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Choice of 2010 Healthcare Plans

What medical plans will be available for 2010?

PEBB will offer three medical plans for 2010.

1. PEBB's Statewide Plan will be available for members throughout the state.
2. The Kaiser Permanente HMO will be available to members who live (or work at least 50 percent of the time) in the Kaiser service area
3. The Providence Choice plan will be available to members who live or work in the Portland metro area.

The Board will continue to offer a version of each plan for eligible part-time employees and retirees.

How will PEBB's Statewide Plan differ from the current plan with Regence?

The main difference is in who acts as the insurer – who pays the difference if claims are higher than premiums and who keeps the balance if claims are lower than premiums. Regence insures the current plan. Beginning 2010, PEBB will self-insure the plan. If claims are higher than premiums, PEBB reserves will cover the difference. If claims are lower than premiums, the balance stays in the reserves.

How does Providence Health Plans figure into PEBB's Statewide Plan?

Providence Health Plans will administer PEBB's Statewide Plan. This means they will contract with a network of doctors, clinics, hospitals and other healthcare providers and will process claims. The network will provide worldwide access. They will administer the plan according to requirements of the contract with PEBB.

Why did the Board choose Providence Health Plans to administer the Statewide Plan instead of Regence?

They offered the better overall solution for PEBB members in terms of cost, administrative capabilities and responsiveness to the Board's Vision for healthcare.

Coverage and Plan Design

Will my coverage change in 2010?

The Board has made no changes to the current design of the healthcare plans. It is the Board, not the insurance company or administrator, that determines what is covered and at what level in the healthcare plans. Review the current plan design at www.oregon.gov/DAS/PEBB/docs/SPD/subsections/MedicalDrugPlanComparisons.pdf

What happens if I'm getting treatment outside the network for PEBB's Statewide Plan when the new plan year starts?

You will have guidance during the transition to the new plan year, which begins Jan. 1, 2010. Case managers will consult with members who need care continuity for pregnancy, surgery and complex treatment of chronic conditions. Members may also talk with their providers about contracting to be in the network for PEBB's Statewide Plan.

Note that while Providence Health Plans does not contract with Legacy system providers, Legacy facilities will be in-network for pediatric specialty, burn, and trauma services, and the bariatric surgery benefit covered in PEBB plans.

How will PEBB's Statewide Plan cover healthcare when I travel?

The plan will cover care for you and covered dependents when you travel, whether you travel out of state or internationally. The plan administrator will process claims for care you receive as required by PEBB contract. In addition, all members covered by the employer's basic life insurance have a healthcare coordination benefit when they travel, provided by Medex TravelAssist. If you or a dependent becomes ill while traveling 100 or more miles from home, Medex offers a range of assistance at no cost. Learn more here: <http://www.standard.com/eforms/12092w.pdf>.

Will I be able to rely on the same processes currently in place to get covered care when I travel?

You should follow the same processes in 2010 as you use now. Have your healthcare plans' ID cards with you – both medical and dental – and a copy of the Medex TravelAssist card or brochure (<http://www.standard.com/eforms/12092w.pdf>). If you travel outside the U.S., take a copy of your plan's claim form, as well. If you need to access care, ask the provider to contact your plan directly and immediately to make arrangements for claims.

Will I have to get another exception for the lower co-pay for my brand-name drug?

Not in most cases. If you are taking a brand-name prescription drug that is not on the formulary, and your provider has shown that only the brand drug will work for you, you will typically continue to pay the lower co-pay for the medication.

Can my plan deny coverage for abortion, sterilization or physician-assisted suicide, or make me pay upfront to access this care?

No. The Board designs the plans (what is covered and at what level), and PEBB contracts determine how claims are paid. It's important to recognize that some doctors or hospitals in a plan's preferred-provider network may choose not to offer certain covered services. It's also important to choose healthcare providers based on personal values. Talk with your healthcare providers about decisions about your care.

When will details on plan design be in place?

