

Select the Right Health Care Provider with Help from the MHBP

You want to get your medical care from the right health care provider, at the right time, for the right reason, and in the right setting. The MHBP understands this. That's why we offer the services you need to help you select the right facility for you. For instance:

Did you know an urgent care center (UCC) can often treat you quicker than, and just as effectively as, an ER?



If you have an emergent illness or injury that requires immediate medical attention, you should go to a hospital emergency room (ER). For instance, if you experience a loss of consciousness, signs of heart attack or stroke, severe shortness of breath, or an injury such as a head trauma, the ER is the place to go.

However, in non-emergency situations, UCCs are a good choice for care. They are a logical alternative to the ER, which often involves an overcrowded lobby and long waiting times. UCCs are staffed by doctors and nurses who can treat many conditions—like sore throats, earaches, minor lacerations, sprains, skin rashes, colds, coughs, most fevers (unless there is a convulsion or extreme fever in a child) and simple fractures—and they're staffed with the same types of health care professionals that you would find in an ER. UCCs can also provide basic lab and X-ray services, and you can usually see a doctor much quicker than in an emergency room. No appointments are needed, and UCCs often have extended hours, or are open 24 hours a day.

Continues on page 2

**The Mail Handlers
Benefit Plan**

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Issue Highlights:

Back to School Basics	3
MHBP is Committed to Confidentiality	4
Brush Up on Your Dental Health	6
MHBP's New Hearing Benefit is Music to Your Ears . . .	7



Select the Right Health Care Provider, continued from page 1

Remember, in an emergency, dial 911 or go to the nearest hospital. However, if you do not have a true medical emergency, consider using a UCC.

Did you know you can save time and money by using an ambulatory surgical center (ASC)?



An ASC is a facility that performs surgical procedures that do not require an overnight stay—such as a colonoscopy, ear tube insertion, arthroscopic knee surgery and some eye surgeries. Having your surgery performed in an ASC is less costly than having it performed in a hospital, less stressful than an inpatient stay and less disruptive to your daily routine. Our network ASCs are credentialed by First Health, staffed by qualified professionals and are Medicare approved, so you can be confident that you'll receive the highest quality care.

But be sure to discuss with your physician whether any surgery you receive requires an overnight hospital stay.

Did you know that not all hospitals are created equal?

When it comes to the medical care you receive, what you really want is quality care at a reasonable cost—health care value. Some hospitals have better success rates than others when it comes to certain types of care. And if you need surgery and have to be hospitalized, you want to be admitted to a hospital that has a proven, consistent rate of success. We offer a way for you to evaluate facilities that participate in The **First Health**® Network.

A Web tool that lets you assess hospitals is available on our website. This hospital comparison tool allows you to look up information about network hospitals. You can find the link to the Hospital Comparison Tool by clicking on the “Health Education” icon. You can search for information based on your own criteria—what’s important to you—or by condition or procedure. You can also use this tool to see how many times a hospital has performed a certain procedure. The value of this rings in the old adage, “experience is the best teacher.” The more experience a hospital has at performing a procedure, the better it should be at it.

Come and try out this comparison tool, available on www.mhbp.com.

Did you know that we can help you find the right facility for your needs?



To find a network UCC, ASC or network hospital, call us at **1-800-410-7778** any time of the day or night. A member services representative will help you find the facility

closest to you, and will even call the facility to find out how long you'll have to wait to see a physician. Remember, we're always here for you. ☒

Important Notice

Effective October 1, 2004, the Department of Defense (DoD) regulation requiring FEHB plans to treat DoD facilities as PPO providers for purposes of the Plan's payment will no longer be in effect. Claims submitted by DoD providers located within the United States for services on or after this date will be considered at the non-network level of benefits. ☒

Back to School Basics

The school year has begun. You stocked your children with supplies (pencils, notebook paper and pink erasers), new clothes and gym shoes. But did you make sure that your back-to-school “to do” list included taking your children to the doctor or clinic for any necessary vaccinations.

The American Academy of Pediatrics (AAP) provides an immunization schedule for you to follow. Just check their website, www.aap.org. The AAP also recommends that college freshman (especially those who live in dormitories) and people traveling overseas get an immunization to avoid catching certain strains of the disease meningitis.

The MHBP covers 100% of the cost of routine childhood immunizations that are recommended by the AAP for members under the age of 22 years. After a \$10 co-payment per office visit, the Plan also covers well-child office visits to a PPO doctor for covered dependents up to the age of 18 years. So, take advantage of your MHBP benefits and keep your children healthy throughout their childhood and young adult years. ☒



High-Deductible Health Plans with HSAs



An offering that has savings potential

You may have heard about a new offering that's been approved recently by lawmakers. Health Savings Accounts (HSAs) are a feature available with high-deductible health plans (HDHPs). With HDHPs, members pay a lower premium, but have a higher deductible limit. In order to open an HSA, an individual has to be covered under an HDHP and make contributions to the HSA account. HSAs are tax-exempt savings accounts that work like Individual Retirement Accounts (IRAs), except the money in an HSA can only be used for health care costs. To open an HSA, an individual must not be enrolled in Medicare or covered by another non-high deductible health plan.

