

Health Insurance Marketplace

All Blue 2014 Workshops



of Tennessee

BlueCross BlueShield of Tennessee, Inc., an Independent Licensee of the BlueCross BlueShield Association

Agenda



+ 2014 Marketplace Performance

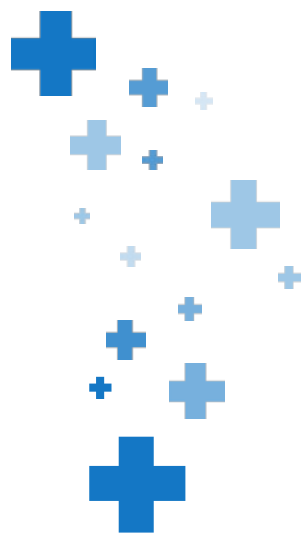
- Financial Assistance
- Impact on Uninsured
- Individual Market Demographics
- Membership by Service Area
- Membership by Previous Coverage
- Membership by Network/Metallic Level

+ Provider Questions

+ Education Campaigns

- Marketplace Resources
- Know Then Go
- Shop Smart

+ What to Expect in 2015



2014 Marketplace Performance

Health Insurance Marketplace

Marketplace Performance in 2014

Health Insurance Marketplace

- + BlueCross BlueShield of Tennessee data¹ shows **129,948** Tennesseans selected a Marketplace plan as of **May 27, 2014**.
- + An estimated **88 percent** of the Marketplace plans issued in Tennessee are BlueCross plans.
- + BlueCross had the **12th largest Marketplace enrollment** in the U.S. among states with a federal Marketplace.
- + Thousands of previously uninsured Tennesseans now have the peace of mind that goes along with health coverage.

¹ BCBST data as of May 27, 2014

Marketplace Performance – Financial Assistance

Health Insurance Marketplace

80%

of our Marketplace
subscribers receive a
subsidy

\$265

average monthly subsidy

64%

of our Marketplace
members have a Cost
Share Reduction plan

Subsidies were critical to a member's ability to afford a health plan purchase.

