



**BlueCross BlueShield
of Oklahoma**

P.O. Box 3283
Tulsa, OK 74102-3283

Presorted Standard
U.S. Postage
PAID
Platteville, WI
Permit No. 7

WINTER 2008

MemberNews



www.bcbsok.com

A newsletter for Blue Cross and Blue Shield of Oklahoma and BlueLincs HMO members

PROVIDER FINDER®: NEW **tool**

Blue Cross and Blue Shield of Oklahoma introduces a new and improved provider directory: the Provider Finder. This Web-based tool has a new look with easier, more intuitive navigation, accessible on both the public and secure Web portals at www.bcbsok.com.

Prospective and existing members are able to search for health care providers by name, ZIP code or location, health plan, provider type, or medical specialty; find conveniently located providers; print search results; and get a Google map with detailed driving directions.

Another significant enhancement is the option to view the Provider Finder in Spanish.

Updated daily, the Provider Finder tool offers the most current resources for members looking for contracting network providers. Additional links include the BlueCard® World-wide provider search tool, www.myrxhealth.com Web site pharmacy search tool, Dental Provider Finder® and the Federal Employee Program Provider Directory.



family FITNESS

LEAD THE WAY TO A WHOLESOME LIFESTYLE

It's not always easy to make healthy choices, particularly if you're trying to do everything by yourself.

But if you get the whole family involved, it can be easier for everyone to stay on track, according to the National Institutes of Health.

Not only will a wholesome diet and exercise help your family avoid diabetes, heart disease and certain forms of cancer, a healthy lifestyle can also raise everyone's self-confidence and energy levels and lower stress.

Just don't try to do too much too fast. Your family is more likely to get on board if the changes are small and easy to start with.

For example: ➤ Eat breakfast every day. It doesn't have to be an elaborate, time-consuming meal. Think low-fat, high-fiber foods, such as whole-grain cereal with nonfat

milk. And add some fruit. ➤ Encourage healthy snacking. Try putting out a bowl of fruit for everyone to sample, or have minicarrots in the fridge ready to eat. ➤ Organize a family walk or bike ride after dinner a few nights a week. Or plan to walk to school with your kids a couple mornings a week. ➤ Replace screen time with active time. Get everyone to agree to no more than two hours a day of TV, video games or computer time. Avoid putting a TV in your child's bedroom. Suggest active alternatives instead, such as tossing a ball or Frisbee, walking the dog, or visiting a recreation center near your home. ➤ Make sporting events a family affair. Go to your kids' soccer games and cheer them on. Then have them come to your games and cheer you on.

Remember: Your kids look to you as their role model. When you eat right and stay active, you teach valuable lessons about leading a healthy life.



For more healthy lifestyle tips, visit the National Institutes of Health Web site at www.nih.gov.

AT YOUR service

To reach customer service, call the toll-free number printed on your Blue Cross and Blue Shield of Oklahoma or BlueLincs® HMO ID card between 8 a.m. and 5 p.m., Monday through Friday.

To contact the main telephone switchboard in Tulsa, call (918) 560-3500.

To contact the main telephone switchboard in Oklahoma City, call (405) 841-9525.

To learn more, visit www.bcbsok.com.

FORMULARY **changes**

The prescription drug formulary is updated quarterly for Blue Cross and Blue Shield of Oklahoma and BlueLincs HMO members with a three-tier drug plan. The most current and complete formulary listing is available on the prescription drug information page for members at www.bcbsok.com. The following changes have been made to the formulary, effective Oct. 1:

Blue Cross and Blue Shield of Oklahoma formulary additions

- Albenza (albendazole tablets)
- Maxalt (rizatriptan tablets)
- Maxalt-MLT (rizatriptan orally disintegrating tablets)

Name brand products removed (generics remain)

- Precose (acarbose tablets)
- REQUIP (ropinirole tablets)
- Risperdal (risperidone tablets)

Name brand products removed (generics not available)

- Vytorin (ezetimibe/simvastatin tablets)
- Zetia (ezetimibe tablets)

Discontinued name brand products removed (generics not available)

- Augmentin (amoxicillin/potassium clavulanate chew tablets, 125 mg)
- Panokase (pancrelipase tablets)
- Panokase-16 (pancrelipase tablets)
- Procainamide (extended-release tablets, 1000 mg)
- Pronestyl SR (procainamide extended-release tablets, 500 mg)



Find the up-to-date prescription drug formulary at www.bcbsok.com/prescriptionDrug.html.

breast health 101

WHILE MOST BREAST CHANGES ARE NORMAL, IT'S IMPORTANT TO KNOW WHICH CHANGES MAY NEED A DOCTOR'S ATTENTION



Knowledge is power — you've heard these words before.

