



Blue Advantage[®]

Blue Care[®]

Blue HomeSM
with Cone Health

Blue HomeSM
with Novant Health

Blue HomeSM
with UNC Health Alliance

Blue LocalSM
with Atrium Health

Blue ValueSM



2026 health plans

For individuals and families

Why choose Blue?

There's a lot to think about when it comes to choosing health insurance. As the only homegrown, local insurer in all 100 counties of the state, Blue Cross and Blue Shield of North Carolina (Blue Cross NC) is here for you. With over 90 years of experience in the market and our broad range of plans,¹ you can find the coverage that's right for you.

The benefits that are important for getting and staying healthy are at the core of all of our plans. Advantages of health care coverage with Blue Cross NC include:

- No referrals needed to see a specialist
- Coverage in- and out-of-network on some plans
- 24/7 telehealth care options² for behavioral and physical health, available in English and Spanish; \$0 telehealth coverage through Teladoc[®] Health on some plans³
- Convenience of 90-day coverage of prescription mail-order option
- No waiting periods for pre-existing conditions⁴
- Annual in-network wellness visits covered at 100%⁵
- Programs to help you control your type 2 diabetes⁶
- Programs to help you quit smoking⁶
- Access to Blue365[®], which offers special member discounts on vitamins, healthy food delivery, fitness resources and more from national health and wellness retailers⁷
- Affordable dental and vision plans available to complement your medical plan and support your whole health
- In-person help available at Beyond Blue Neighborhood Centers and Blue Stores located throughout the state



Blue Cross NC offers health insurance plans in every county across the state.

With our plans you'll enjoy

- **Preventive care and essential health benefits** – For all Blue Cross NC individual plans mentioned in this brochure, preventive services are covered at no charge when you go to an in-network provider.⁵ These covered services include annual exams, screenings for diabetes, mammograms and more. See BlueCrossNC.com/Preventive for a list of preventive care services. All Blue Cross NC plans mentioned in this brochure also provide coverage for essential health benefits, including mental health, maternity and pediatric dental/vision.*
- **Telehealth services²** – Provides 24/7 access to doctors and convenient access to behavioral health practitioners via live consultations (and at \$0 on some plans).
- **Online member tools⁸** – Blue ConnectSM provides the tools and information you need to manage your plan and make the best decisions about your health care. Through the Blue Connect Mobile NC app, you can access your digital member ID card,⁹ claim status, coverage details and much more. Visit BlueCrossNC.com/BlueConnect for more information.
- **Customer Service to make using insurance easier** – You can reach us by phone, send a secure inbox message or use our live chat feature. Additionally, face-to-face assistance is available in our Beyond Blue Neighborhood Centers and Blue Stores across the state.
- **Coordinated care from high-quality doctors** – With access to a network of high-quality providers, you can select and establish a relationship with a primary care provider (PCP) to serve as your medical “home” – or the quarterback of your entire health care team. From routine preventive care to occasional sick visits, having a primary doctor can help you take better control of your health and coordinate the care you need. Go to BlueCrossNC.com/ChooseMyPCP as soon as your plan is active to select your PCP on Blue Connect. If you have any dependents, do the same from their account(s) too.



Other products to complement your health plan

Dental Blue[®]
for IndividualsSM

Blue 20/20SM
for IndividualsSM

Your oral health and vision health play an important role in your overall health. Blue Cross NC offers separate, affordable, high-quality dental¹⁰ and vision¹¹ plans for individuals and families. You may purchase dental or vision coverage at any time throughout the year, with or without the purchase of Blue Cross NC health coverage.

Learn more at BlueCrossNC.com/DentalBlue and BlueCrossNC.com/Blue2020.

* In- and out-of-network coverage is dependent upon type of plan selected.



Your checklist for buying health insurance

How to sign up, step by step:



Enroll between Nov. 1 and Dec. 15, 2025, for a Jan. 1, 2026, effective date. Enroll between Dec. 16, 2025, and Jan. 15, 2026, for a Feb. 1, 2026, effective date. The Open Enrollment Period ends Jan. 15, 2026.



