

MEDICARE ADVANTAGE



South Carolina

*BlueCross BlueShield of South Carolina
is an independent licensee of the
Blue Cross Blue Shield Association.*

AGENDA

- 2023 Benefits
- Reminders
- Resources



2023 BENEFITS



2023 BENEFITS

BlueCross Total	2022	2023
Deductibles		
In-network & Out-of-network	\$0	No change
Out-of-Pocket Maximum		
From in-network providers:	\$6,500	No change
From in-network & out-of-network providers combined	\$10,000	No change
Services		
Outpatient office visits	INN - \$5 copay (PCP) INN - \$45 copay (Specialist) OON - \$30 copay (PCP) OON - \$55 copay (Specialist)	INN - \$0 copay (PCP) INN - \$30-40 copay (Specialist) OON - \$30 copay (PCP) OON - \$55 copay (Specialist)
Inpatient hospital – Acute	INN - \$420 copay, per day (1-4) INN - \$0 copay, per day (5-90) OON - 30% COINS for total stay	INN - \$350 copay, per day (1-4) INN - \$0 copay, per day (5-90) OON - 30% COINS for total stay
Inpatient hospital – Psychiatric	INN - \$465 copay, per day (1-4) INN - \$0 copay, per day (5-90) OON - 30% COINS for total stay	INN - \$624 copay, per day (1-4) INN - \$0 copay, per day (5-90) OON - 30% COINS for total stay

2023 BENEFITS

BlueCross Total	2022	2023
Services (cont'd)		
Skilled nursing facility (SNF)	INN - \$0 (days 1-20) INN - \$184 copay (days 21-100) OON - 30% COINS for total stay	INN - \$0 (days 1-20) INN - \$196 copay (days 21-100) OON - 30% COINS for total stay
Urgently needed services	INN & OON - \$50 copay, per visit	No change
Worldwide Emergency/Urgent Coverage	\$250 service specific deductible, then 20% COINS for emergency care outside the United States	No change
Ambulance services (Ground or air)	INN & OON - \$295 copay, per trip	No change
Hearing aids	\$699-\$999 using TruHearing Two per year (one per ear)	No change
Preventive dental (Fluoride treatment not covered)	INN - \$0 copay (two, per year) OON - 50% COINS	No change \$3,000 maximum (combined)
Comprehensive dental (Medicare covered services)	N/A	INN - \$50 copay OON - 40% COINS \$3,000 maximum (combined)
Comprehensive dental (non-covered Medicare services)	INN & OON - 50% COINS \$1,000 benefit maximum	No change \$3,000 maximum (combined)

2023 BENEFITS

BlueCross Total Value	2022	2023
Deductibles		
In-network & Out-of-network	\$0	No change
Out-of-Pocket Maximum		
In-network	\$6,900	No change
Out-of-network	\$11,300	\$11,000 (Midlands/Coastal) \$11,300 (Upstate/Lowcountry)
Services		
Outpatient office visits	INN - \$0 copay (PCP) INN - \$40 copay (Specialist) OON - \$40 copay (PCP) OON - \$55 copay (Specialist)	INN - \$0 copay (PCP) INN - \$30 copay (Specialist) OON - \$40 copay (PCP) OON - \$55 copay (Specialist)
Inpatient hospital – Acute	INN - \$450 copay, per day (1-4) INN - \$0 copay (5-90) OON - 40% COINS for total stay	<i>Midlands/Coastal</i> INN \$350 copay per days 1-5 <i>Upstate/Lowcountry</i> INN \$375 copay per days 1-5 OON – 50% of total cost
Inpatient hospital – Psychiatric	INN - \$620 copay, per day (1-4) OON - 50% COINS for total stay	INN - \$624 copay, per day (1-4) OON - 50% COINS for total stay

2023 BENEFITS

BlueCross Total Value	2022	2023
Services (cont'd)		
Skilled nursing facility (SNF) (100 benefit day max, per year)	INN - \$0 (days 1-20) INN - \$188 copay (days 21-100) OON - 40% COINS for total stay	INN - \$0 (days 1-20) INN - \$196 copay (days 21-100) OON - 50% COINS for total stay
Emergency care	INN & OON - \$95 copay, per visit	No change
Worldwide emergency	\$250 service specific deductible, then 20% COINS for emergency care outside the United States	No change
Urgent care	\$50 copay	No change
Ambulance services (Ground or air)	INN & OON - \$275 per trip	INN - \$285 per one way trip OON - \$295 per one way trip
Hearing aids	\$699-\$999 using TruHearing Two per year (one per ear)	No change
Preventive dental	INN - \$0 copay (two visits per year) OON - 50% COINS	No change \$2,000 maximum (combined)
Comprehensive dental (Medicare covered services)	N/A	INN & OON - \$50 copay \$2,000 maximum (combined)
Comprehensive dental (non-covered Medicare services)	INN & OON - 50% COINS \$500 benefit maximum	No change \$2,000 maximum (combined)

