
Timolol maleate	Drops	0.25%

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The Claims Administrator/Insurer will not deny or limit coverage for a specific health service related to gender transition if such denial or limitation results in discriminating against a transgender individual. The Claims Administrator/Insurer:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact the Civil Rights Coordinator.

If you believe that the Claims Administrator/Insurer has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, including sex stereotypes and gender identity, you can file a grievance with: Civil Rights Coordinator, P.O. Box 22492, Pittsburgh, PA 15222, Phone: 1-866-286-8295, TTY: 711, Fax: 412-544-2475, email: CivilRightsCoordinator@highmarkhealth.org. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call the number on the back of your ID card (TTY: 711).

ATENCIÓN: Si usted habla español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame al número en la parte posterior de su tarjeta de identificación (TTY: 711).

请注意：如果您说中文，可向您提供免费语言协助服务。
请拨打您的身份证背面的号码（TTY：711）。

CHÚ Ý: Nếu quý vị nói tiếng Việt, chúng tôi cung cấp dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Xin gọi số điện thoại ở mặt sau thẻ ID của quý vị (TTY: 711).

알림: 한국어를 사용하시는 분들을 위해 무료 통역이 제공됩니다. ID 카드 뒷면에 있는 번호로 전화하십시오 (TTY: 711).

ATENSYON: Kung nagsasalita ka ng Tagalog, may makukuha kang mga librang serbisyonang tulong sa wika. Tawagan ang numero sa likod ng iyong ID card (TTY: 711).

ВНИМАНИЕ: Если вы говорите по-русски, вы можете воспользоваться бесплатными услугами языковой поддержки. Позвоните по номеру, указанному на обороте вашей идентификационной карты (номер для текст-телефонных устройств (TTY): 711).

تنبيه: إذا كنت تتحدث اللغة العربية، فهناك خدمات المساعدة في اللغة المجانية متاحة لك. اتصل بالرقم الموجود خلف بطاقة هويتك (جهاز الاتصال لذوي صعوبات السمع والنطق: 711).

Kominike : Si se Kreyòl Ayisyen ou pale, gen sèvis entèprèt, gratis-ticheri, ki la pou ede w. Rele nan nimewo ki nan do kat idantite w la (TTY: 711).

ATTENTION: Si vous parlez français, les services d'assistance linguistique, gratuitement, sont à votre disposition. Appelez le numéro au dos de votre carte d'identité (TTY: 711).

UWAGA: Dla osób mówiących po polsku dostępna jest bezpłatna pomoc językowa. Zadzwoń pod numer podany na odwrocie karty ubezpieczenia zdrowotnego (TTY: 711).

ATENÇÃO: Se a sua língua é o português, temos atendimento gratuito para você no seu idioma. Ligue para o número no verso da sua identidade (TTY: 711).

ATTENZIONE: se parla italiano, per lei sono disponibili servizi di assistenza linguistica a titolo gratuito. Contatti il numero riportato sul retro della sua carta d'identità (TTY: 711).

ACHTUNG: Wenn Sie Deutsch sprechen, steht Ihnen unsere fremdsprachliche Unterstützung kostenlos zur Verfügung. Rufen Sie dazu die auf der Rückseite Ihres Versicherungsausweises (TTY: 711) aufgeführte Nummer an.

注：日本語が母国語の方は言語アシスタンス・サービスを無料でご利用いただけます。IDカードの裏に明記されている番号に電話をおかけください (TTY: 711)。

توجه: اگر شما به زبان فارسی صحبت می کنید، خدمات کمک زبان، به صورت رایگان، در دسترس شماست. با شماره واقع در پشت کارت شناسایی خود (TTY: 711) تماس بگیرید.



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To determine the availability of services under your health plan, please review your member materials for details on benefits, conditions and exclusions or call the number on the back of your ID card.

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Introducing Well360 Virtual Health

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Well360 Virtual Health is a digital experience that lets you connect – either online or via our app – with a health care expert.

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Register or schedule a virtual appointment today at [Well360VirtualHealth.com](https://www.Well360VirtualHealth.com).



Download the Well360 Virtual Health app by visiting Google Play or the app store.

DIAGNOSTIC VERSUS PREVENTIVE CARE



How Can I Pay Two Different Amounts for the Same Procedure?

YOUR BENEFIT PAYMENT DEPENDS ON HOW YOUR DOCTOR CODES YOUR PROCEDURE

Preventive care, or routine care, is typically covered at 100%. Diagnostic tests — screenings performed for treating or diagnosing a medical condition — are typically covered at your plan’s standard benefit level.

