

Benefit News You Need to Know for 2013



It's a New Year – a time when many of us make resolutions to improve our health – whether it's eating better, exercising more, spending quality time with family or reducing stress.

PEBTF medical and supplemental benefits and the Get Healthy Program can help you and your family make 2013 a healthier year.

No Medical Plan Changes for 2013

There are no changes to the medical plans and copayments for

2013. If you did not make a plan change during the open enrollment period in the fall, you will remain in the plan that you were enrolled in during 2012.

Copayments remain low – only \$15 to see your primary care physician, \$25 to see a specialist and \$50 to visit the ER, which is waived if you are admitted as an inpatient to the hospital.

Health Care Contribution Costs Remain the Same

In 2013, you continue to pay 3% of your biweekly gross base salary toward the cost of your medical and/or supplemental benefits. You can cut your contribution in half by participating in the Get Healthy Program.

Costs for Employees Hired on or After August 1, 2003

If you were hired on or after August 1, 2003, you may enroll in the HMO or CDHP plan at no additional cost. There is a buy-up cost for the Highmark PPO – \$21.38 biweekly for PPO single coverage; \$54.08 for PPO family coverage.

Preventive Services

Don't forget those important preventive benefits – such as annual physicals, immunizations, routine tests and lab work. Make an appointment for your annual physical. Ladies, don't forget to schedule your annual mammogram. See page 7 for a list of preventive benefits.

Get Healthy Program

The Get Healthy online and telephonic programs are available any time throughout the year. Visit www.pebtf.org and click on Get Healthy for a list of available online and telephonic programs. See page 6 of this newsletter to see how the Get Healthy Program helped one of our members.

Prescription Drug Formulary

The prescription drug formulary is a list of medications covered by the prescription drug plan. The formulary is updated quarterly. The January 2013 PEBTF Preferred Formulary is on the PEBTF website, www.pebtf.org. This summary formulary includes the most common drug categories. To price a medication, log on to www.caremark.com and register for a login and password. To save money, talk to your doctor about prescribing generic drugs or preferred brand-name drugs that appear on the formulary.



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Maternity Programs – Offering Individual Support to Mothers

Expectant mothers who live a healthy lifestyle are more likely to have a healthy baby. Pregnancy can also be overwhelming especially for first-time mothers who are not quite sure what to expect throughout their pregnancy. Here are the PEBTF medical plans that have free programs to help expectant mothers during this important time.

Highmark

For PPO & Keystone Health Plan West HMO Members

The **Baby Blueprints Maternity Education and Support Program** helps expectant families better understand every stage of pregnancy and make more informed care and lifestyle-related decisions. The program provides members with access to in-depth educational information on all aspects of pregnancy through multiple online offerings and access to individualized support from a nurse health coach.

Enrolling in Baby Blueprints is easy. Expectant mothers may call 1-866-918-5267 to enroll over the phone. Mothers should enroll early in their pregnancy to take advantage of all the program's offerings.

Capital BlueCross

For Keystone Health Plan Central HMO Members

The Capital BlueCross **Precious Baby Prints Program** is designed to support the mother during pregnancy, birth and follow-up care.

All expectant mothers receive up-to-date information about:

- Prenatal care and what to expect
- Nutrition and weight gain
- How to care for your newborn
- Breast feeding and baby's development
- Postpartum care and what to expect during baby's first month

Mothers identified as having a pregnancy with special needs also get the added support of a Maternity Case Manager. For more information, call 1-888-320-2583; www.capbluecross.com/preciousbabyprints.

UnitedHealthcare

For CDHP Members

UnitedHealthcare's **Healthy Pregnancy Program** was created to ensure that mothers have a smooth pregnancy, delivery and a healthy baby.

A care coordinator will consult with enrollees in the program, via telephone, to help determine

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Your Benefit Questions Answered

Do you have a question about your PEBTF benefits that you would like to appear in the newsletter? Submit your question to Communications@pebtf.org, mail it to Communications, PEBTF, 150 S. 43rd Street, Harrisburg, PA 17111-5700 or fax it to Communications, 717-561-1696. Please include your full name, address, agency and daytime phone number. Only your first name will appear in print. If the PEBTF publishes your question in a future newsletter or in the FAQ section of the PEBTF website, you will receive a pedometer to help you walk your way to better health.



A friend of mine was in the hospital for “observation” and was never actually admitted. Can you tell me more about this? — Gina

Imagine this scenario: You have been battling the flu for over a week. Around 10:30 p.m., your symptoms got worse with increased coughing, wheezing and shortness of breath. You couldn't wait to see your doctor in the morning and felt a trip to the emergency room was warranted. The hospital decided to keep you for observation after your chest x-rays and examination so you could receive some breathing treatments. The doctors and nurses continued to monitor you and you were released from the hospital the next evening.

