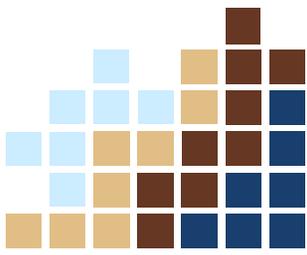




BENEFIT LIAISON TRAINING
WITH
VENDOR PRESENTATIONS

October 19, 20, & 21



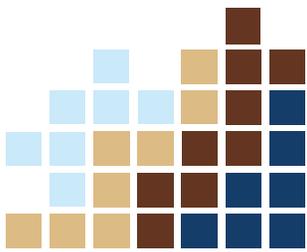
Arizona Department of Administration Benefit Services Division

2011 Open Enrollment Benefit Liaison Agenda

OBJECTIVE: TO EDUCATE LIAISONS ABOUT THE SPECIFIC SERVICES OFFERED BY EACH VENDOR.

MORNING SESSION

Time	Vendor
8:30am - 8:35am (5)	ADOA Introduction
8:35am - 8:50am (15)	United Healthcare
8:50am - 9:05am (15)	BCBS, AmeriBen, & AHH
9:05am - 9:20am (15)	CIGNA
9:20am - 9:35am (15)	Aetna
9:40am - 9:50am (10)	BREAK
9:50am - 10:10am (20)	MedImpact
10:10am - 10:20am (10)	Aetna - HSA
10:20am - 10:30am (10)	Total Dental Administrators
10:30am - 10:40am (10)	Delta Dental
10:40am - 10:50am (10)	BREAK
10:50am - 11:00am (10)	Hartford: Life, STD & LTD
11:00am - 11:10am (10)	ASI Flexible Spending
11:10am - 11:30am (20)	Q & A



Arizona Department of Administration Benefit Services Division

2011 Open Enrollment Benefit Liaison Agenda

OBJECTIVE: TO EDUCATE LIAISONS ABOUT THE SPECIFIC SERVICES OFFERED BY EACH VENDOR.

AFTERNOON SESSION

Time	Vendor
1:00pm - 1:05pm (5)	ADOA Introduction
1:05pm - 1:20pm (15)	United Healthcare
1:20pm - 1:35pm (15)	BCBS, AmeriBen, & AHH
1:35pm - 1:50pm (15)	CIGNA
1:50pm - 2:05pm (15)	Aetna
2:10pm - 2:20pm (10)	BREAK
2:20pm - 2:40pm (20)	MedImpact
2:40pm - 2:50pm (10)	Aetna - HSA
2:50pm - 3:00pm (10)	Total Dental Administrators
3:00pm - 3:10pm (10)	Delta Dental
3:10pm - 3:20pm (10)	BREAK
3:20pm - 3:30pm (10)	Hartford: Life, STD & LTD
3:30pm - 3:40pm (10)	ASI Flexible Spending
3:40pm - 4:00pm (20)	Q & A



Benefit Options

Choice. Value. Health.



Grow healthy

UnitedHealthcare®

What's Inside

- EPO and PPO Benefits
- myuhc.com™
- NurseLine™
- United Behavioral Health

Benefit Options

State of Arizona Benefit Liaisons 2011 Open Enrollment Presentation



Arizona's
**Most Admired
Companies**
AzBusiness BestCompaniesAZ™

UnitedHealthcare has been in business for more than **33** years

Nationally, we provide services to more than **24** million Americans and **1.1** million in Arizona

Fortune magazine has ranked UnitedHealthcare as number one in innovation for 2010

Arizona Business Magazine selected UnitedHealthcare of Arizona as one of the of the states “Most Admired” companies in September 2010

The State of Arizona Benefit Options program includes both an EPO and a PPO benefit program administered by UnitedHealthcare. As a participant with UnitedHealthcare, members have:

- Easy, direct access to specialists
- No referrals needed
- Informational tools
- Personalized coverage, claims, and doctor information on **myuhc.com**®
- Toll-free help line for your health-related and other personal concerns
- Specialized care programs and services

Benefit Options
Choice. Value. Health.



How to Find a Physician

Before becoming a UnitedHealthcare member, the quickest way to find a physician or other health care professional in our network is to go online to www.unitedhealthcare.com.

1. Simply go to www.unitedhealthcare.com
2. Click on “***Find a Physician***”
3. In the General Directory, select “***Find a Physician***”
4. Click on “***Search for a physician***”
5. Select search type and select a plan. Click “***UnitedHealthcare Choice***” for the EPO plan offering, or click “***UnitedHealthcare Options PPO***” for the PPO offering.
6. Complete the form to define your needs and then click on the “***Search***” button at the bottom of the page

Starting November 1, 2010

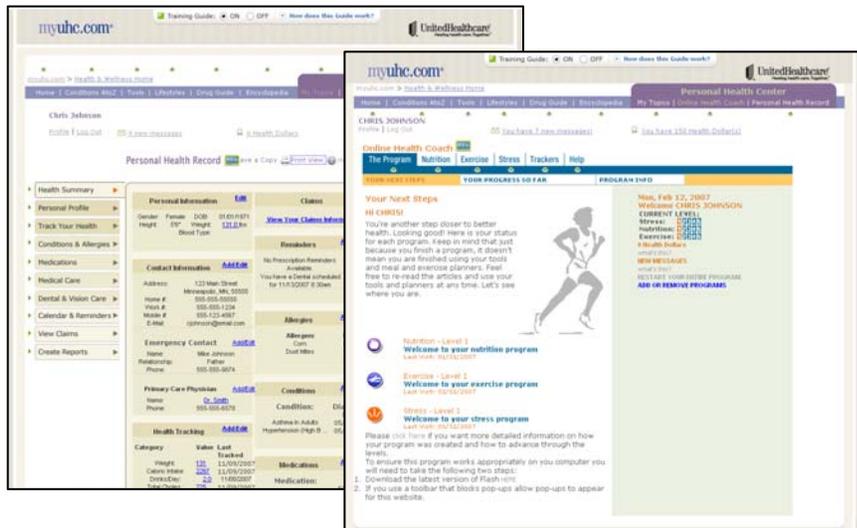
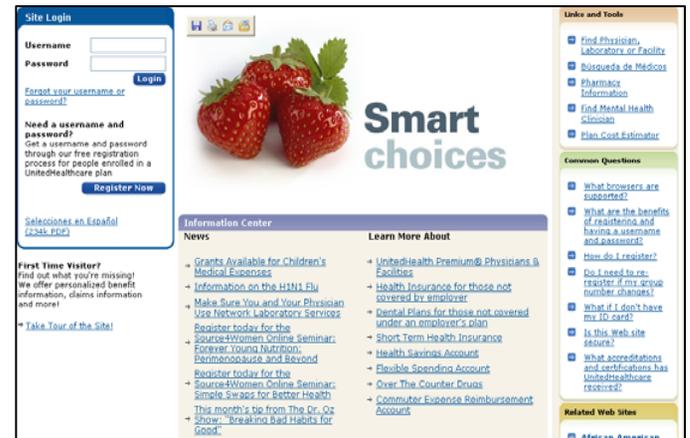
Mayo Clinic Physicians and Hospitals in AZ, MN and FL are part of UnitedHealthcare’s Network





myuhc.com[®]

- Get information about hospitals and physicians
- Improve health habits with coaching programs
- Learn about health conditions and treatment options
- Chat online with registered nurses
- Organize and store all health data in one convenient, confidential place



- Request a medical ID card
- Organize medical claims online
- Go Green. Electronic Paperless Statements (optional)
- Compare hospitals
- Compare treatment cost
- Learn more about your coverage



UnitedHealth Premium® designation program

UnitedHealth Premium puts quality and cost efficiency information about area physicians and facilities in your hands. Just look for the stars on myuhc.com.

It can be difficult to choose a doctor from just a list of names. We've done the homework for you. This program identifies doctors and facilities that meet quality criteria using evidence-based medical standards, clinical guidelines, and expert physician advice.

How the program works:

Just look for the stars

Doctors and facilities in our network are evaluated on two levels:

★ **Quality**

One star means a physician or facility has met quality of care guidelines by following national evidence-based medical standards and practices.

★★ **Quality and cost efficiency**

Two stars mean a physician or facility has met the criteria for quality of care based on national medical standards and practices, and for cost efficiency.



UnitedHealthcare®

Open enrollment material samples



Grow healthy

With the UnitedHealthcare wellness resource guide, you can take control of your health. This guide includes information on how to live a healthier lifestyle, including tips on diet, exercise, and stress management. Visit myuhc.com to find out more.

Free online health calculator
 UnitedHealthcare's online health calculator can help you make the change toward a healthier life.

Prescription care guidelines
 Our online health calculator and resources can help you make the change toward a healthier life.

Cost-effective programs
 Our online health calculator and resources can help you make the change toward a healthier life.

Free online health calculator
 UnitedHealthcare's online health calculator can help you make the change toward a healthier life.

UnitedHealthcare
 Benefit Options

Live well.

Your UnitedHealthcare wellness resource guide.

There's nothing more important than your health. UnitedHealthcare is committed to helping you achieve your healthiest life goals. Whether you want to eat right, exercise more, stop smoking, or just live with better health and resources, available at myuhc.com.

Improve your health with myuhc.com.
 The Health & Wellness site on myuhc.com is a 24-hour online resource with many tools that can help make a change for you to develop a healthier lifestyle. Log in to myuhc.com to visit the Health & Wellness site to find:

- Personalized health content
- Free health calculators and resources can help you make the change toward a healthier life.
- Prescription care guidelines
- Cost-effective programs
- Free online health calculator

With so many wellness tools and resources to choose from, there are so many ways to best about you need.

Register today at myuhc.com.

UnitedHealthcare
 Benefit Options

Maternity Support Program

Personalized support before, during and after your pregnancy
 A healthy pregnancy helps ensure a healthy new baby. The Maternity Support Program offers you and your dependent health and educational support from the time you consider starting to get pregnant through the first few months of your new baby's life. This comprehensive program is offered to you as part of your regular benefit package.

Access to a dedicated nurse
 The Maternity Support Program gives you access to your own personal maternity nurse, via telephone, who will answer questions about many topics, including your prenatal health, pregnancy signs and symptoms, and taking care of newborns. When you need your maternity nurse, you'll always get a consultation. The nurse will keep in touch with you throughout your pregnancy and after you give birth with additional phone consultations. These expert consultations help us understand your unique care needs and also uncover what our members say we do the best at.

UnitedHealthcare
 Benefit Options

Asthma Program

What is Asthma?
 Asthma is a chronic condition of the air passages resulting in the temporary narrowing of the airways. This causes difficulty breathing, coughing, wheezing, and chest tightness. Asthma can be triggered by allergens or irritants that are inhaled into the lungs, such as pollen, dust, mold, and pet dander. Asthma is a chronic condition that can be managed with the right treatment. The Asthma Program is designed to help you manage your asthma and live a healthier life.

How does the Asthma Disease Management program help me?
 You will work with a specially trained care team who will do a comprehensive assessment to determine the right treatment for you. Our program includes on-demand education and direct guidance at the National Jewish Medical and Research Center and the National Jewish Long and Short Health. Your services include getting you medication to help you breathe better. Regular nurse calls to make sure you get regular checkups and help with your asthma management to assist you in living a healthy lifestyle.

How do I participate?
 If you have asthma or suspect you have asthma, you can participate in the program. The Asthma Disease Management program includes medication and cost assistance, your health information at the local primary care provider, your health plan's group policy.

Will this program cost me any money?
 No. The Asthma Disease Management program is offered at no additional cost to you and your family.

UnitedHealthcare
 Benefit Options

Diabetes Management Program

Diabetes affects about one percent of the population. Most people with diabetes have risk factors such as high blood pressure and high cholesterol that increase their chance for heart disease and stroke. Since more than 100 million people with diabetes do not have diabetes, our program helps you manage your diabetes to reduce your risk.

How does the Diabetes Management program work?
 The Diabetes Disease Management program helps you manage the "ABCs" of diabetes - A1C, blood sugar control, blood pressure and cholesterol - and how to best manage your condition. The program provides personalized guidance to help focus on medication, diet and exercise habits that help you live a healthy life and get the best value for every dollar you spend on your care.

How does the Diabetes Management program help me?
 The program helps you achieve a healthier lifestyle. You will receive coaching, personalized diabetes care and help manage your health questions. It offers ways to reduce risk factors and may help you save on out-of-pocket health expenses. The program can also connect you with quality doctors and hospitals. And, this service has no charge to you.

How do I participate?
 The program is available to you through myuhc.com. You receive a health coach who will help you set up a diabetes self-management plan. The program is available only when you are on a personal policy and you will be able to use it for your entire term.

Is there any cost to this program?
 No. There is no additional cost to you and your family.

UnitedHealthcare
 Benefit Options

Making the Most of Your Health: A Guide Just for Women

As a woman, it's important to understand the special needs of your body and how to take care of them. Our new guide, *Making the Most of Your Health: A Guide Just for Women*, is a comprehensive resource that provides information on the special needs of women's health. The guide includes information on:

- Managing your health care needs - including preventive care, personal health information, and more.
- Managing your health care needs - including preventive care, personal health information, and more.
- Managing your health care needs - including preventive care, personal health information, and more.

UnitedHealthcare
 Benefit Options

Coronary Artery Disease Program

What is Coronary Artery Disease?
 Coronary Artery Disease is the most common type of heart disease - affecting approximately 13 million people in the United States. Each year, more than half a million Americans die from coronary artery disease, making it the country's leading cause of death for both men and women.

What is the Coronary Artery Disease Program?
 The Coronary Artery Disease Program is designed to reduce unnecessary hospitalizations and health care costs, and improve your quality of life. The program gives you information and resources to help you:

- Reduce or stop your use of tobacco, such as high cholesterol, high blood pressure, diabetes, excess weight, obesity, cigarette smoking and lack of physical activity.
- Monitor a healthy lifestyle and follow your doctor's treatment plan and medication recommendations including proper use of beta-blockers, ACE inhibitors, diuretics and nitroglycerin.
- Effectively manage your coronary artery disease with other conditions, including depression.
- Receive the most clinically appropriate, cost-effective and long-lasting products.

UnitedHealthcare
 Benefit Options

How to Find a Physician

Before becoming a UnitedHealthcare member, the quickest way to find a physician or other health care professional in our network is to go online to www.unitedhealthcare.com.

- Simply go to www.unitedhealthcare.com
- Click on "Find a Physician"
- In the General Directory, select "Find a Physician"
- Click on "Search for a physician"
- Select search type and select a plan. Click "UnitedHealthcare Choice" for the PPO plan offering, or click "UnitedHealthcare Options PPO" for the PPO offering.
- Complete the form to define your needs and then click on the "Search" button at the bottom of the page.

On www.unitedhealthcare.com, you can get background information on physicians, plus direct directions to get to a physician, hospital or other health care professional in your network.

You can even find out which physicians are recognized in the UnitedHealthcare Premium™ designation program, a free informational tool that highlights physicians by quality standards in their specialty.

If your company uses the online enrollment tool, you can browse through the Directory of Physicians and Health Care Professionals during the online enrollment process. Just log on to www.unitedhealthcare.com and follow the directions.

