

## FCHP small-group plan design changes for April 1

FCHP has made a couple of exciting changes to our small group product portfolio—introducing two additional deductible plans to give you greater choice, plus a new vision benefit members will appreciate. We're also increasing some copayments in several plan designs.

These changes, which affect FCHP Direct Care, FCHP Select Care and Fallon Preferred Care, apply for existing business at anniversary renewal dates on or after April 1, 2011.

### ■ New plan designs

In response to your feedback, FCHP is introducing two plan designs in 2011, called **Premium Saver 1500 Classic** and **Premium Saver 2000 Classic**. These new designs mirror our existing Premium Saver 1500 and

Premium Saver 2000 options, but do not have a copayment after the deductible for inpatient hospital stays, same-day surgery and the imaging benefit.

### ■ New! \$0 preventive vision benefit

Now, FCHP commercial plan members will have one of the best vision benefits in the region with no cost-sharing for **annual** preventive vision exams. This is FCHP's own initiative, not part of health care reform. The benefit is effective upon renewal anniversaries.

### ■ Other product changes

- **Increase in specialty copayment** for Premium Saver I and II plans to \$30, and for Premium Saver 500 and 1000 to \$40.

- PCP and specialist **copayments for Premium Saver 1500** now will align with the deductible plans.
- **Increase in prescription mail-order copayment for Tier 3 drugs** from 2 to 3 times the amount of the copayment for Tier 3 retail prescriptions. (Example, if Tier 3 retail drug has a copayment of \$50, the mail-order Tier 3 copayment is increasing from \$100 (2 times the copay) to \$150 (3 times the copay).)
- **Care Choice plans:** Increase in office visit and prescription copayments, as well as out-of-pocket maximums.

Reminder: FCHP no longer offers dental benefits and discounts, effective since January 1, 2011, upon anniversary dates.

You'll find summaries of these and all our April 1 plan designs at [fchp.org/employers/news-announcements/Employer-Flash-April-11.aspx](http://fchp.org/employers/news-announcements/Employer-Flash-April-11.aspx). ■

## Extra fitness and fun

- **It Fits!** is the richest fitness benefit in Massachusetts. This program reimburses families \$400 (and individuals \$200) each year for all kinds of healthy activities. For details, see [fchp.org/employers/resources/~media/Files/WellnessFlyers/ItFits.ashx](http://fchp.org/employers/resources/~media/Files/WellnessFlyers/ItFits.ashx). **Please note: Weight Watchers® reimbursement has changed.** Members who qualify for our It Fits! reimbursement program have been able to request coupons for 12 consecutive weeks of Weight Watchers® that reduced their benefit by \$100. Due to changes at Weight Watchers, the coupons are now for 13 consecutive weeks, reducing the available reimbursement by \$120. (*Weight Watchers® is a registered trademark of Weight Watchers International, Inc.*)
- **FCHP's Family Fun program continues in 2011.** FCHP members save when visiting many attractions throughout our service area. Our partners in the program have donated these discounts, with no cost to FCHP or our members. For more information, see [fchp.org/members/news-announcements/family-fun.aspx](http://fchp.org/members/news-announcements/family-fun.aspx). ■

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## Why FCHP = more choice, more savings

At Fallon Community Health Plan, we're thinking differently about health insurance with smarter, more sensible plans and networks that help our customers to offer excellent and affordable health care coverage.

### ■ FCHP affordable design options

Every business has employees with different health care needs. At FCHP, our array of plan design options makes it easier for you to cover what's important to individual employees while not charging them for what they don't need.

- Our affordable **Premium Saver plan options** include inpatient copayments that translate to premium savings.
- Our **deductible options** provide even greater premium savings by offering deductibles for inpatient services and diagnostic testing.
- Our **qualified high-deductible plans** may be partnered with a Health Savings Account.
- And, through our subsidiary, **UltraBenefits, Inc.**, we offer employers more innovative solutions to control their employee benefit plan costs. [See our article, "UltraBenefits offers cost-management solutions."]

You'll find summaries of our plan designs at [fchp.org/employers/general-plan-information/benefit-summaries.aspx](https://www.fchp.org/employers/general-plan-information/benefit-summaries.aspx)

### ■ Networks that make a difference

FCHP has more doctors and hospitals than ever across Massachusetts and southern New Hampshire—over 24,000 in all. Our plan networks are built with doctors and hospitals in our members' communities, so they can receive excellent care and services close to home. Plus, with our PPO plan, members have access to more than 600,000 in-network doctors nationwide.

