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The Federal Stimulus Act provides for an increase in the monthly bus pass/vanpool reimbursement from \$120 to \$230 for expenses incurred from March 1, 2009, through December 31, 2010. To change your bus pass/vanpool election, send a completed Change in Participation form to SEGIP.

www.eidebaillybenefits.com/som

Disclaimer

This newsletter is for informational purposes only and is not a plan document nor is it legal, medical or retirement advice. Consult a qualified professional before making decisions.

Prepared by:

The Employee Insurance
Division of Minnesota
Management & Budget

Benny™ card—getting to know you

The state's Benny™ debit cards have had quite a workout with over 86,000 successful swipes since January. Here's more you should know about Benny™.

Substantiation requested

The IRS regulates health debit cards, like Benny™. Because they spend pre-tax dollars, the IRS has placed limitations on them that non-health debit cards don't have.

For example, the IRS does not allow all types of merchants to accept health debit cards. This explains why Benny™ cannot be used at a gas station even though you might find eligible items on its shelf.

In addition, the card reduces, but does not

eliminate, the need to substantiate purchases. The IRS requires the retention of detailed receipts of purchases to substantiate pre-tax eligibility. This is the same documentation you submit manually to claim pre-tax dollars.



If you are asked by Eide Bailly to substantiate a debit card purchase you will need to send them the receipt. If you do not have the receipt, or if the purchase is determined to be ineligible, you will be asked to reimburse your account. If the required repayment or documentation is not received, Eide Bailly must follow IRS guidelines and inactivate the card until the matter is resolved.

Transaction declined

When a Benny™ card is declined, over 99 percent of

the time it is for one of these reasons:

- The card hasn't been activated.
- The item isn't an eligible pre-tax item.
- Insufficient funds and the merchant doesn't allow partial payment.
- The merchant isn't authorized to accept health debit cards.
- The merchant incorrectly coded an item.
- The merchant only accepts the Benny™ card in the pharmacy area.
- The cashier incorrectly entered the item at the point of sale.
- Your account hasn't been properly set up in Eide Bailly's system.

Get to know Benny™ by calling Eide Bailly at 952.944.6633, toll free 800.300.1672, email benefits@eidebailly.com or www.eidebaillybenefits.com/som.

Is your college student eligible for your insurance?

Student insurance eligibility can be complicated!

First, the easy part. To be an eligible college age dependent, your child must be between the age of 19 and up to 25, unmarried, and enrolled full-time at an accredited high school, college, university or trade school.

The hard part is understanding how starting and stopping school af-

fects insurance eligibility. Students may take one term off per academic year and remain insurance eligible. The key is that they must have **full-time** attendance on both sides of the missed term and may not have two missed terms in one academic year.

Let's look at some scenarios regarding our student dependent, Jane:

Jane successfully completes spring term:

- If she returns to school on a full-time basis in the fall, she may take the summer off without losing coverage.
- If Jane does *not* return to school full-time in the fall, she will lose coverage at the end of summer.

Jane's academic load falls

(Student continued on page 4)

WELL•NESS (wĕl'nĭs) n. State of being healthy • the condition of being healthy in body, mind and spirit, especially as a result of deliberate effort • mental and physical soundness

Wellness Programs– Gear up for spring with healthy lifestyle tools

Springtime brings the potential for personal renewal that can gear us up for better health.

If you are looking for tools to gear up your physical activity and food choices and have completed a health assessment you're a click or a phone call away. Convenient online and personalized phone-based wellness programs are open to you at no additional cost. You can sign up for these programs before September 7, 2009.

Available online are *10,000 Steps®*, *Stress Management*

eProgram or Weight Management eProgram.

Nutrition, Physical Activity and Weight Management are offered by phone. During 15-minute phone appointments you work with your own personal registered dietitian, health educator, exercise specialist or pharmacist.

If you haven't completed a health assessment you still may. Completing it after Open Enrollment will not lower your office visit copay for 2009.

To sign up and for more information, contact JourneyWell: 952-967-5128, toll free 1-866-977-5128, TTY 1-877-222-2794, www.journeywell.com

TIDBIT

Each health insurance carrier has health and wellness resources for members. Visit <http://www.mmb.state.mn.us/carriers/cont-carr> to find carrier contact information. At each carrier website you'll find links to resources.

15 ways to use the Employee Assistance Program

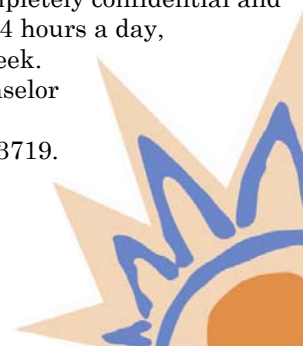
Your employee assistance program (EAP) is here to help you and your family manage personal problems that affect your quality of life.

