

Florida Blue Medical and Pharmacy

Pasco County Schools— January 1st, 2023

Presenter

Alexis Meza and Patty Nguyen

Overview



- Plan Overview
- Helpful Resources
- Money Saving Tips

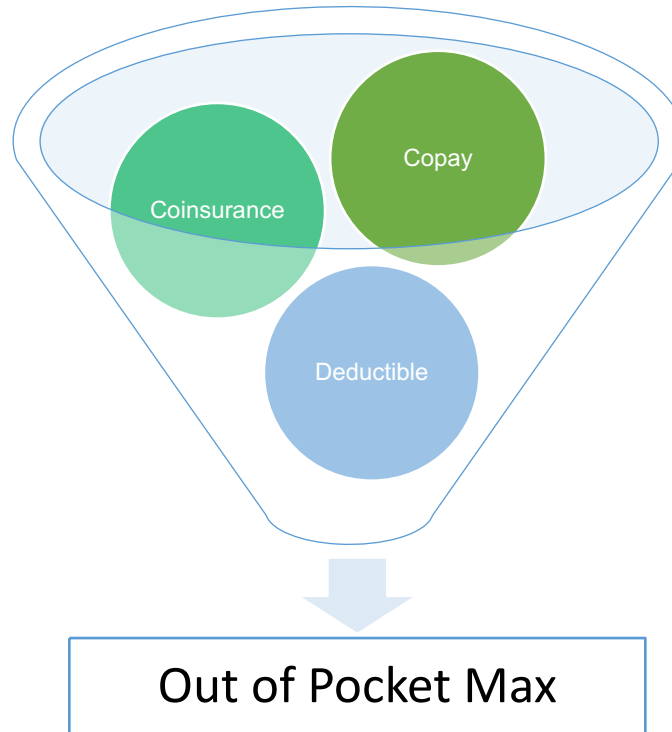
Florida Blue Plan Features

HMO	PPO
In-Network Benefits	In-Network Benefits *Out of Network Benefits
Florida State Network (Out of State Coverage for Emergency Only) Away From Home Care	Florida State and Nationwide Network (BlueCard PPO)
Primary Care Physician Required	Primary Care Physician NOT Required

All Florida Blue Plans	
Preventive Care Covered at 100% (see wellness guidelines for details)	Open Access, No Referrals Needed
Nationwide RX and Mail Order	Authorizations
Blue365 Discounts	Care Consultants and 24/7 Nurse Line
Quest Diagnostic Labs(Florida State)	www.FloridaBlue.com and Mobile App

* Out of Network Benefits cover the usual and customary cost shares, you may be subject to balance billing.

A health plan includes different types of member cost-sharing when you get medical care.



- **Out-of-Pocket Maximum** - is the most you will pay for covered health care services during your plan's coverage period.
- **Deductible** - is the dollar amount that you must pay each year before your insurance coverage begins to pay for covered benefits that have a deductible.
- **Copayment** - is a fixed dollar amount you pay for medical services.
- **Coinsurance** - is the part (or percentage) you pay for services after you meet the plan's deductible.

Benefit Summary Sample

Deductible

\$1,300

Coinsurance

80/20

You pay 20 % of total

Out-of-Pocket Annual Max

\$5,000



XYZ Hospital

Hospital Fees	\$25,000
Doctor Fees	\$15,000
Specialists	\$ 9,000
X-rays	\$ 1,000
<hr/>	
Total	\$50,000

Out of Network/No Insurance Cost

Hospital Billed: \$50,000
Negotiated Cost: \$14,000

Insurance and Hospital
Negotiated Cost

Deductible

\$14,000

- \$1,300

\$12,700

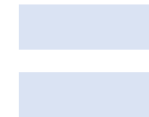


Coinsurance

\$12,700

x 20%

\$2,540



Member Cost

\$1,300

+ \$2,540

\$3,840

In Network Cost: \$3,840

Plan 48(HMO) “Basic Plan”

Financial Features	
Deductible	\$2,000 per person \$6,000 per family
Coinsurance	20%
Out of Pocket Max (OOP)	\$5,500 per person \$11,000 per family

Copay Services

Office Services

Emergency Medical Facilities

Diagnostic (IDTF and Independent Lab)

Ambulatory Surgical Center (ASC)

Provider Services at ASC

Deductible and Coinsurance Services

Hospital Facilities (Inpatient and Outpatient)

Ambulance

Provider Services at Hosp. and ER

Medical Pharmacy (20% Coins., \$200 mo. max.)

