

SUMMARY OF BENEFIT CHANGES AND CONTRACT LANGUAGE CLARIFICATIONS

This comparison summarizes the revisions required to some group policies by the Patient Protection and Affordable Care Act (Reform) that will be made to group products effective with the first renewal after September 23, 2010 (unless specifically noted otherwise). Health insurers continue to receive additional guidance from the U.S. Department of Health and Human Services (HHS) regarding Reform. Therefore, this information is subject to change.

This list does not include minor grammatical or cosmetic modifications. If there is any inconsistency between this Summary of Changes and the Booklet, Policy, Plan or Endorsement the terms of the Booklet, Policy, Plan or Endorsement will prevail.

UTAH		
BENEFIT / REGULATORY / LEGISLATIVE CHANGES		
COMPONENT / CONTRACT(S) AFFECTED	EXISTING CONTRACT / BOOKLET / REASON FOR CHANGE	NEW CONTRACT / BOOKLET LANGUAGE
ANNUAL LIMIT Applies to all <u>group</u> products.	Added an annual limit to accommodate the essential benefit mandate under Reform.	Added a \$2,000,000 annual limit to all benefits except for adoption, dental and vision care, if included as part of the contract.
BOOKLET and CONTRACT Applies to all <u>group</u> products.	All terms of "dependent child(ren)" shall be revised to accommodate the enrolled child(ren) eligibility requirement under Reform.	Such references of "dependent child(ren)" shall now be "child(ren)."
CALENDAR YEAR DEDUCTIBLES Applies to Activate, Engage, HSA, and Innova products.	Added preventive care benefit with specific services, for Category 1 and Category 2 providers, not subject to the deductible and covered at 100% of the allowed amount, with no less than 75% coinsurance for Category 3 providers.	Revised the sentence referencing what does not apply to deductible. The sentence will also apply to "preventive care, including immunizations."
COVERED PRESCRIPTION MEDICATIONS Applies to Activate, Engage, Innova, and Preferred products.	Added preventive care benefit with specific services not subject to the deductible and covered at 100% of the allowed amount at a participating pharmacy.	Added two additional bullets covering specific preventive medications and immunizations, not subject to the deductible and covered at 100% of the allowed amount.
DEPENDENTS Applies to all <u>group</u> products.	Revised the age of eligible children and removed the marriage or domestic partner status to accommodate the enrolled child(ren) eligibility requirement under Reform.	Eligible children can now be up to 26 years of age and married or entered into a domestic partnership.
DEPENDENTS Applies to all <u>group</u> products.	Eligible children to be "dependent" upon the employee or employee's spouse will no longer apply to accommodate the enrolled child(ren) eligibility requirement under Reform.	Removed entire paragraph that expressed the enrolled child must be "dependent" upon the employee or employee's spouse for partial or total support.
FRAUDULENT USE OF BENEFITS Applies to all <u>group</u> medical products.	Revised the paragraph to add the term "material" as appropriate to accommodate the fraud and misrepresentation requirement under Reform.	The paragraph will now start: "If You or Your Enrolled Dependent engages in an act or practice that constitutes fraud in connection with coverage or makes an intentional misrepresentation of material fact..."

