

When you join the Blue Cross of California family, you receive important advantages with The Power of BlueSM, the power that provides you with easy and affordable access to health care. At Blue Cross, we are committed to the belief that service begins with understanding and responding to our members' needs. When it comes to you, we know that keeping our commitment counts.

*Welcome to
Our Family*

We work hard to deliver premier services and comprehensive benefits that cover more than the most basic health care needs. We offer an extensive respected statewide network of doctors and hospitals so you and your family can expect ease and convenience when you need our services. Our Web site provides you with quick access to empowering health information 24 hours a day, seven days a week. And, we offer health and wellness services and healthy lifestyle programs in addition to your health care benefits.

Blue Cross is dedicated to member satisfaction and has been serving the needs of Californians since 1937. This dedication, coupled with our continued focus on stabilizing costs while facilitating financial security, has made us one of the largest and fastest growing health care companies in the nation. Our financial strength and stability means we will be there to finance the cost of your health care services when you need them. As proof of our strength, our parent company was designated by *Forbes* magazine as one of America's best large companies and selected by *Fortune* magazine as the most admired health care company for an unprecedented five consecutive years (1998-2002).

Additionally, the National Committee for Quality Assurance (NCQA) has awarded Blue Cross of California's Commercial PPO product, the first and only PPO in the state, an accreditation status of Full Accreditation for service and clinical quality that meet NCQA's rigorous requirements for consumer protection and quality improvement. Full Accreditation is the highest level of accreditation obtainable for the PPO product.

Welcome to The Power of Blue, the power that provides you with the kind of products, services and information you need to make a difference in your health care.

You Have Advantages

As you review this member enrollment kit, you will learn about the many advantages of our PPO plan and how this plan will best meet your personal and health care needs.

Here are just a few of the advantages of our PPO plan:

- Freedom of choice to access providers in the PPO network or any licensed physician, specialist or health care facility
- One of the largest statewide provider networks with more than 45,000 physicians and well over 400 hospitals participating in the Blue Cross PPO network
- No claim filing when using a network provider, since our PPO network providers bill Blue Cross directly
- Emergency coverage while traveling across the USA and throughout the world
- Health care benefits that are affordable and easy to use
- Emergency care covered anywhere in the world, 24 hours a day, 7 days a week

We know that choosing your health care is an important decision for you. We look forward to enrolling you as a Blue Cross of California member.

Your PPO Plan

How Your Preferred Provider Organization (PPO) Plan Works

When you enroll in the Blue Cross (Prudent Buyer Plan®) PPO plan, you have the greatest choice of health care providers because you may receive health care services from any licensed health care provider for your covered services.

Your PPO plan gives you the freedom to choose between a Blue Cross PPO network provider and a non-network PPO provider (a provider who does not belong to the Blue Cross PPO network). The main advantage, however, is that you can receive significant cost savings when you visit Blue Cross PPO network health care providers for covered services. And, Blue Cross PPO network providers have agreed to submit any claims to Blue Cross for you.

We make using your plan simple!

1. After enrolling in a Blue Cross PPO plan, you **select health care providers for yourself and each enrolled family member** from our **PPO network of contracted providers**. Our network consists of over 45,000 physicians and over 400 hospitals, so your current doctor may already belong to the Blue Cross PPO network.
2. Or, you may choose to “go to an out of network provider” (a provider who does not belong to the Blue Cross PPO network) and pay a larger share of the cost.

Choosing Your Health Care Provider

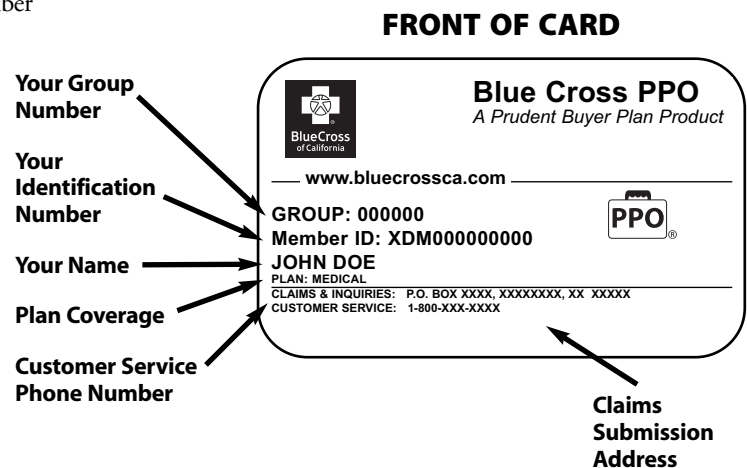
Choosing your health care provider is easy!