Individual Market – Previously Uninsured

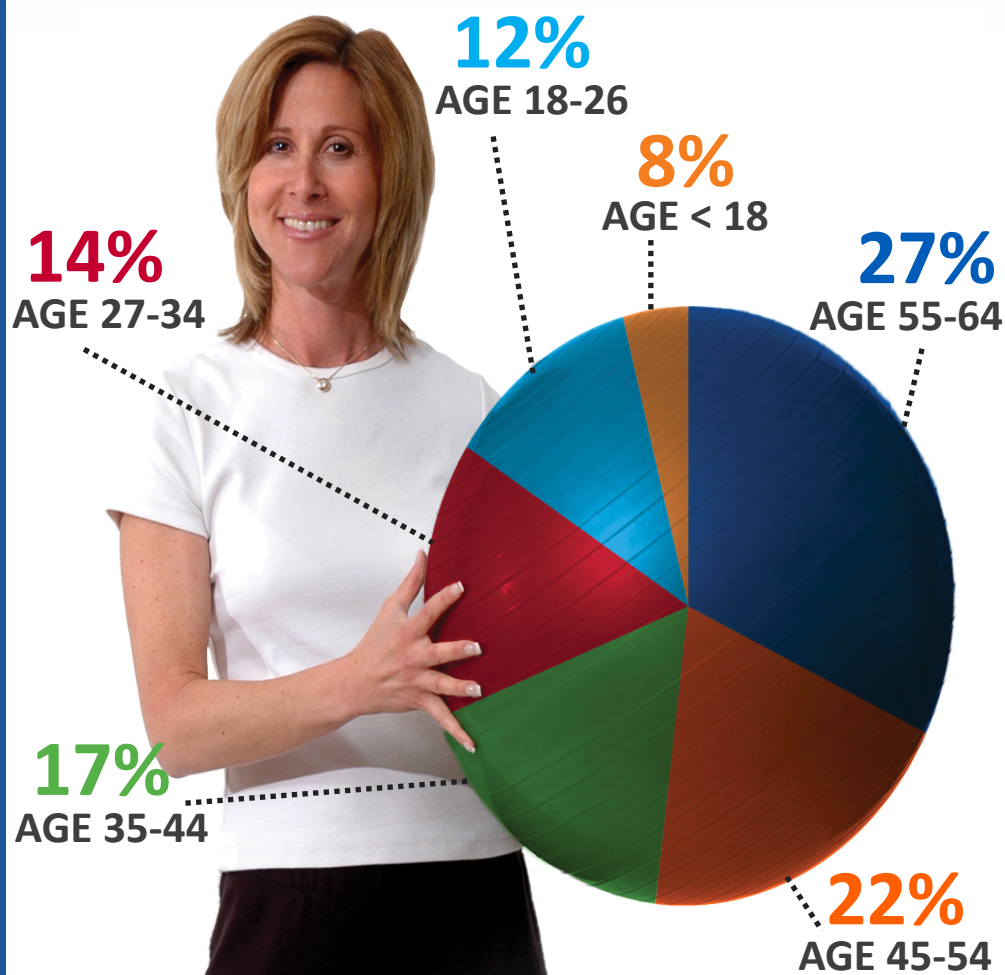
Health Insurance Marketplace

Estimated Percent of Uninsured Enrolled	
NATIONAL AVERAGE	13.6%
TENNESSEE	15.2%
RANK	19
BLUE CROSS PROJECTED MARKET SHARE	88.5%

BlueCross is largely responsible for the state's Marketplace success with comprehensive coverage and affordable pricing.

