

NewsfromBlue

IMPORTANT UPDATES FOR BENEFIT ADMINISTRATORS

April 2007

Exciting New BlueOptions® Plans!

We've listened...and are pleased to be offering several new BlueOptions, plans – the consumer choice series - with enhancements that reflect your feedback! Plus, we have added flexibility to make offering more than one health plan even easier. All of this is available for large and small groups beginning May 1 with July 1 effective dates.

Not only have we made benefit and contract enhancements, our collateral materials will now be easier to understand and more user-friendly! This new member communication is designed to help educate members about self-service tools and point out the lower-cost choices for services based on the type of care and the location of care received. Now, back to the plans.

In the consumer choice series of BlueOptions plans, there are several new plans which will provide your company with a choice in products ranging from plans with predictable costs to lower cost plans to help with affordability issues (including those that are HSA-compatible). The new plans include enhanced benefits such as no caps on in-network adult wellness, increased benefits for ambulance, lower cost for therapy in a hospital setting and more.

We'd like to give you all of the details here, but we wouldn't have enough room! Please contact your BCBSF representative to hear more about these improvements.

Magnetic Stripe ID Card Rollout

On April 10th, we started to mail new ID cards to our members that are enrolled in small and large groups. The distribution will be handled in a phased approach throughout the summer of 2007. By the end of the rollout, nearly 1.7 million BlueOptions and BlueChoice® (PPO) members will receive their magnetic stripe ID card.

The new cards are made of an attractive and durable material and the magnetic stripe on the reverse stores pertinent membership information. The card does not, however, store any personal health information, but does allow the physicians' office staff to be able to electronically access membership information faster, easier and more accurately than ever before.

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Please contact your Blue Cross and Blue Shield of Florida representative if you have any questions.

Magnetic Stripe ID Card Rollout (continued)

Member benefits

- Faster check-in when the card is swiped
- The cards provide access to the most up-to-date benefits
- Health care providers in Florida can determine a member's estimated cost (with a high degree of accuracy/confidence/certainty) for the majority of treatments at the point of service or before they occur, so the member can make more informed health care decisions
- Takes the guesswork out of health care and puts the power of decision-making back into the member's hand
- The member will be given a receipt detailing out important benefit information such as real-time deductible, coinsurance and copay status.
- Privacy protection – no medical identification information is stored on the card

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Blue Ranks Tops in Member Satisfaction

We're highest in customer satisfaction! Blue Cross and Blue Shield of Florida has been ranked "Highest Member Satisfaction among Commercial Health Plans in the South," in part because of our ability to communicate with members, our network of physicians, hospitals and pharmacies, and health benefits, according to the J.D. Power and Associates 2007 National Health Insurance Plan Satisfaction StudySM.

We scored 779 points out of a maximum 1,000 points. In contrast to us, other major health insurers scored below the region's average (746 points).

The inaugural study identifies coverage and benefits, choice of doctors, hospitals and pharmacies, and information and communication as the most significant factors in driving member satisfaction. Additional factors examined in the study include approval processes, insurance statements, customer service and claims processing.

Click here to download the [Executive Report](#) and the [Company Rankings](#).

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BlueOptions Q&A

Q: How does the BlueOptions benefit work when a member receives a Gardasil (HPV, human papillomavirus) vaccination?

A: The Gardasil vaccine is FDA-approved for females between the ages of 9 and 26. Gardasil is administered as three injections over a six-month period. With BlueOptions, the Gardasil vaccination benefit works as follows:

- For members between the ages of 17 and 26, the costs will be applied to their Adult Wellness benefit maximum limitation. Members are responsible for 100% of costs that exceed the annual benefit maximums.
- Members between the ages of 9 and 16 will have benefits applied under Well Child. Since there is no well child benefit maximum with BlueOptions or a calendar year deductible for well child visits, members will simply be responsible for the applicable copayments or coinsurance based on the location of service.

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Quest Diagnostics Announces Appointment Scheduling

Appointment scheduling at all Florida, Quest Diagnostics owned and operated Patient Service Centers is now available! Patients can now schedule appointments 24/7—reducing the wait time upon arrival. Follow this link www.questdiagnostics.com/appointment to view the new scheduling website, select your center location site and click on the right to schedule an appointment. It's that easy! Patients can also call **1-888-277-8772** to reach Quest Diagnostics' new voice activated appointment scheduler. To view and print a handout containing details, please [click here](#).

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NetworkBlue Update

[Click here](#) to view a listing of providers that have recently joined NetworkBlueSM.

