



## Changes You Should Know

CDPHP takes its role in providing health care coverage for your employees and clients seriously. These changes take effect at the time of benefits renewal in 2021. Refer to plan documents for complete details.

### LARGE GROUPS, SMALL GROUPS, INDIVIDUALS

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| <b>Digital smoking cessation</b> | Digital smoking cessation programs will be available.   |
| <b>Fitness reimbursement</b>     | Eligible digital fitness classes will now qualify for reimbursement. The reimbursement has also been expanded to include dependents and domestic partners.  |
| <b>Service area</b>              | The CDPHP service area has expanded to include St. Lawrence, Lewis, and Jefferson counties. New York State Health Insurance Plan members can refer to their member contract for service area.   |
| <b>Congestive heart failure</b>  | There will be no copay or coinsurance for congestive heart failure walk-in visits at Albany Associates of Cardiology and Capital Cardiology Associates. A deductible will apply for high deductible plans.  |
| <b>Home health care</b>          | There will be no member cost share for home health care. A deductible will apply to qualified high deductible plans.  |
| <b>Hearing aid benefit</b>       | Set copayments for two tiers of high-end hearing aids and covered associated services on most plans through a new preferred partner, Hearing Care Solutions (HCS). All members are eligible for discounted hearing aids from HCS.                           |
| <b>Mail order pharmacy</b>       | Pharmacy mail order will be reduced two copayments (down from 2.5) for a 90-day supply for non-standard plans.  |
| <b>Infertility services</b>      | Prior authorization is being added for all infertility services.  |
| <b>Insulin charges</b>           | Insulin out-of-pocket costs are capped at \$100 per 30-day supply per New York state mandate.   |
| <b>Preventive services</b>       | Additional preventive benefits have been carved out of the deductible on qualified high deductible HSA plans due to federal regulatory changes.   |
| <b>Out-of-pocket maximum</b>     | Maximum allowable out-of-pocket maximum for HSA-qualified high deductible plans will be \$7,000 (individual) and \$14,000 (family). Maximum allowable out-of-pocket maximum for non-high deductible plans will be \$8,550 (individual) / \$17,100 (family). |

### LARGE AND SMALL GROUPS

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| <b>Enrollment changes</b> | Employers will now have up to 90 days to make enrollment changes (additions, changes) on the member's behalf following an enrollment event. |
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### INDIVIDUAL PLANS

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| <b>Individual Standard Bronze Plans</b> | Plan design changes have been made to individual standard bronze plans based on New York state and federal mandates. Refer to your member contract for details. |
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### SMALL GROUPS AND INDIVIDUAL PLANS

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| <b>Metal tier</b>                                      | In addition to member contract language and cost share changes, some plans including Copay First may change metal levels from year to year.                        |
| <b>Outpatient cardiac and pulmonary rehabilitation</b> | There will be no copay or coinsurance for office-based outpatient cardiac and pulmonary rehabilitation. Deductible will apply for qualified high deductible plans. |