Wellness – Goals to Strive For and Programs Available to You

Wellness is the term du jour in the health care industry and many companies have sprung up to satisfy a growing demand for these services. In 2006, wellness was a $550 million business according to a 2006 American Journal of Health Promotion study, and the journal’s editor-in-chief estimates that it has grown to over $1 billion today. Through your GIC health plan, you have access to a variety of wellness programs. With as much as 87.5% of health care costs related to an individual’s lifestyle (2006 Indiana University-Purdue University Study), improving our lifestyle choices will have a direct effect on health care costs and our own health and well being. We encourage you to take advantage of these programs.

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Wellness Programs Offered by GIC Health Plans

All health plans offer online resources for information on nutrition, weight management, fitness tips, smoking cessation and stress management. Contact your health plan for additional details on the below programs. Note that some of these programs are not available to Medicare members; contact the health plan for details.

<table>
<thead>
<tr>
<th>Wellness Plan</th>
<th>Nutrition</th>
<th>Weight Management and Fitness</th>
<th>Smoking Cessation</th>
<th>Stress Management</th>
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</thead>
<tbody>
<tr>
<td>Fallon Community Health Plan</td>
<td>Online nutritional tools</td>
<td>It Fits! Reimbursement of $200 per individual and $400 per family for gym memberships, health and fitness classes, sports and Weight Watchers® programs</td>
<td>Quit to Win health plan service area community-based group programs; telephonic counseling; and discounted nicotine replacement therapies</td>
<td>Discounts on relaxation and massage therapies</td>
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<tr>
<td>Harvard Pilgrim Health Care</td>
<td>Community and hospital-based nutritional classes.</td>
<td>25%-50% discount for weight management programs, including diet.com, the DASH diet, Weight Watchers® and Jenny Craig</td>
<td>18% discount on QuitSmart – includes guidebook, hypnosis CD, and a cigarette substitute</td>
<td>Community and hospital-based programs, including massage therapy, mindfulness, stress management, and relaxation techniques</td>
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<tr>
<td>Health New England</td>
<td>Virtual grocery store tour DVD</td>
<td>Reimbursement of up to $150 for gym memberships, personal trainer fees, school/town sports, and wellness classes as well as discounts at participating gyms</td>
<td>Reimbursement of up to $50 per participant for smoke cessation classes</td>
<td>Reimbursement of up to $150 per family for Pilates and yoga classes</td>
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<tr>
<td>Neighborhood Health Plan</td>
<td>Online nutritional tools</td>
<td>Reimbursement of $150/subscriber and up to $300/family for gym memberships</td>
<td>Free telephonic counseling and generic nicotine replacement therapies with a prescription</td>
<td>Online library and planning tools</td>
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<tr>
<td>Tufts Health Plan</td>
<td>25% discounts for network dietician and nutritionist programs; nutritional counseling for certain medical conditions</td>
<td>Discounts for weight management programs including Weight Watchers® and gyms; reimbursement of up to $150 for gym memberships</td>
<td>30% discount at hospital-based smoke cessation workshops</td>
<td>Discounts on relaxation therapies and massage therapies</td>
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<tr>
<td>UniCare</td>
<td>Online library and tracking program</td>
<td>Discounts for gyms in the Global Fit network, discounts for Jenny Craig and online Weight Watchers®; Online information and discounts on online personal coaching</td>
<td>Discounts on on-line personal coaching</td>
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</tr>
</tbody>
</table>
College students applying for this year’s $2,500 Tufts Scholarship awards were asked to provide suggestions for employers and health plans to promote healthy weight and to maintain it over time. Emmett Fitzpatrick, one of the two winners, suggested that employers create and support healthy lifestyle programs, such as health risk assessments and community-based health and wellness programs, to help tackle obesity. He also is in favor of incentives, such as lower health insurance premiums for making major health lifestyle choices like quitting smoking or biking to work instead of driving. Emmett is pursuing a Neuroscience major and Microbiology minor at the University of Massachusetts Amherst. He is the son of Matthew Fitzpatrick from the Department of Environmental Protection.

