

# The Buzz



Fall 2011

Employee Benefits Division

## 2012 Plan brings new options

With open enrollment right around the corner, it's time to start considering the upcoming ARBenefits Health Plan Year, which begins January 1, 2012.

There are certainly some changes to the plan for the coming year, most of which involve implementation of new contracts with several vendors, including the benefit coordinators, pharmacy benefit manager and employee assistance program. Along with those changes, there are also some system changes coming online to improve your experience with the plan.

The big difference this coming plan year is that there will be an additional plan option available. Currently, the ARBenefits Health Plan

consists of the traditional point of service plan, which includes co-pays, coinsurance and a pharmacy plan; or the high-deductible health plan, which can be attached to the health savings account.

Both of these plan options will remain, but with a new name. They will be reclassified as the Gold Plan (Traditional Plan) or Bronze Plan (High-Deductible Plan).

The Gold Plan is considered the "richest" of the plan options, as it contains the maximum amount of benefit with the lowest co-pays, co-insurance, and a \$0 deductible. It also has the highest monthly premium cost to the member. There is a prescription drug plan attached to Gold, which includes \$10,

\$30 and \$60 co-pays depending on tier. Physician co-pay is \$25. Specialist co-pay is \$35. Emergency room co-pay is \$100.

The Bronze Plan is the equivalent of the High-Deductible PPO Plan that has been in place for several years. It features the lowest monthly premium of any plan, but has a deductible attached to it (\$1500 for an individual and \$3000 for a family) that must be met before the plan begins to pay any service. This plan is also eligible for a Health Savings Account. There are no co-pays with the Bronze Plan, but prescriptions and medical services apply to the deductible and can be purchased using funds in the HSA.

See "Options" page 2

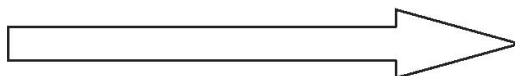
### ***Open Enrollment is Auto Enrollment!***

If you are currently on the ...

You will be auto-enrolled in ...

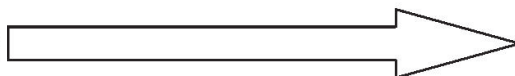
**Traditional Plan**

**(Health Advantage or NovaSys)**



**ARBenefits Gold**

**High-Deductible PPO (NovaSys)**



**ARBenefits Bronze**

*Members may choose to change their plan to what fits best during open enrollment in October. To make a change, visit [www.arbenefits.org](http://www.arbenefits.org) and manage your benefits online. If you like the plan you are in, do nothing and you will be auto-enrolled into the new plan.*

**IMPORTANT: Review and keep this document!**

## “Options” from page 1...

The new plan is the Silver Plan, which fits nicely between Gold and Bronze. The Silver Plan will serve as a “hybrid” of sorts between the Gold and Bronze plan. It will also offer co-pays, co-insurance and a pharmacy plan, like the Gold, but the amounts involved for your out-of-pocket expenses will be a little more than the Gold. It is a point-of-service plan, like the Gold Plan, but with a \$750 deductible attached to it. Your monthly premium will be lower, but the deductible must be met before the plan begins to pay for some services. There is a prescription drug plan attached to Silver, which includes \$10, \$35 and \$70 co-pays depending on tier. Physician co-pay is \$25. Specialist co-pay is \$50.

Emergency room co-pay is \$150.

By offering this third option, it provides a new level of choice for those who want less premium than the Gold option, but desire some of the traditional options that aren’t available with the High Deductible Plan. The Gold Plan will have the highest premium cost attached to it, but a lower amount of money expected when you visit the doctor, hospital or pharmacy. The Silver will take less premium, but will require a little more money out-of-pocket and a deductible. The Bronze plan will require the least amount of premium, but the most out-of-pocket when you utilize the plan until you meet the deductible.

If you are currently a member of one of the two traditional point-of-service plans, you will automatically be enrolled in the Gold Plan. If you are currently a member of the high-deductible health plan, you will automatically be enrolled in the Bronze Plan. During October, you can choose to change to whatever plan fits you best.

We are confident that these three plan options will allow you, the member, to choose the best option for your family based on your healthcare needs and the level of premium you want to pay. More information about these specific plans and the schedule of benefits for all three is available at [www.arbenefits.org](http://www.arbenefits.org).

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# A great *Plus* for the ARBenefits Plan

The ARBenefits Health Plan is a great plan that provides a strong slate of benefits to Public School Employees. But the addition of new programs and benefits to assist members who are facing difficult situations can make the plan even better.

