Clearwater Provider Network (CPN) presentation
October 17, 2016
Fiduciary Relationship; impact to existing Blue Cross contracts

• The QHP network contract will not impact your existing commercial or Medicare Advantage contracts with Blue Cross of Idaho
• The only population impacted will be members who chose an CPN network product effective January 1, 2017
• Primary Care Physicians and Specialists Physicians compensation will be a discount from current Commercial rates
• Primary Care is defined as physicians, including service extenders such as PAs and NPs, who have credentialed with Blue Cross as
  • Family Practice
  • General Internal Medicine
  • General Practice
  • Pediatrics and Obstetrics/Gynecology
2017 QHP network overview

- Hometown North
- ClearWater
- Kootenai Care Network
- CarePoint
- ConnectedCare
- IDID
- Hometown East
- ConnectedCare
- ConnectedCare
In the Treasure Valley

Networks and Hospitals

**CarePoint**

*St. Luke’s Health Partners*

*Hospitals:* St. Luke’s Regional Medical Center, St. Luke’s Wood River Medical Center, St. Luke’s Elmore Medical Center, St. Luke’s Jerome, St. Luke’s Magic Valley Regional Medical Center, Weiser Memorial Hospital, Intermountain Hospital, North Canyon Medical Center

**ConnectedCare**

*Saint Alphonsus Health Alliance*

*Hospitals:* Saint Alphonsus Regional Medical Center, Southwest Idaho Advanced Care Hospital, Saint Alphonsus Medical Center (Nampa, ID and Ontario, OR), West Valley Medical Center, Valor Health, Cascade Medical Center, Weiser Medical Center

**IDID**

*Independent Doctors of Idaho*

*Hospitals:* Treasure Valley Hospital, Southwest Idaho Advanced Care Hospital, Intermountain Hospital, Saint Alphonsus Regional Medical Center
# IDID 2017 individual QHPs

<table>
<thead>
<tr>
<th>Annual Costs</th>
<th>IDID Southwest Bronze HSA 6550</th>
<th>IDID Southwest Bronze HSA 8880</th>
<th>IDID Southwest Silver 6850</th>
<th>IDID Southwest Silver 4600</th>
<th>IDID Southwest Gold 1200</th>
<th>IDID Southwest Catastrophic 7150</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$6,350 individual, $12,700 family</td>
<td>$6,000 individual, $12,700 family</td>
<td>$6,000 individual, $10,000 family</td>
<td>$5,000 individual, $10,000 family</td>
<td>$7,000 individual, $14,200 family</td>
<td>$7,140 individual, $14,200 family</td>
</tr>
<tr>
<td>Coinsurance</td>
<td>20% after deductible</td>
<td>20% after deductible</td>
<td>20% after deductible</td>
<td>20% after deductible</td>
<td>20% after deductible</td>
<td>20% after deductible</td>
</tr>
<tr>
<td>Out-of-Pocket Maximum</td>
<td>$6,550 individual, $13,790 family</td>
<td>$6,550 individual, $13,790 family</td>
<td>$6,550 individual, $13,790 family</td>
<td>$6,550 individual, $13,790 family</td>
<td>$7,140 individual, $14,200 family</td>
<td>$7,140 individual, $14,200 family</td>
</tr>
</tbody>
</table>

### Services

- **Primary Care Provider (PCP) Office Visit**
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible

- **Specialist Office Visit with a Referral**
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $20 after deductible
  - $20 after deductible

- **Preventive Care**
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible

- **Emergency Room**
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible

- **Lab/X-rays**
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible

- **Outpatient Services**
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible

- **Inpatient Hospital Services**
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible

- **Advanced Imaging Services**
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible

### Prescription Drugs

- **Preventive Drugs**
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible

- **Preferred Generic Drugs**
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible

- **Non-Preferred Generic Drugs**
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible

- **Preferred Name Brand Drugs**
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible

- **Non-Preferred Name Brand Drugs**
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible

- **Preferred Specialty Drugs**
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible

- **Non-Preferred Specialty Drugs**
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible
  - $0 after deductible

---

1. For treatment of emergency medical conditions as defined in this policy, Blue Cross of Idaho will provide in-network benefits for covered services. 2. Includes physical, occupational, and speech therapy services. You have a total of 20 in- and out-of-network visits for covered rehabilitative therapy services per member per year and a total of 20 in- and out-of-network visits for covered rehabilitative therapy services per member per year.

3. Prescription drug coverage includes a generic substitution requirement. If you or your doctor requests a brand-name prescription when a generic equivalent is available, you are responsible to pay the difference between the allowed cost of the generic drug and the brand-name drug and any applicable brand-name copay. The extra costs do not count toward your deductible or out-of-pocket maximum. Your or your provider can ask Blue Cross of Idaho to review this policy on a case-by-case basis. *IDID Southwest Catastrophic 7150 is only available to people under the age of 30 or to people who qualify for a hardship exemption through the Idaho Health Insurance Exchange.* See yourhealthidaho.org for more information on catastrophic coverage.

