Summer’s Fair Winds

How to get the best of the season’s allergy triggers

Special Offers Trims Costs

A quick online visit could help you save
HealthySolutions

Utilization management (UM) is a review process that helps determine the medical necessity of certain outpatient care, a requested stay or a procedure. Our utilization management decisions are based upon standards of appropriate care using medical policies, nationally recognized clinical guidelines and the applicable terms of your health benefits contract. In addition, we do not reward our associates, consultants or others for denying care, nor do we use incentives to encourage a denial of care or service. For more information about the UM process and to answer your questions about UM, call toll-free at 800-238-2227 weekdays except holidays, from 8 a.m. to 5 p.m. At other times, please leave a message on the confidential voice mail system. Our utilization management staff will return your call on the next business day.

CARE MANAGEMENT CAN HELP

Anthem’s care management program is here to help when you have a serious medical condition or sudden medical event. This voluntary and confidential program teams you, your family and your doctors with a case manager who provides telephone support for your health concerns, at your convenience and at no additional cost to you. Case managers are Registered Nurses or other qualified, licensed health professionals, and help by listening to your questions and providing educational information. They may suggest ways to help improve your recovery and understand your benefits. For more information on Care Management, call toll-free: 800-231-8254

Where to Find Provider And Hospital Directories

Web-based Provider and Hospital directories are available to our current and prospective members at anthem.com>Member>Select State>Enter. At the Member home page, click on “Find a Doctor” and search our Provider directory to find a doctor or a hospital in your area. Please use the “Printer Friendly” option to obtain a hard copy. Our Web-based directories are available in English and Spanish.

If you do not have Internet access, please call the Customer Services number listed on your membership ID card. A Customer Services representative will help you to search the provider or hospital directories and mail or fax a hard copy of the requested information to you.

24/7 NurseLine

The 24/7 NurseLine is available 24 hours a day, seven days a week. With 24/7 NurseLine, you get around-the-clock access to nurses in times of urgent need or when you just have a general question that comes up at any time, day or night. Registered nurses are available to help you assess symptoms and locate providers, or to provide information on diagnoses, medication or other medical issues. You also have access to an AudioHealth Library. You can access recorded information on more than 300 topics in both English and Spanish simply by calling the 24/7 NurseLine telephone number at 800-711-5947 (for Spanish, 800-545-9648). Information about the 24/7 NurseLine is also available by going to anthem.com>Member>Select State>Enter 360° Health>Health Guidance.

(Note: This service may not be available to all members. To verify that you can access 24/7 NurseLine, contact Customer Services at the phone number on your ID card.)

Utilization Management—Commitment to Our Members

Utilization management (UM) is a review process that helps determine the medical necessity of certain outpatient care, a requested stay or a procedure. Our utilization management decisions are based upon standards of appropriate care using medical policies, nationally recognized clinical guidelines and the applicable terms of your health benefits contract. In addition, we do not reward our associates, consultants or others for denying care, nor do we use incentives to encourage a denial of care or service. For more information about the UM process and to answer your questions about UM, call toll-free at 800-238-2227 weekdays except holidays, from 8 a.m. to 5 p.m. At other times, please leave a message on the confidential voice mail system. Our utilization management staff will return your call on the next business day.
Commitment

We Believe in Continuous Improvement

Your good health and satisfaction are a top priority. That’s why we offer programs that continuously monitor and evaluate many aspects of your healthcare experiences so we understand where to improve our benefit quality and services. To learn more about our Quality Improvement programs, visit us online at anthem.com/empowered. To receive a copy or get more information, please call us at 203-234-5973.

Technology Review

DOES MY PLAN COVER NEW TREATMENTS?

Anthem strives to stay informed about medical advances and, when appropriate, creates or updates policies to address these new technologies. In addition, our policies are evaluated and reviewed periodically by teams of healthcare professionals. We also consult the following resources when making medical, behavioral health and pharmaceutical policy decisions on new medications, devices and procedures:

- Peer-reviewed, professional medical publications and journals.
- The policies/procedures of government agencies (the Food and Drug Administration and the National Cancer Institute).
- Results indicating the positive impact the medical technology has on long-term health.
- The opinions of physicians, specialists, and other healthcare consultants.

