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state health plan | retirement systems

WINTER 2016

trends

Members can save by using Patient-Centered Medical Home

Beginning January 1, 2016, the State Health Plan began offering incentives for members to receive their care from a Patient-Centered Medical Home (PCMH) affiliated with BlueCross BlueShield of South Carolina.

To encourage use of a PCMH, the State Health Plan will waive the $12 physician office copayment for Standard Plan members. In addition, Savings Plan and Standard Plan members will pay 10 percent coinsurance, rather than 20 percent, after they have met their annual deductible.

In a PCMH, a health care team coordinates and provides comprehensive care for its patients. A PCMH is typically led by a doctor, and it may include nurses, a nutritionist, health educators, pharmacists and behavioral health specialists. The focus in a PCMH is on coordinating care and preventing illnesses rather than waiting until an illness occurs and then treating it.

More than 200 PCMH practices are available in South Carolina. The map on Page 4 shows how many PCMHs are offered in each county.

To search for a PCMH, go to StateSC.SouthCarolinaBlues.com. On the home page, select the box labeled "PCMH."

Preventive screenings top 40,000

Significant increases in other wellness benefits

The South Carolina Public Employee Benefit Authority's *Free in '15* campaign exceeded expectations.

Under the *Free in '15* campaign, the preventive screening, No-Pay Copay (formerly known as the Generic Copay Waiver program) and the shingles

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Wait, there's more!

In 2016, the State Health Plan will offer more value-based benefits, including diabetes education, colonoscopies, adult vaccinations and tobacco cessation. Read more about these benefits on Page 3.

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vaccine were provided at no cost to qualifying State Health Plan members in 2015.

Preventive screenings

The number of members who had a preventive screening increased 76.2 percent, from 23,626 in 2014 to 41,622 in 2015.

The number of employer screening dates increased from 591 to 1,026, an increase of 73.6 percent.

No-Pay Copay

An average of 7,632 members were enrolled in the No-Pay Copay program in 2015, an increase of 111.1 percent from 3,615 from 2014.

The month with the highest number of participants was December, with 9,727.

Shingles vaccine

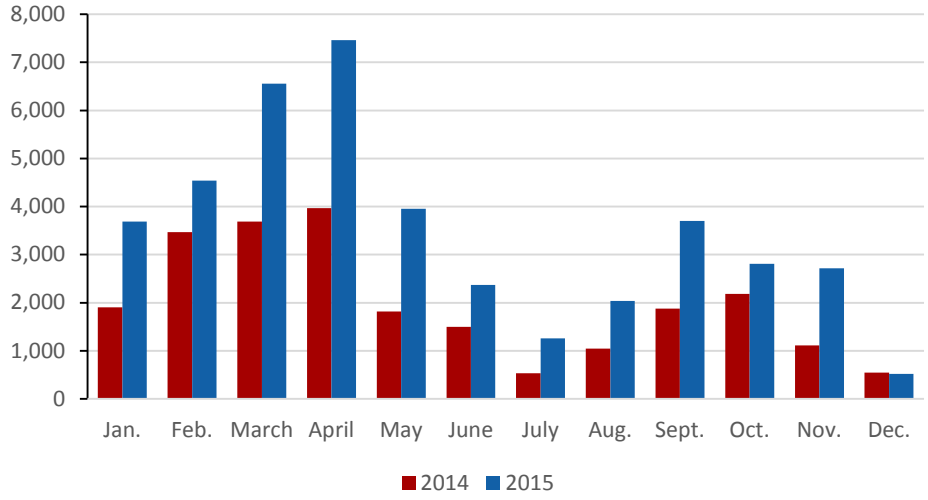
The number of members who received the shingles vaccine during 2015 rose 30.0 percent to 9,783 from 2014's total of 7,525.