Skilled Nursing

Preventive Services and Quest Diagnostic Labs are a \$0 copay

Plan 61 (HMO) “Premium Plan”

Financial Features	
Deductible	\$1,500 per person \$4,500 per family
Coinsurance	10%
Out of Pocket Max (OOP)	\$5,500 per person \$11,000 per family

Copay Services

Office Services

Emergency Medical Facilities

Diagnostic (IDTF and Independent Lab)

Ambulatory Surgical Center (ASC)

Provider Services at ASC

Deductible and Coinsurance Services

Hospital Facilities (Inpatient and Outpatient)

Ambulance

Provider Services at Hosp. and ER

Birthing Centers

Skilled Nursing

Preventive Services and Quest Diagnostic Labs are a \$0 copay

Plan 03768 (PPO)
“PPO Standard”

Financial Features	
Deductible	\$2,500 per person \$7,500 per family
Coinsurance	30%
Out of Pocket Max (OOP)	\$5,500 per person \$11,000 per family

Copay Services
Office Services
Emergency Medical Facilities
Diagnostic (IDTF and Independent Lab)
Ambulatory Surgical Center (ASC)
Provider Services at ASC, ER, and Hospitals
Outpatient Hospital and Therapies

Deductible and Coinsurance Services
Hospital (Inpatient)
Ambulance
Durable Medical Equipment
Home Health
Skilled Nursing
Hospice

Preventive Services and Quest Diagnostic Labs are a \$0 copay

Plan Side by Side – Financial Summary

COST SHARING Maximums shown are Per Benefit Period (PBP) unless noted	HMO PLAN 48 HMO Basic BlueCare	HMO PLAN 61 HMO Premium BlueCare	PPO 03768 PPO Standard BlueOptions
Deductible (DED) (Per Person/Family Agg)			
In-Network	\$2,000/\$6,000	\$1,500/\$4,500	\$2,500/\$7,500
Out-of-Network	Not Covered	Not Covered	\$4,000/\$12,000
Hospital Per Admission Deductible (PAD)			
In-Network	\$0 Copay	\$0 Copay	\$0 Copay
Coinsurance (Member Responsibility)			
In-Network	20%	10%	30%
Out-of-Network	Not Covered	Not Covered	40%
Out of Pocket Maximum (Per Person/Family Agg) (DED/Coins./Medical & Rx Copays)			
In-Network	\$5,500/\$11,000	\$5,500/\$11,000	\$5,500/\$11,000
Out-of-Network	Not Covered	Not Covered	\$8,250/\$16,500
Lifetime Maximum	Unlimited	Unlimited	Unlimited