UnitedHealthcare
 Benefit Options

The new State of Arizona pre-member website

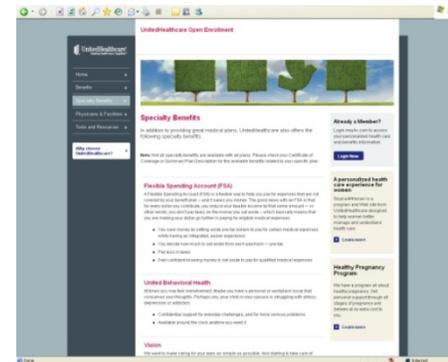
Introducing a more robust pre-member website experience for the State of Arizona.

From one site, access your benefit information, learn about available tools, resources and programs, view open enrollment materials and more.

Learn about specialized benefits, such as United Behavioral Health.

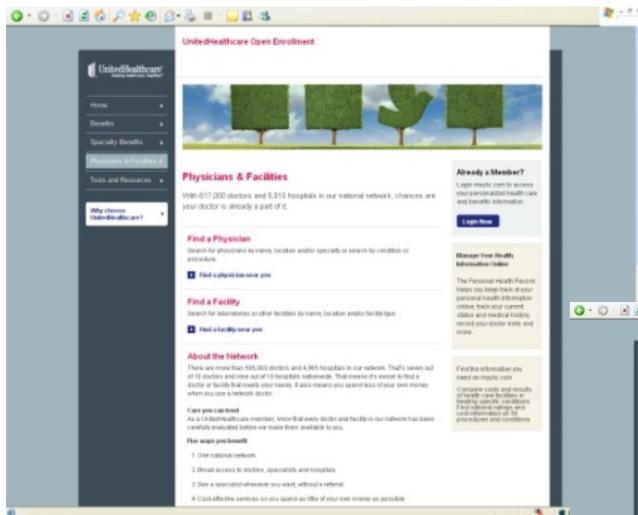


Home page



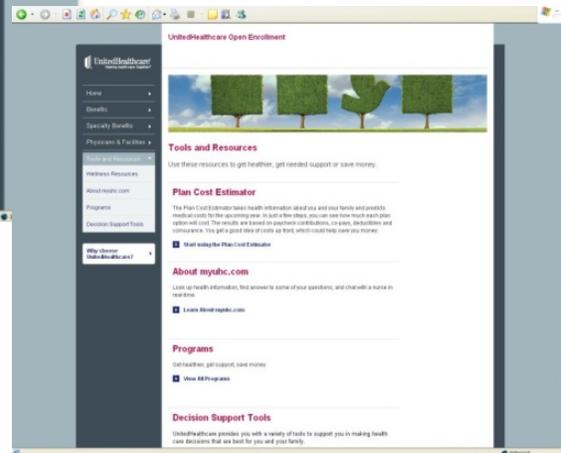
Specialty benefits

Search for physicians and facilities.

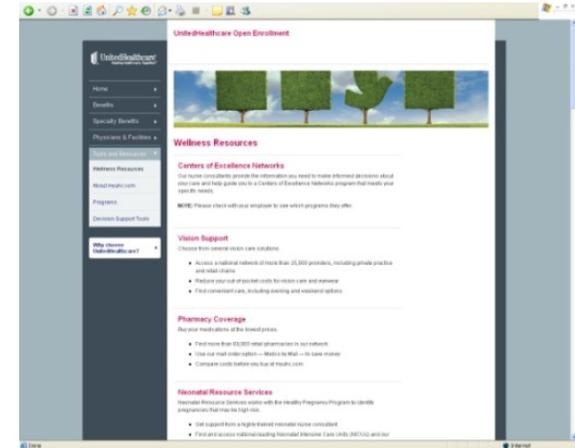


Physicians and facilities

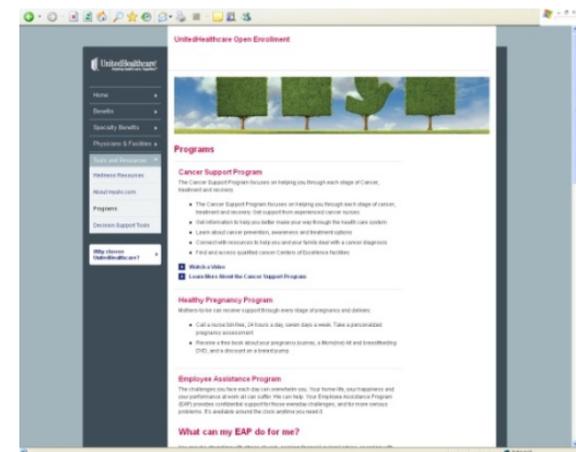
See all of the decision-support tools, wellness resources and programs available to you.



Tools and resources



Wellness resources



Programs

Personal Health Support
with HealtheNotes

Decision Support:

- NurseLine

Disease Management Programs:

- Heart Failure
- COPD
- CAD
- Diabetes
- Asthma

Complex Medical Conditions:

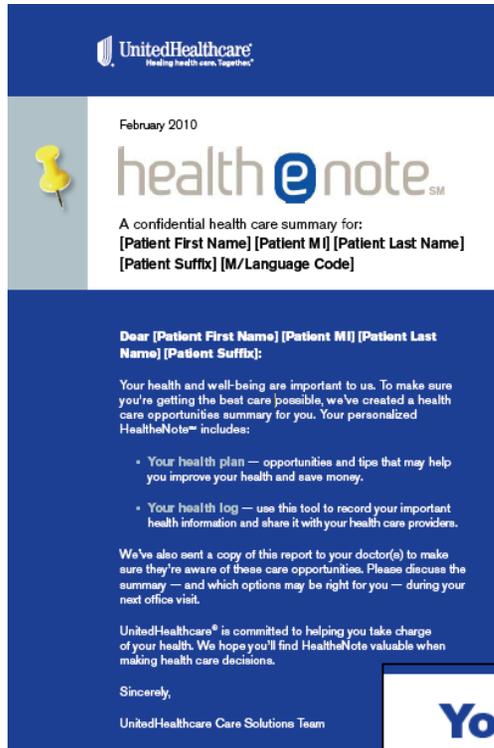
- Transplant Resource Service
- Congenital Heart Disease
- Cancer Resource Services
- Kidney Resource Services
- Bariatric Resource Network
(Centers of Excellence)

Womens:

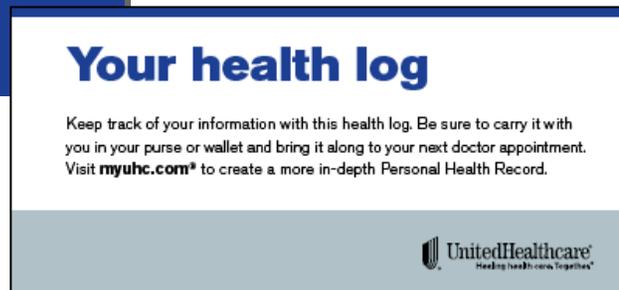
- Maternity Support Program
- Neonatal Support Program

My uhc.com:

- Online Wellness Programs



- Member communication sent when potential gaps in care identified
- HealthNotes sent to physician as well
- HealthNote introduction
- Personalized care opportunities
- Personalized money saving tips
- Prescription/office visit/lab test health log
- Seasonal information and healthy living tips



The Disease Management suite is comprised of five NCQA accredited programs. If an individual has more than one of the five chronic conditions for which we offer, a hierarchy is applied to ensure the individual's most immediate and critical needs are met. The member is guided to the most appropriate program in the following order:

- Heart Failure (HF)
- Chronic Obstructive Pulmonary Disorder (COPD)
- Coronary Artery Disease (CAD)
- Diabetes
- Asthma



All OptumHealth disease Management programs are fully accredited by the National Committee for Quality Assurance (NCQA).



		High risk
		Initial telephone assessment call
		Personalized mailing based on the patient's condition
		Series of follow-up nurse calls
		- and -
		Personalized letter in the event of a missed EBM rule
Moderate risk		
HealtheNote will be sent in the event of a missed EBM rule		
		- and -
		Personalized letter in the event of a missed EBM rule
Low risk		
Participant welcome letter to program		Participant welcome letter to program
		- and -
"Taking Charge" Book		"Taking Charge" Book
"Taking Charge" Newsletter – mailed 2/yr		"Taking Charge" Newsletter – mailed 2/yr

Kidney Resource Services, Transplant Resource Services, Congenital Heart Disease Services and Bariatric Resource Network:

- These programs provide guided access to Centers of Excellence for treatment of these conditions.
- Extensive information to patients to assist them in selecting a center for their care.
- Nurse consulting services to help patients understand and manage the conditions.

For Adult and Pediatric patients in active treatment for all cancers except non-melanoma skin cancer.

Provide support and information and discuss advanced directives, provide guidance for end-of-life issues including patient goals and wishes, palliative care, family and other available services, hospice, pain management and more.

Address immediate needs –
Improve quality of care and quality of life of patient.

- Guide to right provider/right facility
- Manage patient to ensure they receive high quality care (manage symptoms/help reduce hospital admits and re-admits)
- Help manage high cost medications and member compliance
- Provide social worker support services
- Refer to other programs and available community support services



Partner with us to Promote and Support Awareness and Program Utilization

If an individual is identified with an at- or high-risk factor that may impact their pregnancy, the individual is case managed appropriately by their OB nurse. Case management is designed to:

- Identify individual goals
- Communicate care strategies
- Ensure compliance with physician's care plan
- Assess progress
- Initiate interventions and referrals
- Provide ongoing telephonic support depending on individual needs and preferences





Registered nurses available 24/7

- Support symptom based calls
- Education on specific conditions
- Provide information on contracted hospital and Urgent Care

Nurses also chat on myuhc.com 24/7

Health information

- Audio Library of 1700 topics, 600 in Spanish and 700 focused on topics for over age 50

Triage

- Over 60 conditions “flagged” for transfer to Care Coordination based on disposition
- Nurses will triage members to available Disease or Condition Management programs through warm transfer or will generate a referral for outreach if it is after hours





Questions

The background of the slide is a stylized, textured globe in shades of brown and gold, showing the continents. The globe is partially obscured by a dark blue and black graphic element at the top right.

Blue Cross Blue Shield of Arizona
Administered by AmeriBen
with American Health Holding

Benefit Options

Choice. Value. Health.

Superior Customer Service

- Ease of Access - No phone decision tree
- Focus on Quality and 1st Call Resolution: 3-Way call
- Dedicated customer service representatives
- MyAmeriBen.com – Online Customer Service



AmeriBen

MyAmeriBen

Welcome to *MyAmeriBen*. This site is designed to provide quick and easy access to claim and eligibility information for AmeriBen benefit participants

Need Help?
You can reach us at 1-800-786-7930. Our friendly Customer Service Representatives are available from 7:00am - 6:00pm MT Monday - Friday to assist you.

You can also e-mail us at webinquiries@ameriben.com



Login

username:

password:

For members:
[I need to sign up](#)
[I forgot my username or password](#)

Providers:
[Click Here](#)
to access the Provider Site

Login Forgot New User Sign-up Public Help



BlueCross BlueShield of Arizona

An Independent Licensee of the Blue Cross and Blue Shield Association

Arizona's largest carrier based provider network, serving the employees of the State of Arizona with 17,326 providers. Representing 91% of the available providers in Arizona.



Search:
[View a Site Map](#)



- Health Plans
- Provider Directory
- Forms & Resources
- Value-Added Services
- About Us
- Contact Us

[Provider Directory](#)

Health & Dental Provider Directories

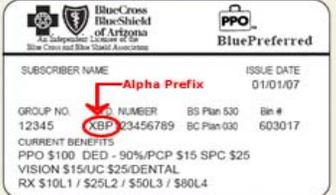
- Arizona Directories
- Out-of-Arizona Directories

Health & Dental Provider Directory

Choose an option below to search for a contracted provider. We've included sample ID Cards to help you identify the most appropriate directory to perform your search.

ID Cards with an alpha prefix

Some BCBSAZ Member ID Cards will have a slightly different layout.



Enter the 3-character alpha prefix of the ID Number located on your health insurance ID card.

Dental Provider Directories

ID Cards without an alpha prefix



[Search the Provider Directory](#)

Not a Member Yet?



Register for BlueNet

Register for BlueNet to access tools, resources and services available to our customers.

-
-
-
-
-

Contact a Service Representative



Online support specialists are available from 8:00 am to 4:30 pm to answer your BlueNet related questions. To contact a representative, please call:
 (602) 864-4844 or
 (800) 650-5656

[Email a BCBSAZ Service Representative](#)



Search:
[View a Site Map](#)



- Health Plans
- Provider Directory
- Forms & Resources
- Value-Added Services
- About Us
- Contact Us

Provider Directory

Health & Dental Provider Directories

- Arizona Directories
- Out-of-Arizona Directories

Health & Dental Provider Directory

- Providers
- Facilities
- Urgent Care

Search by Network (Required)
PPO



Enter all or part of the starting address you would like to search from. You must enter at least the City and/or ZIP code OR County.

Address:
Enter Street Address
City **Zip** **Radius**
No Preference Search City or Zip Only

OR
County
No Preference

Enter a Provider Name (Optional)
Enter provider name here

- Specialty (Hold CTRL key to select or de-select multiple specialties)**
- All Specialties
 - Addiction Medicine
 - Addiction Psychiatry
 - Adolescent & Child Psychiatry
 - Adolescent & Child Psychology
 - Adolescent Medicine

Register for BlueNet

Register for BlueNet to access tools, resources and services available to our customers.

- Guest
- Member
- Employer
- Broker
- Provider

Contact a Service Representative



Online support specialists are available from 8:00 am to 4:30 pm to answer your BlueNet related questions. To contact a representative, please call:
(602) 864-4844 or
(800) 650-5656

[Email a BCBSAZ Service Representative](#)

Additional Value-Added Programs

Discounts on health-related products and services

Jenny Craig®

ChooseHealthy™

WeightWatchers®
Stop Dieting. Start Living.

QualSight™
Preferred LASIK Pricing

Discounted services and/or products are provided by independent contractors who are solely responsible for services and/or products provided to eligible members. These contractors do not provide BCBSAZ products or services.



MEDICAL MANAGEMENT SERVICES OVERVIEW

Utilization Management

- Ensures that medical care is appropriate and covered under the plan
- Ensures that the right care is provided in the right setting
- Helps you maximize your benefit dollars

Case Management

- Provides personalized education and support to ensure the most appropriate and cost-effective treatment after an injury or serious illness is provided
- Helps you and your family to maximize your benefits to lower out-of-pocket costs and to ensure you get the best possible care
- Coordinate services and help you evaluate alternate care options

Healthy Pregnancy Program

- Maternity Nurse Specialists provide support and guidance both before and after delivery
- Provides education, coordinates health services, answers questions, and assists in maximizing plan benefits by directing you to appropriate care

MEDICAL MANAGEMENT SERVICES OVERVIEW (Continued)

Disease Management- “Vital Steps”

- Partners with you to teach healthy lifestyle choices to improve your health status
- Chronic conditions that are addressed in this program include:
 - Asthma
 - Diabetes
 - Coronary Artery Disease
 - Congestive Heart Failure
 - Chronic Obstructive Pulmonary Disease
 - High-Risk Pregnancy
- Nurse Coaches assist in creating a personalized plan of care to meet your personal needs and lifestyle.

To learn more about American Health’s programs and services call 866-244-8977

Why Blue Cross Blue Shield of Arizona administered by AmeriBen?

