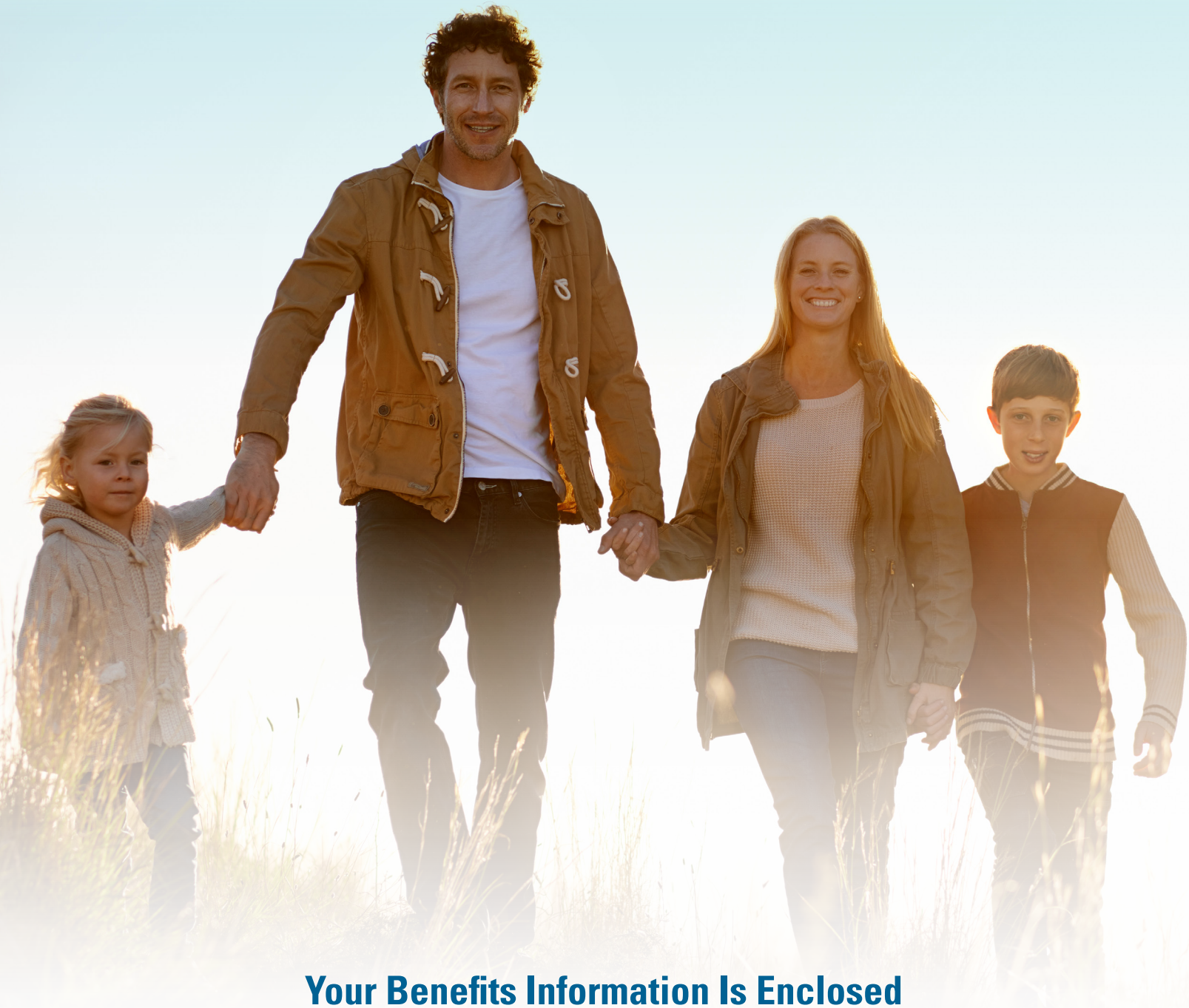


# SMART START GUIDE



**Your Benefits Information Is Enclosed**

**HealthSmart**<sup>®</sup>

[www.healthsmart.com](http://www.healthsmart.com)

# SMART START GUIDE



Registering for myHealth	3
myHealth Mobile App	5
Preventive Care Coverage	6
A Patient's Rights and Responsibilities	8
Precertification	9
Case Management	10
How to Read an Explanation of Benefits (EOB)	11
Healthcare Bluebook	15

