Looking for information related to health care reform? Visit bluecrossma.com/straightanswers for updates on recent activity.

Get the IAI in Your Inbox
Go to bluecrossma.com/subscribe and provide or update your email address. Next, enter your account number and unique contact ID number listed below.

Account Number: <Account_Number>
Unique Contact ID: <Contact_ID>
Dear Valued Customer:

Welcome to our Important Administrative Information December 2018 newsletter. We provide the latest health care industry news that affects you. This edition’s topics include:

- Expanded Coverage for Fluoride Supplements
- New Identity Protection Products for Members
- Prepayment Inpatient Claim Review
- New Change to HMO and Blue Choice (POS) Plans That Could Reduce Your Costs
- No-Cost Flu Vaccine Available for Members
- Reminder: Prior Authorization Required for Genetic Testing in 2019
- Blue 20/20 Plan Now Includes a Discount on Hearing Exams and Aids
- Account Toolkit for Split-Level Cost Sharing for Diagnostic Tests and Imaging Services
- New Health Education and Engagement Services Through Wellness Concepts
- With New Website Design, Promoting ahealthyme® Rewards Is Even Easier
- We’re Partnering with Virgin Pulse® to Encourage Employee Health and Well-being

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

Sincerely,

Debbie Williams
Senior Vice President, Sales and Account Service

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**Expanded Coverage for Fluoride Supplements**

Bright Futures, led by the American Academy of Pediatrics, has revised its recommendations for fluoride supplements to prevent dental cavities in children. As a result, effective January 1, 2019, as a one-day change, we’re updating our commercial medical plan coverage to reflect these changes, ensuring compliance with Preventive Services under the Affordable Care Act (ACA).

Our new coverage expands the age range to six months through 16 years of age. This benefit will be available at a $0 cost share for fully insured and self-insured non-grandfathered plans, as well as grandfathered accounts that adopted the ACA’s Preventive Services benefits. Coverage is subject to other health plan network requirements and provisions.

**New Identity Protection Products for Members**

Beginning December 1, 2018, Experian® is replacing its ProtectMyID® and Family Secure® products with IdentityWorks™ Credit 1-Bureau for adults, and IdentityWorks™ Minor Plus for dependents under 18. Eligible members already enrolled will need to re-enroll anytime between December 1, 2018, and the expiration date of their current Experian product to avoid a gap in no-cost identity protection.

We’ll update the member fact sheet and MyBlue content to reflect these changes, and Experian will send an email to currently enrolled members, letting them know how to continue receiving services.

As a reminder, employers and members aren’t charged for this voluntary service, and the cost of this program to Blue Cross doesn’t cause premiums to increase.
Prepayment Inpatient Claim Review

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

As previously communicated in the June IAI, we’ve partnered with Equian, a nationally known payment integrity vendor, to help manage costs and improve the accuracy of claim payments. Blue Cross has a broad spectrum of programs throughout the health care system, targeted at identifying and mitigating costs associated with high-dollar claims. This partnership adds to that spectrum by enhancing our pre-payment review process for certain high-dollar inpatient claims. This enhanced review process began on April 1, 2018, for fully insured accounts, and ASC accounts will be included effective January 1, 2019, upon renewal.

You don’t need to take any action to be included in this process. Qualified claims will be automatically identified for review. There will be no impact on members. For more information, please contact your account executive.

New Change to HMO and Blue Choice (POS) Plans That Could Reduce Your Costs

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

To help lower costs for employers and members, Blue Cross and Blue Shield may negotiate lower, out-of-network claims costs for covered services performed by out-of-network Massachusetts providers. This change takes effect in 2019 and applies to all employers with commercial HMO and POS plans.

Negotiations between us, or a contractor working on behalf of Blue Cross and Blue Shield, and out-of-network health care providers may take place after a claim is made. If negotiations are successful, the out-of-network provider will then be reimbursed the new, lower amount.

Reducing the claims costs for out-of-network claims may decrease employer payments and member out-of-pocket costs. For self-funded plans, the administrative services account agreement provides that when the related claims services described above result in a claim savings to the Account, Blue Cross and Blue Shield will charge the Account an amount equal to 30% of the claim savings. Savings are calculated as the difference between the original allowed charge and the newly negotiated reimbursement amount.

At this time, fee negotiation for HMO and POS plans will only apply to non-participating providers in Massachusetts. In the future, this practice may expand to include out-of-state non-participating providers. Blue Cross and Blue Shield will update our website to reflect changes in this practice as they occur.

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

No-Cost Flu Vaccine Available for Members

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

We’re committed to help limit the spread of the flu this season.

That’s why we cover the cost of the flu vaccine when a member uses a health care professional, a pharmacy-based clinic (like CVS MinuteClinic®), or a Blue Cross Blue Shield of Massachusetts vendor at their workplace.

The flu virus changes every year, so the best way to protect yourself is with an updated vaccine. The annual flu shot is recommended for those aged six months and older. For those aged two to 49, the Centers for Disease Control and Prevention also recommends the Flumist nasal spray during the 2018–2019 flu season. We’ll cover the cost of any FDA-approved flu vaccine administered by an in-network provider, making it more convenient for you. Members should consult with their health care professional.

To schedule a flu clinic at your workplace or learn more about our approved vendors to administer the flu vaccine, contact your account executive.

