

## PEIA Makes CMS-required Plan Changes

PEIA has made CMS-required changes to the PEIA PPB Plans A, B, C, and D. CMS has determined that PEIA is no longer a “grandfathered plan” for purposes of the Affordable Care Act. Therefore, there are several plan changes that were adopted effective July 1, 2023, to bring the plan into federal compliance:

**Accident-related dental services** – removed requirement that treatment begin within 72 hours and end within 6 months.

**Air Ambulance** – removed the \$25,000 per trip benefit limit.

**Appeals process** – PEIA updated its appeals process to meet the federal guidelines. The new process is outlined in detail in the Plan Year 2024 Summary Plan Description.

## UMR offers CARE Cues

UMR has made it easier for members to stay on top of their health by introducing CARE Cues. CARE Cues will notify you of your “gaps in care.” Gaps in care include things like missed wellness/preventive care opportunities, the opportunity for condition management, immunizations that are overdue, support for a chronic condition, and potential drug interactions identified through claims data.

The CARE Cues program is integrated into the umr.com portal. You’ll receive email notifications to the address you registered with UMR. When you visit umr.com, you

**Autism** – removed the \$30,000 annual benefit limit.

**Emergency Services** – removed language limiting non-emergency use of the emergency room to 6 visits in a plan year. PEIA continues to monitor emergency room usage, and members who visit the emergency room for non-emergency services an excessive number of times may be placed on Complex Condition CARE or otherwise have payment for their ER services restricted or terminated.

**High Risk Behavior** – removed additional emergency room copay of \$500 for emergency treatments received as a result of high-risk behaviors, such as: DUI/DWI or drug-related accidents, accidents while driving motorcycle or UTV/ATV without a helmet or failure to wear seatbelt(s).

will see a health care taskbar called “Things to do.” Under “Things to do” you’ll find suggestions for actions you can take, education you can take advantage of, and prompts to schedule care needed to close your gaps in care. If you call UMR, the Plan Advisor team can assist with closing gaps in care by helping you locate a provider or calling your current provider for the care you may need.

We encourage you to take advantage of this program to take care of yourself!



# PEIA News



## Brian Cunningham Takes Helm as PEIA Director

Brian is a life-long West Virginian who grew up in Clay County and currently resides in Charleston with his wife Amanda and son Ethan. He enjoys outdoor activities including fishing, hunting, riding ATVs, and watching his son play soccer. Although, he seems to

spend most of his outdoor time on lawn care and never-ending home maintenance. An avid WVU fan, Brian is happiest during that special time of the year when the Mountaineers have a football and basketball game on the same day.

After graduating from WVU, he embarked on a year of service as an AmeriCorps Health Fellow and often jokes he’s been in nearly every Foodland parking lot and community center in West Virginia helping to enroll children and families in Medicaid, CHIP, and other safety-net programs.

Following the year of service, Brian joined the WV

Primary Care Association, working with Federally Qualified Health Centers (FQHCs). His passion was to serve the underserved by supporting FQHCs in their mission to deliver affordable, high-quality care to West Virginians.

Brian then worked for two years delivering consumer directed health products such as Health Savings Accounts (HSAs), was a private consultant, and was the first director of the WV Central Fill Pharmacy.

Brian followed that with a 15-year stint at Optum, spearheading, among other things, the effort to deploy a nurse advice line for Medicaid managed care organizations and Optum’s effort to install WVDHHR’s new integrated eligibility system.

In July 2023, Governor Justice appointed Brian as the Director of PEIA. Brian is grateful to Governor Justice and Department of Administration Secretary Mark Scott for this opportunity and is proud to serve the hardworking and dedicated employees of the State of West Virginia. He is particularly thankful for the tremendous PEIA team and its commitment to West Virginia. His motto is ‘strive to do the right thing’ and that’s how he approaches the role as PEIA Director.

## It’s Vaccination Time – Know Your Benefits!

It’s the time of year when everyone is encouraging you to get your vaccinations – COVID, flu, pneumonia and RSV. You need to understand how these vaccines are covered to get the most out of your benefits.

COVID – covered at 100% for plan members aged 6 months and over.