- Superior Customer Service
- Superior Provider Network
 - ***96% of Providers asked indicate they would recommend Blue Cross Blue Shield of Arizona***
- Superior Medical Management

State of Arizona

Benefit Liaison Training

October 2010



Tools and Programs to help you stay Healthy

-  myCIGNA .com
- Online Coaching Programs
- Lifestyle Management Programs
- Healthy Pregnancies, Healthy Babies Programs





LOG IN

User ID

Password



- > [Forgot your User ID?](#)
- > [Forgot your password?](#)
- > [Log in help](#)

Who can register for myCIGNA?

- > CIGNA plan subscribers (the person insured, either direct or through his/her employer).
- > Dependents of CIGNA plan subscribers that are covered by CIGNA mail-order pharmacy. Access to pharmacy information plus health resources and tools will be provided.
- > Members of CIGNA Medicare Access® (PFFS) and CIGNA Medicare Access Plus Rx® (PFFS). Access to discounts from Healthy Rewards® and health information will be provided.

[Register](#)

Welcome to myCIGNA.com

LIVE Well



Looking for another CIGNA website?

- > [CIGNA.com](#)
- > [CIGNAforHCP.com](#) for health care professionals
- > [CIGNAaccess.com](#) for employers and plan sponsors
- > [myCIGNAforhealth.com](#) for customers in the GWH-CIGNA network
- > [CIGNAMedicareAccess.Com](#) for CIGNA Medicare Access plans

myCIGNA Capabilities

myCIGNA helps consumers manage health care benefits and provides access to WebMD's suite of health information and decision support tools.

[View myCIGNA business hours](#)

[Take a tour of myCIGNA](#)

Not sure which site to use? Check your ID Card! > [+ Show me...](#)



© 2010 CIGNA
[Legal Disclaimers](#) | [Privacy Information](#)



Online Coaching Programs



Sleep Better, Feel Better, Live Better

Learn how to decrease stress levels and improve the quantity and quality of your sleep, as well as your energy and alertness.

Duration: 6 weeks



Energy & Performance

Focus on increasing your energy levels and fitness through better lifestyle habits, and learn how to reach and maintain better body weight.

Duration: 8 weeks



Feel Better, Look Better

You can get healthier and feel healthier by making better eating and exercise choices and decreasing your weight and Body Mass Index (BMI) score.

Duration: 8 weeks



Strength & Resilience

Find the support you need to balance work/life, decrease stress levels and improve coping skills.

Duration: 8 weeks



Free Lifestyle Management Programs

- Stress Management: "Strength & Resilience"
- Weight Management: "Healthy Steps to Weight Loss"
- Smoking Cessation: "Quit Today"

What You Get Guide for the Healthy Steps to Weight Loss Weight Management Program
Our multimedia approach to engage and empower individuals.



Promotional Communications	Participant Communications	
	Online Program	Telephone Program
<p>Posters, table tents & inserts Introduce and promote the program to employees.</p> <p>E-cards and newsletter articles Promote the program's benefits throughout the year with awareness series communications.</p>	<p>Website Participants can register online, learn about the program and what results they can expect, and experience personalized content.</p> <p>Welcome page</p> <p>Profile Information</p> <p>Quizzes & exercises</p> <p>Ongoing Emails</p>	<p>Personal lifestyle assessment tools</p> <p>Weight tracker</p> <p>Articles & recipes</p> <p>Coaching conversations Driven by participant's readiness to change, confidence and motivation.</p> <p>Workbook Facilitates coaching conversations with information and exercises.</p> <p>Toolkit Includes portion plate, pedometer and tape measure.</p> <p>Graduation letter Sent to participant upon program completion.</p>

*CIGNA and the "Tree of Life" logo are registered service marks of CIGNA Intellectual Property, Inc., licensed for use by CIGNA Corporation and its operating subsidiaries. All products and services are provided exclusively by such operating subsidiaries and not by CIGNA Corporation. Such operating subsidiaries include International Rehabilitation Associates, Inc. (Intracorp), CIGNA Behavioral Health, Inc., Wellife Limited, Connecticut General Life Insurance Company and HMO subsidiaries of CIGNA Health Corporation.



Healthy Pregnancies, Healthy Babies Program

*Preparing
for
BABY*



CIGNA Healthy Pregnancies, Healthy Babies, encourages early prenatal care. With the personal support you need to help you have a healthy pregnancy and baby.



Network of Doctors

- 580,000 Doctors Nationwide
- 12,000 Doctors in AZ
- Mayo Clinic
- Cigna Medical Group (CMG)



Friendly Doctors. Convenient Locations. Quality Care.

Cigna Medical Group

We've grown to care for you

- Deep roots in Arizona – large, long-standing medical practice (est. 1968)
- CMG participates in CIGNA's Arizona network of nearly 12,000 doctors and 78 hospitals
- CMG has you covered head to toe
 - Primary care, specialty care, general surgeons, pharmacists and more
 - 32 locations in the greater Phoenix area and growing
 - Health care centers, urgent care centers and convenience care clinics



Friendly Doctors. Convenient Locations. Quality Care.

Cigna Medical Group

Life is busy. We make it easier.

- **One-stop health care services.**
 - Many services available under one roof
- **Doctors you can trust.**
 - 94% patient satisfaction rating
 - 9 out of 10 surveyed are extremely/very likely to recommend us
- **Technology to enhance care and safety.**
 - Electronic health records and digital imaging
- **Special Programs for optimal health**



Friendly Doctors. Convenient Locations. Quality Care.

Cigna Medical Group CareToday

convenience care clinics

- Quick, convenient, affordable care for minor health needs
- No appointment needed
- Most visits are complete in 10-15 minutes
- Extended hours; open weekends and most holidays
- CIGNA customers pay only their applicable copay/co-insurance
- Perform simple labs (strep, pregnancy)
- Conveniently located at 10 easily accessible retail locations across the valley



NW corner of Central & Adams



¹ Overseen by a Cigna Medical Group Medical Director.

Confidential, unpublished property of CIGNA. Do not duplicate or distribute. Use and distribution limited solely to authorized personnel. © 2010 CIGNA

Friendly Doctors. Convenient Locations. Quality Care.

Medical care where you need it



♥ Health Care Center with Pharmacy

✚ Urgent Care with Health Care Center

● CMG CareToday Convenience Care Clinic

* Digital Imaging Services Offered



We're here when you need us

- 24/7 Member Services
- 1.800.968.7366
- Websites
 - Existing Members: www.myCIGNA.com
 - Non-Members: www.CIGNA.com/stateofAZ



Benefit Liaison Training 2010



Aetna Consumer Tools

Decision Support Tools - empowering members to make informed healthcare decisions

- ***Aetna Smartsource*** – Personalized, relevant healthcare information based on each person's needs
- ***Cost Estimator Tool*** – Real time out-of-pocket estimates for the most common medical, non-emergency healthcare services
- ***Personal Health Record*** – View, access and manage your health information in this secure, private secure online resource
- ***Informed Healthline*** – Talk to a registered nurse whenever you have a healthcare question, 24/7.
- ***Simple Steps to a Healthier Life*** – Health risk assessment, personalized action plan and online wellness programs that help you work towards your health goals.



Aetna Consumer Tools

Doc Find www.aetna.com

To search for providers using Aetna DocFind please select the following type of plan:

- EPO Type Plan
 - Open Access Aetna Select
- PPO Type Plan
 - Open Access Aetna Select
 - POS II
- HSA Type Plan
 - Open Access Aetna Select
 - POS II



Aetna Navigator www.aetna.com

- 24/7 access to claim activity and status via Navigator
- View HSA account balances, summaries, and activities
- List of qualified medical expenses
- Monthly paper statements available upon account holder request
- HSA Savings Calculation Tool
- HSA Video – teach basics of managing HSA account

Aetna Mobile - Information on the Go

Available now from any mobile browser!

- **Mobile Web:** Public DocFind, Registration, Log In, member ID card information, claim search/detail, Price-a-Drug, Personal Health Record and “Contact Us”

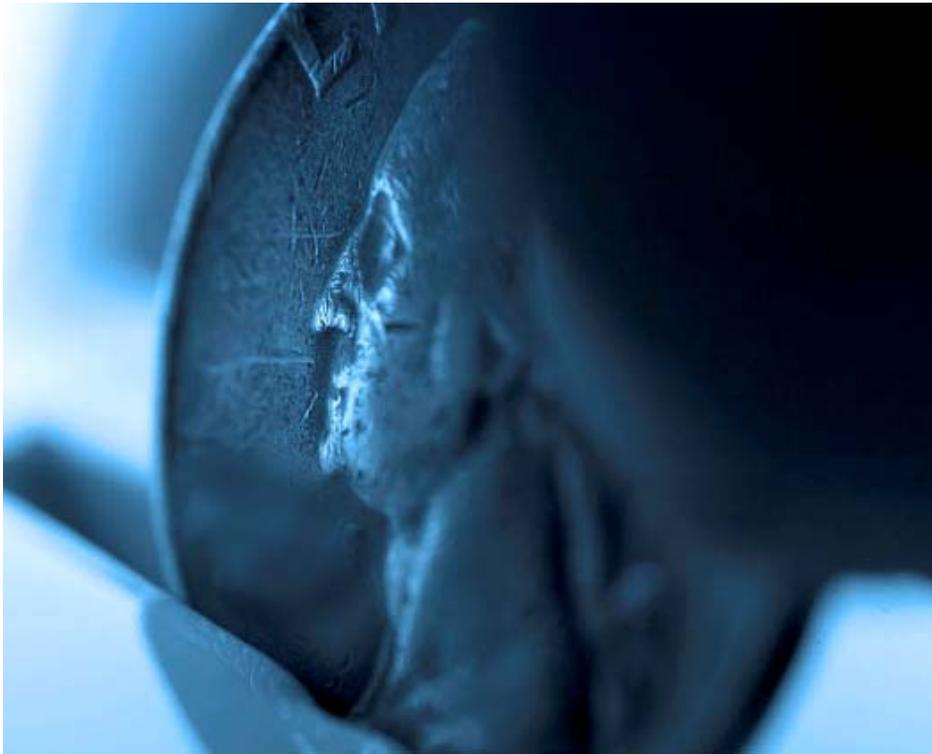
Aetna SmartPhone Application

- iPhone or Blackberry users can download free application that is designed specifically for Aetna members.
- Applications deliver an engaging user experience leveraging key features of smartphones.



Aetna Discount Programs

Bringing added value to you and your employees



- Aetna BookSM
- Aetna FitnessSM
- Aetna HearingSM
- Aetna Natural Products and ServicesSM
- Aetna VisionSM
- Aetna Weight ManagementSM
- Oral Health Care
- Zagat[®]

Care Management Programs



Beginning Right Maternity Program

- Case management from registered nurse, focused education material and comprehensive pregnancy handbook, high risk pregnancy survey and smoke free program for Mom –to- be.

Aetna Compassionate Care

- Offers service and support to members and their families when facing difficult decisions about a serious illness.

Aetna Health Connection – Disease Management

- Supports over 35 chronic health conditions
- CareEngine® combines the best in technology and identifies potential opportunities to improve care and generates Care Considerations that are delivered to physicians and/or members
- Complex Case Management - Provides personal support with one Aetna nurse manages for all of a member's conditions, using motivational counseling techniques to help empower the member to change behavior

Thank You for Your Business and Partnership.



We value your business and hope this information:

- Provides you with meaningful information as well as helps you excel in meeting your service goals and expectations.
- For follow up questions please contact myself Melissa Woodard your onsite Aetna representative.

Benefit Options

Choice. Value. Health.

MedImpact

Delivering · Flexible · Choice



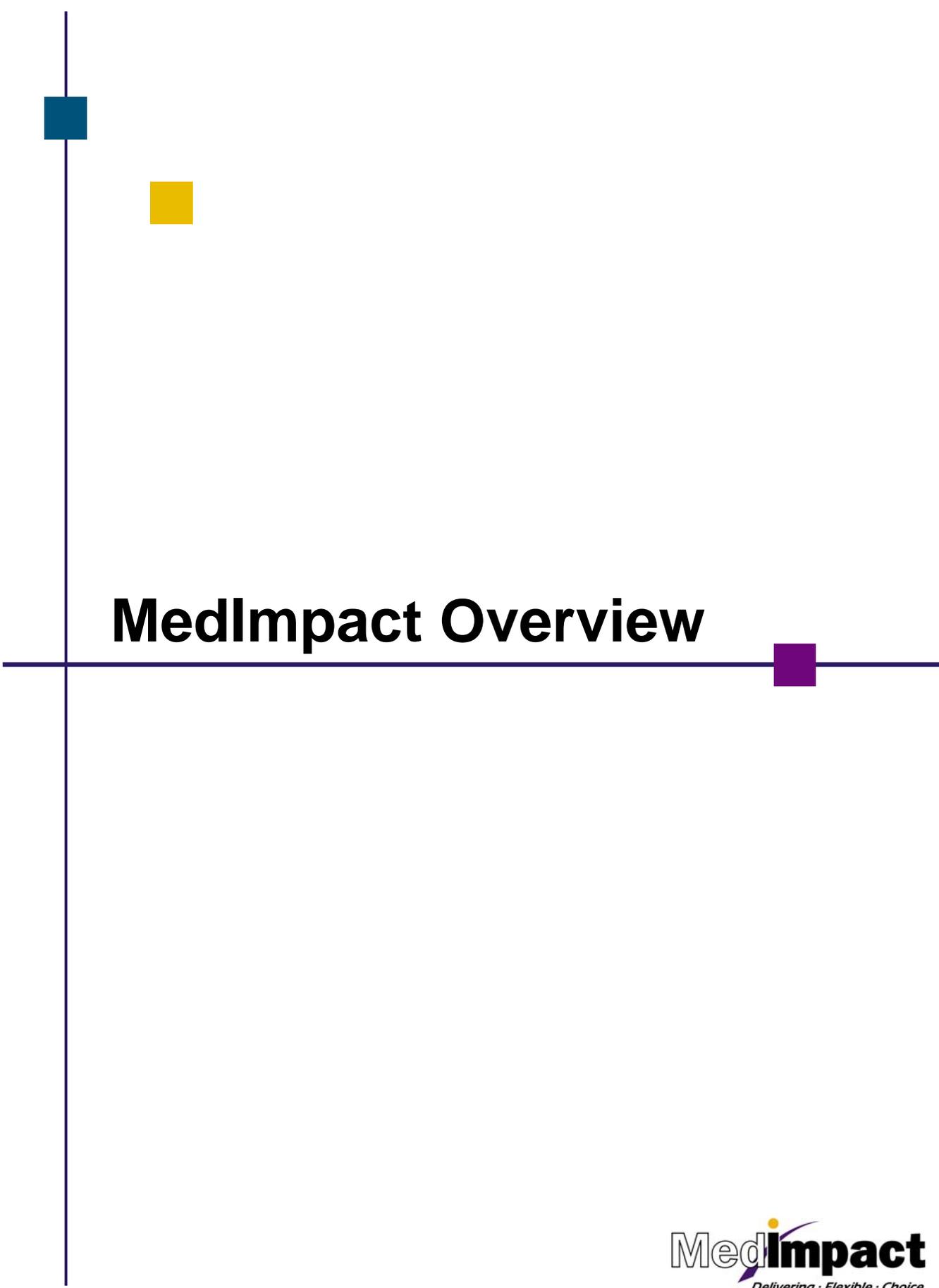
ADOA Benefit Liaison Training

The information contained in this presentation is intended for dissemination to business partners of MedImpact Healthcare Systems, Inc., only. Any other unauthorized use is strictly prohibited.