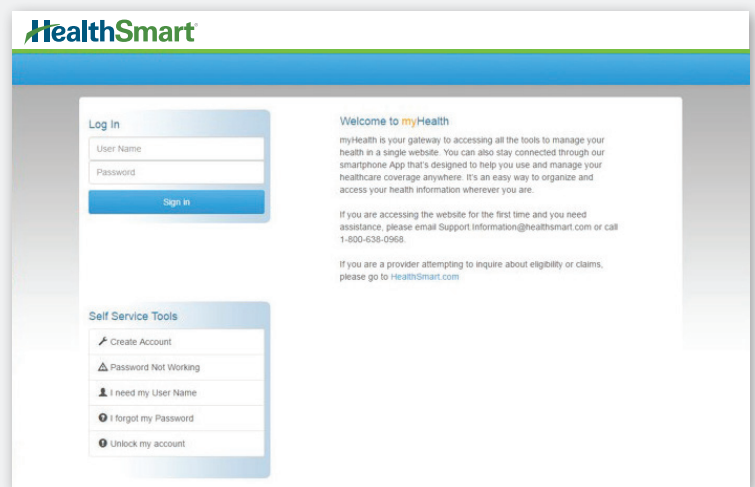
# Welcome to myHealth!

Managing your health is easier than ever with HealthSmart. Simply log on to myHealth at myhealth.healthsmart.com for access to important tools you can use to manage your health. You can also stay connected through our smartphone app so you can use and manage your healthcare coverage anywhere. It's an easy way to organize and access your health information wherever you are.

If you are accessing myHealth for the first time and you need assistance, please email support.information@healthsmart.com or call 1-800-638-0968.

## Registering for myHealth Is Easy!

- 1 Go to [myhealth.healthsmart.com](http://myhealth.healthsmart.com).
- 2 Click **“Create Account”** under the Self-Service Tools menu.



Complete the information below to register  
If you do not know your Member ID or Group Number, please refer to your ID card

**Register**

I don't have HealthSmart Benefits

**Member ID**

**Group Number**

**First Name**

**Date of Birth**  
Month  Day  Year

**User Name**

**Password**

**Confirm Password**

**Register**

- 3 Enter the required registration information, including the Member ID and Group Number from your HealthSmart ID card and click **“Register.”**

### Some Helpful Hints:

- + Your Member ID Number is the number on your ID card.
- + Please enter your name exactly as it appears on your Member ID card

## 4 Congratulations! Your registration is complete!

Click the ["Access Your Account"](#) link to log in and complete your profile.  
Enter your user name and password and click ["Sign In."](#)



