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Group Insurance Commission

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GROUP INSURANCE COMMISSION

Providing State and Participating
Community Employees, Retirees, and
Their Dependents with Access to Quality
Care at Reasonable Costs

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The GIC Welcomes the MBTA's
Carmen's Union Local 589, Towns of
East Bridgewater, Framingham, and
Middleborough Effective
July 1, 2014

- The GIC's Membership Grows to Almost 435,000 Covered People
- See Inside for Photos from This Year's GIC Health Fairs



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Commission's Newest Members Encourage Members to Become Engaged in Their Health Care

The Commission's two newest members both encourage members to be engaged in their health care. "Patients should play an active role by demanding more information and options that would allow them to make the most informed health care decisions," says Jean Yang, who filled the open Public Member seat. "An educated consumer is always the one who walks away with the better deal and this is no less true for health care," says Margaret A. Thompson, who is the new Local 5000, SEIU, NAGE, member, filling the seat held by long-time Commissioner Stephen A. Chandler.



GIC Commissioner Jean Yang

Commissioner Yang is the Executive Director of the Massachusetts Health Connector. Prior to her promotion to this position over a year ago, she was the Chief Financial Officer, holding that position for almost three years. She directed Tufts Health Plan's contracting strategy prior to her work at the Connector and also worked for consulting firms Deloitte and McKinsey & Company. "Patients need to behave more like consumers and to actively look for a bargain and use tools and mechanisms that make the process easier for them," says Ms. Yang.



GIC Commissioner Margaret A.
Thompson, Local 5000, SEIU,
NAGE

Commissioner Thompson has served as the National Association of Government Employees (NAGE)'s President of Local 229 since 2009. She has worked for the Commonwealth as a Probation Officer II since 1998 and previously worked for the Commonwealth of Virginia's Department of Corrections as a Probation and Parole Officer. "By being fully aware of your health plan and special cost saving incentives, you will be in a stronger position to make informed decisions when shopping for health care services and choosing a provider," says Ms. Thompson.

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The Case for Community Hospitals

*Guest Editorial by Steve Walsh, Executive Director of the
Massachusetts Council of Community Hospitals*

In 2012, the Massachusetts Legislature passed Chapter 224, our state's health care payment reform law. This legislation set a statutory requirement that the health care industry's growth must not exceed our gross state product. However, an informed health care consumer is an equally integral part of bending the health care cost curve. It's important that patients take control of their own personal health, and part of what makes for a healthy and informed consumer is knowing where to receive the most high-quality, low-cost care. That's where the role of Massachusetts' community hospitals is most important.

We are fortunate that Massachusetts is home to arguably the best teaching hospitals in the world. But, it is our community hospitals that are the backbone of our hospital system, providing high-quality health care in our own backyards. These facilities care for a greater percentage of patients with public insurance (Medicare and Medicaid) and their emergency departments are often the first line of defense in an urgent care situation. Community hospitals are a part of the fabric of our neighborhoods, driving our local economies and employing our families and friends. It should be no surprise that four community hospitals were named 2014 Best Places to Work by the *Boston Business Journal*.

The Healthcare Equality and Affordability League's 2014 study found that "patient migration" to higher-cost

providers and teaching hospitals is helping to drive up premiums for commercially insured individuals and families. These higher-cost hospitals are paid much higher rates than community hospitals for the same medical procedures, with no significant difference in quality according to the June 2011 Attorney General report on health care cost trends and drivers.



*Steve Walsh, Executive Director
of the Massachusetts Council of
Community Hospitals*

Unnecessary use of these higher-cost providers increases total medical expenses across the system, driving up health care costs for everyone. Not only do consumers pay more in premiums and co-pays, but we perpetuate a cycle that keeps community hospitals at a financial disadvantage. The recent challenges of North Adams Regional Hospital is an example of how a community hospital shutting its doors can disrupt a local economy and leave a large region without the comprehensive medical services it so requires.

Do not take your local community hospital for granted. The lesson is simple: use it, or risk losing it. Our health care system, and your health, depend on it.