We agree, and are proud to introduce the ARBenefitsPlus Plan!

The ARBenefitsPlus Plan is the newest program available to all members of the ARBenefits Health Plan. ARBenefitsPlus is a comprehensive condition management program designed to assist members who have specific conditions manage them at a higher level. The program is available at no

cost to all ARBenefits Health Plan members.

So what is a condition management program? Simply put, it is an intensive assistance program to guide you through the day by day obstacles of your condition. There are eight different conditions that are currently covered. Those include Asthma, Chronic Obstructive Pulmonary Disease (COPD), Chronic Pain due to arthritis or low back pain, Congestive Heart Failure, Coronary Artery Disease, Diabetes, High Cholesterol and High Blood Pressure. Starting January 1, 2012, Maternity and Smoking Cessation will be added to the list.

This program is designed to help you understand the steps to take to manage your condition or combination of conditions. Incremental and achievable goals to maximize health will be set, and you will have access to a personal Nurse Coach, based right here in Arkansas, who will work with you on a confidential basis over the phone. Those phone calls will include providing information about the chronic condition or conditions, developing a personal plan to optimize health and providing support as you take charge of your health!

Getting enrolled is as simple as calling the ARBenefits

**See “ARBenefitsPlus” page 8**

# What changes can I make during open enrollment (Starting October 1st)?

Many people view open enrollment as a time to quickly review the plan changes, check out the new rates, decide to stick with last year's plan, and just move on with more important things. But truthfully, what could be more important than your personal health or the health of your family?

Open Enrollment is the time to review your options and choose the benefit plan and network that is right for you and your family. All options should be reviewed during this time of the year.

During Open Enrollment, employees can:

- Choose to remain with their current plan.
- Change from one plan to the other.
- Join the plan as a new member

- Drop dependents from your plan
- Add dependents to your coverage
- Terminate coverage and leave the plan

**If you are a member and do not wish to make a change:**

- **Do nothing. Your coverage will continue into the new plan year with your same coverage tier and plan option (For those on the Traditional Plan, you will move automatically into the Gold Plan. For those on the High-Deductible Plan, you will move automatically into the Bronze Plan).**

If you are a member and want to change your covered dependents, elect a new plan option, cancel coverage or, if you are not a member and want

to join the plan:

- Fill out an ARBenefits Election Form

Enrollment can be completed online or by paper by going to [www.arbenefits.org](http://www.arbenefits.org) and logging in for access to online enrollment or the Library of Forms for paper copies. **All forms must be returned directly to EBD before Oct. 31 to be effective Jan. 1, 2012.**

Find us on Facebook



[www.facebook.com/ARBenefits](http://www.facebook.com/ARBenefits)

## What changes can I make during the year?

In most cases, changes to your coverage can only be done during open enrollment (starting October 1). Federal law prevents members from adding and removing dependents throughout the year without specific reasons such as marriage, the birth of a new child, loss of a spouse, or loss of other group health insurance coverage.

ARBenefits is subject to many State and Federal regulations and many of them deal with mid-year changes to a member's health plan. The

Summary Plan Description (SPD), which is available through the EBD website ([www.arbenefits.org](http://www.arbenefits.org)), has a full description of what changes can be made during the plan year. Below is a sample of the situation and the changes that can be made:

- **Birth or Adoption** – Coverage for the new child can be added to the member's plan in addition to other eligible dependents that are not currently enrolled in ARBenefits.
- **Loss of Group Health**

**Insurance Coverage for Spouse** – Coverage for the spouse can be added to the member's plan.

- **Marriage** – Coverage for the new spouse can be added to the member's plan.
- **Divorce** – Coverage for the ex-spouse must be dropped from the member's plan. Special rules and enrollment deadlines apply to each situation.

Please refer to the SPD for a more detailed description of allowable mid-year changes.

