



Team Up for Health Wellness Program Starts a New Year

The new year of the PEEHIP *Team Up for Health* Wellness Program is officially underway, and that means it is time once again to work toward improving your health by completing your required activities! The deadline to complete your required activities is **August 31, 2016**, but why not go ahead and get started by taking advantage of all the health and wellness benefits that PEEHIP offers to you as part of the Wellness Program. The required activities for the new year are shown below. These activities are required for members and spouses enrolled in the PEEHIP Hospital Medical group 14000 plan, if not Medicare-eligible and covered on a retiree contract.

- ◆ Obtain a wellness screening between 8/1/2015 and 8/31/2016
- ◆ Complete the Health Questionnaire (HQ) between 10/1/2015 and 8/31/2016
- ◆ Participate in Health Coaching between 10/1/2015 and 8/31/2016 **only** if you receive a health coaching invitation letter from ActiveHealth dated October 2015. To confirm your health coaching requirement, visit www.MyActiveHealth.com/PEEHIP or call 855.294.6580.

Health Coaching is offered either in the form of Wellness Coaching, which focuses on healthy lifestyle improvements, or Disease Management, which focuses on managing chronic diseases such as congestive heart failure, diabetes, asthma, chronic obstructive pulmonary disease, or coronary artery disease. To complete your Health Coaching requirement, at least one of the following must be done by August 31, 2016:

- ◆ Earn **100 heart beats** of online coaching credit at www.MyActiveHealth.com/PEEHIP
- ◆ Complete at least **one** phone call with an ActiveHealth nurse or wellness coach by calling 855.294.6580
- ◆ Attend at least **one** on-site Health Coaching Seminar offered by an ActiveHealth wellness coach

For those PEEHIP members who could benefit from a higher level of care from an ActiveHealth clinical professional, the Health Coaching requirement will be to complete at least **4 telephonic coaching calls** before August 31, 2016. These members will be notified by mail of their specific requirement, and their nurse coach will work with them to develop the call schedule that is most convenient and helpful to them. ●

One Screening Available per Calendar Year from Your Primary Physician

Wellness screenings obtained at your **primary care physician** are normally classified as a routine office visit, which are only covered at no copay once per calendar year under your PEEHIP Blue Cross Blue Shield (BCBS) benefits. That means if you already had a routine office visit since January 1, 2015, you will not be eligible for another routine office visit under your BCBS medical benefits until 2016. **If you have a second routine office visit in one calendar year, the claim will reject and you will be responsible for the full cost.**

For specific benefit questions, contact BCBS Customer Service at 800.327.3994. Wellness screenings are also available free of charge once per year starting every August 1st through the Alabama Department of Public Health (ADPH) at your worksite or at local county health departments. Visit www.adph.org/worksitewellness to check when screenings will be offered in your area. ●



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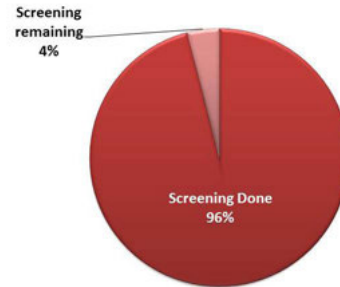
Final Wellness Program Completion Statistics

Shortly over a year ago, PEEHIP launched a comprehensive state-of-the-art wellness program with sophisticated healthcare management tools and clinical support to serve the PEEHIP membership by helping them achieve better health and reduce the rapidly escalating cost of healthcare. At that point, nearly 150,000 PEEHIP members had multiple required activities to complete in order to earn a \$50 monthly wellness premium waiver. Now that the first year has officially ended and a new Wellness Program year has begun, PEEHIP is pleased to announce the completion statistics for the first year of the program. Please see below for the overwhelmingly positive engagement statistics.

