

# 2021 Individual Business Training



# Agenda

- A. Product Overview
- B. Post Enrollment
- C. Policy & Procedure
- D. Competitive Landscape
- E. Agent Commissions



A black and white photograph of the Chicago skyline, featuring several prominent skyscrapers. A large blue chevron graphic points from the left towards the right, separating the image from the text area.

# Product Overview

- **IBU Portfolio**
- Networks in Michigan
- Member Transition
- Health Savings Account
- LifeSecure & GeoBlue

# 2021 Key Product Changes

Medical Blue Cross Online visits have a \$0 copay on all IBU PPO and HMO plans with the exception of HSA eligible plans which have a \$0 copay after deductible

New statewide Blue Cross Preferred HMO Bronze plan. The plan pays benefits before deductible: a copay for PCP & mental health visits including virtual and retail health, urgent care and laboratory services

BCN plans post natal and retail health visits apply the primary care physician (PCP) visits copay. BCBSM Non-HSA plans pay urgent care visits with a copay before deductible

Prescription drugs will have flat dollar copayments for Tier 2 Preferred Drugs \$100 and Tier 3 Non-preferred drugs \$150 (deductibles may apply)

\*All plans contain the required Essential Health Benefits.  
See plan details for specific plan information

# 2021 Key Product Changes

Vision plans will see a rate decrease starting January 1<sup>st</sup>, 2021.  
The rates below represent statewide rates. No area factors will be  
applied to final rates.

| Blue Cross® Vision - Effective 1/1/2021 |         |
|---|---------|
| Monthly Rates                           |         |
| 12/12/12; \$10/\$25; \$150 Allowance    |         |
| 1 Person                                | \$11.40 |
| 2 Person                                | \$22.80 |
| Family                                  | \$37.85 |

| Blue Cross® Vision - Effective 1/1/2021 |          |
|---|----------|
| Annual Rates - Discount applied*        |          |
| 12/12/12; \$10/\$25; \$150 Allowance    |          |
| 1 Person                                | \$126.72 |
| 2 Person                                | \$253.44 |
| Family                                  | \$420.72 |

# 2021 Product Portfolio (29 Products)

|   | Metro Detroit HMO<br>3 counties                         | Select HMO<br>20 counties                               | Preferred HMO<br>*Statewide                             | Premier PPO<br>*Statewide                                   |
|---|---|---|---|---|
|    |   |   | Gold  | Gold<br>Gold <b>Closed</b><br>70/30                         |
|    | Silver Extra<br>Silver<br>Silver Off MP<br>Silver Saver | Silver Extra<br>Silver<br>Silver Off MP<br>Silver Saver | Silver Extra<br>Silver<br>Silver Off MP<br>Silver Saver | Silver Extra<br>Silver<br>Silver Off MP<br>Silver Saver HSA |
|   | Bronze<br>Bronze Saver HSA                              | Bronze<br>Bronze Saver - HSA                            | Bronze <b>NEW!</b><br>Bronze Saver - HSA                | Bronze Extra<br>Bronze HSA<br>Bronze Saver                  |
|  |   | Value   |   | Value   |

\*In the Silver Tier, Only Silver Saver is available to residents in the U.P.

# Key Benefits for 2021

## HMO non-HSA plans

- \$0 Laboratory and Pathology Tests\*\*  
HMO Bronze plans Laboratory have a \$10 copay\*
- \$0 Blue Cross Online Visits
- Primary and Mental Health Office Visits including Virtual Visits with a copay before deductible
- Retail Health Visit with a copay before deductible (same as Primary Office Visit copay)
- Urgent Care with a copay before deductible

## PPO non-HSA plans

- \$0 Blue Cross Online Visits
- Urgent Care with a copay before deductible
- Access to Virtual Visits and Retail Health Clinics

## Shared benefits from ALL plans

- \$0 Annual Visit
- \$0 Wellness Visits for Kids
- \$0 Vaccinations
- \$0 Diabetes Test Strips, Lancets and Monitors through Diabetes Management Program
- BCBSM App offers access to cost and transparency tools
- Discounts at Gyms
- Blue 365 Discounts on Vitamins, Food, Retailers, etc.

## PPO & HMO HSA plans

- \$0 Health Savings Accounts (HSAs)
- \$0 Online Visits after deductible
- Access to Virtual Visits and Retail Health Clinics



# 2021 No Networks Changes

## BCBSM Premier Network -

- Broad Choice of providers
- Statewide coverage
- Out-of-Network Coverage

## BCN Network: Preferred HMO -

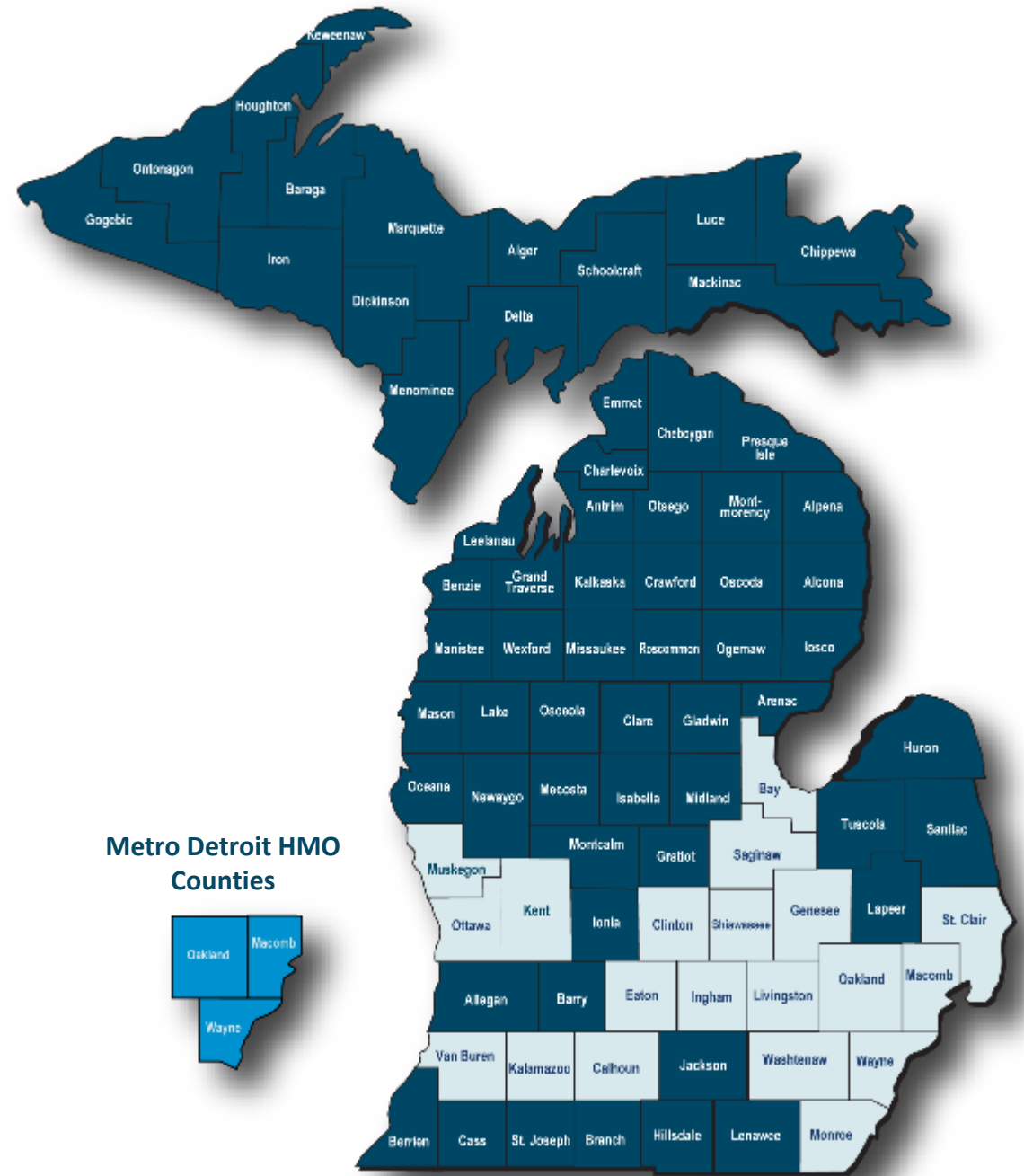
- Broad Choice of providers
- Statewide coverage
- In-Network Coverage

## BCN Network: Select HMO -

- Localized PCP Network
- Available in 20 counties
- In-Network Coverage

## BCN Network: Metro Detroit HMO -

- Localized Network
- 3 Counties in SE Michigan
- In-Network Coverage





# BCN Preferred HMO & BCN Select HMO Referrals

BCN Preferred HMO and BCN Select HMO plans do not require written referrals to in-network specialists except in specific counties in SE Michigan and the Thumb:

|          |            |
|----------|------------|
| Arenac   | Midland    |
| Bay      | Monroe     |
| Clare    | Oakland    |
| Genesee  | Saginaw    |
| Gladwin  | Sanilac    |
| Gratiot  | Shiawassee |
| Huron    | St. Clair  |
| Isabella | Tuscola    |
| Lapeer   | Washtenaw  |
| Lenawee  | Wayne      |
| Macomb   |            |



# Out of State Coverage

## What is Emergency Care?

Accidental injury is any physical damage caused by an action, object, or substance outside the body.

