The GIC’s Annual Enrollment is April 10 – May 8, 2013
What Does This Mean for You?

Annual enrollment will soon be here, giving you the opportunity to review your benefit choices and make changes if you desire. If you want to keep your current GIC health plan - and you have checked to see that it does not have any significant changes in providers or benefits and that it’s still offered - you do not need to fill out any paperwork; your coverage will continue automatically. Keep in mind that once you choose a health plan, you cannot change plans until the next spring annual enrollment even if your doctor or hospital leaves the plan. You can only switch plans mid-year in very limited circumstances, such as moving out of the plan’s service area or you retire and become eligible for Medicare (in which case, you must change plans). Here are some tips for getting the most out of annual enrollment:

❖ Read your 2013-2014 GIC Benefit Decision Guide: this will give you an overview of benefit, rate, and health plan option changes. Guides are delivered to employees’ worksites and are mailed to retiree and survivor homes; they will also be on the GIC’s website before annual enrollment begins: www.mass.gov/gic/bdgs.

❖ You must live in a health plan’s service area to join: refer to the easy-to-read map in your Guide to find out which GIC health plans are in your area.

❖ Consider Limited Network Plans, which offer great value and quality coverage: limited network plans have lower monthly premiums than wide network plans – generally 20% less expensive - because there are fewer participating doctors and/or hospitals in these plans. Remember that for most Limited Network Plans, except for emergency care, there are no out-of-network benefits!

❖ Be sure to check whether your own and your covered spouse’s and children’s doctors participate in the plan;

❖ Find out if your doctors’ affiliated hospitals are in the plan; and

❖ Keep in mind that if a doctor or hospital leaves your plan’s network, you will need to pick a new doctor or hospital in the plan in order to have coverage.

❖ State enrollees, don’t forget to review the other GIC benefit options that you may be eligible for: life insurance, long term disability, the buyout program, dental and vision.

❖ Mark your calendar for May 8, 2013: all annual enrollment elections are due no later than Wednesday, May 8, 2013.
The GIC’s Health Plans Rank Top in Nation

GIC members enjoy access to some of the best health plans in the country. The National Committee for Quality Assurance (NCQA), the non-profit health care accreditation and quality measurement group, rated over 980 of the country’s health plans based on quality of care, customer satisfaction, and commitment to improvement and disclosure of information. Here’s where the GIC’s health plans ranked in 2012:

Top Health Insurance Plans
#1 Harvard Pilgrim Health Care HMO/POS – includes Harvard Pilgrim Primary Choice Plan
#2 Tufts Associated Health Maintenance Organization HMO/POS – includes Tufts Health Plan Spirit
#4 Tufts Benefit Administrators PPO (#1 of PPO plans) – includes Tufts Health Plan Navigator
#5 Harvard Pilgrim Health Care PPO – includes Harvard Pilgrim Independence Plan
#11 Health New England HMO/POS – includes GIC Plan
#33 Fallon Community Health Plan – includes Select Care and Direct Care
#66 Neighborhood Health Plan – includes NHP Care

Note that NCQA ranking applies to HMO and PPO products only; the GIC’s UniCare plans are indemnity plans and therefore are not ranked by NCQA.

Top Medicare Health Insurance Plans
#8 Fallon Community Health Plan HMO – includes Fallon Senior Plan

For additional information on how NCQA evaluates health plans and a complete listing of health plan rankings, see NCQA’s website at www.ncqa.org, the November 2012 issue of Consumer Reports magazine, on the Consumer Reports website at www.ConsumerReports.org/health.

Over 2,500 employees and retirees from the City of Peabody and the Town of Orange joined the GIC effective January 1, 2013. Ed Fenlon of UniCare answered questions for Carol A. Mandra, a Peabody employee, at one of the GIC’s health fairs.

More of Federal Health Care Reform to be Rolled Out in 2013

The Supreme Court upheld the constitutionality of federal health care reform last summer, and following the re-election of the president, additional guidance has been released on the next steps for federal health care reform. Here’s what you will see that’s new this year:

W-2 for 2012: If you are an employee of the state, or of an agency or municipality of at least 250 employees, you will see the value of your employer’s and your own contribution to health insurance coverage displayed in Box 12. This amount will continue to be excluded from an employee’s income and will not be taxed.

