

Provider Update

This update contains pertinent information about changes that will impact the Johns Hopkins HealthCare provider network.

USFHP Adds Walter Reed Center to Network for Specialty Services

In partnership with the Defense Health Agency, Johns Hopkins USFHP will add Walter Reed National Military Medical Center (WRNMMC) to its provider network. Effective Dec. 1, Johns Hopkins USFHP members will be able to use WRNMMC for the following specialty care: pulmonary, general surgery, cardiothoracic surgery, and vascular surgery. Members do not have to use WRNMMC for any of their health care, but they have the option.

To use WRNMMC for one of the approved specialties, members must receive a referral from their provider. At this time, only Johns Hopkins Community Physicians (JHCP) providers can refer members to WRNMMC. We expect that other in-network providers will be able to refer members to the facility at a later date. More information about the addition of WRNMMC to the network is available on our website.

PRUP85-Walter Reed Referrals JHCP USFHP-(11/19)

2020 Changes to Pharmacy Copays for USFHP Members

Effective Date: January 1, 2020

Line(s) of Business Affected: US Family Health Plan (USFHP)

Type of Change (Process, Material, Benefit, Site of Service): Pharmacy copays

Explanation of Change(s):

The Defense Health Agency has communicated the following increases for pharmacy copays for members effective January 1, 2020:

- Mail-Order Pharmacy (Home Delivery) 90-day supply
 - Generic drug copay: increase from \$7 to \$10
 - Brand-name drug copay: increase from \$24 to \$29
 - Non-formulary* drugs: increase from \$53 to \$60
- Walgreens Pharmacy 30-day supply
 - Generic drug copay: increase from \$11 to \$13
 - Brand-name copay: increase from \$28 to \$33
 - Non-formulary copay: increase from \$53 to \$60

Please contact the JHHC Provider Relations department at 1-888-895-4998 with any questions or concerns

^{*}Non-formulary means that the drug is not on TRICARE's list of fully covered medications.



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2020 Changes to USFHP Member Out-of-Pocket Costs and Copays

Effective Date: January 1, 2020

Line(s) of Business Affected: US Family Health Plan (USFHP)

Type of Change (Process, Material, Benefit, Site of Service): Member out-of-pocket costs and copays

Explanation of Change(s):

The Defense Health Agency has communicated the following increases for member out-of-pocket costs effective January 1, 2020:

Out-of pocket

- Annual Catastrohic Cap
 - For Active Duty Group B: increase from \$1,028 to \$1,044
 - For Retiree Group B: increase from \$3,598 to \$3,655
- Annual Individual Enrollment Fee
 - **For Retiree Group A:** increase from \$297 to \$300
 - For Retiree Group B: increase from \$360 to \$366
- Annual Family Enrollment Fee
 - **For Retiree Group A:** increase from \$594 to \$600
 - **For Retiree Group B:** increase from \$720 to \$732

<u>Copays</u>

- **Specialty Care:** increases from \$30 to \$31 for Retiree Groups A and B
- Ambulatory Surgery: increases from \$61 to \$62 for Retiree Groups A and B
- Urgent Care: increases from \$30 to \$31 for Retiree Groups A and B
- **ER Visit:** increases from \$61 to \$62 for Retiree Groups A and B
- Inpatient Admission (per admission): increases from \$154 to \$156 for Retiree Groups A and B
- Inpatient SNF/Rehab Facility: increases from \$30 to \$31 for Retiree Groups A and B

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