

Member Communication for 2019 Group Renewal Bulletin

Blue Cross and Blue Shield of Minnesota
Minimum Premium Plans



Each year there are a number of health plan changes that may affect members. Typically, these include benefit clarifications, process modifications and other plan changes.

This document provides a summary of changes that will be implemented upon your 2019 health plan renewal.

- Learn to Live
- Cost Comparison Incentive (Smart Shopper)
- Sharecare
- Acupuncture visit limits
- Credible coverage disclosure for pharmacy benefits
- Out of pocket maximum requirements / 2019 HSA limits

Health and Wellness changes/updates:

- Members Health and Wellbeing Solution Platform
- Fitness Discount Program

Pharmacy changes/updates:

- Specialty Pharmacy Network

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Health and Wellness Changes, Updates

The Minnesota Healthcare Consortium is offering the Learn to Live program to members. Learn to Live provides online programs, tools and resources for employees and their family members (age 13+) struggling with stress, depression, insomnia or social anxiety. You can access the programs confidentially, anytime, anywhere and at zero cost to members. Your personal information will never be shared with your employer or anyone at Blue Cross. Learn to Live offers a comprehensive online assessment to determine where stress, anxiety, and discouragement could be impacting your life. To sign up for the Learn to Live program, www.learntolive.com/partners.

Cost Comparison Incentive (SmartShopper)

The SmartShopper program was brought to you by the Minnesota Healthcare Consortium in 2018. The following are updates regarding this product in 2019

- Members in provider networks other than the base Aware network will not have access to the Smart Shopper program. This would include tiered networks like High Value, Triple Gold or ACO networks i.e. Western network.
- Members have the ability to perform searches with providers in the neighboring counties outside Minnesota.

Incentives are taxable and reporting will be provided to employers. Members should consult their own tax advisor with questions.

Members Health and Wellbeing Solution Platform

Blue Cross Blue Shield of Minnesota is collaborating with a new partner, Sharecare, to bring a new health and wellbeing solution to members as part of their core health plan services. This platform is a highly personalized approach to accessing health and wellbeing information on their smartphone or desktop which is revolutionizing the industry by making it easier to make healthy choices. Sharecare is a digital health and engagement company that helps people manage and optimize their health in one place. The platform provides a health assessment, comprehensive and personalized health profile along with evidence-based programs, award-winning and innovative technologies, scientifically validated clinical protocols and best-in-class coaching tools. Sharecare will be available to all members beginning on 1/1/2019.

Fitness Discount program

Blue Cross and Blue Shield of Minnesota is discontinuing the current Fitness Discount program upon renewal, beginning with client renewals on 1/1/2019 and replacing it with a Fitness Incentive Program through the new Sharecare solution. With this new Fitness Incentive Program, housed on the Sharecare platform, members will receive a \$20 incentive for achieving an average of 10,000 step goal for 21 days per month. This incentive will then provide a \$20 reward available for redemption in the Sharecare online Marketplace. An ACA compliant reasonable alternative is available for those that have a medical condition preventing them from being able to complete the physical activity requirement. The current Fitness Discount program logo will be removed from the member's health insurance identification card as they transition to the new Fitness Incentive Program. For more information, contact Blue Cross Customer Service at 866-537-7702

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Other Required Changes, Notifications and Reminders

Acupuncture

There will be a 20-visit annual maximum on acupuncture for all providers, in-network and out-of-network combined.

Creditable coverage disclosure for pharmacy benefits

Member notification of creditable coverage status is due each year on October 1, upon request from your employer, or upon plan design change or termination of coverage.

The out-of-pocket (OOP) maximum for the plan can be no greater than the self-only or other than self-only cap established for that year. Cost-sharing accumulates to the OOP maximum based on:

- Covered Benefits (Essential Health Benefits (EHBs), EHB and other designated benefits or all benefits)
- Network (in-network only or more generous network tiers); and
- Plan design

Note: The High Deductible Health Plan (HDHP) limits on out-of-pocket expenses and the maximum out-of-pocket (OOP) limits as defined under the Affordable Care Act (ACA) are NOT the same.

Embedded vs. non-embedded OOP maximum

There are specific requirements regarding family cost sharing accumulations. This impacts the ability for a plan to have an embedded or non-embedded OOP maximum.

- Plans with an embedded OOP maximum begin paying benefits that require cost sharing for the first family member that meets the per person OOP maximum.
- Plans with a non-embedded OOP maximum require the entire family OOP maximum to be met before cost sharing benefits are paid.
- All plans (whether HDHP or non-HDHP) must cap out-of-pocket spending at \$7,900 for any covered person. A family plan with an out-of-pocket maximum in excess of \$7,900 can satisfy this rule by embedding an individual out-of-pocket maximum in the plan that is no higher than \$7,900. This means that for the 2019 plan year, an HDHP subject to ACA out-of-pocket limit rules may have a \$6,700 (self only)/\$13,000 (family) out-of-pocket limit (and be HSA-compliant) so long as there is an embedded individual out-of-pocket limit in the family tier no greater than \$7,900 (so that it is also ACA-compliant).

HSA-compliant HDHP with an embedded deductible

It is permissible to have an individual member (embedded) deductible on family policies if the individual deductible is not less than the minimum family deductible amount established by HSA law (\$2,700 in 2019).

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Pharmacy Changes, Updates

Prescription drug – Specialty Pharmacy Network

All medications related to Hemophilia must be purchased through Fairview Specialty Pharmacy or Children’s Home Care. All other specialty medications will still be available through AllianceRx Walgreens + Prime Specialty Pharmacy.

A comparison of the 2018 and the 2019 limits is shown below:

Contribution and Out-of-Pocket Limits for Health Savings Accounts and High Deductible Health Plans			
	For 2018	For 2019	Change
HDHP minimum deductibles *Note: this is the lowest deductible amount for embedded deductible (no fourth quarter carryover)	Self-only \$1,300 Family: \$2,700	Self-only: \$1,300* Family: \$2,700*	Self-only: No change Family: No change
HDHP maximum out-of-pocket amounts (deductibles, copayments and other amounts, but not premiums)	Self-only: \$6,650 Family: \$13,300	Self-only: \$6,750 Family: \$13,500	Self-only: +\$100 Family: +\$200
Out-of-pocket limits for ACA-compliant plans (set by HHS) *Note: this is the highest amount for embedded deductible.	Self-only: \$7,350 Family: \$14,700	Self-only: \$7,900* Family: \$15,800*	Self-only: +\$550 Family: +\$1,100
Out-of-pocket limits for HSA-qualified HDHPs (set by IRS)	Self-only: \$6,650 Family: \$13,300	Self-only: \$6,750 Family: \$13,500	Self-only: +\$100 Family: +\$200
HSA contribution limit (employer + employee)	Self-only: \$3,450 Family: \$6,900	Self-only: \$3,500 Family: \$7,000	Self-only: +\$50 Family: +\$100
HSA catch-up contributions (age or older) *	\$1,000	\$1,000	No change**
*Catch-up contributions can be made any time during the year in which the HSA participant turns 65 or after. ** Unlike other limits, the HSA catch-up contribution amount is not indexed. Any increase would require statutory change.			