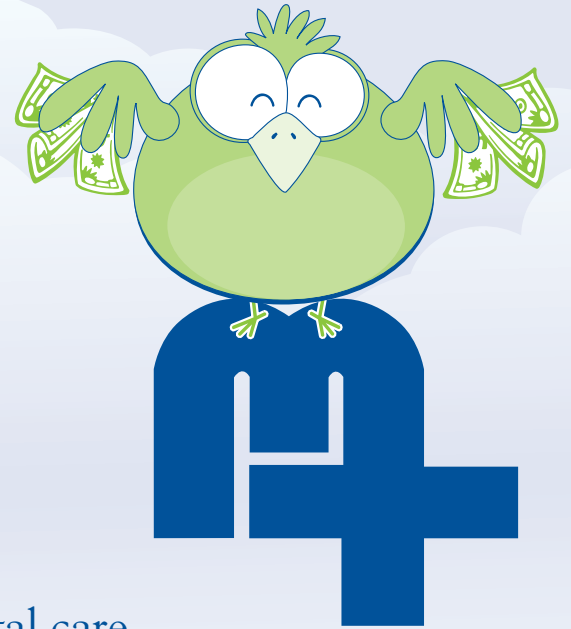


Good news for Blue Cross/Blue Shield PPO members!



You can come to Methodist
...and **Save** money, too!

Now you can choose Methodist for your hospital care, outpatient and diagnostic services – even if Methodist is not your preferred provider. The Methodist Matching Program makes it easy. And best of all, you SAVE money!

No
out-of-pocket
expenses.

When you qualify for the Methodist Matching Program, you have NO out-of-network penalties and NO out-of-pocket expenses for hospital, outpatient or diagnostic services at Methodist. That means you save on your inpatient and outpatient care at Methodist!

The Matching Program does not include physician fees. However, all Methodist Medical Group providers and hospital-based providers are in the BCBS network and are covered under your in-network benefit.

Most BCBS PPO members qualify for the Matching Program. Exceptions include those covered under Medicare, Medicaid, or secondary insurance. A quick phone call will tell you if you qualify.

Call the Matching Hotline

309-671-2106

Toll Free

866-390-6624



**Taking
You Well**
INTO THE FUTURE...

Matching Program FAQs

Frequently Asked Questions

Will I receive a membership card?

No, there are no membership cards. To use the Matching Program, simply call the Matching Hotline prior to each date of service to be qualified and approved.

Who qualifies for the Matching Program?

The majority of BCBS PPO members qualify for this program. A few examples of exclusions are those covered under Medicare, Medicaid and those with secondary insurance coverage. It only takes a few minutes to contact the Matching Hotline to see if you are approved.

What services are covered under the Matching Program?

Inpatient, outpatient and diagnostic services are covered. Physician charges are not covered under the matching program. However, Methodist Medical Group physicians, and the radiologists, pathologists, anesthesiologists and emergency room physicians associated with Methodist Medical Center are in the BCBS PPO network and their charges will be processed according to your plan's in-network benefit.

What information do I need when I call the Matching Hotline?

Have your insurance ID card available when you call.

Will I receive any type of confirmation after I've called the Matching Hotline?

Yes, a letter of confirmation will be provided.

Is there a maximum amount that can be matched annually?

At this time there are no maximums. If limits are added in the future, you'll be advised when you speak to the Matching Hotline representative.

Is there a charge or membership fee when using the Matching Program?

No, the program is complimentary to both the employer and employees.

If I must call prior to the service, what happens in an emergency?

Under most plans, emergencies are paid at the same level regardless of hospital. Requests for the Matching Program should be made within two days of an Emergency Department visit.

If I was qualified and used the Matching Program in January, am I qualified for the remainder of that year?

No, you must call the Matching Hotline prior to each and every date of service.

What is the Matching Hotline number ?

309-671-2106 or Toll Free 866-390-6624