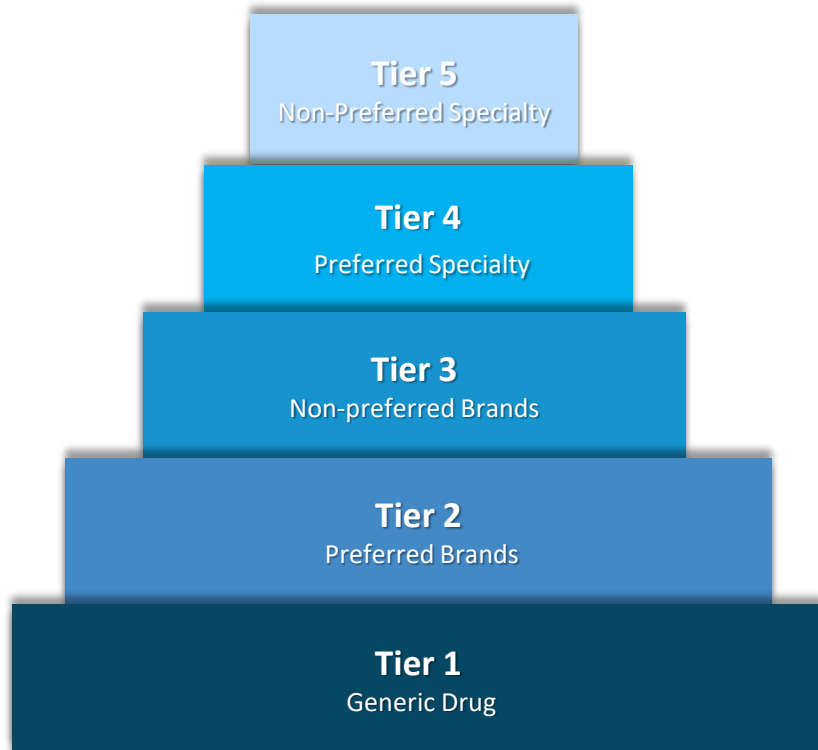
- Only Urgent & Emergency care is considered in-network for both HMO and PPO
- PPO – Scheduled services out of state will be subject to out of network cost-sharing including out of network deductible
- HMO – Scheduled services are not covered out of network

**\*The difference between Urgent vs Emergency care is the severity of the health problem. An Emergency is a condition that is life-threatening. If the condition is a minor illness or injury it would be considered Urgent.**

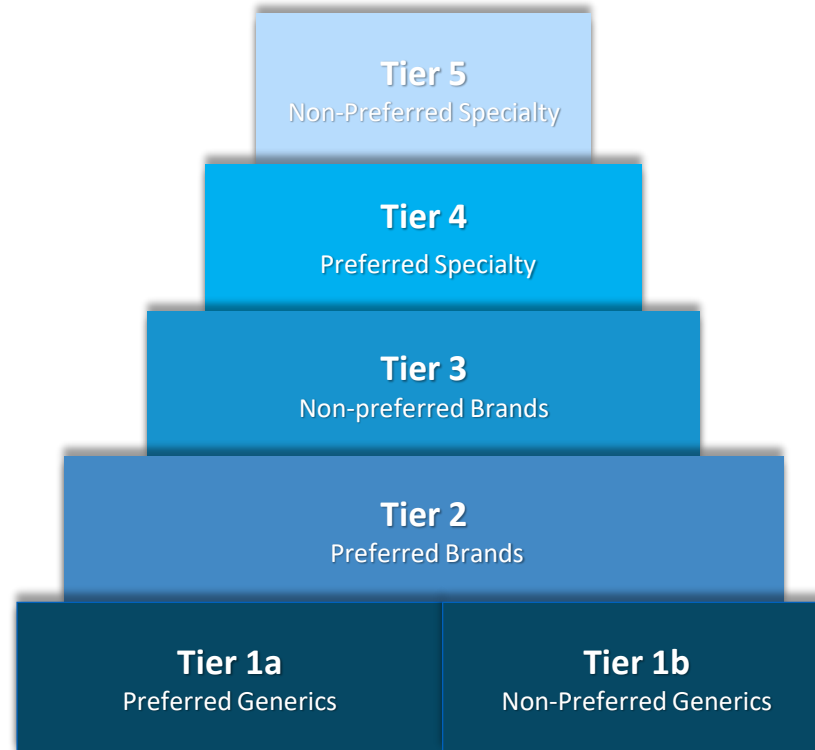


# Pharmacy & Prescription Overview

## PPO



## HMO



- All plans have an integrated medical and prescription deductible
- Tier 1, 2 & 3 drugs have a 30-day supply limit in November and December
- Exclusive agreement with AllianceRx Walgreens Prime for specialty drugs

For a complete list please visit:

<https://www.bcbsm.com/content/dam/public/marketplace/2021-individual/documents/custom-select-drug-list.pdf>

# No Changes to 2021 Dental & Vision Plans

**Year-round  
Enrollment for  
Stand-alone  
Dental and  
Vision plans**



**3 Year Rule:  
If coverage is  
Dropped,  
Subscriber  
Cannot enroll  
For 3 years**

\*The 3-year rule goes into effect with plans that started effective 1/1/2018. If a member had a dental plan and dropped it prior to 1/1/18 they are eligible to enroll in a new plan.



# Value Added Services



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# Blue Cross Online Visits

**Virtual medical  
consultation**

**Use for common  
illnesses**

**Short wait times,  
as little as 3 minutes**



**\$0 copay except for  
HSA plans\***

**Providers available  
24/7**

**Use for adults and  
children**

**\*HSA plans have a \$0 copay for  
online visits after deductible**



# Online Behavioral Health



BlueCross  
BlueShield  
of Michigan



- Licensed Physicians
- Specialties in Child/Adolescent, addiction medicine, Geriatric Psychiatry
- Provide medication evaluation, medication management, assessment & counseling



- Licensed Clinical Psychologists (Ph.D. or Psy. D. level)
- Provides Psychological testing
- Can also provide individual, family and group therapy



- Licensed Masters & Doctoral Level Clinicians
- Clinicians can provide counseling and Assessment
- Typically provides individual, Family and group therapy

Behavioral health online visits subject to PCP copays



# Retail Health Clinics

- Offers low cost services for common illnesses
- Typically open 7 days a week, including evenings
- No appointment necessary
- Retail Health Clinic Visits subject to PCP copays

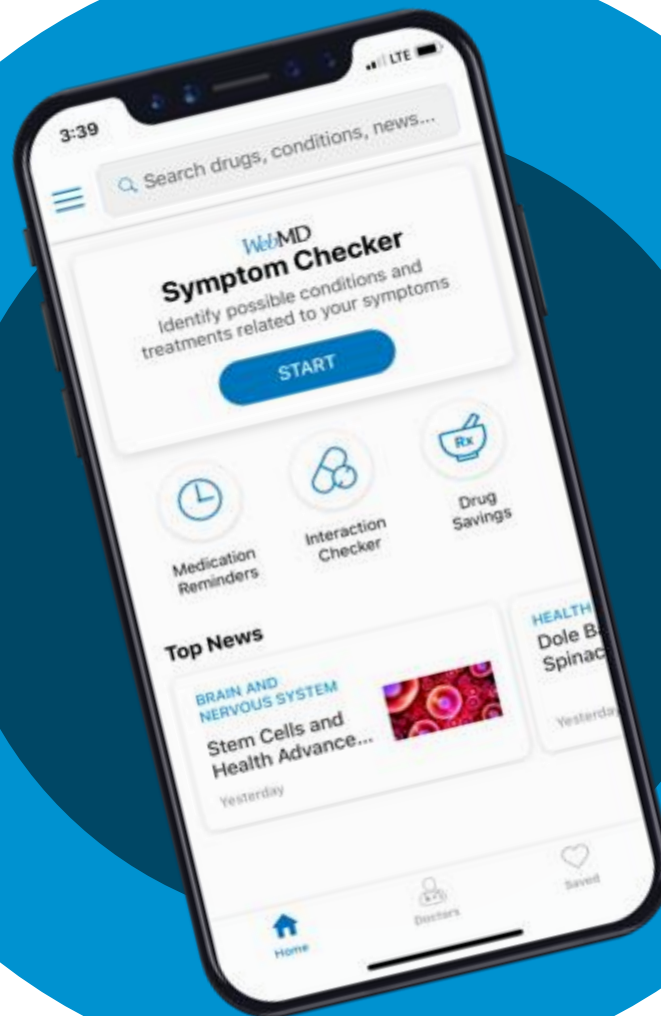
# WebMD Wellness App

**Schedule lifestyle coaching**

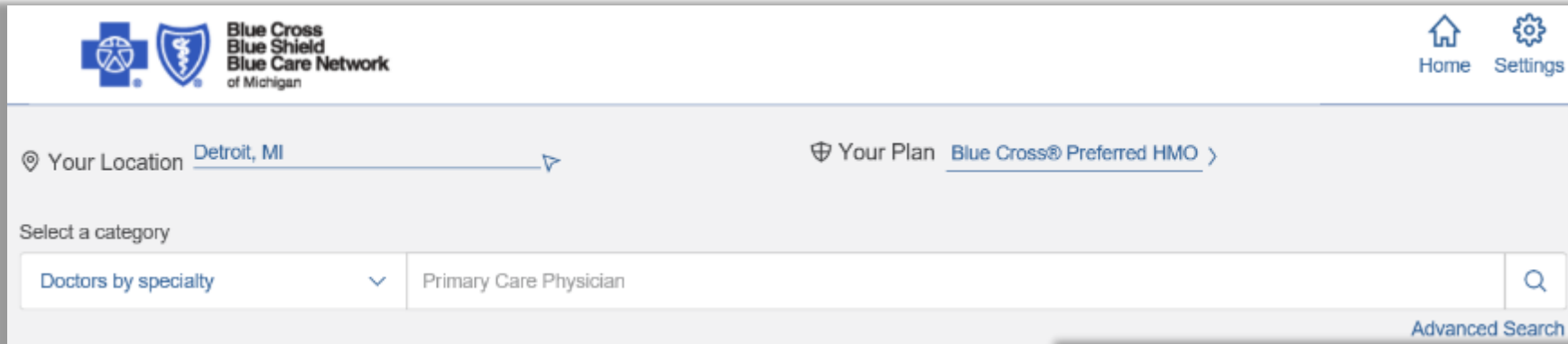
**Read articles on current health topics**