Find out if you qualify for a subsidy to help pay for your health insurance.¹² Contact your local authorized Blue Cross NC agent for help or go to BlueCrossNC.com/Shopping.



Check the map on page 5 to see which plans are available where you live.



Think about your health care needs. Visit BlueCrossNC.com/FindDoctors to verify which doctors and hospitals are in-network for your selected plan.



Submit your application.



Pay for your plan. Your new health insurance plan will not become effective until Blue Cross NC receives and processes your first month's premium.

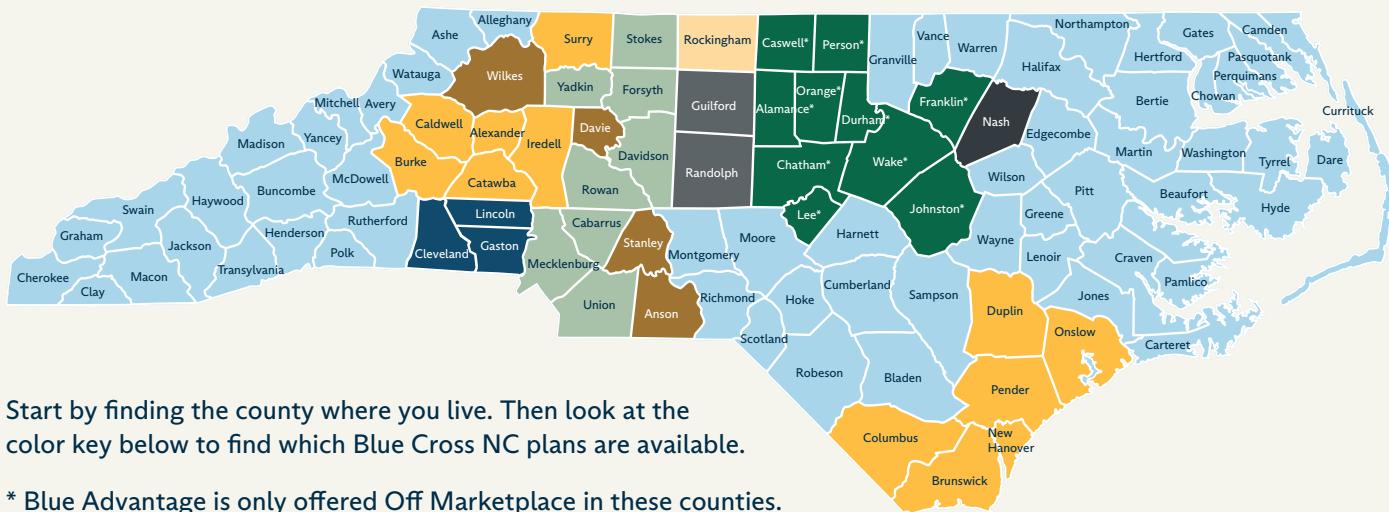


Go to BlueCrossNC.com/ChooseMyPCP during the first month your plan begins to select your PCP on Blue Connect. If you have any dependents, do the same from their account(s) too.



Once Open Enrollment ends, you may be able to buy health insurance if you qualify for a Special Enrollment Period. You may qualify if you've had certain life events, including losing health coverage, moving, getting married, having a baby or adopting a child. See the full list of Qualifying Life Events and guidelines at the federal Health Insurance Marketplace® website Healthcare.gov.¹³ Documentation will be required.

Choose the plan that's right for you



* Blue Advantage is only offered Off Marketplace in these counties.



