

How to Get the Most from Your Health Plan

| Health Saver Plans



Do well. Do right.®



Dear GuideStone Participant,

An informed health care consumer is a savvy health care consumer — one who makes good choices that can help save time and money. GuideStone is committed to keeping you informed about how your medical plan works and ways you can help keep costs down while receiving the highest quality care.

How you use your health plan makes a big impact on how much it will cost you in the future. By making careful choices for your family's health care, you may be able to keep your out-of-pocket expenses down and minimize rate increases in the future.

Inside this brochure, you'll find more valuable information that will help you make the most of the quality health care plan you've chosen through GuideStone.

If we can answer any questions or help you better understand your plan, you can reach a Customer Relations specialist at **1-888-98-GUIDE** (1-888-984-8433). Specialists are available Monday — Friday, 7 a.m. to 6 p.m. (CST).

Thank you,
Insurance Operations

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Contact Information

GuideStone	1-888-98-GUIDE (1-888-984-8433)	www.GuideStoneInsurance.org
Highmark BCBS	1-866-472-0924	www.highmarkbcbs.com
— Find a doctor	1-800-810-BLUE (1-800-810-2583)	www.highmarkbcbs.com
— Blues on Call	1-888-258-3428	www.highmarkbcbs.com
— Baby Blue Prints Program	1-866-918-5267	www.highmarkbcbs.com
Medco	1-800-555-3432	www.medco.com
PNC Global Investment Servicing	1-877-245-0116	Refer to Highmark's Web site

ID cards

When you enroll in a new GuideStone medical plan, you receive two different ID cards: one for your medical benefits, and one for your prescription drug benefits.

Provide your physician and other health care providers with your medical ID card to eliminate delays in claims processing. Your ID card contains information including copay amounts and important phone numbers. If you lose your medical ID card or need additional cards, contact Highmark Blue Cross Blue Shield at 1-866-472-0924.

You will present the prescription drug ID card to your pharmacist for retail prescription service (administered through Medco Health Solutions, Inc.). For additional prescription drug ID cards, contact Medco Health at 1-800-555-3432.

Blue Cross Blue Shield PPO network

About the Network. By using providers in the Blue Cross Blue Shield PPO network, you will realize significant benefits such as claims filed directly with Highmark and discounts up to 40% or greater that reduce your portion of total charges. You can locate participating providers at www.bcbs.com or by calling 1-800-810-BLUE (2583). It is important to verify that your providers continue to participate in your PPO network each time you receive services.

Medical needs while traveling. Within the United States, you're covered whether you need care in urban or rural areas. Search for network providers just like you would at home. If you need to be hospitalized, call the number on the back of your medical ID card (1-866-472-0924) for pre-certification or pre-authorization (in the U.S. or overseas).

Outside of the United States, you have in-network access to doctors and hospitals in more than 200 countries and territories around the world through the BlueCard Worldwide Program. If an overseas doctor or hospital does

not participate in the BlueCard Worldwide Program, your claims will be paid as out-of-network. Always call Highmark directly or visit www.bcbs.com/bluecardworldwide for claims instructions or to search for participating providers.

Explanations of Benefits (EOB). EOBs are mailed to you after you receive treatment and file a claim. They explain how benefits were paid under your health plan. You may also view EOBs electronically at www.highmarkbcbs.com. If you have questions about how your benefits were paid, call GuideStone's dedicated number at Highmark Blue Cross Blue Shield® at 1-866-472-0924.

Prescription drugs

The prescription drug benefit included with the Health Saver plans are administered through Medco Health Solutions, Inc.

Deductibles. The Health Saver plans have a combined medical and prescription drug deductible for both individual and family coverage. Until the deductible is satisfied, you pay the total cost for your prescription drugs.

You can meet your deductible through any combination of local pharmacy and mail order prescriptions. No one family member is responsible for more than the individual deductible. Once a family member meets the individual deductible, his or her prescription drugs are covered according to your plan's coinsurance. Other family members must continue to pay toward the remaining family deductible until it is met.

If a preferred or non-preferred drug is purchased when a generic is available, only the cost of the generic drug will be credited toward your deductible or out-of-pocket expenses. After the deductible is met, you must pay the cost difference between the preferred/non-preferred drug and its generic equivalent, if available.

It is important to show your ID card to your pharmacist each time you purchase a prescription drug. By using your prescription drug benefit, you will have access to **discounted drug pricing** through Medco Health. In addition, this allows the plan to credit your prescription drug expenses toward your deductible. You can track how close you are to meeting your deductible by logging on to www.highmarkbcbs.com and selecting “View your expense summary.”

Transferring existing prescriptions. If you are new to a GuideStone plan but have existing prescriptions on file **with Medco** through your previous medical plan, you may have the Medco prescription on file transferred to the new plan. For prescriptions purchased through Home Delivery, contact Medco at the number on the back of your **prior ID card** (for your previous plan year) and provide them with your new Member ID number (located on your new ID card). You must wait until the new plan is in effect before transferring your existing prescriptions.

