

Get Answers to our Most Asked Questions

Last Updated February 17, 2014

Q. I'm a new member and want to make a payment. What are my options to pay my premium?

- Online Make a one-time payment by bank draft through OrbiPay®*. Visit OrbiPay's secure website and follow the instructions to make your payment.
- **By mail** Pay your premium by mail with a personal check, cashier's check or money order. To do so, be sure you:
 - o Make the check payable to Blue Cross and Blue Shield of Illinois
 - o Write your member ID number on your check, cashier's check or money order
 - o Include the payment coupon that was sent to you with your bill
 - Send your payment at least 5 business days in advance of the payment due date to ensure timely posting to your account
 - Make your payment to this address:

Blue Cross and Blue Shield of Illinois P.O. Box 94455 Palatine, IL 60094-4455

- By personal check over the phone Call the OrbiPay payment line toll-free at 877-433-3755. Please have your member ID number, bank routing number and bank account number ready. Your payment will be applied within 24 hours.
- In person Bring a copy of your bill with your member ID number and "receive code," to any
 MoneyGram® location near you (including most Walmart, ACE Cash Express and CVS stores) and pay with
 cash. MoneyGram locations in Walmart stores also take debit card payments. Visit the MoneyGram
 website to find locations near you.
- **By debit or credit card** Pay by using a credit, debit or pre-paid debit card:
 - Call 866-654-8569 and enter the necessary information when prompted to make your payment. You
 will need your member ID number and group number. Both are included on your welcome letter and
 your member ID card.
 - Or log into your <u>Blue Access for Members account at bcbsil.com</u> and look for the Billing & Payments section. Payments made with a card will be applied to your account within 1-2 business days.
- By automatic recurring payments Set up monthly recurring bank drafts by calling Customer Service at 800-538-8833. You will need your member ID number and group number, both of which can be found on your welcome letter and member ID card.

For more information on all the ways you can pay your bill visit bcbsil.com/payment-options.

BCBSIL has contracted with a third-party vendor, Alacriti Payments, LLC, to process your ACH/electronic check payment. In order to process this payment, you will be redirected to Alacriti's secure payment site, OrbiPay. If you have any problems with your payment, please contact BCBSIL customer service at 800-538-8833.



Q. BCBSIL drafted my bank account twice in January. When will I get my money back?

We sincerely apologize for our error in drafting your bank account twice for your January premium payment. We had two active policies for you in our system, which pulled your records twice when the automated drafts were processed. We have corrected the error in our system, so this should not happen again. We have mailed a refund check for the overpayment amount. In addition, if you had overdraft fees as a result of the double billing, please contact us at 800-792-8595 so we can refund these charges as well.

Q. Has my coverage started? Can I use my health plan?

Your first premium payment activates your coverage, so you can start using your health plan within 1-2 days of making your payment, depending on how you pay.

After you've made your first payment and your coverage is activated, you can have health care expenses during that coverage gap applied to your deductible, or even get paid back for some services. In this case, the coverage gap would be the time between your requested effective date and the date you make your first payment.

Q. I need to get a prescription filled but don't have my ID card yet. What can I do?

Even if you haven't received your ID card, you should have received a new member welcome letter within days of your enrollment being completed. Your member identification and group number listed on your welcome letter can be used by the pharmacy to verify your benefits. Some pharmacies are offering up to 30 days of medication to people who have some kind of confirmation of their enrollment on the Health Insurance Marketplace, such as a copy of their email confirmation that enrollment was completed. They are also offering the same assistance for existing customers who have previously had coverage but haven't received their member ID cards for 2014 yet. Ask your pharmacist what your options are.

Q. I applied on the Health Insurance Marketplace, but haven't heard if my application has been received and accepted. Did my coverage start on the effective date I requested?

We receive new applications from the Marketplace every day. If you applied through the Marketplace, it will take a few days for processing through the Marketplace before they are sent to us. It then takes us about 5-10 business days to process your enrollment in the BCBSIL system.

If you just applied recently, we encourage you to wait to see if you receive your membership information soon. If you applied weeks ago and have not received anything from us, it is possible your application has been held up for some reason.

If you applied on the Health Insurance Marketplace or with BCBSIL online and you have not received information from us, call our Customer Service Center at 800-538-8833 and we will look up the status of your application. Our call volumes are still very high, so you may have to hold for a long period before getting through. We will help you as quickly as possible.

