2021 Individual Medicare Advantage &

Medicare
Supplement Training



Instructions



This training includes narration.

Please ensure that your sound is turned on.



This training should take you approximately

30 minutes to complete.

Plan Offerings: Fitting Member Needs



To help beneficiaries pick the right plan to fit their needs, we categorize our Medicare Advantage plans into three easy-to-understand levels that we call **Light**, **Balanced**, and **Extended** options.

LIGHT	BALANCED	EXTENDED
Members pay less every month, but out-of- pocket costs when they get care may be higher than if enrolled in other plan options.	These plans provide a balance between cost and coverage.	Monthly premiums will be higher but out- of-pocket costs for utilized services may be less than if enrolled in other plan options.
PPO	HMO-POS	НМО
Blue Essential	NEW BCN Advantage Prime Value	BCN Advantage ConnectedCare
Blue Vitality	NEW BCN Advantage Community Value	
Blue Signature	BCN Advantage Elements (MA-Only)	
Blue Assure	BCN Advantage Classic	
	BCN Advantage Prestige	

We are launching two new plans this year — attractive \$0 BCN Advantage Prime Value and our differentiated \$20 BCN Advantage Community Value; we have also made significant investments across the board, in particular to Blue Essential and Prime Value

BlueCard®* Travels with Members Outside of Michigan

- With our MA PPO plans or HMO-POS plans, members can access a nationwide network of Blue Cross Blue Shield doctors and hospitals that accept Medicare, often at in-network rates for emergency, urgent care and some routine care.*
- <For BCN Advantage Prime Value HMO-POS, out of state PCP cost share and deductibles now align with in-network levels when obtaining services from a Blue Card provider and no prior authorizations are required for routine services.>
- Medical emergencies and urgently needed care are always covered when members travel, no matter what plan they're enrolled in. Follow-up care to emergent / urgent situations covered anywhere in the U.S.**
- Emergency and urgent care are covered worldwide. <NEW for 2021, members will now have Emergency worldwide transportation.> Members can access international travel benefits through the Blue Cross Blue Shield Global Core program with a combined \$50,000 lifetime limit.
- <We have also applied point of service benefits to the medical MOOP for all HMO-POS plans in 2021, allowing members greater flexibility.>
- To find providers outside of the U.S. that participate with Blue Cross go to <u>www.bcbsglobalcore.com</u>



^{*}BlueCard is not part of the provider-specific HMO plan benefits

^{**}Preauthorization required for HMO-POS members

Snowbird Member Experience

The MA Snowbird advice line provides exclusive, personalized Care Management services for members traveling to Arizona and Florida for short or extended stays. The advice line is in addition to members' nationwide travel coverage, and helps:

- Coordinate care with health care providers
- Answer questions regarding medications and treatment options
- Offer continued-care support for members with chronic conditions
- Connect members to community support and services
- Assist in managing medical equipment and diabetic supplies in Florida and Arizona
- Transition wound care, occupational or physical therapy needs

MA dedicated Customer Service can help with Snowbird inquiries:

- Finding in network providers in Arizona and Florida
- Confirming and explaining coverage
- Changing address for the delivery of mail-order prescriptions





Blue Cross Mobile App

- Members connect securely to health plan information on their bcbsm.com account when they need it.
- With the mobile app, members can access:
 - Blue Cross ID Card
 - View deductibles, check claims, EOB statements, etc....
 - Search for services covered by their plan
 - Research drug prices, look up coverage gap, etc....
 - Find doctors, hospitals, pharmacies
 - Compare procedure costs
- Download the Blue Cross Mobile App from the App Store[®] and Google PlayTM
- Blue Cross is also the first health plan in Michigan to deliver interactive health and wellness information on Amazon's popular Alexa platform

Dental, Vision, and Hearing Benefits

- <Robust supplemental vision, hearing, and dental benefits are now included in all plans
 - All PPO plans, including Blue Essential, offer preventive dental services, hearing exam and hearing aids, and benefits for contacts and glasses (with improved allowances)
 - HMO-POS plans offer preventive dental services, new hearing aid allowance per ear every 3 years (\$600 \$750 across plans), and a vision allowance for all plans except Elements every 12 months (\$100 \$150 across plans)
 - Our HMO plan offers preventive dental services and routine vision exams and eyewear>
- <In addition, market-leading optional supplemental buy-up packages with additional dental, vision and hearing benefits are offered with all MAPD plans (except Community Value, which already has very rich supplemental benefits included)>



Blue Cross Online Visits

Members may choose to see a primary care physician via online visits, which:

- <are covered at \$0 copay for medical and behavioral telehealth services>
- provide 24/7 access to U.S. board-certified medical doctors trained in telemedicine to treat nonemergency illnesses
- allow members to see their existing primary care doctor if they offer telehealth services
- provide advice and treatment for minor health concerns

How can members access this benefit?