Prevention

CLINICAL INITIATIVES

CHOLESTEROL SCREENING

Knowing the facts about cholesterol can help reduce your risk for a heart attack or stroke. But understanding what cholesterol is and how it affects your health is only the beginning. To learn ways to keep your cholesterol under control, visit anthem.com/empowered.

COLORECTAL CANCER SCREENING

Affecting men and women, colorectal cancer is the second leading cause of cancer-related death next to lung cancer, according to the CDC. Approximately one-third of colorectal cancer deaths could be avoided if people over 50 years old were routinely screened with any of four recommended tests. Learn more at anthem.com/empowered.

To receive preventive health guidelines, call 800-545-0948, ext 6171.
For millions of Americans, spring means sneezing and sniffling. It also means watery eyes, scratchy throat and—at worst—asthma attacks. The pollen and mold spores that come with spring make this season an unhappy one for those with allergies.

Since a single plant can produce a million grains of pollen in a day, it’s nearly impossible to avoid pollen. But these steps from the American Academy of Allergy, Asthma, and Immunology can help:

1. Keep windows, especially bedroom windows, closed to prevent allergens from drifting indoors.
2. Use the air conditioner. Be sure to clean or replace filters often.
3. Vacuum rugs and carpets regularly and dust frequently, using a damp cloth, to remove pollen and mold.
4. Shampoo pets regularly to remove allergens from their coats. And keep them out of the bedroom.
5. Wash your hair before going to bed to get the pollen out.
6. Wear glasses rather than contact lenses. Contacts can trap pollen against your eyes.

Think only a prescription drug can treat your tough allergy symptoms? Think again. Clinical studies have found the active ingredient in many over-the-counter (OTC) allergy medications to be just as effective as prescription allergy drugs. In fact, some OTC medicines, like Claritin® and Zyrtec®, were previously available only by prescription.

Decongestion medications are still available—but may be kept behind the pharmacy counter. If your allergy symptoms come with a stuffy nose, help is still available without a prescription—it’s just a little harder to find. Some medications containing the decongestant pseudoephedrine are kept behind the pharmacy counter. The pharmacist will be happy to provide one of these medications to you.

Treat only the allergy symptoms you have. Look for an allergy product targeted to your symptoms. Don’t over-medicate with a multi-symptom allergy medication if you don’t need to.

Still not sure? Spend a minute with your pharmacist. Pharmacists are good sources of information and can help you figure out which allergy product matches your symptoms and offers the best value too.
Anthem Ranked in Top 6% Of All U.S. Health Plans

We’re pleased to be recognized, and we’ll keep up the hard work.

It’s been confirmed. *U.S. News & World Report* shows that your health plan is among the very best in the entire country.

Every year, the magazine puts out a special list of America’s Best Health Plans. In 2007, Anthem Blue Cross and Blue Shield in Maine reached No. 17 on the list of 250 insurance plans. The rankings were created with the help of the National Committee for Quality Assurance (NCQA), the highest sanctioning body in our industry.

This is no small feat. The committee evaluated 50 separate measures based on member satisfaction surveys, prevention programs and quality of medical care received from providers. Anthem scored in the top 10 percent in several key measures, including the areas of asthma treatment, prenatal care, comprehensive diabetes care and beta blocker treatment after a heart attack.

“We continually work to give our members access to high-quality medical care and programs designed to help them live healthier lives,” said Dr. Jeff Holmstrom, medical director, Anthem Blue Cross and Blue Shield in Maine. “To be recognized in the top 6 percent of all health plans in the country is a testament to the hard work of our associates and is something we take pride in.”

The NCQA seconds this notion. “This ranking reflects Anthem’s commitment to its members,” said Margaret O’Kane, NCQA president. “The programs and services offered by Anthem are not only innovative, but they receive high marks from members for quality and customer service.”

We’re very proud of our associates, and the network doctors and hospitals who made this recognition possible. But our work is not done. We’ll continue to work hard every day to make your plan even better this year.

Chronic Care

**SOMETIMES IT’S GOOD TO BE A CONTROL FREAK**

If you have a chronic condition such as diabetes, asthma or heart disease, keeping your condition under control can help you avoid unnecessary trips to the ER for situations such as a severe asthma attack or dangerously high blood glucose levels.

