

2018 MEDICARE ADVANTAGE

Key Information for Providers

The Medicare Annual Enrollment (AEP) period has ended, and members had the opportunity to make changes to their Medicare Advantage and/or Stand-Alone Prescription Drug Plans. During the AEP, members could enroll, disenroll or change plans.

In 2018, Highmark is again offering a broad range of product options designed to fit each person's budget. Knowing the important role you play in the ongoing care of our Medicare Advantage members, we want to ensure that you have the information you need about the 2018 plans.

WHAT PROVIDERS NEED TO KNOW

GENERAL SUMMARY

2018 Medical:

- **ER:** \$80 copay, **Specialist** visit copays lower in most plans
- **SNF:** \$0 copay days 1-20, \$167.50 copay days 21-100
- **Medicare Part B Drugs:** 20% coinsurance for all drugs including chemo

2018 Supplemental:

- Enhanced routine dental cleaning/exam to every six months

2018 Rx:

- We've added new Rx formularies for direct pay members:
 - Performance, Choice and Venture
- We've expanded Medicare Preferred Value Network, including \$0 Tier 1.
- We are introducing a Step Therapy Program (piloting for first time with four drugs).
- We've updated prior authorization and quantity level limits, and refined the transition policy. (24 new prior authorization criteria sets added; the majority are added to ensure appropriate utilization of Specialty Tier medications. Quantity Level Limits further aligned to industry standards to promote adherence and safety.
- Formularies:
 - Maintained inclusion of adherence medications (i.e., Medicare STARS) on the lowest tier
 - Moved higher cost drugs to higher tiers (nearly half of those moved are narcotics)
 - Deleted drugs, primarily those with a new-to-market generic or multiple sources available; most of the single-source and generic deletions are narcotics
 - Added 24 new drugs to the formulary
- Launched a comprehensive effort in October/November 2017 to communicate thoroughly with impacted members and their prescribing physicians. If your patients are impacted by these changes, they received a letter, and your practice did, as well. We also posted information on NaviNet Plan Central and on the Provider Resource Center.



NEW IN 2018—TELEMEDICINE BENEFIT

We are piloting a telemedicine benefit in 2018 in western Pennsylvania. Coverage will be limited to PCP video visits for back pain, diarrhea, sinus problems, vaginal discharge/irritation, cough, eye irritation and urinary problems. An additional telemedicine benefit will be provided for post discharge medication reconciliation. Remote monitoring allows PCPs to ensure discharge medications reconcile with the medication list in the patient’s record.



SECURITY BLUE HMO

- Continued access to all hospitals in western Pennsylvania, including both UPMC and AHN
- In 2018, Security Blue HMO is again available in Potter County.

Security Blue HMO continues to offer robust supplemental benefits:

Routine Dental	New! One exam now every six months
Routine Vision	<ul style="list-style-type: none"> • \$0 copay for routine eye exam • Yearly eyewear allowance
Routine Hearing	<ul style="list-style-type: none"> • Routine hearing exam • Enhanced Hearing Aid - \$499 (Security Blue Deluxe only) - \$699 copay • Premium Hearing Aid - \$799 (Security Blue Deluxe only) - \$999 copay
Silver Sneakers Fitness Benefit	

FREEDOM BLUE PPO

- One of the largest networks of doctors and hospitals in the state, including UPMC and AHN.
- In-network access to BlueCard and member flexibility to use out-of-network providers.

Freedom Blue PPO continues to offer robust supplemental benefits:

Routine Dental	New! One exam now every six months
Routine Vision	<ul style="list-style-type: none"> • \$0 copay for routine eye exam • Yearly eyewear allowance
Routine Hearing	<ul style="list-style-type: none"> • Routine hearing exam • Enhanced Hearing Aid - \$699 copay • Premium Hearing Aid -- \$999 copay
Silver Sneakers Fitness Benefit	

COMMUNITY BLUE MEDICARE HMO

- We are maintaining our \$0 Community Blue Medicare HMO plans.
- Signature and Prestige plans will remain in 2018; no service area changes.
- One of the highest value plans in the region.
- Blair County providers, Community Blue Medicare HMO is not available because UPMC Altoona is not in the network.



Community Blue Medicare HMO Signature	2018
\$0 plan offers significant value	no deductible • \$0 copay for: PCP visits, Tier 1 prescriptions obtained at a Preferred Pharmacy and diagnostic lab work at freestanding labs
Inpatient Hospital	\$275/day 1-5
Routine Chiropractic	\$20 copay (4 visits)
Specialist Visit	\$40 copay
Routine Podiatry	\$40 copay (4 visits)
Diagnostic Lab	\$0 - \$25 copay
Ambulatory Surgery	\$275 copay
Outpatient Substance Abuse	\$45 copay
Routine Dental	\$30 copay for one cleaning every six months
Formulary	Choice (closed)
Vision	\$0 copay for routine eye exam and yearly eyewear allowance
Routine Hearing	Routine hearing exam; hearing aids: \$699-\$999 copay
Silver Sneakers Fitness Benefit	
Community Blue Medicare HMO Prestige	2018
Benefits/premiums remain stable for 2018.	no referrals, no deductibles
PCP Copay	\$0
Specialist Copay	\$10
Inpatient Hospital	\$100 copay per stay
Diagnostic Lab	\$0 copay at freestanding labs
Ambulatory Surgery	\$50 copay
Routine Dental	One cleaning/exam every six months Comprehensive dental coverage
Formulary	Venture (closed); Preferred Pharmacy Network
Vision	\$0 copay for routine eye exam and yearly eyewear allowance
Routine Hearing	Routine hearing exam; hearing aids: \$499-\$799 copay
Silver Sneakers Fitness Benefit	

COMMUNITY BLUE MEDICARE PPO

- Broad network of providers with some exclusions (UPMC).
- More member freedom to travel with in-network cost-sharing by using the BlueCard® network of doctors and hospitals or flexibility to use out-of-network providers.
- Benefit design and cost-sharing are similar to the Community Blue Medicare HMO.



BLUE CARE ADVANTAGE (VBID) PILOT CONTINUES

On Jan. 1, 2017, Highmark introduced Blue Care Advantage, a Medicare Advantage Value-Based Insurance Design (VBID) pilot program that was approved by the Centers for Medicare and Medicaid Services (CMS) in Allegheny, Armstrong, Beaver, Butler, Cambria, Fayette, Greene, Indiana, Lawrence, Washington and Westmoreland counties. Blue Care Advantage promotes better health to Security Blue HMO ValueRx members living with diabetes and/or COPD.

We are continuing the pilot in 2018. In November, physician practices were notified of whether they remain in the program, were added to the program or removed from the program. Those physicians in the program have lower copays associated with their visits, as further incentive for members to receive the care they need. For complete details, see the [Blue Care Advantage summary](#).

NaviNet is a registered trademark of NaviNet, Inc., a separate company that provides a secure, web-based portal between providers and health care insurance plans.

Silver Sneakers is a registered trademark of Healthways, Inc., a separate company that provides an exercise and physical activity program designed exclusively for Medicare-eligible health plan members.

BlueCard is a registered trademark of the Blue Cross and Blue Shield Association, an association of independent healthplans.