

# Greenwich Central School District

Alternate PPO and HRA Plans



# AGENDA

1. Review of Current PPO
2. Alternate PPO Differences
3. HRA High Deductible Plan
4. Questions



# PPO Plan

# PPO Plan

## Definition/Structure of PPO Plan:

- PPO – Preferred Provider Organization
- Network of healthcare providers (in-network)
- Freedom of choice (out-of-network)
- No referrals required
- Minimal out-of-pocket costs in-network
- No claim forms in-network
- Deductible and coinsurance out-of-network



# Empire's PPO Network

**BlueCross has a Local, National, and Worldwide provider network (No other network is more extensive than the PPO BlueCard)**

- The PPO network is available wherever you live or travel in the United States
- The BlueCard PPO/EPO Network is the largest national network in the United States, with over 784,000 provider office sites and more than 5,800 hospitals. Empire members have access to 95% of hospitals and 84% of physicians nationwide.
- 97% of U.S. News & World Report's "Best Hospitals" and more doctors rated "best" by New York magazine.
- Using Empire's website, [www.empireblue.com](http://www.empireblue.com), and by selecting the option: "Find a Doctor" will bring you to a page which allows you to search for providers either locally in New York or nationally.

# Pre-Certification Requirements

(Does not apply for Medicare Primary members)

- **Why is pre-certification needed?**

To ensure quality care for the right length of time, in the right setting, with maximum coverage

- **How do I pre-certify?**

Refer to the details included in your enclosed Welcome Letter

- **What information is needed?**

Basic information about the patient, your ID number, name and address of facility, name and telephone number of admitting doctor and reason for admission/services



# Pre-Certification Requirements

( Does not apply to Medicare primary members)

- All Inpatient Admissions (Emergency within 24 hours)
- Maternity Care
- Skilled Nursing Facilities
- Ambulatory Surgery (For certain procedures only - cosmetic, eye and nasal related procedures etc.)
- Spinal implants and obesity surgeries
- Physical, Occupational, & Speech Therapies
- Outpatient mental health/Substance abuse

The following services are the providers responsibility:

- DME, Orthotics, Prothetics
- MRI/MRA services
- Chiropractic Care
- PET/Cat Scans

See benefit summary or enrollment kit for complete list of required services.

# Existing PPO Plan Benefits

## In-Network

- 100% Hospital
- Emergency Room \$35 copay
- \$10 Copay for doctors
- 100% for Preventative Services
- Rx \$5/\$10/\$25 - only 2 copays required for 90-day supply through mail
- Local PPO/National Bluecard PPO
- No Lifetime Maximum

## Out of Network

- \$200/\$500 Deductible
- 80/20% Coinsurance
- \$1,200/\$3,000 Out of Pocket Maximum
- 80<sup>th</sup> percentile out of network reimbursement
- Balance Billing up to Charges



# Alternate and HRA PPO Plans Modeled after Current PPO

- **Same** Provider network for all services
- **Same** Medical Policy
- **Same** Precertification requirements
- **Same** paid in full preventative care benefits
- **Same** Health and Wellness Programs
- **Same** Vision benefits
- **Same** Prescription Drug formulary
- Freedom of **Choice** (Out of Network Benefits)
- No Referrals **Required**

# Alternate PPO Plan Benefits

## In-Network

- 100% Hospital
- Emergency Room \$200 copay
- Urgent Care \$50 copay
- \$30/\$50 Copay for doctors
- 100% for Preventative Services
- Rx \$10/\$25/\$50 - only 2 copays required for 90-day supply through mail
- Local PPO/National Bluecard PPO
- No Lifetime Maximum

## Out of Network

- \$200/\$500 Deductible
- 80/20% Coinsurance
- \$1,200/\$3,000 Out of Pocket Maximum
- 80<sup>th</sup> percentile out of network reimbursement
- Balance Billing up to Charges



# ALTERNATE PPO

The Alternate PPO does have these differences compared to the current PPO:

Alternate PPO Co-Pay Differences		
Type of Service	PPO	Alternate
<b>Office Visits</b>		
<b>Primary Care</b>	\$10	\$30
<b>Specialists</b>	\$10	\$50
<b>Primary:</b>	PCP, OB/GYN, midwife, chiropractor, and in-Office: PT, OT, Speech and Vision therapists	
<b>Specialists:</b>	All, including services in outpatient facility for PT, OT, and other speech, language, vision and cardiac therapy	