Plan	Doctor and hospital network	Out-of-network coverage	Out-of-network emergency services*	Out-of-network urgent care**
Blue Advantage®	Nationwide broad network with the most provider choice	Yes	Yes	Yes***
Blue Care®	Statewide broad network with a lot of provider choice	No	Yes	Yes
Blue Home™ with Cone Health	Local network using only Cone Health and its affiliates	No	Yes	Yes
Blue Home™ with Novant Health	Local network using only Novant Health and its affiliates	No	Yes	Yes
Blue Home™ with UNC Health Alliance	Local network using only UNC Health and its affiliates	No	Yes	Yes
Blue Local™ with Atrium Health	Local network using only Atrium Health and its affiliates	No	Yes	Yes
Blue Value™	Limited statewide network that balances access and cost	Yes	Yes	Yes

* Out-of-network emergency services are covered at the in-network benefit level.

** Out-of-network urgent care is covered at the in-network benefit level for all plans except Blue Advantage.

*** Blue Advantage covers out-of-network urgent care at the out-of-network benefit level.

For more information

Contact your local authorized Blue Cross NC agent, visit BlueCrossNC.com/Shopping or speak directly to a Blue Cross NC Sales Representative by calling 800-324-4973, Monday – Thursday, 8 a.m. – 6 p.m., and Friday, 8 a.m. – 5 p.m. ET. You can also visit us in person at any of our statewide locations. Find one at BlueCrossNC.com/InPerson.

Subsidies

See if you qualify¹²

To help make health insurance more affordable, the federal government offers financial assistance, also called subsidies, to individuals and families who qualify based on their income and household size.

To qualify for a subsidy under the Affordable Care Act (ACA), you must:

- Have income between 138% and 400% of the Federal Poverty Level (FPL)
- Not be eligible for public coverage, such as Medicaid, the Children's Health Insurance Program (CHIP), Medicare or coverage through the Armed Services
- Not have affordable* access to insurance through an employer

There are two types of subsidies available:

Advanced Premium Tax Credit (APTC)

- Income between 138% and 400% FPL
- These subsidies reduce the monthly cost of a health insurance plan for those who qualify

Cost Sharing Reductions (CSRs)

- Income between 138% and 250% FPL
- These subsidies reduce the out-of-pocket medical and pharmacy costs for those who qualify¹²

Poverty guidelines¹⁴

Household size	Annual household income for 2025			
	138% FPL	150% FPL	250% FPL	400% FPL
1	\$21,597.00	\$23,475.00	\$39,125.00	\$62,600.00
2	\$29,187.00	\$31,725.00	\$52,875.00	\$84,600.00
3	\$36,777.00	\$39,975.00	\$66,625.00	\$106,600.00
4	\$44,367.00	\$48,225.00	\$80,375.00	\$128,600.00
5	\$51,957.00	\$56,475.00	\$94,125.00	\$150,600.00
6	\$59,547.00	\$64,725.00	\$107,875.00	\$172,600.00
7	\$67,137.00	\$72,975.00	\$121,625.00	\$194,600.00
8	\$74,727.00	\$81,225.00	\$135,375.00	\$216,600.00

For more information



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* Affordable is defined yearly by the federal Marketplace based on the percentage of premium an employee is responsible for.

Metal levels

Which one is right for you?

Health plan categories, or “metal levels,” were created by the Affordable Care Act (ACA) to show the value of the health care coverage and help you easily compare plans. Our plans are available in three metal levels. Learn more about health plan categories on [Healthcare.gov](https://www.healthcare.gov).



Bronze

Bronze plans pay 60% of medical costs on average, and you pay 40%.

- Protects against worst-case medical scenarios
- Has lowest monthly premium
- You pay for most routine care



Silver

Silver plans pay 70% of medical costs on average, and you pay 30%.

- Higher monthly premium
- More routine care is covered than a Bronze plan



Gold

Gold plans pay 80% of medical costs on average, and you pay 20%.

- Ideal if you use a lot of care and are willing to pay more in monthly premiums
- Covers more costs when you get medical treatment



Terms you'll want to know

Affordable Care Act (ACA) – Law intended to address issues with our health care system.

Allowed amount – The maximum amount that Blue Cross NC determines is reasonable for covered services provided to a member. The allowed amount includes any Blue Cross NC payment to the provider, plus any deductible, coinsurance or copayment.