<p>FRAUD OR MISREPRESENTATION IN APPLICATION Applies to all <u>group</u> medical products.</p>	<p>Revised the provision to use the term "material" as appropriate to accommodate the fraud and misrepresentation requirement under Reform.</p>	<p>The second sentence of the paragraph will now begin: "In the event of any intentional misrepresentation of material fact or fraud..." The two bullets will now start as: "With regard to a Member..."</p>
<p>HOW CALENDAR YEAR BENEFITS RENEW Applies to all <u>group</u> medical products.</p>	<p>Revised section to remove the lifetime maximum for the entire plan, the maximum no longer applies to accommodate the lifetime maximum benefits requirement under Reform.</p>	<p>Revised second paragraph to read: "Some benefits of this Contract have a separate Maximum Benefit based upon a Member's Lifetime and do not renew every Calendar Year. Those exceptions are specifically noted in the benefits sections of this Booklet."</p>
<p>IMMUNIZATIONS Applies to Activate, Engage, Innova, and Preferred products.</p>	<p>Added preventive care benefit with specific services, for Category 1 and Category 2 providers, not subject to the deductible and covered at 100% of the allowed amount, with no less than 75% coinsurance for Category 3 providers.</p>	<p>Removed entire immunization benefit. Immunizations are now covered under the "Preventive Care" benefit.</p>
<p>LIMITS (DOLLAR MAXIMUM BENEFIT LIMITS) Applies to all <u>group</u> products.</p>	<p>The dollar maximum limits will no longer apply to accommodate the essential benefits mandate under Reform.</p>	<p>Removed all dollar maximum limits, except for dental and vision care, if included as part of the contract.</p>
<p>LIMITS (DOLLAR MAXIMUM REVISION TO DAY/VISITS) Applies to all <u>group</u> products.</p>	<p>The dollar maximum limits will be revised to a day/visit maximum on specified benefits to accommodate the essential benefits mandate under Reform.</p>	<p>Revised any dollar maximum limits on the specified benefits below to a day/visit limit: Neurodevelopmental Therapy and Rehabilitation Services.</p>
<p>LIFETIME MAXIMUM BENEFITS Applies to all products.</p>	<p>The lifetime maximum for the entire plan no longer applies to accommodate the lifetime maximum benefits requirement under Reform.</p>	<p>Removed the entire Lifetime Maximum Benefits provisions.</p>
<p>LOSS OF DEPENDENT STATUS Applies to all <u>group</u> products.</p>	<p>Eligible child(ren) entering into a marriage or domestic partner status being cause for termination no longer applies to accommodate the enrolled child(ren) eligibility requirement under Reform.</p>	<p>The bullet reading: "For an enrolled child who marries, eligibility ends on the..." has been removed.</p>
<p>MAMMOGRAPHY Applies to Engage and Preferred with separate preventive benefit products.</p>	<p>Added preventive care benefit with specific services, for Category 1 and Category 2 providers, not subject to the deductible and covered at 100% of the allowed amount, with no less than 75% coinsurance for Category 3 providers.</p>	<p>Added a mammography benefit for illness or injury mammography services.</p>
<p>MAXIMUM BENEFITS Applies to all <u>group</u> products.</p>	<p>The lifetime maximum for the entire plan no longer applies to accommodate the lifetime maximum benefits requirement under Reform.</p>	<p>Removed the entire first paragraph. Revised the beginning of the second paragraph to read as: "Some benefits for Covered Services may have..." Also removed the following sentence from the second paragraph: "Benefits paid for those Covered Services also apply toward the cumulative Lifetime Maximum Benefit amount."</p>