But taking good care of yourself requires more than regular visits to your doctor. You need to be responsible for managing your condition every day. There are resources that can help. For example, there are a variety of condition management programs that can provide tips, guidance and ongoing support for people with chronic health conditions. Many of these are available online and others are offered through local hospitals or community centers.

Ask your doctor or health plan representative about enrolling in a condition management program that can help you take the best possible care of yourself—and avoid complications and emergencies.
**HIPAA NOTICE OF PRIVACY PRACTICES—REMEMBER**

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is a federal law governing the privacy of individually identifiable health information. We are required by HIPAA to notify you of the availability of our Notice of Privacy Practices. The notice describes our privacy practices and legal duties, and your rights concerning your Protected Health Information. We must follow the privacy practices described in the notice while it is in effect (it will remain in effect unless and until we publish and issue a new notice). You may obtain a copy of our Notice of Privacy Practices on our website at anthem.com and selecting Privacy Statement at the bottom of the page. Or you may contact Customer Services using the contact information on your identification card.

**STATE NOTICE OF PRIVACY PRACTICES**

As we indicate in our HIPAA Notice of Privacy Practices, we must follow state laws that are more strict than the federal HIPAA privacy law. This notice explains your rights and our legal duties under state law.

**YOUR PERSONAL INFORMATION**

We may collect, use and share your nonpublic personal information (PI) as described in this notice. PI is information that identifies a person and is often gathered in an insurance matter. PI could also be used to make judgments about your health, finances, character, habits, hobbies, reputation, career and credit.

We may collect PI about you from other persons or entities such as doctors, hospitals or other carriers.

We may share PI with persons or entities outside of our company without your OK in some cases.

If we take part in an activity that would require us to give you a chance to opt-out of that activity, we will contact you. We will tell you how you can let us know that you do not want us to use or share your PI for a given activity.

You have the right to access and correct your PI.

We take reasonable safety measures to protect the PI we have about you.

A more detailed state notice is available upon request. Please call the phone number printed on your ID card.

**WAITING TO SEE YOUR DOCTOR**

We know that the timeliness of your medical appointment is important to you. Visit anthem.com/empowered to learn what is the maximum time you should have to wait for an appointment with a primary care doctor or OB/GYN specialist.

**SEARCHING FOR A DOCTOR?**

Did you know that we strive to update our online provider directory weekly? It’s the best way to find a doctor by name, specialty, location, hospital affiliation, gender and languages spoken. Learn more at anthem.com/empowered. Or get a printed directory by calling Customer Services at the number on the back of your ID card.

**DOCTOR QUALIFICATIONS**

Did you know that our Credentialing Committee (a panel of independent network doctors who are not Anthem employees) reviews all doctors’ qualifications prior to granting network participation? Learn more at anthem.com/empowered.

**Are You Getting the Most Value From Your Pharmacy Benefits?**

Please note: Not all plans have pharmacy benefits. Check your identification card, certificate, schedule of benefits and riders to see if you have this coverage.

Anthem wants to help ensure that you properly utilize your pharmacy benefits to get the most value from this program. A couple of high level points to remember:

- A collection of pharmacy services and helpful tools to assist you in managing your prescription orders and benefits are available online. It’s Your Online Pharmacy! Features allow you to:
  - Order prescription refills
  - Check order status
  - View prescription history
  - Search drug list/formulary
  - Find a pharmacy
  You may access these services and tools at anthem.com. On the home page for Anthem, select Anthem Prescription on the left side of the page.
- You must fill your prescription at a network pharmacy or through mail service pharmacy (if available under your plan). A list of network pharmacies can be found at anthem.com or by calling the Customer Services number on your ID card.
  - You could have a copayment and/or a deductible each time you fill a prescription, whether at a network pharmacy or through mail service pharmacy. Copayments vary depending on whether the prescription is for a generic, preferred brand-name or non-preferred brand.
  - Certain drugs require prior authorization and are identified as PAR (Prior Authorization Required). They must be approved by Anthem before you fill the prescription.
  - Some prescriptions may only be filled in limited quantities. Drugs requiring either of these actions are noted on the drug list.