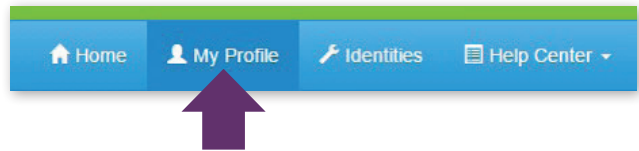
Log In

User Name

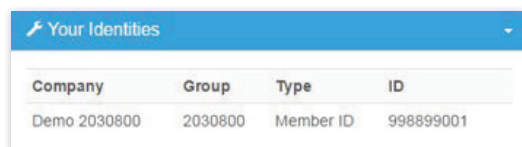
Password

Sign in

## 5 Click on ["My Profile"](#) and validate your email address.

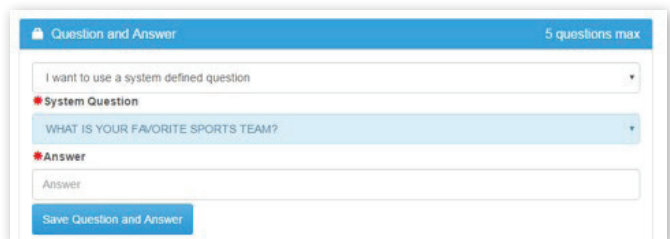


## 6 Click ["Identities"](#) and make sure your plan information is correct for your Group.



Company	Group	Type	ID
Demo 2030800	2030800	Member ID	998899001

## 7 Set up your security questions.



Question and Answer 5 questions max

I want to use a system defined question

**System Question**

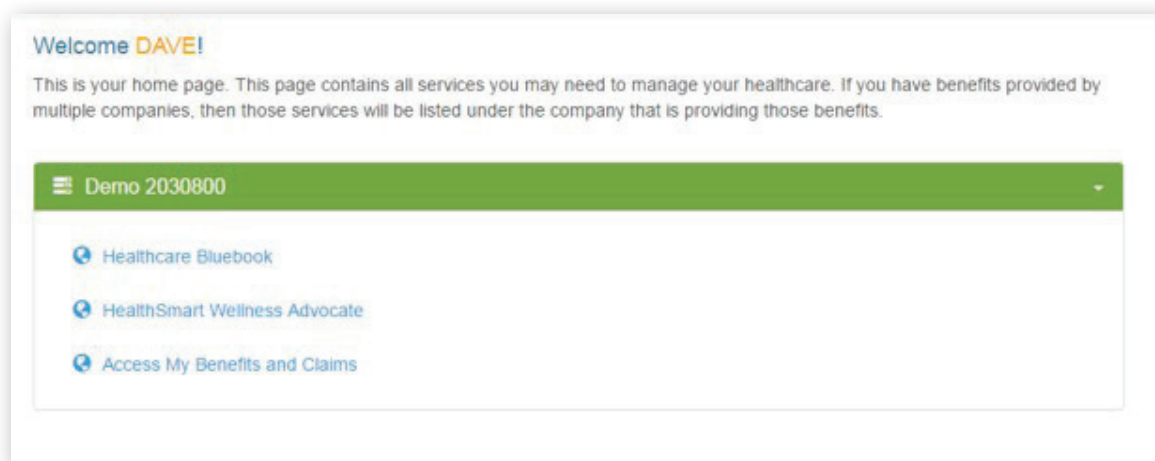
WHAT IS YOUR FAVORITE SPORTS TEAM?

**Answer**

Answer

Save Question and Answer

## 8 You're now ready to manage your health through myHealth!

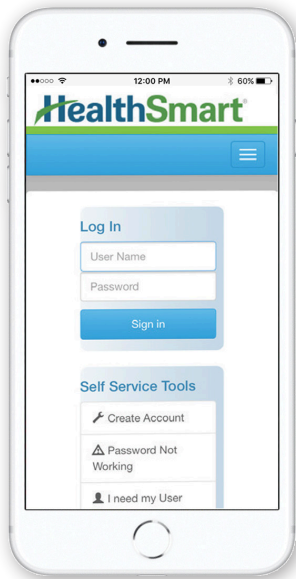


Welcome **DAVE!**

This is your home page. This page contains all services you may need to manage your healthcare. If you have benefits provided by multiple companies, then those services will be listed under the company that is providing those benefits.

Demo 2030800

- Healthcare Bluebook
- HealthSmart Wellness Advocate
- Access My Benefits and Claims

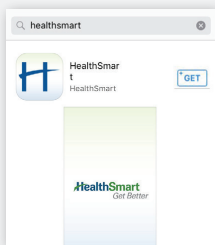


## Stay Connected With myHealth

HealthSmart's smartphone app is designed to help you use and manage your healthcare coverage anywhere, anytime. Download it today from the App Store or Google Play!

- + View your eligibility
- + See your claims history for the past 24 months
- + Track deductibles, out-of-pocket maximums and other accumulators
- + View, email, and fax your plan ID card – never worry about lost cards again!
- + Get online technical support with our help center

## How to Download the myHealth App



### iPhone Instructions

- 1 Open the App Store.
- 2 Search for "HealthSmart."
- 3 Tap the "Get" button next to the HealthSmart app, and it will begin to install.
- 4 Once it is fully installed, a new app icon will appear on your screen.



### Android Instructions

- 1 Open the Google Play app store.
- 2 Search for "HealthSmart."
- 3 Tap the HealthSmart application and tap the "Install" button to download.
- 4 Once installed, a new HealthSmart app icon will appear on your screen.

## How to Register and Login

- 1 Click on the HealthSmart app.
- 2 If you've already registered, sign in using your username and password.
- 3 To set up your new myHealth account, click on "Create Account." You will be redirected to a page that requires you to complete some information. Once completed, enter a new username and password that will grant you access to your myHealth account. Then just tap "Register."
- 4 Now, you can use the same username and password to login to your myHealth account at any time. You can also access your account online at [myhealth.healthsmart.com](http://myhealth.healthsmart.com).



# Preventive Care Coverage

## Detailed List of Covered Preventive Care Items/Services

HealthSmart offers comprehensive coverage for preventive care services. Below is a detailed list of services covered under your benefit plan.

### Children and Adolescents

#### NEWBORNS

- + Screening for hearing loss, hypothyroidism, sickle cell disease and phenylketonuria (PKU)
- + Gonorrhea preventive medication for eyes

#### IMMUNIZATIONS

- + Diphtheria, Tetanus, Pertussis
- + Haemophilus influenza type B
- + Hepatitis A and B
- + Human Papillomavirus (HPV)
- + Influenza (Flu)
- + Measles, Mumps, Rubella
- + Meningococcal
- + Pneumococcal (pneumonia)
- + Inactivated Poliovirus
- + Rotavirus
- + Varicella (chickenpox)

#### CHILDHOOD HEALTH SCREENINGS

- + Medical history for all children throughout development
- + Height, weight and Body Mass Index (BMI) measurements
- + Developmental screening
- + Autism screening