Individual Market – Demographics

Health Insurance Marketplace



251,459

ON & OFF MARKETPLACE
INDIVIDUAL MEMBERS

54%

ARE FEMALE

49%

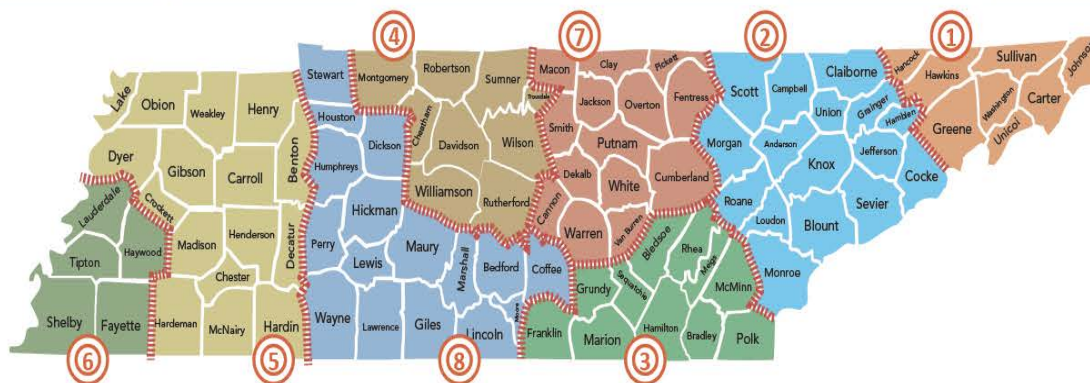
ARE 45-64

*BlueCross demographics
are similar to national
averages.*

Individual Market – Membership by Service Area

Health Insurance Marketplace

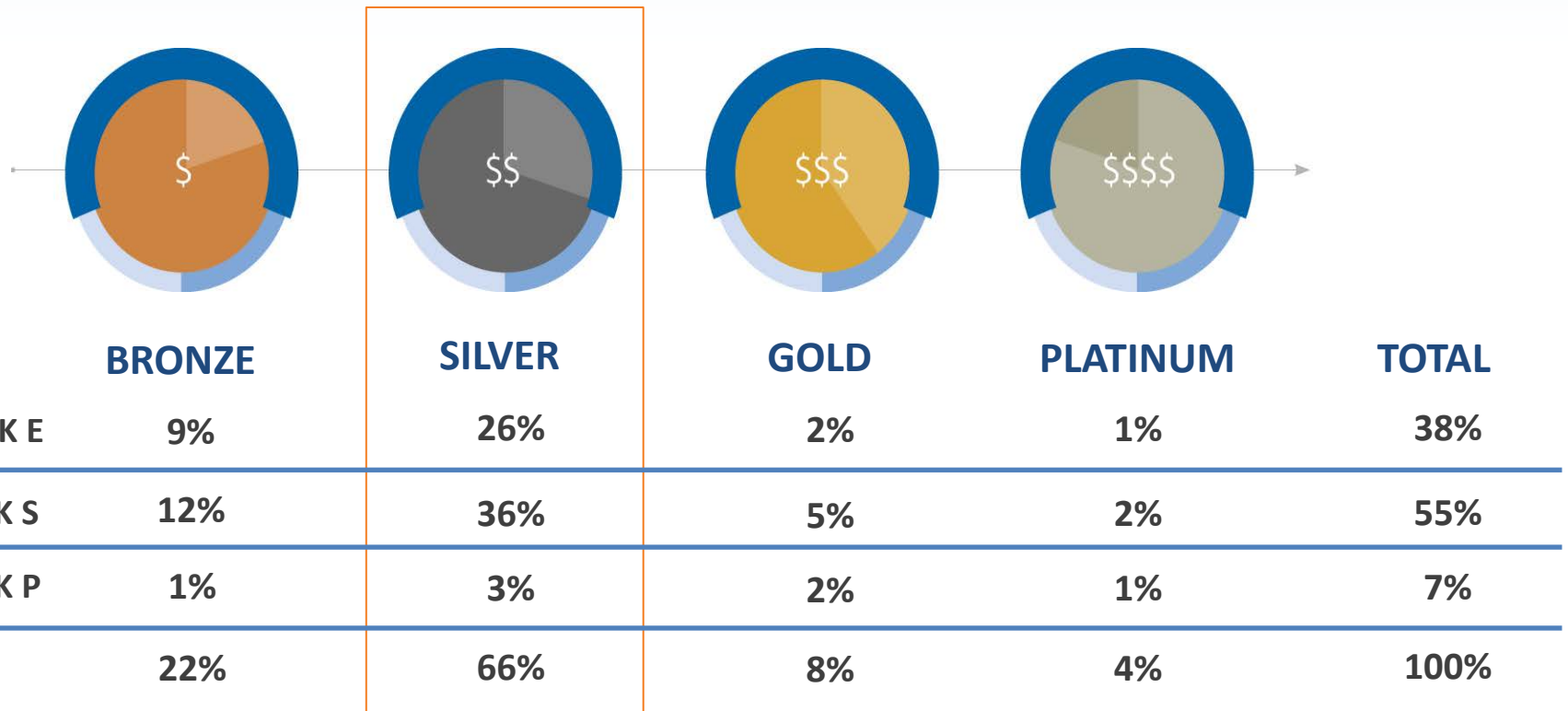
	①	②	③	④	⑤	⑥	⑦	⑧
	EAST	KNOX.	CHATT.	NASH.	WEST	MEMPHIS	E. CTRL.	W. CTRL.
Members	12,232	27,681	18,967	53,361	12,075	22,633	9,764	12,750
Distribution	7%	16%	11%	31%	7%	13%	6%	8%



One out of three Marketplace members lives in the Nashville region.

Individual Market – Membership by Network & Metal Level

Health Insurance Marketplace



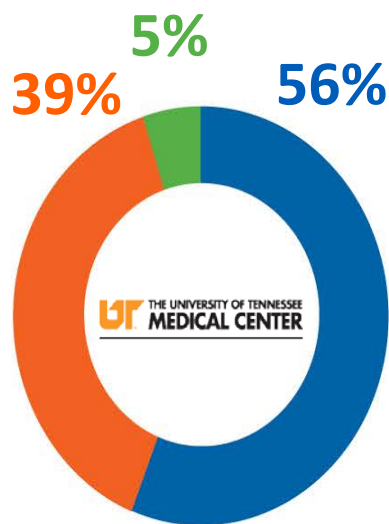
66% of On- and Off-Marketplace members have selected a Silver plan.
55% bought Blue Network S and 38% bought Blue Network E.

