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# 2025 INDIVIDUAL MEDICARE ADVANTAGE

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PRODUCTS AND INFORMATION IS PENDING CMS APPROVAL

**Blue Cross Blue Shield of Michigan and Blue Care Network** are committed as ever to helping our members and customers in Michigan and across the country. Our efforts include working with our health care providers on increasing the efficiency and quality of care and offering innovative products to our customers.

We aspire to be clear and simple, to help you make the right choices, to offer valuable coverage, and to help you get quality health care for you and those you love.

**For our social mission, we commit to:**

- Increasing access to affordable health care
- Enhancing the quality of care patients receive
- Improving the health of Michigan’s citizens and communities

**BCBSM/BCN Medicare Advantage:**

- 6 PPO plans offering coverage in all 83 Michigan counties
- 4 HMO plans offering coverage in 70 Michigan counties, with 3 plans offering coverage in Southeast Michigan and select counties

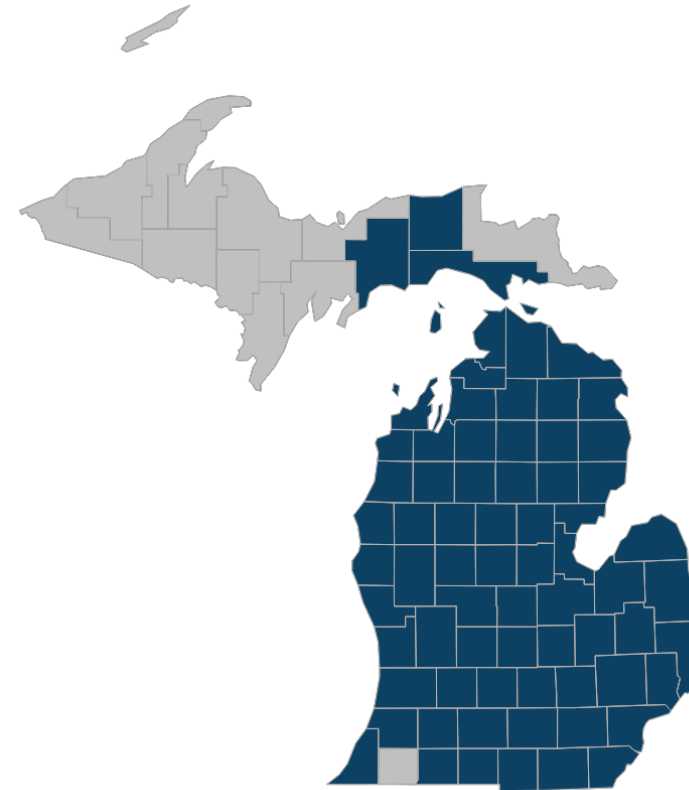
**As we’ve been for almost a century, Blue Cross is here and ready to help.**

## 6 Statewide PPO Plans



- Essential
- Meijer
- Part-B Credit
- Vitality
- Signature
- Assure

## 4 Broadly Available HMO-POS Plans



- Prime Value
- Elements (MA-Only)
- Classic
- Prestige

No changes to Community Value, Local, or ConnectedCare footprint.

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Blue Cross Blue Shield of Michigan is a nonprofit corporation and independent licensee of the Blue Cross and Blue Shield Association.

# 2025 Plan Highlights

## Plan Updates

## Regulatory Updates

## Formulary Updates

## Agent Updates

\$0

**Premiums** on all plans with \$0 premiums in 2024

\$0

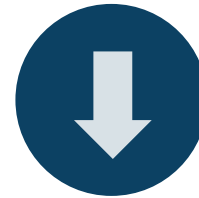
**PCP copays** on all plans

\$0

**Medical deductible** on all plans, except Part B Credit

\$0

**Drug deductible** on all MAPD plans



**Premium decreases** on all premium based plans, except Assure



**SilverSneakers** available on all plans



**Dental, Vision, and Hearing** same or better coverage on all plans



**OTC + Food remains** on all plans, except Part B Credit. Quarterly rollover removed

Plan Updates

Regulatory Updates

Formulary Updates

Agent Updates

## Benefit adjustments relative to 2024: Number of Plans Increasing, Decreasing or Maintaining Costs

Benefit	Increasing	Maintaining	Decreasing	Notes
Inpatient Hospital per day Copay	2	10	1	All plans moving from copay for days 1-6 to days 1-7
ER Copay	13	-	-	Urgent care copay is maintaining or decreasing on all plans
SNF per day Copay	13	-	-	
Specialist Copay	3	4	6	Maximum \$5 increasing. Decreases between \$5 and \$10
MOOP	2	9	2	
Ambulance Copay	8	5	-	
OSB	13	-	-	PPO OSB is increasing by [\$1.30] and HMO/HMO POS OSB is increasing by [\$0.20]