#### ADOLESCENT HEALTH SCREENINGS

- + Behavioral assessment
- + Vision screening
- + Oral health risk assessment
- + Hematocrit or hemoglobin screening
- + Obesity screening and weight management counseling
- + Iron supplements
- + Fluoride supplements
- + Lead screening
- + Dyslipidemia screening
- + Tuberculin testing
- + Depression screening
- + Alcohol and drug use assessment
- + Counseling to prevent sexually transmitted infections (STIs)
- + Cervical dysplasia screening
- + HIV screening

# Preventive Care Coverage

---

## GENERAL HEALTH SCREENINGS

- + Blood pressure screening
- + Cholesterol screening
- + Type 2 diabetes screening
- + HIV and sexually transmitted infections (STIs) screenings

## CANCER SCREENINGS

- + Breast cancer mammography
- + Breast cancer chemo prevention counseling
- + Cervical cancer pap test for women
- + Colorectal cancer screenings, including fecal occult blood testing, sigmoidoscopy or colonoscopy
- + Prostate cancer (PSA) screening for men

## HEALTH COUNSELING

Doctors are encouraged to counsel patients about these health issues and refer them to appropriate resources as needed:

- + Healthy diet
- + Weight loss
- + Tobacco use
- + Alcohol misuse
- + Depression
- + Prevention of sexually transmitted infections (STIs)
- + Use of aspirin to prevent cardiovascular disease

## Adults

### IMMUNIZATIONS

- + Hepatitis A and B
- + Herpes Zoster
- + Human Papillomavirus (HPV)
- + Influenza (Flu)
- + Measles, Mumps, Rubella
- + Meningococcal
- + Pneumococcal (pneumonia)
- + Tetanus, Diphtheria, Pertussis
- + Varicella (chickenpox)

### MEN

- + Abdominal aortic aneurysm one-time screening

### WOMEN

- + Osteoporosis screening
- + Chlamydia infection screening
- + Gonorrhea and syphilis screening
- + Genetic testing

### PREGNANT WOMEN

- + Folic acid supplements
- + Anemia screening for iron deficiency
- + Tobacco cessation counseling
- + Syphilis screening
- + Hepatitis B screening
- + Rh incompatibility blood type testing
- + Bacteriuria urinary tract infection screening
- + Breast feeding education

# A Patient's Rights and Responsibilities

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## All Patients have the right to:

- 1 Informed consent in treatment decisions.
- 2 Concise and easily understood information about medical management requirements.
- 3 Receive clear and correct facts to help you make your own health choices.
- 4 Expect care based on medical necessity and appropriateness.
- 5 Expect courteous care from the HealthSmart Care Management Solutions staff at all times with recognition of dignity and your right to privacy.
- 6 Refuse medical treatment, care, or participation in a program.
- 7 Receive, upon request, details on the rules used by HealthSmart Care Management Solutions to evaluate medical necessity.
- 8 Receive information regarding confidentiality protections.
- 9 Receive information on how to complain or appeal.
- 10 Know who is responsible for managing your services and from whom to request a change.
- 11 Submit a grievance or appeal by contacting us at the following address and telephone number:

### **HealthSmart**

222 West Las Colinas Boulevard,  
Suite 500N  
Irving, Texas 75039  
800.469.4631

## All Patients, to the extent capable, have the responsibility to:

- 1 Pursue healthy lifestyles.
- 2 Become knowledgeable about their medical management plan requirements.
- 3 Actively participate in decisions about their healthcare.
- 4 Cooperate fully on mutually accepted courses of treatments.





# Precertification: What It Means to You

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## **Why precertification is necessary**

When a hospital or doctor recommends an inpatient hospital admission, HealthSmart's team of medical professionals conducts a medical review to ensure the appropriateness and necessity of the treatment plan. HealthSmart employs highly-qualified clinical professionals to evaluate the medical necessity of specific medical care.

## **When precertification is necessary**

Precertification is required prior to any inpatient hospital admission. In the case of an emergency, you must call the next business morning after you are medically stable. You do not need to call for an emergency room visit.

## **Who can precertify you**

You, your representative, doctor or hospital can precertify with HealthSmart. Sometimes a doctor or hospital will call for you, but it is ultimately your responsibility to make sure precertification requirements have been met.

## **Who is notified of the outcome of your precertification**

You, the hospital or your doctor will be notified by mail regarding the outcome of your precertification request.

## **What happens if your care extends beyond what was originally certified**

HealthSmart will contact the hospital or doctor on your behalf to discuss treatment plans and review medical appropriateness. If care is deemed unnecessary, you may incur additional out-of-pocket expenses.

## **Guarantee of coverage**

Precertification does not guarantee that your health plan will cover all medical services and claims.



