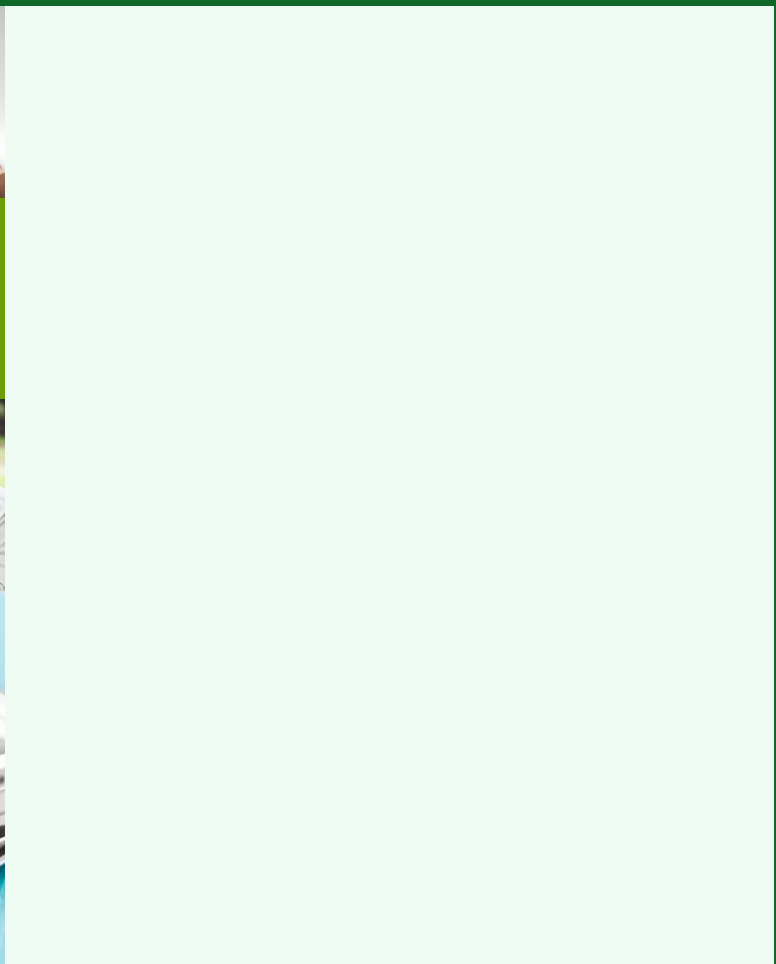


Arizona Department of Administration  
**Benefit Options**  
Benefit Services Division

**2016** Active State Employees  
Benefit Summary Guide



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This guide is designed to provide an overview of the benefits offered through the State of Arizona Benefit Options Program. The actual benefits available to you and the descriptions of these benefits are governed in all cases by the relevant Plan Descriptions and contracts. The State of Arizona reserves the right to modify, change, revise, amend, or terminate these benefit Plans at anytime.



# Benefit Changes for Plan Year 2016

The Benefit Services Division is pleased to announce that State employees will not be subject to a rate increase for health, dental, life and disability insurance premiums for the 2016 Plan Year. Effective January 1, 2016, the PPO and HSA Plans will experience rate reductions.

## Enrollment

All participants are encouraged to log on to Y.E.S. to update all personal information and beneficiaries. If you are satisfied with your medical, dental, vision, and life and disability elections, **no action is required**. Your current elections will continue for the 2016 Plan Year.

You must elect your pre-tax contribution if you want to participate in the Medical Flexible Spending and/or Dependent Care Account for the 2016 Plan Year. **Please note:** *IRS regulations may require your contribution be reduced by ADOA as a result of IRS non-discrimination testing requirements.*

Changes made during this Open Enrollment will be effective January 1, 2016. See the *Benefits Enrollment and Eligibility Section* for online enrollment instructions.

## Premium Reductions

Plan	Tier	Active Employee Medical Premiums Per Pay Period		
		2015	2016	Change
PPO	EE only	\$71.54	\$47.08	-\$24.46
	EE + Adult	\$161.54	\$99.23	-\$62.31
	EE + Child	\$152.77	\$66.46	-\$86.31
	Family	\$224.31	\$115.85	-\$108.46
HSA	EE only	\$12.00	\$9.23	-\$2.77
	EE + Adult	\$47.08	\$27.69	-\$19.39
	EE + Child	\$37.38	\$23.54	-\$13.84
	Family	\$89.08	\$51.23	-\$37.85

## HSA Medical Plan

Adjustments have been made to comply with 2016 IRS HSA Contribution Limits. Contribution limits for individuals remains at \$3,350. For those with family coverage, the maximum contribution increased to \$6,750.

## PPO Dental Plan

Beginning in 2016, there are two changes to the Delta Dental PPO Plus Premier Dental Plan:

- An additional emergency evaluation or consultation visit has been added.

- A reduction in the number of bitewing x-rays from two x-rays to one x-ray per Plan Year. This change is based on recommendations from the American Dental Association.

## Affordable Care Act Requirements

The Arizona Department of Administration Benefit Services Division is subject to reporting requirements of the employer shared responsibility provisions under the Affordable Care Act (ACA). Beginning in 2016, the Benefit Services Division will provide the primary insured individual with the IRS 1095-C Form to report coverage information for the 2015 Plan Year.

