



Missouri 2023 Medicare Advantage plan changes

Annual benefit changes for Medicare Advantage plan members under Healthy Blue will be effective January 1, 2023.

The following is a summary of these changes. Complete details are in the member's *Evidence of Coverage (EOC)*. Visit <https://shop.healthybluemo.com/medicare> for *EOC*, formularies, and benefit summaries, or contact Provider Services at the number on the back of the member's ID card. Changes may include medical and Part D benefits, copays, coinsurance, deductibles, formulary coverage, pharmacy network, premiums, and out-of-pocket maximums.

Some group-sponsored Medicare Advantage plan benefits vary from the Medicare Advantage plans offered to individuals. Please refer to the member's *EOC* or call Provider Services at the number on the back of the member's ID card for more benefit details.

2023 highlights

Not all benefits listed below are available to all Medicare Advantage members. Complete details are in the member's *EOC*:



The Inflation Reduction Act:

- The *Inflation Reduction Act* will provide Part D insulins to all members at \$35 or less for 2023. In addition, the following Part D vaccines will be moving to \$0:
 - Tetanus, diphtheria, and pertussis (Tdap)
 - Measles, mumps, rubella (MMR)
 - Chickenpox (Varicella)
 - Japanese encephalitis
 - Hepatitis A and B
 - Shingles (Zostavax and Shingrix)
 - Rabies



Personal home helper:

- Effective January 1, 2023, personal home helper will no longer be an active benefit available to Medicare Individual members



2023 Essential Extras (EE) benefit package:

- Contains 5 to 6 of the following:
 - Assistive devices
 - Flex account — dental, vision, hearing

* In-Home Support is an independent company providing member support services on behalf of Healthy Blue. Availity, LLC is an independent company providing administrative support services on behalf of Healthy Blue.

<https://medicareprovider.healthybluemo.com>

Healthy Blue is the trade name of Missouri Care, Inc., an independent licensee of the Blue Cross Blue Shield Association.
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- New: flex account — utilities: a monthly allowance on benefits prepaid card to help members with monthly utility payments at their home.
- Healthy groceries
- In-Home Support*
- Transportation
- Note:
 - Dual eligible members enrolled in our Missouri D-SNP automatically qualify for any of the EE options. Our D-SNP plans participate in the Value Based Insurance Design (VBID) model.
 - All other plan types that offer EE may require a precertification in order for a member to choose one of the special supplemental benefits for the chronically ill: healthy groceries and/or flex account — utilities.
 - Members can make an election on the *Members Enrollment* form or by calling Customer Services.
 - Please read plan details for more information and to confirm which package is offered.



Health and fitness tracker:

- For 2023, this benefit may be available as an embedded benefit.
- Please read plan details to determine if the benefit is offered on the plan.
- This benefit option was removed from EE for 2023.



Significantly lower cost shares:

- Outpatient diagnostic and therapeutic radiological services:
 - Some plans have significantly lower cost shares on outpatient diagnostic procedures, tests, lab, and radiological services.
- Please read plan details for more information.



Pharmacy benefit manager (PBM) name change:

- Our PBM name has changed from IngenioRx* to CarelonRx.



VBID:

- The VBID model allows plans the flexibility to offer not primarily health related benefits. Our plan(s) base eligibility criteria of these benefits on socioeconomic status of members enrolled in the plans participating in the VBID model.
 - New: over-the-counter (OTC) items and healthy groceries:
 - A combined monthly allowance on a benefits prepaid card to help members with purchases towards healthy groceries and OTC items.
 - For 2023, the allowance for OTC items and healthy groceries has been combined into one monthly allowance to be used by members.
 - Unused amounts do not roll over to the next month or calendar year.
 - Offered on our D-SNP Plans: Anthem MediBlue Dual Advantage (HMO D-SNP) (H3447-018), Anthem MediBlue Dual Access (PPO D-SNP) (H4909-028), and Healthy Blue Dual (HMO D-SNP) (H6316-002).
 - Please read plan details for more information.

- Part D reduced cost shares:
 - Our D-SNP plans will continue to offer all covered Part D drugs at \$0 copay at all phases.
 - Please read plan details for more information.
- MyDirectives®:
 - For 2023, we will continue offering MyDirectives on plans that participate in the VBID model.
 - Members have access to an online advance care planning resource called, MyDirectives.
 - This resource helps them create an advance directive where they can combine the elements of a: living will, medical power of attorney, organ donation form, and more, including religious preference statements.
 - MyDirectives is available to the member and their designated medical providers 24 hours a day, seven days a week.
 - You can help members to get started. All the member needs to do is log into the member website and go to the Programs Dashboard and select Advance Directive Programs. This will take members to MyDirectives to create a new account or link their existing account.
 - Please read plan details for more information.

Medicare Advantage updates

One plan will not be renewing for 2023:

Plan not renewing	Counties
Healthy Blue Essential (HMO)	Christian, Dade, Greene, Jasper, Lawrence, Newton, Polk, Stone, Taney, Webster

Formulary and pharmacy

Encourage your patients to review the 2023 formulary information within their *Annual Notice of Change* mailing, their new member kit, or online. Ask your patients if the coverage for any of their prescriptions has been changed. If your patient has been impacted by changes to prescription coverage, consider alternative medications in a lower cost-sharing tier.



Prior authorization for Medicare Advantage plans

Prior authorization requirements are available at <https://www.availity.com>. Contracted and non-contracted providers who are unable to access Availity* may call Provider Services at the phone number on the back of the member's ID card for prior authorization requirements.

Please check the member's ID card for any identification and/or group number changes that may affect claim submissions. Sample 2023 member ID cards will be available at <https://medicareprovider.healthybluemo.com>.