With an HSA, the employee, employer, or both, can contribute to the account in any given year.

A high-deductible health plan with an HSA may be the right choice for individuals who:

- are generally healthy and seek medical care for routine, preventive care needs. HDHPs typically cover a wide range of preventive care services at 100%.
- want to start saving on a pre-tax basis for medical expenses that are not covered by their Plan.
- want to start saving for retirement health expenses.

Stay tuned for updates regarding this innovative offering. ☒



MHBP is Committed to Confidentiality



The Mail Handlers Benefit Plan is committed to maintaining the confidentiality of your personal medical information (also known as protected health information, or PHI). PHI

includes information about any physical or mental health condition(s) you and your dependents have, and/or health care services you have received.

Following a federal law called the Health Insurance Portability and Accountability Act of 1996 (HIPAA), the U.S. Department of Health and Human Services issued a Privacy Rule. MHBP is in compliance with this rule, which limits the ways MHBP can use or disclose PHI about you or your dependents. As an MHBP member, you have the right to know how MHBP protects the confidentiality of your medical information.

For instance, you the member, your spouse and any covered adult-age children are all entitled to your own privacy protections. If your spouse calls with a question about the status of one of your claims, we can give an answer. But, if your spouse wants to know if you have visited a doctor, we will not give out that information unless you have given us a written authorization to do so. Even if your lawyer needs claims details from us, we will not provide them unless we have your written permission, using an authorization form that meets HIPAA Privacy Rule requirements. Also, when we are contacted by phone, we cannot release any protected health information, including claims status, unless we verify the caller's identity. In order to further protect your privacy, we do an identity verification

check on every call – including those from doctors and health care professionals.

A formal notice that details MHBP's privacy practices is available by visiting www.mhbp.com. When you visit the site, go to the Site Index, scroll down to HIPAA and click on Notice of Privacy Practices. (You can also click on the Privacy Standards link at the bottom of any page, then click on Notice of Privacy Practices.)

Two HIPAA-related authorization forms are also available on the MHBP website; these forms have links under the HIPAA heading in the Site Index:

- *Authorization for Release of Information Form (MH-119)* – You would complete this form in order to grant us permission to discuss your claim(s) with another individual.
- *Authorized Representative Form (MH-120)* – You would complete this form if you need to designate an authorized representative. Doing so would grant us broader permission to disclose or discuss your PHI with that individual.



Your doctor and other health care providers are also required to follow HIPAA privacy laws. So, don't be surprised if your provider asks you to read and sign a confidentiality statement. Each health care provider will have its own Notice of Privacy Practices, and the rules differ for health

care providers and health plans, such as MHBP. For general information about the Privacy Rule, visit www.hhs.gov/news/facts/privacy.html.

If you have questions about your PHI, call a member services representative, any time of the day or night, at 1-800-410-7778. They'll be happy to assist you. ☒

Use the MHPB Formulary to Save on Prescription Drugs



Today, many people prefer certain prescription drugs to treat their condition because they've seen them advertised on television and in magazines. But before you ask your doctor to prescribe one of these highly publicized drugs, you should always check the MHPB formulary.

What is a formulary?

A formulary is simply a list of covered prescription drugs. It's also called a drug guide. The MHPB uses a formulary to help ensure that you receive the medications you need at a price that's right for you and to give you choices of prescription drugs. All prescription drugs in the formulary have been approved by the Food and Drug Administration (FDA). Drugs are listed in three categories, or tiers: generics, preferred and nonpreferred. The amount you pay for a drug (your prescription drug co-payment) is based on what tier the drug falls within.

Always have a copy of the drug guide with you when you visit or call your doctor. You may also want to ask your doctor to consider prescribing a generic drug. Generic drugs must meet the same standards of quality and strength as the more highly publicized brand name drugs, but they can cost much less. You also pay a lower co-payment and have no deductible when you use generic drugs.

If there are certain prescription drugs that you take on an ongoing basis, you can also save money when you use the mail-order program. When you purchase

your prescription maintenance medications through mail order, you can receive up to a 90-day supply delivered to your mailbox.

If you need a copy of the drug guide or would like instructions on how to use the mail-order program, visit the MHPB website at www.mhbp.com or call us at 1-800-410-7778. ☒

See More Clearly with the Vision One Eyecare Program®

Even if you have perfect vision, it is very important to visit an eye doctor at least once a year for a complete exam. Certain eye diseases and disorders can sneak up on anyone—leading to vision problems or sometimes blindness. Also, walking around with the wrong eyeglass or contact lens prescription can produce headaches and increased stress while at work. A yearly visit to the eye doctor can help avoid some of these problems.