But they take on special significance when it comes to breast cancer.

Knowing what changes in your breast may be red flags of a cancerous tumor can — quite literally — save your life.

Likewise, knowing what changes are very likely normal — and therefore harmless — can give you important peace of mind.

PREVENTION: learn MORE ONLINE

The most recent preventive health care guidelines summary for Blue Cross and Blue Shield of Oklahoma is available at www.bcbsok.com. On the "Members" page, select "Health & Wellness" and then "Preventive Guidelines."

The guidelines include tips to help keep you and your family healthy. Please consult your physician if you have specific questions about your health; these guidelines are provided for information only.

Call the customer service number on your ID card, or refer to your summary plan description or member contract for specific questions regarding benefit coverage.

What follows will give you powerful insight into both breast cancer itself and harmless breast changes and conditions.

Q My breasts often feel fairly lumpy. Is this normal?

A Absolutely — for some women. Many women have some lumpiness or tenderness in their breasts that develops before or during their periods and then goes away.

Check with your doctor if you notice any lumps. He or she may suggest that you watch the lump for a month or two to see if it changes or goes away.

Most lumps — and other breast changes, for that matter — turn out to be what doctors call benign, or noncancerous.

Q If a lump isn't cancer, what is it?

A It might be one of several kinds of harmless growths. For example, it could be a cyst, a fluid-filled sac most apt to occur in women between ages 35 and 50.

Or it might be a fibroadenoma, a fairly common tumor among women in their late teens and early 20s, particularly black women. Though this type of tumor

KNOWING WHAT CHANGES ARE LIKELY NORMAL CAN GIVE YOU PEACE OF MIND.

does not become malignant, it often grows during pregnancy and breastfeeding.

Q Is nipple discharge normal?

A Nipple discharge is common in some women.

It's not typically a sign of cancer. Birth control pills and other medicines, such as sedatives, can sometimes cause discharge. Certain infections may also cause discharge. Talk to your doctor if you have nipple discharge for the first time or notice a change in the color or texture of the discharge.

Your doctor may send a sample of the fluid to be checked at a lab.

Q What other possible signs of breast cancer should I watch for?

A Alert your doctor right away if you have any of these symptoms: The skin of either breast puckers or dimples; either nipple shows signs of scaling or flaking; you notice an unexplained change in the way a breast feels or appears.

Q Why are regular mammograms so important?



RECONSTRUCTIVE SURGERY **benefits**

Your health plan provides coverage for certain reconstructive procedures related to a covered mastectomy.

For a covered person receiving benefits in connection with a mastectomy, the following treatments will be covered, if they are determined necessary by the attending physician and the patient:

- ▶ All stages of reconstruction of the breast on which the mastectomy was performed.
- ▶ Surgery and reconstruction of the other breast to produce a symmetrical appearance.
- ▶ Prostheses.
- ▶ Treatment of physical complications of the mastectomy, including lymphedema.

These benefits will be provided subject to the same deductible and coinsurance applicable to other medical and surgical benefits provided

under your plan. For more information concerning your mastectomy-related benefits, call the phone number on your ID card.

Oklahoma State law requires the following minimums for inpatient hospital services related to breast cancer and other breast conditions:

- ▶ Not less than 48 hours of inpatient care following a mastectomy.
- ▶ Not less than 24 hours of inpatient care following a lymph node dissection for the treatment of breast cancer.

However, coverage may be provided for a shorter inpatient hospital stay when the attending physician, in consultation with the patient, determines that a shorter hospitalization is appropriate.

