

PEEHIP Supplemental Coverage Plan

PEEHIP members may opt to elect the PEEHIP Supplemental Plan as their Hospital Medical coverage in lieu of the PEEHIP Hospital Medical Plan. The PEEHIP Supplemental Plan will provide secondary benefits to the member's primary plan provided by another employer. Only active and non-Medicare retiree members and dependents are eligible for the PEEHIP Supplemental Plan. There is no premium required for this plan, and the plan covers most out-of-pocket expenses not covered by the primary plan.

The PEEHIP Supplemental Plan imposes the same exclusions and limitations that are in the PEEHIP primary Hospital Medical Plan. Additionally, the PEEHIP Supplemental Plan does not pick up services excluded by the other group plan. Blue Cross and Blue Shield of Alabama is the administrator for the PEEHIP Supplemental Plan. The PEEHIP Supplemental Plan cannot be used as a supplement to Medicare, the PEEHIP Hospital Medical Plan, or the State or Local Governmental Plans administered by the State Employees' Insurance Board (SEIB). In addition, active members who have TriCare or Champus as their primary coverage cannot enroll in the PEEHIP Supplemental Plan.

The supplemental Hospital Medical Plan:

- ◆ Provides secondary coverage to the members and covered dependent(s) when primary coverage is provided by another employer.
- ◆ Only active and non-Medicare-eligible retiree members and dependents are eligible to enroll in the Supplemental Plan.
- ◆ There is no premium cost for the plan when the member uses the state allocation for the Supplemental Plan.
- ◆ The Supplemental Plan covers most deductibles, copayments, and coinsurance not covered by the primary plan.
- ◆ Participants may elect individual or family coverage.
- ◆ PEEHIP Hospital Medical Plan exclusions and limitations will continue to be imposed such as exclusions for dental coverage, cosmetic surgery, limitation on infertility treatment, etc.
- ◆ The Supplemental Plan will not cover or pick up any cost of services excluded by the primary plan because the plan is strictly a supplemental plan.
- ◆ The Supplemental Plan cannot be used as a supplement to Medicare, the PEEHIP Hospital Medical Plan, or the State or Local Governmental plans administered by the State Employees' Insurance Board (SEIB).
- ◆ The Supplemental Plan only supplements your primary insurance plan by covering the copay, deductible and/or coinsurance of your primary insurance plan or the preferred or participating allowance, whichever is less.
- ◆ To be eligible for reimbursement under the PEEHIP Supplemental Coverage Plan, the primary insurance plan must have either 1) applied the eligible charges to the deductible, or 2) made primary payment for the services rendered.
- ◆ For inpatient mental health and substance abuse services, there is a maximum allowance of 30 total days per member per plan year.
- ◆ For outpatient mental health and substance abuse services, there is a maximum allowance of 10 visits per member per plan year.
- ◆ The PEEHIP Supplemental Coverage Plan will not pay for amounts in excess of the allowed amount for services rendered by a non-preferred provider, amounts in excess of the maximums provided under the primary insurance plan, any services denied by the primary insurance plan, or any penalties or sanctions imposed by the primary insurance plan.
- ◆ PEEHIP members cannot be enrolled in the PEEHIP Hospital Medical Plan and the PEEHIP Supplemental Plan.

- ◆ Active members who have TriCare or Champus as their primary insurance coverage cannot enroll in the PEEHIP Supplemental Plan.