



# YOUR ENROLLMENT GUIDE FOR INDIVIDUAL AND FAMILY HEALTH PLANS

Everything you need to find  
the right health coverage  
for you and your family in 2023.

# TABLE OF CONTENTS

01	INTRODUCTION TO OUR HEALTH PLANS	PG. 3
02	HOW TO ENROLL IN A HEALTH PLAN	PG. 4
03	UNDERSTANDING YOUR COVERAGE	PG. 7
04	VERMONT PREFERRED HEALTH PLANS	PG. 10
05	PRESCRIPTION DRUG COVERAGE	PG. 12
06	GLOSSARY OF TERMS	PG. 14

# 01 INTRODUCTION TO OUR HEALTH PLANS

When you choose a health plan from Blue Cross and Blue Shield of Vermont, you not only get coverage that's focused on you and your family's health and well-being, you also get:

- Coverage from a trusted, local, not-for-profit organization
- Support from our local award-winning customer service staff
- Access to the largest network of doctors and hospitals in Vermont, with additional access around the U.S., and internationally



## FIND THE RIGHT PLAN FOR YOU

Your health and well-being is important and so is choosing a health plan that meets your needs and budget. Use this guide to help you decide which plan is best for you.

### You may be able to save money on your health insurance if:

- You make less than \$118K annually and pick a single only plan.
- You make less than \$330K annually and pick a family plan.

To learn more, please call Vermont Health Connect at (855) 899-9600.



## WHAT TO LOOK FOR

This guide highlights important plan benefits, features, covered services, and how to enroll. To review the **premium**, **deductible** and **cost-sharing** structure for each plan, use the enclosed 2023 Individual & Family Plans & Premiums Chart or the find-a-plan tool online at [bluecrossvt.org/findplan](https://bluecrossvt.org/findplan).



## GLOSSARY OF TERMS

Use the Glossary of Terms section at the end of this guide to help you better understand commonly used health insurance terms and their definitions. These terms appear in **bold**, underlined font throughout this guide.

# HOW TO ENROLL IN A HEALTH PLAN

It's important to consider your coverage options and costs before enrolling in, renewing, or changing your plan.

## OPEN ENROLLMENT

You can select or make changes to your health plan during Open Enrollment.

## IMPORTANT DATES

OPEN ENROLLMENT DIRECTLY THROUGH BLUE CROSS RUNS FROM NOVEMBER 1, 2022 - JANUARY 31, 2023.

- Plan enrollment and changes made by December 31, 2022 will take effect on January 1, 2023.
- Plan enrollment and changes made by January 2023 will take effect on February 1, 2023.
- If you're directly enrolled in one of our plans and don't have any changes, there's nothing you need to do. Your coverage will automatically renew for 2023.

## VERMONT HEALTH CONNECT ENROLLMENT DATES

OPEN ENROLLMENT RUNS FROM NOVEMBER 1, 2022 - JANUARY 15, 2023.

- Plan enrollment and changes made through Vermont Health Connect by December 15, 2022 will take effect January 1, 2023.
- Plan enrollment and changes made through Vermont Health Connect between January 1 and January 15, 2023 will begin February 1, 2023.
- If you're currently enrolled in one of our health plans through Vermont Health Connect, and you wish to change plans, you must do so by January 15, 2023.
- If you wish to keep the same plan through Vermont Health Connect in 2023, there is nothing you need to do.
- If you choose to enroll through Vermont Health Connect for the first time, you must do so by January 15, 2023.





## ENROLLING IN A NEW PLAN

### BLUE CROSS AND BLUE SHIELD OF VERMONT ENROLLMENT

If you are enrolled in your health plan directly through Blue Cross and you want to change your coverage, you can renew your options or select a new plan at [bluecrossvt.org/findplan](https://bluecrossvt.org/findplan).

### VERMONT HEALTH CONNECT ENROLLMENT

If you enrolled in a health plan through Vermont Health Connect, you can view or update your information, choose a new plan, or check eligibility status\* by contacting Vermont Health Connect at:



(855) 899-9600



[VermontHealthConnect.gov](https://VermontHealthConnect.gov)



## KEEPING YOUR CURRENT COVERAGE

### BLUE CROSS AND BLUE SHIELD OF VERMONT ENROLLMENT

If you enrolled in your health plan directly through Blue Cross and want to keep your current coverage:

- **There's nothing you need to do.**
- Your plan will automatically renew for 2023 - a seamless continuation of coverage.

