

PEBTF Health Advocate Offers Pricing Tool For All Retiree Members

We introduced PEBTF Health Advocate in the Winter Benefit News. Since that time, over 10,000 members have reached out to Health Advocate to get a better understanding of their benefits, to get help with a claim or to find a network provider.

One of the features Health Advocate offers is **Health Cost Estimator+**. Available online and using the mobile app, the **Health Cost Estimator+** pricing tool makes comparing the cost of care easy by providing detailed cost and quality information up front, so you can choose the right care at the right price.

How can this help you? The cost of medical care can vary a lot, depending on where you go for care – even in the same area. Comparing costs ahead of time can reduce your out-of-pocket costs. This is especially important for PPO members who pay an annual deductible on certain medical services.

Log in today!

- Visit www.healthadvocate.com/PEBTF or log in via the Health Advocate mobile app
- Select **Health Cost Estimator+** under Finance

Have a question?

Call 1-855-855-4238 and a Personal Health Advocate can help you use the tool, understand your results, answer your questions and help with a wide range of healthcare-related issues.

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Prediabetes is a Big Deal

Don't let the "pre" fool you – prediabetes is a serious health condition where blood sugar levels are higher than normal but not high enough yet to be diagnosed as diabetes. Prediabetes puts you at increased risk of developing Type 2 diabetes, heart disease and stroke.

Prediabetes often goes undetected until serious health problems show up. That's why it's important to talk to your doctor about getting your blood sugar tested if you have any of the risk factors for prediabetes, which include:

- Being overweight
- Being 45 years or older

- Having a parent, brother or sister with Type 2 diabetes
- Being physically active less than three times a week
- Ever having gestational diabetes (diabetes during pregnancy) or giving birth to a baby that weighed more than nine pounds

Race and ethnicity are also a factor: African Americans, Hispanic/Latino Americans, American Indians, Pacific Islanders and some Asian Americans are at higher risk.

Ready to find out your risk? Take the online quiz at DoIHavePrediabetes.org.

Source: www.cdc.gov

It's Your Life. Treat Your Diabetes Well

There are three types of diabetes: Type 1, Type 2 and gestational diabetes (diabetes while pregnant, which can put the pregnancy and baby at risk and lead to Type 2 diabetes later).

With Type 1 diabetes, your body can't make insulin. Type 1 diabetes is less common than Type 2; about 5 percent of people who have diabetes have Type 1. Currently no one knows how to prevent Type 1 diabetes.

Most people with diabetes – 9 out of 10 – have Type 2 diabetes. With Type 2 diabetes, your body doesn't use insulin well and is unable to keep blood sugar at normal levels. The risk factors for diabetes are the same as the risk factors for prediabetes listed above.

If you have diabetes, you should:

- Follow a healthy eating plan
- Get physically active
- Test your blood sugar
- Give yourself insulin by syringe, pen or pump, if needed
- Monitor your feet, skin and eyes to catch problems early
- Get diabetes supplies and store them according to package directions
- Manage stress

For non-Medicare eligible members diagnosed with diabetes, the Livongo Program can help.

Medicare eligible members, contact your medical plans to see what programs it may offer.

