



**WE CAN COVER YOU
AROUND THE WORLD**

[fepblue.org](https://www.fepblue.org)



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2022 Overseas Benefit Summary

The Blue Cross and Blue Shield Service Benefit Plan has been serving federal employees, retirees and their families for over 60 years. One of the things that sets our coverage apart is that you can use your benefits both in the U.S. and overseas.

Here's why federal employees choose Blue:



Your coverage works no matter where you live or travel



When you're overseas, we waive your copays for inpatient care



We waive the Standard Option deductibles for overseas care






We have dedicated 24-hour overseas assistance



You have access to a number of wellness programs and discounts

As with all of our members, you'll have the option to enroll in one of our three plans:

 <p>Standard Option</p>	 <p>Basic Option</p>	 <p>FEP Blue Focus</p>
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You'll also have three levels of coverage to select from:

 <p>Self Only</p>	 <p>Self + One</p>	 <p>Self & Family</p>
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Throughout this booklet we will showcase how our benefits work overseas. While many of our benefits are the same no matter where you are, we do offer some benefits exclusively for members who live or travel outside of the U.S.



For more information on using your benefits within the U.S., please visit our website fepblue.org or call **1-800-411-BLUE**.

Using your benefits outside of the U.S.

You can use **any** licensed provider overseas. However, before you get care, we recommend that you contact our Overseas Assistance Center (managed by our overseas partner, GMMI) to arrange for direct billing. Providers who have a direct billing arrangement with GMMI accept a visit-/case-specific GOB from them. This eliminates the need for you to pay for services and file a claim for reimbursement. You can contact the Center at **1-804-673-1678** or by emailing fepoverseas@gmmi.com.



What is a guarantee of benefits?

When a provider accepts a guarantee of benefits (GOB) from our Overseas Assistance Center, they will bill GMMI directly for your covered services. **This means that you will not need to submit a separate claim**—we'll handle all the processing for you!

GMMI already has over 14,000 providers with direct billing arrangements. All of these providers are listed in our overseas provider directory located at fepblue.org/provider. You can also call **1-804-673-1678**.

If your provider is not listed in the directory, that doesn't mean that they won't accept a GOB. If you call or email our Overseas Assistance Center they will be happy to work with your providers to try and get a GOB in place. You can also complete a [provider nomination form](#) and send it to GMMI.

What happens if my provider doesn't accept a GOB?

If your provider does not accept a GOB, we will still pay for your covered services at the Preferred (in-network) level. However, you'll need to pay for your care, and we'll reimburse you after you submit a claim and associated itemized bills. To help avoid any claims delays, you should ask your provider to give you the medical records for your care. You'll need these when it's time to submit your claim.

Once you have your medical records and itemized bills, you can submit your claim online, by fax or by mail.



Submit online



Login or register for a [MyBlue®](#) account. Once you're logged in, click "Submit Overseas Claim" under the Claims & Costs tab.





Submit by fax or mail

Download and complete your [medical claim form](#) or [pharmacy claim form](#). Send the completed form and itemized bills to the correct location noted below.

Medical Claims

 **Federal Employee Program
Overseas Claims**
PO Box 260070, Pembroke Pines, FL 33026
 **001-954-308-3957**

Pharmacy Claims

 **Blue Cross and Blue Shield Service
Benefit Plan Retail Pharmacy Program**
PO Box 52057, Phoenix, AZ 85072-2057
 **001-480-614-7674**

Did you know?

We offer free translation services and currency conversion to members overseas. If you receive a bill or claim in a different language, our Overseas Assistance Center will translate it for you. You can also request to have your reimbursement paid in U.S. currency or local currency.