Prior Authorization. The goal of Prior Authorization is to make sure each patient receives the appropriate medication at the right time. If your doctor prescribes a drug that requires prior authorization, a Medco pharmacist will discuss the prescription with your physician and determine coverage. If you are enrolling in a GuideStone medical plan for the first time and are currently taking medication for which you’ve already received Prior Authorization, you may call Medco Health (1-800-555-3432) to discuss how changing plans may impact your Prior Authorization.

To find out how your drugs are covered or to learn more about your prescription drug benefits, you may call Medco Health directly. Remember to identify yourself as a GuideStone participant. You may also visit www.medco.com to find a local participating pharmacy, refill mail order prescriptions, price a medication or find drug information including how your drug is classified on the plan.

To save money on your prescription drugs:

Ask your doctor to prescribe generics when appropriate and available. You'll pay a lower cost for generic drugs.

Use mail order for maintenance prescriptions. Ordering a 90-day supply through Medco's Home Delivery Pharmacy Service® can help you save time and money.

Online resources

As a GuideStone participant, you have a wealth of free health information at your fingertips. Whether you are looking for a health care provider or managing your claims, GuideStone can help with easy-to-use online tools and resources.

www.GuideStoneInsurance.org. Log into your GuideStone account to view your coverage summary and detailed medical plan documents. Medical plan booklets provide information on how your medical plan is administered. To see a summary of what services are covered and how benefits are paid, you can refer to your plan's specific schedule of benefits. Both are available on the Web when you log into your personalized MyGuideStone account, select the Insurance tab and then "Plan Booklets."

You can request a printed copy of your medical plan booklet and schedule of benefits by e-mail at Insurance@GuideStone.org or by calling toll free, **1-888-98-GUIDE** (1-888-984-8433).

www.highmarkbcbs.com. Your online account with Highmark gives you access to a wealth of information about your plan. Among the resources are:

- "Your Coverage" — research plan options, review your member information and benefits, get coverage information and request replacement identification cards.
- "Your Spending" — view claims, track your health care costs and get information about the costs of medical services.
- "Your Health" — access wellness tools, link to health care decision support, explore treatment options, and get information on lifestyle improvement and preventive health care recommendations.

- "Choose Providers" — Don't just choose a provider based on location. Highmark offers a wide range of information on doctors, hospitals and other health care providers, including in-depth profiles, credentials and quality performance data. When you use the provider directory, select "Advanced Search" to ensure you are looking for only doctors in the PPO Network.

Step 1 — (on Advanced Search Screen) enter your zip code and set distance parameters.

Step 2 — select the type of doctor or specialty you need, or search by doctor or facility name.

Step 3 — select "BCBS PPO" from the "Choose Your Product" dropdown menu. If desired, follow prompts to further filter your search.

You may also map your results or create a printable directory of your personalized search.

www.medco.com. Medco Health Solutions provides practical Web resources for you to efficiently manage your prescription drugs. On your member Web account, you can:

- Fill new or existing mail order prescriptions.
- Track your spending and how close you are to meeting your deductible.
- Price a medication and discover cheaper alternatives.
- Find generic equivalents for brand name drugs.
- Locate participating pharmacies.

Wellness benefits

Well Informed™ is a wellness support program available at no additional cost when you enroll in a GuideStone health plan. As part of our Well Informed program, you'll find:

- Educational resources.
- Money-saving tips.
- Chronic condition and health management programs.
- A Health Risk Assessment.
- Advice on creating a wellness program.
- A wide variety of other wellness tools.

Access Well Informed online at www.GuideStoneInsurance.org by choosing the Well Informed link on the right side of the page.

Wellness benefits, such as preventive care screenings, annual physicals and immunizations are included in your GuideStone medical plan. These benefits are based on Highmark's preventive care schedule. Eligible in-network wellness services are covered at 100% and are not subject to the deductible. There is no annual maximum benefit. Wellness services received from providers outside the PPO network are not covered. The general summary located on page 8 is not a complete list of the preventive care schedule provided under your plan. To determine if a specific procedure is covered under the wellness benefit, call Highmark Blue Cross Blue Shield at 1-866-472-0924.

Additional benefits at no cost

Blues on Callsm is a free benefit available when you enroll in a GuideStone medical plan. The program allows you to become more involved in your health care by providing you with access to registered nurses (Health Coaches) 24 hours a day, 7 days a week. Health Coaches are available for individual health information and support that may include discussions about:

- Medical conditions and treatment options.
- Tests, medications or medical procedures.
- Guidance in knowing what to ask your doctor to make the most of your visits.
- Additional questions after seeing a health care professional.
- The information you need to make treatment decisions.
- The severity of certain symptoms — whether it can be treated at home or needs professional treatment.

Blues on Call Health Coaches also assist with chronic-condition treatment support to help you manage your illness more effectively. On the Web, you can have a live chat with a registered nurse (Health Coach), research symptoms, read articles on treatment, and find local health and wellness and community resources, like hospital-based education and disease management programs. You may speak with a Health Coach by calling 1-888-258-3428. (Blues on Call is not a substitute for physician care).

