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President Obama refers to Geisinger as a model for health care reform

In several speeches on health-care reform, President Obama cited Geisinger Health System as a model for high quality care at lower than average costs. He said health-care providers nationwide have to look at places like Geisinger and learn from our success. The speeches were given before the American Medical Association in Chicago and during a town hall meeting in Green Bay.

Geisinger Health Plan has worked for several years with Geisinger’s clinicians to improve the quality of care our members receive. Through this partnership, unique programs including Health Navigator, our medical home program, and Proven Care™ were developed (see below for descriptions). Both programs focus on improving the quality of care members receive while helping to control health-care expenses.

“We have always been focused on providing high quality to our members. We believe that quality and efficiency can go hand in hand,” says Duane Davis, M.D., chief medical officer for Geisinger Health Plan. “It is an honor to be cited by the President and a tribute to all our employees who work hard to make sure our members get the best care and service.”

This is not the first time Geisinger Health Plan has received national recognition. GHP was named “Outstanding Health Plan” in 2008 by the nation’s premier disease management trade group, DMAA: The Care Continuum Alliance. GHP was also ranked #5 in the nation according to the U.S. News & World Report/National Committee for Quality Assurance (NCQA) America’s Best Health Plans 2008-09 list*.

*America’s Best Health Plans 2008-09 is a trademark of U.S. News and World Report.

About Health Navigator

Health Navigator is a combined effort between primary care providers and GHP to improve members’ health by providing guidance through the sometimes complex world of health care. It’s also known as a



“medical home.” A team of health care providers led by the member’s primary care physician coordinates care, whether members:

- Are healthy
- Have a new health-care issue
- Have ongoing or complex health care concerns

About ProvenCare™

ProvenCare is the commitment to providing the best possible care every time. There are three main components to Geisinger’s ProvenCare surgeries and procedures:

- A series of best practices that are agreed upon and followed by all physicians and surgeons
- A system of checks and balances that holds various members of the surgical team responsible for elements of the patient’s care
- A flat fee—neither the patient nor Geisinger Health Plan pay for avoidable complications within 90 days of the procedure

This system was put in place to minimize errors and complications while maximizing a patient’s outcome. ProvenCare programs are available for coronary artery bypass graft (CABG), hip replacement, cataract surgery, PCI/ angioplasty, perinatal care, bariatrics, low back pain and erythropoietin management.

Benefit changes and options

These benefit changes were effective 4/1/09 and upon an employer group's renewal.

Diabetic Test Strips

Lifescan test strips, limited to 1 box of 100 strips per copayment (One-Touch, One-Touch Ultra, Surestep, and FastTake) and lancets are covered.

Outpatient Opioid Detoxification Treatment

Benefit limit of an uninterrupted four month period per member lifetime when provided by a participating behavioral health provider. Subutex and Suboxone are covered as part of this treatment if the member has a GHP drug rider. If the member does not have a GHP drug rider, the detox sessions are covered, but Subutex or Suboxone are not covered.

Select Free Generic Drug Program

Members will pay a \$0 copay for certain generic drugs as part of Tier 1. All other Tier 1 drugs will have applicable copay applied. Deductible applies first, if applicable.

New options available to employers

Eyewear Rider

Members can submit claims for reimbursement up to \$200 benefit maximum every two years. Applies to prescription glasses, contact lenses, lens tinting, progressive lenses, anti-reflective coating, etc. The eyewear rider is not offered for HDHP plans.

Employee Assistance Program (EAP)

Members and their families can receive 24 hour/7 days a week access to telephonic help line with trained counselors, 3 sessions per benefit year with a behavioral health provider, referral to legal and financial advisors. Services provided by the Health Plan's behavioral health provider. The Health Plan offers competitive pricing. Call your sales rep for more information.

Autism Update

In accordance with Pennsylvania Act 62, effective 7/1/10 or upon renewal, employers with a group size of 51 or more employees are eligible for coverage for the treatment of Autism Spectrum Disorders.

For example, if your group's renewal date is February 1, 2010, the new autism requirements will be effective for your group as of February 1, 2010. Please contact your Health Plan representative for additional details regarding this benefit.

