

Understanding our aggregation options



As members move through the year, it's important to understand how medical expenses add up and whether the cost will be the responsibility of the member or the health plan.

Aggregation refers to how payments toward health care services add up and are counted against a member's deductibles and out-of-pocket maximums. Depending on the plan features, aggregation may be determined on an individual or a family basis.

Deductible aggregation

Individual aggregation, commonly referred to as "embedded"

Each covered family member only needs to satisfy their own individual deductible, not the entire family deductible, before plan benefits kick in. This option is often more attractive to families because claims for individuals will be covered when that individual meets their single deductible, regardless of whether or not other family members have met theirs.

- If a plan has individual aggregation, the single-deductible level must be equal to or greater than the family deductible minimum for that year, or \$3,500 in 2027.

Family aggregation

While this option typically helps keep monthly premiums lower, family aggregation means the entire family's annual deductible must be met by one or any combination of covered members before a copay or coinsurance is applied for any family member.

- If a plan has family aggregation, the single-deductible level must be more than or equal to the individual minimum for that year, or \$1,750 in 2027.

Out-of-pocket max aggregation

The same rules apply to out-of-pocket maximums (OOPM)

- With individual aggregation, each family member only needs to meet their own OOPM before services are covered in full.
- With family aggregation, the entire family's combined OOPM must be met before any individual's services are covered in full.

Per-person OOPM cap

All Excellus BlueCross BlueShield (BCBS) plans include an extra layer of protection preventing any individual from exceeding certain personal out-of-pocket medical expenses each year, above a set threshold. This cap applies to family plans with family aggregation, acting as a safeguard and providing more value in the event of high medical expenses for one individual.

For 2027, the per-person cap is \$8,700 for qualified HSA plans and \$12,000 for non-qualified plans.

Let's take a look at two examples on the next page

Consider this, Lauren and Marc are on a family plan that includes the following cost shares:

Individual Deductible: \$2,500
Family Deductible: \$5,000

Coinsurance: 20%
(Once deductible is met)

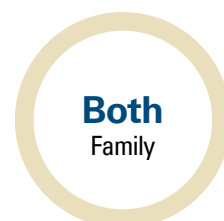
Individual OOPM: \$5,000
Family OOPM: \$10,000



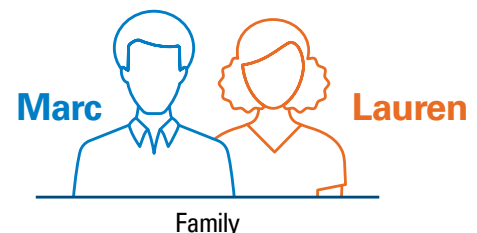
Marc
Individual



Lauren
Individual

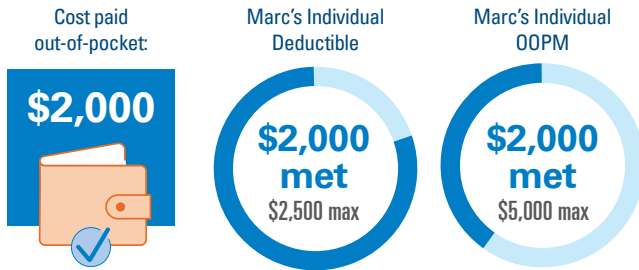


Both
Family

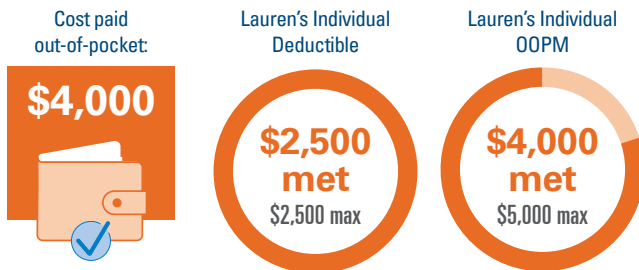


Individual aggregation

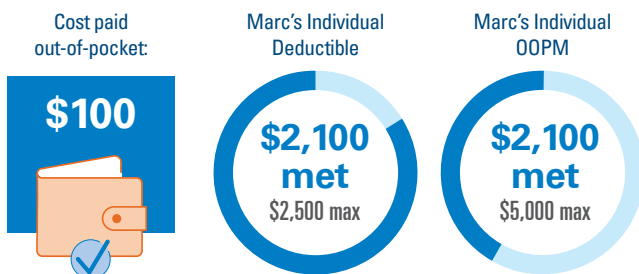
In January, **Marc** needs a minor surgical procedure that costs \$2,000. Since this is Marc's first medical expense this year, his individual deductible applies. He will pay **100% of the costs (\$2,000)**.



