Hi, just a reminder that you're receiving this email because you have expressed an interest in the State Health Benefit Plan.

You may unsubscribe if you no longer wish to receive our emails.

July 3, 20



News and Information for SHBP Employee Benefit Coordinators

Welcome to our e-newsletter for SHBP Benefit Coordinators in payroll locations throughout Georgia. Each month, we'll provide benefit news and information to help you assist SHBP Members in your organization. We welcome your feedback and feel free to send any comments or questions to SHBPnews@dch.ga.gov.

Here are the July updates for Benefit Managers for the State Health Benefit Plan (SHBP)

SHBP ADMINISTRATIVE SOLUTIONS TEAM (AST) AGENCY RESPONSE TIME

SHBP agencies are assigned dedicated AST Work Groups to assist with the management of member eligibility, information, and related concerns. AST Work Group response time to agency inquiries is 72 hours from the date of receipt (business days - excluding holidays).

UPDATE: EMPLOYEE TRANSFER PREMIUM DEDUCTION PROCEDURE

Some agencies voiced concern regarding the 'Process Improvement for Employee Transfer Premium Deduction Procedure' article published in the SHBP Newsletter for Employee Benefit Coordinators on June 3, 2104. Therefore, the procedure was reevaluated and revised as follows:

When the employee transfer date falls between the first (1st) through the fifteenth (15th) of the month, the agency where the employee is transferring to (the new agency) should take the employee premium deduction during the month of the transfer. If the employee transfer date falls between the sixteenth (16th) and the last day of the month (30th or 31st), the agency where the employee is transferring from (the old agency) should take the employee premium deduction during the month of the transfer.

Examples:

Employee Transfer Date	Employee Premium Deduction From	
June 6, 2014 is the employee	The NEW agency should take the employee premium	
transfer date	deduction for the month of the employee transfer.	

July 15, 2014 is the employee transfer date	The NEW agency should take the employee premium deduction for the month of the employee transfer.
July 31, 2014 is the employee transfer date	The OLD agency should take the employee premium deduction for the month of the employee transfer.
August 14, 2014 is the employee transfer date	The NEW agency should take the employee premium deduction.
September 1, 2014 is the employee transfer date	The NEW agency should take the employee premium deduction for the month of employee transfer.
September 17, 2014 is the employee transfer date	The OLD agency should take the employee premium deduction for the month of employee transfer.

The above revision was effective June 16, 2014.

PHASE 2 - SHBP ENROLLMENT PORTAL TRANSITION

AGENCY TEST FILES AND NEW TOOL INTRODUCTION

As part of Phase 2 of the SHBP Enrollment Portal transition, agencies are required to submit a Test File to SHBP's implementation partner, ADP, LLC (ADP) and agencies will be using a new tool, the State Health Repository Tool (SHRT). Agencies will receive an email the week of July 7 with detailed instructions for accessing SHRT, installing the required plug-in, and uploading a test file, if applicable. This email will be sent from 'SHBP Testing.' Please be sure to check your spam or junk mail folders if you do not receive this email by July 11. In addition to uploading a test file, agencies will also be required to test their ability to view and download files in preparation for the new processes that will go into effect on 10/1/14.

GO-LIVE AUGUST 1, 2014: COBRA AND DIRECT PAY TRANSITION

SHBP has contracted with ADP Continuation Services (ADP) for the administration of member's health care coverage continuation beginning with their August premium. Members will send their monthly premium payments directly to ADP starting with the August premium. Their first payment coupon (for your August premium) from ADP will arrive mid-July to the member's address. Please note this is not a change to the member's insurance provider.

Members will now have two ways to make payments for their premiums. They can use the return envelope enclosed with their monthly notice to send the payment coupon with a check for the balance due, or pay online for faster and more convenient payment. Details for making online secure payments will be included in the member's August premium payment coupon.

Georgia law provides that failure to pay this bill by the due date may forfeit the member's right to continue this coverage. Late payments or first direct payments may not be reflected in your current balance.

All payments for premiums due for August 1, 2014 and later, must be remitted to the P.O. Box address below. Members will submit their July premiums to SHBP as instructed on their payment coupon sent in June. Payments sent to any other address are not accepted and will be returned to the member. Members may lose eligibility for coverage if payment is not received at the correct P.O. Box by the payment due date shown on their payment coupon.