Network Membership in Blue Network E Service Areas

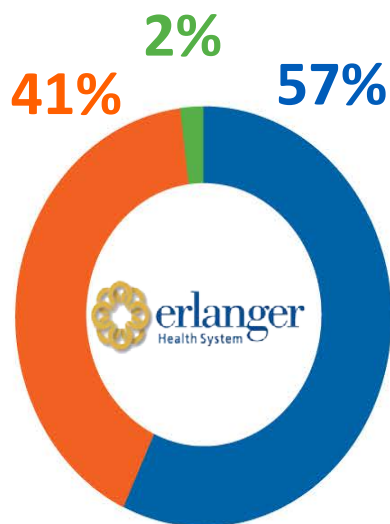
Health Insurance Marketplace

- + BlueCross members can purchase Marketplace plans that feature Blue Networks P, S or E.
- + Blue Network E is only available in four regions, and members must seek care from providers in any of those regions to receive “in-network” benefits. It is only available for plans sold through the Marketplace.

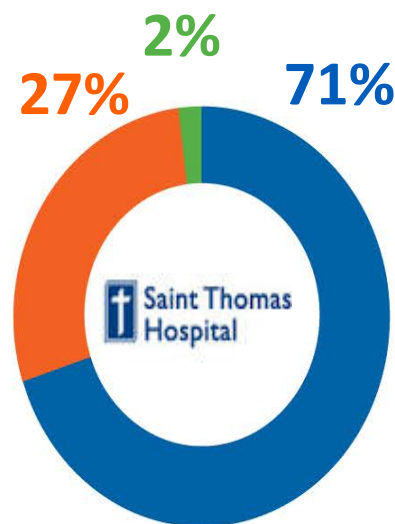
GREATER KNOXVILLE



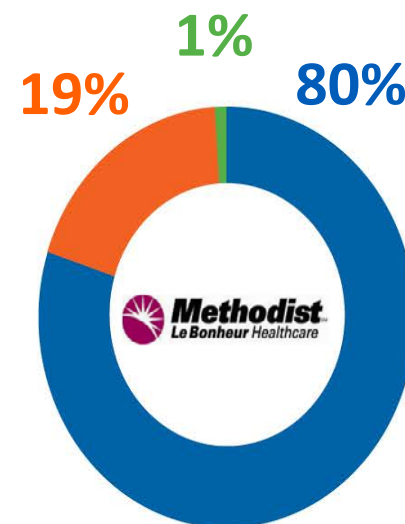
CHATTANOOGA



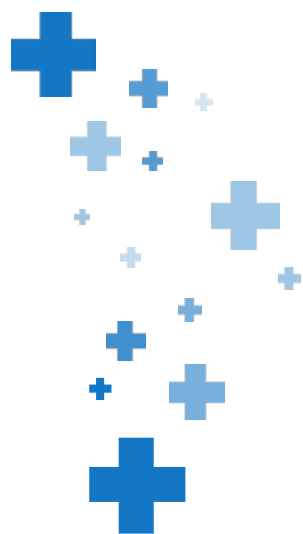
GREATER NASHVILLE



GREATER MEMPHIS



● BLUE NETWORK E ● BLUE NETWORK S ● BLUE NETWORK P



Common Provider Questions

Health Insurance Marketplace

Common Provider Questions

Health Insurance Marketplace

+ Out-Of-Network Benefits

All BlueCross plans include out-of-network benefits, as well as national and worldwide coverage through BlueCardSM, which applies when traveling outside Tennessee.

Providers will be reimbursed up to the standard Maximum Allowable Charge (MAC), which is based on a statewide standard out-of-network reimbursement schedule.

Blue Network E features the same medical emergency benefits as any other commercial network.

Out-of-network benefits are reimbursed the same way they are today.

Common Provider Questions

Health Insurance Marketplace

+ Grace Period Requirements

Members who purchased a Marketplace plan through HealthCare.gov and received Advanced Premium Tax Credits now have a 90-day grace period if they don't pay their monthly premiums.

Individuals must pay their first month's premium before receiving any coverage.

BlueCross pays for claims processed during the initial 30 days of non-payment.

BlueCross uses multiple ways to communicate when someone is in the grace period (i.e., online notification, via phone service team, provider letter and notice on remittance advice).

