

## Items of Interest From:

# SWCD of Illinois Insurance Group Association

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April 21, 2015

Vol. 3, Issue 1

### ***GREAT NEWS!!!***

On April 20, several members of the SWCD of Illinois Insurance Group, the AISWCD employees and I attended the Central Management Services Local Government Health Plan seminar at the Northfield Inn in Springfield. This is the meeting held each April to discuss changes to our health plans and to learn our performance rating and premiums for the upcoming year. We were all delighted to learn that we had maintained our "A" rating and that for FY 2016 there would be no increase in premiums for either Managed Care or Local Care. This is GREAT news in a year where asking for more money in the budget would be a tricky subject. This means that I can begin working on FY 2016 budget numbers for the insurance allocation and the AISWCD and IDoA have a good starting point for looking at numbers for Operations, and hopefully, Programs.

As always, I want to remind you to continue with your wellness and fitness habits, eat well, get plenty of rest and avoid as much stress as possible. These are easy steps to take toward good health!

#### **Special points of interest:**

- ✓ 2016 Premiums
- ✓ Benefits Choice
- ✓ Changes to Vision Coverage
- ✓ Affordable Care Act Items
- ✓ Getting a new card

### ***BENEFITS CHOICE PERIOD COMING UP***

Benefits Choice Period for our health plans begins May 1 and ends June 1. This is the time of year when members can add or drop dependents, or change health insurance carriers without having a qualifying event such as marriage, divorce, insurance lost/gained at other employer, birth, death, etc. Following are some important reminders about Benefit Choice Period:

- NO Benefit Choice Booklets will be mailed out to members. The booklet can be seen on CMS' website at [www.benefitschoice.il.gov](http://www.benefitschoice.il.gov) or on my SWCD website at [www.montswcd.com](http://www.montswcd.com)
- Booklet will be available online beginning May 1
- A FLYER EXPLAINING THE BENEFIT CHOICE PERIOD AND A CHANGE FORM WILL BE MAILED TO MEMBER'S HOME ADDRESSES. PLEASE WATCH FOR THIS IF YOU ARE INTERESTED IN MAKING CHANGES. I WILL ALSO HAVE COPIES AVAILABLE
- Flyers will be mailed to all members, including those who have waived coverage
- ALL change forms during this period must be submitted to me by June 1
- Please let me know if you have questions or concerns

### ***HEALTH ALLIANCE CHANGES***

Some recent changes were noted for Health Alliance participants. Recently, Health Alliance made a decision to no longer use doctors through the Health-Link network. This may have caused a change in your provider's availability. Please know that Health Alliance is doing all they can to contract with those providers who were primarily in the Southern Illinois and DeKalb areas. You can contact Health Alliance at (800) 851-3379.

#### **DID YOU KNOW???**

—THERE IS A WEALTH OF RESOURCES ON EACH OF THE HEALTH COMPANIES WEBSITES? CHECK THEM OUT TODAY. WEBSITES ARE LISTED ON PAGE 3—

## CHANGES TO VISION COVERAGE

Even more great news for FY 2016! We have new and improved vision benefits. EyeMed continues to be our contracted carrier. Below are the new benefits:



- ◇ There has been a change in benefit frequency. These are now every 12 months from the last appointment (a change from every 24 months)
  - ◆ Eye Exam
    - In-network**—\$25 copayment
    - Out-of-network**—\$30 allowance toward bill
  - ◆ New lenses or glasses (standard frames remains every 24 months)
    - In-network**—single, bifocal and trifocal—\$25 copayment
    - Out-of-network**—\$50 allowance for single vision, \$80 allowance for bifocal and trifocal
  - ◆ New Contact Lenses
    - In-network**—\$120 allowance/plan year
    - Out-of-network**—\$120 allowance/plan year (not a typo, they are the same)
- ◇ Frames remain at every 24 months from the last appointment, but our limit has increased
  - ◆ Standard frames
    - In-network**—\$25.00 copayment for standard frames, retail value up to \$175.00 (previously \$90.00); member is responsible for balance over \$175.00
    - Out-of-network**—\$70.00 allowance toward total bill

## POSSIBLE CHANGES TO SOME MEMBERS FOR SCRIPTS



At this time, Express Scripts remains the provider for prescriptions on all of our Local Government Health Plan providers. However, they have only entered into a 2016 contract with the HMO providers including Coventry, Health Alliance, Blue Advantage and HMO Illinois. It has not been determined if they will contract with the Local Care (Quality Care) and Open Access Plan providers. If a new carrier takes over from Express Scripts, those of you on those plans (anything other than an HMO) will receive a new prescription card. More information will be coming on this and I will keep you informed.

