

Benefit Briefs



Brought to you by System Benefits Administration

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Annual Enrollment Coming Soon

The Annual Enrollment period, July 1 - July 31, is the only time you can make changes to many of your benefits without a qualifying life event. It's a great time to review not just your benefit selections, but things like your beneficiaries, your email address and your optional retirement plan contributions.

You may have noticed a new button on your Single Sign-On menu called **iBenefits**. This has replaced last year's annual enrollment button as the place to go to check your coverage and make any changes to coverage and/or beneficiaries.

Plan premiums and changes along with other Annual Enrollment related information can be found by going to www.tamus.edu/benefits and clicking on **Annual Enrollment** on the left-hand column.

The good news is that the state contribution has increased over 6% from last year. This means that while almost all health plan premiums increased, many of you will not see an increase in your out-of-pocket health plan premiums.

A&M Care Plans

Pharmacy change - Medco Health Solutions, Inc., will take over the administration of the prescription drug portion of the A&M Care plans from CVS/Caremark. Members will receive a new ID card and a "Welcome Kit" in mid to late August. Members will need to present the new ID card to the pharmacy when refilling or ordering a new prescription beginning September 1.

If you currently have an existing mail order prescription with refills available, the prescription will automatically be transferred to Medco by Mail. (*Compound prescriptions and controlled substances will not be transferred. You will need a new prescription for these drugs.*)

Beginning September 1, 2009, you can complete the transfer process in one of three ways:

- Visit www.medco.com and activate your account by registering with your Medco member ID number and a current prescription number. Then click "Order status."

- Mail the transfer form (included in the welcome package you'll receive in August) with an old refill slip or label to the Medco By Mail Order Center.
- Call Medco, toll-free, at the phone number on your new prescription ID card. Please have your old prescription number handy when you call.

Prescription deductible and copays will remain the same. A Question and Answer (Q&A) section will be available on the Annual Enrollment website to help answer your questions about this change.

All A&M Care plans will now have enhanced Coordination of Benefits with Medicare. The plans will pay 100% of eligible covered services after Medicare pays. In addition, in order to support our wellness initiatives, preventive colonoscopies will be covered at 100%.

A&M Care plan members will have access to a new section of the www.bcbstx.com website called, "Personal Health Manager." In addition, a 24-hr nurse line will be open for members.

Scott & White Health Plan Members

Changes to the SWHP include an increase in costs for inpatient hospital care, outpatient services, surgery and chemical dependency to a 20% co-insurance. In-patient mental health will be subject to 20% coinsurance and a maximum of 45 days/plan year for serious mental health illness and a maximum of 30 days for non-serious mental health illness. Examples comparing SWHP to the A&M Care Plans will be available at www.tamus.edu/benefits.



Grad Plan

Participants in the Graduate Plan will see a decrease in their monthly premium as well as a few enhancements to the plan.

The \$100 deductible will be combined for services received both in and out of network. Also, the pharmacy benefit at the Student Health Center increases to \$1,000 and the retail pharmacy benefit will increase to \$5,000. Co-payments and co-insurance will remain the same.

Humana

Humana members will see a few changes to the plan, including:

- \$150 co-pay/visit for specialty lab/xray (ie. PET, MRI, MRA, CET, etc.)
- Limitation on Chiropractic Care – 20 visits/year
- Hearing Screening – Covered in full
- Prescription drugs - 30-day supply:
Level 1 drug, \$7 copay; Level 4 drug, 25% copay

Life Insurance

Existing Basic and Supplemental Term Life coverage will be transferred to Minnesota Life on September 1, 2009. Although we are making changes to the coverage maximums and requirements for evidence of good health, all existing coverages will be grandfathered. This means no one will lose coverage they already have; coverage increases and additions will be subject to the new requirements. Rates are decreasing for non-tobacco users, and increasing for tobacco users.

In addition, the new plan offers some great program enhancements.

- Travel Assistance, provided by Euro Assistance USA covers employees, retirees and their covered dependents enrolled in Basic Life while traveling 100 miles or more when traveling for business or pleasure. Features include: a repatriation benefit up to \$5,000, 24 hour access to emergency medical assistance, emergency travel arrangements, communication assistance, legal assistance and pre-trip resources.
- Legal Services, provided by Ceridian Life Works, offers employees, retirees and their families a free 30 minute initial consultation with an attorney, drafting of wills and other legal documents.
- Beneficiary Financial Counseling services provided by PricewaterhouseCoopers, provides help on topics such as estate settlement, budgeting and taxes. This service is available at no additional cost for beneficiaries who receive a benefit of \$25,000 or more.

Each campus will hold annual enrollment meetings in early July. Check the annual enrollment section of the benefits website for the meeting schedule or contact your Human Resources office.

IRS Changes Affecting Your PayFlex Card

Effective July 1, 2009, drug stores and pharmacies must either have implemented an IRS-approved inventory information approval system (IIAS) or satisfy the IRS' 90% rule in order for flexible spending account cards such as the PayFlex™ Card to continue to be accepted. Under an IIAS, all products at the merchant location are identified as either eligible healthcare expenses or non-eligible healthcare expenses. At the point of sale, each item purchased is checked for the inventory code assigned by the merchant. The 90% rule means that 90% of the store's income consists of eligible healthcare expenses.

This means that the PayFlex™ Card will only be accepted at:

- Healthcare-related merchants, such as physician and dentist offices, vision care providers and hospitals.
- Non-healthcare related merchants, such as grocery stores, discount stores, wholesale clubs, web-based merchants (ie., drugstore.com) that use an IIAS.
- Drug stores and retail pharmacies that have implemented an IIAS or satisfy the IRS' 90% rule.

Note that the decision to comply with the IRS' requirements is made by the individual drug store or pharmacy.

If your card is no longer accepted at your favorite drug-store or pharmacy, you can still purchase and receive reimbursement for eligible healthcare items at these merchants. You will need to use another form of payment and submit the itemized receipt along with a claim form to PayFlex™. You can submit your claim online using Express Claims.

You can check to see if you will still be able to use your PayFlex Card at your pharmacy or drug store by going to the Payflex website at www.mypayflex.com and click on following:

Listing of merchants with an IRS-approved IIAS

Listing of drug stores and pharmacies with either an IRS-approved IIAS or meet the IRS' 90% rule

Taking Blood Pressure Screening to Heart

Do you have high blood pressure? The only way to find out is to have a blood pressure check. High blood pressure, also known as hypertension, is one of the most common diseases in the United States. Currently, about 50 million Americans have high blood pressure. Uncontrolled high blood pressure can lead to serious risks including stroke, heart attack and heart and kidney failure.

Known as the "silent killer," high blood pressure has no visible symptoms – until it's too late. Your physician or another qualified health professional should check your blood pressure at least every two years and more often if it's high.

Fortunately, high blood pressure can be detected with a **simple test, and once you know about it, you can work with your physician to control it.**

A blood pressure reading of less than 120 over 80 is considered "normal." Pre-hypertension is a reading between 120-139 systolic (the top number in blood pressure reading) and 80-89 diastolic (bottom number).

Controlling your weight, following a low-fat, low-sodium diet and avoiding ongoing stress and a sedentary lifestyle can improve your odds of keeping your blood pressure in check.