2023 BENEFITS

BlueCross Secure — No out-of-network benefits.	2022	2023
Deductibles		
In-network	\$0	No change
Out-of-Pocket Maximum		
In-network	\$6,500	No change
Services		
Office visits	INN - \$5 copay (PCP) INN - \$40 copay (Specialist)	INN - \$0 copay (PCP) INN - \$30 copay (Specialist)
Inpatient hospital – Acute	INN - \$425 copay, per day (1-4) INN - \$0 copay (5-90)	INN - \$325 copay, per day (1-6) INN - \$0 copay (7-90)
Inpatient hospital – Psychiatric	INN - \$415 copay, per day (1-4) INN - \$0 copay (5-90)	INN - \$624 copay, per day (1-3) INN - \$0 copay (4-90)
Skilled nursing facility (SNF)	INN - \$0 copay (days 1-20) INN - \$188 copay (days 21-100)	INN - \$0 copay (days 1-20) INN - \$196 copay (days 21-100)
Urgently needed services	INN - \$40 copay, per visit	No change
Emergency care	\$95 copay, per visit (Waived if admitted within 24 hours)	No change

2023 BENEFITS

BlueCross Secure — No out-of-network benefits.	2022	2023
Services (cont'd)		
Worldwide Emergency/Urgent Coverage	\$250 service specific deductible, then 20% COINS for emergency care outside the United States	\$250 service specific deductible, then 35% COINS for emergency care outside the United States
Ambulance services (Ground or air)	INN - \$275 per trip	INN - \$285 per trip
Hearing aids	\$699-\$999 using TruHearing Two per year (one per ear)	No change
Preventive dental	Not covered	No change
Comprehensive dental (Medicare covered services)	INN - \$50 copay	No change

2023 BENEFITS

BlueCross Blue Basic	2022	2023
Deductibles		
In-network & Out-of-network	\$0	No change
Out-of-Pocket Maximum		
From in-network providers	\$4,900	\$6,000
From in-network & out-of-network providers combined	\$10,000	No change
Services		
Outpatient office visits	INN - \$0 copay (PCP) INN - \$35 copay (Specialist) OON - \$30 copay (PCP) OON - \$45 copay (Specialist)	No change
Inpatient hospital – Acute	INN - \$325 copay, per day (1-6) INN - \$0 copay, per day (7-90) OON - 30% COINS for total stay	No change
Inpatient hospital – Psychiatric	INN - \$620 copay, per day (1-3) OON - 30% COINS for total stay	INN - \$624 copay, per day (1-3) OON - 30% COINS for total stay

2023 BENEFITS

BlueCross Blue Basic	2022	2023
Services (cont'd)		
Skilled nursing facility (SNF)	INN - \$0 copay (days 1-20) INN - \$188 copay (days 21-100) OON - 30% COINS for total stay	INN - \$0 copay (days 1-20) INN - \$196 copay (days 21-100) OON - 30% COINS for total stay
Urgently needed services	INN & OON - \$0-\$40 copay	INN & OON - \$40 copay
Emergency care	\$90 copay, per visit (Waived if admitted within 24 hours)	No change
Worldwide Emergency/Urgent Coverage	\$250 service specific deductible, then 20% COINS for emergency care outside the United States.	No change
Ambulance services (Ground or air)	INN & OON - \$275 per trip	No change

2023 BENEFITS

BlueCross Blue Basic	2022	2023
Services (cont'd)		
Hearing Aids	\$699-\$999 using TruHearing 2 per year (one per ear)	No change
Preventive Dental (Fluoride treatment not covered)	INN - \$0 Copay (Two preventive visits) OON - 50% COINS	INN & OON - \$0 copay (Two per year) \$1,000 maximum (combined)
Comprehensive Dental (Medicare covered services)	N/A	INN - \$50 copay OON - 30% COINS \$1,000 maximum (combined)
Comprehensive dental (non-covered Medicare services)	INN & OON - 50% COINS \$750 benefit maximum	No change \$1,000 maximum (combined)

