



# MATTHEW THORNTON BLUE<sup>®</sup>

A Health Maintenance Organization (HMO)

#### COMPREHENSIVE COVERAGE

You are covered for preventive care, doctor visits, emergency room visits, prescriptions, hospitalization, and more.

#### WIDE CHOICE OF PRIMARY CARE PROVIDERS (PCPS)

You may select a different provider for every family member, choosing from internists, family practitioners, and pediatricians.

#### SIMPLE TO USE

Because your PCP provides or arranges most of your care, you don't have to worry about claim forms, or precertification.

#### LOW OUT-OF-POCKET COSTS

As long as your PCP provides or arranges your care, eligible expenses — such as preventive care and doctor visits — are covered at 100 percent after a low copayment. Other types of care — such as inpatient hospitalization — are covered after you meet an annual deductible. In either case, with few exceptions, any care you receive without your PCP's referral is not covered.

#### OFFERED THROUGH ANTHEM BLUE CROSS AND BLUE SHIELD

Your coverage is with one of the most trusted names in the business.

*New Hampshire Local Government Center*

# Matthew Thornton Blue

## A Total Approach to Healthcare

The Matthew Thornton Blue HMO is designed to make healthcare easy. You simply choose a PCP, who is your main source for all your healthcare and who takes care of the administrative aspects of an insurance plan. Because of this, Matthew Thornton places special emphasis on the doctor you choose for your PCP. You should think of your PCP as your “family doctor” — the person you generally see first for all your medical care (except in a life-threatening emergency). In most cases, your PCP will be able to attend to your medical care.

In exchange for arranging most of your care through your PCP, you receive a comprehensive healthcare plan that features:

- **Office visits** that are covered after only a \$15 copayment — without any claim forms,
- **Preventive coverage**, such as routine physical examinations (covered after a \$15 copayment) and immunizations (covered in full),
- **Comprehensive coverage for inpatient hospitalization and inpatient surgery** after you meet the annual deductible, and
- **Worldwide coverage for emergency and urgently needed care.**

While your PCP needs to coordinate most of your care, there are times when another specialist, healthcare professional, or hospital may be required. In these cases, your PCP will develop a treatment plan, refer you to the proper medical professional, and make sure the care you get is appropriate and medically necessary.

*It's important to remember that your PCP must provide, authorize, or arrange for your medical care — otherwise, care received without a referral is not covered.*

There are exceptions. While routine OB/GYN services, maternity care, routine vision care, and chiropractic services do not require PCP approval, you must use a network provider to receive benefits. In addition, if you need behavioral healthcare or substance abuse services, simply call the behavioral health administrator at 800.228.5975. A behavioral health specialist will direct you to and authorize the most appropriate care in the Matthew Thornton Blue network.

### Choosing a PCP

When you enroll in Matthew Thornton Blue, you will choose a PCP for yourself and each of your enrolled family members. Because your PCP is really your healthcare partner, be sure to take the time you need and talk to others before you select your doctor. If you have questions, call Matthew Thornton Customer Service at 800.870.3057.

You can choose the same PCP for your entire family (such as a family or general practitioner) or select different PCPs for each person (such as a pediatrician for your children and an internist for yourself).

Matthew Thornton Blue offers a number of PCPs to choose from. It's likely you'll find one close to your home, your office, or your child's school — wherever works best for you.

To find a PCP, log on to [www.nhlgc.org](http://www.nhlgc.org), click on “HealthTrust Online,” and follow the links to the *Provider Directory for Matthew Thornton Blue*. Here you will find listings of local providers as well as their specialties, phone numbers, and addresses. Listings of network behavioral healthcare and substance abuse treatment providers, vision care providers, and other specialists are also included.

You can change your PCP at any time by calling Matthew Thornton Customer Service at 800.870.3057. The change will be effective at the time of the call.

For more information on choosing a PCP — or if you don't have online access — call Matthew Thornton Customer Service.