Plan Side by Side – Provider Services

PROFESSIONAL PROVIDER SERVICES	48	61	03768
Allergy Injections (office) In-Network Family Physician In-Network Specialist Out-of-Network	\$20 Copay \$20 Copay Not Covered	\$20 Copay \$20 Copay Not Covered	\$20 Copay \$20 Copay DED + 40%
Virtual Visit Services In-Network Family Physician In-Network Behavioral Health Specialist In-Network Specialist Out-of-Network	\$0 Copay \$35 Copay \$75 Copay Not Covered	\$0 Copay \$35 Copay \$65 Copay Not Covered	\$0 Copay \$35 Copay \$45 Copay Not Covered
Office Services (per visit) In-Network Family Physician In-Network Specialist (Includes Chiropractor office visit) In-Network Behavioral Health Specialist Out-of-Network	\$40 Copay \$75 Copay \$40 Copay Not Covered	\$35 Copay \$65 Copay \$35 Copay Not Covered	\$40 Copay \$80 Copay \$40 Copay DED + 40%
Provider Services at Hospital and ER In-Network Family Physician In-Network Specialist Out-of-Network (For HMO Plans, only for emergencies)	DED + 20% DED + 20% INN DED + 20%	DED + 10% DED + 10% INN DED + 10%	\$80 Copay \$80 Copay \$80 Copay
Radiology, Pathology and Anesthesiology Provider Services at Ambulatory Surgical Center (ASC) In-Network Specialist Out-of-Network	\$75 Copay Not Covered	\$65 Copay Not Covered	\$80 Copay \$80 Copay

Plan Side by Side – Emergency Services

EMERGENCY/URGENT/CONVENIENT CARE	48	61	03768
Ambulance Services (Air, Ground, water)			
In-Network	DED + 20%	DED + 10%	DED + 30%
Out-of-Network (For HMO Plans, only for emergencies)	INN DED + 20%	INN DED + 10%	INN DED + 30%
Convenient Care Centers (CCC) (Advent Health Express Care inside Walgreens Pharmacy)			
In-Network	\$40 Copay	\$35 Copay	\$40 Copay
Out-of-Network	Not Covered	Not Covered	DED + 40%
Emergency Room Facility Services (per visit) (Copayment waived if admitted) (also see Professional Provider Services)			
In-Network	\$500 Copay	\$500 Copay	\$500 Copay
Out-of-Network	\$500 Copay	\$500 Copay	\$500 Copay
Urgent Care Centers (UCC)			
Value Choice Urgent Care Provider (\$0 for visits 1-2 per benefit period)	\$0, then \$50 Copay	\$0, then \$50 Copay	\$0, then \$50 Copay
In-Network	\$50 Copay	\$50 Copay	\$50 Copay
Out-of-Network	Not Covered	Not Covered	DED + \$50

Plan Side by Side – Facility Services

FACILITY SERVICES - HOSP/SURG/ICL/IDTF -unless otherwise noted, physician services are in addition to facility services. See professional provider services.			
Ambulatory Surgical Center (ASC) In-Network Out-of-Network	48 \$400 Copay Not Covered	61 \$200 Copay Not Covered	03768 \$200 Copay DED + 40%
Independent Clinical Lab (Quest Diagnostics is preferred in network lab.) In-Network Out-of-Network	\$0 Copay Not Covered	\$0 Copay Not Covered	\$0 Copay DED + 40%
Independent Diagnostic Testing Facility (IDTF) - X-rays and AIS (Includes Physician Services) In-Network - Advanced Imaging Services (AIS) (I.E., MRI's, CT Scans, Nuclear Medicine) In-Network - Other Diagnostic Services (x-rays, ultrasounds) Out-of-Network	\$300 Copay \$50 Copay Not Covered	\$200 Copay \$50 Copay Not Covered	\$300 Copay \$50 Copay DED + 40%
Inpatient Hospital & Inpatient Rehab. Facility (per admission) In-Network Out-of- Network	 DED + 20% Not Covered	 DED + 10% Not Covered	 DED + 30% DED + 40%
Outpatient Hospital (per visit) (Surgical or Non-Surgical Svcs., i.e., lab work/ Dx Testing) In-Network Out-of-Network	 DED + 20% Not Covered	 DED + 10% Not Covered	 \$300 Copay DED + 40%
Therapy at Outpatient Hospital (per visit) In-Network Out-of-Network	\$75 Copay Not Covered	\$65 Copay Not Covered	\$80 Copay DED + 40%