- Check our online provider directory at www.bluecrossca.com. At the Home Page, click on *Provider Finder*. Follow the prompts for *Large group* members to locate the name of your health care provider. You can search by a provider’s name or if you are looking for a doctor in a certain city or by a specific specialty—you can do that too!
- Check the provider directory that is part of your member enrollment kit and choose your health care provider. If you did not receive a provider directory, you may request a copy or a list of health care providers in your area by calling the toll-free Customer Service number that is printed on your ID card.

Your Blue Cross ID Card

After enrolling in the PPO plan, your member ID card will be forthcoming. Always keep your member ID card with you because it is proof of your coverage. Your ID card lists:

- Your office visit copay amount (if applicable)
- The toll-free Customer Service phone number
- Additional Blue Cross benefits



Getting Started – Scheduling Your Doctor Visit

- Once you have located a PPO network health care provider, call the number to schedule an appointment.
- At the time of service you may be asked to make a payment. In most instances, your Blue Cross PPO network health care provider will wait for the Explanation of Benefits (EOB) to determine how to bill you for their services. However, the provider may ask you for payment of your office visit copay (if applicable), your annual deductible amount that has not been satisfied, plus a percentage of charges that are not covered under your benefits.

Evidence of Coverage

Your Evidence of Coverage (EOC) is an important document that explains the details of your health care benefits, policies, and procedures, any limits to your coverage, what isn't covered and costs you will have to pay. Your EOC will be sent to you after enrollment.



Summary of Benefits

The Summary of Benefits is a condensed listing of your medical benefits highlighting your copay amounts, deductibles and any applicable benefit maximum amounts. A Summary of Benefits is part of your member enrollment kit. You should refer to your EOC for full details about your particular plan.

Annual Out-of-Pocket Maximum

The Annual Out-of-Pocket Maximum refers to the maximum amount that you will have to pay for expenses covered under your plan. After you reach your Annual Out-of-Pocket Maximum, you will not have to pay copays for some services for the rest of that calendar year. For a list of these services, please refer to your Evidence of Coverage.

Filing Claims

- If you receive care from a PPO network provider, you do not need to submit a claim. The network providers have agreed to handle this process for you.
- If you receive services from a non-network PPO health care provider, you will need to submit a claim to Blue Cross of California for reimbursement. You can get a claim form from your employer, by calling Customer Service or you may download and print a claim form by going to our Web site at www.bluecrossca.com. Click on *Members, Groups of 51 or More* and *Forms*.

Use a separate claim form for each patient and service provider.

Occasionally, a claim is denied payment. If this happens, you and your physician will receive an explanation of denial. If you believe your claim should be paid, please call the toll-free Customer Service number on your ID card. This information is also included in your Evidence of Coverage.

Your Explanation of Benefits (EOB)

After your claim is processed, you will receive an Explanation of Benefits (EOB). The EOB summarizes the services you received, how the claim was paid and what portion of the cost you will need to pay. The EOB is designed to provide you with the information you need to understand the medical costs you are responsible for and what costs will be paid by Blue Cross. It's our way of continuing to provide you with quality Customer Service.

New Technology

Our Medical Policy and Technology Assessment Committee reviews and determines if new technology meets criteria for medical necessity, or if it is considered investigational. The Medical Policy and Technology Assessment Committee also provides guidance and validation of medical policy.

We Listen to Our Members

At Blue Cross, we listen carefully to what members tell us they need so they can understand their health care. Some of the more important benefits that members use are outlined on the following pages, including informative and easy-to-follow charts to help **you** better understand how to use your benefits when you need them.