For information on Act 62, please see <http://www.dpw.state.pa.us/ServicesPrograms/Autism/Act62>

Mental Health Parity

The Federal Mental Health Parity Act requires insured and self insured plans to provide "parity" between the financial requirements and treatment limitations applied to mental health and substance use disorder benefits and medical and/or surgical benefits.

The new act is effective 11/1/09 or upon renewal for employers with a group size of 51 or more employees. This means that if your groups renewal date is February 1, 2010, the new mental health parity requirements will be effective for your group as of February 1, 2010.

Improve employees' health awareness with our Health Risk Assessment

Geisinger Health Plan offers a Health Risk Assessment (HRA) on our Web site, thehealthplan.com. It's designed to help your employees create a wellness profile and improve their overall health awareness. It includes a series of 50 questions about health status and behaviors. Answering these questions will help your employees support current healthy habits and guide them to new ones.

After completing the HRA, a wellness profile is generated for members based on their answers. The profile will include what a member is doing well, and what areas can be improved. The profile will also give the member target goals to meet in the areas that need improvement.

Employers who have 50 or more of their employees complete the HRA can receive a report of the aggregate results. Employers can use this data in many ways, such as helping generate wellness programs geared at improving specific problem areas for their employees.

The HRA is geared toward adults age 18 and older. It takes about 10 minutes to complete and individual results are kept completely confidential.

In order to receive the most accurate results from the HRA, it's a good idea for members to have recent health information available such as blood pressure, cholesterol level, height and weight. It is also beneficial, although not required, to have the dates of their most recent preventive health services on hand. These include colon cancer screening, rectal exam, flu and tetanus immunizations, blood pressure and cholesterol screenings. Women



should know the date of their last Pap test, mammogram and breast exam.

Geisinger Health Plan offers the HRA through our partner, Optum Health, which offers many other valuable resources that can be used in conjunction with the HRA or on their own.

Accessing the Health Risk Assessment is easy! Employees can simply go to thehealthplan.com and enter their user id and password, and select Health and Wellness from the left navigation bar, then select Wellness Programs, and click on the online health risk assessment.

If you have any questions or would like your employees to participate in the HRA, please call our Wellness Department at (570) 214-9018 or 1-866-415-7138.

Mini-COBRA

What is "Mini-COBRA"?

Mini-COBRA, or Act 2 of 2009, is a new law in Pennsylvania that gives employees of small businesses (2-19 employees) who receive health insurance from their employers, the right to purchase continuation health insurance after they leave employment. It allows eligible employees and dependents to purchase health insurance for nine months after their employment ends.

Why is it called "Mini-COBRA"? Is it different from federal COBRA?

Mini-COBRA is modeled after federal COBRA law, but with some important differences. The federal COBRA law allows employees at larger businesses (20 or more employees) to purchase continuation health coverage after they leave employment for 18 months (or, in some cases, 36 months) after their employment ends. Pennsylvania's Mini-COBRA applies to employees of smaller businesses (2-19 employees) and it is for a shorter length of time (nine months).

What is the effective date of the Mini-COBRA act?

The act was effective July 10, 2009. For more information on Mini-COBRA, or Act 2 of 2009, please visit the Department of Insurance Web site at www.ins.state.pa.us

Customer Service information available 24/7

The customer service team has three ways to serve your employees

- Between 8 a.m. and 5 p.m. Monday through Friday, employees can call the numbers on the back of their ID card to speak to one of our agents.
- Any time of the day or night, employees can visit thehealthplan.com and sign in to our secure member section to view claims, benefits, and eligibility information, along with many other useful services and tools.
- Is it after our normal business hours or your employees do not have access to computer? A new service allows them to receive important information through our automated toll-free customer service numbers. The number is located on the back of their ID card. An Interactive Voice Response system (IVR) can assist in obtaining claims, benefit and eligibility information. Employees just need to have their 11-digit ID number handy when they call, found below their name on their ID card.



Send us your e-mail

You can forward your comments or suggestions about this newsletter to:

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