WHAT’S THE DIFFERENCE?

In general, the reason for the exam. When you see a doctor for routine care, you would not have symptoms or a previous medical history that would require the doctor to perform the procedure(s). When you receive diagnostic care, the doctor is performing the procedure(s) to find out what is wrong with you or to treat your condition.

TO ACCESS THE BLUE CROSS BLUE SHIELD PREVENTIVE SCHEDULE ON OUR WEBSITE:

Log on to highmarkbcbs.com (If you do not have a login ID, you’ll need to click on the “Register Now” link). Click on the “Health & Wellness,” “Healthy Living” and “Prevention” links. You can also call Member Service for a copy of the schedule.

If you are a 50-year-old male, you should have the following preventive care:

- Routine physical exam
- Colorectal cancer screening
- Cholesterol screening

If you are a 40-year-old female, you should have the following preventive care:

- Routine physical exam
- Pap test
- Mammogram
- Pelvic exam

If you are a 50-year-old female, you should have the following preventive care:


- Routine physical exam
- Colorectal cancer screening
- Pap test
- Mammogram
- Cholesterol screening

SEE THE FOLLOWING EXAMPLES:

John, Janice, and Judy have procedures performed by their network physicians. All three have the same PPO plan. However, they pay different amounts for their care because John is receiving preventive care, Janice is receiving diagnostic care, and Judy is receiving both.

John	Janice	Judy
Reason for exam: John turned 40 and figured he should have an annual exam and “once over” to see how his health is.	Reason for exam: Janice is a diabetic and is recovering from a near heart attack. The doctor put her on a strict diet and exercise regime and wants to perform follow-up tests to measure her improvement.	Reason for exam: Judy needs to follow up with her doctor to see if the cholesterol-reducing medication is working. While there, she decides to take care of her routine physical and get a flu shot, because flu season is coming.
Procedures performed: <ul style="list-style-type: none"> • Physical Exam • Blood Pressure • Cholesterol Screening • Lipid Panel • Fasting Blood Glucose • Urinalysis 	Procedures performed: <ul style="list-style-type: none"> • Physical Exam • Blood Pressure • Cholesterol Screening • Lipid Panel • Fasting Blood Glucose • Urinalysis 	Procedures performed: <ul style="list-style-type: none"> • Lipid Panel • Physical Exam • Flu Shot • Urinalysis
Doctor codes and submits as: Routine	Doctor codes and submits as: Diagnostic	Doctor codes and submits as: Some procedures as diagnostic, some as routine.
Benefit payment: All of these procedures are covered at 100%.	Benefit payment: All of these procedures and office visits are covered at the standard benefit level.	Benefit payment: Procedures billed as routine will be covered at 100%. Procedures billed as diagnostic will be covered at the standard benefit level.

QUESTIONS?

 If you or your doctor have questions about the administration of the care as listed on the schedule, please call Member Service at the number listed on the back of your ID card.

What Preventive Care Do I Have Coverage For?

The Blue Cross Blue Shield Preventive Schedule is a list of general care guidelines. We encourage you to take a copy of the schedule with you when you or a family member visits their medical provider.

The schedule includes tests that are performed for both routine and diagnostic reasons. If you are seeing your doctor and have not been diagnosed with a medical condition, you should expect the services to be performed for routine/preventive care and covered at 100%, not subject to deductible or coinsurance. Only those procedures that are listed on the Preventive Schedule are covered at 100% with no deductible during a preventive exam. If your doctor orders other tests, those tests may be subject to your deductible and/or coinsurance, or they may be denied in certain instances. If you have a medical condition and the tests are being done to monitor the condition, then the services would be performed for diagnostic reasons and subject to your program's deductible and coinsurance.

Sample of Preventive Benefits

Benefits for adults	When submitted by your doctor as routine	When submitted by your doctor as diagnostic
Routine physical exams	100%	standard plan payment level
Routine gynecological exams, including a Pap Test	100%	standard plan payment level
Mammograms, as required*	100%	standard plan payment level
Colorectal Cancer Screening*	100%	standard plan payment level

Insurance carriers may differ in their preventive care schedules. If you or your doctor has questions about the administration of the care as listed on the schedule, please call Member Service at the number listed on the back of your ID card.

* See the Preventive Schedule for specific procedures and risk factors.