**Access Maps showing current outbreaks of cold & flu**

**Set reminders for staying active & eating healthy**



# Find A Doctor/Cost Estimator Tool



Blue Cross Blue Shield Blue Care Network of Michigan

Home Settings

Your Location Detroit, MI

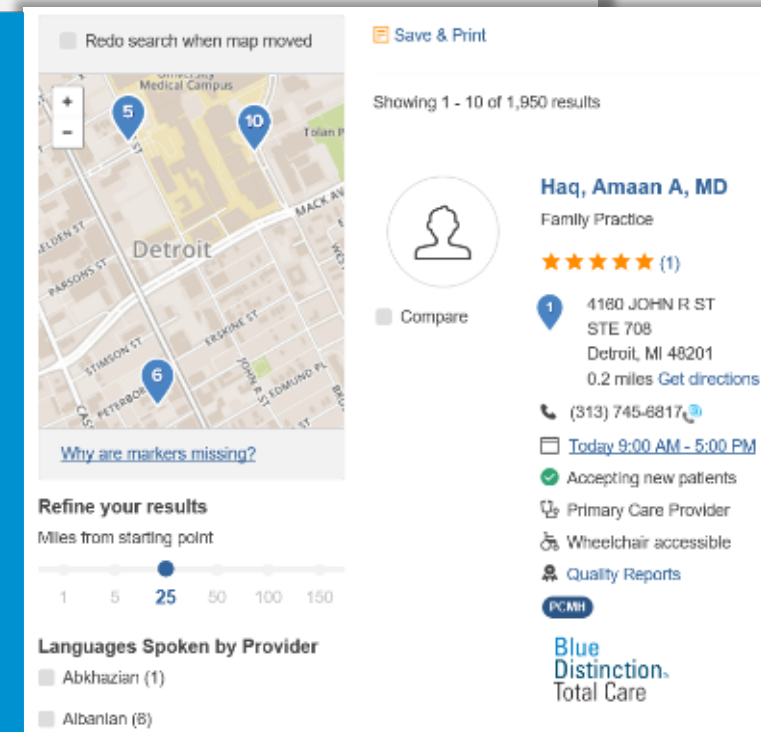
Your Plan Blue Cross® Preferred HMO

Select a category

Doctors by specialty ▼ Primary Care Physician

Advanced Search

- Search for doctors in your network
- Find out if they are accepting new patients
- Select your Primary Care Physician
- Cost Calculator to research medical procedures and estimated cost
- Directory reflects current participation not future participation by providers



Redo search when map moved

Save & Print

Showing 1 - 10 of 1,950 results

**Haq, Amaan A, MD**  
Family Practice  
★★★★★ (1)

4160 JOHN R ST  
STE 708  
Detroit, MI 48201  
0.2 miles [Get directions](#)

(313) 745-8817

Today 9:00 AM - 5:00 PM

Accepting new patients

Primary Care Provider

Wheelchair accessible

Quality Reports

PCMH

Blue Distinction<sup>SM</sup>  
Total Care

Refine your results

Miles from starting point

1 5 25 50 100 150

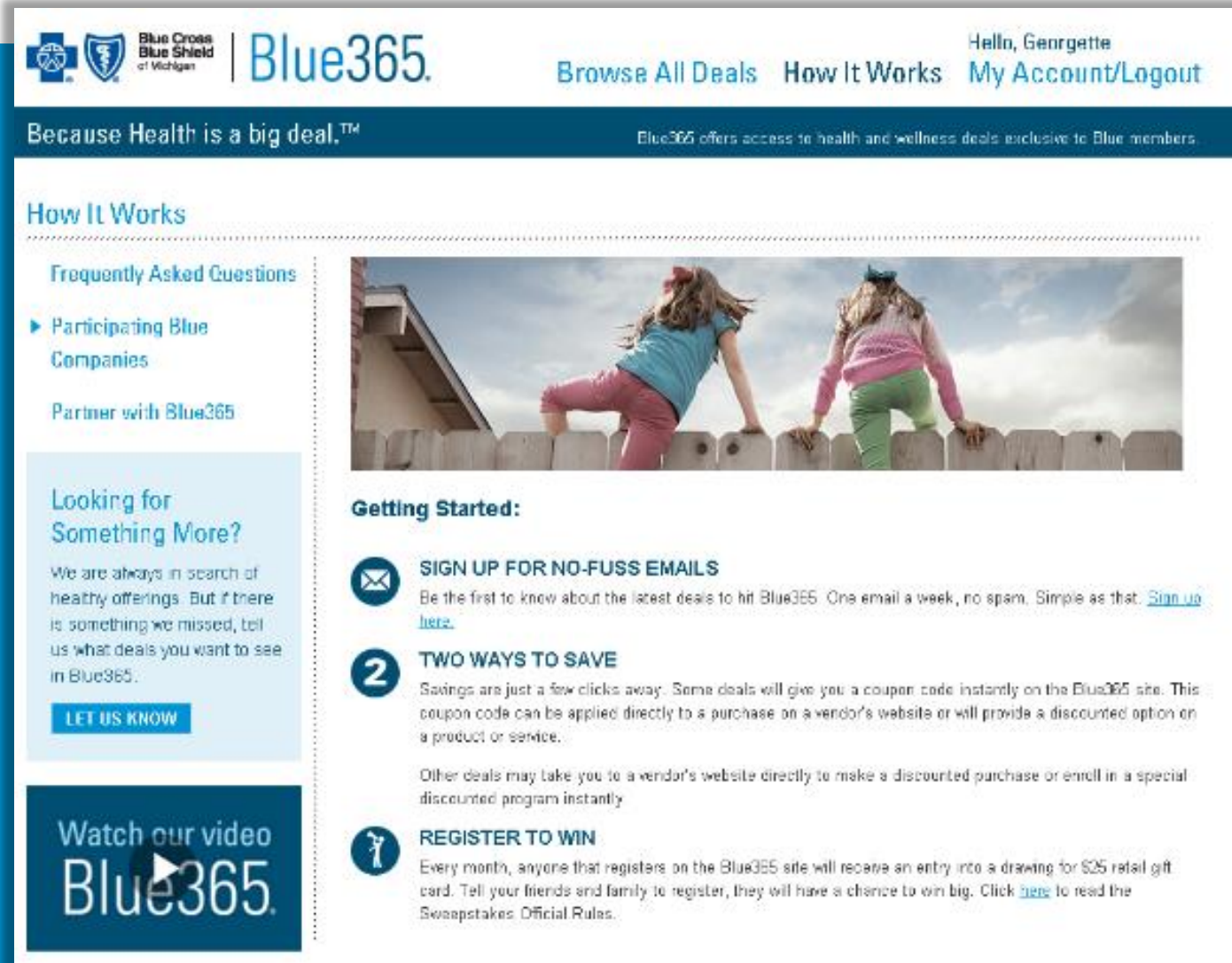
Languages Spoken by Provider

Abkhazian (1)

Albanian (8)

## Discounts and Savings

- \$29 gym membership
- Weight loss programs
- Cookbooks
- Sporting goods
- Health food stores



The screenshot shows the Blue365 website. At the top, there's a navigation bar with the Blue Cross Blue Shield of Michigan logo, the Blue365 logo, and links for 'Browse All Deals', 'How It Works', and 'My Account/Logout'. A user greeting 'Hello, Genrette' is visible. Below the navigation bar, a banner reads 'Because Health is a big deal.™' and 'Blue365 offers access to health and wellness deals exclusive to Blue members.' The main content area is titled 'How It Works' and includes a 'Frequently Asked Questions' section with links to 'Participating Blue Companies' and 'Partner with Blue365'. A 'Looking for Something More?' section encourages users to provide feedback. A 'Getting Started' section lists three steps: 1. 'SIGN UP FOR NO-FUSS EMAILS', 2. 'TWO WAYS TO SAVE', and 3. 'REGISTER TO WIN'. Each step includes a brief description of the benefit and a link to learn more or sign up. At the bottom, there's a 'Watch our video Blue365' button.





# Diabetes Management, Simplified

Blue Cross Blue Shield of Michigan now offers Livongo for Diabetes to you. It's covered 100% by your health plan.

**You'll get this and more when you sign up:**

- Connected Meter
- Support from Coaches When You Need It
- Unlimited Strips at No Cost to You

ENROLL TODAY and Claim your Livongo welcome kit today! (link below)

[hi.livongo.com/BUECROSSMI](https://hi.livongo.com/BUECROSSMI)



A black and white photograph of the Chicago skyline, featuring several prominent skyscrapers. A large blue chevron graphic points from the skyline towards the right side of the slide.