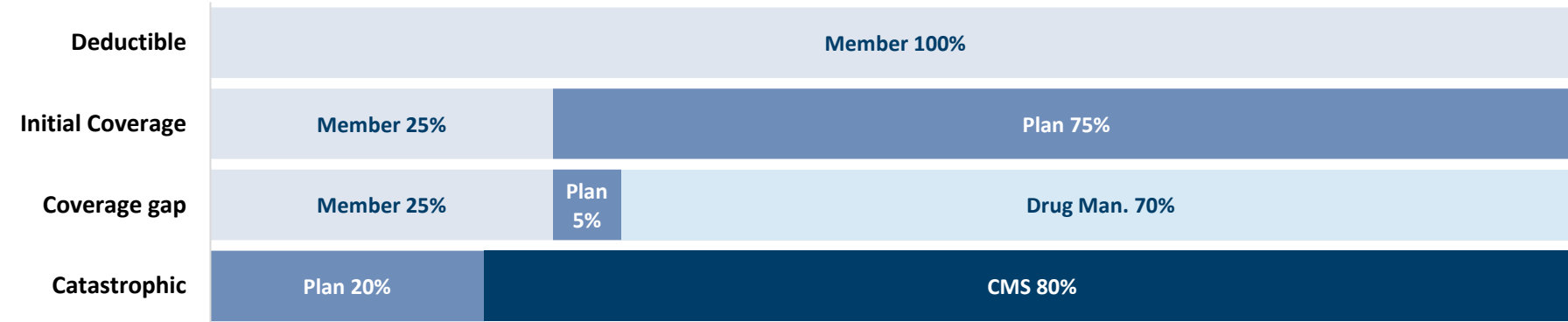
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# Inflation Reduction Act

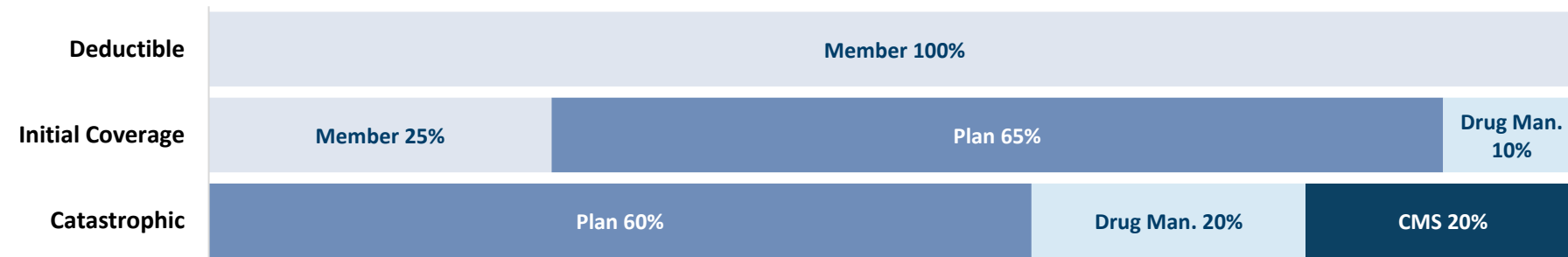
Plan Updates	Regulatory Updates	Formulary Updates	Agent Updates
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## 2024



Out of pocket maximum for Part-D is \$2,000 for 2025, after that member enters catastrophic stage.

