

# Health Advantage

# DEPENDENT Application for Out of Area Classification

(for services covered through BlueCard Program)

Dependents of active employees that travel, live, or work outside the Service Area (State of Arkansas) for more than 90 days may be eligible for a temporary Out of Area Classification. If approved, the Member uses his/her Health Advantage ID Card to access services covered by Health Advantage. Services are covered at the In-Network benefit level when provided by **BlueCard** providers (Blue Cross and/or Blue Shield Traditional Network providers) and billed with the XCH prefix and the Member's ID number through the Local health plan. Claims are routed electronically to Health Advantage. If approved for payment, the Member's out-of-pocket expenses are limited to the Member's In-Network Deductible, Copayment and/or Coinsurance. The Member is responsible for the difference between the billed and allowed charges for services provided by non-participating BlueCard providers. Renewal is required annually.

## APPLICATION FOR OUT OF AREA CLASSIFICATION

Subscriber ID # if current member (leave blank if new enro	llee)	
Subscriber Name	SSN	
	Home Phone	
Address	Work Phone	
Group name	Group number	

## Application is being made for which of the following: (Check one - One member per application)

Dependent Student attending school outside the State of Arkansas for at least 90 consecutive days.

Dependent Child living outside the State of Arkansas for at least 90 consecutive days.

Dependent Spouse living outside the State of Arkansas for at least 90 consecutive days.

#### Member Information: (Member eligible for Out of Area Classification)

Member name			
Member SSN	_Date of Birth	_Phone#	
Mailing Address (ID Card and benefit information mailed to the Memb			
Period requested: Effective date	End/Renewal da	ate	
If Dependent Child (age 18 and under), parent or guardian name			
If dependent student, name/location of school		# hrs	
Subscriber Signature		Date	
For Health Advantage Office Use Only: Class Code New Application Renewal Application			
Approved D Not approved Effective date	Expiration	date	
Group Renewal Date	Application Renewal date	e	
Health Advantage Signature (Signed copy of application mailed to Subscriber)			
Mail: Health Advantage Membership, P.O. E	30x 8069, Little Rock, AR 72203	B-8069 FAX:501-301-6869	

## **OUT-OF-SERVICE-AREA COVERAGE – BLUECARD PROGRAM**

#### Members Traveling Outside of Service Area

Health Advantage members have access to the BlueCard program for emergency and urgent care when traveling outside the service area (outside Arkansas, but within the United States). Services must be received from a Blue Cross and/or Blue Shield provider listed in the BlueCard Traditional Network. "Claims are billed with the applicable prefix (example: XCH, TYZ, XCW, BTU or HBS). This will change the Traditional network to the PPO network on any prefix besides the XCH. Medical services other than emergency care or urgent care through the BlueCard program must first be authorized by the member's PCP or approved by Health Advantage to be covered at the in-network benefit level.

#### Employers Living Outside of Service Area (more than 90 days)

Health Advantage approves for employees that live outside the service area (outside Arkansas, but within the United States) for more than 90 days to be eligible for a special **out-of-area classification**. The member uses his/her Health Advantage ID card to access services covered by Health Advantage on the member's group health plan. Services are covered at the in-network benefit level when provided by a Blue Cross and/or Blue Shield provider participating in the BlueCard Traditional Network. Claims are billed with the XCH prefix and member's ID number through the local health plan and routed electronically to Health Advantage. If approved for payment, the member's out-of-pocket expenses are limited to the member's in-network deductible, copayment and/or coinsurance. The member is responsible for the difference between the billed charge and allowed charge for services provided by non-participating BlueCard providers.

#### Dependents Eligible for the Out-of-Area Classification:

• **Dependent students** attending school outside of Arkansas, but within the United States for at least 90 consecutive days. Renewal is required annually.

• **Dependent spouses and children** living outside of Arkansas for at least 90 consecutive days. Renewal is required annually.

The subscriber must complete the appropriate application to request the out-of-area classification for their dependent. The completed application may be attached to the employee application on enrollment, faxed to 501-301-6869 or mailed to: Health Advantage Membership, P.O. Box 8069, Little Rock, AR 72203-8069. If approved, ID card(s) and benefit materials are mailed to the address provided. A copy of the application is mailed to the subscriber.

Additional BlueCard program information and out-of-area applications can be obtained at <u>HealthAdvantage-hmo.com</u>. To locate the nearest participating BlueCard Traditional Network provider, go to *www.bcbs.com* or call 1-800-810-2583 (BLUE).

**Note:** All covered services are subject to the Health Advantage allowable charge. When the BlueCard program is not utilized, members are responsible for the amount charged in excess of the allowable charge billed by out-of-network providers. **Note**: Please contact the provider locator number on back of the member ID card or log on to <u>www.BCBS.com</u>

August 2015