



BlueEdgeSM – Consumer Directed Health Plan (CDHP)

Frequently Asked Questions

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<p>How is BlueEdge different from a traditional health plan?</p>	<p>Most traditional plans pay a percentage of charges for covered medical expenses only after a plan deductible or copayment is satisfied. The BlueEdge product portfolio includes a full array of benefit plans and choices. With BlueEdge plans, members have coverage for preventive care and wellness services. A Spending Account is chosen as a standalone benefit or is paired with a BlueEdge PPO plan design. Spending Account funds can pay for covered health care expenses and may apply toward a deductible. (Not all BlueEdge products include a deductible).</p>	<p>How does the member access Health Care Account Funds?</p>	<p>When the member uses a PPO provider, BCBSIL's integrated claim process automatically deducts funds from the HCA and pays the provider.</p>
<p>Will a doctor's visit by BlueEdge patients be any different?</p>	<p>No. Just make sure the patient presents his/her BCBSIL ID card for filing of claims</p>	<p>What is a Health Savings Account?</p>	<p>A Health Savings Account (HSA) can be established with funds from the member, employer or both. The funds are used to pay medical care services. If the services are PPO eligible, they will count toward the member's annual deductible. The HSA is owned by the member. If the member changes employment, he/she keeps the account.</p>
<p>What if the member uses all of the money in the Spending Account?</p>	<p>If the member's Spending Account funds are depleted, and has a plan that includes a deductible, he/she will be responsible for paying the remaining balance of the deductible before health plan benefits begin.</p>	<p>How does the BlueEdge HSA family deductible work?</p>	<p>The employer chooses either the aggregate or embedded deductible option. With the aggregate option, there is one deductible amount for the entire family. Once this is met, all covered family members are eligible for health plan benefits. With the embedded option, each covered family member has an individual deductible. Once this is met, that member is eligible for health plan benefits.</p>
<p>What is a Health Care Account?</p>	<p>A Health Care Account (HCA) is money set aside for a member by the employer. Charges for covered medical care services are first paid from this account. Eligible expenses paid from the HCA are also applied toward the member's annual deductible. Unspent funds roll over from year to year. If the member leaves the plan, the funds return to the employer.</p>	<p>How does the member access the Health Savings Account funds?</p>	<p>If the member's employer uses a transactional bank to administer the HSA; which is an integrated claim process, PPO eligible expenses will be automatically deducted from the account and paid to the provider. If the claim process is not integrated, the member uses a debit card or checkbook issued by the HSA administrator.</p>