

FOCUSED ON you

CAREFIRST 2010 REPORT TO THE COMMUNITY



OUR MISSION

In accordance with the Charter of the nonprofit health service plan, the mission of CareFirst BlueCross BlueShield shall be to:

- provide affordable and accessible health insurance to the plan's insureds and those persons insured or issued health benefit plans by affiliates or subsidiaries of the plan;
- assist and support public and private health care initiatives for individuals without health insurance; and
- promote the integration of a health care system that meets the health care needs of all the residents of the jurisdictions in which the nonprofit health service plan operates.

MESSAGE FROM THE PRESIDENT & CEO



A handwritten signature in black ink that reads "Chet".

CHET BURRELL

*President & Chief Executive Officer
CareFirst BlueCross BlueShield*

2010 was a year like no other for CareFirst BlueCross BlueShield (CareFirst). In part, that reflects a changing health care environment created by passage of federal health care reform. Health insurers, consumers, government and health care providers all began to feel the effects of the Patient Protection and Affordable Care Act. But that's not what made it a milestone year for CareFirst.

During the last 12 months, CareFirst embarked on major new initiatives—that were years in the making and that have the potential to produce lasting, systemic improvements for health care in the region we serve. These programs will eventually touch almost all of the nearly 3.4 million members we serve through an increased focus on health care quality and patient physician engagement. And, importantly, these programs have also been shaped with the goal of slowing rising health care costs that threaten access to health care.

The Primary Care Medical Home program (PCMH) launched last year is like no other effort we have ever undertaken. Understanding that the sickest 10 percent of CareFirst members are responsible for 60 percent of all medical costs we pay out, we have shaped a program designed to both improve care for these individuals and reduce costs over time. The PCMH program establishes primary care providers as the “quarterback” of a team of health professionals to coordinate the care of patients with serious health problems—typically multiple chronic conditions such as diabetes, asthma and high blood pressure. Physicians are given new, meaningful financial incentives to put a greater focus on those patients with the greatest needs. Nearly two-thirds of all primary care providers in CareFirst's networks, almost 3,000, have joined this voluntary program so far.

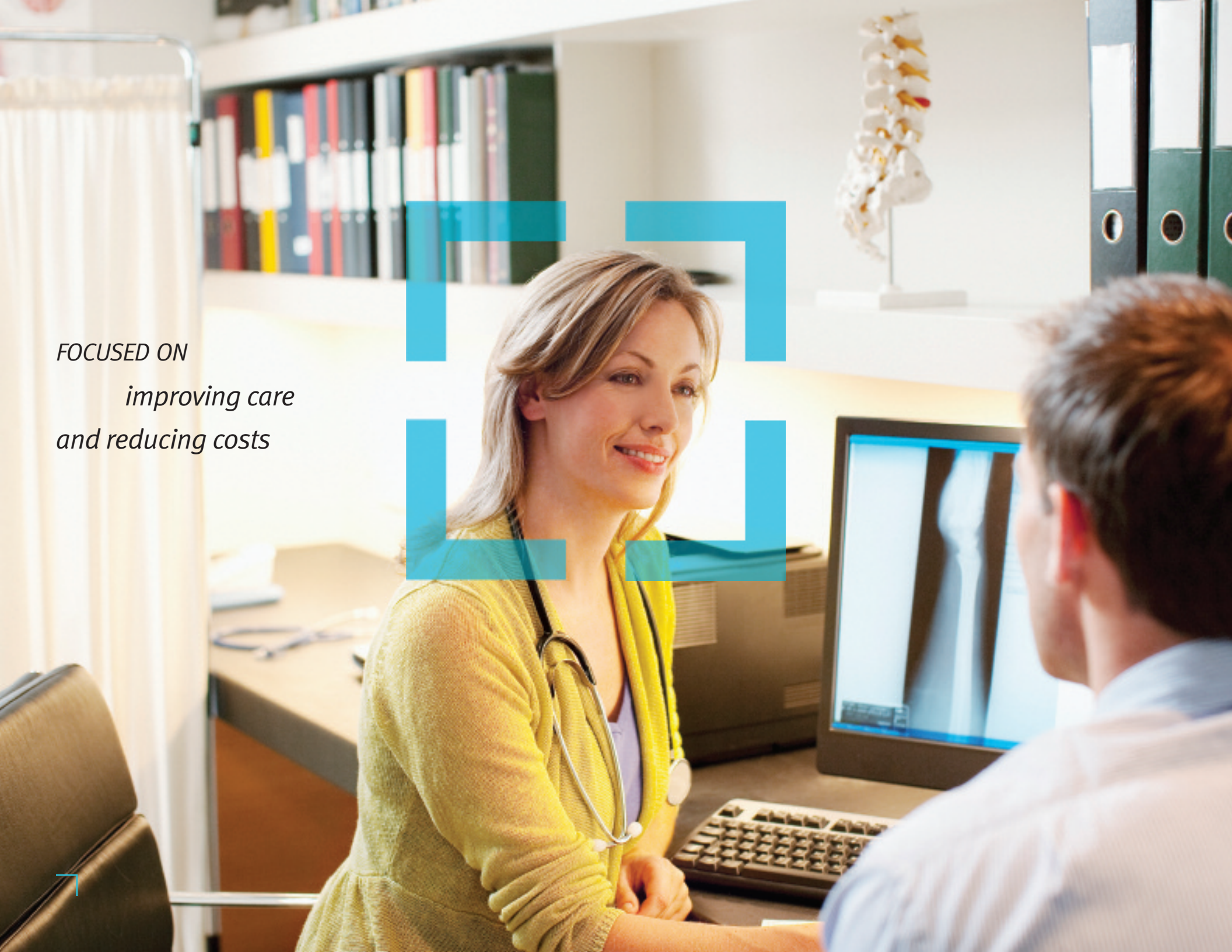
While the PCMH program gives physician incentives to improve care, patients who stay healthy or make major strides toward better health should have incentives as well. With that in mind, we introduced HealthyBlue, a new health plan that gives CareFirst members greater control of their health care costs and rewards for getting healthy and staying that way. We expect to refine and expand our HealthyBlue offerings in the coming year.

As important as these initiatives are, CareFirst continues to fill a critical role in supporting the community. As a not-for-profit with a mission of improving access to health care, we support a multitude of charitable, governmental and community programs that provide needed and high value services throughout our service region. CareFirst contributed \$56 million to more than 300 local organizations to benefit the region we serve in 2010.