Benefit period – The specified period of time during which charges for covered services provided to a member must be incurred in order to be eligible for payment.

Coinurance – When you pay a percentage of the cost of a covered service, after you've met your deductible.

Copayment – A fixed dollar amount you may pay for a covered service at the time you receive it. Copayments can vary depending on the service.

Deductible – The amount you or your family owe for certain covered services during a benefit period before your health insurance begins to pay.

Federal Poverty Level (FPL) – An index of income level (by family size) that determines eligibility for premium tax credits.

Integrated prescription drug benefits – Your prescription drug benefits are subject to the same deductible and coinsurance as other medical services.

Marketplace – The federal Health Insurance Marketplace is an online insurance marketplace where individuals can compare and buy qualified health insurance plans.

Member – A member is a person in a health plan; someone with insurance coverage.

Metal level – Categories of plans in the federal Health Insurance Marketplace that are based on how you and your insurance plan split costs.

Network – The hospitals, doctors, pharmacies and other providers your health insurer or plan has contracted with to provide health care services.

Open Enrollment – The time period when you can sign up for health insurance.

Out-of-pocket limit – The maximum you will pay from your own funds for covered services in a benefit period. Once met, Blue Cross NC will pay 100% of your remaining covered services. Deductibles, copayments and coinsurance for covered medical and drug benefits apply to this limit. Premiums and non-covered services, as well as out-of-network charges beyond the allowed amount, do not apply.

Outpatient – A person who gets hospital care but is not admitted to the hospital.

Premium – A premium is the monthly payment made to Blue Cross NC to keep your health benefit plan active.

Primary Care Provider (PCP) – A physician, nurse practitioner, nurse specialist or physician assistant who provides or coordinates health care for patients.

PCP step-down benefits – A certain number of visits are covered at a lower copay or no cost. After the visit limit has been reached, any additional visits are covered at a different copay amount. For example: on some plans, members will have three visits to a PCP at no charge, then after the three visits, a standard PCP copay applies. Members will also have three mental health and/or substance use office visits at no charge; after three visits, standard copay applies.

Special Enrollment Period – A time outside the yearly Open Enrollment Period when you can sign up for health insurance based on certain life events, including losing health coverage, moving, getting married, having a baby or adopting a child.

Subsidies – Available from the federal government to help low- and middle-income Americans with their health insurance costs.



Limitations & Exclusions

Like most health care plans, Blue Advantage, Blue Care, Blue Home with Cone Health, Blue Home with Novant Health, Blue Home with UNC Health Alliance, Blue Local with Atrium Health and Blue Value have some limitations and exclusions. Once you're enrolled, a Member Guide will be made available to you. It will contain detailed information about your plan benefits, exclusions and limitations. This is a partial list of benefits and services that are not covered:

- Services for or related to assisted reproductive technology or for reversal of sterilization
- Treatment of sexual dysfunction not related to organic disease
- Services that are investigational in nature or obsolete, including any service, drug, procedure or treatment directly related to an investigational treatment, except as specifically covered by this health benefit plan
- Side effects and complications of non-covered services, except for emergency services in the case of an emergency
- Services that are not medically necessary
- Dental services provided in a hospital, except as specifically covered by your health benefit plan
- Services or expenses that are covered by any governmental unit except as required by federal law
- Services received from an employer-sponsored dental or medical department
- Services received or hospital stays before (or after) the effective dates of coverage
- Custodial care, domiciliary care or rest cures
- Eyeglasses or contact lenses or refractive eye surgery, except as specifically covered by your health benefit plan
- Routine eye examinations for adults
- Services for cosmetic purposes, except as specifically covered by your health benefit plan
- Services for routine foot care that is palliative or cosmetic
- Travel, except as covered by your health benefit plan
- Inpatient admissions that are primarily for physical therapy, diagnostic studies or environmental change
- Services that are rendered by or on the direction of those other than doctors, hospitals, facility and professional providers
- For any condition suffered as a result of any act of war or while on active or reserve military duty
- Services for which a charge is not normally made in the absence of insurance, or services provided by an immediate relative
- Non-prescription drugs, except as specifically covered by your health benefit plan

