

State Contributions to Benefits Remain as Published

The General Assembly has appropriated funds for the FY 2012–13 total compensation budget, which includes benefits for the FY 2012–13 plan year, July 1, 2012–June 30, 2013. This appropriation bill, House Bill 12-1335, but commonly referred to as the “Long Bill,” was signed by Governor Hickenlooper on May 7. The State’s employer contributions to medical and dental benefits, as posted online on April 26 in the April edition of *HealthLine*, remain unchanged in this bill by both the General Assembly and the Governor.

The State contributions to medical and dental benefits posted on the [Employee Benefits website](#) and published in the [April 2012 issue of HealthLine](#), are now the official premiums for the FY 2012–13 plan year.

Open Enrollment Changes Effective July 1, 2012

DON'T FORGET—The choices and changes you made for your benefits during the recent open enrollment (which concluded May 16, 2012), will become effective on July 1, 2012, the beginning of the FY 2012–13 plan year. If you did not participate in this open enrollment, then your current elections, except for flexible spending accounts, will roll forward into the new plan year. Deductions that reflect the FY 2012–13 benefits premiums will be seen in your pay advice for the month of July.

You can review your FY 2012–13 open enrollment selections in the online Benefit Administration System (BAS).

- ✓ Log in to the system using your username and password.
- ✓ **If you participated in the recent open enrollment**—On the “Welcome” page, click “Personal Documents” near the top of the page, above the blue bar. On the next page, click on the “FY13 Open Enrollment Confirmation” to view your open enrollment choices for FY 2012–13 (if you completed more than one open enrollment transaction, click on the last and most recent confirmation).
- ✓ **If you did not participate in open enrollment**—On the “Welcome” page, go to the blue bar and under “Benefits,” click “Open Enrollment FY13 Benefit Summary.”

ID Cards

All employees and family members enrolled in the self-funded medical options, administered by UnitedHealthcare will receive new medical ID cards by the last week of June. Note that the UnitedHealthcare cards will have a new phone number for Nurse-line, the 24-hour line to get advice from a registered nurse.

If you changed medical or dental insurance during open enrollment, or enrolled for the first time, you will receive new medical and dental insurance cards, also by the last week in June. You can make appointments for July once you have your card. If you need to schedule a July appointment before receiving your card, or if you do not receive your new medical card or dental card by June 27, please contact the insurance carrier/administrator directly.

- **United Healthcare**—1.877.283.5424
- **Kaiser Permanente**
 - ▶ **Denver/Boulder & Northern Colorado**—303.338.3800
 - ▶ **Southern Colorado**—1.888.681.7878
- **Delta Dental**—1.800.610.0201

Shingles Vaccinations



Did you know that for the State medical options, the shingles vaccine is **covered at 100%** as preventive care for those age 60 or older? All state medical options will pay for a single dose of the shingles vaccine with no co-pay or deductible amount required. Such preventive coverage is a provision of the Patient Protection and Affordable Care Act (PPACA, or federal healthcare reform). The shingles vaccine is one of the services recommended by the United States Preventive Services Task Force (USPSTF) and other health organizations to be considered preventive services.

A single dose of the shingles, or herpes zoster, vaccine between the ages of 60–75 is recommended regardless of whether you may have had a prior episode of shingles or not. The vaccination is mostly commonly prescription Zostavax.

If the shingles vaccine is administered to those under 60, it will not be considered preventive, and will be subject to co-pays and/or deductible.

Some People Should Not Be Vaccinated

The USPSTF warns that people with chronic medical conditions *may be* vaccinated unless the vaccine would worsen their condition or the vaccine would conflict with their current treatment. Anyone considering vaccination should first consult with their doctor.

The following people **should not** receive the shingles vaccine.

- ✗ People who are allergic to the antibiotic neomycin or any component of the vaccine (including gelatin) should not receive this vaccine.
- ✗ Individuals who have a weakened immune system caused by treatments that they are taking such as radiation or corticosteroids, or due to conditions such as HIV/AIDS, cancer of the lymph, bone, or blood.
- ✗ Pregnant women should not receive this vaccine.

UnitedHealthcare Members

Typically doctors do not stock the vaccine in their offices, as it has a short shelf-life and has to be refrigerated. Because of this, it is typically pharmacies that administer the vaccination.

The vaccine is covered at 100%, as preventive, when using one of the **in-network pharmacies** listed below. Members should present their UnitedHealthcare ID card at the pharmacy.

