



INSURANCE PLANS



Information about different types of products

	Normal Medical Plans	Qualified Health Plans	Short-Term P
Monthly Cost	\$85.00	\$115.00	\$50.00
Medical check-up	No	No	Yes
Coverage	1 million	5 millions	500,000
Lifetime Maximum	3 millions	unlimited	1 millio
Co-insurance	10-20%	30-50%	Non



Blue Care
Network
of Michigan

Confidence comes with every card.®

Employer Guide

BCN HRASM HMO BLUE ELECT PLUS HRASM POS

A Blue Care Network health plan with a
health reimbursement arrangement



Combining your health plan with a health reimbursement arrangement

A **BCN HRA HMO** or **Blue Elect Plus HRA POS** health plan are cost-effective solutions with easy enrollment, less paperwork and hassle-free claims. They've been known to save groups more money every year as compared with regular HMO or point-of-service plans.

HEALTH PLAN



HEALTH REIMBURSEMENT
ARRANGEMENT



VALUABLE RESOURCES



WORRY-FREE HEALTH CARE

See **PAGE 1** for information about your BCN health plan.

See **PAGE 2** for information about a health reimbursement arrangement.

See **PAGE 4** for information about the many value-added benefits for employers and employees with a BCN plan.

Your BCN plan

Your plan combines a comprehensive Blue Care Network health plan with a health reimbursement arrangement that's funded by you and administered by Blue Care Network. Here's what it features:

- **Flexible plan design**
A quality benefit plan with an HRA will help your employees make responsible health care decisions.
- **Unmatched access to doctors and hospitals**
Our comprehensive provider network covers employees in Michigan. Some may also have coverage for traveling outside Michigan through the BlueCard® program, a coast-to-coast network of Blue plans.
- **One ID card**
Members carry one ID card with an HRA designation. They also receive a combined explanation of benefits statement that tracks their deductible and out-of-pocket costs and HRA balances.
- **Comprehensive benefits with preventive care**
A wide range of benefits provides protection in sickness and health, with an emphasis on preventive care.
- **Dedicated health support**
We offer care management, health education and wellness support. As well, there's personalized care management support for employees with specific needs.
- **A name you can trust**
Included with your plan is the Blue standard of excellence that our trusted symbols — the Cross and Shield — represent.

Our integrated solution additionally offers these benefits for your group:

- Cost savings through lower premiums
- No startup or administrative fees
- Tax advantages
- Pay-as-you-go HRA funding
- The convenience of using your regular financial institution
- Seamless integrated processing of medical and HRA claims
- Pay provider model that eliminates reimbursement hassle

Your health reimbursement arrangement

WHAT YOU NEED TO KNOW

The following table defines key terms you and your employees need to know and explains how your employees can use their HRA dollars.

HRA TERM	DEFINITION
Benefit year	This is the date you start funding the employee's HRA. The dollars in this account are available to the employee for 12 consecutive months from this date forward.
Eligible expenses	These are out-of-pocket expenses that the employee's HRA can be used for, as determined by you. Eligible expenses can be the medical deductible, medical coinsurance or a combination of the two.
HRA allocation	This is the amount you'll contribute to the employee's HRA.
Member allocation limit for a family contract	The maximum amount that any one person on a contract with two or more members is eligible to use during the benefit year.
Carryover	Amount of HRA dollars remaining at the end of one benefit year that may be carried over to the next benefit year for HRA-eligible expenses.

IT'S YOUR CHOICE

1. How much to allocate to the HRA and how the funds will apply to an individual or family
2. Whether the HRA covers a medical deductible, medical coinsurance or both
3. Whether the remaining HRA balance at the end of one benefit year carries over to the next
4. Which plan design works best for you and your employees. (see next page)

Understanding an HRA

SAMPLE PLAN DESIGNS

The four HRA plan designs, or payment arrangements, are shown below.

NOTE: These are only examples of how the plan designs work and aren't actual costs.

In each example, your employee has a \$3,000 medical deductible. The HRA is covering \$1,000 of medical deductible expenses. Your employee is responsible for the balance of the deductible.