PPO Benefits

PPO—Emergency Care

The Power of Blue is there when the unexpected happens to you or your enrolled family member(s). Blue Cross of California PPO members are asked to follow these guidelines when they believe they need emergency care.

An emergency is a sudden, serious, and unexpected illness, injury or health problem (including sudden and unexpected severe pain). This includes any illness, injury or health problem you reasonably believe could endanger your health if you don't receive medical care right away. **PPO members are covered 24 hours a day, seven days a week for emergency services anywhere in the world.**

<i>Your Benefits</i>	<i>How To Receive Them</i>
Medical emergency facility	Because medical emergencies require immediate attention, call 911 or go for immediate treatment at the closest emergency facility. If you are not admitted, you will need to pay the emergency room deductible.
Emergency admission to a Blue Cross PPO network hospital	Subject to the availability of Blue Cross PPO network health care providers on staff at the hospital, you may request that all services be performed by PPO network providers to incur less cost. If you are admitted to a PPO network hospital, your emergency room deductible will be waived. The hospital will notify Blue Cross of your admission. Blue Cross will then coordinate your care with your PPO network physician.
Emergency admission to a non-network hospital	If you are admitted to a non-network hospital, your emergency room deductible will be waived. You, your family or the hospital should contact Blue Cross within 24 hours of your admission. The Customer Service toll-free number is printed on your member ID card.

PPO—Urgent Care

Non-emergency or Urgent Care situations may still require immediate medical attention. Blue Cross of California PPO members are asked to follow these guidelines when they believe they need Urgent Care.

Urgent Care is service you receive for a sudden, serious, or unexpected illness, injury or condition that is not considered an emergency. Urgent Care is needed right away to relieve pain, discover what is wrong or treat the immediate health problem.

<p><i>Your Benefits</i> Urgent Care</p>	<p><i>How To Receive Them</i></p> <p>Get the medical care you need from the nearest Urgent Care or emergency facility</p> <ul style="list-style-type: none">• If you receive services from a provider in the Blue Cross network, the provider will file the claim form for you.• If you receive services from a non-network PPO provider, you will need to pay for the medical services when you receive them. You would then file a claim to Blue Cross. Please save all relevant statements and attach to the claim form for reimbursement.
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PPO—Non-Emergency Inpatient Hospital Services

Your Blue Cross PPO network physician helps ensure that your hospital admission for non-emergency services and outpatient surgery will be covered.

<p><i>Your Benefits</i> PPO Hospital Services</p>	<p><i>How To Receive Them</i></p> <p>Before you're admitted to a hospital for non-emergency services, including hospital admission for outpatient surgery, your Blue Cross PPO network physician will make sure your admission will be considered medically necessary.</p>
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PPO—When Traveling or Temporarily Residing Outside California

If you are traveling outside California or out of the country, you and your enrolled dependents can access care from Blue Cross Association participating health care providers. We've got you covered when you're away from home!