- Prescription drugs or refills which exceed the maximum supply

- Personal hygiene, comfort and/or convenience items

- Telephone consultations not provided through telehealth benefits, charges for failure to keep a scheduled visit, charges for completion of a claim form, charges for obtaining medical records and late payment charges

- Services primarily for educational purposes

- Services not specifically listed as covered services

Dental:

This is a partial list of services that are not covered by Dental Blue for Individuals. Refer to the member booklet for a full list of exclusions. Your dental benefits plan does not cover services, supplies, drugs or charges that are:

- Orthodontic services
- Not clinically necessary
- Investigational in nature or obsolete, including any service, drugs, procedure or treatment directly related to an investigational treatment
- Received prior to the member's effective date
- Received on or after the coverage termination date, regardless of when the treated condition occurred or whether the care is a continuation of care received prior to the termination
- For complications or side effects arising from services, procedures or treatments excluded from coverage under this dental benefits plan
- In excess of the allowed amount

Vision:

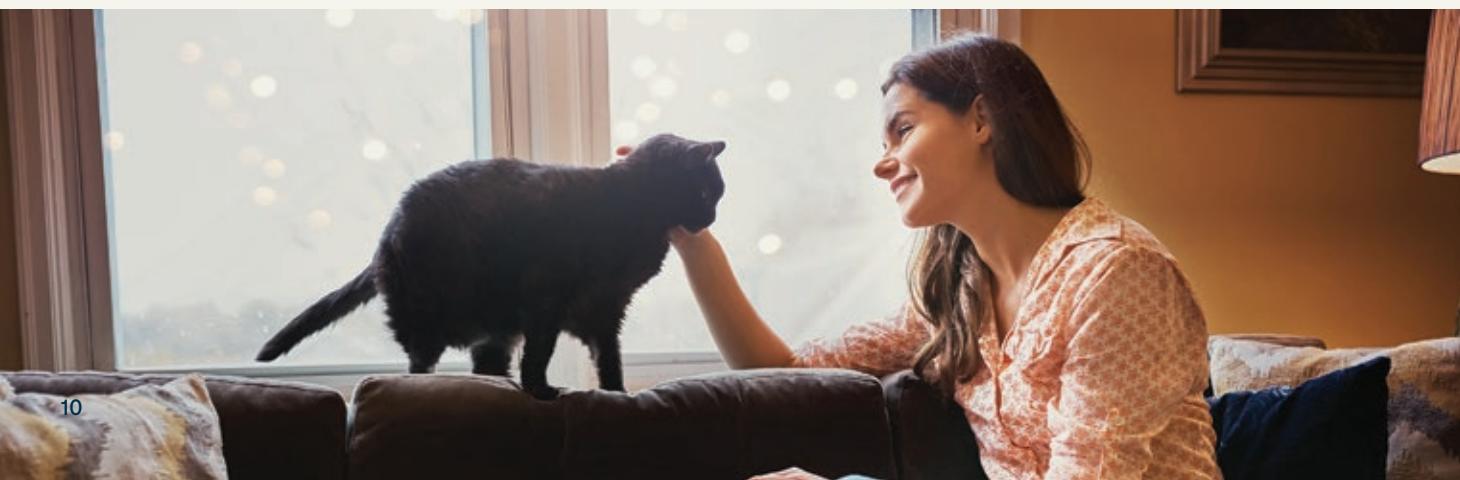
This is a partial list of services that are not covered by Blue 20/20 for Individuals. Refer to the member benefit booklet for a full list of exclusions.