# ALTERNATE PPO

Alternate PPO Co-Pay Differences

Type of Service	PPO	Alternate
Urgent Care	\$10	\$50
Emergency Room* *Co-pay waived if admitted	\$35	\$200
Prescription Drug (Three Tier) <ul style="list-style-type: none"> <li>• Generic</li> <li>• Brand on Formulary</li> <li>• Brand not on formulary</li> </ul>	\$5  \$10  \$25	\$10  \$25  \$50
Home delivery drugs (mail order)	2 co-pays for 90 day supply	Same

# BlueView Vision Benefit

- Routine vision exam once every 24 months
- \$5 copay for in-network providers
- \$10 copay for Lenses
- \$115 allowance for frames then 20% off balance
- \$30 exam reimbursement for out of network providers
- Up to \$64 frame reimbursement for out of network providers
  
- Plan Features
- Diverse network of participating providers through the Blue View Vision network of providers.
- Participating providers can be found by going to [www.empireblue.com](http://www.empireblue.com). Select Find a Doctor and select **BlueView Vision Insight network**.





# HRA High Deductible PPO



# High Deductible PPO Plan w/HRA

## HRA – Health Reimbursement Account

- Network of healthcare providers (in-network)
- Freedom of choice (out-of-network)
- No referrals required
- No claim forms in-network
- No lifetime maximum
- Deductible and Coinsurance maximum shared between In Network and Out of Network
- Lower out-of-pocket costs in-network – deductible and 10% coinsurance after deductible is satisfied
- Higher out-of-pocket costs out of network- deductible and 30% coinsurance after deductible is satisfied
- Employer sponsored Health Reimbursement Account to be used to offset deductible

# HRA PPO Plan Benefits

## In-Network

- \$1,500/\$3,000 deductible
- \$1,000/\$2,000 Employer contribution toward deductible
- 10% Coinsurance after deductible (except RX Drugs)
- \$10/\$20/\$40 RX Drugs after deductible
- \$2,425/\$4,850 Out of pocket maximum (after employer contribution)
- 100% for Preventative Services
- Local PPO/National Bluecard PPO

## Out of Network

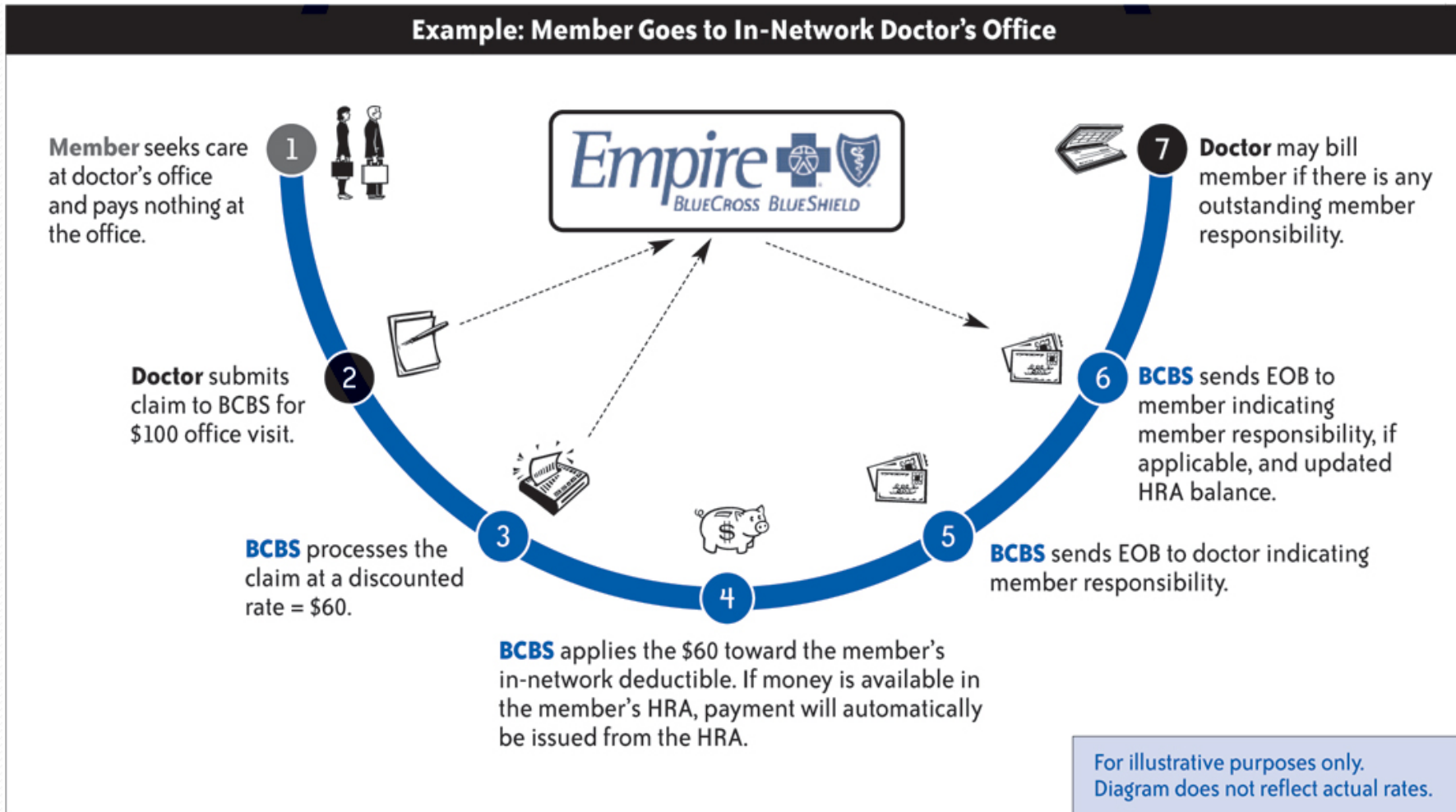
- \$1,500/\$3,000 Deductible
- 30% Coinsurance
- \$6,500/\$13,000 Out of Pocket Maximum
- 70<sup>th</sup> percentile out of network reimbursement
- Balance Billing up to Charges