Our community giving is guided by an overarching goal of dedicating resources to initiatives that catalyze change and create systemic efficiencies in the health care delivery system. In priority order, our giving is focused on: subsidies and enhanced health care access programs; catalytic giving to improve the health system; programmatic initiatives to address specific health issues; targeted giving to organizations that seek to improve health; and community sponsorships and memberships.

You can expect CareFirst to continue its emphasis on innovative initiatives and unmatched support for the communities we serve.

*FOCUSED ON
improving care
and reducing costs*



PRIMARY CARE MEDICAL HOME

There may never have been a year in which the topic of health care figured more prominently in the public debate than in 2010.

The consideration and eventual passage of the landmark federal Patient Protection and Affordable Care Act put a spotlight on America's health care system—the good and the bad. There's much to admire in federal health care reform and its emphasis on giving more Americans access to much-needed health coverage.

At the same time, there's near-universal agreement that reform will do little to control the one factor that most affects whether individuals and families can afford health care: cost. Costs force employers to make difficult decisions on the type and level of health benefits they provide employees. Costs often determine what health coverage individuals select for themselves and their families. Sometimes, costs even keep individuals from seeking much-needed care or filling a prescription. But nobody wants to sacrifice health care quality to reduce costs. We believe that improving health care quality and reducing costs are complementary—not contradictory—concepts.

That's why CareFirst developed and launched its Primary Care Medical Home (PCMH). The premise of the program is simple: let primary care providers serve as the “quarterback” of a team of health professionals to focus on providing coordinated care for those patients who need it most.

Why is that so important? Consider that the sickest 10 percent of CareFirst members account for 60 cents of every dollar that CareFirst pays for health care services. An overwhelming majority of these members (about 80 percent) have multiple chronic conditions—such as Type 2 diabetes, asthma and high blood pressure.

These chronically ill patients are heavy users of a health care system that for decades has prescribed care with little coordination across a broad spectrum of health care providers, including emergency, specialty, and primary care. If primary care providers have the resources they need to provide quality, frontline care, they can take steps to keep patients healthier, and prevent chronic conditions from developing into even more serious health issues. In this way, PCPs are key to improving quality and reducing costs.

CareFirst's PCMH program infuses teamwork into primary care among small groups of physicians and nurse practitioners. PCMH physicians will work with local nurses and other health professionals to manage care. We are developing and making available online information and resources to make it easier than ever for physicians to manage and closely coordinate care, to see that a patient had a recent emergency room admission or note that a prescription went unfilled. Equipped with new support and information, physicians can get a more complete view of their patients' care and needs—and tailor care to meet those needs.

family to better manage the condition, avoiding a sudden call that takes them away from work and their child to the emergency room.

PHYSICIANS – With new online tools, resources and incentives, primary care providers have what they need to put an increased emphasis and spend more time caring for the patients who need it most.

THE HEALTH CARE SYSTEM – PCMH represents one of the first, large-scale programs in the nation designed to improve care quality while reducing health care costs over time.



What PCMH means for:

OUR MEMBERS – Participating PCMH physicians will have a team of nurses and new information available to work with patients with serious health problems. The goal is to better manage care—follow it every step of the way—to help members lead healthier lives.

EMPLOYERS – Through the PCMH program, an employee with high blood pressure may get help to keep it under control and avoid a stroke, the associated time away from work and costly rehabilitation. Or, an employee's child who is asthmatic and struggling with obesity could get a care plan developed with their pediatrician that allows the



HEALTHYBLUE

Health coverage from CareFirst is there when you need it. Our nearly 3.4 million members know they can count on CareFirst when they get sick or face a health crisis—that's what insurance is all about, right? But what if you're healthy? What if you exercise, eat right, and manage your health care responsibly? Good drivers get auto insurance discounts. You can lower the cost of home insurance by taking prudent steps to protect your home. So why not reward people who take care of themselves? Now CareFirst does.

In 2010, CareFirst introduced an innovative product design called HealthyBlue that focuses more on the member than ever before. HealthyBlue is an insurance plan that pays you for getting healthier and staying healthy and encourages members to engage with their primary care providers.

HealthyBlue gives its members greater control of their health care and their health care costs. Its innovative design eliminates costs for preventive care, sick visits, cancer screenings, and certain generic drugs for chronic conditions. Members who utilize their primary care providers pay less for deductibles and co-pays, but have the option to see any doctor they choose and still receive coverage.

And as a special incentive for its members, individuals can receive \$300 for achieving healthy outcomes, working with their primary care providers on health and wellness plans, and completing online health assessments. Families can earn up to \$700 each year enrolled

in HealthyBlue. Rewards are paid as a Healthy Rewards gift card or as a contribution to a health savings account.

With HealthyBlue, there is finally a way to bridge the gap between wanting to live a healthier life and finding the incentive to get there.

MAKING HEALTH REFORM WORK FOR YOU

Federal health care reform will bring many changes in the years to come. CareFirst stepped up to extend coverage to dependent children up to age 26 as quickly as possible. While the law required insurers to extend dependent coverage beginning in September 2010, CareFirst moved to make the change months ahead of the required date.

Other significant changes benefiting CareFirst members going into effect for policies starting on September 23 of 2010 include the elimination of co-payments for preventive care and removal of lifetime maximums on health coverage, and provisions ensuring that children under the age of 19 cannot be denied coverage for pre-existing conditions. CareFirst continues to work closely with officials in our Maryland/DC/Northern Virginia service area to implement other provisions of Federal reform.



Learn more about
health reform

Whether you are an individual or employer, Federal health care reform may have impacts on you and your coverage. That's why Blue Cross and Blue Shield plans made *AskBlue Health Care Reform* available (www.askbluereform.com). A new online, interactive tool, *AskBlue Health Care Reform* provides individuals and employers with simple, straightforward explanations of health care reform. By answering just a few simple questions, *AskBlue* provides personalized information about which changes will be the most important for you.

*FOCUSED ON
meeting our
members' needs*



*FOCUSED ON
building and
sustaining healthy
communities*





SUPPORTING OUR COMMUNITY

Giving back to the community is an important part of what we do at CareFirst. One way to measure the importance we place on being an active member of our community is in the rankings of the region's most charitable organizations produced by The Baltimore Business Journal and The Washington Business Journal. Ranked by giving in total dollars, CareFirst is at or near the top.

But just as important as the amount of money CareFirst gives is how we give. Any amount given charitably can be put to good immediate use. Wherever possible, however, we seek to give in ways that will have lasting impact on individuals and families that live in our region. We call it catalytic giving—giving that serves as a catalyst to produce benefits outlasting the contribution itself.