Table of Contents



- **MedImpact Overview**
- **Member Website**
- **Mail Order and Specialty Programs**
- **Prior Authorizations**
- **Step Therapy**
- **Resources**



MedImpact Overview

Who is MedImpact?

- **Largest Pharmacy Benefits Management company that does not sell drugs**
- **Is not a pharmacy**
- **Nation's largest privately owned PBM**
- **Services 32+ million lives**

PBM Industry Overview:



MedImpact

Fulfillment
Pharmacy

PBM

PBA

- Sells drugs through retail, mail and specialty pharmacies
- Offers “PBM-like” services

- Objectively manages each component of the Rx drug benefit
- Provides **checks & balances** to fulfillment pharmacies and drug manufacturers
- Drives **low net cost & high clinical quality**
- Remains transparent and **conflict free**

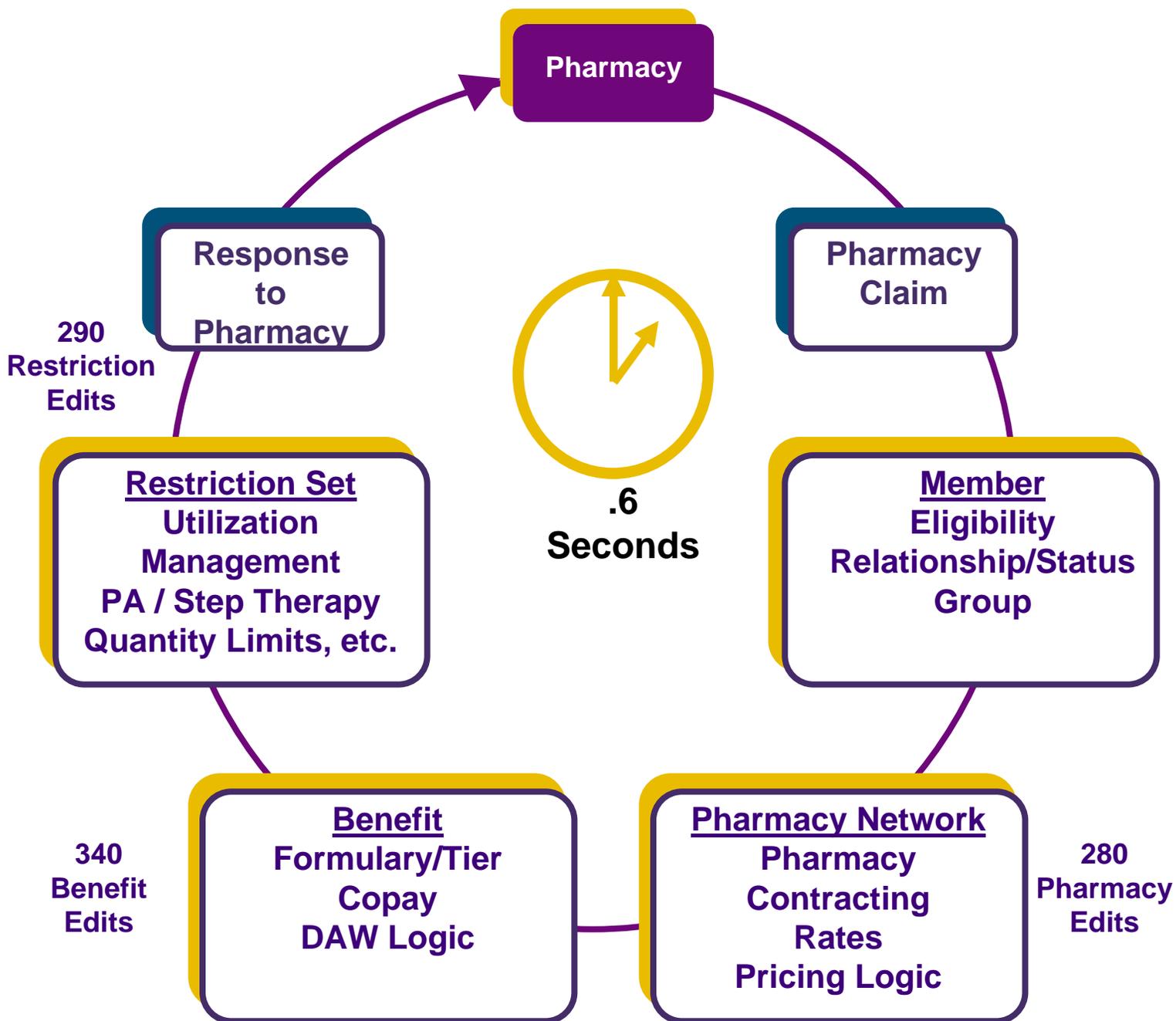
- Provides administrative services
- Processes Claims
- Minimal network influence

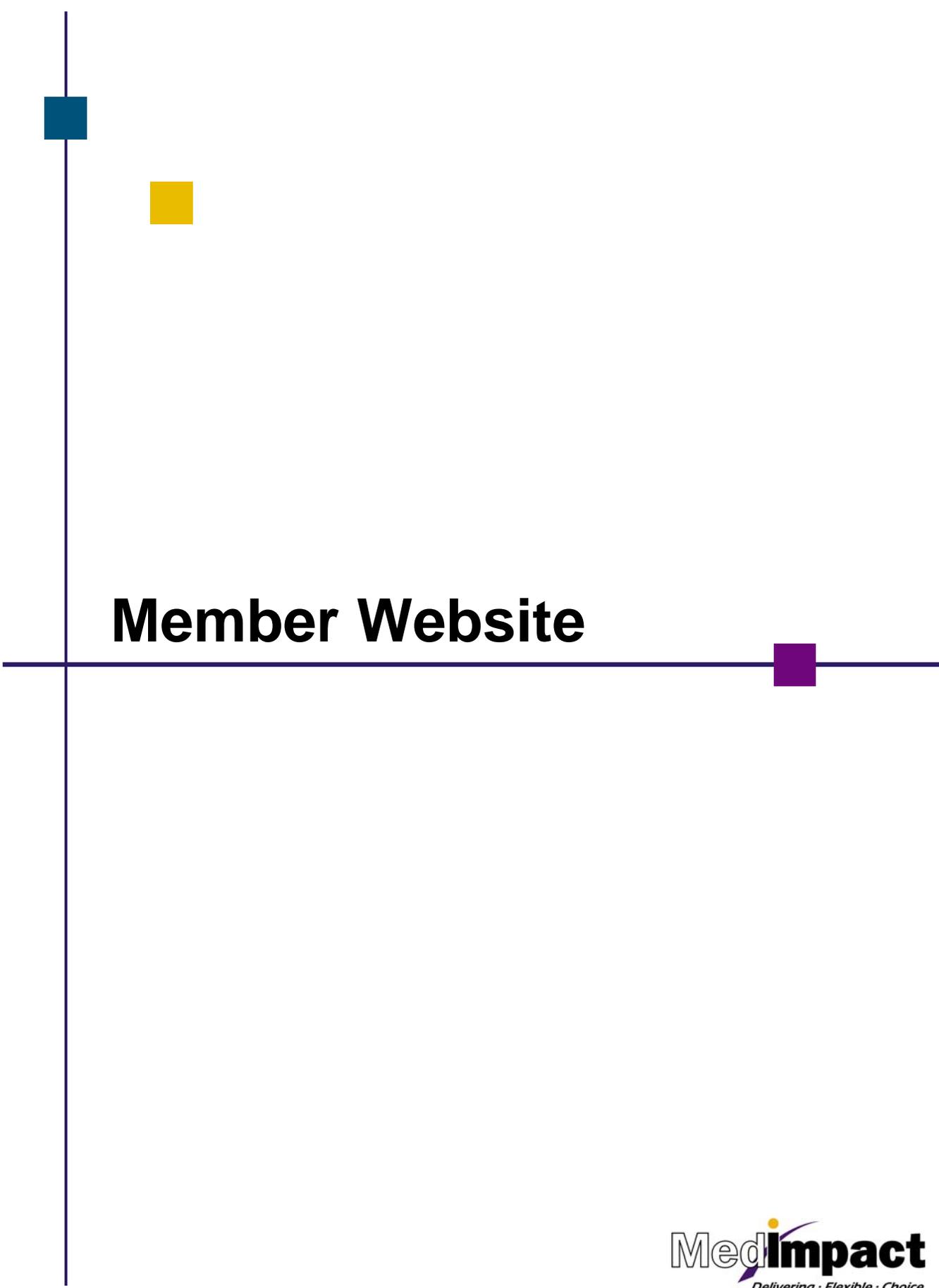
What does MedImpact do?



- **Claims Processing (on-line and paper)**
- **Customer Service**
- **Manages third-party pharmacy benefits**
- **Creates and maintain drug formularies and pricing**
- **Manages pharmacy networks (pharmacy contracting)**
- **Provides contracted clinical services**
- **Provides reports and trend analysis**
- **Provides Medicare Part D services to clients**
- **Offers solutions to challenges facing our clients**

PBM 101: Claims Adjudication



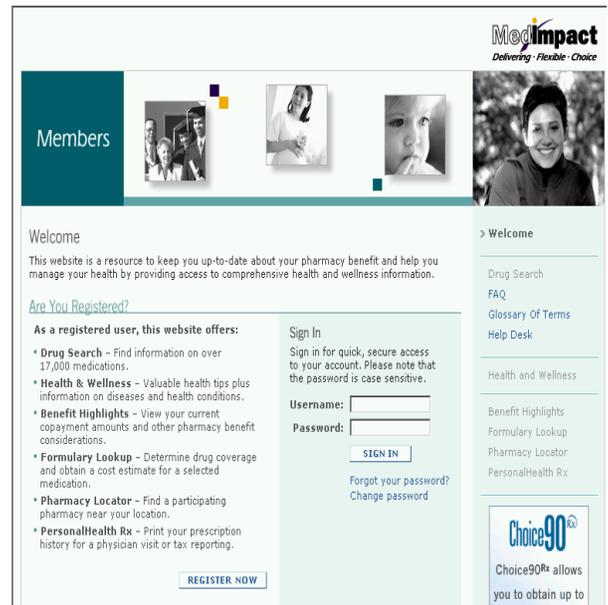
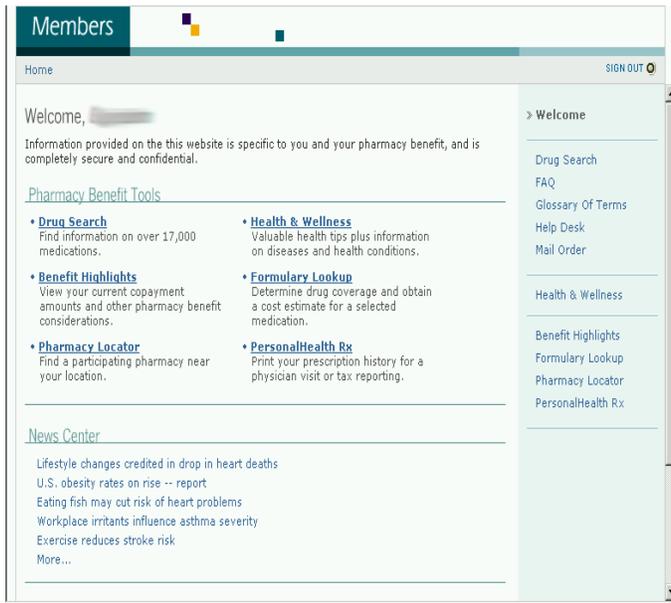


Member Website

Member Website Concept



The MedImpact Member Web Site allows consumers to obtain prescription benefit and drug coverage detail as well as health and wellness information that will better enable them to manage their own health and improve the quality of their care



Drug Search



Drug Search enables you to enter a drug name and retrieve comprehensive information about a drug, including possible medication uses, side effects, how to use the drug, common brand names, drug interaction information

Members

Home > Drug Search

Drug Search

The drug search tool allows you to find information on over 17,000 medications from the First Databank Corporation's vast resources.

The drug search section has a Selection will open in a new window.

Drug Search

The drug search has drugs. All of the corporation. Click to window.

The information on this site is recommendations of your physician up-to-date about your pharmacy comprehensive health and well

The information on this site is not intended to replace the diagnosis and treatment recommendations of your physician or other healthcare professionals. It is a resource to keep you up-to-date about your pharmacy benefit and help you manage your health by providing access to comprehensive health and wellness information.

HIPAA Statement | Privacy S

Copyright ©2005. All Rights Reserved.

Member Website - Microsoft Internet Explorer

Powered by the: **WorldDoc** Health Management System

back | return to: Drug Search list

Lipitor (Atorvastatin - Oral)

uses

Atorvastatin is an enzyme blocker (HMG-CoA reductase inhibitor), also known as a "statin". It is used along with a proper diet to help lower cholesterol and fats (triglycerides) in the blood. In general, this drug is prescribed after non-drug treatment options have not been fully successful at lowering cholesterol (e.g., diet change, increase in exercise, weight loss if overweight). Reducing cholesterol and triglycerides help prevent strokes and heart attacks. Atorvastatin is used in adults and children (10 years of age and older). Young girls must have had their first menstrual period before starting this medication.



how to use

Take this medication by mouth usually once daily with or without food, or as directed by your doctor. This drug is best taken in the evening. Dosage is based on your medical condition, response to therapy, and use of certain interacting medicines. Many of the drugs listed in the Drug Interactions

pronunciation(s)

(uh-TOR-eh-vuh-stah-tin)

common brand names

Lipitor

disclaimer

The following information is intended to supplement, not substitute for, the expertise and judgment of your physician, pharmacist or other healthcare professional. The information is not intended to cover all possible uses, directions, precautions, drug interactions, or adverse effects, nor should it be construed to indicate that use of a particular drug is safe, appropriate, or effective for you. Consult your healthcare

The information on this site is not intended to replace the diagnosis and treatment recommendations of your physician or other healthcare professionals. It is a resource to keep you up-to-date about your pharmacy benefit and help you manage your health by providing access to comprehensive health and wellness information.

Benefit Highlights



Benefit Highlights displays the current year's co-payment amounts and, if applicable, other pharmacy benefit considerations, such as benefit limits, deductibles or maximum out-of-pocket expenses

Members

Home > Benefit Highlights SIGN OUT

Benefit Highlights

Benefit Highlights displays the current year's copayment amounts and, if applicable, other pharmacy benefit considerations, such as benefit limits, deductibles or maximum out-of-pocket expenses.

Copayment amounts are often tied to formulary status and medication type. Generally, generic products are assigned the lowest amount, and non-formulary/non-preferred brand name drugs require the highest amount. Additional or different cost-sharing amounts may be applied to certain therapeutic categories, a specific drug class, or an individual drug, including but not limited to over-the-counter products, and these amounts may not show on the table below.