# Product Overview

- IBU Portfolio
- Networks in Michigan
- **Member Transition**
- Health Savings Account
- LifeSecure & GeoBlue

# 2021 Member Transition Timeline



**December 2**  
BCBSM  
bills generate

**December 4**  
BCN bills generate

**Dec 25 (Off/On MP)**  
Bills due

**Open Enrollment: November 1<sup>st</sup> – December 15<sup>th</sup>**

**Oct/Nov**  
Mandatory Notices  
mailed

**November 30**  
Notice of Continuous  
Coverage\*

**\*Notice of Continuous Coverage is provided with the bill runs to members who haven't made an active selection by November 30**

**January 1**  
Effective  
date

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# Mandatory Notices

- Required by law to notify members about product discontinuance/renewal
- Letters are sent prior to the start of open enrollment
- Rate increase notifications are sent at least 30 days in advance of an increase
- Letters can be viewed within Agent Community



# On Marketplace to Off Marketplace

**BCBSM/BCN will NOT auto-cancel  
MP coverage, even if new coverage is starting**

**Changes to MP medical coverage  
could affect any MP dental a member may have**

**MP plans can only be cancelled  
by calling the MP directly with the member**

**If you were not an agent the previous year,  
submit a new application to ensure AOR,  
not just an update**

# Resolving Multiple Coverages

## Key Tips

- Read member & agent notifications - both viewable in Agent Community
- Look for & cancel prior coverage

## Agent Assistance

BCBSM

- 800-788-7334

BCN

- 855-269-9888

## Member Assistance

BCBSM

- 888-288-2738

BCN

- 888-227-2345

Marketplace

- 800-318-2596

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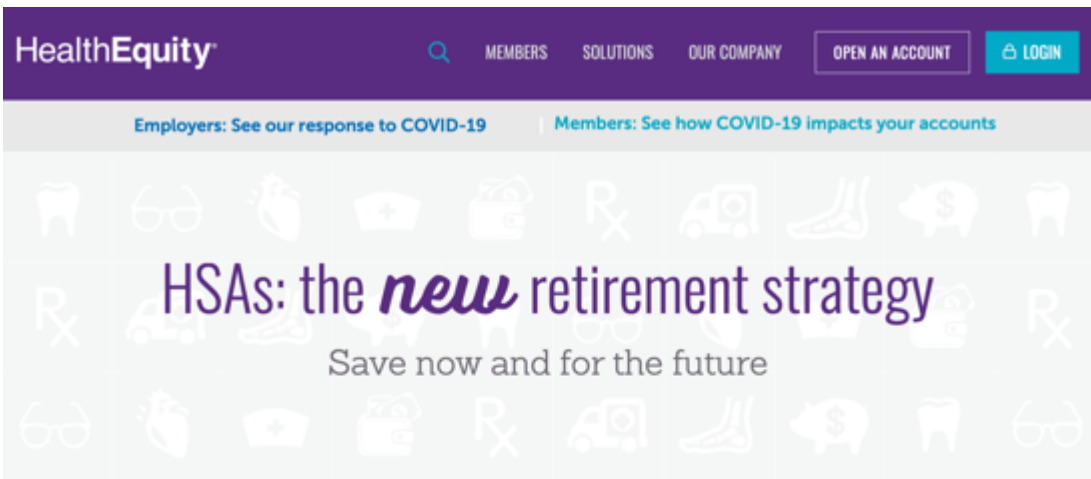


# Health Savings Account

**Eligible HSA Plans** PPO: Bronze, Silver Saver (70, 73) HMO: Bronze Saver

A health savings account is a tax advantaged account that taxpayers may contribute to if enrolled in a high deductible health plan. The funds deposited into the account are not subject to federal income tax at the time of deposit and are not subject to taxes if used for qualified medical expenses.

| High Deductible Health Plan  |                |                   |                |                   |                   |
|--|----------------|-------------------|----------------|-------------------|-------------------|
|  | 2020           |                   | 2021           |                   | Change            |
|  | Min Deductible | Max Out of Pocket | Min Deductible | Max Out of Pocket | Max out of Pocket |
| Individual   | \$1,400        | \$6,900           | \$1,400        | \$7,000           | +100              |
| Family   | \$2,800        | \$13,800          | \$2,800        | \$14,000          | +200              |
| HSA Annual Contribution Limit  |                |                   |                |                   |                   |
|  | 2020           |                   | 2021           |                   | Change            |
| Individual   | \$3,550        |                   | \$3,600        |                   | + \$50            |
| Family   | \$7,100        |                   | \$7,200        |                   | +\$100            |
| Age 55 & older<br>Catch-up<br>Contribution   | \$1,000        |                   | \$1,000        |                   | No Change         |



### How an HSA works



An HSA paired with an HSA-qualified health plan allows you to make tax-free contributions to an federally insured savings account.



HSA-qualified health plans typically cost less than traditional plans and the money saved can be put into your HSA.



HSA balances earn tax-free interest and can be used to pay for qualified medical expenses. [View all qualified medical expenses](#)

Watch this introduction on how HSAs save the day ▶ [PLAY VIDEO](#)

HSAs empower savings now and for the future

HealthEquity is **FREE** for IBU consumers in HSA-eligible plans & can be added after enrollment utilizing the methods below:



Member  
Portal



Forms



Customer  
Service

A black and white photograph of the Chicago skyline, featuring several prominent skyscrapers. A large blue chevron graphic points from the left towards the right, separating the image from the text area.

# Product Overview

- IBU Portfolio
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- Health Savings Account
- **LifeSecure & GeoBlue**

# LifeSecure Products



**Hospital Indemnity**



**Accident**



**Critical Illness**

# GeoBlue Elite Provider Network



## Our Providers:

- ✓ Are recruited based on reputation, quality and member convenience
- ✓ Practice Western Style Medicine
- ✓ Speak fluent English
- ✓ Possess accreditations and board certifications from the American or Royal Board of Medical Specialties
- ✓ Will see GeoBlue members on short notice



**160**  
Regional  
Physician  
Advisors



**110**  
Medical  
Special



All contracted  
Providers  
Thoroughly  
reviewed &  
approved



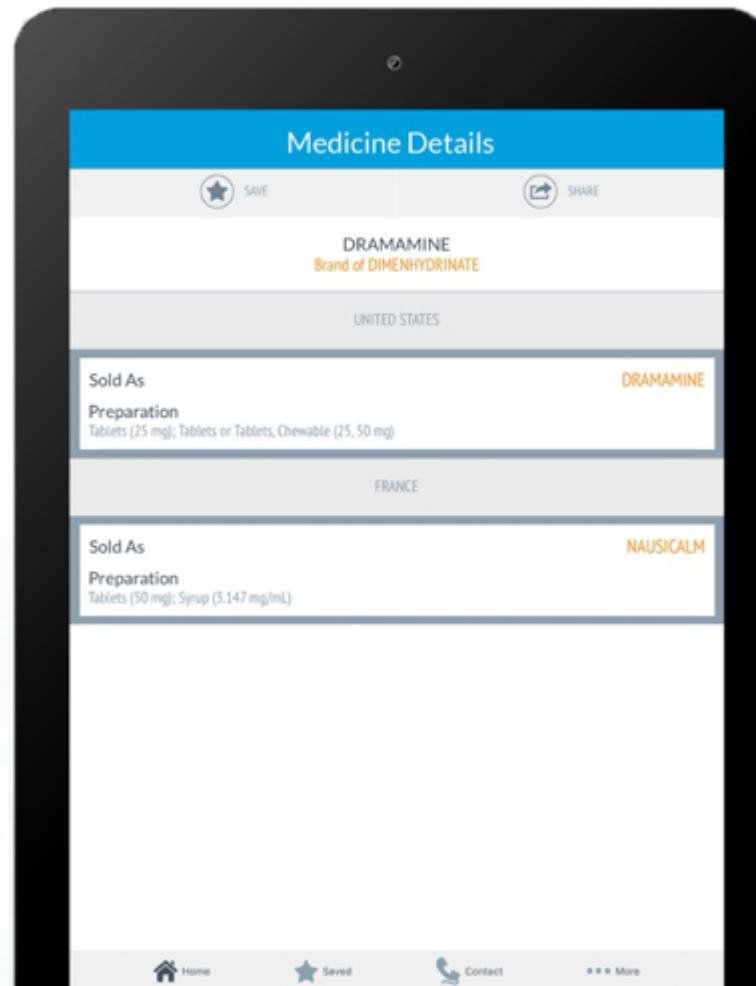
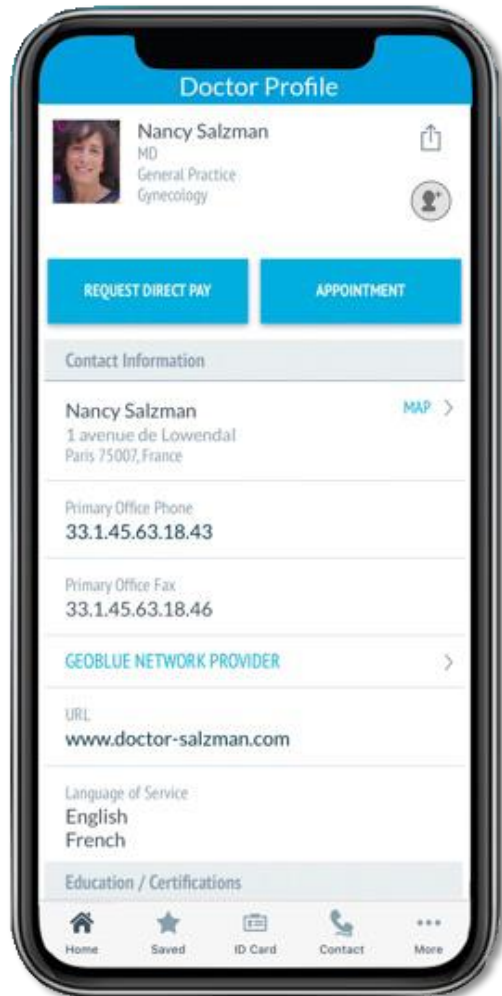
**190**

countries and territories around the world – major cities  
and remote regions



# GeoBlue Online & Mobile Tools

## Self-service tools for navigating risks and finding the best care options



- **Direct Pay** – Allows members or GeoBlue contracted providers to request a guarantee of payment from a website or the GeoBlue mobile App



