



WINTER
2025

BLUE NEWS

for Employers

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**BlueCross BlueShield
of Alabama**

An Independent Licensee of the Blue Cross and Blue Shield Association

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Staying Healthy with a Primary Care Provider

Think of a primary care provider (PCP) as a health coach for your employees. With regular PCP visits, employees are making a smart move towards better health and wellness. PCPs help guide their patients in building better habits, managing chronic conditions and staying on track with preventive care.

Why regular PCP visits matter:

Catch problems early: PCPs can help spot health risks before they become serious

Get answers: Employees can ask questions about their health and medications and address any health concerns

Build healthy habits: PCPs can offer tips on healthy eating, staying active and managing stress

During a visit, PCPs may check basic health numbers, including:

- ▶ Height and weight
- ▶ Body mass index (BMI)
- ▶ Heart rate
- ▶ Blood pressure

PCPs offer personalized care based on age, health history and lifestyle. For questions or assistance, members can call 1-888-759-2764, Monday - Friday, 7 a.m. - 6 p.m. Central time.

Information contained in this communication is not intended to replace professional medical advice, diagnosis or treatment. Always seek the advice of your physician or other qualified healthcare provider regarding your healthcare needs.

PCPS DO MORE THAN TREAT ILLNESSES

PCPs can help your employees stay healthy with regular screenings, which help spot health issues early. The following issues are easier to treat when identified early:



High blood pressure



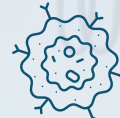
Bone problems



High cholesterol



Diabetes



Cancer



Depression

VACCINES EQUAL EXTRA PROTECTION

Vaccines help protect your employees and their families from serious illness. PCPs may recommend vaccinations to help prevent serious illness, such as:

- ▶ Influenza (flu)
- ▶ Tdap (tetanus, diphtheria and whooping cough)
- ▶ COVID-19
- ▶ Pneumonia or RSV





Coming Soon: Track a Prior Authorization with Check My Status

We are excited to launch Check My Status, our new prior authorization tracker, available in early 2026. The Check My Status tracker will enhance the prior authorization process for members by providing the following:

- ▶ Transparency into our prior authorization process
- ▶ Updates on prior authorization statuses online and within our mobile app, minimizing the need for members to call Customer Service or providers' offices
- ▶ Convenient access to decision letters to view or print

Did you know?

Hinge Health is a digital musculoskeletal (MSK) care platform that provides



comprehensive, personalized treatment through a full clinical team, advanced technology including wearable motion sensors and pain relief devices and connected care that bridges digital and in-person providers. Its programs include customized exercise therapy, one-on-one physical therapy and coaching and personalized education, all designed to reduce MSK pain and avoid unnecessary surgeries. Hinge Health is available as a buy-up for self-funded groups, and participation is available at no additional cost for members.

Contact your account representative for more details.

Hinge Health is an independent company providing a digital solution to help patients with musculoskeletal pain.

Group Insights September 2025 Release Overview

The Group Insights release on September 25, 2025, included the following key features:

EXECUTIVE SUMMARY:

- ▶ A new report under the Report Packets section that includes key performance metrics on Cost, Utilization, Top Conditions and more

Key Performance Indicators Summary					Run Date: 09/28/2025
					Reconciliation Date: 09/28/2025
Measure	Current	Prior	Prior - 2	Current - Prior % Change	Prior - Prior 2 % Change
Financial					
Total Paid	\$121,331,015.98	\$108,128,474.66	\$105,310,418.86	11.80%	3.66%
Paid Per Subscriber Per Month	\$1,201.29	\$1,069.65	\$998.47	13.39%	6.11%
Paid Per Member Per Month	\$596.47	\$519.92	\$492.13	14.72%	5.65%
HDC PMPM	\$138.01	\$108.89	\$103.58	26.74%	5.13%
PMPM Without HDC	\$458.46	\$411.03	\$388.54	11.54%	5.79%
Demographics					
Average Subscriber	16,814	17,048	17,545	-1.37%	-2.83%
Average Members	33,890	34,762	35,628	-2.54%	-2.43%
Average Family Size	2.02	2.04	2.03	-0.98%	0.49%
Average Age	34.62	34.32	34.21	0.30%	0.32%
% Female	55.7%	55.0%	55.8%	0.18%	-0.36%
Average Risk Score	1.24	1.23	1.10	0.81%	11.82%
Utilization					
Inpatient Admissions Per 1000	25.3	26.0	24.9	-2.69%	4.42%
Outpatient Visits Per 1000	5,244.7	5,097.2	5,084.9	2.89%	0.24%
ER To Home Visits Per 1000	111.1	104.5	100.8	6.32%	-1.23%
Office Visits Per 1000	192.9	192.3	178.9	-0.31%	9.59%
MHSA Visits Per 1000	798.1	646.9	596.5	14.10%	8.93%
Cost					
Inpatient Cost Per Admission	\$26,399.77	\$23,132.89	\$24,495.20	14.12%	-5.22%
Outpatient Cost Per Visit	\$384.82	\$261.26	\$253.51	5.02%	3.09%
ER Cost Per Visit	\$1,192.91	\$1,107.17	\$1,132.06	7.74%	-2.20%
Office Cost Per Visit	\$404.29	\$353.27	\$366.42	14.44%	-3.59%
MHSA Cost Per Visit	\$141.19	\$121.62	\$156.06	16.09%	-22.07%