Katherine Murphy, the second scholarship recipient, who is pursuing a career in nursing at Endicott College in Beverly, Massachusetts, suggested that reimbursements be offered for going to certain diet organizations and fitness centers. She also suggested that nutrition, smoking cessation and stress relief programs be offered at worksites. Katherine is the daughter of Thomas Murphy from the Massachusetts State Police.

When you think of wellness, you think of the opposite of sickness – a very good thing. But what exactly does wellness mean? Merriam-Webster’s dictionary defines wellness as the quality or state of being in good health, especially as an actively sought goal. Some of these goals can include proper nutrition, controlling weight, getting exercise, not smoking, and reducing stress. A survey of North Carolina Department of Health and Human Services employees found that approximately 70 cents of every health care dollar was spent to treat employees who had one or more chronic conditions. Two thirds of these chronic conditions can be attributed at least in part to one or more of three major lifestyle risk factors: physical inactivity, poor diet, and tobacco use.

See page 2 for the wellness programs for each health plan. Contact your health plan for details (see page 7 for contact information).

GIC Executive Director Elected as Chair of the Board of NCQA

The GIC’s Executive Director, Dolores L. Mitchell, was recently elected to a two-year term as the Chair of the Board of Directors for the National Committee for Quality Assurance (NCQA), the accrediting organization for managed care plans, physicians and medical homes.

Congratulations to Dolores!
Just like the Cheers bar, suppose there was a medical practice where everybody knew your name. In Western Massachusetts, Health New England (HNE) is trying to get medical practice right. Over the past two years HNE has embarked on transitioning its HMO members to Patient Centered Medical Home (PCMH) services. Currently more than 7,500 GIC members receive care in PCMHs in the Springfield, Northampton and Amherst areas.

So, what is different? We have paid attention to access to care, patient satisfaction and the overall cost of care. Primary care physicians are engaged and want to know what services their patients are using, such as emergency services. Our PCPs are demanding better communication from specialists, and more importantly, from our hospitals. And the biggest change we have seen is that our PCPs want to know how much the services they order cost. In the past most PCPs never asked about the cost. They were always surprised when told, for example, an ER visit costs $1,000, or a CT scan, $500.

What is next? We know HNE has to change. We need to supply more relevant and actionable data on a regular basis to the medical home practices. We have to push the hospitals towards cost transparency. You may have heard that there is a companion to the medical home and that is the Medical Neighborhood (the specialists and hospitals with whom primary care physicians work). Our specialists are in that neighborhood, but only if they cooperate with the PCPs. Some specialists in our network are beginning to have office hours at the PCP practices. They are providing timely and relevant consultations without taking over the care. This has led to better coordination of services and better reconciliation of what is ordered, particularly medications.

What about patients? We’re not ready to claim that every patient’s experience is better because of the medical home model, but our members are beginning to see some positive differences. They are beginning to work with care managers who are working in the medical practices. The practices are reaching out to patients regularly around preventive services and care follow-up. And when patients call they get in to see their physicians sooner and at more convenient times. We have measured access and patient satisfaction in medical homes compared to other practices. Access for routine care is better and patient satisfaction is higher.

The transformation in the medical practice is a journey and it will take time to get it right. We at HNE believe that this is the most important innovation in care delivery in our company’s 25 year history.

Dr. Thomas Ebert is the Chief Medical Officer for Health New England and has been in this position for the past 12 years. Previously, he worked for Pilgrim and Harvard Pilgrim Health Care. Prior to this, he practiced nephrology for twenty years at Worcester Memorial Hospital.
Q) I was just hired to work for the state and used to work for the state before. What premium contribution will I pay for basic life and health insurance?

A) If you were hired by the state before July 1, 2003, and have been rehired within two years of your termination date, you pay 20%. If you return to work with the state more than two years from the termination date, you pay 25%. For other scenarios, please visit the answers to common questions-employment status change section of our website.

Q) I have GIC health insurance as a surviving spouse. When does my coverage end?

A) Survivor health insurance coverage ends when you stop paying your premiums, remarry, or die, whichever occurs first.

