

HealthBenefitPlanner

Fall 2009

Savings for Times Like These

In times like these, it is reassuring to know that you have a health plan that works to help you achieve health care savings. While costs on everything from groceries to health care services are on the rise, it doesn't mean your savings possibilities are altogether extinct. Rather, resourcefulness is the key to ensuring that you get the most bang for your bucks. Here are a few ways MHBP helps you maximize your savings potential:

Preventive Care—covered 100 percent, including screenings and immunizations, giving you the advantage of early detection of medical conditions, which can save you money and keep you fit for the future.

MHBP Lab Savings Program—gives you the opportunity to have lab work done at no cost to you when Quest Diagnostics performs the test and bills MHBP. Either take your lab script to a Quest location, or ask your health care provider to send your specimens to Quest for processing. Instructions for your doctor are on your ID card. **Please note:** Consumer Option members must first meet the annual deductible to qualify for savings through this program.

Prescription Drug Formulary—the MHBP prescription drug program uses a formulary (drug guide) which categorizes prescription medications according to the level of coinsurance or copayment required. Share the MHBP formulary with your doctor so he/she can prescribe medications that offer you the most effective treatment therapy, while also saving you money. Generic drugs are typically less expensive than medications in the Preferred Brand and Non Preferred Brand drug categories and are as safe and effective as their brand counterparts.

Mail-Order Pharmacy—when you take maintenance medications for a chronic or ongoing medical condition (e.g., asthma, diabetes, high blood pressure, etc.), and have Standard Option or Consumer Option, it pays to use mail-order pharmacy. You can get up to a 90-day supply of drugs through

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Thank You!

MHBP would like to thank you for allowing us to serve your health care needs over the past year. During this time, we successfully converted our claims system to a new platform, which has been designed to enhance your claims payment and customer service experience. As with any conversion, there are opportunities and challenges. The Customer Service team worked tirelessly to quickly remedy any issues and get back on track with the excellent service you have come to expect. Some enhancements our new claims system brings include:

- **My Online ServicesSM**—you can access health care claims, personal health records, EOBs, health information, financial tools and so much more using this secure web-based application. Without the conversion, this level of robust, personalized information would not be possible.
- **Increased Auto-Adjudication of Claims**—this means certain claims can be processed without manual intervention (i.e., customer service involvement), which means you and/or your providers are reimbursed faster.
- **Improved Explanation of Benefits (EOB)**—you have more pertinent information for managing your health care expenses, such as tracking deductibles, out-of-pocket maximums and more. In addition, on a single EOB, you are able to see claims for multiple providers and different dates of service—not a feature of the old EOB.
- **And so much more**

MHBP's Customer Service is comprised of approximately 450 caring professionals who take great pride in serving you. This staff is backed by other support teams who understand that our health plan members are our first priority. With your continued membership, we will aim to meet and exceed your performance expectations and those set by the Federal Employees Health Benefits Program. Health care in our country has never been more important,



Taking Care of Business

MHBP Results (April-June 2009)

Calls Answered	428,989
Average Speed of Answer	22 seconds
Claims Processed	2,076,916

so we want to assure you that your patronage of the MHBP is not taken for granted. We value all of our members and we will continue to serve you with respect and integrity for years to come, just as we have for the past 45 years. If you have questions about a claim or need more information about your benefits, please call us at **1-800-410-7778**. ■

ExtraCare® Health Card — More Savings for You

MHBP and CVS Caremark are pleased to make the ExtraCare® Health Card program available to you. This valuable new program helps you save money on everyday health-related items. Your ExtraCare Health Card provides you a 20 percent savings¹ on CVS/pharmacy® brand-items that are health care flexible spending account (HCFSA)-eligible. These products range from bandages to

Savings for Times Like These, continued from page 1

mail order typically for less than what you would pay at retail. You also have the convenience of home delivery and automated refills. **Please note:** Consumer Option members must first meet the annual deductible to be eligible for these benefits.

Urgent Care Centers and Convenience Care Clinics—got an urgent care situation that's non-life threatening, but won't wait until you can get a doctor's appointment? Try seeking care at an urgent care center or convenience care clinic (e.g., Take Care ClinicSM or MinuteClinic®) rather than a hospital emergency room. Your health care dollars will stretch much further. In the event of a true emergency, always seek care at the nearest hospital.

Extra Savings and Discounts*—maintain your health with extra savings from HearPO, EyeMed®, QualSight® and GlobalFit™. These programs offer substantial savings off retail prices for services you may need. For example, HearPO offers you discounted hearing exams and hearing aids for as low as \$549. EyeMed saves you up to 40% on eye exams and eyewear. If you are interested in LASIK laser vision correction, you can grab savings through the U.S. Laser Network or QualSight. If you want to get fit or stay fit, tap into the healthy living services and savings offered by GlobalFit.