2022 Overseas medical benefits

Benefit	Standard Option	Basic Option	FEP Blue Focus
Primary care doctor	\$25 copay	\$30 copay ¹	\$10 per visit for your first 10 primary and/or specialty care visits ¹
Specialists	\$35 copay	\$40 copay	
Virtual doctor visits through Teladoc®	\$0 for first 2 visits \$10 all additional visits	\$0 for first 2 visits \$15 all additional visits	\$0 for first 2 visits \$10 all additional visits
Maternity	\$0 copay	\$0 copay*	\$0 copay*
Inpatient hospital*	\$0 copay	\$0 copay	\$0 copay
Outpatient hospital	15% of our allowance	\$100 per day per facility	30% of our allowance ²
Surgery	15% of our allowance	\$150 in an office ¹ \$200 in a non-office setting ¹	30% of our allowance
ER (accidental injury)	\$0 within 72 hours	\$175 per day	\$0 within 72 hours
ER (medical emergency)	15% of our allowance	\$0 copay ¹	30% of our allowance
Lab work (such as lab tests and EKGs)	15% of our allowance	\$0 copay ¹	\$0 for first 10 specific lab tests ³
Diagnostic services (such as sleep studies, X-rays, CT scans)	15% of our allowance	Up to \$100 in an office ¹ Up to \$150 in a hospital ¹	30% of our allowance ²
Physical, Speech and/or Occupational Therapy	\$25 at a primary care doctor \$35 at a specialist Limited to 75 visits per person a year	\$30 at a primary care doctor ¹ \$40 at a specialist ¹ Limited to 50 visits per person a year	\$25 copay per visit Limited to 25 visits per person a year
Deductible	Waived overseas	No deductible	Self Only: \$500 Self + One and Self & Family: \$1,000
Out-of-Pocket maximum	Self Only: \$6,000 Self + One and Self & Family: \$12,000	Self Only: \$6,500 Self + One and Self & Family: \$13,000	Self Only: \$8,500 Self + One and Self & Family: \$17,000

*Is subject to the calendar year deductible. The deductible for FEP Blue Focus is \$500 per person or \$1,000 in total per family. Basic Option does not have a calendar year deductible.

¹You pay 30% of our allowance for agents, drugs and/or supplies you receive during your care.

²Deductible applies. In addition, you pay 30% of our allowance for agents, drugs and/or supplies you receive during your care.

³Please see the brochure for covered lab services.

Care overseas

Members overseas can visit with providers in person and, if applicable, virtually or on the phone. Call **1-804-673-1678** to get assistance finding in-person care overseas.

Inpatient care

We waive the cost of covered inpatient care received overseas. For Standard Option, you can go to any inpatient care provider (we still recommend you get a GOB first, so you don't have to submit a claim). For Basic Option and FEP Blue Focus, you **must** visit a Department of Defense facility or a provider that accepts a GOB arrangement. Call **1-804-673-1678** or email fepoverseas@gmmi.com to set up a GOB.

Telehealth visits

We're partnered with Teladoc to offer 24/7 access to general medical services to:

- **Members living in the U.S., Puerto Rico, Guam and the U.S. Virgin Islands**
- **Members traveling outside the U.S., but live in areas with a U.S. ZIP Code**

Teladoc doctors are board certified and are able to treat minor illnesses and ailments, such as cold and flu symptoms. All members get their first two Teladoc visits of the year free. You pay a low **\$10** (Standard Option and FEP Blue Focus) or **\$15** (Basic Option) copay for all subsequent visits.



Using telemedicine services through a local provider

All members, regardless of where you live, can receive virtual care from local providers outside of our Teladoc network. We cover online or phone telemedicine consults provided by primary care physicians and specialists. You'll pay the same copay for these visits that you would pay if you visited the provider in person (see our benefit chart on **page 5**).

Emergency evacuation services

We provide emergency evacuation services for members overseas. If there's an emergency, we'll transfer you to the nearest facility that can treat your condition. If you need these services, please call **1-804-673-1678 before** you receive services. This will help prevent you from getting overcharged for the transport.

2022 Overseas pharmacy benefits

You can use your pharmacy benefits overseas as well. Drugs purchased overseas must be equivalent to drugs that by U.S. federal law require a prescription. You can download our approved drug list (formularies) at fepblue.org/pharmacy.

