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IAI | IMPORTANT ADMINISTRATIVE INFORMATION



Prefer to receive the IAI via email?

Contact your Account Service Consultant and update your email and communication preference. We'll send the next edition to your email address.

March 2023



Dear Valued Customer:

Welcome to our *Important Administrative Information* March 2023 newsletter, with the latest health care industry news that affects you. This edition's articles are:

- Announcing Upcoming Webinars
- 2022 Annual Report: Making Health Care Work for Everyone
- Change in Prior Authorization Requirements for Certain Mental Health Treatments
- Change in Prior Authorization Requirements for Certain Musculoskeletal Services
- Stop-Loss Reporting Fee Increase
- Effective July 1, 2023, Upcoming Changes to the Blue Cross Blue Shield of Massachusetts Formulary and Medical Policy Updates
- Effective July 1, 2023, Upcoming Changes to the Standard Control with Advanced Control Specialty Formulary
- Effective July 1, 2023, Two Changes to Blue Distinction® Specialty Care

Thank you for your continued partnership.

Deben J. Williams

Sincerely,

Debra J. Williams

Senior Vice President and Chief Sales & Marketing Officer

IAI March 2023

Announcing Upcoming Webinars



Small accounts (50 or fewer enrolled) Mid-size (51–99 enrolled)



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Mid-size (51–99 enrolled)
Large (100 or more enrolled)

• CFO Insights

Climate Action at Work

Blue Funding Solution

Presentations last approximately one hour. You can submit your own questions either when you register, or during the webinar. You'll receive additional details in our monthly webinar emails.

We're excited to announce upcoming webinars in our account webinar

series. These webinars allow your organization's leadership and human resources teams to learn more about your health plan benefits from our

subject-matter experts, so you can make the best possible decisions on



Register for an upcoming webinar at

employer.bluecrossma.com/whats-new/account-webinars.

If you have any questions, contact your account executive.

behalf of your employees. Upcoming topics include:

2022 Annual Report: Making Health Care Work for Everyone

Small accounts (50 or fewer enrolled)



Large (100 or more enrolled)

Municipal

MIIA

We're proud to share our company's Annual Report with you.

We've expanded access to primary care and mental health services and helped make health care more accessible and affordable for our 2.9 million members. We've also made progress in our groundbreaking effort to make health care more equitable for all. We continue to be recognized as one of the nation's best places to work.

Looking ahead, our priorities at Blue Cross remain steadfast. We aim to continue making health care more affordable, accessible, empathetic, and equitable for your patients, our nearly 3 million members.

View our 2022 Annual Report at bluecrossma.org/about-us/annualreport/2022.

Change in Prior Authorization Requirements for Certain Mental Health Treatments



Small accounts (50 or fewer enrolled)





Municipal

MIIA

We've removed prior authorization requirements for Intensive Community-Based Treatment (ICBAT), Community-Based Acute Treatment (CBAT), and inpatient psychiatric treatment, consistent with the Massachusetts Chapter 177 of the Acts of 2022, an act aimed at addressing barriers to care for mental health. Moving forward, prior authorization from any provider (both in- and out-of-network) is not required to determine medical necessity for these mental health services.

Complete details about these changes are available at **bluecrossma.com/** employer in the Plan Updates section under What's New.

Change in Prior Authorization Requirements for Certain Musculoskeletal Services



Small accounts (50 or fewer enrolled)

Mid-size (51-99 enrolled)



Municipal MIIA

As shared previously in the December 2022 IAI, we're updating our prior authorization requirements for certain musculoskeletal (MSK) services for all HMO and PPO plan members.* These changes will go into effect on April 1, 2023. We'll review requests according to evidence-based medical necessity criteria to help ensure that members are receiving safe, effective, and medically necessary MSK services. Throughout their MSK treatment, appropriate members will be offered support from our Care Managers.