Health Care Flexible Spending Account (HCFSA)—allows federal employees to conveniently set aside pre-tax dollars to pay for qualifying health care expenses. Estimate your annual out-of-pocket costs and put this amount in your HCFSA. When you have eligible claims, you can reimburse yourself from this account. Visit <https://www.fsafeds.com/fsafeds/index.asp> to learn more

various over-the-counter medications purchased in store or online at www.CVS.com.

How it Works

You are provided three ExtraCare Health Card key tags by mail that can be used by you and your covered spouse and dependents. Just present the key tag at the drugstore checkout or online and automatically receive 20 percent off your eligible items. A summary of your savings will appear on your receipt. For your convenience, CVS has over 6,300 pharmacy locations nationwide and online shopping.

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about the HCFSA administered by SHPS. OPM offers a Limited Expense Health Care Flexible Spending Account (LEX HCFSA) for employees in FEHB high-deductible health plans (HDHP) with a health savings account (HSA), like our Consumer Option.

Extra HSA Contributions—Consumer Option members can save more by contributing additional money (up to the IRS defined limits) to your Health Savings Account (HSA). Contributions to your HSA are federal tax-free, allowing you to lower your taxable income while getting the medical care you need and/or want. For 2009, the maximum annual contributions to your HSA (plan contributions and your contributions combined) are: \$3,000 for self only or \$5,950 for self and family coverage. Members between the ages of 55 and 65 can make additional pretax "catch-up" contributions of \$1,000 for 2009 and thereafter, which permits you to contribute even more. Remember, all funds contributed to an HSA are always yours, whether or not you retain federal employment or retire.

The cost of living may continue to increase, and health care will be no exception; however, rest assured that MHBP will always do everything possible to continue delivering value for your health care dollars. See the official Plan brochure for more details on all of the above programs and benefits. If you have questions, please call us at **1-800-410-7778** or visit **www.mhbp.com**. ■

*These benefits are neither offered nor guaranteed under the FEHB program, but are made available to all MHBP enrollees and their covered family members. You cannot file a FEHB disputed claim about them. The fees you pay for these services to not count toward the FEHB deductibles or out-of-pocket maximums.

ExtraCare Health Card, continued from page 3

Get Quality and Savings

The ExtraCare Health Card provides 20 percent savings on the health-related items you and your family use most, from cough and cold remedies to pain and allergy relief products. CVS/pharmacy brands contain the same active ingredients and are of high quality like national brands, but cost much less. With the ExtraCare Health Card, you can save up to 40 percent² on these items compared to national brands. **Please note:** the discount does not apply to prescriptions, vitamins, nutritional supplements and non-health-related items.

Added Bonus to the CVS ExtraCare Card

If you already have a CVS ExtraCare card, the ExtraCare Health Card will replace it and enhance your rewards. Using the ExtraCare Health Card entitles you to all of the benefits of the ExtraCare rewards card—you get the 20 percent discount plus you will earn two percent in Extra Bucks[®] on non-prescription purchases³ and one Extra Buck[™] for every two prescriptions purchased⁴.

For more information about the ExtraCare Health Card, or to transfer your ExtraCare reward card balance to your ExtraCare Health Card, call the toll-free number on the back of your new card. ■

¹The 20 percent discount is restricted to items purchased for the cardholder, spouse or dependents. A health care flexible spending account (HCFSAs) allows you to contribute pre-tax earnings toward your out-of-pocket medical expenses. The FSA summary of your receipt includes the items (and tax) that may be eligible for reimbursement from your HCFSAs/HRA/HSA plan. Plan restrictions may apply. Check with your health plan sponsor for more details.

²Source: CVS Caremark 2008 data—savings depend on the frequency of card use.

³Excludes prescriptions, alcohol, tobacco, lottery tickets, postage stamps, gift cards, money orders, pre-paid cards and photo finishing, and are not valid on other items reimbursed by a governmental program.

⁴Excludes pharmacy items paid for in whole or part by state and/or federal health care programs, such as Medicare and Medicaid, and prescriptions purchased in NJ and NY. Also excludes controlled substances purchased in LA.

This discount program is neither offered nor guaranteed under the FEHB program, but is made available to all MHBP enrollees and their covered family members. You cannot file a FEHB disputed claim about them. The non-prescription items you purchase do not count toward the FEHB deductibles or out-of-pocket maximums.

Never Too Far From MHBP

You may be out of the country, but you are not out of reach of MHBP and its benefits. Your MHBP coverage goes with you wherever life takes you. Whether you live, work or travel overseas, there's security in knowing you have a health plan that's there for you—making things easier and helping you get the care you need.

PPO Benefits Overseas

Overseas coverage is one of the many advantages of having MHBP as your health plan. When you need medical attention overseas, you can see any medical provider, and receive the PPO-level (in-network) of benefits for covered care.