4. Separate pharmacy (Rx) deductible of $1,000 per person applies.
The importance of Coordinated Care

Too Many Patients Have to Manage Their Own Care

Uncoordinated Care Results in Worse Outcomes, Higher Costs & Patient Frustration

- Inappropriate Prescriptions
- More Referrals
- Delayed Treatment
- Records Not Transferred
- Unnecessary Hospital Readmissions
- Too Many Tests
Care coordination benefits members AND providers in many beneficial ways – while lowering the cost of care and increasing quality and outcomes.
How coordinated care benefits us all

1. This service model produces better outcomes
2. Network relies on YOUR professional experience, YOU know what’s best for the patient
3. Great service experience for OUR (CPN and Blue Cross) customers
Responsibilities of PCPs and Specialists

- For coordinated care networks to work as intended, communication between providers is essential
- PCP to provide all relevant medical records to specialist
- Specialist to follow up with PCP about diagnosis and recommended treatment plan
Referral Specifics

• Referrals are required for all non-PCP care.
• CPN and Blue Cross require the use of the Blue Cross of Idaho Online prior authorization/referral application system for all referrals
  • Provides a central location for office staff to easily verify referrals pre-appointment
  • Provides Blue Cross customer service the opportunity to confirm a referral for a member who calls in to check pre-appointment
  • Saves office staff having to answer calls from other providers or members
• Offices will need to enter the referring PCP into Box 17 and NPI in Box 17b, or the respective field in an electronic submission of the submitted claim form
• Providers will undergo a periodic audit by CPN and Blue Cross to ensure they are actively supporting the coordinated care approach
When referrals are required

- Visits or services by specialists/non-primary care providers; non-primary care specialties include, but are not limited to:
  - Allergy/Immunology
  - Audiology
  - Behavioral health
  - Cardiology
  - Cardiac/Cardiothoracic surgery
  - Colorectal surgery
  - Dermatology
  - Endocrinology
  - ENT/Otolaryngology
  - Gastroenterology
  - General surgery
  - Hand surgery
  - Infectious disease

- Nephrology
- Neurology
- Neurosurgery
- Oncology/Hematology
- Oral surgery
- Orthopedics
- Pain management
- Plastic surgery
- Podiatry
- Psychiatry/Psychology
- Pulmonology
- Rheumatology
- Urology
- Vascular surgery
When referrals aren’t required

- Visits or services by primary care providers or generalists; primary care specialties include the following:
  - Family practice
  - General practice
  - Internal medicine
  - OB/GYN
  - Pediatrics
- Anesthesia
- Chiropractic
- DME suppliers
- Emergency or urgent care services

- Home health, home IV, hospice
- Independent lab tests
- Optometry
- Pathology
- PT/OT/ST
- Radiology/Imaging services (mammograms, x-rays, ultrasounds, MRIs, CT scans, PET scans)
  *NOTE - professional or interventional radiology services may be subject to referrals as specialists
- Registered dieticians
Members who reside outside-of-service area

- New QHP plans do provide coverage for eligible family members who live outside of the service area
  - Children who permanently reside in another state
  - Child attending college in another area of the state
- Members will notify Blue Cross of a dependent in this situation and we’ll set up our system so claims process correctly.
Blue Cross of Idaho | Out of Network
Out-of-area services

• For services that cannot be provided within CPN, PCPs should submit a gap referral through the Blue Cross of Idaho online prior authorization/referral application system found on providers.bcidaho.com.

• This is the same system Blue Cross currently uses for coordinated care referrals and prior authorization requests.

• Gap referrals will be reviewed by the Healthcare Operations team.
Members in midst of treatment/care

• Blue Cross will evaluate all individual QHP members to determine who is in the midst of an ongoing course of treatment.

• CPN patients who are in this situation will be evaluated by Blue Cross’ Healthcare Operations team on a case-by-case basis.

• Members will ultimately need to switch to an in-network doctor.
PCP Assignment Process
Here is how it works

- Blue Cross of Idaho will actively engage with CPN enrollees to prompt them to choose a Primary Care Provider (PCP)
  - Phone calls
  - Emails
  - Direct mail
  - Co-branded mail from Blue Cross and CPN
- We’ll partner with PCPs during January 2017 to try and reach out to those who haven’t selected a PCP.
- PCPs need to keep Blue Cross informed of their patient loads and notify us immediately through written notification when their panel is closed
Find which network works best for you:

The Saint Alphonsus North Alliance includes more than 2,700 highly skilled providers, including those at Saint Alphonsus Medical Center. The Alliance has 20 hospitals and surgery centers, and 30 primary care centers.

