



North Carolina
State Health Plan
FOR TEACHERS AND STATE EMPLOYEES
A Division of the Department of State Treasurer



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State Health Plan 101

Closing Out 2017 - Reminders and Tips

December 2017

A Division of the Department of State Treasurer

What We're Talking About Today

- Consumer-Directed Health Plan (CDHP) Reminders
- Blue Connect Resources
- 2018 ID Cards
- Blue Options Designated Providers
- Pharmacy Benefits & Resources
- Plan Benefits for 70/30 & 80/20 Plans
- Important Phone Numbers



CDHP: Health Reimbursement Account

- The CDHP has been eliminated for 2018, so it's important to use your HRA funds by December 31, 2017!
 - Review your HRA balance by:
 - Logging into Blue Connect
 - Calling Blue Cross and Blue Shield of North Carolina at 888-234-2416
- Plan accordingly to use the remaining HRA amounts before the 2017 benefit year ends. Your HRA can be used for medical (dermatologist, physical therapy, etc.) services and prescriptions.
- HRA amounts expire on December 31, 2017, but provider claims can be submitted until March 31, 2018, for services received in 2017. This does not mean you can receive services up until March 31, 2018. Rather, this is for claims to be submitted **ONLY**. All services will need to take place by the end of December.

CDHP: Health Reimbursement Account, con't.

Steps to Access Blue Connect

- Go to www.shpnc.org and select Enroll Now/Access Benefits
- Log into eEnroll, the Plan's enrollment system.
- Once you are logged in, select Blue Connect located on the left side of your screen.
- Once Blue Connect opens, select "View All Benefits" or Select "Benefits" in the upper blue area.

The screenshot displays the North Carolina State Health Plan website interface. On the left side, there is a navigation menu with the following items: Home, Profile, Benefits, Dependents, Language Preferences, MANAGE ACCOUNT (with sub-items: Login Information, My Documents, Medicare, View Tax Documents, Life Change, Select or Update Primary Care Provider), QUICK LINKS (with sub-items: CVS Caremark, BlueConnect, Learning Center), and High Contrast Mode (set to OFF). The 'BlueConnect' link is highlighted with a red rectangular box. The main content area on the right shows a header with the text 'Important Messages for You' and a message titled 'Dependent Verified' stating 'Dependent status has been verified for ANDREW HORNER and MEREDITH HORNER.' Below this is a section asking 'Have you experienced a life change that requires you to edit your benefits?' with a 'Get Started >' button. At the bottom, there is a 'Benefits Snapshot' section with tabs for 'Open Enrollment Benefits' and 'Current Benefits'. The 'Current Benefits' tab is active, showing a list of benefits: 'Medical' (70/30 PPO Plan | Employee and Children | Effective as of 01/01/2018), 'NCFlex Accident Plan' (Coverage Declined), and 'NCFlex Health Care ESA'.

Blue Connect Resources

Blue Connect allows you to:

- Review your benefits and processed claims
- Review your deductible and out-of-pocket balances
- Review the Health Care Summary Report, which supplies a one-page view of Benefit Usage, Health Expense Summary and Claims
- Find a doctor or Blue Options Designated Specialist
- Cost Estimator
- Request an ID Card and/or print a temporary ID Card
- Access Blue365 Discount Program

The screenshot shows the Blue Connect website for North Carolina State Health Plan. The header includes the NC Blue Connect logo, a search bar, and user information: "Welcome, C.R. State Test Member | Log Out". The navigation menu includes Home, Benefits, Claims, Doctors & Facilities, and Wellness. A sidebar on the left has links for Profile and HealthNAV. The main content area features a "BENEFITS" section with a gauge showing \$0.00 out of a \$1,500 deductible, and a "CLAIMS" section with a link to "View All Claims". Below this is a "Things You Should Know" sidebar and a grid of service tiles: "Find in-network care, wherever you are" (Find a Doctor), "Estimate the cost of care covered by your plan" (Compare Costs), "Know What You Owe" (Explanation of Benefits), "Reduce Your Costs" (Health care tips), "Find Urgent Care", and "Need an ID Card?". The Blue365 logo is visible in the bottom right corner.

Tips and Reminders

2018 ID Cards

- If your plan option or any other changes were necessary, you will receive a new ID card.
- If you have not already received your new ID card, it will be arriving soon.
- Review the Subscriber name, Plan option and PCP/Practice to ensure that your information is correct.
- Make sure to present your new ID card to your medical and pharmacy providers.
- The 2017 card should be replaced with the new 2018 member ID card.
 - The PCP/Practice section should reflect the location where you intend to visit your PCP, in order to receive the \$10 copayment for the 80/20 Plan.
 - The Plan section should reflect the plan you select during Open Enrollment.