## iRx Discount Program

You may be able to obtain a discount on certain brand and generic medications that are not covered by your ADOA pharmacy drug plan, through the iRx Program™. Present your medical ID card at any participating pharmacy, along with your prescription for the medication. Savings are applied automatically when the item prescribed qualifies for a discount. The amount of the discount will vary based on pharmacy chosen and type of medication.

## Benefits Enrollment and Eligibility

You may view and print the Active Benefits Guide and the Summary of Benefits and Coverage from the Benefit Options Website at [benefitoptions.az.gov](http://benefitoptions.az.gov).

### Enrollment

If you decide to make changes during Open Enrollment, benefit elections must be made using the Y.E.S. (Your Employee Services) website at [yes.az.gov](http://yes.az.gov). Enrollment will be available beginning at 8am October 26 through 5pm November 13, 2015 (Arizona Time). Changes will be effective January 1, 2016.

### Where to Enroll – Active State Employees

Go to [yes.az.gov](http://yes.az.gov) and update your Personal Information and Beneficiaries. Once this information is updated, click the Open Enrollment link on the left navigational bar. Follow the instructions to begin your benefit elections.

If you forgot your password, you may visit the Y.E.S. website to reset your password. In order to update your password, you must have previously answered the security questions. If you have not answered the questions, you must have your password reset manually. Contact the HRIS Help Desk by calling 602-542-4700 or via email at [hrishelpdesk@azdoa.gov](mailto:hrishelpdesk@azdoa.gov).

### Where to Enroll – University Employees

ASU – Go to [cfo.asu.edu/hr-openenrollment](http://cfo.asu.edu/hr-openenrollment) and click on the Enroll Now link or login to My ASU using your ASURITE User ID and password.



NAU – Go to [peoplesoft.nau.edu](http://peoplesoft.nau.edu) and log into LOUIE using your employee ID and password.

UA – Go to UAccess Employee at [uaccess.arizona.edu](http://uaccess.arizona.edu) and select “Employee/Manager Self Service”.

**Eligibility**

Active employees regularly scheduled to work 20 hours or more per week for at least 90 days or longer and their eligible dependents may participate in the Benefit Options Programs. Eligible dependents include:

1. Your legal spouse
2. Your child defined as:
  - a. Your natural, adopted and/or stepchild who is under 26 years old;
  - b. A person under the age of 26 for whom you have court-ordered guardianship;

- c. Your foster children under the age of 26;
- d. A child placed in your home by court order pending adoption;
- e. Your natural, adopted and/or stepchild who was disabled as defined by 42 U.S.C. 1382c before the age of 26.

If you are enrolling a dependent with a different last name, you will need to submit a copy of the birth certificate or marriage license to the ADOA Benefit Services Division to complete processing of benefits coverage. *See page 14 for Benefit Options contact information.*

For more information regarding Eligibility, visit the Benefit Options Website at [benefitoptions.az.gov](http://benefitoptions.az.gov).

## Benefit Options Plans, Premiums, and Services

### Medical

Benefit Options offers three types of medical Plans and four provider networks. Each Plan has identical benefits with different premiums, copayments, deductibles, and provider networks. *See page 10 for a summary of benefit coverage information.*

Medical Plans	Networks
<p><b>EPO (Exclusive Provider Organization)</b> This option is available for active employees and retirees. Services must be obtained from a Network provider. Out-of-Network services are only covered in emergency situations.</p>	<p>Aetna Blue Cross Blue Shield of Arizona CIGNA UnitedHealthcare</p>
<p><b>PPO (Preferred Provider Organization)</b> This option is available for active employees and retirees. Services can be obtained in-Network or out-of-Network, but will have higher costs for out-of-Network services. Additionally, there are in-Network and out-of-Network deductibles that must be met.</p>	<p>Aetna Blue Cross Blue Shield of Arizona UnitedHealthcare</p>
<p><b>HSA (Health Savings Account)</b> This option is a High Deductible Health Plan for active employees. The Plan allows you to open a Health Savings Account, administered by Payflex, to use for qualified medical expenses with investment options available. Services can be obtained in-Network or out-of-Network, but will have higher costs for out-of-Network services. Additionally, there are in-Network and out-of-Network deductibles that must be met. In-Network preventive services are covered at 100%.</p>	<p>Aetna</p>

**Medical Management**

When you enroll with Benefit Options medical insurance you get more than basic healthcare coverage. You get personalized medical management programs at no additional cost. The medical Network you select during open enrollment serves their specific members. Professional, experienced staff work on your behalf to make sure you are getting the best care possible and that you are properly educated on all aspects of your treatment.

**Utilization Management**

Provides prior authorization and utilization review when you require non-primary care services. Prior to any elective hospitalization and/or certain outpatient procedures, you or

your doctor must contact your medical Network for authorization. Refer to your Plan Document for the specific list of services that require prior authorization.

**Case Management**

A case manager from your selected medical Network works with you to assess, plan, implement, coordinate, monitor, and evaluate the services you may need. Often case management is used with complex treatments for severe health conditions. The case manager uses available resources to achieve cost effective health outcomes for both you and the State of Arizona.



**Disease Management**

The purpose of disease management programs is to educate you about complex or chronic health conditions. The programs are typically designed to improve self-management skills and help make lifestyle changes that promote healthy living. Disease management programs that are available regardless of your selected medical Network include: Asthma, Diabetes, Chronic Obstructive Pulmonary Disease, Congestive Heart Failure, Pregnancy/Maternity, Coronary Artery Disease, and Healthy Back.

