



PEEHIP Wellness Program Deadline Has Passed

Members and spouses covered on PEEHIP's Blue Cross Blue Shield (Group 14000) Hospital Medical Plan: August 31, 2018 was the deadline to complete all required activities for the PEEHIP *Team Up for Health* Wellness Program. This means that if you or your covered spouse were required to participate and did not complete all activities, you will incur the \$50 wellness premium this October. **However, it is still not too late to earn your waiver of the \$50 monthly wellness premium for the remainder of the upcoming plan year!** Even though the deadline has passed, you can earn a prospective waiver of the wellness premium by completing your activities. Per PEEHIP policy, your waiver would begin on the 1st day of the 2nd month after you reach 100% complete. Please do not delay earning your waiver any longer and visit www.myactivehealth.com/peehip today. Click on "My Required Activities" to see what activities you have remaining.

This Wellness Program focuses on reducing the level of chronic disease and health risks in the PEEHIP membership. We encourage all members to invest in their health and take advantage of the free health coaching and other tools offered by this program beyond simply completing the minimum required activities. There is so much more offered to help you learn and implement ways to better manage and improve your health. Enjoy all of the benefits included with this program available at www.myactivehealth.com/peehip or by calling ActiveHealth at 855.294.6580.

And remember, October 1 starts a new plan year for PEEHIP and the *Team Up for Health* Wellness Program. Please watch for more information about your activities to earn your \$50 monthly wellness premium waiver once again in the upcoming plan year. Thank you to all who participated in this program this past plan year! ●

Flu Season is Approaching – Protect Yourself By Getting Vaccinated

Influenza, commonly known as the flu, is highly contagious and is spread by coughing, sneezing, or nasal secretions. Adults can begin to infect others as early as one day before showing any symptoms and as long as five days after showing symptoms. The flu can range in severity and even causes around 36,000 deaths each year on average.

From headaches and fevers to stuffy noses, suffering from the flu is no fun. The flu virus can last three to seven days, and brings with it sore throat, cough, aches, pains, and fever. But beyond the irritating symptoms, the flu can become quite severe. According to the Centers for Disease Control and Prevention (CDC), older adults or those who have chronic medical conditions may be at risk for developing serious flu complications.¹

The 2017-2018 flu season took quite a toll on older Americans. Adults 65 years and older had the highest hospitalization rate at 58% of the over 30,000 reported influenza-associated

hospitalizations during this season.² You may think of the annual flu season as a predictable, humdrum part of winter, but that doesn't have to be the case.

Some people wonder if they really should get a flu vaccine every season. The answer from the CDC is "absolutely."³

An annual vaccination provides optimal protection since a body's immune response from vaccinations declines over time. Plus, the flu virus is constantly changing. The CDC reviews and often updates the vaccine formulation, so the flu shot you get this year might be slightly

different than the one you got last year.

We've all heard of people who get the flu even when they've been vaccinated. **The CDC has confirmed you can't get the flu from getting a flu shot, which is a common myth.**⁴ While the flu shot does reduce the risk of contracting flu by approximately 60%⁵; it is still possible to contract the flu even if you are vaccinated. According to the CDC, for those who have been vaccinated and still get the flu, the illness is typically milder and some studies show hospitalization is less likely.⁵

While the CDC recommends the flu vaccine is safe for most people, you should always check with your health care provider to see if you should get the vaccine and which type of flu vaccine would be best for you.

1 "Influenza (Flu)." *Centers for Disease Control and Prevention*, Centers for Disease Control and Prevention, 23 Jan. 2018, www.cdc.gov/flu/about/disease/high_risk.htm.

2 "Influenza Activity in the United States During the 2017-18 Season and Composition of the 2018-19 Influenza Vaccine." *Morbidity and Mortality Weekly Report (MMWR)*, Centers for Disease Control and Prevention, 7 Jun. 2018, https://www.cdc.gov/mmwr/volumes/67/wr/mm6722a4.htm?s_cid=mm6722a4_w#F2_down.

3 "Influenza (Flu)." *Centers for Disease Control and Prevention*, Centers for Disease Control and Prevention, 30 Oct. 2017, www.cdc.gov/flu/protect/keyfacts.htm.

