



Are You Ready for the new UnitedHealthcare® Group Medicare Advantage (PPO) Plan in 2017?

As 2016 is coming to a close, it is a good time for Medicare-eligible PEEHIP members covered on a retiree contract to make a list and check it twice to make sure you are ready for your new plan coverage in 2017. Here is a quick check list of things to know and to do before January 1, 2017, arrives.

- ✓ **Remember to keep your Medicare Part A and Part B coverage.** You must continue to be enrolled in both Medicare Part A and Part B in order to be eligible for this plan. If you do not have both Part A and Part B, you will not be eligible for the new Medicare Advantage plan and you will not be enrolled in the plan. This means that you will not have hospital, medical or prescription drug coverage with PEEHIP. You must also continue to pay your monthly Part B premium to Social Security.
- ✓ **If you currently have a P.O. Box, let PEEHIP know your physical street address.** As we have reported before, Medicare requires that we provide a physical street address in order to process your enrollment. If you received a letter from PEEHIP requesting this information and you have not already done so, please respond as soon as possible to that letter by mailing your physical address to PEEHIP. This physical address is only needed for enrollment. You can continue to keep a P.O. Box as your preferred mailing address.
- ✓ **Look for your new ID card and Welcome Packet.** These will be mailed separately and should arrive in early December. Remember to start using your UnitedHealthcare ID card on January 1, 2017, for all your medical and prescription drug services. You will no longer need to use your red, white, and blue Medicare card after December 31, 2016, but be sure to put it somewhere safe. ●

“Hello, this is UnitedHealthcare calling...”

In January, Medicare-eligible PEEHIP members covered on a retiree contract should be prepared for two phone calls from UnitedHealthcare.

- One call will be a **Welcome call** from UnitedHealthcare. The purpose of this call is to welcome you to the UnitedHealthcare[®] Medicare Advantage plan, provide a little more information about your plan and to answer any questions you may have. This is a great opportunity for you to ask questions about your medical or prescription drug coverage.
- The purpose of the second call will be to offer you the opportunity to take a **health assessment survey**. Medicare requires that UnitedHealthcare offer this survey to all new plan members within the first 90 days of their new plan coverage. However, it is not a requirement that you take the survey. Your responses on the survey can help UnitedHealthcare connect you to healthcare programs and services that may be beneficial for you. The survey is easy to complete over the phone. If you do not take the survey over the phone, UnitedHealthcare will mail you a paper survey that you can complete and return to UnitedHealthcare. Please be assured that your survey responses are completely confidential (never shared with PEEHIP) and will not impact your healthcare coverage. ●

New ID Cards Will Be Delivered in December

If you are enrolled in PEEHIP coverage, you will be mailed a new ID card this month with a new contract number shown on the front of that card. The card will also show either a new effective date or issue date which is relative to the newly assigned contract number.

Receiving this card is not indicative of any change to your coverage, except for Medicare-eligible members, whose new UnitedHealthcare[®] Group Medicare Advantage (PPO) card should be used for medical and prescription services beginning January 1, 2017. New cards will come from the following list of PEEHIP's insurance administrators:

- Blue Cross Blue Shield Hospital Medical plan (Group 14000)
- MedImpact Prescription Drug ID card (if enrolled in Group 14000 Hospital Medical plan above)
- Blue Cross Blue Shield Supplemental Medical plan (Group 61000)
- Southland Benefit Solutions optional plans: Cancer, Dental, Indemnity, and Vision
- UnitedHealthcare[®] Group Medicare Advantage (PPO) plan

The mailing of these cards is an added security benefit to PEEHIP members by printing newly created unique contract numbers on the front of each card. The new contract numbers are independent to each insurance administrator and do not get transmitted to PEEHIP nor do they link to any data maintained by PEEHIP. Therefore, PEEHIP is pleased to offer this security enhancement to better safeguard our members' protected information.

Effective January 1, 2017, please destroy your current insurance ID card and begin showing your new card to your provider of healthcare service to ensure that your claims process correctly. If you have questions about your new card, please call the toll-free number shown on the back and a customer service representative will be happy to assist you.

For more information concerning the new PEEHIP ID cards, please see the PEEHIP November 2016 Advisor newsletter which can be found on our website at www.rsa-al.gov/index.php/members/peehip/pubs-forms/peehip-newsletters/. ●

2017 Scale Back Alabama Schools



HAVE FUN WHILE GETTING HEALTHY

It is time for the 2017 Scale Back Alabama program so mark your calendar now. Join us to kick off the eleventh year of Scale Back Alabama on **January 11, 2017**. Scale Back Alabama is a free statewide campaign that encourages adults in Alabama to get healthier by losing weight and being more active.