In- and out-of-network providers will need to submit prior authorization requests for members receiving ongoing treatments for specified joint, spine, and pain management, and for members who begin treatment on or after April 1, 2023.



If you have any questions, contact your account executive.

*For the full list of services, members should check their plan details or call Member Service.

Stop-Loss Reporting Fee Increase



Large (100 or more enrolled)

Municipal

Effective June 1, 2023, we're increasing the monthly rate for our stop-loss reporting for accounts that buy this reinsurance coverage from a third party. The fee is assessed annually based on the monthly rate, which will increase to \$550 per month. As an example, an account with 12 months of reporting would be charged a fee of \$6,600 upon renewal. Reporting fees don't apply to stop-loss reinsurance purchased directly from Blue Cross Blue Shield of Massachusetts.

We've also improved our stop-loss reporting. For example, accounts can now access their data five days earlier, and they have access to additional reports. These changes help accounts learn more about their employees' claims, so they can tailor their benefit strategy accordingly. All our stop-loss reporting is accessible through Bluelnsights, our self-service portal.

If you have any questions about our stop-loss coverage, reporting, or fees, contact your account executive.

[IAI March 2023]

Effective July 1, 2023, Upcoming Changes to the Blue Cross Blue Shield of Massachusetts Formulary and Medical Policy Updates



Small accounts (50 or fewer enrolled)



Large (100 or more enrolled)

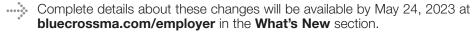


MIIA

Effective July 1, 2023, we're updating our formulary (list of covered medications) for medical plans with pharmacy benefits, as well as Medex®** plans with a three-tier pharmacy benefit. As part of this update, certain medications may:

- No longer be covered (exceptions may be granted)
- Be excluded from coverage (exceptions won't be granted)
- Switch tiers
- Require prior authorization and/or step therapy
- No longer be covered under the medical benefit and will only be covered under the pharmacy benefit

We're also making medical policy changes, effective July 1, 2023.



*This doesn't include Medex® 2 plans with Blue MedicareRx (PDP) prescription drug coverage.

Effective July 1, 2023, Upcoming Changes to the Standard Control with Advanced Control Specialty Formulary



Large (100 or more enrolled)



Effective July 1, 2023, CVS Caremark®", an independent company that administers your pharmacy benefits on behalf of Blue Cross Blue Shield of Massachusetts, is updating its formulary (list of covered medications) for select self-insured plans (500+) with the Standard Control with Advanced Control Specialty Formulary. As part of this update, certain medications may:

- No longer be covered (exceptions may be granted)
- Switch tiers
- Have new quantity or dosing limits
- Require prior authorization and/or step therapy
- Be added to the list of covered medications
- Be designated as preferred



Complete details about these changes will be available by May 24, 2023, at bluecrossma.com/employer in the What's New section.

Effective July 1, 2023, Two Changes to Blue Distinction® Specialty Care



✓ Large (100 or more enrolled)

We're Revising Our Blue Distinction Specialty Care Rider

Under the first change, we're revising our Blue Distinction Specialty Care rider to clarify that existing continuity-of-care allowances also apply to members with this rider. Therefore, new members can continue care with non-Blue Distinction providers at the Blue Distinction cost share, when continuity-of-care criteria have been met.

To facilitate a seamless account-onboarding process, we ask employers to work with their previous insurer to provide Transition of Care files to us. In cases where Transition of Care files aren't made available to us and a member needs continued coverage for ongoing care from a non-Blue Distinction® Center provider, we ask the member to submit a completed Continuity/Transition of Care Request Form.

We're Discontinuing the Blue Distinction Centers® **Limited Benefit Offering**

Under the second change to Blue Distinction Specialty Care, we'll no longer be offering the Limited Benefit rider. We're making this change to allow for a more focused customization of our tiered benefit, and to better align with the market. Employers that have this rider may retain it to minimize disruption.

To learn more about these changes, contact your account executive.