What's Important for 2019?

PEIA

PEIA PPB Plans

All PEIA PPB Plans Active employees and non-Medicare Retirees:

- No Premium Increase
- No Benefit changes
- Plans remain at 2018 benefit levels
- "State plan" premium structure remains at 2018 design with 10 index codes
- No total family income
- Cancel implementation of Employee and Spouse coverage tier
- Family with Employee Spouse coverage tier remains
- Telehealth copay reduced to \$30/visit

Special Medicare Plan and Humana Plans: (For Calendar Year 2019)

- No Premium Increase
- No benefit changes
- No changes to PEIA Retiree Premium and Benefit Assistance program
- For Special Medicare Plan only: Telehealth copay reduced to \$30/visit

Healthy Tomorrows

Plan Year 2019 (begins July 1, 2018) PPB Plan policyholders who met the Healthy Tomorrows requirements for the current plan year (biometric screening with results in range reported before the end of open enrollment in 2017) will receive a PASS and will not have to complete biometric screenings before the end of next open enrollment (May 15, 2018).

Policyholders who did not meet the Healthy Tomorrows requirements for this plan year still have to meet the requirements by May 15, 2018: Bloodwork done between April 2, 2017, and May 15, 2018, with values in the acceptable range or a Doctor's certification that the numbers can't be met for a medical reason.

The penalty for not meeting these requirements will be the same as in previous years, \$500 added to your medical deductible for Plan Year 2019.

Plan Year 2020 (begins July 1, 2019) The Healthy Tomorrows initiative will continue for Plan Year 2020 with the same requirements that were in place for Plan Year 2019. Members must have their biometric screening, report the results, and have their numbers within the acceptable range or have a physician's certification that the numbers cannot be met for a medical reason. The reporting form is printed at the back of this Shopper's Guide and can be used to report bio- metric test results collected anytime from April 2, 2018, to May 15, 2019, to avoid the \$500 penalty deductible for Plan Year 2020.

Annual Physical

PEIA covers an annual physical for members at no cost. There is a form at the back of this Shopper's Guide that you may take to your annual physical office visit; it explains what is covered in full as a part of the visit, and how the physician's office needs to bill to have the visit reimbursed correctly.

Rx Savings Solutions Offers Innovative Program

As part of your PEIA health insurance plan, you and your dependents have access to Rx Savings Solutions. Rx Savings Solutions helps members save money on their prescriptions by analyzing claims data, then reaching out to members with specific suggestions. Once the member has registered with Rx Savings Solutions, the tool will provide recommendations on alternative medications that perform the same or better in clinical trials but with a lower out-of-pocket price.

• Visit <u>rxsavingssolutions.com</u> or call **1-800-268-4476** for more information.

iSelectMD Telehealth Benefit

Telehealth allows you to connect with a physician via phone or video chat when you have a non-emergent medical condition that needs treatment. With just one simple phone call, members are connected to state licensed, board-certified physicians who are ready to resolve non-emergency health issues 24 hours a day for a \$30 copay.

iSelectMD physicians treat many non-emergent illnesses, for example:

- Sinus Infections
- Bronchitis
- Cold & Flu
- Ear Infections
- Sore Throat
- Pink Eye
- Gastroenteritis
- Urinary Tract Infections
- iSelectMD is available anytime and anywhere youtravel.
- iSelectMD encourages everyone to have a primary care physician and does not replace your existing primary care physician. Please note that WV law requires that the first visit be done face-to-face via web cam or cell phone video chat.
- iSelectMD requires a Medical History Disclosure to be completed prior to your first consultation. This may be completed online at www.iSelectMD.com using access code WV1144 or by calling customer care at 1-877-775-3006.

- Depending on time of day or call volume, iSelectMD physicians dedicate themselves to return calls with-in 30 minutes from the time they receive the request.
- iSelectMD physicians reserve the right to write prescriptions when deemed appropriate, but do not prescribe DEA controlled substances or certain other drugs that may be harmful due to potential abuse. To learn more, visit iSelectMD.com or call 1-877-775-3006 ext. 1.

The Health Plan HMOs and PPO

- The Health Plan is an available option in all 55 W.Va. Counties for active employees and retirees without Medicare.
- The Health Plan is headquartered in Wheeling, W.Va., and has offices in Morgantown and Charleston, W.Va.
- The Health Plan will continue to offer three plan designs: HMO Plan A, HMO Plan B, and PPO Plan C.
- There are NO benefit or copay changes effective July 1, 2018 June 30, 2019.
- Please review this Shopper's Guide for a complete listing of benefits or call The Health Plan at (888) 847-7902, email information@healthplan.org, visit www.healthplan.org, or attend a benefits fair near you.

Has your address changed? Let PEIA know!

If your address has changed, you can update your records with PEIA by sending the address change in writing to 601 57th St., SE, Suite 2, Charleston, W.Va. 25304-2345 or by going on the agency's website, www.wvpeia.com, and logging into Manage My Benefits. PEIA DOES NOT accept address

changes over the phone.

Mountaineer Flexible Benefits

Note: You must complete form to make any change (add, cancel or change plans). If not action, all coverage will remain the same.

What's New?

Get ready for benefits open enrollment! Here's what's changing for your upcoming Mountaineer Flexible Benefits Plan Open Enrollment:

- ARAG Group Legal will now administer your group legal plan with a decrease in your premium. See details on page 18.
- If you are currently enrolled in legal coverage, you do not need to re-enroll. Your benefit will roll over to the new ARAG Legal coverage.

- Effective July 1, 2018, your vision rates are increasing. Walmart and SAMS Club are now included as in-network providers.
- Mountaineer Flexible Benefits participants who are paid through OASIS will have two deduction holidays starting July 1, 2018.
- The maximum Healthcare FSA contribution increased to \$2,650. See page 20 for details.
- The 2018 annual HSA contribution limit for individuals with self-only HDHP coverage will be \$3,450 a \$50 increase from 2017.
- The 2018 limit for individuals with family HDHP coverage will be \$6,900 a \$150 increase from 2017.