

# 2018 RETIREE OPEN ENROLLMENT BOOKLET ELECTION FORM DUE NOVEMBER 3, 2017

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## MORE INFORMATION

[www.benefits.mt.gov](http://www.benefits.mt.gov) | (800) 287-8266  
Hearing Impaired TTY (406) 444-1421

- Retiree presentation schedule
- Recorded presentation
- Wrap Plan Document (WPD) - Full benefit details
- Additional Live Life Well Incentive Information

Please be aware, this is the only document you will receive regarding Open Enrollment. If you have specific benefit questions, refer to [www.benefits.mt.gov](http://www.benefits.mt.gov) or contact HCBD at (800) 287-8266, TTY (406) 444-1421, or [benefitsquestions@mt.gov](mailto:benefitsquestions@mt.gov).



# A MESSAGE FROM DIRECTOR LEWIS

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Dear State of Montana Benefit Plan (State Plan) Members,

I'm pleased to announce that due to our innovative work managing healthcare and controlling State Plan spending, monthly out-of-pocket contributions required for State Plan coverage will not increase in 2018.

Additionally, the State Plan has been able to minimize benefit changes for 2018, resulting in no change to member deductibles, benefit percentages, office visit/urgent care co-payments, or out-of-pocket maximums.

I want to personally thank you as a member of our self-funded plan for the work you're doing to stay educated as a healthcare consumer—from getting your health screening done early and saving money with the Live Life Well Incentive Program, to choosing Montana Health Centers for primary care (under 65), and shopping around for the best cost and quality for your medical needs.

The effort you put into managing your health and your health-related expenses results in State Plan savings and allows the State Plan to offer continued benefits with minimal increases to member contributions or cost-sharing.

I am committed to ensuring our State Plan is run as effectively and efficiently as possible while providing quality care and services to all plan members.

Please review the Open Enrollment Booklet and contact the Health Care & Benefits Division at (800) 287-8266, (406) 444-7462, TTY (406) 444-1421, or via email [benefitsquestions@mt.gov](mailto:benefitsquestions@mt.gov) with questions.



John Lewis, Director  
Department of Administration

# IMPORTANT INFORMATION

## PLEASE READ!

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### OPEN ENROLLMENT

Open Enrollment is your opportunity to make changes to your State Plan coverage. During this year's Open Enrollment Period, you can add/remove a spouse or domestic partner and/or add/remove a dependent child/ren under age 26. Be aware, you are required to submit verification of eligibility documentation to HCBD by December 15, 2017 in order for the added dependent to be enrolled on State Plan benefits effective January 1, 2018.

### TRAININGS

Refer to the back cover for the Retiree Presentation Schedule for a list of cities, dates, times, and locations for our live presentations.

Or you may also join us for a live, interactive web-cast available to view on any web-enabled device.

Visit **[www.benefits.mt.gov/openenrollment](http://www.benefits.mt.gov/openenrollment)** to register today!

- **Monday, October 16, 2017 at 2:00 pm**

A pre-recorded web-cast will also be available at [www.benefits.mt.gov](http://www.benefits.mt.gov) by October 2, 2017.

Feel free to contact HCBD with any questions or concerns you have regarding the Open Enrollment Period, (800) 287-8266, (406) 444-7462, TTY (406) 444-1421, or via email [benefitsquestions@mt.gov](mailto:benefitsquestions@mt.gov).



# 2018 RETIREE BENEFIT COSTS<sup>4</sup>

## NO RATE CHANGE!

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### NON-MEDICARE (UNDER 65) RETIREE MEDICAL PLAN RATES

	Monthly Rate	Potential Live Life Well Incentive
Non-Medicare Retiree Only	\$1,131	up to \$30 off
Non-Medicare Retiree & Non-Medicare Spouse	\$1,596	up to \$60 off
Non-Medicare Retiree & Medicare Spouse	\$1,353	up to \$60 off
Non-Medicare Retiree & Children	\$1,357	up to \$30 off
Non-Medicare Retiree, Non-Medicare Spouse & Child(ren)	\$1,633	up to \$60 off
Non-Medicare Retiree, Medicare Spouse & Child(ren)	\$1,438	up to \$60 off