<p><i>Your Benefits</i></p> <p>Emergency care—when outside your home state You are covered 24 hours a day, seven days a week, regardless of your location.</p> <p>Please note: Your benefits may only cover emergency care services when you are outside your home state. Please refer to your Evidence of Coverage for benefit details.</p> <hr/> <p>Protection—when traveling or temporarily living outside your home state BlueCard is a Blue Cross product that enables members traveling outside California to access a broader network of doctors and hospitals at discounted rates through other Blue Cross Plans.</p> <p>The BlueCard® Program provides continued PPO benefits for you and your enrolled dependents (even out-of-state students) when traveling or temporarily residing outside your home state.</p>	<p><i>How To Receive Them</i></p> <p>If you have a medical emergency in the USA, call the 911 emergency response system (if you are in an area where the system is established and operating) or seek immediate medical attention at the closest emergency facility. If you are not admitted to the hospital, you will need to pay the emergency room deductible.</p> <p>If admitted, your emergency room deductible will be waived. Also, if you are admitted, please contact Blue Cross within 48 hours of your admission. The Customer Service toll-free number is printed on your ID card.</p> <ul style="list-style-type: none">• If you receive services from a facility in the national Blue Cross Association network, the provider will file the claim for you.• If you receive services from a non-network PPO provider, you will need to pay for the emergency services when you receive them. You would then file a claim to the local Blue Cross Association plan in the state where you received services. Please save all relevant statements and attach to the claim form for reimbursement. <hr/> <p>To locate BlueCard providers, just call toll-free (800) 810-BLUE (2583). Please note that the number is printed on your ID card for handy reference.</p> <p>You can also find Blue Cross Association PPO providers at www.bluecrossca.com. Click on <i>Provider Finder</i> and then <i>Out of State Providers for Members with BlueCard</i>.</p> <ul style="list-style-type: none">• If you receive services from a provider in the national Blue Cross Association network, the provider will file the claim form for you.• If you receive services from a non-network PPO provider, you will need to pay for the medical services when you receive them. You would then file a claim to the local Blue Cross Association plan in the state where you received services. Please save all relevant statements and attach to the claim form for reimbursement.
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PPO—When Traveling Outside the USA

Your Benefits

Inpatient services—when traveling outside the USA

You may access international Blue Cross Association participating hospitals for inpatient services.

Please note: Your benefits may only cover emergency care services when you are outside the USA. Please refer to your Evidence of Coverage for benefit details.

Outpatient emergency care—when outside the USA

Always carry your Blue Cross ID card when traveling outside the USA.

You are covered 24 hours a day, seven days a week, regardless of your location.

How To Receive Them

Be prepared for the unexpected, call (800) 810-BLUE (2583) before leaving the USA. A BlueCard Coordinator will provide you with a list of Blue Cross Association participating hospitals in several international cities.

For inpatient care at a network BlueCard hospital, you pay only the applicable deductibles and copays. The provider files the claim for you.

For inpatient care at a non-network hospital, you will need to pay the hospital at the time you receive services and then submit a claim for reimbursement.

To print a claim form, go to www.bluecrossca.com and click on *Provider Finder* and then *Out of State Providers for Members with BlueCard* and follow the prompts.

If you need emergency medical care, go to the nearest hospital. Call BlueCard at (800) 810 BLUE (2583) or call collect (804) 673-1177 if you are admitted to the hospital.

If you are not admitted to the hospital, you may be asked to pay for emergency services when you receive care. Before leaving the emergency facility, please request an itemized bill, which you will need to include when filing the claim to Blue Cross of California.

For all outpatient and professional medical care, you pay the provider and submit a claim. To print a claim form, go to www.bluecrossca.com and click on *Provider Finder* and then *Out of State Providers for Members with BlueCard* and follow the prompts.

PPO—Medical Management Program

The Blue Cross Medical Management Program helps control your costs for services and ensures you are covered for non-emergency hospital and outpatient surgery admissions.

<p><i>Your Benefits</i></p> <p>Blue Cross conducts utilization review, a process for non-emergency hospital admissions and outpatient surgery.</p> <p>Non-emergency hospital admissions and outpatient surgeries from non-network PPO health care providers also require pre-service utilization review to determine medical necessity.</p>	<p><i>How To Receive Them</i></p> <p>Blue Cross PPO health care providers will coordinate your utilization review so you can focus on your health! Blue Cross' toll-free phone number, identified as "For Pre-Authorization or Pre-Service Review" is printed on the back of your ID card.</p>
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PPO—Related Outpatient Medical Services and Supplies

Blue Cross of California does not have contracts with some types of health care providers, including ambulance services or hospice care. These providers of service are called "Other Health Care Providers".

<p><i>Your Benefits</i></p> <p>The health care providers who fall under the category of other Health Care Providers are neither Blue Cross PPO network or non-network PPO health care providers.</p>	<p><i>How To Receive Them</i></p> <p>Get the service you need for your health care situation. Because these services are neither network nor non-network, your portion of costs may be different. Please check the payment rates by reviewing the Summary of Benefits in your member enrollment kit.</p>
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PPO—Behavioral Health Care

If Blue Cross of California provides your mental health/substance abuse benefits, you have coverage for mental health and substance abuse care including severe mental and nervous disorders. The Blue Cross Behavioral Health Network (BHN) contracts with PPO network physicians and other health care providers and institutions that have designated mental health specialties.

