

Your 2025 Healthcare Benefit Guide

Frederick County Public Schools
Medicare-Eligible Retirees



With Care,



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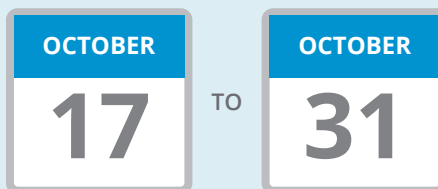
Welcome

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.

Frederick County Public Schools

Your open enrollment is



**Ready to explore your 2025 benefits?
Let's get started.**

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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.

The personas represented in this decision guide are not real. The personas and quotes are used for illustrative purposes only.

Choosing the right plan

Everyone has their own personal needs and concerns when it comes to healthcare. We hope you'll take a few minutes to consider what features are most important to you. Here are some examples:



Pamela

75 YEARS OLD
RETIRED
MARRIED

Pamela helps financially support her adult son. She needs affordable care for her family and help managing her son's type 1 diabetes.

PAMELA WANTS A HEALTH PLAN THAT:

- Has access to quality care when and where she needs it
- Helps her manage the costs of medications



William

62 YEARS OLD
RETIRED
MARRIED

William is active and healthy, and generally sees the doctor only when something bothers him. At this point in his life, he's more interested in saving money than having a wide variety of options.

WILLIAM WANTS A HEALTH PLAN THAT:

- Fits within a budget
- Has value for what he pays



Georgia

59 YEARS OLD
RETIRED
DIVORCED

Georgia is an active empty-nester. She wants to know that she's got the resources she needs to cover any unexpected expenses, but doesn't want to feel overwhelmed with options.

GEORGIA WANTS A HEALTH PLAN THAT:

- Includes a robust wellness program
- Provides coverage when she travels



Jarod

70 YEARS OLD
RETIRED
SINGLE

Jarod spends much of his free time with his faithful yellow lab, but he's looking forward to vacation. Saving money is his immediate goal, but not at the expense of having reliable, basic coverage.

JAROD WANTS A HEALTH PLAN THAT:

- Has a low monthly paycheck deduction
- Offers discounts for gym memberships

Medical plan highlights

Let's look at some of your in-network costs for common services with this plan.

		BlueChoice Advantage
Costs to consider		
In-network Deductible You'll pay the full CareFirst member cost for some services until you reach your deductible		After Annual Medicare Deductible is met, \$0
Out-of-pocket Maximum The most you'll pay for covered in-network services in a plan year		\$0
Plan Includes Out-of-network Coverage		Yes
Staying healthy		
Annual Physical Exam		\$0 per visit
Preventive Screenings and Immunizations		\$0 per visit
Provider services		
Primary Care Provider (PCP)		After Annual Medicare Deductible is met, \$0
Specialist (e.g. Dermatologist)		After Annual Medicare Deductible is met, \$0
Mental Health Professional—Office		After Annual Medicare Deductible is met, \$0
Urgent Care		After Annual Medicare Deductible is met, \$0
Emergency Room		After Annual Medicare Deductible is met, \$0
Allergy Shots		After Annual Medicare Deductible is met, \$0
Imaging (MRA/MRS, MRI, PET, CT Scans) (non-hospital facility)		After Annual Medicare Deductible is met, \$0
Labs (non-hospital facility)		After Annual Medicare Deductible is met, \$0
X-rays (non-hospital facility)		After Annual Medicare Deductible is met, \$0
Physical, Speech and/or Occupational Therapy		After Annual Medicare Deductible is met, \$0
Chiropractic		After Annual Medicare Deductible is met, \$0
Acupuncture		After Annual Medicare Deductible is met, \$0
Outpatient Surgery (surgical center)		After Annual Medicare Deductible is met, \$0
Inpatient Surgery (including maternity)		\$0
Durable Medical Equipment		After Annual Medicare Deductible is met, \$0

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.

Vision plan highlights

Let's review some of your in-network costs for common vision services.

(12-month benefit period)	BlueVision Plus
Routine checkup	
Annual Eye Exam	\$0
Corrective measures	
Davis Vision Frame Collection	\$0
Other Frames	\$150 allowance OR plus an additional \$50 discount at Visionworks plus a 20% discount on any average
Spectacle Lenses (single-vision, lined bifocal, trifocal)	\$0
Medically Necessary Contact Lenses	\$0

A regular vision checkup can tell you more about your health than you might think. Not only can your eye doctor help you see better, but they can also identify a host of other problems including diabetes and cancer.