Plan Side by Side – Therapy and Equipment Services

OTHER SPECIAL SERVICES	48	61	03768
Diabetic Equipment (CGM & Insulin Pump) (Coordinated via CareCentrix) In-Network Out-of-Network	\$0 Copay Not Covered	\$0 Copay Not Covered	DED + 30% DED + 40%
Durable Medical Equipment, Prosthetics, Orthotics (Coordinated via CareCentrix) In-Network Out-of-Network	\$0/\$500 Motorized Wheelchair Not Covered	\$0/\$500 Motorized Wheelchair Not Covered	DED + 30% DED + 40%
Home Health Care PBP (Coordinated via CareCentrix) In-Network Out-of-Network	35 visits PBP \$0 Copay Not Covered	Unlimited \$0 Copay Not Covered	60 visits PBP DED + 30% DED + 40%
Outpatient Therapy and Spinal Manipulations (26 PBP) Combined Benefit Period Maximum Outpatient Rehab Therapy Center (per visit) In-Network Out-of-Network Physician Office (per visit) In-Network Physical Therapist Outpatient Hospital Facility Services (per visit) In-Network Out-of-Network	35 visits PBP 4 modalities/day \$75 Copay Not Covered \$75 Copay \$75 Copay Not Covered	35 visits PBP 4 modalities/day \$35 Copay Not Covered \$35 Copay \$65 Copay Not Covered	35 visits PBP 4 modalities per day \$40 Copay DED + 40% \$40 Copay \$80 Copay DED + 40%
Medical Pharmacy (Physician Administered in office setting/home health setting) In-Network Monthly Out of Pocket Max.for medication only In-Network Provider (cost of medication only, separate cost share for administration) Out-of-Network Provider	\$200/\$200 20%/20% Not Covered	\$0/\$0 0%/0% Not Covered	\$0/\$0 0%/0% DED + 40%

Value Choice Providers

Sanitas Medical Center, Diagnostic Clinic Medical Group and GuideWell Emergency Doctors are Value Choice Providers that offer Florida Blue members extra care — and they're in your plan's network. There, you'll get:

Primary Care for the whole family
Specialist Care
Urgent care
Labs and Imaging
Virtual Visits



mysanitas.com
844-665-4827



dc-fl.com
727-584-7706



guidewellemergency.com
See locations for phone numbers

RX Plans

- Exclusive Retail Pharmacy

Walgreens

- **Diabetic Supplies** -Diabetic supplies require a prescription.

- Glucose meters
- Test strips
- Lancets
- Acetone test tablets and/or syringes
- Insulin for self-injections
- Insulin for insulin pumps
- Needles

- **Utilization Management Programs**

- Prior Authorizations
- Responsible Quantity
- Responsible Steps

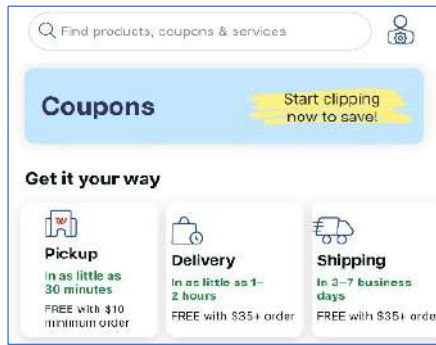
	In- Network	Out-of- Network (HMO)	Out-of- Network (PPO)	Mail Order*
Tier 1: Preferred Generic Prescription Drugs	\$10	Not Covered	50% of allowance	\$20
Tier 2: Preferred Brand Name Prescription Drugs	\$35	Not Covered	50% of allowance	\$70
Tier 3: Non-Preferred Brand Prescription Drugs	\$60	Not Covered	50% of allowance	\$120

*Extended Supply Network = 2.5X Retail Copay

Digital App Features Hands on Training Session



How To Place A Pickup, Delivery, Or Ship To Store Order Using The Walgreens App



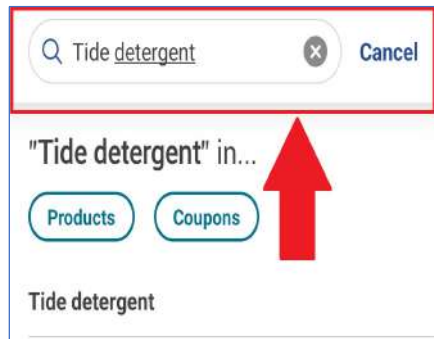
• Step 1

- Open Walgreens App on your smartphone device and scroll down to the “Get it your way” Section.



