



Welcome Letters from Sharecare Have Arrived

Attention members and spouses covered by PEEHIP’s Blue Cross Blue Shield Group # 14000 Hospital Medical Plan: Each October, invitations for health coaching are mailed to PEEHIP members selected to participate in health coaching as part of PEEHIP’s wellness program.

Sharecare recently sent a welcome letter to all eligible PEEHIP members providing information about the new *Choose Well, Live Well* wellness program. For those members identified for health coaching, their letter also specifically listed the provider-matched health coaching for that member. If you received a letter inviting you to participate in health coaching, you must complete that activity by August 31, 2020, to count toward earning your \$50 monthly wellness premium waiver for the new plan year beginning October 2020.

Please see your welcome letter for additional information, or visit peehip.sharecare.com to view your personal rewards center listing your specific required activities. You can also call Sharecare at 855.342.6809 to inquire about your required activities and get started on earning your \$50 monthly wellness premium waiver.

Providers of Health Coaching

The new *Choose Well, Live Well* wellness program offers health coaching programs from the following providers: Blue Cross Blue Shield, Pack Health, Naturally Slim, and Sharecare. This means that not all PEEHIP members received the same letter. PEEHIP recognizes that in order to provide the most effective means of help through health coaching, the programs must be accessible

in multiple formats. That is why every member identified for coaching has an option to complete that coaching either over the phone, or online.

Please see below for the different providers of health coaching in the *Choose Well, Live Well* program. Health coaching is a personalized service that offers a higher level of support, so it is an exclusive benefit only to those members who are identified. To ensure members receive the right level of support and the right coaching program for their needs, identified members are matched with one of the providers below, and cannot pick and choose between coaching providers, except for those identified for Naturally Slim or Pack Health.

Blue Cross Blue Shield Disease Management

If your Sharecare welcome letter indicated you were identified for Blue Cross Blue Shield Disease Management, you must complete four phone calls with a Blue Cross nurse by August 31, 2020. Simply call 800.327.3994 and press option 3 to get started. Blue Cross Disease Management will help you find opportunities to improve your well-being by connecting you with a nurse, over the phone, to meet your needs on your schedule.

Naturally Slim OR Pack Health

If your Sharecare welcome letter indicated you were identified for either Naturally Slim OR Pack Health, you have the option to select either of these programs to complete your health-coaching requirement.

Naturally Slim is a video based program that features short videos to help you learn *how* you should eat rather than *what* you should eat, so that you can develop skills to lose weight and keep it off while also helping prevent the onset of a chronic disease like diabetes. To complete your health-coaching requirement with Naturally Slim, visit naturallyslim.com/PEEHIP and complete at least four weekly lessons by August 31, 2020. Each lesson will consist of multiple helpful videos. You can complete the lessons at your own pace, meaning you do not have to finish within four weeks.

Pack Health is a telephonic based program that helps you conquer prediabetes and weight loss by connecting you with your own personal health advisor who will help you reach your health goals through weekly phone calls. Your health advisor will even help you stay on track with text message and emails. If you would rather complete your health coaching requirement with Pack Health instead of Naturally Slim, simply call 855.255.2362.

Lastly, if you decide you would like to change from Naturally Slim to Pack Health or vice versa, you can do so at any time, but you must complete the minimum requirements in order to complete your health-coaching activity.

Sharecare Lifestyle Management

If your Sharecare welcome letter indicated you were identified for Sharecare Lifestyle Management Coaching, your coaching requirement has been waived this year due to the ongoing implementation of this specific coaching

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Since October 1, Sharecare has identified that nearly 2,000 PEEHIP members have created an online Sharecare account, but did so by registering on the incorrect website. The correct website for PEEHIP members is peehip.sharecare.com, but some members have registered at sharecare.com, which is the non-PEEHIP version of the website and will not track your required activities or completion status. To create your PEEHIP-specific account, you must register at peehip.sharecare.com.

If you have registered an account at sharecare.com (rather than peehip.sharecare.com) or on the Sharecare app in the past, you need to take action to create your PEEHIP account. If this applies to you, or even if you are unsure, simply follow the steps below to create your PEEHIP-specific account.

