



## BlueCross BlueShield of Montana

### **Subject: 2023-2024 Benefit Plan Changes**

Dear Group Administrator:

On your plan renewal date, there will be some changes to the plan IDs and benefits offered in your current plans.

Included with this letter is a list of all currently available Blue Cross and Blue Shield of Montana “standard” mid-market / large group plans and their benefit level changes.

#### **Your next steps:**

##### **Mid-Market**

- Find the nine-digit plan ID for your current plan(s) in the “Current Plan Rates” section of your renewal exhibit
- Use the nine-digit plan ID to find your group’s benefit changes in the “Plan Changes” document.

##### **Large Group**

- Find the plan description on the Rate Development Tab section of your renewal exhibit
- Use the plan description to find your group’s benefit changes in the “Plan Changes” document

Our goal is to serve your health care coverage needs through all of life’s changes. If you have any questions, our team stands ready to help.

Sincerely,

Blue Cross and Blue Shield of Montana

**[bcbsmt.com](https://bcbsmt.com)**

# Blue Cross and Blue Shield of Montana

## 2023 Standard Plans (51+)

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To find your renewal group's 2023 benefit changes, search for the plan by pressing CTRL, then the F key; enter the plan name or plan ID in the search field and press enter.

### **Blue Choice HSA 006; MMBCH0061**

*The below changes are effective 1/1/2023 through 12/31/2023*

In 2023, your plan ID will change to MMBCH0063

In 2023, your in-network individual Deductible will change to \$3,100 from \$2,900. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network individual Deductible will change to \$6,200 from \$5,800. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network family Deductible will change to \$6,200 from \$5,800. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$12,400 from \$11,600. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

### **Blue Choice HSA 007; MMBCH0071**

In 2023, your plan ID will change to MMBCH0073

In 2023, your in-network individual Deductible will change to \$3,100 from \$3,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network individual Deductible will change to \$6,200 from \$6,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network family Deductible will change to \$6,200 from \$6,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your out-of-network family Deductible will change to \$12,400 from \$12,000. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$3,100 from \$3,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network individual Out-of-Pocket Maximum will change to \$6,200 from \$6,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$6,200 from \$6,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your out-of-network family Out-of-Pocket Maximum will change to \$12,400 from \$12,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

**Blue Options HSA 001; MMBOH0011**

*The below changes are effective 1/1/2023 through 12/31/2023*

In 2023, your plan ID will change to MMBOH0013

In 2023, your in-network individual Deductible will change to \$3,100 from \$2,900. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network family Deductible will change to \$6,200 from \$5,800. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2023, your in-network individual Out-of-Pocket Maximum will change to \$3,100 from \$2,900. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2023, your in-network family Out-of-Pocket Maximum will change to \$6,200 from \$5,800. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.