PEBB tries to post detailed information on benefits for the coming plan year the month prior to Open Enrollment. Open Enrollment is the first opportunity for members to enroll in benefit plans for the coming plan year; it's typically held during October.

Providers and Provider Networks

Will the network for PEBB's Statewide Plan be a Providence network?

No, the network will not be a "Providence" network or a network of only Providence providers. It will be a preferred-provider network that meets requirements of the PEBB contract, including requirements on national and international coverage.

Will I be limited to Providence providers in PEBB's Statewide Plan?

No. The PEBB Statewide Plan is not a Providence plan, and the network for the Statewide Plan is not a network of only Providence doctors. The Statewide Plan is designed and insured by PEBB, instead of an insurance company. The plan offers statewide, nationwide and worldwide coverage through networks of preferred providers. PEBB has selected Providence Health Plans to administer this PEBB-insured plan. This means they will process claims and contract with providers to be in the networks.

How do I find out if my provider is in the network for PEBB's Statewide Plan?

1. Go to: www.providence.org/PHP_ProviderDirectory/Pages/PHP/Default.aspx
2. Under "Visitors," select "PEBB Statewide Plan (2010)" from the drop-down menu on the right, then click "Go."
3. Type in your provider's name and zip code, and click "Go."

I live outside the state's borders but work in Oregon; will I need to change doctors?

The Statewide Plan includes a large number of preferred providers across the country. You can search for the providers online through the MultiPlan Web site.

1. Go to www.multiplan.com/search/search-2.cfm?originator=84450.
2. Select "Doctor" or "Facility" and click "Continue."
3. Type in your search criteria and click "Continue."

I heard my providers are in the network; why don't they show up in the search results?

There could be a number of reasons:

1. When you search for a specific provider, you must spell the name correctly – even one letter makes a difference. For example, typing in Kelley will not return results for Kelly. Using first and last names means more opportunity for error; try using the last name only. Check the tips on the returned-results page.
2. The search sorts by distance from the zip code you enter, and your provider's zip code may be outside the default radius. Try expanding the radius from the drop-down menu.
3. Building and joining a provider network involves contracts; it can take a little time to get details in place.

Are most providers in the network for PEBB's Statewide Plan?

Currently, more than 95 percent of all providers used by PEBB members are already in the network. The plan administrator continues to broaden and refine the network. If your providers do not already contract to be in the network, you may want to encourage them to do so.

How to I encourage my providers to be included in the network?

You can ask your provider, directly. You are an equal partner in your care, and there is power in partnerships. The implementation team is working through a process for PEBB members to “nominate” providers with whom they have an ongoing relationship; look for details in coming updates.

How can my providers join the network for PEBB's Statewide Plan?

They can call (888) 568-2482. This is a voice mailbox monitored by the network manager. Providers should leave their name, phone number, provider type, and county where they practice. They will receive a response within one business day. Providers can also fax a request to contract to (503) 574-8168.

Note that while Providence Health Plans does not contract with Legacy system providers, Legacy facilities will be in-network for pediatric specialty, burn, and trauma services, and the bariatric surgery benefit covered in PEBB plans.

How can my mental-health counselor join the network?

Providers of behavioral health services who want to participate in the network should call (800) 711-4577.

Will OHSU hospital and providers be in the network for PEBB's Statewide Plan?

Yes. PEBB was able to accommodate requests that OHSU's full provider panel be included in the network.

Will Legacy hospitals be in the network for PEBB's Statewide Plan?

Legacy facilities will be in-network for pediatric specialty, burn, and trauma services, and the bariatric surgery benefit covered in PEBB plans.

Are providers of complementary and alternative care included in the network?

Yes. PEBB plans cover complementary and alternative care, according to the plan's design.

When will details on the networks be in place?

PEBB tries to post detailed information on benefits for the coming plan year the month prior to Open Enrollment. Open Enrollment is the first opportunity for members to enroll in benefit plans for the coming plan year; it's typically held during October.