1. Go to peehip.sharecare.com and click “Sign In.”
2. Log in using the same email and password originally used to create your account.
3. Enter your identifying information and click “Create Your Account.”

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program. This waiver does not apply to the other coaching categories listed in the sections above, meaning it is only applicable to those members who received a letter from Sharecare specifically indicating they were identified for Sharecare Lifestyle Management Coaching. PEEHIP will continue to work with Sharecare to build and finalize this coaching benefit for future years.

RealAge® Program for Online Coaching

While not required but as an added benefit, all members can also participate in the RealAge® Program, a cutting-edge four week online or app-based challenge that sets a goal, asks you to either manually or automatically track toward that goal daily (four out of seven days per week minimum),

and helps to improve one of four key factors that impact your health: stress, sleep, nutrition, or exercise. You do not have to do the RealAge® Program to earn your \$50 monthly premium waiver, but if you have a health-coaching requirement as referenced above, you can choose to complete the RealAge® Program instead of completing your coaching requirement.

Did you register at peehip.sharecare.com?

While not required in order to complete your required activities for the *Choose Well, Live Well* wellness program, members who register at peehip.sharecare.com will have the ability to easily view their required activities and track their status towards earning their \$50 monthly

wellness premium waiver through the Sharecare app.

Please note that as a PEEHIP member, you have a customized Sharecare online experience that is available only to PEEHIP members. For new users seeking the PEEHIP-specific Sharecare experience, please make sure to register FIRST at peehip.sharecare.com and create a user ID and password, and then download the Sharecare app and login with the same user ID and password.

If you are interested in learning more about the *Choose Well, Live Well* program and/or Sharecare, visit the PEEHIP wellness site, ChoosewellPEEHIP.com for more information. ●

Flexible Spending Accounts Members

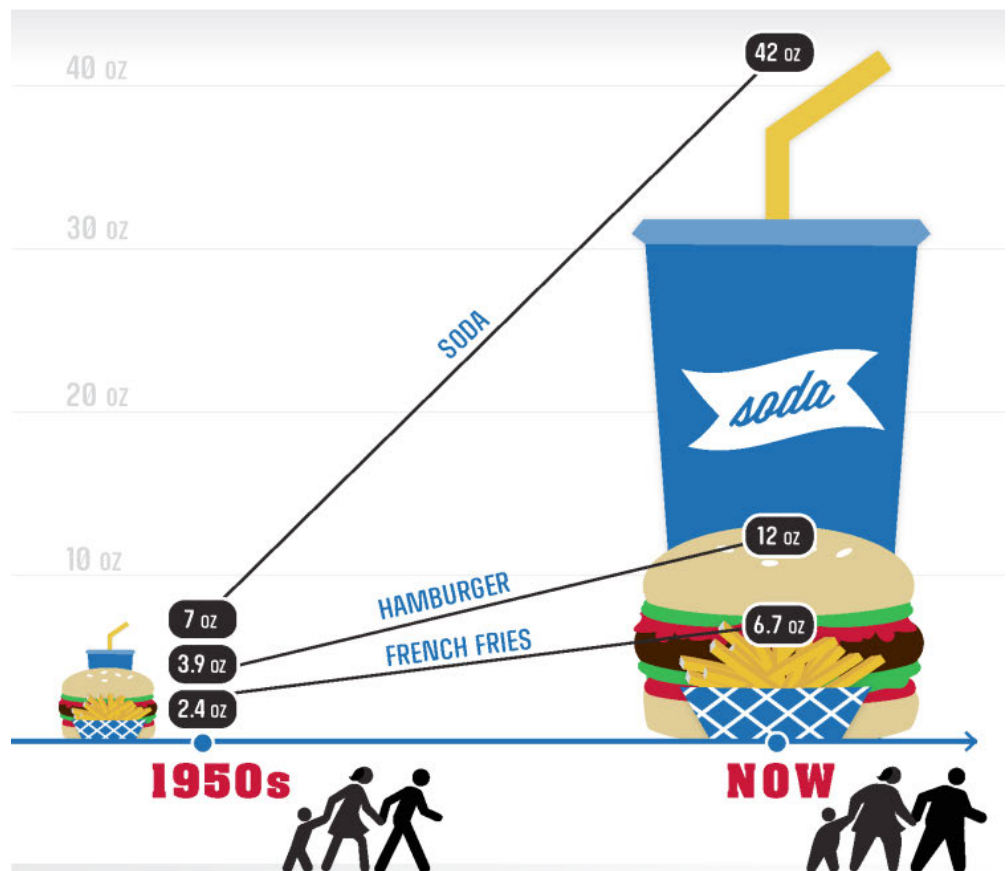
The 2020 Flex plan year began October 1, 2019. All members who enrolled in the PEEHIP Flexible Spending Account (FSA) program during Open Enrollment should have received a welcome package from the plan administrator, HealthEquity, during the month of October. Members enrolling in the Health FSA for the first time should have also received a HealthEquity Visa debit card. The card can be used to conveniently pay for qualifying medical, prescription drugs, dental, and vision expenses at the time of service, directly from the available funds in your Health FSA.

