North Carolina
State Health Plan
FOR TEACHERS AND STATE EMPLOYEES

State Health Plan 101

2017 Wellness Resources, Cost-Savings Tips and Pharmacy Changes

December 2016

A Division of the Department of State Treasurer

Agenda

- Pharmacy Benefits Overview and Changes
- Cost-Savings Tips
- Specific Tips for the 80/20, CDHP Plans
- Wellness Resources
- Q&A Session

New Pharmacy Benefit Manager Implementation

- As of Jan. 1, 2017, the State Health Plan will be transitioning to a new Pharmacy Benefit Manager, CVS Caremark.
- Members impacted will receive communication regarding what steps to take.
- ALL members will receive a new ID Card. The 2016 card WILL NOT work – members **MUST** use their new member ID card, which will arrive in December.
- Advantages to CVS Caremark:
  - You will have access to the CVS Caremark online drug lookup tool

    This tool enables you to look up and compare the costs of various drugs – especially useful for those enrolled in the CDHP 85/15.
- This transition does NOT mean that members must change pharmacies to CVS, CVS Caremark has a broad pharmacy network. Visit the Plan's website to use the Pharmacy Locator Too.

Formulary Change

- The State Health Plan will be moving to a Closed, Custom Formulary effective Jan. 1, 2017.

Open Formulary – In an "open" formulary, all drugs are included, subject to any benefit exclusions. The Plan currently utilizes an "open" formulary for the Enhanced 80/20, Consumer-Directed Health Plan (CDHP) 85/15, and Traditional 70/30 Plans.

Closed Formulary – In a "closed" formulary, certain drugs are not covered.

- Formulary will be posted to the Plan's website.
- Members are encouraged to call CVS beginning Oct. 1 for specific questions about drug coverage.

- There will be an exception process available to providers who believe that, based on medical necessity, it is in the members' best interest to remain on the excluded drug(s). This process will be explained in the letter impacted members will receive.
- Impacted members and their providers will receive communication regarding any affected prescriptions.

If Your Medication is Not Covered

- Members whose medication is not covered will receive a letter
- If you receive notice that your medication is not covered:
  - Take action to ensure an uninterrupted supply of your prescription by contacting your provider
  - Beginning Jan. 1, 2017, your provider can request an exception for you to remain on the excluded medication

New Pharmacy Tier for Diabetic Testing Supplies

- There will be a new tier added for Preferred Diabetic Supplies
  - Enhanced 80/20 Preferred Diabetic Tier copay will equal the Tier 1 copay
  - Traditional 70/30 Preferred Diabetic Tier copay will remain at $10 (Tier 1 is $16)

Drugs	Traditional 70/30 Plan	Enhanced 80/20 Plan	Consumer-Directed Health Plan 85/15
Tier 1 (Generic)	**$16**	**$5**	Preferred brands fall under CDHP Preventive List – deductible is waived
Tier 2 (Preferred Brand & High-cost Generic)	**$47**	**$30**	
Tier 3 (Non-preferred Brand)	**$74**	**Deductible/Coinsurance**	
Tier 4 (Low-cost/Generic Specialty)	**10% up to $100**	**$100**	
Tier 5 (Preferred Specialty)	**25% up to $103**	**$250**	
Tier 6 (Non-preferred Specialty)	**25% up to $133**	**Deductible/Coinsurance**	
Preferred Diabetic Supplies* (e.g. Test Strips, Lancets, Syringes, Needles)	**$10**	**$5**	

**Non-preferred Diabetic Supplies will be priced at Tier 3*

Pharmacy Utilization Management Programs

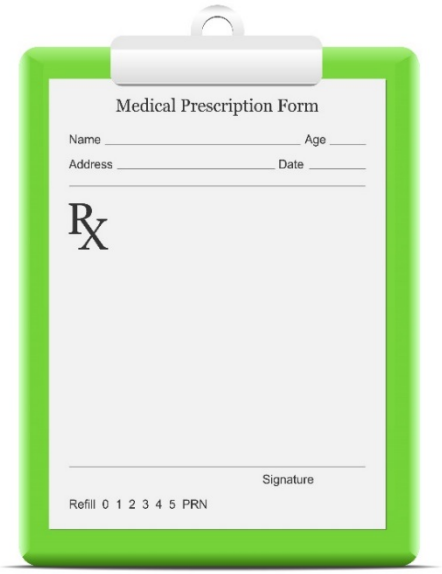
- Some prescription drugs will continue to require Prior Authorization, Step Therapy and/or be subject to Quantity Limits with the transition to CVS Caremark.
- Have your provider contact CVS Caremark to initiate the process at 800-294-5979.
- If a medication is also covered under the medical benefit and given in a medical office, providers should contact Blue Cross and Blue Shield of North Carolina (BCBSNC) for approval at 800-672-7897.