Our plan requires a \$50 ER copayment, which is waived if the visit leads to an inpatient admission to the hospital. In the scenario above, even though the patient was placed in a hospital room, it was considered to be “observation care,” which is considered outpatient and not an admittance to the hospital.

According to Highmark's medical policy, observation services are defined as the use of a bed and periodic monitoring by the hospital's nursing or other ancillary staff, which are reasonable and necessary to evaluate an outpatient's medical condition or determine the need for possible inpatient admission. Observation services generally do not exceed 24 hours. In rare cases, observation care could extend to 24 to 48 hours.

Therefore, if you are in observation care from an ER visit, you will be required to pay your \$50 ER copayment.

Coverage for Autism Spectrum Disorder Annual Amount Increased Effective January 1, 2013

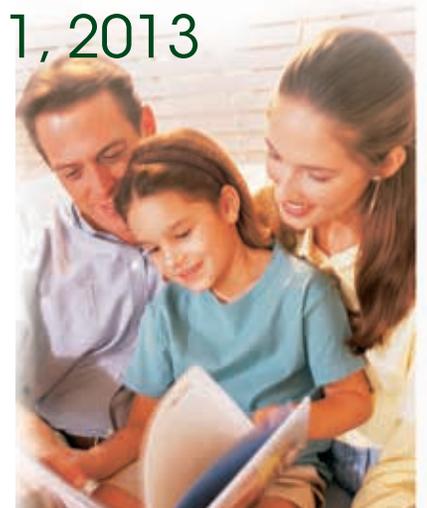
Effective January 1, 2013, coverage for Autism Spectrum Disorder is increased to \$37,080 per year. Coverage is provided for dependent children and young adults to age 21 who have a diagnosis of autism spectrum disorder. The coverage is in accordance with Pennsylvania's Autism Insurance Act. Autistic disorders include: Asperger's Syndrome, Rett Syndrome, Childhood Disintegration Disorder and Pervasive Development Disorder (Not Otherwise Specified).

The PEBTF provides coverage for the diagnostic assessment and treatment of autism spectrum disorder up to \$37,080 per year, which includes:

- Prescription drugs and blood level tests;
- Services of a psychiatrist and/or psychologist (direct or consultation);
- Applied behavioral analysis; and
- Other rehabilitative care and therapies, such as speech therapy, occupational therapy and physical therapy.

Coverage is provided by the PEBTF medical plans, the Mental Health and Substance Abuse Program provided by United Behavioral Health and the Prescription Drug Plan. Coverage will not exceed \$37,080 per year under all benefits.

Please keep copies of your EOBs and prescription drug receipts that pertain to the treatment of an autism spectrum



disorder so you will know if you are getting close to the annual maximum of \$37,080. You also may contact United Behavioral Health at 1-800-924-0105 to check if you are close to the annual maximum.

PEBTF Medical Plans Offer Mobile Apps to Help Their



The PEBTF medical plans offer apps to help you get information on your mobile devices. These apps are free and are available on iPhone, BlackBerry and Android devices. Here is what your medical plan has to offer.

Aetna HMO

Aetna Mobile App allows you to do the following:

- ✓ Find a doctor – search for doctors and specialists in your area
- ✓ Check benefits and coverage information
- ✓ Pull up your medical ID card information – it's not a problem if you left your ID card at home
- ✓ Use the urgent care finder – this is for immediate help in an emergency
- ✓ Search claims
- ✓ Track your health and claims – with your personal health record
- ✓ Contact us – for fast answers to your plan questions

The Aetna Mobile App works with iPhone, BlackBerry smartphone and Android. Text Apps to 44040 to download (standard text messaging rates apply). To learn more, visit www.aetna.com/mobile.

To use the Aetna Mobile application, you have to be registered for the secure member website. If you are an Aetna member but have not registered for access to the secure member website, type "Aetna.com" into your mobile Internet browser and follow the directions to Register Now.

Geisinger HMO

Geisinger does not offer a mobile app at this time. Visit Geisinger's website, www.thehealthplan.com for your member information. You will have to register for a login so have your Geisinger ID card handy.

Highmark PPO/Keystone Health Plan West HMO

Highmark has a mobile website which is functional for any smartphone or tablet – just type HighmarkBlueShield.com in your mobile browser. After opening the page, you can add the mobile site to the home screen of your mobile device for convenient one-click access. Steps vary by device.

Here are the features that you will have at your fingertips:

- ✓ View member ID cards
- ✓ Fax ID card information directly to providers
- ✓ Find doctors, hospitals, imaging centers, etc.
- ✓ Use GPS location to map and get directions
- ✓ Rate and review providers
- ✓ View medical claims
- ✓ Share provider information with family and friends
- ✓ Get health and wellness information
- ✓ Contact us

Keystone Health Plan Central HMO

Capital BlueCross launches the **Do WELLSM** mobile app in early 2013. Taking small steps toward wellness and celebrating each of them is the idea behind a unique mobile app being offered by Capital BlueCross.

