

Get the Best With HMSA



An Independent Licensee of the Blue Cross and Blue Shield Association



It's Our Privilege to Serve You

- Most experienced plan in Hawaii
- Improving the health and well-being of Hawaii
- Our strong reserve protects our members
- You can always count on us!

Hawaii's Well-being Leader



Our mission is to provide the people of Hawaii access to a sustainable, quality health care system that improves the overall health and well-being of our state.



Well-being Initiatives

- Māhie 2020
- HMSA's Care Model
- Primary Care Provider Payment Transformation
- Ornish Lifestyle Medicine®
- Blue Zones Project®
- Be Well, Be Strong

Dr. Ornish's Program for Reversing Heart Disease®.
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Blue Zones Project® is a trademark of Blue Zones, LLC.
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Get More with HMSA

- Expansive provider network
- More access to doctors and the state's top hospitals
- Benefits and services that support your good health and well-being

More Access to Hawaii's Best Hospitals

KAPĪOLANI
MEDICAL CENTER
FOR WOMEN & CHILDREN

An affiliate of Hawai'i Pacific Health



**THE QUEEN'S
HEALTH SYSTEMS**

STRAUB
CLINIC & HOSPITAL

An Affiliate of Hawai'i Pacific Health

PALI MOMI
MEDICAL CENTER

An Affiliate of Hawai'i Pacific Health



Castle Medical Center

 **Adventist
Health**

*Exceptional Medicine
by Exceptional People*



Preventive Services to Keep You Healthy

- Immunizations
- Mammograms
- Well-women exams
- Well-child visits
- Cancer screenings
- Annual Preventive Health Exam
- Annual Physical Exam (HMO)

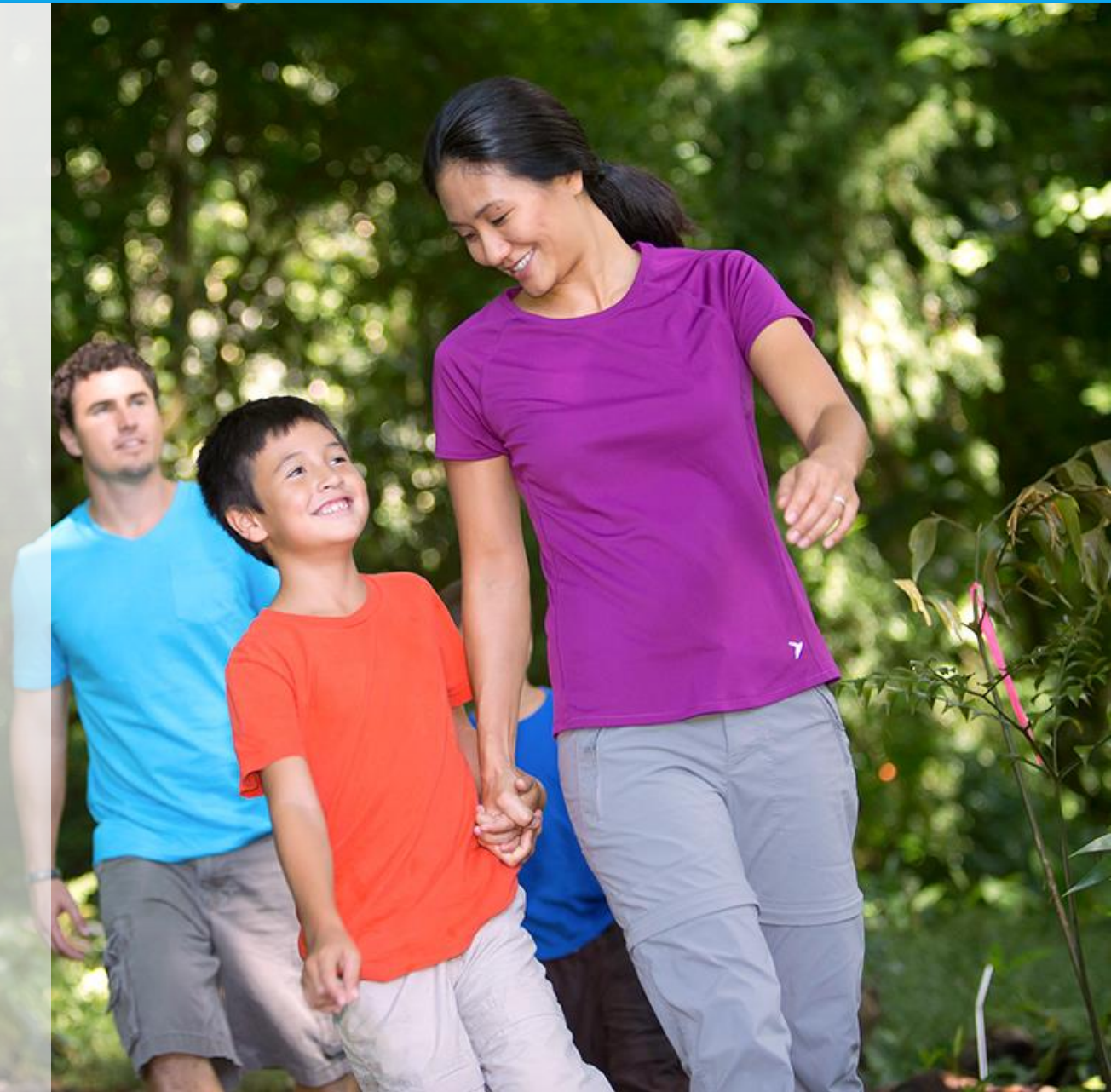
Strategic Partnerships that Benefit Our Members