Specialty Medications

- Previously, members used Accredo, Express Scripts' Specialty Pharmacy.
- Effective Jan. 1, 2017, members will use CVS Caremark Specialty Pharmacy for non-acute, self-administered specialty medications filled under the pharmacy benefit.
- These medications can be found under the Specialty Drug List on the State Health Plan website.

Cost-Savings Tips: Prescriptions

- Review your current medications for:
  - Over-the-counter (OTC) drug alternatives to prescriptions
  - Generic options
  - Lower cost Tier 1 medication options
- Research and determine if mail order or a retail pharmacy is more cost effective
- Take the **Preferred Drug List** when you visit your provider and ask your provider to consider prescribing drugs on the list
- The Enhanced 80/20 Plan and Consumer-Directed Health Plan (CDHP) offer Affordable Care Act (ACA) Preventive Medications at no cost to the member if you meet certain criteria and have a prescription
- The CDHP offers a CDHP Preventive Medication List which includes medications that do not require a member to meet the deductible first. They require the 15% coinsurance.
  - Both lists are available on the Plan's website, www.shpnc.org



Health Engagement Program for CDHP Members

- The Health Engagement Program offers additional Health Reimbursement Account funds for CDHP members who engage to help offset their health care expenses. There are two components:
  - The **Healthy Lifestyles Program** is an incentive-based program designed to encourage all **CDHP** members to engage in healthy behaviors
  - **Positive Pursuits** offers **CDHP** members with certain conditions an opportunity to earn even more in the HRA for actively managing their condition

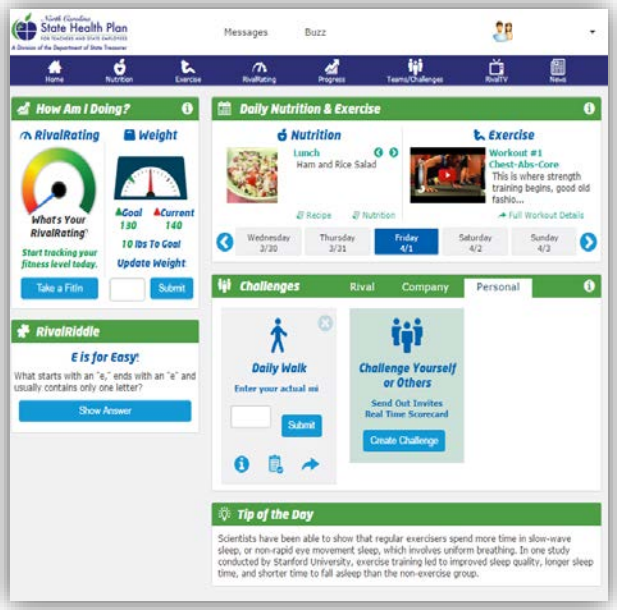
RIVALHEALTH
Bring out your best

New for 2017!

You will have more activities in which to earn incentives with RivalHealth!

RivalHealth is a fitness-based wellness platform that engages members with daily exercise and nutrition activities as well as social interaction and challenges.

Currently it's available to CDHP members and qualifying Wellness Champions worksites. In 2017, CDHP members can earn HRA funds through completed activities.



*To learn more, visit **shpnc.org***

Cost-Savings Tips: Understanding Your Plan

- Familiarize yourself with your plan cost-savings incentives
  - Use the Primary Care Provider (PCP) listed on your card
- Confirm claim coding with your provider
  - Wellness exam coding – Wellness or Preventive
  - PCP using in-network lab locations
- Be aware of your financial responsibilities for services
  - Review your ID card for copayments and review your deductible and coinsurance balances on Blue Connect available through Member Login on the Plan website
- Take charge of your health
  - Make healthier choices, move more and join worksite challenges
  - Eat healthy foods and plan your meals

Cost-Savings Tips: In-Network vs. Out-of-Network

In-Network

Use in-network services when available and appropriate. This costs less than out-of-network care. In-network services include:

- Lower coinsurance costs
- Your provider will obtain required approvals/certifications for services and will use Blue Options Designated hospitals

Out-of-Network

- Some services may not be covered out-of-network. These services are noted in the Summary of Benefits and the Covered Services sections of the Benefits booklet, located at www.shpnc.org

- For emergencies or if in-network providers are not reasonably available as determined by BCBSNC's access-to-care standards, you may receive in-network benefits for out-of-network care

Cost-Savings Tips: Your Primary Care Provider

Consider the place of service and your financial responsibility

- Office visits are the most cost effective
- Use in-network providers and facilities
- If you are referred to a location or provider, confirm the network status first by calling Blue Cross and Blue Shield of North Carolina (BCBSNC) at 888-243-2416

Select a Primary Care Provider (PCP)

A Primary Care Provider is not required, but is recommended. There are a number of benefits to having a PCP:

- Trusted relationship with your PCP
- Documented care and past medical history in PCP medical records
- Copayment and HRA incentives (80/20 and CDHP)

Emergency Room vs. Urgent Care

Emergency Room

- Emergency room copayments are considerably higher than Urgent Care copayments.
- Multiple emergency room visits on the same day may result in multiple copayments.