Source: www.cdc.gov

Livongo – Help for Those Living with Diabetes Non-Medicare Eligible Members

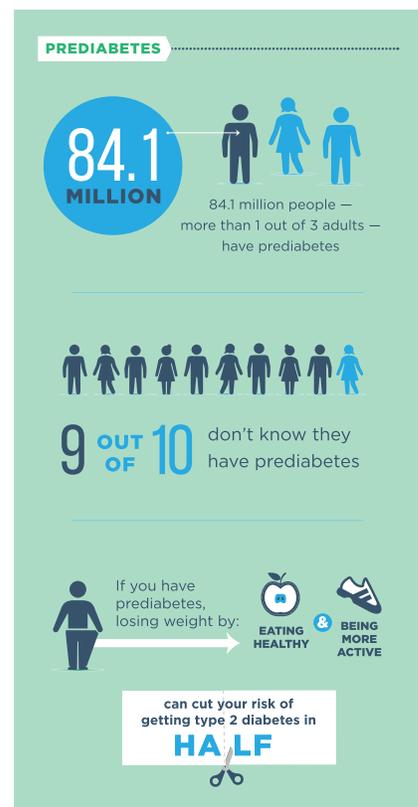
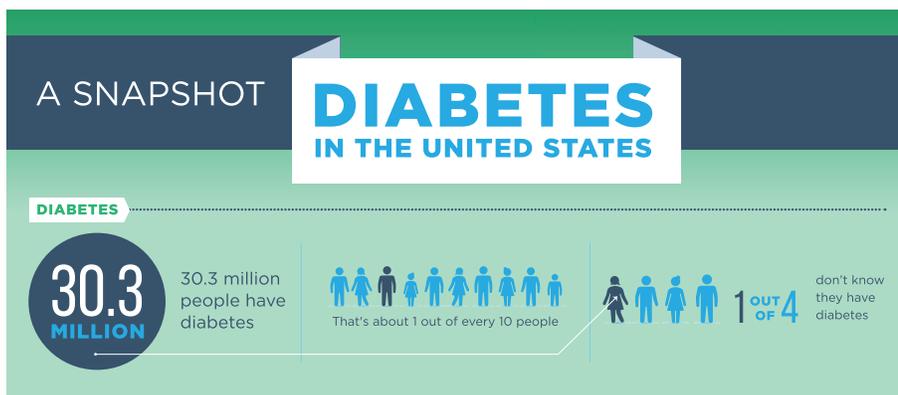
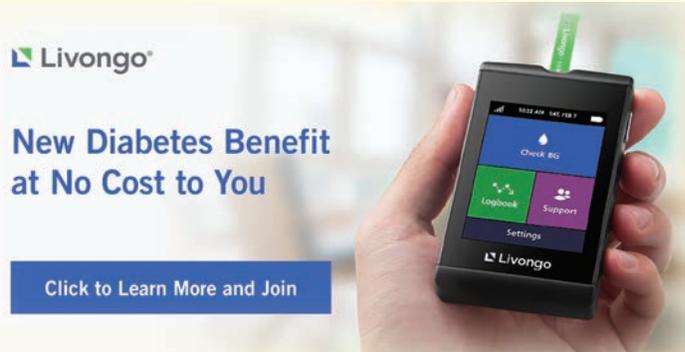
The Livongo Program kicked off in May. If you qualified for the program, you should have received a mailing from Livongo. We hope that you took some time to see what the program has to offer.

Livongo makes managing diabetes easier. If you sign up, you will get:

Unlimited Strips at No Cost to You: Never worry about running out of test strips. Reorder strips directly from your Livongo meter. Livongo will ship you unlimited strips at no cost.

Connected Meter: Livongo automatically uploads blood glucose readings that you can access on the mobile app and online.

Support from Certified Diabetes Educators: Livongo coaches are always ready to support you. Visit www.pebtf.org > Get Healthy > Help for Diabetics for more information and a direct link to the Livongo website to get started. Or call Livongo Member Support at 1-800-945-4355 and mention registration code **PEBTF**.



Benefits for Specialty and Infusion Medications

Specialty medications are used to treat complex conditions and usually require injection or intravenous (IV) infusion and special handling, such as refrigeration.

Non-Medicare Eligible Members

CVS Specialty® has the expertise you need along with personalized, clinical support.

You or your health care provider can visit www.CVSpécialty.com or call 1-800-237-2767 for specific information regarding medications available through CVS Specialty. Infusion medications may be delivered right to your doctor's office.

Use your prescription drug plan benefit and CVS Specialty for these medications. If the specialty medication is submitted to your medical plan, the claim will be denied for no coverage under the medical plan and you will be responsible for the cost.

Visit www.pebtf.org > Publications & Forms to find the PEBTF Specialty Pharmacy Drug List.