In May, **Lauren** is admitted to the hospital for an emergency procedure that costs \$10,000. Since this is Lauren's first medical expense this year, her individual deductible applies. **She will pay 100% (\$2,500) of her deductible plus 20% coinsurance (\$1,500) for the remaining balance.**



In August, **Marc** visits the doctor, resulting in a \$100 charge. Since Marc's deductible has not been met, he will continue to pay toward his individual deductible. He will pay **100% of the costs (\$100)**.

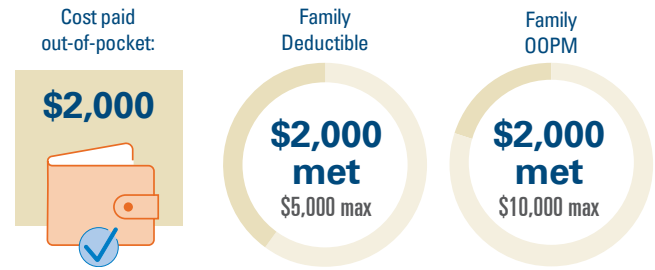


If Marc reaches his deductible, **Excellus BCBS will start paying 80%** of covered expenses. If Lauren and/or Marc reach their individual \$5,000 OOPM, their individual covered health care services **will be covered in full by Excellus BCBS**.

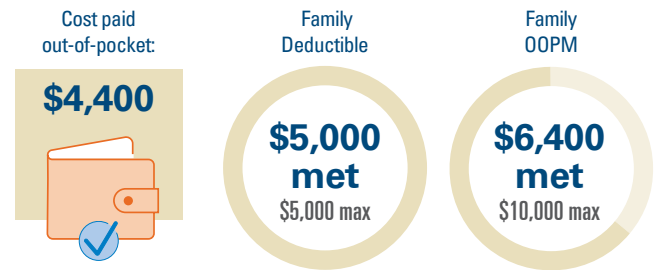


Family aggregation

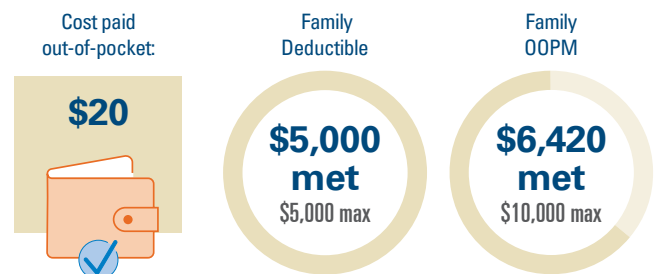
In January, **Marc** needs a minor surgical procedure that costs \$2,000. Since this is the family's first medical expense this year, the deductible applies. He will pay **100% of the costs (\$2,000)**.



In May, **Lauren** is admitted to the hospital for an emergency procedure that costs \$10,000. Since the family deductible applies, **Lauren will pay 100% of the first \$3,000 to meet the family deductible plus 20% coinsurance (\$1,400) for the remaining balance.**



In August, **Marc** visits the doctor, resulting in a \$100 charge. **Since the family deductible has been met, Marc will pay 20% coinsurance (\$20) of the total allowed cost.**



If **Lauren and Marc** reach their OOPM together through any combination of their health care expenses, **Excellus BCBS will pay 100%** of covered medical expenses for the rest of the plan year.

Reminder: Even though the family OOPM is \$12,000 and can be reached through any combination of family members' expenses, the **per-person individual OOPM cap** mentioned earlier applies here. Meaning, if Lauren's procedure had cost considerably more, she would never owe more than \$8,700 (if the plan is HSA qualified) in individual expenses in a year, due to this extra layer of protection.