- **Drug Equivalency Guide** – Find country-specific prescription and over-the-counter names and preparations for over 400 medications



- **Translate Medical Terms** – Translate symptoms, diagnoses and treatments into the ten most common languages



- **Understand Health and Security Risks** – Review the latest security and health issues and dig into profiles on crime, terrorism and on the reliability of police, hotels and transportation



- **Mobile ID card** – View on your mobile phone and fax directly to providers



- **eClaims** – Complete an electronic claim form and upload any supporting documents directly through the GeoBlue website or mobile App

# Post Enrollment



**Post Enrollment Experience**

**Billing & Payment options**



# Welcome Journey Timeline

Once Application is  
Submitted:

## Welcome E-Mail (Day 4-6)

- Confirms plan name and effective date after app approval
- Blues ID card education
- Next steps inserted variably based on actions required

## Educational E-Mail #1 (Day 9-11)

- Overview of insurance terminology
- Next steps inserted variably based on actions required

## Educational E-Mail #2 (Day 14-16)

- Benefits of BCBSM
- Mobile app
- Preparing for your first visit
- Next steps inserted variably based on actions required

## Follow Up E-Mail (Day 24-26)

- Benefits of BCBSM Mobile app
- Next Steps inserted variably based on actions required

Applicants with no e-mail address will be sent Welcome Kits/Handbooks via USPS

# Ongoing Payments



## Phone

**Phone**—Payments can be made over the phone with Customer Service.

**BCBSM Customer Service** 888-288-2738

**BCN Customer Service** 888-227-2345



## Mail

**Mail**—Payments can be mailed in via monthly bill



## In Person

**In Person**—Payments can be made in person at any BCBSM/BCN Walk in Center found around the state

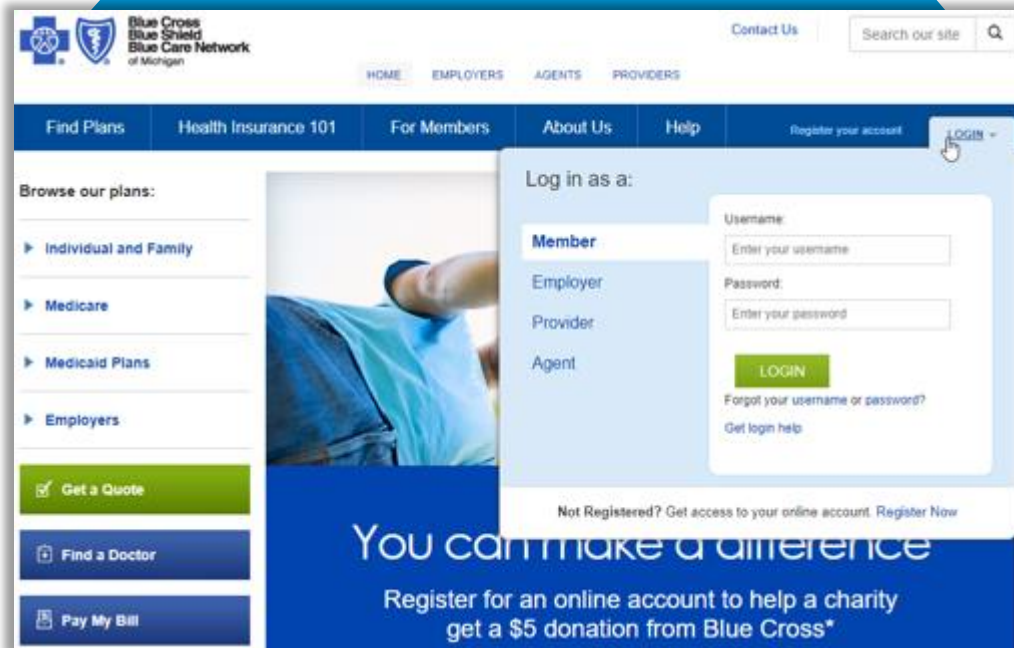


## Online

**Online**—Payments can be paid via the Member Portal found at [www.bcbsm.com](http://www.bcbsm.com)

# Member Portal & Online Features

## Member Portal



- Members can pay their bill online by logging into the Member Portal or selecting Pay My Bill.
- Pay My Bill allows members to pay their bill without being registered for the Member Portal

## Online Features

- **Text-to-pay.** Members can now pay their bill through text message.
  - **Enhanced guest bill pay.** Bills can be paid without entering a contract number.
  - **Merged accounts.** If members have more than one policy, they will be able to view them all without entering separate contract numbers. They can also pay bills separately or together.
  - **Account management options.** Members can see statements, make payments, enroll in paperless billing, build reminders and set up recurring payments.
  - **MoneyGram®.** Members can use MoneyGram to pay bills online, with their mobile app, or at MoneyGram retail locations.
  - **Payment reminders.** Members can receive payment notifications and reminders about their bill through email or SMS alerts.
- Members can log in or activate their member account at [bcbsm.com/login](https://bcbsm.com/login) today.

# BCBSM Mobile App

**View deductibles &  
other plan balances**

**See & search for plan  
services**

**Find doctors &  
Hospitals**



**Check Claims &  
explanation of benefits**

**View & share plan  
ID cards**

**Find & use Blue365  
discounts**

# Policy & Procedure

- Continuous Coverage
- Qualifying Life events (QLE)
- QLE Required Documentation
- Plan Changes







# Continuous Coverage

Continuous coverage for any customer coming from employer-sponsored Blue or non-blue plan to a Blue Off-Marketplace individual medical or dental plan.

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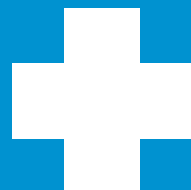
In order to qualify, loss must not have occurred for any of the following reasons:

- Terminate due to failure to pay required contribution, including COBRA
- An act of fraud by the individual
- Group replaced group coverage with different carrier
- Voluntary termination of employer health coverage while employed



# Qualifying Life Event

A Qualifying Life Event (QLE) is an event that triggers a special enrollment period (SEP). An SEP allows you to apply for or change health coverage outside of the Open Enrollment period with supporting documentation.



Loss of essential  
coverage



Loss of Cobra  
benefits



Marriage



Birth



Permanent  
Relocation



Divorce



Previous Policy  
holder died



Adoption



Named Legal  
Guardian



Gained Foster  
Child



Change in  
Citizenship



Newly Eligible for  
Gov. Assistance

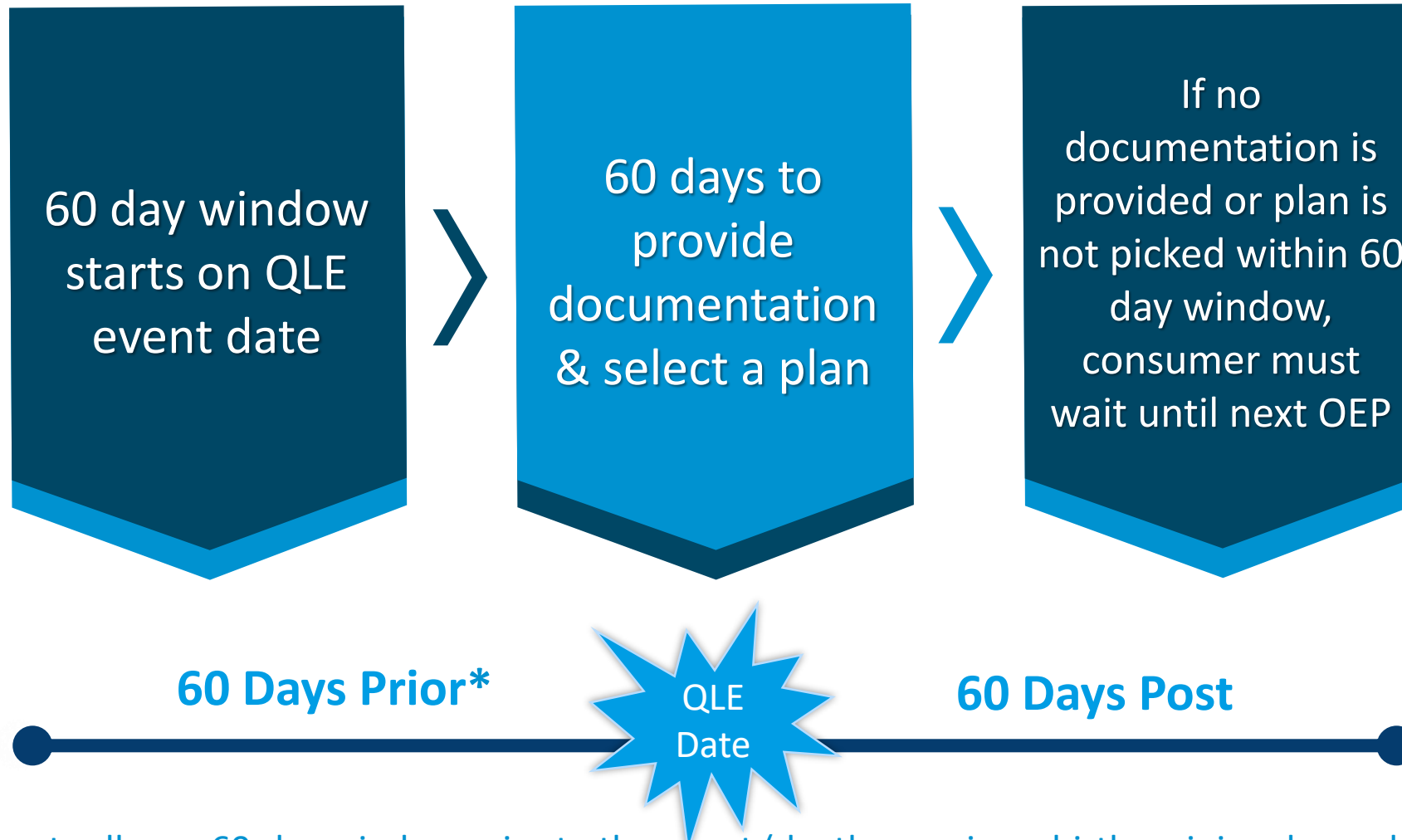
Please advise members enrolling in a plan due to a SEP in October through December with an effective date in 2020 that they will have a new rate for the 2021 plan year starting in January. If the new rate is available advise them what it is.