Premiums for August 1, 2014 and later, will be sent to:

ADP

Continuation Services

P.O. Box 105413 Atlanta, GA 30348-5413

REMINDER: QUALIFYING EVENTS AND SHBP COVERAGE EFFECTIVE DATE

Event	Purpose	Employee Days to Declare	Coverage Calculation Basis	ADP Coverage Effective Date	MEMS Coverage Effective Date
Admin No Pay - Stop Coverage	Allows HR Administrators with the appropriate security permission level to discontinue coverage.	Admins can only make changes up to 60 days retroactively	Occurred	Occurred	Occurred*
Admin Survivor Maintenance	Allows HR Administrators with the appropriate security permission level to modify Survivor coverage (must be a Super User, see Chpt. 8)	Admins allowed to update back to 364 days but not less than 1/1/2013	Occurred	Occurred	Occurred*
Marriage	Allows a Subscriber to add a Spouse, enroll in coverage and add any Newly Eligible Dependents (step children) to their coverage as the result of a new marriage.	31	Occurred	Occurred	1st of the month in which the event occurs
Birth	As a result of a newborn child, a Subscriber can enroll in coverage, add any Newly Eligible Dependents and change coverage options.	90	Occurred	Occurred	1st of the month in which the event occurs
Adoption	As a result of a newly adopted child, a Subscriber can enroll any Newly Eligible Dependents in coverage.	90	Occurred	Occurred	1st of the month in which the event occurs
Gain Guardianship	Allows an enrolled Subscriber to add any Newly Eligible Dependents in coverage.	31	Declaration	1st Day of the following month	1st Day of the following month
Lose Guardianship	Allows an enrolled Subscriber to delete and/or remove a Child from coverage.	31	Declaration	1st Day of the following month	1st Day of the following month
Divorce	Requires a Subscriber to remove a Spouse and any step children from coverage.	31	Occurred	1st Day of the following month	1st Day of the following month

Gains Coverage Elsewhere	If a Subscriber and/or Dependent(s) gain coverage, a Subscriber may remove Eligible Dependent(s), change coverage tier and/or discontinue coverage.	31	Declaration	1st Day of the following month	1st Day of the following month
Loses Group Coverage Elsewhere	If a Subscriber and/or Dependent(s) loses coverage, a Subscriber may enroll, add any Eligible Dependent(s) and change coverage tier.	31	Declaration	1st Day of the following month	1st Day of the following month
Dependent(s) Gain PeachCare or Medicaid	If a covered Dependent gains coverage elsewhere, a Subscriber may remove Eligible Dependent(s) and change coverage tier.	60	Occurred**	Occurred	Occurred*
Dependent(s) Loses PeachCare or Medicaid	If an eligible Dependent loses PeachCare for Kids or Medicare/Medicaid, a Subscriber may enroll any eligible dependent(s) and change coverage tier.	60	Declaration	1st Day of the following month	1st Day of the following month
Discontinue Coverage	Allows a Retiree or Survivor with coverage to discontinue coverage	0 (can only declare using current date)	Occurred	1st Day of the following month	1st Day of the following month
Medicare Attainment	Allows a Retired Subscriber to set Medicare eligibility and either elect into SHBP sponsored Medicare Advantage Plan or discontinue coverage.	90	Occurred	1st Day of the following month	1st Day of the following month
Death of Dependent	As a result of a Dependent's death, a Subscriber may remove any Eligible Dependent(s) and change coverage tier.	90	Occurred	1st Day of the following month	1st Day of the following month
Tobacco Declaration	This will allow a Subscriber to change their Tobacco Usage Indicator.	31	Declaration	1st Day of the following month	1st Day of the following month
Retiree/Survivor Address Change	This allows Retirees or Survivors to update their address.	31	Occurred***	NA	NA

^{*} Will cause error on MEMS if date is not the 1st of the month

^{**} Gain of other Government coverage should always begin on the 1st of the month

*** No changes to coverage effective dates

Note: In general, a member can only enter a Qualifying Event (QE) once the event has occurred. Meaning, members cannot declare prior to the event.

