

Cape Cod Municipal Health Group Qualified High Deductible Health Plans



Agenda

- Consumer Driven Health Plans and You
- HMO/PPO Design Features
- Health Savings Accounts
- Q&A

HMO/ PPO Plan Basics

- The same network you are accustomed to
- HMO Plan requires PCP's and referrals for specialty care*
 - *Referrals not needed for OB/GYN, chiro, routine eye care and emergency room
- HMO members must stay within the provider network
- PPO Plan does not require PCP's or referrals for care
- PPO Plan allows for out of network care for which a member pays a deductible and 20% coinsurance.

Plan	PCP	Referral	In-Network	Out of Network
HMO	Yes	Yes	Yes	No
PPO	No	No	Yes	Yes

BCBSMA / HPHC Plans

HMO \$2,000

- \$2,000 Individual/ \$4,000 Family overall deductible
- All services (except preventative care and certain preventative drugs) are subject to the deductible
- Rx also subject to the deductible (except for some preventative drugs)
- Plan is paired with Employer/Employee funded Health Savings Account

PPO \$2,000

- In-network benefits the same as HMO
- No referrals to specialists required/ no designated PCP required
- Out of network services subject to coinsurance and overall deductible
- Plan is paired with Employer/Employee funded Health Savings Account

How It Works

Select preventive care is covered in full.

- Select routine office visits
 - Routine physicals for adults and children
 - Annual gyn
- Prenatal and post-partum care
- Immunizations
- Select disease screenings and tests
 - Mammogram and pap
 - PSA
 - Colorectal cancer screening
 - Routine blood work and urinalysis

Other services are subject to deductible.

- Diagnostics, including (but not limited to)
 - Non-preventive office visits
 - Imaging (x-ray, MRI, CT scan)
 - Non-preventive laboratory
 - Emergency services
- Treatments, including (but not limited to)
 - Inpatient services and day surgery
 - Emergency services
 - Outpatient therapies such as chemo and radiation
 - Behavioral and substance abuse counseling
 - Prescription drugs (except certain preventive drugs)

In-Network Deductible

Plan deductible:

- Individual: \$2,000
- Family: \$4,000
- No individual deductible on family contract

Once you meet the deductible, you incur the following cost sharing*:

- Prescription Drugs: \$10/\$30/\$65
\$25/75/\$165 (90 day mail)

*Certain preventive drugs are not subject to the deductible

Notes about Your Deductible

- You never pay more than the carrier's negotiated rate for services subject to deductible
 - Contracted providers cannot "balance bill" you the difference between their retail price and out contracted rate
- Typically, you don't pay for medical services at the time of service
- You should never pay a bill from a provider before confirming with the summary you receive from the carrier that the amounts match.

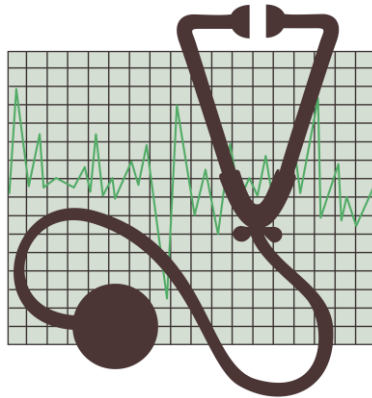
EXAMPLE #1

- You injure your knee
 - Doctor visit to diagnose = subject to deductible
 - MRI = subject to deductible
 - Day surgery = subject to deductible
 - Surgeon
 - Anesthesiologist
 - Facility
 - Follow-up physical therapy = subject to deductible



Example #2

- Routine annual physical = covered in full
- Routine blood work, flu shot and urinalysis= covered in full
- EKG and lab tests to check thyroid function = subject to deductible
- Consult with dermatologist to evaluate two moles = subject to deductible



Health Savings Account (HSA)

Health Equity -Partnership

Medical Plan:

BCBSMA/ HPHC

Health Savings Account (HSA):

Health Equity (HEQ)

Health Equity Partnership Advantages:

- Members can reach HEQ by reaching out to HEQ direct or by calling carriers
- BCBSMA/HPHC will transfer calls directly to HEQ during normal business hours
- HEQ offers dedicated customer service 24/7/365

The HealthEquity logo is displayed within a purple rectangular box. The text "HealthEquity" is in white, with "Health" in a standard sans-serif font and "Equity" in a bold sans-serif font, followed by a registered trademark symbol (®).

