



# BlueCross BlueShield of North Carolina

## Uniform Benefit Changes

In a continuing effort to offer quality, cost-effective health care coverage, the following changes have been made to Blue Cross and Blue Shield of North Carolina (Blue Cross NC) base benefits. These changes are effective at the group's effective/renewal date.

New Mandate	Product Lines	For Groups with Effective Dates Between 01/1/2024 and 12/01/2024
<b>Termination of Pregnancy covered up to 16 weeks</b>	Blue Options <sup>®</sup> Blue Options <sup>®</sup> 1-2-3 <sup>SM</sup> BlueHPN <sup>SM</sup> BlueHPN <sup>SM</sup> (1-2-3 Plan Design)	Change implemented in 2023 due to passing of federal/state legislation requiring Termination of Pregnancy services to be as allowed by state law
<b>Existing Benefit Design</b>	<b>Product Lines</b>	<b>For Groups with Effective Dates Between 01/1/2024 and 12/01/2024</b>
<b>For 1-2-3 group plans, as well as other non-D&amp;C plans that have a specialist office visit at deductible and coinsurance (Simple, Hybrid), labs in a specialist office setting, covered at 100%</b>	Blue Options (Simple, Hybrid) Blue Options 1-2-3 BlueHPN (Simple, Hybrid) BlueHPN (1-2-3 Plan Design)  *Simple – PCP at a copay, all other services at D&C, Hybrid  *Hybrid – PCP and Urgent Care at a copay, all other services at D&C	1-2-3 plans will cover in-network labs in a specialist setting at Level 3 deductible and coinsurance  Simple and Hybrid plans will cover in network labs in a specialist setting at deductible and coinsurance
<b>For 1-2-3, Simple, and Hybrid plans, Mental Health Substance Use (MH/SU) office visits are at deductible and coinsurance</b>	Blue Options Blue Options 1-2-3 BlueHPN BlueHPN (1-2-3 Plan Design)	Changes benefit to apply a \$10 copay for MH/SU visits
<b>For most plans, maternity coverage is limited to subscriber/spouse/domestic partner</b>  <b>Dependent maternity (all members) coverage is only on a select number of plans</b>	Blue Options Blue Options 1-2-3 BlueHPN BlueHPN (1-2-3 Plan Design)	Coverage for dependent maternity will be added to all plans
<b>Termination of pregnancy not covered for dependents</b>	Blue Options Blue Options 1-2-3 BlueHPN BlueHPN (1-2-3 Plan Design)	If a plan covers termination of pregnancy for subscriber/spouse/domestic partner, it will now cover it for dependent children.
<b>Grandfathered plans include the Enhanced 4-tier Rx formulary</b>	Blue Options Blue Options 1-2-3	Effective January 1, 2024, all grandfathered group plans will include the Essential 5-tier Rx formulary.
<b>Out of Pocket (OOP) Limits</b>  <b>HSA OOP Limit:</b> <b>\$7,500 Individual / \$15,000 Family</b>  <b>Non-HSA OOP Limit:</b> <b>\$9,100 Individual / \$18,200 Family</b>	Blue Options Blue Options 1-2-3 BlueHPN BlueHPN (1-2-3 Plan Design)	For all non-grandfathered plans beginning January 1, 2024, OOP limits will be as follows:  HSA OOP Limit: \$8,050 Individual / \$16,100 Family  Non-HSA OOP Limit: \$9,450 Individual / \$18,900 Famil

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