# HRA Plan Design

HRA Provisions	In-Network	Out-of-Network
Employer Contribution	Single: \$1,000; Family: \$2,000 <b>(Carryover 2X)</b>	
Annual Aggregate Deductible (Individual/Family)	<b>\$1,500/\$3,000</b> <b>Net deductible after contribution \$500/\$1,000</b> <b>One person in family can meet whole deductible</b>	
Coinsurance	<b>Ind. 10% to max. \$1,925</b> (\$19,250 in covered services) <b>Family 10% to max. \$3,850</b> (\$38,500 in covered services)	<b>30%</b>
Annual Out-of-Pocket Maximum including deductible (Individual/Family)	<b>\$3,425/\$6,850</b>	<b>\$7,500/\$15,000</b>
<b>Annual Out-of- Pocket Maximum after Employer Contribution</b>	<b>\$2,425/\$4,850</b>	<b>\$6,500/\$13,000</b>
Prescriptions	<b>After deductible met:</b> <b>Retail:\$10/\$20/\$40</b> <b>Mail:\$20/\$40/\$80</b> <b>Copays count toward out of pocket maximum</b>	<b>Not Covered</b>

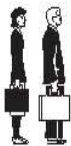


# How Does HRA PPO Work?



# How Does HRA PPO Work With Pharmacy?

## Example: Member Goes to In-Network Pharmacy



1

**Member** brings prescription to retail pharmacy.



2

**Pharmacy** fills the prescription and processes claim at the point of service (e.g., retail price for drug = \$62; discount price = \$36).



3

**Member** owes \$36. If money is available in members HRA, payment will automatically be issued from the HRA and sent to the pharmacy.



4

\$36 is applied toward member's annual in-network deductible.\*

For illustrative purposes only.  
Diagram does not reflect actual rates.

# HRA PPO HAS A Gym Membership

- Reimbursement for qualified health fitness center memberships
- Maximum of \$400 per year
- May join any qualified fitness club or exercise center
- Fees paid for attending classes at qualified center are eligible
- Reimbursements may be considered income (taxable)





[www.empireblue.com](http://www.empireblue.com)

## **Empire Member Online Services**

- Find a Doctor or facility
- View coverage and benefit information
- Review current and past claims history
- Request new ID cards
- Print a temporary ID card
- Check dependent eligibility information
- Ask questions about your benefits
- Receive secure messages about drug alerts and tips based on your interests



# TOOLS & RESOURCES

MyHealth@ Empire, such as:

- MyHealth Assessment
- MyHealth Record
- Anthem Care Comparison
- SpecialOffers@Empire®



**QUESTIONS?**





**Thank You!**