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To precertify, call [877-202-6379](tel:877-202-6379)  
Monday – Friday 7 a.m. to 7 p.m. Central Time

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# Case Management

## If You Have A Serious Illness or Injury, Case Managers Can Help

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### **About HealthSmart Case Management**

Your healthcare plan offers HealthSmart Case Management, a benefit which can assist you in times of serious illness or injury when you or a family member require complex care. Case Managers are Registered Nurses that can help you by providing educational materials about your condition, guiding you through all areas of the healthcare system and answering questions about your care and treatment plan.

### **What Case Managers Can Do for You**

- + Answer questions
- + Provide educational materials about specific conditions
- + Lend a hand finding appropriate treatment
- + Locate community resources that are willing to help for free
- + Work to maximize your benefits under the healthcare plan
- + Serve as your advocate between you and doctors and hospitals
- + Coordinate necessary care and services to meet your needs

### **Why You Should I Use Case Managers**

Using Case Management services may lower out-of-pocket expenses not covered by your health plan. In addition, it's confidential and does not interrupt or interfere with any care you are currently receiving.

### **Better Health at No Additional Cost**

Your healthcare plan includes this benefit at no cost to you and is administered by HealthSmart. It's 100% free!

### **When You Should Request a Case Manager?**

Case Management is recommended when you or a family member have a serious healthcare condition. Referrals are made by your benefit administrator, HealthSmart Care Management Solutions, you or a family member.

For more on HealthSmart Case Management, [call 800-268-5209](tel:800-268-5209)

# How to Read an Explanation of Benefits

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Below is a description of your Explanation of Benefits (EOB). The numbers correspond with the numbers on the sample copy of the EOB (see the last page for an example of an EOB).

- 1 Claim Processing Office:** this is the location of the claims processing office. You can write to customer service at this location.
- 2 Address:** the name and address where the EOB is being mailed.
- 3 Customer Service:** number to call with questions regarding your claim.
- 4 Group Name:** the name of your Group (in most cases, this is your employer).
- 5 Group Number:** the identification number for your Group. Please refer to this number if you call or write about your claim.
- 6 Location Number:** the number assigned to your location within the Group.
- 7 Location Name:** the name or description of the location.
- 8 Enrollee:** the name of the covered employee.
- 9 Enrollee ID:** employee's social security number (last 4 digits only) or identification number. Refer to this ID number if you call or write about your claim.
- 10 Plan Number:** the identification number for your plan of benefits.
- 11 Paid Date:** if a check was issued, the date it was issued.
- 12 Fraud Statement:** if the services shown are incorrect, contact HealthSmart immediately.
- 13 Claim Number:** the unique identification number assigned to this claim. Please refer to this number if you call or write about this claim.
- 14 Patient:** the name of the individual for whom services were rendered or supplies were furnished.
- 15 Patient Acct:** number assigned by the service provider.
- 16 Provider:** the name of the person or organization who rendered the service or provided the medical supplies.
- 17 Dates of Service:** the date(s) on which services were rendered.
- 18 Procedure Code:** the Current Procedural Terminology (CPT) codes listed on the provider's bill.
- 19 Amount Billed:** the charge for each service.
- 20 Charges Not Covered:** charge that is not eligible for benefits under the plan.
- 21 Remark Code:** code relating to the "Charges Not Covered" amount. Also used to request additional information or provide further explanations of the claim payment.
- 22 Discount Amount:** identifies the savings received from a Preferred Provider Organization (PPO), if applicable.
- 23 Discount Code:** the corresponding code for negotiated savings. If Discount Code column is not present, any negotiated savings discount is listed under the Remark Code column.

# How to Read an Explanation of Benefits

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- 24 Allowed Amount:** maximum allowed charge as determined by your benefit plan after subtracting Charges Not Covered and the Provider Discount from the Amount Billed.
- 25 Deductible Amount:** the amount of allowed charges that apply to your plan deductible that must be paid before benefits are payable.
- 26 Copay:** the amount of allowed charges, specified by your plan, that you must pay before benefits are paid.
- 27 Covered Amount:** eligible charges considered under your plan.
- 28 Paid At:** the percentage of the Covered Amount that will be considered under your benefit plan.
- 29 Payment Amount:** benefits payable for services provided.
- 30 Column Totals:** the sum of each column.
- 31 Patient Responsibility:** after all benefits have been calculated, this is the amount of the enrollee's responsibility for this claim.
- 32 Other Credits or Adjustments:** represents adjustments based upon the benefits of other health plans or insurance carriers, including Medicare.
- 33 Total Payment:** the sum of the "Payment Amount" column.
- 34 Remark Code Description:** additional explanation of the Remark or Discount Code will appear in this section.
- 35 Paid To:** individual or organization to whom benefits are paid.
- 36 Check Number:** the unique number assigned to the check.
- 37 Check Amount:** total benefit amount paid on this claim.
- 38 Plan Status:** deductible/out of pocket status for the current year.
- 39 PPO Information:** the name of the Network used, if any, to discount the claim. This information can also be found at times under the Important Information Tab.
- 40 Foreign Language Assistance:** multilingual contact information will only appear when applicable.
- 41 Going Green:** HealthSmart offers members the option to receive electronic, paperless Explanation of Benefit (EOB) notifications.
- 42 Important Information:** statement explaining your entitlement to a review of the benefit determination on the Explanation of Benefits (EOB). This information varies according to each plan.