- **Pioneering the limited network.** Though now required by state law in the merged market, we introduced FCHP Direct Care way back in 2002 as an innovative limited network solution for customers looking to save without sacrificing access to high-quality health care. Direct Care, which consists of more than 14,000 providers in a service area that covers two-thirds of the state population, has at least a 12% price differential compared to the base premium for a full-network product. We're seeing more employers pursuing a defined-contribution approach with FCHP Direct Care, which encourages even greater savings. For more information, please go

to [fchp.org/employers/general-plan-information/direct-care-network.aspx](https://www.fchp.org/employers/general-plan-information/direct-care-network.aspx).

- **A unique feature of Direct Care.** What makes FCHP Direct Care particularly unique compared to new limited-network offerings in the marketplace is our Peace of Mind Program™. When it comes to specialty care, our Direct Care members may choose to receive a second opinion and treatment for specialty services at one of five top medical centers in Boston. This is a member-driven decision that only requires a couple of basic steps; there are no extra out-of-pocket costs. For more information, go to [fchp.org/members/doctors-facilities/peace-of-mind.aspx](https://www.fchp.org/members/doctors-facilities/peace-of-mind.aspx).

Don't settle for the same old health insurance. FCHP has consistently demonstrated that we are pursuing high-quality, cost-effective care for our members. Let us be your partner in finding the right health insurance solutions that fit your needs and budget. For more details, call your account manager at 1-800-333-2535. ■

## Reporting fraud, waste and abuse

Fallon Community Health Plan is committed to detecting, investigating and resolving instances of error, fraud, waste and abuse in order to help maintain strong and affordable health care.

- **Fraud** can be defined as an intentional misrepresentation that causes a victim to part with something of value, and is considered a criminal act.
- **Waste** is generally categorized as an act that causes a company to pay unnecessarily for a service.
- **Abuse** occurs when an individual or entity "works the system," so as to be paid (or paid more) for a service to which he/she would not otherwise be entitled.

We also direct your attention to FCHP's recently **updated False Claims Act Policy**. We take seriously government's enforcement of the False Claims Act. For more information, go to [fchp.org/providers/provider-manual/compliance-dra.aspx](https://www.fchp.org/providers/provider-manual/compliance-dra.aspx).

If you suspect fraud, waste or abuse, please be sure to report the activity to Phil Benvenuti, FCHP Senior Director of Internal Audit, at 1-508-368-9412. You also may call FCHP's Compliance Hotline anonymously at 1-888-203-5295. ■

## UltraBenefits offers cost-management solutions

Fallon Community Health Plan's subsidiary, UltraBenefits, Inc., is a third-party administrator that offers employers innovative solutions to control benefit plan costs. Their strategies are gaining a lot of momentum in the marketplace.



This year, we are working even more closely together to help you offer affordable and flexible health plan options. Molly Hebert (at left), formerly a sales executive at FCHP, now works in that capacity with UltraBenefits and is our on-site liaison with the TPA. She is working full-time with our account managers and sales executives to help employers and brokers understand and take advantage of the benefits of such funding alternatives as HRAs and FSAs.

"We know many employers are turning to higher-deductible plans to manage their health care costs, but also want to minimize the impact on their employees," Molly noted. "A great way to do this is to introduce either a Health Reimbursement Account, which an employer partially funds, or a Flexible Spending Account, which gives employees a tax break."

Molly added, "And, now, any FSA started through UltraBenefits uses Benny™, the Prepaid Benefits Card—which works like a debit card—to access the FSA funds, making the process faster, easier and more convenient than ever."

"Employers enjoy the benefits of bundling their medical, HRA and FSA administration into one resource in FCHP's integration with UltraBenefits," Molly continued. "Also, reimbursement is easy with our direct claims feed, so there's little or no paperwork for either employer or employee. It's a great solution."

A **Health Reimbursement Arrangement (HRA)** allows employers to fund an account for their employees to reimburse certain qualified medical expenses on a tax-free basis. When combined with a high-deductible health plan, an HRA can save employers a significant amount of money on their employee benefit plans.

A health care **Flexible Spending Account (FSA)** can be offered in conjunction with any FCHP plan design option. An FSA is funded by the employee on a tax-free basis through payroll deduction.

For more information about how you can benefit from FCHP's UltraBenefits partnership, contact your account manager at 1-800-333-2535. ■

## Caregiver solutions from FCHP

It is likely, according to recent statistics from the Family Caregiver Alliance, that one-quarter to one-third of your workforce is currently providing, or has recently provided, care to someone 65 and older—and that number keeps rising.

On top of the emotional and physical toll on employees, U.S. companies are losing billions of dollars due to workers coming in late, leaving early, taking time off during the day, spending work time on eldercare matters, or simply quitting to focus full-time on caregiving. That equals \$2,110 for every caregiving employee.