Common Provider Questions

Health Insurance Marketplace

+ Billing Practices & Guidelines

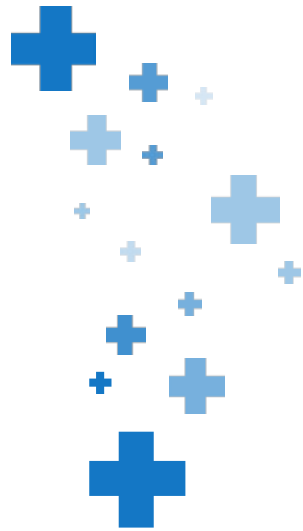
Providers may request payment for service up to the member's cost-sharing amount.

Providers may not collect retainer fees or payment of service in full for any covered service from any BlueCross member.

Providers may bill members for any services provided during days 31 – 90 of the member's grace period only if the premium isn't paid in full within the grace period.

As with any other commercial network, providers should verify benefits and eligibility before charging any member a copay, deductible or coinsurance up front.

Billing guidelines for Blue Network E are the same as for other commercial networks.



Education Campaigns

Health Insurance Marketplace

Education Campaigns

Health Insurance Marketplace

+ Marketplace resources for providers

www.bcbst.com/providers/health-insurance-marketplace.page

+ Know Then Go

- Highlights the importance of understanding provider networks and the associated potential costs savings

+ Phone Support

- Help a client:
1-888-257-0996
- For providers:
1-800-924-7141
- For members:
1-800-565-9140



Education Campaigns

Health Insurance Marketplace

+ Shop Smart

- Online education at bcbst.com/knownow
 - Find list of FFM*-certified brokers appointed by BlueCross
 - Locate community meetings
 - Get information about instant quotes and subsidy calculations
 - View animated videos

of Tennessee

EMPLOYERS PROVIDERS BROKERS CONTACT US EN Español

Get Insurance Manage My Plan Health & Wellness Why Choose Blue?

Log In/Register to BlueAccess

Shop for Plans Individual & Family Plans

Home > Get Insurance > Individual & Family Plans > Shop Smart on Healthcare.gov

How to: Shop Smart on Healthcare.gov

When it comes to important things like your health care, one of the best things you can do is be a "smart shopper." And that means knowing as much as you can - so you can make an informed decision and choose an insurance plan that meets your needs.

There's helpful information in every plan name:

- Bronze & Metal Level -- Bronze, Silver, Gold or Platinum
- Metal Level Plan Number
- Network Choice -- E (Skinny), S (Narrow) or P (Broad)

Check the Name

Your search for a health insurance plan at Healthcare.gov will turn up pages of results, and each result will have a unique plan name. It's crucial to know what the name means, because there is information in it that can help you make your selection.

The plan name will include the insurance provider, but also the "metal level" and network name, so you know the level of coverage provided for the price - as well as the provider network available.

Understanding Blue Networks

Price is Just The Start

You shouldn't choose a plan based on price alone. Balancing your health insurance needs and your budget is possible - if you shop smart.

For example, consider whether you'd rather pay a higher monthly premium and lower co-pays at your doctor, or a lower monthly premium and higher co-pays. Another question to think about is whether the network of providers has the doctors and hospitals you want.

Choosing a Plan

Find Your Doctor

Once you've identified a plan (or plans) that meet your needs and budget, make sure your doctors and preferred hospitals (and other providers) are in the network you like.

Not all doctors and hospitals participate in all networks, so it's very important to use our provider search tool to confirm your doctor or hospital is in network. Find out more about how to use our provider search tool to find out whether your doctor or hospital is in the network for the plan you want.

Provider Directory

Contact a Broker

Find a Marketplace Certified Broker in your area.

Download Broker List

Attend a Community Meeting

Attend a meeting in your area and get your questions answered!

Find A Meeting

Why Choose Blue?

We've been there for Tennesseans since 1945 - and we'll be here for you, too.

Why Choose Blue

Find a Doctor

Hospital Quality Comparison

Price a Drug

Download myBlue TN App

Log In to BlueAccess

What to Expect in 2015

Health Insurance Marketplace

- + More competition statewide with health plan issuers (Community Health Alliance and Assurant) extending coverage in more regions across the state; BlueCross was the only Qualified Health Plan (QHP) in 2014 to offer plans in every region
- + New QHP's in the market (Assurant)
- + Rate adjustments
- + New plan offerings by BlueCross and other QHP's