

## Plan Overview: Frequently Asked Questions

Beginning on January 1, 2019 all medical plans will be offered through Blue Cross Blue Shield of Massachusetts. To learn more about these plans and upcoming changes, review the frequently asked questions below. While the plan options will remain the same, lower cost sharing, such as copayments and deductibles, are being added.

Overview of the HMO Plan	Overview of the High Deductible Health Plan (HDHP)
<p>The deductible and out-of-pocket maximum amounts are combined across both tiers, the MRPG Providers and the Blue Cross HMO Blue New England Network Providers.</p> <p><b>Deductible:</b> <b>In-Network:</b> \$1,000 per member / \$2,000 per family</p> <p><b>Out-of-Pocket Maximum:</b> <b>In-Network:</b> \$2,500 per member / \$5,000 per family</p> <p><b>Office Visits (PCP/Specialist) / Urgent Care Visits:</b> <b>Tier 1:</b> MRPG providers – No charge (deductible does not apply) <b>Tier 2:</b> Blue Cross HMO Blue New England Network providers</p> <ul style="list-style-type: none"> <li>• <b>\$25 copayment:</b> All Primary Care Providers (PCPs)</li> <li>• <b>\$35 copayment:</b> Specialists</li> </ul> <p>A PCP can be a family or general practitioner; internist; pediatrician; obstetricians and gynecologists; Licensed Mental Health Professionals; certified nurse midwives; and nurse practitioners who bill independently.</p> <p>If a provider is categorized as both a PCP and specialist, you will be responsible for the PCP Copayment.</p> <p>The deductible and out-of-pocket maximum amounts are remaining the same.</p>	<p><b>Deductible:</b> <b>Tier 1 and Tier 2:</b> MRPG and Blue Cross PPO providers \$1,500 per member / \$3,000 per family <b>Tier 3:</b> Out-of-Network \$3,000 per member / \$6,000 per family</p> <p>The amounts applied toward one in-network deductible and out-of-pocket maximum (Tiers 1 and 2) will also be applied toward the other in-network deductible(s). Any costs you pay toward in-network deductibles will not be applied toward the out-of-network benefits deductible.</p> <p><b>Out-of-Pocket Maximum:</b> <b>Tier 1 and Tier 2:</b> MRPG and Blue Cross PPO providers \$3,000 per member / \$6,000 per family <b>Tier 3:</b> Out-of-Network \$6,000 per member / \$12,000 per family</p> <p><b>Office Visits (PCP and specialist) / Urgent Care Visits:</b> <b>Tier 1:</b> MRPG providers – No charge after deductible <b>Tier 2:</b> Blue Cross PPO providers – 20% coinsurance, after deductible <b>Tier 3:</b> Out-of-Network: 40% coinsurance, after deductible</p> <p>A PCP can be a family or general practitioner; internist; pediatrician; obstetricians and gynecologists; Licensed Mental Health Professionals; certified nurse midwives; and nurse practitioners who bill independently.</p>

## What are the benefits of the tiered-network plans?

A tiered network plan allows you to pay a different cost-share based on the network of your provider.

Office visits (PCP/Specialist)/Urgent Care Visits in the Milford Regional Physician Group (MRPG) network:

- **HMO Blue New England:** No charge
- **High Deductible Health Plan (HDHP):** No charge, after the deductible is satisfied

## How do I determine my provider's tier?

- A custom Find a Doctor and Estimate Costs tool is available.
- Member Service support will be available in advance of the effective date to offer pre-enrollment support at **1-800-832-3871**

### HMO:

- **Tier 1** = MRPG providers
- **Tier 2** = Blue Cross HMO Blue New England Network providers

### HDHP Plan:

- **Tier 1** = MRPG providers
- **Tier 2** = Blue Cross PPO providers
- **Tier 3** = Out-of-Network providers

## Is my pharmacy coverage still through CVS Caremark?

Yes.

## What is a deductible?

A deductible is the amount you pay for certain health care services before your insurance begins picking up costs.

## What services are applied toward the deductible?

If you enroll in the HMO Plan, then services such as outpatient surgery, inpatient hospital admissions and high tech imaging and lab services accumulate towards your deductible. But, preventive care and pharmacy cost-share do not apply towards your deductible.

If you enroll in the HDHP Plan, then most services, including your pharmacy cost-share, will accumulate towards your deductible. Preventive care benefits will not apply towards your deductible, because there is no cost-share.

Log in to MyBlue at [bluecrossma.com/myblue](https://bluecrossma.com/myblue) to see what costs have been applied towards your deductible.

## What is coinsurance?

Coinsurance is your share of the costs of a covered service. For example, if the plan's allowed amount for an overnight hospital stay is \$1,000, your co-insurance payment of 20% would be \$200. This may change if you haven't met your deductible.

## When will I receive my new identification card?

If you enroll during open enrollment, you will receive your new ID card before the end of the year. Be sure to show your provider your new ID card after January 1, 2019.

## Will I need to pick a PCP?

If you enroll in the HMO plan and are a current HMO member, then your PCP will carry over to your coverage under Blue Cross Blue Shield of Massachusetts from Harvard Pilgrim Health Care. If you are not a current HMO member and are a new enrollee in the HMO plan, then you will need to pick a PCP with Blue Cross.

No PCPs are required if you enroll in the HDHP plan since this is a PPO plan.

## What is Telehealth?

Telehealth is a way to access care through a network of doctors and therapists using video visits. Additionally, video visits with your existing provider will be covered with telehealth if provided by him/her.

How it works:

- Download the Well Connection app or visit [wellconnection.com](https://wellconnection.com);
- Create an account and log in;
- Choose the type of service: medical or behavioral
- Pick an available provider

## Resources

How do I...	Resource/Contact
<b>Find the tier of a provider?</b>	<p>The Blue Cross Resource Website: <a href="https://accounts.bluecrossma.com/mrmc-mrpg">accounts.bluecrossma.com/mrmc-mrpg</a> includes resources to Find a Doctor.</p> <p>Blue Cross Member Service: <b>1-800-832-3871</b></p>
<b>Switch my PCP? (HMO only)</b>	<p>The Blue Cross Resource Website: <a href="https://accounts.bluecrossma.com/mrmc-mrpg">accounts.bluecrossma.com/mrmc-mrpg</a> includes resources to Find a Doctor.</p> <p>Once you have decided, you'll need to designate the provider who will now be your PCP. This can be done by calling Blue Cross Member Service at <b>1-800-832-3871</b>.</p> <p>You can also designate your new PCP using MyBlue.</p>
<b>Access detailed plan information?</b>	<p>Once enrolled, <b>MyBlue/MyBlue App</b> will offer secure access to detailed and specific plan information.</p>
<b>Compare plans?</b>	<p>The Blue Cross Resource Website: <a href="https://accounts.bluecrossma.com/mrmc-mrpg">accounts.bluecrossma.com/mrmc-mrpg</a> is available to provide resources, such as the Coverage Advisor tool.</p>

## Where can I learn more about my plan options and changes?

For more information, visit [accounts.bluecrossma.com/mrmc-mrpg](https://accounts.bluecrossma.com/mrmc-mrpg).

In addition, information can be found on the MRM/MPG's internal 2019 open enrollment website. You can also call Blue Cross Member Service at **1-800-832-3871**, or attend an upcoming information session.

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**).

