



## Age- and Composite-Rated Billing Options

### *Reference Guide for Existing Accounts*

(1-50 Employees)

#### Background

Premium rates for all Blue Cross and Blue Shield of Montana (BCBSMT) small group (1-50) Affordable Care Act (ACA)/metallic plans (medical and dental) include two billing options:

- Individual age-rated billing
- Composite-rated billing

Premium rates for composite-rated ACA/metallic plans are tiered by subscriber participation:

- EO – Employee Only
- ES – Employee +Spouse
- EC – Employee +Child(ren)
- EF – Employee +Family (Spouse with children)

#### Availability

Composite-rated billing is available for accounts that select (new accounts) or renew (existing accounts) ACA/metallic benefit plan options.

#### IMPORTANT: Billing Rules

1. Billing will be effective for 12 months.
2. Only one billing selection is allowed per account.
3. Accounts may not select a combination of plans with age- AND composite-rated billing.
4. For existing accounts, composite-rated billing is only available at the time of the account's renewal.
5. If an existing account with composite-rated billing wants to renew with composite-rated billing and has no other plan changes at renewal, no action is required. We will renew the account with composite-rated billing.
6. If an account selects composite-rated billing for their medical plan, composite-rated billing will also be applied to the account's dental plan (if applicable).

#### Paperwork and Submission Requirements Existing Business

- If an existing account with age- or composite-rated billing wants to renew with their current billing method and has no plan changes, no forms or further action are needed.
- If an existing account with age- or composite-rated billing wants to change the billing method and has **no** plan changes, use the Renewing Community Small Group Application for Amendment form to elect age- or composite-rated billing. Only the Billing Method Selection section needs to be completed.
- If an existing account wants to change the billing method **and** has plan changes, a Renewal Community Small Group Application for Amendment is required. Complete the Benefit Plan Selection and the Billing Method Selection sections.
- We must receive renewal paperwork at least 15 days before the renewal effective date. Submit the completed Renewal Community Application for Amendment to [MTsmallgroupamendment@bcbstx.com](mailto:MTsmallgroupamendment@bcbstx.com) or fax it to 406-441-5585.

#### Questions

Please call your BCBSMT Account Representative if you have questions about the composite-rating billing method for ACA/metallic plans.



## Frequently Asked Questions: Billing Method Selection (1-50 employees)

### General

- Q1: Is composite-rated billing available for ACA/metallic plans?**
- A1:** Yes, composite-rated billing is available for new and existing (1- 50) small accounts.
- Q2: Is composite-rated billing available for all benefit plans?**
- A2:** Composite-rated billing is available for ACA/metallic medical and dental plans. *Note: Grandfathered plans will retain their current billing method.*
- Q3: What are the composite-rated billing tiers?**
- A3:** Employee Only (EO)  
Employee + Spouse (ES)  
Employee + Children (EC)  
Employee + Family (Spouse with children) (EF)
- Q4: How can an existing account select ACA/metallic composite-rated billing?**
- A4:** To select composite-rated billing, an existing account must complete the Billing Method Selection section of the Renewing Community Small Group Application for Amendment and return it to us before the renewal effective date. If the form is not submitted and the existing account has ACA/metallic plans with age-rated billing, the account will continue to receive individually age-rated billing.
- If an existing account wants to renew their currently in-force composite-rated billing, no further action is required.**

### Billing Rules

- Q5: When will ACA/metallic composite-rated billing be available and how long is it effective?**
- A5:** Composite-rated billing is only available at the time of the account's renewal. The rates are effective for 12 months.
- Q6: Can my account make off-cycle plan changes and select ACA/metallic composite-rated billing?**
- A6:** Yes, an account can still request off-cycle plan changes; however, composite-rated billing is in effect for a 12-month period. The account would also be required to reset their plan year Anniversary Date to the effective date of the off-cycle plan change regardless of whether the group is already enrolled under an ACA composite-rated billing plan. In addition, the existing composite-rated billed plan will be required to be re-rated based upon the current rates and current group census.

- Q7: Can an account select a combination of age- AND composite-rated billing?**
- A7:** No, an account may only select one billing method. This includes stand-alone dental, if the group is also enrolled in a dental plan. *Note: Accounts that have Grandfathered and ACA/metallic plans can select composite-rated billing for their ACA/metallic plans.*
- Q8: How will selecting composite-rated billing impact new accounts' billing statements?**
- A8:** The composite-rated billing will be based on final enrollment and will be made available to the producer/broker.
- Q9: Can existing accounts request new renewal rates if enrollment has changed?**
- A9:** No, the ACA/metallic composite-rated premiums in the renewal exhibit for current plans and alternates will be the final composite-rated premiums and are not subject to change; no exceptions.
- Q10: How does an existing or new account select ACA/metallic composite-rated billing?**
- A10:** Accounts with age-rated billing that want to change to composite-rated billing at renewal must complete and submit the Billing Method Selection section of the Renewing Community Small Group Application for Amendment. If the form is not submitted, we will renew the account with age-rated billing. If existing accounts already have composite-rated billing and want to renew their current billing method, no paperwork is required - unless they are making benefit plan changes.
- Q11: What is required if an existing group with composite-rated billing wants to change back to age-rated billing at renewal?**
- A11:** If an existing group with composite-rated billing wants to change back to age-rated billing at renewal, email the change request to [MTsmallgroupamendment@bcbstx.com](mailto:MTsmallgroupamendment@bcbstx.com) or fax it to 406-441-5585. If making plan changes, also include the Renewing Community Small Group Application for Amendment.
- Q12: Where can the Renewing Community Small Group Application for Amendment be found?**
- A12:** The form will be included in your renewal packet. It is also available on Blue Access for Producers<sup>SM</sup> (BAP<sup>SM</sup>) and Blue Access for Employers<sup>SM</sup> (BAE<sup>SM</sup>).

### Blue Directions for Small Business

- Q14: How will Blue Directions for small business be affected by composite -rated billing?**
- A14:** There will be no significant process/administrative changes to Blue Directions; adjusted composite-rated billing will be provided in real-time through the Blue Directions portal.