

STATE AND SCHOOL
EMPLOYEES'

Life

AND

Health

P L A N

Know Your Benefits

2015 Open Enrollment

The State and School Employees' Health Insurance Plan's 2015 Open Enrollment period will be from October 1 through October 31, 2014. During this time, active employees, non-Medicare eligible retirees, and COBRA participants may choose either Base or Select Coverage with the coverage to be effective January 1, 2015. Please note that Medicare eligible retirees cannot make coverage changes during Open Enrollment. An *Application for Coverage* form may be obtained from the Plan's website, your employer's Human Resources office, or by calling Blue Cross & Blue Shield of Mississippi (BCBSMS) at (800) 709-7881. Refer to the enrollment categories to see what changes you can make during Open Enrollment.

Open Enrollment is a good time to verify your dependent coverage through the MyBlue portal. Simply follow the link "On-Line Medical Explanation of Benefits" on the Plan's website to begin.

Active Employees: If you want to change coverage types or add/drop dependents, you will need to return a completed *Application for Coverage* form to your Human Resources office. Contact your Human Resources office to find out the deadline to submit the form. Remember, you must be participating in the Plan in order to cover your dependents.

Non-Medicare Retirees: If you want to change coverage types, you will need to return a completed

Application for Coverage form to BCBSMS by October 31, 2014. Please note that retirees cannot add dependents during Open Enrollment.

COBRA Participants: If you are a COBRA participant and want to change coverage types or add/drop dependents, you will need to return a completed *Application for Coverage* form to BCBSMS by October 31, 2014.

Health Insurance Premium Changes Effective July 1, 2015

Your State and School Employees Health Insurance Management Board has worked hard to ensure that the nearly 186,000 participants in the Plan have access to comprehensive and affordable health insurance coverage while holding the line on premium increases. Through competitive contracting, expanding our provider network, and responsible management, the Board has been able to help stem some of the cost increase trends. In order to continue to operate the Plan in a fiscally responsible manner, the Board determined it necessary to increase health insurance premium rates effective July 1, 2015. No changes are being made at this time to deductibles, nor to prescription drug co-payments. Please refer to the new schedule of monthly premium rates found in this newsletter.

2015 Benefit Changes

With advice from the State and School Employees Health Insurance Advisory Council, the Board approved a number of benefit changes to be effective January 1, 2015. Below is a summary of the key benefit changes. You can find more information regarding these changes at the Plan's website or by calling Blue Cross & Blue Shield of Mississippi at (800) 709-7881.

Birth Control

As required by the Patient Protection and Affordable Care Act (PPACA), benefits are provided at 100% and not subject to a calendar year deductible for generic birth control prescription drugs. Brand name birth control drugs are covered as regular Plan benefits and will be subject to the calendar year deductible for Base Coverage, or the prescription drug deductible for Select Coverage, along with the applicable copayment.

Gestational Diabetes Mellitus Screening

PPACA requires benefits to be provided at 100% and not subject to a calendar year deductible for one (1) gestational diabetes mellitus screening per pregnancy after 24 weeks gestation.

Screening for Lung Cancer

PPACA requires benefits to be provided at 100% and not subject to a calendar year deductible for annual screening for lung cancer with low-dose computed tomography (CT) in adults ages 55 to 80 who have a 30 pack-year smoking history and who currently smoke or have quit within the past 15 years. Benefits will only be provided when services are performed by a participating provider and the services are approved by ActiveHealth prior to being rendered.

Women's Health

PPACA requires benefits to be provided at 100% and not subject to a calendar year deductible for certain medications, such as Tamoxifen or Raloxifene, for women who are at increased risk for breast cancer. To confirm whether or not a particular medication is included in this preventive benefit, please contact Catamaran at (866) 757-7839.

Tobacco Use Premium Surcharge

In an effort to encourage healthy lifestyle choices and to offset some of the additional healthcare costs associated with providing coverage to tobacco users, the Board voted to implement a tobacco use premium surcharge. Participants (active, COBRA, and non-Medicare retirees) who use tobacco in any form will be subject to a \$50 per month surcharge beginning July 1, 2015. Prior to the effective date of the surcharge, all participants will be required to sign a statement, certifying whether or not they use tobacco. If you are a tobacco user, you can avoid the surcharge and help

improve your health by taking advantage of one of the many free tobacco cessation programs available to help you quit. Participants who are subject to the surcharge who subsequently quit using tobacco may complete an updated certification during the next year's Open Enrollment and get the surcharge removed effective with the next Plan year. For more information on the tobacco use premium surcharge and how you can get help to "quit", please visit the Plan's website at <http://knowyourbenefits.dfa.ms.gov/>.

Find a Quit Method that Works for You!

Tobacco Cessation Coverage

The Plan provides coverage for tobacco cessation prescriptions and over-the-counter drugs, when dispensed by prescription. Benefits are provided at 100%, not subject to the calendar year deductible, with an annual limit of two cycles (12 weeks per cycle).

The Mississippi Tobacco Quitline

The Mississippi Tobacco Quitline provides online and telephone-based tobacco treatment for Mississippi residents, free-of-charge. Nicotine replacement therapy products are available for all eligible participants and will be shipped directly to you. The hours of operation are Monday – Thursday: 7 am – 9 pm; Friday: 7 am – 7 pm; and Saturday: 9 am – 5:30 pm. You may call **1.800.QUIT.NOW (800) 784-8669** or visit the website at www.quitlinems.com for more information.

