SPECIAL eBULLETIN

FOR PROFESSIONAL AND FACILITY

JANUARY 3, 2019

ACA 2019: SUMMARY INFORMATION FOR DELAWARE PROVIDERS

Beginning Jan. 1, 2019, you will start to see patients with new or changed Affordable Care Act (ACA) plans. Here are some key highlights of Highmark ACA plans in the Delaware market for providers.

2019 Key Updates for Affordable Care Act (ACA) Plans in the Delaware Market

- All members will renew in a broad EPO product.
- The formulary will change from Progressive to Essential.
- New and improved plan offerings will be available.
- Highmark Delaware remains the only carrier to offer ACA coverage in Delaware.
- BlueCard will still be in-network.

New Descriptive Plan Names

Below is a side-by-side comparison of plan names from 2018 to 2019.

2018	2019
Major Events Blue EPO 7350	Major Events Blue EPO 7900
Shared Cost Blue EPO 6950	Shared Cost Blue EPO Bronze 4000
Health Savings Embedded Blue 6550 Health Savings Embedded Blue EPO 3500	Health Savings Embedded Blue EPO Silver 4450 HSA (ON) Health Savings Embedded Blue EPO Silver 2750 HSA (OFF)
Shared Cost Blue EPO 7150 Shared Cost Blue EPO 3500	Shared Cost Blue EPO Silver 2400 - 2 Free PCP Visits (ON) Shared Cost Blue EPO Silver 3500 (OFF)
Shared Cost Blue EPO 1400	Shared Cost Blue EPO Gold 1000 - 2 Free PCP Visits



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Benefit Provision Changes

- For 2019, we are offering a new plan Silver 0 with a \$0 deductible.
- We are also reintroducing a Platinum plan Shared Cost Blue EPO Platinum 200 and adding an off-exchange only Health Savings plan for members interested in a mid-level plan that can be paired with an HSA.
- Certain plans will offer each member two "free" PCP visits, two "free" mental health visits, and two "free" substance abuse visits with no deductible, copay, or coinsurance.
- Physical and Occupational Therapies limits are combined and provide for 30 rehabilitative visits and 30 habilitative visits.
- Speech therapy will have 30 rehabilitative visits and 30 habilitative visits.
- Formulary change to the Essential Formulary.

2019 Delaware ACA ID Cards

Below are sample member ID cards for ACA members.

		BC/BS plan. Members: File claims to Medical Claims	(United Concordia)* Vision	1-800-223-479
		P.O. Box 6831 Winnigton, DE 19899 Dental Claims P.O. Box 69444 Harrisburg PA 17106	(Davis Vision)* Nurse Line Call for Precentification: Mental Health Substance Abuse	1-888-BLUE-429 1-800-258-9800 1-800-258-9800 1-800-452-8500
IND DED FAM DED PCP Visit Specialist Visit Emergency Room	\$X0000 \$X0000X \$X015 \$X015 \$X015 \$X005	Visien Claims P.O. Box 1525 Latham, NY 12110 Member only has benefits for care received from network providers except for emergent care.	Conter Admissioner of plan. Highmark Blue Censo Blue Sheld Delaware is an Independent Ucense of the Blue Cross and Blue Sheld Association.	
-	FAM DED PCP Visit Specialist Visit	FAM DED \$X0000X PCP Visit \$X00% Specialist Visit \$X00%	ND DED SXXXX AM DED SXXXXX PCP Visit SXXX Epicialist Visit SXXX Emergency Room SXXXX6 Emergency Room SXXXX6	ND DED SXXXXX AM DED SXXXXX PCP Visit SXXXX Emergency Room SXXXX6 Immediate SXXXXX6 Immediate SXXXX6 Immediate SXXXX6 Immediate SXX

Changes have been made to the ACA ID cards for 2019. The enhancements for 2019 are mostly with the member cost sharing section on the front of the card explaining what a member is responsible for paying and include:

- Individual and Family deductible dollar amounts.
- If the service does not have a copay, coinsurance amounts will be displayed on the card.
- For health savings plans, all specific cost sharing is removed and replaced with "Deductible/Cost Sharing may apply."
- Addition of the in-network deductible to the ID cards in the cost share section.

Finding Network Information

Professional providers can view network information for their patients in real time within the Provider File Management tool in NaviNet. Instructions are available in the Provider Resource Center under Provider **Training > NaviNet Self Service Guides > Confirming Networks in NaviNet.**

Members can find providers who participate in their plans' networks via the online provider directory available at <u>highmarkbcbsde.com</u> by clicking **Find a Doctor or Rx** and selecting the name of their plans. For members who log into **highmarkbcbsde.com**, the directory will automatically populate their Plan name/network.

For 2019, we look forward to another successful year of working with you to connect our members to quality care to meet their health care needs.