Flu vaccine

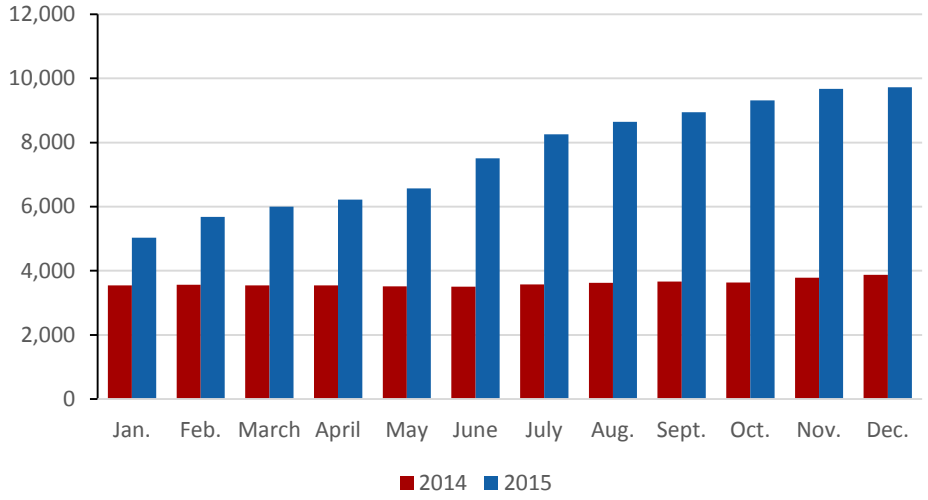
The free flu vaccine was offered to qualifying members beginning July 1, 2015. From then until the end of the year, 59,919 members received their flu shot at no cost.

2014 and 2015 comparisons

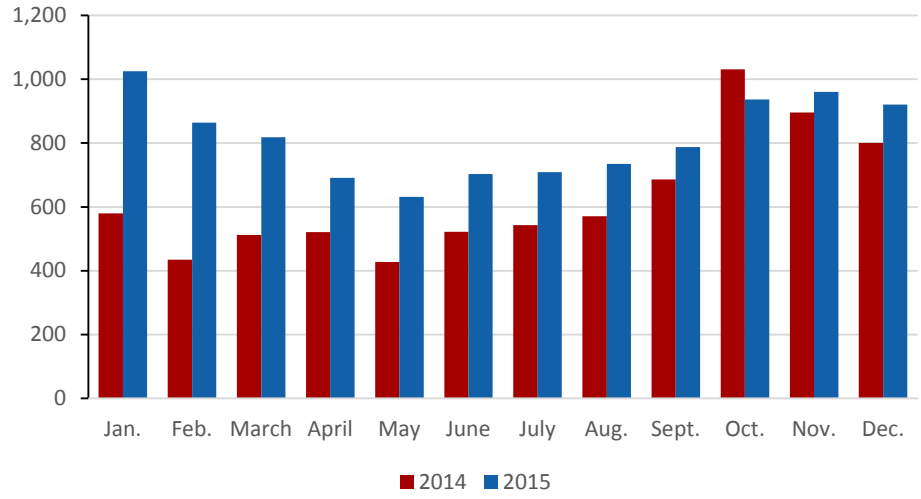
Preventive screenings



No-Pay Copay



Shingles vaccine



More value-based benefits being offered to members in 2016

PEBA aims for a healthier membership by helping reduce financial barriers

Building upon the success of the *Free in '15* campaign, the Public Employee Benefit Authority (PEBA) will offer more benefits at no cost to State Health Plan primary members at network providers and pharmacies in 2016.

The goal of this ongoing program, PEBA Perks, is to help identify health issues early before they become a health crisis. These benefits are labeled *value-based* because financial barriers for patients are removed for services that produce better health outcomes and could help lower future costs for treating a disease or illness.

peba Perks℠
VALUE FOR A HEALTHIER STATE

Qualifying members can continue to take advantage of the preventive benefits offered in 2015 at participating providers, and below are brief descriptions of the new offerings.

More information can be found at www.PEBAperks.com.

Diabetes education

Diabetes education trains diabetics to manage their condition to avoid disease-related complications. People who receive diabetes education are more likely to use primary care and preventive services, to take medications as prescribed, and to control their blood glucose, blood pressure and cholesterol levels.

Colonoscopy

Early stage colorectal cancer can be prevented and detected early through screening. The State Health Plan has removed a patient's out-of-pocket cost for diagnostic colonoscopies and routine screenings, including the pre-surgical consultation, the generic prep kit, the procedure itself and associated anesthesia.