- Sharecare
- CVS/caremark
- Beacon Health Strategies
- USAbLe Life
- American Specialty Health
- Blue Zones Project



Health Plans That Work for You

- Preferred Provider Plan
- CompMED
- Health Plan Hawaii Plus
- CompMED HRA



Plan Comparison

Services	Preferred Provider Plan (participating provider)	CompMED (participating provider)	Health Plan Hawaii Plus
Annual maximum out-of-pocket limit	\$2,500 per person, \$7,500 per family	\$3,000 per person, \$9,000 per family	\$2,500 per person, \$7,500 per family
Annual deductible	None	\$300 per person, \$900 per family	None
Office visit/urgent care	\$12 copayment/visit	\$17 copayment/visit	\$20 copayment/visit
Emergency room	20% coinsurance	20% coinsurance	\$100 copayment/visit
Hospitalization facility fee	10% coinsurance	20% coinsurance	10% coinsurance



Health Plan Hawaii Plus

- Choose a primary care provider (PCP)
- Select a health center
- Seeing a specialist
- Self-referrals
- Annual physical exam



CompMED HRA

What is a Health Reimbursement Arrangement (HRA)?

- Employer-funded account that employees can use to pay for qualified health plan expenses

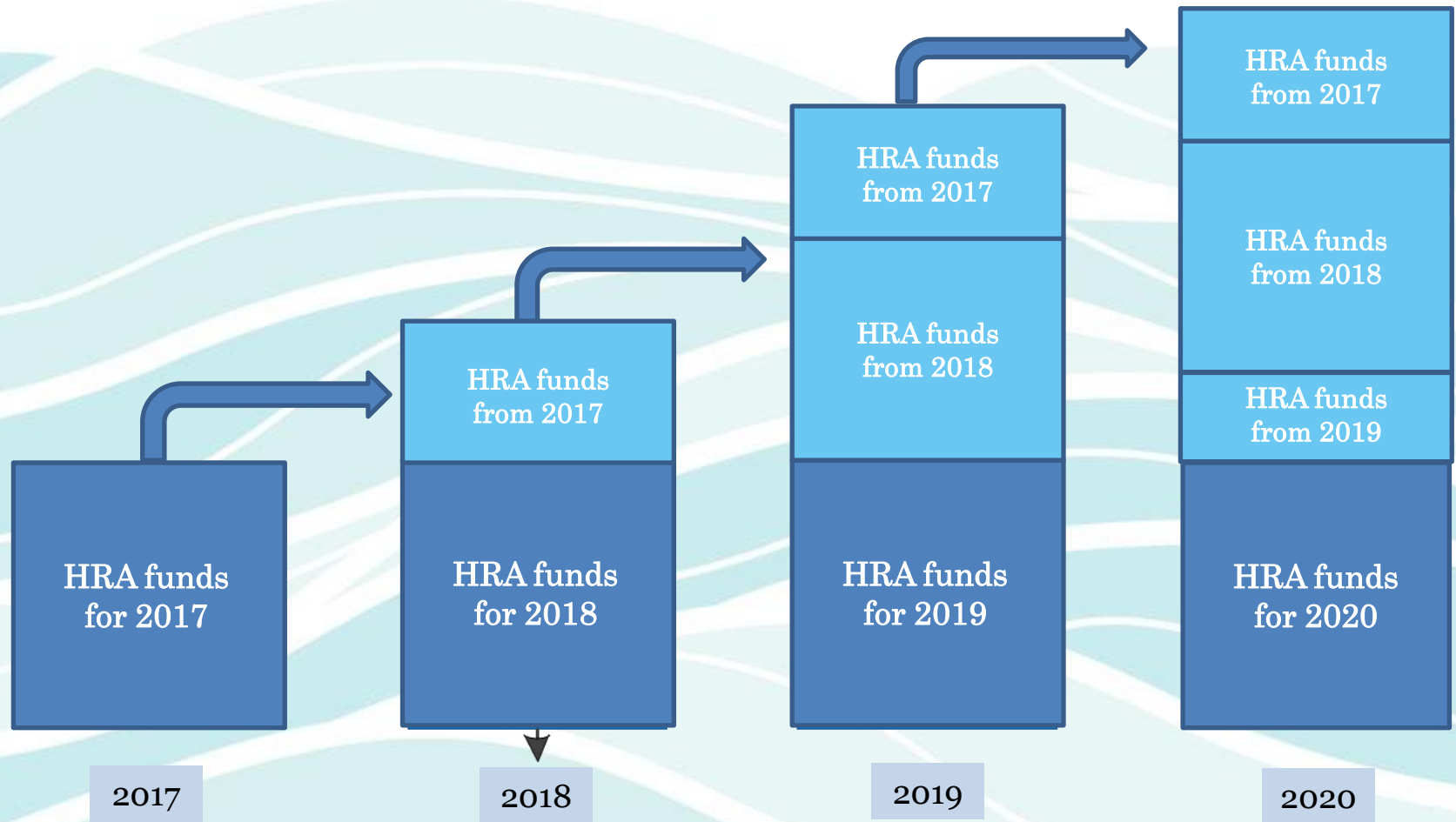
How does the HRA work?