4 "Influenza (Flu)." *Centers for Disease Control and Prevention*, Centers for Disease Control and Prevention, 3 Oct. 2017, www.cdc.gov/flu/about/qa/misconceptions.htm.

5 *Influenza (Flu)*. *Centers for Disease Control and Prevention*, 3 Oct. 2017, www.cdc.gov/flu/about/qa/vaccineffect.htm.

Flu outbreaks are generally unpredictable and flu season can start as early as October and last as late as May. According to the CDC, it is best to get vaccinated before influenza viruses spread in your community since it takes about two weeks after vaccination for antibodies to develop in the body and provide protection against the flu.⁶

If you have never had a flu vaccine before, you may also be wondering about side effects. You may experience side effects like soreness, redness, tenderness, or swelling where the shot is given.

Protect yourself and those you love. Get your annual flu shot.

Tips for Avoiding the Flu:

<https://www.cdc.gov/flu/protect/habits.htm>

- ◆ Get a flu shot! The flu vaccine does not guarantee that you will not get the flu, but it is the single best way to prevent the seasonal flu.

⁶ "General Recommendations on Immunization." Immunology and Vaccine-Preventable Diseases, Centers for Disease Control and Prevention, Jan. 2011, www.cdc.gov/vaccines/pubs/pinkbook/downloads/genrec.pdf.

- ◆ Avoid close contact. Avoid close contact with people who are sick. When you are sick, keep your distance from others to protect them from getting sick too.
- ◆ Stay home when you are sick. If possible, stay home from work, school, and errands when you are sick. This will help prevent spreading your illness to others.
- ◆ Cover your mouth and nose. Cover your mouth and nose with a tissue when coughing or sneezing. It may prevent those around you from getting sick.
- ◆ Clean your hands. Washing your hands often will help protect you from germs. If soap and water are not available, use an alcohol-based hand rub.
- ◆ Avoid touching your eyes, nose, or mouth. Germs are often spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth.
- ◆ Practice other good health habits. Clean and disinfect frequently touched surfaces at home, work, or school, especially when someone is ill. Get plenty of sleep, be physically active, manage your stress, drink plenty of fluids, and eat nutritious food.

Options Available for Flu Shots:

Getting a flu shot is easy and convenient and is available at the options below:

- ◆ Your doctor's office
- ◆ Your local pharmacy
- ◆ The Alabama Dept. of Public Health (ADPH).
 - ◇ To see a listing of available and upcoming flu shot clinics offered by ADPH, please visit <https://dph1.adph.state.al.us/PublicCal/>

There is no additional cost or copay for any of the flu shot options above. **Please remember to bring your PEEHIP ID card to whichever location you choose for your vaccine.**

Note: Members covered under the PEEHIP UnitedHealthcare® Group Medicare Advantage (PPO) Plan: Be sure to show your UnitedHealthcare® ID card at the time of getting a flu shot from ADPH, your doctor, or your pharmacy.

For more information on the flu vaccine and your available options, please visit <http://www.rsa-al.gov/index.php/members/peehip/health-wellness/flu-shots/>. ●

PEEHIP and MedImpact Working Together to Fight the Opioid Epidemic

According to statistics from the Centers for Disease Control and Prevention (CDC), drug overdoses killed 174 people a day in 2016.¹ The opioid epidemic continues to devastate the nation and our state. In response to the national and state-wide opioid epidemic that touches many Alabama families, PEEHIP teamed up with MedImpact, our Pharmacy Benefit Manager, and implemented the Opioid Cumulative Dose Safety program in June 2017 to reduce potential over-utilization of opioids. The program aims to monitor opioid prescription thresholds and ensure appropriate use of opioids by requiring more information from pharmacies and/or prescribing physicians prior to dispensing. Since the program's implementation, there has been a 15% reduction in the number of opioid prescriptions due to not meeting the required clinical criteria for approval.

Still the opioid problem facing our communities remains staggering, and more must

be done at the national, state, and municipal levels. Effective September 1, 2018, MedImpact will launch the following new strategies for new opioid users. These are members with no opioid claims in the last 120 days. These strategies will be in addition to the current Opioid Cumulative Dose Safety Program and quantity limits that are already in place.