### MEDICARE (OVER 65) RETIREE MEDICAL PLAN RATES

	Monthly Rate	Potential Live Life Well Incentive
Medicare Retiree Only	\$439	up to \$30 off
Medicare Retiree & Non-Medicare Spouse	\$872	up to \$60 off
Medicare Retiree & Medicare Spouse	\$765	up to \$60 off
Medicare Retiree & Children	\$718	up to \$30 off
Medicare Retiree, Non-Medicare Spouse, & Child(ren)	\$911	up to \$60 off
Medicare Retiree, Medicare Spouse & Child(ren)	\$784	up to \$60 off

### RETIREE DENTAL AND VISION HARDWARE PLAN RATES

	Dental	Vision Hardware
Retiree Only	\$41.10	\$7.64
Retiree & Spouse	\$62.50	\$14.42
Retiree & Children	\$61.00	\$15.18
Retiree & Family	\$70.00	\$22.26

### BASIC LIFE INSURANCE

Non-Medicare (Under-65) Retirees must also pay \$1.90/month for Basic Life Insurance Coverage.

# CHANGES FOR 2018!

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## **APPLIED BEHAVIOR ANALYSIS (ABA) TREATMENT**

The State of Montana has adopted a licensing process for ABA therapists. Effective 04/01/18, the State Plan will only pay ABA claims submitted by a licensed ABA therapist.

## **CHOLESTEROL MEDICATION (STATINS)**

Effective 01/01/18, the Affordable Care Act (ACA) requires cholesterol medicines like Lipitor or similar equivalents to be covered as preventative treatment at no member copay. The Navitus formulary will apply. Additional questions should be directed to Navitus.

## **DIABETIC TEST STRIPS**

Effective 01/01/18 all diabetic test strips will apply a Tier 2 (\$50) copay under the Navitus prescription drug program. The Navitus formulary will apply. Additional questions should be directed to Navitus.

## **NON-AMBULANCE TRAVEL BENEFIT**

The non-ambulance travel benefit was added to the State Plan effective 07/01/16 as a way to assist members who may need to travel to a non-participating facility (hospital) for services. Effective 01/01/18, the non-ambulance travel benefit is being removed from the State Plan due to the fact all facilities (hospitals) within the State of Montana are participating with the State Plan.

## **SPECIALTY DRUG COMPANY**

Effective 01/01/18, the Tier 4 (\$200) copay for specialty drugs filled at a Preferred Specialty Pharmacy will be \$50 vs. \$200 for Retirees over age 65 and enrolled on the Navitus MedicareRx (PDP) Prescription Drug Plan. All other Retirees will continue to have a Tier 4 (\$200) copay applied and will have access to manufacturer couponing programs.

**CHECK  
YOUR  
WPD**

For complete details about State Plan coverage, refer to the Wrap Plan Document (WPD) at [www.benefits.mt.gov](http://www.benefits.mt.gov) or by request at (800) 287-8266, TTY (406) 444-1421 or [benefitsquestions@mt.gov](mailto:benefitsquestions@mt.gov).

## **AIR AMBULANCE TRANSPORTATION**

The Montana Legislature passed Senate Bill 44 which pertains to emergent flights provided by non-participating air ambulance transport companies not controlled by a Montana hospital. Emergency care for SB 44 means care that is necessary to stabilize a patient for transfer to another hospital or medical unit within a hospital. Transferring a patient between hospitals on a fixed wing flight would not typically be considered “emergent” care under SB 44. The bill requires the State Plan to make payment based on billed charges, a negotiated amount, or the participating provider contracted amount. If either party (State Plan or air transport company) does not like the required payment amount, either party can take the other party to dispute resolution. The State Plan pays any emergent transport at 250% Medicare (participating provider amount). In this case a member is held harmless except for their deductible, etc. In the event a member receives a non-emergent transport by a non-participating air ambulance transport company, the member may still be balance billed. Contact Allegiance (855) 999-1057 with any questions about air ambulance transportation coverage or participating air transport companies.

## **MEDICARE ENROLLMENT**

As of January 1, 2017, if a Retiree or a Retiree’s spouse/domestic partner/child become Medicare eligible, the Retiree or the Retiree’s spouse/domestic partner/child must enroll in both Medicare Part A and Medicare Part B as of the first of the month of eligibility. Proof of Medicare enrollment will be required by HCBD. Enrollment in any Medicare Part D (drug plan), besides the Navitus Medicare Rx Prescription Drug Plan (PDP), is not permitted and would result in termination of all State Plan benefits.