- \$720 for single and \$1,440 for two-party or family plans

CompMED HRA

Services	Participating Provider
Annual Maximum Out-of-Pocket Limit	\$3,000 per person, \$6,000 per family
Annual Deductible	\$1,200 per person, \$2,400 per family
HMSA's Contribution	\$720 single \$1,440 two party & family
Office Visit/Urgent Care	\$17 copayment/visit
Emergency Room	\$100 copayment/visit
Hospitalization Facility Fee	20% coinsurance

CompMED HRA – Reimbursement & Carryover Account



CompMED HRA – What can I use my HRA funds for?

Current year HRA funds:

- Eligible health care expenses incurred by you, your spouse, or your dependent child while covered under CompMED HRA.
 - For example: Out-of-pocket expenses related to medical, prescription drug, vision, dental, and complementary care services.

Carryover HRA funds:

- Same out-of-pocket expenses as current year HRA funds.
- May be used for FSA eligible expenses.

CompMED HRA – What can't I use my HRA funds for?

Current year HRA funds:

- Over-the-counter medications/equipment/supplies and LASIK surgery are not eligible.

Current year and carryover HRA funds:

- Expenses for cosmetic surgery.
- Expenses that are eligible for payment or reimbursement by a medical insurance-type program.
- Cost of premiums for medical insurance.

CompMED HRA

Example: member total cost of service for a hospital stay

Member deductible calculation:	Single	Member coinsurance calculation:	Single
Annual deductible:	\$1,200	Average cost two-day hospital room stay:	\$2,591
HRA contribution:	\$ (720)	Balance minus deductible:	\$1,391
Member deductible contribution:	\$ 480	20% coinsurance:	\$ 278

Member total cost of service:	
Member deductible contribution:	\$ 480
20% coinsurance:	\$ 278
Total:	\$ 758

CompMED HRA – Reimbursement Requests



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[For Employers/Partners](#)

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[Secure Upload](#)

[Account Access](#)

[For Employers/Partners](#)

Benefits that Work for You

Offering your company comprehensive benefits is what we do. Providing strategic customization to meet your specific needs - that's our business.