Medicare Eligible Members

You are enrolled in a Medicare Advantage Plan and the SilverScript Prescription Drug Plan, which is a Medicare Part D plan. Your benefits follow Medicare guidelines. Please present both your medical ID card and your prescription drug plan ID card to your provider if you need to obtain specialty or IV infusion medications.

Mark your calendars!

Non-Medicare Eligible Retiree
Open Enrollment will be held
October 15 – November 2, 2018.

Medicare Eligible Retiree Open Enrollment
will be held October 22 – November 9, 2018.



Choosing the Right Care Center

Summertime and the living is easy – at least it should be. You and your family usually spend more time outdoors gardening, hiking, playing sports or relaxing at the beach. These activities can result in accidental sprains and broken bones, cuts, poison ivy, sun poison, heat exhaustion or heat stroke. You may need to seek medical care but sometimes the ER is not always the best choice. Here is a quick guide to help you determine where to go when you need medical care.

Care Center In Network	Type of Care	Your Cost and Wait Times
<p>Doctor's Office (primary care) <i>Your doctor knows your health history which is an advantage</i></p>	<ul style="list-style-type: none"> • Treatment for non-life threatening conditions including treatment for items listed below under Convenience Care Clinics and Urgent Care Centers • Preventive services • PCPs manage your general health – chronic and acute conditions 	<ul style="list-style-type: none"> • Saves money – lowest copay • Non-Medicare members: \$20 copay – PPO option \$5 copay – HMO option • Medicare members: \$20 copay • Normally requires an appointment • Little wait time with scheduled appointment
<p>Convenience Care Clinic <i>Located in retail stores, supermarkets or pharmacies (HMO members may need a referral to a network clinic– check with your plan)</i></p>	<ul style="list-style-type: none"> • Common infections (e.g., strep throat, sinus infection) • Minor skin conditions (e.g.: poison ivy) • Flu shots • Minor cuts • Earaches 	<ul style="list-style-type: none"> • \$50 copay – PPO and HMO options (may be less under some plans) • Walk-in patients welcome with no appointment necessary, but wait times can vary
<p>Urgent Care Center <i>(HMO members may need a referral to a network urgent care center– check with your plan)</i></p>	<ul style="list-style-type: none"> • Respiratory disorders • Strains, sprains • Minor broken bones (e.g.: finger) • Minor infections • Minor burns • X-rays 	<ul style="list-style-type: none"> • \$50 copay – PPO and HMO options • Walk-in patients welcome, but waiting periods may be longer as patients with more urgent needs will be treated first
<p>Emergency Room <i>Use for more serious medical conditions</i></p>	<ul style="list-style-type: none"> • Heavy bleeding • Large open wounds • Sudden change in vision • Chest pain • Sudden weakness or trouble talking • Major burns • Spinal injuries • Severe head injury • Difficulty breathing • Major broken bones • Poisoning • Drug or alcohol overdose 	<ul style="list-style-type: none"> • Non-Medicare members: \$200 copayment – PPO \$150 copayment – HMO (waived if admitted as an inpatient) • Medicare members: \$100 copayment (waived if admitted as an inpatient) • If admitted, the inpatient stay is subject to the PPO deductible • Open 24/7, but waiting times may be longer because patients with life-threatening emergencies will be treated first

Annual Notification

Important Information about the Women's Health and Cancer Rights Act of 1998

On October 21, 1998, Congress enacted the Women's Health and Cancer Rights Act of 1998. The REHP health plans already comply with this important legislation requiring health plans to cover:

- Reconstruction of the breast on which the mastectomy was performed
- Surgery and reconstruction of the other breast to produce a symmetrical appearance
- Prosthesis and treatment of physical complications at all stages of the mastectomy, including lymphedemas

Coverage will be provided in a manner determined in consultation with the attending physician and the patient. Coverage may be subject to deductibles and coinsurance, as detailed in your specific plan option.