With CareFirst, you get so much more

Unmatched access

With 95% of national providers¹ and 99% of local providers² within our Blues network, you have the **broadest access to care**.

Comprehensive care

Our comprehensive care approach meets you where you are, ensuring you have a consistent, whole health experience that helps you better manage your **physical, emotional, social and financial well-being**.

Local expertise

Our extensive and long-standing local relationships give you **unparalleled access to providers and community organizations**, resulting in enhanced care coordination and improved health outcomes.

Innovative member solutions

Beyond health coverage, you have access to our **comprehensive portfolio of best-in-class member solutions** to help you achieve your best health in all stages of life, health and conditions.



1 in 2 Americans are covered by Blue regionally, 1 in 3 nationally³



Most chosen health plan in the Mid-Atlantic, serving 3.5 million members



A not-for-profit company driven by mission



Access to 1.7 million U.S. providers⁴



CareFirst is proud to be recognized as one of the World's Most Ethical Companies® for 12 consecutive years.



¹ CHP Network Compare Findings, Q3 2017

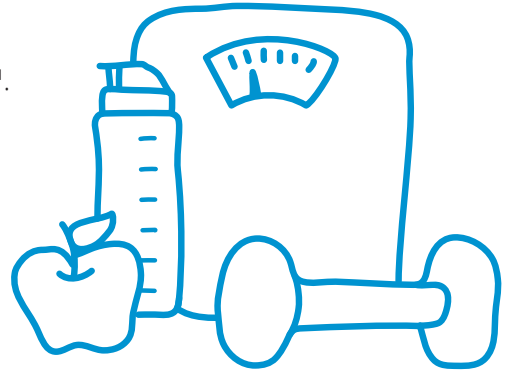
² CareFirst Book of Business Data, August 2020

³ BCBSA Blue Facts, February 2022

⁴ Provider Data Repository (PDR), January 2021

CareFirst WellBeing

Live your healthiest life with CareFirst WellBeingSM. Access motivating digital resources anytime, plus specialized programs for extra support— at no cost to you—including:



- **RealAge[®]:** Discover if your healthy habits are making an impact by taking the RealAge health assessment.
- **Health coaching:** Get one-on-one confidential support from trained professionals to achieve your best health.
- **Lifestyle coaching:** Identify opportunities to improve your daily health, from managing stress to eating healthy and being active.
- **Disease management:** Get help to better understand and manage your chronic or complex condition.
- **Tobacco cessation:** Learn how to recognize and avoid tobacco cravings and habits with our voluntary and confidential 21-day program, Craving to Quit.
- **Financial well-being:** Whether you want to stop living paycheck to paycheck, get out of debt, or send a child to college, our financial well-being program, SmartDollar, can help.
- **Weight management programs:¹** Reach a healthier weight and reduce the risk of developing type 2 diabetes with the following programs:
 - **Noom weight management:** Gain confidence to make lasting change with this award-winning weight loss program designed by psychologists.
 - **Noom diabetes prevention program (DPP):** Access tracking tools, peer support and specially trained coaches to help lower the risk of diabetes.
 - **Eat Right Now:** Change your eating patterns with this 12-month program that combines neuroscience and mindfulness tools.
- **Inspirations:** Break free from stress, unwind at the end of the day or ease into a restful night of sleep with meditation, streaming music and videos.

Exciting, personalized programs—from physical fitness and family relationships to stress management and financial health—can help you, and your family, address every aspect of your well-being.



¹ To join Noom or Eat Right Now, members need to meet clinical eligibility criteria through an online assessment. Noom is an app-based program. Eat Right Now is app-based and available on the web.

Eat Right Now is administered by Sharecare, Inc. and Noom is administered by Noom, Inc., independent companies that provide health improvement management services to CareFirst members. Sharecare, Inc. and Noom do not provide CareFirst BlueCross BlueShield products or services and are solely responsible for the health improvement management services they provide.

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. Our simple Find-a-Doctor tool helps you select the right healthcare at the right place.

