What’s Inside

Telemedicine Offered
Mental Health Visit Options
Diabetes Prevention Programs
Health Advocate App
Helping Kids be Kids
COBRA Benefits When You Retire
Medicare Eligible But Still Working
Get Healthy Resources

Benefit Changes for 2020

There are changes to your medical, dental and vision plans, as well as the benefits waiting period for new hires/rehires, PPO buy-up and domestic partner eligibility, as follows:

Medical Plan:

✓ A Diabetes Prevention Program and telemedicine are now available. See inside for more information
✓ Autism spectrum disorder cap increases to $41,271 for 2020

Dental Plan:

✓ Annual maximum: $1,500
✓ Lifetime maximum for orthodontia: $1,750

Vision Plan:

✓ **Frames**: Allowance increases to $150; you may obtain new frames every two years (730 days)
✓ **Contact lenses**: Allowance changes to $150 every year (365 days). In addition, the requirement that contact lenses must be medically necessary is removed
✓ **Lenses**: You may obtain new lenses every year (365 days)

New Hires and Rehires:

The following are reduced from six months (180 days) to 90 days of employment:

✓ Waiting period for employee and dependent dental, vision and hearing aid benefits
✓ Buy-up for dependent medical and prescription drug coverage
✓ Buy-up for employee prescription drug coverage

PPO Buy-Up for the Choice PPO:

✓ The bi-weekly PPO buy-up increases to $12.43 for single coverage and $32.07 for family coverage (for employees hired on or after 8/1/03 who are enrolled in the Choice PPO).

Domestic Partner Eligibility:

✓ No new domestic partners and children of domestic partners may be added as of January 1, 2020
✓ Coverage for current domestic partners and children of domestic partners continues for 2020
✓ On January 1, 2021, coverage for domestic partners and children of domestic partners will be terminated from PEBTF benefits; they will have to obtain other coverage
✓ Contact the HR Service Center or your local HR office if your domestic partner obtains other coverage or if your marital status changes

ID Cards

You should have received a new medical ID card if you made a plan change for 2020. Make sure you present your new card at your doctor’s office.

Winter 2020 • www.pebtf.org
Telemedicine for Aetna & Highmark Members

It’s 7:30 p.m., and you have been feeling progressively worse throughout the day. You have a feeling it’s a sinus infection, but you are in Western Pennsylvania at a conference far from your family physician in Philadelphia.

It’s Sunday morning and your two-year old daughter wakes up with eyes that are swollen shut. You remember having pink eye when you were a kid, but you just want to make sure of the diagnosis. Of course, your child’s pediatrician’s office is closed and you don’t want your child to wait.

You have had a busy day with back-to-back meetings and conference calls, and now you are in your office trying to finish a report for your boss which is due tomorrow. No time to be sick, but you feel awful. You have been coughing non-stop and have a slight fever.

While you have the option to visit a network urgent care center when your doctor’s office is closed, telemedicine may be a better option.

You can visit a doctor when it’s convenient for you even if it’s after hours. And no more sitting in waiting rooms with other sick people.

- Telemedicine is available 24/7, 365 days a year no matter when you need it.
- It’s easy and can be accessed by web, phone or mobile app in minutes.
- You can request a visit with a doctor immediately, or if you happen to busy at the time, just schedule an appointment when it’s more convenient.
- If medically-necessary, the doctor will even send a prescription to your pharmacy or help you find a pharmacy near you if you are traveling. Please note that these doctors cannot write a prescription for a controlled substance such as codeine or oxycodone.

Quality care and convenience – available 24/7, 365 days a year.

When You Should Use Telemedicine vs Other Medical Providers

- Teladoc is offered to both Aetna and Highmark members:
  - **Aetna:** Teledoc – teledoc.com/Aetna
    1-855-TELADOC (835-2362)
  - **Highmark:** Teladoc – www.teladoc/enter
    1-800-TELADOC (835-2362)
  - Geisinger does not have telemedicine at this time.

So, how does it work?

- Both Aetna and Highmark offer Teladoc to PEBTF members.
- Visit the Teladoc website – links appear above and also on the PEBTF’s website.
- Create a username and password and provide the insurance information that is on your health plan’s ID card (you can even set this up ahead of time before you need it). Provide a credit card because you will be charged for the visit. PPO members – $20 copay; Custom HMO members – $10 copay; Bronze Plan members pay the cost of the visit which is $40.
- Choose a board-certified physician and discuss your medical symptoms using secure and HIPAA compliant technology.
- Visit with the doctor via the mobile app, website or even by phone; no extra cost for after hours or weekends.

Use anytime, anywhere in the U.S. for non-emergency conditions like cold and flu, bronchitis, allergies, rashes and more.

