



## Get Answers to our Most Asked Questions

Last Updated March 31, 2014

### Q. I'm a new member and want to make a payment. What are my options to pay my premium?

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- **Online** – Make a one-time payment by bank draft through OrbiPay®\*. Visit [OrbiPay's secure website](#) and follow the instructions to make your payment.
- **By mail** – Pay your premium by mail with a personal check, cashier's check or money order. To do so, be sure you:
  - Make the check payable to Blue Cross and Blue Shield of Texas
  - Write your account/member ID number on your check, cashier's check or money order
  - Include the payment coupon that was sent to you with your premium invoice
  - Send your payment at least 5 business days in advance of the payment due date to ensure timely posting to your account
  - Make your payment to the address on your premium invoice
- **By personal check over the phone** – Call the OrbiPay payment line toll-free at **877-433-3755**. Please have your member ID number, bank routing number and bank account number ready. Your payment will be applied within 24 hours.
- **In person** – Bring a copy of your premium invoice with your member ID number and "receive code," to any MoneyGram® location near you (including most Walmart, ACE Cash Express and CVS Stores) and pay with cash. MoneyGram locations in Walmart stores also take debit card payments. Visit the [MoneyGram website](#) to find locations near you. Payments made in person will be applied to your account within 1-2 business days.
- **By debit or credit card** – Pay by using a credit, debit or pre-paid debit card:
  - Call **866-654-8569** and enter the necessary information when prompted to make your payment. You will need your member ID number and group number. Both are included on your welcome letter and your member ID card.
  - Or log into your [Blue Access for Members account at bcbstx.com](#) and look for the Billing & Payments section. Payments made with a card will be applied to your account within 1-2 business days.
- **By automatic recurring payments** – Set up a recurring electronic funds transfer (EFT) by calling Customer Service at **888-697-0683**. You will need your member ID number and group number, both of which can be found on your welcome letter and member ID card.

For more information on all the ways you can pay your bill visit [bcbstx.com/payment-options](http://bcbstx.com/payment-options).

\* BCBSTX has contracted with a third-party vendor, Alacriti Payments, LLC, to process your ACH/electronic check payment. In order to process this payment, you will be redirected to Alacriti's secure payment site, OrbiPay. If you have any problems with your payment, please contact BCBSTX customer service at 888-697-0683.



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**Q. I missed the March 31 open enrollment deadline. Can I still buy health insurance?**

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In most cases, you can only sign up for a health insurance plan during the open enrollment period, which for this year, ended on March 31. If you missed open enrollment, you may be able to enroll during the special enrollment period that runs until November 14, 2014. To be eligible, you must have had a [qualifying "life event"](#) within the past 60 days or experienced [other complications that did not allow you to complete your enrollment](#). To learn more about special enrollment visit [bcbstx.com/coverage/special-enrollment](http://bcbstx.com/coverage/special-enrollment).

If you don't qualify for the special enrollment period, you can still stay insured by buying short-term insurance directly from Blue Cross and Blue Shield of Texas (BCBSTX). We offer affordable short-term plans that can keep you covered until the next open enrollment period begins on November 15. Start shopping at [bcbstx.com](http://bcbstx.com).

Please note: Short-term plans give you basic health care coverage, but they don't meet the Affordable Care Act's minimum essential coverage requirements. As a result, you may still have to pay a fine for having a plan that doesn't meet these requirements.

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**Q. BCBSTX drafted my bank account twice. When will I get my money back?**

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We sincerely apologize for our error in drafting your bank account twice for your premium payment. We had two active policies for you in our system, which pulled your records twice when the automated drafts were processed. We have corrected the error in our system, so this should not happen again. We will mail a refund check for the overpayment amount within 5 days of the error. If you don't see it soon, please give us a call. In addition, if you had overdraft fees as a result of the double billing, please contact us so we can refund these charges as well. You can reach us at 800-792-8595.

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**Q. Has my coverage started? Can I use my health plan?**

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Your first premium payment activates your coverage, so you can start using your health plan within 1-2 days of making your payment, depending on how you pay.

After you've made your first payment and your coverage is activated, you can have health care expenses during that coverage gap applied to your deductible, or even get paid back for some services. In this case, the coverage gap would be the time between your requested effective date and the date you make your first payment.

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**Q. I need to get a prescription filled but don't have my ID card yet. What can I do?**

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Even if you haven't received your ID card, you should have received a new member welcome letter within days of your enrollment being completed. Your member identification and group number listed on your welcome letter can be used by the pharmacy to verify your benefits. You will need to pay your first premium payment before you can use your prescription benefits.

