Benefit Plan Changes



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Ascend HSA HMO

The following change will apply on January 1, 2024:

DESIGNATED PRIMARY CARE PROVIDERS (PCP) AND REFERRALS FOR HMO PLANS

Currently, HMO members are required to obtain primary care professional services from either their designated PCP, another provider in the PCP's practice, a covering provider, or the network nondesignated PCP to whom their designated PCP has referred them, except in situations where they or one of their covered dependents needs emergency or urgent care. Members are also currently required to see their designated PCP to get a referral to see a specialist or any other type of healthcare provider for all non-emergency and non-urgent services provided in an office setting. Effective January 1, 2024, HMO benefit plans will not require members to have a designated PCP, or to obtain a referral from their PCP before seeing a specialist.

The following changes will apply on renewal dates on or after January 1, 2024:

COST SHARE

Cost-share amounts for the Ascend HSA HMO plans shown below are for covered services by providers in the plan's network.

Ascend HSA HMO	Deductible	
Plan Name	2023	2024
Ascend HSA HMO \$3,000 90%	\$3,000 / \$6,000	\$3,200 / \$6,400
Ascend HSA HMO \$3,000 80%	\$3,000 / \$6,000	\$3,200 / \$6,400
Ascend HSA HMO \$3,000 70%	\$3,000 / \$6,000	\$3,200 / \$6,400

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PREVENTIVE SERVICES

Federal law often requires changes to the list of preventive services and medications covered under this benefit plan. Information on covered preventive services will be in the Preventive Services section of the benefit plan booklet (your Base Benefit Book). Note that covered preventive services may change at any time. If you have questions about your plan's covered preventive services, you can download your Base Benefit Book from your MyBlueSM account at **azblue.com/myblue**:

- Log in to your MyBlueSM account
- Select the My Benefits drop down menu
- Click "Plan Benefits"
- Under "Document," look for the file called "Benefit Book"

For information about preventive drugs covered under this benefit plan, visit **azblue.com/pharmacy**.