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# IAI | IMPORTANT ADMINISTRATIVE INFORMATION



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March 2017



Dear Valued Customer:

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

- Recent Activity in Health Care Reform
- Updates to the Summary of Benefits and Coverage (SBC) Format in 2017
- Enhancements to Imaging and Sleep Management Programs
- New Complex Illness Management Program for Medicare Advantage Members

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

Account Number: <Account\_Number>

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

Sincerely,

Seber J. Walliams

Debbie Williams Senior Vice President Sales and Account Service

[ IAI March 2017 ]

### **Recent Activity in** Health Care Reform

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

With the inauguration of President Donald Trump, the national health care landscape seems to be shifting, raising questions about the Affordable Care Act (ACA) and what it all means to our industry - and your businesses. While there is nothing definitive from policymakers in Washington, we do expect there to be changes to the law over time.

At Blue Cross Blue Shield of Massachusetts, we want to ensure that everyone in the state continues to have access to high-quality, affordable health care. We also want to ensure the marketplace remains competitive, affordable, and stable. We're committed to working in a spirit of shared responsibility to maintain what we have achieved.

Through all this uncertainty, our focus remains on our accounts. brokers, and members. As your trusted advisor on health care, Blue Cross will be prepared to help you – answering questions, navigating changes.

We're committed to keeping you updated and apprised as decisions are made in Washington, and here in Massachusetts. We look forward to communicating any changes, and we thank you for your partnership.

For a summary of recent activity, please visit **bluecrossma.com/** straightanswers or contact your account executive.

## [ IAI March 2017 ]

Updates to the Summary of Benefits and Coverage (SBC) Format in 2017

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

For plans that are effective on or after April 1, 2017, the format of the SBC will change. The changes include updates to the Important Questions, Common Medical Events, and Services You May Need sections, as well as the addition of a new coverage example.

For more information, go to **bluecrossma.com/iai** and visit the SBC Resource Center.

Enhancements to Imaging and Sleep Management Programs

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

We're improving the management of imaging and sleep services for our Fully Insured and ASC HMO/PPO accounts to increase the quality and efficiency of these services. Starting June 1, 2017, we'll require prior authorization for all imaging and sleep services included in our management programs. AIM Specialty Health (AIM) will manage authorizations. AIM has experience managing imaging and sleep services for our HMO members, as well as for most other Blue plans, with approximately 42 million lives under management across the country.

#### For our HMO members

The imaging management program, which has been in place since 2005, will move to a full Utilization Management (UM) program for procedures that require a pre-service prior authorization. A UM program requires a Medical Necessity determination prior to the coverage of services. We'll continue to exclude certain provider groups in Massachusetts from the management process when those groups meet established criteria.

Your sleep management program, which has been in place since 2013, already requires authorization before the service, and so is unchanged. All provider groups in Massachusetts participate in this process.

#### For our PPO members

New requirements for pre-service authorization will go into effect for in-state and out-of-state services. As a result of this change, if out-of-state PPO members don't obtain pre-service authorization, they'll be financially responsible for the cost of services. As with our HMO programs, some Massachusetts provider groups may be excluded from the management requirements for imaging, and all provider groups are required to participate in the sleep management program.

#### **Educational Member Resources**

To help you better inform your members, we've developed a helpful fact sheet that explains the enhancements to our Imaging and Sleep Management Programs.

To access the member fact sheet, visit **bluecrossma.com/iai**.

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

## [ IAI March 2017 ]

**New Complex Illness** Management Program for Medicare Advantage Members

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

Beginning April 1, 2017, Blue Cross Blue Shield of Massachusetts will roll out a new in-home assistance program for Medicare Advantage members who have multiple chronic medical conditions. This program is designed to improve members' quality of life by reducing their hospital admissions and helping them maintain independence in their homes.

We're offering this program in partnership with Landmark Health, an independent company. Landmark Health will provide our members with interdisciplinary teams of doctors, behavioral health specialists, nurse case managers, social workers, pharmacists, and nutritionists that make traditional house calls.

The program will be available to members who live in the following counties:

- Essex • Hampshire Norfolk Worcester
- Suffolk • Hampden Middlesex

There is no additional cost to members for this program, and participation is voluntary. Members' benefits won't be affected in any way by program participation.

This program doesn't replace the primary care members are receiving. Instead, the Landmark Health team will work with members' current doctors to coordinate their overall care. Services members may receive include:

- In-home care from the Landmark Health team scheduled at the members' convenience, or when there is an urgent need
- Direct phone access to Landmark Health care team 24 hours a day, 7 days a week
- Post-discharge visits after a hospital stay to ensure transition plan is working
- Ongoing education to help members and their loved ones effectively manage complex medical needs

To enroll eligible members, Blue Cross will send out letters introducing the program and its benefits. Following the mailing, Landmark Health representatives will reach out directly to members to talk about the program.

If you have any questions, please contact your account executive. For more information about Landmark Health, visit landmarkhealth.org.

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