Copayment Amounts

Formulary Status and Medication Type	Retail (34-day Supply)	Choice90 Rx (34-day Supply)	Mail Order (90-day Supply)	Specialty (34-day Supply)
Formulary/Preferred Generic	\$5 + 20%	\$5 + 20%	\$15	\$5 + 20%
Non-formulary/Non-preferred Generic	\$5 + 20%	\$5 + 20%	\$15	\$5 + 20%
Formulary/Preferred Single-source Brand	\$15 + 20%	\$15 + 20%	\$30	\$15 + 20%
Non-formulary/Non-preferred Single-source Brand	\$15 + 20%	\$15 + 20%	\$30	\$15 + 20%
Formulary/Preferred Multi-source Brand	\$15 + 20%*	\$15 + 20%*	\$30	\$15 + 20%*
Non-formulary/Non-preferred Multi-source Brand	\$15 + 20%			

Other Pharmacy Benefit Considerations

Pharmacy Locator



Pharmacy Locator was designed to help you identify pharmacies that participate in the network that serves your pharmacy benefit plan

Members

Home > Pharmacy Locator SIGN OUT

pharmacy locator | search Powered by MAPQUEST

Welcome to Pharmacy Locator!
Pharmacy Locator was designed to help you identify pharmacies that participate in the network that serves your pharmacy benefit plan.

At a minimum, enter city and state OR zip, and select the distance you are willing to travel to a participating pharmacy. Pharmacy Locator will display participating pharmacies within the specified travel radius.

Obtain more exclusive results:

- To fill a prescription after normal business hours, select "Open 24 Hours."
- To fill a prescription for up to a 90-day supply of an ongoing medication, select "Choice90."

Address:

City:

State: Zip:

Show Locations Within:

Pharmacy Name:

Show Only: Open 24 Hours

Members

Home > Pharmacy Locator SIGN OUT

pharmacy locator | Search Results Powered by MAPQUEST

Your search returned: 20 pharmacies

Your address:
92131

Pharmacy Locator displays a maximum of 20 pharmacies. Results are ranked by closest distance to your search criteria. Click the "View Map" link to obtain a map and driving directions.

Nearest Pharmacies:

Pharmacy Name: VONS PHARMACY
Address: 10016 SCRIPPS RANCH BLVD, SAN DIEGO, CA 92131-1222
[View Map](#)
Phone: 858-621-5120
Distance: 1.23 miles from your address.

Pharmacy Name: MEDCO DRUGS
Address: 9999 MIRA MESA BLVD, SAN DIEGO, CA 92131-1006
[View Map](#)
Phone: 858-578-7895
Distance: 1.35 miles from your address.

Formulary Lookup



Formulary Lookup presents a list of medications, defines the formulary status of each of those medications and, by highlighting generic availability, assists you in determining if there are other alternatives within a specific drug class that may be available to you at a lower cost. Formulary Lookup also includes a Price Quote option that provides you with a cost estimate for a selected medication

Members

Home > Formulary Lookup

formulary lookup | Search

Welcome to Formulary Lookup!
Formulary Lookup presents a list of medications, defines the formulary status of each of those medications and, by highlighting generic availability, assists you in determining if there are other alternatives within a specific drug class that may be available to you at a lower cost. Formulary Lookup also includes a Price Quote option that provides you with a cost estimate for a selected medication.

You can search by drug name, brand or generic name, or general therapeutic category. * = Required

Drug Name Search
Enter a full or partial name. For example, enter "Lipitor"

Brand or Generic Name
Enter a brand or generic name. For example, enter "Lipitor" or "Atorvastatin"

— OR —

General Therapeutic Category
Select from the dropdown menu.

Price Quote
Select from the dropdown menu.

Members

Home > Formulary Lookup

price quote | Search Results

Your Price Quote search results for LIPITOR TABLET 20MG are listed below.

These Price Quote search results are estimates only. This information does not guarantee drug coverage and is calculated based on your current pharmacy benefit plan as of Tue Dec 13 16:53:43 PST 2005. The price may vary depending on when you pay for your medication, and may differ from pharmacy to pharmacy. The actual price may be higher or lower than the cost estimate displayed in the table.

General Therapeutic Category (GTC): [cardiovascular disease - lipid irregularity](#) (View More Classes)

Specific Drug Class (STC): [Lipotropics](#) (View More Drugs In Class)

Drug Name	Days Supply	Form Dose	Total Quantity	Your Cost	Restrictions
Retail					
LIPITOR	30	TABLET 20MG	30	\$32.81	Quantity limitation may apply.

Note: Price Quote includes sales tax (if applicable) for your state. Depending on tax laws for your state, medications may or may not be subject to sales tax.

[BACK](#) [VIEW MORE DRUGS IN CLASS](#) [SHOW MAIL ORDER PRICE QUOTE](#)

Members

Home > Formulary Lookup

formulary lookup | Search Results

Specific Drug Class: LIPOTROPICS

Status:
 F = Formulary
 NF = Non-formulary
 NC = Not Covered

Price Quotes:
Click on the to obtain your cost for that drug.

Generic Available?:
 = Generic Product
 YES = Generic Available
 NO = Generic Not Available

Generic drugs are **lower case, bold**. Brand drugs are UPPER CASE, no bold.

Price Quote Option: To obtain a price quote, click on the next to the drug name and then select the to obtain your cost for the form and dose of that drug.

General Therapeutic Category (GTC): [Cardiovascular disease - lipid irregularity](#) (View More Classes)

Specific Drug Class (STC): [Lipotropics](#)

Status	Drug Name (Expand for form and dose)	Price Quote	Chemical Name	Generic Available?	Notes
<input checked="" type="checkbox"/> F	<input type="checkbox"/> LIPITOR	<input type="checkbox"/>	ATORVASTATIN CALCIUM	No	
<input checked="" type="checkbox"/> NF	<input type="checkbox"/> clofibrate	<input type="checkbox"/>	CLOFIBRATE	<input checked="" type="checkbox"/> G	
<input checked="" type="checkbox"/> F	<input type="checkbox"/> ZETIA	<input type="checkbox"/>	EZETIMIBE	No	
<input checked="" type="checkbox"/> F	<input type="checkbox"/> VYTORIN	<input type="checkbox"/>	EZETIMIBE/SIMVASTATIN	No	
<input checked="" type="checkbox"/> NF	<input type="checkbox"/> TRIGLIDE	<input type="checkbox"/>	FENOFIBRATE	No	
<input checked="" type="checkbox"/> F	<input type="checkbox"/> fenofibrate, micronized	<input type="checkbox"/>	FENOFIBRATE, MICRONIZED	<input checked="" type="checkbox"/> G	
<input checked="" type="checkbox"/> F	<input type="checkbox"/> ANTARA	<input type="checkbox"/>	FENOFIBRATE, MICRONIZED	No	
<input checked="" type="checkbox"/> F	<input type="checkbox"/> LOFIBRA	<input type="checkbox"/>	FENOFIBRATE, MICRONIZED	No	
<input checked="" type="checkbox"/> F	<input type="checkbox"/> TRICOR	<input type="checkbox"/>	FENOFIBRATE, MICRONIZED	No	
<input checked="" type="checkbox"/> F	<input type="checkbox"/> LESCOL	<input type="checkbox"/>	FLUVASTATIN SODIUM	No	

PersonalHealthRx



PersonalHealthRx allows you to view and print current drug histories, including co-payments and compliance, as well as current benefit amounts and accumulators for deductibles and maximum out-of-pocket expenses. You may also view and print yearly tax reports of drug expenditures

The screenshot shows the 'Members' section of the PersonalHealthRx website. The page title is 'PersonalHealth Rx' and it includes a 'SIGN OUT' link. The main content area is titled 'Benefits Report | Results' and contains two columns of information: 'Account Information' and 'Insured Information'. Below these are fields for 'Name', 'Date of Birth', 'Primary Care Physician', 'Insured Name', 'Insured ID', and 'Insurance Carrier'. There is a 'Select Another Person' dropdown menu with a 'VIEW' button. The page also displays 'Reset Date: 01/01/2006' and 'Today's Date: 12/14/2005', along with a 'Printer Friendly Version' link. A table titled 'Benefit accumulator information' has columns for 'Accumulator Type', 'Benefit Amount', and 'Benefit Used'. The table shows one row for 'Individual out-of-pocket maximum amount'. A note at the bottom states: 'Note: The benefit amounts and accumulators displayed are for primary retail and mail order benefits only; other benefits may apply in certain circumstances.' A 'Return To PersonalHealth Rx Home' link is also present.

Accumulator Type	Benefit Amount	Benefit Used
Individual out-of-pocket maximum amount		

Health & Wellness



Disease & Conditions

The diseases and conditions section has a wealth of information on the most common health problems. All of the content has been written by Physician Specialists

Health Tips

The health tips section features tips on how to manage specific health situations

Health FAQs

FAQs are out of the most frequently asked questions for particular health topics. All of the content has been produced by Physician Specialists

The screenshot shows a web browser window titled "Member Website - Microsoft Internet Explorer". The page is for "WorldDoc Health Management System". The main content area is titled "Diseases & Conditions" and contains an alphabetical index of health conditions. A search bar is located on the right side of the page. The page also includes a "Members" sidebar and a "symbol legend" indicating that a blue circle icon represents a symptom.

Members

Home > Health And Wellness

Health & Wellness

Featuring health and wellness in a new window.

Diseases & Conditions

The diseases and conditions section has a wealth of information on the most common health problems. All of the content has been written by Physician Specialists.

Health Tips

The health tips section features tips on how to manage specific health situations.

Health FAQs

FAQs are out of the most frequently asked questions for particular health topics. All of the content has been produced by Physician Specialists.

Member Website - Microsoft Internet Explorer

Powered by the: **WorldDoc** Health Management System

back | return to: Diseases & Conditions list

This section contains a wealth of information on the most common health problems. If you have a name for your health concern, click on the letters below or directly on the condition name in the alphabetical list below. If you do not know what to call your health concern, use the search field on the right hand side to search for a key word that relates to your question. You may also go to the [Health & Symptom Evaluation](#) section to find information related to your symptoms.

A-B | C-D | E-F | G-H | I-J | K-L | M-N | O-P | Q-R | S-T | U-V | W-Z

diseases and conditions: A-B

Abdominal Aortic Aneurysm	Asthma
Abscess	Atherosclerosis (Clogged Arteries)
Acanthosis Nigricans (Dark Skin Patches)	Atopic Dermatitis (Eczema) In Children
Achalasia (Food Stuck)	Atopic Dermatitis (Eczema) In Adults
Achilles Spur (Heel Spur)	Atrial Fibrillation Or Flutter
Achilles Tendon Tear (Rupture)	Atrophic Vaginitis
Acne	Avascular Necrosis Of The Hip
Acoustic Neuroma	Avascular Necrosis Of The Knee
Acquired Immunodeficiency Syndrome (AIDS)	Axillary Adenopathy
Acrochordon (Skin Tags)	Axillary Breast Tissue

search the library

Enter a word, phrase or first letters:

SEARCH

SEARCH FULL LIBRARY

Search conditions only

Search symptoms only

Search FAQs only

Search videos only

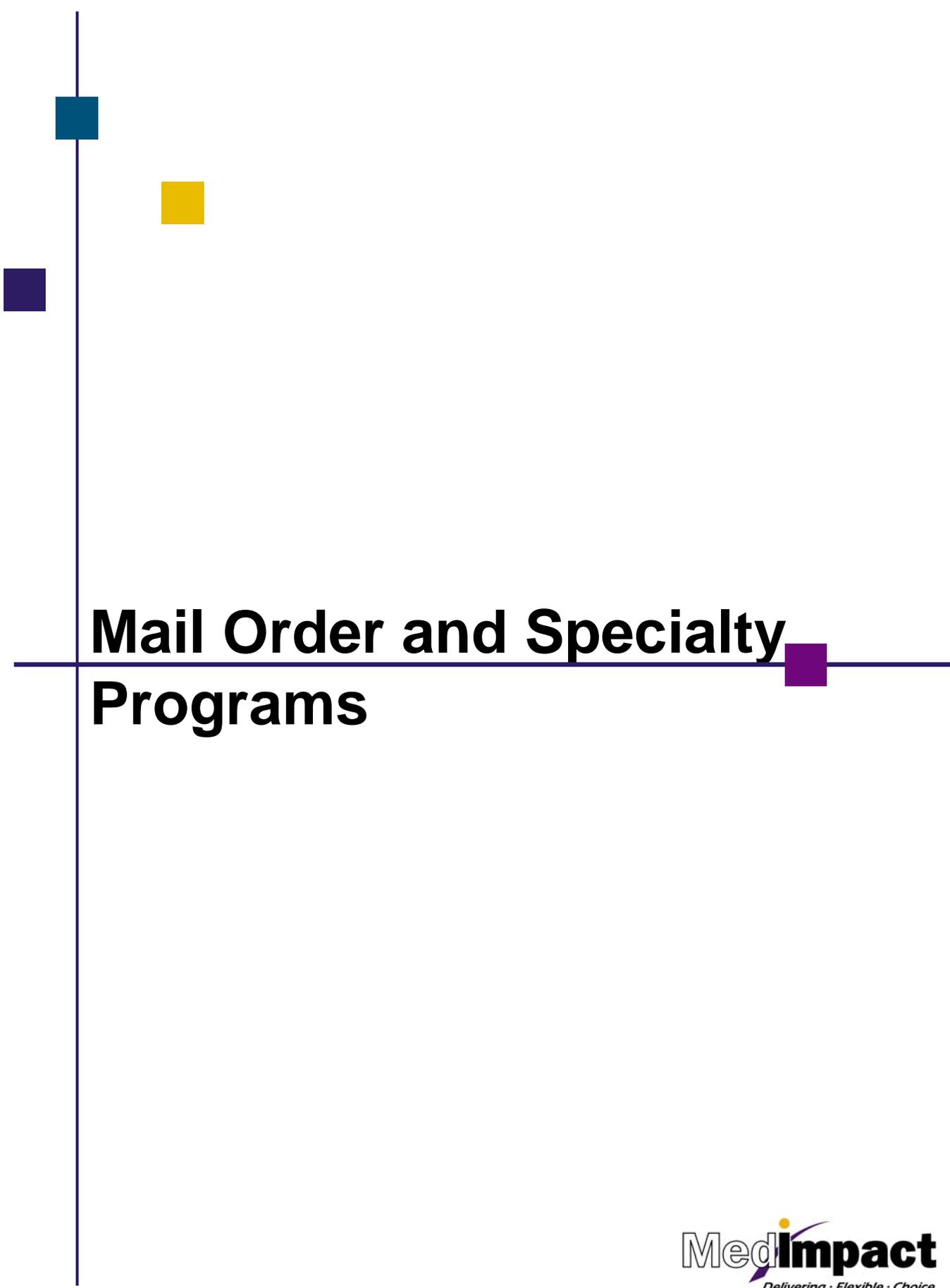
Search photos only

symbol legend

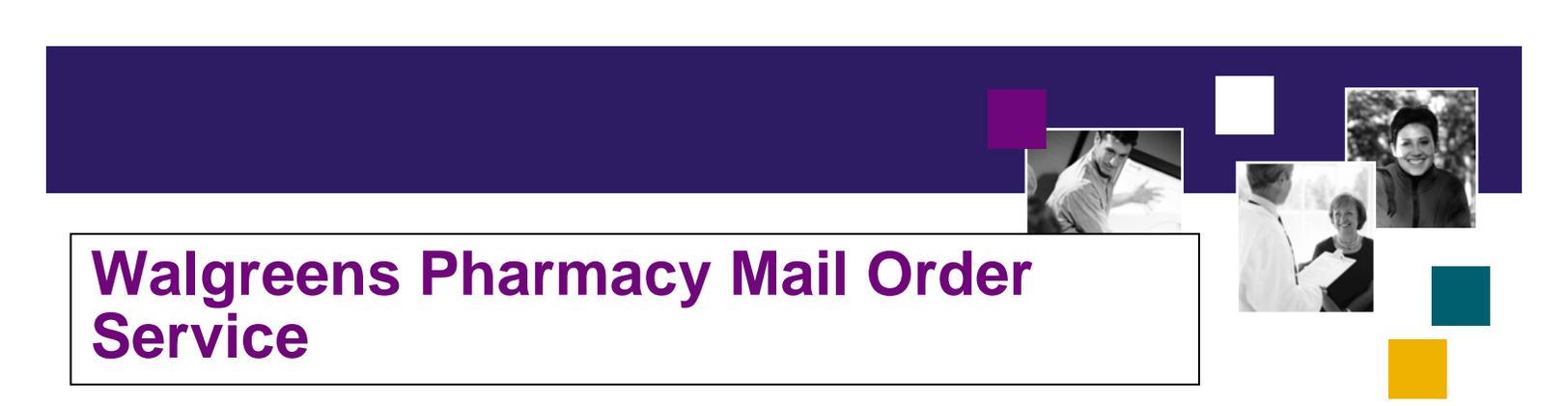
= Symptom

The information on this site is not intended to replace the diagnosis and treatment recommendations of your physician or other healthcare professionals. It is a resource to keep you up-to-date about your pharmacy benefit and help you manage your health by providing access to comprehensive health and wellness information.