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Blueprint for Health Updates

Health Coaching Improves Our Performance

Health coaching is an important component of our Blueprint for Health® program, assisting members in many ways no matter where they are on the health spectrum. Results just received from periodic program measurements¹ show health coaching results in positive outcomes and significant improvements in our financial return on investment (ROI), member satisfaction levels and quality of care.

More than 1.6 million members had access to Health Dialog's® programs and services in 2005, which resulted in:

- A year-two ROI of 4.1, which is an increase of 1.8 in year-one
- Member satisfaction levels with Health Dialog programs and services exceeded 95%
- Improvement in quality of care trends for patient adherence to clinical standards for managing diseases such as Coronary Artery Disease and Diabetes

These results prove that everyone wins when we can help our members make the right decisions and take the right actions for the sake of their good health.

But the proof isn't only in the numbers. It's also in the personal stories of members who have improved their health by taking advantage of Blueprint for Health services, like Health Coaching. Take Sarah², for example. You may read her story, as told by her Health Coach, in the blue box to the right. ➤

Health Coaching is a great example of how Blue is helping people every day.

Subimo tools now in Spanish

We are pleased to announce Subimo's™ full suite of health care decision support tools is now available in Spanish!

The Hispanic population is one of our primary market segments and is increasing at three times the rate of the general population in Florida. By seeking out and offering additional tools in Spanish, we are demonstrating our commitment to improving the quality of care and service our members receive.

The following Subimo tools are now available in Spanish:

- Healthcare AdvisorSM includes more than 150 medical conditions and procedures, suggested questions to ask a physician, or benefit plans regarding managing a condition or preparing for a procedure. It also includes links to resources including Web sites organized by health care topic.
- Physician Selection AdvisorSM provides members the ability to research and compare physicians on attributes such as demographics, education, training, affiliations, certifications and sanctions.
- Hospital AdvisorSM allows members to find and compare hospitals side-by-side for specific procedures or types of care based on clinical quality, experience and outcomes, patient safety standards, reputation and characteristics.
- Treatment Cost AdvisorSM provides estimates for the cost of specific health care services including medical conditions, diagnostic tests, prescription drugs, inpatient and outpatient procedures and treatments and office visits.

¹CY2005 Health Dialog Outcomes Report

²This story is based on a real person's experience with Health Coaching, but her name and identifying information has been changed to protect her privacy.

Sarah's Story

"I first met Sarah when she called the Health Dialog Health Coaching line to learn what she could do to relieve her joint pain. We talked about the risks and benefits of different treatment options for the discomfort she was feeling, and she agreed to talk with her doctor about which one was right for her.

Over the next six months, Sarah and I talked regularly about her other health issues – including how she could better manage both her diabetes and her heart condition.

I am happy to report that today Sarah is doing great. She is using what she has learned through our conversations to make a real difference in her health.

Sarah's hard work has paid off: Her diabetes is well under control, and she's learned to manage the fluid issues that are a part of heart failure. Sarah can't believe what a difference the Health Dialog Health Coaching program has made in her health and in her ability to enjoy life."

Advanced Imaging Update

In March, NetworkBlueSM providers received notification that, beginning July 2, authorizations will be required for advanced imaging services, such as CT scans, MRIs, MRAs, PET scans and Nuclear Cardiology. Our new Advanced Imaging Utilization Program requires the provider to initiate the authorization process and if they do not, **the member is not responsible for the cost of the services.**

The program is part of our ongoing efforts to address quality of care, patient safety and health care affordability. It is designed to effectively manage non-emergency radiology services in an office or independent diagnostic testing center (IDTC) and ensure evidence-based imaging protocols are met. Diagnostic imaging quality of care concerns (especially related to unnecessary exposure to radiation), are rising and costs for advanced diagnostic imaging are trending at 15 to 20 percent annually, second only to pharmacy.

Prior to scheduling the advanced imaging procedure for our BlueOptions' members:

- Providers will be required to call our radiology management vendor.
- Based on a determination of medical necessity, the vendor will provide an authorization number once the procedure is approved.
- Before performing the procedure, providers will need to verify that prior authorization has been obtained for each identified advanced imaging procedure.
- Verification can be obtained by calling the radiology management vendor via numerous contact methods.

A follow-up letter with detailed program requirements and processes will be sent on May 1, 2007 to the same providers and IDTCs. Other external communication components will include member notification, which will also be mailed in May, articles in BlueLine[®] and office visits from our representatives.

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We'd like you to know....

That you may be hearing what we are doing in the marketplace in an effort to always be a superior marketing company! We will be contacting various businesses to gain a better understanding of their needs and thus provide service and products to better meet these needs. So stay tuned....

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