



## Open Enrollment Edition - Part II

### Remember the Open Enrollment Deadlines

**July 1 - September 10** - Online enrollment

**July 1 - August 31** - Paper forms enrollment

(Paper forms postmarked after August 31 will not be accepted)

**July 1 - September 30** - Flexible Spending Accounts online and paper enrollment

**Important:** You do not need to do anything during Open Enrollment if you are satisfied with your current coverage. If you take no action, you and your eligible dependents will remain on your current plan(s).

**Exceptions:** If you want to renew your **Flexible Spending Accounts** or **Premium Assistance Program (Federal Poverty Level Discount)**, you must re-enroll each year as these two programs do not automatically renew. Enrollment in Flex can be done online, but enrollment in the Premium Assistance Program must be done by submitting a completed paper **FEDERAL POVERTY LEVEL ASSISTANCE APPLICATION (FPL)** to PEEHIP along with the required supporting documents.

The preferred method of enrolling or making changes in coverage is online through Member Online Services (MOS). To enroll or make coverage changes via MOS:

1. Go to [www.rsa-al.gov](http://www.rsa-al.gov) and click MOS Login at the top right of the web page.
  - ◆ **New User:** Click Register Now to create your own User ID and Password.
  - ◆ **Forgot User ID and/or Password:** Click Reset Account and provide the requested information.
2. Once you successfully log in, click the PEEHIP menu link “Enroll in or Change PEEHIP Coverages.”
3. Click the Open Enrollment option, then click Continue and follow the on-screen prompts until you receive your Confirmation page.

For those members who do not have access to a computer or the Internet and wish to make Open Enrollment changes, a paper form can be provided by mail upon request by calling Member Services toll-free at 877.517.0020.

Visit the PEEHIP Open Enrollment web page at [www.rsa-al.gov/index.php/members/peehip/open-enrollment/](http://www.rsa-al.gov/index.php/members/peehip/open-enrollment/) for more information about online enrollment and Open Enrollment. ●

# Team Up for Health

## Wellness Program Deadline is August 31, 2016



Last year, PEEHIP launched a comprehensive health and wellness program called *Team Up for Health* with activities, services, and information all specifically designed to meet the needs of the PEEHIP membership by addressing high levels of health risk and specific chronic diseases shown to be affecting the PEEHIP membership. By reducing the overall level of health risk and offering more ways to better treat chronic conditions, the PEEHIP Wellness Program also significantly reduces the overall cost of healthcare spending.

If you have not taken advantage of all the Wellness Program has to offer, PEEHIP urges you to call our Wellness Program partner, ActiveHealth, or visit their website at [www.MyActiveHealth.com/PEEHIP](http://www.MyActiveHealth.com/PEEHIP).

As part of incentivizing members to become engaged in the Wellness Program, PEEHIP offers a waiver of the \$50 per month wellness premium that was established in October 2015. This means that by completing required activities in the program, PEEHIP members avoid having to pay the extra \$50 per month wellness premium. Last year, the PEEHIP membership exceeded comparable plan statistical expectations by reach an amazing 94% overall complete by the August 31 deadline.

Because the required activities have to be completed each year, **do not let the upcoming deadline of August 31, 2016, pass you by!** PEEHIP does not want any member to incur the \$50 monthly wellness premium, and there is still time to take action and avoid this extra charge.

Visit [www.MyActiveHealth.com/PEEHIP](http://www.MyActiveHealth.com/PEEHIP) today and click "My Required Activities" to make sure you have reached 100% Complete so that you earn your wellness premium waiver. You may

also call ActiveHealth at 855.294.6580 or visit Member Online Services (MOS) at <https://mso.rsa-al.gov> to confirm your completion.

This year, let's continue to be a national example of success in our Wellness Program by not only completing all the required activities, but by becoming engaged in all the Program has to offer and enjoying the benefits of a healthier and more capable life.

The PEEHIP Wellness Program required activities below must be completed each year for all PEEHIP active and retired members (and their covered spouses) who are covered on the PEEHIP Blue Cross Blue Shield Hospital Medical (group #14000) plan. **Members who are not covered under this plan or who are Medicare-eligible and covered on a retiree contract as a subscriber or dependent are not required to participate.**

- ◆ Obtain a Wellness Screening either from your primary care physician or from an ADPH nurse. If you decide to use your personal physician, the PEEHIP Healthcare Provider screening form is available at [www.rsa-al.gov/uploads/files/PEEHIP\\_HCP\\_screening\\_form.pdf](http://www.rsa-al.gov/uploads/files/PEEHIP_HCP_screening_form.pdf). Your physician must complete this form and either fax or mail the form to ADPH.
- ◆ Complete the Health Questionnaire (HQ) at [www.MyActiveHealth.com/PEEHIP](http://www.MyActiveHealth.com/PEEHIP). The HQ can also be done by phone at 855.294.6580.
- ◆ Complete Health Coaching either online at [www.MyActiveHealth.com/PEEHIP](http://www.MyActiveHealth.com/PEEHIP) or by phone at 855.294.6580.
- ◇ Some members were invited to an enhanced one-on-one Health Coaching. If this applies to you, a total of 4 calls with an ActiveHealth nurse must be completed by August 31, 2016. ●