**1** HealthSmart Benefit Solutions  
PO Box 12345  
Anytown IA 50005-6789

**Explanation of Benefits**  
**RETAIN FOR TAX PURPOSES**  
**THIS IS NOT A BILL**

### Forwarding Service Requested

**2** \*\*\*\*\*SNGLP 630  
16 1 SP 0.460  
JANE SAMPLE  
123 MAIN STREET  
HOMETOWN IA 50701

**12** Your cooperation is needed to stop fraud!  
If these services were not rendered,  
please contact HealthSmart immediately at the number above.

### 3 Customer Service

Questions for Customer Service, please call  
(866)524-7326 between the hours of  
8:00 am - 6:00 pm CST  
Or visit us at [www.healthsmart.com](http://www.healthsmart.com)

### Participant Information

**4** Group: DRUG GROUP ALLIANCE  
OF AMERICA, INC.  
**5** Group No.: 2999999  
**6** Location No.: 004  
**7** Location: HH  
**8** Enrollee: JANE SAMPLE  
**9** Enrollee Id: \*\*\*-\*\*-9999  
**10** Plan No.: 04021  
**11** Paid Date: 02/22/2019

### 13 Claim#

91239999-01

### 14 Patient:

JANE SAMPLE

### 15 Patient#: 99123567

### 16 Provider: MIDDLE IOWA REGIONAL MEDICAL CTR

Dates of Service <b>17</b>	Proc. Code <b>18</b>	Amount Billed <b>19</b>	Not Covered <b>20</b>	Rmk Code <b>21</b>	Discount Amount <b>22</b>	Discount Code <b>23</b>	Allowed Amount <b>24</b>	Deductible Amount <b>25</b>	Co-pay Amount <b>26</b>	Covered Amount <b>27</b>	Paid At <b>28</b>	Payment Amount <b>29</b>
01/18-01/18/2019	87086	\$37.01	\$0.00	CG	\$21.22	ECL	\$15.79	\$0.00	\$0.00	\$15.79	100%	\$15.79
01/18-01/18/2019	87186	\$84.00	\$0.00		\$69.45	ECL	\$14.55	\$0.00	\$0.00	\$14.55	100%	\$14.55
01/18-01/18/2019	87088	\$34.99	\$0.00		\$21.37	ECL	\$13.62	\$0.00	\$0.00	\$13.62	100%	\$13.62
<b>30</b> Column Totals		\$156.00	\$0.00		\$112.04		\$43.96	\$0.00	\$0.00	\$43.96		\$43.96
<b>31</b> Patient's Responsibility:		<b>\$0.00</b>								<b>32</b> Other Credits or Adjustments		\$0.00
										<b>33</b> Total Payment		\$43.96

### 34 Rmk/Discount Code

ECL ACCEL DISCOUNT PATIENT NOT LIABLE  
CG FOR BASIS OF DETERMINATION, REFER TO THE SUMMARY PLAN DESCRIPTION

### Payment Details

**35** Paid To: MIDDLE IOWA REGIONAL MED CTR  
**36** Check No.: 00011234  
**37** Amount: \$43.96

### 38 Plan Status

\$2475.00 of your \$5000.00 Family Out-of-Pocket has been met for 2019  
\$2000.00 of your \$2000.00 Individual Out-of-Pocket has been met for 2019  
\$1475.00 of your \$3000.00 Family Deductible has been met for 2019  
\$1000.00 of your \$1000.00 Individual Deductible has been met for 2019

### 39 PPO Information

CRESCENT HEALTH SOLUTIONS

### 40 Foreign Language Assistance

SPANISH (Español): Para obtener asistencia en español, por favor póngase en contacto con el número de teléfono que aparece arriba.  
TAGALOG (Tagalog): Kung kailangan ninyo ng tulong sa Tagalog, mangyaring tumawag sa numero na nasa itaas.  
CHINESE (中文): 需要中文帮助, 请拨打上面的号码与我们联系。  
NAVAJO (Dine): Dinék'ehjí' níká'a' doowotgo, t'áá shóqdi hódahdi béésh bée hane'é binumber bikáá'ígíí bish'í'í' hódíílnih.hodíílnih.

