

Healthy *Blue* Living HMO BasicSM



Blue Care
Network
of Michigan

Confidence comes with every card.®

Member Guide

Inside: How to keep your health care costs lower

Thank you for being a Healthy *Blue* Living HMO Basic member. This wellness plan helps you take charge of improving your health. You'll have a better understanding of your current health status and what you can do to receive lower out-of-pocket costs for the whole benefit year.



Understand the differences between benefit levels

Healthy *Blue* Living has two benefit levels — enhanced and standard.

The **enhanced level** has lower out-of-pocket costs, such as copayments, deductible and coinsurance.

The **standard level** has higher out-of-pocket costs, such as copayments, deductible and coinsurance.

How it all works

If you're **new to Healthy *Blue* Living HMO Basic**, you start at the enhanced level. To stay here, you must complete the tasks on your to-do list found on Page 3.

If in your previous plan year you were at:

- **The enhanced level:** You'll be mailed additional details about tasks you need to complete to remain at this benefit level.
- **The standard level:** Complete the tasks for this year to earn back the enhanced benefit level. See Page 6 to understand how the enhanced level saves you money.

Steps to take for the enhanced level

Healthy Blue Living to-do items only apply to you as the subscriber of the plan. Spouses and dependents on your plan don't need to complete the tasks; they're assigned to the same benefit level as you.

Be sure to complete each step below by the deadlines that are posted to your to-do list in your online member account at **bcbsm.com**.

You have the first **90 days** of your plan year to do **steps 1 and 2**.

STEP 01

See your primary care provider. Schedule an appointment for a health evaluation to have your doctor check these six health measures:

- a. Tobacco use (cotinine test not required)
- b. Body mass index
- c. Blood pressure
- d. Blood sugar
- e. Cholesterol
- f. Depression

After your evaluation, tell your doctor to submit your results electronically on a *Blue Care Network Qualification Form*. You'll want to make your appointment with your primary care provider in enough time to submit your qualification form. Qualification forms will be accepted for an office visit that occurred up to 180 days before your plan year began.

STEP 02

Complete an online health assessment. It takes about 10 minutes.

To take your health assessment:

1. Log in to your online member account at **bcbsm.com** using your computer or the web browser on your mobile device or tablet.
2. Click the *Take the Health Assessment* box.

Understand your *Blue Care Network Qualification Form*

The qualification form has six important health measures. During your appointment, your primary care provider will check and score each one:

- A** = You’ve met the recommended target.
- B** = You didn’t meet the recommended target, but you’ve agreed to take the right steps to improve the health measure.
- C** = You didn’t meet the recommended target, and you won’t commit to your doctor’s treatment plan.

The scores you receive on your qualification form won’t determine whether you’re at the enhanced or standard benefit level. However, you don’t need to complete the items on your to-do list each year if you score all As.

Health measure	Target to score an “A”
Tobacco	No tobacco use (cotinine test not required)
Weight	BMI under 30
Blood pressure	Below 140/90
Blood sugar	Fasting blood sugar or A1C at or below target
Cholesterol	LDL-C is below target (based on risk factors: <100, <130 or <160)
Depression	Any symptoms of depression are well-controlled

Your doctor’s office must electronically submit your qualification form

The paper qualification form you received with your guide serves only as an example.

They might not submit your qualification form right after your appointment. Log in to your account at **bcbsm.com** to check your to-do list a week after your appointment to confirm it’s been submitted. If not, call your doctor’s office to remind them you’re a Blue Care Network member with the Healthy *Blue* Living HMO Basic plan, and they need to submit the form to us before your deadline.

Your personal to-do list

Your online Healthy *Blue Living* HMO Basic to-do list is available through your account at **bcbsm.com**.

Use your computer or the web browser on your mobile device to log into your account. (The to-do list isn't available on our mobile app.) After you've logged in to your account:

1. Click *My Coverage* in the navigation menu.
2. Click *Medical* from the drop-down menu.
3. Click *To-do List*.

Your to-do list will show:

- If your contract is at the enhanced or standard level
- The tasks you've already completed and the date you did each one
- Your remaining tasks and the dates they're due
- Your qualification form results and how your doctor scored you on your health measures

Register your online member account at **bcbsm.com/register**

Log in to your account:

- View your *Member Handbook*, claims and explanation of benefit statements.
- Select or change your primary care provider.
- Check the status of your authorizations and referrals, and see when they expire.



What the enhanced level can mean for you

The example below can help you understand how the enhanced level works for your plan. These sample costs are meant to illustrate examples of the types of savings you could see; they're not specific to your plan. Other costs may apply in this scenario if other tests occurred and health issues were present. Log in to your account at **bcbsm.com** to view your plan documents. Your account also displays costs that are based on whether you're at the enhanced or standard level.

Meet Jennifer



Jennifer has Healthy *Blue* Living HMO Basic. She did her health assessment online and saw her doctor a month after her plan started. After Jennifer's visit, her doctor submitted her qualification form electronically to make sure we received it within the first 90 days of her plan year.

A trip to the emergency room

Jennifer tripped on her stairs at home. She was in severe pain after the fall and thought her ankle was broken, so she went to the emergency room.

By doing the items on her to-do list, Jennifer was at the enhanced level and **saved \$550 on her out-of-pocket costs.**

	Enhanced-level situation (completed to-do items)	Standard-level situation (incomplete to-do items)
Total cost for emergency room trip	\$3,000	\$3,000
Jennifer pays:		
Deductible	\$500	\$1,000
Copayment	\$100	\$150
Her plan pays	\$2,400	\$1,850
Jennifer's total cost	\$600	\$1,150

Your savings apply to all health care services

You don't just save on emergency room visits. Your out-of-pocket cost savings apply for trips to your doctor and urgent care, as well as prescriptions and other services that are part of your benefits, such as physical therapy.

If you, or someone you're helping, needs assistance, you have the right to get help and information in your language at no cost. To talk to an interpreter, call the Customer Service number on the back of your card.

إذا كنت أنت أو شخص آخر تساعد بحاجة لمساعدة، فلديك الحق في الحصول على المساعدة والمعلومات الضرورية بلغتك دون أية تكلفة. للتحدث إلى مترجم اتصل برقم خدمة العملاء الموجود على ظهر بطاقتك.

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Se tu o qualcuno che stai aiutando avete bisogno di assistenza, hai il diritto di ottenere aiuto e informazioni nella tua lingua gratuitamente. Per parlare con un interprete, rivolgiti al Servizio Assistenza al numero indicato sul retro della tua scheda.



Check your Healthy *Blue* Living HMO Basic to-do list by logging in to your online member account at **bcbsm.com** using a computer or the browser on your mobile device or tablet. Select *My Coverage* in the navigation menu, then *Medical* from the drop-down menu, then *To-do List*. Your deadline dates are posted here.

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