

A newsmagazine by and for the employees of EmblemHealth"

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EmblemHealth Products on the Marketplace

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This summer, EmblemHealth's <u>Select Care</u> plans were certified as "qualified health plans" and accepted to participate on the NY State of Health marketplace. This fall, eligible New Yorkers will be able to visit this marketplace and choose our Select Care plans for their health care coverage.

As qualified health plans (QHP), the Select Care products must offer essential health benefits, cost-sharing arrangements (metal levels) and network adequacy

standards mandated under the Affordable Care Act. Since all plans on this marketplace must be QHPs, consumers can choose any of the metal levels, from any carrier on the marketplace, and know the precise benefits and costs they will have under the plan.

So, if the plans offer similar benefits and cost-sharing arrangements, what will make one company stand out over another? The major differentiating areas will be price, network, customer service and brand.

To further differentiate ourselves in the marketplace, EmblemHealth is pursuing <u>consumer-focused markets</u> (Medicare, Medicaid and individual products sold on and off the marketplace) and consumer segmentation initiatives such as <u>Faces</u> of the Cared For, <u>Neighborhood Growth Strategy</u> and <u>Health Care Reform</u>.

Plan Categories

EmblemHealth will be offering one plan in each metal level. Our plans are called the EmblemHealth Select Care Bronze, Select Care Silver, Select Care Gold and Select Care Platinum, and all insurers on the marketplace will have the metal level in their plan names.

The metal levels denote the plan's "actuarial value" — the percentage the insurer pays for total health care costs versus what the member pays.

- Plans with low actuarial value, such as the bronze plan, have lower premiums but higher levels of cost-sharing (deductible, coinsurance and copays).
- Plans with high actuarial value, such as the platinum plan, do the opposite they have higher premiums but lower levels of cost-sharing.

All insurers on the individual marketplace must also offer a catastrophic plan option. EmblemHealth will offer Select Care Basic, a catastrophic plan for people under age 30 and others who qualify. This low-cost, high-deductible plan mainly targets a consumer segment known as the <u>Young Invincibles</u>.

EmblemHealth will also offer a stand-alone pediatric dental plan, called FirstSmiles, for young people up to age 19. It focuses on good oral health and reducing the chance of dental and oral disease.

All five EmblemHealth plans — Select Care Bronze, Silver, Gold, Platinum and Basic — are HMO plans.

Benefits and Plan Designs

The Select Care plans will now cover certain preventive care services at no copay and the following 10 categories of essential health benefits:

- 1. Ambulatory patient services
- 2. Emergency services
- 3. Hospitalization
- 4. Maternity and newborn care
- 5. Mental health and substance use disorder services, including behavioral health treatment
- 6. Prescription drugs
- 7. Rehabilitative and habilitative services and devices



Strictly Business

- 8. Laboratory services
- 9. Preventive and wellness and chronic disease management
- 10. Pediatric services, including vision care

EmblemHealth will offer gym reimbursements, access to our health and wellness programs, and pediatric vision care for dependents up to age 19.

Get all the details on our Web site.

Financial Assistance

Qualified individuals will receive <u>financial assistance</u> in the form of tax credits, which can be used to lower monthly premium costs. Tax credits cannot be used for the Select Care Basic plan.

Some consumers will also qualify for subsidies (cost-sharing reductions) to lower their out-of-pocket costs. Subsidies can only be redeemed through a Silver plan. This means that consumers who qualify for both tax credits and subsidies will get the best deal when they choose a Silver plan.

Look for the launch of the Select Care plans when NY State of Health opens October 1, 2013.♥

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