



Serving Employees and Retirees of School Districts in Smithtown, South Country, Three Village

Fall Bulletin 2017

January 1, 2018 plan changes

The in-network out-of-pocket maximum will increase from \$6,850 per individual and \$13,700 for family to \$7,350 for individual and \$14,700 family as of 1/1/2018.

Notice

Group health plans sponsored by State and local governmental employers must generally comply with Federal law requirements in title XXVII of the Public Health Service Act. However, these employers are permitted to elect to exempt a plan from the requirements listed below for any part of the plan that is "self-funded" by the employer, rather than provided through a health insurance policy. The Suffolk School Employees Health Plan has elected to exempt Suffolk School Employees Health Plan from the following requirements: Protections against having benefits for mental health and substance use disorders be subject to more restrictions than apply to medical and surgical benefits covered by the plan.

The exemption from these Federal requirements will be in effect for the plan year beginning on January 1, 2018 and ending on December 31, 2018. The election may be renewed for subsequent plan years. Please be advised, this notice should not be construed as meaning that mental health and substance use disorders are not covered by

the Suffolk School Employees Health Plan. Please review the Summary Plan Description regarding the extent to which coverage is provided.

Discontinuation of Real Appeal Weight Loss Program

Due to low participation in the Real Appeal Weight Loss program this offering will be discontinued as of 1/1/2018. SSEHP will be exploring alternative wellness initiatives and will keep you informed through future updates. Any members enrolled in the Real Appeal program prior to 1/1/2018 will be able to complete the program.

Cochlear Implant coverage

As of January 1, 2018 cochlear implants will be covered subject to medical necessity. Cochlear implants may be clinically appropriate for individuals with moderate-to-profound sensorineural hearing impairment for whom hearing aids would be expected to provide only limited benefit.

Annual reassessment of provider network to determine Tier 1 status

As is the case each year, UHC performs an annual reassessment of providers to determine which providers qualify for Tier 1 status. This assessment is conducted based

upon an evaluation of individual providers using evidence-based medicine and national standardized measures. Through this process some providers who no longer meet criteria will lose Tier 1 status and other providers may gain Tier 1 status. *Your doctor’s Tier 1 status may have changed as a result of this annual assessment process.* Please check your doctor’s Tier 1 status before you schedule your next appointment. You can easily choose the doctors that offer the greatest value by finding a Tier 1 blue dot next to physicians’ names. Just go to “Find a Doctor” on myuhc.com® and spot the blue dot. The UnitedHealth Premium program Just go to myuhc.com® and click on Find a Doctor.

Choose smart. Look for the tier 1 icon:



Look for the blue dot icon above to ensure you pay the lowest copay.

Important Reminder

When seeking care for treatment of infertility, organ transplant, and bariatric surgery, the Plan requires that you contact UHC to enroll in and their specialized care support programs for these conditions and that you use a designated provider. Historically UHC has referred to these designated provider facilities as Centers of Excellence. However, some facilities that are not among UHC’s designated facilities are now promoting themselves as “Centers of Excellence”. In an effort to avoid confusion UHC now refers to their network of facilities as **Designated Providers**. When you contact UHC to speak with a nurse about accessing care for organ transplant, infertility or bariatric surgery the nurse can provide you with the name(s) of

designated provider facilities in your area. Remember, just because a facility may promote themselves as a “Center of Excellence” doesn’t mean that they are a designated provider facility that has met the stringent criteria that UHC applies before accepting them in their network.

Out of Network Coverage

When choosing a provider or facility, it is important to use services that are in the UHC network. Out of Network coverage is subject to the deductible and co-insurance. This will be your responsibility to pay if you use out of network providers. It is important to call UHC Customer Service or check on-line at myuhc.com to ensure they are in network. Be wary of providers who say they “will work with your insurance company”. Many times they are not in-network and you are left with an unexpected bill.

The ER: It’s not your only option

The reviews are in: Emergency rooms (ERs) are lifesavers. But when it’s not an emergency, the ER may not be as convenient as it sounds. Comparing your care options could save you time, money and frustration.

The average cost for an emergency room visit is \$1,700. The ER is the place to go for serious immediate needs, such as:

- Chest pain
- Trouble breathing
- Stroke
- Heavy bleeding
- Seizures

See your primary doctor whenever possible. It’s the place to go for:

- Preventive care
- Minor illnesses and injuries
- General health needs
- Immunizations

Your doctor has easy access to your records, knows your health history and may even offer same-day appointments. Plus, your share of the cost for services from a Network provider will be lower.

Urgent Care Centers offer treatment for non-life threatening injuries or illnesses. They are staffed by qualified physicians and treat such conditions as:

- Sprains
- Strains
- Minor broken bones (e.g., finger)
- Minor infections
- Minor burns

Convenience care clinics like CVS Minute Clinic also offer another option to go for:

- Common infections
- Strep throat
- Minor skin conditions (e.g., poison ivy)
- Flu shots
- Pregnancy tests
- Minor cuts
- Ear aches

Are you getting enough sleep?

While everyone’s sleep needs are different, it’s recommended that adults get between seven to eight hours each night. Obvious sleep stealers such as kids, pets or snoring

partners might prevent sleep, but so can these other factors:

Instead of tossing and turning, try these sleep hygiene habits:

- **Screen out distractions.** Falling asleep to the TV may seem like peaceful white noise, but the constant volume changes can wake you up.
- **Bid an early goodnight to caffeine.** If you’re sensitive to it, avoid it before bed. Its effects can take up to eight hours to wear off.
- **Banish the booze.** Don’t use alcohol to help you fall asleep. It can prevent you from falling into a deep sleep and wake you up more often.
- **Nix nicotine.** It’s a stimulant, which means it can disrupt your sleep.
- **Tweak the thermostat.** Per some experts, keeping the bedroom around 65 degrees may make it easier to fall — and stay — asleep.
- **Say “no” to noise.** Drown out loud neighbors or traffic by closing the window, using earplugs or running a white noise machine.