Members that were previously issued a card and re-enrolled for 2020 plan year can continue to use their same card. Remember to save all receipts and supporting documentation associated with use of the card. If you have not received your welcome package and debit card, or if you need a replacement card, please contact HealthEquity's Customer Service at 877.288.0719.

The previous (2019) Flex plan year ended September 30, 2019. If you were enrolled in the Health FSA or Dependent Care Reimbursement Account (DCRA) during the 2019 plan year, be sure to login to your account at www.myhealthequity.com to check your remaining balance before the reimbursement filing deadline of January 15, 2020. To be eligible for reimbursement, expenses must have been incurred between October 1, 2018, and September 30, 2019. Reimbursement requests can be submitted through the HealthEquity website, mobile app, or by mailing in a reimbursement form along with supporting documentation to HealthEquity. ●

THE NEW (AB)NORMAL

Portion sizes have been growing. So have we. The average restaurant meal today is more than four times larger than in the 1950s. And adults are, on average, 26 pounds heavier. If we want to eat healthy, there are things we can do for ourselves and our community: Order the smaller meals on the menu, split a meal with a friend, or eat half and take the rest home. We can also ask the managers at our favorite restaurants to offer smaller meals.



FOR MORE INFORMATION, VISIT
MakingHealthEasier.org/TimeToScaleBack

SOURCES | Young, L., & Nestle, M. (2002). The contribution of expanding portion sizes to the US obesity epidemic. *AJPH*, 92(2), 246-49. | Young, L., & Nestle, M. (2007). Portion sizes and obesity: Responses of fast food companies. *JPHR*, 28(2), 238-48. | CDC, Advance Data, No. 347, Oct. 2, 2004. | CDC, National Health Statistics Reports, No. 10, Oct. 22, 2008.

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 healthcare professional in the Blue Cross and Blue Shield of Alabama network who specializes in obstetrics or gynecology. The healthcare 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 healthcare 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. ●

Medicare-Eligible PEEHIP Members

The information below pertains to Medicare-eligible PEEHIP retirees or Medicare-eligible dependents of PEEHIP retirees. For more information, visit www.rsa-al.gov/peehip/retirees/.

Transition to the PEEHIP Humana Group Medicare Advantage (PPO) Plan

As a reminder, Medicare-eligible retirees will move from UnitedHealthcare® to Humana effective January 1, 2020. PEEHIP and Humana remain dedicated to ensuring your transition to Humana goes smoothly.

Humana hosted a series of informational meetings held in August, September, and October. In total, more than 10,000 PEEHIP Medicare-eligible retirees attended 71 meetings and 4 teleconferences hosted by PEEHIP and Humana throughout Alabama! This comprehensive effort was a tremendous success in educating PEEHIP members on their upcoming Humana plan. Overall, 93.4% of attendees reported they were very satisfied with the usefulness

of the information presented.

