July 2021 Member Focus



Get a Head Start on Open Enrollment!

(Tobacco Users on the 70/30 & 80/20 Plans)

If you are a tobacco user who wants to earn your monthly premium credit for 2022, you don't have to wait until Open Enrollment to take action to save money throughout 2022. Open Enrollment for the 2022 benefit year is scheduled for Oct. 11-29, 2021.

Starting July 1, 2021, tobacco users can attend a tobacco cessation counseling session at a CVS MinuteClinic or a Primary Care Provider's (PCP) office for FREE to earn a lower premium for 2022. You have until November 30, 2021, to take action. (Note: If you combine your tobacco cessation visit with another service, there may be a copay.)



This convenient option means:

- No need to wait for Open Enrollment in October to secure your monthly premium credit for 2022.
- If a CVS MinuteClinic is not convenient, you can see any provider that offers tobacco cessation counseling as a service.

How it works:

 After you visit a CVS MinuteClinic or a PCP for your tobacco cessation session, the provider will submit a claim on your behalf. To ensure you receive credit for your visit, upload your office visit summary to the "Document Center" located in <u>eBenefits</u>, the Plan's enrollment system. Make sure to request a copy of your summary during their visit.

- This action is ONLY for tobacco users who want to reduce their monthly premium by \$60 per month in 2022. If you are NOT a tobacco user, you will simply attest to that online during Open Enrollment, October 11-29, 2021. If you are a retiree and plan to enroll in the 70/30 Plan for 2022, this activity is not required to reduce your premium.
- During Open Enrollment, you will need to attest during the online enrollment process. This step is critical to ensure you receive the lower premium for 2022.

State Health Plan 101: Spotlight on BlueConnect

(Members Enrolled in the 70/30, 80/20 & HDHP Plans)

The next State Health Plan 101 webinar will focus on BlueConnect, the online secure portal which helps 70/30, 80/20 and High Deductible Health Plan (HDHP) members track health care expenses and save money throughout the year.

BlueConnect lets you access your profile, benefits and claims, as well as search for providers and facilities, research treatment costs, get wellness tips, and find weekly fitness and health deals.

Click below to register!

July 28 at 12:30 p.m. & 4 p.m.

Click here to register →

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 "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.

Humana Plan Members: Get Moving with SilverSneakers and Earn Go365 Rewards!

State Health Plan Humana Medicare Advantage Plan members can earn Go365 rewards by participating in the SilverSneakers program!

SilverSneakers is included with your Humana
Plan at no additional cost to you. You are already enrolled in SilverSneakers. All you need is your SilverSneakers member ID number to get started. To obtain your ID number, you can click here.

You can utilize your SilverSneakers benefit at any participating SilverSneakers fitness location, at home, or on the go.

You can get active with SilverSneakers by participating in:

- SilverSneakers On-Demand™ fitness classes available 24/7
- SilverSneakers LIVE virtual classes and workshops throughout the week
- SilverSneakers GO™ mobile app with adjustable workout plans.

To find a participating SilverSneakers location near you or where you are traveling, please click here.

For certain activities, SilverSneakers automatically reports your participation directly to Go365 on your behalf and no further action is needed from you. These activities include SilverSneakers LIVE virtual classes and workshops, as well as

a workout you completed at a participating SilverSneakers location. However, you will be responsible for logging your participation in SilverSneakers On-Demand™ fitness classes to Go365, either directly online at Go365.com, or by mail.

To track your activities and redeem rewards, you can visit the Go365 website, which can be accessed through your MyHumana account at our.humana.com/ncshp. After you have signed into your MyHumana account, click "Go365" from your dashboard – it's that easy! For more information about the Go365 program and SilverSneakers, please click here.

If you don't have online access, you can also track your rewards using the Go365 paper trackers. To obtain paper trackers, redeem your rewards, or ask questions about the program, please contact **the State Health Plan Humana Group Medicare Customer Care 888-700-2263 (TTY: 711)**, Monday – Friday, 8 a.m. – 9 p.m., Eastern time.