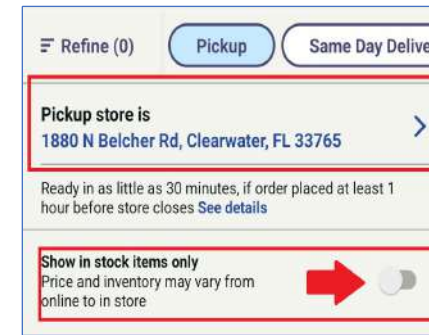
• Step 2

- Select which receiving method you would like for this order; Pickup, Same Day Delivery, or Shipping (3-5day).



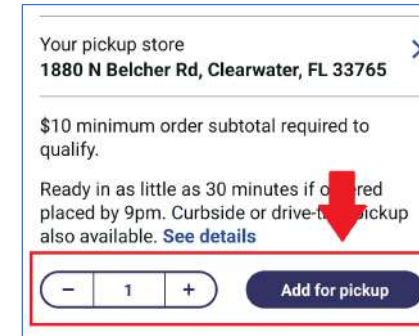
• Step 3

- Type in the specific product or product category into the search bar and hit search.



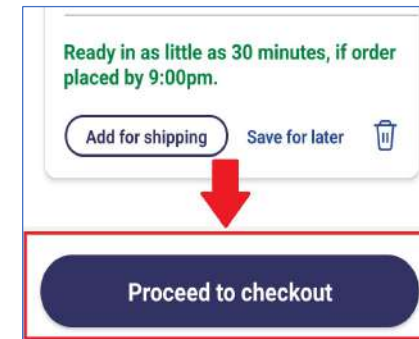
• Step 4

- Select the desired pickup location and then click the “Show in stock items only” slider.



• Step 5

- Select the item you want to purchase and add it to the cart, then repeat the process for the rest of the items you would like to purchase.



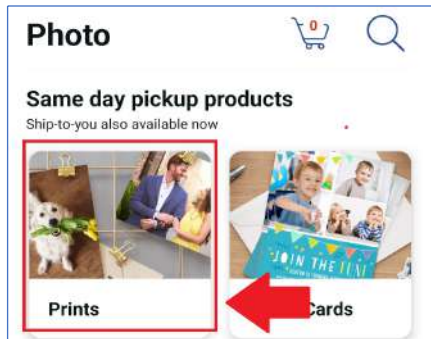
• Step 6

- Touch the shopping cart icon in the top right and select “Proceed to Checkout”. Next select the store location you want to use and enter your payment info. Once you have done so tap submit order.

How To Place A Photo Order Using The Walgreens App



- **Step 1**
- Open the Walgreens App on your Smartphone device and touch the Photo icon in the bottom right corner.



- **Step 2**
- Select the type of photo product you would like to create (select prints for this exercise).



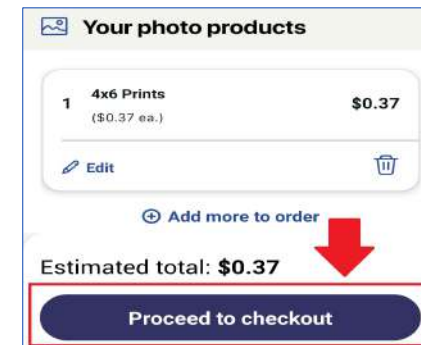
- **Step 3**
- Next select the source from the import photos list where the photos you want are located. (select your device for this exercise).



- **Step 4**
- Locate the pictures you would like prints of and touch each one. A blue check mark indicates the photos you have selected.