Get your prescriptions mailed to you

You can use the Mail Service or Specialty Pharmacy Programs overseas as long as:



You have a valid U.S. ZIP Code. This includes valid APO, DPO and FPO addresses



Your prescribing physician is licensed in the U.S., Puerto Rico or the U.S. Virgin Islands



The country you live in does not restrict the importation of drugs from other countries

What you pay for drugs overseas (for up to a 30-day supply)

	Standard Option	Basic Option	FEP Blue Focus
Overseas Retail Rx	15% of our allowance	30% of our allowance	Tier 1: \$5 copay Tier 2: 40% of our allowance (\$350 max)
Mail Service Rx	Tier 1: \$15 Tier 2: \$90 Tier 3: \$125	Not a benefit unless you have Medicare Part B primary	Not a benefit
Specialty Rx	Tier 4: \$65 Tier 5: \$85	Tier 4: \$85 Tier 5: \$110	40% of our allowance (\$350 max)

Tier levels vary between Standard Option, Basic Option and FEP Blue Focus. Visit fepblue.org/pharmacy to learn more about our drug tiers.

Did you know?

If you take a maintenance medication and you are about to go overseas for an extended period of time, you can request up to a 12-month supply of your prescription before you leave the U.S. Contact our Pharmacy Program at **1-800-624-5060** to learn more.

Wellness programs

As a Service Benefit Plan member, you have access to a number of health and wellness programs. Learn more about our programs at fepblue.org/healthwellness.

Blue Health Assessment

Get a health action plan you can use to live healthier. Standard and Basic Option members may also earn **\$50** for completing the BHA each year.

Online Health Coach

Get support and actionable steps you can take to reach your health goals or manage certain chronic conditions. Standard and Basic Option members may earn up to **\$120** for completing up to three eligible goals.

Routine Annual Physical Incentive Program

FEP Blue Focus members can get rewarded for getting their annual physical each year.

Pregnancy Care Incentive Program

Expectant mothers overseas can get support and incentives throughout their pregnancy. Standard and Basic Option members can earn **\$75** for getting prenatal care in their first trimester. You can also earn a Pregnancy Care Box with items to support you during and after your pregnancy.

Diabetes Programs

If you have diabetes, keeping your diabetes in check is important. Standard and Basic Option members can receive a free digital glucose monitor and unlimited lancets through our Diabetes Management Program by Livongo®. They can also earn up to **\$100** for managing their A1c through our Diabetes Management Incentive Program.

Hypertension Management Program

Members with high blood pressure may be eligible to receive a **free blood pressure monitor** if you have a claim that supports you have high blood pressure.

Case Management

Members with certain conditions can choose to enroll in case management. Through this program, you can work with licensed healthcare professionals to help you navigate your health needs. They'll work with you and your providers to make sure you get the support and care you need. This service is offered to members living overseas through our Overseas Assistance Center.

Please note: For certain programs, you need a valid APO, FPO or DPO address to participate or receive rewards. In addition, overseas members can use the MyBlue® Wellness Card to make qualified medical expense purchases outside the U.S. at approved healthcare merchants, but it is more likely that you will be asked to send in your receipts to authorize the use of funds on your card for those purchases.

CONTACT US

We're here to assist you if you need help overseas.

Overseas Customer Service (weekdays from 5 a.m. to 6 p.m. Eastern Time)

Do you need help with things like claims filing, enrollment questions, obtaining a Certificate of Coverage and U.S. dollar check reimbursements? Call our dedicated Overseas Customer Service at **1-888-999-9862**.

Overseas Assistance Center (available 24/7)

Need help with finding a provider overseas, direct billing or guarantee of benefits arrangements, emergency medical evacuations, translation services and more? Call our Overseas Assistance Center at **1-804-673-1678** or email them at fepoverseas@gmmi.com.

Overseas Pharmacy Questions (available 24/7)

1-888-624-5060



Replacement ID cards are coming in 2022

All current Service Benefit Plan contract holders will receive replacement member ID cards in early 2022. Your member ID card has important contact information and is the key to accessing your benefits. Learn more about your updated ID card at fepblue.org/mycard.

Learn more at fepblue.org/overseas.



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This is a summary of the features of the Blue Cross and Blue Shield Service Benefit Plan. Before making a final decision, please read the Plan's Federal brochures (FEP Blue Standard and FEP Blue Basic: RI 71-005; FEP Blue Focus: RI 71-017). All benefits are subject to the definitions, limitations and exclusions set forth in the Federal brochures.

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