*The chart on the foldover panel lists many Matthew Thornton Blue services and how they're covered. Remember, with minor exceptions, any care you obtain without a referral from your PCP is not covered. For details, call 800.870.3057 or refer to the Subscriber Certificate that you will receive after you enroll.*

### Online Member Services

*You can get information about your health plan whenever you need it by registering with MyAnthem at [www.anthem.com](http://www.anthem.com). After you register, you'll be able to use this secure site to access information about:*

- *Your claims and payment status,*
- *Your PCP selection, and*
- *What your copayment will be.*

*You can also order additional ID cards and change your PCP.*

*It is important to remember that, in most cases, your PCP must provide, authorize, or arrange for your medical care in order for benefits to be paid.*

*With Matthew Thornton Blue, leaving the country doesn't mean leaving your healthcare coverage behind. The plan covers unforeseen medical needs when you're traveling. As always, you pay only a \$15 copayment for office visits and a \$100 copayment for visits to the emergency room. Note that emergency room fees are subject to the annual deductible of \$500 per person, up to the annual out-of-pocket maximum of \$1,500 per family per calendar year. If admitted, the \$100 copayment is waived.*

## What's Covered

Matthew Thornton Blue provides coverage for a wide array of healthcare benefits. With its emphasis on preventive care benefits, Matthew Thornton Blue provides you and your family with comprehensive coverage. The following pages describe just a few of the benefits available through Matthew Thornton Blue.

### Preventive Care

At LGC, we believe in the importance of preventive care — it's our front-line defense to prevent more serious illnesses and injuries later, and it helps us live healthier, happier lives today. That's why Matthew Thornton Blue covers routine preventive care that your PCP provides or coordinates, including:

- Physical exams, including lab tests, x-rays, and PSA screenings,
- Annual gynecological exams, which are available without a referral and include mammograms and Pap tests, and
- Well-child care, including routine checkups and immunizations.

### Office Visits

When you see your PCP, common ailments — such as colds, infections, and minor injuries — are treatable and affordable. Visits to your PCP are covered at 100 percent after a \$15 copayment.

### Inpatient Hospitalization

When coordinated by your PCP, inpatient hospitalization is covered at 100 percent after you meet the annual deductible — \$500 per person, up to the annual out-of-pocket maximum of \$1,500 per family per calendar year. With Matthew Thornton Blue, there aren't any claim forms or precertification procedures to follow. For more information about how the plan covers hospitalization, refer to the chart on the foldover panel.

### Emergency Care and Urgent Care

Emergency care is an important feature to any health plan. Matthew Thornton Blue provides comprehensive coverage in the event of an emergency.

An **emergency** is a sudden condition that could jeopardize your life or well-being if medical treatment is delayed. Examples include possible heart attacks, broken bones, and convulsions. In this case, you should:

- Go to the nearest emergency room,
- Identify yourself as a Matthew Thornton Blue member, and
- Notify your PCP within 24 hours of receiving treatment.

**Urgent care** refers to medical conditions that are not life- or limb-threatening but require prompt medical attention. Examples include high fevers, cuts, and sprains. In this case, to receive the highest level of benefits, you should:

- Call your PCP, regardless of the time of night or day,
- Explain the problem to the doctor or nurse you speak with, and
- Get directions on how to proceed.

With urgent care, you must call your PCP first to ensure that your care will be covered.

For more information about how the plan covers emergency care, refer to the chart on the foldover panel.

### **Special Enrollment Opportunities**

*If you decline coverage for yourself or your eligible family members because of other health insurance coverage, you may be able to enroll yourself or your dependents in your employer's plan in the future, provided that you request enrollment within 31 days of when your other coverage ends.*

*This special enrollment right is available if the other coverage ends:*

- *Because of the loss of eligibility through no fault of your own,*
- *Because an employer's contributions for the other coverage stop, or*
- *In the case of COBRA coverage, because the maximum COBRA period has expired.*

*In addition, if you previously have declined coverage and you have a new dependent as the result of marriage, birth, adoption, or placement for adoption (a "qualified family status change"), you may be able to enroll yourself and your dependents, provided you request enrollment within 31 days of the change in family status.*

## **Prescription Drug Coverage**

### **Short-Term Prescriptions**

Short-term prescription drugs — those issued in a 34-day supply or less — are covered through the Prescription Drug Card Program when you have them filled at any Caremark participating pharmacy. You pay only a low copayment for generic prescriptions (the copayment for brand-name drugs is higher).

