



MASSACHUSETTS

Network-Focused Medical Plan Designs



Delivering High-Value Health Care Through Provider Choice

This document gives general information about our tiered network plan designs. There are currently three tiered provider networks called HMO Blue OptionsSM v.5, HMO Blue New England OptionsSM v.5, and Preferred Blue PPOSM Options v.5. In our tiered plans, members pay different levels of cost share (copayments, co-insurance, and/or deductibles) depending on the benefits tier of the provider furnishing the services. A provider's benefits tier may change. Overall changes to the benefits tiers of providers will happen no more than once each calendar year. For help in finding the benefits tier of a provider, visit the online provider search tool at www.bluecrossma.com and search for the appropriate network.

Please visit

www.bluecrossma.com/employers

for tools and resources that will assist you
in your health care decision making.

The Value of Provider Choice

It starts with a simple truth that everyone can understand, that some doctors and hospitals provide higher quality or more efficient care than others. Research shows wide variation in the care patients receive and the costs they incur!¹

Network-focused plan designs manage costs and work to create healthier members by encouraging the selection of high-quality, less-expensive providers every time a member gets care.

While this may seem like a novel concept, it is similar to decisions people make in their everyday lives, like how to manage their 401(k)s and what kind of checking or savings account to open.

By empowering our members with information, these plans simplify how they choose providers and use their health care benefits. The result can be better health care for all of us.

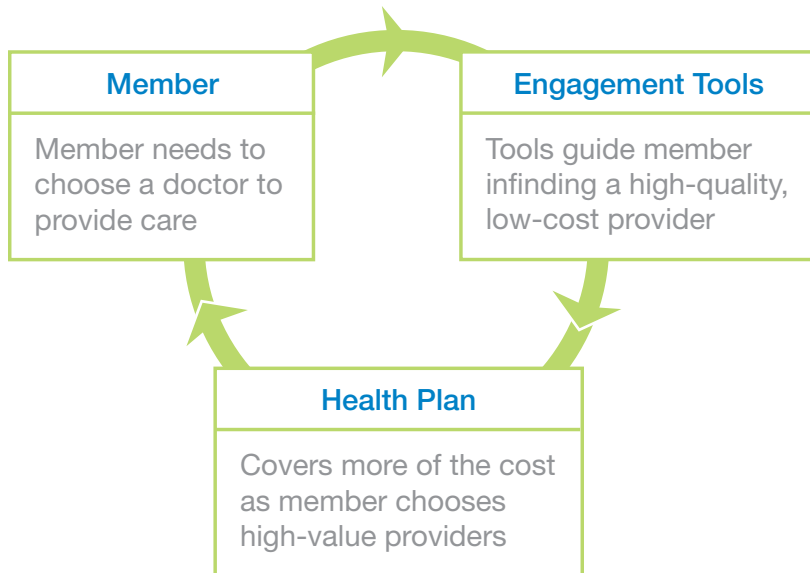
Blue Cross Blue Shield of Massachusetts has more than 70 years of experience in providing health coverage across the Commonwealth. We offer the expertise, broad product selection, and comprehensive support to help ensure that your experience with these plans is successful.



1. The Henry J. Kaiser Family Foundation, *Health Care Costs: A Primer*, March 2009, p. 13.

What Are Network-Focused Products?

These type of plan designs allow you to manage health care costs by encouraging your employees to make decisions about who provides their health care based on quality and cost information.



“ Interventions intended to make the health system more efficient, such as reducing disparities in health care practices across regions and providers... are important initiatives that could make the health care system cheaper... and better.”

The Provider Network

The advantage of network-focused plan designs lies in how the provider network functions. Doctors and hospitals are grouped into benefit levels based on a variety of factors, depending on the plan selected. These include how they score on evidence-based cost and nationally accepted quality benchmarks.