The information on this site is not intended to replace the diagnosis and treatment recommendations of your physician or other healthcare professionals. It is a resource to keep you up-to-date about your pharmacy benefit and help you manage your health by providing access to comprehensive health and wellness information.



Mail Order and Specialty Programs



Walgreens Pharmacy Mail Order Service

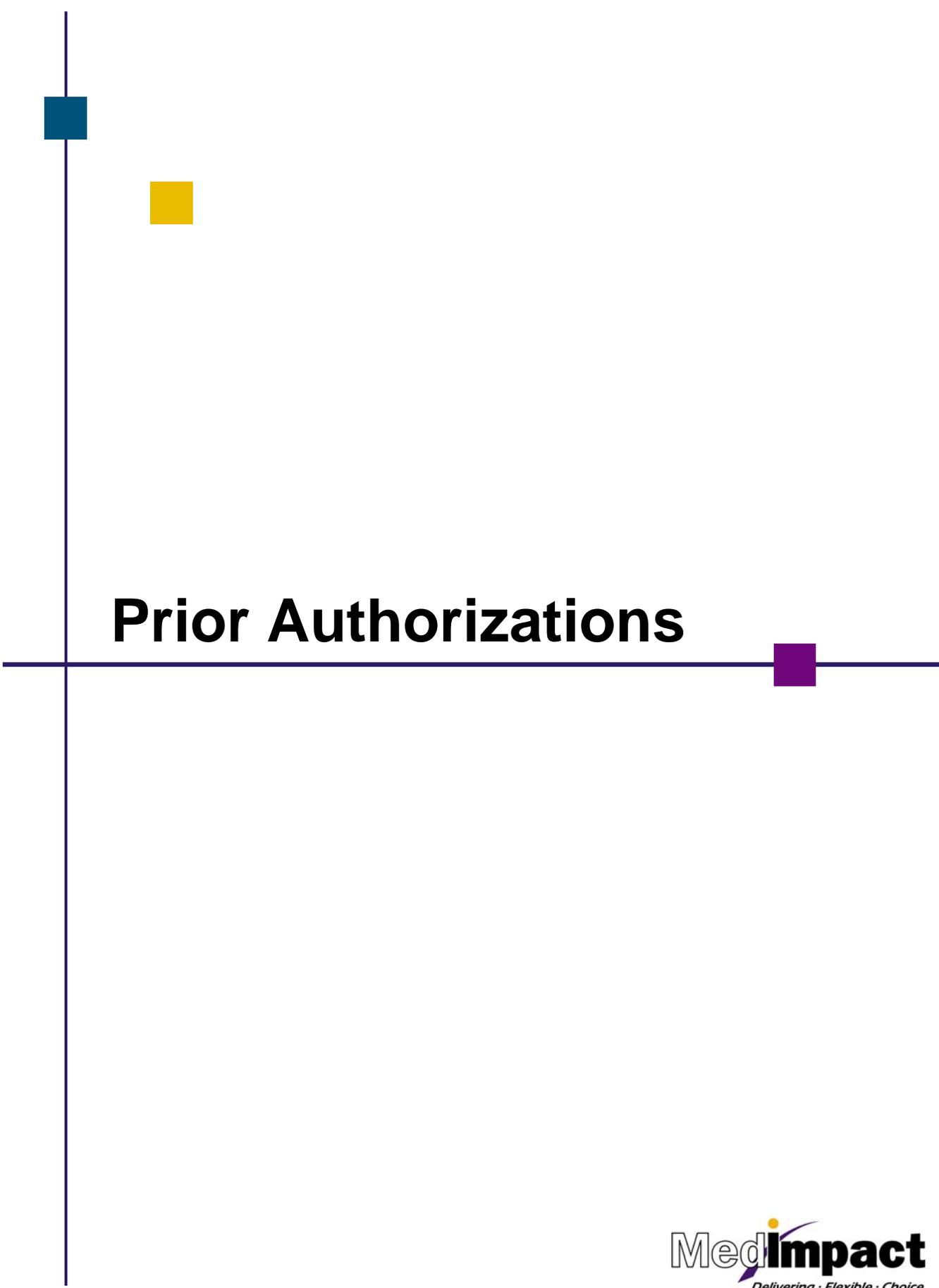
- A convenient and less expensive mail order service is available for employees who require medications for on-going health conditions or who will be in an area with no participating retail pharmacies for an extended period of time.
- Members can obtain a 90 day supply of medication for two co-pays.

Please note: MedImpact is not a pharmacy but has contracted with Walgreens Mail Order Pharmacy to provide these services.



Walgreens Specialty Pharmacy Program

- Certain medications used for treating complex health conditions must be obtained through Walgreens Specialty Program, as contracted by MedImpact.
- Certain conditions which may require Specialty medications include but are not limited to: Cystic Fibrosis, Enzyme Deficiency, Growth Hormone Deficiency, Multiple Sclerosis, Rheumatoid Arthritis, and Viral Hepatitis.
- The Walgreens Specialty Pharmacy Program includes monitoring of specific injection drugs and other therapies requiring complex administration methods and special storage, handling, and delivery. This program also provides patient education.
- Specialty medications are limited to a 30-day supply.
- Specialty medications are available through Walgreens Retail Pharmacies (subject to availability) or Walgreens Mail Pharmacies.



Prior Authorizations



Prior Authorization Services

■ **Prior Authorization (PA) & Utilization Management (UM)**

■ PA Programs:

- Provide an exception process for patients to receive certain non-formulary or restricted medications when medically appropriate (including medications subject to on-line edits)
- Ensure appropriate and cost-effective medication use consistent with the patient's benefit
- Control utilization of high cost medications by assuring that alternatives are used when appropriate
- Promote utilization of formulary alternatives
- Promote medication safety

Multi Level PA Structure



Operations Questions



Dedicated PA queue

First Level PA review



Tech can approve, not deny

Second Level review



Clinical Pharmacist

Higher level review



Physician Reconsideration

First Level appeal



Internal, Pharmacist

Second Level appeal



Internal, Pharmacist

Third Level appeal



**External reviewer,
physician specialist**

Types of PAs



■ Operational Override

- The evaluation shall not require professional consultation

■ Operational Overrides include:

- Vacation overrides
- Lost/stolen/spilled overrides
- Emergency PA
- School supply and facility overrides

■ Therapeutic PA

- The evaluation shall be governed by clinical PA protocols and approved for use by Aetna
- May require consultation with health care professionals
- Under oversight of the Medical and Pharmacy Director

■ Therapeutic PA includes:

- Prior authorization required
- Step therapy overrides
- Non-formulary medication requests
- Dispense As Written (“DAW”) exceptions (for Benefit Plans with DAW deny edits)
- Excluded medications
- Quantity restriction overrides
- Age restriction overrides
- Specialty overrides, and Co-payment exceptions

MRF – Medication Request Form



MedImpact Healthcare Systems, Inc.

Medication Request Form

DO NOT WRITE IN BLOCKED AREAS FOR INTERNAL USE ONLY
Contacted:
Physician:
Pharmacy:
Patient:

Attn: Prior Authorization Department
10680 Treena Street, Suite 500
San Diego, CA 92131
Phone: 1-800-788-2949
Fax: 858-790-7100

DO NOT WRITE IN BLOCKED AREAS FOR INTERNAL USE ONLY
Approved:
Denied:
Returned:
PA #

Instructions:

This form is to be used by participating physicians and providers to obtain coverage for a non-formulary drug for which there is no suitable alternative available. Please complete this form and fax to MedImpact Healthcare Systems, Inc. at (858) 790-7100 or please call (800) 788-2949 with this information. If you have any questions regarding this process, please contact MedImpact's Customer Service at (800) 788-2949.

Review Criteria:

The following criteria is used in reviewing medication requests:

1. The use of Formulary Drug Products is contraindicated in the patient.
2. The patient has failed an appropriate trial of Formulary or related agents.
3. The choices available in the Drug Formulary are not suited for the present patient care need and the drug selected is required for patient safety.
4. The use of a Formulary Drug Product may provoke an underlying medical condition, which would be detrimental to patient care.

Medication Request Information (please complete each section of this form prior to transmittal):

+ Patient Name (required):	Patient's Health Plan (required):
Patient ID # (required):	Physician Name/Specialty:
	Physician ID#/DEA #:
Patient DOB (required):	Physician Area Code and Telephone Number (required): () -
Diagnosis (required):	Physician Area Code and Fax Number (required): () -
Pharmacy used by Member:	Pharmacy Area Code and Telephone Number: () -
Drug Requested:	Quantity (per month):
Dose:	Length of Treatment (please be specific):
Strength:	Dosage Form (e. g. Oral, Injection):
Reason for Medication Request (please be specific, give detail):	
Other Medications Tried and/or Failed (please be specific, give detail):	
Other Pertinent History (relative or pertaining to this request):	



Step Therapy

Step Therapy – What is it?



- Step therapy is a clinical tool used in your prescription benefit to promote the use of effective, clinically appropriate medications that may be less costly.
- Step therapy requires that a patient try a clinically appropriate, lower cost medication first, or requires that their doctor has clinically documented why the patient is not a good candidate for the clinically appropriate, lower cost medication, or therapy.
- Example: If a member wants to obtain Ambien CR and does not have a history of being on this medication, they will need to try the generic Zolpidem Tartrate prior to being able to obtain the brand Ambien CR.

Step Therapy – How does it work



- The pharmacist uses step therapy to automatically review a patient's medication history to ensure the patient is filling the most clinically appropriate and cost effective prescription medication. Often, step therapy will recommend an alternative medication (sometimes a generic medication) to replace the more costly medication (sometimes a brand medication).
- Step therapy is used when the patient history shows that the brand or higher cost medication was not filled in the past. The patient now has the opportunity to evaluate if the clinically appropriate, lower cost drug works for them.
- For those patients that do not meet the step therapy requirements, the patient's doctor may submit a request for prior authorization, letting the pharmacy know that the patient meets the clinical criteria to receive the brand or higher cost medication without using step therapy.



Resources

Resources



www.benefitoptions.az.gov

- Access the MedImpact Member Portal
- Formulary List
- Mail Order Registration Form

Arizona Department of Administration

Benefit Services Division

2009 - 2010 Pharmacy

MedImpact Website and Documents

[MedImpact Member Portal](#)

This website is a resource to keep you up-to-date about your pharmacy benefit. Benefit Options members can register and log into the portal to find:

- **Drug Search** – Find information on over 17,000 medications.
- **Benefit Highlights** – View your current copayment amounts and other pharmacy benefit considerations.
- **Formulary Lookup** – Determine drug coverage and obtain a cost estimate for a selected medication.
- **Pharmacy Locator** – Find a participating pharmacy near your location.
- **PersonalHealth Rx®** – Print your prescription history for a physician visit or tax reporting.
- **Health & Wellness** – Valuable health tips plus information on diseases and health conditions.

[General Pharmacy Locator](#) -- You can find a participating pharmacy without registration by selecting **[General Pharmacy Locator](#)**.

[MedImpact Formulary List \(pdf\)](#) -- Effective through September 30, 2010

[Mail Order Registration Form](#)

Announcements

- [8.9.10 Member Letter- Special Enrollment](#)**
- [8.9.10 Member Postcard- Flexible Spending Accounts Special Enrollment](#)**
- [7.29.10 - 2011 Retired State Employee Insurance Premiums](#)**
- [7.24.10 - 2011 Active State Employee Insurance Premiums](#)**
- [7.7.10 2011 Benefits Open Enrollment period](#)**

Announcements Archive

[Privacy Policy - Accessibility](#)

Copyright 2009 - Arizona Department of Administration

Wellness
Be Well Stay Well.

Y.E.S.
ALL YOURS

AZ.GOV
Arizona's Official Web Site

- MedImpact Customer Service Help Desk can be reached 24/7 at 1-888-648-6769

Benefit Options

Choice. Value. Health.

HSA Option Benefits - Aetna HealthFund® Reference Guide



We want you to know®



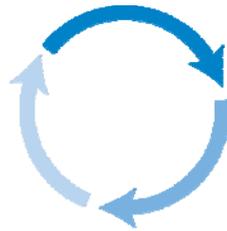
Health Savings Account (HSA) History



- Created by Medicare legislation in December 2003
- Used with a high deductible health plan (HDHP)
 - Insurance that does not cover first dollar medical expenses (except for preventive care)
- Not an insurance product
- Owned by individual, portable, not forfeited
- Accumulated HSA funds roll over
- Triple tax advantage
 - Contributions (individuals/employers)
 - Qualified withdrawals
 - Interest and earnings on account balance

HSA Option Benefits – HSA Plan Specifics

- An HSA Option member must pay a high deductible before insurance “kicks in” - Preventative services are available before satisfying the deductible
- All covered benefits must apply to plan deductible, including RX and Behavioral Health
- The State will contribute \$42 per month \$504 annually for employee only & \$83 per month \$996 annually for employee+adult, employee+child, and family



- Annual deductible of \$1,200 individual/\$2,400 family
- Annual out-of-pocket maximum of \$2,000 individual/\$4,000 family
- You can contribute to your HSA by payroll deductions (pre-tax), lump-sum deposits (post tax) – there are IRS limits to how much you can contribute per year
- Accumulated HSA funds roll over and anyone can contribute to the account – individual, employers, eligible family member or combination – IRS maximums apply to all contributions

How Members Withdraw HSA Funds

- HSA Visa® debit card
 - You may use this card to pay for appointments at the time of service
 - Payment up to available HSA funds at time of withdrawal
 - Debit card can be used at select ATMs for a fee
 - Second Debit card available on request once member enrolls (free of charge, only 2 cards per account)
- HSA checkbook
 - Option for accountholders to request checks for a fee
- HSA AutoDebit



HSA Member Enrollment

HSA Enrollment 3 Easy Steps

1. Member elects HSA
2. Reviews Fee Schedule
3. Reviews Custodial Agreement
4. Elects Payroll deduction amount

Customer Identification Process (CIP)

1. 95% pass within 1 day
2. Verifies personal member information (e.g., SSN, Name, Address & DOB)
3. Required by Section 326 of the USA Patriot Act.

