



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

Online enrollment via Member Online Services (MOS) is the preferred option because it is the easiest and most efficient method to enroll in or make changes to your coverage. No other enrollment method provides a confirmation page in real time that verifies your enrollment was submitted. MOS also provides a premium calculation for the coverages that you select.

To use MOS:

1. Visit www.rsa-al.gov and click on “MOS Login” at the top of the page. Enter your self-selected User ID and Password. If you need to register or re-register to create a new User ID and Password, click “Need to register?” You will need your PID number to register. Your PID can be found on previous RSA statements or recent correspondence from PEEHIP. If you do not know your PID, please click “Need a PID? (Request PID Letter)” for steps to have your PID mailed to you at your current mailing address on file with the RSA.
 - a. Forgot User ID and/or Password: Click “Forgot User ID & Password?” and follow the steps to reset your account.
2. Click “Enroll in or Change PEEHIP Coverages” on the Home page or from the “PEEHIP Services” drop down menu at the top of the page.
3. Click the “Open Enrollment” option and then follow the on-screen prompts until you receive your confirmation page.

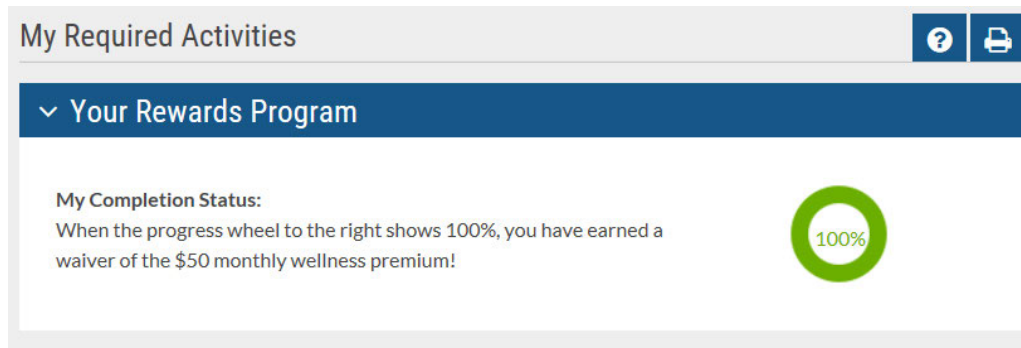
Important: You do not need to do anything during Open Enrollment if you are satisfied with your current coverage. If you take no action, you and your eligible dependents will remain on your current plan(s). **Exceptions:** If you want to renew your Flexible Spending Accounts or Premium Assistance Program 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 Premium Assistance must be done by submitting a completed paper Premium Assistance Application (PAA) to PEEHIP along with the required supporting documents shown on “Step 2” of the application.

Visit the PEEHIP Open Enrollment web page at www.rsa-al.gov/index.php/members/peehip/openenrollment/ for more information about online enrollment and Open Enrollment. **Note:** 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. ●

Final Notice: Wellness Program Deadline is August 31, 2017



Members and spouses covered on PEEHIP's Blue Cross Blue Shield (Group 14000) Hospital Medical Plan: Please visit www.MyActiveHealth.com/PEEHIP today and click on "My Required Activities" to confirm that your (and your spouse, if applicable) progress wheel is 100% as shown below. This serves as your confirmation that you have successfully completed all required activities for the PEEHIP Wellness Program in order to waive the \$50 monthly wellness premium effective October 1, 2017.



If your progress wheel does not show 100%, take action today to complete your required activities! Your Health Questionnaire (HQ) and Health Coaching (if applicable) can both be completed online, and your wellness screening can be obtained at either your primary care physician's office or at one of the locations listed at <https://dph1.adph.state.al.us/PublicCal/> offered by the Alabama Department of Public Health (ADPH). You can also verify your completion status by visiting PEEHIP's Member Online Services website. Go to www.rsa-al.gov then click on MOS Login at the top of the page. Once logged in, click on "Wellness Completion Status" to verify if you have earned your \$50 monthly wellness premium waiver. ●

Did You Know PEEHIP Offers Premium Assistance Discounts?