Flu -- covered at 100% for plan members aged 6 months and over.

Pneumonia – covered at 100% for plan members aged 5 and under or aged 65 and over; normal plan benefits (80/20 Plans A, C & D or 70/30 Plan B) for everyone else.

RSV – covered at 100% for members 60 and over; normal

plan benefits (80/20 Plans A, C & D or 70/30 Plan B) for everyone else.

You have several options for getting your immunizations:

- at your physician’s office, but you may pay an office visit copay for the visit.
- through your local health department.
- at your local pharmacy, but the pharmacy must bill them as a medical benefit through UMR.

Most large chains and some small local pharmacies will bill your immunizations through UMR. Immunizations cannot be billed to Express Scripts as a drug benefit.

We encourage you to get your immunizations this respiratory-disease season!

# Diabetic Supplies

Effective January 1, 2024, PEIA will move all diabetic supplies, including continuous glucose monitors (CGMS), CGM supplies, lancets and test strips, from the medical benefit plan to the pharmacy benefit plan administered by Express Scripts for the PPB Plans. Diabetic supplies will not be covered under the medical benefit, but CGMs and their supplies still require prior authorization from RDT. Traditional insulin pumps and their supplies are not affected and will continue to be a medical benefit only.

To assure a smooth transition, your provider should

send your prescription to your participating local pharmacy or Express Scripts Home Delivery Pharmacy before January 1, 2024. For additional information on how to take control of your prescription plan or any other questions about your account or coverage, visit [express-scripts.com](http://express-scripts.com), download the Express Scripts mobile app or call Member Services at (855) 224-6247.

If you have questions or concerns, please call UMR at (888) 440-7342 for answers.

# Using Services in WV Could Save You Money

Residents of West Virginia have many choices for their health care services, including those from in-network, out-of-state facilities in bordering counties. While many more-advanced services may not be available within a reasonable driving distance in state, there are some outpatient services that are widely available from West

Virginia providers that could save you a lot of money in coinsurance. Since your coinsurance amount is based on the allowed amount for the facility you choose, you may want to shop around. Here's a comparison of some common procedures available in the Eastern Panhandle that are often performed at Winchester Medical Center:

Procedure Description	Eastern Panhandle in-state			Winchester Medical Center		
	Avg. Allowed	Avg. 20% Coinsurance	Avg. 30% Coinsurance	Avg. Allowed	Avg. 20% Coinsurance	Avg. 30% Coinsurance
Arthroscopy of the knee	\$4,704	\$941	\$1,411	\$10,836	\$2,167	\$3,251
Tonsillectomy/Adenoidectomy under age 12	\$2,523	\$505	\$757	\$3,278	\$656	\$983
Colonoscopy with polyp removal	\$474	\$95	\$142	\$1,742	\$349	\$523
Cataract Surgery	\$1,197	\$239	\$359	\$3,376	\$675	\$1,013
Head/Brain CT scan without contrast	\$359	\$72	\$107	\$725	\$145	\$218
Brain/Brain Stem MRI without contrast	\$594	\$119	\$178	\$1,163	\$233	\$349
Brain/Brain Stem MRI with contrast	\$943	\$189	\$283	\$1,714	\$343	\$514
Chest CT without contrast	\$382	\$76	\$115	\$498	\$100	\$149
Chest CT with contrast	\$527	\$105	\$158	\$835	\$167	\$251
MRI of the spine without contrast	\$588	\$118	\$176	\$1,078	\$216	\$323
MRI of the spine with contrast	\$802	\$161	\$241	\$1,644	\$329	\$493

UMR offers a Health Cost Estimator tool that can provide similar information, personalized for you, for Plan members across the state. Simply go to [UMR.com](http://UMR.com), log in or register for an account, then scroll down to Health Cost

Estimator and enter your information.

Shopping for common procedures and tests can save you lots of money in coinsurance.

# Get Connected with the UMR App!

UMR has a **smarter, simpler, faster** way to manage your health care benefits, right from the palm of your hand. With just a tap, you can:

- Access your digital ID card
- View your plan details on-demand – anytime, anywhere
- Find out if there is a copay for your upcoming appointment

- Call or message UMR's member support team

Stay connected to your health care and download the UMR app today!