Listed here are 15 of the many ways you and your family can take advantage of the EAP. It is not just for people in crisis, EAP also helps with the everyday problems that we all face.

EAP can help with:

- Conflicts at home or work
- Marital concerns or divorce
- Coping with major life change
- Legal consultation with an attorney
- Grieving the loss of loved ones
- Depression or anxiety
- Feelings of being overwhelmed
- Feelings of loneliness
- Improving self-esteem
- Coping with physical illness
- Learning positive communication skills
- Financial problems
- Dealing with violence or threats of violence
- Recognizing alcohol/drug abuse problems
- Child's behavioral problems

EAP is completely confidential and available 24 hours a day, 7 days a week. Call a counselor anytime at 1-800-657-3719.



Be your own wellness champion

You can be your own wellness champion by moving more and eating well.

Move more

Moving more is the best thing you can do for your health. The physical activity guidelines for Americans (www.health.gov/paguidelines) encourage a minimum of 150 minutes a week of moderate aerobic activity: take the stairs, bike to work, lift weights, take a yoga class, stretch at your

desk, walk during breaks.

Eat well

Eating healthy includes what you eat and your eating environment. Build your diet around fruits, vegetables and whole grain foods, with a lean portion of protein on the side.

Taste and appreciate your food. Eat away from your desk, so you won't be distracted by work and you can socialize or have time to yourself.

Be a champion

It is important to actively pursue good health. Be your own Wellness Champion.

To become a Wellness Champion for your agency, or connect with others, contact:

Linda.Feltes@state.mn.us.



Long term care insurance—who needs it?

Did you ever think about what might happen if, because of illness, injury, or old age, you were unable to care for yourself?

Long term care insurance (LTCI) may be an answer.

LTCI pays for a variety of services not covered by health insurance. Long term care services may include assistance in a home, an adult day care center, an assisted living facility, or a nursing home.

As a state employee, you may purchase long term care through

SEGIP and M-PEL, the Minnesota Public Employees Long Term Care Insurance Program. The coverage is offered by CNA Group Long Term Care Insurance.

The coverage is designed to be affordable and features level premiums—the cost is based on your age at enrollment and won't increase just because you get older. It's also portable—you can take it with you if you leave state employment. And, if you're a Minnesota taxpayer, you will be eligible for a Minnesota tax credit

up to \$100/year. This coverage is also available for spouses and parents of employees. Retirees who were once eligible for state sponsored retiree insurance may also purchase this LTCI.

New employees may enroll without showing evidence of good health if they apply within 35 days of employment. All other employees, parents and spouses must apply with evidence of good health.

For more information, go to www.m-pel.org. It could be the smartest thing you do all day!

SEGIP Call Center—When to call, who to call

SEGIP puts people and a network at your fingertips to help you navigate state employee insurance and benefits.

Answers to questions and information about your insurance and benefits is available at the SEGIP Call Center.

Staffed by state employees who can answer questions ranging from initial benefits enrollment to retirement, the SEGIP CALL CENTER is open from 8:00am to 4:30pm Mon-

day through Friday.

An operator can answer your general questions or direct you to a representative with expertise for more specific information. You are encouraged to call any time you need answers or clarification on state employee benefits and insurance information.

On weekends and during non-business hours please visit our website designed to answer your questions and direct you to more

information at:

www.mmb.mn.us/pay-bene/ins

If you need answers, we're waiting for your call.

651.355.0100

TIDBIT

A list of Best Choice Providers and Centers of Excellence for cardiac care, low back pain, transplantation, and weight loss surgery is available at www.advantagehealthadvisors.com

Lay-off or retirement: insurance continuation differences



Lay-off and retirement are two different things when it comes to continuing insurance coverage through SEGIP.

Retirement eligible employees who are laid off must decide within 30 days of leaving state employment to either remain on a layoff list and exercise their COBRA option or retire for insurance purposes and have access to the state's retiree insurance program. Unfortunately, you cannot do both.

An employee who chooses to go on the state's layoff list and is COBRA qualified does not retire and remains eligible for re-call or re-hire. Recalled or rehired employees are able to pick up insurance benefits once again. Laid off employees may be eligible for an employer insurance contribution and may continue their state insurance coverage through COBRA.

Employees on the layoff list may not retire for insurance purposes at the end of the employer contribution period. This means there is no option to join the retiree insurance plan.