Top 10 PEEHIP Employers - Screening Completion

Employer	Required Membership Screening %
Gardendale City BOE	100%
Piedmont City Schools	99%
Dauphin Island Sea Lab	99%
Geneva City BOE	98%
Brewton City BOE	98%
Boaz City BOE	98%
Midfield City BOE	98%
JF Ingram State Technical College	98%
Alabama Education Association	98%
AL Southern Community College	97%

Screening Completion

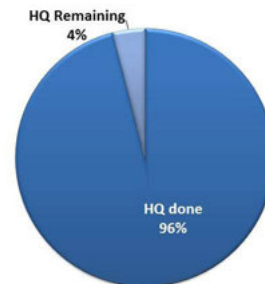


143,302 wellness screenings obtained

Top 10 PEEHIP Employers - HQ Completion

Employer	Required Membership HQ %
Gardendale City BOE	100%
Geneva City BOE	99%
AL Industrial Development Training	99%
JF Ingram State Technical College	99%
Marion Military Institute	99%
Dauphin Island Sea Lab	99%
Brewton City BOE	98%
AL Southern Community College	98%
Alabama Education Association	98%
Russellville City BOE	97%

HQ Completion



143,230 health questionnaires completed

Top 10 PEEHIP Employers - Coaching Completion

Employer	Required Membership Screening %
Gardendale City BOE	100%
Geneva City BOE	100%
JF Ingram State Technical College	100%
Marion Military Institute	100%
Brewton City BOE	100%
AL Southern Community College	100%
Alabama Education Association	100%
Enterprise Ozark Comm. College	100%
Henry County BOE	100%
Snead State Community College	100%

Coaching Completion

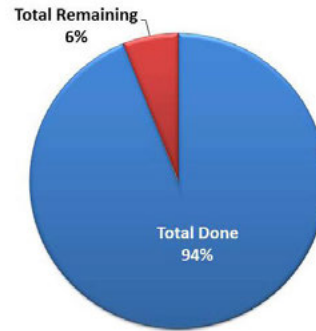


51,864 health coaching requirements met

Top 10 PEEHIP Employers - Overall Completion

Employer	Required Membership HQ %
Gardendale City BOE	100%
Geneva City BOE	98%
JF Ingram State Technical College	98%
Brewton City BOE	97%
AL Southern Community College	97%
Dauphin Island Sea Lab	97%
Marion Military Institute	97%
Russellville City BOE	96%
Alabama Education Association	96%
Wallace Community College	96%

Total Completion



138,820 overall completed

120 school systems at 90% overall completion or higher! ●

New Medicare Part D Prescriber Enrollment Verification in 2016

Beginning December 1, 2015, Medicare will require **all** prescribers of Part D drugs to enroll in Medicare or have a valid record of opting out. This includes physicians, pharmacists and dentists. Medicare will begin enforcing this requirement on June 1, 2016. You are encouraged to check with your prescriber to ensure compliance. You may also look on Medicare’s web site: www.medicare.gov/physiciancompare. Physician Compare includes only physicians and other health care professionals who are currently enrolled in Medicare.

Q. What does that mean for me?

A. Effective June 1, 2016, your prescriber of Part D drugs must be enrolled with Medicare or have a valid opt-out record on file or your Part D claim will deny. Medicare will allow a provisional three-month fill from prescribers who don’t meet the requirements. All prescribers should enroll before January 1, 2016, to allow for application processing and to ensure patients can get their prescriptions.

Q. What is being done to make sure my claims will approve?

A. MedImpact, PEEHIP’s Pharmacy Benefit Manager, is developing a communication plan for all prescribers who have not enrolled with Medicare or do not have a valid opt-out affidavit on file. Beginning in October, MedImpact will reach out to these at-risk prescribers and other professionals.

Q. How will I know if my prescriber is impacted?

A. Beginning in April 2016, MedImpact will be contacting enrollees who have claims from a Part D prescriber who is not currently enrolled with Medicare or does not have a valid opt-out affidavit on file.

You can also check the Medicare website to see if your prescriber has enrolled: www.medicare.gov/physiciancompare.

Q. What if my prescriber or other prescribing health care professional has not enrolled?

A. Talk with your physician to encourage them to enroll or submit a valid opt-out affidavit by the deadline.

MedImpact is doing everything it can to make this new Medicare requirement as seamless as possible. For more information on the prescriber validation enrollment requirements, visit: www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/Prescriber-Enrollment-Information.html.