## July 2016 PEEHIP Advisor Correction

The July 2016 edition of the *PEEHIP Advisor* included a separate insert for information relating to the new UnitedHealthcare Group Medicare Advantage (PPO) plan for PEEHIP Medicare-eligible retirees and Medicare-eligible dependents of PEEHIP retirees. If you are seeking additional information regarding this new exciting benefit, see the July 2016 *PEEHIP Advisor* or visit the UnitedHealthcare website at [www.UHCRetiree.com/PEEHIP](http://www.UHCRetiree.com/PEEHIP).

As part of that information, a typographical error was made in the Maintenance Drug column headers of the chart displaying the “day supply” range incorrectly. The correct ranges are 31-60 days supply and 61-90 days supply. ●

### Flexible Spending Accounts

A Flexible Spending Account plan is a great way for employees to save money and budget medical and daycare expenses with tax-free dollars. Through this program, active employees can save anywhere from \$15 - \$35 on taxes for every \$100 spent on eligible medical or daycare expenses.

Schedule an onsite presentation to help your employees learn more about the program. Sheila Lafrance, PEEHIP Flex Benefits Manager, is available to come to your school, facility, New Employee Orientations, In-Service meetings, and Benefit Fairs to give a 15 - 20 minute presentation to your group and answer questions. If your system is interested in a presentation please email us at [PEEHIP.FlexInfo@rsa-al.gov](mailto:PEEHIP.FlexInfo@rsa-al.gov) to arrange a date and time.

## Notice to Enrollees in a Self-Funded Non-Federal Governmental Group Health Plan

Under a Federal law known as the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law 104-191, as amended, group health plans must generally comply with the requirement listed below.

The law also permits state and local governmental employers that sponsor health plans to elect to exempt a plan from the requirements for any part of the plan that is “self-funded” by the employer, rather than provided through a health insurance policy. The Public Education Employees’ Health Insurance Board has elected to exempt the PEEHIP from the following requirement:

- ◆ Protections against having benefits for mental health and substance use disorders be subject to more restrictions than apply to medical and surgical benefits covered by the plan.

The exemption from this federal requirement will be in effect for the plan year beginning October 1, 2005. The election will be renewed every subsequent plan year.

For more information regarding this notice, please contact PEEHIP. ●



## View Your Current PEEHIP Coverage(s) Online

<https://mso.rsa-al.gov>

Member Online Services (MOS) allows you to view the PEEHIP coverage(s) in which you and your dependents are enrolled. This online service is available year round.

## Has your email, phone number, or mailing address changed?

It is very important that PEEHIP has your current contact information on file, including your email and mailing address and phone number. This information is needed to notify you in a timely manner of important information and deadlines that relate to your PEEHIP coverage.

To update your contact information, log in to Member Online Services (MOS) at <https://mso.rsa-al.gov> and click the “View/Change Contact Information” link to provide PEEHIP with your current and correct contact information. You can also change this information by completing the ADDRESS CHANGE NOTIFICATION form on our website and mailing it to PEEHIP.

If you do not have access to a computer or to the Internet, you can notify PEEHIP of your updated contact information in writing by mail. If you choose to use mail, please include your full name, old contact information that you are updating, new contact information, your SSN or PID number, effective date of the update, and **your signature**.

As a reminder, it is also very important to file a change of address notification with the U.S. Post Office so that your mail sent to your old address will be rerouted and delivered to your new address. ●

## Newborns’ and Mothers’ Health Protection Act

Under the provisions of The Women’s and Newborns’ Act, group health plans and health insurance issuers generally may not, under federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child to less than 48 hours following a vaginal delivery, or less than 96 hours following a Caesarean section.

Federal law generally does not prohibit the mother’s or newborn’s attending provider, after consulting with the mother, from discharging the mother or her newborn earlier than 48 hours (or 96 hours as applicable). In any case, plans and issuers may not, under federal law, require that a provider obtain authorization from the plan or the issuer for prescribing a length of stay not in excess of 48 hours (or 96 hours). ●

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## Women’s Health and Cancer Rights Act of 1988

PEEHIP, as required by the Women’s Health and Cancer Rights Act of 1998, provides benefits for mastectomy-related services including all stages of reconstruction and surgery to achieve symmetry between breasts, prostheses, and complications resulting from a mastectomy, including lymphedema. Call Blue Cross Blue Shield of Alabama at 800.327.3994 for more information. ●