Filing Claims

It is important to file your claims following your visit to ensure timely payment to you or the health care provider. To file a claim you can download the Overseas Claim Form at www.mhbp.com, just select “Member Support” from the top navigation bar and click “Forms & Document Library.” You may also call us to obtain a claim form. When completing the claim form it is important that you:

- Provide the diagnosis or symptoms (the nature of the illness or injury) on the claim form.
- Attach the itemized provider bill and/or a receipt to the claim form. If the visit is due to an accident or injury, provide the date and details in sequential order so we can process the claim correctly.
- Do not use highlighter or red ink to emphasize a word or phrase on a claim or bill. Instead please underline or circle it. Anything else may distort the images produced by our scanning equipment.
- Submit complete and separate claim forms for each patient. This will help avoid confusion and delays in processing of the claims submitted.
- Submit your claim(s) as soon as possible after incurring the expense. We understand that billing practices vary from country to country. That is why we allow you at least 12 months to submit your claims.
- Include a brief description of the services provided in English, written directly on your claim form, bill or a separate sheet of paper. An official translation is not required.

Get In Touch

For your convenience, we provide toll-free access to our customer service team 24 hours, seven days a week. Call us anytime to obtain benefits information, request forms, ask general health questions, and more. Consult the International Dialing Guide, located on our website,

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in the “Contact Us” section, for the toll-free number and dialing sequence for the specific country from which you are calling. If the country you are calling from is not listed in the guide, you may reach us at **1-480-445-5106** anytime. You can also contact us by e-mail, or chat online anytime with a Customer Service Representative. If you

prefer self-service, register for a My Online ServicesSM account and you will be able to check claims status, print EOBs, access forms, get health information, maintain a personal health record, take health risk assessments and so much more using our secure website. ■

MHBP – Your Personal Health Care Assistant

MHBP offers our members an online personal health care assistant. Our My Online ServicesSM (MOS), secure member site, is always at your service—it’s your health care concierge. Inquire with MOS about general health information, medical claims, EOBs, prescriptions and authorizations, wellness tools including health risk assessments and more. Register for a MOS account today and try the following five features:

MOS Service	Description	Where to find in MOS
Health Risk Assessment	This tool analyzes your responses to questions about your health and lifestyle, and provides suggestions for reducing or eliminating your risks. After completing the assessment, you can view or print your personalized report and share it with your doctor, if you choose to do so.	Select Wellness Tools from the top navigation bar and choose Health Risk Assessment . Also, try the Interactive Tools for additional screenings and assessments.
Personal Health Record	This feature compiles information from your medical claims and data you include, providing a complete online health record for you and your family. Keep your record(s) up to date, and you will be able to access this critical information should you or your doctor need it.	Select Personal Health Record from the top navigation bar. Also, try the tools that are linked to this page for other valuable support.
KidsHealth®	KidsHealth is a health information resource that caters to children and families. This resource provides information at a level that children of all ages and developmental stages can understand. Tools for parents and even grandparents are provided to aid them with engaging children in health-related dialogue and activities. This site is designed to be fun and interactive.	Select Wellness Tools from the top navigation bar and choose Kids Health .
View Claims	Claims for all medical and pharmacy services received are available for viewing within MOS. You can view claims by date of service, provider name, specialty, claim status and more. You can even view/print the EOB.	Select Claims from the top navigation bar and choose Claims .
View Authorizations	All authorizations for inpatient hospital admissions, outpatient surgery, or other procedures requiring authorization are provided within MOS. You can even track how many approved visits remain. You can also view by authorization number, provider type and more.	Select Claims from the top navigation bar and choose Authorizations .

Register for MOS

Follow these steps to register for My Online ServicesSM:

1. Go to **www.mhbp.com**, find the “My Online ServicesSM” box and click the “Register or Login Now” link.
2. Arrive at the official My Online ServicesSM website.
3. Select “Register Now” to open a new account.
4. Complete all the steps of the registration process.
5. Enter your personal site where you can customize your settings and views.

Tip—you can take a tour of MOS before registering when you visit **www.mhbp.com**.

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Contact Us

1-800-410-7778	MHBP Member Services	1-866-559-5252	EyeMed Vision Care
1-800-852-7195	TDD/TTY	1-888-432-7464	HearPO Network Information (888-HEARING)
1-800-254-0227	MHBP Supplemental Dental & Vision Plans	1-800-377-7220	Quest Diagnostics
1-866-623-1441	CVS Caremark (Pharmacy benefit manager)	1-480-445-5106	Overseas Enrollees (Toll-free numbers at www.MHBP.com)
1-877-552-7376	U.S. Laser Network	1-800-294-1500	GlobalFit
1-877-306-2010	QualSight (Laser vision correction services)	1-866-784-7988	My Online ServicesSM Net Support

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This newsletter summarizes benefits of the Mail Handlers Benefit Plan. For a complete description of all benefits, please read the 2009 official Plan brochure (RI 71-007). All benefits are subject to definitions, limitations and exclusions set forth in the 2009 official Plan brochure.

Contact us at 1-800-410-7778 or visit us on the Web: www.mhbp.com