For more details regarding Anthem’s Pharmacy Benefits Program go to: anthem.com>
Members> Select State> Enter> Plans & Benefits> Prescription.
WE developed and recently launched an innovative program to track the health of Maine residents. It’s called the State Health Index, and it uses public data to help identify and respond to major health issues in Maine. We see it as a roadmap to guide our work to help improve health across our state.

LEARNING THE REASONS BEHIND HEALTH ISSUES

Our dedicated team will collaborate with local and state officials and community organizations to learn the reasons behind common health problems. Then we’ll work with these partners to develop policy solutions and create or enhance programs that can help improve overall health in Maine.

HOW MAINE STACKS UP FOR HEALTH

The State Health Index was developed from data collected by the Centers for Disease Control and Prevention (CDC). Based on a thorough assessment of 23 measures of health status, the data ranks Maine 11th in the nation. This information was the springboard to help us focus on the following measures of improvement during the first several years of the State Health Index program. We believe we can see positive changes in these measures—by taking positive steps to do it.

• Prenatal care in the first trimester
• Low birth-weight infant rate
• Adult influenza immunization rate
• Adult pneumococcal immunization rate
• Physical activity levels
• Cigarette-smoking rate
• Diabetes in adult population
• Heart disease death rate

TAKING ACTION TO HELP MAKE A DIFFERENCE IN MAINE

As part of the positive action we’re taking to help impact the above measures, we recently partnered with several organizations to raise awareness about the importance of:

• Vaccines for influenza and pneumonia
• Increasing adult and child physical fitness levels
• Smoking cessation

What we learn from you helps improve the health of all Maine residents.
Good health means something different to everyone. From ramping up your workout to snuffing out cigarettes, MyHealth@Anthem on anthem.com can help you improve your health outlook. MyHealth is an online resource that gives you the information, tips and tools you need to take control of your health—and make smart healthcare decisions.

CHECK YOUR HEALTH STATUS
Are you curious about your overall health? Log on and check out the MyHealth Assessment, a secure online, interactive health analysis that helps you pinpoint your personal health risks. After completing the assessment, read a doctor’s summary and get specific action steps you can take to help reduce your risks—and improve your health.

GET ORGANIZED
MyHealth Record is your key to getting and staying organized regarding matters pertaining to your health. This online tool lets you access and manage your records—privately and securely—over the Internet. With MyHealth Record, you can view medical claims; keep your records in one convenient, well-organized place; keep track of health screenings; and even help share information with caregivers during an emergency or when you’re away from home.

FIND HELP ALONG THE WAY
Stressed out? Battling the bulge? Trying to get a grip on cholesterol? The Lifestyle Centers point you to the information that matters most to you. Find the support that can help you make important changes or stay on top of chronic concerns. The recommendations at the end of your MyHealth Assessment are a good place to begin—they’re based on your answers.

MORE TOOLS TO KEEP YOU HEALTHY
MyHealth comes loaded with tools that make it easy to manage your health. Some of the many helpful tools you’ll find are:
- Health Trackers to gauge key measures like cholesterol, blood pressure and more.
- Health Channels covering everything from children’s health to life after 50—and more than 30 Condition Centers.
- Ready, Set, Stop! to help with smoking cessation.
- Symptom Checker to dig up clues about what might be causing those aches, pains and twinges.
- Healthcare Advisor™ to aid in health-related decision making.
- Online Communities that let you connect with people who are going through similar experiences like pregnancy, diabetes, depression and more.

- LEAP®, the Lifetime Exercise Adherence Program, created by an Olympic coach, that can help you set goals, track your progress and develop personalized exercise programs.

GETTING STARTED IS EASY
Take the first step and visit anthem.com today. Although you can combine these tools any way you want to create your own health solution, here’s an easy way to get started.
1. Simply log in at anthem.com and click MyHealth Assessment on the Overview Page.
2. Check out the Lifestyle Centers suggested at the end of your assessment.
3. Open your MyHealth Record; some of your health assessment answers are automatically recorded there so it’s easy for you to begin using—if you choose.
Save Money with SpecialOffers@Anthem

Live life to the fullest without paying full price.