# QLE Required Documentation

- For a complete list of documentation required for an OFF marketplace QLE, visit [bcbsm.com/documents](https://bcbsm.com/documents)
- For a complete list of documentation required for an ON marketplace QLE, visit <https://www.healthcare.gov/coverage-outside-open-enrollment>

## Example Documentation

| <u>Exhaustion/Loss of COBRA coverage</u>  | <u>Change in dependent status</u>  | <u>Outside coverage area</u>  |
|---|--|---|
| Exhaustion/Loss Letter from your COBRA administrator with the date your coverage ended and the reason why | A document to support the event, such as divorce decree, proof of legal separation or death certificate. Proof of prior coverage | Proof of new and old address - Driver's license or state ID card (copy), lease or mortgage agreement, post office address change. Proof of prior coverage |

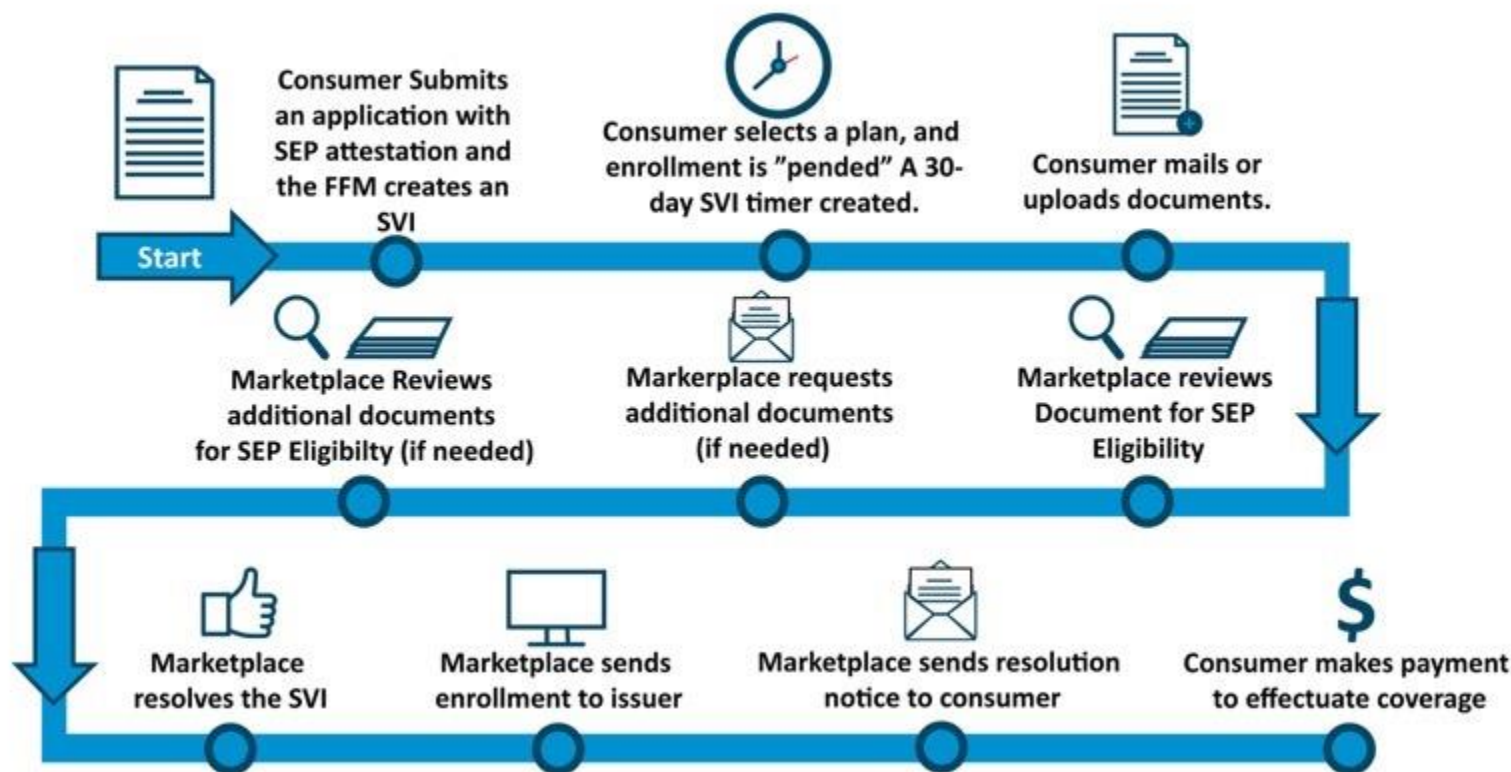


\*Not all events allow a 60-day window prior to the event (death, marriage, birth, gaining dependents)

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# On-Marketplace SEP Verification

New applicants (those who are not already enrolled in Marketplace coverage) who attest to certain types of SEP qualifying events will be subject to the SEPV process of pre-enrollment verification. Eligible consumers must submit documents that confirm their SEP eligibility before they can enroll and start using their Marketplace coverage.



**SVI = SEP Verification Issue –**  
This is referring to the Marketplace process for processing the SEP application through their system



BlueCross  
BlueShield  
of Michigan

# Additional On-Marketplace QLE Exceptions

**Serious medical condition or natural disaster that prevents plan selection by deadline**

**Incomplete or incorrect enrollments due to marketplace enrollment assister, marketplace enrollment, system migration, display errors, and other system errors**

**Delays in Medicaid to Marketplace transfers that prevents plan selection by the deadline**

**Unresolved casework**



# Newborn Coverage

- First 48/96 hours of delivery are covered under mother's maternity benefits for Vaginal/Cesarean delivery
- Subscribers must add newborns within 60 days for individual plans
- Subscribers are required to add newborns within the time frame allowed for their newborns to receive benefits beyond 48 or 96 hours



# Totals Carryover

- IBU is required to do carryover totals within the same QHP within the same metal tier and issuer
- IBU must allow totals on and off marketplace to carryover within the same QHP
- Totals do not carryover between extra and non-extra plans
- No fourth quarter carryovers\*

**\*Fourth quarter carryover – Totals do not carryover from one year to the next**

**Carryover –The money paid toward the out of pocket cost that is transferred from one plan to the next.**



# Eligibility Guide

Our Individual Business Eligibility Guide dictates all of our Off-Marketplace business rules and can be a great tool for agents to use and reference.

The policy manual is updated semi-annual (or as needed) and can be found utilizing the steps below:

1. Login to Agent Community via the Agent Portal
2. Type 'policy manual' into the search bar  
OR
3. Click the Knowledge tab and scroll through uploaded documents to find the 2021 Policy Manual

# Competitive Landscape



Competitive Analysis

2021 Rate Changes

Why Choose Blue Cross



BlueCross  
BlueShield  
of Michigan

# 2021 Competitive Analysis

BCBSM/BCN is priced competitively in 2021

Three carriers from 2020 marketplace were involved with a merger or acquisition










BCBSM/BCN covers University of Michigan Health System

BCBSM added new statewide Bronze plan with benefits payable before deductible for 2021

The Michigan market continues to stabilize with minimal rate increases and decreases

BCBSM/BCN pays as primary in an auto accident

# 2021 Rate Changes

|  |       |             |
|--|-------|-------------|
|    | 6.0%  | 2 counties  |
|    | 3.1%  | 8 counties  |
|    | -0.1% | 68 counties |
|    | -0.4% | 4 counties  |
|    | 2.5%  | 83 counties |
|    | 2.7%  | 32 counties |
|   | -2.0% | 64 counties |
|  | 1.7%  | 83 counties |
|  | 0.4%  | 8 counties  |

 BCBSM PPO  
BCN HMO  
83 counties



 2 counties  
- Metro Detroit Area



 68 counties



 32 counties



 8 counties + Muskegon  
and Oceana



 8 counties



 64 counties



 4 counties



Service areas remain largely unchanged from 2020



# Why sell Blue Cross?

Commission rates

Largest provider network

Only carrier in all 83 counties

Only On-Marketplace PPO  
network

Improved technology to help agents  
manage their books more efficiently





# Agent Commissions



Commission Updates

Commission Overview

Certification Information

# Commissions Guidelines



Blue Cross and BCN will pay commission to agents based on the size of their active medical, Under 65 book of business as well as their open enrollment and special enrollment period submissions.

| Member Type          | 1-74 Members | 75+ Members (HMO) | 75+ Members (PPO) |
|----------------------|--------------|-------------------|-------------------|
| New to Blue (year 1) | 2%           | 6%                | 4%                |
| Retention (year 2+)  | 2%           | 3%                | 2%                |

To be considered for the 75+ member commission tier, you must have had 75 or more active Under 65 medical members on your personal book of business as of July 31, 2020.