[Health & Welfare](#)



[WATCH VIDEO](#)



Complementary Care Rider

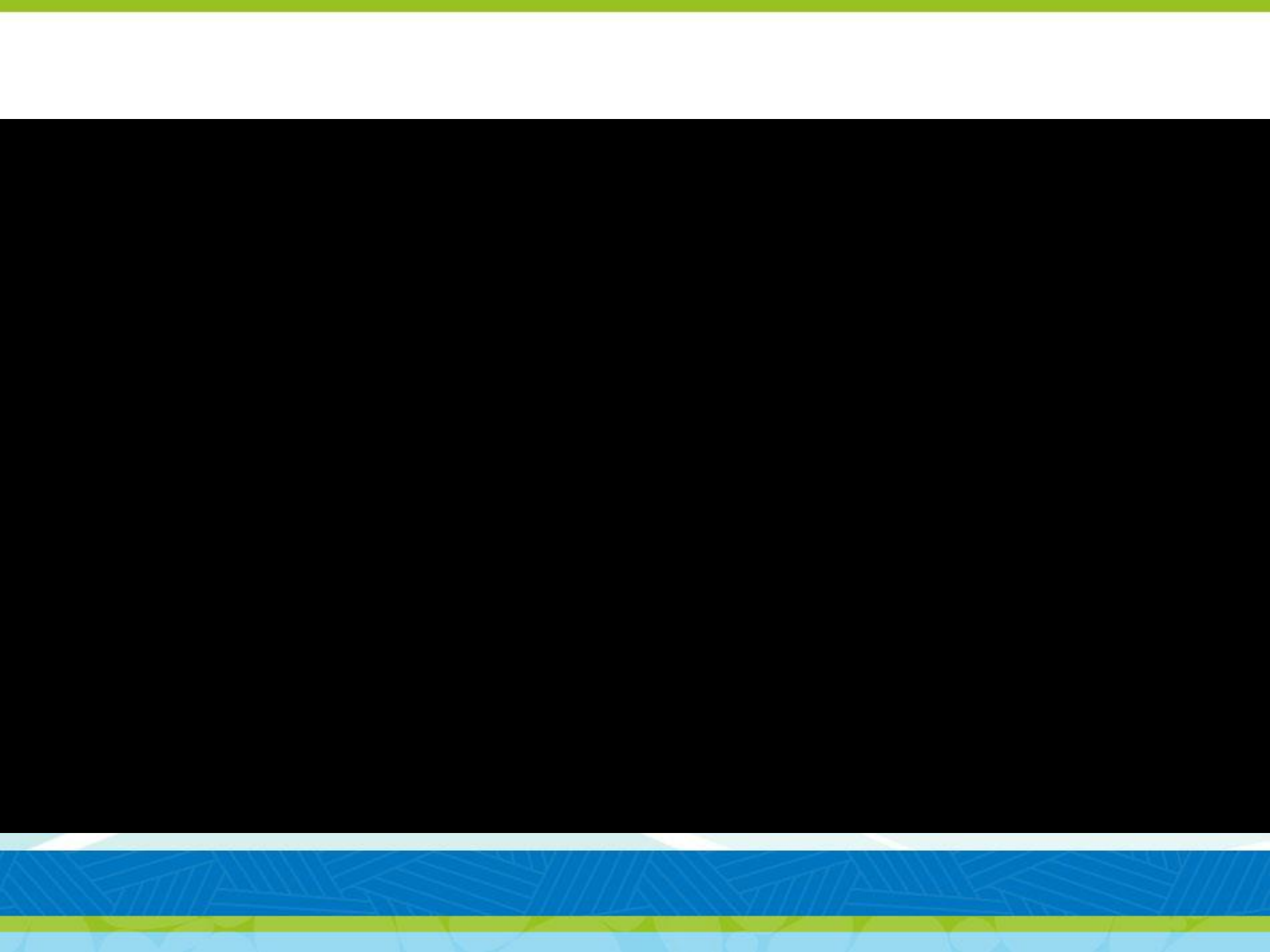
Chiropractor Care	Preferred Provider Plan	CompMED & CompMED HRA	Health Plan Hawaii Plus *
Office Visit	\$12 copayment	\$17 copayment	\$20 copayment
Radiology (e.g. X-Ray)	20% coinsurance	20% coinsurance	\$0

Acupuncture & Massage Therapy **	Preferred Provider Plan	CompMED & CompMED HRA	Health Plan Hawaii Plus
Office Visit	\$20 copayment	\$20 copayment	\$20 copayment

For Preferred Provider and CompMed plans, chiropractic services are covered under your medical plan

*A maximum number of visits and maximum benefit amount per calendar year applies

**Maximum number of visits per calendar year applies



Peace of Mind While you Travel

- Nation's oldest and largest health plan
- Extensive provider network
 - 96% of all hospitals
 - 92% of providers
- Worldwide coverage in nearly 200 countries and territories



