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
- Omada
- Cost Comparison Incentive (Vitals 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

Learn to Live

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.

Omada

The Minnesota Healthcare Consortium is bringing the Omada program to its member groups. Members at risk for diabetes and heart disease will have access to Omada, a program designed to detect and decrease the incidence of future diabetic cases through an intensive screening and plans individualized to each person's need. Interested members can access information at www.omadahealth.com/mhc. The cost for this additional benefit will be coordinated by the Minnesota Health Consortium. Please note, Omada is not available for members in the Western MN Network, but we encourage members to consult with their primary care provider.

Cost Comparison Incentive (Vitals SmartShopper)

Costs for medical care vary widely from one facility to the next, regardless of quality. Vitals SmartShopper, is a new program designed to provide incentives to members who shop for healthcare. Brought to you by the Minnesota Healthcare Consortium, this program promotes actual behavior change by members and incents them to shop for lower cost of care services. Members can shop online at bcbsmn.vitalssmartshopper.com/home or over the phone at 1-866-285-7452 with the Vitals Personal Assistant Team. Incentives are in the form of checks paid out directly to the member and coordinated by Vitals. Employees have the power to compare, save and get rewarded for choosing higher value services. Incentives are taxable; reporting will be provided to employers.

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. 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 your Blue Cross Account Manager.

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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 15, upon request from your employer, or upon plan design change or termination of coverage.

Out-of-pocket maximum requirements

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 \$6,750 (self only)/\$13,500 (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).

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.

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

	For 2018	For 2019	Change
HDHP minimum deductibles *Note: this is the lowest deductible	Self-only: \$1,350	Self-only: \$1,350*	Self-only: No change
amount for embedded deductible (no fourth quarter carryover)	Family: \$2,700	Family: \$2,700*	Family: No change
HDHP maximum out-of-pocket amounts (deductibles, copayments	Self-only: \$6,650	Self-only: \$6,750	Self-only: +\$100
and other amounts, but not premiums)	Family: \$13,300	Family: \$13,500	Family: +\$200
Out-of-pocket limits for ACA- compliant plans (set by HHS)	Self-only: \$7,350	Self-only: \$7,900*	Self-only: +\$550
Note: this is the highest amount for embedded deductible.	Family: \$14,700	Family: \$15,800	Family: +\$1,100
Out-of-pocket limits for HSA- qualified HDHPs (set by IRS)	Self-only: \$6,650	Self-only: \$6,750	Self-only: +\$100
	Family: \$13,300	Family: \$13,500	Family: +\$200
HSA contribution limit (employer + employee)	Self-only: \$3,450	Self-only: \$3,500	Self-only: +\$50
	Family: \$6,900	Family: \$7,000	Family: +\$100
HSA catch-up contributions (age 55 or older) *	\$1,000	\$1,000	No change**

^{*}Catch-up contributions can be made any time during the year in which the HSA participate turns 55.

^{**} Unlike other limits, the HSA catch-up contribution amount is not indexed, any increase would require statutory change.