Urgent Care

- Urgent care should be used for conditions that occur suddenly and unexpectedly, requiring prompt diagnosis or treatment and when your PCP is not available
- Examples of acute illness: high fever, ear infection, sprains, lacerations, dizziness

Convenience Care Clinics

- These facilities offer last minute appointments and are able to diagnose, treat and write prescriptions for common illnesses such as strep throat, bladder infections, pink eye, and infections of the ears, nose and throat.
- These facilities are cost effective and are typically less expensive.

Cost-Savings Tips: Blue Options Designated Providers

Blue Options Designated Providers are providers and hospitals that meet certain levels of criteria set forth by BCBSNC including:

- Delivering quality health outcomes
- Cost effectiveness
- Accessibility by members

The Blue Options Designated Providers include hospitals and certain types of providers:

- General Surgery
- OB-Gyn
- Orthopedics
- Cardiology
- Neurology
- Endocrinology
- Gastroenterology

BlueOptions 2017 **State Health Plan** Designated Facility Listing

Designated for Cost & Quality	Designated for Critical Access
BETSY JOHNSON REGIONAL HOSPITAL	ALLEGHANY COUNTY MEMORIAL HOSPITAL
CAROLINA EAST MEDICAL CENTER	ANGEL MEDICAL CENTER
CAROLINAS MEDICAL CENTER-MERCY	ASHE MEMORIAL HOSPITAL
CAROMONT REGIONAL MEDICAL CENTER	BLADEN COUNTY HOSPITAL
CENTRAL CAROLINA HOSPITAL	BLUE RIDGE REGIONAL HOSPITAL
CENTRAL HARNETT HOSPITAL	CHARLES A. CANNON, JR. MEMORIAL HOSPITAL
DAVIS MEDICAL CENTER	CHATHAM HOSPITAL
FIRSTHEALTH MOORE REGIONAL	DOSHER MEMORIAL HOSPITAL
FRYE REGIONAL MEDICAL CENTER	FIRSTHEALTH MONTGOMERY MEM HOSP
GRANVILLE MEDICAL CENTER	HIGHLANDS CASHIERS HOSPITAL
HARRIS REGIONAL HOSPITAL	MURPHY MEDICAL CENTER, INC.
HAYWOOD REGIONAL MEDICAL HOSPITAL	PENDER MEMORIAL HOSPITAL
HUGH CHATHAM MEMORIAL HOSPITAL	PIONEER COMMUNITY HOSPITAL OF STOKE
JOHNSTON MEMORIAL HOSPITAL	ST LUKES HOSPITAL
KINGS MOUNTAIN HOSPITAL	SWAIN COUNTY HOSPITAL
MARTIN GENERAL HOSPITAL	THE OUTER BANKS HOSPITAL, INC.
MOREHEAD MEMORIAL HOSPITAL	TRANSYLVANIA COMMUNITY HOSPITAL
NEW HANOVER REGIONAL MEDICAL CENTER	VIDANT BERTIE HOSPITAL
NORTH CAROLINA BAPTIST HOSPITAL	VIDANT CHOWAN HOSPITAL
NORTH CAROLINA SPECIALTY HOSPITAL	WASHINGTON COUNTY HOSPITAL
NORTHERN HOSPITAL OF SURRY COUNTY	
NOVANT HEALTH PRESBYTERIAN MED CENTER	
NOVANT HEALTH ROWAN MEDICAL CENTER	
RANDOLPH HOSPITAL	
REX HOSPITAL	
RUTHERFORD REGIONAL MEDICAL CENTER	
STANLY REGIONAL MEDICAL CENTER	
VIDANT BEAUFORT HOSPITAL	

If you select one of these hospitals and are enrolled in the following plans you will receive:

- The Enhanced 80/20 Plan: Your Inpatient Admission Co- Pay will not be applied
- The Consumer-Directed Health Plan: You will receive $200 added to your HRA

These are **NOT** the only in-network hospitals. To find a complete list of in-network hospitals, visit www.shpnc.org and select - Find a Doctor.

Blue Options Designated providers meet BCBSNC criteria for delivering quality health outcomes, cost effectiveness and accessibility by members.

Note: This list is current as of September 1, 2016. Provider/facility information is subject to change, and the most current information is available on our 'Find a Doctor tool at www.bcbsnc.com, or by contacting State Health Plan Customer Service at 888-234-2416.

Blue Options Designated Hospital List is available on the Plan's website and is updated annually.