Choosing to retire for insurance

purposes means the retiree is eligible to enroll in the state's retiree health plan after receiving certain layoff benefits including the employer insurance contribution.

In a nutshell—those eligible for retirement must decide if to remain on the layoff recall list and exercise your COBRA options or join the state's retiree health plan.

To learn more, contact your agency's Human Resource Office and/or consult your union agreement/plan. More information on continuing your insurance benefits at retirement is available at:

www.mmb.state.mn.us/ret



- Health
- Disability
- Long-term Care
- Retiree Coverage
- Dental
- Life
- Spouse/Dependent Coverage

INSURANCE CALL CENTER
 400 Centennial Office Building
 658 Cedar Street
 St. Paul MN 55155

segip.mmb@state.mn.us

HOURS
 Monday – Friday
 8:00 a.m. – 4:30 p.m.

651-355-0100
 Fax: 651-797-1313

Navitus

What's in a name?

Navitus Health Solutions – The administrator of the prescription drug program for the Minnesota Advantage Health Plan. Navitus adjudicates pharmacy claims, administers the pharmacy network, and oversees the formulary. Call Navitus for answers to questions about your pharmacy benefits at 1-866-333-2757 or www.navitus.com/Pages/PlanSpecificInfoMNAdvantageHealthPlan.aspx.

Split a pill – save a buck

Looking for a way to save money on your maintenance prescription drugs? Pill splitting might be just what the doctor ordered. Navitus' *RxCents* tablet splitting program can reduce your copayments by 50% for select medications taken once per day.

Tablet splitting is breaking a higher strength medication tablet in half to deliver the prescribed dose. This allows you to receive the exact same medication and dosage, while purchasing fewer tablets and saving money.

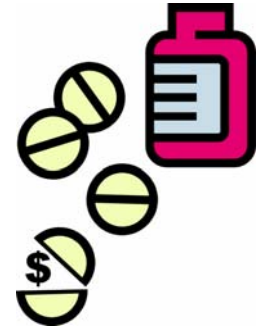
The medications in this program are listed in the Advantage formulary, located at www.navitus.com/Pages/MNFormulary.aspx.

The drugs eligible for the tablet splitting program are denoted with a "¢" sign or you can refer to the last page of the complete formulary. The Pharmacy and Therapeutics (P&T) Committee, which is comprised of prescribers and pharmacists, have identified these medications as safe-to-split.

Not all drugs are appropriate for tablet splitting. Always check with your health care professional before tablet splitting.

To get started, discuss this option with your prescriber. A new prescription will need to be written. Tablet splitting is offered to you as a way to help you control out-of-pocket costs, but is not required.

For a free tablet splitter or if you have any questions, please contact Navitus Customer Care toll-free at 1-866-333-2757.



New special enrollment rights

SEGIP is required to coordinate with the State's Children's Health Insurance Program (SCHIP) and Medicaid.

Employees and their insurance eligible dependents have a 60 day special enrollment period upon:

1. coverage termination under Medicaid or SCHIP due to loss of eligibility, or
2. becoming eligible for premium assistance subsidy under a state Medicaid agency or SCHIP.

An employee wishing to change their insurance coverage because either of these two special enrollment events occurred must notify SEGIP within 60 days of the event.

SEGIP will provide notice about the premium assistance opportunities under state law as it becomes available. To date we know of no available program.

(Student continued from page 1)

below full-time:

- If Jane had completed the previous term, as full time student, then the term in which she drops below full-time may be used as the term off.
- If Jane drops below full-time in fall, after taking the summer off, her coverage will end on the last day of the month in which she dropped below full-time.

Jane graduates:



- Her coverage will end on the last day of the month in which she completed her coursework, NOT the month in which her graduation ceremony is held. SEGIP must be notified of the graduation date.
- If Jane attends graduate school full-time after one term off, her coverage may be reinstated retroactively to graduation upon notification to SEGIP.

COBRA is available to dependents who lose student status, but SEGIP must receive notification within 60 days of loss of student status. By submitting a completed Dependent Change form or Basic Application to SEGIP a qualified dependent will be sent a COBRA application. (These forms are at www.mmb.state.mn.us/adv-health.)

For help call SEGIP at :
651-355-0100

TIDBIT

Student eligibility forms are sent directly to your home by your health carrier at least once per year. Because pre-tax dollars are used to pay for your health insurance premiums you must confirm that those enrolled meet the eligibility criteria. Failure to return the completed form will result in cancellation of your student's coverage. You must notify SEGIP of all changes in student status.