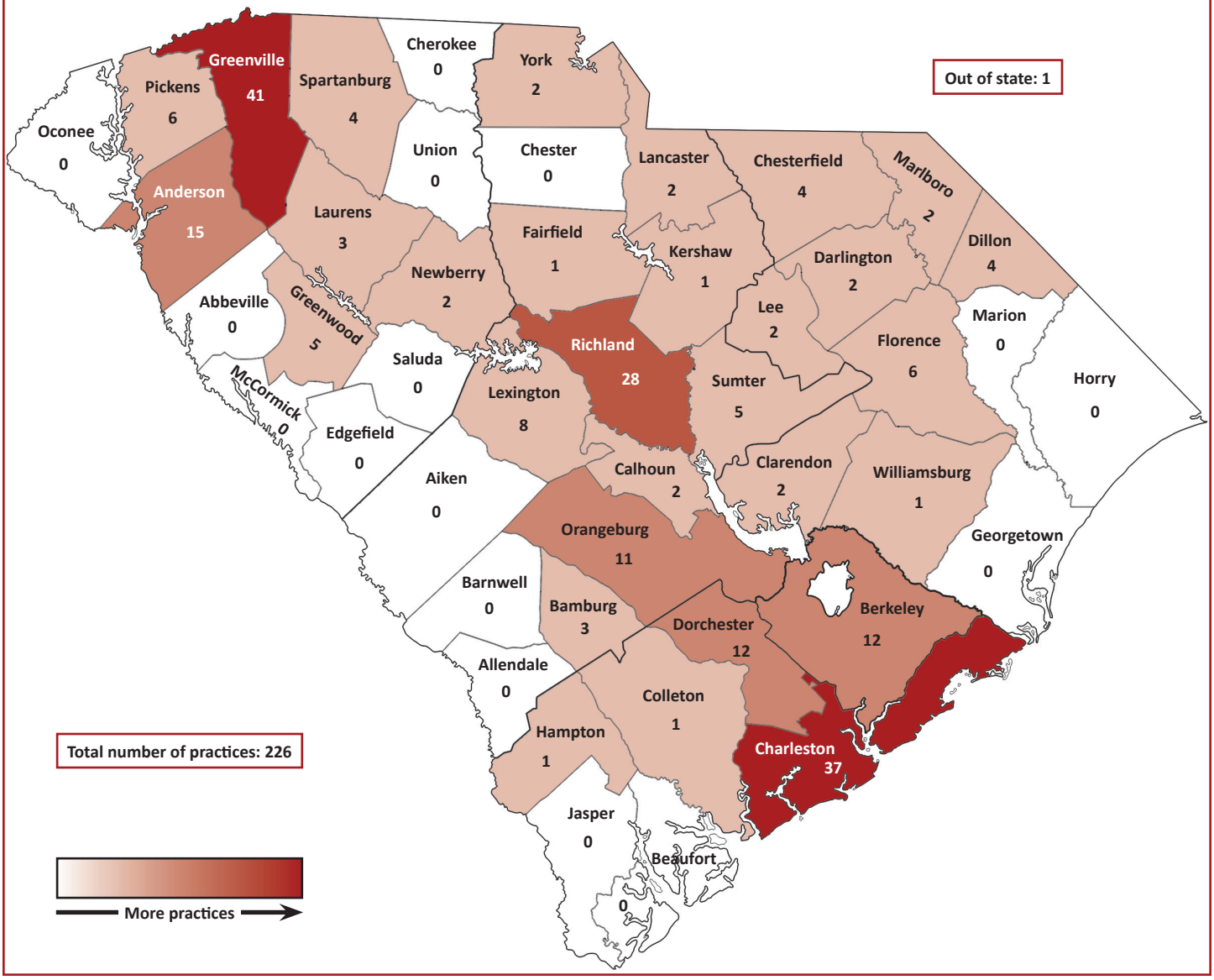
Adult vaccinations

As recommended by the Center for Disease Control (CDC), the State Health Plan will cover all adult vaccinations within specified age parameters at no cost to the member. If a member receives the shot in a network doctor's office, the vaccine and the administration fee will be paid in full; any associated office visit charges will be processed according to regular coverage rules.

Tobacco cessation

The Quit for Life® Program helps participants stop using various tobacco products. A professionally trained Quit Coach® works with each participant to create a personalized quit plan, and the program provides free nicotine replacement therapy, like patches, gum or lozenges. For eligible participants, there is also a $0 copayment for tobacco cessation drugs through network pharmacies.

Patient-Centered Medical Homes as of December 2015



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