Summary of Benefits and Coverage: Before annual enrollment members will receive a new document for their existing plan called a Summary of Benefits and Coverage (SBC) if their plan will be offered the following year. This SBC provides a summary of the plans’ benefits, exclusions and cost-sharing requirements. Your GIC Benefit Decision Guide and the annual enrollment letter you receive at home will give you the location on our website where SBCs will be available for all of the GIC’s health plans.

Notice of Exchanges: Regulations requiring employers to explain health care exchange options to employees have not yet been released; we will send you more information when more details are known.

You will continue to enjoy federal health care reform benefits already in effect:
❖ Coverage of dependent children up to the age of 26 and;
❖ No cost sharing (copays and deductibles) for certain preventive care services, such as mammograms, scheduled immunizations, routine OB/GYN visits and physicals.

You will also receive a 1099-HC form from your health plan so you can report on your Massachusetts taxes that you have met the minimum health insurance requirements of the Massachusetts Health Care Reform Law.
GIC Retiree Dental Plan Will Get Even Better Next Year

The GIC’s popular Retiree Dental Plan will get even better beginning July 1, 2013. The annual maximum benefit will increase from $1,000 to $1,250 per member. Reimbursements to providers for the most common procedures, such as periodontal maintenance and a two-surface amalgam (silver tooth fillings), will increase, which means lower out-of-pocket costs for more than half of members. For the first time, dental implants will be covered.

Accompanying these benefit enhancements will be a modest premium increase of 3.4% and coverage frequency changes to match industry standards for certain preventive care services, such as crown and bridge replacements.

Details on program enhancements, changes and rates will be in the 2013-2014 GIC Benefit Decision Guide.

Retirees and survivors will receive their guide at the permanent address the GIC has on file; guides will also be posted on the GIC’s website before annual enrollment begins on April 10.

Commonwealth of Massachusetts retirees and survivors and GIC Retired Municipal Teachers (RMTs) are eligible for the GIC Retiree Plan. For the first time, municipalities can also offer this benefit to their retirees and survivors. The following municipalities have elected to offer the program effective July 1, 2013:

- Cities of Melrose, Peabody, and Pittsfield
- Towns of Bedford, Brookline, Holbrook, Holden, Hopedale, Millis, Randolph, and Saugus
- Athol-Royalston School District and Northeast Regional Technical School

New Year’s Resolution: Lose Weight

Now that the New Year is here, many of us would like to lose a few pounds. For many people, it’s so easy to put weight on, but it’s a lot harder to take it off. The Mayo Clinic (www.mayoclinic.com) recommends six strategies for successfully losing weight:

1. **Make the commitment:** It takes time and effort to lose weight. Be sure you’re ready to make permanent changes to stay focused and adjust your lifestyle.
2. **Find motivation:** Determine what you need to stay motivated and focused and consider finding people or a supportive group to help. If you want to do it on your own, keeping a journal of diet and exercise progress is helpful.
3. **Set realistic goals:** Target a weight loss of one or two pounds per week, which is the equivalent of burning 500 to 1,000 calories more than you consume through a lower calorie diet and exercise.
4. **Enjoy healthier food:** Eat more fruits, vegetables and whole grains and don’t skimp on breakfast.
5. **Get active and stay active:** Be sure regular exercise is part of your schedule and add activity to your everyday routines. Use the stairs instead of the elevator and park far away from a store instead of up close.
6. **Change your perspective:** Recognize habits that cause you to eat unhealthily and start adjusting these habits to make positive changes.

If you are a state employee or early retiree eligible for the WellMASS pilot program, be sure to take advantage of the six-week WellMASS Weight Loss Challenge. For more information, see the GIC’s website (www.mass.gov/gic).
Thinking About Retirement

❖ Visit or call your Retirement Board to find out about your pension options. State employees: The State Board of Retirement’s main office has moved to the 8th floor of One Winter Street in Boston. The regional office is located in Room 109A at 436 Dwight Street in Springfield.

❖ State employees: attend a Smart Retirement and Beyond Seminar for a comprehensive overview of retirement benefits from the State Retirement Board, the Deferred Compensation SMART Plan, and the GIC – see the SRB’s website for the schedule: www.mass.gov/retirement.