**NurseLine**

A dedicated team of nurses, physicians, and/or dietitians are available 24/7 for consultations. If you need medical advice or have treatment questions, you can call the toll-free nurseline:

Aetna	1-800-556-1555
Blue Cross Blue Shield of Arizona	1-866-422-2729, Option 9
Cigna	1-800-968-7366
UnitedHealthcare	1-800-401-7396

**Network Options Outside of Arizona**

All four medical Networks offer statewide and nationwide coverage and are not restricted to regional areas. All Plans are available in all domestic locations. However, not all Plans have equal provider availability, so it is important to check with your current provider to determine if they are contracted with your selected Medical Network.

**Transition of Care (TOC)**

If you are undergoing an active course of treatment with a doctor who is not contracted with one of the Networks, you can apply for TOC. TOC is typically approved if one of the following applies:

1. You have a life threatening disease or condition;
2. You have been receiving care and a continued course of

- treatment is medically necessary;
3. You are in the third trimester of pregnancy; or
  4. You are in the second trimester of pregnancy and your doctor agrees to accept our reimbursement rate and to abide by the Plan’s policies, procedures, and quality assurance requirements.

If you are approved, you will receive in-Network benefits for your current doctor during a transitional period after January 1, 2016. TOC forms are available on the Benefit Options Website at [benefitoptions.az.gov](http://benefitoptions.az.gov).

**Pharmacy Plan**

MedImpact is the pharmacy provider for all medical Plans. All prescriptions must be filled at a Network pharmacy by presenting your medical card.

**Formulary**

The formulary is the list of medications chosen by a committee of doctors and pharmacists to help you maximize the value of your prescription benefit. These generic and brand name medications are available at a lower cost. The use of non-preferred medications will result in a higher copay. Changes to the formulary can occur during the Plan Year. Medications that no longer offer the best therapeutic value for the Plan are deleted from the formulary. Ask your pharmacist to verify the current copay amount at the time your prescription is filled.

The pharmacy Plan has a three-tier formulary. The copays listed in the chart below are for a 31-day supply of medication bought at a retail pharmacy. You may have to pay more if a brand is chosen over a generic.

Pay Period Medical Premiums (26 pay periods) <sup>1</sup>					
Plan	Tier	Employee Premium	State Premium	Total Premium	Agency HSA Contribution
EPO	Emp Only	\$18.46	\$253.85	\$272.31	-
	Emp+Adult	\$54.92	\$521.54	\$576.46	-
	Emp+Child	\$46.62	\$338.77	\$385.39	-
	Family	\$102.00	\$571.38	\$673.38	-
PPO	Emp Only	\$47.08	\$258.00	\$305.08	-
	Emp+Adult	\$99.23	\$545.54	\$644.77	-
	Emp+Child	\$66.46	\$365.08	\$431.54	-
	Family	\$115.85	\$636.46	\$752.31	-
HSA	Emp Only	\$9.23	\$171.69	\$180.92	\$27.69
	Emp+Adult	\$27.69	\$355.85	\$383.54	\$55.38
	Emp+Child	\$23.54	\$232.62	\$256.16	\$55.38
	Family	\$51.23	\$396.46	\$447.69	\$55.38

<sup>1</sup> UA has 24 pay period deductions. Refer to your Human Resources website for more information. For the NAU Blue Cross Blue Shield plan rates visit: [nau.edu/human-resources/benefits/insurance/medical/](http://nau.edu/human-resources/benefits/insurance/medical/)



Generic	Preferred Brand	Non-Preferred Brand
\$10 copay	\$20 copay	\$40 copay

To see what medications are on the formulary, visit the Benefit Options Website at [benefitoptions.az.gov](http://benefitoptions.az.gov) or contact the MedImpact Customer Care Center and ask to have a copy sent to you. Sharing this information with your doctor helps ensure you are getting the best value, which saves money for you and the State of Arizona.

#### 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.

#### Choice90

With this program, employees who require medications for an on-going health condition can obtain a 90-day supply of medication at a local retail pharmacy for two and a half copays.

#### Medication Prior Authorization

Prescriptions for certain medications may require clinical approval before they can be filled, even with a valid prescription. These prescriptions may be limited to quantity, frequency, dosage or may have age restrictions. The authorization process may be initiated by you, your local pharmacy, or your physician by contacting MedImpact.

#### Step Therapy Program

Step Therapy is a program which promotes the use of safe, cost-effective and clinically appropriate medications. This program requires you to try a generic alternative medication that is safe and equally effective before a brand name medication is covered.

#### Specialty Pharmacy Program

Certain medications used for treating chronic or complex health conditions are handled through the Walgreens Specialty Pharmacy Program. This program assists you with monitoring your medication needs and also provides patient education.

The program includes monitoring of specific injection drugs and other therapies requiring complex administration methods and special storage, handling, and delivery. Specialty medications are limited to a 31-day supply and may be obtained only at a Walgreens retail pharmacy or through the Walgreens Specialty Central Fill facility by calling 1-888-782-8443.

#### Limited Prescription Drug Coverage

Prescription drug coverage will generally be limited to medications that do not have an equally effective over-the-counter substitute.