- Download the Blue Cross Online VisitsSM app from the App Store[®] and Google PlayTM
- Visit <u>bcbsmonlinevisits.com</u>
- Call 1-844-606-1608





SilverSneakers®

- SilverSneakers included at no additional cost for all Medicare Plus Blue PPO and BCN Advantage HMO and HMO-POS members
- Access to fitness classes, exercise equipment, pool,
 sauna and other available amenities* at over 16,000
 participating locations nationwide
 - Classes for all fitness levels
 - Support from trained instructors
 - Walking programs, home fitness programs, ondemand workout videos plus health and nutrition tips
- Online classes and potential at-home kit available, in light of the COVID-19 pandemic
- Earn fitness rewards with CollegeSave tuition discount program for qualified college bound students
- Access SilverSneakers® gyms whenever they want (other programs restrict members to a single gym)
- Visit www.SilverSneakers.com

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OTC Benefit

- OTC allowance now included in all plans
 - Increased OTC allowance on many PPO plans (\$25 \$50 per quarter across plans)
 - Added OTC allowance to all HMO-POS¹ and HMO plans (\$25 - \$100 per quarter across plans)
- New, enhanced vendor platform with improved:
 - Shopping experience (adds retail as an option in addition to online and by phone, with a richer digital shopping experience and a variety of popular in-store retail options)
 - Overall functionality (allows members to pay for any amount above the allowance)
- Members may also use the benefit allowance to purchase groceries, in addition to OTC items, if they meet certain eligibility criteria²



1. BCN Advantage Prime Value HMO-POS Region 3 does not have an OTC benefit. 2. The grocery / food benefit will be available to plan-identified members with a history of any of the following chronic conditions: diabetes, COPD, CHF, stroke, hypertension, CAD, and/or rheumatoid arthritis. The benefit will also be available to members who have been exposed or are at risk of exposure to COVID and/or respiratory illness.

Innovative Programs to Address Social Determinants of Health



These programs are filed benefits that are offered to members who meet specific eligibility restrictions

Expanding OTC Allowance to Cover Groceries / Pantry Items



- <Offering a multi-benefit platform including OTC for all members and food for members with a chronic disease and / or who may be at risk for a respiratory infection (pending CMS approval)>
- <Scope: \$25 \$100 per quarter allowance across plans¹ (members can pay for any amount above their allowance if they want to purchase added items)>

Support for Caregivers of Enrollees: Training and Coaching

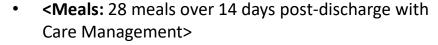
- New-to-market benefit that provides support for members, families and communities with digital based coaching, education, and support for caregivers
- SENIORLINK Proven outcomes include decrease in ER visits and decrease in hospitalization
 - <Scope: Coaching for members in Prime Value or Essential identified by Care Managers³>

In-Home Support Services



- Emerging competitive benefit centered on support for our members, including online wellness check-ins, shopping support, transportation, light housekeeping, companionship and more
- <Scope: 4 hours / month for eligible members in BCNA Community Value; 8 hours / month for eligible members in BCNA Prime Value and Blue Essential²>

Meals and Transportation





<Transportation: Unlimited trips and miles for up to 28 day post-discharge with Care Management, available in select counties>

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Topic 1:
BCBSM
Medicare
Plus Blue PPO



BCBSM Medicare Plus Blue PPO Overview



We are offering new and enhanced benefits across our PPO plans in 2021, in particular for Essential, to offer our members the utmost value

PPO

Blue Essential

Blue Vitality

Blue Signature

Blue Assure

Light

Balanced

Extended

One of the largest
Medicare Advantage PPO
networks in the nation!

Plan Advantages

- Members can choose any doctor, specialist, or hospital in or out of network without referrals
- <\$0 and low-cost premiums >
- Routine physical and preventive care at no cost
- SilverSneakers at no additional cost
- Blue Card benefits that travel at innetwork cost share nationwide
- Available to residents in all MI counties

<All PPO Plans Include:>

- Vision: Benefits for contacts and glasses
- Hearing: Exam and hearing aids
- Dental: Preventive dental exam

<Significant investments in Blue Essential>

- Available for a \$0 premium in most counties
- Significant benefit improvements, for example:
 - Removing the OON deductible
 - Removing the in-network PCP copay
 - Shifting to a \$6,000 combined MOOP
 - \$0 Tier 1, 2, and 6 pharmacy deductible
- Supplemental vision, hearing, and dental benefits included in the plan
- \$50 / quarter OTC / grocery allowance, plus in-home support services and caregiver support