As a company in the business of health care, we have long focused our giving on organizations and causes that similarly focus on health and health care. Our investments in the community are built on foundational principals to increase access to care, support changes to improve the region's health care delivery systems, identify and seek to promote change on broader health initiatives, and, ultimately, to affect the long-term health of our community.

More specifically, we've focused our efforts on five key areas to address those objectives:

- Improving Maternal and Child Health
- Battling the Obesity Epidemic
- Empowering the Region's Safety Net Clinics
- Addressing the Region's Shortage of Nurses; and
- Promoting the Primary Care Medical Home concept.

CareFirst Commitment

Here's a sample of how our investments have benefitted the community over the last five years.

THE MATERNAL AND CHILD HEALTH INITIATIVE *Improving Birth Outcomes for Mothers and Babies*

Leading medical and policy experts point to maternal, infant and child health as a key indicator of a community's overall health. Nationally, 28,000 infants die each year, at a rate of 6.26 deaths per 1,000 live births. The rate of infant mortality is even higher in Northern Virginia, the District of Columbia and Maryland. Poor maternal and child health conditions and risk factors disproportionately affect certain racial and ethnic groups, many of which can be mitigated or prevented with better pre-conception and prenatal care.

Through our *Maternal and Child Health Initiative*, CareFirst has committed more than \$8 million since 2006 to community-based efforts to improve maternal, infant and child health in communities where the need is the greatest. CareFirst has funded more than 22 programs, having a positive effect on the lives of 60,000 mothers and children. The programs highlighted here show just some of the impact on behaviors, safe environments and healthy outcomes for infants in our region.



- CareFirst's grant to the D.C. Department of Health's *Safe Cribs* initiative provided 1,500 portable cribs to reduce the District's infant mortality rate by helping mothers create healthy sleeping environments and decreasing the likelihood of Sudden Infant Death Syndrome (SIDS).

- CareFirst funds the Baltimore City Department of Health’s *B’more for Healthy Babies*—a comprehensive and innovative “medical home” concept of coordinated care to improve maternal and child health in communities where the need is greatest. Program highlights include a community-wide Safe Sleep education campaign (including mandatory viewing of a safe sleep instructional video prior to discharge from all of the area’s birthing hospitals) and the distribution of 6,000 “Baby Basic” books for expectant families. A community network of services is at the core of the program. Its long-term goal is to reduce infant mortality by achieving a 10 percent reduction in premature births, a 10 percent decline in low birthweight babies and a 30 percent decline in deaths from unsafe sleeping conditions.
- Our gift to the Northern Virginia Family Services’ *Healthy Families* program provides home-based services to high-risk African-American women who are pregnant or parenting young children. In the program’s first year, all of the children were assigned a health provider, 21 babies were delivered at term weighing more than 2,500 grams, and all participants completed a positive parenting survey. There were no incidences of low birth weight deliveries for babies in the program—a success that’s remarkable given the expected 9.9 percent incidence rate for the population served by the program.



BATTLING OBESITY

Supporting Programs That Promote Fitness and Nutrition

The Centers for Disease Control (CDC) reports that the incidence of childhood obesity has nearly doubled over the past decade, with one in four school-age children meeting the classic definition of obesity—weighing 30 percent more than the ideal weight for their height and age. Based on data from 2008, the CDC said more than 34 percent of adults aged 20 years and over are considered obese.

Since 2006, CareFirst has invested \$2.5 million in efforts to reduce childhood obesity in the region. Funding has supported numerous efforts, including:

- The Girl Scouts of the Nation’s Capital’s *Grow Strong* Program helps encourage at-risk girls to make healthy choices and practice habits of healthy living. The program reached 18,000 girls annually through nutrition and wellness education and access to camps and after-school programs designed to increase physical activity.
- The YMCA’s *Physical Healthy Driven (PhD)* and *Fit ‘N Fun* Childhood Obesity programs focus on making measurable improvements in body mass index, flexibility, muscular endurance and cardio fitness. Nearly 3,800 children across the region have participated after school programs, and another 58,500 children, families and adults have benefited from the programs’ summer camps and community events.
- Inova Health System’s *Northern Virginia Healthy Kids Coalition* provides health “toolkits” for kids. CareFirst’s support helped provide 200 health toolkits to the Boys and Girls Clubs of Greater Washington’s Culmore Character Club Branch serving Northern Virginia.

More than 6,000 children participate in CareFirst-funded programs focusing on nutrition, healthy choices and physical activity. Thousands of adults and children also received health and nutrition information through mobile units which promote wellness at health fairs, schools and special events.

SAFETY NET CLINICS

Caring for our Region's Most Vulnerable Members

Safety net providers are health care providers that deliver a significant level of health care services to uninsured, Medicaid, and other vulnerable patients. They are a critical source of health care at the community level, not only for the uninsured, but for many with health insurance as well.

Many low-income people without medical insurance turn to the emergency room for the health services they need. By investing in the region's Safety Net centers, CareFirst helps to provide the medically underserved an alternative to emergency rooms by allowing the clinics to expand capacity and therefore increase access to health care facilities conveniently located in their neighborhoods.

Since 2006, CareFirst has invested more than \$6 million in programs that support additional direct services as well as efforts that enhance the clinics' ability to transform and improve care quality through the creation of electronic health records and other means. Grant recipients include:

- Inova Juniper *Arlington Clinic*, to provide medical care to people living with HIV/AIDS in Northern Virginia. In its first year of operation, the clinic served 242 HIV-positive patients.
- Health Care for the Homeless, to support a new pediatric clinic to provide care for homeless children in Baltimore City.
- Community of Hope's *Electronic Medical Record Implementation*, to help the Washington, DC-based organization improve the quality of care delivered to nearly 4,000 patients through better record-keeping and access to records during medical visits, and better tracking of health indicators and quality across the practice.
- The Spanish Catholic Center's *Montgomery County Dental Program*, to help reduce oral health disparities among Hispanic and immigrant communities by increasing capacity and providing dental services to 300 low income, uninsured members of the immigrant Hispanic population annually.
- *Mary's Center and Child Care Inc.*, to help *Mary's Center* partner with the Judy Hoyer Child Resource Center and Prince George's Department of Education to open a new facility in Adelphi, MD to provide a full spectrum of primary health care services to area residents. The facility is expected to open in 2012 and serve nearly 7,000 patients in its first year.





RESPONDING TO THE NURSING SHORTAGE

Expanding the Future Nursing Workforce

While most of us are aware of the shortage of nurses—both regionally and nationally—in health care today, far fewer of us know that the root of the problem is the lack of a sufficient number of teaching faculty and nursing school capacity to accommodate aspiring nurses. As a result, nursing schools each year turn away tens of thousands of applicants because they don't have the staff to teach them.