- Lost or broken lenses, frames, glasses or contact lenses
- Non-prescription lenses, contact lenses or sunglasses
- Two pairs of eyeglasses in place of bifocals
- Medical and/or surgical treatment of the eye, eyes or supporting structures
- Any eye or vision examination or corrective eyewear ordered by a member's employer, including safety eyewear

Your coverage will automatically renew. Your coverage may be canceled by Blue Cross NC for fraud or intentional misrepresentation of material fact on your application or for nonpayment of premiums. Coverage for dependent children ends at the end of the year they become age 26 for On Marketplace policies. Coverage for dependent children ends at the end of the month they become age 26 for Off Marketplace policies. Members will be notified 30 days in advance of any change in coverage. This brochure contains a summary of the benefits only. It is not your insurance policy. Your policy and application along with your member ID card are your contract. If there is any difference between this brochure and the policy, the provisions of the policy will control. Visit BlueCrossNC.com for more information.

The Blue Cross NC Utilization Management (UM) program works to ensure you get the care you need in the appropriate health care setting. Find details about our UM processes and how you can appeal a denied service at BlueCrossNC.com/UMdetails.

Blue Cross NC works to protect the privacy of your health information every day. Learn how information is protected, what information may be shared externally, rights to approve the release of information and access to medical records at BlueCrossNC.com/PrivacyDetails.



Disclaimers

Blue Cross NC has collaborated with Cone Health to bring you Blue Home with Cone Health. Blue Home with Cone Health is a health insurance plan offered by Blue Cross NC that provides access to a limited network of providers. Cone Health is an independent company that is solely responsible for the physicians and medical facilities it owns and operates. Cone Health does not offer Blue Cross or Blue Shield products or services.

Blue Cross NC has collaborated with Novant Health to bring you Blue Home with Novant Health. Blue Home with Novant Health is a health insurance plan offered by Blue Cross NC that provides access to a limited network of providers. Novant Health is an independent company that is solely responsible for the physicians and medical facilities it owns and operates. Novant Health does not offer Blue Cross or Blue Shield products or services.

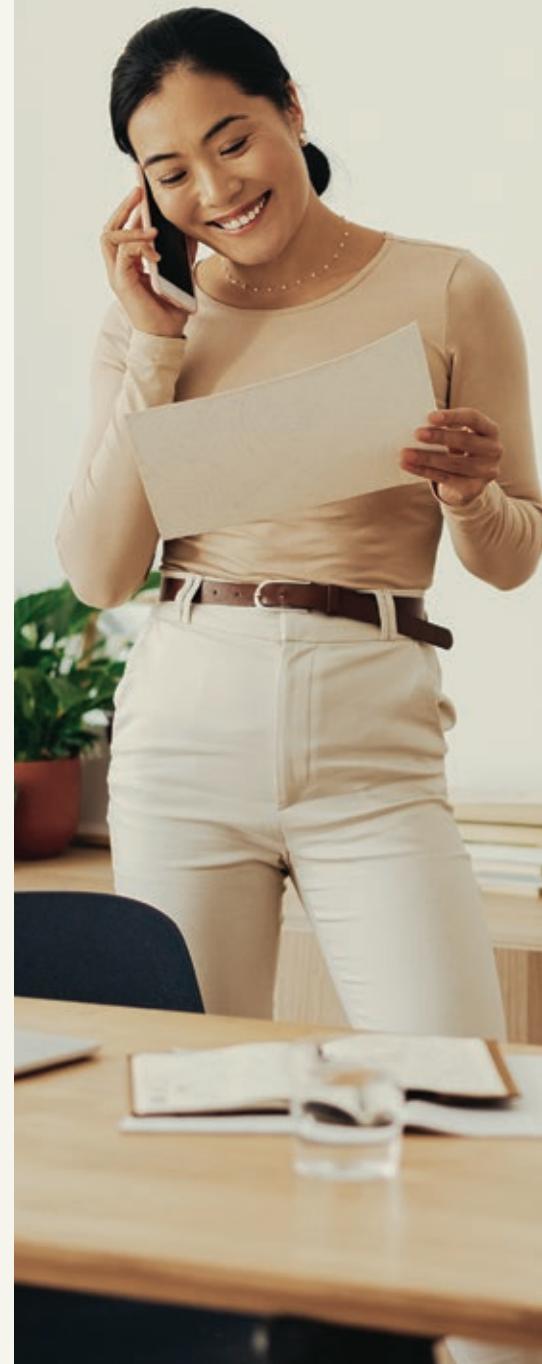
Blue Cross NC has collaborated with UNC Health to bring you Blue Home with UNC Health Alliance. Blue Home with UNC Health Alliance is a health insurance plan offered by Blue Cross NC that provides access to a limited network of providers. UNC Health is an independent company that is solely responsible for the physicians and medical facilities it owns and operates. UNC Health does not offer Blue Cross or Blue Shield products or services.