BCBSM Medicare Plus Blue PPO Service Area

Coverage in all 83 Michigan counties





Additional Detail: 2021 Medicare Plus Blue PPO Benefit Enhancements (not exhaustive)

Premiums:

- <\$0 Premium now available in most regions for Blue Essential>

Medical benefits:

- <\$0 Medical deductible (All Plans)>
- <\$0 PCP copay (All Plans)>
- <\$0 Online visit copay for medical and behavioral health (All Plans)>
- <Reduced MOOP on Blue Essential and Assure>

Pharmacy benefits:

- <\$0 Tiers 1 / 2 / 6 copays for 90-day mail order / preferred pharmacy (All Plans)>
- <For Essential, removed Tier 2 deductible and reduced Tiers 3-5 deductible to \$100>

Supplemental benefits

- <Added preventive dental, vision and hearing benefits to Blue Essential, and enhanced vision benefits for all other PPO plans>
- <Increased OTC allowance on many PPO plans and new, enhanced vendor platform (\$25 - \$50 per quarter allowance across plans)>
- <New Meals benefit (all plans) and Transportation benefit (all plans in select counties) for eligible members>
- <New In-Home Support Services and Caregiver Support for eligible members in Blue Essential>

BCBSM Medicare Plus Blue PPO Supplemental Benefits



Robust supplemental benefits now included for all PPO plans:

Embedded Supplemental Benefits

Included in All Plans

- Preventive Dental
- <\$750 hearing aid allowance per ear every 3 years>
- <\$100 vision allowance in-network and 50% coinsurance for out-of-network every 12 months>
- <\$25 OTC allowance per quarter, except for Blue Essential which has a \$50 OTC allowance per quarter>



Add optional supplemental buy-up to the PPO base for additional benefits:

Package 1: <\$21.40> a month

Offered with All Plans

- No waiting period
- <No dental deductible>
- <\$2,500 dental allowance (combined in and out-of-network)>
- <One fluoride treatment per year>
- <Added additional coverage for crowns and bridges>
- <\$250 vision allowance in-network and 50% coinsurance out-of-network every 12 months>

Topic 2: BCN Advantage HMO-POS & **HMO**



BCN Advantage HMO-POS Overview



HMO-POS

NEW BCN Advantage Prime Value

NEW BCN Advantage Community Value

BCN Advantage Elements (MA-Only)

BCN Advantage Classic

BCN Advantage Prestige

Light

Balanced

Extended



Plan Advantages

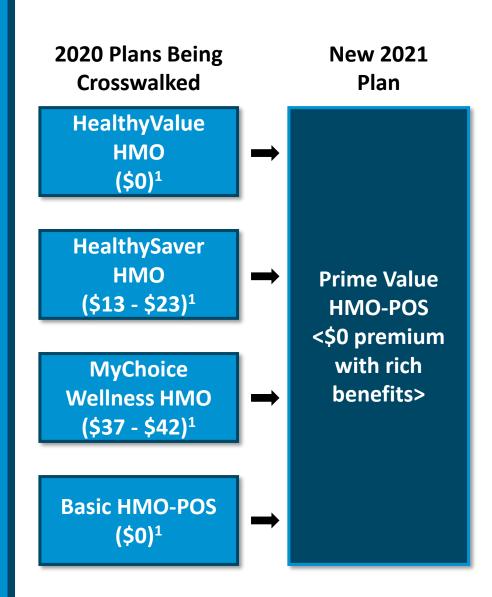
- <\$0 Prime Value available with rich benefits>
- <Launching new \$20 HMO-POS, BCN Advantage Community Value, in seven counties with a high performance network to offer more coverage at an affordable price>
- All plans except Elements include drug coverage
- <No limits for pre-authorized POS routine / follow-up care>
- <Preventive dental exam, routine vision exam, and hearing aid allowance>
- <New, innovative programs to address social determinants of health>
- SilverSneakers included at no additional cost
- All emergency and urgent care covered at innetwork cost share

Point of Service (POS)

- <POS benefit now counts towards maximum out-of-pocket>
- Blue Card benefits that travel at in-network cost share nationwide
- Allows members to obtain preauthorized routine / follow-up care when traveling outside of MI
- <New for 2021 Prime Value:
 - Out-of-state PCP cost shares and deductibles align with innetwork levels for services from a Blue Card provider
 - No prior auths needed for routine services out of state>

