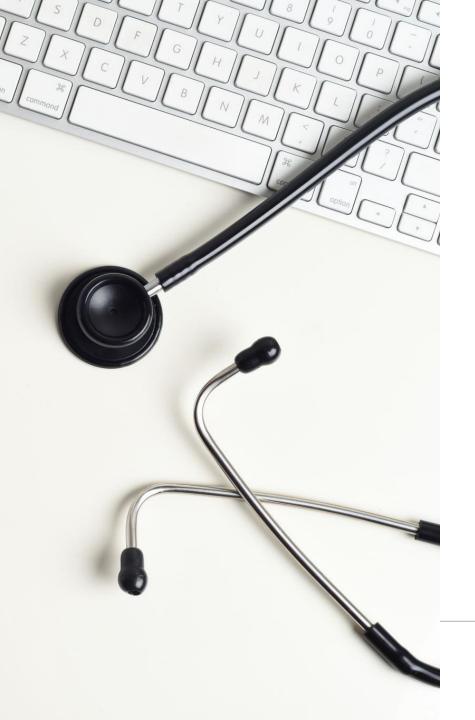
EXPANSION OF COVERAGE FOR OUD SERVICES

Lou McLaren, Director of Provider Services Tom Weigel, MD, MBA, Vice President and Chief Medical Officer



1



BLUE CROSS OF VERMONT OUD SERVICES PILOT

- Blue Cross VT initiated a pilot to support OUD services in 2018
- Pilot was to support OUD care provided by practices designated as "spoke providers" by the Blueprint for Health
- Services were billed on a claim
- Three pilot sites:
 - Bennington
 - UVMMC

2

 Community Health Centers of Burlington



PILOT RESULTS

Practices worried about claim submission, which differed significantly from Medicaid

Felt more cumbersome to providers

Concerns about member cost share, especially with high deductible health plans

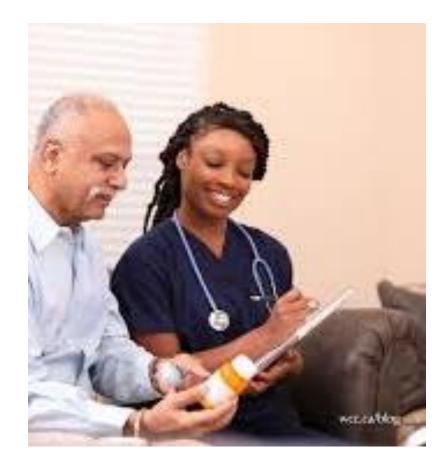
Withdrawal of key stakeholders, Bennington and UVMMC, highlighted program challenges.

Pilot program had limited success



SUPPORTING PROVIDERS

- Blue Cross of Vermont recognizes that our members with OUD are receiving support services today from designated practices
- Practices are not receiving reimbursement for the care they provide
- Blue Cross is committed to supporting primary care practices and specialty practices for the OUD care they render to our members





PROVIDER REIMBURSEMENT – NEXT STEPS



- Blue Cross VT will reimburse practices for the OUD-related services they provide to our members
- Qualifying practices are those designated as "spoke practices" by the Blueprint for Health
- As of February 2024, there are 222 qualifying providers
- This is a claims-based program, so providers will bill Blue Cross VT monthly using H0047-HH
- These are direct payments to the practices and are <u>not</u> considered spoke payments as defined by the Blueprint for Health



MEMBER DETAILS

- OUD-related services do not qualify for first-dollar coverage under the ACA
- Blue Cross VT has chosen to design the program to be first dollar coverage where legally possible
 - Members with products that do <u>not</u> include an HRA/HSA will have zero cost share
 - Members with products that include an HRA/HSA must meet their annual deductibles first. Once the deductibles are met, they will have zero cost share.
- Working with legislature to expand first-dollar coverage