Available to residents of the following counties:
Ada, Canyon, Cass, Elmore, Fremont, Twin Falls, Washington

The Independent Doctors of Idaho is made up of more than 230 providers – including over 20 primary care providers – specializing in internal medicine, gastroenterology, psychiatry and more. IDID includes Treasure Valley Hospital.

Available to residents of the following counties:
Ada, Canyon, Owyhee

IMPORTANT NETWORK DETAILS

Your primary care provider (PCP) will give you a referral for care you may need that he or she can't provide. If you see a doctor other than your PCP without a referral, it will not count, and the services may be subject to a $250 deductible.

There might be a gap in medical services in your area, meaning a specialty is not offered. In these cases, your doctor will likely refer you to a provider outside of your network. These services can be covered even though they are "out of network."

You will have access to urgent and emergency care whenever and wherever you need it, regardless of network.

Independent Doctors of Idaho: Your 2017 Blue Cross Provider Network

Your health insurance plan for 2017 offers a wide variety of highly rated providers throughout Ada, Canyon, and Owyhee counties as well as the Independent Doctors of Idaho (IDID) provider network.

When you visit a healthcare provider within your network, you can choose the best provider for your needs. Your PCP can help guide you to a provider that is right for you.

Our network providers are available to you, offering the highest-quality care and convenient services.

Working with a Primary Care Provider (PCP) creates a personalized healthcare experience, tailored to your needs. A PCP provides comprehensive care and works with you to reach your health goals.

You can choose your PCP from the IDID network, and the provider, nurse practitioner, or physician assistant will serve as your guide through the complex healthcare system. Your PCP will be your first stop for all of your medical care.
New ID card design

New ID card designs reinforce the network, need for referrals and PCP, and underscore the out-of-network aspects of the plans.

INDEPENDENT DOCTORS OF IDAHO NETWORK

<table>
<thead>
<tr>
<th>Subscriber Name</th>
<th>Coverage For:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jane M. Doe</td>
<td>Joshua C. Doe</td>
</tr>
<tr>
<td>Subscriber Number</td>
<td>Primary Care Provider (PCP)</td>
</tr>
<tr>
<td>XMD123456789</td>
<td>Welby, Marcus</td>
</tr>
<tr>
<td>Group Number</td>
<td>Referrals Required</td>
</tr>
<tr>
<td>10090016</td>
<td>POS</td>
</tr>
<tr>
<td>RXBIN</td>
<td>Provider Network</td>
</tr>
<tr>
<td>000001</td>
<td>IDID</td>
</tr>
<tr>
<td>RXPCN ADV RXGRP RXBCID</td>
<td>PCP Visit/Urgent Care Copay</td>
</tr>
<tr>
<td>In-Network Deductible</td>
<td>$4,000</td>
</tr>
<tr>
<td>RX Deductible</td>
<td>Specialist Copay</td>
</tr>
<tr>
<td>$1,000</td>
<td>Dental</td>
</tr>
<tr>
<td>Out-of-Network Deductible</td>
<td>Vision</td>
</tr>
<tr>
<td>$50,000</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
</tr>
</tbody>
</table>
We are developing detailed communication plans for all affected audiences

**Brokers**
- Weekly broker blasts
- Fall broker training
- Hosted webinars
- Monthly Q&A briefs
- Comprehensive product training at Online Learning Center

**Providers**
- Reference materials on provider website
- Hosted webinars with Q&A with Provider Services; Monthly Q&A briefs

**Public Relations**
- Op-eds and guest columns
- Press releases
- Editorial board meetings; Interviews

**Members and Shoppers**
- Complete members and shoppers website update
- Questions on member portal; Monthly Q&A briefs
- Renewal packet
- Member handbook and ID card
Media/Public awareness of plans

- Blue Cross of Idaho CEO Charlene Maher recently conducted an exclusive one-on-one interview with The Associated Press, focusing on the benefits of coordinated care and the QHP healthcare networks

- **Media coverage is anticipated around the following dates:**
  - Anonymous shopping for plans (with rates) began Oct. 1
  - Open enrollment period runs Nov. 1 through Jan. 31
  - Coverage begins Jan. 1
New Provider Directory

- Brand-new provider directory from leading industry vendor, Vitals
- ID card provider code integrated with network search fields

- IDID has its own vanity URL: bcidaho.com/IDID
- In final product testing; tool available no later than October 1
Referral entry via Blue Cross systems

- All referrals that use Blue Cross resources must be entered online through the online prior authorization/referral application system.
  - We are no longer accepting alternative methods to submit referrals, such as fax or phone calls.
- Online instructional manual to assist with entry of a referral/authorization is available at providers.bcidaho.com.