

Postcard
from the
path...



HMO vs. PPO

When you're **selecting health insurance**, choosing the network of health care providers is often the most important decision you'll make. As a state employee, you have the option to select a Preferred Provider Organization (PPO) or a Health Maintenance Organization (HMO). Both a PPO and an HMO consist of a group of doctors, hospitals and other health care providers organized into a network to deliver health care services to members at discounted rates.

Health care plans for the 2009 – 2010 plan year include:

HMO providers: Aetna, The Health Plan, Paramount and United Healthcare
PPO provided by: Ohio Med

Before you select an HMO or PPO it's important to understand the difference between the two.

What is an HMO? When you enroll in an HMO, benefits are paid only when you visit a provider in the HMO network. No benefits are paid when you visit a provider outside the HMO network, except in the case of a true emergency. HMOs are available to employees in select ZIP codes.

What is a PPO? When you enroll in the Ohio Med PPO, you may visit any doctor and receive benefits. However, the benefit is less when you use providers who are not part of the PPO network. Ohio Med is available to all employees eligible for health care.

PPO members are not required to stay within the PPO network, but there is a strong financial incentive to do so. For example, the PPO reimburses 80 percent of costs for care received within the network, but only 60 percent of costs for non-network care. Unless you prefer a particular doctor, it's best to stay within your PPO network. Because non-network providers do not accept the payment from the insurance company as payment in full they are allowed to bill you the difference between what the insurance company paid and what remains. This is called balance billing and does not apply to your out-of-pocket maximum.

Another scenario that demonstrates **the fundamental difference between a PPO and an HMO** concerns network changes. If you enroll in the Ohio Med PPO

and your physician leaves the network, you have the option to continue seeing that doctor at the out-of-network benefit level. If you enroll in one of the HMOs and your doctor leaves the network, you will need to find another physician who is in the HMO network to receive any benefit.

So, **which is better?** Of course, there isn't one right answer; if you are fortunate enough to have a choice between HMO and PPO coverage, you will need to take some time to evaluate the coverage offered by each and determine which one best suits the needs of you and your family.

For more information, and to take our 60 second survey about benefits communications, please visit <http://das.ohio.gov/benefits>.

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...walking together down a path
of wellness, through insight and
information for a healthy workforce.

PREVENTIVE CARE CHECKLIST

Back to the Basics

You and Your Doctor: A Healthy Partnership

A crucial step in determining your health and wellness is to see your doctor for a thorough checkup. Your physician can be an important partner in helping you set and reach goals for good health. Here are some tips for establishing good, clear communication between you and your doctor:

- ✓ **Speak up.**
- ✓ **Be open.**
- ✓ **Keep it simple.**
- ✓ **Keep tabs on treatment.**

Know and understand your health, dental and vision care plans.

Routinely take your prescribed medications.	✓
Complete the <i>Take Charge! Live Well!</i> Health Assessment.	✓
Keep up with the recommended preventive care and health screenings for your age group.	✓
Keep up with adult and childhood immunizations and well child visits.	✓
Have your blood cholesterol levels checked regularly.	✓
Have your blood pressure checked regularly.	✓
If you have risk factors for diabetes, have your blood glucose checked regularly.	✓
See your dentist every 6 months.	✓
Have your Body Mass Index and waist circumference checked regularly.	✓
Ask your doctor whether you need any further tests or screenings based on identified risk factors.	✓

Visit the *Take Charge! Live Well!* Web site.

The *Take Charge! Live Well!* health and wellness program is open to all state employees and their spouses currently enrolled in a state health insurance plan. Visit <http://ohio.gov/tclw>

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