Saving money is good. Saving money on things that are good for you—that’s even better. With SpecialOffers@Anthem, you can receive discounts on products and services that help promote better health and well-being. And, there’s no extra cost to you. SpecialOffers@Anthem is just one of the perks of being a member. You’ll find discounts related to Family & Home; Fitness & Health; Medicine & Treatment; and Vision, Hearing & Dental.

NEW LOOK, NEW OFFERS
The newly revised SpecialOffers@Anthem website features improved navigation and new offers, giving you easy access to discounts that can help you maintain a healthier lifestyle. You’ll find exciting new offers like:

• SelfHelpWorks. Join a SelfHelpWorks online weight loss, smoking cessation, stress or alcohol management program and receive a 30-day free guest pass and a 30 percent discount.
• GlobalFit.™ Shape up and get fit with member discounts to local, regional and national fitness clubs.
• Lindora Lean for Life.® Save 20 percent on weight-loss programs and 10 percent on weight-loss-related products. Call 800-LINDORA.
• American Baby® Magazine. Receive a free subscription to the magazine that takes you through pregnancy and beyond.

LOG ON TO BEGIN SAVING
Go to anthem.com for specific information on these offers and more. From anthem.com, go to the Member section, choose your state, then select Answers@Anthem, followed by SpecialOffers@Anthem.

Prevention

TAKE CARE OF TROUBLED TEENS

Everyone knows the teenage years can be tough. But for some teens, the challenges seem so overwhelming that their thoughts turn fatal. Sadly, one in five teenagers seriously considers suicide every year, according to data collected by the Centers for Disease Control and Prevention.

More than 90 percent of people who die by suicide have one of three risk factors: depression, other mental disorders or substance-abuse problems. For teenagers, these factors are often combined with stressful issues such as interpersonal losses, disciplinary problems or being the victim of bullying.

People who are considering suicide sometimes exhibit warning signs including:

• Talking about dying
• Drastic behavior changes
• Withdrawal from friends or social activities
• Changes in eating or sleeping habits
• Loss of interest in hobbies or school
• Increased use of alcohol or drugs
• Lack of attention to personal appearance
• Giving away prized possessions

Immediate help is available for people considering suicide—and the people who love them—through the National Suicide Prevention Lifeline at 800-273-TALK (8255) or suicidepreventionlifeline.org.
Important Women’s Health Reminders

Prevention is the key to a healthy life.

Women are faced with competing demands between work and home schedules that leave little time for themselves. It’s more important than ever for every woman to schedule regular preventive health screenings. The time you take benefits not only you but your family. Here are a few things you should think about if you haven’t already.

**Breast Screenings/Exams**
- Yearly mammograms are recommended starting at age 40
- Clinical breast exams should be part of a periodic health exam every three years for women in their 20s and 30s and every year for women 40 and over
- Women at increased risk for breast cancer (family history, genetic tendency, past breast cancer) should talk with their doctor about starting mammography screening earlier or having frequent exams

**Chlamydia Screening**
- Chlamydia, a bacteria spread by sexual contact, can infect the female reproductive system
- Infection may or may not cause symptoms
- Women with past or current chlamydia infection are at greater risk for cervical cancer
- Chlamydia infection is treated with antibiotics promptly after diagnosis
- Untreated chlamydia infection is known to cause pelvic inflammation that can lead to infertility
- The best prevention against chlamydia infection is to practice safer sex (condom use) or abstinence
- An annual screening for women under age 26 is recommended

So many people depend on you. Please take care of yourself. Call your provider and schedule an appointment now.

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**Notice**

**Women’s Health and Cancer Rights Act**

In the fall of 1998, Congress passed legislation that outlines specific coverage related to mastectomies that all group health plans and health insurance carriers offering medical and surgical benefits for mastectomies must offer. This coverage is for:
- Reconstruction of the breast on which the mastectomy was performed
- Surgery and reconstruction of the other breast to provide a symmetrical appearance
- Prostheses and the treatment of physical complications during all stages of the mastectomy, including lymphedemas, in a manner determined in consultation with the attending physician and the member

Coverage of these services is subject to the same copayments, deductibles and coinsurance percentages, if any, as other services covered under your plan. Please refer to your certificate of coverage for more specific information.