#### Non-Covered Drugs

Certain medications are not covered as part of the Benefit Options Plan. If you find such a drug has been prescribed for you, discuss an alternative treatment with your doctor.

The cost of prescriptions filled out-of-Network will not be reimbursed. No international pharmacy services are covered. Be sure to order your prescriptions prior to your trip and take your prescriptions with you. Replacement medication is not covered if your medication is lost, stolen, or damaged.

#### Dental Plans

Benefit Options offers two types of dental Plans:

##### Delta Dental PPO Plus Premier (Delta Dental)

With the Delta Dental Plan, you can elect to see any licensed dentist. The maximum benefit is \$2,000 per person per year. The maximum lifetime benefit for orthodontia is \$1,500. Deductibles/out-of-pocket payments will apply.

##### Total Dental Administrators (TDA)

With the TDA Plan, you MUST use a participating dental provider in Arizona. There are no annual deductible or maximums, no claim forms, and no waiting periods. Pre-existing conditions are covered. Specific copays and lab fees apply for services and/or prosthodontic materials.

Benefits are subject to all provisions, terms and conditions of the Plan Description. For more information, visit the Benefit Options Website at [benefitoptions.az.gov](http://benefitoptions.az.gov).

Pay Period Dental Premiums (26 pay periods) <sup>1</sup>				
Plan	Tier	Employee Premium	State Premium	Total Premium
Delta Dental	Emp Only	\$14.30	\$2.29	\$16.59
	Emp+Adult	\$30.33	\$4.58	\$34.91
	Emp+Child	\$23.34	\$4.58	\$27.92
	Emp+Fam	\$48.26	\$6.32	\$54.58
TDA	Emp Only	\$1.86	\$2.29	\$4.15
	Emp+Adult	\$3.72	\$4.58	\$8.30
	Emp+Child	\$3.50	\$4.58	\$8.08
	Emp+Fam	\$6.12	\$6.32	\$12.44

<sup>1</sup> UA has 24 pay period deductions. Refer to your Human Resources website for more information.

#### Vision Plans

Benefit Options offers two vision care programs:

##### Avesis Advantage Program

The Avesis Advantage Program provides yearly coverage for vision exam, glasses or contact lenses, extensive provider access throughout the state, and a \$600 allowance for LASIK. You can also receive unlimited discounts on additional optical purchases.

### Avesis Discount Program

If you choose not to enroll in the Avesis Advantage Program, you will automatically receive an Avesis Discount card at no cost. The Avesis Discount card provides you with substantial discounts on vision exams and corrective materials. Enrollment is not required.

#### Pay Period Vision Premiums (26 pay periods)<sup>1</sup>

Plan	Tier	Employee Premium
<b>Avesis Advantage Program</b> (Insured Plan)	Emp Only	\$1.84
	Emp+Adult	\$5.97
	Emp+Child	\$5.89
	Family	\$7.43
<b>Avesis Discount Program</b> (Discount Card)	Emp	\$0.00

<sup>1</sup> UA has 24 pay period deductions. Refer to your Human Resources website for more information.

### Life & Short-Term Disability Insurance

The Hartford is the Benefit Options vendor for life and disability insurance.

#### Basic Life Insurance

You are automatically covered for \$15,000 of Basic Life Insurance and \$15,000 Accidental Death and Dismemberment (AD&D) insurance coverage at no cost to you.

#### Supplemental Life and AD&D Insurance

Supplemental life and AD&D insurance is available in increments of \$5,000 (not to exceed \$500,000 or 3 times your annual salary). Your premium for the first \$35,000 of supplemental life insurance is pretax. Your premium for supplemental life insurance is based on your age as of January 1 (the first day of the Plan Year).

#### Pay Period Supplemental Life and AD&D Premiums (26 pay periods)<sup>1</sup>

Your Age	Cost per \$5,000 Per pay period
29 and under	\$0.18
30-34	\$0.23
35-39	\$0.25
40-44	\$0.44
45-49	\$0.60
50-54	\$0.97
55-59	\$1.38
60-64	\$2.49
65-69	\$2.49
70+	\$3.95

<sup>1</sup> UA has 24 pay period deductions. Refer to your Human Resources website for more information.

### Dependent Life Insurance

You can purchase life insurance coverage for your dependents. Each dependent will be covered for the amount you choose for a small employee premium.

#### Pay Period Dependent Life Premiums (26 pay periods)<sup>1</sup>

Coverage Amount	Cost per pay period
\$2,000	\$0.43
\$4,000	\$0.87
\$6,000	\$1.30
\$10,000	\$2.17
\$12,000	\$2.60
\$15,000	\$3.25
\$50,000 <sup>2</sup>	\$10.85

<sup>1</sup> UA has 24 pay period deductions. Refer to your Human Resources website for more information.

<sup>2</sup> Employees must have combined basic and supplemental coverage of at least \$50,000; supplemental life elections must be at least \$35,000.

#### Short-Term Disability (STD) Insurance

Benefit Options offers short-term disability insurance by The Hartford.

If you are unable to work due to a non-work related injury (as determined by The Hartford), you may receive a weekly benefit for up to 26 weeks. If you are unable to work due to illness or pregnancy, you may receive a weekly benefit after your benefit elimination period for up to 18 or 22 weeks. You must meet the actively-at-work provision. Paid benefits will be offset by 100% of any sick, annual and donated leave paid to you after the benefit elimination period.

