

## Welcome to the new High Deductible Health Plan!

As an employee enrolled in the new High Deductible Health Plan (HDHP), I would like to take this opportunity to welcome you and reintroduce you to the plan. The following should provide you with some helpful advice on how the plan works and should alleviate any anxiety you might have when using your new health coverage.

By now, you should have received your new BCBS member ID card(s) your subscriber ID beginning with the 3-letter prefix 'XXP' indicating the PPO Deductible Plan. **Please remember to update your medical providers and pharmacy with your new insurance information** to avoid any claims issues.

### High Deductible Health Plan - Plan Features and Highlights:

You have an upfront Annual Deductible of either \$2,000 for individual coverage or \$4,000 for family coverage (family coverage includes individual plus one or more family members). Remember, once you have met your annual deductible and continue to receive services in-network, most services will be covered in full except for office visits which require a \$15 co-payment.

Annual routine preventive visits and Rx co-payments are NOT part of the deductible or out-of-pocket maximum. These co-payments are always required by the member and should be paid at the time of service.

If you use **out-of-network** coverage, you are also subject to an Annual Out-of-Pocket Maximum of either \$5,000 or \$10,000 depending on coverage level. This annual maximum includes the annual deductible.

Remember, the HDHP is part of the PPO National Network which includes more than 90% of all practicing physicians and hospitals in the United States (not limited to Massachusetts like the HMO plans).

### Health Reimbursement Account

A Health Reimbursement Account (HRA) is being provided and funded by WHOI to cover the first 50% of the annual deductible upfront. So, an employee enrolled in individual coverage is eligible to receive reimbursement for the first \$1,000 spent on deductible services. For family coverage, reimbursement would be on the first \$2,000 spent on deductible services. Once the HRA is exhausted, you are responsible for the remainder of the annual deductible.

Recently, a welcome letter was mailed to you from Benefit Strategies confirming your enrollment in the HRA as well as login instructions to access your HRA account online (copy of sample letter attached). For those of you who are also enrolled in the Healthcare Flexible Spending Account, you will now be able to access both your HRA and FSA accounts with Benefit Strategies.

### How will I pay for my medical expenses under the HDHP?

- For covered annual routine preventive care services, you will only pay the \$15 office visit co-payment
- For Rx prescription drugs, you will only pay the required Rx co-payment (\$15/\$30/\$50)
- For services that are subject to the deductible, you should not pay anything at the point of service and follow these instructions:
  - o Pay nothing at the point of service \*
  - o Provider will submit claim to BCBS
  - o BCBS will process claim and submit an EOB (Explanation of Benefits/Claims Summary) to both you and the provider listing the 'allowable charges' to be paid to the provider

- Provider will then bill the patient for the total ‘allowable charges’ \*
- You then pay the provider directly (see additional instructions below for receiving your HRA reimbursement)

\* Some providers may request to collect the \$15 office visit co-payment at the point of service as part of their routine office practice procedures. If paid, please just be sure this amount is applied to and deducted from the provider bill.

### How will I receive my HRA reimbursement?

- Once BCBS processes your claim, they will automatically submit a file to Benefit Strategies
- Benefit Strategies (our third party HRA claims administrator), will check your HRA account to verify funds are available
- If HRA funds are available, Benefit Strategies will automatically disperse payment from the HRA account and a check will be mailed to you (you can also setup for direct deposit if you choose)

We understand this plan is new for many of you and will require a new way of thinking about how you use your healthcare. You are strongly encouraged to communicate with both your providers and BCBS throughout the year to ensure a smooth process and to avoid any unexpected claims issues along the way. Don’t be afraid to ask questions!

If you haven’t already, we strongly encourage you to sign up for the BCBS Member Self-Service for online access to view your personal claims data. The link is provided below.

In an effort to actively monitor the new High Deductible Health Plan and to further assist members in this plan, we ask that you provide feedback to us regarding your experiences (good or bad) using the new plan. Please feel free to contact any one of us from the Benefits Team; our contact information is listed below for your convenience.

### Important Contacts:

BCBS Member Services:	1-800-241-0803		
Benefit Strategies:	1-888-401-3539		
WHOI Benefits Team:	Linda Snow	Donna Hyman	Denise Cabral
	X 3763	X 3743	X 2217
	<a href="mailto:lsnow@whoi.edu">lsnow@whoi.edu</a>	<a href="mailto:dhyman@whoi.edu">dhyman@whoi.edu</a>	<a href="mailto:dcabral@whoi.edu">dcabral@whoi.edu</a>

### Related Links:

Link to Open Enrollment site for High Deductible Health Plan information:  
<http://www.whoi.edu/sbl/liteSite.do?litesiteid=21532&articleid=61346>

Link to BCBS ‘Blue Care Elect Deductible Plan’ summary:  
[http://www.whoi.edu/cms/files/HDHP\\_Plan\\_Summary\\_53303.pdf](http://www.whoi.edu/cms/files/HDHP_Plan_Summary_53303.pdf)

Link to BCBS Member Self-Service page:  
<https://www.bluecrossma.com/wps/portal/members>

Link to Benefit Strategies login page for accessing your HRA and/or FSA account:  
[http://www.benstrat.com/gateway\\_flex.html](http://www.benstrat.com/gateway_flex.html)