BCBSAZ adds Blue PPO plan to Exchange offerings for 2022

pages.azblue.com/BCBSAZ-is-launching-a-new-PPO-plan-for-2022---OCT-2021.html





Blue Cross[®] Blue Shield[®] of Arizona (BCBSAZ) is launching a new PPO plan for 2022. This qualified health plan (QHP) features coverage and benefit limits



that are compliant with ACA requirements, making it eligible for purchase on and off the Health Insurance Marketplace (Exchange). Available only to individuals under age 65 and their families, the new PPO plan offers access to care across Arizona and beyond

Drug Take Back Day is October 23: Encourage your patients to take action to reduce prescription drug misuse

through the statewide/national PPO network and BlueCard[®] program benefits. Be sure to check eligibility and benefits for specific plan information.

Member ID card

Member ID prefixes associated with this new plan are **EPI** and **IPO**. The ID card looks very similar to other PPO plan cards—however, in addition to the identifying prefix, it includes the indicator for ACA-compliant pediatric benefits for members up to age 19, as shown in this sample:

A Independent Licensee of the Blue Cross Blue Shield Arizona		
Member Name:	Group No:	GBA01
SAM SAMPLE Member ID:		
IPO999999999	Card Print Date:	11/20/21
Network: PPO	Pediatric Member-Dental:	YES
Copay May Apply In-Network Cost Share: Deductible Ind/Family: \$3100/6200 Individual OOP MAX: \$8700 Family OOP MAX: \$17400	Out-of-Network Cost Share: Deductible Ind/Family: Individual OOP MAX: Family OOP MAX:	\$9000/180000 \$18000 \$36000
PPO	AZDOI	PPO ®

Benefits emphasize health and wellness

This new PPO plan gives members several ways to get healthier faster and stay healthier longer. Up to two PCP visits a year are covered at \$0 member cost share. Members can access our 24/7 Nurse On Call service and all preventive care at no cost, and receive incentives for completing certain annual preventive screenings. Plan benefits also include unlimited chiropractic visits.

We strongly encourage our PPO members to establish a relationship with a PCP. Referrals are not required for specialty care. For prior authorization, these members are designated for our <u>eviCore</u> <u>program</u>.

QHP subsidies and grace period eligibility

Reminder: Members with QHPs who receive federal financial assistance and have paid at least one full month's premium are eligible for a three-month grace period to cure any default in premium payments. For more information about how the grace period works and how it impacts claim processing, see this excerpt from the BCBSAZ Provider Operating Guide.

eviCore healthcare[®] is a separate, independent company contracted with BCBSAZ to provide utilization management services to BCBSAZ providers and members. eviCore healthcare is a registered service mark of CareCore National, LLC.

Our members can take a digital ID card with them wherever they go with the MyBlue AZSM mobile app.