Try it for yourself. Visit 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 member portal is personalized to you and your CareFirst benefits. Stay on top of your health with easy access to everything you need to understand your coverage, find care at the best price, and track your claims and deductibles at your fingertips. With My Account, you can:

- Find in-network doctors, urgent care centers and other care—nationwide
- View, order or email member ID cards
- Check claims and deductible status
- Update communication preferences and password
- Quickly access a variety of CareFirst member programs
- Send a secure message for members

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

So many options for when you need care

Establishing a relationship with a primary care provider (PCP) is the best way to receive consistent, quality care. But when life makes that difficult, CareFirst offers so many other ways to get the care you need.

	Needs or symptoms such as:	Virtual option
CloseKnit Virtual Care		
CloseKnit offers 24/7/365 virtual-first primary care, urgent care*, mental health and other specialty services. * Primary care available to members and dependents ages 18+; Urgent care available to members and dependents ages 2+	<ul style="list-style-type: none"> ■ Cough, cold and flu ■ Urgent care needs ■ Illness while traveling ■ Therapy ■ Psychiatry, lactation and nutrition services ■ Medication questions ■ Insurance or coverage questions 	✓
24-Hour Nurse Advice Line		
Call 800-535-9700 for general questions about health issues or where to go for care	<ul style="list-style-type: none"> ■ Cough, cold and flu ■ Rashes ■ Medication questions 	✓
PCP Visit		
Discuss diagnosis, treatment of illness, chronic conditions, routine check-ups	<ul style="list-style-type: none"> ■ Routine physical ■ Diabetic care ■ Cough, cold, flu, allergies ■ Bronchitis 	✓
Convenience Care Centers		
(e.g., CVS MinuteClinic) Health screenings, vaccinations, minor illness or injury	<ul style="list-style-type: none"> ■ Cough and cold ■ Pink eye ■ Ear pain ■ Flu shot 	✗
Urgent Care Centers		
Non-life-threatening illness or injury requiring immediate care	<ul style="list-style-type: none"> ■ Sprains ■ Cut requiring stitches ■ Minor burns ■ Sore throat 	✗
Emergency Room Visit		
Life-threatening illness or injury	<ul style="list-style-type: none"> ■ Chest pain ■ Difficulty breathing ■ Uncontrolled bleeding ■ Major burns 	✗

CloseKnit is a registered trademark owned by, and is the trade name of, Atlas Health, LLC. Atlas Health, LLC d/b/a CloseKnit provides telehealth services to CareFirst BlueCross BlueShield members.

PLEASE READ: The information provided in this document regarding various care options is meant to be helpful when seeking care and is not intended as medical advice. Only a medical provider can offer medical advice. The choice of provider or place to seek medical treatment belongs entirely to you.

Mental and behavioral health support

As a CareFirst member, you have 24/7 access to a range of programs for depression, anxiety, drug or alcohol dependencies and other mental health conditions, including:

- **CloseKnit**—access our leading virtual care practice through a simple, convenient app. CloseKnit providers can assess behavioral health needs to help you connect with therapists and psychiatrists.
- **Substance Use Support**—get clinical counseling 24/7, or schedule substance use disorder treatment for you or a loved one within 48 hours.
- **Care Navigation**—talk to a Behavioral Health Care Manager who can help you find a path forward. LGBTQ+ members can contact our dedicated services specialist for help navigating care and understanding benefits.

To learn more about all the free mental and behavioral support available, visit carefirst.com/mentalhealth.

You're never alone. If you or someone you know is in crisis, call or text 988 or contact the CareFirst support line at 800-245-7013.



"We all struggle at times, so knowing there are so many options my teens can turn to for help is a huge relief."

Next steps

Ready to enroll?

- Complete the enrollment process
- Look for your member ID cards in the mail
- Be sure to download the CareFirst mobile app to access your plan on-the-go

Not ready to choose your plan just yet?

- Set a reminder on your phone so you don't miss the deadline!



Don't worry—
you have until
October 31, 2024
to make or change
your plan selection.



“Everything in this guide is designed to help you and your family achieve your best health. And all the plans, programs, tools and resources that we’ve built for you are exactly what we expect for ourselves and those we love. Because, like you, we’re CareFirst members, too.”

Tonya O.

CareFirst. 

Employee since '22



We're here to help!

If you have additional questions, please call **866-386-2043**.

Service 24 hours/day, 7 days/week; Holidays 8 a.m.–4 p.m

Rights and responsibilities

Notice of privacy practices

CareFirst BlueCross BlueShield and CareFirst BlueChoice, Inc. (collectively, CareFirst) are committed to keeping the confidential information of members private. Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), we are required to send our Notice of Privacy Practices to members of fully insured groups only. The notice outlines the uses and disclosures of protected health information, the individual's rights and CareFirst's responsibility for protecting the member's health information.