### VERMONT HEALTH CONNECT ENROLLMENT

If you enrolled in your health plan through Vermont Health Connect:

- If you wish to keep your same plan in 2023, there is nothing you need to do as your coverage will automatically renew.
- Check your eligibility status\*, view, or update your information at [VermontHealthConnect.gov](https://VermontHealthConnect.gov).

*\*The Inflation Reduction Act (IRA) of 2022 has extended subsidies previously available through the American Rescue Plan Act (ARPA) to help you pay for your coverage if you enroll through Vermont Health Connect. A **subsidy** is financial support that makes health coverage available at a lower cost for people with incomes below certain levels. To check your eligibility status, visit [VermontHealthConnect.gov](https://VermontHealthConnect.gov).*





## HOW TO CHOOSE THE BEST PLAN FOR YOU

### DETERMINE YOUR BUDGET

The best way to pick a plan that meets your needs and budget starts with knowing how much you spent on your health care last year. Think about your:

- Plan premiums
- Healthcare costs like your deductible, co-payments, co-insurance and doctor visits
- Prescription medication costs
- Other costs related to non-recurring medical needs
- Overall budget

Once you have an idea of what your medical expense and budget are, review your plan options.



## REVIEW YOUR PLAN OPTIONS

### BLUE CROSS AND BLUE SHIELD OF VERMONT ENROLLMENT

If you enrolled in your health plan directly through Blue Cross and want to keep your current coverage:

- 2023 Individual & Family Plans & Premiums Chart outlines our available plans, deductibles, monthly premiums, and more.
- The online Individual & Family Find-a-Plan tool allows you to filter by our health plans, premiums, and deductible types to compare all our 2023 health plan offerings. Visit [bluecrossvt.org/findplan](https://bluecrossvt.org/findplan).
- View our health plans' Summary of Benefits and Coverage (SBC) and Certificate of Coverage at [bluecrossvt.org/QHP](https://bluecrossvt.org/QHP).



## WHAT TO CONSIDER

- **Costs** – Including premium, deductible, out-of-pocket limit, cost-sharing, and pharmacy benefits
- **Subsidies** – The Inflation Reduction Act (IRA) of 2022 has extended subsidies previously available through the American Rescue Plan Act (ARPA) to help you pay for your coverage if you enroll through Vermont Health Connect. A subsidy is financial support that makes health coverage available at a lower cost for people with incomes below certain levels. To check your eligibility status, visit [VermontHealthConnect.gov](https://VermontHealthConnect.gov).



## ENROLL IN A PLAN

Now that you've estimated your budget and selected the right plan, it's time to enroll.

### BLUE CROSS AND BLUE SHIELD OF VERMONT


If you **don't qualify** for subsidies, you should enroll directly into one of our plans.

 (800) 255-4550

 [bluecrossvt.org/QHP](https://bluecrossvt.org/QHP)

### VERMONT HEALTH CONNECT ENROLLMENT

If you **do qualify** for subsidies, you should enroll in a health plan through Vermont Health Connect.

 (855) 899-9600

 [VermontHealthConnect.gov](https://VermontHealthConnect.gov)

03

# UNDERSTANDING YOUR COVERAGE

The information you need to find the right health plan for you and your family.

## MANAGING HEALTH ON YOUR TERMS

This section explains how cost-sharing works and some included services across all plans.

For a more detailed coverage summary of how our plans help you pay for office visits, medications, hospital care, medical equipment, and more, please see the enclosed 2023 Individual and Family Plans & Premiums Chart or visit [bluecrossvt.org/QHP](https://bluecrossvt.org/QHP).



# Understanding Network Access



## NETWORK ACCESS

Our plans give you access to the largest network of doctors and hospitals in Vermont. Our **BlueCard® program** includes access to health care networks across the United States and around the world.

To view a list of doctors in our network, visit [bluecrossvt.org/find-doctor](https://bluecrossvt.org/find-doctor).

# Understanding Costs



## COST COMPARISON TOOL

You can estimate the cost of services before you go to your provider using our cost estimator in the Member Resource Center at [bluecrossvt.org/MRC](https://bluecrossvt.org/MRC).



