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IAI | IMPORTANT ADMINISTRATIVE INFORMATION



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October 2019



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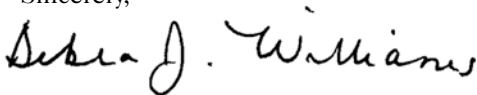
Dear Valued Customer:

Welcome to our *Important Administrative Information* October 2019 newsletter. We provide the latest health care industry news that affects you. This edition's topics include:

- Health Plan Updates for 2020
- Blue Cross Blue Shield of Massachusetts Surpassed 2018 Medical Loss Ratio Requirements
- Important Employer Surveys: Medical Loss Ratios and Employer Group Size
- Smart90SM Now Included in Core Benefits for Self-Insured Accounts with Pharmacy Benefits
- Introducing RationalMedSM for Self-Insured Accounts
- Introducing ScreenRxSM for Self-Insured Accounts
- Updates to Our Pharmacy Formulary Program
- Updates to Our Dental Blue[®] Total Health Solution
- Upcoming Changes to Member ID Card Distribution
- BlueInsights
- Member Months Coverage Report Available
- Enhancements to Our Find a Doctor & Estimate Costs Tool
- Enhancements to the MyBlue App

As always, if you have any questions, please contact your account executive.

Sincerely,



Debbie Williams
Senior Vice President, Sales and Account Service

[IAI October 2019]

Health Plan Updates for 2020

- ✓ Small accounts (50 or fewer enrolled)
- ✓ Mid-size (51–99 enrolled)
- ✓ Large (100 or more enrolled)
- ✓ Municipal
- ✓ MIIA

Effective January 1, 2020, and upon renewal, we're making changes to our health plans to ensure that we continue to meet the ongoing requirements of health care reform, while providing the high-quality, affordable coverage you and your employees expect from Blue Cross.

In 2020, we'll offer:

- Coverage for up to 12 acupuncture visits per member per calendar year
- New plan designs
- Expanded pharmacy coverage
- Redesigned Fitness and Weight-Loss Reimbursements

To see how these and our other updates will affect you, please review the enclosed 2020 Product and Benefit Updates brochure. You can also find plan documents and compare plan information at bluecrossma.com/plan-comparison.



Questions?

If you have questions, please contact your account executive.

Blue Cross Blue Shield of Massachusetts Surpassed 2018 Medical Loss Ratio Requirements

✔ Small accounts (50 or fewer enrolled)

In 2018, Blue Cross Blue Shield of Massachusetts exceeded the state and federal medical loss ratio (MLR) requirements for all market segments. As a result, we don't need to issue account rebates for 2018. Each year, the Patient Protection and Affordable Care Act (PPACA) requires insurers to meet certain MLR standards. Insurers who don't meet these requirements must issue rebates to eligible accounts. We're proud to have surpassed these requirements for 2018.



Questions?

If you have questions, please contact your account executive or visit healthcare.gov or mass.gov.

Important Employer Surveys: Medical Loss Ratios and Employer Group Size

✔ Small accounts (50 or fewer enrolled)

In July, employers with a fully insured, premium financial arrangement with Blue Cross Blue Shield of Massachusetts received at least one of the following two surveys in the mail. This year, we have emphasized to our accounts that a timely response to both surveys is essential for two reasons. First, it helps us determine if the company is eligible to receive a rebate for 2019 (if any are required to be issued in 2020). Second, it ensures that employees are enrolled correctly and their claims are properly adjudicated along MSP guidelines. We appreciate your support as you encourage your accounts to respond promptly.

About the PPACA survey

The Patient Protection and Affordable Care Act (PPACA) survey allows us to accurately calculate medical loss ratios for the small- and large-employer group segments. If medical loss ratio standards are not met, premium rebates would be issued to the applicable market segment(s). We use this data, along with other components, to determine if we will need to issue rebates.

About the MSP survey

The federal Medicare Secondary Payer (MSP) survey allows us to annually track the number of employees each company has. This includes all employees, and is not limited to those associated with employers' Blue Cross Blue Shield of Massachusetts accounts. This will help us determine whether Medicare or an employer group health plan pays for an employee's health claims first.



Questions?

If you have questions, please contact your account executive.

Smart90[®] Now Included in Core Benefits for Self-Insured Accounts with Pharmacy Benefits

✔ Large (100 or more enrolled)
✔ Municipal
✔ MIIA

Starting January 1, 2020, upon renewal, self-insured accounts* with pharmacy benefits will include the Smart90 program, which allows members to get a 90-day supply of certain maintenance medications through the mail order pharmacy, or from the more than 9,800 CVS Pharmacy[™] retail locations nationwide.