HealthEquity®

What is an HSA?

An HSA is...

a tax-advantaged savings account that can be used to pay for medical, dental, vision, and other qualified expenses now or later in life.



An HSA is your personal financial account—it's yours even if you leave your current job.



The funds in your HSA roll over from year-to-year



You can make additional contributions at any time during the plan year, up to the IRS limit.

You control the money in your account. Use it for eligible expenses today or save it for a later date. Use it for you, your spouse and your tax dependents

Triple Tax Advantages

The Triple Tax Advantage of HSAs

1

Tax Free

You don't have to pay federal income tax on money contributed to your HSA.

2

Grow Your Funds

Invest your HSA dollars for growth, and never pay taxes on earnings.

3

Stress-free Withdrawals

You won't pay taxes when you spend your HSA funds on eligible health care expenses.

Contribution Guidelines

In Order to Contribute:



You must:

- Be enrolled in an HSA qualified health plan



You must not:

- Have other health coverage (see IRS Publication 969) including: Medicare/Medicaid, or Tri-care
- Be enrolled in a Full Scope Health FSA (including through a spouse's plan) or have an FSA balance during the grace period
- Cannot be listed as a dependent on someone else's tax return

HSA Tax-Dependent Rule

- HSA funds can be used by a domestic partner only if they are considered the account holder's tax dependent
- When a child is no longer a tax-dependent but covered on a parent's High Deductible Health Plan, medical expenses incurred by that child cannot be paid with the parent's HSA funds.

Contribution Limits

Contributions into the HSA are limited annually as determined by the IRS

2023 Maximum Annual Contribution

\$3,850 – for accountholders with individual coverage

\$7,750 – for accountholders with family coverage

\$1,000 – catch-up contribution for accountholders 55+

You can contribute to your HSA through pretax payroll deductions.

Debit Card ?

Yes

- Contribution maximums are per tax year
- Employer and employee contributions count toward the maximum
- Employees who don't remain HSA-eligible for an entire tax year will have an adjusted contribution maximum

CARES ACT

Coronavirus Aid, Relief, and Economic Security Act

Expansion of qualified medical expenses

- **Over-the-Counter** products and medications are now reimbursable without a prescription
- Cost of **Menstrual Care Products** is now reimbursable