<p><i>Your Benefits</i></p> <p>Mental health and substance abuse care benefits include, but are not limited to, severe mental and nervous disorders as described by your specific plan.</p>	<p><i>How To Receive Them</i></p> <p>It is important to call Customer Service at the toll-free number on your ID card, prior to seeking behavioral health services, to verify that Blue Cross of California provides these services for your plan. You may choose a BHN physician or health care provider and then call directly to make your appointment. When you call, verify that they still participate in the BHN network.</p> <p>You can choose a BHN professional from the provider directory that is part of your member enrollment kit. If you do not receive a copy, you may request one by calling Customer Service at the toll-free number on your ID card.</p> <p>You may choose a BHN health care provider online at www.bluecrossca.com. Click on <i>Provider Finder</i>. Follow the prompts for <i>Large group</i> members to choose a Blue Cross Behavioral Health Network (BHN) health care provider.</p>
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PPO—Valuable Tools and Services

With the Power of Blue, you are able to play an active role in gaining knowledge that will help you make informed choices about your health care and help create a healthy lifestyle for you and your family. A wide range of services, tools and products are available to help you meet personal fitness and wellness goals. The program builds on existing Blue Cross of California preventive and wellness programs. We give you plenty of options that are part of a comprehensive approach to health.

Services

Baby ConnectionSM is a pregnancy program that provides mothers-to-be with access to specialized obstetrical and neonatal nurses who can answer any questions or concerns regarding the member's pregnancy and newborn.

Health Improvement Programs offer an innovative, professional team approach to helping you and your doctor manage asthma, Congestive Heart Failure (CHF) and diabetes.

Health Coaching helps program participants achieve dramatic results. Health Coaches are Registered Nurses (RNs) who work together with participants to assess individual needs, and identify the behavioral changes they are ready and able to make, to improve their condition. Participants may work with a team of health care providers that include RNs, dietitians, respiratory therapists, health educators and exercise physiologists.

MedCall[®] is a free service. If you have health care questions, call MedCall. Registered Nurses will answer your questions confidentially, 24 hours a day, seven days a week. MedCall nurses can also connect you to an audio library that contains a wealth of health care information.

SubimoTM is an interactive Web site providing members with medical decision making resources and information, 24 hours a day, seven days a week

The *Subimo Healthcare Advisor* offers information to assist members when preparing for a medical procedure or managing a medical condition.

Subimo also helps you research and determine which hospital may be best suited to your personal preferences.

How To Receive Them

Call toll-free, (800) 769-4896 for more details and receive a free informational package offering discounts.

Visit our Web site, www.bluecrossca.com, and click on *Healthy Living* then *Baby Connection* to enroll online and to receive additional free pregnancy information and resources.

The programs include Health Coaching to high-risk members, and educational mailings to low-risk members. (If your employer provides this coverage.) Call toll-free, (800) 522-5560 for more information.

Call toll-free, (800) 700-0196, to reach a MedCall Registered Nurse. The toll-free number is printed on your ID card.

To access Subimo's Web site, Log on to www.bluecrossca.com and login to *Member Services*.

Enter your certificate number and your personal identification number (PIN) and select Subimo from the other menu options.





Please note, if you do not have a PIN, you may request one at the *Member Services* page or you can call Customer Service at the toll-free number printed on your ID card.

Note: The Subimo Web site is owned and operated by Subimo, LLC. Subimo, LLC is solely responsible for its Web site and is not affiliated with Blue Cross of California or any affiliate of Blue Cross of California.

PPO—Valuable Tools and Services

Consumer Cost Guide lists all of our network hospitals (California only) and assigns each hospital one to four “price tag” icons. These icons correspond to the average cost for hospital inpatient (when you stay overnight) and outpatient (when you have a procedure and go home) services.

