Understanding the "Provider Tiering" in the 2021 Centra Group Health Plan (CGHP)

First, it is important to know that the "Provider Tiering" applies to CGHP members who live in the following Central Virginia area zip codes. If you live out of the area, your plan does <u>not</u> have provider tiering.

22920, 22922, 22938, 22943, 22949, 22952, 22958, 22964, 22967, 22971, 22976, 23040, 23901, 23909, 23915, 23917, 23919, 23921, 23922, 23923, 23924, 23927, 23934, 23936, 23937, 23939, 23942, 23943, 23947, 23950, 23952, 23954, 23955, 23958, 23959, 23960, 23962, 23963, 23964, 23966, 23967, 23968, 23970, 23974, 23976, 24054, 24069, 24104, 24121, 24122, 24137, 24139, 24161, 24174, 24411, 24463, 24464, 24469, 24476, 24501, 24502, 24503, 24504, 24505, 24506, 24513, 24514, 24515, 24517, 24520, 24521, 24522, 24523, 24526, 24527, 24528, 24529, 24530, 24531, 24534, 24535, 24536, 24538, 24539, 24540, 24541, 24549, 24550, 24551, 24553, 24554, 24556, 24557, 24558, 24563, 24565, 24566, 24569, 24570, 24571, 24572, 24574, 24576, 24577, 24580, 24581, 24586, 24588, 24589, 24592, 24593, 24594, 24595, 24597, 24598, 24599

Second, it is important to know that the same "Provider Tiering" applies to both the 2021 Basic Care Plan and the 2021 HDHP plans. The plans, of course, differ in many other ways, but the rules around provider tiering are the exact same.

Basically, "provider tiering" is an incentive for members to utilize certain providers. Centra Management is encouraging you to use certain providers over others in order to reduce the overall cost of the health plan. You are, of course, permitted to use whichever provider you choose.

All providers, including specialists, have been placed into four "buckets", or "tiers". Tier 1 includes providers employed by Centra. Tier 2 includes local non-Centra providers who have a direct contract with Piedmont. Tier 3 are providers, generally located out of the area, who are part of our Aetna Signature Administrators (ASA) network and paid under Aetna's contract. Finally, Tier 4 are providers not connected to any network and where our costs are highest.

Note: If approved and pre-authorized by Piedmont, procedures or visits at UVA and VCU are considered as Tier 2. They are considered to be Tier 3 if they are <u>not</u> approved or pre-authorized by Piedmont.

Using the Basic Care Plan as the example, the member's annual deductible and maximum out-of-pocket are higher (i.e. the member pays more), the higher the tier of provider chosen. An individual, for instance, saves \$250 on his deductible and \$500 on his maximum out-of-pocket by using a Tier 1 Centra provider instead of a Tier 2 non-Centra provider. Centra's costs are lower and we are sharing those savings with our members. Again, to be clear, the member can use whichever provider he chooses.

Should a member use providers in more than one tier, **plan benefits are based on the highest tier used.** This is regardless of the number of visits to each provider. As an example, should a member use a Tier 1 primary care physician and a Tier 2 specialist, his annual deductible and maximum out-of-pocket will be applied at the Tier 2 level. *Please keep in mind Tier 4 visits only apply to the Tier 4 deductible and Tier 4 maximum out-of-pocket.*

Centra Management believes that "provider tiering" is a smart approach to helping control healthcare costs because it does not limit plan benefits, does not limit member choice of provider and shares the savings with our members.