## AFFORDABLE CARE ACT NEWS

The following items are important changes brought about by the Affordable Care Act:

1. Prescription copayments and coinsurance paid by the member will apply toward the out-of-pocket maximums
2. Once the maximum has been met, medical, behavioral health and prescription drug charges will be covered at 100% for the remainder of the plan year.
3. Value of Health Care Reporting on W-2s will still be required for all units having more than 50 employees. This includes us because we are recognized by CMS as a large group
4. A new form (1095 C OR 1094 C) will be sent to each member showing the amount of premiums paid by the unit for the calendar year. There will be more information on this later in the year

## ARE YOU NEEDING A REPLACEMENT CARD?

I get requests periodically from those who are needing a replacement insurance card. I wanted to share the toll free phone numbers with all of you in case you find yourself missing a card, or if you have never received one in the first place. Please see the table below for those numbers. Remember, if you need a **dental, vision, or prescription card**, you will need your group number located on your actual health insurance card. Requests for new cards may be made online or by telephone. Express Scripts can be contacted at: **800-899-2587**

Health Plan Administrators	Toll-Free Telephone Number	TDD/TTY Number	Website Address
BlueAdvantage HMO	(800) 868-9520	(866) 876-2194	www.bcbsil.com/stateofillinois
Coventry Health Care HMO	(800) 431-1211	(217) 366-5551	www.chcillinois.com
Coventry Health Care OAP	(800) 431-1211	(217) 366-5551	www.chcillinois.com
Health Alliance HMO	(800) 851-3379	(800) 526-0844	www.healthalliance.org/stateofillinois
HealthLink OAP	(800) 624-2356	(800) 624-2356 ext. 6280	www.healthlink.com/illinois_index.asp
HMO Illinois	(800) 868-9520	(866) 876-2194	www.bcbsil.com/stateofillinois
Local Care Health Plan (Cigna)	(800) 962-0051	(800) 526-0844	www.cigna.com/stateofil
Local Consumer-Driven Health Plan (Cigna)	(800) 962-0051	(800) 526-0844	www.cigna.com/stateofil

Plan Component	Administrator's Name and Address	Customer Service Phone Numbers	Website Address
Vision Plan	<b>EyeMed</b> Out-of-Network Claims P.O. Box 8504 Mason, OH 45040-7111	(866) 723-0512 (800) 526-0844 (TDD/TTY)	www.eyemedvisioncare.com/stil
Local Care Dental Plan (LCDP) Administrator	<b>Delta Dental of Illinois</b> Group Number 20241 P.O. Box 5402 Lisle, IL 60532	(800) 323-1743 (800) 526-0844 (TDD/TTY)	http://soi.deltadentalil.com
Health/Dental Plans, Medicare COB Unit, Smoking Cessation Benefit and Weight-Loss Benefit	<b>CMS Group Insurance Division</b> 801 South 7th Street P.O. Box 19208 Springfield, IL 62794-9208	(217) 782-2548 (800) 442-1300 (800) 526-0844 (TDD/TTY)	www.benefitschoice.il.gov

### Things you gotta remember not to forget!!

- Payments need to be mailed to the Montgomery County SWCD rather than the AISWCD.
- Payments and invoices are due by the **15th of January, April, July and October**
- Payments must be made via a District check, I cannot accept personal checks
- Enrollment and termination paperwork should be submitted in a very timely manner.
- Changes such as marriage, divorce, birth, adoption, death of a member or dependent must be submitted as soon as possible to me. I am then required to report those events to CMS within 60 days

