

## State Health Plan for Teachers and State Employees

### 80/20 PPO Plan

# Benefits Booklet

January 1, 2018-December 31, 2018





## 80/20 PLAN (PPO) BENEFITS BOOKLET

Welcome to the *State Health Plan*'s 80/20 PPO Plan, also referred to in this benefits booklet simply as your health benefit plan, or the PPO Plan. Your health benefit plan is offered under a Blue Options Plan administered by *Blue Cross and Blue Shield of North Carolina (BCBSNC)*.

**Please read this benefits booklet carefully so that you will understand your benefits. Your *doctor* or medical professional is not responsible for explaining your benefits to you.**

The *State Health Plan* has contracted with *BCBSNC* to use its Blue Options network. As a *member* of the PPO Plan, you will enjoy quality health care from the Blue Options network of health care *providers* and easy access to *specialists*. Blue Cross and Blue Shield of North Carolina provides administrative services only and does not assume any financial risk or obligation with respect to claims. You also have the freedom to choose health care *providers* who do not participate in the Blue Options network.

You may receive, upon request, information about your health benefit plan, its services and *doctors*, including this benefits booklet with a benefit summary, and a directory of *in-network providers*.

If any information in this booklet conflicts with North Carolina state law or it conflicts with medical policies adopted under your health benefit plan, North Carolina law will prevail, followed by medical policies. If any of the Blue Cross and Blue Shield of North Carolina medical policies conflict with the *State Health Plan* medical policies, the *State Health Plan* medical policies will be applied. The availability of benefits is described in this booklet and *member* benefit language should be reviewed before applying the terms of any medical policy.

The benefit plan described in this booklet is subject to the Health Insurance Portability and Accountability Act of 1996 (HIPAA). A summary of benefits, conditions, limitations and exclusions is set forth in this benefits booklet for easy reference.

The information contained in this booklet is supported by medical policies which are used as guides to make coverage determinations. For specific detailed information, or medical policies, please call Customer Service at 888-234-2416, or visit the *State Health Plan* website at [www.shpnc.org](http://www.shpnc.org). To obtain a copy of the General Statutes visit the North Carolina General Assembly at [www.ncga.state.nc.us](http://www.ncga.state.nc.us) and search for Article 3B in Chapter 135.

As you read this benefits booklet, keep in mind that any word you see in **italics (*italics*)** is a **defined term** and will appear in the "Definitions" section at the end of this benefits booklet.

### **Aviso Para Miembros Que No Hablan Ingles**

Este folleto de beneficios contiene un resumen en inglés de sus derechos y beneficios cubiertos por su *Plan de beneficios de salud*. Si usted tiene dificultad en entender alguna sección de este folleto, por favor llame al departamento de Atención al Cliente para recibir ayuda.

Notice for *Members* Not Conversant In English: This benefits booklet contains a summary in English of your rights and benefits under your health benefit plan. If you have difficulty understanding any part of this booklet, contact Customer Service to obtain assistance.

For your convenience, we have additional ways for you to access your *member* information. Our website, [www.shpnc.org](http://www.shpnc.org), offers a variety of health-related resources – including online forms, search tools to help you find a *doctor*, and general information about your plan. Additionally, our prompt and knowledgeable Customer Service Center is just a phone call away at 888-234-2416.