Blue Cross NC has collaborated with Atrium Health to bring you Blue Local with Atrium Health. Blue Local with Atrium Health is a health insurance plan offered by Blue Cross NC that provides access to a limited network of providers. Atrium Health is an independent company that is solely responsible for the physicians and medical facilities it owns and operates. Atrium Health does not offer Blue Cross or Blue Shield products or services.

Amazon Pharmacy is an independent company that is solely responsible for the services they provide. Amazon Pharmacy does not offer Blue Cross or Blue Shield products or services. Amazon Pharmacy does not dispense controlled substances (Schedule 2 medications).

Footnotes

- 1 All information discussed in this brochure pertains to Blue Cross NC individual market, medical health insurance plans that are eligible for sale in benefit year 2026 and meet Affordable Care Act guidelines. The information contained does not apply to plans that are transitional, group, dental-only or other plan types. All details regarding plan benefits and design contained herein are for informational purposes only. Please see the product benefit booklet for all terms and conditions that apply.
- 2 Telehealth benefits are available on all plans either from Blue Cross NC or through the provider network. Blue Cross NC provides the telehealth program for your convenience and is not liable in any way for the goods or services received. Blue Cross NC reserves the right to discontinue or change the program at any time without prior notice. Decisions regarding your care should be made with the advice of a doctor. Depending on your plan, selected programs may not be available to you at this time. Check with Blue Cross NC Customer Service to determine your eligibility. Blue Cross NC has contracted with a third-party vendor independent from Blue Cross NC to bring you telehealth benefits.
- 3 Teladoc Health, Inc. interactive consultations are available 24 hours a day, 7 days a week. Telehealth services are subject to the terms and conditions of the member's health plan, including benefits, limitations and exclusions. Telehealth services are not a substitute for emergency care. Teladoc Health is subject to state regulations. Behavioral health telehealth is currently only available to members ages 13 or older. Primary360 is a service provided by Teladoc Health, an independent company that is solely responsible for the telehealth services it is providing; please see Teladoc Health website for more information. Teladoc Health does not offer Blue Cross or Blue Shield products or services.
- 4 Eligibility requirements apply. See benefit booklet for details.
- 5 Preventive care services, as defined by federal regulations, are covered at no charge in-network. Federally- and state-mandated preventive services are available out-of-network, for which members will pay deductible and coinsurance, plus charges over the allowed amount. Visit BlueCrossNC.com/Preventive for more details.
- 6 Blue Cross NC provides tobacco cessation and diabetes reversal programs for your convenience. Blue Cross NC is not liable in any way for the goods or services received through the respective vendors. Blue Cross NC reserves the right to discontinue or change the program at any time without prior notification. Decisions regarding your care should be made with the advice of your doctor. Check with Blue Cross NC Customer Service to determine your eligibility. Blue Cross NC has contracted with a third-party vendor independent from Blue Cross NC to bring you these offerings.
- 7 Blue365 offers access to savings on items that members may purchase directly from independent vendors, which are different from items that are covered under the policies with your Blue Cross NC plan. Any disputes regarding these products and services may be subject to the Blue Cross NC grievance process. The Blue Cross and Blue Shield Association (BCBSA) may receive payments from Blue365 vendors. BCBSA does not recommend, endorse, warrant or guarantee any specific Blue365 vendor or item. This program may be modified or discontinued at any time without prior notice.
- 8 Blue Cross NC offers several decision support tools to aid you in making decisions around your health care experience. These tools are offered for your convenience and should be used only as reference tools. You should consult your own legal counsel, tax advisor or personal physician as applicable throughout your health care experience.
- 9 Member ID cards are for identification purposes only. They do not guarantee eligibility or payment of your claim.
- 10 The Dental Blue for Individuals core plan has a six-month waiting period for basic services and a 12-month waiting period for major services. There are no waiting periods on the Dental Blue for Individuals PPO preventive plan. Dental Blue for Individuals is not part of the covered health insurance benefits of any Blue Cross NC plan. Dental Blue for Individuals must be purchased separately. For costs and further details about Dental Blue for Individuals, including exclusions or limitations and terms under which the policy may be continued in force, contact Blue Cross NC or visit BlueCrossNC.com/DentalBlue.
- 11 Blue 20/20 for Individuals is not part of the covered health insurance benefits of any Blue Cross NC plan. Blue 20/20 for Individuals must be purchased separately. For costs and further details about Blue 20/20 for Individuals, including exclusions or limitations and terms under which the policy may be continued in force, contact Blue Cross NC or visit BlueCrossNC.com/Blue2020.
- 12 Subsidies only available for plans purchased through the federal Health Insurance Marketplace. Eligibility for and actual amount of any subsidy is determined by the federal Marketplace. Visit Healthcare.gov for more information.
- 13 Special enrollment periods (SEPs) are available for individuals with qualifying life events. Details regarding SEP requirements can be found at [healthcare.gov](https://Healthcare.gov).
- 14 U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. (n.d.) 2025 poverty guidelines: 48 Contiguous States (all states except Alaska and Hawaii). aspe.hhs.gov/sites/default/files/documents/dd73d4f00d8a819d10b2fdb70d254f7b/detailed-guidelines-2025.pdf (Accessed July 2025).