- **Step 5**
- Use the +/- to add prints and the drop down to add other sizes if needed. Once you have done so for all select the “Add to photo cart” option.



- **Step 6**
- Select the “Proceed to checkout” and select a store to pickup at or the shipping option. Enter your payment info and submit the order

How To Search And Clip Digital Coupons And Personalized Offers



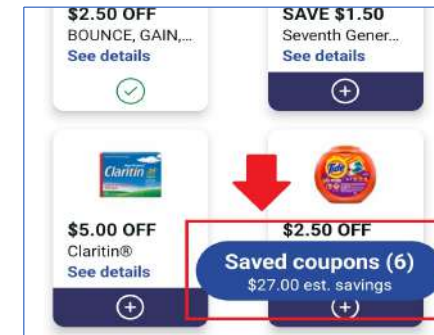
- **Step 1**
- Open the Walgreens App on your smartphone device and scroll down to the “Coupons” tile right below the weekly ad and tap it.



- **Step 4**
- To clip a coupon touch the + icon on the offer tile and it will change to a green check mark indicating the offer has been clipped.



- **Step 2**
- The default screen will show all available digital coupons in all categories. You can filter the search by swiping the bar at the top to pick a specific category



- **Step 5**
- Touch the “Saved coupons” tile in the bottom right of the screen to view what digital coupons you have clipped to your account.



- **Step 3**
- Locate the items with the “Only For You” banner these personalized offers and vary based on spending habits etc.



- **Step 6**
- When you go to the checkout in the store any your digital coupons will automatically apply to the transaction after entering your phone number and purchasing the eligible item.

How To Use The App To Schedule An Appointment For A COVID Vaccine Or Other Immunization

It's easy to schedule your vaccines

Just scan here
or visit
[Walgreens.com/
ScheduleVaccine](https://Walgreens.com/ScheduleVaccine)

Data rates may apply



- Choose a convenient date and time
- Get multiple vaccines in the same visit, including COVID-19, flu, shingles, pneumonia, whooping cough and travel
- Save time by completing paperwork before you come in

Walgreens

COVID-19 testing

that's safe, convenient and **FREE***



Whether you're preparing to travel, think you've been exposed to COVID-19 or just want peace of mind, a COVID-19 test provides you the information you need to keep you and those around you safe.

Ask us how you can get a FREE* COVID-19 test today.



- **Step 1**
- Open the Walgreens App on your smartphone device and scroll to the “COVID 19 Vaccine” tile and tap “Schedule Now”.

- **Step 2**
- Type in your zip code and date of birth in the appropriate fields and tap next.

- **Step 3**
- Select the immunization you would like to schedule an appointment for and tap next.

- **Step 4**
- On the next screen locate the store you would like to use and view their open appointment times. Select your desired appointment by tapping the time and date.

- **Step 5**
- Now select any additional immunizations you would be interested in and then proceed to the patient information page.

- **Step 6**
- Input your patient information and then click next. On the next screen verify your information and click “Book Appointment”.

Thank You!

Mail Order – NEW FOR 2023



SHOP Easy to use

Amazon Pharmacy makes ordering your medications easier because it's like shopping on Amazon:

- Easy sign up, which includes the option to have your account auto-populated with your prescription history.
- Option for 90+ day supply.
- Pharmacists on call 24/7.
- Ability to manage your medication and order history.

SAVE Built-in drug discount card

Some drugs may be available at lower prices with a discount card. MedsYourWay discount pricing is built right into the Amazon Pharmacy experience.

- At check out, you'll see the lowest cost available for your medication. That's the price you'll pay.
- MedsYourWay discount card pricing is not insurance; however, all prescribed and covered purchases, whether paying a copay or using the discount card pricing, automatically count toward your annual out-of-pocket maximum.

SHIP Convenient home delivery

Skip the pharmacy line with home delivery.

- Fast delivery: Amazon Prime members get 2-day no-cost shipping on most orders; standard no-cost shipping for non-Amazon Prime members is 5-day but can be expedited to 2-day delivery for an additional fee.
- Real-time package tracking from order to delivery.