- ◆ New users will be limited to a seven-day supply the first time they fill an opioid medication.
- ◆ New users may ask their doctor to submit a one-time Prior Authorization (PA) for an initial fill for a supply greater than seven days if medically necessary.
- ◆ New users who have an active diagnosis of cancer may receive an override for quantities greater than 7 days at the pharmacy.
- ◆ In addition, new users with a diagnosis of cancer and enrolled in palliative care or hospice, may ask their doctor to submit a PA for a six-month duration period.

The initial seven-day supply limit of an opioid medication by new users is being adopted as a standard strategy by pharmacy benefit managers and health plans in the U.S. to reduce the potential for addiction.

MedImpact and PEEHIP are dedicated to continuing to develop comprehensive strategies to combat the opioid public health emergency. This strategy does not affect PEEHIP's members covered by the UnitedHealthcare® Group Medicare Advantage (PPO) plan.

If you have any concerns regarding the seven-day supply first fill limit, please contact MedImpact customer services at 877.606.0727 or email customerservice@medimpact.com.

For more information about PEEHIP's Opioid Cumulative Dose Safety program, see the June 2017 *Advisor* newsletter by visiting https://www.rsa-al.gov/uploads/files/PEEHIP_Advisor_Jun_17_web.pdf. ●

¹ <https://www.cdc.gov/media/releases/2018/p0329-drug-overdose-deaths.html>

Flexible Spending Accounts

Looking to pay less taxes? Budget your out-of-pocket medical expenses and reduce your tax liability by participating in a Flexible Spending Account (FSA). If you are an actively employed PEEHIP member, you can elect to have a portion of your paycheck set aside, pre-tax, to pay for qualified medical expenses for you and your dependents. **On average, members save \$15 to \$35 for every \$100 they set aside to spend on qualified expenses when they enroll in a Health FSA.** How? It's simple. Estimate how much you will spend between October 1, 2018, and September 30, 2019, on qualified medical expenses such as deductibles, doctor visits, prescription drug copays, dental care and orthodontia, vision exams, glasses, contacts lenses, and much more. Then enroll in a Health FSA for your estimated amount (up to \$2,650). The annual amount you elect will be divided into 12 separate monthly pre-taxed contributions. Your employer will deduct the pre-taxed contribution amount in equal installments throughout the plan year from your paycheck. But even though your elected amount is deducted over the course of the plan year, the

entire annual amount you elect for your Health FSA will be available for you to use on the first day of the plan year, October 1, 2018.

PEEHIP also offers a Dependent Care FSA (DCRA) to reimburse qualified dependent care expenses. DCRA funds can be used for daycare, preschool, before and after-school care, summer day camp, elderly care, or other dependent care expenses up to an annual amount of \$5,000 (or \$2,500 each, if married and filing separately).

You and your dependents are not required to be enrolled in PEEHIP coverage to participate in a PEEHIP FSA plan, and there are no fees to participate. The minimum annual contribution amount to participate in the Health FSA or DCRA is \$120. PEEHIP FSA plans are serviced by HealthEquity. For more information concerning eligible Health FSA and DCRA expenses or for help in estimating your expenses go to www.healthequity.com/peehip.

New! – Expanded Flex Debit Card

It's back! PEEHIP is bringing back the expanded Flexible Spending Accounts (FSA) Visa Debit Card. **Starting October 1, 2018,**

members that enroll or re-enroll in the Health FSA will be able to swipe their FSA debit card for qualified medical, prescription drug, dental, vision expenses, or copays at the time of service or purchase. Members will no longer be required to pay out-of-pocket first for medical expenses and wait for a reimbursement from their Health FSA. Each member enrolling in a Health FSA will receive a debit card from HealthEquity to conveniently access their funds. If you already have a HealthEquity Visa debit card, the previous limitation of pharmacy-only use will be removed effective October 1, 2018, and you will be able to use your same card.

Open Enrollment for FSA is July 1 through September 30. Enrollment in a FSA does not automatically renew each year and is not available for retirees. You must re-enroll and remain an active employee to continue participation. Enroll online at PEEHIP's Member Online Services (MOS) website <https://mso.rsa-al.gov> or complete a Flexible Spending Account Enrollment Application and mail it to PEEHIP by September 30, 2018. ●

Medicare-Eligible PEEHIP Members

The information below and on the next page 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.

Aging at Home: Preventing Falls

As many people age, one of their greatest wishes is to live in the comfort and security of their own home for as long as possible. Maintaining you and/or your loved one's health and providing a safe home environment will go

a long way toward preventing a fall.

