Confused About Where to Go for Care?

SmartER Care[™] options may save you money.

If you aren't having an emergency, knowing where to go for medical care may save you time and money.

You have choices for where you get non-emergency care — what we call SmartER Care. Use the chart below to help you figure out when to use each type of care.

When you use in-network providers for your family's health care, you usually pay less for care. Search for in-network providers in your area at **bcbstx.com** or by calling the Customer Service number on the back of your member ID card.



Virtual Visits

- Available 24 hours a day, seven days a week
- Access to care for non-emergency medical issues whether you're at home or traveling
- Based on your location, have a doctor visit by phone at 888-680-8646, online at MDLIVE.com/bcbstx or with the MDLIVE® mobile app¹
- Average wait time is less than 20 minutes
- Powered by MDLIVE

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Doctor's Office

- Office hours vary
- Generally the best place to go for non-emergency care
- Doctor-to-patient relationship established and therefore able to treat, based on knowledge of medical history
- Average wait time is 18 minutes²



Retail Health Clinic

- Based upon retail store hours
- Usually lower out-ofpocket cost to you than urgent care
- Often located in stores and pharmacies to provide convenient, low-cost treatment for minor medical problems



Urgent Care Provider

- Generally includes evenings, weekends and holidays
- Often used when your doctor's office is closed, and there is no true emergency
- Average wait time is 16-24 minutes³
- Many have online and/or telephone check-in



Hospital ER

- Open 24 hours, seven days a week
- Average wait time is 4 hours, 7 minutes⁴
- If you receive care from an out-of-network provider, you may have to pay more. Providers outside the network may "balance bill" you, which means they may charge you more than your health plan's fee schedule.
- Multiple bills for services such as doctors and facility



Freestanding ER

- Open 24 hours, seven days a week
- Could be transferred to a hospital-based ER depending on medical situation
- Services do not include trauma care
- Often freestanding ERs are out-of-network. If you receive care from an out-of-network provider, you may have to pay more. Providers outside the network may "balance bill" you, which means they may charge you more than your health plan's fee schedule.
- All freestanding ERs charge a facility fee that urgent care centers do not. You may receive other bills for each doctor you see.⁵

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If you need emergency care, call 911 or seek help from any doctor or hospital immediately.

Internet/Wi-Fi connection is needed for computer access. Data charges may apply. Check your cellular data or internet service provider's plan for details.

Non-emergency medical service in Idaho, Montana and New Mexico is limited to interactive audio/video (video only), along with the ability to prescribe.

Non-emergency medical service in Arkansas is limited to interactive audio/video (video only) for initial consultation, along with the ability to prescribe.

² Vitals Annual Wait Time Report, 2017.

³ Wait Time Trends in Urgent Care and Their Impact on Patient Satisfaction, 2017.

⁴ Emergency Department Pulse Report 2010 Patient Perspectives on American Health Care. Press Ganey Associates.

⁵ The Texas Association of Health Plans.

Note: The relative costs described here are for independently contracted network providers. Your costs for out-of-network providers may be significantly higher. Wait times described are just estimates.

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Virtual visits, Powered by MDLIVE may not be available on all plans. Virtual visits are subject to the terms and conditions of your benefit plan, including benefits, limitations, and exclusions. MDLIVE operates subject to state regulations and may not be available in certain states. MDLIVE is not an insurance product or a prescription fulfillment warehouse. MDLIVE does not guarantee that a prescription will be written. MDLIVE does not prescribe DEA-controlled substances, non-therapeutic drugs and certain other drugs that may be harmful because of their potential for abuse. MDLIVE physicians reserve the right to deny care for potential misuse of services.

The information provided in this guide is not intended as medical advice, nor meant to be a substitute for the individual medical judgment of a doctor or other health care professional. Please check with your doctor for individualized advice on the information provided. Coverage may vary depending on your specific benefit plan and use of network providers. For questions, please call the number on the back of your member ID card.

Deciding Where to Go? Virtual Visit, Doctor's Office, Retail Clinic, Urgent Care or ER.

	Virtual Visits powered by MDLIVE	Doctor's Office	Retail Health Clinic	Urgent Care Center	Hospital ER	Freestanding ER
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Who usually provides care	Primary Care Pediatrics, Family and Emergency Medicine Doctors	Primary Care Doctor	Physician Assistant or Nurse Practitioner	Internal Medicine, Family Practice and Pediatric	ER Doctors, Internal Medicine, Specialists	ER Doctors
Sprains, strains					Any life-threatening or disabling conditions Sudden or unexplained loss of consciousness Major injuries Chest pain; numbness in the face, arm or leg; difficulty speaking Severe shortness of breath High fever with stiff neck, mental confusion or difficulty breathing Coughing up or vomiting blood Cut or wound that won't stop bleeding Possible broken bones	Most major injuries except for trauma¹ May also provide imaging and lab services but do not offer trauma or cardiac services requiring catheterization¹ Do not always accept ambulances
Animal bites				-		
X-rays				-		
Stitches						
Mild asthma				-		
Minor headaches				-		
Back pain				-		
Nausea, vomiting, diarrhea				-		
Minor allergic reactions				_		
Coughs, sore throat				_		
Bumps, cuts, scrapes				_		
Rashes, minor burns	•			-		
Minor fevers, colds				_		
Ear or sinus pain				_		
Burning with urination				_		
Eye swelling, irritation, redness or pain		•	•	•		
Vaccinations				_		

Urgent Care Center or Freestanding ER

Knowing the Difference Can Save You Money
Urgent care centers and freestanding ERs can
be hard to tell apart. Freestanding ERs often look a lot
like urgent care centers, but costs may be higher.
A visit to a freestanding ER often results in surprise
medical bills that may be 10 times the rate charged by
urgent care centers for the same services.² Here are
some ways to know if you are at a freestanding ER.

Freestanding ERs:

- Look like urgent care centers, but have the word "Emergency" in their name or on the building.
- Are open 24 hours a day, seven days a week.
- Are not attached to and may not be affiliated with a hospital.
- Are subject to the same ER member share which may include a copay, coinsurance and applicable deductible.

Find urgent care centers³ near you by texting⁴ **URGENTTX** to **33633**.

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MDLIVE, an independent company, provides virtual visit services for Blue Cross and Blue Shield of Texas. MDLIVE operates and administers the virtual visit program and is solely responsible for its operations and that of its contracted providers.

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^{1 &}quot;Freestanding ED 101: What you need to know" July 2016, The Advisory Board Company.

² Freestanding ERs: The Need for Greater Transparency and More Consumer Protections. (2016). The Texas Association of Health Plans.

³ The closest urgent care center may not be in your network. Be sure to check Provider Finder® to make sure the center you go to is in-network.

⁴ Message and data rates may apply. Read terms, conditions and privacy policy at bcbstx.com/mobile/text-messaging.