❖ Start saving so that you have a cushion between your final paycheck and your first pension benefit payment. State employees: First pension payments are generally 60-90 days after your retirement date. The first payment is retroactive to the retirement date and benefit payments are issued on the last business day of each month.

❖ Become familiar with your GIC health, life (state employees) and Retiree Dental options
  ✦ Visit the GIC’s website www.mass.gov/gic/faq to review the Answers to Frequently Asked Questions about retirement and Medicare. These sections outline what benefit options you have at retirement, how your GIC benefits work in conjunction with your pension, and what you need to know about Medicare and your GIC health benefits.
  ✦ Read the GIC Benefit Decision Guide on our website (www.mass.gov/gic/bdgs) or contact the GIC to have a Guide mailed to you to become familiar with your health plan options.
  ✦ Call or visit the GIC to discuss your options: 617-727-2310 ext. 6; 19 Staniford Street, 4th floor, Boston.

Ready for Retirement

Arrange for Your Pension

❖ Complete your Retirement Board’s retirement application and return it to your retirement board with any necessary documentation such as birth certificates and marriage license.

❖ If applicable, contact your Deferred Retirement Plan to file any necessary paperwork.

State employees: If you are applying for group classification, you can do so up to 12 months prior to your retirement date.

Take Care of Your Health, Life (State employees only) and Dental Insurance

❖ Meet with your Human Resources coordinator or manager to complete paperwork indicating your date of retirement, health, life (state employees only), and Retiree Dental elections (state retirees, RMTs, and participating municipalities only)

❖ Retiring state employees, carefully look at your optional life coverage. Rates increase dramatically at retirement and as you age, and you may want to consider canceling or reducing this coverage.

❖ If you and/or your spouse are age 65 or over, visit Social Security to find out about Medicare and sign up for Medicare Part B if eligible.

❖ If you and/or your spouse are age 65 or over and the GIC has been notified by your benefits office about your retirement, contact the GIC about your Medicare health plan options at 617-727-2310 ext. 6.

The GIC supported an area charitable organization for the fifteenth year this holiday season with staff purchasing gifts for children served by the Italian Home for Children. Melanie Lima, Director of Development for the organization, described how the home helps approximately 100 at-risk children ages 4 to 13 per day with a variety of behavioral and mental health concerns.
Governor Deval Patrick recently appointed four new Commissioners of the GIC. They join at a critical time and their diverse perspectives will be instrumental as the GIC undertakes the all-health plan procurement, implementation of Massachusetts health care cost containment and federal health care reform legislation, mental health benefit carve-out procurement, addition of new groups, and tackles ongoing concerns about rising health care costs and tight state budgets. Joining the Board are Eileen P. McAnneny, Director of Public Policy for Fidelity Investments; Melvin A. Kleckner, Town of Brookline Town Administrator; Edward A. Kelly, President of the Professional Fire Fighters of Massachusetts; and Timothy D. Sullivan, Ed.D, Vice President of the Massachusetts Teachers Association.

Eileen P. McAnneny fills one of the GIC’s public member seats. As Director of Public Policy for Fidelity Investments, she tracks and analyzes tax, health care and employment legislation in all fifty states. Before joining Fidelity in January, Ms. McAnneny was the Senior Vice President of Government Affairs and the Associate General Counsel for Associated Industries of Massachusetts, the state’s largest employer trade association. She held this position for thirteen years during which time she established the AIM Employer Advisory Group to develop health care policies and helped achieve business consensus on payment reform legislation. “As a long-time employer advocate, I can say unequivocally that health care purchasers are looking to increase the value of their health care spending and to make sure that their employees have access to high-quality, efficient and effective health care,” said Ms. McAnneny. “Using data, employers and employees can make informed decisions about the health care they purchase to better direct their money to the best providers, thereby improving the health care delivery system. The GIC’s health plan procurement aligns with these goals and should help move the Massachusetts health care delivery system forward.”