Here are some key safety checks that can help prevent falls:

Bathrooms:

- ◆ Installing grab bars in the shower or tub will make it easier to get in and out, and non-slip mats and rugs on the floors will allow for more surefooted movement.
- ◆ A night light provides additional lighting.

Stairs:

- ◆ Installing lights over the stairs, steps, and landings will create a brighter

environment. Removing items from the stairs will keep the area clutter free.

- ◆ Providing handrails on both sides of the stairs from top to bottom will help your loved one to keep balance.

Bedrooms and Hallways:

- ◆ Be sure to have proper lighting installed such as night lights.
- ◆ Should you choose to use area rugs, be sure to tape them down, or do not use them at all. ●

How to Read Your Medical Explanation of Benefits (EOB)

If you have health benefits, after you visit a doctor's office or healthcare facility, you may get an Explanation of Benefits (EOB) from UnitedHealthcare®.

An EOB is a document from your health plan that explains how your benefits were used. It will list information like:

- ◆ The date of your doctor visit,
- ◆ How much your doctor billed your health plan,
- ◆ How much of those costs your health plan covered (paid),
- ◆ Any amount you owe the doctor.

An EOB is not a bill. But if there is a difference between the cost of your care and how much your health plan covered, you may get a bill from the doctor. When you get the EOB

first, it can help you prepare if there will be a bill.

Be sure to read your EOB carefully. Sometimes the doctor or your health plan can make a mistake.

If you think there is an error, or if you have any other questions about your EOB, you can call the number on the back of your member ID card.

Understanding each part of your EOB

Your medical EOB is made up of several sections. Each section includes different information about the claims UnitedHealthcare® received for services provided to you.

When you look at your EOB, ask yourself:

- ◆ Have I received a bill from the doctor for this service yet?
- ◆ Does the amount due on the bill match the "Your share" amount on the EOB?
- ◆ Has the doctor billed me for any service not listed in the EOB? If so, call the doctor's office for an explanation.
- ◆ Did I receive this service, and was it on or around this date?

Totals chart

The totals chart shows the monthly and yearly totals for the claims we received from your providers.

continued on page 4

How to Read Your Medical Explanation of Benefits (EOB) continued

The chart shows:

- ◆ The amount your provider billed the plan for services received.
- ◆ The total cost approved by the plan. This cost may be smaller than the amount the provider billed the plan.
- ◆ The plan's share is the total amount UnitedHealthcare® will pay towards the total cost.

- ◆ Your share is the total amount you are expected to pay your providers. Your provider should send you a bill for this amount. If you receive a bill for more than this amount, you should call your provider for an explanation.

Monthly details section

This section provides a detailed breakdown of your monthly claims, listing each of the claims we processed that month. It shows the same information as the "Totals for this month" row, but it lists each claim separately, by provider and date. ●

Extra support for those who take care of others

When you're dedicating time and energy to provide care for another, sometimes you could use some extra support. Solutions for Caregivers from UnitedHealthcare® can help. With support from a professional care manager, community service coordination, on-site assessment and more, you'll discover how taking care of yourself could help you provide quality care.

Solution for Caregivers provides:

Professional care manager

Get helpful advice and decision-making support from someone who understands the rewards and hardship of being a caregiver.

On-site assessments

Have a registered nurse perform an in-

person health overview of the person you are caring for.

Personalized care plans

Work together to create a custom plan that may address both your needs and the needs of the person you are caring for.

Coordination of services

Get help to find and arrange community-based outreach and events.

Please note: Solutions for Caregivers provides resources and coordination. Coverage for in-home care, supportive services, or medical treatments depends on your plan.

Do you need extra help?

Seeing a decline in your loved one's health can feel overwhelming. If you find yourself

asking the questions below, this service could help you get the answers.

- ◆ Is there help for someone in my situation?
- ◆ What services will Medicare pay for?
- ◆ What community resources could I take advantage of?
- ◆ Is my loved one's home still clean and safe?

If you or someone you know needs support, call Solutions for Caregivers at 866.896.1895, TTY 711, 24 hours a day, 7 days a week or go online at www.UHCforCaregivers.com/welcome/uhcretiree and use code uhcretiree.

This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits may change on January 1 of each year. ●