New \$0 Prime Value Plan and MAPD Crosswalk

- We are crosswalking four 2020 HMO / HMO-POS plans into a single, \$0
 HMO-POS plan with rich benefits (Prime Value)
- Prime Value will offer significant premium and / or benefit enhancements relative to members' 2020 plans, including:
 - <Rich benefits (e.g., \$0 premium, \$0 PCP copay in and out of network, and \$0 medical deductible in many counties ²) >
 - <Increased network flexibility for a subset of 2020 plans given the transition from an HMO to an HMO-POS>
 - <Coverage that travels with members, as out-of-state PCP cost shares and deductibles align with in-network levels for services from a Blue Card provider and no prior auths are needed for routine services>
- 2020 enrollees being consolidated into Prime Value will:
 - Be automatically enrolled in the new plan (including OSB, if applicable)
 - Be informed via ANOC; no action is required
 - Retain the same Agent of Record (AOR)





High-Performance Provider Network

- Access to high quality providers in SE MI, with over 880 PCPs in network including IHA, Oakwood Ambulatory, and Genesys PHO, in addition to our strong BCN facility network
- Same robust Specialist network as our other BCN Advantage HMO-POS plans

New \$20 Premium HMO-POS Plan: BCN Advantage Community Value

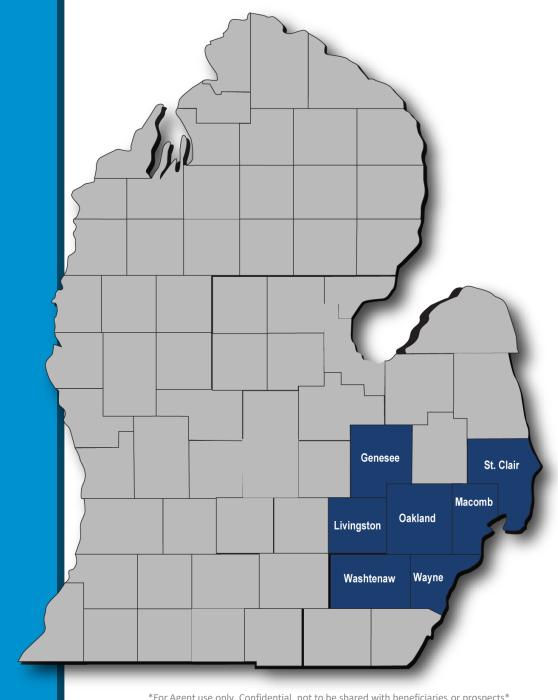
- We are excited to offer a new HMO-POS plan in 7 counties for 2021, for members who are looking for an affordable plan option with more coverage than one of our \$0 plans
- This plan contains market-leading benefits supported by a high performance network at an affordable price:
 - <Rich, attractive medical and pharmacy benefits, including a \$0 INN medical deductible and \$0 pharmacy deductible>
 - <Innovative supplemental benefits, including OTC allowance of \$100 / quarter¹>
 - <Refined formulary>
 - <Provider network built around high quality local PCPs>

^{1.} The grocery / food benefit will be available to plan-identified members with a history of any of the following chronic conditions: diabetes, COPD, CHF, stroke, hypertension, CAD, and/or rheumatoid arthritis. The benefit will also be available to members who have been exposed or are at risk of exposure to COVID and/or respiratory illness.

BCN Advantage Community Value HMO-POS Service Area

Coverage in 7 Michigan counties, all highlighted in blue on the map

Region 4: Genesee, Livingston, St. Clair Region 5: Macomb, Oakland, Washtenaw, Wayne



BCN Advantage Prime Value, Elements, Classic, Prestige HMO-POS Service Area

Coverage in 70 Michigan counties, all highlighted in blue on the map



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2021 BCN Advantage HMO-POS Benefit Enhancements

Medical benefits:

- <\$0 in-network copay for PCP office visits (All Plans)>
- <\$0 copay for online visits (All Plans)>
- <No Medical Deductible on Prime Value in most counties>
- <POS benefit now counts towards MOOP (All Plans)>

Pharmacy benefits:

- <Enhanced pharmacy benefits for all plans with \$0 Tier 1 / 2 / 6 copays for 90-day mail order / preferred pharmacy>
- <For Prime Value, \$0 pharmacy deductible for Tiers 1, 2, and 6>

Supplemental benefits:

- <New Hearing Aid allowance per ear every 3 years (\$600 \$750 across all plans)>
- <Vision allowance now offered every 12 months (\$100 \$150 across all plans except Elements)>
- <OTC allowance added to all plans with a new, enhanced vendor platform (\$25 \$100 per quarter across all plans)>
- <New Meals (all plans) and Transportation (all plans in select counties) for eligible members>
- <New In-Home Support Services for eligible Prime Value and Community Value members>
- <New Caregiver Support benefit for Prime Value>