Melvin A. Kleckner fills one of the two Massachusetts Municipal Association seats on the Commission. Prior to becoming the Town Administrator of Brookline in 2010, he was the Winchester Town Manager for six years and before that, the Town Administrator of Belmont for 13 years. He has held several positions with the Massachusetts Interlocal Insurance Association (MIIA), which provides health insurance to many municipalities. “The new RFP for health plans represents an innovative and bold step for the GIC,” Mr. Kelckner said. “I support the efforts of our Executive Director in getting ahead of the requirements of the new health care reform law and compelling the carriers to become more creative in controlling costs. I will serve as a conduit to the Commission on the impacts of this new approach.”

Edward A. Kelly fills the new municipal public safety seat on the Commission. He became the President of the Professional Firefighters of Massachusetts in June of 2011, and at age 38 is the youngest member ever elected to that position. He is a fourth generation Boston Firefighter, working at Tower Ladder 17 in the Back Bay, and is a U.S. Air Force veteran. “Firefighters have unique health insurance needs given the danger we face with every call,” said Edward Kelly. “I look forward to working with my fellow Commissioners to ensure that Massachusetts health plans stay competitive and provide the best possible care to their members.”

Timothy P. Sullivan, Ed.D. fills the Commission’s Massachusetts Teachers Association seat and has been the Vice President of the MTA since 2010. Prior to this, he served as President and Vice President of the Brockton Education Association for a period of 16 years. A middle school reading teacher and computer lab manager, Dr. Sullivan taught in the Brockton Middle School from 1987 to 2006, with one year at a Brockton elementary school. “My goal is to ensure that the proper reforms are put in place so that GIC participants receive high-quality health care while providers must be encouraged to improve the delivery of care and contain costs through a variety of measures, such as early intervention and electronic medical records,” said Dr. Sullivan. “Any changes made should not facilitate shifting costs to employees.”

The GIC looks forward to working with our new Commissioners. Thank you also to Professor David Cutler for his many years of service on the Commission. Dr. Cutler is leaving to join the board of the Health Policy Commission, and we wish him well.
Personalized Benefit Statements Mailing to all GIC Members

What You Need to Do When You Receive It

As it has done since 1991, the GIC will mail each member a customized benefit statement at the end of January, giving you an overview of the benefits you have with the GIC and whom you cover. When you receive the statement, carefully review the following information to see if there are any errors:

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

If you are legally separated or divorced, it’s critical that you check to be sure your former spouse is listed as “F” (former spouse) and not “S” (spouse). If your former spouse is listed as a spouse, you must report the divorce using the included change form. If you fail to report a divorce or remarriage, your health plan and the GIC have the right to seek recovery of health claims paid or premiums owed for your former spouse, which can be extremely costly.

If you are a survivor of a covered state or municipal employee or retiree and remarry, you must notify the GIC of your remarriage. GIC health insurance coverage ends upon the remarriage of a covered survivor.

Part of the GIC’s ability to be able to offer affordable coverage is to only cover people who are eligible for coverage. The benefit statements are one way the GIC informs members about their continued eligibility. An easy-to-use change form and a return envelope are included for your convenience. Please remember to notify your GIC Benefit Coordinator (active employees) or the GIC (retirees and survivors) of any status changes, including family additions.

State Employees – State Board of Retirement Beneficiary Information

Active State employees who participate in the State Board of Retirement’s (SRB’s) retiree benefits will receive SRB beneficiary information on the back of their GIC benefit statement. Your SRB beneficiary is the person or persons who may receive certain pension benefits and payments of unused vacation or sick time owed should you die while in active state service and before retirement. Your SRB beneficiary may be different from your GIC beneficiary for life insurance benefits – be sure both beneficiaries are correct – the SRB and GIC are different agencies and maintain their own records of beneficiary details. A return envelope and a SRB beneficiary form will be included with your statement so you can correct your SRB beneficiary information if needed.

Tufts Scholarship Winners

College students applying for this year’s $2,500 Tufts Scholarship awards were asked to provide employer, health plan and provider strategies to mitigate rising health care costs. Mary Richards, one of the two winners, suggested that employers, health plans and providers support around nutrition and exercise programs and rewards to stem rising obesity rates and resulting health problems. Mary also suggested that health plans encourage the use of nurse practitioners and physician assistants for routine appointments and care to free up more expensive physicians for more involved care. She also suggested moving away from fee-for-service payment models to outcome-based treatment models. Mary is pursuing a biochemistry degree from Middlebury College in Middlebury, Vermont. She is the daughter of James Richards from the Department of Developmental Services.