Steve Walsh is a former legislator and current Executive Director of the Massachusetts Council of Community Hospitals. He served as House Chairman of the Committee on Health Care Financing and was a primary author of Chapter 224 of the Acts of 2012, Health Care Payment Reform. He currently resides with his family in Lynn.

Centered Care: Four of Ten Key Elements High-Quality, Low Cost Providers Encouraged

As the GIC moves Massachusetts' health care marketplace toward new ways of getting and paying for care through the Centered Care Initiative, we are highlighting how this affects employees and non Medicare retirees. In the winter issue of the newsletter, we outlined three of Centered Care's ten key elements:

- ❖ Primary Care Provider (PCP) identification
- ❖ PCP engagement
- ❖ Data sharing

centered  care

The fourth element relates to this issue's guest editorial: high-quality, low cost providers are encouraged. As a GIC health plan member, you have incentives for choosing low cost, high quality specialists and hospitals. Our PPOs tier hospitals based on quality and/or cost and many of the Tier 1 lower copay hospitals are local community hospitals. Your PCP and health plan will help you find the appropriate specialists and hospitals for your health care needs.

Signs of Drug Abuse and Resources Available to Help

The prevalence of teen and young adult drug abuse has been increasing at alarming rates. Pharmaceutical opioid abuse is the driving factor behind a tripling over the last three decades in the number of drug overdoses, according to the Centers for Disease Control and Prevention. Pharmaceutical opioid abusers often switch from prescription medications to heroin due to its lower cost and greater strength.

Opioids, a class of drugs derived naturally or synthetically from the opium poppy, depress breathing. Overdoses occur when opioid concentrations are so high in the body that they begin to cause respiratory distress. The Centers report that as many as 20 percent of American teens have abused prescription drugs. About half of U.S. high school teenagers say that narcotic drugs other than heroin would be easy to get, according to a 2012 National Institute on Drug Abuse survey. This same survey found that nearly 1 in 12 high school teenagers reported nonmedical use of Vicodin and 1 in 20 reported abuse of OxyContin.

As a parent, you hope your child does not become one of these statistics, but the predatory lure of drugs is pervasive. “Establishing open communication with your teen or young adult is critical,” said Donna Moores, M.D., Massachusetts Medical Director for Beacon Health Strategies. The National Crime Prevention Council recommends getting involved in your children’s lives, spending time with them doing activities they want to do; making clear rules and consistently enforcing them; being a positive role model; and talking to your children about drugs and how to handle social pressures to use drugs.

Be on alert for these potential signs of drug abuse in your teen or young adult:

- ❖ Marked changes in attitude, loss of interest in going to school, a drop in grades, and attendance issues
- ❖ Socializing less with friends or losing friends
- ❖ Falling asleep at odd times during the day or nodding out at dinner
- ❖ Spending more money than typical
- ❖ Red eyes, weight loss or weight gain, and skin abscesses or bruises

Also pay attention if you’re missing:

- ❖ Items of value in your house
- ❖ Prescription medications

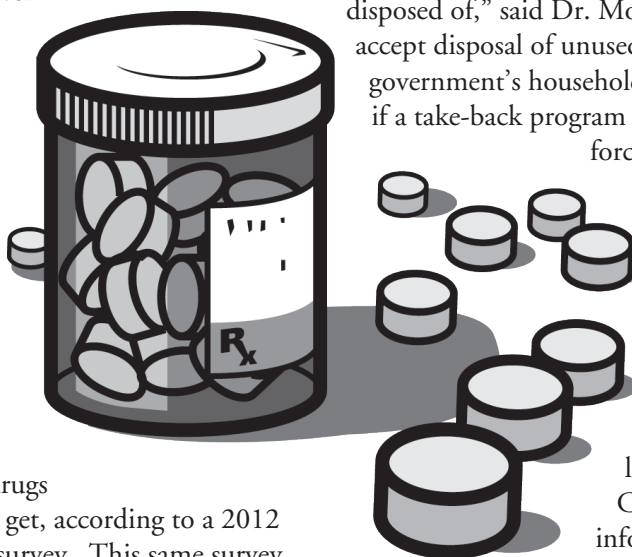
If you are concerned about opioid abuse, check medications in your home to be sure they are locked up or properly disposed of,” said Dr. Moores. Many police departments accept disposal of unused drugs. Contact your city or town government’s household trash and recycling service to see if a take-back program is offered and visit the Drug Enforcement Administration’s website for

drug take-back day details: www.deadiversion.usdoj.gov. If you want to dispose of the drugs on your own and don’t have the disposal instructions, take the medications out of their original containers, mix them with unused coffee grounds or kitty litter, and place in a sealable bag.