Q. Where did this requirement come from?

A. Regulation CMS-4159-F was authorized by section 6405(c) of the Affordable Care Act and gives the Centers for Medicare & Medicaid Services (CMS) the authority to require prescriber enrollment or opt-out. The goal is to help combat fraud and abuse occurring in the Medicare program. ●

Success Stories of the *Team Up for Health* Wellness Program

Many wellness programs take the strategy of slowly adding components piece-by-piece over time so that there is a gradual implementation of health and wellness tools to serve the members. When PEEHIP decided to launch the *Team Up for Health* Wellness Program, we chose to offer a comprehensive program in the first year, which offered substantial and worthwhile benefits to members and covered spouses from the very first day the program launched.

Over the course of the year, PEEHIP received many positive and encouraging success stories. The wellness screenings uncovered many urgent life-threatening situations, such as members with triglyceride levels well over 1,000% higher than the safe amount. Other members were identified with diabetes and extremely high glucose, and there were even findings of early stage cancers. The common factor between all of these stories is that the members had no idea of their severe health risk, and have now made changes and sought treatment which has greatly reduced their risk of a traumatic event, and quite possibly saved their lives.

PEEHIP has also received a large amount of positive feedback from the different forms of Health Coaching including telephonic, online, and in-person through an on-site session. Please see below for some quotes from PEEHIP members regarding the coaching services.

- ◆ “I’ve enjoyed this presentation. I also enjoy the video topics on the website. I have learned so much just by visiting the website www.MyActiveHealth.com/PEEHIP.”
- ◆ “This was very helpful. I am a type 2 diabetic and I wish I had this info given to me years ago!”
- ◆ “It made me want to focus more on changing some habits for the long-haul.”
- ◆ “Very informational. Always good to reinforce those things we know we should be doing.”
- ◆ “This is an excellent program!” ●

Drug Formulary Changes

Indication: Acne

The drugs below will be closed effective October 1, 2015, by excluding high-cost brands and high-cost generics in the acne therapeutic class to drive utilization to the lower cost therapeutic generic alternative drugs. (These changes do not apply to the Medicare GenerationRx Program or to the VIVA Health Plan)

Preferred Drugs

tretinoin; adapalene; clindamycin 1% / benzoyl peroxide 5%; clindamycin 1.2% / benzoyl peroxide 5%; erythromycin 3%/benzoyl peroxide 5%; clindamycin; erythromycin; isotretinoin; Tetracycline; doxycycline monohydrate 50mg capsule and 75mg tablet, 100mg capsule and 150mg tablet; minocycline immediate release 50mg, 75mg, 100 mg capsule

Excluded Drugs

Retin A; Retin A Micro/Micropump; Atralin; Differin: Fabior; Tazorac; Duac; Neuc; Onexton; Benzamycin; Epiduo; CleocinT; Clindagel; Evoclin; Erygel; Aknemycin; Emgel; Azelex; Absorica; doxycycline monohydrate 100mg tablet; doxycycline hyclate 100mg capsule and tablet/delayed release capsule and tablet; doxycycline hyclate 200mg delayed release tablet; doxycycline monohydrate 150mg capsule; doxycycline hyclate 150mg tablet/delayed release tablet; Avidoxy; Benoxylodoxy; Doryx; Adoxa; minocycline immediate release 50mg, 75mg, 100mg tablet; minocycline extended release

Indication: Pain

The pain patch drugs below are not FDA approved and will be excluded from coverage effective December 1, 2015, under the PEEHIP commercial drug plan and the Medicare GenerationRx Program. (These changes do not apply to the VIVA Health Plan)

Preferred Drugs

Lidocaine patches; Over-the-Counter products are available but not a covered item

Excluded Drugs

Elenzapatch; Lidodextrapine; Reciphexamine; Zeruvia; Synvaxia; Provenza; Qroxin; Neuvaxin; Captracin; Renovo; Sinelee; Mac; Pain Relief (capsaicin/menthol); Lorenza; Velma; Silvera; Solaice; Sinelee; Scar; Pain Relief (lidocaine/menthol); Relyyt; Relyyks; Vexa