Scan the QR code or visit your app store to get started.



# Revive Health

On May 1, 2023, iSelectMD, PEIA's telehealth vendor, changed to Revive Health. Revive Health acquired iSelectMD in August 2022 and made the change for PEIA members effective May 1. The name and phone number have changed, but the benefit is the same.

Services of a telehealth vendor are covered at 100% after a \$10 copayment. To reach Revive Health, 24/7/365 call (844) 433-8123. To be sure you can access care when you need it, you may want to register for Revive Health in advance. Here's how:

Go to <https://member.myrevive.health/selfsignup>

1. Enter your Enrollment Code: **WV1144**, then your first and last name and your e-mail address and submit.

2. You'll receive an email with a link to complete the registration process.
3. Create a unique password and submit. You will be linked to your personal Revive Health Care portal to access the Care services that have been selected for you.

There are two easy ways to access telehealth care:

1. Online at <https://member.myrevive.health> or
2. By phone at (844) 433-8123

If you have questions or need assistance, contact Revive Health's Customer Care at [Customercare@revive.health](mailto:Customercare@revive.health) or (888) 220-6650.

# Spousal Surcharge Q & A

During Open Enrollment this spring, PEIA was required to implement a spousal surcharge, meaning that if you have your spouse on your PEIA coverage and your spouse is eligible for coverage from his/her employer, then PEIA must charge approximately \$150 extra per month. We mailed out affidavits to everyone who was required to complete one. There was a LOT of confusion about this surcharge, so we're going to try to clarify it even further.

Q. I'm married, but my spouse isn't on my health PEIA coverage. Do I have to pay the surcharge or complete an affidavit?

A. No. If your spouse isn't covered on your PEIA health coverage, you don't have to do anything and you won't be charged the surcharge.

Q. My spouse is also a public employee and is eligible for PEIA coverage from his/her employer, but we have a family plan in my name. Do I need to pay the surcharge or complete an affidavit?

A. Two public employees who are married to each other do not have to pay the surcharge.

- If your spouse has basic life insurance with PEIA, then you don't need to complete an affidavit, since we know that you both have coverage.
- If your spouse doesn't have basic life insurance with PEIA, then you need to complete an affidavit to avoid the surcharge because PEIA has no way to know your spouse is also a public employee.

Q. I heard that I had to remove my spouse from my coverage because he/she has other employer-sponsored health coverage available. Do I have to drop my spouse?

A. No. Your spouse can still be covered by PEIA, but you will have to pay the monthly premium surcharge every month your spouse is on the PEIA plan.

Q. I'm retired and have my spouse on my PEIA coverage, do I have to pay the surcharge?

A. No. The spouse surcharge is only applied to active employees, not to retirees.

Q. My spouse is on my coverage, but he/she has Medicare (or Medicaid or TRICARE/Champus). Do I have to pay the surcharge?

A. No, the surcharge will not apply to you.

Q. My spouse is retired. Do I have to pay the surcharge?

A. No. The surcharge doesn't apply if your spouse is retired.

Q. My spouse retired but went back to work (part-time/full time) and is offered employer-sponsored health insurance but did not take it.

A. If your spouse is actively employed and has employer-sponsored coverage available (even if he/she didn't take it), then you will pay the surcharge if your spouse is on your PEIA coverage.

Q. My spouse has insurance through a union and when my spouse is laid off, he loses the insurance.

A. If your spouse has coverage through PEIA, you will be charged the surcharge as long as the union coverage is in effect. If he/she loses union coverage, you'll need to complete a new spouse affidavit – either by calling PEIA's Helpline at 877-676-5573 to request one or by going online to [peia.wv.gov](http://peia.wv.gov) and clicking on the Manage My Benefits button to complete a new affidavit online to have the surcharge removed. The change will be effective the first day of the month following receipt of the update.

Q. My spouse has employer-sponsored coverage, but PEIA is his/her secondary coverage. Do I have to pay the surcharge?

A. Yes, you must pay the surcharge, even if PEIA is secondary. PEIA is always secondary to your spouse's employer-sponsored coverage.