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Discrimination is Against the Law

The Claims Administrator/Insurer complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex, including sex stereotypes and gender identity. The Claims Administrator/Insurer does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex assigned at birth, gender identity or recorded gender. Furthermore, the Claims Administrator/Insurer will not deny or limit coverage to any health service based on the fact that an individual's sex assigned at birth, gender identity, or recorded gender is different from the one to which such health service is ordinarily available. The Claims Administrator/Insurer will not deny or limit coverage for a specific health service related to gender transition if such denial or limitation results in discriminating against a transgender individual. The Claims Administrator/Insurer:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact the Civil Rights Coordinator.

If you believe that the Claims Administrator/Insurer has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, including sex stereotypes and gender identity, you can file a grievance with: Civil Rights Coordinator, P.O. Box 22492, Pittsburgh, PA 15222, Phone: 1-866-286-8295, TTY: 711, Fax: 412-544-2475, email: CivilRightsCoordinator@highmarkhealth.org. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call the number on the back of your ID card (TTY: 711).

ATENCIÓN: Si usted habla español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame al número en la parte posterior de su tarjeta de identificación (TTY: 711).

请注意：如果您说中文，可向您提供免费语言协助服务。
请拨打您的身份证背面的号码（TTY：711）。

CHÚ Ý: Nếu quý vị nói tiếng Việt, chúng tôi cung cấp dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Xin gọi số điện thoại ở mặt sau thẻ ID của quý vị (TTY: 711).

알림: 한국어를 사용하시는 분들을 위해 무료 통역이 제공됩니다. ID 카드 뒷면에 있는 번호로 전화하십시오 (TTY: 711).

ATENSYON: Kung nagsasalita ka ng Tagalog, may makukuha kang mga libreng serbisyon tulog sa wika. Tawagan ang numero sa likod ng iyong ID card (TTY: 711).

ВНИМАНИЕ: Если вы говорите по-русски, вы можете воспользоваться бесплатными услугами языковой поддержки. Позвоните по номеру, указанному на обороте вашей идентификационной карты (номер для текст-телефонных устройств (TTY): 711).

تنبيه: إذا كنت تتحدث اللغة العربية، فهناك خدمات المساعدة في اللغة المجانية متاحة لك. اتصل بالرقم الموجود خلف بطاقة هويتك (جهاز الاتصال لذوي صعوبات السمع والنطق: 711).

Kominike : Si se Kreyòl Ayisyen ou pale, gen sèvis entèprèt, gratis-ticheri, ki la pou ede w. Rele nan nimewo ki nan do kat idantite w la (TTY: 711).

ATTENTION: Si vous parlez français, les services d'assistance linguistique, gratuitement, sont à votre disposition. Appelez le numéro au dos de votre carte d'identité (TTY: 711).

UWAGA: Dla osób mówiących po polsku dostępna jest bezpłatna pomoc językowa. Zadzwoń pod numer podany na odwrocie karty ubezpieczenia zdrowotnego (TTY: 711).

ATENÇÃO: Se a sua língua é o português, temos atendimento gratuito para você no seu idioma. Ligue para o número no verso da sua identidade (TTY: 711).

ATTENZIONE: se parla italiano, per lei sono disponibili servizi di assistenza linguistica a titolo gratuito. Contatti il numero riportato sul retro della sua carta d'identità (TTY: 711).

ACHTUNG: Wenn Sie Deutsch sprechen, steht Ihnen unsere fremdsprachliche Unterstützung kostenlos zur Verfügung. Rufen Sie dazu die auf der Rückseite Ihres Versicherungsausweises (TTY: 711) aufgeführte Nummer an.

注：日本語が母国語の方は言語アシスタンス・サービスを無料でご利用いただけます。ID カードの裏に明記されている番号に電話をおかけください (TTY: 711)。

توجه: اگر شما به زبان فارسی صحبت می کنید، خدمات کمک زبان، به صورت رایگان، در دسترس شماست. با شماره واقع در پشت کارت شناسایی خود (TTY: 711) تماس بگیرید.

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Accessible health care — anytime, anywhere.

When you or a loved one needs medical care — whether it's serious, routine, or somewhere in between — we want you to know you have options. Our guide can help you choose the one that's best for you.



Your care chart



Here's where to go when you need help. As you can see, the symptoms or condition you have determine your best destination for care.

Log in at highmarkbcbs.com and click on **Find a Doctor** to find the in-network option that's right for you.