Eligible Expenses

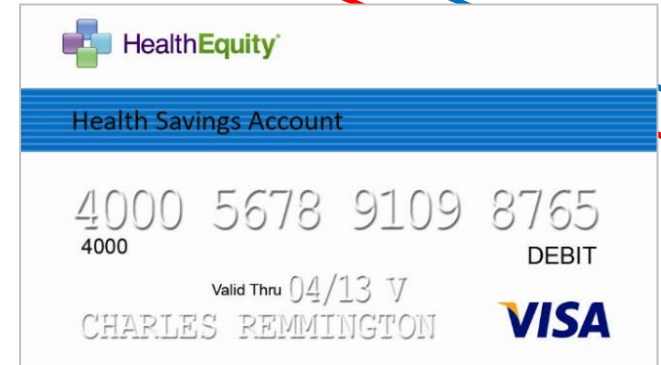
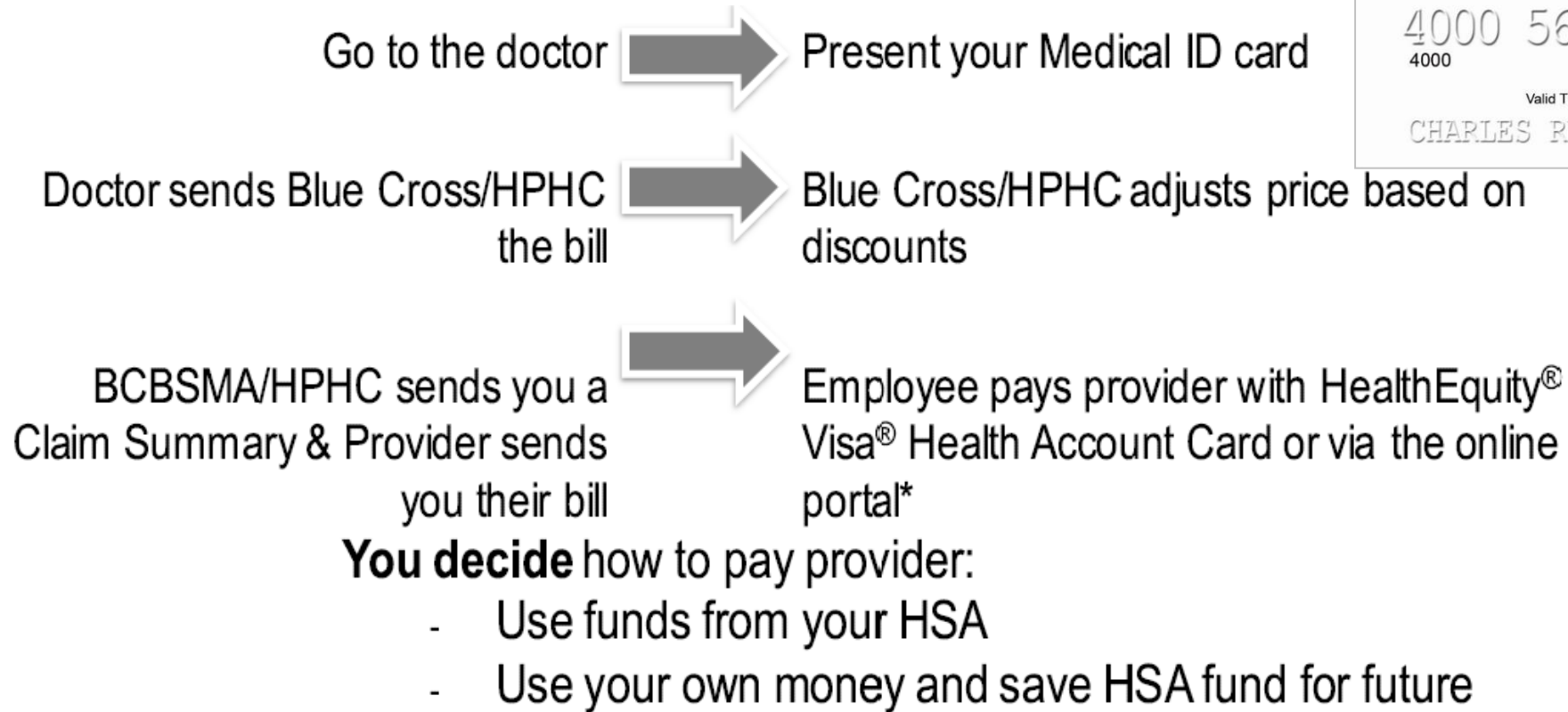
Get More From Your HSA

Your HSA can be used for more than you think—when considering how much to contribute to your account, keep these common eligible expenses in mind:

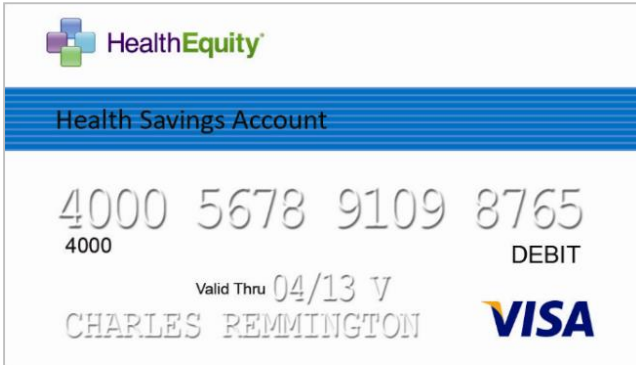
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|--------------------------|--------------------|------------------------|
| ▪ Health plan copayments | ▪ Deductibles | ▪ Vision |
| ▪ Acupuncture | ▪ Co-insurance | ▪ Dental care |
| ▪ Ambulance trips | ▪ Eyeglasses | ▪ Weight loss programs |
| ▪ Artificial teeth | ▪ Hearing Aids | ▪ Wheelchairs |
| ▪ Chiropractor visits | ▪ Surgery | ▪ Wigs |
| ▪ Contact lenses | ▪ Psychiatric care | ▪ X-rays |
| ▪ Prescription drugs | ▪ Pregnancy | |

For a full list of HSA eligible expenses, please refer to IRS Publication 502.