Termination Letters from UnitedHealthcare®

Members currently enrolled in the PEEHIP UnitedHealthcare® Group Medicare Advantage (PPO) Plan: Effective January 1, 2020, your current PEEHIP UnitedHealthcare® plan will end because the contract between UnitedHealthcare® and PEEHIP will not be renewed due to PEEHIP contracting with Humana beginning January 1, 2020. This does not mean you are losing coverage with PEEHIP. It does mean you will be automatically enrolled in the PEEHIP Humana Group Medicare Advantage (PPO) Plan **with no action needed on your part.**

As required by the Centers for Medicare and Medicaid Services (CMS), UnitedHealthcare® will be mailing out a termination letter in December 2019 that formally announces this change. Please note that you do not need to take any action. Although this letter will indicate the termination of your current UnitedHealthcare® plan, this letter does not mean you are not losing cov-

erage because you will be automatically transitioned with no break in coverage to the new PEEHIP Humana Group Medicare Advantage (PPO) Plan effective January 1, 2020.

If you have any questions please contact PEEHIP at 877.517.0020 or 334.517.7000.

Diabetic Meters

Your PEEHIP Humana Group Medicare Advantage (PPO) Plan will cover a variety of diabetic supplies. Humana's preferred diabetic meters are Trividia and Accu-Chek. If you are currently using a meter that is not Trividia or Accu-Chek, we ask that you obtain a new meter from one of Humana's preferred vendors. Humana will do the following to help make this transition easier for you:

- ◆ Humana will receive information from UnitedHealthcare® for those utilizing diabetic supplies and Humana will make outreach to affected retirees in order to alert you in advance and help you with this transition.
- ◆ Humana will provide you

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Medicare-Eligible PEEHIP Members

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with vouchers from the meter manufacturers that will allow you to obtain a new meter free of charge. You may also call Humana's Customer Care Team at 800.747.0008 to request information on the Humana preferred diabetic meters.

Please remember that any change to a new diabetic meter will require that you utilize a test strip that matches the new meter, so your doctor will need to write a new prescription for your new test strips. Diabetic supplies are covered in full under the PEEHIP Humana Group Medicare Advantage (PPO) Plan.

Humana information is being mailed to you soon!

Humana will send an informational kit to you in November. This will include medical and pharmacy benefit summaries as well as a prescription drug formulary that will include the most commonly used medications. The informational kit will also include information on the extra benefits and services included in the Humana plan. In December, you will receive your new Humana ID card. Please remember to share

your new Humana card when you go to any provider or pharmacy after the first of the year.

For any additional information on the PEEHIP Humana Group Medicare Advantage PPO Plan, please call Humana's Customer Care Team at 800.747.0008 (TTY: 711) Monday - Friday, 7 a.m. - 8 p.m., Central Time. You can also visit our.humana.com/peehip for information about the plan.

Medicare's Annual Enrollment Period Began October 15

Each year, Medicare holds its Annual Enrollment Period (AEP) from October 15 - December 7. This is the time when Medicare allows Medicare-eligible individuals to enroll or change their individual Medicare plan coverage. **This does not apply to PEEHIP members who are enrolled in PEEHIP's UnitedHealthcare® Group Medicare Advantage (PPO) Plan. These members will automatically transition to the PEEHIP Humana Group Medicare Advantage (PPO) Plan effective January 1, 2020.**

You have an exclusive Group

Medicare Advantage plan that was designed at the direction of PEEHIP to meet its benefit requirements. Only Medicare-eligible members of PEEHIP (retirees and dependents) are able to join this plan. Medicare allows groups, like PEEHIP, to determine their own annual enrollment period. PEEHIP held its annual open enrollment period earlier this year (July 1 - August 31) for an October 1, 2019, effective date.

So you can relax and ignore all of the information from other insurance carriers about changing healthcare coverage this fall. In fact, it is very important that you do not enroll in any individual Medicare plan like a Medicare Advantage or Part D Prescription drug plan. If you do, you will risk losing your PEEHIP-sponsored medical and prescription drug coverage.

If you drop your PEEHIP group-sponsored retiree health coverage, you will not be able to re-enroll until the next PEEHIP Open Enrollment period of July 1 through August 31 for an October 1, 2020, effective date. ●

Medicare only allows you to be enrolled in one Medicare Advantage plan and one Medicare Part D prescription drug plan at a time. If you enroll in another Medicare Advantage plan or a stand-alone Medicare Part D plan not offered by PEEHIP, you will be disenrolled from the PEEHIP Group Medicare Advantage (PPO) Plan. Any family members will also be disenrolled from this PEEHIP Medicare Advantage coverage and you and your family will not have hospital medical or drug coverage with PEEHIP.