## HOW COST-SHARING WORKS

We cover a share of your health care costs based on your health plan – this typically includes doctor visits, hospital care, medications, and co-payments.

Cost-sharing does not include costs like premiums or non-covered services.

We begin paying 100 percent of the costs for covered services when you reach your out-of-pocket limit.

To understand what your out-of-pocket costs may be, please see the enclosed 2023 Individual & Family Plans & Premiums Chart or compare plans at [bluecrossvt.org/QHP](https://bluecrossvt.org/QHP).



## MANAGING COSTS WITH AN HSA

If you are enrolled in one of our Consumer-Directed Health Plans (CDHP), you may choose to set up a Health Savings Account (HSA). HSAs are tax-free savings account used to pay for IRS approved medical expenses.

To determine which of our **plans** qualify for an HSA account, please see the enclosed 2023 Individual & Family Plans & Premiums Chart.

If you qualify, this is a great way to save for future health expenses and lower your taxable income. We offer free, integrated HSA management services. To learn more, including if you qualify, annual contribution limits, and a list of qualified medical expenses, visit [bluecrossvt.org/MyMoney](https://bluecrossvt.org/MyMoney).



# Understanding Benefits

No matter what plan options you choose, these benefits are included in all of them.



## PREVENTIVE HEALTH SERVICES

Each of our plans cover preventive health services\*, received in-network, at no cost to you. Examples of preventive services include:

- **Check-ups** – wellness visits for you and your family
- **Screenings** – blood pressure, cholesterol, diabetes, mammograms, colonoscopies and more
- **Standard immunizations** – flu, tetanus, MMR, etc.

Read more about preventive care at [bluecrossvt.org/preventive](https://bluecrossvt.org/preventive).



## TELEMEDICINE

All of our plans include 24/7 telemedicine access which is a convenient, on-demand medical care that saves times and money. Bring the doctor to you, anytime, anywhere. Within minutes you can easily connect with a licensed, board certified doctor face-to-face through a secure, HIPAA compliant live video feed, using your computer, tablet or smartphone. It's easy, available 24/7, private and secure!

For more info, visit [bluecrossvt.org/telemedicine](https://bluecrossvt.org/telemedicine).



## HEALTH & WELLNESS RESOURCES

You have access to an interactive, personalized resource with easy-to-use tools and support. This benefit helps you set wellness goals, track your progress – and get the most from your coverage. Resources include:

- Online health assessment
- Self-guided and personalized programs, articles, and more
- Mobile app

You can start your wellness journey at [bewellvermont.org](https://bewellvermont.org).



## INTEGRATED HEALTH - CASE MANAGEMENT

Our registered nurses, licensed social workers, and behavioral health counselors offer free case management to you. We offer expertise in different areas of health care, including medical, mental health, and substance use treatment.

This could extend to a wide range of health needs, from addiction, cancer, and chronic conditions to end of life, maternity, and transgender support.

To learn more visit [bluecrossvt.org/casemanagement](https://bluecrossvt.org/casemanagement).

*\*As defined by state and federal law*

04

# VERMONT PREFERRED HEALTH PLANS

Experience the benefits of **4-8-12**.

## **CONTROL YOUR COSTS WITH THE IMPROVED 4-8-12 BENEFIT**

The enclosed 2023 Individual & Family Plans & Premiums Chart outlines a variety of standard, select, and preferred health plans to choose from.

Our Vermont Preferred health plan options feature the extra 4-8-12 zero dollar office visit benefit.

This extraordinary benefit allows you and your family to see your primary care physician, mental health provider, or substance use disorder treatment provider with no **cost share!**