If you elect STD coverage after your initial eligibility enrollment period and become disabled during the first 12 months of being covered under the Plan, your benefits will start on the 61st day of disability due to illness or pregnancy.

#### Pay Period STD Premiums (26 pay periods)<sup>1</sup>

Employee Cost per Month
\$0.65 per \$100 of your earned monthly wages Monthly premium = (Earned monthly wages/100) x \$0.65
Example: Earned monthly wages = \$1,000 Monthly premium = (\$1,000/100) x \$0.65 = \$6.50

<sup>1</sup> UA has 24 pay period deductions. Refer to your Human Resources website for more information.

### Long-Term Disability Insurance

As a benefits-eligible employee, you are automatically enrolled in one of the State's two Long-Term Disability (LTD) programs. The retirement system to which you contribute determines the LTD program available to you.



### Arizona State Retirement System Participants

Sedgwick, CMS is the administrator for Arizona State Retirement System (ASRS) Participants. Your LTD benefit will pay up to 66-2/3% of your income earnings during your disability as determined by Sedgwick, CMS and based on supporting medical documentation.

You can learn more about the LTD plan offered by ASRS by visiting [azasrs.gov](http://azasrs.gov) or calling 602-240-2000 or 1-800-621-3778 if outside of Phoenix. For hearing impaired, please call TTY 602-240-5333.

### Non-ASRS Participants

The Hartford is the Benefit Options vendor for non-ASRS participants. Your LTD benefit may pay up to 66-2/3% of your monthly pre-disability earnings with a maximum benefit of \$10,000 per month during your disability as determined by The Hartford and based on supporting medical documentation.

You can learn more about the LTD plan offered by The Hartford by visiting [groupbenefits.thehartford.com/arizona](http://groupbenefits.thehartford.com/arizona) or calling 1-866-712-3443.

## Flexible Spending Accounts

### Medical and/or Dependent Care

Medical and/or Dependent Care Flexible Spending Accounts (FSAs) administered by ASIFlex allows you to set aside pretax dollars to pay medical expenses or out-of-pocket child care expenses for dependents under the age of 13. You specify the annual dollar amount of your earnings to be deposited to each account. Minimum and maximum contributions apply. Enrollment in an FSA must be completed annually during Open Enrollment.

	Medical FSA	Dependent Care FSA <sup>1</sup>
Maximum	\$2,550 annually	\$5,000 annually (\$2,500 if married and filing separately)
Minimum	\$130 annually	\$260 annually

<sup>1</sup> IRS regulations may require your contribution be reduced by ADOA as a result of IRS non-discrimination test requirements.

## International Coverage

For more information on International Coverage, view the Summary Plan Descriptions on the Benefit Options Website at [benefitoptions.az.gov](http://benefitoptions.az.gov).

MEDICAL CARE	
<b>EPO</b>	
Aetna	Emergency & Urgent Only
BCBSAZ	Emergency & Urgent Only
Cigna	Emergency & Urgent Only
UnitedHealthcare	Emergency & Urgent Only
<b>PPO</b>	
Aetna	Emergency & Urgent Only at in-Network Benefit Level <sup>1</sup>
BCBSAZ	Emergency & Urgent Only at in-Network Benefit Level <sup>1</sup>
UnitedHealthcare	Emergency & Urgent Only at in-Network Benefit Level <sup>1</sup>
<b>HSA</b>	
Aetna	Emergency & Urgent Only at in-Network Benefit Level <sup>1</sup>
<b>NAU Only</b>	
Blue Cross Blue Shield PPO	For assistance with locating a provider and submitting claims call 1-800-810-2583 or 1-804-673-1686. For an international claim form <a href="http://bcbs.com/bluecardworldwide/index">bcbs.com/bluecardworldwide/index</a>
<b>PHARMACY</b>	
MedImpact	Not covered
<b>DENTAL CARE</b>	
Delta Dental	Coverage is available under non-participant provider benefits
TDA	Emergency Only
<b>VISION CARE</b>	
Avesis	Covered as out-of-Network and will be reimbursed based on the Avesis reimbursement schedule

<sup>1</sup> All other services should be verified by the Network.





## Wellness

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The BeWell Wellness program offers free or low cost services and programs such as mini-health screenings, flu shots, and health management education courses.

### Programs and Services

#### Health Impact Program

The Health Impact Program (HIP) is an incentive based wellness program for eligible employees.

Program participation will begin through registration on the Mayo Clinic Healthy Living online portal. This confidential, personalized system will grant employees access to the Mayo Clinic Health Assessment, health information and resources, telephonic health coaching and also serve as the tool for self-reporting all other HIP approved activities. Accommodations will be made available to support employees with access issues. Beginning in January 2016 you may register on the Mayo Clinic Healthy Living online portal at [bewellstaywell.az.gov](http://bewellstaywell.az.gov). Look for more program details and guidelines in January, by visiting the Benefit Options Wellness website at [benefitoptions.az.gov/wellness](http://benefitoptions.az.gov/wellness).

#### Mini-Health Preventive Screenings

The worksite mini-health screening focuses on prevention and early detection of heart disease and diabetes. Tests included in this screening are the full lipid panel, blood pressure, body composition, and blood glucose measures. Our vendor also offers optional screens such as osteoporosis, facial skin analysis, or a Prostate Specific Antigen (PSA).