The Blue Cross and
Blue Shield Advantage

Prescription Drug Benefit

- CVS/caremark™ (Longs Drugs)
- Local customer service
- Large pharmacy network
- ReadyFill at Mail®
- ExtraCare Card®



Drug Benefits

Tier	Description	Member cost
		30-day supply
Tier 1	Mostly generic drugs	\$7 copayment/prescription
Tier 2	Mostly preferred drugs	\$30 copayment/prescription
Tier 3	Mostly other brand-name drugs	\$30 copayment/prescription plus \$45 Tier 3 cost share
Tier 4	Mostly preferred specialty drugs	\$100 copayment/prescription
Tier 5	Mostly other brand-name specialty drugs	\$200 copayment/prescription
		90-day supply
Tier 1	Mail service – mostly generic drugs	\$11 copayment/prescription
Tier 2	Mail service – mostly preferred drugs	\$65 copayment/prescription
Tier 3	Mail service – mostly other brand-name drugs	\$65 copayment/prescription plus \$135 Tier 3 cost share

Save Money on Your Medications

- Choose generic
- Get a 90-day supply
- Remember that you're protected by your out-of-pocket maximum





Vision Care

Benefit	Preferred Provider Plan, CompMED, & CompMED HRA	Health Plan Hawaii Plus
Annual eye exam	\$10 copayment	\$20 copayment
Basic lenses	\$10 copayment	
Basic frames	\$15 copayment/ 24 months	
Contact lenses	\$25 copayment up to \$130 maximum	

Dental Care with HMSA

- Participating Provider Dental Program (PPO)
- Dental Network Program (HMO)