Filling a 90-day supply instead of three 30-day supplies saves your employees time and money. They'll make fewer trips to the pharmacy and their out-of-pocket costs will be lower. Plus, they'll have the convenience to get their prescriptions where they want.

*Self-insured accounts with Select Home Delivery, Exclusive Home Delivery, or Smart90 implemented before January 1, 2020 will be excluded from this change. All other accounts will get the Smart90 program unless they ask to opt out.



Questions?

If you have any questions, please contact your account executive.

Introducing RationalMed[®] for Self-Insured Accounts

- ✓ Large (100 or more enrolled)
- ✓ Municipal
- ✓ MIIA

RationalMed improves patient health by identifying gaps in care and providing medication safety interventions. This program will be added as a core benefit at no cost for self-insured accounts with the Blue Cross Blue Shield of Massachusetts formulary effective January 1, 2020. RationalMed will be managed by Express Scripts[®], an independent company that administers our pharmacy benefit.

How It Works

RationalMed combines medical, pharmacy, and laboratory data to create an integrated patient profile. Each profile is analyzed and reviewed against thousands of evidence-based clinical rules, identifying potential safety and health risks across the following three categories:

- Adverse medication risk
- Opportunity to coordinate care
- Omission of essential care

When risks are identified, RationalMed alerts the member's doctor and pharmacist. This safety solution initiates changes to improve the member's health and correct errors in care, leading to potential savings.



For more details, visit bluecrossma.com/employer. Choose **What's New** from the drop-down menu in the top-right corner, and select **Plan Updates**.

Introducing ScreenRx[®] for Self-Insured Accounts

- ✓ Large (100 or more enrolled)
- ✓ Municipal
- ✓ MIIA

ScreenRx identifies members who are more likely to stop taking medications, and reaches out to them with support, education, and a tailored adherence plan so they can stay on track. This program will be available to self-insured accounts beginning January 1, 2020, and will be managed by Express Scripts[®], an independent company that administers our pharmacy benefit.

How It Works

ScreenRx uses claims data, behavioral science, and clinical specialization to identify members with chronic conditions who are at risk to be non-adherent with their medications. Members will work with a specialized pharmacist to create a tailored health care plan to encourage proper medication use, reduce waste, and lower future medical costs.

The Savings Typically Outweigh the Costs

ScreenRx is a buy-up program for self-insured accounts. Savings associated with ScreenRx are typically equal to an account's initial investment, with the potential to save even more. In some cases, savings may be guaranteed.*



For more details, visit bluecrossma.com/employer. Choose **What's New** from the drop-down menu in the top-right corner, and select **Plan Updates**.

*Talk to your account executive to learn more about the cost and savings potential of the program.

Updates to Our Pharmacy Formulary Program

- ✔ Small accounts (50 or fewer enrolled)
- ✔ Mid-size (51–99 enrolled)
- ✔ Large (100 or more enrolled)
- ✔ Municipal
- ✔ MIIA

Beginning January 1, 2020, we're updating our list of covered medications for medical plans with pharmacy benefits, as well as Medex[®] plans with a three-tier pharmacy benefit. As part of these updates, certain medications may:

- No longer be covered
- Be excluded from coverage
- Switch tier
- Have a new dosing limit



Complete details about these changes will be available by October 18, 2019, on bluecrossma.com/employer in the Plan Updates section under **What's New**.

Updates to Our Dental Blue[®] Total Health Solution

- ✔ Small accounts (50 or fewer enrolled)
- ✔ Mid-size (51–99 enrolled)
- ✔ Large (100 or more enrolled)
- ✔ Municipal
- ✔ MIIA

Starting September 1, 2019 for new and renewing accounts, we're offering an expanded list of chronic conditions that qualify members for Enhanced Dental Benefits. The updated list will include:

- Stroke
- Sjogren's Syndrome

The list of qualifying medical conditions still includes diabetes, coronary artery disease, oral cancer, and pregnancy. Members with one or more of these conditions who have both medical and dental coverage are automatically enrolled in this program.



For more information and to see the additional covered services included in our Enhanced Dental Benefits, visit bluecrossma.com/employer and select **What's New** from the drop-down menu in the top right corner.