# Employee Benefits Division (EBD)

Administrator of the ARBenefits Health Plan - Benefit Information & Assistance

Phone: (877) 815-1017

"Just Press One"

E-mail: AskEBD@ARBenefits.org

Web: www.arbenefits.org

Mailing Address:

P.O. Box 15610

Little Rock, AR 72231-5610

Physical Address:

501 Woodlane Street, Suite 500

Little Rock, AR 72201

## Health Advantage (ARBenefits Gold/Bronze)

P.O. Box 8069

Little Rock, AR 72203

Phone: (800) 482-8416

E-mail: customerservicePSE@arkbluecross.com

Web: www.healthadvantage-hmo.com

## QualChoice (ARBenefits Silver)

12615 Chenal Parkway, Ste. 300

PO Box 25610

Little Rock AR 72221

Phone: (800) 235-7111 Ext. 7016

Web: www.qualchoice.com

## EBRx\* (Pharmacy Prior Authorization and Appeals)

UAMS College of Pharmacy: AR EBD Appeal

4301 W. Markham, Slot 522-9

Little Rock, AR 72205

Phone: (866) 564-8258

\*Requires physician contact

## USable Life (Life Insurance)

320 West Capital, Suite 700

P.O. Box 1650

Little Rock, AR 72203

Phone: (800) 370-5856 (Customer Service)

Phone: (800) 648-0271 (Claims)

Phone: (501) 375-7200

Web: www.usablelife.com

## American Health Holding, Inc. (AHH) (Medical Utilization Review)

Phone: (501) 682-6088

(800) 592-0358

Fax: (614) 396-0532

Web: www.americanhealthholding.com

## Elements of a group health plan

Defined below are terms used throughout this edition.

- **Co-Pay** – The fixed dollar cost paid by the member for a medical service such as a primary care physician office visit or emergency room visit. This cost is paid by the member at the time of the service and does NOT apply toward the Out-of-Pocket maximum or deductible (if any) for the plan. Although typically a flat dollar amount, this can be a percentage of the charge.
- **Co-Insurance** – The portion of the claim that is paid both by the member and by the plan which is generally divided into percentages such as 20% member responsibility and 80% plan responsibility. Once a member has met his or her deductible (if any) the plan will cover a portion of the claim and the member will also pay a portion.
- **Deductible** – This is a portion of the medical expenses that a member must pay before the health plan pays any portion of the claim at the co-insurance rate. Office visits, prescription drugs, lab fees, and other services accumulate to meet the deductible.
- **Co-Insurance Limit** – This is the limit that any member or family will spend once the member begins to pay his or her portion of the co-insurance. This limit does not take into account any co-pays that have been paid.

# What Does ARBenefits Cover?

Active and Non-Medicare Retiree members have the option of the ARBenefits Gold Plan offered through Health Advantage, the ARBenefits Silver Plan offered through QualChoice, or the ARBenefits Bronze Plan (an HSA qualified plan) which is also offered through Health Advantage.

<b>2012 Plan Year - Summary of Common Services</b>					
Covered Benefits and Services	Gold		Silver		Bronze
	In-Network Copayment	In -Network Coinsurance	In-Network Copayment	In -Network Coinsurance	In-Network Coinsurance
Deductible - Individual	n/a	\$0	\$750	20%	\$1,500
Deductible - Family	n/a	\$0	\$1,500	20%	\$3,000
Annual Coinsurance Limit - Individual (after deductible)	n/a	\$1,500	n/a	\$2,000	\$2,500
Annual Coinsurance Limit - Family (after deductible)	n/a	\$3,000	n/a	\$4,000	\$5,000
Lifetime Maximum	n/a	n/a	n/a	n/a	n/a
<b>Physician/Specialist Services</b>					
Primary Care Physician Office Visit	\$25	0%	\$25	0%	20%
Specialist Office Visit/Specialty Care Services	\$35	0%	\$50	0%	20%
Other Physician Services provided under Outpatient or In-Patient Care	\$0	20%	\$0	20%	20%
<b>Pharmacy Benefit</b>					
Prescription - Generic - Tier I	\$10	0%	\$10	0%	20%
Prescription - Preferred - Tier II	\$30	0%	\$35	0%	20%
Prescription - Non-Preferred - Tier III	\$60	0%	\$70	0%	20%
<b>Hospital Services</b>					
In-Patient Services	\$250	20%	\$300	20%	20%
Outpatient Services	\$100	20%	\$150	20%	20%
Diagnostic Services	\$0	20%	\$0	20%	20%
<b>Emergency Care Services</b>					
Emergency Room Visit, Urgent Care Center, Observation	\$100	0%	\$150	0%	20%
<b>Preventative Care Services</b>					
Physical Exams / Preventative Care	\$0	0%	\$0	0%	0%
Well Baby / Child Care Visits	\$0	0%	\$0	0%	0%
Immunizations	\$0	0%	\$0	0%	0%
Vision Screening	\$35	0%	\$35	0%	\$35 Co-Pay
Hearing Screening	\$35	0%	\$35	0%	\$35 Co-Pay

Listed above are a few of the covered services indicated at the In-Network coverage level. Out-of-Network coverage is available on all plan options. Refer to Summary Plan Description located at [www.arbenefits.org](http://www.arbenefits.org) for more details regarding coverage and cost.