HIPAA Notice of Privacy Practices

The Health Insurance Portability and Accountability Act (HIPAA) Notice of Privacy Practices is included in the REHP Benefits Handbook. The Notice of Privacy Practices lists your rights under HIPAA and it applies to records maintained by the REHP regardless of the source of the information. The notice tells you about the ways in which the REHP may use and disclose your Protected Health Information (PHI). It also describes your rights and certain obligations the REHP has regarding the use and disclosure of PHI.

To view a copy of the HIPAA Notice of Privacy Practices, go to www.pebtf.org and click on the box, REHP Benefits Handbook for Retiree Members. You will find the Notice at the end of the book before the Glossary.

Verification Procedures at the PEBTF

Most of you have heard about HIPAA – you have received information from the PEBTF in the past and may have been presented with information at your doctor's office.

The PEBTF takes the privacy of our members very seriously and works hard to protect that privacy. When you call the PEBTF, a representative will ask you for your social security number, date of birth and possibly, your address. This ensures that we are giving your protected information to only you. Please be ready with this information when you call.



Call for Help. Call for Hope

The Optum Substance Use Treatment Helpline is Here for You

Dealing with a substance abuse disorder can be frightening and overwhelming. Whether you have a loved one who is facing challenges or you're worried about your own substance use, you may feel worried and helpless.

You're not alone. You and millions of others, from all walks of life across the country, are coping with this issue. Some are addicted to alcohol. Some are battling drugs. Either way, a substance use disorder is not a sign of weakness. It's not about being a bad person. It's a treatable disease. And Optum is here to help.

The Substance Use Treatment Helpline is staffed

with highly trained and licensed advocates. It is available at no added cost to you. It is part of your health benefit. You can remain anonymous when you call. The service is completely confidential.

Call the Substance Use Treatment Helpline at 1-855-780-5955, 24 hours a day. Or visit liveandworkwell.com/recovery.

It's an important step toward hope, recovery and health.

Medicare eligible members: You have mental health and substance abuse benefits as part of your Medicare Advantage Plan. Contact your plan for more information.

Source: Optum

August is Immunization Awareness Month

The REHP provides coverage for preventive immunizations. Coverage is included for immunizations against pneumonia, hepatitis B and the flu to name a few. Visit www.pebtf.org to see what immunizations are covered for non-Medicare eligible members and Medicare eligible members.

New for 2018: Shingrix is an FDA-approved vaccine for the prevention of shingles in adults 50 years and older and is covered under your plan. Shingles is a painful rash that usually appears in a band, a strip or a small area on one side of your body. Approximately 96 percent of U.S. adults are at risk. If you had chickenpox as a child, the virus that causes shingles is already in your body and can reactivate at any time. Our immune systems naturally decline with age and that is why it's important to get the vaccine to prevent shingles.

Over 96 percent of people who get shingles

experience acute pain. Many describe the pain as a burning sensation. A complication of shingles is pain that can last for months or even years.

Zostavax, the first shingles vaccine offered, continues to be covered under your plan for members 60 years and older.

Talk to your doctor about what vaccine is best for you.

Where can I get more information on immunizations?

- Visit www.pebtf.org for a list of covered immunizations or contact the PEBTF
- Talk with your doctor or other health care professional about which vaccines are right for you
- Visit CDC's website on adult vaccination: www.cdc.gov/vaccines/adults/index.html

Source: www.shingrix.com

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.



IMPORTANT BENEFIT INFORMATION

This newsletter may contain a general description of the Plan. It is provided for informational purposes only and should not be viewed as a contract, offer of coverage, confirmation of eligibility or investment, tax, medical or other advice. In the event of a conflict between this newsletter and the official plan document, the official plan document will control however, to the extent expressly stated, an article may modify the provisions of the REHP Benefits Handbook. The commonwealth reserves the right to amend, modify or terminate the terms of the Plan, including any options available under the Plan, at any time and for any reason, with or without prior notice.

PEBTF May Cancel Your Coverage for Fraud or Intentional Misrepresentation

IMPORTANT: If you intentionally provide false or misleading information about eligibility for coverage under the REHP 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

