

*Department of Human Resources
City of New Haven*

InterOffice Memo

To:	All City and B.O.E. Bargaining Unit Presidents
From:	Steve Librandi, Manager of Human Resources & Benefits
Date:	Wednesday, October 4, 2017
Subject:	Contract Dispute – Hartford HealthCare Corporation

We have been notified by Anthem of their ongoing contract dispute involving the Hartford HealthCare Corporation (HHC). HHC's hospitals include: Hartford Hospital, The Hospital of Central Connecticut, MidState Medical Center, William W. Backus Hospital and Windham Community Memorial Hospital. Other HHC facilities and providers include: Natchaug Hospital, Rushford Center, Southington Care Center, VNA HealthCare, Jerome Home and the Hartford HealthCare Medical Group.

Anthem has been in discussions with HHC but has not reached an agreement that allows them to achieve an appropriate balance between access and affordable care. In response to not reaching an agreement, HHC advised Anthem of its intent to terminate its Anthem participation agreements effective October 1, 2017. This will make all HHC facilities non-participating providers on and after that date. This would impact retirees who are not covered by Medicare and active employees in all our current Anthem health plans.

Anthem will continue to negotiate with HHC over the coming weeks. If an agreement is not reached, the priority will be to ensure that our employees have the right clinical transition plan in place so that services in process are not interrupted and that needs for future services are transitioned to other comparable providers.

The attached letter regarding HHC Group was mailed to all our employees who have visited a HHC facility in the last six months. The member letter also included an Q and A to address some, but I'm sure not all of our employees concerns. I will be working with Anthem to ensure that all employees receive the assistance and care that they need.

Please feel free to contact me direct for more information or with questions or concerns.



QUESTIONS AND ANSWERS FOR MEMBERS AND EMPLOYER GROUPS:

Q1. Where are the hospitals, facilities and providers located?

A1. The primary locations are at the following addresses:

Hartford Hospital: 80 Seymour Street, Hartford, CT
MidState Medical Center: 435 Lewis Avenue, Meriden, CT
The Hospital of Central Connecticut: 100 Grand Street, New Britain, CT
William W. Backus Hospital: 326 Washington Street, Norwich, CT
Windham Community Memorial Hospital: 112 Mansfield Avenue, Willimantic, CT
Natchaug Hospital: 189 Storrs Road, Mansfield Center, CT
Rushford Center: 1250 Silver Street, Middletown, CT
Southington Care Center: 45 Meriden Avenue, Southington, CT
Jerome Home: 975 Corbin Avenue, New Britain, CT
Jefferson House: 1 John H. Stewart Drive, Newington, CT 06111
VNA HealthCare: 1290 Silas Deane HWY, Wethersfield, CT
Harford HealthCare Medical Group: (*various locations*)

Q2. Why are these hospitals, facilities and providers no longer in Anthem's network?

A2. We have been trying to reach agreement on terms for new contracts. These contract negotiations are a standard part of what we do but to date, we have not yet reached agreement. As a result, the contracts with Anthem will end on September 30, 2017.

Q3. What will this mean if I need services from any of these hospitals, facilities or providers?

A3. As of October 1, 2017, they will be non-participating in Anthem's networks. If you have out-of-network benefits, services provided are subject to those benefits (except in cases of emergency.) Your out-of-pocket costs will most likely be higher.

Q4. Will Anthem send claim payments to the hospitals/facilities/providers for services I receive?

A4. Anthem will make any payment directly to you. You will be responsible for paying your bill in full.

Q5. I have an HMO plan. How will this affect me?

A5. If you have an HMO plan, you will have to pay all costs for any non-emergency care that you get from any of these hospitals, facilities or providers. As of October 1, 2017, they will all be out-of-network and your plan does not include coverage for any out-of-network hospitals, facilities or providers, except in an emergency.

Q6. I have a POS/PPO plan. How will this affect me?

A6. If you have a POS or PPO plan, you can use a hospital, facility or provider who/that is out-of-network but it may cost you more than using one who/that is in-network. You can still use one of them but the costs, and "who pays what," will be based on the way your plan pays for services provided out-of-network. (See your Summary Plan Description for details.)

It is important to remember that using hospitals, facilities and providers who/that are in our network(s) saves you the most money.