### 41 Going Green

Did you know you can choose to GO GREEN with our paperless option? Access [www.healthsmart.com/healthsmartcustomers/members.aspx](http://www.healthsmart.com/healthsmartcustomers/members.aspx) and login to opt out of receiving the paper version on future claims. You will receive an email notification when a claim has been processed and ready for viewing online. Our web site also provides you the ability to print copies of your EOBs as needed in a secure environment.

## 42 Important Information

Please contact Customer Service at the number shown above if you need assistance understanding this notice or our decision to deny you a service or coverage. You are entitled to a review of the benefit determination if you do not agree. To obtain a review, submit your request in writing to the address shown above. You may request the diagnosis and treatment codes (and their meanings) if needed for your appeal. Your request should include your name and address, Enrollee ID, claim number, the reason for appealing and any data, documents and comments you would like to have considered. Written requests for review must be mailed or delivered within the time limit required by your Plan. Please consult your Plan Document for more information about claim review procedures. If a claim is denied, or partially denied, because of lack of medical necessity or an experimental treatment exclusion, then upon request internal rules, guidelines, protocol or an explanation of the clinical judgment for determination will be provided without charge. If you appeal, we will review our decision and provide you with a written determination. If we continue to deny the payment, coverage, or service requested or you do not receive a timely decision, you may be able to request an external review of your claim by an independent third party, who will review the denial and issue a final decision. For questions about your appeal rights, this notice, or for assistance, you can contact New Mexico Public Regulation Commission, Division of Insurance at (888) 427-5772 or at <http://nmprc.state.nm.us/id.htm>.



Healthcare Bluebook.



# You're probably overpaying for care and don't even know it.

Prices for the same procedure can vary up to 500% depending on where you go. It's true!

With **Healthcare Bluebook** you can see price information on hundreds of procedures in your area with a simple search. Plus, you can earn rewards for using **Fair Price™** (green) facilities. Get paid to save... It's easy!



Same Procedure, different facilities. The choice is clear!

*See reverse....*

## Check It Out:

[myhealth.healthsmart.com](http://myhealth.healthsmart.com)

800-341-0504

# HealthSmart®

Download the App:



Company Code: HSMTREW



Take a minute to walk through these simple instructions, so that you have quick access to Healthcare Bluebook on all your devices. Anytime, anywhere!

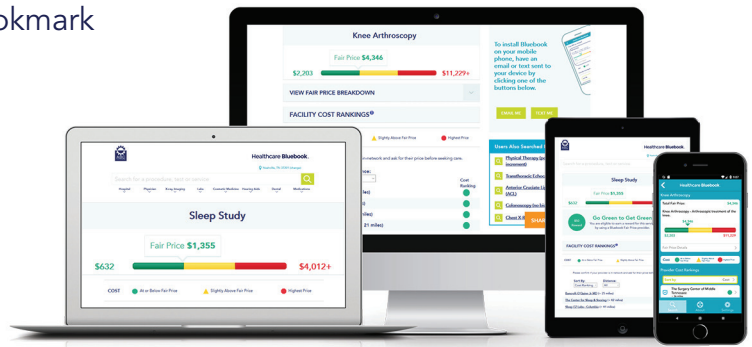
# 1 IT PAYS TO BE PREPARED... GEAR UP! BE EMPOWERED!

On your PC, laptop and tablet:  
Login to Healthcare Bluebook and bookmark the search page for quick access.

[myhealth.healthsmart.com](http://myhealth.healthsmart.com)

2 On your mobile phone:  
Download the app and login to you'll have Bluebook with you anytime you need to schedule a procedure.

Company Code: HSMTREW

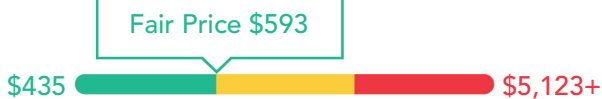


# 3 USE HEALTHCARE BLUEBOOK AND KNOW WHERE TO GO

Search for your procedure in Healthcare Bluebook, use a **Fair Price™** (green) facility, save big bucks on care, and get a reward.



## Knee MRI



● At or Below Fair Price    ▲ Slightly Above Fair Price    ● Highest Price

GO HERE

- Reasonable Rates Imaging Center (~ 2 miles)
- ▲ XTRA Imaging (~ 3 miles)
- Too Much Medical Center (~ 1 mile)

NOT HERE

FOR EXAMPLE PURPOSES

BIG SAVINGS + <REWARD>







## What is Healthcare Bluebook?

And other frequently asked questions

### COST

#### What is Healthcare Bluebook?

Healthcare Bluebook™ has been selected by your employer as an added benefit so you can shop for care, compare facilities, save money, and get the best quality for your medical services.