Your primary care physician (PCP) is ideal for annual exams and ongoing medical conditions needing regular monitoring.

Use an urgent care clinic when you need an in-person visit for conditions like earaches, sprains or minor cuts.

Go to the ER if you need emergency medical care for severe conditions like chest pain, head injury, burns or broken bones.
Your Mental Health Benefit Offers Choices to Accessing Providers

Optum provides your mental health and substance use benefits and offers a variety of ways for you to get the care you need:

- In-person office visits
- Virtual visits
- Text or video services offered by Talkspace

No matter how you like to receive care, Optum has an option for you.

Start by finding a provider for an in-person office visit or a virtual visit by going to liveandworkwell.com and clicking on the Search box. Sign in or enter using the access code, Pennsylvania. From the search box, you can search by location and other criteria such as type of provider, area of expertise, etc.

In Person Office Visits
Make an appointment with a mental health provider in your area. At the time of your visit, pay a $20 copay (Choice PPO or Basic PPO members) or a $5 copay (Custom HMO members). Bronze Plan members pay the cost of the visit.

Virtual Visits
Talk with and see a mental health provider online, in the privacy and comfort of your own home. Virtual visits are a convenient option for those who have busy schedules, have difficulty getting to appointments or where it may be a long distance to visit a provider. Click on “Find a virtual visit provider” in the Behavioral Health Care Search box. Add your location and find a provider. You will pay your office visit copay for each virtual visit.

Talkspace
Communicate with a licensed therapist via text, voice and video message from your phone or computer by using Talkspace, an online therapy service. It’s private, confidential and convenient.

**Currently not covered by your four free SEAP visits.** Office visit copay will apply. One week of texting equals one office visit copay; one video session equals one office visit copay ($20 copay for Choice PPO or Basic PPO members or a $5 copay for Custom HMO members). Bronze Plan members pay $110 for initial evaluation and $71 for a week of texting.

Here’s how Talkspace can fit your life:

- Message a licensed therapist, 24/7.
- Find a therapist with an online matching tool.
- Start therapy within hours of choosing your therapist.
- Receive a response from your therapist daily, five days a week.
- Schedule live video sessions, when needed.
- Download the Talkspace app on your mobile phone or computer.

To access Talkspace:

- Scroll down to Popular Tools on the liveandworkwell site and go to the box, Introducing Talkspace.
- Pick a time for a free 10-minute video session orientation with your therapist.
- Create a username and password and begin messaging your therapist and download the Talkspace app. You can set a password on your phone so no one can get into this messaging area.
- See the text messages as they come in and keep them for later review. You can also schedule video sessions when it’s convenient.
Finding a mental health provider who’s the right fit for you can make all the difference. It’s an important relationship and you’re sharing personal challenges, worries and life stories. The newly designed guided provider search tool on Liveandworkwell.com helps make sure you find the best match possible so you get the kind of care and support you need, when you need it. Scroll down to Popular Tools. You can find a provider based on your unique needs and specific preferences. Answer a few quick questions and the search tool will find providers who most closely match what you’re looking for.

Diabetes Prevention Programs (DPPs) Offered

One in three American adults has prediabetes and most don’t know they have it! Prediabetes can lead to diabetes. But prediabetes can be reversed with the right lifestyle changes and a DPP can help you learn health habits that can last a lifetime.

The PEBTF’s medical plans now offer free DPPs to members who are identified as having prediabetes or score as high risk for developing Type 2 diabetes.

A DPP is a year-long program consisting of 16 weekly lessons, followed by monthly sessions for the rest of the year. The lifestyle change program is designed to help you lose weight, adopt healthy habits and reduce your risk for developing Type 2 diabetes.

To see if you qualify and to register for a program:

- **Aetna Choice PPO, Custom HMO and Bronze Plan Members:** Aetna partners with Solera Health to administer its DPP. Visit solera4me.com/pebtf to take a one-minute quiz to see if you qualify. If you qualify, you can enroll right from the website or call 1-888-913-4508. You can enroll in an online program or a local community program.

- **Highmark Basic PPO Members:** Highmark members have two DPP options – an online/mobile app program offered by RetrofitSM or an in-person program offered by the YMCA. Log on to the Highmark member website found on the back of your member ID card (website link is also on www.pebtf.org). Click on Diabetes Prevention. Select either Retrofit or YMCA link.

- **Geisinger Custom HMO:** PEBTF members are able to attend any of Geisinger’s DPP classes at various community locations, free of charge. Call Geisinger Health and Wellness toll-free at 866-415-7138.
Helping Kids Be Kids

Can you remember the color of your first bike or how it felt to ride with the wind in your face and the freedom you had while on your bike? For siblings Joslyn and Tyler, riding a bike on their own was not possible . . . until now!!