Self-Administered Specialty Drugs



- **Utilization Management/Responsible Rx Programs**
 - Prior Authorizations
 - Quantity Limits
 - Responsible Steps

	In-Network	Out-of-Network (HMO)	Out-of-Network (PPO)
Tier 1: Preferred Specialty Generic Prescription Drugs	\$25	Not Covered	50% of allowance
Tier 2: Preferred Brand Name Specialty Prescription Drugs	\$50	Not Covered	50% of allowance
Tier 3: Non-Preferred Brand Specialty Prescription Drugs	\$100	Not Covered	50% of allowance

Care Programs

Healthy Additions (Prenatal Program): Quick access to a Registered Nurse • Coaching on maintaining a healthy lifestyle • Free educational material • Information on obtaining a breast pump.

Better Your Strides (Online Wellness Platform): Activities address your specific health needs and wellness goals. Monthly challenges to help you learn and adopt new habits for better health, like drinking more water, taking stretch breaks and understanding food labels.

Chronic Condition: Dedicated nurses and other clinical professionals focused on helping you reach your health goals. Access to community resources that help with transportation, food, finances and more. Health support at your fingertips through the secure and convenient BlueForMe app for your smartphone

Advanced Care Planning: The ACP Program is a voluntary care program that offers advance care planning, palliative care and, when appropriate, a smooth transition to hospice care. Florida Blue is working with Vital Decisions and other care providers to help you throughout your participation in the program.



Helpful Resources

Care Consultants (1-888-476-2227). Whether it's your first office visit, or a series of ongoing medical treatments or a new medication, call our Care Consultants first. You'll find out how your benefits work, what factors can affect your costs and which programs are available to assist you.

24/7 Nurseline (1-877-789-2583). Health questions can come up at any time; and you don't have to wait for answers. You'll get answers, plus helpful resources that you can use.

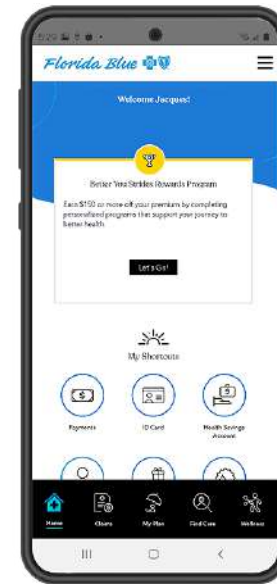
Call Customer Service by using the toll-free number on your Florida Blue member ID card if you need us. Don't forget to review your health statement from Florida Blue since most questions can be answered right here. Your financial responsibility to a provider will be listed as "member responsibility."

Visit us in person at a **Florida Blue Center** located throughout Florida.



Access Florida Blue

- Plan details such as **deductibles, claims, expense history** or a **full list of benefits**.
- Access **drug prices** and **compare pharmacies**.
- **Find a doctor** or facility from a custom provider network.
- Access a range of **free health and medical wellness tools** from WebMD®
- Print or request a **new ID card** on [Floridablue.com](https://www.floridablue.com).
- Get a picture of your **member ID card** on the Florida Blue Mobile App.
- And so much more...



Money Saving Tips



Pick the Right Spot for Care.



Know Before You Go.



Don't Let the Savings Stop.



- Stay In-Network
- Generic Drugs
- Walk-in Clinics
- Compare Cost
- Wellness Visits
- Blue 365
- Florida Blue Retail
- Nurse Helpline
- Care Consultants
- Healthy Additions

Florida Blue On-site Representative



Benefits

Claims

Billing

Provider Inquiries

Access to Healthy Resources.

Patty Nguyen

Florida Blue On-site Representative

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(813) 794-2492 | (352) 524-2492 | (727) 774-2492

Bldg. #4-HREQ/EBARM

Mondays - Fridays | 8:30 a.m. to 5:00 p.m. (excluding Holidays)

Question

Answer