THE FACTS YOU NEED ABOUT HIGHMARK HEALTH COVERAGE IN 2015

CAN I KEEP MY DOCTOR?

WHAT IF I NEED CANCER CARE?

WHAT ABOUT SENIORS?

WHAT HAPPENS IN AN EMERGENCY?
The recent “Consent Decree,” however, provides a number of protections for Highmark members.

WHAT HAPPENS IN 2015?
Most of the current contracts between Highmark and the University of Pittsburgh Medical Center (UPMC) will expire on December 31, 2014. They have not been extended, and there is not a new contract.

The recent “Consent Decree,” however, provides a number of protections for Highmark members.

UNDERSTANDING THE CONSENT DECREES
The most important provisions of the Consent Decree are:

ACCESS FOR CANCER CARE.
Highmark members will have access – on an in-network benefit level – to all UPMC services for oncology care, including the Hillman Cancer Center.

CONTINUATION OF CARE.
Highmark members in the midst of a course of treatment with any UPMC provider will continue to receive in-network coverage for their care – no matter what the diagnosis.

SAFETY NET.
If members received care from UPMC in 2014 and cannot find another doctor in their area, they can continue to receive care from that same provider in 2015 on an in-network benefit level.

ACCESS FOR EMERGENCY CARE.
Members can receive care at a UPMC emergency room on an in-network benefit level. If they need to be admitted to the hospital, the inpatient care will also be covered at the in-network benefit level.

ACCESS FOR SENIORS, CHIP AND MEDICAID MEMBERS.
Highmark members who are age 65 or older and covered by or eligible for Medicare and members on CHIP or Medicaid will have access to all UPMC providers on an in-network benefit level.

IN-NETWORK ACCESS TO CERTAIN UPMC PROVIDERS, INCLUDING:
• Children’s Hospital of Pittsburgh of UPMC and all UPMC pediatricians
• Hillman Cancer Center and all UPMC oncologists
• UPMC Mercy
• Western Psychiatric Institute and Clinic and all UPMC behavioral health providers
• All UPMC hospitals outside the five-county Greater Pittsburgh area and UPMC physicians when practicing at these hospitals

PROTECTION AGAINST “BALANCE BILLING.”
We know that some Highmark members may want to receive care from UPMC providers – even though they don’t qualify for in-network benefits based on one of the other provisions of the Consent Decree. These members will be responsible for the out-of-network cost-sharing according to their specific benefit design. But UPMC can only “balance bill” the patient up to 60 percent of UPMC’s actual charge. See how Highmark members can save with "Balance Billing" protection:

<table>
<thead>
<tr>
<th>UPMC Charge</th>
<th>Member is responsible for out-of-pocket deductible, coinsurance and/or copayments</th>
<th>Maximum amount UPMC will receive, per Consent Decree provision</th>
</tr>
</thead>
<tbody>
<tr>
<td>$250</td>
<td>Amount that can’t be billed</td>
<td>$600</td>
</tr>
</tbody>
</table>

HELPING YOU AND YOUR HIGHMARK MEMBERS WITH THE TRANSITION
With the new agreement, we believe that many of our members will not need to change doctors at this time.

WE’RE READY TO HELP MEMBERS WHO:
• Have questions about how the Consent Decree affects their specific situation
• Want to know which doctors will be in our network for 2015
• Need help now finding a new doctor

ONLINE:
Use this new website to find a network provider
Highmark members who want to confirm that their doctor will be in our network in 2015 – or find a new doctor – can use the online directory at www.YourNetwork2015.com.

ON THE PHONE:
Call myCare Navigator
Members who prefer to talk with a Member Service representative can call myCare Navigator at 1-888-BLUE-428. This unique service is designed to help consumers navigate the health care system. Representatives can answer member questions, help them find a doctor, transfer their medical records and even make appointments.

IN SOCIAL MEDIA:
Follow us on Facebook, Twitter and more
Highmark is interacting with our members in new and different ways. Members who use Facebook, Twitter and other social media can visit our pages to stay on top of changes, learn what other members are saying and get helpful information to make the most of their health care coverage.

INNOVATIVE PRODUCT OPTIONS FOR YOU
We continue to be committed to offering you health care coverage that meets your needs and your budget. Because the Consent Decree broadens the Community Blue network, we are developing innovative products that encourage members to use quality, cost-effective health care providers. They’ll still have access to the protections available under the Consent Decree, but they’ll pay more out of pocket for some of these provisions.

Ask your Highmark representative about Community Blue Flex, the newest addition to our product line that uses a tiered-benefit approach to save you money. Talk with your Highmark representative today.

UPMC: Who’s in and who’s out of the Highmark network in 2015?
Under the Consent Decree, these UPMC hospitals and the physicians who practice there continue to be in-network:
• Children’s Hospital of Pittsburgh of UPMC
• UPMC Altoona
• UPMC Bedford
• UPMC Hamot and its affiliate Kane Community Hospital
• UPMC Horizon
• UPMC Mercy*
• UPMC Northwest
• Western Psychiatric Institute and Clinic

These UPMC hospitals will be out of network:
• Magee Womens Hospital of UPMC
• UPMC East
• UPMC McKeensport
• UPMC St. Margaret
• UPMC Passavant
• UPMC Presbyterian-Shadyside

*Not included in Community Blue network

In 2015, Community Blue members may have higher cost-sharing for services at some UPMC facilities. In-network access to UPMC for seniors includes members enrolled in current Highmark Medicare Advantage products, Medigap, Signature 65 as well as those in existing group plans whether Medicare is primary or secondary.