GENERAL INFORMATION – 2018 OPEN ENROLLMENT

CHANGE IN OUT-OF-POCKET MAXIMUMS FOR MEDICAL PLANS

Both the Harvard Pilgrim PPO and HMO plans have limits on the amount of Out-of-Pocket (OOP) expenses you will incur (e.g., office visit and prescription copayments, out-of-network deductibles, out-of-network coinsurance costs, and certain other expenses). The maximums do not include any charges above the HPHC Allowed Amount, that is, amounts that can be balance-billed by out-of-network providers, nor any Penalty Payment for failure to obtain prior approval for certain out-of-network services.

The Out-of-Pocket maximums for both Boston College plans have been $1,250 per member and $2,500 per family per calendar year. Only one other school in the EdHealth coalition has these limits; all other schools use the more standard $2,500 per member and $5,000 per family OOP per calendar year. Starting January 2018, all EdHealth schools, including Boston College, will use the $2,500/$5,000 out-of-pocket limits. Please note that relatively few individuals or families with PPO coverage reach the OOP limits, especially if in-network providers are used for services, and HMO members rarely incur such expenses.

Relevant out-of-pocket expenses will be coordinated during the year between Harvard Pilgrim and OptumRx to ensure that you do not pay more than the stated maximum amounts.

ZERO COPAYMENT FOR OPIOID-RELATED DOCTOR VISITS

Given the serious problems stemming from opioid use in Massachusetts, the Massachusetts Association of Health Plans has asked insurance carriers to change cost-sharing benefits for methadone maintenance. Starting January 1, Harvard Pilgrim will cover methadone maintenance in full, with no copay, when the service is received from in-network providers. The intent is to remove a barrier that might preclude someone from seeking treatment. The EdHealth schools have agreed to adopt this zero copay policy. Because it is a new practice for our plans, it may be helpful for members to bring it to the attention of personnel in a doctor’s office if the visit is opioid-related.

ZERO COPAYMENT FOR CERTAIN STATIN PRESCRIPTIONS

Effective DECEMBER 1, 2017, some Statin prescriptions with certain dosage strengths will be covered by OptumRx with a zero copayment. If you take a statin medication and you wish to know if you qualify for the zero copay, either you or your physician can contact OptumRx Member Services (1-855-546-3439) to begin the Prior Authorization process. Note that lovastatin (Mevacor) does not need a Prior Authorization to qualify for the zero copay. Please see the details in the statement released by OptumRx below. Also note that if you do not seek a Prior Authorization for a statin prescription you are currently taking, it will continue to be covered at the current copayment tier.
ACA Coverage Update

The United States Preventive Services Task Force (USPSTF) now recommends low- to moderate-dose intensity statins be provided for primary prevention of cardiovascular disease (CVD) in individuals at high risk. As a result, the Affordable Care Act (ACA) will require statins to be covered at $0 cost-share for members who meet specific coverage criteria:

- Being age 40-75 and
- Having one or more cardiovascular risk factors such as dyslipidemia, diabetes, hypertension, or smoking, and
- Having a calculated 10-year risk of a cardiovascular event of 10% or greater. This will require universal lipid screening for this age group.

This ACA coverage will become available for most OptumRx groups that have standard preventive care medication benefits on Dec. 1, 2017.

Since the ACA allows medical management, not all statins will be covered at zero cost-share and coverage is summarized in the table below. Prior authorization will be required (with exception of lovastatin) to ensure members are using the medication for primary prevention and have the noted risk factors. For members who do not go through prior authorization, statins will continue to be covered at a current tier.

<table>
<thead>
<tr>
<th>Statins to be covered at $0 cost-share starting Dec. 1</th>
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<tbody>
<tr>
<td><strong>No Prior Authorization required</strong></td>
</tr>
<tr>
<td>lovastatin (generic Mevacor) – All strengths</td>
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<tr>
<td><strong>Prior Authorization required to confirm risk of CVS</strong></td>
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<tr>
<td>atorvastatin (generic Lipitor) 10 &amp; 20 mg*</td>
</tr>
<tr>
<td>simvastatin (generic Zocor) 5, 10, 20 &amp; 40 mg*</td>
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<tr>
<td>*Only these strengths will be available for $0 cost-share.</td>
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The Prior Authorization for atorvastatin and simvastatin will not stop payment of a claim at the pharmacy. Members that do not have a PA for a $0 copayment will be charged their standard plan copayment for these products. As these two products are the highest utilized products in the class and not all members taking these medications will meet the ACA requirement for $0 coverage, the PA checks the requirements are met prior to waiving the copay for applicable members. A member or their physician can request to have the PA process started through member services.

Lovastatin will be provided at no cost automatically to members between ages 40 and 75. Utilization of lovastatin is low and lower in cost than the atorvastatin or simvastatin. Lovastatin is included in many $4 drug lists at many pharmacies.

TELEMEDICINE SERVICES UNDER HARVARD PILGRIM

This is a reminder that Harvard Pilgrim has a telemedicine service through Doctor on Demand, a national telemedicine provider group of board-certified physicians. This service allows members to see a doctor through real-time, Skype-like technology using a smartphone, tablet, or computer. You can receive care for numerous non-acute conditions without going to a provider’s office, an urgent care center, or an emergency room. Doctor on Demand is available from 7 a.m. to 11 p.m. No referral is needed.

You download the free app from the App Store or Google Play to your mobile device by going to doctorondemand.com/harvardpilgrim. You can also visit that site for general information about the service. The cost is your normal $25 office copayment using a credit or debit card. Doctor on Demand is not intended to replace routine care with a primary care provider.