#### Mobile Onsite Mammography (MOM)

To fight cancer through early detection, mammograms are offered at work sites across Arizona. For convenience, employees' results are sent directly to their physician and appointments only last 15 minutes.

#### Prostate Onsite Project (POP)

Early detection is the best defense against prostate cancer. Wellness contracts with POP to provide free, convenient prostate cancer screenings at the worksite with a mobile medical unit. The doctor on board performs a PSA blood test, digital rectal exam (DRE), testicular exam, and a doctor consultation.

#### Flu Vaccine Program

**September 8 - December 31, 2015**

Wellness provides free flu shots at many State worksites and public clinic locations for employees. Locations and more information can be found on the Benefit Options Wellness website at [benefitoptions.az.gov/wellness](http://benefitoptions.az.gov/wellness).

#### eMindful

eMindful is an evidence based online program geared toward developing stress management skills and mindfulness practices. Research has shown that participants showed

significant reductions in stress levels as well as improvements in sleep quality and heart function ... all of which translates into better health, greater happiness, and higher productivity. Employees can choose from four session dates and register for one session monthly. First time eMindful users will be required to create a new account, using their Employee Identification Number (EIN) as the "Unique ID" when prompted. University employees must use their Health Insurance ID Number (UA employees) OR Campus ID number (ASU employees) as their "Unique ID." To register go to [adoa.emindful.com](http://adoa.emindful.com).

#### Employee Assistance Program (EAP)

ComPsych is contracted with ADOA Benefit Options to provide EAP services. EAP is a confidential Wellness benefit that provides short-term counseling to employees, their spouses, and their dependents. Employees can access six free counseling sessions to help with personal issues, coping with a loss, stress and anxiety, or financial concerns.

To access helpful online resources and see all of the services ComPsych provides, visit [guidanceresources.com](http://guidanceresources.com). Register using company code HN8876C.

For more information on the Wellness Program and Services, visit the Benefits Options Wellness Website at [benefitoptions.az.gov/wellness](http://benefitoptions.az.gov/wellness)

## Other Benefit Programs

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You may also participate in other benefit programs and services provided by the State of Arizona Benefit Options. For more information, visit the Benefit Options website at [benefitoptions.az.gov](http://benefitoptions.az.gov).

### Computer Purchase Program

The Computer Purchase Program through Purchasing Power is not a discount program, but an alternative to financing with easy qualifications. You may purchase new, brand name computers through the ease of payroll deductions.

### Auto and Home Insurance Program

Travelers Insurance and Liberty Mutual Insurance offer the convenience of automatic payroll deductions and special program savings. You can apply and comparison shop year round.

### Discount Program

With PerksConnect, you receive discounts on products and services for local retailers, restaurants, gift cards, movie tickets, vacations, etc.



## Medical Plan Comparison – In-Network Services

The chart below is a comparison of in-Network services only. For a complete list of other benefits coverage and out-of-Network services, view the Summary Plan Descriptions on the Benefit Options Website at [benefitoptions.az.gov](http://benefitoptions.az.gov).

		EPO <sup>1</sup>	PPO	HSA
Available Plans		Aetna BCBSAZ Cigna UnitedHealthcare	Aetna BCBSAZ UnitedHealthcare	Aetna
		IN-NETWORK	IN-NETWORK	IN-NETWORK
Plan Year deductible	EmpOnly	None	\$500 <sup>2</sup>	\$1,300 <sup>2</sup>
	Emp+Adult Emp+Child Emp+Family	None	\$1,000 <sup>2</sup>	\$2,600 <sup>2</sup>
	EmpOnly	None	\$1,000 <sup>2,3</sup>	\$2,000 <sup>2</sup>
Out-of-pocket max	Emp+Adult Emp+Child Emp+Family	None	\$2,000 <sup>2,3</sup>	\$4,000 <sup>2</sup>
	Lifetime max	None	None	No maximum
	<b>EMPLOYEE COST FOR CARE</b>			
Behavioral health	Inpatient	\$150	\$150	10% coinsurance after deductible
	Outpatient	\$15	\$15	10% coinsurance after deductible
Chiropractic		\$15	\$15	10% coinsurance after deductible
Durable medical equipment		\$0	\$0	10% coinsurance after deductible
Emergency ER copay waived if admitted	Ambulance	\$0	\$0	10% coinsurance after deductible
	ER	\$125	\$125	10% coinsurance after deductible
	Urgent care	\$40	\$40	10% coinsurance after deductible
Home health services Maximum visits per year		42	42	42
Hospital admission (Room and Board)		\$150	\$150	10% coinsurance after deductible
Mammography		\$0	\$0	Preventive at no cost Non-Preventive 10% coinsurance after deductible
Office visits Maximum of one copay/day/provider	PCP	\$15	\$15	Preventive at no cost Non-Preventive 10% coinsurance after deductible
	Specialist <sup>4</sup>	\$30	\$30	Preventive at no cost Non-Preventive 10% after deductible
	Preventive	\$15	\$15	Preventive at no cost
	OB/GYN	\$10	\$10	Preventive at no cost Non-Preventive 10% after deductible
Outpatient services Freestanding ambulatory facility or hospital outpatient surgical center		\$50	\$50	10% after deductible
Radiology		\$0	\$0	10% after deductible

<sup>1</sup> If employee goes out-of-Network 0% covered, except in emergency situations.