For more flu-related information, visit bluecrossma.com/flu.
Beginning January 1, 2019, Blue Cross Blue Shield of Massachusetts will require prior authorization before covering certain genetic tests. Prior authorization helps us manage costs, by ensuring that your employees receive services that are clinically appropriate and medically necessary. The following genetic tests will require prior authorization:

- DNA testing of hereditary heart disease risks
- DNA testing of hereditary cancer risks
- Testing to detect changes in DNA that may indicate a specific disease or condition
- Testing to help select proper medication and dosing regimens
- Prenatal screening and diagnosis of specific conditions
- DNA testing of tumor cells
- DNA sequencing to understand a current health or medical issue

Doctors who request prior authorization for these services may also suggest genetic counseling, to help your employees better understand the procedure and its results.

This change will apply only to members on our Commercial HMO/POS and Commercial PPO/EPO plans.

We now offer a discount on hearing exams and aids for Blue 20/20 plan members through Amplifon Hearing, an independent company. In addition to receiving vision care coverage, Blue 20/20 members will now have an affordable option for discounts on hearing exams and aids.

Members can visit amplifonusa.com/blue2020 to learn more or call 1-866-921-5367 to speak to an Amplifon Patient Care Advocate.

As communicated in our 2019 Product and Benefit Updates brochure for small employers, effective January 1, 2019, upon renewal, we’ll apply two cost-share levels for outpatient Diagnostic Tests and Imaging Services on certain Merged Market medical plans. This change will not apply to Blue Options plans, Blue Select® plans, Connector plans, and plans with Hospital Choice Cost Sharing.

If your plan will include this benefit update on renewal, please help your enrolled employees learn about this important benefit change.

Access the account toolkit at bcbsma.info/payless to download and distribute these educational member support materials:

- **Email template** – Boost awareness with copy you can email to your employees.
- **Fact Sheet** – Empower your employees to save money, with a PDF you can print and distribute.
- **Poster** – Promote “Why Pay More” with this poster to display in high-traffic areas.
- **Webpage** – Drive engagement by linking to bcbsma.info/whypaymore.

If you have questions, please contact your account executive.
New Health Education and Engagement Services Through Wellness Concepts

We’re excited to announce that beginning January 1, 2019, our health education and engagement services will expand significantly to incorporate a wide range of new topics and events, including:

- **Seminars, live webinars, and recorded videos,** such as: nutrition education, mindfulness, and financial education (webinar only)
- **Health fair offerings,** such as: nutrition counseling with body fat testing, meditation, aromatherapy, Wellness Jeopardy, and honey tasting
- **Physical activity classes,** such as: healthy cooking demonstrations, yoga, Pilates, and kickboxing

We’ve developed these additional on-site programs to help enhance our members’ physical, emotional, financial, and social health and well-being. To learn more about our expanded offerings, or to schedule an event, please contact your Health Engagement team or account executive.

With New Website Design, Promoting ahealthyme Rewards Is Even Easier

Our redesigned ahealthyme Rewards website means a whole new level of convenience and simplicity for HR managers. You’ll find everything you need to spread the word about your new wellness program and engage your employees at ahealthymerewards.com/employerportal.

Once you’re on the page, you’ll see that all the promotional pieces for the program have a new look, tone, and feel. The updated design highlights:

- The key benefits of the program for your employees
- The cash rewards they can earn, simply by making healthier choices
- The ease of signing up and getting on the path toward leading a healthier, happier lifestyle

We’ve brought a new level of simplicity to our website, too. All the marketing assets for the program—from challenge emails to fact sheets—are displayed on the home page with a thumbnail and a description next to each. Now, promoting your wellness program and helping your employees earn up to $400 per year are just one click away.

Have questions about your existing program, or interested in signing your company up for ahealthyme Rewards at your next renewal? No problem—contact your Health Engagement team or account executive to learn more.
We’re Partnering with Virgin Pulse® to Encourage Employee Health and Well-being

In 2018, Blue Cross and Virgin Pulse joined forces to launch two new programs, focused on promoting better health and well-being in the workplace. We unveiled ahealthyme® Rewards, a fully funded turnkey wellness program that allows employees to earn rewards for making healthier choices every day. In addition, we rolled out Healthy Together, a four-week challenge offering that motivates employees to team up and conquer fun virtual fitness challenges.

Based on the success of these two programs, we’re excited to build on our partnership with Virgin Pulse in 2019 to offer:

- **ahealthyme Rewards**—the expansion of our flagship program will give additional accounts access to the fee-waived core option of ahealthyme Rewards, while others will have access to this turnkey well-being program as a premium buy-up.

**Program Availability**

- **Fee-waived Core:** Fully insured (100–499)
- **Buy-up Alternative:** Fully insured (500+); Self-insured (100+)

- **Enterprise Solution**—an alternative premium buy-up to the traditional ahealthyme program, designed to maximize the partnership between Blue Cross and Virgin Pulse. Expanding on the elements of ahealthyme Rewards, participants in Enterprise Solution can earn points by taking advantage of their Blue Cross benefits. The program also allows for a degree of personalization, ensuring that your program is a perfect fit for your company—and your employees.

**Program Availability:** Self-insured (500+)

- **Healthy Together Well-being Challenges**—four weeks of team-based challenges that take employees on virtual adventures around the world, while encouraging them to get active, build camaraderie, and make healthy lifestyle choices together.

**Program Availability:** Fully insured (500+); Self-insured (100+)

Ready to learn more? Contact your Health Engagement team or account executive for details on program availability, enrollment information, and more.

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