Q7. I have a Health Reimbursement Account (HRA) or a Health Savings Account (HSA). How will this affect me?

A7. If you have a plan with an HRA or HSA, you can use a hospital, facility or provider who/that is out-of-network but it may cost you more than using one who/that is in-network. You can still use one of them but the costs, and "who pays what," will be based on the way your plan pays for services provided out-of-network. (See your Summary Plan Description for details.)

It is important to remember that using hospitals, facilities and providers who/that are in our network(s) saves you the most money.

Q8. What if I am not sure what type of plan I have?

A8. If you need help understanding what type of plan you have, you may call the phone number on the back of your Member ID Card.

Q9. When will the hospitals, facilities and providers become out-of-network?

A9. If we are unable to reach agreement, they will change from in-network to out-of-network as of October 1, 2017.

Q10. If I have services or a procedure scheduled at/with one of the hospitals, facilities or providers, do I have to change?

A10. Not necessarily, but here's what you should do:

- Get a "Continuation of Care Form" from Anthem.
- You can get the form on our website, <http://group.anthem.com/HHC>, or you can call Member Services at the phone number on the back of your ID card and they will email or mail you a copy of the form.
- Fill out the form and send it to Anthem.
- We will review it and determine if you can continue with the hospital and still be covered on an in-network basis or if you have to change hospitals to be covered on an in-network basis. If you have to change hospitals in order to get in-network coverage, we'll help you find a hospital that fits your needs.

Q11. If I am hospitalized at/with one of these hospitals before October 1, 2017 and am discharged on or after this date, will my admission/services be covered as in-network?

A11. Yes. All of the services you receive until discharge from the hospital will be paid in accordance with in-network benefits.

Q12. If I have surgery at/with one of these hospitals prior to October 1, 2017, can I have my post-surgical follow-up there?

A12. Yes. Your routine post-surgical follow-up will be covered as in-network, *provided that the surgery occurs before October 1, 2017.*

Q13. I am in the third trimester of my pregnancy (28 to 40 weeks). Do I need to change hospitals in order to get in-network coverage when I deliver my baby after September 30, 2017?

A13. No, you do not have to switch right now but here's what you should do:

- Get a "Continuation of Care Form" from Anthem.
- You can get the form on our website, <http://group.anthem.com/HHC> or you can call Member Services at the phone number on the back of your ID card and they will email or mail you a copy of the form.
- Fill out the form and send it to Anthem.
- We will review it and determine if you can continue with the hospital, facility or provider and still be covered on an in-network basis, or if you have to change to be covered on an in-network basis. If you have to change in order to get in-network coverage, we'll help you find a hospital that fits your needs.

Q14. What if I have an emergency medical issue?

A14. In an emergency, you should always go to the nearest emergency room, whether it's in-network or out-of-network. For emergency care, all services at/by the hospital, facility or provider will be covered as though they are in-network. Emergency care means services performed in the Emergency Department or

admissions from the Emergency Department as described in the member's plan documents. An emergency is any situation or condition, such as the onset of a serious illness or injury that you reasonably believe requires emergency care.

Q15. How do I check on the status of a Continuation of Care Form that I submitted?

A15. You can call the Customer Service phone number on the back of your Member ID Card and we will advise you of its status. You have until October 31, 2017 to submit the form to Anthem. If approved, you will receive notice as to how long you may continue to use the hospital, facility or provider on an in-network basis, which may be *up to ninety (90) days after your notification*.

Q16. Will the hospitals, facilities and providers ever rejoin Anthem's networks?

A16. Anthem continues to work with Hartford HealthCare Corporation with the goal of reaching agreement prior to the expiration/termination date.

Q17. I have a Medicare Supplemental/Medigap plan. How will this affect me?

A17. These plans are not limited to any Anthem network. You can go to any hospital, facility or provider that/who accepts traditional Medicare.

Q18. Does this impact Hartford Healthcare Eye Surgery Center?

A18. Yes, Hartford Healthcare Eye Surgery Center is part of Hartford Hospital and will change from in-network to out-of-network as of October 1, 2017. The surgery center is located at 505 Willard Avenue, Newington, CT 06111.