The number of price tags indicates the range of hospital costs from least expensive (one price tag) to most expensive (four price tags) and corresponds to the average cost of services for a hospital when compared to other hospitals in the network.

-  In general least expensive
-  In general less expensive
-  In general more expensive
-  In general most expensive

The Consumer Cost Guide can be found in your Provider Directory.

You can also access the Consumer Cost Guide online. It is built right into the *Provider Finder's* list of hospitals.

To access the *Provider Finder*:

1. Logon to www.bluecrossca.com and click on *Provider Finder*.
2. Select *Large group*.
3. Select “Prudent Buyer (PPO/EPO) Hospitals”.
4. Enter your zip code (or city) and the surrounding area information.

The Consumer Cost Guide provides a guideline only. The cost indicators are based on general price relativity; specific experience may differ due to a varied range of services and diagnoses.

Valuable Tools and Services

HealthyExtensions

Our HealthyExtensionsSM program offers health and well being topics that are relevant to your lifestyle. Stay healthy with HealthyExtensions. HealthyExtensions allows you to tap into discounts from independent vendors and practitioners offering products and services they believe could positively influence your health. To take advantage of these discounts, simply show your ID card when purchasing items or inform the product or service provider that you are a Blue Cross member.

Discounted Products And Services

Save on **Alternative Health and Nutritional Supplements** that include health and wellness products, vitamins, supplements and interactive self-help programs. Some of these vendors include: The Chopra Center at La Costa Resort and Spa, HealthyroadsTM and HealthyDrugstore.comTM.

Take advantage of **Family and Self** discounts on vacation resorts, online seminars that enable you to overcome the attachments to smoking or drinking and personalized gifts for everyday occasions. Some of these vendors include: Club Med[®], Selfhelpworks.com and Things Remembered[®].

The **Online Pharmacy** offers *drugstore.com*, an online discount program for non-prescription items and a variety of health and wellness information.

Take advantage of **Dental and Hearing Products and Services** and benefit from a discount on a revolutionary one-hour professional teeth whitening treatment as well, as free hearing screenings, hearing aid evaluations and savings on hearing aids. Some of these vendors include: BriteSmile[®], BeltoneTM Hearing Centers and Newport Audiology.

Enjoy better **Fitness and Nutrition** with discounts on health club memberships, safe and rapid weight loss programs as well as, rehabilitation and exercise products. Some of these vendors include: GlobalFit, Lindora Lean for LifeTM and TherapyZone.com[®].

Vision Services and Products offer a choice of vision care companies that provide a range of vision correction options including prescription eyewear, LASIK surgery, contact lenses, sunglasses and accessories as well as discounts on eye exams. Some of these vendors include: EyeMed Vision Care[®], Cole Managed Vision and TruVisionTM.

Health and Wellness Practitioners

Receive special discounts averaging 10-25 percent offered by selected providers of the following services:

Hypnotherapy can be used to improve confidence, overcome unwanted habits and reduce stress.

Massage Therapy is intended to help the body heal itself and to increase health and well being.

Registered Dieticians can help you achieve your nutritional goal of healthy eating.

Yoga is a way of life that includes philosophy, physical exercise, breath work and meditation.

For More Information

Visit www.bluecrossca.com. Click on *Healthy Living* and then *HealthyExtensions* for a list of selected health and wellness vendors and practitioners.

Click on any of the links to learn about the products and services being offered, or how to obtain your discount.

If you do not have access to the Internet, you can always call Customer Service, toll-free, at the number on your ID card.

(Note: Blue Cross does not necessarily endorse these services and they are not benefits of your coverage. These discounts may be changed or withdrawn at any time without notice.)

Valuable Tools and Services

Online Member Services

Need information that's fast and available 24 hours a day, seven days a week?

Go to the Blue Cross of California Web site, www.bluecrossca.com, for quick and easy access to product, service and health care provider information, 24 hours a day, seven days a week.

To use the interactive Member Services pages, you will need to request a PIN (Personal Identification Number) from Blue Cross.