The MHPB makes it easy for you to take good care of your eyes. With the Vision One Eyecare Program®, you and your family can receive eyeglass exams for \$35, as well as discounts of up to 60 percent on eyeglasses and contact lenses from Vision One providers.

Remember, you should see an eye doctor right away if you experience a loss of vision, eye pain or irritation. And if you have any health problems, like diabetes, you may need to visit your eye doctor even more often.



To find a Vision One provider near you, or for more information about the Vision One Eyecare Program®, visit the MHPB website at www.mhbp.com or call 1-800-804-4384. ☒



Save with the Laser Vision Correction Program

You and your eligible dependents can receive substantial discounts with the Laser Vision Correction Program. Savings for laser surgery can be as much as \$800 for two eyes. The program uses The Cole LASIK Network, which has hundreds of locations nationwide.

Once you are enrolled in the program, the initial consultation is free of charge. To learn more about the program, or to schedule a free evaluation with a participating network surgeon in your area, call 1-888-705-2020. ☒

Brush Up on Your Dental Health

It will give you something to smile about



Your daily habits can promote healthy teeth and gums, and good dental care is pretty simple. By following a few steps, you can prevent problems and enjoy the benefit of healthier teeth and gums:

- Visit the dentist regularly.
- Brush your teeth thoroughly twice a day.
- Floss every day.
- Eat a healthy diet and don't snack between meals.
- Get a new toothbrush every three months.

Remember, tooth decay can be very painful, and dental problems can be very expensive. According to the National Center for Chronic Disease Prevention

and Health Promotion, recent studies suggest there's a link between oral bacteria and heart disease, stroke and diabetes. So, give yourself something to smile about. By developing a few good habits, you can help maintain good dental health.

The MHBP Federal Dental Plan can help you take care of your dental health



You can still add the MHBP Federal Dental Plan* to your MHBP benefits package. For an affordable group rate, you can take care of your dental health with 100% coverage

for preventive services like oral exams, cleanings and X-rays when you use participating dentists. To make it easy, the Plan includes a network of dentists with almost 65,000 locations across the country. And with MHBP Federal Dental, your benefits increase the longer you are enrolled.

Good dental health is central to your well being. Take care of your teeth and gums and take advantage of the MHBP Federal Dental Plan. You'll have something to smile about.

To find out more about what is covered under the MHBP Federal Dental Plan, call 1-800-254-0227 or visit www.mhbp.com. ☒

*Underwritten by First Health Life & Health Insurance Company and Cambridge Life Insurance Company.

HearPO Program is Music to Your Ears

As an MHBP member, you are now eligible to enjoy considerable savings on hearing services and hearing aid costs through the HearPO network, which is made up of licensed audiologists and board-certified hearing instrument specialists. You get access to over 1,300 HearPO locations across the United States, testing performed by licensed hearing care professionals, access to over 280 hearing aid choices, comprehensive follow-up services at no charge for one year, and discounts on hearing aid repairs.

To learn more about HearPO, or for a listing of providers in your area, call **1-888-HEARING** (432-7464). Please remember to identify yourself as an MHBP member. And to enjoy additional savings on HearPO's discounted prices, take advantage of the introductory offer coupon included in this newsletter. ☒



The Federal Long Term Care Insurance Program

Long term or custodial care is the actual assistance individuals receive when they need help performing activities of daily living—like getting dressed, eating or bathing—or, if they develop a severe impairment, like Alzheimer's disease.

Unfortunately, the need for long-term care can come at any time. Statistics show that 40% of people receiving long-term care services are working adults between 18 and 64 years of age. In fact, about 60% of

people who reach age 65 will need these services during their lives. And the cost of care can be staggering.

As a Federal or Postal employee, or annuitant, you can help protect yourself from the high cost of custodial care by enrolling in the Federal Long Term Care Insurance Program (FLTCIP).

You don't have to wait to apply for FLTCIP. The program accepts applications from eligible members at any time. To find out more about this program and to request an application, please call **1-800-582-3337 (TTY 1-800-843-3557)**, or visit www.ltcfeds.com. ☒

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Network Updates

Doctors, hospitals, dentists, pharmacies, labs—you can always find out which providers participate in The **First Health**®

Network by calling **1-800-410-7778** anytime—24 hours a day, 365 days a year.

The Network continually brings you access to new providers wherever you live, work or travel.

It's always a good idea to confirm your provider's current network status when you make an appointment.

If you would like to have your doctor, dentist or pharmacy added to the Network, simply complete a nomination form, give it to your health care provider to complete their portion and send it to First Health. We'll take it from there. You can obtain a nomination form at www.mhbp.com under "Quick Links" by selecting "Forms." 