## **OPTION TO TERMINATE BENEFITS - RETREAT RIGHTS**

You may find it beneficial to consider switching from the State Plan to another health insurance plan available on the Health Insurance Marketplace (under 65) or a Medicare Supplement or Advantage Plan (over 65). You will need to be aware that as of January 1, 2017, the State Plan eliminated Retreat Rights, so if you elect to terminate your State Plan coverage you will not have an opportunity to re-enroll.

## **RETAIL PHARMACY FILL - REMINDER**

Did you know you can now get up to a 90 day supply of medication from your retail pharmacy for two copays? This same benefit is available to you when utilizing the State Plan Mail Order Pharmacies: COSTCO Mail Order Pharmacy, MiRx Mail Order Pharmacy, or Ridgeway Mail Order Pharmacy. Contact Navitus for additional details.

## **SURVIVOR BENEFITS**

Please be aware, surviving spouses and dependent children of retirees that pass away may only remain covered by the State Plan until the spouse or dependent is eligible for Medicare or another group health plan.

# 2018 LIVE LIFE WELL INCENTIVE PROGRAM

**Earn \$30 per month off your 2019 benefit contribution! Double your incentive if a covered spouse/domestic partner also participates.**

## NEW THIS YEAR!

You must complete all 3 activities (health screening, be nicotine free (or self-report an alternative), and self-report a Next Step activity) between November 1, 2017 and October 31, 2018 to earn ANY incentive.



### HEALTH SCREENING INCENTIVE

Have a State-sponsored health screening at a Montana Health Center. Health screening appointments are subject to availability. Make an appointment at [www.carehere.com](http://www.carehere.com) or call (855) 200-6822.



### NICOTINE FREE INCENTIVE

You are required to self-report your nicotine use at [www.myactivehealth.com/som](http://www.myactivehealth.com/som). If you self-report that you use nicotine, and you would like to earn the incentive, you must complete and self-report that you have completed one of two alternatives:

- Complete a nicotine cessation program; or
- Have a nicotine education session with your primary care provider.



### NEXT STEP INCENTIVE

Complete an eligible activity related to your health screening results and self-report it at [www.myactivehealth.com/som](http://www.myactivehealth.com/som) by October 31, 2018.

The State Plan offers the incentive program to all plan members and their enrolled spouse/domestic partner. If you think you may be unable to meet a standard of the incentive program, you may qualify for an alternative program or different means to earn the incentive. You must contact the Health Care & Benefits Division (HCBD) as soon as possible at 800-287-8266 or email [livelifewell@mt.gov](mailto:livelifewell@mt.gov). We will work with you (and if you wish, your doctor) to design a program with the same incentive that is right for you. We will maintain the privacy of your personally identifiable health information. Medical information that personally identifies you and that is provided through the incentive program will not be used to make decisions regarding your employment. Your health information shall only be disclosed to carry out specific activities related to the incentive program (such as responding to your request for a reasonable accommodation). You will not be asked or required to waive the confidentiality of your health information to participate or to receive an incentive. Anyone who receives your information for purposes of providing you services through the incentive program will abide by the same confidentiality requirements. We securely maintain all electronically stored medical information we obtain through the incentive program, and will take appropriate precautions to avoid a data breach. If a data breach does occur involving information you provided to us for the incentive program, we will notify you immediately. A copy of the Plan's privacy notice is available on the HCBD website or by going to <http://benefits.mt.gov/Portals/59/Documents/hipaa%20notice.pdf>.

## Language Assistance – General Taglines

*State of Montana is required by federal law to provide the following information.*

لار مصلًا تفاهكيم: 1-855-999-1062 (رقم) 1063-999-855-855 قهبر صئلا. نجمالبا لادر فارتد يةغوللا قسدعمالا تامدخ فلان، مغللا كرا ذا شئدخ نكث اذ: بمخلولم

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-855-999-1062 (TTY: 1-855-999-1063)

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-855-999-1062 (TTY: 1-855-999-1063).

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-855-999-1062 (TTY: 1-855-999-1063).

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-855-999-1062 (ATS: 1-855-999-1063).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-855-999-1062 (TTY: 1-855-999-1063).

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-855-999-1062 (TTY: 1-855-999-1063).