The ACT Center

The ACT Center for Tobacco Treatment, Education, and Research provides face-to-face treatment to Mississippi residents, free-of-charge. Nicotine Replacement Therapy and prescription medications are available for eligible participants. The ACT Center's main clinic is located in Jackson, Mississippi with several satellite treatment sites throughout the state. For more information please call **(601) 815-1180** or visit www.act2quit.com for more information.

ActiveHealth

The Smoking Cessation program from ActiveHealth uses proven methods and real-world motivation to help participants quit. You'll even have a Lifestyle Coach to give you the personal guidance you need to succeed. The program is available at no cost to the participant, and it includes eight weeks of nicotine replacement therapy. Call ActiveHealth at **(866) 939-4721** to speak with a customer service representative about this program.

STATE AND SCHOOL EMPLOYEES' HEALTH INSURANCE PLAN
MONTHLY PREMIUM RATES
 Effective July 1, 2015

Legacy - Initially hired before 1/1/2006

Horizon - Initially hired on or after 1/1/2006

ACTIVE EMPLOYEE	LEGACY EMPLOYEES				HORIZON EMPLOYEES			
	BASE		SELECT		BASE		SELECT	
	TOTAL PREMIUM	EMPLOYEE PORTION	TOTAL PREMIUM	EMPLOYEE PORTION	TOTAL PREMIUM	EMPLOYEE PORTION	TOTAL PREMIUM	EMPLOYEE PORTION
Employee*	\$373	\$0	\$393	\$20	\$373	\$0	\$411	\$38
Employee + Spouse	\$779	\$406	\$856	\$483	\$779	\$406	\$874	\$501
Employee + Spouse & Child(ren)	\$993	\$620	\$1,070	\$697	\$993	\$620	\$1,088	\$715
Employee + Child	\$478	\$105	\$555	\$182	\$478	\$105	\$573	\$200
Employee + Children	\$642	\$269	\$719	\$346	\$642	\$269	\$737	\$364

*The State pays 100% of the employee's premium for Base Coverage. Active employees enrolling in Select Coverage must pay a portion of the employee premium.

RETIRED EMPLOYEE - NON-MEDICARE ELIGIBLE	LEGACY RETIREES		HORIZON RETIREES	
	BASE	SELECT	BASE	SELECT
Retiree	\$428	\$451	\$625	\$648
Retiree + Spouse (Non-Medicare)	\$895	\$984	\$1,289	\$1,378
Retiree + Spouse & Child(ren) (Non-Medicare)	\$1,141	\$1,230	\$1,451	\$1,540
Retiree + Child	\$549	\$613	\$721	\$810
Retiree + Children	\$738	\$777	\$885	\$974
Retiree + Spouse (Medicare)	N/A	\$641	N/A	\$838
Retiree + Spouse & Child(ren) (One or more Medicare)	N/A	\$803	N/A	\$1,000
RETIRED EMPLOYEE - MEDICARE ELIGIBLE	BASE	SELECT	BASE	SELECT
Retiree	N/A	\$190	N/A	\$190
Retiree + Spouse (Non-Medicare)	N/A	\$723	N/A	\$920
Retiree + Spouse & Child(ren) (Non-Medicare)	N/A	\$969	N/A	\$1,082
Retiree + Child	N/A	\$352	N/A	\$352
Retiree + Children	N/A	\$516	N/A	\$516
Retiree + Spouse (Medicare)	N/A	\$380	N/A	\$380
Retiree + Spouse & Child(ren) (One or more Medicare)	N/A	\$542	N/A	\$542
RETIRED NON-MEDICARE MARRIED TO ACTIVE	BASE	SELECT	BASE	SELECT
Retiree	\$428	\$451	\$440	\$463
Retiree + Child	\$533	\$613	\$545	\$625
Retiree + Children	\$697	\$777	\$709	\$789

COBRA	LEGACY		HORIZON	
	BASE	SELECT	BASE	SELECT
Participant	\$380	\$400	\$380	\$419
Participant + Spouse	\$794	\$873	\$794	\$891
Participant + Spouse & Child(ren)	\$1,012	\$1,091	\$1,012	\$1,109
Participant + Child	\$487	\$566	\$487	\$584
Participant + Children	\$654	\$733	\$654	\$751
COBRA DISABILITY EXTENSION	BASE	SELECT	BASE	SELECT
Participant	\$559	\$589	\$559	\$616
Participant + Spouse	\$1,168	\$1,284	\$1,168	\$1,311
Participant + Spouse & Child(ren)	\$1,489	\$1,605	\$1,489	\$1,632
Participant + Child	\$717	\$832	\$717	\$859
Participant + Children	\$963	\$1,078	\$963	\$1,105

STATE OF MISSISSIPPI
DEPARTMENT OF FINANCE AND ADMINISTRATION
OFFICE OF INSURANCE
P.O. BOX 24208
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Summary of Benefits and Coverage and Uniform Glossary

The Patient Protection and Affordable Care Act (PPACA) requires that group health plans provide participants with an easy-to-understand summary of benefits and coverage and a uniform glossary of terms commonly used in health insurance coverage. Coverage examples in the summary illustrate how the Plan covers care for common benefit scenarios.

You can find a summary for both Base and Select Coverage and the Uniform Glossary on the Plan's web site at <http://knowyourbenefits.dfa.ms.gov>. You may request a paper copy of these documents by calling the Office of Insurance at (601)359-3411 or toll-free at (866) 586-2781.



Scan this code with your smartphone or go to
<http://knowyourbenefits.dfa.ms.gov>