- Walgreens
- Target
- Rite-Aid

Kaiser Permanente Members

Denver/Boulder & Northern Colorado

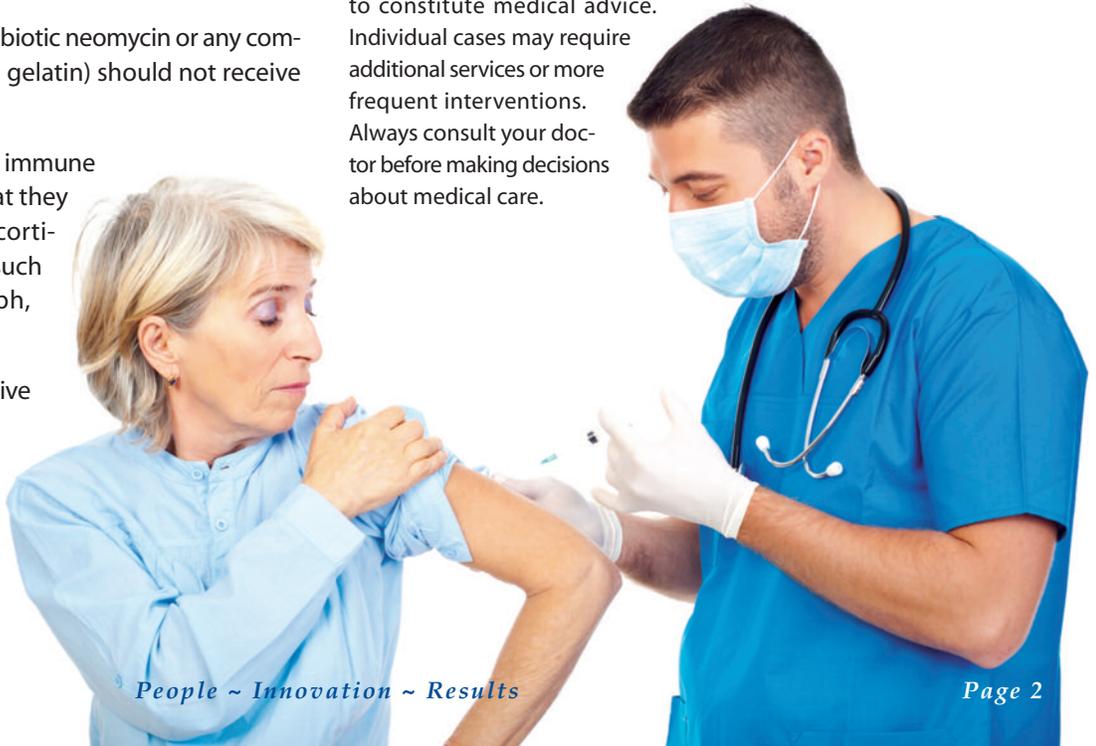
- Kaiser facilities that offer primary care do keep the shingles vaccine on-site for administration.

Southern Colorado

- Some doctors do stock the vaccine, but members should call their doctor first to make sure it is available.

This information has been provided for your use in determining your needs for treatment. It is not intended to constitute medical advice.

Individual cases may require additional services or more frequent interventions. Always consult your doctor before making decisions about medical care.



Updates & Reminders

- ▼ Insurance Company Phone Numbers—If you have questions about your coverage, contact the companies at these customer service numbers.
 - ▶ UnitedHealthcare—1.877.283.5424
 - ▶ Kaiser Permanente—Denver/Boulder & Northern Colorado: 303.338.3800/Southern Colorado: 1.888.681.7878
 - ▶ Delta Dental—1.800.610.0201
 - ▶ Minnesota Life—1.877.828.7728
 - ▶ ASIFlex—1.800.659.3035
- ▶ **COBRA Information**—Are you leaving State employment soon or will a dependent lose eligibility for coverage (due to divorce or a dependent child reaching age 26)? Will you or that dependent want to continue medical and/or dental coverage? Then COBRA continuation coverage is an option. For more information, contact the State’s COBRA administrator at **1.877.725.4545** or visit the [Employee Benefits website](#) and click on “COBRA.”
- ▶ **Optional Life and Long-Term Disability Enrollment Year-Round**—Employees can elect optional life (for employee and spouse) and long-term disability (LTD) insurance any-time throughout the year. Both types of insurance will require the applicant to prove good health by submitting evidence of insurability. Elect optional life and/or LTD insurance using the online Benefits Administration System (BAS). Access the BAS at www.colorado.gov/dpa/dhr/benefits; click “Enroll/Change Your Benefits.”
- ▶ **31-day Window for Changes**—For events such as **BIRTH** or **MARRIAGE** or when a spouse **GAINS** or **LOSES** benefits with their job, any change to your state benefits must be completed **within 31 days** of the event. Day One is the date of the event itself. If you miss this 31-day window, you’ll have to wait until the next Open Enrollment to make your change.
- ▶ **My Total Compensation Statement**—Find out the value of what the State is investing in you by using this summary of all components of your total compensation—pay, benefits, leave and more. You just need a copy of your most recent pay advice and the tool takes you through the various parts of your compensation. Find out more in “What is Total Compensation?” on page two of the **January 2012 issue of HealthLine**.