For active and retired members who qualify based upon their total combined household income and family size, PEEHIP can provide premium assistance discounts off of their PEEHIP hospital medical premium. The income and family size qualification criteria is set each year by the Federal Government, and if members qualify, they may be granted a discount of 10, 20, 30, 40, or 50% off his or her monthly PEEHIP Hospital Medical or VIVA premium. The qualification criteria can be found on PEEHIP's Premium Assistance webpage at www.rsa-al.gov/index.php/members/peehip/premiums/premium-assistance-program/.

If you feel you qualify and would like to apply for this premium assistance, please print and submit the Premium Assistance Application (PAA) from the website listed above along with all required supporting income documentation shown under "Step 2" on the PAA form.

If you are approved for premium assistance, PEEHIP will mail you an approval letter showing your discount effective date as well as the date your discount expires. Please remember that discounts granted from the Premium Assistance Program are only effective until your expiration date shown on your approval letter. **The premium discount does not renew each plan year.** In order to continue a premium discount past your expiration date, a new Premium Assistance Application must be submitted and approved by PEEHIP. **This means that if you are currently receiving a premium assistance discount, you must reapply now during PEEHIP's Open Enrollment (July 1 – August 31, 2017) in order to potentially continue a premium discount into the new plan year beginning October 1.** See below for more about when to re-apply.

- ◆ Premium Assistance Applications received during Open Enrollment: To receive an October 1 effective date of discount, applications must be received and approved during PEEHIP's Open Enrollment. If your discount is approved during Open Enrollment, your discount will be effective for the entire new plan year beginning October 1 through September 30.
- ◆ Premium Assistance Applications received outside of Open Enrollment: If you are granted a discount from an application received and approved outside of Open Enrollment, your discount will not be made effective until the first day of the second month after receipt and approval of your application. Your discount will then remain in effect until the expiration date shown on your approval letter. To continue a discount after your expiration date, you can re-apply during the Open Enrollment period in the same year of your expiration date. ●

Need to send documents to PEEHIP? Save time by uploading them through MOS!

As part of a recent enhancement to PEEHIP's Member Online Services (MOS), you can now electronically upload required documents directly to PEEHIP. This includes eligibility documents for new dependents added to your coverage such as marriage and birth certificates, proof of coverage letters from other insurance providers, or any other document indicated as required when you make your coverage selection. Log in at <https://mso.rsa-al.gov>, access your "Member Correspondence" screen, then click on "Click here to upload a document securely to PEEHIP." Please note that uploaded documents must first be saved as a PDF file.

Medicare-Eligible PEEHIP Members

The information below pertains to PEEHIP members covered under the UnitedHealthcare[®] Group Medicare Advantage (PPO) plan or prospective members who are considering enrolling in this PEEHIP plan. For more information, visit www.UHCRetiree.com/peehip.

Medication Adherence and Why It Matters

Medication adherence means actively taking your medication exactly as directed by your doctor. Some people may not take their medications as directed, some may never fill their prescriptions, and others may skip doses or stop taking their medicine. Understanding your condition and taking your medicine correctly are important steps toward living a longer, healthier life.

Did you know non-adherence may put your health and your budget at risk?

Research has shown higher rates of death for people who stopped taking their medications or didn't take them as advised. A recent study showed that patients with diabetes and high blood pressure saved thousands of dollars each year on other healthcare costs when they took their medications as prescribed.¹

Tips for medication adherence

- ◆ **Write it down.** Make a chart that shows all the medications you take, how much to take, and when to take them.
- ◆ **Get organized.** Keep your medications together in a safe place and use a pillbox to organize your prescription drugs for the week.
- ◆ **Make refills easier.** Ask your pharmacy if you can get a 90-day supply of your medications so you don't have to get refills as often.
- ◆ **Make it a habit.** Take your medication at the same time every day and associate it with the timing of other regular daily activities.²
- ◆ **Set reminders.** Arrange for a friend or family member to call you at the same time every day, or set an alarm clock.
- ◆ **Ask questions.** Talk with your doctor or pharmacist if you have questions or concerns about your medications.²

¹Health Affairs, 2011

²National Institute on Aging, 2013.

This information does not substitute for the medical advice, diagnosis, or treatment of your physician. Always talk to your physician or a qualified health care provider about any questions you may have regarding your medical condition. ●

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. However, 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 secure online service is available year-round.

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). ●

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. ●



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