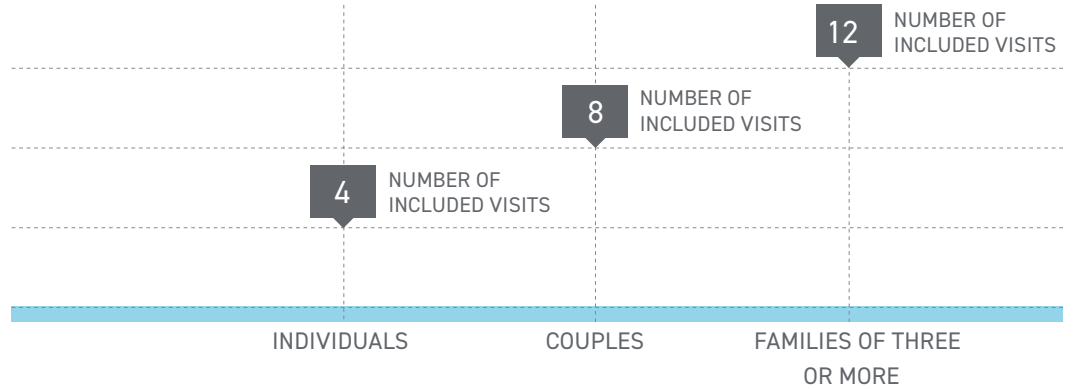




**HERE'S HOW IT WORKS**

- Members on an Individual plan receive four included visits.
- Members on a Two-person plan receive eight total included visits.
- Families of three or more get 12 total included visits.

These provider visits are at no extra cost! And that's just the beginning.



# Even More Vermont Preferred Health Plan Benefits



**ZERO DOLLAR OFFICE VISITS FOR SELECT CHRONIC CARE SERVICES**

To help manage your health, members diagnosed with diabetes or heart disease get an additional four visits to see a specialist such as a:

- cardiologist
- endocrinologist
- nephrologist
- ophthalmologist
- podiatrist



**NUTRITIONAL COUNSELING VISITS**

Members diagnosed with diabetes or heart disease also **receive unlimited nutritional counseling visits**. This can help you set, track, and achieve personalized health and wellness goals.



**WELLNESS DRUG BENEFIT**

**All Vermont Preferred Health Plans include the no-deductible Wellness Drug Benefit.** Select medications for common conditions are included in the plan and not subject to the **deductible\***. Common conditions include:

- diabetes
- asthma
- high blood pressure
- cholesterol
- osteoporosis

\*Cost-share still applies based on medication tier (generic, preferred, non-preferred brand)



05

# PRESCRIPTION DRUG COVERAGE

Our **Vermont Blue Rx™** pharmacy benefits help members save money on their prescription drugs.

## EXPANDED SERVICES AND OPTIONS IN THE VERMONT BLUE RX NETWORK

Vermont Blue Rx provides you with access to trusted, local pharmacists and national retail pharmacies. Learn more about finding network pharmacies, specialty medications, home delivery and more at [bluecrossvt.org/vtbluerx](https://bluecrossvt.org/vtbluerx).

## HOW PHARMACY BENEFITS WORK

Our plans help cover costs for prescription drugs used for the treatment, prevention, or diagnosis of specific medical conditions which are outlined in each plan's **drug formulary**.

To understand what your **out-of-pocket costs** may be, please see the Summary of Benefits and Coverage (SBC) for each plan we offer at [bluecrossvt.org/QHP](https://bluecrossvt.org/QHP).





### COVERED PRESCRIPTION DRUGS

Our National Performance Formulary (NPF) **drug lists** include medications that are the most appropriate and cost-effective for treatment. These lists can change from time to time, but they outline the prescription drugs, NFP information, and biologics that each plan covers.

Before you enroll in a plan, you can check our drug list to ensure the medications you take are covered.

You can also see if your prescriptions are available as a generic, require prior approval, have quantity limits, and much more: [bluecrossvt.org/formulary-lists](https://bluecrossvt.org/formulary-lists).



### GENERIC, PREFERRED, AND NON-PREFERRED BRAND NAME DRUGS

Each plan offers different levels of cost-sharing when purchasing generic, preferred, or non-preferred brand name drugs. Generally, generic drugs cost less and non-preferred cost more.



### HOME DELIVERY

You can take advantage of our home delivery program for a more convenient and potentially less expensive way to buy your prescription drugs. Learn more about our home delivery service at [bluecrossvt.org/vtbluerx](https://bluecrossvt.org/vtbluerx).



### MEDICATION THERAPY MANAGEMENT

You can schedule one-on-one consultations with a pharmacist to talk about the medications you take and address any concerns or questions you may have about your prescriptions. Each visit is tailored to your needs and focuses on drug safety, effects, tolerability, price, and simplifying your medication regimen. More information is available at [bluecrossvt.org/medmanage](https://bluecrossvt.org/medmanage).