Cologuard for Colon Cancer Screening: Pros and Cons

(Members Enrolled in the 70/30, 80/20 & HDHP Plans)

Cologuard is an FDA-approved test that looks for the presence of colon cancer by analyzing changes in DNA via a stool sample collected by the patient. This test is typically covered at 100% by the State Health Plan under preventive care medical benefits.

Cologuard has gained popularity over the years because it is less invasive than a colonoscopy and, since it can be performed at home, is a more convenient option for many patients. While there are some benefits to this method of testing for colon cancer, there are also disadvantages as well.

Research has found that Cologuard testing is often not as accurate as a colonoscopy and can result in false negative results, where the presence of cancer is missed by the test. In addition, it's important to note that a positive test result with Cologuard will require follow-up testing. If you have a positive Cologuard test result, your doctor may order a follow-up colonoscopy.

If that occurs, please note that, while this colonoscopy will be covered by the Plan, it will **NOT** be processed under your preventive care benefits. A follow-up colonoscopy as a result of a positive Cologuard test will be considered diagnostic and will be subject to your deductible and coinsurance under your health plan.

The decision to use the Cologuard test or to have a colonoscopy is a conversation that you may want to have with your provider during your next routine visit. Your provider can help you determine the best method for you based on your preference and medical history.

Your Health Minute

Stay Healthy on Vacation and Remember UV Safety!

Summer is in full swing. Stay healthy on vacation by planning ahead. <u>Vax Up or Mask Up</u>, stay hydrated, eat healthy, get some exercise, practice sun safety, and always take your medications as prescribed.



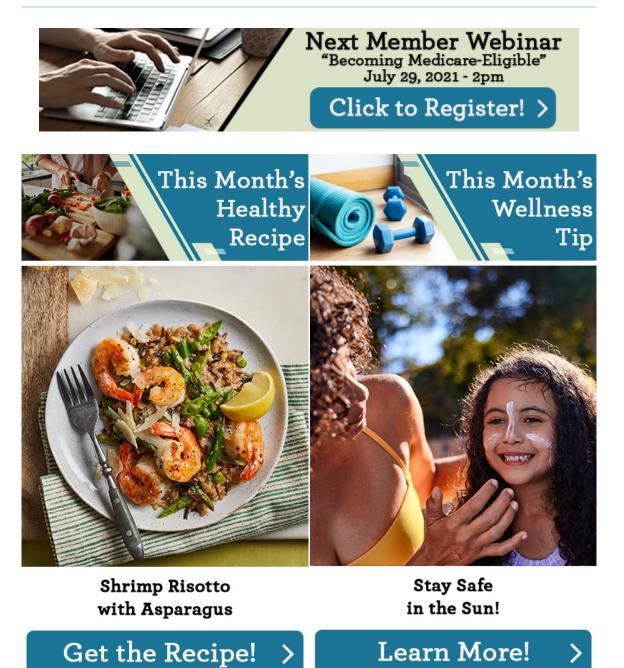
Eat Smart, Move More and Weigh Less!

(Active and Non-Medicare Members)

The Eat Smart, Move More, Weigh Less program is under way, and State Health Plan active members can participate at no cost! Learn more:

- The Eat Smart, Move More, Weigh Less (ESMMWL) program includes 15 weekly online sessions delivered by a live Registered Dietitian Nutritionist. Each weekly session is covered at 100% as a telehealth group nutritional counseling visit. See the <u>flier</u> and <u>schedule</u> for more details. Plan members need to enter this coupon/voucher code during registration: GNC2021.
- Up for round two? Continue your journey toward better health with <u>Eat Smart, Move More, Weigh Less 2</u>. This 12-week weight management program is intended for those who have completed the Eat Smart, Move More, Weigh Less program. It is also covered under telehealth as a

telehealth group nutritional counseling visit. Click here to learn more. The coupon/voucher code for State Health Plan members to register for the ESMMWL2 program is GNC22021.



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Eligibility and Enrollment Questions: 855-859-0966

Prescription Questions: 888-321-3124

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