2023 BENEFITS

All Plans (Total, Total Value, Secure, & Blue Basic)	2022	2023
Services		
Annual wellness visit/Annual physical	\$0 Copay	No change
Lab work	\$10 copay, per lab	\$0 copay
Preventive screenings: <ul style="list-style-type: none"> • Colorectal cancer screening • Breast cancer screening • Bone mineral density tests • Diabetic eye exam • Eyeglasses and frames • Glaucoma screening 	\$0 Copay	No change
Part D specialty medication (Tier 6) (Total, Total Value and Secure plans)	N/A	\$0 copay for generic medications for diabetes, hypertension, cholesterol, and osteoporosis for 30- or 90-day supply at preferred or mail order pharmacy. Can refill medications earlier than other tiers.
Insulin savings program	\$35 copay	\$30 copay, 30-day supply (Total, Secure) \$35 copay, 30-day supply (Total Value)

2023 BENEFITS

Value-added benefits

- Silver and fit
 - Free basic membership to participating fitness centers or home fitness programs with fitness tracker (Fitbit)
- Transportation
 - 24-hour, one-way rides to physician offices, pharmacies, or grocery stores
 - Members can schedule rides through customer service, case management, or smartphone application
- Over the counter
 - \$35-55 copay per quarter
 - Orders can be placed by phone, online, or catalog
 - Members receive a Flex card for local pharmacies to purchase select items
- Post discharge meals
 - 10 free frozen meals after each inpatient discharge
 - Orders must be placed through the care management team

2023 BENEFITS

Value-added benefits (cont'd)

- Annual wellness incentive
 - All members receive a \$40 annual incentive after completing a wellness exam or physical
 - Received as additional money on the over-the-counter Flex card
- Concierge pharmacy services
 - For members that received a denial due to step therapy or prior authorization, or those who have difficulty obtaining medications
- Member health events
 - Members can attend local health events sponsored by BlueCross BlueShield of South Carolina
 - Includes free services
 - Allows members to speak with a BlueCross representative for assistance
 - Has games for social interactions

2023 BENEFITS

Medicare Part D Insulins

As part of the Inflation Reduction Act, **effective July 1, 2023**, members will pay up to a \$35 copay for a one-month supply of Part D insulins used in home infusion pumps.

- Applies to members with the Total, Total Value, Secure and Blue Basic plans
- Benefit will be available for in and out-of-network



Currently, the above insulins are covered for all members (except Blue Basic plan) up to a \$35 copay:



REMINDERS



REMINDERS

- Check the member's ID card to determine their plan type
- Follow Medicare guidelines at www.cms.gov for covered services
- Verify eligibility and benefits at each visit prior to rendering services
- Prior authorization requirements may differ from other plans
 - View the requirements and methods for obtaining authorization at www.SouthCarolinaBlues.com
 - *Providers>Medicare Advantage>Prior Authorization*
- When possible, always refer members to network participating providers
- Review the Medicare Advantage provider manuals for more information
 - Update: Section 3.8: Confidentiality and Data Use
 - Visit www.SouthCarolinaBlues.com

REMINDERS

Prior authorization

- Medical prior authorizations can be requested through My Insurance ManagerSM, phone or fax
- Faxed requests should be faxed to 803-264-6552 and include:
 - Member's name
 - Date of birth
 - ID card number including the prefix (ZHP or ZOH)
 - CPT/HCPCS code(s)
 - Diagnosis code(s)
 - Provider's NPI
 - Return fax number
 - Date(s) of service
 - Units, if applicable
 - Supporting clinical documentation

REMINDERS

Network sharing

- Allows Medicare Advantage (MA) PPO members from other Blue Plans to get in-network benefits
- Available in 48 states, District of Columbia and Puerto Rico
- Eligible members will have the following symbol on their ID cards:



Tips for accuracy:

- Verify eligibility for out-of-area MA PPO members using the BlueCard[®] Eligibility Line or through My Insurance ManagerSM.
- Submit claims for all BlueCross BlueShield members, regardless of state, to BlueCross Blue Shield of South Carolina.
- Review member care gap reports and pay attention to open quality care gaps and patient health concerns.
- Ensure documentation of completed services while patients are visiting from other states.

REMINDERS

CMS Stars ratings

- **Schedule** patients for Medicare Annual Wellness Exams annually
- **Document** all care in the patient's medical records
- **Code and bill** appropriately for services rendered and conditions addressed
- **Promote** medication adherence
- **Recommend** formulary alternatives, when necessary
- **Recommend** participation in disease management programs
- **Respond** to medical record requests (within five business days)



RESOURCES



RESOURCES

- [2023 Member ID Card Guide](#)
- [Medicare Advantage Authorization List](#)
- [BlueCross TotalSM PPO Provider Office Manual](#)
- [BlueCross SecureSM HMO Provider Office Manual](#)