hmsadental.com

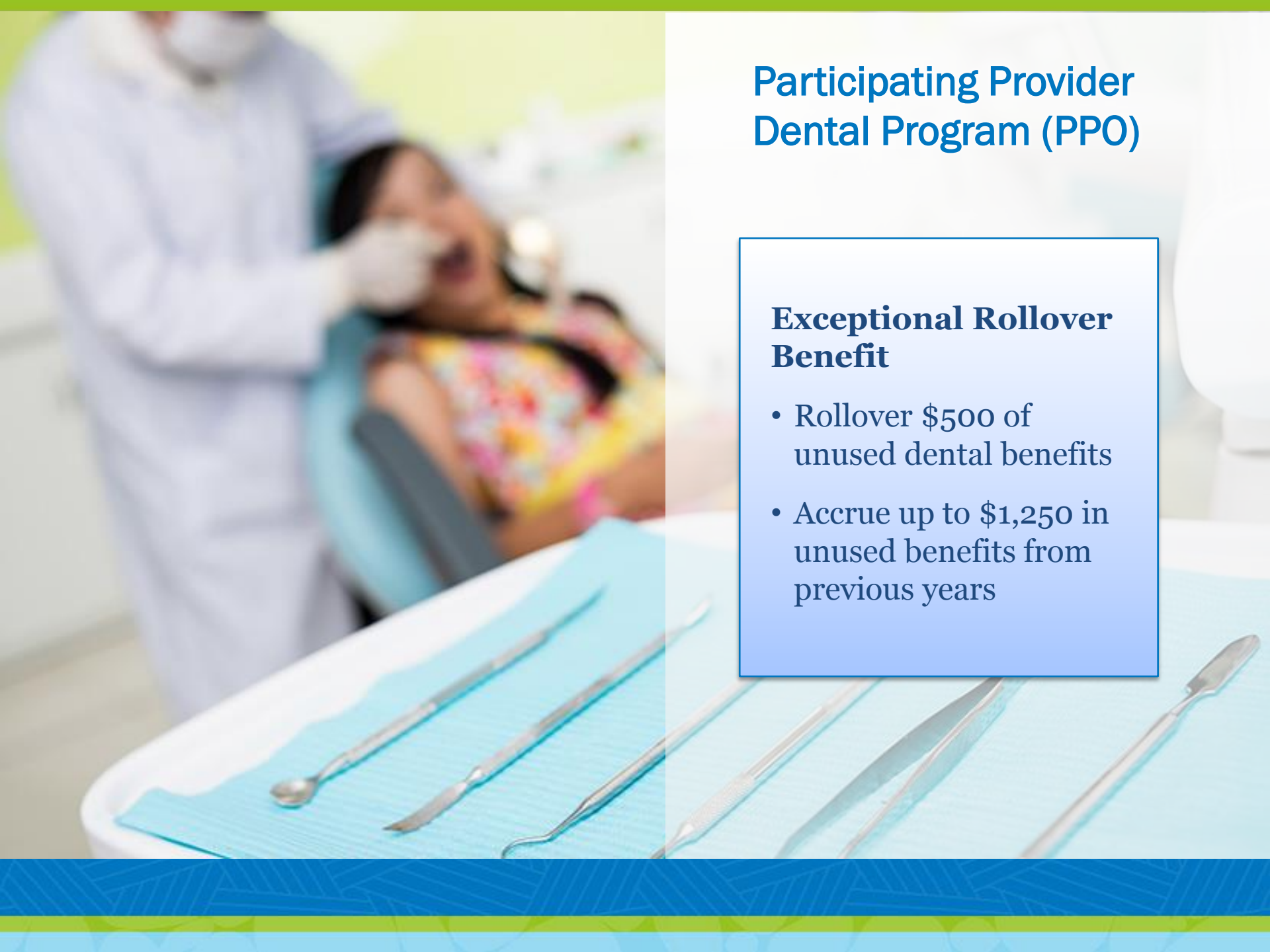




Participating Provider Dental Program (PPO)

- 92% of Hawaii's dentists participate with HMSA
- Exceptional rollover benefit

Dental Services	Participating Provider Program
Calendar year maximum	\$1,500
Preventive care	No cost
Routine care	30% coinsurance
Major care	30% coinsurance
Orthodontics	Plan pays up to \$1,000 maximum



Participating Provider Dental Program (PPO)

Exceptional Rollover Benefit

- Rollover \$500 of unused dental benefits
- Accrue up to \$1,250 in unused benefits from previous years

Dental Network Program (HMO)

Hawaii Family Dental Centers

- No annual benefit maximum
- Preventive care at no cost
- Low, fixed copayments
- Orthodontics – plan pays up to \$1,000 maximum





HMSA's Integrated Medical and Dental Plans

- Oral health is related to overall health
- Gum disease is related to chronic health conditions
- HMSA is the only health plan in Hawaii that can truly integrate medical and dental services

Enhanced Dental Benefits

Condition	Cleaning or periodontal maintenance visits every 3 months	Periodontal scaling once per quadrant every 24 months*	Prediagnostic oral cancer screening every 6 months**	Fluoride treatment every 3 months
Diabetes	✓	✓		
Coronary artery disease	✓	✓		
Pregnancy	✓	✓		
Oral cancer	✓		✓	✓