August 30, 2017

IMPORTANT INFORMATION

Hartford HealthCare Corporation's contracts with Anthem may end on September 30, 2017

Dear Anthem Member:

Anthem Blue Cross and Blue Shield has been in negotiations with Hartford HealthCare Corporation ("HHC") regarding the renewal of its participation agreements.

HHC's hospitals include: Hartford Hospital, The Hospital of Central Connecticut, MidState Medical Center, William W. Backus Hospital and Windham Community Memorial Hospital. Other HHC facilities and providers include: Natchaug Hospital, Rushford Center, Southington Care Center, VNA HealthCare and Jerome Home. If we are not able to reach agreement for a renewal, **as of October 1, 2017**, these HHC hospitals, facilities and providers will no longer participate in Anthem's networks.

In addition, HHC notified Anthem of its intent to terminate its participation agreement for Hartford HealthCare Medical Group. Unless HHC rescinds this termination notice, this provider will change from being participating (in-network) to non-participating (out-of-network) **as of October 1, 2017**.

Please note that these expirations and the termination impact all networks, products, programs and plans, including Anthem's Exchange networks and ACA-compliant Off-Exchange products, programs and plans.

Anthem has provided a proposal to HHC that we believe achieves the right balance of quality and affordability and we hope to be successful in securing agreement before October 1st.

Contract negotiations with our participating providers are a standard part of what we do every day to bring you access to a strong provider network. Fortunately, we successfully conclude most of these negotiations. The reason Anthem negotiates provider contracts is simple – to provide you with a broad network of facilities and providers who/that have agreed to accept negotiated rates and other important contract terms (such as terms that prohibit the provider from balance billing, you, our member). This impacts premiums and your out-of-pocket expenses. Depending on the type of coverage you have, 80 to 90 percent of your Anthem health coverage costs are healthcare provider costs. Any escalated increase can have an adverse impact on the cost of your health insurance and your out-of-pocket costs.

What will this mean to you?

If these HHC hospitals, facilities and providers leave Anthem's networks as of October 1, 2017, they will change from participating (in-network) facilities and providers to non-participating (out-of-network) facilities and providers.

If you have a PPO or POS plan, you have out-of-network benefits. Services provided by these hospitals, facilities and providers will be subject to those benefits (except in cases of emergency, for which in-network benefits always apply).

If you have an HMO plan, you do *not* have out-of-network benefits and you will have to pay all costs for any non-emergency care that you receive from these facilities and providers.

Please remember that in an emergency, you should always go to the nearest emergency room, whether it's in-network or out-of-network. For emergency care, all services will be covered as though they are in-network. Emergency care is services performed in the Emergency Department or admissions from the Emergency Department as described in the plan documents. An emergency is any situation or condition, such as the onset of a serious illness or injury that you reasonably believe requires emergency care.

What should you do?

You don't have to do anything unless you:

- Are under treatment with any of these hospitals, facilities or providers after they change from participating to non-participating;
- Are scheduled for treatment at/with any of these hospitals, facilities or providers after they change from participating to non-participating;
- Have questions about your coverage; or
- Need help accessing services in Anthem's networks.

If any of these situations apply to you we recommend that you contact us at the number on the back of your identification card.

Continuation of Care

If you have services or a procedure scheduled at/with one of the HHC hospitals, facilities or providers listed above, do not cancel any appointments right now. You may obtain a "Continuation of Care Form" from Anthem and we will determine whether you can continue with the facility or provider and still be covered on an in-network basis. You can get the form on our website, <http://group.anthem.com/HHC> or you can call Member Services at the phone number on the back of your Member ID Card. If you are receiving inpatient, Intensive Outpatient or Partial Hospitalization treatment at either Rushford Center or Natchaug Hospital, you do not need to take any action. Services initiated before October 1, 2017 will be covered as in-network until you are discharged from the inpatient, Intensive Outpatient, or Partial Hospitalization program.

Again, we wish to assure you that Anthem is working diligently, and in good faith, to reach agreement with HHC on your behalf. Attached is a list of common questions you may have and a partial list of other participating hospitals, facilities and providers that are available to meet your health care needs. We will post up-to-date information at our website. Please visit <http://group.anthem.com/HHC> for the latest updates.

Sincerely,



James Augur
Vice President

Enclosure