BREAST CANCER — KNOW YOUR **risk**

Why one woman develops breast cancer and another doesn't is still something doctors often can't explain.

Indeed, most women diagnosed with cancerous tumors in their breasts have no clear risk factors for breast cancer other than growing older.

Aging does make women more vulnerable to the disease — most cases of breast cancer occur in women age 60 and older.

Still, studies show that certain factors in addition to age add to a woman's risk. Among them:

Family history. Having a mother, sister or daughter with breast cancer roughly doubles a woman's chance of breast cancer. Even so, as many as 80 percent of all women diagnosed with breast cancer do not have a family history of the disease.

Genetic risk factors. About 5 to 10 percent of breast cancers are thought to be tied to abnormal genes that women may inherit.

Breast changes. Certain abnormal changes in breast cells — ones that can be detected with a breast biopsy — increase breast cancer risk.

Early periods or late menopause. Women who have their first period before age 12 or who go through menopause after 55 have a slightly heightened risk of breast cancer.

Reproductive history. Not having children can slightly increase your risk, as can having your first child after age 30.

Hormone use. Hormone therapy after menopause — specifically long-term combination therapy, in which the hormones estrogen and progesterone are prescribed together — adds to risk.

Extra pounds. Being overweight or obese may heighten risk.

Alcohol. Drinking alcohol increases breast cancer risk.



MATERNITY **program** CHANGES NAME TO **SPECIAL BEGINNINGS**®

In 2009 the maternity program name will change to **Special Beginnings**® from **Healthy Expectations**®. This prenatal program is available to most members of **Blue Cross and Blue Shield of Oklahoma**. Important elements of the program include:

- ▶ 24-hour access to a **BabyLine**® staffed by maternity nurses.
- ▶ Educational materials specific to individual needs.
- ▶ A bi-weekly e-mail newsletter with information on a baby's development at specific stages.

The current way that the program works and all program elements will remain the same. Enrollment is easy and confidential. Just call the toll-free **Special Beginnings** number at **(877) 904-2229**.

Q Do I need to examine my own breasts?

A That's your call, according to guidelines from the American Cancer Society (ACS). At one time, monthly breast self-exams were recommended. The ACS now says self-exams are optional.

However, it's still important for women to become familiar with their breasts.

This can help you learn what's normal and be aware of any changes.

No matter what you decide, if you do discover something abnormal in your breast — either by chance or by doing a self-exam — call your doctor.

Following through is one of your most important defenses against breast cancer.

A Mammograms (or breast X-rays) are the best tool for detecting breast changes that may be cancer before they produce symptoms — such as a lump that hasn't grown big enough for you or your doctor to feel.

Studies show that women who take advantage of mammograms reduce their risk of dying from breast cancer.

Typically, doctors recommend that women have regular mammograms beginning at age 40. Your doctor can suggest a screening schedule that's best for you.

No screening test is foolproof, however, and mammograms can occasionally miss tumors. Thus, along with regular mammograms, regular breast exams by your doctor are still recommended.

Additional sources: National Cancer Institute; Susan G. Komen Breast Cancer Foundation

Sources: American Cancer Society; National Cancer Institute

IMPORTANT INFO ABOUT **privacy***



This notice informs you that

Blue Cross and Blue Shield of Oklahoma, a division of Health Care Service Corporation (HCSC), a mutual legal reserve company, an independent licensee of the Blue Cross and Blue Shield Association, and its affiliates** do not disclose to nonaffiliated third parties your nonpublic personal financial information — which we receive and maintain as described below — except as permitted by law.

We will not disclose your nonpublic personal financial information to nonaffiliated third parties even after our customer relationship with you may end, except as permitted by law. We do disclose or may disclose to our affiliates your nonpublic personal financial information that we receive.

How we protect information. Except as explained below, we restrict access to your nonpublic personal financial information to our employees who need to know to provide our products and services to you and your dependents. We maintain physical, electronic and procedural safeguards that comply with legal requirements to guard your nonpublic personal financial information.

Information we receive and maintain. We receive and use nonpublic personal financial information that we believe is necessary to administer our business, underwrite your policies, process your claims, ensure proper billing, advise you about our products and services, and provide you with customer service.