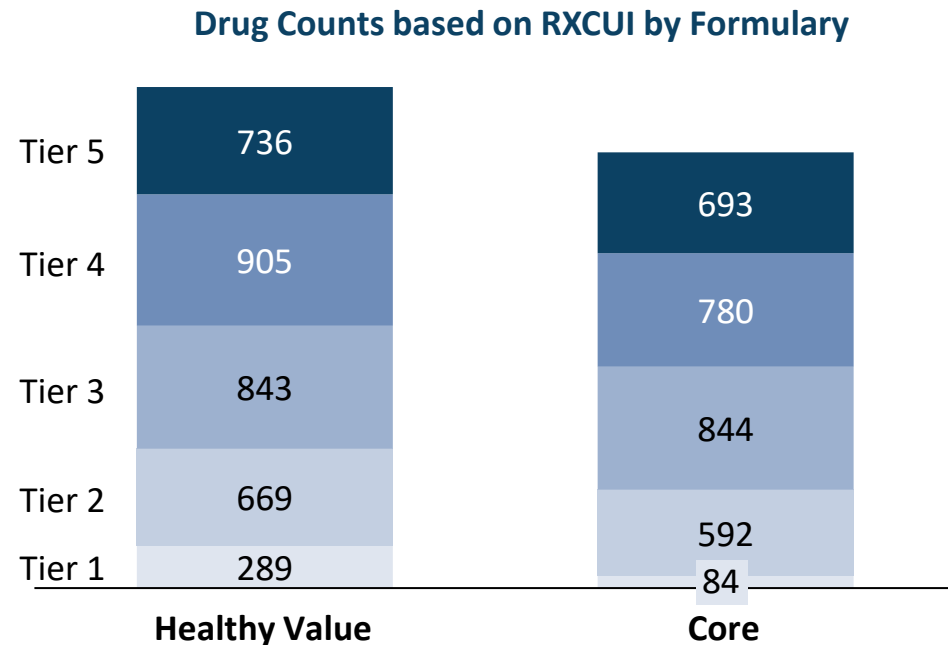
## 2025



Plans and drug manufacturers will pay a larger portion in the catastrophic stage in 2025, while CMS will pay less.

Plan Updates	Regulatory Updates	<b>Formulary Updates</b>	Agent Updates
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- Two formularies for 2025, called Healthy Value and Core.
- Healthy Value has over 400 more drugs covered than Core. It also has more drugs covered in Tiers 1 and 2
- The additional drugs covered come from many different classes, giving members more treatment options to choose from



Plan Name	2025 Formulary
<b>Medicare Plus Blue PPO</b>	
Part B Credit	Core
Meijer	Core
Essential	Core
Vitality	Healthy Value
Signature	Healthy Value
Assure	Healthy Value
<b>BCN Advantage HMO-POS</b>	
Elements	N/A
Classic	Healthy Value
Prestige	Healthy Value
Prime Value	Core
Community Value	Core
<b>BCN Advantage HMO</b>	
Connected Care	Core
Local	Core
<b>Prescription Blue PDP</b>	
Premium	Core
Select	Core

# Medicare Prescription Payment Plan (M3P)

Plan Updates	Regulatory Updates	Formulary Updates	Agent Updates
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*Example of a low drug cost in January and high cost in February reaching their Part D OOP threshold*

Month	OOP Cost Incurred	Maximum Monthly Cap	Monthly Participant Payment	Remaining Balance
January	\$4.00	\$166.67	\$4.00	\$0
February	\$1,996.00	\$181.45	\$181.45	\$1,814.55
March	\$0	\$181.46	\$181.46	\$1,633.09
April	\$0	\$181.45	\$181.45	\$1,451.64
May	\$0	\$181.46	\$181.46	\$1,270.18
June	\$0	\$181.45	\$181.45	\$1,088.73
July	\$0	\$181.46	\$181.46	\$907.27
August	\$0	\$181.45	\$181.45	\$725.82
September	\$0	\$181.46	\$181.46	\$544.36
October	\$0	\$181.45	\$181.45	\$362.91
November	\$0	\$181.46	\$181.46	\$181.45
December	\$0	\$181.45	\$181.45	\$0
<b>Total</b>	<b>\$2,000</b>		<b>\$2,000</b>	

**This payment option *might* be helpful for you if:**

- You have high out-of-pocket drug costs
- You prefer to spread out what you'll pay each month across the year (January-December)

**Note: This payment option might help you manage your expenses, but it doesn't save you money or lower your drug costs.** Visit [Medicare.gov/basics/costs/help/drug-costs](https://www.Medicare.gov/basics/costs/help/drug-costs) to learn about programs that can help lower your drug costs.