For answers to what to do when changes occur in your life that may affect your GIC coverage, see the Answers to Frequently Asked Questions section of our website: www.mass.gov/gic.

For a Flu Shot – Doctor’s Office and Retail Clinics Avoids Hassles of Claims Reimbursement

Flu season is underway and the Centers for Disease Control recommends that most people get a flu vaccination. Members can receive a flu vaccination with no copay or deductible when it is administered at a doctor’s office or a limited service retail clinic, such as CVS Minute Clinic. These medical providers can bill your health plan directly for vaccination services; you will have no out-of-pocket costs and no need to submit a claim form for reimbursement from your health plan.

Although many pharmacies now are offering flu shot vaccinations, please be aware of the following:

- Except for Neighborhood Health Plan, pharmacies cannot bill GIC health plans for flu vaccinations. Members of other GIC plans, contact your health plan to see how you can obtain reimbursement by submitting your receipt to the health plan.
- Medicare members: Some pharmacies can bill Medicare Part B (not your health plan) directly for members who show the pharmacy their Medicare card (not their health plan card). This does not apply, however, to members of Fallon Senior Plan and Tufts Health Plan Medicare Preferred.

Lipitor® Now Available As Generic At Lower Cost to You

Lipitor®, the best-selling drug in the world, became available as a generic at the end of November. If you are among the 8.7 million Americans who take this cholesterol-lowering drug, you will now save money on your prescription since the copayment for generic Lipitor will, in almost all cases, be less than your copayment for brand Lipitor. And, most current prescriptions for Lipitor will automatically be dispensed with the generic the next time the prescription is refilled.

The generic version of Lipitor is called atorvastatin, the chemical name of Lipitor. Food and Drug Administration (FDA)-approved generic drugs are made with the same active ingredient as their brand name versions, and their dosage, strength, performance and intended use must also match the brand name drug. The generic manufacturing and packaging sites must pass the same quality standards as well. The color, shape and some inactive ingredients in atorvastatin might be different than the brand.

All of the GIC’s health plans are making generic Lipitor (atorvastatin) available at either the Tier 1 or Tier 2 copayment, lower than the Tier 3 copayment most members have been paying for the brand. Coverage for the brand version of Lipitor now will be limited in many cases. Depending upon the health plan, the brand may not be covered at all, except on an exception basis. Prior authorization programs may apply, or members approved for the drug may have to pay the cost difference between the brand and generic drugs, plus the generic copayment. Contact your plan for details (see page 7 for contact information).

The GIC’s Annual Public Hearing

Wednesday, February 1, 2012
12:30 p.m. - 2:30 p.m.

Minihan Hall, 6th Floor
Charles F. Hurley Building
19 Staniford Street, Boston, MA 02114

All GIC-eligible employees and retirees are welcome to attend our annual public hearing. The GIC will describe benefit and premium prospects for FY13, and all attendees are invited to provide feedback.
Every year, the GIC sends each GIC member a customized overview of the benefits you have with the GIC and whom you cover. This statement and the enclosed change form help you make sure your records are up-to-date. Incorrect data can lead to delays in receiving important information, such as what to do when you turn age 65. And, if you fail to report a divorce or remarriage to the GIC, your former spouse may lose coverage retroactively, and the GIC and your health plan have the right to seek recovery of health claims paid or premiums owed for your former spouse. Don’t let this happen to you: be sure your records are up to date, especially before annual enrollment begins!

Benefit statements will be mailed to all members with coverage as of January 1, 2012, including new municipal members who joined during the fall. When you receive your benefit statement, review it carefully to see if there are any errors:

❖ Spelling of your name and covered dependents;
❖ Dates of birth;
❖ Marital status of you, and if applicable, your former spouse;
❖ Status of your covered dependents;
❖ Life insurance beneficiary (state employees and retirees only); and
❖ Home address

Forms and instructions to make changes are enclosed with the mailing. **If everything is correct on the benefit statement, you do not need to do anything except file it with your important papers.** Do not mail it back to the GIC; it’s the only statement you will receive during the year and only one copy is produced.