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**Q. I applied on the Health Insurance Marketplace, but haven't heard if my application has been received and accepted. Did my coverage start on the effective date I requested?**

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We receive new applications from the Marketplace every day. If you applied through the Marketplace, it will take a few days for processing through the Marketplace before they are sent to us. It then takes us about 5-10 business days to process your enrollment in the BCBSTX system.



If you just applied recently, we encourage you to wait to see if you receive your membership information soon. If you applied weeks ago and have not received anything from us, it is possible your application has been held up for some reason.

If you applied on the Health Insurance Marketplace or with BCBSTX and you have not received information from us, call our Customer Service Center at 888-697-0683 and we will look up the status of your application. Our call volumes are still very high, so you may have to hold for a long period before getting through. We will help you as quickly as possible.

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**Q. When will I get my member ID cards, and how many will I get?**

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You should get your member ID cards in the mail soon after your application is approved. Individual plans will get 1 card and family plans will get 2 cards. Please note that all member ID cards will only have the subscriber name on it but can be used by all of the dependents enrolled under the policy.

You can print a temporary ID card and request additional cards through your [Blue Access for Members account at bcbstx.com](#). You will need your member identification number and group number to log into [Blue Access for Members](#). These numbers can be found on the new member welcome letter you will receive within days of enrolling.

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**Q. I received my ID cards in the mail but they only have my name on them and not my spouse's. Can I get another ID card with their name on it?**

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Your member ID cards will only have the primary subscriber's name on them, but they can be used by all of the dependents (in this case your spouse) enrolled under your policy.

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**Q. When will I get benefit coverage information and the contract on the plan I selected?**

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Within days of your application being accepted, you will receive a welcome letter from BCBSTX that includes your member identification number and group number. This information can be used by providers and pharmacies to verify your coverage until you get your member ID card. Your ID card will be sent separately soon after.

Your policy information is available through your [Blue Access for Members account at bcbstx.com](#) once your plan is in effect.

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**Q. I've gotten a call from someone asking me questions about my new coverage. Is this person with BCBSTX, and why are they asking these questions?**

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Since you have new coverage with us, we want to make sure you understand your benefits and that we have the information we need to help you with your health care needs. We are calling to:

- Explain how your plan works
- Answer questions you may have, and
- Tell you about some of the services we offer to help manage your care and your coverage.

We also check to make sure the information we have is correct, such as the names of everyone on your plan, your address and other details.



The call often only takes about 15 to 20 minutes. If you have any concern that the person calling you is not with BCBSTX, ask the caller for a number you can use to call us back.

**Q. When I try to register for Blue Access for Members, I get a message telling me it's not available. When will it be available for me to register?**

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You may have received this error message during your registration for a number of reasons. Many times, the information you entered may not have matched the data in our system. Please remember to have your group and member ID numbers handy when you register. Both of these numbers can be found on your welcome letter and your member ID card. [Register now at bcbstx.com/member/register](https://www.bcbstx.com/member/register).

**Q. I had coverage, then you changed my plan effective date and now I don't have coverage. What happened?**

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When the effective date change was made, some BCSBTX plan members who had payment due dates after the 14<sup>th</sup> of the month were not showing as activated in our system, which generated a cancellation in error. We have corrected the problem and are reaching out to members impacted by this error. If you have paid your December premium payment, your coverage should now be active. Once you've activated your coverage by making your first payment, you can have health care expenses during that coverage gap applied to your deductible, or even get paid back for some services.

**Q. I applied for a plan on the Health Insurance Marketplace and also applied for a plan directly with BCBSTX, so now I'm getting a bill for both. How do I cancel one?**

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We cannot process a cancellation request for a Marketplace plan. If you want to cancel your Marketplace plan, you can call the Marketplace at 800-318-2596.

If you want to cancel our off-Marketplace plan, we can process that cancellation for you. Call Customer Service at 888-697-0683. You can also log in to your [Blue Access for Members account at bcbstx.com](https://www.bcbstx.com) and send us a secure email message.

A policy will also automatically be cancelled for nonpayment if you don't pay the premium. This may be your best option. You would simply pay the premium for the plan you want to keep and not pay the premium for the plan you want to cancel.

If you have questions about how health care reform affects you or would like to learn more about your health plan options, please visit our [Health Care Reform and You website at bcbstx.com/health-care-reform](https://www.bcbstx.com/health-care-reform) to learn how the new law might affect you.

Members can log into their [Blue Access for Members account at bcbstx.com](https://www.bcbstx.com) from a desktop or mobile browser for more information about benefits, claim status and more.