Telemedicine

Convenient, at-home care for minor illnesses



Doctor's Office

Sick visits, checkups, and care for chronic conditions



Urgent/Express Care

Urgent but not life-threatening



Emergency Room (ER)

Serious, life-threatening, or involving severe pain

Symptoms/conditions	Cold Flu Earaches Or other minor illnesses that don't require an office visit	Cold/sinus symptoms Stomach problems High blood pressure Behavioral health issues Other chronic conditions	Headaches/migraines Asthma/breathing conditions Flu and colds Urinary tract infections	Difficulty breathing Chest pain Uncontrolled bleeding Severe injury Stroke symptoms*
Estimated cost by comparison	Lowest	Lower	Moderate	Highest
Hours of operation	24/7	Business hours (generally)	Mornings, evenings, and weekends	24/7

Just so you know, you have a few different telemedicine options available to you. Contact your local provider or call the Member Service number on the back of your ID card to learn more.

If you believe you are having a medical emergency and you need immediate treatment, go directly to any hospital emergency room or call 911.

* Numbness or weakness in your face, arm, or leg, especially on one side. Confusion or trouble understanding other people. Difficulty speaking. Trouble seeing with one or both eyes. Telemedicine service availability is subject to state laws. Telemedical services are subject to the telemedicine services benefit. You may be responsible for the full cost of ineligible virtual medicine services. To determine the availability of services under your health plan, please review your Outline of Coverage for details on benefits, conditions and exclusions or call the number on the back of your ID card.

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Making time for your mental health

Your guide to Highmark BCBS's mental health resources

Mental health issues are different for everyone, which is why it's important to find the care option that's right for you. Whether you're considering medication, want to learn more about self-care, or just want to talk to someone, Highmark is here to help.



Below are some of the support systems, services, and care options available to you.

Who should I reach out to if I need help?

- Call your primary care physician.
- Schedule an in-person or telemedicine appointment with a mental health provider.
- Call a Highmark behavioral health specialist.
- Blues On Call™

How can I find the care that's right for me?

- For help finding an in-network doctor or facility, contact the My Care Navigator™ team by calling the phone number on the back of your member ID card.
- Download the Highmark Plan app to quickly and conveniently find in-network care nearby.
- Call the Member Service number on the back of your ID card to request to speak with a behavioral health specialist.
- Speak with a wellness coach at 1-800-650-8442, Monday-Friday 8:30am - 8:30pm ET for help with stress or sleep management.

What other services do I have access to?

- **Sharecare®** - personalized health programs and resources, plus Sharecare Windows for access to videos to help reduce stress and improve relaxation.
- **WholeHealth Living™** - discounts through the largest alternative medicine network in the nation.
- **Bright Heart Health** - substance use counseling and treatment through telemedicine.
- **Highmark Blue Shield Community Support** - a tool that connects people seeking help with local nonprofits and services in their communities.
- **Telemedicine through your doctor's office** - get access to a doctor you know and trust from your phone, tablet, or computer. Keep in mind that your doctor's office may not offer this option, so make sure to check with your health care provider.

Where can I go to learn more?

Every plan is a little different. For more information about available services and your specific benefits and costs for care, you can visit highmarkbcbs.com or call Member Services at .

If you or someone you know is in crisis, contact the Suicide Prevention Lifeline at 1-800-273-TALK (8255), or dial 911 in case of emergency.

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Blues On Call is a service mark of the Blue Cross and Blue Shield Association.

Highmark Blue Shield Community Support is an independent company that provides information on community resources to Highmark members.

My Care Navigator is a service mark of Highmark Inc.

Bright Heart Health is an independent and separate company that provides behavioral health services for Highmark members living in Pennsylvania, West Virginia and Delaware. Bright Heart Health is solely responsible for its programs and services, professional medical advice, diagnosis and treatment. Health care plans and the benefits thereunder are subject to the terms of the applicable Highmark benefit agreement.

WholeHealth Living is an independent and separate company that provides wellness resources for Highmark members. WholeHealth Living is solely responsible for its programs and services, professional medical advice, diagnosis and treatment. Health care plans and the benefits thereunder are subject to the terms of the applicable Highmark benefit agreement.

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Introducing Well360 Virtual Health

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WHEN YOU NEED IT.





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- **Therapy** – for behavioral health concerns like anxiety, depression, or insomnia.
- **Psychiatry** – scheduled psychiatric assessments, prescription refills, and treatment options.

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