



Pathways to
my Benefits

New Year, New You

Health Discounts to Help
You Reach Your Goal

**First Lady
Kasich**
Commends
Wellness
Coordinators



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Ohio Department of Public Safety

**OHIO DEPARTMENT OF
ADMINISTRATIVE SERVICES**

CONTRIBUTORS
Anthony Bonofiglio
Bonnie Cross
Garry Hall
Erika Hamric-Spriddell
Greg Pawlack
Yolanda Robinson
Melissa Walpole

EDITORIAL STAFF
Molly O'Reilly
Susan Bythewood Russell
Eric Hagely

GRAPHIC DESIGN
Trace Hull



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Pathways to myBenefits

Your Path to Wellness

To kick off the new year, this edition of *Pathways to myBenefits* can help you *Take Charge! Live Well!*

To help you keep any New Year’s resolutions to live a healthier life and be more frugal, discover the many discount offers available through our Preferred Provider Organizations – Medical Mutual of Ohio and UnitedHealthcare. Also, check out what First Lady Karen W. Kasich had to share to further inspire our state agency wellness coordinators.

Find out about free smartphone applications that help locate health care providers and identify the preventive health care services you might need. Also learn about the state’s new home address policy, changes to the prescription formulary and directions to view your benefits information at *myOhio.gov*.



Update to Eligibility Requirements Deadline

Extra Time Allowed for Certain Documentation

Eligibility rules for State of Ohio medical coverage require employees to submit all required forms and documentation within 31 days of a valid qualifying event to request for a coverage change.

However, because there may be delays in obtaining certain documents, such as birth or marriage certificates, that are outside of the employee's control, this requirement has been updated to allow employees to initiate the enrollment or disenrollment process without submitting all of the required documentation within 31 days of the qualifying event.

Below are the updated requirements:

- Employees still must initiate the change request within 31 days of the qualifying event.
- Employee must submit all supporting documents available with the change request. If any supporting documents are missing, the employee must provide a valid reason why they are missing with an estimated submission date.
- If there is a valid reason provided, the employee must submit all missing documentation to their agency within 31 days of receipt. If the employee fails to submit the documents within 31 days of receipt, the change request will be denied.
- If a valid reason is not provided for the missing document or if the employee does not initiate the enrollment or disenrollment process within 31 days of the qualifying event, the change request also will be denied.



Questions About Coverage for Dependents?

Qualifying Event Reminders

Dropping Married Dependents

Did you know? If you have a covered dependent who gets married, he or she can no longer be removed from your medical coverage due to the marriage only. Due to recent regulatory changes, married dependents are no longer considered ineligible dependents for medical coverage. (This does not apply to dental and vision coverage.) However, if your dependent also enrolled in his or her spouse's medical coverage, "gaining coverage" is a qualifying event and coverage can be dropped if you notify your agency within 31 days of your dependent's effective date of new coverage.

Adding Student Dependents

Did you know? If you did not add an eligible dependent to your coverage during open enrollment and they later enroll in school, they cannot be added to your medical coverage at that time. Due

to recent regulatory changes, dependents younger than 26 do not have to be enrolled in school to be covered under your medical plan.

Note: Eligibility rules still require student status for dental and vision coverage.

Notification of Divorce

Did you know? In the event of a divorce, legal separation or annulment, your covered ex-spouse is no longer eligible for benefits. This is because the ex-spouse is not an eligible dependent.

Note: Ex-spouses may be eligible to continue their benefits through the federal COBRA Act if you notify your agency benefits specialist (or human resources office) within the latter of 60 days after the date of the qualifying event or 60 days after the date coverage ends.

Employees required by court order to provide health care coverage for an ex-spouse must do so through an independent plan or COBRA because ex-spouses are ineligible dependents.

It's Not too Late for a Flu Shot

Individuals are encouraged to get vaccinated against the flu each year from September through January and beyond. The timing and duration of influenza seasons vary. Influenza outbreaks can occur as early as October and can peak in January or later.

State employees and their dependents who are covered under the state medical plan are eligible to receive a free annual flu vaccination from an in-network provider, such as a primary care physician or retail walk-in clinic.

If you haven't yet obtained your flu shot, please check with your medical third-party administrator – Medical Mutual of Ohio or UnitedHealthcare – for locations of in-network providers.

Note: If you go to a non-network provider, you may be responsible for the entire cost at the time of service and be required to submit a claim to your medical third-party administrator for reimbursement at the non-network level. Claim forms for Medical Mutual of Ohio and UnitedHealthcare can be found online at: medmutualstateohioemployee.com and myuhc.com.