# Commission Designation Policy



When an agent contracts with BCBSM & BCN, the agent completes a Commission Payment Designation form. The policy below applies to any designation change requests.

| Designation Change | Policy  |
|--------------------|---|
| Agent to Agency    | When an agent changes commission designation from an individual payable agent to an agency, current commissions and agent’s book of business transfer to that agency at the requested effective date  |
| Agency to Agent    | When an agent changes commission designation from an agency to an individual agent, commissions and agent’s book of business will remain with the agency unless the agency notifies us to release commissions to the agent. If the agency does not release commissions, the agent must obtain Agent of Record letters. At that time, commissions will be effective based on Agent of Record policy. |
| Agency to Agency   | When changing commission designation from an agency to another agency, the Agency to Agent policy applies.  |

**Consult the official Agent Commissions & Incentives Guide, located on the Agent Portal, for the most up to date policy information.**

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Agents must be certified by the Marketplace prior to the sale or engagement of any qualified health plan (QHP) enrollment

**Registration and training:**

- [Log into](#) the CMS Enterprise Portal (or register if first time user)
- Update your information on your Marketplace Learning Management System (MLMS) agent/broker profile
- Complete the Marketplace training requirement
- Read and accept the applicable Marketplace Agreement(s)
- Confirm your registration by using the [Registration Completion List](#)

Throughout the registration process, you can use the [Marketplace Registration Tracker](#) to track your progress.

Have questions about Marketplace registration and training? Check out these [registration and training frequently asked questions](#).

**Need additional help?** Contact the Marketplace Service Desk at 1-855-267-1515 Monday to Friday from 8:00 AM–8:00 PM ET.

If the agent is found not to be Marketplace certified by the receipt date of the QHP application, that agent will not be eligible for commission payments on affected enrollments for the calendar year



# Appendix

# 2021 Cost Sharing Snapshot



|             |         | Bronze  |         |         | Silver  |         |                 |         | Gold    |
|-------------|---------|---------|---------|---------|---------|---------|-----------------|---------|---------|
|             | Value   | Saver   | Basic   | Extra   | Saver   | Basic   | Off Marketplace | Extra   | Basic   |
| OOP Max:    |         |         |         |         |         |         |                 |         |         |
| BCBSM       | \$8,550 | \$8,500 | \$6,950 | \$8,500 | \$6,950 | \$8,500 | \$7,800         | \$8,500 | \$7,200 |
| BCN         | \$8,550 | \$6,950 | \$8,500 | N/A     | \$7,500 | \$8,500 | \$7,700         | \$8,500 | \$8,500 |
| Deductible  |         |         |         |         |         |         |                 |         |         |
| BCBSM       | \$8,550 | \$8,500 | \$6,950 | \$8,000 | \$3,500 | \$2,500 | \$2,200         | \$4,800 | \$750   |
| BCN         | \$8,550 | \$6,950 | \$8,500 | N/A     | \$4,000 | \$3,000 | \$2,800         | \$4,800 | \$850   |
| Coins (in): |         |         |         |         |         |         |                 |         |         |
| BCBSM       | 0%      | 0%      | 0%      | 40%     | 20%     | 20%     | 20%             | 20%     | 20%     |
| BCN         | 0%      | 0%      | 0%      | N/A     | 30%     | 30%     | 30%             | 20%     | 20%     |

- Cover Essential Health Benefits only
- Deductible = Integrated individual embedded
- Bronze Basic (PPO), Bronze Saver (HMO) and Silver Saver 70 & 73 AV (PPO) are HSA-compliant

BCBSM = PPO; BCN = All HMO networks

OOPM = out-of-pocket maximum

Coins IN = coinsurance In-network



# 2021 Tiered Copay Snapshot

|                               | Catastrophic                        | Bronze  |         |          | Silver   |          |                 |         | Gold     |
|-------------------------------|-------------------------------------|---------|---------|----------|----------|----------|-----------------|---------|----------|
|                               | Value                               | Saver   | Basic   | Extra    | Saver    | Basic    | Off Marketplace | Extra   | Basic    |
| Primary care visits:<br>BCBSM | \$30 BD on 1 <sup>st</sup> 3 visits | \$0 AD  | \$0 AD  | \$40 BD  | \$30 AD  | \$30 AD  | \$30 AD         | \$30 BD | \$30 AD  |
| BCN                           | \$30 BD                             | \$0 AD  | \$35 BD | N/A      | \$30 BD  | \$30 BD  | \$30 BD         | \$30 BD | \$30 BD  |
| Specialist visits:<br>BCBSM   | \$0 AD                              | \$0 AD  | \$0 AD  | \$100 BD | \$50 AD  | \$50 AD  | \$50 AD         | \$65 BD | \$50 AD  |
| BCN                           | \$0 AD                              | \$0 AD  | \$0 AD  | N/A      | \$50 AD  | \$50 AD  | \$50 AD         | \$65 BD | \$50 AD  |
| Urgent care:<br>BCBSM         | \$0 AD                              | \$75 BD | \$0 AD  | \$100 BD | \$75 AD  | \$75 BD  | \$75 BD         | \$75 BD | \$75 BD  |
| BCN                           | \$40 BD                             | \$0 AD  | \$75 BD | N/A      | \$40 BD  | \$40 BD  | \$40 BD         | \$75 BD | \$40 BD  |
| ER:<br>BCBSM                  | \$0 AD                              | \$0 AD  | \$0 AD  | 40% AD   | \$250 AD | \$250 AD | \$250 AD        | 20% AD  | \$250 AD |
| BCN                           | \$0 AD                              | \$0 AD  | \$0 AD  | N/A      | \$250 AD | \$250 AD | \$250 AD        | 20% AD  | \$250 AD |

- HMO: Value, Silver Saver, Silver Basic, Silver Off Marketplace, Gold Basic pay PCP office visits & Urgent Care visits with a copay before deductible and laboratory at 100 percent before deductible
- HMO: Bronze Basic pay PCP office visits, Urgent Care visits & laboratory with a copay before deductible
- BCBSM = PPO
- BCN = All HMO networks
- BD = Before Deductible
- AD = After Deductible

# Silver Cost Sharing Variations - PPO



| 2021 BCBSM Silver | Federal Poverty Level | Deductible | Out of Pocket Maximum |
|-------------------|-----------------------|------------|-----------------------|
| Premier Silver 70 | 250% and above        | \$2,500    | \$8,500               |
| Premier Silver 73 | 200% to 250%          | \$2,100    | \$6,400               |
| Premier Silver 87 | 150% to 200%          | \$700      | \$2,000               |
| Premier Silver 94 | 138% to 150%          | \$200      | \$800                 |
| Silver Extra 70   | 250% and above        | \$4,800    | \$8,500               |
| Silver Extra 73   | 200% to 250%          | \$4,200    | \$6,500               |
| Silver Extra 87   | 150% to 200%          | \$1,200    | \$2,500               |
| Silver Extra 94   | 138% to 150%          | \$500      | \$1,300               |
| Silver Saver 70   | 250% and above        | \$3,500    | \$6,950               |
| Silver Saver 73   | 200% to 250%          | \$2,900    | \$4,500               |
| Silver Saver 87   | 150% to 200%          | \$800      | \$2,000               |
| Silver Saver 94   | 138% to 150%          | \$400      | \$650                 |

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# Silver Cost Sharing Variations - HMO

| 2021 BCN Silver | Federal Poverty Level | Deductible | Out of Pocket Maximum |
|-----------------|-----------------------|------------|-----------------------|
| Silver 70       | 250% and above        | \$3,000    | \$8,500               |
| Silver 73       | 200% to 250%          | \$2,600    | \$6,300               |
| Silver 87       | 150% to 200%          | \$800      | \$2,200               |
| Silver 94       | 138% to 150%          | \$200      | \$900                 |
| Silver Extra 70 | 250% and above        | \$4,800    | \$8,500               |
| Silver Extra 73 | 200% to 250%          | \$4,200    | \$6,500               |
| Silver Extra 87 | 150% to 200%          | \$1,200    | \$2,500               |
| Silver Extra 94 | 138% to 150%          | \$500      | \$1,300               |
| Silver Saver 70 | 250% and above        | \$4,000    | \$7,500               |
| Silver Saver 73 | 200% to 250%          | \$2,500    | \$6,400               |
| Silver Saver 87 | 150% to 200%          | \$800      | \$2,400               |
| Silver Saver 94 | 138% to 150%          | \$400      | \$750                 |