Most major pharmacies participate in the Caremark network. To find out if your pharmacy participates, call 888.726.1631. For further information, refer to *Your Prescription Benefit* booklet, which you will receive after you enroll.

### **Long-Term Prescriptions**

Caremark Mail Service is designed for up to 90-day supplies of maintenance medications. Prescriptions and refills may be ordered through Caremark Mail Service for a low copayment per prescription.

To use this service, ask your doctor to write your prescription for up to a 90-day supply, plus refills. If you need to start taking the medication right away, request two prescriptions — one for a 14-day supply to be filled at a Caremark participating pharmacy and another for the balance, up to a 90-day supply.

Complete the *Mail Service Order Form*, and send it with your copayment for each prescription to Caremark. Your medications will arrive via U.S. mail or UPS within 14 days. You can request a refill by linking to Caremark through LGC's Web site at [www.nhlgc.org](http://www.nhlgc.org) and clicking on "HealthTrust Online," or by calling 888.726.1631. For further information, refer to *Your Prescription Benefit* booklet, which you will receive after you enroll.

## **Behavioral Healthcare and Substance Abuse Treatment**

Matthew Thornton Blue provides comprehensive coverage for behavioral healthcare and substance abuse treatment. All behavioral healthcare and substance abuse treatment must be preapproved by the behavioral health administrator by calling 800.228.5975. For more information about how the plan covers behavioral healthcare and substance abuse treatment, as well as any limitations, refer to the foldover panel.

### **Other Valuable Benefits**

In addition to providing medical coverage, your Matthew Thornton Blue plan provides:

- Routine vision care, including discounts on eyeglasses and contact lenses,
- Benefits for the services of a dentist or oral surgeon for the treatment of temporomandibular joint syndrome (TMJ), gingivectomy for up to four quadrants, and the removal of bone-impacted teeth,
- Annual routine hearing exams for children age 18 and younger,
- Personalized health information on a wealth of topics through [MyHealth@Anthem](mailto:MyHealth@Anthem),
- Savings on health-related products and services through [SpecialOffers@Anthem](mailto:SpecialOffers@Anthem), and
- Access to LGC's wide variety of health management programs.

You will receive more information about each of these benefits after you enroll.

## **Filing a Claim**

In most cases, obtaining your care through your PCP means no paperwork. In the case of an exception, mail a claim form and a copy of your receipt to: Anthem Blue Cross and Blue Shield, Claims Department, PO Box 533, North Haven, CT 06473-0533. For details, refer to your *Subscriber Certificate*, which you will receive after you enroll.

If you have questions or need a claim form, call 800.870.3057.

Benefits	Matthew Thornton Blue When your PCP provides or arranges your care
Calendar-Year Deductible	\$ 500 per person
Calendar-Year Out-of-Pocket Maximum	\$1,500 per family
<b>Preventive Care</b> Routine physical exams for babies Routine physical exams for children and adults, one annual gynecological exam Immunizations for children and adults, mammograms, Pap smears, lead screenings, PSA screenings Nutrition counseling, up to three visits per person per calendar year Diabetes management program	Covered at 100% after \$15 copayment Covered at 100% after \$15 copayment. <i>(For annual OB/GYN exams, PCP referral is not required; must use network providers)</i> Covered at 100% Covered at 100% after \$15 copayment Covered at 100% after deductible
<b>Outpatient Care</b> Office visits Surgery, laboratory and allergy tests, x-rays, ultrasounds, injections, allergy injections Maternity care CT scans, MRIs, chemotherapy	Covered at 100% after \$15 copayment Covered at 100% Covered at 100% after deductible Covered at 100% after deductible
Inpatient Hospital Care	Covered at 100% after deductible
<b>Chiropractic Care<sup>1</sup></b> (limited to 12 visits per person per calendar year)	Covered at 100% after \$15 copayment <i>X-rays: Covered at 100%</i>
Durable Medical Equipment <sup>2</sup>	Covered at 80% after separate \$100 durable medical equipment deductible
Physical, Occupational, and Speech Therapy <sup>3</sup>	Covered at 100% after \$15 copayment
Hospice Care	Covered at 100% after deductible
<b>Emergency Room Care</b> (copayment waived if admitted)	ER charge covered at 100% after \$100 copayment. Other eligible charges covered at 100% after deductible. Laboratory and x-rays covered at 100%
<b>Routine Vision Care</b> Routine exams <sup>4,4</sup> Frames and lenses	Covered at 100% after \$15 copayment \$40 reimbursement every calendar year
<b>Behavioral Healthcare and Substance Abuse Treatment<sup>5</sup></b>	<i>Outpatient:</i> Covered at 100% after \$15 copayment, each limited to 20 visits per person per calendar year <i>Inpatient:</i> Covered at 100% after deductible, limited to 30 days per person per calendar year for behavioral healthcare <i>All behavioral healthcare and substance abuse treatment must be approved in advance by the behavioral health administrator. Call 800.228.5975</i>
Maximum Lifetime Benefit	None
Prescription Drugs	<i>Short-term:</i> Up to a 34-day supply through participating pharmacies after a low copayment <i>Long-term:</i> Up to a 90-day supply through Caremark Mail Service after a low copayment

