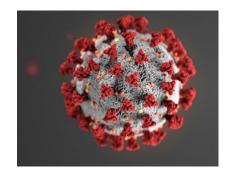
April 2021 Member Focus



COVID-19 Update for Plan Members

(70/30, 80/20 & HDHP Members)

The COVID-19 vaccination is the best shot at stopping COVID-19! Remember: If you have a spot, take your shot. A tested, safe and effective vaccine is available to all who want it, and it's free! To learn more about the vaccine, visit Find a Spot to Take Your Shot. For more on your State Health Plan COVID-19 benefits, visit the Plan's COVID page.



For members on the 70/30 Plan, 80/20 Plan and High Deductible Health Plan (HDHP), the State Health Plan has been waiving the cost of treatment (medical only) for members diagnosed with COVID-19, including associated deductibles, copayments and coinsurance.

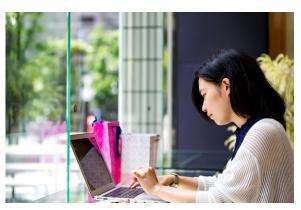
The State Health Plan has decided to extend the waiver until June 30, 2021.

The State Health Plan is dedicated to assisting our members through this global pandemic and is encouraged by continued improvement in vaccine availability.

For more on your State Health Plan COVID-19 benefits, visit the Plan's <u>COVID</u> page.

Reminder: Keep Your Contact Information Current! (All Members)

It is important that the State Health Plan has your updated contact information so we can communicate with you on a regular basis about your health plan benefits. It is **critical** that you have a valid address, phone number and email address in the Plan's enrollment system, <u>eBenefits</u>, to ensure you are receiving important health plan information in order for you to maximize your benefits all year long.



You can easily access <u>eBenefits</u> from the State Health Plan's website at <u>www.shpnc.org</u> and click <u>eBenefits</u> at the top of the website.

A couple of important things to keep in mind:

- In <u>eBenefits</u>, if the fields to update your contact information are grayed out, you will need to follow your employing unit's process for updating your information.
- If you are employed by a state agency, you will need to log into BEACON to update your address AND log into eBenefits to update your email address and phone number. It's necessary to update in BOTH places.
- If you are a retired member, you will need to make sure your information is updated within <u>eBenefits</u> **AND** ORBIT. The two systems do NOT coordinate, so you will need to ensure that your contact information is updated in both places.

For assistance, please call the Plan's Eligibility and Enrollment Support Center at 855-859-0966.

Attention Humana Medicare Advantage Plan Members! What if My Provider Says They Don't Accept Humana?

With your Medicare Advantage Humana PPO plan, you will pay the same amount for in- and out-of-network services. This is a passive PPO plan and the in-network and out-of-network benefits are structured the same for any member of this plan. This means you don't need to find a new provider.

If your provider participates in Medicare and agrees to bill Humana, you can continue with the provider you see today – even if they are out-of-network.

There is a flier that you can give to your provider that explains how this Humana Medicare Advantage plan works. You may download and print this flier by

clicking <u>here</u>. It is also available on the Humana website created just for our State Health Plan retirees – <u>our.humana.com/ncshp</u>.

If a provider is still resistant to filing a claim with Humana, you are able to pay for the service up front and then file a paper claim with Humana for reimbursement (less any applicable copayment/coinsurance) for the service received. You may access the paper claim form by clicking here.

If you have questions or concerns about your provider, please call the **Humana Customer Care team at 1-888-700-2263**. Our customer service representatives can confirm your provider's status with the plan and contact your provider to educate them about how this plan works. Let us help educate your providers.

Bringing Humana to You Online Events

Please join Humana for the **Bringing Humana to You (BH2U)** webinar events! These online events will be held April through June and will help you learn about how you can improve your health and well-being through education events, Humana resources, and how to get involved in activities.

Humana representatives will share information about steps you can take to become the best version of yourself. The Bringing Humana to You (BH2U) online events are broken up into three categories:

Get Involved Events (Tuesdays) allow you to participate in events and activities that encourage you to develop your overall well-being through Virtual Volunteering, Cooking Demonstrations, and Virtual Craft events.

Resource Spotlight (Wednesdays) takes a deeper look into the resources available with your Humana plan at no extra cost. Each session will highlight a specific Humana resource such as Pharmacy, Humana Neighborhood Centers, Go365, SilverSneakers, and more.

Education Workshops (Thursdays) focus on educational topics such as the health benefits of getting a good night's sleep, simple steps to boost your immunity, how to decompress from stress, foods to boost your brainpower, and cooking for one, just to name a few.

Be on the lookout for a postcard that will be mailed to your home that will include registration instructions. Information about these events is also available on the Humana website here. You may also register today for one of the webinars; just click here.

After registering for a webinar, you will receive a registration confirmation email with instructions on how to log into the webinar on the day of the event.

Subrogation, Third-Party Recovery and You

(Active and Non-Medicare Members)

Have you recently been involved in a car accident, medical malpractice incident, product defect incident or some other event which resulted in an injury?

The State Health Plan has the right to recover medical and pharmacy expenditures where a third party is liable for an injury incident, such as medical malpractice, worker's compensation, class action suits, product liability cases or auto accidents. The Plan protects member funds by paying only those claims for which it is responsible.

If the Plan pays claims that are the responsibility of a third party, then, by law, the Plan has a right to recover those payments. The Plan's lien will not exceed 50 percent of the total damages recovered by the Plan member, exclusive of the member's reasonable cost of collection. That cost is determined by the Plan.

Please note: If a liable third party pays YOU damages and the Plan is not informed, then YOU may be responsible for reimbursing the Plan. You can avoid this situation by calling The Rawlings Company, LLC (Rawlings), the Plan's contractor to pursue third-party subrogation recoveries.

Contact Rawlings with any questions at 877-229-0872. You or your duly authorized representative can also send an email to MCStatemanualreferrals@rawlingscompany.com for a subrogation request. For details, visit the State Health Plan website. Click on "Employee Benefits" and scroll down to find <a href="Subrogation and Recovery."

Health Management Systems Inc. (HMS) will still be working cases that have not been resolved by December 31, 2020. HMS will work on these older cases until December 31, 2021. You can still contact HMS with any questions at 800-294-2757.











Sheet-Pan Salmon with Sweet Potatoes & Broccoli

Benefits of Physical Activity

Get the Recipe! >

Learn More!



Eligibility and Enrollment Questions: 855-859-0966

Prescription Questions: 888-321-3124

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