# Top Selling Plans by County

|    | SE Michigan                    |                     |                                | West Michigan       |                     |                     | Lansing Area           |                     |
|----|--------------------------------|---------------------|--------------------------------|---------------------|---------------------|---------------------|------------------------|---------------------|
|    | Macomb                         | Oakland             | Wayne                          | Kent                | Muskegon            | Ottawa              | Eaton                  | Ingham              |
| #1 | Select Silver Saver            | Select Bronze       | Select Bronze                  | Select Bronze       | Select HMO Bronze   | Select Bronze Saver | Select Bronze          | Select Bronze       |
| #2 | Select Bronze                  | Select Silver Saver | Metro Detroit HMO Bronze       | Select Bronze Saver | Select Bronze Saver | Select Bronze       | Select Silver Saver    | Select Bronze Saver |
| #3 | Metro Detroit HMO Silver Saver | Select Bronze Saver | Metro Detroit HMO Silver Saver | Select Silver Saver | Select Silver Saver | Select Silver Saver | Select Bronze Saver    | Select Silver Saver |
|    | Mid Michigan                   |                     |                                |                     | Kalamazoo           |                     | Upper Peninsula        |                     |
|    | Bay                            | Genesee             | Midland                        | Saginaw             | Kalamazoo           | Calhoun             | Marquette              |                     |
| #1 | Select Silver Saver            | Select Bronze       | Preferred Bronze Saver         | Select Silver Saver | Select Bronze       | Select Bronze       | Preferred Silver Saver |                     |
| #2 | Select Bronze Saver            | Select Silver Saver | Preferred Silver Saver         | Select Bronze       | Select Bronze Saver | Select Silver Saver | Preferred Bronze Saver |                     |
| #3 | Select Bronze                  | Select Bronze Saver | Preferred Silver               | Select Bronze Saver | Select Silver Saver | Select Bronze Saver | Preferred Gold         |                     |

| Plans  | RX                            |                                  |                                     |                                      |   |
|--|-------------------------------|----------------------------------|-------------------------------------|--------------------------------------|---|
|  | <u>Tier 1</u><br>Generic Drug | <u>Tier 2</u><br>Preferred Brand | <u>Tier 3</u><br>Nonpreferred Brand | <u>Tier 4</u><br>Preferred Specialty | <u>Tier 5</u><br>Nonpreferred Specialty |
| Premier Value  | \$0 AD                        | \$0 AD                           | \$0 AD                              | \$0 AD                               | \$0 AD                                  |
| Premier Bronze, Premier Bronze Saver                                     | \$0 AD                        | \$0 AD                           | \$0 AD                              | \$0 AD                               | \$0 AD                                  |
| Premier Bronze Extra (no max on any tier)                                | \$35 BD                       | \$100 AD                         | \$150 AD                            | 40% AD                               | 45% AD                                  |
| Premier Silver, Premier Silver Off Marketplace, Premier Silver Saver HSA | \$15 AD                       | \$100 AD                         | \$150 AD                            | 40% AD no max                        | 45% AD no max                           |
| Premier Gold   | \$15 AD                       | \$100 AD                         | \$150 AD                            | 40% AD no max                        | 45% AD no max                           |
| Premier Silver Extra - 70  | \$15 BD                       | \$100 BD                         | \$150 BD                            | 40% AD no max                        | 45% AD no max                           |
| Premier Silver Extra - 73  | \$15 BD                       | \$100 BD                         | \$150 BD                            | 40% AD no max                        | 45% AD no max                           |
| Premier Silver Extra - 87  | \$5 BD                        | \$25 BD                          | \$50 BD                             | 40% AD no max                        | 45% AD no max                           |
| Premier Silver Extra - 94  | \$3 BD                        | \$5 BD                           | \$10 BD                             | 40% AD no max                        | 45% AD no max                           |

# HMO RX Co-Pays



| Plans                               | RX                                |                                  |                                     |                                      |   |
|-------------------------------------|-----------------------------------|----------------------------------|-------------------------------------|--------------------------------------|---|
|                                     | <u>Tier 1A/1B</u><br>Generic Drug | <u>Tier 2</u><br>Preferred Brand | <u>Tier 3</u><br>Nonpreferred Brand | <u>Tier 4</u><br>Preferred Specialty | <u>Tier 5</u><br>Nonpreferred Specialty |
| Value                               | \$0 AD                            | \$0 AD                           | \$0 AD                              | \$0 AD                               | \$0 AD                                  |
| Bronze, Bronze Saver                | \$0 AD                            | \$0 AD                           | \$0 AD                              | \$0 AD                               | \$0 AD                                  |
| Silver, Silver Off MP, Silver Saver | \$4 AD / \$20 AD                  | \$100 AD                         | \$150 AD                            | 40% AD no max                        | 45% AD no max                           |
| Gold                                | \$4 AD / \$20 AD                  | \$100 AD                         | \$150 AD                            | 40% AD no max                        | 45% AD no max                           |
| Silver Extra - 70                   | \$15 BD                           | \$100 BD                         | \$150 BD                            | 40% AD no max                        | 45% AD no max                           |
| Silver Extra - 73                   | \$15 BD                           | \$100 BD                         | \$150 BD                            | 40% AD no max                        | 45% AD no max                           |
| Silver Extra - 87                   | \$5 BD                            | \$25 BD                          | \$50 BD                             | 40% AD no max                        | 45% AD no max                           |
| Silver Extra - 94                   | \$3 BD                            | \$5 BD                           | \$10 BD                             | 40% AD no max                        | 45% AD no max                           |



# 2021 Dental Plans

| Plans                          | Blue Dental PPO + | Blue Dental PPO   |                    |                  |                  | Blue Dental EPO   |
|--------------------------------|-------------------|-------------------|--------------------|------------------|------------------|-------------------|
|                                | Standard 80/60/50 | Standard 80/50/50 | Pediatric 80/50/50 | Extra 100/70/50  | PPO 100/50/50    | Standard 80/50/50 |
| Deductible: (1P/2P/3P+)        |                   |                   |                    |                  |                  |                   |
| In-Network                     | \$75/\$150/\$225  | \$25/\$50/\$75    | \$25/\$50/\$75     | \$0/\$0/\$0      | \$25/\$50/\$75   | \$25/\$50/\$75    |
| Out-of-Network                 | \$75/\$150/\$225  | \$50/\$100/\$150  | \$50/\$100/\$150   | \$50/\$100/\$150 | \$50/\$100/\$150 | Not Covered       |
| Co-Insurance: (Class I/II/III) |                   |                   |                    |                  |                  |                   |
| In-Network                     | 80%/60%/50%       | 80%/50%/50%       | 80%/50%/50%        | 100%/70%/50%     | 100%/50%/50%     | 80%/50%/50%       |
| Out-of-Network                 | 80%/60%/50%       | 50%/50%/50%       | 50%/50%/50%        | 80%/60%/50%      | 50%/50%/50%      | 0%/0%/0%          |
| Kids Annual Max: (1P/2P+)      |                   |                   |                    |                  |                  |                   |
| In-Network                     | \$350/\$700       | \$350/\$700       | \$350/\$700        | \$350/\$700      | \$350/\$700      | \$350/\$700       |
| Out-of-Network                 | N/A               | N/A               | N/A                | N/A              | N/A              | N/A               |
| Adults Annual Maximum          |                   |                   |                    |                  |                  |                   |
| In-Network                     | \$1,000           | \$1,200           | N/A                | \$1,200          | \$1,200          | \$1,200           |
| Out-of-Network                 | \$1,000           | \$800             | N/A                | \$1,000          | \$800            | Not Covered       |

# How Advance Premium Tax Credits are Calculated

**Step 1:** Determine FPL using the table

**Step 2:** Determine the maximum premium you can pay by multiplying the household Income by the percent premium cap associated with the FPL

**Step 3:** Subtract the maximum premium the person can pay based on the premium for the **second lowest Silver plan within the person's rating region.** This is their APTC, or premium subsidy.

**Choice:** The individual or family can purchase the second lowest Silver plan for their maximum premium OR they can use the APTC to reduce the premium for any plan they choose (except Catastrophic).

# How Advance Premium Tax Credits are Calculated

| Household Income<br>(% of Federal Poverty Level) | Premium Cap - the most you can pay<br>(% of Household income<br>paid on insurance premiums) |
|--|---|
| <138% FPL  | 2%  |
| 133-150%   | 3-4%  |
| 151%-200%  | 4-6.3%  |
| 201%-250%  | 6.3-8.05%   |
| 251%-300%  | 8.05-9.5%   |
| 301%-400%  | 9.5%  |

# Vision At-A-Glance



|                    | <b>Packaged Adult Benefits</b><br>Benefits you receive if you purchase vision coverage as a package with dental plans | <b>Stand-alone adult vision benefits</b><br>Benefits you receive if you purchase the Blue Cross® Vision for adults stand-alone plan |
|--------------------|---|---|
| <b>Eligibility</b> | Non-pediatric members 19 or older have coverage on the start of the date of the plan                                  | Non-pediatric members 19 or older have coverage on the start of the date of the plan  |
| <b>Benefits</b>    | Exams every 12 months   | Exams every 12 months   |
|                    | Lenses every 12 months  | Lenses every 12 months  |
|                    | Frames every 24 months  | Frames every 12 months  |
| <b>Allowance</b>   | \$130 allowance for frames every 24 months  | \$150 allowance for frames or every 12 months   |
| <b>Copays</b>      | \$10 exam, \$25 Materials   | \$15 exam, \$25 Materials   |
| <b>Network</b>     | VSP Choice  | VSP Choice  |
| <b>Notes</b>       | When purchasing a package, cancelling dental will also cancel adult vision coverage and vice versa                    | Stand-alone adult vision offers two premium payment options, monthly & annual   |

Auto pay is no longer available for annual vision plans

Thank  
you!