Conceal or remove any personal information, including the Rx number, on the empty container by covering it with permanent marker or duct tape, or by scratching it off, before discarding the container and sealed bag in the trash.

If you suspect that your teen or young adult is abusing drugs, get help. Take advantage of resources available through your child’s school, college, or primary care doctor. You may need to enlist additional help from your child’s guidance department, clergy, or coach to get your child into treatment. Contact your health plan or mental health carrier to get the right treatment (*see page 7*).

Drug abuse is a long term issue and relapses can be expected. “If a child is abusing drugs, it’s not just the child’s problem, it’s the whole family’s problem and the whole family will need to address it,” said Dr. Moores. Take care of yourself too, as you will need support. Al-Anon (<http://www.al-anon.alateen.org/>) helps families of problem drinkers and drug abusers with coping techniques and support. If you are enrolled in Tufts Navigator, Tufts Spirit and all of the UniCare Indemnity Plans, take advantage of Enrollee Assistance Program benefits through Beacon Health Strategies. The GIC urges all of our members who are dealing with drug abuse to seek help for your loved one and yourself.





Choose Your Care Wisely – Choosing Wisely® Campaign Continues to Grow

Emergency Room physicians have joined the dozens of medical specialty groups that have led the charge to identify unneeded medical tests and procedures as part of the Choosing Wisely® Campaign. The American College of Emergency Physicians released its first list in the fall. The American Academy of Family Physicians recently released its third Choosing Wisely® list.

These identified tests are routinely performed and often are not necessary. Unneeded care harms your health and leads to more out-of-pocket health care expenses. If one of the following tests is ordered for you or your child, ask the doctor whether the test is necessary for your own or your child's condition:

In the Emergency Room:

- ❖ Head CT scan for patients with minor injuries;
- ❖ Urinary catheter to monitor fluid output in stable patients who can urinate on their own;
- ❖ Delays in palliative and hospice care services for patients who are terminally ill;
- ❖ Antibiotics for simple skin infections; and
- ❖ Intravenous fluids for children with mild to moderate dehydration who can drink.

In the Physician Office (see Choosing Wisely®'s website for additional procedures):

- ❖ Antibiotic prescription ordered for otitis media (middle ear infection) in children aged 2-12 years with non-severe symptoms;

- ❖ Imaging for low back pain within first six weeks unless red flags, such as severe neurological deficits, are suspected;
- ❖ Routine prostate cancer screening using a prostate-specific antigen (PSA) test;
- ❖ Scoliosis screening for adolescents; and
- ❖ Scheduled elective, non-medically indicated inductions of labor or caesarean deliveries before 39 weeks.

Before any test or procedure is performed, ask the following:

- ❖ Do I really need this test or procedure?
- ❖ What are the drawbacks?
- ❖ Are there simpler and safer options?
- ❖ What happens if I do nothing?
- ❖ How much does it cost?

Launched in April 2012, Choosing Wisely® was spearheaded by the American Board of Internal Medicine (ABIM) Foundation, together with more than 50 medical societies, to identify common tests, procedures and medications that may not be necessary or beneficial to patients.

Consumer Reports has easy-to-understand brochures and videos to help patients on their website: www.consumerreports.org/choosingwisely. For a complete list of unnecessary tests and procedures, when screenings are appropriate, when they are not, and what the risks of performing these tests are, visit www.choosingwisely.org.