Q. Is someone available to help me enroll in a plan?

• Talk to a local agent - We encourage you to work with a local health insurance agent, who can look at all your options and advise you on the best plan for your needs and budget. There is no additional cost to you when working with an agent.



- Call BCBSIL If you'd like to have a BCBSIL representative help you with your decision and apply for new coverage for 2014, you should call our TeleSales Unit at 866-514-8044.
- Research and enroll online You can also get information on all your options and apply on our website at bcbsil.com. In addition to our direct purchase plans, our site includes the plans we offer on the Health Insurance Marketplace, and a calculator to help you find out if you might qualify for financial assistance through the Marketplace.

Q. When will I get my member ID cards, and how many will I get?

You should get your member ID cards in the mail soon after your application is approved. Individual plans will get 1 card and family plans will get 2 cards. Please note that all member ID cards will have the subscriber name on it and can be used by all of the dependents enrolled under the policy.

You can request additional cards through your <u>Blue Access for Members account at bcbsil.com</u>. You will need your member identification number and group number to log into <u>Blue Access for Members</u>. These numbers can be found on the new member welcome letter you will receive within days of enrolling.

Q. I received my ID cards in the mail but they only have my name on them and not my spouse's. Can I get another ID card with their name on it?

Your member ID cards will have the primary subscriber's name on them, but they can be used by all of the dependents (in this case your spouse) enrolled under your policy.

Q. When will I get benefit coverage information and the contract on the plan I selected?

Within days of your application being accepted, you will receive a welcome letter from BCBSIL that includes your member identification number and group number. This information can be used by providers and pharmacies to verify your coverage until you get your member ID card. Your ID card will be sent separately soon after.

Your policy information is available through your <u>Blue Access for Members account at bcbsil.com</u> once your plan is in effect. The mailing of our printed policy kits has been delayed due to some required changes in product details. You should receive them early to mid-February.

Q. I've gotten a call from someone asking me questions about my new coverage. Is this person with BCBSIL, and why are they asking these questions?

Since you have new coverage with us, we want to make sure you understand your benefits and that we have the information we need to help you with your health care needs. We are calling to:

- Explain how your plan works
- Answer questions you may have, and
- Tell you about some of the services we offer to help manage your care and your coverage.

We also check to make sure the information we have is correct, such as the names of everyone on your plan, your address and other details.

The call often only takes about 15 to 20 minutes. If you have any concern that the person calling you is not with BCBSIL, ask the caller for a number you can use to call us back.

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Q. When I try to register for Blue Access for Members, I get a message telling me it's not available. When will it be available for me to register?

You may have received this error message during your registration for a number of reasons. Many times, the information you entered may not have matched the data in our system. Please remember to have your group and member ID numbers handy when you register. Both of these numbers can be found on your welcome letter and your member ID card. Register now at bcbsil.com/member/register.

Q. I received a letter from you that tells me I can't keep my 2013 plan. I heard that I might be able to keep it? What can I do?

In December, some BCBSIL members learned that they could keep their current insurance plan for one more year, rather than change to a new plan on Jan. 1 that met certain benefit requirements of the Affordable Care Act. If this applied to you, you had two choices – stay on the plan you were currently covered under or see if the new 2014 plans offered you something better.

If you selected a new 2014 plan and wanted to switch back to your 2013 plan, you had to contact us by Dec. 23, 2013. If you didn't contact us, you will have coverage under the 2014 plan you selected.

Q. I applied for a plan on the Health Insurance Marketplace and also applied for a plan directly with BCBSIL, so now I'm getting a bill for both. How do I cancel one?

We cannot process a cancellation request for a Marketplace plan. If you want to cancel your Marketplace plan, you can call the Marketplace at 800-318-2596.

If you want to cancel our off-Marketplace plan, we can process that cancellation for you. Call Customer Service at 800-538-8833. You can also log in to your <u>Blue Access for Members account at bcbsil.com</u> and send us a secure email message.

A policy will also automatically be cancelled for nonpayment if you don't pay the premium. This may be your best option. You would simply pay the premium for the plan you want to keep and not pay the premium for the plan you want to cancel.

If you have questions about how health care reform affects you or would like to learn more about your health plan options, please visit our <u>Health Care Reform and You website at bcbsil.com/health-care-reform</u> to learn how the new law might affect you.

Members can log into their <u>Blue Access for Members account at bcbsil.com</u> from a desktop or mobile browser for more information about benefits, claim status and more.