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## WHO TO CONTACT

<b>State Health Plan Customer Service</b> 888-234-2416 TTY and TDD: 800-442-7028 8 a.m-6 p.m., Monday-Friday, except holidays	For questions regarding your benefits, claim inquiries and new <i>ID card</i> requests.
<b>Medical Certification or Prior Authorization</b> 800-672-7897	To request <i>prior authorization (certification)</i> for certain <i>out-of-network</i> or out-of-state services.
<b>Medical Claims Filing</b>	Mail completed medical claims to:  <i>State Health Plan</i> c/o BCBSNC PO Box 30087 Durham, NC 27702
<b>State Health Plan Eligibility and Enrollment Center</b> 855-859-0966 8 a.m.-5 p.m., Monday-Friday, except holidays	For questions regarding <i>member</i> eligibility and enrollment.
<b>COBRA Administration and Individual Billing Services Customer Service</b> 877-679-6272 8 a.m.-5 p.m., Monday-Friday, except holidays	For questions relating to premium payments for <i>Retirees/COBRA/Surviving Spouses</i>
<b>CVS/Caremark PBM Customer Service</b> 888-321-3124 24 hours a day, 7 days per week	For questions regarding your <i>pharmacy</i> benefits, to obtain a preferred medication list, information on <i>prior authorizations</i> , refills, and more.
<b>CVS Caremark PBM Specialty Pharmacy</b> 800-238-7828	For information regarding the specialty pharmacy services offered or to obtain <i>specialty medications</i> .
<b>CVS Caremark PBM - Prior Authorization Number</b> 800-294-5979	To initiate a <i>prior authorization</i> request for a <i>prescription medication</i> .
<b>Prescription Medication Claims Filing</b>	Mail completed <i>prescription medication</i> claim forms to:  CVS/Caremark P.O. Box 52136 Phoenix, Arizona 85072-2136
<b>Medical and Pharmacy Appeals</b> 888-234-2416	See " <i>Appeals Correspondence</i> " in "What If You Disagree With A Decision?"
<b>Mental Health Case Manager:</b> 800-367-6143  <b>Mental Health TTY (Teletypewriter)</b> 866-835-2755	For mental health and <i>substance abuse</i> <i>prior authorization</i> and <i>certification</i> available 24 hours a day, 7 days per week.  Services for the speech and hearing impaired are available.



## Who to Contact



<b>Mental Health Appeals</b> 800-367-6143	See " <i>Appeals</i> Correspondence" in "What If You Disagree With A Decision?"
<b>NC Tobacco Use Quitline (QuitlineNC)</b> 800-QUIT-NOW (800-784-8669) 24 hours a day, 7 days per week	For tobacco cessation assistance including obtaining nicotine replacement therapy.
<b>BlueCard<sup>®</sup> PPO Program</b> 800-810-2583 (Inside USA) 804-673-1177 (Call collect outside USA)	To find a participating <i>provider</i> outside of North Carolina and worldwide.
<b>Blue365<sup>™</sup></b> 1-855-511-2583 8 a.m. - 6 p.m. Monday-Friday, except holidays	Health and wellness information support and services, and special <i>Member</i> savings available 365 days a year.
<b>N.C. Department of State Treasurer</b> <b>Retirement Systems Division</b> 3200 Atlantic Avenue Raleigh, NC 267604 919-814-4000 or 1-877-NCSECURE (1-877-627-3287) <a href="http://www.myncretirement.com">www.myncretirement.com</a>	If you are a benefit recipient ( <i>Retirees</i> , <i>Beneficiaries</i> , <i>Disability recipients</i> ) and you have questions about your retirement benefits.
<b>Blue Connect<sup>®</sup></b> <a href="http://www.shpnc.org">www.shpnc.org</a>	To enroll in a safe, secure customer service website in order to: Check claim status, verify benefits and eligibility, change your address or request a new <i>Identification Card (ID card)</i> . (Note: Blue Connect formerly known as My <i>Member Services</i> .)
<b>State Health Plan Website</b> <a href="http://www.shpnc.org">www.shpnc.org</a>	To obtain information on Pharmacy benefits, search for a <i>provider</i> , obtain claim forms, obtain "proof of coverage" portability certificates, NC HealthSmart and more.
<b>State Health Plan Office</b> 919-814-4400	Enrollment exceptions for Non-Active <i>Members</i> ( <i>Retirees</i> , <i>Disabled Members</i> , <i>RIF Members</i> , <i>COBRA Members</i> , former <i>Members</i> of the General Assembly and other 100% contributory <i>Members</i> ). Active <i>members</i> must contact their <i>HBR</i> .

## Legal Notices



Laotian

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍ  
ເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສຍຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ.  
ໂທ 919-814-4400.

Japanese

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。919-814-4400.

### Notice of Grandfather Status

The State Health Plan believes the 70/30 Plan is a “grandfathered health plan” under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to Customer Service at **888-234-2416**. You may also contact the U.S. Department of Health and Human Services at **www.healthcare.gov**. As a plan “grandfathered” under the Affordable Care Act, cost sharing for preventive benefits may continue as it does currently and be based on the location where the service is provided.