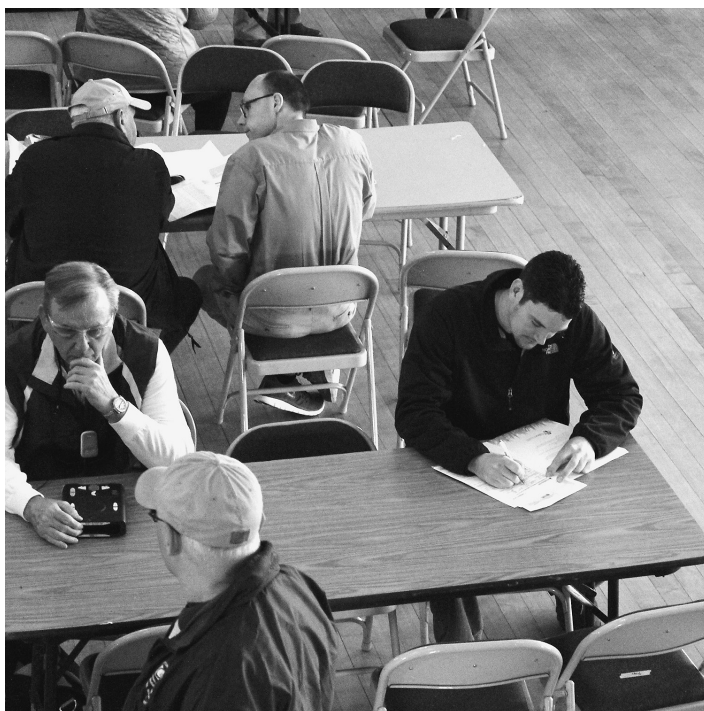
APRIL HEALTH FAIR

Left to right: Representative Jay R. Kaufman (15th Middlesex), GIC Executive Director, Dolores L. Mitchell, Representative John V. Fernandes (10th Worcester), and Massachusetts Health Council Executive Director, Susan H. Servais attend the Mass Health Council fair held at the State House's Great Hall.

GIC Health Fairs



Gordon Pilotte provides complimentary massages for Tufts Health Plan at the Transportation Building health fair.



Jason Depaolo from the Middleborough Fire Department completes his GIC enrollment forms at the GIC fair held at the Middleborough Town Hall. Behind him is Jason Fortin of Fallon Health, who explains the Fallon Health options to a retiree.

Keep in Mind...

Q) As a divorced employee/retiree who is remarrying, what do I need to do?

A) You must notify the GIC in writing that you have remarried, even if you do not wish to add your new spouse to your GIC health insurance coverage. Send a copy of your new marriage certificate, GIC ID number (usually it is your Social Security Number), and your former spouse's last known home address. If you have not already done so, please include the following sections of your divorce agreement: page with the 'divorce absolute' date (the date divorce became final), health insurance provisions, and signature pages. Also provide your new spouse's name, date of birth, and Social Security Number. Please note that if your former spouse is getting remarried, you must report the remarriage to the GIC by writing to the GIC's Director of Operations; include your former spouse's remarriage date and last known address. If you fail to report a legal separation, divorce or remarriage, your health plan and the GIC have the right to seek recovery from you of health claims paid or premiums owed for your former spouse.

Q) I'm turning age 65 and have GIC health coverage; what do I need to do? Should I enroll in Medicare Part A and/or Part B if I am eligible?

A) If you are age 65 or over, visit Social Security's website (www.socialsecurity.gov) or your local Social Security Office for confirmation of Social Security and Medicare benefit eligibility. If eligible and if you are retired, you must enroll in Medicare Part A and Part B to continue coverage with the GIC. See the GIC's website (www.mass.gov/gic/bdgs) for GIC Medicare health plan options.

If you are retired, the GIC will send you a Medicare enrollment form before your 65th birthday with instructions. Social Security's online enrollment system (www.socialsecurity.gov) offers convenient access to the Benefit Verification Letter you will need to send to the GIC.

If you are eligible for Medicare Part A for free but you continue working for the state or a participating municipality after age 65, do not enroll in Medicare Part B until you (the insured) retire. The spouse covered by an active employee who is 65 or over should not sign up for Medicare Part B until the insured retires.

Most enrollees should not sign up for Medicare Part D. Your prescription drugs are already provided by your GIC health plan.

See the GIC's website for Answers to Other Frequently Asked Questions: www.mass.gov/gic/faq.