Easy steps to enroll

It's easy to apply for coverage!

Step 1

Contact your local authorized Blue Cross NC agent or apply for coverage by visiting BlueCrossNC.com/Shopping and clicking on the Get a Quote button. Use the tools and tips on the rate quote results page to compare prices and plan details.⁸ Complete the online application and select a plan.

Step 2

Your enrollment will not be complete and your policy will not become effective until your first month's premium payment has been received and processed.

Step 3

Once your enrollment is complete, your member ID card⁹ will be mailed to you. After your effective date, register for a Blue Connect account to manage your plan and access the information you need to make the best health care decisions for you and your family.

Step 4

Go to BlueCrossNC.com/ChooseMyPCP in the first month your plan begins to select your PCP on Blue Connect. If you have any dependents, do the same from their account(s) too.

Open Enrollment is between Nov. 1, 2025, and Jan. 15, 2026

Open Enrollment is the only time you know for certain you can buy health insurance. You must apply by Dec. 15 to get coverage that starts Jan. 1, 2026. Open Enrollment ends Jan. 15, 2026. If you apply between Dec. 16, 2025, and Jan. 15, 2026, coverage will not start until Feb. 1, 2026.

Once Open Enrollment ends, you may be able to buy health insurance during a Special Enrollment Period if you have a qualifying life event. Documentation will be required.¹³

To be eligible for coverage, you must be a North Carolina resident and not be enrolled in Medicare.



For more information



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⁸, SM are marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield plans. All other marks and names are property of their respective owners. Blue Cross and Blue Shield of North Carolina is an independent licensee of the Blue Cross and Blue Shield Association. NGFEPO-I, 5/25; NGFPPO-I, 5/25; ACAPOS-I, 5/25; NGFACAHMO-I, 5/25; M60, 6/25; INDVIS-EO, 6/24; INDVIS-EP, 6/24; U45447, 8/25