All Groups
All Diseases
Paid Date: 01/01/2025 - 09/30/2025 | Primary/Non-Primary: All | Coverage Type: Medical and Pharmacy

The information included in this report is considered confidential. Protected Health Information (PHI).
The information being provided by Credentia is provided as a service to our members and is not intended to be used for any other purpose.
The Group Health Plan, as a covered entity under the HIPAA regulations, maintains the responsibility to take, store and further disclose the information in strict accordance with the HIPAA Privacy and Security regulations.

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BEHAVIORAL HEALTH DASHBOARD:

- ▶ Added network status (In or Out of Network) filter
- ▶ Users can now toggle between the Overview and By Site of Service sections on the Behavioral Health page to view new behavioral health information and breakouts
- ▶ Added new metrics Paid by Network and Generation Band

OUT OF POCKET ACCUMULATOR REPORT:

- ▶ Reports now display member status (active or canceled)

WATCH LIST:

- ▶ Added when members were last assessed by a health plan clinician

COB ENDORSEMENT REPORT:

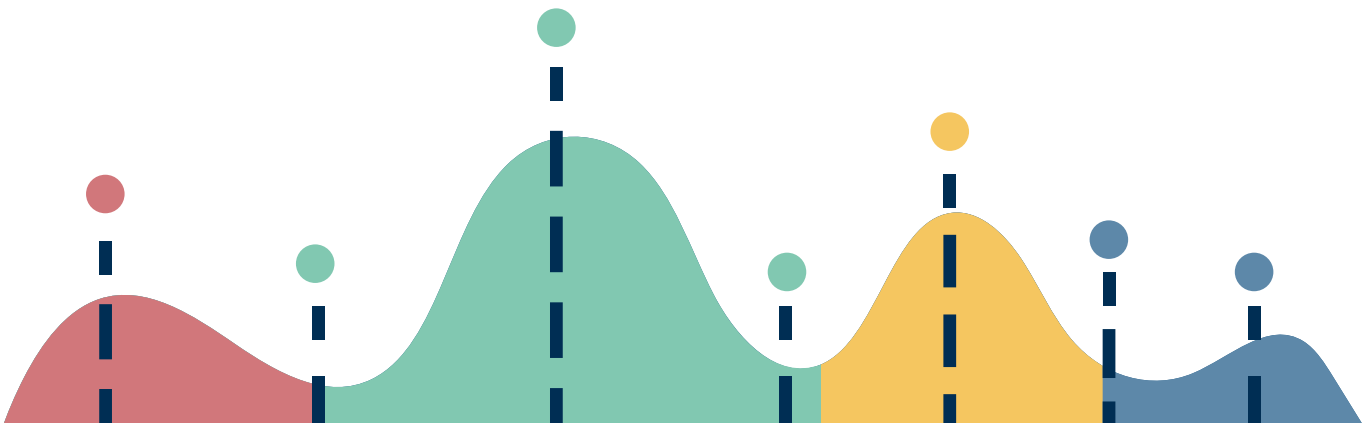
- ▶ Contract IDs entered in the filter now display in the report, even when there is no data

PAYMENT INTEGRITY DASHBOARD:

- ▶ Billing date filter is now aligned with the group's billing date and dashboards can be tied to the group's monthly invoices

STOP LOSS:

- ▶ Added admit and discharge dates for inpatient facility claims



Check out these new features within the Group Insights tool and reach out to InsightsFeedback@bcbsal.org with any questions you may have.