# Public School Employee 2012 Active Rates

	Base Monthly Premium	State Contribution	Plan Contribution	School District Contribution	Total Monthly Employee Cost
<b>Employee Only</b>					
<b>Gold</b>	\$437.36	\$90.12	\$28.88	\$131.00	<b>\$187.36</b>
<b>Silver</b>	\$401.62	\$90.12	\$22.94	\$131.00	<b>\$157.56</b>
<b>Bronze</b>	\$148.90	\$17.90	\$0.00	\$131.00	<b>\$0.00</b>
<b>Employee &amp; Spouse</b>					
<b>Gold</b>	\$1,202.68	\$160.22	\$62.54	\$131.00	<b>\$848.92</b>
<b>Silver</b>	\$1,097.40	\$160.22	\$92.32	\$131.00	<b>\$713.86</b>
<b>Bronze</b>	\$349.34	\$31.82	\$0.00	\$131.00	<b>\$186.52</b>
<b>Employee &amp; Child(ren)</b>					
<b>Gold</b>	\$779.48	\$122.74	\$45.18	\$131.00	<b>\$480.56</b>
<b>Silver</b>	\$712.64	\$122.74	\$54.80	\$131.00	<b>\$404.10</b>
<b>Bronze</b>	\$238.70	\$24.38	\$0.00	\$131.00	<b>\$83.32</b>
<b>Employee &amp; Family</b>					
<b>Gold</b>	\$1,211.24	\$165.92	\$63.12	\$131.00	<b>\$851.20</b>
<b>Silver</b>	\$1,105.20	\$165.92	\$92.50	\$131.00	<b>\$715.78</b>
<b>Bronze</b>	\$352.42	\$32.96	\$0.00	\$131.00	<b>\$188.46</b>

State Contribution is funded by Act 1842 of 2005 and Act 1421 of 2009 - Plan Contribution is funded by PSE Trust Fund as Claims Reserve Allocation

## So what if I have a question about a claim?

If a claim for benefits is denied either in whole or in part, your Benefit Coordinator (Health Advantage or Qualchoice) can perform a re-review of the claim and will provide you with a notice explaining the reason(s) for the denial. For medical claims, this notice will be in the form of an Explanation of Benefits or Personal Health Statement. If you have questions about how a claim was paid or why it was denied, you may contact Employee Benefits Division at 1-877-815-1017 (When the recording answers, press one to connect to a Member Services Representative). You will receive explanation as to why the claim was paid or denied. If you are unsatisfied with the results, you may file a written appeal using the process listed in the "Complaints and Appeals" section of the Summary Plan Description, which can be found at [www.arbenefits.org](http://www.arbenefits.org).

## Wellness Benefits

Below is a list of many of the wellness benefits offered by the ARBenefits Plan:

- Annual routine gynecological visit
- Annual physical
- Colorectal cancer screening
- Prostate screening
- Screening mammogram
- Immunizations
- Well baby care visits
- Smoking cessation
- ARBenefitsPlus
- Diabetic supplies

Some restrictions may apply. For a comprehensive listing of coverage, please consult your Summary Plan Description at [www.arbenefits.org](http://www.arbenefits.org)

# Public School Retiree (Non-Medicare) 2012 Rates

## Important Plan Change

Retirees who are not yet Medicare eligible now have the option to choose one of the three different plan options for their health coverage. The Gold, Silver and Bronze Plans are all available and maintain the same plan design as the active plan. Changes must be made during the October Open Enrollment Period for a Jan. 1, 2012 effective date.

Retirees who have questions may contact EBD at 1-877-815-1017. When the recording answers, "Just Press One" to speak to a Member Services Representative. You may also visit the Public School Retiree section at [www.arbenefits.org](http://www.arbenefits.org) for more information.