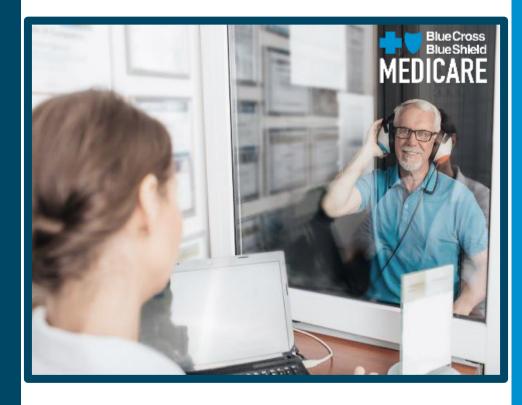
BCN Advantage HMO-POS Optional Supplemental Buy-up Packages



Add one of the below optional supplemental buy-ups to the HMO-POS base plan for additional benefits. Does not apply to new Community Value plan, which already has very rich supplemental benefits included

Package 1: \$<20.40> a Month

- No deductible>
- No waiting period
- <\$1,500 dental allowance>
- <Added additional coverage for Crowns>
- <\$200 vision allowance every12 months>



Package 2: \$<32.40> a Month \$<37.40> a Month for Elements

- <No deductible>
- No waiting period
- <\$2,500 dental allowance>
- <Added additional coverage for Crowns and Bridges>
- <Dentures are covered>
- <\$300 vision allowance every12 months>

BCN Advantage HMO Overview



HMO

BCN Advantage ConnectedCare

Light

Balanced

Extended



Members select a primary care physician in a value based provider specific network

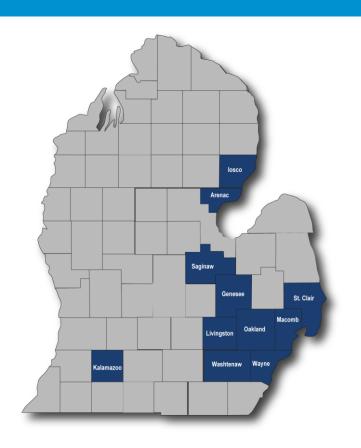
- All emergency and urgent care covered at in-network cost share
- Worldwide emergency and urgent care
- <Worldwide emergency transportation benefit>
- <Available to residents in 11 Michigan counties>

Plan Advantages

- No referrals required for in-network specialist
- <\$0 PCP copay>
- <\$0 medical deductible>
- <Low out-of-pocket max (\$3,800)>
- <Part D drug coverage, with \$0 pharmacy deductible>
- SilverSneakers included at no additional cost
- <Routine vision exam and eyewear>
- Preventive dental benefit
- <NEW \$25 allowance per quarter for OTC (all members) and food (eligible members)>
- <NEW limited meals and transportation benefits>

BCN Advantage ConnectedCare Service Areas and Provider Network





BCN Advantage ConnectedCare

Designed by Blue Care Network and Ascension Health Michigan and Trinity Health hospitals

Provider network: <19 hospitals, more than 10,000 providers*>

Ascension Borgess-Lee Hospital

Ascension Borgess Hospital

Ascension Borgess-Pipp Hospital

Ascension Crittenton Hospital

Ascension Genesys Hospital

Ascension Macomb-Oakland Hospital

Ascension Providence Hospital

Ascension Providence Hospital, Novi Campus

Ascension River District Hospital

Ascension St. John Hospital

Ascension St. Joseph Hospital

Ascension St. Mary's Hospital

Ascension Standish Hospital

Lake Huron Medical Center

St. Joseph Mercy Chelsea

St. Joseph Mercy Hospital Ann Arbor

St. Joseph Mercy Hospital Livingston

St. Joseph Mercy Oakland

St. Mary Mercy Hospital Livonia

For the full BCN Advantage network, please visit http://www.bcbsm.com/medicare/find-a-doctor *Source: BCN Advantage Provider and Facility Counts <September 2018>

BCN Advantage HMO Optional Supplemental Buy-up Packages



Add one of the below optional supplemental buy-ups to the HMO base plan for additional benefits:

Package 1: \$<13.50> a month

- <No deductible>
- No waiting period
- <\$1,500 dental allowance>
- <Added additional coverage for crowns>
- <\$200 vision allowance every 12 months>
- <\$600 Hearing aid allowance per ear every 3 years>