For a summary of flu shot coverage, review the *Take Charge! Live Well!* website at: ohio.gov/tclw.



Cool Benefits Applications for Your Smartphone

Following are two helpful smartphone applications that provide information regarding health provider locations and preventive care services.

Both of these applications are available for free at major smartphone online stores.



Electronic Preventive Services Selector (ePSS)

The Electronic Preventive Services Selector (ePSS)

is an application designed to assist doctors in identifying the screening, counseling and preventive medication services appropriate for their patients. The application was developed by the U.S. Department of Health & Human Services, Agency for Healthcare Research and Quality.

To receive recommendations and information on appropriate preventive services, you can search based on your characteristics, such as age, sex and selected risk factors. The application's information is based on the current recommendations of the U.S. Preventive Services Task Force.



DocGPS

UnitedHealthcare's DocGPS is an application that can locate the nearest in-network

doctor, urgent care facility or hospital that participates in specific UnitedHealthcare networks. It can find providers within a specified distance of your given location whether you are at home, work or on vacation. The application allows you to search by specialty, facility name or ZIP code and also can provide you with directions or connect you with your selected provider.



Flexible Spending Account Reimbursement Reminder

The deadline for enrollees to submit flexible spending account claims and supporting documentation for calendar year 2011 expenses is March 31. Claims and documentation must be received by FBMC, the third-party administrator, by March 31 to receive reimbursements and avoid forfeiting funds.

For questions regarding your flexible spending account, visit: das.ohio.gov/flexiblependingaccount or contact FBMC Customer Care at 1.800.342.8017. Customer Care Center representatives are available Monday through Friday from 7 a.m. to 10 p.m.





Catalyst Rx Wins URAC Platinum Award

Catalyst Rx, the pharmacy benefit manager for the State of Ohio, recently won a prestigious award from URAC, the nation's leading health care accreditation organization. Catalyst Rx was the recipient of URAC's 2011 Platinum Award for "Best Practices in Health Care Consumer Empowerment and

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Access Price & Save

Did you know that Catalyst Rx provides an online drug pricing tool that allows you to shop for the lowest priced pharmacies and medications?

To access Price & Save, visit catalystrx.com and log in using the information from your Catalyst Rx drug card. On the Member Home Page, click "Price & Save Drug Pricing Center" in the column of topics on the left side of the screen.

Protection” for its Generic Advantage Plan.

The award submission was based, in part, on the State of Ohio’s successful implementation of the Generic Advantage Plan. The Generic Advantage Plan combines innovative features and technology to maximize the use of the most clinically effective medications at the lowest net cost to employees and the state. The program consists of targeted member communications, prescriber education initiatives, Catalyst’s Formulary Advantage to enhance formulary

compliance and increase generic utilization, and the company’s award-winning Catalyst Rx Price & Save drug pricing tool.

URAC awards recognize health care management programs that demonstrate quality improvements in the health care delivered to consumers. This award is particularly significant because entries were submitted by organizations across the health care industry spectrum, including health plans, medical groups and pharmacy benefit managers.

Catalyst Rx Formulary Changes in Effect for New Year

Each year, the Catalyst Rx Pharmacy and Therapeutics Committee may add or remove drugs from their national formulary, also known as the Preferred Drug List.

If you are enrolled in a State of Ohio health plan, you should have received a new credit card-sized Preferred Drug List or “pocket formulary” in the mail in December along with a short list of changes and suggested alternative medications.

When receiving prescriptions from your doctor or having them filled at your pharmacy, always check to see if the medication prescribed is preferred and ask if a generic alternative is available. Doing so will help you receive the most value from your pharmacy benefit.

The Preferred Drug List also may be viewed or reprinted at catalystrx.com. You also may call the Catalyst Rx Customer Service Department at 1.866.854.8850 or utilize the **Drug Dictionary** at catalystrx.com to research the status of each of your medications.

The 2012 Preferred Drug List and other important prescription drug updates also may be found at das.ohio.gov/benefits under the Benefits tab in the right navigation area. Click on **Prescription Drug** and scroll to the end for **Important Prescription Drug Updates**.

Please remember the Preferred Drug List is not an all-inclusive list and that changes may occur throughout the year. Plan exclusions may override the list. Benefit designs may vary with respect to drug coverage, quantity limits, step therapy, days supply and prior authorization requirements.

First Lady Kasich Commends Wellness Coordinators



Ohio First Lady Karen W. Kasich congratulates state agency wellness coordinators.