To address this systemic problem, CareFirst initiated a grant program to help fund individuals seeking graduate nursing degrees in exchange for their commitment to teach for at least three years in nursing education programs in Maryland, the District of Columbia or Northern Virginia. These “*Project RN*” scholarships are designed to enable nurses to complete graduate degrees and qualify them to teach in nursing education programs within two years.

Project RN has provided \$80,000 stipends to students in Maryland, Washington, DC, and Virginia over two years. Through *Project RN*, CareFirst awarded 30 scholarships for nurses to pursue advanced nursing education degrees, in partnership with 12 area colleges and universities. Recipients can use the money to cover tuition, fees or even living expenses, enabling them complete their degrees quickly. So far, 12 program participants are teaching at area colleges.

CareFirst also has invested \$1.5 million over five years in scholarships for nurse educators through a separate initiative called “*Who Will Care?*”— a comprehensive approach led by the Maryland Hospital Association to increase the number of nursing students and improve the academic infrastructure necessary to train nurses today and in the future. By combining financial assistance to graduate nursing scholars and supporting systemic efforts to retain and better train staff, integrate emerging technologies and test alternative models for clinical teaching and integrating emerging technologies, CareFirst has served as a catalyst in producing lasting positive benefits for the communities we serve.



AREAS OF GIVING

CareFirst is committed to upholding its nonprofit mission, and in 2010 contributed \$56 million to community benefit initiatives designed to increase the accessibility, affordability, safety, and quality of health care services throughout Maryland, Washington, D.C., and northern Virginia.

Each year, we establish a budget to reflect the health care needs and priorities of the communities we serve in Washington, D.C., Maryland and Northern Virginia with an overarching goal of dedicating resources to initiatives that catalyze change and create systemic efficiencies in the health care delivery system. In priority order, the highest portion of our CareFirst contributions goes toward:

SUBSIDIES AND ENHANCED HEALTH CARE ACCESS PROGRAMS

Support for City and State programs which provide access for large vulnerable populations—those unable to otherwise receive health care services, or have only limited access to those services. This represents the largest portion of our contributions.

CATALYTIC GIVING Support for programs and other initiatives that stimulate productive change and improvements in the health care system over the long term.

PROGRAMMATIC INITIATIVES Program support which targets a specific population and/or addresses a major health care issue, and that has specific measurements for success.

TARGETED HEALTH RELATED GIVING THROUGH OTHERS CareFirst seeks opportunities to support organizations that provide direct health care or related services for the underserved.

CORPORATE MEMBERSHIPS AND COMMUNITY SPONSORSHIPS

CareFirst supports certain opportunities in the form of corporate sponsorships and memberships with key business and civic organizations, to build strong relationships and develop visible partnerships with the community. This represents the smallest portion of our giving budget.

2010 RESULTS

GIVING CATEGORY	(\$000)
Corporate Memberships	\$ 260
Community Sponsorships	1,247
Targeted Health Giving Through Others	2,584
Programmatic Initiatives	2,753
Catalytic Giving	10,815
Subsidies and Enhanced Access Programs	37,137
SUBTOTAL	54,796
OTHER	1,250
TOTAL	\$ 56,046

2010 GRANTS

CareFirst donated to the following organizations in the National Capital Area (Washington, D.C., Northern Virginia and Prince George's and Montgomery counties in Maryland) in 2010.

A

Aban Institute and Associates
Africare House
Alexandria Neighborhood Health Services
American Heart Association (DC)
American Red Cross of the National
Capital Area
Arc of Northern Virginia
Arlington Free Clinic
Arlington Pediatric Center
Asian American LEAD
Association of Black Cardiologists

B

Baltimore Washington Corridor
Chamber of Commerce
Boys and Girls Clubs of Greater Washington

C

Campaign for Tobacco-Free Kids
Capital Breast Care Center
Capitol Hill Cluster School
Carl Vogel Foundation, Inc.
CASA For Children of the District of Columbia
Catholic Charities Foundation Spanish
Catholic Center
Center for Minority Studies, Inc.
CHI Centers Inc.
Child and Family Network Centers
Child Center and Adult Services
Children's Hospital Foundation
Children's Law Center
Children's National Medical Center
City Year Washington, DC
Columbia Lighthouse for the Blind
Community Foundation for
Prince George's County
Community Foundation for the
National Capital Region
Community Health Partnership

Community of Hope
Community Services for Autistic Adults
& Children
Covenant House Washington
CrisisLink
Cultural Tourism, DC

D

DC One City Fund
DC Campaign to Prevent Teen Pregnancy
DC Central Kitchen
DC Chamber of Commerce
DC Children and Youth Investment
Trust Corporation
DC Insurance Federation
DC Vote
District of Columbia Department of Health
District of Columbia Hospital Association
District of Columbia Primary Care Association
Doctors Community Hospital Foundation

E

East River Family Strengthening Collaborative
Economic Club of Washington DC
Everybody Wins! DC

F

Fair Chance
Fairfax County Government
Family Health and Birth Center
Federal City Council
Feed the Homeless
Fight for Children, Inc.
Food & Friends
Food Research & Action Center
Friends of Emery Community

G

George Mason University
Georgetown University Hospital
Girl Scout Council of the Nation's Capital

Girls Inc. of the Washington, DC Metro Area
Grantmakers in Health
Greater DC Cares
Greater Washington Association of
Health Underwriters
Greater Washington Board of Trade
Greater Washington Foundation of Insurance
& Financial Advisors
Greater Washington Hispanic Chamber
of Commerce
Greater Washington Sports Alliance
Greater Washington Urban League

H

Hispanic College Fund
Holy Cross Hospital Foundation
Hope Marietta Foundation
Howard University
Howard University College of Pharmacy,
Nursing and Allied Health Sciences

I

INOVA Health System Foundation
Institute for the Advancement of
Multicultural & Minority Medicine
IONA Senior Services
Ivy Community Charities of
Prince George's County
Ivymount School Foundation

J

Jack and Jill of America, Inc.
Montgomery County MD Chapter
Jamaican Women of Washington
Jeanie Schmidt Free Clinic
Jewish Community Center of
Greater Washington
John F Kennedy Center for the Performing Arts
Joint Center for Political and Economic Studies

K

Kid Power, Inc.
Kingsbury Center

L

Laurel Pregnancy Center
Leadership Greater Washington
The Leapfrog Group
Leukemia & Lymphoma Society – NCA
Life Circle Alliances Inc.
Long Branch Athletic Association
Love Affection and Compassion for
Neighborhood Development