Upcoming Changes to Member ID Card Distribution

- ✔ Small accounts (50 or fewer enrolled)

As part of our ongoing commitment to better serve our accounts and members, we're changing the timeline for when we send new member ID cards to Small Group (under 50) accounts that have members in the following plans:

- HMO Blue Basic
- HMO Blue \$1,000 Deductible
- HMO Blue New England Basic Copayment
- HMO Blue New England \$1,000 Deductible with Copayment Calendar Year
- HMO Blue New England \$1,000 Deductible with Copayment Plan Year
- HMO Blue New England \$1,500 Deductible with HCCS
- Preferred Blue[®] PPO \$500 Deductible with HCCS

New Member ID cards are required because we have incorporated new benefits into these plans. Currently, we send new Member ID cards to members after their plan's benefits change or their renewal date is effective. For the remainder of 2019 we'll send new member ID cards, to members on the plans listed above, 15 days before their plan's benefits change or their renewal date is effective, as long as their plan hasn't been canceled for the coming benefit year.

This change will ensure that members receive updated member ID cards in a timely manner. The list of plans affected by this update will change in 2020, and members will be notified if their plan is affected.

Note: If an account makes a benefit change within 15 days of its renewal effective date, members may receive two sets of new member ID cards.



To learn more, visit Employer Central at employer.bluecrossma.com, select **What's New** from the drop-down navigation, and then click **Employer Newsletter - IA**.

New Self-Service Reporting Tool for Accounts with 100+ Employees

- ✓ Large (100 or more enrolled)

We're introducing a new claims analytics tool later this year called BlueInsights. It allows users to look up and review medical, pharmacy, and dental data through a simple, self-service interface. It will be available to all employers with 100+ employees. At that time, we'll also retire the current ReportBlue system.

Employers using our stop-loss tracking and reporting tool can log in to BlueInsights with the same username and password.

We'll update you with more information about BlueInsights in the coming weeks, including how to make a smooth transition, as well as upcoming training modules. If you have questions, please contact your account executive.

Member Months Coverage Report Available for ASC Accounts at No Cost

- ✓ Small accounts (50 or fewer enrolled)
- ✓ Mid-size (51–99 enrolled)
- ✓ Large (100 or more enrolled)
- ✓ Municipal
- ✓ MIIA

We're offering a Member Months Coverage Report to our ASC accounts for the 2019 tax year at no cost. This information is required by the Internal Revenue Service (IRS) under the Affordable Care Act (ACA). Accounts are responsible for sending the report file to their tax vendor, and filing the data with the IRS.

The Member Months Coverage Report will be delivered using Secure File Transfer Protocol (SFTP), and posted in January, 2020. This new security measure enhances our ability to safeguard the personal information that's included in these reports.

What's Included in the Report

The Member Months Coverage Report contains data for each member enrolled for at least one month in one of our insurance plans. The report is required to include:

- Account number
- Group number
- Member number
- First, middle, and last name
- Member suffix
- Member Social Security Number (SSN)
- Date of birth
- Months covered for each member
- Dependent status
- Member insurance ID
- Member Taxpayer Identification Number (TIN) type
- Member TIN type
- Subscriber SSN
- Subscriber address

We won't be soliciting SSNs. We'll rely on accounts to update this information through the electronic enrollment file process or BluesEnroll prior to January 1, 2020.



Request a Report

To request a Member Months Coverage Report, please inform your account executive before **November 1, 2019**.

Enhancements to Our Find a Doctor & Estimate Costs Tool

- ✔ Small accounts (50 or fewer enrolled)
- ✔ Mid-size (51–99 enrolled)
- ✔ Large (100 or more enrolled)
- ✔ Municipal
- ✔ MIIA

As part of our ongoing efforts to improve the Member experience, we've made our Find a Doctor and Estimate Costs tool available within MyBlue. This update, launched September 2019, improves the way a Member can search for a doctor, dentist, specialist, or other health care provider, as well as estimate the cost of a service or procedure.

Members can take full advantage of the tool's offerings by creating or signing in to their MyBlue account. Members with customized networks and those eligible for SmartShopper[®] will continue to use the existing tool.

Members can:

- Use the intuitive search tool to find what they need, when they need it
- Compare up to 5 results side-by-side
- Read and write reviews on doctors
- Search for cost estimates on approximately 1,600 common medical procedures



Questions?

If you have any questions, please contact your account executive.

Enhancements to the MyBlue App

- ✔ Small accounts (50 or fewer enrolled)
- ✔ Mid-size (51–99 enrolled)
- ✔ Large (100 or more enrolled)
- ✔ Municipal
- ✔ MIIA

Throughout 2019, we've been making several enhancements to the MyBlue App that offers our members a better user experience, improved performance, and full integration with the MyBlue website.

This includes:

- An easy view of a member's personal profile
- Access to Summary of Health Plan Payments/Explanation of Benefits statements
- The ability for members to view their co-insurance and deductible amounts for certain services
- An easy, new way to look up medications covered by the plan



Questions?

If you have questions, please contact your account executive.