Understanding Employer Shared Responsibility

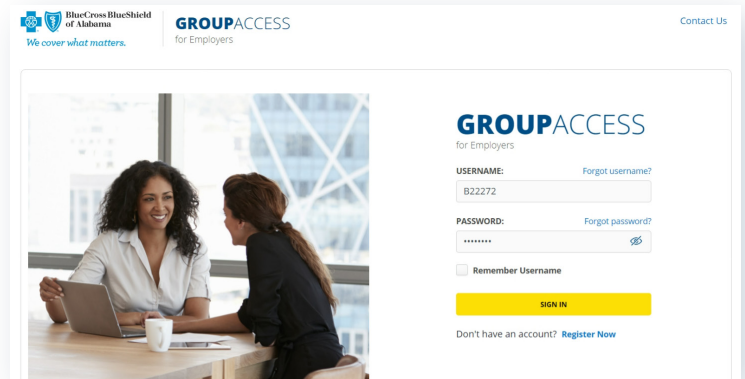
Annually, employer groups provide Form 1095-C and/or Blue Cross provides 1095-B to confirm to employees that they had Minimum Essential Coverage (MEC). This information is also provided to the IRS.

Blue Cross CANNOT determine the following for employer groups:

- ▶ Was the plan deemed affordable by IRS rules for each employee?
- ▶ Was the plan offered to each employee?

Below is the timeline for reports released on GroupAccess:

- ▶ Test reports available
August-December 2025
- ▶ Production reports available
January 4, 2026
January 11, 2026
January 18, 2026



Enrollment data sent to Blue Cross prior to December 5, 2025, will be reflected in the final file. For enrollment data received after December 5, every effort will be made to process it prior to creating the final file.

Each **group** must determine if it is an Applicable Large Employer (ALE) by seeking advice from its legal and tax professionals.

This will determine two things:

1. Who is responsible for the reporting.
2. Which forms to file.

Use the chart below to aid in understanding reporting responsibilities.

What is an ALE?

Employer has at least 50 full-time employees, including full-time equivalent employees, on average during the previous calendar year.

IS THE PLAN UNDERWRITTEN OR SELF-FUNDED?

UNDERWRITTEN

SELF-FUNDED

IS THE GROUP AN ALE?

IS THE GROUP AN ALE?

Non-ALE

ALE

Non-ALE

ALE

Group has nothing to file.
Blue Cross files Forms 1094-B and 1095-B to IRS. 1095-B forms are available on *myBlueCross* or by calling Customer Service.

Group files Forms 1094-C and 1095-C to IRS and provides copy of Form 1095-C to member.
Blue Cross files Forms 1094-B and 1095-B to IRS. 1095-B forms are available on *myBlueCross* or by calling Customer Service.

Group files Forms 1094-B and 1095-B to IRS and provides copy of Form 1095-B to member.
Blue Cross has nothing to file.

Group files Forms 1094-C and 1095-C to IRS and provides copy of Form 1095-C to member.
Blue Cross has nothing to file.

New Healthcare Reform Preventive Mandates

PREVENTIVE REQUIREMENT	PUBLISHED DATE	BLUE CROSS EFFECTIVE DATE	CHANGE TO CURRENT BENEFIT?
Routine Immunizations - MenABCWY vaccine	New recommendation effective June 25, 2025.	June 25, 2025	YES: Addition of new immunization, Penmenvy, into existing routine immunization schedule.
High Body Mass Index in Children and Adolescents: Interventions	Existing recommendation with updated information published June 2024.	July 1, 2025	YES: Addition of covered nutrition/ counseling services for children and adolescents 6 years or older with a high body mass index (BMI).
Routine Immunizations - RSV monoclonal antibody (infants)	New recommendation effective August 4, 2025.	August 4, 2025	YES: Addition of new monoclonal antibody, Clesrovimab, into existing routine immunization schedule.
Routine Immunizations - COVID-19 vaccine	New recommendation effective August 27, 2025.	August 27, 2025	YES: Addition of new vaccine, mNEXSPIKE, into existing routine immunization schedule.
Multiple Services	Existing recommendation with updated ICD-10 (procedure and diagnosis) and HCPCS coding.	October 1, 2025	NO: Applicable procedural and diagnosis coding updates (new/ revised/deleted codes) to existing benefit services comprehensively reviewed and operationalized.

HAVE QUESTIONS OR COMMENTS ABOUT BLUE NEWS?

Please send your feedback to your account management team.