Package 2: \$<35.50> a month

- <No deductible>
- No waiting period
- <\$2,500 dental allowance>
- <Added additional coverage for crowns and bridges>
- <Dentures are covered>
- <\$300 vision allowance every 12 months>
- <\$1,250 Hearing aid allowance per ear every 3 years>

Part D Senior Savings Model for HMO-POS / HMO Plans

(except Community Value)

- The Part D Senior Savings Model is being offered by CMS for CY2021; BCBSM has decided to deploy this new insulin model for all our HMO-POS / HMO plans in 2021 (except Community Value)
- Through this program, members will be offered enhanced Part D plan options with predictable out of pocket costs for insulin
- It will provide members with stable copays throughout the year, capping insulin cost sharing at a \$35 copay for non-LIS beneficiaries for a 30-day supply through the first three stages (up to and including the gap)
- In addition to consistent insulin cost sharing, many insulin-dependent members will see a reduction in cost sharing
- We will also proactively outreach to members who are impacted by these changes to ensure they understand their benefits



Topic 3: **Blue Cross** Medicare Supplement



What's Medicare Supplement Insurance?



Original Medicare helps to cover health costs for services such as:



Part A (Hospital Insurance)

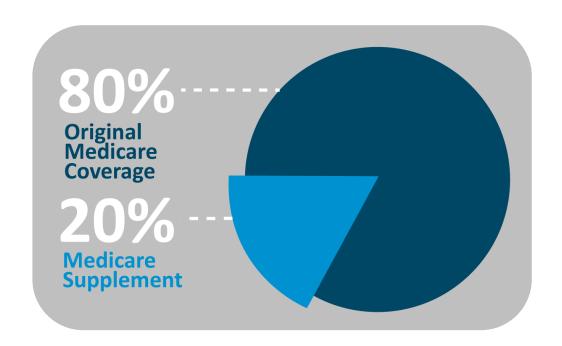
- Inpatient care in hospitals
- Skilled nursing facility care
- Hospice care
- Home health care



Part B (Medical Insurance)

- Services from doctors and other health care providers
- Outpatient care
- Home health care
- Durable medical equipment
- Many preventive services

However, Original Medicare only pays for 80% of these services, leaving someone on Original Medicare exposed to 20% of the total costs. A BCBSM Medicare supplement (Medigap) policy supplements Original Medicare, protecting policyholders by helping pay for the remaining 20% of health care costs.



Key Features of Medicare Supplement Plans

- Flexible coverage that travels nationwide.
- No provider network. Use any provider that accepts Original Medicare; no referrals required.
- Depending on the plan, can cover all or a portion of Medicare deductibles and coinsurances.
- On-line real-time quoting for Non-Guaranteed Issue applicants.
- Lifetime commissions.
- Does **not** include prescription drug coverage.



Please reference the *Blue Cross Medicare Supplement Agent Field Guide* for more information.

Blue Cross Medicare Supplement Plans



Blue Cross Blue Shield of Michigan offers a wide variety of plan offerings to meet member needs including our increasingly popular Medicare Supplement plans G and N. Please note that Medicare supplement plans that provide coverage of the Part B deductible may not be sold to beneficiaries newly eligible for Medicare on or after January 1, 2020.

Blue Cross Medicare Supplement Plans C, F, High-Deductible F cover the Part B deductible

Features	Plan A	Plan C	Plan D	Plan F	High Deductible Plan F*	Plan G	High Deductible Plan G *	Plan N**
Medicare Part A coinsurance and hospital costs up to an additional 365 days after Medicare benefits are used up	~	~	~	✓	~	~	~	~
Medicare Part B coinsurance or copayment	✓	✓	✓	✓	✓	✓	✓	✓
Blood (first 3 pints)	✓	✓	✓	✓	✓	✓	✓	✓
Part A hospice care coinsurance or copayment	✓	✓	✓	✓	✓	✓	✓	✓
Skilled nursing facility care coinsurance		✓	✓	✓	✓	✓	✓	✓
Medicare Part A deductible		✓	✓	✓	✓	✓	✓	✓
Medicare Part B deductible		✓		✓	✓			
Medicare Part B excess charges				✓	✓	✓	✓	
Foreign travel emergency***		~	✓	✓	✓	✓	✓	✓

^{*}High Deductible Plans F and G – benefits are only paid after the beneficiary reaches the annual deductible amount of \$2,340

^{**} Plan N – subject to copayments for certain services (up to \$20 for OV and up to \$50 for ER)

^{***}Foreign travel emergency care – the member is responsible for a \$250 deductible, 20% coinsurance and \$50,000 lifetime maximum



BCBSM Well-Being...