HRA PAYS FIRST: HRA funds are used first to pay for HRA-eligible expenses until HRA funds are spent.			
HRA allowance: \$1,000	Medical deductible: \$3,000	Amount HRA pays first: \$1,000	Remaining amount employee pays: \$2,000

EMPLOYEE PAYS FIRST: Employee pays an HRA deductible before HRA funds are available.			
HRA allowance: \$1,000	Medical deductible: \$3,000	HRA deductible (amount employee pays first): \$2,000	Remaining amount HRA pays: \$1,000

HRA-EMPLOYEE SPLIT: Payment for HRA-eligible expenses is a split percentage between the HRA and the employee until HRA funds are spent.		
HRA allowance: \$1,000	Medical deductible: \$3,000	HRA-employee split (you choose the percentage split): Employee pays 60% and the HRA pays 40% toward eligible expenses until HRA dollars are spent. Once HRA dollars are spent, the employee may pay for additional out-of-pocket costs.

EMPLOYEE PAYS FIRST; HRA-EMPLOYEE SPLIT: Employee pays an HRA deductible before HRA funds are available. Then, payment for HRA-eligible expenses is a split percentage between the HRA and the employee until HRA funds are spent.			
HRA allowance: \$1,000	Medical deductible: \$3,000	HRA deductible (amount employee pays first): \$500	Employee pays first; HRA-employee split (you choose the percentage split): Employee must first pay \$500 before HRA dollars can be applied to eligible expenses. After requirement is met, employee pays 40% and the HRA pays 60% toward eligible expenses until HRA dollars are spent. Once HRA dollars are spent, the employee may pay for additional out-of-pocket costs.

Valuable resources for you ...

GROUP SECURED SERVICES

Using a secure, private, online account makes managing your health care plan easier. Log in to your employer account at **bcbsm.com** any time to access helpful tools and resources. Depending on your plan, you can:

- View group and member information, add and update member contracts, and request ID cards.
- Access your group account through eBilling.
- View, download and email benefit guides for employees.
- Receive wellness education materials to share with your employees.

BLUE CARE NETWORK AGENTS AND SALES REPRESENTATIVES

Talk with them for guidance. They can help you make the best choices for your business.

MI BLUE DAILY

Visit **mibluedaily.com**. You'll find help navigating today's changing health care landscape as well as the latest on news, products and resources for your business. Subscribe to get real-time updates sent to your inbox.



... and for your employees

Many value-added benefits are available to members who carry a BCN ID card. They can take advantage of all these useful programs and services to help them get the most out of their plan.

GET CONNECTED TO HEALTH AND WELL-BEING

Blue Cross Well-BeingSM delivers a comprehensive well-being experience that empowers members to make better decisions about their health and act on them. It also provides personalized guides for nutritious eating and restful sleep and assistance with adopting healthy habits.

Members can log in to their member account at **bcbsm.com** or our mobile app for:

- Personalized daily tip cards based on members' interests, health risks and demographics
- Seamless integration with more than 100 tracking devices and apps
- A checklist to help them stay on top of recommended preventive health care based on their specific needs
- A detailed health assessment with guidance for modifiable health risks
- Self-guided well-being courses called Journeys[®] to help build healthy habits that stick – and more.

MEMBER DISCOUNTS

A Blue Care Network health plan includes access to exclusive national and Michigan-based discounts on a variety of healthy products and services from groceries and fitness gear to travel and gym memberships. To take advantage of these offers, members can log in to their account at **bcbsm.com** and then click *Member Discounts with Blue365[®]*.

24-HOUR NURSE ADVICE LINE

Members can speak to a registered nurse 24/7, toll-free at **1-855-624-5214** or **711 (TTY)**. This free service helps members save time, money and unnecessary trips to the emergency room.

BCBSM.COM IS EASIER THAN EVER

When your employees create a member account at **bcbsm.com**, they'll have instant access to:

- A personal snapshot of their health care plan, where they can see their deductible status, referral status, recent claims activity and other important information
- Our *Find Care* feature, where they can select a primary care provider and compare quality information for doctors and hospitals based on what's important to them
- All medical, dental, pharmacy and vision plan information in one secure location

Your employees can get started by going to **bcbsm.com/register**.

They can also download our mobile app, by searching "BCBSM" at the App Store[®] or Google Play[™].



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