Did you know that in-network prices for the same procedure can vary by over 500% depending on the facility you choose?

Bluebook's web and mobile application make it easy to save money on hundreds of common medical services and procedures by showing you the cost ranges in your area and providing you with a selection of **Fair Price™** (green) facilities.

We also provide detailed information on the quality of common inpatient procedures (those that require a hospital stay). We'll help you to easily identify and select a facility that has a high-quality rating.

#### What is the "FAIR PRICE?"

The **Fair Price™** is the amount you should reasonably expect to pay for a service or procedure and is based on the actual amount paid on the claim, not the billed amount, reflecting the discounts that the health plan has negotiated with the facility.

Here's an example of dramatic price differences between one facility and another.



### QUALITY

#### Aren't all hospitals good at everything?

No, very few hospitals are good at all procedures. For example, a hospital can be among the highest performing facilities in the US for heart surgery, yet the same hospital can also be among the lowest performing facilities for joint replacement.

#### How does Bluebook assign quality ratings?

Bluebook's quality ratings are designed to help patients understand each hospital's specific level of quality for a particular inpatient clinical area or procedure. Quality ratings are calculated for each clinical area by combining a hospital's performance in several areas: patient complications, patient safety, mortality, and compliance with standards of care. Calculations are based on a statistically significant sample drawn from Centers for Medicare and Medicaid Services (CMS) data. Our methodology is validated and published in peer reviewed medical journals.

#### Can cheaper mean better quality? YES! Absolutely!

Providers with lower costs can have higher quality; there is no correlation between high cost and high quality. Healthcare Bluebook provides cost and quality ratings side-by-side for inpatient procedures, which is where quality matters most. By using Bluebook, it's easy to see which facilities offer the highest quality at the lowest costs.



**Healthcare Bluebook™**

## REWARDS

### How do I earn Go Green to Get Green Rewards?

You can earn rewards by simply visiting green providers for rewards-eligible procedures. Bluebook does all of the processing; there are no additional forms to submit.

### How will I receive my reward? How long does it take?

Rewards will be processed on a monthly basis, but may be delayed due to the time it takes for claims to be billed and processed. Your reward and a letter of explanation will be sent to the address you have on file with your employer.

### Are my family members eligible to receive rewards?

Family members who are participating in the health plan can earn rewards. However, rewards are always paid to the employee/enrollee.

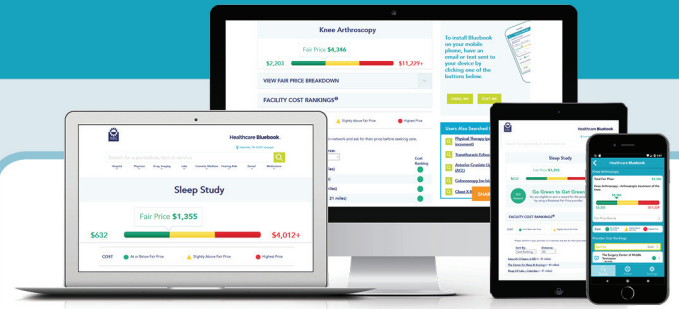
### Can I earn multiple rewards?

Yes, you may receive multiple rewards for procedures rendered on the same day. For example, if you had cataract surgery on both eyes, you would receive two separate rewards for using a **Fair Price™** (green) provider.

### Is my health information kept private?

Healthcare Bluebook does not share information about individual employees or the services received with your employer. All healthcare information is kept confidential.

*Always check in-network status before scheduling.*



## EASY SETUP

### How do I access Healthcare Bluebook?

#### ON YOUR PC, LAPTOP, AND/OR TABLET:

Log in to Healthcare Bluebook and bookmark the search page for quick access.

**myhealth.healthsmart.com**

#### ON YOUR MOBILE PHONE:

Download the app and log in so you'll have Bluebook with you anytime you need to schedule a procedure.

**Company Code: HSMTREW**

Once you've logged in, search for your procedure, review the price range shown on the color bar, then scroll down the page and review the list of facility options by quality and cost.

Bluebook's convenient color codes make it easy for you to identify those providers by cost and quality.

COST RATINGS			
	At or Below Fair Price	Slightly Above Fair Price	Highest Price
QUALITY RATINGS			
	Highest Quality	Average Quality	Lowest Quality

Check It Out:

[myhealth.healthsmart.com](http://myhealth.healthsmart.com)

800-341-0504

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Download the App:



Company Code: HSMTREW