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New newsletter format

This is the first revised edition of Geisinger Health Plan's Business Update. This new format will provide both businesses and brokers with information about Geisinger Health Plan and Geisinger Choice products and services, news and information, as well as general health insurance information.

We hope you enjoy our newly updated newsletter. You can forward your comments or suggestions about this newsletter to businessupdate@thehealthplan.com

Important information is a click away

Registered businesses, brokers and members have access to a number of powerful tools at thehealthplan.com.

These tools allow our clients, brokers and members to get the most from their benefits and play a more active role in their health care.

Information for businesses

- Forms
- Benefit documents
- Update your company profile
- Change your password
- Resources, forms & newsletters
- Helpful information
- Member health & wellness information

Information for brokers

- Online quoting & rates
- Broker manual, guidelines and commissions
- Resources, forms & newsletters
- Member health & wellness information
- Update your profile

Member information

- Customer service contact numbers
- Provider and pharmacy search
- List of covered drugs
- View eligibility/policy history
- View claims, authorizations and family/dependents and benefits

The New York Times features GHP

The June 22, 2010 edition of The New York Times featured the Geisinger Health Plan Health NavigatorSM program.

The article, called *A Health Insurer Pays More to Save*, features Geisinger Health System Chief Executive Officer Dr. Glenn D. Steele Jr., Geisinger Health Plan Vice President of Health Services Janet Tomcavage, a GHP case manager and a member.

As part of the Health Navigator program, GHP

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- Change PCP and request new member identification card
- Create and review your Personal Health Record
- Take a Health Risk Assessment
- Review and update personal profile
- Benefit documents
- Review the benefits your plan covers and your member handbook
- Member discounts
- Wellness information
- Quality ratings
- Frequently asked questions
- Member newsletters
- Live chat with a Tel-A-Nurse
- Estimate the cost of a medical procedure

To become a registered member of Geisinger Health Plan's Web site, log onto thehealthplan.com and click the registration button. Please have your member identification card available when you register.

PPACA changes to your benefits

The health-care reform changes passed under the Patient Protection and Affordable Care Act (PPACA) are already being implemented. The following benefit changes are effective October 1, 2010 and upon an employer group's renewal. For example, if an employer group's plan year renews January 1, the changes noted below become effective for that group on January 1.

Dependent coverage up to age 26

Dependent coverage up to age 26 will become part of a group's benefit design when they renew on or after October 1, 2010. Any group renewing prior to October 1, can purchase this benefit in advance of the mandate. In addition, GHP also offers employer groups a rider to cover dependents up to age 30.

Additional reform changes will also become effective on October 1 including no pre-existing conditions for children under 19, no lifetime limits, and no cost sharing on preventive services. More detail will be available in the next Business Update.

Companies that offer an HRA, FSA or HSA will also experience changes. The following benefit changes are effective January 1, 2011.

Limitation of OTC Coverage

Beginning on January 1, 2011, many over-the-counter (OTC) drugs and medicines will no longer be eligible for reimbursement through an HRA, FSA or HSA, unless accompanied by a letter of medical necessity or doctor's directive.

The OTC limitation is on drugs and medicine only. Other OTC items such as bandages and contact lens solution are still eligible.

OTC items that are no longer eligible will be removed from the Inventory Information Approval System (IIAS). Members will not be able use their Healthcare Payment Card to purchase these items at retailers using the IIAS. Payment cards will still be accepted at merchants that allow non-eligible items on the payment card for HSAs.

For a complete list, log on to connectyourcare.com/otc.

HSA Non-Qualified Distribution Penalty

Also beginning on January 1, 2011, the penalty on HSA distributions that are not used for qualified medical expenses will be increased to 20% (up from 10%) of the disbursed amount.

For more information, contact your Geisinger Health Plan representative.

Accessories Program-new member discounts added

Geisinger Health Plan and Geisinger Choice members have access to a number of discounts on health-care products and services offered through our Accessories Program.

The Health Plan has now expanded our Accessories Program to include a discount on breast pumps and related breast feeding supplies through breastpumpdeals.com. To access the discount, a member may participate in the live chat feature on the Web site or call.

In addition, members can also enjoy a 10% discount off lift tickets and equipment rentals at Sno Mountain and \$10 off admission to Sno Cove in Scranton. To receive the

discount, members need to show their member identification card and a driver's license.

The Accessories Program offers discounts on fitness center memberships, massages, eyeglasses, vision care, and sporting equipment and activities. A complete list of the discounts available through the Accessories Program can be found in the member section of our Web site, thehealthplan.com.