<p><i>If you need to ...</i></p> <p>Request your Personal Identification Number (PIN) to gain confidential access to your personal plan benefits</p> <hr/> <ul style="list-style-type: none">• Find a health care provider• Access to the Web site Subimo• Verify enrollment of family members• Review your health care benefits• View the status of your claims• Request a replacement ID card• View a glossary of health-related terms• Change your PIN• Download and print a grievance form <hr/> <p>Download and print a claim form</p>	<p><i>Here's how ...</i></p> <p>Logon to the Blue Cross Web site, www.bluecrossca.com and click on <i>Request a Pin</i></p> <p>Or</p> <p>You can call Customer Service, toll-free, at the number on your ID card</p> <hr/> <p>Logon to the Blue Cross Web site, www.bluecrossca.com and login to <i>Member Services</i>. With your PIN, you can login to <i>Member Services</i> to gain confidential access to all of your Blue Cross accounts Simply click on the relevant hotlink</p> <hr/> <p>Logon to the Blue Cross Web site, www.bluecrossca.com. Click on <i>Members</i> and then <i>Groups of 51 or More</i> and <i>Forms</i></p>
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Member Facts

Our partnership with you as a valued member is important. The following legal information details how your Evidence of Coverage outlines the exact terms and conditions of your coverage, your rights and responsibilities as a Blue Cross member and how we are committed to protecting your privacy.

Evidence of Coverage and Disclosure Form

Your Evidence of Coverage (EOC) contains important terms of your health plan. It explains the exact terms and conditions of your coverage, including the Exclusions and Limitations of your plan. You should receive a copy after enrolling in your Blue Cross of California plan.

Coordination of Benefits

If you have more than one group or group-type plan, the total amount of payments for medical care will not exceed 100% of charges for actual covered services. For additional information regarding Coordination of Benefits, please refer to your Evidence of Coverage.

Third Party Liability

Blue Cross of California is entitled to reimbursement of benefits paid if you recover damages from a legally liable third party. Examples of third party liability include car accidents and work-related injuries. For complete information regarding Third Party Liability, please refer to your Evidence of Coverage.

Arbitration Agreement

If your coverage is under a private employer plan governed by ERISA (Employment Retirement Income Security Act of 1974), certain disputes may not be subject to the following arbitration provisions:

Any and all disputes between you (and/or any enrolled family member) and Blue Cross of California, including claims for medical malpractice, must be resolved by binding arbitration, if the amount in dispute exceeds the jurisdictional limit of the Small Claims Court, and not by lawsuit or resort to court process, except as California law provides for judicial review of arbitration proceedings. Under this coverage, both the member and Blue Cross are giving up the right to have any dispute decided in a court of law before a jury. Blue Cross

and the member also agree to give up any right to pursue on a class basis any claim or controversy against the other. For more information regarding binding arbitration, please refer to your Evidence of Coverage .

If you are enrolled in an employer-sponsored benefit plan that is subject to ERISA (Employee Retirement Income Security Act of 1974, 29 U.S.C. section 1001, et seq.) any dispute involving an adverse benefit determination for a health claim may not be subject to mandatory binding arbitration. However, any dispute with respect to an adverse benefit determination for a health claim may be submitted to voluntary binding arbitration after the ERISA claim appeal process is completed.

Privacy Practice

Blue Cross is fully committed to protecting our member's privacy. Our complete Notice of Privacy Practices provides a comprehensive overview of the policies and practices we enforce to preserve our members' privacy rights and control use of their health care information, including: the right to authorize release of information; the right to limit access to medical information; protection of oral, written and electronic information; use of data; and information shared with employers. You may obtain our complete Notice of Privacy Practices from our Web site at www.bluecrossca.com or by calling the Customer Service number listed on your member ID card.

Continuation of Care from a Terminated Health Care Provider

You may request that services from a terminated health care provider continue to be covered for certain acute or serious chronic conditions, or for a high-risk pregnancy or a pregnancy that is in the second or third trimester. For more information, please refer to your Evidence of Coverage or call Customer Service at the toll-free number on your ID card.