CIP Pass – Account Opened

1. Member receives Welcome Kit within 10-14 days of the effective date
2. Member activates HSA debit card
3. Member can access HSA information via Navigator

CIP Failed – Account Closed

1. JPMC sends letter(s) to member requesting additional information
2. Member provides supporting documentation
3. If received and approved, HSA is opened
4. After 3 failed attempts for supporting documentation, account will be closed.

HSA Member Enrollment - continued



Things you should know:

- The HSA account with JPMC must be established before qualified medical expenses are incurred to receive distributions free from federal taxes and state tax (for most states).
- The “Establishment Date” of an HSA is important because an accountholder can only receive tax-free distributions from his/her HSA to pay or be reimbursed for qualified medical expenses incurred after the date the HSA is considered “established” (See IRS Notice 2004-02; Q&A 26).
- Electronic funds file is sent to Aetna to release contributions from the employees payroll to deposit in their HSA account every payroll run – approximately 3 to 5 business days until funds are available

HSA Option Benefits – Online References & Tools

- **Aetna Navigator** <https://www.aetna.com>
 - 24/7 access to claim activity and status via Navigator
 - View HSA. account balances, summaries, and activities
 - List of qualified medical expenses
 - Monthly paper statements available upon accountholder request

The screenshot displays the Aetna Navigator website interface. At the top, there are navigation links for Plan Guide, New! Health Information Guide, and Site Map. Below this, there are sections for Health Management (Personal Health Record, Simple Steps To A Healthier Life), Cost of Care (Prescription Drug Costs), and Recent Claims. The Recent Claims table lists service dates, names, birth dates, and service providers. There are also sections for Balances (Health Savings Account) and Benefits (Who's Covered).

Service Date	Name	Birth Date	Serviced By	
11/12/2008	DEPENDENT1	08/06/1964	WALGREENS	Search all claims Details
01/01/2008	SUBSCRIBER	08/06/1964	DINESH SHAW	Details
01/01/2008	DEPENDENT1	08/06/1964	DINESH SHAW	

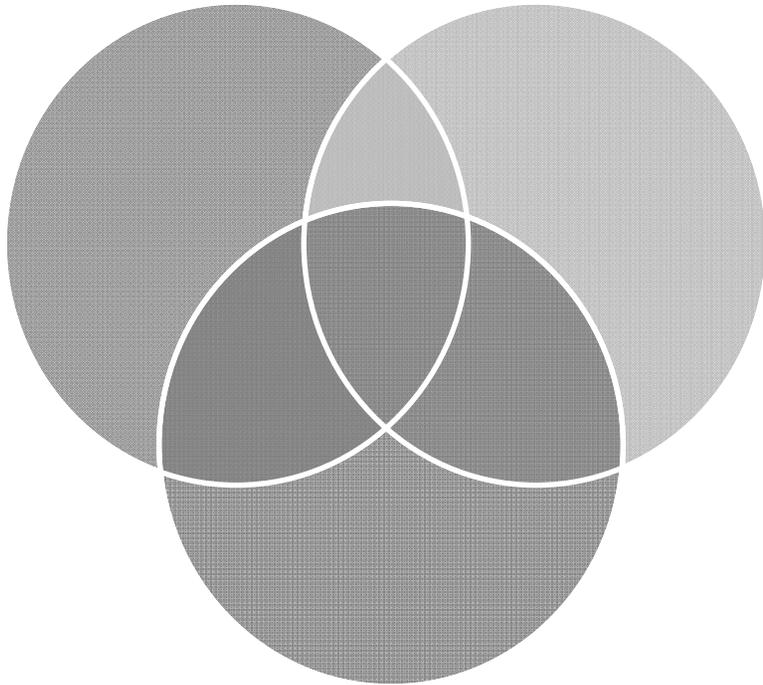
Health Savings Account	Details
Access Your Account	
Health Savings Account AutoDebit	Enroll Now

Who's Covered	Birth Date
SUBSCRIBER	01/26/1964
DEPENDENT1	10/28/2000
DEPENDENT2	10/28/2000
DEPENDENT3	08/06/1964
DEPENDENT4	09/17/1987

Copyright 2001-2008 Aetna Inc.
[Home](#) | [Contact Member Services](#) | [Web Privacy Statement](#) | [Legal Statements](#) | [Privacy Notices](#) | [Member Disclosure](#) | [Special Needs](#)

- **HSA Savings Calculation Tool** - Use the HSA Savings Calculation Tool to help you discover the savings opportunity and tax advantages associated with a Health Savings Account (HSA).
- **HSA Video** - The HSA Online Videos teach enrolled HSA accountholders and those considering enrolling in an HSA plan, the basics of managing the HSA. It also helps employees and members understand how to make the right health care choices and how to manage the savings account in a simple, conversational style. http://www.aetna.com/hsa/welcome_video01.html

HSA Option Benefits – Online References & Tools



- **JP Morgan Chase** – 24/7 access to account balances online at <https://www.chasehsa.com> or the employee can contact member services directly at 866-410-1798 – please note the employee will have to use their SSN instead of EIN to get through the systems.
 - Auto Debit Feature to automatically make payments to your providers
 - Electronic Funds Transfer from outside bank to your HSA account
 - Online Bill Pay makes it easy for any payment plans to providers

Thank You for Your Business and Partnership.



We value your business and hope this information:

- Provides you with meaningful information related to the HSA Plan.
- Helps you excel in meeting your service goals and expectations.

2011 Benefits Open Enrollment

**PRE-PAID/DHMO DENTAL
A500S**

Product Training

www.tdadental.com/adoa

PLAN HIGHLIGHTS

- No Deductible
- No Annual Plan Maximum
- No Waiting Periods
- No Pre-Existing Conditions(except for procedures in progress)
- No Gatekeeper to Specialist Care
- No Prior Authorizations
- No Predetermination of Benefits
- No Missing Tooth Clause
- In-Network Coverage Only (except for emergencies)
- \$50 Allowance for Emergency
- Out-of-State dependents /students allowed with in-network coverage only
- Benefits are the same for Actives and Retirees

2011 Benefits Open Enrollment

www.tdadental.com/adoa

PLAN ADVANTAGES

- No Separate per Appointment Office Visit
- Copays Required for Covered Services (General Dentist)
- Copays for Specialty Care (Endodontists, Periodontists, Oral Surgeons)
- Pediatric and Prosthodontic Care covered at TDAHP Negotiated Rate
- Fixed Lab Fee Copays (\$185 for Crowns - \$275 for Partials and Dentures)
- Adult and Child Orthodontia Coverage (no lifetime benefit maximum)
- Sealants to age 17 and Fluoride to age 15
- Resin (white) posterior fillings
- Value Added Discount Programs (hearing, vision and prescription)
- Each family member may choose a different General Dentist
- Discount hearing, vision, and prescription drug programs included

2011 Benefits Open Enrollment

www.tdadental.com/adoa



PLAN RATES

2011 ACTIVE STATE EMPLOYEE DENTAL PREMIUMS

	<u>Monthly</u>	<u>Annual</u>
Single	\$ 5.00	\$ 60.00
Employee + 1	\$ 9.00	\$108.00
Family	\$14.00	\$168.00

2011 RETIRED STATE EMPLOYEE DENTAL PREMIUMS

Having or Not Having Medicare Does Not Impact Rates

	<u>Monthly</u>	<u>Annual</u>
Retiree	\$ 9.96	\$119.52
Retiree + 1	\$18.92	\$227.04
Retiree + Deps	\$27.70	\$332.40

2011 Benefits Open Enrollment

www.tdadental.com/adoa



CONTRACTED PROVIDERS

- General Dentists = 1,046 (added 163 since October, 2009)
- Endodontists = 119 (added 12 since October 2009)
- Periodontists = 70 (added 3 since October 2009)
- Oral Surgeons = 134 (added 16 since October 2009)
- Orthodontists = 155 (added 23 since October 2009)
- Pedodontists (Pediatric) = 74 (added 28 since October 2009)
- Prosthodontist = 2
- TMJ Specialists = 2

2011 Benefits Open Enrollment

www.tdadental.com/adoa

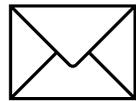


TDAHP PLAN CONTACTS



TDAental.com/ADOA

On-line Provider Search
Change/Select General Dentist
Provider Nomination
A500S Benefit Plan Booklet



**2111 E Highland Ave
Suite 250
Phoenix, AZ 85016**



**(602) 266-1995 #2
(602) 381-4280
(866) 921-7687**

Bi-Lingual (Spanish) Reps
Claims Status
Customer Service



Delta Dental of Arizona State of Arizona Benefit Liaisons - Training

Benefit Options
Choice. Value. Health.

 **DELTA DENTAL®**



The Dental Benefits Leader

- Delta Dental covers more than 54 million people in nearly 93,000 accounts nationwide
- Delta Dental covers more than one of every four Americans with dental benefits
- Dentist networks serve all 50 states, the District of Columbia, and Puerto Rico
- Nearly 86 percent of practicing dentists participate in one or more of our networks
- More than 96 percent of customers stay with Delta Dental
- More than 204,700 access points nationwide



Benefit Options

Choice. Value. Health.

The Delta Dental Difference



What is the Delta Dental Difference?

Experience.

The Delta Dental system is the nation's largest, most experienced dental benefits carrier.

Access.

Our dental networks are unrivaled—the largest in the nation. With more than 3,030 AZ Dentists and 5,164 locations in AZ & 220,900 locations nationwide.

National capabilities, local presence.

We provide all the advantages of a national plan with local control and service. For more than 38 years, DDAZ has been providing quality dental benefits to Arizona residents.

Service.

Our local customer service representatives are committed to providing you with the best service in the business.

Benefit Options

Choice. Value. Health.

The Delta Dental Difference



Finding a network dentist

At Delta Dental of Arizona, we've made our dentist directories accessible through the Internet and our toll-free phone line. Delta Dental has over 134,200 participating dentists in our networks across the United States and more than 3,000 network dentists in Arizona. That means more than 85% of dentists in Arizona are associated with Delta Dental.

BY TELEPHONE

To access our dentist directories from a touch-tone phone, call 800-352-6132 select Option 5 and follow the automated instructions. Participating dentists are searched by ZIP code. The name, address, and phone number for each dentist will be listed in alphabetical order.

ON THE WEB

Our user-friendly website allows you to find a dentist, quickly and easily. Go to www.deltadentalaz.com and select "Dentist Search" from the "Looking for a Dentist" section of the home page.

1. Product Selection: Click on the applicable network: Delta Dental PPO
2. Your Location: Enter your address, city, and state, or ZIP code.
3. Sorting and Distance: Allows you to search for specific criteria.
4. Additional Search Criteria: Allows you to search for dentists by their last name, practice name, or specialty. Your search will list dentists in your area. Results can be sorted by name, contact information, and driving distance. This list can be printed, e-mailed, or viewed in a PDF file.



Dedicated State of Arizona Toll-Free Hot line:

866-9STATE9 or 866-978-2839

Local Claims & Customer Service:

602-588-3620

P.O. Box 43026, Phoenix, AZ 85080-3000

Benefit Options

Choice. Value. Health.

The Delta Dental Difference

The **Subscriber Connection** gives you access to your dental benefit information 24/7! Log-in or create your new account today and take advantage of all you can do on-line:

- Eligibility Information
- Deductibles
- Claims History & Status for you and your dependents
- Maximums & Benefit Levels
- Procedure Code Search
- Print Additional ID Cards
- Coordination of Benefits
- View & Print Benefit Booklet

Creating your account is **FAST** and **EASY!**

- 1) Select the “Subscriber Connection” tab on the Subscriber page and click on the “Register Here” link.
- 2) Fill in your First and Last Name (*primary subscriber only*), Subscriber ID, Date of Birth and click on “Register User”.
- 3) Choose a User Name and Password, enter in your email address and choose a Challenge Question and Answer then click on “Register User”.
- 4) Click on “continue” to read the Terms of Use and once you click on “Agree” your information will instantly be available to you.

Benefit Options

Choice. Value. Health.





Local Claims & Customer Service...



- ❑ Dedicated State of Arizona Toll-free customer service number staffed by personnel with dental backgrounds
- ❑ Toll - Free hotline 1-866-9state9 or 866-978-2839
- ❑ Local dedicated number 602-588-3620
- ❑ 24/7 access to information at: www.deltadentalaz.com
- ❑ Access to the nation's largest network of dentists, Delta Premier with Preferred Access

Benefit Options
Choice. Value. Health.

The Delta Dental Difference



Mini-Benefit Period

Delta Dental PPO plus Premier

State of Arizona:
Active, University Employees, & Retirees

- Deductibles do not apply for routine services
- No waiting periods
- Access to Arizona's largest network
- No missing tooth clause
- Claims filled by participating dentists

October 1, 2010 to December 31, 2010

Benefit Period Maximum: \$500 per person

Deductibles: \$50/\$150

Deductible satisfied during previous benefit year 10/01/2009 - 9/30/2010 will be credited to this mini benefit period.

Diagnostic & Routine Services Covered at 100%:

Diagnostic: Exams, evaluations or consultations (once in this benefit period Oct. - Dec.)

X-rays: Bitewings (once in this benefit period Oct. - Dec.)

Preventive: Routine cleanings (limited to once in this benefit period Oct. - Dec.). Topical application of fluoride (once in a benefit period up to age 18), space maintainers (for missing posterior primary (baby) teeth up to age 14).

Benefit Options

Choice. Value. Health.

The Delta Dental Difference



Mini-Benefit Period...continued

Basic Services Covered at 80%:

Restorative: Fillings (silver amalgam, or synthetic tooth colored fillings), stainless steel crowns (for primary (baby) teeth only), sealants for children (once per 3-year period for permanent molars and bicuspids to age 19).

Endodontics: root canal treatment and pulpotomy (primary (baby) teeth).

Periodontics: Treatment of gum disease (non-surgical, once every 2 years. Surgical once every 3 years).

Oral Surgery: Extractions, general anesthesia (for surgical extractions or other surgical procedures performed in a dental office).

Emergency: Treatment for the relief of pain and limited prescriptions.

Major Services Covered at 50%:

Prosthodontics: Bridges, partial dentures, and complete dentures.

Restorative: Crowns and onlays.

Bridge & Denture Repair: Repair of such appliances to their original condition including relining of dentures.

Replacement: Replacements are covered once every 5 years for all major services from date last performed. Does not provide for lost, misplaced or stolen bridges or dentures.

Orthodontics Services Covered at 50% :

Benefit available for both adults and children. Lifetime Orthodontia benefit is limited to a maximum of \$1,500 per patient - payable in two (2) payments - upon initial banding and 6 months after. This maximum is separate from the benefit year maximum for your other dental benefits.

Benefit Options

Choice. Value. Health.