The dependent care crisis is clearly more than just a personal issue—it's also a personnel issue.

Fallon Community Health Plan has several programs that, individually or together, can present a real solution for our caregivers—and for your business. FCHP has been offering Medicare Advantage plans for more than 30 years, and today more than 25,000 individuals get the coordinated care they need from Fallon Senior Plan™.

But for people who need more customized solutions, FCHP has several options that can assist your employees who are providing care and support for an older loved one. These include:

**Summit ElderCare®**, our Program of All-inclusive Care for the Elderly for people 55 and older, which offers coordinated medical, insurance and social supports all in one comprehensive program.

**NaviCare®**, our Senior Care Options program for people 65 and older, which combines all benefits and services that are covered by Medicare and MassHealth Standard into one program (includes Medicare prescription drug coverage), with an assigned Navigator to coordinate services.

**Home Staff, LLC**, our joint venture with VNA Care Network & Hospice, which provides personal care, Alzheimer's assistance, hospice, respite care and specialized companion services from three locations in Massachusetts.

We will update you on these programs in future issues of *Employer Edge*. You'll find more information immediately at [fchp.org/about-fchp/senior-care-services.aspx](http://fchp.org/about-fchp/senior-care-services.aspx). We hope you'll share this information with your employees. Feel free to call your account manager, at 1-800-333-2535, to learn more about how we can help. ■

## Reminding PPO members about prior review and authorization of services

To ensure the quality and affordability of our health care services, FCHP continually conducts medical management, a process of reviewing the use of covered benefits to determine medical necessity and appropriateness of care. Part of this process is prior authorization review.

We are reminding our Fallon Preferred Care PPO and Fallon Senior Plan Premier Preferred PPO members that certain services (e.g., inpatient admissions and outpatient surgery) require prior authorization—whether or not they are obtained from providers who are in our network (For a complete list of services requiring prior authorization, members should review their *Evidence of Coverage* and applicable amendments).

It is the Fallon Preferred Care PPO member's responsibility to ensure that services are authorized in advance by calling the appropriate medical management office at least five days before receiving the service. If services are not reviewed and approved, then the Fallon Preferred Care PPO member will be responsible for charges in addition to any deductible, copayments or coinsurance amounts, and these charges won't apply toward any out-of-pocket maximum.

For Fallon Senior Plan Premier Preferred PPO members, it is the provider's responsibility to obtain prior authorization. (However, we do strongly recommend that the member ensures the provider requests

## Medicare Secondary Payer: What you need to know

Medicare Secondary Payer (MSP) is the term used by Medicare when Medicare is not responsible for paying first.

We work with the Centers for Medicare & Medicaid Services (CMS) to update their records to confirm when Medicare is a primary payer and when it is a secondary payer. However, situations may arise in which our records do not match.

For example, if you have an employee who has Medicare, but who also has FCHP coverage under your group contract, FCHP would be the primary payer and Medicare secondary. If that employee shows his/her Medicare card, rather than the FCHP I.D. card, at the doctor's office, the doctor may bill Medicare directly. If Medicare discovers they have been billed incorrectly as primary versus secondary payer, they will look to recoup the claims dollars they paid out.

If this happens, you may receive a "Medicare Secondary Payer Recovery Demand Letter Package" from CMS. They also send a copy of the package directly to FCHP. We begin work on the issue immediately, and our team will work with you to file the appropriate paperwork and will take care of any required payments to CMS. While this can be a lengthy process, and we will require your assistance in filling out and filing the appropriate CMS forms, we'll manage the response to CMS every step of the way. You won't be responsible for any payments.

If you receive a Medicare Secondary Payer Recovery Demand Letter Package from CMS, contact Nancy Gauvin at FCHP directly at 1-508-368-9204, or send an e-mail to [nancy.gauvin@fchp.org](mailto:nancy.gauvin@fchp.org). As always, if you have questions, you may call your account manager at 1-800-333-2535. ■

the authorization). If the services are not reviewed and approved, then the provider will be liable for the cost of the services received.

Also, if FCHP determines that care received without prior authorization was not a covered benefit or did not meet medical necessity criteria, we will deny the claim. Both Fallon Preferred Care and Fallon Senior Plan Premier Preferred PPO members will be responsible for paying the provider

out-of-pocket for the care received. As we re-emphasize our standard medical management policy, we are encouraging our members to review their *Member Handbook/Evidence of Coverage* for additional details. (Members may download a copy by registering/logging in to the My FCHP member portal from [fchp.org/members.aspx](http://fchp.org/members.aspx).) If you have questions about out medical management process, please call your account manager at 1-800-333-2535. ■



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For information about products or programs, ask for your account manager at 1-800-333-2535.