To obtain a copy of our Notice of Privacy Practices, go to www.carefirst.com and click on *Privacy Statement* at the bottom of the page, click on *Health Information* then click on *Notice of Privacy Practices*. Or call the Member Services telephone number on your member ID card. Members of self-insured groups should contact their Human Resources department for a copy of their Notice of Privacy Practices. If you don't know whether your employer is self-insured, please contact your Human Resources department.

Member satisfaction

CareFirst wants to hear your concerns and/or complaints so that they may be resolved. We have procedures that address medical and non-medical issues. If a situation should occur for which there is any question or difficulty, here's what you can do:

- If your comment or concern is regarding the quality of service received from a CareFirst representative or related to administrative problems (e.g., enrollment, claims, bills, etc.) you should contact Member Services. If you send your comments to us in writing, please include your member ID number and provide us with as much detail as possible regarding any events. Please include your daytime telephone number so that we may contact you directly if we need additional information.
- If your concern or complaint is about the quality of care or quality of service received from a specific provider, contact Member Services. A representative will record your concerns and may request a written summary of the issues. To write to us directly with a quality of care or service concern, you can:
 - Send an email to: quality.care.complaints@carefirst.com
 - Fax a written complaint to: 301-470-5866
 - Write to:
CareFirst BlueCross BlueShield
Quality of Care Department
P.O. Box 17636
Baltimore, MD 21297

If you send your comments to us in writing, please include your identification number and provide us with as much detail as possible regarding the event or incident. Please include your daytime telephone number so that we may contact you directly if we need additional information. Our Quality of Care Department will investigate your concerns, share those issues with the provider involved and request a response. We will then provide you with a summary of our findings. CareFirst member complaints are retained in our provider files and are reviewed when providers are considered for continuing participation with CareFirst.

These procedures are also outlined in your Evidence of Coverage.

For assistance in resolving a Billing or Payment Dispute with the Health Plan or a Health Care Provider, contact the Health Education and Advocacy Unit of the Consumer Protection Division of the Office of the Attorney General at 877-261-8807.

Hearing impaired

To contact a Member Services representative, please choose the appropriate hearing impaired assistance number below, based on the region in which your coverage originates.

Maryland Relay Program: 800-735-2258
National Capital Area TTY: 202-479-3546
Please have your Member Services number ready.

Language assistance

Interpreter services are available through Member Services. When calling Member Services, inform the representative that you need language assistance.

Please Note: CareFirst appreciates the opportunity to improve the level of quality of care and services available for you. As a member, you will not be subject to disenrollment or otherwise penalized as a result of filing a complaint or appeal.

Confidentiality of subscriber/ member information

All health plans and providers must provide information to members and patients regarding how their information is protected. You will receive a Notice of Privacy Practices from CareFirst or your health plan, and from your providers as well, when you visit their office.

CareFirst has policies and procedures in place to protect the confidentiality of member information. Your confidential information includes Protected Health Information (PHI), whether oral, written or electronic, and other nonpublic financial information. Because we are responsible for your insurance coverage, making sure your claims are paid, and that you can obtain any important services related to your health care, we are permitted to use and disclose (give out) your information for these purposes. Sometimes we are even required by law to disclose your information in certain situations. You also have certain rights to your own protected health information on your behalf.

Our responsibilities

We are required by law to maintain the privacy of your PHI, and to have appropriate procedures in place to do so. In accordance with the federal and state Privacy laws, we have the right to use and disclose your PHI for treatment, payment activities and health care operations as explained in the Notice of Privacy Practices. We may disclose your protected health information to the plan sponsor/employer to perform plan administration function. The Notice is sent to all policy holders upon enrollment.

Your rights

You have the following rights regarding your own Protected Health Information. You have the right to:

- Request that we restrict the PHI we use or disclose about you for payment or health care operations.
- Request that we communicate with you regarding your information in an alternative manner or at an alternative location if you believe that a disclosure of all or part of your PHI may endanger you.
- Inspect and copy your PHI that is contained in a designated record set including your medical record.
- Request that we amend your information if you believe that your PHI is incorrect or incomplete.
- An accounting of certain disclosures of your PHI that are for some reasons other than treatment, payment, or health care operations.
- Give us written authorization to use your protected health information or to disclose it to anyone for any purpose not listed in this notice.