Photo courtesy of Jupiterimages

Times *(Continued from page 1)*

provides a case manager to work closely with the member, their family and their health-care providers. The case manager provides resources to help members better manage their health conditions and navigate through the sometimes complex health-care system. In addition, the case manager also works with the health-care team to coordinate care with hospitals, specialists, pharmacists and skilled nursing facilities. This program has significantly reduced the number of hospital admissions and readmissions.

To read the article, go to nytimes.com and type "Geisinger" in the search box. In addition, a slide show, explaining the program, is also available online.

HUP now a participating provider

The Hospital of the University of Pennsylvania (HUP) is now a participating provider with Geisinger Health Plan. The agreement, effective on June 1, 2010, includes the Hospital of the University of Pennsylvania, University of Pennsylvania-Presbyterian and the Pennsylvania Hospital.

The new agreement includes Geisinger Health Plan, Geisinger Choice and Geisinger Gold (Medicare Advantage).

The agreement also includes more than 1,300 physicians in addition to the three hospitals.

Pre-existing conditions exclusion removed

As of June 1, 2010, GHP will no longer exclude coverage for pre-existing conditions on groups with 2-15 eligible employees.

Members and their dependents who were identified as having a "pre-existing" condition when they enrolled, have been contacted along

with their employer. As a result of this change, any covered services related to pre-existing conditions with a date of service of June 1, 2010, or later will be covered.

If you have any questions, please call our small business service center at (800) 554-4907.

Grandfathered plans clarified

The Department of Health and Human Services has issued clarification around grandfathered plans. Grandfathered plans are group or individual health plans in which a beneficiary was enrolled on or before March 23, 2010. Grandfathered plan rules are designed to encourage employers to retain benefits at or near current levels.

Grandfathered status exempts a plan from some, but not all of the new requirements. For example, grandfathered plans will still be subject to:

- Limitations on lifetime and annual coverage dollar limits
- No denial of coverage to children under age 19 because of pre-existing conditions
- Prohibitions on coverage rescissions, except in cases of fraud or blatant misrepresentation
- Coverage of adult children (including those who are married) up to age 26
- New employer penalty (mandate)
- Requirement to provide employee free choice vouchers, when applicable

Some of the exemptions include:

- No cost-sharing for preventive services
- Premium rating limitations
- Guaranteed issue and renewability
- Requirement to provide an avenue for external review of health plan appeals
- Requirement to provide "minimum essential coverage"
- Individual responsibility requirements

The following changes would cause a plan to lose grandfathered status:

- A significant cut or reduction in benefits for specific conditions
- Raising the percentage of coinsurance
- Significantly raising deductibles or fixed co-payment charges.
- Reducing employer contributions

For more information, visit the healthplan.com and click on news and select Health Care Reform.

Early retiree reinsurance program set up in PPACA

The Patient Protection and Affordable Care Act which was signed into law on March 23, 2010 includes a provision that establishes the temporary Early Retiree Reinsurance Program. The program is available to employer groups who meet established criteria. The Early Retiree Reinsurance Program became effective on June 1, 2010, and offers financial help for employer groups to continue to provide coverage to plan participants. It also provides financial relief to certain qualifying plan participants.

Employers who are eligible to participate in this program must submit an application the Department of Health and Human Services. The Health Plan can provide employers with information that is required by the application.

In you are in need of the information required for the Early Retiree Reinsurance Program application, contact your Geisinger Health Plan representative.

GHP CEO Jean Haynes chosen for advisory council

Geisinger Health Plan (GHP) CEO Jean Haynes was selected by the Pennsylvania Office of Health Care Reform to sit on the Health Care Reform Implementation Advisory Council. This external advisory group will help implement many of the key elements of the federal health-care reform act.

"It is an honor to be selected for the Advisory Council," said Haynes. "The passage of national health-care reform is monumental and I am very excited to provide my expertise."

The advisory committee is comprised of insurance industry executives, hospital representatives, medical professionals, large and small purchasers, unions, health and budget policy experts, and consumers. They are charged with identifying best practices in health care, and reviewing and providing feedback to the administration on its findings, recommendations and strategic plans.

Prior to joining Geisinger Health Plan in 2009, Haynes was Executive Director of Boston Medical Center HealthNet Plan, a 250,000 member health plan in Massachusetts. In 2006, Massachusetts passed a health-care reform bill similar to the national reform passed in March.



Send us your e-mail

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

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