Five-year old Joslyn and nine-year old Tyler recently received their very own customized bikes through Variety’s My Bike® Program. Now when asked the color of their first bike, Joslyn can scream PINK and Tyler can exclaim RED, just like other kids.

What is Variety?
Variety – the Children’s Charity provides children with disabilities with unique programs, experiences and equipment throughout 52 counties in Pennsylvania and 12 counties in West Virginia.

Quite simply, Variety strives to enable kids with disabilities to live life to the fullest with a focus on mobility, communication and social inclusion/interaction.

Variety believes that no child should be left out, left behind, or isolated, and through its programs and experiences, Variety strives to give children opportunities to discover the possibilities for their own lives and be a kid, first and foremost.

Programs
Variety’s “My Bike” Program kicked off in Western Pennsylvania in November 2012 and the success of “My Bike” led to the creation of “My Stroller” and “My Voice” in November 2014.

- **My Bike:** Provides individually-customized bikes to kids with disabilities.
- **My Stroller:** Provides on-the-go mobility through an adaptive stroller.
- **My Voice:** Provides a communications device (i.e. a restricted iPad with a prescribed app) to kids with a communication disorder to give them a voice all the time.

Nearly 3,000 adaptive bikes, adaptive strollers and communication devices have been sponsored for kids since November 2012 (that’s more than $4.8 million worth of equipment).

To Get Involved
Anyone can donate, volunteer or fundraise. Visit www.varietypittsburgh.org for more information on how you can get involved. If you know a child who may benefit, visit the Variety website for eligibility requirements and to complete an online app.
COBRA Benefits When You Retire

If you retire with enough years of service, you are eligible to enroll in the Retired Employees Health Program (REHP) medical and prescription drug benefits. The dental, vision and hearing aid coverage you have as an active employee is not offered to retirees.

But, you and your eligible dependents may continue these supplemental benefits (dental, vision and hearing aid) by electing COBRA benefits.

☑️ You must elect COBRA supplemental benefits within 60 days of your termination date.
☑️ You must continue to pay the monthly premium.
☑️ You may continue these COBRA benefits for 18 months.

Do not delay. If you do not elect within the 60 days, you lose your right to COBRA. Also, if you stop paying the monthly cost, your COBRA benefits will be terminated.

Medicare Eligible But Still Working

Many people continue to work after age 65 and are eligible for Medicare. Here is what you need to do if this applies to you:

While you are still working:

• Contact Social Security three months before you turn 65 to enroll in Medicare Part A.

• Because you are still working, you can continue to receive your PEBTF health benefits and not enroll in Medicare Part B.

• Do not enroll in Medicare Part B. While Part A is free, the Part B premium is $144.60 per month for most people so you may delay that cost until you actually retire.

When you retire:

• Approximately three months before you plan on retiring, contact Social Security and request enrollment in Medicare Part B. Request a Part B effective date of the first of the month in which you are retiring.

• If you retire with enough years of service to qualify for REHP health benefits, you will be enrolled in the REHP medical and Part D prescription drug plan.

• You must enroll in and continue to pay your Medicare Part B premium to be enrolled in REHP Medicare benefits.

If your spouse has active benefits through you and has delayed enrollment in Part B, these same rules apply. Your spouse may be eligible for Medicare but will continue to be enrolled in your active benefits. Your spouse must also notify Social Security approximately three months before you retire.
Get Healthy Resources Are Here to Help

If you are taking an active role in your health, you may be interested in the catalog of topics we have on the Get Healthy area of the PEBTF website. Past webinar and Lunch n’ Learn presentations are found there and may be accessed at any time. You’ll find a variety of topics such as Healthy Eating, Secrets to Staying Active and Tips to Quit Tobacco, just to name a few.

New to the site are quarterly Get Healthy articles written by our health coaches. Current topics include:

- Mindfulness
- Food Controversies Explained: Butter, Eggs and More
- Your Health and the Environment
- Staying Active During the Winter Months

In addition to the materials you will find on our website, you’ll be able to participate in monthly webinars and online coaching this year. Watch your emails and bulletin boards for more information.

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Beat Wintertime Tiredness

Step away that cold weather-induced fatigue! According to one study, people who walked more felt less fatigued.

Excerpt from Your Health and the Environment Article

Air pollution doesn’t just exist outside. The air indoors can become polluted just like outdoor air. To keep your indoor air safer:

- Be mindful when using chemical cleaners, paints, pesticides and glue.
- Don’t delay changing the filters in your heating and cooling systems.
- Cease smoking in your home.
- Treat asbestos and mold immediately if discovered in your home.
This newsletter may contain a general description of the Plan of Benefits (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 Summary Plan Description. The PEBTF 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.