<p>OFFICE VISITS – ILLNESS, INJURY OR PREVENTIVE CARE Applies to Preferred <u>without</u> separate preventive benefit product.</p>	<p>Added preventive care benefit with specific services, for Category 1 and Category 2 providers, not subject to the deductible and covered at 100% of the allowed amount, with no less than 75% coinsurance for Category 3 providers.</p>	<p>Revised the title to be: Office Visits – Illness or Injury. Removed all references to "preventive care." Only services for Illness or Injury are covered in the Office Visits – Illness or Injury benefit.</p>
<p>OTHER PROFESSIONAL SERVICES Applies to Preferred <u>without</u> separate preventive benefit product.</p>	<p>Added preventive care benefit with specific services, for Category 1 and Category 2 providers, not subject to the deductible and covered at 100% of the allowed amount, with no less than 75% coinsurance for Category 3 providers.</p>	<p>Removed all references to "preventive care" and "routine." Only services for Illness or Injury are covered in the Other Professional Services benefit.</p>
<p>OTHER PROFESSIONAL SERVICES Applies to Preferred with separate preventive benefit product.</p>	<p>Added preventive care benefit with specific services, for Category 1 and Category 2 providers, not subject to the deductible and covered at 100% of the allowed amount, with no less than 75% coinsurance for Category 3 providers.</p>	<p>Removed all references to separate "preventive care" benefit. Only services for Illness or Injury are covered in the Other Professional Services benefit.</p>
<p>PREEXISTING CONDITION Applies to all <u>group</u> medical products.</p>	<p>Members who enroll prior to 19 years of age will no longer have a waiting period for preexisting conditions imposed to accommodate the preexisting exclusions for children requirement under Reform.</p>	<p>Revised last sentence of the paragraph to read: "In addition, exclusion periods for Preexisting Conditions are not imposed on a Member who is enrolled prior to reaching 19 years of age."</p>
<p>PRESCRIPTION MEDICATIONS: Covered Prescription Medications Applies to HSA product.</p>	<p>Added preventive care benefit with specific services not subject to the deductible and covered at 100% of the allowed amount at a participating pharmacy.</p>	<p>Added two additional bullets covering specific preventive medications and immunizations, not subject to the deductible and covered at 100% of the allowed amount.</p>
<p>PRESCRIPTION MEDICATIONS: Exclusions Applies to HSA product.</p>	<p>Added preventive care benefit with specific services not subject to the deductible and covered at 100% of the allowed amount at a participating pharmacy.</p>	<p>Removed "Immunization Agents" from the exclusions list.</p>
<p>PRESCRIPTION MEDICATIONS: Limitations Applies to HSA product.</p>	<p>Added preventive care benefit with specific services not subject to the deductible and covered at 100% of the allowed amount at a participating pharmacy.</p>	<p>Revised the lead-in sentence to read: "The following limitations apply to this Prescription Medication Benefits Section, except for certain preventive medications as specified in the Covered Prescription Medications section of this provision:"</p>
<p>PRESCRIPTION MEDICATION BENEFITS: Exclusions Applies to Activate, Engage, Innova, and Preferred products.</p>	<p>Added preventive care benefit with specific services not subject to the deductible and covered at 100% of the allowed amount at a participating pharmacy.</p>	<p>Removed "Immunization Agents" from the exclusions list.</p>
<p>PRESCRIPTION MEDICATION BENEFITS: Limitations Applies to Activate, Engage, Innova, and Preferred products.</p>	<p>Added preventive care benefit with specific services not subject to the deductible and covered at 100% of the allowed amount at a participating pharmacy.</p>	<p>Revised the lead-in sentence to read as: "The following limitations apply to this Prescription Medication Benefits Section, except for certain preventive medications as specified in the Covered Prescription Medications section of this provision:"</p>