### SEPARATE OR COMBINED OUT-OF-POCKET LIMITS EXPLAINED

If a plan has a separate **out-of-pocket** limit for prescription drugs, we begin to cover drug costs at 100 percent of the **allowed amount** once you reach your prescription drug out-of-pocket limit.

If a plan has a combined out-of-pocket limit for prescription drugs and medical services, we begin to pay 100 percent of the allowed amount once you reach this combined limit.

06

# GLOSSARY OF TERMS

**ALLOWED AMOUNT:**

The agreed-upon cost for the services, drugs or supplies a member's pharmacist or doctor delivers. Network providers are not allowed to charge more than the allowed amount.

**CO-INSURANCE:**

The share of a medical cost a member is responsible to pay after their deductible has been met. For example, if a member has a 20% co-insurance, their health plan pays 80% of the cost and the member pays 20%.

**CO-PAYMENT:**

The amount a member pays for specific health care services at the time of care. A member will either pay co-insurance or co-payment, and is determined by their health plan.

**DEDUCTIBLE:**

The dollar amount a member pays for services and/or medications before their plan begins to pay a larger portion of your costs.

**DRUG LISTS:**

A list of prescription drugs, both generic and brand name, covered by a member's plan.

**OUT-OF-POCKET COSTS:**

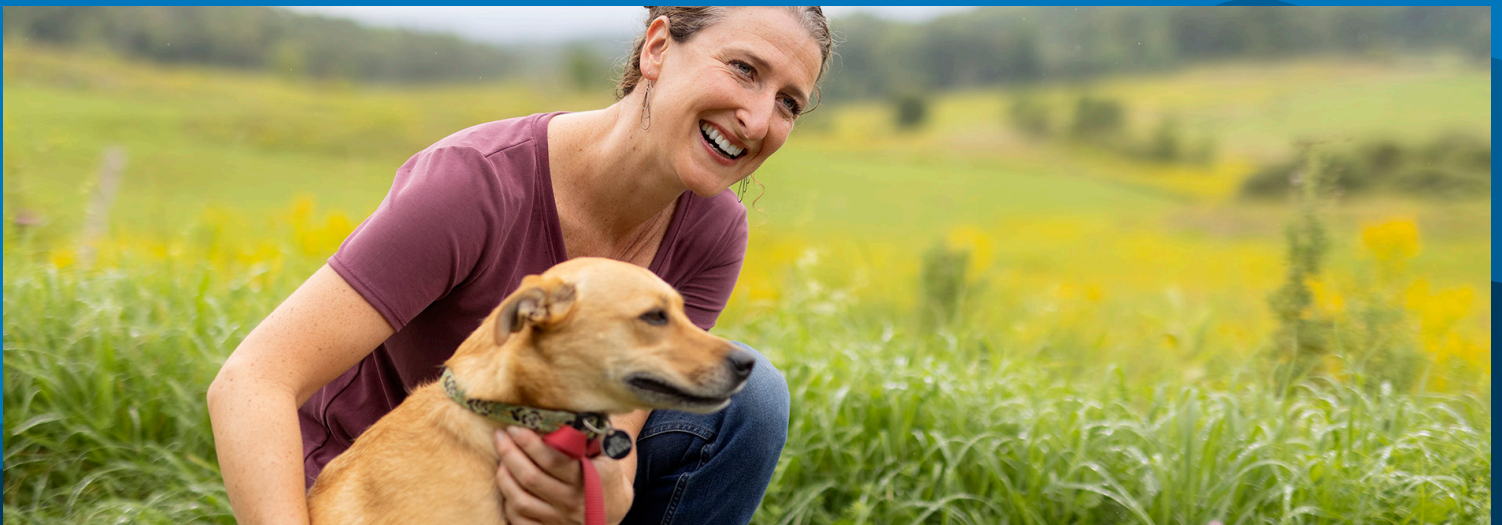
These are made up of a member's deductible, any co-insurance, and any co-payments. Members are responsible for these costs when they seek care.

**OUT-OF-POCKET LIMIT:**

A member will either pay co-insurance or co-payment, and is determined by their health plan.. Amount varies by plan.

**PREMIUM:**

A member's monthly payment for their health plan coverage.



