

**Have questions? We can help.**

Call us at **1-888-247-4641** (TTY/TDD at **1-800-421-1220**) or visit **excellusbcbcs.com**.

To learn more about applying for health insurance, including Medicaid, Child Health Plus, Essential Plan, and Qualified Health Plans through NY State of Health, The Official Health Plan Marketplace, visit **nystateofhealth.ny.gov** or call **1-855-355-5777**.

**COMPLETE HEALTH CARE COVERAGE. REALLY.**



Our Health Plan complies with federal civil rights laws. We do not discriminate on the basis of race, color, origin, age, disability, or sex.

Atención: Si habla español, contamos con ayuda gratuita de idiomas disponible para usted. Consulte el documento adjunto para ver las formas en que puede comunicarse con nosotros.

注意：如果您说中文，我们可为您提供免费的语言协助。请参见随附的文件以获取我们的联系方式。



**Everybody Benefits**

**Blue Choice Option is a health plan for those who currently have Medicaid. It's also known as Medicaid Managed Care.**

## Coverage and service from the name you know and trust

With **Blue Choice Option**, you get these and other services:

- Large network of doctors, specialists and hospitals
- Inpatient hospital care
- Emergency services
- Laboratory and X-ray services
- Doctors office visits
- Telehealth and telemedicine visits
- Routine physical exams
- Well-child doctor visits
- Monthly premium \$0

Check the benefit summary for more!

## Real value every day

- Health and wellness programs
- Disease management
- Pregnancy programs
- Preventive care

## Blue Choice Option covers many who:

- Are uninsured
- Are unemployed
- Have no insurance through their employer

## B E N E F I T S U M M A R Y \*

Type of Care	Benefit	Coverage**
<b>Doctor's Care</b>	Office visits and treatment by your Primary Care Physician	Covered in full
	Office visits and treatment by a specialist	Covered in full
	Immunizations	Covered in full
<b>Preventive Care</b>	Cervical cytology screening (Pap smear)	Covered in full
	Mammography screening	Covered in full
	Prostate cancer screening	Covered in full
	Well-child visits up to age 19	Covered in full
	Adult routine physicals	Covered in full
<b>Hospital Inpatient</b>	365 days of room and board, including ancillary charges	Covered in full
	Inpatient surgical care by a physician	Covered in full
	Physician visits	Covered in full
<b>Outpatient Services</b>	Outpatient surgery	Covered in full
<b>Emergency Care</b>	Emergency room care for emergency medical conditions	Covered in full
	After hours in PCP's office	Covered in full
	Freestanding urgent care center	Covered in full
<b>Maternity Care</b>	Office visits – prenatal and postnatal	Covered in full
	Hospital care for mother	Covered in full
	Newborn nursery care in the hospital	Covered in full
<b>Mental Health and Substance Use Disorder Services</b>	Inpatient Services* (Residential, Rehabilitation, CPEP)	Covered in full
	Outpatient Services* (CORE, PROS, HCBS, Rehabilitation)	Covered in full
<b>Other Services</b>	X-ray (including MRA, MRI, CAT, and PET scans)	Covered in full
	Laboratory and pathology	Covered in full
	Chemotherapy and radiation therapy	Covered in full
	Home health care visits based on medical necessity	Covered in full
	Kidney dialysis	Covered in full
	Eye exams and eye glasses (restrictions may apply)	Covered in full

Note: All care must be medically necessary and where appropriate; referrals are required for specialty care

\*This is a summary of benefits, not limited to the above, including Residential, Rehabilitation, Comprehensive Psychiatric Emergency Program, Community Oriented Recovery and Empowerment Services, Personalized Recovery Oriented Services, Home and Community-Based Services, and more, as outlined fully in the member handbook

\*\*Benefits subject to New York State mandates