Specific Tips for the Enhanced 80/20 Plan

- **PCP** – Visit the PCP on your ID Card = $10 copayment ($25 copayment otherwise)
- **Specialist** – Use Blue Options Designated Specialists = $45 copayment ($85 copayment otherwise).
- **ER Copayment** – When admitted to a Blue Options Designated Hospital, your $300 copayment will be waived.
- **Affordable Care Act (ACA)** services and medications are covered at 100% when using in-network providers, listed at www.shpnc.org

Tips for the Consumer-Directed Health Plan (CDHP)

- **Wellness Premium Credits** – Reduce your monthly premium during Open Enrollment
- **Affordable Care Act (ACA)** services and medications are covered at 100% when using in-network providers, listed at www.shpnc.org
- **CDHP Preventive Medication List** requires only the 15% coinsurance with the deductible waived, listed at www.shpnc.org
  - Medications used to treat heart disease, stroke, asthma and diabetes
- **Health Reimbursement Account (HRA) credits**
  - Use PCP on ID Card = $25
  - Blue Options Specialist = $20
  - Blue Options Designated Hospital = $200
  - Health Engagement Program – amounts vary pending activity completion and time of enrollment
- Flexible Spending accounts can be used while enrolled into the CDHP, which may assist with meeting your deductible

Wellness Resources

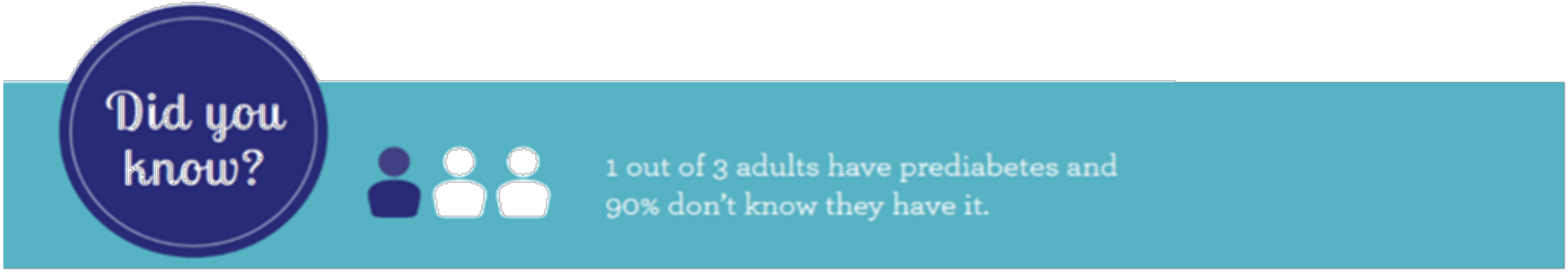
	Resource	Benefits	How to Access
	Personal Health Portal	Health Assessment, trackers, digital health coaching, personal health record, and more	www.shpnc.org
	Active Lifestyle Coaching & Disease and Case Management	Here to help you make healthy lifestyle changes and better understand and manage conditions	800-817-7044 M-F 8 a.m. – 9 p.m. Sat 9 a.m. – 2 p.m.
QuitlineNC.com 1-800-QUIT-NOW	QuitlineNC	One-on-one support from a Quit Coach® by telephone, web, and/or text. Free 3-month supply of nicotine replacement therapies.	800-QUIT-NOW (800-784-8669) Available 24/7

Wellness Resources

	Resource	Benefits	How to Access
	24/7 Nurse Line	Nurses available to answer your medical questions anytime	800-817-7044 Available 24/7
stork rewards	Maternity Coaches & Stork Rewards	Resources to help you have a healthy pregnancy and delivery, while also saving on delivery copays	800-817-7044 M-F 8 a.m. – 9 p.m. Sat 9 a.m. – 2 p.m.
	Eat Smart, Move More, Weigh Less	15-week weight management program with proven results for a discounted rate of $30.	esmmweighless.com
	Additional weight management resources	Health Coaches and covered dietitian visits also available.	Consult your plan's benefit booklet for dietitian visit details www.shpnc.org

New NC Health*Smart* Benefit: Diabetes Prevention Program

- Members who have prediabetes – or are at risk for developing it – can now participate in the CDC-recognized Diabetes Prevention Program for only $25 (***a $400 savings***)!
- The Diabetes Prevention Program is a 12-month class series offered online or onsite throughout the state. Classes cover subjects such as:
  - Nutrition
  - Physical activity
  - Stress
  - Planning for continued success
- Members can find out their risk for prediabetes or register for the Diabetes Prevention Program by visiting www.diabetesfreenc.com



Questions?

North Carolina
State Health Plan
FOR TEACHERS AND STATE EMPLOYEES
A Division of the Department of State Treasurer

www.shpnc.org

www.nctreasurer.com