The Blue Cross Blue Shield of Michigan Medicare Supplement Well-Being program is offered to all Medicare Supplement members and provides the additional benefits listed below.

- WelvieSM Surgery Decision-Support Program:
 - An online Surgery Support Program that helps members decide, prepare, and recover from surgery.
- 24-Hour Nurse Line:
 - Members can talk to a registered nurse when they have question about illness or injury from the comfort of their home.
- Blue Cross® Virtual Well-Being:
 - Short Virtual Webinars for members that focus on a variety of topics and provide shareable information.
- Blue365® discounts:
 - Members can receive nationwide savings when showing their member ID Card. A list of current savings are available at www.blue365deals.com



Household Discount

Blue Cross Blue Shield of Michigan offers a 5% household discount to eligible members. To qualify for the discount, members must:

- Be enrolled or enrolling in a Blue Cross Medicare Supplement plan, or currently active in a Legacy Medigap plan
- Live in the same household as another BCBSM Legacy Medigap or Blue Cross Medicare Supplement member, and pay the monthly premium

Household is defined as a single-family home, a condominium unit or an apartment unit within an apartment complex.

There does not have to be a familial relationship with the other Blue Cross plan member.

Members must apply for and be approved for this discount. Premiums are not discounted automatically.

Once approved, members' monthly premiums will be billed at the discounted rate each month.

Guaranteed Issue (GI)



There are two sets of rules for Medicare Supplement plans that determine the premium costs:

<u>Guaranteed Issue (GI)</u> and Non-Guaranteed Issue (NGI)

Guaranteed Issue applies when an applicant is in their Medigap Open Enrollment period, which begins on the first of the month in which they are 65 or older AND enrolled in Medicare Part B. This period lasts 6 months.

Guaranteed Issue rates are based on:

- Age (up to 80 years old)
- Gender
- Geography

Guaranteed issue also applies when an applicant has other health coverage that changes in some way through no fault of their own, for example:

- Group health plan ends
- They exercise their right to try a Medicare Advantage plan and decide within the first year of joining that they
 want to switch to Original Medicare plus Medicare Supplement.

Notes:

- A GI beneficiary cannot be denied health coverage and is not required to answer health questions on the application.
- If a member's birthday occurs on the 1st of the month, their coverage begins on the 1st day of the prior month.

Non-Guaranteed Issue (NGI)



There are two sets of rules for Medicare Supplement plans that determine the premium costs: Guaranteed Issue (GI) and Non-Guaranteed Issue (NGI)

Non-Guaranteed Issue is for an applicant who does not meet the criteria for Guaranteed Issue.

Non-Guarantee Issue rates are based on:

- Age (up to 80 years old)
- Gender
- Geography
- Tobacco use
- Health status

The applicant is subject to medical underwriting to determine appropriate premium rate, and must answer health questions on the application.

On-line real-time quoting for Non-Guaranteed Issue applicants in most cases.

Medicare Access & CHIP Reauthorization Act (MACRA)

The Medicare Access and CHIP Reauthorization Act (MACRA), which was signed in 2015, dictates Med Supp plans that cover the Part B deductible (Plans C, F and HD-F) cannot be made available to those Newly Eligible for Medicare after January 1, 2020.

 A Newly Eligible (NE) beneficiary is anyone who attained age 65 on or after January 1, 2020, or who first becomes eligible for Medicare due to disability or ESRD on or after January 1, 2020.

Individuals eligible for Medicare prior to January 1, 2020 (Non-Newly Eligible), <u>can</u> continue to purchase Plans C, F, and High Deductible F beyond January 1, 2020 where they are offered.

 A Non-Newly Eligible (NNE) beneficiary is anyone who attains age 65 before January 1, 2020, or who first becomes eligible for Medicare due to disability or ESRD <u>before</u> January 1, 2020.



Please reference the *Blue Cross Medicare Supplement Agent Field Guide* for more information.



Medicare Access & CHIP Reauthorization Act (MACRA) Continued...

What does MACRA mean for the sale of Blue Cross Medicare Supplement plans?

- As of January 1,2020, Blue Cross Medicare Supplement Plans
 C, F, and High Deductible F Plans can no longer be sold or issued to Newly-Eligible (NE) beneficiaries.
- Newly Eligible members have access to Blue Cross Medicare Supplement plans A, D, G, HD-G and N.
- Blue Cross Medicare Supplement Plans C, F, and High
 Deductible F Plans can continue to be sold or issued to NonNewly Eligible (NNE) beneficiaries. They will also have access
 to Blue Cross Medicare Supplement plans A, D, G, HD-G and N,
 depending on their eligibility.

