For more information, visit bluecrossma.com/employer or contact your account executive.

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

Welcome to our Important Administrative Information June 2017 newsletter. We provide the latest health care industry news that affects you. This edition’s topics include:

- Changes to Our Pharmacy Program
- New Prior Authorization Requirements for HMO, Access Blue, and Blue Choice® Plans
- Proton Pump Inhibitors Will Be Excluded from Pharmacy Coverage
- AllCare Plus Specialty Pharmacy Is Joining Our Network
- Update to Out-of-Network Provider Claims Reimbursements for ASC PPO Plans
- Important Update to Blue 20/20 Plans
- We’ve Made Important Changes to the Indigo Website
- Earn Annual Discounts with Pathway to Savings: Savings Made Simple

As a reminder, you can receive the IAI via email and get more personalized information faster. Go to [bluecrossma.com/subscribe](http://bluecrossma.com/subscribe), provide your email address, and enter your account number and unique contact ID number listed below.

Account Number: <Account_Number>
Unique contact ID: <Contact_ID>

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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### Changes to Our Pharmacy Program

Beginning September 1, 2017, we’re making changes to our covered medications list for commercial medical plans with pharmacy benefits, and Medex® plans with the three-tier pharmacy benefit. These changes affect:

- Medications switching tiers
- Medications that are no longer covered
- One medication moving to benefit exclusion (also impacts Managed Blue for Seniors)

Complete details about these changes are now available on [bluecrossma.com/employer](http://bluecrossma.com/employer) in the Plan Updates section under What’s New.

### New Prior Authorization Requirements for HMO, Access Blue, and Blue Choice Plans

Beginning September 1, 2017, we’re introducing new prior authorization requirements for certain medications when they’re administered under your employees’ medical benefit. This change impacts members that have an HMO or POS plan. It doesn’t apply to PPO, Indemnity, FEP, Medicare Advantage, Medicare Supplement, Medex, and Managed Blue for Seniors.

Complete details about these changes are now available on [bluecrossma.com/employer](http://bluecrossma.com/employer) in the Plan Updates section under What’s New.
Beginning January 1, 2019, all proton pump inhibitors will be excluded from our pharmacy benefit coverage, except for members under the age of 18 and those taking combination medications to treat H. pylori. Formulary exceptions, including those previously approved, will no longer be available for this class of medication, except for members under the age of 18 and those taking combination medications to treat H. pylori. This change applies to all commercial plans, group Medex plans with three-tier pharmacy benefits, and Managed Blue for Seniors plans. We’re making this change because several products in this class are available over the counter.

AllCare Plus Specialty Pharmacy Is Joining Our Network

This summer your employees will have another retail specialty pharmacy option where they fill their prescriptions for specialty medications. Starting July 1, 2017, AllCare Plus Pharmacy is joining our retail specialty pharmacy network. Your employees can go to bluecrossma.com/specialtyrx to view our Specialty Pharmacy Medications List. We’re updating this list on July 1 to include the medications AllCare Plus fills.

You can reach AllCare Plus at 1-855-880-1091 or allcarepluspharmacy.com.

Update to Out-of-Network Provider Claims Reimbursements for ASC PPO Plans

We’re updating our standard out-of-network reimbursement benefit in order to reduce exposure to high, out-of-network charges. This update will take effect on January 1, 2018 for eligible, fully insured PPO plans, and will now include eligible ASC PPO plans upon renewal in 2018.

For accounts currently offering the standard PPO out-of-network reimbursement benefit, we’ll reimburse most out-of-network claims based on 150 percent of the Medicare fee schedule. When no Medicare fee is available for certain procedures, we’ll use current, publicly available fee reimbursement data, and adjust it for geographic variations to determine the fee for the claim.

Accounts currently using our standard PPO out-of-network reimbursement benefit can expect to be automatically updated to the new standard. Fully insured and ASC accounts currently offering a non-standard PPO out-of-network reimbursement rider will be given the opportunity to change to the new standard beginning January 1, 2018, or discuss available non-standard rider options.

For more information, please contact your account executive.
Important Update to Blue 20/20 Plans

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

We want you to know about a change to Blue 20/20 that will affect your employees. We’ve updated coverage on our Exam-Plus and Exam-Only plans to include retinal imaging when having in-network services. This is usually an optional service that’s offered by a provider during a routine exam. Your employees will have to pay a copay of up to $39 if they have this service.

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

We’ve Made Important Changes to the Indigo Website

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

We recently upgraded the Indigo Insurance Services website to significantly improve ease of use and drive business. Now you can find product information faster, and connect more quickly with a sales executive. Improvements to the website include:

- Mobile-friendly content and design
- Quick access to our carriers’ forms
- Streamlined product information
- Expanded contact pages

To see these recent changes, go to indigo-insurance.com. We’re planning more upgrades soon, and will keep you posted as they occur.

Earn Annual Discounts with Pathway to Savings: Savings Made Simple

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

Pathway to Savings is dedicated to helping you earn annual discounts on medical premiums by packaging together medical plans with Dental, Life & Disability, Vision & Voluntary products. Pathway to Savings is fully integrated into all of our product offerings, making it easier to save while still providing your employees with the most attractive coverage options. For as long as you maintain those ancillary products, you’ll continue to save! Pathway to Savings is available to accounts with at least 50 FTE and 30 or more subscribers.

Benefits for accounts include:

Easy-to-use program featuring easy-to-obtain savings

To save on their medical premiums, accounts must simply purchase Dental and one or more of the designated ancillary products (Life & Disability, and/or Vision & Voluntary).

All-in-one Convenience

By having your entire benefits package managed by Blue Cross Blue Shield of Massachusetts and our partner, Indigo, accounts can eliminate the headache of working with multiple vendors and insurers, and get fast support when and where they need it.

To learn more or get started in the program, please contact your account executive or broker.