M

March of Dimes Maryland –
National Capital Area
Mary’s Center for Maternal and Child Care
Marymount University
Mautner Project
Mayfair Mansion
Medical Society of the District of Columbia
Medical Society of Virginia
Melwood Horticultural Training Center
Metropolitan Washington Council
of Governments
MGH Health Foundation
Mid-Atlantic Business Group on Health
Mission of Love Charities
Montgomery County Chamber of Commerce

N

National Association of Minority & Women
Owned Law Firms
National Center for Children and Families Inc.
National Quality Forum
Neediest Kids
Northern Virginia AIDS Ministry
Northern Virginia Black Chamber
of Commerce

Northern Virginia Family Service
NOVA Scripts Central

P

Parkside Civic Association
People’s Foundation, Inc. c/o
The Peoples Community Baptist Church
Perry School Community Services
PHI Community Foundation
Planned Parenthood of
Metropolitan Washington
Prince George’s County Department of
Parks and Recreation
Prince George’s County Women’s Fair
Prince George’s Path to Greatness
Prince George’s Tennis & Education
Foundation
Prince Georges Community
College Foundation
Project Access of Northern Virginia
Protect Yourself 1
Providence Hospital Foundation

R

Ron Brown Scholar Fund

S

Samaritan Inns
SCAN of Northern Virginia
School Without Walls Senior High School
Sibley Memorial Hospital
Skinner Leadership Institute
Smithsonian Institution
Special Olympics (DC)
St. Ann’s Infant and Maternity Home
Step Afrika U S A Incorporated
Sudden Infant Death Services of the
Mid-Atlantic

T

The Keys to Canaan
The Maryland-National Capital Park &
Planning Commission
The NEA Foundation
Thurgood Marshall Academy
Tigerlily Foundation

U

United Way of Central Carolinas
United Way of Central West Virginia
United Way of the National Capital Area
Unity Health Care
Us Helping Us

V

Virginia Hospital Center
Volunteer Alexandria

W

Washington DC Police Foundation
Washington Drama Society Inc. (Arena Stage)
Washington Hospital Center Foundation
Washington National Opera
Washington Regional Association
of Grantmakers
Washington Sports and Entertainment
Charities, Inc.
Whitman-Walker Clinic
Women’s Center
Woodland Tigers Youth Sports &
Education Program Inc.

Y

YMCA Fairfax County Reston
YMCA of Metropolitan Washington
Young Latino Leadership Council
Youth for Tomorrow

CareFirst donated to the following Maryland (excluding Prince George's and Montgomery counties) organizations in 2009.

A

Access Carroll, Inc.
Advocates for Children & Youth
African American Heritage Festival
Allegany County Health Department
Alliance for Lupus Research
Alzheimer's Association Greater Maryland Chapter
American Cancer Society (MD)
American Diabetes Association (MD)
American Heart Association (MD)
American Red Cross of Central Maryland
American Visionary Art Museum
Antietam Healthcare Foundation
Archdiocese of Baltimore
Associated Black Charities
Association of Baltimore Area Grantmakers

B

B & O Railroad Museum
Back On My Feet – Baltimore Chapter
Baltimore City Health Department
Baltimore City Healthy Start Inc.
Baltimore Clayworks
Baltimore Community Foundation
Baltimore County Chamber of Commerce
Baltimore County Department of Aging
Baltimore County Police Foundation
Baltimore LiveHealthy, Inc
Baltimore Reads, Inc.
Baltimore Symphony Orchestra
Baltimore Urban Debate League
Belanger Federico Foundation
Big Brothers Big Sisters of the Alleghenies (MD)
Bluford Drew Jemison M.S.T. Academy
Board of Education of Wicomico County
Bon Secours Baltimore Health System
Boy Scouts of America – Baltimore Area Council

Boys and Girls Club of Harford County
Boys and Girls Club of Washington County
Brook Lane Health Services
Business Volunteers Unlimited

C

Cal Ripken, Sr. Foundation
Calvert Healthcare Solutions
Calvert Memorial Hospital Foundation, Inc.
Carroll Hospice
Casey Cares Foundation
Catholic Charities – Maryland
Chabad at Johns Hopkins
Chesapeake Center for Youth Development
Children's Home, Inc.
College of Notre Dame of Maryland
Columbia Festival of the Arts
Columbia Foundation
Community College of Baltimore County Foundation
Coppin State University

D

Delmarva Foundation for Medical Care
Dimensions Health System / Prince George's Hospital Center
Downtown Partnership of Baltimore
Dyslexia Tutoring Program

E

Economic Alliance of Greater Baltimore
Ed Block Courage Award Foundation
Esophageal Cancer Network

F

Family Crisis Center of Baltimore County, Inc.
Fellowship of Christian Athletes
Franklin Square Hospital Center Inc
Frederick Memorial Healthcare System
Friends of Patterson Park

G

GBMC Foundation, Inc.
Girl Scouts of Central Maryland
Goodwill Industries of the Chesapeake
Great Blacks in Wax Museum
Greater Baltimore Committee
Greater Washington Association of Health Underwriters

H

Habitat for Humanity of the Chesapeake
Harford Community College Foundation, Inc.
Harford United Charities
Health Care for the Homeless
Healthy Howard, Inc.
Hippodrome Foundation, Inc.
Hispanic College Fund, Inc.
Hood College
Hospice Cup, Inc.
Hospice of Frederick County
House of Ruth
Howard Community College Educational Foundation, Inc.
Howard County Economic Development Authority
Howard Hospital Foundation

I

Independent College Fund of Maryland
International Festival Baltimore City

J

Jewish Community Center of Greater Baltimore
Johns Hopkins Bayview Medical Center
Johns Hopkins University School of Nursing

K

Kennedy Krieger Institute
Kent County Public Schools

L

Leadership Howard County
Leukemia & Lymphoma Society (MD)
Light Health & Wellness Comprehensive
Services, Inc.
Living Classrooms Foundation
Loyola University of Maryland

M

Marian House, Inc.
Maryland Assembly on School-Based
Health Care
Maryland Association of
Nonprofit Organizations
Maryland Black Caucus Foundation
Maryland Chamber of Commerce
Maryland Citizens Health Initiative
Maryland Food Bank
Maryland Mentoring Partnership
Maryland Rural Health Association
Maryland School for the Blind
Maryland Science Center
Maryland Society for Sight
Mercy Health Services
Mid-Atlantic Symphony Orchestra
Morgan State University Foundation
Moveable Feast

N

National Association of Insurance and
Financial Advisors
National Aquarium in Baltimore
National Family Resiliency Center
National Kidney Foundation Of Maryland
National Multiple Sclerosis Society –
MD Chapter
Network 2000, Inc.