SAMPLE

Subscriber Name:
JOHN A SMITH
Subscriber ID:
YPYW00000000

PCP/Practice:
Ami Patel
Ami S. Patel, M.D.
910-313-6954

BlueOptions 80/20



UNC Wilmington
01 Group No: S25013
RXBIN 004336/RXPCN ADV/RXGRP RX0274
Date Issued: 01/01/18

In-Network Member Responsibility:

Selected PCP \$10
PCP/MH/SA \$25
Designated Spec \$45
Specialist \$85
PT/OT/ST/Chiro \$52
Urgent Care \$70*
ER \$300*+Ded & 20%

*Same for out-of-network

Blue®



SAMPLE

Blue Options Designated Providers (80/20 Plan)

- This program is available to members on the 80/20 Plan
- Blue Options Designated specialists and facilities refer to hospitals and providers who meet certain levels of criteria which include delivering quality health outcomes, cost effectiveness and accessibility by members. The criteria is set forth by BCBSNC.
- The specialties in which you may find a Blue Options Designated Provider:
 - General Surgery
 - OB-GYN
 - Orthopedics
 - Cardiology
 - Neurology
 - Endocrinology
 - Gastroenterology

Wellness Activity	Reduced Copay
Visit the PCP listed on your ID card or another provider in the same practice	\$10 copay
Visit a Blue Options Designated Specialist	\$45 copay
Get inpatient care in a Blue Options Designated Hospital	\$0; copay not applied

Blue Options Designated Providers (80/20 Plan)

How to locate a Designated Specialist:

- Go to www.shpnc.org and click “**Find a Doctor**” on the green tab
- Select the plan in which you are enrolled
- Select Find a Doctor or Facility
- Select “NC State Health Plan,” then “Go”
- Click “Get Medical Care,” then select a provider
- Select “Specialist,” then select type of Specialist or search within search field.
- Once the list generates, look for green box “**Designated for Cost and Quality**”
- The 2018 Blue Options Designated Hospital List is also available on the Plan’s website under 2018 information.

The screenshot shows the top navigation bar of the North Carolina State Health Plan website. The 'Find a Doctor' link is highlighted with a red box, and a red arrow points to it from the right. The page content includes the heading 'Looking for 2018 State Health Plan Information?' and a link 'Find Important Information Here'.

For help in finding Blue Options Designated Providers
call 888-234-2416.

Pharmacy Benefit Reminders

- Pre-authorization expiration notices will be mailed 30 days in advance to you and your provider. Make sure your provider has addressed the notice to avoid any prescription interruptions.
- Tier Changes – Drug Formulary reviews are completed on a quarterly basis, which may result in a prescription tier level change.
- If there are any negative tier changes, you will receive a notice 30 days in advance. Should you receive a notice, review the 2018 Preferred Drug List and the Refer members to Comprehensive Formulary List located on the State Health Plan website (www.shpnc.org) and discuss alternatives with your provider.



Pharmacy Online Tools & Resources

- **CVS Caremark Mobile App**

- Refill and renew mail service prescriptions
 - Access a pill identifier
 - Check or inquire about any possible drug interactions with prescription and over-the-counter medications.
 - Check drug order status and history
 - Obtain drug cost
 - Find local pharmacies
- The application can be used on any smart device and obtained via Apple App Store, Google play or www.caremark.com

Pharmacy Online Tools & Resources, con't.

- **Online Drug Lookup Tool**

- This tool lets you look up and compare the costs of various drugs.
- Located on the State Health Plan website at www.shpnc.org.

- **Online Pharmacy Locator Tool**

- This tool lets you look up the pharmacies within the broad CVS Caremark network.
- Located on the State Health Plan website at www.shpnc.org.