What does MACRA mean for Blue Cross Medicare Supplement current members in Plans C, F, and High Deductible F?

 Blue Cross Medicare Supplement members who are currently enrolled in Plans C, F, and High-Deductible F <u>can</u> continue to stay in their plans as long as they pay their premium.

Topic 4: **BCBSM** Prescription **Drug Plans** (PDP)



BCBSM Prescription Drug Plans (PDP)



Overview

- A prescription drug plan adds drug coverage for **Original Medicare users**
- <There are two plan options for 2021, and they are both available to residents in all Michigan counties>
- Pharmacy network includes most Michigan retail pharmacies, chain and national pharmacies

	Prescription Blue Select	
Product Type	Defined Standard	
2021 Premium	<\$87>	
Overview of Plan Features and Updates	 <defined (\$445="" 25%="" all="" and="" coinsurance="" coverage="" deductible="" drugs="" for="" in="" initial="" on-formulary="" phase)="" standard=""></defined> With changes to the formulary, cost-sharing, and premium for 2021, we will be communicating with members / sales community to ensure members are well-informed and have the opportunity to enroll in the Blue Cross product that best meets their needs We are making programmatic changes to offer a 	
	more competitive basic PDP in future years	

2

Prescription Blue Premium			
Enhanced			
<\$108.60>			

- Significantly richer benefits
 - \$0 deductible
 - \$0 copay for Tier 1 and 2 prescriptions via 90day preferred retail or mail order>
- **5-tier formulary,** significantly more extensive than for Prescription Blue Select
- <Members in Preferred (enhanced PDP offered in 2020) will be crosswalked into Premium>

Prescription Blue Premium & Crosswalk



Why are we crosswalking Preferred into Premium in 2021?

- Crosswalking our Preferred members (2020 enhanced PDP with premium of \$89.10) into our Premium plan for 2021 to best serve our current and prospective members>
- <Creates a simplified portfolio with a single, high-quality consolidated enhanced plan>

	Prescription Blue Premium (Consolidated Renewal)
Premium	<\$108.60>
Deductible	<\$0>
Standard Pharmacy (31-day)	<<\$6, \$10, \$45, 45%, 33%>
Preferred Pharmacy / Mail Order (31-day)	<\$1, \$5, \$40, 45%, 33%>
Standard Pharmacy (90-day)	<\$18, \$30, \$135, 45%, N/A>
Preferred Pharmacy / Mail Order (90-day)	<\$0, \$0, \$120, 45%, N/A>



<\$0 deductible in 2021 for all tiers compared to \$50 Tier 2 – 5 deductible in 2020 for Preferred>



<Low cost sharing for preferred
pharmacies, with over 25,000
preferred pharmacies in network>



<\$0 copay for Tiers 1 and 2 for 90day preferred retail and mail order prescriptions>

Pharmacy Network and PDP Tiers



Pharmacy Network

- Pharmacy network includes both preferred and standard pharmacies
- **Standard pharmacies** are those that offer standard cost sharing; includes most Michigan retail pharmacies, chain and national pharmacies
- Preferred pharmacies are those that offer discounted copays. Cost sharing will be less at a preferred pharmacy than at a standard pharmacy

Most chain pharmacies in MI are preferred (over 25,000 total)

- Costco Pharmacy
- D & W Pharmacy
- Family Fare Pharmacy
- Henry Ford Pharmacy
- Hometown Pharmacy

- Kmart Pharmacy
- Kroger Pharmacy
- Meijer Pharmacy
- Rite Aid Pharmacy
- Sam's Club Pharmacy

- Spartan Pharmacies
- VG's Pharmacy
- Walgreens Pharmacy
- Walmart Pharmacy

Find the full list of network pharmacies at: www.bcbsm.com/pharmaciesmedicare

PDP Pharmacy Tiers

For Prescription Blue Premium, both our Preferred and Standard pharmacy networks offer 5 Tiers

Tier 1 – Preferred Generics

Tier 2 – Generics

Tier 3 – Preferred Brand

Tier 4 – Non-Preferred Drugs

Tier 5 – Specialty

<For Prescription Blue Select, all on-formulary drugs will have 25% coinsurance applied>



You have now completed the 2021 Blue Cross Medicare Advantage Agent Certification.
We are thrilled to have you on our Medicare Advantage sales team!

We want to **thank you** for choosing to partner with Blue Cross Blue Shield of Michigan and Blue Care Network— we are here to support you and look forward to years of a prosperous relationship.

NEXT

- 1. Complete the 2020 Individual Self Assessment
- 2. You have 3 attempts to complete with a score of 85% or greater