Attention Schools!

The Scale Back Alabama School program is an additional component of Scale Back Alabama which gives school personnel the opportunity to be healthy role models for their students. Also, as a result of their participation, each school will be entered into a drawing to win nutrition and physical activity oriented prizes.

Becoming a Scale Back Alabama School is easy:

- Go to www.scalebackalabama.com for instructions on signing up for Scale Back Alabama. Your school will need a coordinator to get started. On the website you will find a video training for coordinators that is available on-demand in the Coordinators section.
- All schools (K-12) that sign up as a weigh-in site for Scale Back Alabama will **automatically** be entered in the Scale Back Alabama School program. Students are not allowed to participate and weight loss for students is not being encouraged.
- If your school does not have a coordinator or does not wish to be a weigh-in site, check the Scale Back Alabama website for a public site in your area so you do not miss out on the fun! Be sure to let us know your school teams are using a public site so it is still eligible for prizes.
- Scale Back Alabama Schools receive special recognition and are entered into a school drawing for prizes that promote good nutrition and physical activity habits for the students. These prizes are in addition to the team and individual drawings for cash prizes.

It is a win-win for schools. School personnel work to achieve a healthier lifestyle while their students cheer them on and learn the importance of healthy habits.

The App is Back!

The Scale Back Alabama Phone App is back for the second year! Make sure to update the app to get the most current information and health tips. The app allows you to log calories, track exercise, and find the closest weigh-in site near you!

Registration and More

- Teams of 2 can register at www.scalebackalabama.com or in person at a weigh-in site.
- Schools that decide to be a weigh-in site (public or private) must register at least 3 teams of 2.
- Receive health tips and family centered information for healthier lives.

Important Program Dates

- Statewide program kickoff: January 11
- Initial weigh-in & registrations week: January 11-18
- Final weigh-in week: March 15-22
- Final event & announcement of winners: April 5

For more information about Scale Back Alabama Schools, please contact Molly Killman at 334-206-5646 or molly.killman@adph.state.al.us.

Scale Back Alabama is sponsored by the Alabama Hospital Association and the Alabama Department of Public Health in partnership with Blue Cross Blue Shield of Alabama. ●

Flexible Spending Account (FSA) Debit Card

PEEHIP's Flexible Spending Account plans are now being administered by HealthEquity through a partnership with Blue Cross and Blue Shield. If you signed up for a Flexible Spending Account during Open Enrollment, you should have already received a Welcome letter from HealthEquity. Please be sure to register your online account at www.healthequity.com/PEEHIP for easy management of your FSA account. You can also download the HealthEquity app onto your mobile device.

As an added enhancement to PEEHIP's Flex plan this year, all members enrolling in a PEEHIP Health FSA will receive a Flex debit card to use at the pharmacy. **This debit card can only be used for prescription medication** at IAS certified pharmacies and will replace the automatic reimbursement feature for prescription copays. IAS is a technology used by many pharmacies to verify eligible FSA expenses, eliminating the need to provide additional documentation for substantiation. If you forget to use your Flex debit card at the pharmacy or your pharmacy is not IAS certified you can submit a reimbursement request for your out-of-pocket expense. Remember, this card cannot be used at your doctor's office. If you have not received your Flex debit card, please contact HealthEquity's customer service at 877.288.0719.

Reminder about prior year expenses: If you were enrolled in the PEEHIP FSA during the prior plan year, the deadline to request a reimbursement for expenses incurred prior to October 1, 2016, is January 15, 2017. The request should be submitted directly to Blue Cross and Blue Shield Preferred Blue Accounts. ●

Access to Obstetrical and Gynecological (OBGYN) Care Notice

You do not need prior authorization from the Plan or from any other person (including a Primary Care Provider (PCP) in order to obtain access to obstetrical or gynecological care from a health care professional in the Blue Cross and Blue Shield of Alabama network who specializes in obstetrics or gynecology. The health care professional, however, may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a pre-approved treatment plan, or procedures for making referrals.

For a list of health care professionals who specialize in obstetrics or gynecology, contact the telephone number on the back of your Identification Card or refer to the Blue Cross and Blue Shield of Alabama website www.AlabamaBlue.com. ●

Choice of Primary Care Physician Notice

The Plan generally allows the designation of a Primary Care Provider (PCP). You have the right to designate any PCP who participates in the Blue Cross and Blue Shield of Alabama network and who is available to accept you or your family members. For information on how to select a PCP, and for a list of PCPs, contact the telephone number on the back of your Identification Card or refer to the Blue Cross and Blue Shield of Alabama website www.AlabamaBlue.com. For children, you may designate a pediatrician as the PCP. ●