The Do WELL app was developed to help support the wellness efforts of members and non-members alike by offering reminders and encouragement along the way. Capital BlueCross realizes that most everyone wants to enjoy the benefits of wellness, but that each person has unique challenges. Do WELL allows individuals to choose which things to work on, set their own goals and set their own pace. Building health habits may seem overwhelming at first, but it can be easier when you start slowly and take one small step at a time.

In the Do WELL app, individuals choose habits to build (or break) from a library, or they can add their own custom habits. Then, they tell the app how often they want to work on the habit and what their goals are. The app provides tracking, progress reports, reminders and encouragement. The app can also be used with friends – there are features that allow people to share progress with others through text messages, email, Facebook or Twitter.

Do WELL is free and available for download to smartphones and tablets via iTunes and Google Play. You do not need to have Capital BlueCross insurance in order to use the app.

Members

UnitedHealthcare CDHP

UnitedHealthcare makes it easier for members to take greater control of their health through their mobile app,

Health4Me.

Key features include:

- ✓ Contact a registered nurse 24/7
- ✓ Search for physicians or facilities by location or specialty
- ✓ Locate urgent care facilities and ER's
- ✓ Store physicians contact information
- ✓ View claims
- ✓ Check on health reimbursement account balances/deductibles
- ✓ Use the "Easy Connect" feature that lets you select the type of questions

about claims and benefits and request a callback on your mobile device from a UnitedHealthcare customer service rep.

UnitedHealthcare also offers additional mobile applications:

Myuhc.com Mobile – provides access to myuhc.com via your mobile device

OptimizeMe – interactive, motivational app that allows users to create health challenges or join existing ones.

The apps are available on iTunes as a free download for iPhones and other Apple devices and also available for Android devices.



Other Free Healthy Apps

Loselt! – track your foods and exercise on a daily basis

MapMyWalk – also **MapMyRun** for runners, **MapMyRide** for cyclists and **MapMyFitness**

And, many more – just search for fitness or diet apps on iTunes.

Maternity Programs

Continued from page 2

what, if any, risks or complications could arise during the mother's pregnancy.

Program benefits include:

- 24-hour toll-free access to experienced nurses
- Identification of risks and individual needs
- Pregnancy and childbirth education materials and resources
- Access to Online Healthy Pregnancy Owner's Manual
- Money-saving coupons

Members may enroll whenever they like through the 34th week of pregnancy. To get the most from the program, it's best to enroll during the first trimester of pregnancy. To enroll, call 1-800-411-7984. For more information, visit: www.healthy-pregnancy.com.

PEBTF May Cancel Your Coverage For Fraud, Intentional Misrepresentation or Non Payment

IMPORTANT: If you intentionally provide false or misleading information about eligibility for coverage under the PEBTF Plan (or about a claim) or you fail to make a required contribution on time, your coverage may be terminated retroactively. This may occur, for example, if you file a false claim, fail to notify us promptly of a divorce or fail to submit timely proof of birth or adoption that verifies your relationship with a new child whom you have added as a dependent.



Wellness Coaching Offers Real Help for Real Pain

As Julie* completed her online Health Assessment, she noticed a button suggesting she enroll in the Healthy Back program. “I thought, do I or don’t I?” She wasn’t sure if working with a wellness coach by phone would do anything for her back pain. Yet at the end of some workdays, the pain was really bad. “I ended up hitting the button and it was the best thing I could’ve done.”

The Healthy Back program is offered through OptumHealth as part of the Get Healthy Program. As the spouse of a PEBTF member, Julie was eligible to enroll. “The first call was pretty awesome,” says Julie. Rating her pain on a scale of 1 to 10, Julie told her coach it was consistently at about 7.

Her job is physically strenuous, involving a lot of lifting and bending. And over-the-counter pain medications are a last resort. “I’m just not a pill taker,” says Julie.

Her coach offered to send her an email with step-by-step instructions for different stretching exercises she could try. He urged her to go slowly, and to stop if any exercise caused pain. “The idea was to strengthen the core muscles in the front,” explains Julie, “which totally threw me off because I thought we were supposed to be taking care of the back.” But she found that her coach was right. By adhering to the right stretching exercises, her back pain steadily improved.

Julie and her coach discussed her work routines, going over each step. He explained proper lifting techniques and even identified tasks where using a dolly would reduce the strain on Julie’s back. He also talked to her about various other treatment options, including going to a chiropractor. “I haven’t needed to, but I would if I felt it would help.”