2013 HEALTH REIMBURSEMENT ARRANGEMENT (HRA) ROLL OVER DOLLARS

Effective June 1, 2014, United Health Care (UHC) and Cigna 2013 Plan Year HRA Roll Over Dollars were applied to BCBSGa HRA Dollars for Plan Year 2014.

Additional information regarding the 2014 Plan Year HRA may be accessed on the SHBP Website at https://dch.georgia.gov/documents/summary-benefits-and-coverage.

NEWS FROM BLUE CROSS BLUE SHIELD OF GEORGIA

HOUSE CALLS FOR MEDICARE ADVANTAGE MEMBERS:

House Call Coming to You!

If you think house calls are a thing of the past, think again. Blue Cross Blue Shield of Georgia (BCBSGA), on behalf of State Health Benefit Plan (SHBP), will offer house calls to all SHBP members enrolled in a Medicare Advantage (MA) plan with the help of a contracted vendor, Matrix Medical Network.

With the program, a visiting clinician will conduct - at no charge to the member - a comprehensive health evaluation, including basic health screenings, such as recording the member's height and weight, body mass index (BMI) and blood pressure, as well as reviewing the member's medications.

SHBP MA members will receive a brochure and letter asking them to take part in the hour-long, in-home visit, which is conducted by a licensed clinician. The mailers will be followed by a phone call from Matrix Medical Network to set up an appointment.

Matrix Medical Network will be conducting the exams, featuring local nurse practitioners who are familiar with local health services, including social services and doctors. They will also identify members who may benefit from follow-up care and other support services. For more information about Matrix Medical Network, visit http://matrixforme.com/health-assessments/.

Wherever this summer takes us, it's good to know our benefits will be along for the ride:

Let's remind members they can get instant access to their benefit information.

- First, they've got to register at bcbsga.com/shbp. To register, members can go to bcbsga.com/shbp and click on "Register Now." They'll need their ID card handy so they can enter their member ID numbers. Once they register, members can:
- · Check claims and benefits.
- Use health and wellness tools.
- Get discounts on contact lenses and glasses.
- Get coupons for healthy foods and much more.

Here's our flier about online tools for a quick refresher.

- Then, they can download our free app. With a quick search for Blue Cross and Blue Shield of Georgia at the app store on their mobile device, members can find and download our app. The app lets them:
 - Find doctors and urgent care centers.

- o Get driving directions from wherever they are.
- o View, email or fax an electronic version of their ID card.

Helping members understand HRA Quarterly Health Statements

To make sure our members have a full understanding of how their HRA dollars are allocated, we've created this easy-to-read flier, which includes:

- A summary of Annual Benefits
 - HRA allocation
 - Annual deductible
 - Annual out-of-pocket maximum
- Plan status (Benefit year-to-date)
 - o HRA balance
 - Amount paid to satisfy deductible
 - Amount accumulated toward annual out-of-pocket maximum
- A summary of how health care dollars were spent.
- A summary of how expenses were paid.

Statements will be posted to members' accounts on bcbsga.com/shbp. If they need additional information, members can contact our Member Services line at 855-641-4862.

Change in the State Health Benefit Plan (SHBP) design requires members to pay provider co-pays for office visits that occurred during the months of January - March 2014:

As you know, the SHBP benefit plan design was changed in March 2014 to give members immediate financial relief from the higher out-of-pocket costs that were related to the original SHBP plan. This change included replacing certain out-of-pocket co-insurance costs with co-pays for certain medical services.

Because of these changes, members are required to pay provider co-pays for services they received from January to March of 2014.

If members have had a service performed by any of the following providers or at any of the provider locations listed below during the months of January through March 2014 and did not pay any costs during those visits, then co-pays may apply:

- Primary Care*:
 - Family Practice
 - o General Practice
 - o Internal Medicine
 - Pediatrics
 - o OB/GYN
 - Specialist
- Outpatient Rehabilitation/Therapy:
 - o Physical, Speech and Occupational Therapy
 - o Cardiac Rehabilitation and Pulmonary/Respiratory Therapy
 - Mental Health and Substance Abuse Services for Intensive Outpatient Program
 - o Partial Hospitalization Program and Group Therapy
 - Emergency Room Care
 - o Urgent Care/Retail Health clinic

If members did not pay a co-pay for these services during that time or if they are unsure if they owe any of their providers a co-pay, they can:

- Register and/or log in to bcbsga.com/shbp to view their claims activity
- Contact their providers directly
- Call our Member Services line at 855-641-4862

*Please remember that preventive care visits are covered at 100%. These services must be provided by an in-network provider and properly coded as preventive care under the Patient Protection and Affordable Care Act.