- **Other Online Resources**

- Comprehensive Formulary List
- 2018 Preferred Drug List
- Specialty Pharmacy Drug List
- ACA Preventive Drug List

2018 70/30 Plan Benefits

	2018 In-Network	2018 Out-of-Network
Annual Deductible	\$1,080 Individual \$3,240 Family	\$2,160 Individual \$6,480 Family
Coinsurance	30% of eligible expenses after deductible	50% of eligible expenses after deductible and the difference between the allowed amount and the charge
Medical Coinsurance Max	\$4,388 Individual/ \$13,164 Family	\$8,776 Individual/ \$26,328 Family
Pharmacy Max	\$3,360	\$3,360
Out-of-Pocket Max	N/A	N/A
ACA Preventive Services	Cost-Sharing Applies (\$40 for Primary Care \$94 for Specialists)	Only certain services are covered
<u>Office Visits</u> PCP Copay	\$40	50% after deductible
<u>Office Visits</u> Specialist Copay	\$94	50% after deductible

2018 70/30 Plan Benefits

	2018 In-Network	2018 Out-of-Network
Urgent Care	\$100	\$100
ER <i>(Copay waived w/ admission or observation stay)</i>	\$337, then 30% deductible	\$337, then 30% deductible
Outpatient Hospital	30% after deductible	50% after deductible
Inpatient Hospital	\$337, then deductible/30% coinsurance	\$337, then deductible/50% coinsurance
Therapy Services (Chiro/PT/OT)	\$72 Copay	50% after deductible
Drugs		
Tier 1 (Generic)	\$16	\$16
Tier 2 (Preferred Brand & High-cost Generic)	\$47	\$47
Tier 3 (Non-preferred Brand)	\$74	\$74
Tier 4 (Low-cost/Generic Specialty)	10% up to \$100	10% up to \$100
Tier 5 (Preferred Specialty)	25% up to \$103	25% up to \$103
Tier 6 (Non-preferred Specialty)	25% up to \$133	25% up to \$133
Preferred Diabetic Supplies*	\$10	\$10

2018 80/20 Plan Benefits

	2018 In-Network	2018 Out-of-Network
Annual Deductible	\$1,250 Individual \$3,750 Family	\$2,500 Individual \$7,500 Family
Coinsurance	20% eligible expenses after deductible	40% of eligible expenses after deductible and the difference between the allowed amount and the charge
Medical Coinsurance Max	N/A	N/A
Medical Out-of-Pocket Max	\$4,350 Individual \$10,300 Family	\$8,700 Individual \$26,100 Family
Pharmacy Out-of-Pocket Max	\$2,500 Individual \$4,000 Family	\$2,500 4,000 Family
Total Out-of-Pocket Max (Includes Deductible)	\$6,850 Individual \$14,300 Family	\$11,200 Individual \$30,100 Family
ACA Preventive Services	Covered at 100%	Dependent on Service
Office Visits		
Selected PCP	\$10	40% after deductible
Non-selected PCP	\$25	
Office Visits		
B.O.D. Specialist	\$45	40% after deductible
Non-B.O.D. Specialist	\$85	

2018 80/20 Plan Benefits

	2018 In-Network	2018 Out-of-Network
Urgent Care	\$70	\$70
Emergency Room <i>(Copay waived w/ admission or observation stay)</i>	\$300, then 20% after deductible	\$300, then 20% after deductible
Outpatient Hospital	20% after deductible	40% after deductible
<u>Inpatient Hospital</u> B.O.D.	\$0, then 20% after deductible	
Non-B.O.D.	\$450, then 20% after deductible	\$450, then 40% after deductible
Therapy Services (Chiro/PT/OT)	\$52	40% after deductible
Drugs		
Tier 1 (Generic)	\$5	\$5
Tier 2 (Preferred Brand & High-cost Generic)	\$30	\$30
Tier 3 (Non-preferred Brand)	Deductible/Coinsurance	Deductible/Coinsurance
Tier 4 (Low-cost/Generic Specialty)	\$100	\$100
Tier 5 (Preferred Specialty)	\$250	\$250
Tier 6 (Non-preferred Specialty)	Deductible/Coinsurance	Deductible/Coinsurance
Preferred Diabetic Supplies*	\$5	\$5

Reminders

- Review your pay statement for your December pay check. Premiums are deducted a month in advance, so it's always best to confirm the initial deduction for accuracy. Discuss any deduction concerns with your Human Resources Department as soon as possible.
- Confirm your address and contact number(s) within eEnroll for accuracy.
- Visit the Webinar Library for previous State Health Plan 101 webinars. There are various benefit related recordings and presentations available for your review. Find it on the State Health Plan website under Stay Connected and State Health Plan Webinar Library.

Any Questions?



- **ELIGIBILITY AND ENROLLMENT Support Center**
855-859-0966
- **CVS CAREMARK (PHARMACY BENEFITS)**
888-321-3124
- **BLUE CROSS AND BLUE SHIELD OF NC**
(BENEFITS, CLAIMS and HRA)
888-234-2416





Thank You!



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www.shpnc.org

www.nctreasurer.com