Inquiries and complaints

If you have a privacy-related inquiry, please contact the CareFirst Privacy Office at 800-853-9236 or send an email to privacy.office@carefirst.com.

Members' rights and responsibilities statement

Members have the right to:

- Be treated with respect and recognition of their dignity and right to privacy.
- Receive information about the health plan, its services, its practitioners and providers, and members' rights and responsibilities.
- Participate with practitioners in decision-making regarding their health care.
- Participate in a candid discussion of appropriate or medically necessary treatment options for their conditions, regardless of cost or benefit coverage.
- Make recommendations regarding the organization's members' rights and responsibilities.
- Voice complaints or appeals about the health plan or the care provided.

Members have a responsibility to:

- Provide, to the extent possible, information that the health plan and its practitioners and providers need in order to care for them.
- Understand their health problems and participate in developing mutually agreed upon treatment goals to the degree possible.
- Follow the plans and instructions for care that they have agreed on with their practitioners.
- Pay copayments or coinsurance at the time of service.
- Be on time for appointments and to notify practitioners/providers when an appointment must be canceled.

Eligible individuals' rights statement wellness and health promotion services

Eligible individuals have a right to:

- Receive information about the organization, including wellness and health promotion services provided on behalf of the employer or plan sponsors; organization staff and staff qualifications; and any contractual relationships.
- Decline participation or disenroll from wellness and health promotion services offered by the organization.
- Be treated courteously and respectfully by the organization's staff.
- Communicate complaints to the organization and receive instructions on how to use the complaint process that includes the organization's standards of timeliness for responding to and resolving complaints and quality issues.

Habilitative services

CareFirst provides coverage for habilitative services to members younger than the age of 19. This includes habilitative services to treat congenital or genetic birth defects, including a defect existing at or from birth, a hereditary defect, autism or an autism spectrum disorder, and cerebral palsy.

Habilitative services include speech, physical and occupational therapies. CareFirst must pre-approve all habilitative services. Any deductibles, copayments and coinsurance required under your contract apply. Policy maximums and benefit limits apply. Habilitative services are not counted toward any visit maximum for therapy services.

Please note that any therapies provided through the school system are not covered by this benefit. This coverage applies only to contracts sold to businesses based in Maryland. Check your contract coverage to determine if you are eligible to receive these benefits. If you have questions regarding any of these services, contact Member Services at the telephone number on your member ID card.

Mastectomy-related services

CareFirst provides coverage for home visits to members who undergo a mastectomy (the surgical removal of all or part of the breast as a result of breast cancer) or the surgical removal of a testicle. Coverage includes one home visit that occurs within 24 hours after discharge from the hospital or outpatient facility and an additional home visit if prescribed by the member's doctor. To be eligible, the member must be in the hospital less than 48 hours or have the procedure performed on an outpatient basis. This coverage applies only to contracts sold to businesses based in Maryland. Please check your contract coverage to determine if you are eligible for these surgical procedure benefits.

CareFirst offers other benefits for mastectomy-related services, including:

- All stages of reconstruction of the breast that underwent the mastectomy.
- Surgery and reconstruction of the other breast to produce a symmetrical appearance.
- Prosthesis (artificial breast) and treatment of the physical complications that occur at all stages of the mastectomy, including lymphedema (swelling).

You and your physician will determine the appropriate plan to treat your condition. These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits covered under your health plan. Please refer to your Benefit Guide or Evidence of Coverage for more details or call Member Services at the telephone number on your member ID card.

Care for mothers, newborns

Under the Newborns' and Mothers' Health Protection Act, CareFirst offers coverage for inpatient hospitalization services for a mother and newborn child for a minimum of:

- 48 hours of inpatient hospitalization care after an uncomplicated vaginal delivery.
- 96 hours of inpatient hospitalization care after an uncomplicated cesarean section.

If the mother and newborn remain in the hospital for at least the length of time provided, coverage includes:

- A home visit if prescribed by the attending physician.
- The mother may request a shorter length of stay if, after talking with her physician, she decides that less time is needed for her recovery.

If the mother and newborn have a shorter hospital stay than listed above, coverage includes one home visit scheduled to occur within 24 hours after hospital discharge and an additional home visit if prescribed by the attending physician.



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 well-being 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.