By giving our members access to this information, we help take the guesswork out of selecting a high-value provider. And the plans provide tangible incentives by tying members' out-of-pocket costs to their provider's tier.

2. The Henry J. Kaiser Family Foundation, *Health Care Costs: A Primer*, March 2009, p. 14.



Flexible Plan Options

As an employer, your aim is to choose an effective, affordable health plan design for your organization. We offer a range of network-focused plan design features so that businesses large and small have the opportunity to tailor the power of network choice to meet their financial needs and benefit goals.

Blue Options	Hospital Choice Cost Sharing
<p>Our premier tiered network plan design drives significant member behavior change by combining transparency and clear financial incentives that cover most of the members' care.</p> <p>Primary care providers and hospitals are grouped into three benefit tiers based on cost and nationally accepted quality scores.</p> <p>Members pay less to see providers whose scores are better, helping to control costs and drive long-term changes in quality. They also have the choice of seeing other network providers for care, though with higher cost sharing.</p>	<p>A feature available on certain HMO, Open Access, and PPO plan designs, it groups hospitals into two cost-sharing levels based on cost and nationally accepted quality scores.</p> <p>Members pay less for six categories of care at hospitals with better scores or at freestanding facilities.</p> <p>This plan provides clear financial incentives on a limited number of high-value services, while maintaining choice, making it a good way to introduce network-focused concepts.</p>

What Are the Benefits of Network-Focused Plan Designs?

- Lower premiums than comparable plan designs
- Plan design is easy-to-understand and use
- Member cost sharing at higher-value providers are similar to those associated with more expensive plans
- Access to the full Blue Cross Blue Shield network
- Plan options that fit almost any budget
- Tangible incentives encourage members to choose high-quality, lower-cost providers
- Comprehensive member and employer support
- Members gain greater control over their out-of-pocket costs
- No cost share for preventive care can help lower costs over the long-term by working to keep employees healthy and minimize future complications

Support for the Success of Network-Focused Plan Designs

The successful launch of a network-focused solution requires support, and we are ready to partner with you to deliver the tools and education needed. We are committed to providing dedicated service that begins when you choose a network-focused plan design and continues throughout the plan year, including:

- Comprehensive materials (e.g., brochures, letters, websites, etc.) to help you communicate key plan design information and concepts
- Exceptional support that gets questions answered quickly and easily
- Easy-to-use provider search tools to help employees find and choose high-value providers
- Engagement tools with cost, decision-support, and health education information to help members make informed health care decisions, such as:
 - Interactive online benefits and claims information
 - Hospital cost and quality comparison tools
 - Medication cost and coverage search tools
 - Health care cost search tools
 - Health and wellness programs, resources, and information



Are You Ready for a Better Approach?

Network-focused plan designs offer a unique combination of cost and quality incentives, plan choice, and comprehensive support that engages employees in their costs, health, and wellbeing.

The result is a solution that can mitigate increasing health care costs, both for today, and over the long-term. This is one of several engagement-focused plans for employers. Other approaches include:

- **Consumer-directed health care**—Uses deductible-based plan designs and spending accounts for financial engagement
- **Value-based benefits**—Uses benefit design to encourage members to select higher-value care that reduces costs and improves health
- **Wellness incentives**—Uses incentives and premium contribution differentials to encourage members to participate in disease and health management activities

To learn more about how a network-focused plan design could work for your organization, contact your account executive or broker today.





Nondiscrimination Notice & Translation Resources

Blue Cross Blue Shield of Massachusetts complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity.

ATTENTION: If you don't speak English, language assistance services, free of charge, are available to you. Call Member Services at the number on your ID Card (TTY: 711).

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma. Llame al número de Servicio al Cliente que figura en su tarjeta de identificación (TTY: 711).

ATENÇÃO: Se fala português, são-lhe disponibilizados gratuitamente serviços de assistência de idiomas. Telefone para os Serviços aos Membros, através do número no seu cartão ID (TTY: 711).