

October 2022 Member Focus



Open Enrollment is Under Way!

(Active and Non-Medicare Members)

2023 Open Enrollment is here! Open Enrollment runs through October 28, 2022. Here's what you need to know to make the right health benefit decisions for yourself and your family and save money throughout 2023.



Action required!

All active and non-Medicare members will be automatically enrolled in the Base PPO Plan (70/30) for the 2023 benefit year. Members who wish to enroll in the Enhanced PPO Plan (80/20) or who wish to reduce their monthly premium in either the Enhanced PPO Plan (80/20) or the Base PPO Plan (70/30) by completing the tobacco attestation will need to take action during Open Enrollment.

Please note that eligible retirees continue to have a \$0 premium on the Base PPO Plan (70/30).

Here's some important highlights for 2023:

- No premium increases for the 5th year in a row!
- Members who select a Clear Pricing Project (CPP) Provider as their Primary Care Provider will continue to enjoy a \$0 copay!

- Members will continue to enjoy a reduced copay when visiting a Clear Pricing Project Specialist!
- Joint replacement bundle pricing for eligible members!
- Preferred and non-preferred insulin will have a \$0 copay for a 30-day supply!
- In-network Preventive Services remain covered at 100% – no copay or deductible – on either plan!

Please note: Although the 80/20 and 70/30 plan names have changed, these are still the same plans offered previously to State Health Plan members.

Tobacco users who want to earn their 2023 premium credit can complete a tobacco cessation counseling session at a provider's office for FREE to earn a lower premium for 2023! As a reminder, you must upload your office visit summary to ensure you receive your credit!

Tobacco users have until November 30, 2022, to take action. (If you combine your tobacco cessation visit with another service, there may be a copay.) For subscribers enrolled via the Retirement Systems, this activity is only applicable if you want to enroll in the Enhanced PPO Plan (80/20). You will need to verify if your provider offers tobacco cessation services as some providers do not offer this service.

2023 Open Enrollment Resources

[2023 Decision Guide - Active Members →](#)

[2023 Decision Guide - Active Members \(Spanish\) →](#)

[2023 Decision Guide - Non-Medicare Members →](#)

[Click here to begin your 2023 Open Enrollment! →](#)

Don't Miss Out on the Last Few Open Enrollment Webinars!

(Active and Non-Medicare Members)

The State Health Plan continues to offer several convenient in-depth Open Enrollment webinars to help you get all the information you need to make the best choice for your 2023 health plan benefits. These Open Enrollment

webinars also include information on how to complete the online Open Enrollment process.

Click the registration link below for a time that is most convenient for you! Register soon as space is limited!

WEBINAR DATES	WEBINAR TIMES
Oct. 18	4:00pm
Oct. 20	12:30pm & 4:00pm
Oct. 25	11:00am

Additional resources regarding Open Enrollment are available on the Plan's website. [Click here](#) to learn more.

Humana Medicare Advantage Plans Continue Cost Savings in 2023!

(Medicare Members)

Medicare members continue to have three options to choose from for 2023:

- The Humana® Group Medicare Advantage (PPO) Base Plan (90/10)*
- The Humana® Group Medicare Advantage (PPO) Enhanced Plan (90/10)*
- The Base PPO Plan (70/30), administered by Blue Cross and Blue Shield of North Carolina (Blue Cross NC)

All Medicare members currently enrolled in the Base PPO Plan (70/30) administered by Blue Cross NC will be automatically enrolled into the Humana® Group Medicare Advantage (PPO) Base Plan (90/10)* effective January 1, 2023. If you want to change plans or need to make changes regarding your dependents, you will need to take action during Open Enrollment, now under way through October 28, 2022.

All members currently enrolled in the Humana Medicare Advantage (Base or Enhanced) Plan (90/10)* will REMAIN on that plan for 2023. If you want to change plans or need to make changes regarding your dependents, you will need to take action during Open Enrollment. If you are covering non-Medicare dependents on the Enhanced PPO Plan (80/20) you will be required to take action during Open Enrollment to re-elect that dependent coverage.

Remember, the choices you make during 2023 Open Enrollment are for benefits effective January 1, 2023, through December 31, 2023.

If you are not currently enrolled in one of the Humana Medicare Advantage Plans (90/10), this is the time to give them another look! As a reminder:

- The State Health Plan's Humana Group Medicare Advantage Plans are EQUIVALENT to a 90/10 plan, providing you with a substantially better benefit.
- The Humana Group Medicare Advantage Plans (90/10) are different than what you can enroll in as the general public and what you see advertised on television. What the State Health Plan offers members is often BETTER and, in most cases, MORE COMPREHENSIVE coverage.
- More than 80% of eligible retirees have chosen a Humana Medicare Advantage Plan!
- Medicare Advantage plan members have already seen significant cost savings from our Humana contract, projected to save \$600 million over its three-year span.
- Eligible members will again have premium-free coverage for the Humana Group Medicare Advantage Base Plan (90/10), and it will only cost \$4 monthly to add eligible dependents – including a spouse!
- The spouse monthly premium rate is \$425 for the Base PPO Plan (70/30), which is secondary to what Medicare pays, so not only can you save on your monthly premiums on the Humana Base Plan but your out-of-pocket costs as well.
- The Humana Group Medicare Advantage Plans (90/10) have established copays for the majority of services, which helps you predict up-front costs. The Base PPO Plan (70/30) administered by Blue Cross NC pays for services after Medicare, which makes it difficult to predict your out-of-pocket costs.
- You have the ability to see providers outside the network for the same copay or coinsurance as in-network providers, as long as the provider participates in Medicare and accepts the plan under which you are covered.