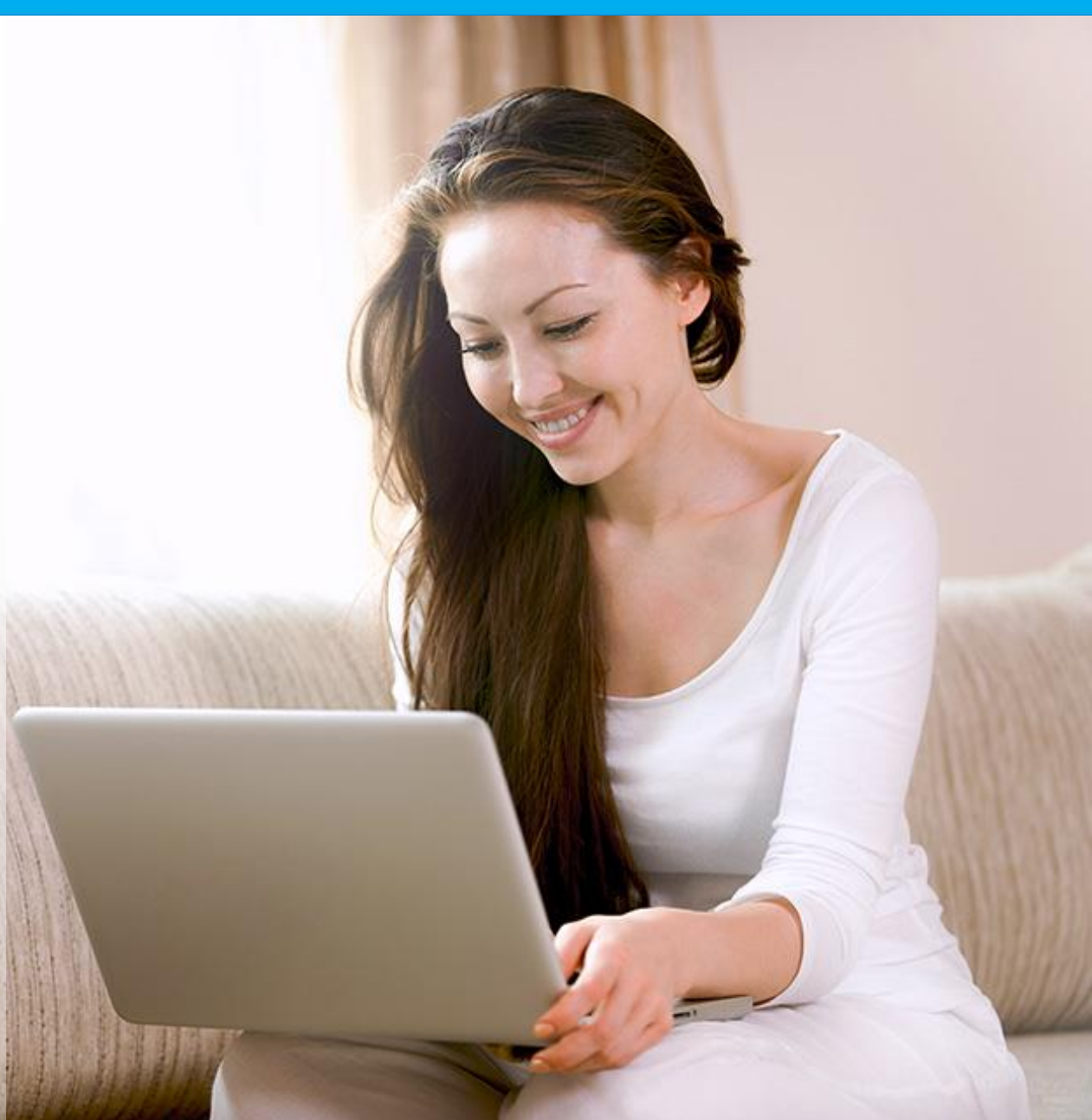
* Periodontal maintenance and scaling available in plans that offer periodontal benefits.

** Oral cancer screening is a benefit for members who have had oral cancer.

Powerful Online Tools

- hmsa.com
- My Account
- Sharecare
- HMSA's Online Care[®]
- Cozeva[®]
- Healthways Financial
Well-Being Powered
by Dave Ramsey

Cozeva is a registered trademark of Applied
Research Works, Inc.





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Choose an HMSA health plan

With HMSA, you get access to the best doctors and hospitals at home, on the Mainland, and worldwide.

[Shop for Yourself](#)

[Shop for Your Employees](#)

Why HMSA?



Freedom to choose



Convenient care



Worry-free travel

All Your Health in One Place

- RealAge Test
- AskMD
- Find a Doctor
- Health Trackers
- Personalized Content
- Articles, Videos and Tips