	Base Monthly Premium	Plan Contribution	Total Monthly Retiree Cost
<b>Retiree Only</b>			
Gold	\$457.42	\$0.00	<b>\$457.42</b>
Silver	\$401.62	\$0.00	<b>\$401.62</b>
Bronze	\$148.90	\$0.00	<b>\$148.90</b>
<b>Retiree &amp; Spouse</b>			
Gold	\$1,202.68	\$50.67	<b>\$1,152.01</b>
Silver	\$1,097.40	\$0.00	<b>\$1,097.40</b>
Bronze	\$349.34	\$0.00	<b>\$349.34</b>
<b>Retiree &amp; Child(ren)</b>			
Gold	\$779.48	\$11.20	<b>\$768.28</b>
Silver	\$712.64	\$0.00	<b>\$712.64</b>
Bronze	\$238.70	\$0.00	<b>\$238.70</b>
<b>Retiree &amp; Family</b>			
Gold	\$1,211.24	\$51.42	<b>\$1,159.82</b>
Silver	\$1,105.20	\$0.00	<b>\$1,105.20</b>
Bronze	\$352.42	\$0.00	<b>\$352.42</b>
<b>Retiree &amp; Medicare Primary Spouse</b>			
Gold	\$596.82	\$0.00	<b>\$596.82</b>
Silver	---	---	---
Bronze	---	---	---
<b>Retiree &amp; Medicare Primary Spouse &amp; Child(ren)</b>			
Gold	\$924.22	\$16.51	<b>\$907.71</b>
Silver	---	---	---
Bronze	---	---	---

Plan Contribution is funded by PSE Trust Fund as Claims Reserve Allocation

# Public School Retiree (Medicare) 2012 Rates

	Base Monthly Premium	Subsidy	Plan Contribution	Total Monthly Employee Cost
<b>Retiree Only</b>	\$144.75	\$96.91	\$6.40	<b>\$41.44</b>
<b>Retiree &amp; Non-Medicare Spouse</b>	\$568.37	\$0.00	\$0.00	<b>\$568.37</b>
<b>Retiree &amp; Child(ren)</b>	\$486.85	\$61.61	\$4.07	<b>\$421.17</b>
<b>Retiree &amp; Non-Medicare Spouse &amp; Child(ren)</b>	\$918.61	\$38.64	\$2.55	<b>\$877.42</b>
<b>Retiree &amp; Medicare Primary Spouse</b>	\$289.49	\$111.54	\$7.36	<b>\$170.59</b>
<b>Retiree &amp; Medicare Primary Spouse &amp; Child(ren)</b>	\$631.60	\$76.25	\$5.03	<b>\$550.32</b>

Subsidy is funded by Act 1421 of 2009 - Plan Contribution is funded by PSE Trust Fund as Claims Reserve Allocation

**The Buzz**  
**Employee Benefits Division**  
Arkansas Department of  
Finance and Administration  
P.O. Box 15610  
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We welcome your benefit questions and comments. Call Employee Benefits Division (EBD) during business hours at 501-682-9656 or toll-free at 1-877-815-1017. You may visit our website at [www.arbenefits.org](http://www.arbenefits.org) or send an e-mail to [AskEBD@dfa.arkansas.gov](mailto:AskEBD@dfa.arkansas.gov)



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## "ARBenefitsPlus" from page 2...

Member Services line at 1-877-815-1017 (remember to "Just Press One" to be directly connected to a Member Services Representative). When you tell the Member Services Representative you are interested in the ARBenefitsPlus program, they will ask you a couple of simple questions and ask if you are available to speak to a nurse. If you cannot at that point, they will collect your information and a nurse will call you back to get you set up.

Once enrolled and connected to your Nurse Coach, you will have the opportunity to work closely with them toward your goals. Although many of the conditions are not necessarily "curable", all of them are manageable. The ultimate goal is to provide you with the knowledge, confidence and direction necessary to control your condition and bring a higher level of comfort and wellness to your life. This is your opportunity to get that confidential, one-on-one support you desire, all at no charge to you and at your own pace.

This Plan Document serves as your Annual Enrollment Guide for the 2012 plan year. The primary plan document is the Summary Plan Description, which is available at [www.arbenefits.org](http://www.arbenefits.org). Please consult the SPD before utilizing the Plan to ensure coverage of benefits

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The Buzz is an official publication of the Arkansas Department of Finance & Administration - Employee Benefits Division, for the members of the ARBenefits Plan. It shall stand as a Summary of Material Modification (SMM) to the Summary Plan Description (SPD) governing the Arkansas State and Public School Health Plan (ARBenefits).