Spending Your HSA: Medical Care



Spending Your HSA: Prescriptions



Go to pharmacy



Show Medical ID card

Pharmacy applies discount



Pay with HSA card

Pharmacy sends claim to Blue Cross/HPHC



Blue Cross/HPHC applies amount to your deductible – no paperwork needed

You decide how to pay provider:

- Use funds from your HSA
- Use your own money and save HSA fund for future

Investment Options- Grow HSA Funds

Deposit Account

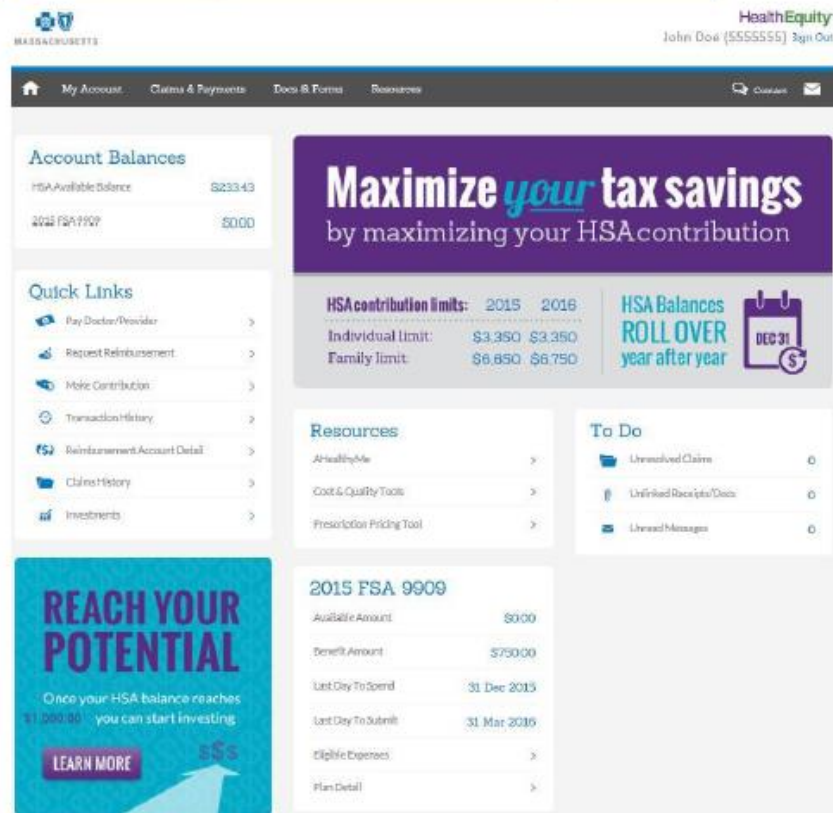
- Insured by the Federal Deposit Insurance Corporation (FDIC)

Investment Opportunity

- \$2,000 minimum deposit account balance must be reached and maintained to invest future contributions
- Health Equity mutual funds available for investment from conservative to aggressive
- Mutual fund investments are not insured

HSA Member Portal

www.mythealthequity.com



Use your HealthEquity member portal to:

- Check your balance
- Review claims & transactions
- Submit claims or documents
- Pay your providers
- Reimburse yourself
- Access tax documents



Use your HealthEquity mobile app to:

- Get on the go access
- Take a photo of documentation and link to claims
- Send payments & reimbursements from HSA
- View claims status



Questions?

HealthEquity

- Call HealthEquity toll-free number 877-694-3938
- Available 24/ 7/365!
- Check out www.myhealthequity.com

Blue Cross Blue Shield of Massachusetts/ Harvard Pilgrim Health Care

- Call Member Service toll-free number on your ID card
- Visit the health plan website