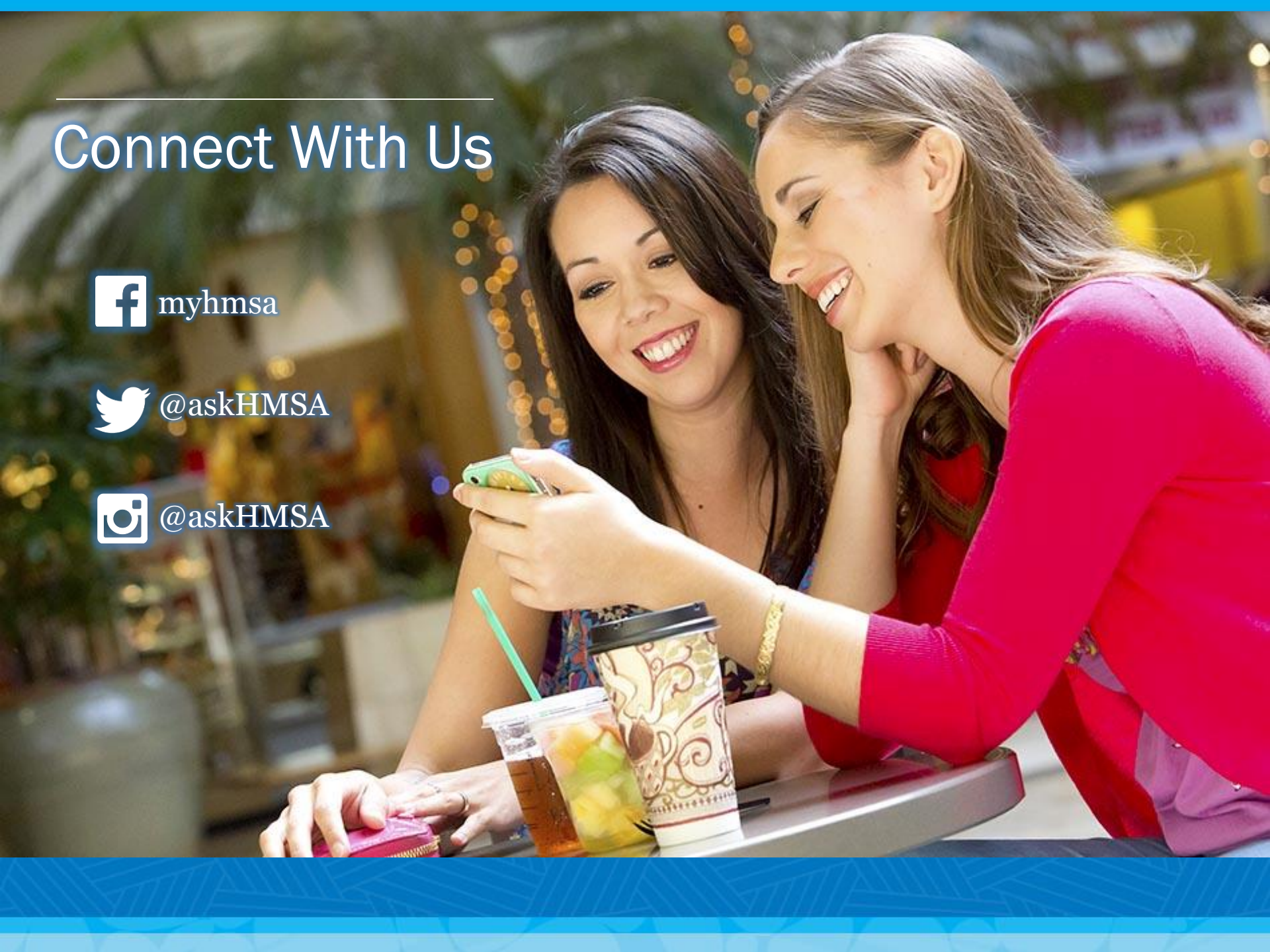
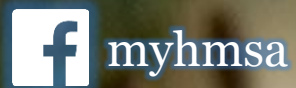
RealAge Test

AskMD

Personalized
Content

Health Trackers

Connect With Us



Jeopardy

HMSA New Hire Edition!

Medical Plans	Vision	Dental	Added Value
<u>10</u>	<u>10</u>	<u>10</u>	<u>10</u>
<u>20</u>	<u>20</u>	<u>20</u>	<u>20</u>
<u>30</u>	<u>30</u>	<u>30</u>	<u>30</u>

Medical Plans - 10

True or False:

All our medical plan packages are
bundled with CompCare.

Medical Plans - 10

True



Medical Plans - 20

For CompMED HRA:

What is the annual amount credited to your reimbursement account for single plan enrollees?

Medical Plans - 20

\$720



Medical Plans - 30

For CompMED HRA:

What is the annual amount credited to your reimbursement account for two party or family plan enrollees?

Medical Plans - 30

\$1,440



Vision - 10

For Health Plan Hawaii Plus:

What is the copay for your
annual vision exam?

Vision - 10

\$20



Vision - 20

True or False:

**You can receive benefits for frames
and contact lenses in the same
calendar year.**

Vision - 20

False



Vision - 30

**What is the copay for your
basic set of lenses?**

Vision - 30

\$10



Dental - 10

True or False:

Dental Network Program (HMO)
members need to visit a
Hawaii Family Dental Center
to receive their benefits?

Dental - 10

True



Dental - 20

True or False:

Participating Provider Dental Program (PPO) members have a rollover benefit embedded into their plan.

Dental - 20

True



Dental - 30

True or False:

HMSA is the only health carrier in Hawaii that offers integrated medical and dental plans.

Dental - 30

True



Added Value - 10

What is the name of our program where members can receive discounts on health and fitness related items and services?

Added Value - 10

HMSA365



Added Value - 20

What is the name of the website that allows members to connect with their doctors, schedule appointments, and set up preventive screening reminders?

Added Value - 20

Cozeva.com



Added Value - 30

What is the copay for the first 10 minutes of Online Care for all covered members?

Added Value - 30

\$0



We're Here
For You



Thank you!