UniCare State Indemnity Plans and Tufts Navigator/Spirit Members – Take Advantage of Enrollee Assistance Program (EAP) Benefits for Short-term Support

If you are a member of any of the UniCare State Indemnity Plans (Basic, Community Choice, Medicare Extension OME and PLUS) or are a Tufts Navigator or Spirit member, you have Enrollee Assistance Program (EAP) benefits that can help support a variety of short-term emotional, financial, and legal issues. Unlike outpatient mental health and substance abuse counseling benefits that help treat a variety of longer term mental health and substance abuse issues like depression, anxiety, and substance abuse, EAP benefits are for short-term problems that can typically be worked through within three or four visits. EAP benefits for marital, stress management or adjustment counseling are covered at 100% with no copay. Depending on your health plan, you receive three or four face-to-face visits per year.

Other benefits include:

- ❖ *Financial counseling:* a 30-minute telephonic consultation with a financial counselor for assistance with credit repair, debt management, and budgeting.
- ❖ *Financial Planning:* a 30-minute initial consultation with a financial planner and 15% off of their rate for a Financial Plan Preparation.
- ❖ *Legal Consultations:* a 30-minute initial consultation with an attorney and 25% off the hourly rate for services contracted beyond the initial consultation.
- ❖ *Child/Elder Care Benefit:* help with locating a child or elder care provider that meets your needs.
- ❖ *Domestic Violence Resources and Assistance:* a confidential hotline and wide range of supportive services.

For additional information and to access your EAP benefits, contact Beacon Health Strategies: www.beaconhs.com/gic; 1.855.750.8980.

Commission's Newest Members *continued from page 1*

In keeping with the Commissioners' recommendation to members to take charge of their own health, the GIC provides a number of resources:

- ❖ **Manage Your Health Section of our website:** The Manage Your Health section of our website includes over 350 health-related articles to help you take charge of your health. Key resources link you to reputable sources of health care information: www.mass.gov/gic/yourhealth.
- ❖ **Clinical Performance Improvement (CPI) Initiative:** The GIC's CPI Initiative tiers specialists based on quality and cost efficiency. You pay a lower

copay when you visit a high performing specialist. See the GIC health plan websites to look up physician tier designations (*see page 7*).

- ❖ **Handbooks:** Your plan handbook gives you details on how your health plan works. Be sure to refer to your handbook to maximize your benefits. Handbooks are on the plan websites, and are also on the health plan pages of the GIC's website.

We extend a warm welcome to our newest Commissioners and we thank former Commissioner Stephen Chandler for his many years of service to the Commission and our members.

John MacKay from Mass DOT (right) spins the WellMASS wheel and discusses the pros and cons of supplements with Ashley Mason, WellMASS Coordinator, at the GIC fair held at the Transportation Building.



The GIC's Paul Murphy (bottom front), Patty O'Rourke, Bob Johnson and Judy Settana enroll Middleborough retirees and employees in GIC health insurance benefits.

Hubway Bike Discount Program



Hubway

GIC members can now get a 20% discount off the price of an annual Hubway membership! The Hubway bike share system has 140 stations and 1,300 bicycles available throughout Metro-

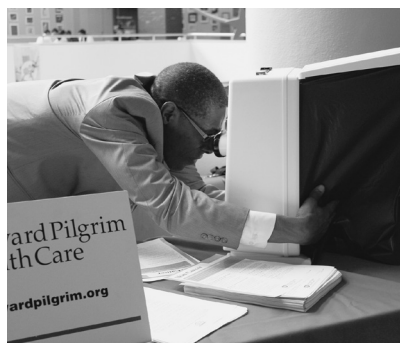
Boston. Take advantage of this discount and enjoy a healthy, environmentally friendly way to travel.

Sign up at www.thehubway.com and use GIC member discount code: **dRx2Ycxw**



Frank Valeri, President of the Retired State, County and Municipal Employees Association of Massachusetts, checks out the GIC health fair held at the McCormack Building with GIC Executive Director, Dolores L. Mitchell.

David Jordan provided skin cancer screening for Harvard Pilgrim Health Care at a GIC health fair.