O

Open Society Institute – Baltimore
Opportunity Builders, Inc.

P

Park Heights Community Health Alliance, Inc.
Parks and People
Pathfinders for Autism
Penn-Mar Organization
Project Garrison, Inc.
Project Health Baltimore

R

Reginald F. Lewis Museum
Religious Coalition – Frederick, MD
Ride Across Maryland Foundation
Right Side Foundation
Roberta's House
Ronald McDonald House of Baltimore

S

Salisbury Area Chamber of Commerce
Salisbury University
Salvation Army, Baltimore
SEED School of Maryland, Inc.
Senior Living Alternatives
Sisters Academy of Baltimore
Somerset County Health Department
Special Olympics Maryland
St. Agnes Hospital Foundation

St. Joseph Medical Center Foundation
St. Vincent de Paul of Baltimore
Stella Maris Hospice Program
Stevenson University
Susan G. Komen Race for the Cure (MD)

T

Texas Health Institute
The Arc of Baltimore
The Arc of Howard County
The Maryland Zoo in Baltimore
Towson University

U

United Way of Central Maryland
United Way of the Lower Eastern Shore
University of Maryland Baltimore
Foundation, Inc.
University of Maryland Medical System
Foundation, Inc.
Upper Chesapeake Health Foundation
Urban Alliance

V

Vision Workshops

W

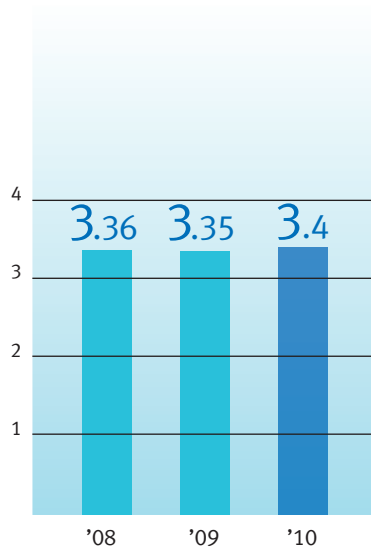
Wellness House of Annapolis
Western Maryland Health System
William E. Proudford Sickle Cell Fund, Inc.

Y

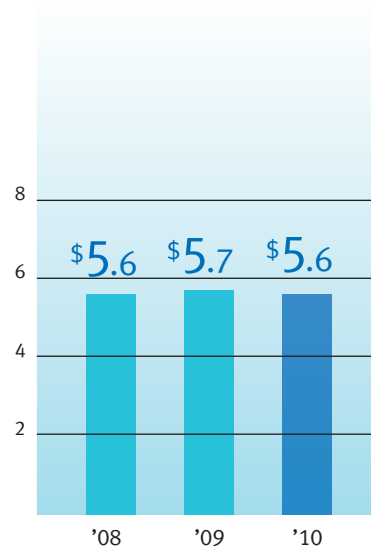
Y of Central Maryland
YWCA of Annapolis and Anne Arundel County

2010 PERFORMANCE HIGHLIGHTS

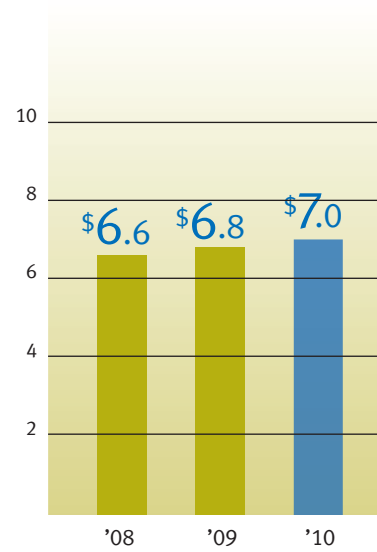
MEMBERSHIP
in millions



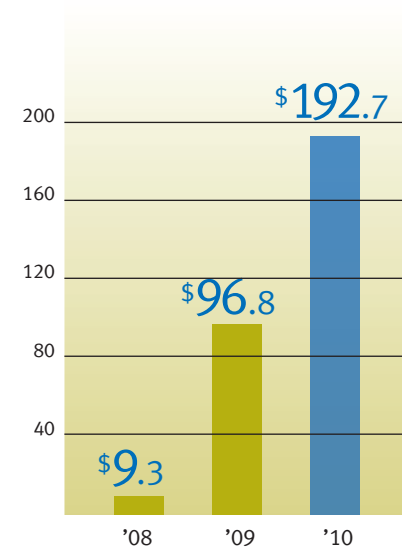
MEDICAL CARE SPENDING
in billions



REVENUE
in billions



NET INCOME
in millions



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Notice of Nondiscrimination and Availability of Language Assistance Services

CareFirst BlueCross BlueShield, CareFirst BlueChoice, Inc. and all of their corporate affiliates (CareFirst) comply with applicable federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability or sex. CareFirst does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

CareFirst:

- Provides free aid and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, please call 855-258-6518.

If you believe CareFirst has failed to provide these services, or discriminated in another way, on the basis of race, color, national origin, age, disability or sex, you can file a grievance with our CareFirst Civil Rights Coordinator.

Civil Rights Coordinator, Corporate Office of Civil Rights

Telephone Number 410-528-7820
Mailing Address P.O. Box 8894
Baltimore, Maryland 21224
Fax Number 410-505-2011
Email Address civilrightscordinator@carefirst.com

You can file a grievance by mail, fax or email. If you need help filing a grievance, our CareFirst Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Foreign Language Assistance

Attention (English): This notice contains information about your insurance coverage. It may contain key dates and you may need to take action by certain deadlines. You have the right to get this information and assistance in your language at no cost. Members should call the phone number on the back of their member identification card. All others may call 855-258-6518 and wait through the dialogue until prompted to push 0. When an agent answers, state the language you need and you will be connected to an interpreter.