# Disclaimers

## General Exclusions

While your health plan covers a broad array of necessary services and supplies, it doesn't cover every possible medical expense. If you would like to review the list of general exclusions before enrolling, visit [bluecrossvt.org/contracts](http://bluecrossvt.org/contracts), click on the plan in which you are enrolling and read the chapter entitled "General Exclusions." Once you enroll, you will receive an Outline of Coverage and a link to your Certificate of Coverage. Please read both carefully as they govern your specific benefits.

## How We Protect Your Privacy

The law requires us to maintain the privacy of your health information by using or disclosing it only with your authorization or as otherwise allowed by law. You may find information about our privacy practices at [bluecrossvt.org/privacypolicies](http://bluecrossvt.org/privacypolicies).

## NOTICE: Discrimination is Against the Law

Blue Cross and Blue Shield of Vermont (Blue Cross VT) and its affiliate The Vermont Health Plan (TVHP) comply with applicable federal and state civil rights laws and do not discriminate, exclude people or treat them differently on the basis of race, color, national origin, age, disability, gender identity or sex, ethnicity, sexual orientation, or HIV-status.

Blue Cross VT provides free aids and services to people with disabilities to communicate effectively with us. We provide, for example, qualified sign language interpreters and written information in other formats (e.g., large print, audio or accessible electronic format).

Blue Cross VT provides free language services to people whose primary language is not English. We provide, for example, qualified interpreters and information written in other languages.

ARABIC	للحصول على خدمات المساعدة اللغوية المجانية ، اتصل (800) 247-2583. lilhusul ealaa khadmat almusaeadat allughawiat almajaaniat , atasal (800) 247-2583.
CHINESE	如需免费语言助服务，致电，(800) 247-2583。Rú xū miǎnfèi yǔyán xiézhù fúwù, qǐng zhìdiàn (800) 247-2583.
CUSHITE (OROMO)	Tajaajila gargaarsa afaanii bilisaa argachuuf, (800) 247-2583 bilbilii.
FRENCH	Pour des services d'assistance linguistique gratuits, appelez le (800) 247-2583.
GERMAN	Für kostenlose Sprachunterstützungsdienste rufen Sie (800) 247-2583 an.
ITALIAN	Per i servizi di assistenza linguistica gratuiti, chiamare il numero (800) 247-2583.
JAPANESE	無料の言語支援サービスについては、(800) 247-2583。Muryō no gengo shien sābisu ni tsuite wa, (800) 247 - 2583 made o denwa kudasai.
NEPALI	निःशुल्क भाषा-सहायता सेवाहरूको लागि, कल गर्नुहोस्, (800) 247-2583. Niḥśulka bhāṣā-sahāyatā sēvāharūkō lāgi, kala garnuhōs (800) 247-2583.
PORTUGUESE	Para serviços gratuitos de assistência linguística, ligue para (800) 247-2583.
RUSSIAN	Чтобы получить бесплатную языковую помощь, позвоните по телефону (800) 247-2583.
SERBO-CROATIAN (SERBIAN)	За бесплатне услуге језичке помоћи позовите (800) 247-2583. Za besplatne usluge jezičke pomoći pozovite (800) 247-2583.
SPANISH	Para servicios gratuitos de asistencia lingüística, llame al (800) 247-2583.
TAGALOG	PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa (800) 247-2583.
THAI	สำหรับบริการช่วยเหลือด้านภาษาฟรี โทร.(800) 247-2583. Sǎh'raḅ brikār chwy'hel'ūx dān phās'ā frī thor (800) 247-2583.
UKRAINIAN	Щоб отримати безкоштовні мовні послуги, телефонуйте (800) 247-2583. Shchob otrymaty bezkoshtovni movni posluhy, telefonuyte (800) 247-2583
VIETNAMESE	Đối với các dịch vụ hỗ trợ ngôn ngữ miễn phí, hãy gọi (800) 247-2583.

# VERMONTERS MAKING HEALTH CARE WORK BETTER FOR VERMONTERS

(800) 255-4550 | [bluecrossvt.org/QHP](https://bluecrossvt.org/QHP)



@bluecrossvt



**BlueCross BlueShield**  
of Vermont

An Independent Licensee of the Blue Cross and Blue Shield Association.