Additional resources regarding Open Enrollment are available on the Plan's website. [Click here](#) to learn more!

**The Humana Group Medicare Advantage Plans have a benefit value equivalent to a 90/10 plan.*

2023 Open Enrollment Resources for Medicare Members

[2023 Decision Guide - Medicare Members →](#)

[Click here to begin your 2023 Open Enrollment! →](#)

A Few In-Person Open Enrollment Medicare Outreach Events Remaining!

In-person Medicare Outreach events will help you learn more about your 2023 health plan options and make the best choice for 2023. Each in-person event will have representatives from the State Health Plan, Humana and Blue Cross NC in attendance.

These free events will be held in various locations throughout the state through October 20, 2022.

If you cannot attend an in-person event, the Plan is also hosting several webinars and Telephone Town Halls, so you can learn more about your 2023 benefits from the comfort of your own home.

For a complete event list, Medicare members should review the Medicare Outreach Event schedule they received in the mail. RSVP online at www.shpnc.org or call 866-720-0114, Monday - Friday, between 8 a.m. - 5 p.m. ET.

[Click here to view a list of in-person events →](#)

Vaccines: Where You Get Them Determines How Much You Pay

(Humana Medicare Members)

Your Humana Group Medicare plan provides coverage for vaccines, but that coverage depends on the specific vaccine and where you get it. Knowing how your coverage works may save you from paying for vaccines out of pocket. Here are some examples:



At your provider's office

The Medicare Part B portion of your plan pays for the following vaccines at your provider's office and at the pharmacy:

- Influenza (flu) vaccine – once per season

- Pneumococcal vaccines
- Hepatitis B vaccines for persons at increased risk of hepatitis
- Vaccines directly related to the treatment of an injury or direct exposure to a disease or condition, such as rabies and tetanus

At a network pharmacy

The Medicare Part D portion of your plan covers all commercially available vaccines – **except for those covered by Part B** – as long as the vaccine is reasonable and necessary to prevent illness.

- **Important information for your pharmacist:** Let your pharmacist know to use **BIN 015581** and **PCN 03200000** when filling your prescription for items covered under Part D.

Get vaccines like the ones listed below at a network pharmacy

If you get them at your doctor's office, you'll pay the full cost of the vaccine out of pocket. Here are some common vaccines that you should get at your pharmacy, not from your doctor.

- **Shingles**
- **Tdap** (If you need a tetanus shot due to injury, Medicare Part B will cover that from your doctor.)
- **Hepatitis A**

Got questions?

Because vaccines are covered differently at the provider's office and the pharmacy, you may want to call first to understand how your insurance covers a specific vaccine. Call the Customer Care number on the back of your Humana member ID card or sign in to [MyHumana.com](https://www.mylumana.com).

Your Health Minute: Winning the Fight Against Cancer

Good news! According to the Centers for Disease Control and Prevention (CDC), U.S. cancer death rates dropped 27% from 2001 to 2020. Please see below for steps you can take to keep this dread disease on the run.

Breast Cancer Awareness Month

October is Breast Cancer Awareness Month. Other than skin cancer, breast cancer is the most common cancer among American women. Mammograms are the best way to find breast cancer early, when it is easier to treat and before it is big enough to feel or cause [symptoms](#), according to the CDC.

Fortunately, active and non-Medicare State Health Plan members have access to a wide range of preventive care services covered at 100%, including mammograms! Learn more [here](#).



**This Month's
Healthy
Recipe**



**This Month's
Wellness
Tip**



**Twice-Baked
Potatoes Casserole**

Get the Recipe! >



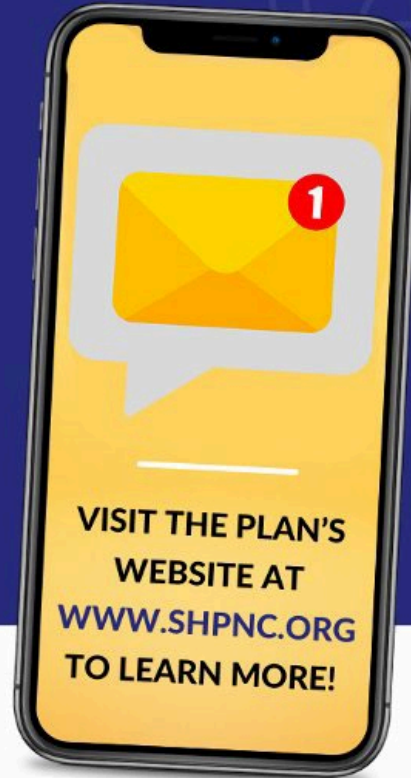
**Breast Cancer
Awareness Month**

Learn More! >

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TEXT "JOIN" TO 76971

- Sign up to receive State Health Plan updates by text! Just text "Join" to 76971.
- Text messages will be general information regarding your State Health Plan benefits.



SIGN UP TODAY

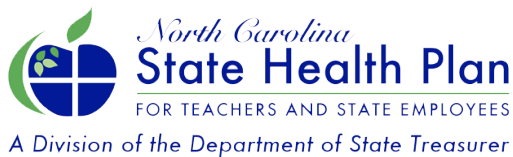


Message Frequency may vary. Message and Data rates may apply.
Reply STOP to cancel.

Eligibility and Enrollment Questions: 855-859-0966

Prescription Questions: 888-321-3124

For questions on this newsletter, e-mail: ppo.inquiries@nctreasurer.com



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