<sup>2</sup> Copayments apply after the Plan deductible is met. Copayments and Deductible apply to the out-of-pocket maximum.

<sup>3</sup> The Plan pays 100% after out-of-pocket maximum is met.

<sup>4</sup> All Mayo Clinic Primary Care Physicians (PCP) are contracted with Cigna HealthCare as specialists, therefore all primary care services administered by Mayo PCPs will be subject to the \$30 specialist copayment.

For the NAU only BCBS PPO Plan details, go to [nau.edu/human-resources/benefits/benefit-plan-document/](http://nau.edu/human-resources/benefits/benefit-plan-document/)



## Dental Plan Comparison – In-Network Services

The chart below is a comparison of in-Network services only. For a complete list of other benefits coverage and out-of-Network services, view the Summary Plan Descriptions on the Benefit Options Website at [benefitoptions.az.gov](http://benefitoptions.az.gov).

	TDA	Delta Dental
<b>PLAN TYPE</b>	DHMO/Prepaid	Indemnity/PPO
<b>DEDUCTIBLES</b>	None	\$50/\$150
<b>MAXIMUM BENEFITS</b>		
Annual Combined Basic and Major Services	No Dollar Limit	\$2,000 per person
Orthodontia Lifetime	No Dollar Limit	\$1,500 per person
<b>PREVENTIVE CARE CLASS I</b>		
Oral Exam	\$0	\$0 - Deductible Waived <sup>1</sup>
Emergency Exam	\$0	\$0 - Deductible Waived <sup>1</sup>
Prophylaxis/Cleaning	\$0	\$0 - Deductible Waived <sup>1</sup>
Fluoride Treatment	\$0 (to age 15) <sup>2</sup>	\$0 (to age 18) - Deductible Waived <sup>1</sup>
X-Rays	\$0	\$0 - Deductible Waived <sup>1</sup>
<b>BASIC CLASS II SERVICES</b>		
Office Visit	\$0	\$0 <sup>1</sup>
Sealants	\$10 per tooth (to age 17)	20% (to age 19)
Fillings	Amalgam: \$10-\$37 Resin: \$26-\$76	20%
Extractions	Simple: \$30 Surgical \$60	20%
Periodontal Gingivectomy	\$225	20%
Oral Surgery	\$30 - \$145	20%
<b>BASIC CLASS III SERVICES</b>		
Office Visit	\$0	\$0 <sup>1</sup>
Crowns	\$270 + \$185 Lab Fee (\$455)	50%
Dentures	\$300 + \$275 Lab Fee (\$575)	50%
Fixed Bridgework	\$270 + \$185 Lab Fee (\$455) per unit	50%
Crown/Bridge Repair	\$75	50%
Implants	\$140 - \$1,300	50% <sup>3</sup>
<b>ORTHODONTIA</b>		
	Child: \$2,800 - \$3,400 Adult: \$3,200 - \$3,700	See lifetime
<b>TMJ SERVICES</b>		
Exam, services, etc.	20% Discount	100%

<sup>1</sup> Routine visits, exams, cleanings, and fluoride treatments are covered two times per Plan Year at 100%. X-rays (Bitewing, Periapicals) are covered once per Plan Year at 100%.

<sup>2</sup> Fluoride treatment covered 100% once per Plan Year up to age 15. Additional treatment subject to applicable copayments.

<sup>3</sup> Subject to both the benefit year allowance and the lifetime maximum limit of \$1,000 per tooth. Subject to all provisions, terms and conditions of the Plan Description.



## Vision Plan Comparison – In-Network Services

The chart below is a comparison of in-Network services only. For a complete list of other benefits coverage, view the Plan Policy on the Benefit Options Website at [benefitoptions.az.gov](http://benefitoptions.az.gov).

	Advantage Program	Discount Program <sup>1</sup>
Examination Frequency	Once per Plan Year	Once per Plan Year
Lenses Frequency	Once per Plan Year	Once per Plan Year
Frame Frequency	Once per Plan Year	Once per Plan Year
Examination Copay	\$10 copay	20% discount
Optical Materials Copay (Lenses & Frame Combined)	\$0 copay	Refer to schedule below
<b>Standard Spectacle Lenses</b>		
Single Vision Lenses	Covered-in-full	20% discount
Bifocal Lenses	Covered-in-full	20% discount
Trifocal Lenses	Covered-in-full	20% discount
Lenticular Lenses	Covered-in-full	20% discount
Progressive Lenses	Uniform discounted fee schedule	20% discount
Selected Lens Tints & Coatings	Uniform discounted fee schedule	20% discount
<b>Frame</b>		
Frame	Covered up to \$100-\$150 retail value (\$50 wholesale cost allowance)	20% discount
<b>Contact Lenses (in lieu of frame/spectacle lenses)</b>		
Elective	10-20% discount & \$150 allowance <sup>2</sup>	10-20% discount
Medically Necessary	Covered-in-full	10-20% discount
<b>LASIK/PRK</b>		
LASIK/PRK	Up to \$600	10-20% discount
<sup>1</sup> Members that choose not to enroll in the Advantage Vision Care Program will automatically be enrolled in the Discount Plan at no cost. <sup>2</sup> Includes fit, follow-up and materials.		