State agency wellness coordinators recently received kudos from First Lady Karen W. Kasich for their successful efforts to increase employee wellness.

Wellness coordinators from several state agencies were recognized with Ohio's Best Awards during the *Take Charge! Live Well!* program's quarterly meeting, which was held Sept. 22 at the Ohio Rehabilitation Services Commission (RSC).

Wellness coordinators are state employees who volunteer to organize their agency wellness program by coordinating events like road shows, health screenings, smoking cessation programs and weight-loss challenges.

Mrs. Kasich, a marathon runner and wellness advocate, cheered the 80 agency wellness coordinators in attendance for their efforts.

"Don't underestimate the importance of what you're doing. It makes a real difference — in your lives as well as the lives of your colleagues," Mrs. Kasich said. "The governor is aware of your hard work, and we greatly appreciate your commitment to better health."

"This is a real legacy that each of you can leave," Mrs. Kasich said. "Not just through the work that you do in your respective jobs, but by serving as wellness coordinators, you are helping others make positive changes that can alter the course of their lives," Mrs. Kasich said. "When your co-workers develop healthier habits, those habits will trickle down to their partners and their families as well as future generations of Ohioans."

Mrs. Kasich, along with Director Robert Blair of the Ohio Department of Administrative Services and RSC Director Kevin Miller, presented 19 categories of awards to the wellness coordinators to emphasize the importance of their roles.

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Eighty state agency wellness coordinators participate in their fall meeting held Sept. 22 at the Ohio Rehabilitation Services Commission in Columbus.



Many examples of the success of the *Take Charge! Live Well!* program were shared.

Director Blair highlighted the success of Amber VanDine of the Ohio Attorney General's Office and Rosemary Walton of the Ohio Department of Job and Family

Services who kicked off their fitness journeys with their respective agency's wellness program. Read about their inspirational stories and other testimonials at ohio.gov/tchv.

Reach Your Goal by Using Your Health Discount Programs

Gym and Nutrition Program Offers

Have you made a resolution to get in shape this year? Take advantage of discounts to specific gyms, fitness centers and more offered through your State of Ohio medical third-party administrators.

Medical Mutual of Ohio (MMO) and UnitedHealthcare (UHC) offer fitness discount programs to eligible state employees who are committed to leading a more active, healthy lifestyle.

Medical Mutual of Ohio

Medical Mutual's SuperWell Fitness Discounts program offers member discounts to Anytime Fitness, Curves, FitWorks Fitness Centers and Snap Fitness.

The SuperWell program also provides health and wellness discount access to Weight Watchers, a weight-loss plan, local produce delivered directly from the farm to your home and fitness equipment as well as over-the-counter health and beauty aids, spas and more. In addition, SuperWell's QuitLine helps members kick the tobacco habit through this free service.

UnitedHealthcare

Members of UHC's health plan can receive discounts to Anytime Fitness, Bally Total Fitness, Curves, Gold's Gym, MyGym and Snap Fitness. Also offered through UHC's UnitedHealth Allies program are discounts to Jenny Craig, LivingLean, Nutrisystem and other popular programs.

In addition, UHC members receive discounts on beauty and skin care products, books, fitness equipment and apparel, family medical products and much more.

If your goal is to reduce stress or quit smoking, UnitedHealth Allies offers discounts on stress reduction and relaxation resources, tobacco cessation programs* and other wellness purchases.

For details about how to access discounts offered by Medical Mutual of Ohio and UHC, visit the *Take Charge! Live Well!* website at ohio.gov/tchv, click on the **Hot Links** button and scroll to the **Health Discounts** section. In addition to its website, Medical Mutual of Ohio members can access a helpful video describing its health discount program.

*Incentives not available for participation in the UHC tobacco cessation program.

State Policy: Physical Residence Must Be on File

The following is a portion of the State of Ohio policy requiring that employees provide their physical residence as their home address:

Home Address Policy

Purpose

To establish a statewide policy that provides that all state employees must have a valid home address on file with the State of Ohio.

General

Effective July 1, 2011, all employees must have a valid home address on file with the State of Ohio. While an employee may continue to list a P.O. box as a mailing address, an employee may not use a P.O. box as a home address.

Changing Home Address

Employees can change their home address in one of two ways: 1) Using myOhio.gov (instructions below) or 2) Completing a change of address form (ADM 4058) and submitting it to your agency personnel office.