Baby BluePrints® is Highmark Blue Cross Blue Shield's pregnancy support program. Its sole purpose is to help expectant families better understand every stage of pregnancy and make more informed care and lifestyle-related decisions. When you enroll you will gain access to individualized support throughout the pregnancy from a nurse Health Coach. You'll also receive a welcome packet including discount flyers, an immunization/preventive care chart and vouchers for free gifts. To enroll call Highmark at 1-866-918-5267.

Health Savings Accounts

The Health Saver plans are federally qualified high-deductible health plans. Participants may be eligible to open a Health Savings Account (HSA). If you are interested in information about opening an HSA, contact PNC Global Investing Services to request an enrollment packet (1-877-245-0116). You may also enroll in a Highmark BlueAccount HSA online at www.highmarkbcbs.com through your Highmark member account.

Other important information

HIPAA Privacy Notice. In compliance with the Health Insurance Portability and Accountability Act (HIPAA), a Privacy Notice with details of our use and disclosure of your rights regarding your medical information is available to you through our Web site. You can also request a printed copy of the Privacy Notice by e-mailing Insurance@GuideStone.org or calling **1-888-98-GUIDE** (1-888-984-8433).

Pre-existing conditions. If you are a new GuideStone participant and have recently discontinued coverage with another medical plan, you should soon receive a *Certificate of Creditable Coverage* from your prior medical plan carrier. Once you receive your certificate, it is very important that you send a copy to GuideStone. A *Certificate of Creditable Coverage* will provide evidence that you had previous medical coverage. If you or your dependents have any pre-existing conditions, you may be subject to a 12-month pre-existing condition limitation if we do not receive a copy of the certificate or if there is a break of 63 days or more between your prior coverage and your GuideStone coverage.

Add children without underwriting. Notify GuideStone by calling **1-888-98-GUIDE** (1-888-984-8433) or notify your employer's benefits administrator to add a dependent child to your health plan within 60 days of the child's birth, adoption or placement for adoption without underwriting.

Preventive care schedule for GuideStone PPO medical plans

WELL CHILD VISITS (BIRTH–AGE 18)		PREVENTIVE SCHEDULE
Wellness exam	Standard incremental infant check-ups for the first 12 months; every 12 months ages 1–18	
Visual screening	Every 12 months ages 3–5; then at ages 6, 8, 10, 12 and 15	
Hearing screening	Every 12 months ages 4–6; then at ages 8, 10, 12 and 15	
Immunizations: Includes standard childhood immunizations and expanded age ranges for some immunizations	At doctor-recommended ages for each childhood immunization; expanded adult immunizations for at-risk patients	

ADULT (AGE 19+)		PREVENTIVE SCHEDULE
Physical examination	Every 12 months	
Pelvic and breast examination	Every 12 months	
Pap test	Every 1–3 years based on history	
Mammogram	Every 12 months after age 39	
Prostate cancer screening	Every 12 months	
Urinalysis, venipuncture and CBC	Every 12 months	
Lipid panel	Every 5 years after age 20	
Glucose testing (for high-risk patients)	Every 3 years after age 45	
Bone mineral density screening	Every 2 years if high risk for osteoporosis	
Colorectal cancer screening		
• Fecal occult blood test	As directed by a physician if high-risk or every 12 months after age 50	
• Screening with flexible sigmoidoscopy or double contrast barium enema	As directed by a physician if high-risk or every 5 years after age 50	
• Colonoscopy	As directed by a physician if high-risk or every 10 years after age 50	

The obesity epidemic places individuals at risk for a number of chronic and debilitating diseases. As part of our prevention of obesity initiative, the following benefits have been added to our Preventive Schedule.

Prevention of obesity

SCHEDULE FOR CHILDREN		PREVENTIVE SCHEDULE
Children with a body mass index (BMI) in the 95 th percentile are eligible for:	<ul style="list-style-type: none"> • Two additional annual preventive office visits specifically for obesity • Two annual nutritional counseling visits specifically for obesity • One set of recommended laboratory studies 	
Children with a BMI in the 85 th percentile are eligible for:	<ul style="list-style-type: none"> • One additional annual preventive office visit specifically for obesity and blood pressure measurement 	

SCHEDULE FOR ADULTS (AGE 19+)		PREVENTIVE SCHEDULE
Adults with a BMI over 30 are eligible for:	<ul style="list-style-type: none"> • Two additional annual preventive office visits specifically for obesity and blood pressure measurement • Two annual nutritional counseling visits specifically for obesity • One set of recommended laboratory studies 	

This general summary is not a complete list of the preventive health schedule provided under your plan. To determine if a specific procedure is covered under the wellness benefit, call Highmark Blue Cross Blue Shield® at 1-866-472-0924.

This information only highlights the depth of coverage and benefits you can receive when you protect yourself with GuideStone. Limitations and exclusions apply. This material is a general summary of the plans. The official plan documents and contracts set forth the eligibility rules, limitations, exclusions and benefits. These alone govern and control the actual operation of the plan. In the event of a conflict with the description in this material, the terms of the official plan documents and contracts will control. GuideStone Financial Resources of the Southern Baptist Convention reserves the right to change or cancel these programs at any time. This material does not imply an employment contract or guarantee of benefits. Medical underwriting could be required.



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