The Delta Dental Difference



Benefit Year

Delta Dental PPO plus Premier

*State of Arizona:
Active, University Employees, & Retirees*

- Deductibles do not apply for routine services
- No waiting periods
- Access to Arizona's largest network
- No missing tooth clause
- Claims filled by participating dentists

January 1, 2011 to December 31, 2011

Benefit Year Maximum: \$2,000 per person
Deductibles: \$50/\$150

Diagnostic & Routine Services Covered at 100%:

Diagnostic: Exams, evaluations or consultations (twice in a benefit year).

X-rays: Full mouth/Panorex or vertical bite wings (once in a 3-year period), bitewing (twice in a benefit year), and Periapical.

Preventive: Routine cleanings (limited to twice in a benefit year, or 1 difficult cleaning may be exchanged for 1 routine cleaning. However, the difficult cleaning is limited to not more than once in a 5-year period). Topical application of fluoride (twice in a benefit year up to age 18), space maintainers (for missing posterior primary (baby) teeth up to age 14).

Benefit Options

Choice. Value. Health.

The Delta Dental Difference



Benefit Year...continued

Basic Services Covered at 80%:

Restorative: Fillings (silver amalgam, or synthetic tooth colored fillings), stainless steel crowns (for primary (baby) teeth only), sealants for children (once per 3-year period for permanent molars and bicuspids to age 19).

Endodontics: root canal treatment and pulpotomy (primary (baby) teeth).

Periodontics: Treatment of gum disease (non-surgical, once every 2 years. Surgical once every 3 years).

Oral Surgery: Extractions, general anesthesia (for surgical extractions or other surgical procedures performed in a dental office).

Emergency: Treatment for the relief of pain and limited prescriptions.

Major Services Covered at 50%:

Prosthodontics: Bridges, partial dentures, and complete dentures.

Restorative: Crowns and onlays.

Bridge & Denture Repair: Repair of such appliances to their original condition including relining of dentures.

Replacement: Replacements are covered once every 5 years for all major services from date last performed. Does not provide for lost, misplaced or stolen bridges or dentures.

Orthodontics Services Covered at 50% :

Benefit available for both adults and children. Lifetime Orthodontia benefit is limited to a maximum of \$1,500 per patient - payable in two (2) payments - upon initial banding and 6 months after. This maximum is separate from the benefit year maximum for your other dental benefits.

Benefit Options

Choice. Value. Health.

The Delta Dental Difference

Third Cleaning Benefit

As a way of supporting **preventive care, improving health** and **lowering overall costs** for members with qualifying medical conditions, we have added a third dental cleaning option. This benefit is available to persons who have had two cleanings during the current benefit period and have: **Benefit applies to benefit year max**

- Diabetes
- Women in their third trimester of pregnancy
- Renal Dialysis patients
- Suppressed immune system patients (due to chemotherapy, HIV positive, organ transplant, or stem cell/bone marrow transplant)
- Head and neck radiation patients

To register for this benefit, visit our Subscriber Connection at: www.deltadentalaz.com



Benefit Options

Choice. Value. Health.

The Delta Dental Difference



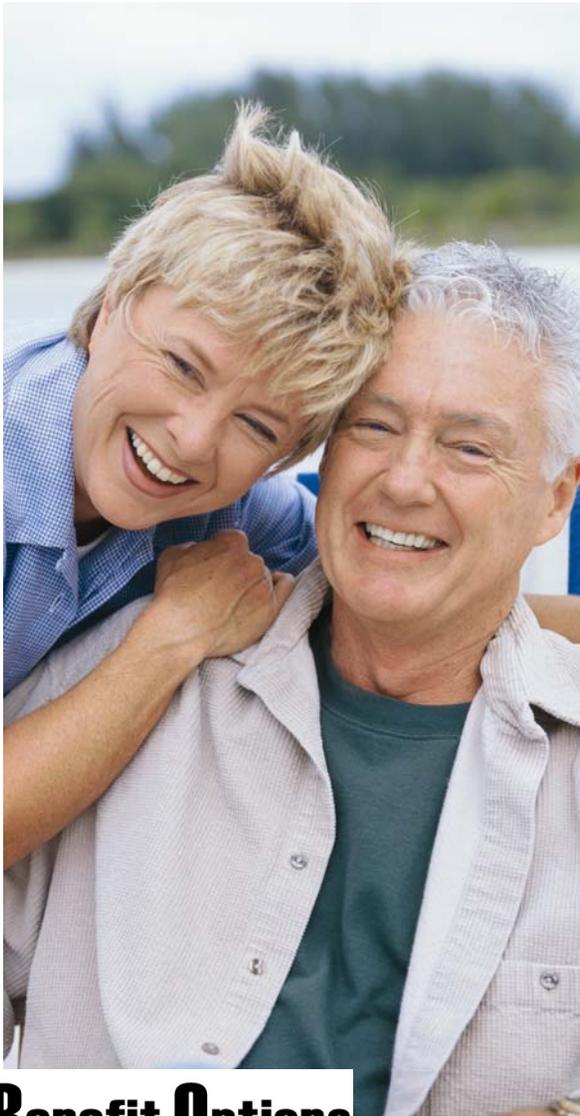
100% Diagnostic and Routine Services

Diagnostic: Exams, evaluations or consultations (twice in a benefit year).

X-rays: Full mouth/Panorex or vertical bite wings (once in a 3-year period), bitewing (twice in a benefit year), and Periapical.

Preventive: Routine cleanings (limited to twice in a benefit year, or 1 difficult cleaning may be exchanged for 1 routine cleaning. However, the difficult cleaning is limited to not more than once in a 5-year period. Topical application of fluoride (twice in a benefit year, up to age 18), space maintainers (for missing posterior primary (baby) teeth up to age 14).

Other covered services



80% Basic Service

Restorative – *Fillings - silver amalgam and for front teeth only, synthetic tooth color fillings, stainless Steel Crowns (for baby teeth)*

Oral Surgery - *Extractions*

Endodontics – *Root Canal Treatment (permanent teeth)
Pulpotomy (baby teeth)*

Periodontics – *Treatment of gum disease, non-surgical, once every two years, surgical, once every three years*

Emergency – *Treatment for the relief of pain*

50% Major Services

Restorative- *Crowns, onlays*

Prosthodontics – *Bridges, partial dentures, complete dentures*

Bridge & Denture Repair – *Repair of such appliances to their original condition including relining of dentures*

Replacement- *5 year waiting period applies to all major services*

Orthodontic services



50% Orthodontics Services

Benefit available for both adults and children. Lifetime Orthodontia benefit is limited to a maximum of \$1,500 per patient - payable in two (2) payments - upon initial banding and 6 months after. This maximum is separate from the benefit year maximum for your other dental benefits.

Benefit Options

Choice. Value. Health.



go paperless, go **GREEN**



Subscriber connection:

- check benefits and eligibility
- review benefit design
- find a participating dentist
- check claims status
- print ID cards
- research oral health information
- download forms and information

Register on-line today at:
www.deltadentalaz.com

Benefit Options

Choice. Value. Health.

The Delta Dental Difference



Benefit Options
Choice. Value. Health.

From all of us at **Delta Dental of Arizona** **Thank You**

*for helping us achieve our ranking as Arizona's #1 Dental Plan for 11 years in a row.
Thank YOU for your trust and choosing us as your preferred dental carrier for 2010.*



The Delta Dental Difference

Group Benefits from The Hartford



State of Arizona

Hartford Disability, Life and AD&D Claim Process Overview

Presented By:

Karla Johnson, Sr. Account Manger

Trish Cisneros, Client Consultant

Benefit Options

Choice. Value. Health.



State of Arizona – Disability Overview

- Effective 10/1/2009, all claims for a disability incurred on or after 10/1/2009 should be reported to The Hartford at 1-866-712-3442 or on-line at www.thehartfordatwork.com.
- When reporting a new claim to the Hartford, Employees should be prepared with their treating physician's name and phone number.
- Any questions related to a claim, new or ongoing, can be directed to 1-866-712-3442.
- Claims office hours of operation are 7 AM – 5 PM Arizona Time.

Benefit Options
Choice. Value. Health.



STD Telephonic Claim Process

Business Day 0

- Employee calls The Hartford to report the disability claim.
- Clinical Intake Nurse captures information and explains the claim process, including what happens on days 5 and 15.
- The Hartford On-Site representative obtains the Employer's information for the claim.

Business Day 1 - 2

- The Hartford makes up to 2 calls to the attending physician within 48 hours to obtain necessary medical information to make the initial claim decision.

Business Day 5

- If employer information is missing, The Hartford will follow-up with the Hartford On-site Representative for missing information.
- If additional medical information is missing after 2 calls to the physician, the Ability Analyst calls the employee to advise of the missing information.
- The Ability Analyst reminds the employee that if the information is not received by the 15th business day, the claim will be closed until it is received.
- If either additional medical information or employer information is missing, and we are unable to reach the employee by phone, Ability Analyst sends the employee a letter that explains the process.

Benefit Options

Choice. Value. Health.



STD Telephonic Claim Process (cont.)

Business Day 15

- If employer or attending physician information is still missing, the Ability Analyst closes the claim for lack of information.
- The Ability Analyst sends a letter notifying the employee that the claim has been closed and what information was missing.

Claim Adjudication – Once Complete Claim Information is Received

- Ability Analyst adjudicates the claim after receiving complete claim information.
- Ability Analyst calls to notify employee of claim approval or extension, and sends appropriate notice to employee – a letter or Explanation of Benefits (EOB).
- STD payments can be issued weekly by Check or Electronic Fund Transfer (EFT).
- If we are unable to approve disability benefits, the Employee will receive notice by phone and in writing, including instructions to appeal the decision if he/she disagrees.

Benefit Options

Choice. Value. Health.



Long Term Disability

Seamless Transition: For Employees with both STD and LTD Claim under the Hartford

- Early intervention – claim evaluated for LTD potential at midway point of STD claim.
- Single point of contact – LTD Ability Analyst assumes claim ownership.
- Ensures integration for smooth transition.

LTD Only Claims: Only for Employees who are not covered under the Arizona State Retirement System LTD program.

- Initiate LTD claim telephonically by calling 1-866-712-3443.
- Once the LTD claim is initiated, Hartford will contact the Hartford On-site representative at the ADOA to obtain employer information and claimant will be sent LTD paperwork to complete and return to the Hartford.
- Employee should report their LTD claim no later than the 90th day after stopping work to ensure timely LTD claim

Benefit Options

Choice. Value. Health.



Life and AD&D Claim Submission

- Effective 10/1/09, Life and AD&D claim's should be submitted to The Hartford telephonically by calling 1-866-712-3443 by the beneficiary, family member or the Employer.
- The Hartford will collect claim information and then:
 - Contact The Hartford On-site Representative at the ADOA for Employer information (Beneficiary Designation, Enrollment, Absolute Assignment, etc).
 - The Hartford will mail the beneficiary packet to the beneficiary for completion.

For Claim Questions, contact the Hartford
at

1-866-712-3443.

Claim Office address:
Group Life/AD&D Claim Unit
PO Box 14302
Lexington, KY 40512-4302
Fax # 877-447-9370

Benefit Options

Choice. Value. Health.



Life Waiver of Premium

Seamless Transition: For Employees with STD and LTD Claims under the Hartford

- Waiver claim will be set up prior to the six month elimination period and evaluated based on LTD medical information.
- Hartford claims will contact On-site Representative at ADOA for confirmation of eligibility and coverage information.
- Ensures Life Waiver claims do not fall thru the cracks.

Life Waiver Process: For Employees not covered under the Hartford LTD (participants in the Arizona State Retirement System LTD program)

- Life Waiver claim is initiated telephonically by calling 1-866-712-3443. Once the Life Waiver claim is called in, Hartford will contact Hartford On-Site representative at the ADOA to obtain employer information and claimant will be sent out Life Waiver paperwork to complete and return to Hartford.
- Employees should report their claim within the first six month of the disability and no later than the 365 days after their date of disability.

Benefit Options

Choice. Value. Health.



State of Arizona – Value Added Services

- Identity Protection
- Ability Assist – 24/7, 365 days per year access to Counselors and up to 5 face to face visits. (ONLY FOR employee covered under the Hartford’s LTD program)
- Travel Assistance
- Life Conversations
 - Estate Guidance – Free on-line Will preparation
 - Beneficiary Assist – 24/7, 365 days per year access to Counselor and up to 5 face to face visits for beneficiary or terminal employee.
 - Funeral Planning & Concierge Services (Everest)

Benefit Options
Choice. Value. Health.

Group Benefits from The Hartford

MicroSite and On-Site Representative for State of Arizona



The Hartford has a dedicated MicroSite for the State of Arizona. Information on benefits and claim submission is available at:

<http://groupbenefits.thehartford.com/arizona/>

Hartford has a dedicated On-Site Representative at the ADOA office to assist with any questions or concerns. Below is the contact information:

Trish Cisneros – Telephone # 602-542-4418

E-mail: Patricia.cisneros@hartfordlife.com

Benefit Options
Choice. Value. Health.



Flexible Spending Account Program Overview

Presented by:





Medical FSA

Many eligible expenses



Glasses



Dental Work



Lab Work



X-Rays



Chiropractic Care



Prescriptions Drugs

How much to set aside

- The 2011 Plan Year is a calendar year
 - Starts January 1st, 2011 through December 31st, 2011
- Maximum up to \$5,000.00
 - If a husband and wife both work for the State, they may each set aside up to \$5,000.00
- Amount deducted over the course of the plan year
- Full election is available to employees January 1st



Dependent Care FSA

Dependent Care FSA

- Provides a tax break on child/elder care expenses incurred while:

- Or
 - You go to work (single parent)
- Or
 - You and your spouse go to work
- You go to work and your spouse:
 - Looks for work
 - Pursues an educational opportunity full-time



- Other expenses are not eligible

For example, getting a babysitter for a Friday night date is not an eligible expense

Deduction Amount

Family maximum of \$5,000/**calendar** year

This is an IRS maximum **per household**

Getting your money back

- Submit claim forms to ASIFlex for processing
 - Complete reimbursement claim form
 - Attach appropriate documentation
 - Submit reimbursement requests via mail, toll-free fax or **new online system** (more on this in a moment)
 - Claims are generally processed within one business day of receipt

What's new?

- Recently signed Health Care legislation
 - More on this in a minute....
- Online claim submission now an option for participants
 - Documentation must be in PDF format
 - Will require a scanner for many items
 - Provides a user with a reference number upon submission
- Secure Message Center
 - HITECH Act of 2009
 - My.asiflex.com

Health Care Legislation

- Changes due to the Patient Protection and Affordable Care Act (PPACA)
 - Eliminates over-the-counter meds/drugs as eligible expenses **effective 1/1/2011** without a prescription
 - Affected items include pain relievers, cold meds, etc.
 - Equipment, supplies, and diagnostic devices will remain eligible without a prescription
 - E.g. bandages, hearing aid batteries, diabetic supplies, etc.
 - Expenses incurred through 12/31/10 are still eligible
 - Caps HC FSA election amounts at \$2,500 in 1/1/2013
 - No change to DC FSA

Termination/Retirement

- Notify ADOA
- Continue deductions through last regular paycheck
- Coverage ends at the end of the pay period of the last contribution
- May be COBRA eligible – must contact Marcia Jarvis at ADOA to determine eligibility

Eligible only if reimbursements are less than contributions

Resources



www.asiflex.com

E-mail asi@asiflex.com

Call 1-800-659-3035

Questions?