# Medicare Prescription Payment Plan (M3P)

Plan Updates	Regulatory Updates	<b>Formulary Updates</b>	Agent Updates
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*Member not likely to benefit with low monthly OOP costs*

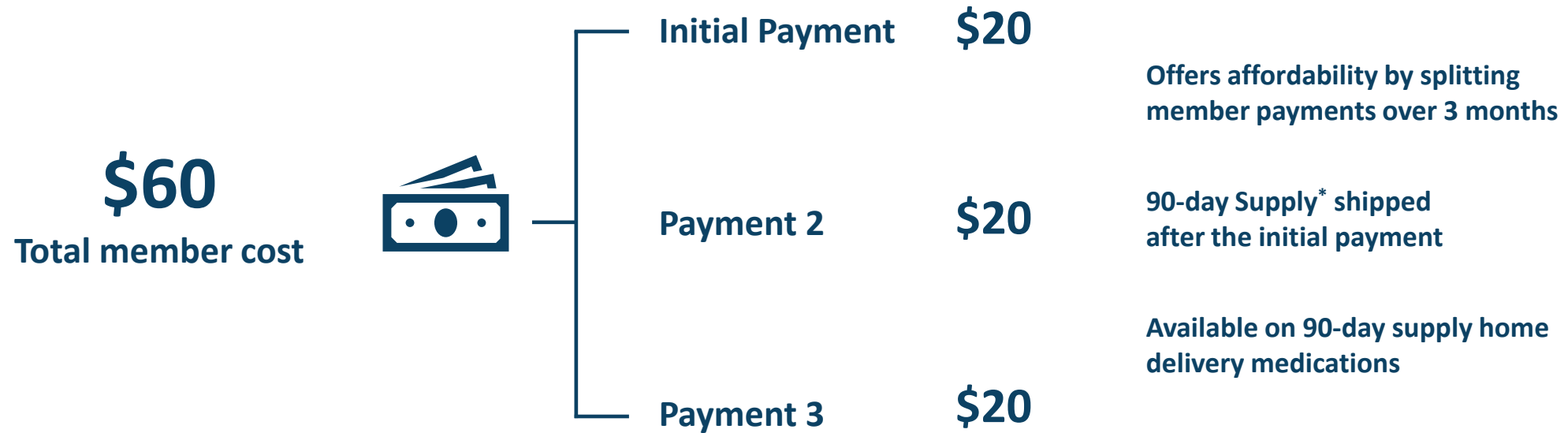
Month	OOP Cost Incurred	Maximum Monthly Cap	Monthly Participant Payment	Remaining Balance
January	\$55.00	\$166.67	\$55.00	\$0
February	\$55.00	\$5.00	\$5.00	\$50.00
March	\$55.00	\$10.50	\$10.50	\$94.50
April	\$55.00	\$16.61	\$16.61	\$132.89
May	\$55.00	\$23.49	\$23.49	\$164.40
June	\$55.00	\$31.34	\$31.34	\$188.06
July	\$55.00	\$40.51	\$40.51	\$202.55
August	\$55.00	\$51.51	\$51.51	\$206.04
September	\$55.00	\$65.26	\$65.26	\$195.78
October	\$55.00	\$83.59	\$83.59	\$167.19
November	\$55.00	\$111.10	\$111.10	\$111.09
December	\$55.00	\$166.09	\$166.09	\$0
<b>Total</b>	<b>\$660</b>		<b>\$660</b>	

**This payment option *might not* be helpful for you if:**

- You get Extra Help from Medicare
- You qualify for a Medicare Savings Program
- You get help paying for your drugs from other organizations, like a State Pharmaceutical Assistance Program (SPAP) or other health coverage
- Your yearly drug costs are low
- You’re considering signing up for the payment option late in the calendar year (after September)
- You don’t want to change how you pay for your drugs

## Split the copay for a 90-day mail order supply into 3 equal payments

### Optum Home Delivery Easy Payment Plan benefits



\*Exclusions do apply; certain controlled substances will be limited to a 31-day supply with home delivery.



Offers affordability options



Improves client satisfaction



Encourages adherence



Promotes Self-service



## BCBSM/BCN will be paying max commission amounts for 2025

### Individual Medicare Advantage

- Initial Year - \$626
- Renewal Years - \$313

### Prescription Drug Coverage

- Initial Year - \$109
- Renewal Years - \$55



## All MA PPO members will receive new ID cards before the end of the year

- New group number for all members, new enrollee ID for some members
- Members should begin using the new card starting Jan. 1, 2025



## Automatic premium payments changing from the 5<sup>th</sup> to the 1<sup>st</sup> of each month

- Automatic bank account withdrawals for premium payments are impacted by this change
- To change the way they pay, they can log into their member account at [bcbsm.com](https://bcbsm.com) or call customer service



## Grace periods for premium payments increasing from 2 to 3 months in January 2025

- Premium payments are due each month. However, everyone has a grace period to make these payments
- Members must pay the full premium amount due by the end of the grace period or they will be disenrolled from their plan
- If their only premium payment is for Optional Supplemental Benefits, they can downgrade by removing OSB