To change your home address through myOhio.gov: Go to myOhio.gov, sign in by entering your user ID and password, click on the **My Info** dropdown menu on the upper left, click on the **Home and Mailing Address** link, click the **Edit** button on the right, type the updated or additional information in the fields, click **Save**. For questions, please contact HR Customer Service at 1.800.409.1205 or HRCustomerService@das.state.oh.us.



Updating Your Benefits Information on myOhio.gov It's Quick and Easy

Viewing and updating your benefits-related information online is simple – after signing into myOhio.gov, go to the Benefits Summary page from the myBenefits link.

The Benefits Summary page provides a listing of your employee benefits as of today's date. By clicking on the individual links, (medical, dental, vision, etc.) to display a separate page, you can:

- View a summary of your health benefits
- View more detailed information for each enrolled benefit
- Confirm any recent additions or removals of dependents to/from your medical coverage as a result of a Life Event such as a birth, adoption, marriage, divorce or student status change, and more.

To access the myBenefits link: Go to myOhio.gov, sign in by entering your user ID and password, click on the **myBenefits** button under Self Service Quick Access. For questions, please contact HR Customer Service at 1.800.409.1205 or HRCustomerService@das.state.oh.us.

Health and Other Benefits Contacts

All Employees

Medical

Medical Mutual of Ohio

1.800.822.1152

medmutualstateohioemployee.com

Group Number: 228000

UnitedHealthcare

1.877.440.5977

myuhc.com

Group Number: 702097

Prescription Drug

Catalyst RX

1.866.854.8850

catalystrx.com

Behavioral Health & Substance Abuse

United Behavioral Health

1.800.852.1091

liveandworkwell.com

Group Number: 00832

Code: 00832

Employee Assistance Program

1.800.221.6327

odh.ohio.gov/eap/eap.aspx

Take Charge! Live Well!

APS Healthcare

1.866.272.5507

stateofohio.apshealthcare.com

24-Hour Nurse Advice Line

1.866.272.5507, Option 3

Flexible Spending Account

Fringe Benefits Management Company (FBMC)

1.800.342.8017

www.myfbmc.com

Long Term Care Insurance

Prudential Long Term Care

Solid Solutions

1.800.732.0416

Prudential.com/GLTCWEB

Group Name: stateofohio

Access Code: buckeyes

Group Number: LT-50636-OH

Exempt Employees Only

Dental

Delta Dental of Ohio

1.800.524.0149

deltadentaloh.com

PPO Plan

Group Number: 9273-0001

Premier Plan

Group Number: 9273-1001

Vision

Vision Service Plan (VSP)

1.800.877.7195

vsp.com

Group Number: 12022518

EyeMed Vision Plan

1.866.723.0514

eyemedvisioncare.com

Group Number: 9676008

Life Insurance

Basic Life Insurance

The Standard

1.866.415.9518

standard.com/mybenefits/ohio

Group Number: 645571

Supplemental Life Insurance

Prudential Life Insurance

1.800.778.3827

prudential.com/mybenefits

Group Number: LG-93046

Continued on following page ▶

Health and Other Benefits Contacts



Union-Represented Employees Only

Dental

Delta Dental of Ohio

1.877.334.5008

Group Number: 1009

Vision

Vision Service Plan

1.800.877.7195

Group Number: 12022914

EyeMed Vision Care

1.866.723.0514

Group Number: 9674813

Life Insurance

Prudential Life Insurance

1.800.778.3827

Group Number: LG-01049

Employee Assistance Program

Working Solutions Program

1.800.358.8515

Group Number: 4718

Legal Services

Hyatt Legal Services

1.800.821.6400

Group Number: 49000010

Union Benefits

Union Benefits Trust

614.508.2255

1.800.228.5088

Union-represented employees can access plan information at: benefitstrust.org

TIP: When placing your calls, please ensure you have the documentation you might need during the call:

- Group Number
- Employee ID Number
- Explanation of Benefits if call is regarding claims.

Ohio Department of Administrative Services

HR Customer Service

614.466.8857

1.800.409.1205

HRCustomerService@das.state.oh.us

das.ohio.gov/benefits

At a Glance

January

- New Flexible Spending Account plan year begins Jan. 1.

February

- National Wear Red Day, to support the fight against heart disease in women, Feb. 3

March

- Flexible Spending Account deadline for 2011 claims is March 31.

May

- National Employee Health and Fitness Month
- Benefits Open Enrollment

June

- *Take Charge! Live Well!* incentive year ends June 30.

July

- New benefits year begins July 1.



Ohio Department of
Administrative Services
Human Resources Division
Benefits Administration Services
30 E. Broad St., 27th Floor
Columbus, Ohio 43215

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