<sup>1</sup>PCP referral is not required; must use network providers.

<sup>2</sup>Limited to \$5,000 per person per calendar year.

<sup>3</sup>Limited to a combined maximum of \$5,000 per person per calendar year. This limit applies to services received in an office or in the outpatient department of a hospital or skilled nursing facility.

<sup>4</sup>Limited to once every calendar year for children 18 years old and younger, once every two calendar years thereafter.

<sup>5</sup>The limit for outpatient/office visits for substance abuse treatment includes detoxification and rehabilitation combined. Inpatient substance abuse benefits are limited to medically necessary detoxification, rehabilitation, and day/evening (intensive outpatient treatment) programs. Partial hospitalization and intensive outpatient treatment are limited to the 30-day inpatient maximum. Two program days count as one full inpatient day toward the 30-day maximum. All substance abuse benefits combined are limited to a \$10,000 maximum per person per calendar year and a \$20,000 maximum per lifetime.

This chart is intended for summary purposes only. Details of coverage are set forth in separate documents, which govern this plan.

## Contact Information

Provider	Services
<b>Matthew Thornton Blue Customer Service</b> 800.870.3057 www.anthem.com	Provides answers to general questions, as well as plan and claim-status information
<b>Behavioral Health Administrator</b> 800.228.5975 www.bhninc.com	Manages all behavioral healthcare and substance abuse services. <i>Always call before seeking care</i>
<b>Prescription Drug Program</b> 888.726.1631 www.caremark.com	Provides information on participating pharmacies, answers to general questions, and mail-service refills
<b>LifeResources — Member Assistance Program</b> 800.759.8122	Provides counseling and resources for a variety of employee needs
<b>EyeMed</b> 866.939.3633 www.eyemedvisioncare.com	Provides discount vision care services
<b>New Hampshire Local Government Center</b> 800.852.3358 OUTSIDE NEW HAMPSHIRE 800.527.5001 www.nhlgc.org	Provides information on prescription drug coverage and the <i>Slice of Life</i> health management program. More information about all LGC benefits is available by logging on to www.nhlgc.org and clicking on “HealthTrust Online”

*This guide provides an overview of benefits coverage with Matthew Thornton Blue HMO. While it is intended to describe your benefits as accurately as possible, the specific terms and conditions of eligibility and benefits are set forth in and governed by your Subscriber Certificate, Your Prescription Benefit booklet, and any other separate documents relating to features of the plan.*

*In the event of any discrepancy between this guide and your Subscriber Certificate, the terms of the Subscriber Certificate will govern. This guide does not constitute a contract, or an offer to form a contract, and is not binding on any party. The benefits described in this guide may be changed at any time without prior notice.*

Matthew Thornton Blue HMO is offered through Anthem Blue Cross and Blue Shield.



### NEW HAMPSHIRE Local Government Center

New Hampshire Municipal Association  
 Workers' Compensation Trust  
 Property-Liability Trust  
 HealthTrust

New Hampshire Local Government Center  
 25 Triangle Park Drive • PO Box 617 • Concord, NH 03302-0617  
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