<p>PREVENTIVE CARE Applies to Activate and Innova products.</p>	<p>Added preventive care benefit with specific services, for Category 1 and Category 2 providers, not subject to the deductible and covered at 100% of the allowed amount, with no less than 75% coinsurance for Category 3 providers.</p>	<p>Added a Preventive Care benefit that covers specific services based on the United States Preventive Service Task Force (USPSTF) for services with an A or B rating in the current recommendations; by the Health Resources and Services Administration (HRSA); or by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention (CDC).</p>
<p>PREVENTIVE CARE Applies to Engage <u>without</u> separate preventive care benefit product.</p>	<p>Added preventive care benefit with specific services, for Category 1 and Category 2 providers, not subject to the deductible and covered at 100% of the allowed amount, with no less than 75% coinsurance for Category 3 providers..</p>	<p>Added a Preventive Care benefit that covers specific services based on the United States Preventive Service Task Force (USPSTF) for services with an A or B rating in the current recommendations; by the Health Resources and Services Administration (HRSA); or by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention (CDC).</p>
<p>PREVENTIVE CARE Applies to Engage, HSA and Preferred with separate preventive care benefit products.</p>	<p>Added preventive care benefit with specific services, for Category 1 and Category 2 providers, not subject to the deductible and covered at 100% of the allowed amount, with no less than 75% coinsurance for Category 3 providers.</p>	<p>Replaced current Preventive Care benefit with a Preventive Care benefit that covers specific services based on the United States Preventive Service Task Force (USPSTF) for services with an A or B rating in the current recommendations; by the Health Resources and Services Administration (HRSA); or by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention (CDC).</p>
<p>PROFESSIONAL SERVICES Applies to Activate and Innova products.</p>	<p>Added preventive care benefit with specific services, for Category 1 and Category 2 providers, not subject to the deductible and covered at 100% of the allowed amount, with no less than 75% coinsurance for Category 3 providers.</p>	<p>Removed all references to "preventive care" and "routine". Only services for Illness or Injury are covered in the Professional Services benefit.</p>
<p>PROFESSIONAL SERVICES Applies to Engage <u>without</u> separate preventive benefit product.</p>	<p>Added preventive care benefit with specific services, for Category 1 and Category 2 providers, not subject to the deductible and covered at 100% of the allowed amount, with no less than 75% coinsurance for Category 3 providers.</p>	<p>Removed all references to "preventive care" and "routine." Only services for Illness or Injury are covered in the Professional Services benefit.</p>
<p>PROFESSIONAL SERVICES Applies to Engage with separate preventive benefit product.</p>	<p>Added preventive care benefit with specific services, for Category 1 and Category 2 providers, not subject to the deductible and covered at 100% of the allowed amount, with no less than 75% coinsurance for Category 3 providers.</p>	<p>Removed all references to separate "preventive care" benefit. Only services for Illness or Injury are covered in the Professional Services benefit.</p>
<p>SPECIFIC EXCLUSIONS Applies to all <u>group</u> medical products.</p>	<p>Added preventive care benefit with specific services, for Category 1 and Category 2 providers, not subject to the deductible and covered at 100% of the allowed amount, with no less than 75% coinsurance for</p>	<p>Revised the lead-in sentence to read: "We will not provide benefits for any of the following conditions, treatments, services, supplies or accommodations, including any direct complications or</p>

	Category 3 providers.	consequences that arise from them. However, these exclusions will not apply with regard to an otherwise Covered Service for: 1) an Injury, if the Injury results from an act of domestic violence or a medical condition (including physical and mental) and regardless of whether such condition was diagnosed before the Injury, as required by federal law; or 2) a preventive service as specified under the Preventive Care benefit in the Medical Benefits Section."
SUBMISSION OF CLAIMS AND REIMBURSEMENT Applies to all <u>group</u> medical products.	Revised section to remove the lifetime maximum for the entire plan. The maximum no longer applies to accommodate the lifetime maximum benefits requirement under Reform.	Revised the second paragraph to read: "You will be responsible for the total billed charges for benefits in excess of any Maximum Benefits, and for charges for any other service or supply not covered under this plan, regardless of the Provider rendering such service or supply."
ULHIGA NOTICE Applies to all <u>group</u> products.	Per Utah Department of Insurance, need to revise the Utah Life and Health Insurance Guaranty Association notice based on specific revisions received from the Utah DOI.	Entire provision has been replaced with new language from the Utah DOI.
UPFRONT BENEFITS Applies to Innova product.	Added preventive care benefit with specific services, for Category 1 and Category 2 providers, not subject to the deductible and covered at 100% of the allowed amount, with no less than 75% coinsurance for Category 3 providers.	Removed all references to "preventive care." Only services for Illness or Injury are covered in the Upfront Benefits.
UPFRONT BENEFITS: Upfront Benefits For Expanded Office Services Applies to Innova product.	Added preventive care benefit with specific services, for Category 1 and Category 2 providers, not subject to the deductible and covered at 100% of the allowed amount, with no less than 75% coinsurance for Category 3 providers.	Revised the first benefit clarification paragraph to end: "... which is covered under the Family Planning benefit or immunizations, which are covered under the Preventive Care benefit."



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