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-855-999-1062 (TTY: 1-855-999-1063) ま、お電話にてご連絡ください。

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-855-999-1062 (TTY: 1-855-999-1063) 번으로 전화해 주십시오.

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-855-999-1062 (TTY: 1-855-999-1063).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-855-999-1062 (TTY: 1-855-999-1063).

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-855-999-1062 (телетайп: 1-855-999-1063).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-855-999-1062 (TTY: 1-855-999-1063).

PAUNAWA: Kung nagsasalita ka ng Tagalog, maari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-855-999-1062 (TTY: 1-855-999-1063).

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-855-999-1062 (TTY: 1-855-999-1063).



# NON-DISCRIMINATION LANGUAGE

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State of Montana complies with applicable Federal civil rights laws, state and local laws, rules, policies and executive orders and does not discriminate on the basis of race, color, sex, pregnancy, childbirth or medical conditions related to pregnancy or childbirth, political or religious affiliation or ideas, culture, creed, social origin or condition, genetic information, sexual orientation, gender identity or expression, national origin, ancestry, age, disability, military service or veteran status or marital status.

State of Montana does not exclude people or treat them differently because of race, color, sex, pregnancy, childbirth or medical conditions related to pregnancy or childbirth, political or religious affiliation or ideas, culture, creed, social origin or condition, genetic information, sexual orientation, gender identity or expression, national origin, ancestry, age, disability, military service or veteran status or marital status. State of Montana provides free aids and services to people with disabilities to communicate effectively with us, such as: qualified sign language interpreters and written information in other formats (large print, audio, accessible electronic formats, other formats). State of Montana provides free language services to people whose primary language is not English such as: qualified interpreters and information written in other languages. If you need these services, contact customer service at 855-999-1062. If you believe that State of Montana has failed to provide these services or discriminated in another way on the basis of race, color, sex, pregnancy, childbirth or medical conditions related to pregnancy or childbirth, political or religious affiliation or ideas, culture, creed, social origin or condition, genetic information, sexual orientation, gender identity or expression, national origin, ancestry, age, disability, military service or veteran status or marital status you can file a grievance. If you need help filing a grievance, John Pavao, State Diversity Coordinator, is available to help you. You can file a grievance in person or by mail, fax, or email:

John Pavao, State Diversity Program Coordinator  
Department of Administration  
State Human Resources Division  
125 N. Roberts  
P.O. Box 200127  
Helena, MT 59620  
Phone: (406) 444-3984  
Email: [jpavao@mt.gov](mailto:jpavao@mt.gov)

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Room 509F, HHH Building  
Washington, D.C. 20201  
1-800-368-1019, 800-537-7697 (TDD)

# RETIREE PRESENTATION SCHEDULE

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City	Date	Time	Location
Anaconda	Oct. 5	1:00 pm	AOH 106 Cherry St.
Billings	Oct. 2 Oct. 3	2:00 pm 9:00 am	Hampton Inn - Lewis Room 5110 South Gate Dr.
Bozeman	Oct. 2	10:00 am	FWP 1400 S 19th Ave.
Butte	Oct. 5	10:00 am	MT Tech Big Butte Room - Student Union Building 1300 W Park St.
Deer Lodge	Oct. 6	10:00 am	DOC Training Center 442 Golf Course Rd.
Great Falls	Oct. 4	2:00 pm w/ interpreter	FWP - 4600 Giant Springs Rd.
Helena	Oct. 12 Oct. 16	10:00 am 10:00 am	DPHHS Sanders Auditorium 111 N Sanders St.
Kalispell	Oct. 11	10:00 am	FWP - 490 N. Meridian Rd.
Lewistown	Oct. 4	10:00 am	Lewistown Library - 701 W Main
Miles City	Oct. 3	1:30 pm	Sleep Inn Tongue River Room 1006 S Haynes Ave.
Missoula	Oct. 10	10:00 am & 1:00 pm	Ruby's Inn 4825 N Reserve St.
Polson	Oct. 11	1:30 pm	Lake County Court House 3rd Floor Large Conference Room 106 4th Ave E

Or you may also join us for a live, interactive web-cast available to view on any web-enabled device.

Visit [www.benefits.mt.gov/openenrollment](http://www.benefits.mt.gov/openenrollment) to register today!

- **Monday, October 16, 2017 at 2:00 pm**

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