## Important Plan Information for Participants and Beneficiaries

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If you participate or enroll in any of the Benefit Options Plans, you are entitled to the following documents and Legal Notices. This information is available to you electronically on the Benefit Options Website at [benefitoptions.az.gov](http://benefitoptions.az.gov).

### Documents

<b>Health Insurance Marketplace Coverage</b>	Key parts of the health care law allows you a way to buy health insurance through the Health Insurance Marketplace. To assist you as you evaluate options for you and your family, a notice that provides some basic information about the new Marketplace and the Benefit Options health coverage is available.
<b>Summary of Benefits and Coverage and Uniform Glossary</b>	As part of the Affordable Care Act, the federal government announced new rules regarding the disclosure of the Summary of Benefits and Coverage (SBC) and Uniform Glossary. These regulations require group health plans and health insurance issuers that offer coverage for groups and individuals to provide access to the SBC and Uniform Glossary.
<b>Summary Plan Description (SPD)</b>	The SPD, or Plan Document, is a summary of important benefit features of your Plan. The SPD may be revised at any time for Plan clarification purposes.
<b>Insurance Certificates and Policies</b>	Provides information on specific benefit coverage and limitations.

### Legal Notices

<b>Health Insurance Portability &amp; Accountability Act (HIPAA)</b>	This notice protects the privacy of individually identifiable health information, and establishes who can use the personal health information and how it can be used.
<b>Medicare Notice of Creditable Coverage</b>	This notice has information about the prescription drug coverage through the Benefit Options program for participants with Medicare. It explains the options you have under Medicare prescription drug coverage (Medicare Part D) and can help you decide whether or not you want to enroll.
<b>Consolidated Omnibus Budget Reconciliation Act (COBRA) Coverage Notice</b>	Notice of the Arizona Benefit Options Program COBRA Coverage.
<b>Patient Protection &amp; Affordable Care Act (PPACA)</b>	Notices of the Arizona Benefit Options Program in reference to PPACA.



## Benefit Options Website and Contact Information

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ADOA Benefit Services Division  
100 N. 15th Avenue, Suite 103  
Phoenix, AZ 85007  
602-542-5008 or 1-800-304-3687  
[benefitoptions.az.gov](http://benefitoptions.az.gov)

**Benefit Options Wellness**  
602-771-9355  
[benefitoptions.az.gov/wellness](http://benefitoptions.az.gov/wellness)

### Medical Plans

**Aetna**  
1-866-217-1953  
[aetna.com](http://aetna.com)

**Payflex**  
1-866-217-1593  
[payflex.com](http://payflex.com)

**Blue Cross Blue Shield of Arizona**  
1-866-287-1980  
[azblue.com](http://azblue.com)

**Cigna**  
1-800-968-7366  
[Cigna.com/stateofaz](http://Cigna.com/stateofaz)

**UnitedHealthcare**  
1-800-896-1067  
[welcometouhc.com/stateofaz](http://welcometouhc.com/stateofaz)

### Pharmacy Plan

**MedImpact**  
1-888-648-6769  
[benefitoptions.az.gov](http://benefitoptions.az.gov)

### Dental Plans

**Delta Dental of Arizona**  
602.588.3620  
1-866-9STATE9  
[deltadentalaz.com](http://deltadentalaz.com)

**Total Dental Administrators (TDA)**  
602-381-4280  
1-866-921-7687  
[TDA dental.com/adoa](http://TDA dental.com/adoa)

### Vision Plan

**Avesis, Inc.**  
1-888-759-9772  
[avesis.com](http://avesis.com)

### Life & Short-Term Disability Insurance

**The Hartford**  
1-866-712-3443  
[groupbenefits.thehartford.com/arizona](http://groupbenefits.thehartford.com/arizona)

### Long-Term Disability Plans

**Sedgwick CMS** (ASRS participants)  
1-818-591-9444  
[Claimlookup.com](http://Claimlookup.com)

**The Hartford** (PSPRS, EORP, CORP, and ORP Participants)  
1-866-712-3443  
[groupbenefits.thehartford.com/arizona](http://groupbenefits.thehartford.com/arizona)

### Flexible Spending Accounts

**ASI Flex**  
1-800-659-3035  
[asiflex.com](http://asiflex.com)

### Computer Purchase Program

**Purchasing Power**  
1-866-670-3479  
[Arizona.PurchasingPower.com](http://Arizona.PurchasingPower.com)

### Auto and Home Insurance Program

**Liberty Mutual Insurance**  
1-800-786-1855  
[libertymutual.com/arizona](http://libertymutual.com/arizona)

**Travelers**  
1-888-695-4640  
[travelers.com](http://travelers.com)

### Discount Program

**PerkConnects**  
1-866-671-3322  
[member.perksconnect.com](http://member.perksconnect.com)

### For University Employees

**Arizona State University**  
Employees: 855-278-5081, Faculty: 480-727-9900  
[cfo.asu.edu/hr-benefits HRESC@asu.edu](http://cfo.asu.edu/hr-benefits HRESC@asu.edu)

**Northern Arizona University**  
928-523-2223  
[nau.edu/human-resources](http://nau.edu/human-resources)

**University of Arizona**  
520-621-3662, Option 3  
[hr.arizona.edu benefits@email.arizona.edu](http://hr.arizona.edu benefits@email.arizona.edu)





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