GIC BENEFIT ACCESS Health Insurance

| | |
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| Fallon Health Direct Care, Select Care, Senior Plan | 1.866.344.4442 www.fchp.org/gic |
| Harvard Pilgrim Health Care Independence Plan, Primary Choice Plan Medicare Enhance | 1.800.333.4742 www.harvardpilgrim.org/gic |
| Health New England HMO, MedPlus | 1.800.310.2835 www.hne.com/gic |
| NHP Care (<i>Neighborhood Health Plan</i>) | 1.866.567.9175 www.nhp.org/gic |
| Tufts Health Plan Navigator, Spirit Mental Health/Substance Abuse and EAP (<i>Beacon</i>) Medicare Complement, Medicare Preferred | 1.800.870.9488 www.tuftshealthplan.com/gic 1.855.750.8980 www.beaconhs.com/gic(code:GIC) 1.888.333.0880 www.tuftshealthplan.com/gic |
| UniCare State Indemnity Plan Basic, Community Choice, Medicare Extension (OME), & PLUS Prescription Drugs (CVS Caremark) Mental Health/Substance Abuse and EAP (<i>Beacon</i>) | 1.800.442.9300 www.unicarestatelan.com 1.877.876.7214 www.caremark.com 1.855.750.8980 www.beaconhs.com/gic(code:GIC) |



Other Benefits for State Enrollees

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| Life Insurance and AD&D (<i>The Hartford</i>) | Call the GIC 1.617.727.2310, ext. 1 www.mass.gov/gic/life |
| Long Term Disability (LTD) (<i>Unum</i>) | 1.877.226.8620 www.mass.gov/gic/ltd |
| Health Care Spending Account (HCSA) & Dependent Care Assistance Program (DCAP) (<i>Benefit Strategies</i>) | 1.877.353.9442 www.mass.gov/gic/tsa |
| GIC Retiree Vision Discount Plan (<i>Davis Vision</i>) | 1.800.783.3594 www.davisvision.com |
| GIC Retiree Dental Plan (<i>MetLife</i>) | 1.866.292.9990 www.metlife.com/gic |
| Dental Benefits for Managers, Legislators, Legislative staff and Executive Office staff (<i>MetLife</i>) | 1.866.292.9990 www.metlife.com/gic |
| Vision Benefits for Managers, Legislators, Legislative staff and Executive Office staff (<i>Davis Vision</i>) | 1.800.650.2466 www.davisvision.com |

Other Resources

| | |
|---|--|
| Employee Assistance Program (EAP) for Managers and Supervisors (<i>Beacon Health Strategies</i>) | 1.781.994.7424 www.beaconhs.com/gic(code:GIC) |
| Massachusetts Teachers' Retirement System | 1.617.679.6877 (Eastern MA) 1.413.784.1711 (Western MA) www.mass.gov/rmtsr |
| Medicare (<i>Federal Program</i>) | 1.800.633.4227 www.medicare.gov |
| Social Security Administration (<i>Federal Program</i>) | 1.800.772.1213 www.ssa.gov |
| State Board of Retirement | 1.617.367.7770 www.mass.gov/retirement |

Questions

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| Group Insurance Commission TDD/TTY Access | 1.617.727.2310 1.617.227.8583 www.mass.gov/gic |
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Cindy McGrath, Editor

Tufts Scholarships Offered to Student Dependents Majoring in Allied Health or Nursing Degree

Tufts Health Plan is again offering two \$2,500 scholarships to student dependents who are pursuing a nursing degree or one in the allied health care field, such as physical therapy and occupational therapy. The application deadline is Friday, July 25, and winners will be notified no later than Friday, August 22, 2014.



In addition to demonstrating an interest in the nursing or allied health field, the dependent:

- ❖ Must be currently enrolled in an accredited two- or four-year college or university;
- ❖ Have completed a minimum of one semester with a GPA of 3.0 or above;
- ❖ Be a dependent of a GIC insured enrolled in any of the GIC's health plans (the student him/herself does not need to be enrolled in GIC health coverage).

For additional eligibility details and the application, see the GIC's website: www.mass.gov/gic.

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Providing Massachusetts State and Participating Community Employees, Retirees, and Their Dependents with Access to Quality Care at Reasonable Costs

COMMONWEALTH OF MASSACHUSETTS
GROUP INSURANCE COMMISSION
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