Whether vacations take members across the country or around the world, they're covered, with BlueCard®.

With the BlueCard® program, members can go to doctors and hospitals almost anywhere and still be covered in-network. The BlueCard program links participating health care providers with the independent Blue Cross and Blue Shield plans nationwide and in more than 200 countries and territories worldwide. So wherever they are, this summer or anytime at all, our members have access to the care they need, when and where they need it.

BE WELL SHBP: COACH AND WIN \$100

Between now and October 31, 2014, SHBP is offering a little extra incentive to participate in the Be Well SHBP Well-Being Coaching program. Members and covered spouses, who complete a Well-Being Coaching call, between June 18 and October 31, will be entered in a drawing for a \$100 Visa gift card. That's on top of \$240 for their HRA they can earn as part of the 2014 Well-Being Incentive. 500 total gift cards will be awarded. Plus, for every call they complete between that time period they will be entered again, increasing their chances of winning. They can receive an additional entry every 4 weeks. Members will learn about this campaign through a series of emails and a postcard sent to their homes. If they previously participated in the program, they simply need to complete one call during this time period to be entered into the drawing. Complete contest rules can be found at www.BeWellSHBP.com/l-want/

How does Well-Being Coaching work?

In case you get questions about how Well-Being Coaching works, here is a quick recap. They start with a conversation with their well-being coach. There's no script. This is all about the member and what they want a little help with. It's like having a conversation with a super knowledgeable and compassionate friend who also just happens to be an experienced, trained health professional. Together they identify a goal and ways to reach it. Follow up calls are typically in 4-6 weeks and last 10-15 minutes. How many calls they schedule, and when they schedule them is up to them.

Members interested in Well-Being Coaching should call 888-616-6411.

2014 THIRD-QUARTER AGENCY TRAINING

COURSE	SCHEDULED DATES	
INFORMATION		
Business Processes	July 16, 2014	
	Topic: SHBP Enrollment Portal: Phase 2 Transition	
	Host: Georgia Department of Community Health	
	Date and Time:	
	Wednesday, July 16, 2014 10:00 am, Eastern Daylight Time	
	Event number: 665 194 967	

To join the online eve	nt
t=a&EA=IshekeII%40	vents.webex.com/dchevents/onstage/g.pl lch.ga.gov&ET=5f931a25435fc336e22576 2a3c6d71894e9ae9c7&RT=MiMxMQ==&p

Reservations are not required to participate in any of the 2014 Third-Quarter Agency Training sessions.

RESOURCES/CONTACT INFORMATION

VENDOR	MEMBER SERVICES	WEBSITE
Medical Blue Cross Blue Shield of	855-641-4862	www.bcbsga.com/shbp
Georgia		
Customer Service		
Hours: 8 a.m 8 p.m. ET; Monday - Friday		
Wellness Healthways	888-616-6411	www.BeWellSHBP.com
Customer Service		
Hours: 8 a.m 8 p.m. ET; Monday - Friday	Medicare Advantage (MA) plan members are ineligible for participation in Be Well SHBP.	
Pharmacy ExpressScripts	877-841-5227	www.express-
Customer Service	-	scripts.com/GeorgiaSHBP
Hours: 24 hours a day/7 days a week	The pharmacy benefit for Medicare	
	Advantage (MA) plan	
	members is provided	
	through Blue Cross Blue Shield of Georgia, not	
	Express Scripts.	
	Contact Blue Cross Blue	
	Shield of Georgia at 855-322-7060.	
SHBP Call Center	800-610-1863	www.mySHBPga.adp.com
Hours: 8 a.m 5 p.m. ET; Monday - Friday		
	(listen to the	
	prompts, and choose	
	employer services)	
ADDITIONAL INFORMATION	MEMBER SERVICES	WEBSITE
Centers for Medicare & Medicaid (CMS)	800-633-4227	www.medicare.gov
24 hours a day/7 days a week		
21 Hours a day, r days a trook		
TRICARE Supplement	866-637-9911	www.asicorporation.com/ga_shbp

Forward this email

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