



MASSACHUSETTS

HMO Blue New England<sup>SM</sup> and HMO Blue Select Product Coverage Options for Small-Group Accounts

Effective January 2017\*

Blue shaded products: These products include the Hospital Choice Cost Sharing feature... (Members will pay a higher cost share when they receive certain services at or by higher cost share hospitals, including inpatient admissions, surgical day care, and some other hospital outpatient services.)

Green shaded products: This health plan includes a tiered provider network called HMO Blue New England Options<sup>SM</sup> v.5. Members in this plan pay different cost share levels (copayments, coinsurance, and/or deductibles) depending on the benefits tier of the provider furnishing the services.

\*This chart highlights some of the benefits under each of the plans listed for comparison purposes. There may be other cost share features not included on this sheet. See subscriber certificate for full benefit information.

Blue Cross Blue Shield of Massachusetts allows small employer groups<sup>SM</sup> to provide multiple plan options to their employees:

- Small employer groups with two or more enrolled employees may offer up to two medical plans.
• Employers with 20 to 50 full-time equivalent employees may elect My Blue Choices<sup>SM</sup>. My Blue Choices is an exclusive private exchange from Blue Cross Blue Shield of Massachusetts that allows employees to offer their employees up to four medical products using an on-line shopping experience

Legend: All plans listed below include Value-Based Benefits<sup>1</sup> VBB—Value-Based Benefits / Rx—Prescription Drugs

EBT—Enhanced Benefits Tier / SBT—Standard Benefits Tier / BBT—Basic Benefits Tier

Table with 14 columns: Plan Designs, Office Visit, ER, Inpatient Admissions, Surgical Day Care, Labs, X-rays, MRI/CT, PET Scans, Medical Deductible, Out-of-Pocket Maximum, Prescription Drugs, Hospital Choice Cost Sharing. Rows list various HMO Blue New England and HMO Blue Select plan options with their respective cost-sharing details.

Below are underwriting guidelines for this type of offering:

The Hospital Choice Cost Sharing feature (HCCS or Options) can only be offered alongside another product with the Hospital Choice Cost Sharing feature (HCCS or Options) or alongside a Saver product.

• Products without the Hospital Choice Cost Sharing feature (Non-HCCS or Non-Options) can only be offered alongside products without the Hospital Choice Cost Sharing feature (Non-HCCS or Non-Options).

• Preferred Blue PPO Options can be sold alongside any product with the Hospital Choice Cost Sharing feature (HCCS or Options). Preferred Blue PPO Options can also be sold alongside any HMO Blue New England product without the Hospital Choice Cost Sharing feature as long as Preferred Blue PPO Options is for out of New England employees only.

- HMO Blue New England Options Deductible, HMO Blue New England Options Deductible II and HMO Blue New England Deductible II can be sold alongside any Non-Hospital Choice Cost Sharing PPO product as long as the Non-Hospital Choice Cost Sharing PPO product is for out of New England employees only.
• Any HMO New England Product without the Hospital Choice Cost Sharing feature can be paired alongside a PPO Product with the HCCS feature in the scenario where the PPO is set-up for out of New England membership only.

Footnotes:

1. Value-Based Benefits:

- Members will pay nothing for the first two diabetic monitoring visits per calendar year. These are services such as diabetes evaluation and management services, including diabetic eye exams and foot care.
• Members will pay the same cost share for a 90-day supply of medication when purchased at the retail pharmacy as they do for a 30-day supply when purchased from a retail pharmacy. For a 4-Tier pharmacy benefit this applies to a specific list of Tier 1, Tier 2 and Tier 3 medications used in the treatment of asthma, coronary artery disease/cardiovascular disease, and diabetes, as well as a co-morbidity of Depression. The overall deductible will not apply for these medications on the HSA-compliant plan designs.
• Members will pay nothing for certain Tier 1 and Tier 2 smoking cessation products when purchased at either a retail pharmacy or mail pharmacy.

- 2. This is the cost sharing for services rendered at hospitals other than those that are designated as higher cost.
3. The two amounts in this column refer to individual and family.
4. Higher cost hospitals are: Baystate Medical Center, Brigham and Women's Hospital, Cape Cod Hospital, Boston Children's Hospital (other than Boston Children's Hospital locations at Lexington, Peabody, and Waltham), Dana-Farber Cancer Institute, Fairview Hospital, Massachusetts General Hospital, UMass Memorial Hospital—Memorial Campus, and UMass Memorial Medical Center—University Campus.
5. Outside Massachusetts, the lower Enhanced Benefits Tier copayment applies to any network provider who is listed as a general practitioner, internist, family practitioner, pediatrician, obstetrician/gynecologist, nurse practitioner, rural health center, limited services clinic, or general hospital. In New Hampshire a Tier 1 provider equates to an Enhanced Benefits Tier provider. In New Hampshire a Tier 2 provider equates to a Standard Benefits Tier provider.

- 6. To provide geographic access to members, the lower Standard Benefits Tier copayment applies for Athol Memorial Hospital, Baystate Franklin Medical Center, Berkshire Medical Center, Falmouth Hospital, Martha's Vineyard Hospital, Nantucket Cottage Hospital.
7. Entire family deductible must be satisfied before benefits are provided for any one member enrolled under a family membership.
8. Overall deductible does not apply to preventive drugs.
9. Small employer group: "Eligible small business" or "group", any sole proprietorship, firm, corporation, partnership or association actively engaged in business who, on at least fifty percent of its working days during the preceding year employed from among one to not more than fifty full-time equivalent employees, the majority of whom worked in the commonwealth; provided, however, that a health carrier may offer health insurance to a business of

more than fifty employees in accordance with the provisions of this chapter. In determining the number of full-time equivalent employees, a business shall be considered to be 1 eligible small business or group if: (1) it is eligible to file a combined tax return for purpose of state taxation, or (2) its companies are affiliated companies through the same corporate parent. Except as otherwise specifically provided, provisions of this chapter which apply to an eligible small business shall continue to apply through the end of the rating period in which an eligible insured no longer meets the requirements of this definition. An eligible small business that exists within a MEWA shall be subject to this chapter.

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