After just a few calls, Julie was at zero on the pain scale. Julie still has occasional aches and pains, but thanks to her wellness coach, she knows what to do to stay strong, active and practically pain free.

*Member name and some details changed to protect member’s privacy. Based on actual PEBTF case.

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Get Healthy Program Reminder

You have until April 1, 2013 to complete your Get Healthy telephonic program. Here are the requirements to earn the waiver:

If you and/or your spouse or domestic partner are classified as Healthy:

- Complete the annual Health Assessment

If you and/or your spouse or domestic partner or children are classified as At Risk:

- Complete a telephonic Wellness Coaching Program by April 1, 2013
- Complete the annual Health Assessment (not children)

If you and/or your spouse or domestic partner or children are classified as Chronic:

- Participate in a telephonic Disease Management Program by April 1, 2013
- Take all telephone calls to qualify. If you receive an automated call, you must complete the call
- Complete the annual Health Assessment (not children)

Completion of Annual Health Assessment: You and your covered spouse/domestic partner **MUST** complete the annual Health Assessment that is offered in April. Information will be sent to your mailing address in late March.

*\$750 is the savings in the health care contribution for an employee making \$50,000 a year. Savings will vary based on gross base salary.



Participate in the Get Healthy Program and save \$750*

It begins with taking the annual Health Assessment and participating in an appropriate program.

Helping to Prevent Serious Illness

You know you and your family can count on PEBTF medical and supplemental benefits when you are sick or diagnosed with a serious illness. Just as important are your preventive care benefits – these benefits can help to diagnose an illness early or even prevent a more serious illness. Don't neglect preventive care – many of the benefits are covered on an annual basis.

Preventive Benefits for Active Members

Adults (age 19 and over):

Adult routine physical exam	Annual
Gynecological exam & pap smear	One screening per calendar year
Mammogram	One screening per calendar year (for women over age 40)
Fasting glucose screening	Every 3 years for members age 45 and older
Fasting cholesterol/lipid profile screening	Every 5 years for members age 19 and over
HPV Screening	One screening per calendar year for females age 30 and over
Bone mineral density screening	One screening every 2 years (women age 65 and older)

Adults (age 50 and over):

Fecal occult blood test	Once every 12 months
Sigmoidoscopy	Once every 5 years
Colonoscopy	Once every 10 years
Prostate Specific Antigen (PSA) Testing	Once every 24 months

Children (age 18 and under):

Pediatric preventive services	Covered for certain pediatric services at stated intervals
Lead screening	One screening every 2 years
Hemoglobin/Hematocrit	One screening per calendar year
Cholesterol/lipid profile screening	One screening per calendar year for members age 2 to 18

All Members:

Immunizations	Visit www.pebtf.org for a list of covered adult and pediatric immunizations
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Supplemental Benefits:

Eye exam	Annual
Routine dental exam	Every 6 months

Your Important PEBTF Health Benefits

Medical	Highmark PPO, regional HMO plans or the UnitedHealthcare CDHP. Telephone number appears on your medical ID card.
Mental Health & Substance Abuse	United Behavioral Health. Telephone number appears on your medical ID card.
Durable Medical Equipment, Prosthetics, Orthotics, Diabetic and Medical Supplies	DMEnson Benefit Management. Telephone number appears on your medical ID card. Please make your medical provider aware that the benefit is separate from your medical plan and to use a DMEnson network provider. (Not for CDHP members)
Prescription Drug	CVS Caremark – 1-888-321-3261
Vision	National Vision Administrators – 1-800-672-7723
Dental	United Concordia – 1-888-320-3321
Hearing Aid	PEBTF – 1-800-522-7279

PEBTF

**Pennsylvania Employees
Benefit Trust Fund**
150 South 43rd St., Suite 1
Harrisburg, PA 17111-5700



Local: 717-561-4750
Toll Free: 800-522-7279

PEBTF telephone hours:
8 a.m. – 5 p.m. Tuesday - Friday
8 a.m. – 6 p.m. Monday (or 1st day
following a holiday weekend)

PEBTF Benefit News is available in
an alternative format. Please contact
the PEBTF to discuss your needs.

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Your Important Health Benefits

Did you Join a Health Club as Part of Your New Year's Resolution?

Here are Some Tips for Sticking With Your Exercise Program

It's the time of year that people join gyms and health clubs only to quit in February — statistics show that 45 percent will quit the gym after one month.

Here are some ways to ensure you that you will keep visiting your health club on a regular basis:

1. Set a "realistic" goal
2. Slow down
3. Find something you like to do
4. Schedule your exercise time
5. Use the buddy system
6. Track you progress
7. Revise your workout periodically
8. Reward yourself



Keep up the good work and make exercise a part of your life in 2013 and for years to come.