አማርኛ (Amharic) ማሳሰቢያ፡- ይህ ማስታወቂያ ስለ መድን ሽፋንዎ መረጃ ይዟል። ከተወሰኑ ቀን-ገደቦች በፊት ሊፈጽሟቸው የሚገቡ ነገሮች ሊኖሩ ስለሚችሉ እነዚህን ወሳኝ ቀናት ሊይዝ ይችላሉ። ይኸን መረጃ የማግኘት እና ያለምንም ክፍያ በቋንቋዎ አገዛ የማግኘት መብት አለዎት። አባል ከሆኑ ከመታወቂያ ካርድዎ በስተጀርባ ላይ ወደተጠቀሰው የስልክ ቁጥር መደወል ይችላሉ። አባል ካልሆኑ ደግሞ ወደ ስልክ ቁጥር 855-258-6518 ደውለው 0ን እንዲጫኑ እስኪነገርዎ ድረስ ንግግሩን መጠበቅ አለብዎ። አንድ ወኪል መልስ ሲሰጥዎ፣ የሚፈልጉትን ቋንቋ ያሳውቁ፣ ከዚያም ከተርጓሚ ጋር ይገናኛሉ።

Èdè Yorùbá (Yoruba) Ìtẹ̀tíléko: Àkíyèsí yìí ní iwífún nípa isẹ̀ adójú̀tòfò rẹ̀. Ó le ní àwọn déèti pàtó o sì le ní láti gbé ìgbésẹ̀ ní àwọn ojú gbèdèké kan. O ni ètò láti gba iwífún yìí àti irànlówó ní èdè rẹ̀ lófèfè. Àwọn omọ-egbé gbòdò pe nóm̀bà fòdùn tò wà lẹ̀yìn kààdì idánimò wòn. Àwọn mírán le pe 855-258-6518 kí o sì dúró nípasẹ̀ ijíròrò tí títí a ó fí sọ fún ọ̀ láti tẹ̀ 0. Níg̀bàtí așojú kan bá dáhùn, sọ èdè tí o fẹ̀ a ó sì sọ ọ̀ pò mò ògbufò kan.

Tiếng Việt (Vietnamese) Chú ý: Thông báo này chứa thông tin về phạm vi bảo hiểm của quý vị. Thông báo có thể chứa những ngày quan trọng và quý vị cần hành động trước một số thời hạn nhất định. Quý vị có quyền nhận được thông tin này và hỗ trợ bằng ngôn ngữ của quý vị hoàn toàn miễn phí. Các thành viên nên gọi số điện thoại ở mặt sau của thẻ nhận dạng. Tất cả những người khác có thể gọi số 855-258-6518 và chờ hết cuộc đối thoại cho đến khi được nhắc nhấn phím 0. Khi một tổng đài viên trả lời, hãy nêu rõ ngôn ngữ quý vị cần và quý vị sẽ được kết nối với một thông dịch viên.

Tagalog (Tagalog) Atensyon: Ang abisong ito ay naglalaman ng impormasyon tungkol sa nasasaklawan ng iyong insurance. Maaari itong maglaman ng mga pinakamahalagang petsa at maaaring kailangan mong gumawa ng aksyon ayon sa ilang deadline. May karapatan ka na makuha ang impormasyong ito at tulong sa iyong sariling wika nang walang gastos. Dapat tawagan ng mga Miyembro ang numero ng telepono na nasa likuran ng kanilang identification card. Ang lahat ng iba ay maaaring tumawag sa 855-258-6518 at maghintay hanggang sa dulo ng diyalogo hanggang sa diktahan na pindutin ang 0. Kapag sumagot ang ahente, sabihin ang wika na kailangan mo at ikokonekta ka sa isang interpreter.

Español (Spanish) Atención: Este aviso contiene información sobre su cobertura de seguro. Es posible que incluya fechas clave y que usted tenga que realizar alguna acción antes de ciertas fechas límite. Usted tiene derecho a obtener esta información y asistencia en su idioma sin ningún costo. Los asegurados deben llamar al número de teléfono que se encuentra al reverso de su tarjeta de identificación. Todos los demás pueden llamar al 855-258-6518 y esperar la grabación hasta que se les indique que deben presionar 0. Cuando un agente de seguros responda, indique el idioma que necesita y se le comunicará con un intérprete.

Русский (Russian) Внимание! Настоящее уведомление содержит информацию о вашем страховом обеспечении. В нем могут указываться важные даты, и от вас может потребоваться выполнить некоторые действия до определенного срока. Вы имеете право бесплатно получить настоящие сведения и сопутствующую помощь на удобном вам языке. Участникам следует обращаться по номеру телефона, указанному на тыльной стороне идентификационной карты. Все прочие абоненты могут звонить по номеру 855-258-6518 и ожидать, пока в голосовом меню не будет предложено нажать цифру «0». При ответе агента укажите желаемый язык общения, и вас свяжут с переводчиком.

हिन्दी (Hindi) ध्यान दें: इस सूचना में आपकी बीमा कवरेज के बारे में जानकारी दी गई है। हो सकता है कि इसमें मुख्य तिथियों का उल्लेख हो और आपके लिए किसी नियत समय-सीमा के भीतर काम करना ज़रूरी हो। आपको यह जानकारी और संबंधित सहायता अपनी भाषा में निःशुल्क पाने का अधिकार है। सदस्यों को अपने पहचान पत्र के पीछे दिए गए फ़ोन नंबर पर कॉल करना चाहिए। अन्य सभी लोग 855-258-6518 पर कॉल कर सकते हैं और जब तक 0 दबाने के लिए न कहा जाए, तब तक संवाद की प्रतीक्षा करें। जब कोई एजेंट उत्तर दे तो उसे अपनी भाषा बताएँ और आपको व्याख्याकार से कनेक्ट कर दिया जाएगा।

Bàsòò-wùdù (Bassa) Tò Dùù Cáò! Bǎ nìà kè bá nyò bě kè m̄ gbo kpá bó nì fùà-fúà-tiìn nyεε jè dyí. Bǎ nìà kè bédé wé jéé bě b́é m̄ kè dε wa ḿ m̄ kè nyuεε nyu hwè b́é wé b́èa kè zi. Ǿ m̀ò nì kpé b́é m̄ kè bǎ nìà kè kè gbo-kpá-kpá m̄ ḿεε dyé dé nì bídí-wùdù mú b́é m̄ kè se wídí d̀ò péè. Kpooò nyò b́é m̄ dá fúùn-nòbà nìà dé waa I.D. káàò dεín nyε. Nyò t̀òò séín m̄ dá nòbà nìà kè: 855-258-6518, kè m̄ m̄ f̀ò tee b́é wa ḱε m̄ gbo ćé b́é m̄ kè nòbà m̀ò 0 ḱε dyi pàd̀àn hwè. Ǿ j̀ú kè nyò d̀ò dyi m̄ g̀ǎ j̀ùìn, po wuqu m̄ ḿ poε dyie, kè nyò d̀ò mu bó nììn b́é Ǿ kè nì wuquò mú zà.