We may receive and maintain nonpublic personal financial information about you from several sources needed for these purposes, including from the following sources:

- ▶ Information we receive directly from you on insurance applications.
- ▶ Information we receive directly or indirectly

from you, your employer or benefits plan sponsor on applications or other forms, in writing, in person, by telephone or electronically (e.g., name, address, Social Security number, date of birth, marital status, dependent information, employment information or medical history).

- ▶ Information we obtain from your transactions with us, our affiliates, our agents or others (e.g., health care claims and encounters, medical history, eligibility information, payment information, service requests, and appeal and grievance information).
- ▶ Information we receive from consumer reporting agencies, such as your credit history.

YOUR privacy IS IMPORTANT. WE FOLLOW STRICT PROCEDURES TO KEEP YOUR INFORMATION SAFE.

Information we disclose. We do not disclose nonpublic personal financial information to anyone, except with your consent or as otherwise permitted by law.

We disclose or may disclose all of the nonpublic personal financial information we collect and maintain about you within HCSC, its affiliates and nonaffiliated third parties, as permitted by law.

We also may disclose information about you to persons or organizations inside or outside HCSC and its affiliates, as permitted by law, including companies that perform marketing services for us or with whom we have joint marketing agreements.

Companies that provide services or market for us. We contract with non-affiliated third parties to perform functions or services, such as claims management and

administration, marketing on our behalf and joint marketing agreements. We may disclose your nonpublic personal financial information described above to the following nonaffiliated third parties with which we contract:

- ▶ Insurance producers, brokers and agents.
- ▶ Financial services companies (e.g., other insurance companies and banks).
- ▶ Reinsurers and stop-loss carriers.
- ▶ Other entities, as permitted by law.

No other disclosures to nonaffiliated third parties. We do not otherwise disclose nonpublic personal information about you to nonaffiliated third parties except as referenced above.

Confidentiality and security. We follow strict procedures with respect to protecting the confidentiality and security of nonpublic personal financial information we collect. Only trained staff members who perform necessary functions to administer our business have access to nonpublic personal financial information.

In addition, we have security practices and procedures in place to ensure the confidentiality of nonpublic personal financial information.

*This notice is required by the Oklahoma Insurance Commissioner's Privacy Rule. This is not a Health Insurance Portability and Accountability Act (HIPAA) Notice of Privacy Practices. For a copy of the HIPAA privacy notice, you may visit www.bcbsok.com or call (866) 398-2200.

**HCSC's affiliates in Oklahoma: This notice is provided on behalf of HCSC's Oklahoma affiliates, including Fort Dearborn Life Insurance Co., BlueLinc HMO, GHS Property and Casualty Insurance Co., GHS Fire Insurance Co., and GHS General Insurance Agency, Inc. You may receive multiple copies of this notice if you are a policyholder with more than one of the companies listed above.

This notice is provided to customers of Blue Cross and Blue Shield of Oklahoma pursuant to Oklahoma Administrative Code 365:35-1-11 — Privacy of Consumer Financial and Health Information Regulation.

THE SURVEY **results** ARE IN

Blue Cross and Blue Shield of Oklahoma conducts an on-going telephone survey to solicit members' opinions regarding their health plan. Every month members are interviewed about their interactions with their health plan and experiences with physicians and hospitals. (Please refer to the chart

at the right for our most recent annual results.)

An analysis of 2007 responses indicates the importance of health plan benefits in members' overall ratings. The services provided by the health plan, including claims payment and follow-up by customer service representatives,

also are key factors.

Blue Cross and Blue Shield of Oklahoma uses survey results to focus quality improvement efforts on areas that are important to our members. The survey program also provides an internal competitive benchmark to assess progress in the market over time.

2007 customer satisfaction survey

Percentage answering favorably	HMO	PPO	Total
Overall service	82.3	77.2	77.6
Health plan benefits	79.7	82.3	82.2
Likelihood to stay	73	86	85.6
Likelihood to recommend	75.4	87.5	87.1
Value of health plan	80.8	86.3	86.1
Overall rating	81.6	88.6	88.4