Molly Bullard (not pictured), the second scholarship recipient, who is pursuing a career in nursing at Fairfield University in Fairfield, Connecticut, suggested that patients need to be more involved in understanding the total cost of health care. She states that providers have spent significant funds on elaborate hospital expansions, additional treatment facilities, and aggressive advertising campaigns, and their rates should be reduced. She says that health plans have paid out large sums in executive payouts and salaries to their Board of Directors and that they should re-evaluate their policies and salary structures. Molly is the daughter of Gordon Bullard who works for the Department of Revenue.
Keep in Mind…

Q) I am in a GIC Medicare plan. What are the consequences if I cancel or do not pay Medicare Part B?

A) If you cancel or do not pay Medicare Part B, the GIC is required to terminate your GIC health coverage. This would mean that you would only have Medicare Part A coverage for inpatient hospital care. You would no longer have coverage for:

- Physician office visits
- Prescription drugs
- Outpatient mental health/substance abuse care
- Outpatient surgery
- X-rays and diagnostic tests
- Hearing aids

If you wanted to later reinstate your Medicare Part B coverage, you would be subject to federal late enrollment penalties and would have to wait for Medicare’s enrollment period followed by the GIC’s annual enrollment period to get back into a GIC health plan. So, consider the consequences before you cancel or not pay Part B.

Q) What happens to my life insurance when I retire from state service?

A) When you retire, your basic life insurance continues. At retirement, you should review the amount and cost of your optional life insurance coverage to determine whether it makes economic sense for you to keep it: optional life insurance rates increase substantially when you retire and as you age. You may maintain, reduce or cancel, but not increase, your optional life coverage at retirement (or at any time thereafter). To do so, complete the GIC’s Form-1 (available on the GIC’s website) and send it to the GIC, or put your request in writing and mail it to the GIC, P.O. Box 8747, Boston, MA 02114-8747. On your written request, be sure to include your name, address, and GIC ID number.

Q) If I (the insured) remarry, can I remove my former spouse from my GIC health coverage?

A) If you or your legally separated or divorced spouse remarries, coverage for the legally separated or divorced spouse ends under your family plan, in accordance with state laws. This is true even if your new spouse does not need or want GIC health coverage. Failure to report a remarriage in a timely manner may result in financial liabilities. Depending on language in the divorce agreement, the former spouse may be eligible as an individual for a divorced spouse rider or COBRA coverage. Alternately, if he or she is a Massachusetts resident, he/she may purchase health insurance from the Health Connector (www.mahealthconnector.org; 1-877-623-6765).
Eighty-Three Percent of Massachusetts Hospitals Earn “A” Rating on 2012 Leapfrog Safety Scores

An outstanding 83% of Massachusetts hospitals earned an “A” rating on the fall 2012 Leapfrog hospital safety scores, while only 30% did so nationally. These scores rank hospitals in their ability to reduce infections, injuries, and medical and medication errors. The Leapfrog Group is a national, independent not-for-profit organization of employer purchasers of health care, including the GIC and the nation’s leading experts on patient safety. These scores highlight the country’s safest hospitals and warn against those with unacceptable safety records. Massachusetts has the highest percentage of A-rated hospitals in the country.

The Leapfrog Group uses 26 measures of safety to calculate a safety grade for all eligible hospitals in the U.S. Some of the measures compared include the number of central line-associated bloodstream infections, death from serious treatable complications after surgery, foreign objects left in the body after surgery, computerized prescription ordering, and patients receiving the correct antibiotic.

Congratulations to the following Massachusetts hospitals for receiving a Top Leapfrog Hospital Award for meeting Leapfrog’s elite quality and resource use standards and an “A” Hospital Safety Score:
- Baystate Medical Center
- Beth Israel Deaconess Medical Center
- Boston Medical Center
- Brigham and Women’s Hospital
- Boston Children’s Hospital (in the Children’s Hospital category)
- Fairview Hospital (in the Rural Hospital category)
- Sturdy Memorial Hospital
- Cooley Dickinson Hospital

See Leapfrog’s website (www.leapfroggroup.org) to learn more about the measures used and to find out rankings for all U.S. hospitals.