বাংলা (Bengali) লক্ষ্য করুন: এই নোটিশে আপনার বিমা কভারেজ সম্পর্কে তথ্য রয়েছে। এর মধ্যে গুরুত্বপূর্ণ তারিখ থাকতে পারে এবং নির্দিষ্ট তারিখের মধ্যে আপনাকে পদক্ষেপ নিতে হতে পারে। বিনা খরচে নিজের ভাষায় এই তথ্য পাওয়ার এবং সহায়তা পাওয়ার অধিকার আপনার আছে। সদস্যদেরকে তাদের পরিচয়পত্রের পিছনে থাকা নম্বরে কল করতে হবে। অন্যেরা 855-258-6518 নম্বরে কল করে 0 টিপতে না বলা পর্যন্ত অপেক্ষা করতে পারেন। যখন কোনো এজেন্ট উত্তর দেবেন তখন আপনার নিজের ভাষার নাম বলুন এবং আপনাকে দোভাষীর সঙ্গে সংযুক্ত করা হবে।

اردو (Urdu) توجہ: یہ نوٹس آپ کے انشورینس کوریج سے متعلق معلومات پر مشتمل ہے۔ اس میں کلیدی تاریخیں ہو سکتی ہیں اور ممکن ہے کہ آپ کو مخصوص آخری تاریخوں تک کارروائی کرنے کی ضرورت پڑے۔ آپ کے پاس یہ معلومات حاصل کرنے اور بغیر خرچہ کیے اپنی زبان میں مدد حاصل کرنے کا حق ہے۔ ممبران کو اپنے شناختی کارڈ کی پشت پر موجود فون نمبر پر کال کرنی چاہیے۔ سبھی دیگر لوگ 855-258-6518 پر کال کر سکتے ہیں اور 0 دبانے کو کہے جانے تک انتظار کریں۔ ایجنٹ کے جواب دینے پر اپنی مطلوبہ زبان بتائیں اور مترجم سے مربوط ہو جائیں گے۔

فارسی (Farsi) توجه: این اعلامیه حاوی اطلاعاتی درباره پوشش بیمه شما است. ممکن است حاوی تاریخ های مهمی باشد و لازم است تا تاریخ مقرر شده خاصی اقدام کنید. شما از این حق برخوردار هستید تا این اطلاعات و راهنمایی را به صورت رایگان به زبان خودتان دریافت کنید. اعضا باید با شماره درج شده در پشت کارت شناسایی شان تماس بگیرند. سایر افراد می توانند با شماره 855-258-6518 تماس بگیرند و منتظر بمانند تا از آنها خواسته شود عدد 0 را فشار دهند. بعد از پاسخگویی توسط یکی از اپراتورها، زبان مورد نیاز را تنظیم کنید تا به مترجم مربوطه وصل شوید.

اللغة العربية (Arabic) تنبيه: يحتوي هذا الإخطار على معلومات بشأن تغطيتك التأمينية، وقد يحتوي على تواريخ مهمة، وقد تحتاج إلى اتخاذ إجراءات بحلول مواعيد نهائية محددة. يحق لك الحصول على هذه المساعدة والمعلومات بلغتك بدون تحمل أي تكلفة. ينبغي على الأعضاء الاتصال على رقم الهاتف المذكور في ظهر بطاقة تعريف الهوية الخاصة بهم. يمكن للأخريين الاتصال على الرقم 855-258-6518 والانتظار خلال المحادثة حتى يطلب منهم الضغط على رقم 0. عند إجابة أحد الوكلاء، اذكر اللغة التي تحتاج إلى التواصل بها وسيتم توصيلك بأحد المترجمين الفوريين.

中文繁体 (Traditional Chinese) 注意：本聲明包含關於您的保險給付相關資訊。本聲明可能包含重要日期及您在特定期限之前需要採取的行動。您有權利免費獲得這份資訊，以及透過您的母語提供的協助服務。會員請撥打印在身分識別卡背面的電話號碼。其他所有人士可撥打電話 855-258-6518，並等候直到對話提示按下按鍵 0。當接線生回答時，請說出您需要使用的語言，這樣您就能與口譯人員連線。

Igbo (Igbo) Nrubama: Okwa a nwere ozi gbasara mkpuchi nchekwa onwe gi. O nwere ike inwe ubochi ndi di mkpa, i nwere ike ime ihe tupu ufodu ubochi njedebe. I nwere ikike inweta ozi na enyemaka a n'asusu gi na akwughi ugwo o bula. Ndi otu kwesiri ikpo akara ekwentidi di n'azu nke kaadi njirimara ha. Ndi ozo niile nwere ike ikpo 855-258-6518 wee chere ububo ahuru roo mgbe amanyere ipi 0. Mgbe onye nnochite anya zara, kwuo asusu i choro, a ga-ejiko gi na onye okowa okwu.

Deutsch (German) Achtung: Diese Mitteilung enthält Informationen über Ihren Versicherungsschutz. Sie kann wichtige Termine beinhalten, und Sie müssen gegebenenfalls innerhalb bestimmter Fristen reagieren. Sie haben das Recht, diese Informationen und weitere Unterstützung kostenlos in Ihrer Sprache zu erhalten. Als Mitglied verwenden Sie bitte die auf der Rückseite Ihrer Karte angegebene Telefonnummer. Alle anderen Personen rufen bitte die Nummer 855-258-6518 an und warten auf die Aufforderung, die Taste 0 zu drücken. Geben Sie dem Mitarbeiter die gewünschte Sprache an, damit er Sie mit einem Dolmetscher verbinden kann.

Français (French) Attention: cet avis contient des informations sur votre couverture d'assurance. Des dates importantes peuvent y figurer et il se peut que vous deviez entreprendre des démarches avant certaines échéances. Vous avez le droit d'obtenir gratuitement ces informations et de l'aide dans votre langue. Les membres doivent appeler le numéro de téléphone figurant à l'arrière de leur carte d'identification. Tous les autres peuvent appeler le 855-258-6518 et, après avoir écouté le message, appuyer sur le 0 lorsqu'ils seront invités à le faire. Lorsqu'un(e) employé(e) répondra, indiquez la langue que vous souhaitez et vous serez mis(e) en relation avec un interprète.

한국어(Korean) 주의: 이 통지서에는 보험 커버리지에 대한 정보가 포함되어 있습니다. 주요 날짜 및 조치를 취해야 하는 특정 기한이 포함될 수 있습니다. 귀하에게는 사용 언어로 해당 정보와 지원을 받을 권리가 있습니다. 회원이신 경우 ID 카드의 뒷면에 있는 전화번호로 연락해 주십시오. 회원이 아닌 경우 855-258-6518 번으로 전화하여 0을 누르라는 메시지가 들릴 때까지 기다리십시오. 연결된 상담원에게 필요한 언어를 말씀하시면 통역 서비스에 연결해 드립니다.