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*Recommended by the American Cancer Society
*Centers for Disease Control and Prevention and the United States Preventive Services Task Force
At Your Fingertips

Anytime, day or night, you can find information on our website.

Looking for information about your health plan, and not sure where to find the answers?

Log on to anthem.com/empowered for links to access valuable information on how to:

- Properly access healthcare benefits for different types of services—including primary and specialty care, behavioral health and hospital services, or when out of the plan’s service area
- Obtain emergency care and 911 services
- Obtain care after normal office hours
- File a claim for covered services
- Voice a complaint or appeal a decision, including the right to independent external appeal

Helpful information about our providers and services:
- Simply click on “Find a Provider.” This up-to-date list allows you to find a provider using specific search criteria, such as name, specialty, gender, and location.
- Health and wellness programs, including interactive tools

Need information specific to your individual or family policy? After registering on the member website, you can:
- Obtain specifics about the benefits and services covered under your health plan, including any limitations and your cost-sharing responsibilities
  - View existing claims
  - Change your primary care physician (if applicable to your health plan)
  - Order a new member ID card

If you require additional information, a printed copy of the information available on the Web, or copies of your health plan Certificate or Schedule of Benefits, call Customer Services at the toll-free number on the back of your member ID card.

Please note that Mental Health, Pharmacy and Dental services may have different phone numbers listed on the card.

Please note that you will not be able to access benefit information for a dependent spouse or those of other adult dependents. They must register on their own.

Appeals

WE’RE COMMITTED TO RESOLVING YOUR CONCERNS

If we determine that a treatment or service will not be covered under your plan, we have a step-by-step appeals process that’s designed to give you a thorough and fair resolution. Some of these steps must occur within a specified timeframe. Customer Services will tell you what the steps are.

Here’s a summary of how it works:

STEP 1: Call Customer Service. The number is on your insurance card. We’ll do our best to resolve your concern fairly and efficiently during this first contact with us.

STEP 2: If you aren’t satisfied with the initial response to your concern, you can file an appeal. Customer Services will tell you how.

STEP 3: If you’re not satisfied with the outcome of step two, you may have additional options for further appeal. You will be informed if there is a second level of appeal at your health plan, or if there are other steps that may be available to you.

STEP 4: If benefits have been denied at the final internal appeal level(s), under certain circumstances, you may have the right to request an independent external review. You must request this external review within a specified timeframe after you receive your final denial letter.

For specific information about the requirements of the appeal process, please visit anthem.com/empowered or call the Customer Services number on the back of your ID card.
Getting in touch with your health plan couldn’t be easier. The member Interactive Voice Response System (IVR) uses the latest technology to help you get the answers you need about your health plan, 24/7. These quick tips from our Customer Service advocates will point you in the right direction.

**IT’S YOUR CALL**

To reach your dedicated Customer Service call center, dial the toll-free number on the back of your member ID card. This number will connect you to the IVR.

**ENTERING YOUR MEMBER ID**

You must follow the voice prompts when using the IVR. Your member ID is comprised of both numbers and letters. Follow these helpful hints when entering letters within your ID number:

- Enter the letters and numbers in the order in which they appear in your ID number.
- Press the * key before entering a letter.
- Listen to the instructions to select the number corresponding to the letter.
- When all letters have been entered, continue to enter the remaining numbers, then press the # key.
- For the letters Q or Z, press [*1], then [1] for Q or [2] for Z.

For example, if your member ID is 001234m567, you would press: 0 [0] [0] [1] [2] [3] [4] [*61 (to represent the “m”)] [5] [6] [7].

**ENTERING YOUR BIRTH DATE/DATES OF SERVICE**

Follow these helpful hints when entering letters within your ID number:

- Enter the date as MMDDYYYY, then press #.
- For example, if the date is 01/02/2005, you would press: [0] [1] [0] [2] [0] [0] [5] [#]

**DON’T FORGET**

- Member ID numbers are 10 digits long, including any zeroes at the beginning of the number.
- Do not include the three-letter prefix at the beginning of your member ID number.
- Your member ID number is not your Social Security number.