**State Employees – Beneficiary Details for Retirement Purposes**

If you are an active state employee and participate in the State Retirement Board’s (SRB) retiree benefits, the back of your GIC benefit statement will include SRB beneficiary information. Your SRB beneficiary receives certain pension benefits as well as payment of any unused vacation and sick time owed in the event that you die while still in active state service and before your retirement. Keep in mind that separate beneficiary records are maintained by the SRB for these purposes; your GIC beneficiary is listed on the front of the statement is the person (or people) who receive life insurance benefits in the event of your death. A return envelope and a SRB beneficiary form is enclosed in the mailing in the event you wish to update or correct your SRB beneficiary.

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**Feeling Blue?**

**Extra Help is Available Online to All Employees and Their Dependents Through December 31, 2012**

If you or a member of your family may be feeling depressed, extra help is available through the Tufts Medical Center’s Tufts Work and Health Initiative. The website features a confidential online survey; survey participants may be eligible to take part in a national health study, which offers additional health services at no cost to you.

This free online resource is available to all employees, regardless of GIC health plan. Each person completing the web-based screening will receive immediate personalized feedback about their mental and functional health, as well as recommendations for health improvement. Employees completing the survey will also be entered into a lottery to win a $50 cash prize awarded monthly. Based on your screening, if you are eligible for additional services, you will also be entered into a bi-monthly lottery to receive $100 cash incentives. **For additional information and to take advantage of this online tool, visit:  https://www.workhealthily.org/5293.**
Welcome new municipalities! This fall, the GIC welcomed five new municipalities. The cities of Medford and Somerville and the towns of Arlington, Lynnfield and Wakefield all joined after this year’s budget gave municipalities expedited entry options into the GIC during this fiscal year.

Laurie Riley, Benefits Manager for the Town of Wakefield (left), answers a Wakefield retiree’s questions at the regional GIC health fair. Steve Maio, the Town Administrator, stands in the background.

The GIC’s Assistant Director of Operations, Donna Wortman, collected enrollment forms and documentation at the health fair held at the City of Medford High School.

Sarah Kloos, Director of Personnel for the City of Somerville, waited to help Somerville members at the regional GIC health fair.
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➤ Wellness Programs Offered by GIC Health Plans
➤ Medical Homes are Changing Health Care - What You will See
➤ Annual Benefit Statements Mailed by Beginning of February

Accolades Pour in for the GIC’s Health Plans
Congratulations GIC Health Plans!

The GIC and our members are fortunate to have some of the best health plans in the United States. Our plans have received multiple awards this year and the following are just a few of some of the more notable ones:

NCQA Awards
The National Committee for Quality Assurance’s (NCQA) is the accrediting organization for managed care plans, physicians and medical homes. Their 2011-2012 rankings were based on performance on dozens of measures encompassing consumer satisfaction, treatment, and prevention. NCQA accreditation was also factored in. For the first time, the rankings included PPO Plans: the GIC’s Tufts Navigator and Harvard Pilgrim Independence Plans are included in the PPO rankings.

Commercial Health Plans
#1 Harvard Pilgrim Health Care (HMO/POS) for the eighth consecutive year
#2 Tufts Associated Health Maintenance Organization (HMO/POS)
#4 Tufts Health Plan (PPO)
#9 Harvard Pilgrim Health Care (PPO)

#10 Health New England (HMO/POS)
#13 Fallon Community Health Plan (HMO/POS)

Medicare Plans
#8 Tufts Associated Health Maintenance Organization (HMO)
#12 Fallon Community Health Plan

These rankings appeared in the November 2011 issue of Consumer Reports and are also available on Consumer Report’s website, www.ConsumerReports.org/health.

Calendar Year 2011 Medicare Award
The Center for Medicare and Medicaid rates all Medicare Advantage Plans for keeping members healthy, managing chronic conditions, member satisfaction and customer service. Health New England’s Medicare Advantage Plan earned the only five-star overall plan rating, the highest award given. For additional details, visit www.medicare.gov.

Congratulations to the GIC’s Health Plans!