

WHCRA Enrollment Notice

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient, for:

- All stages of reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance;
- Prostheses; and
- Treatment of physical complications of the mastectomy, including lymphedema.

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this plan. Therefore, the following deductibles and coinsurances apply:

Benefits—BCBST Network S	In-Network Benefits (Member Pays)	Out of Network Benefits (Member Pays)
Annual Deductible Individual Family	\$750 \$1,500	\$1,500 \$3,000
Annual Out-of-Pocket Maximum Individual Family	\$2,500 \$5,000	\$7,500 \$15,000
Coinsurance (Member pays)	20%	40%

If you would like more information on WHCRA benefits, call your plan administrator, 423-869-6825

For purposes of this notice, the plan administrator is:

Melissa Short
Benefits Administrator
423-869-6825