

Calls

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information for direct deposit or to request a direct deposit form)

- Questions about a 1099 tax statement
- To change your mailing address. The PERS Insurance program will **not** notify the pension office of your move
- Any other non-health insurance related retirement questions

To reach the PERS Pension office, call 503-598-7377 or toll-free at 1-888-320-7377.

Call your health plan directly for the following:

- Questions regarding a specific benefit
- Questions about the status of a claim
- To verify the status of an ID card or to order a card
- To change your primary care provider (PCP) or to find a provider
- Any questions or concerns about your doctor
- Any other billing questions

All health plan customer service numbers are located on the back page of this newsletter and on your health plan ID card.

MEDICARE PART D ALERT

DON'T RISK LOSING YOUR PERS HEALTH INSURANCE COVERAGE

ENROLLING IN ANOTHER MEDICARE PART D PLAN OR TERMINATING YOUR PART D PLAN THROUGH PERS WILL CAUSE YOU TO LOSE YOUR MEDICAL COVERAGE.

PERS Health Insurance continues to receive appeals from members who have inadvertently enrolled in another Medicare Part D prescription drug plan or who have requested termination of their Medicare Part D plan directly through Medicare. Medicare guidelines allow a member to be enrolled in only one Medicare Part D plan. The PERS Health Insurance Program incorporated Medicare Part D into all Medicare plans effective January 1, 2006. Premiums include both Medicare Part D prescription drug coverage AND medical coverage. You will be **disenrolled completely** from the PERS Health Insurance Program if you enroll in another Part

D plan or terminate your Part D plan through PERS.

ATTENTION TRI-CARE MEMBERS

Members have reported experiencing problems using their Tri-Care prescription drug benefits because of being enrolled in Medicare Part D. Medicare guidelines do allow Tri-Care members to also be enrolled in a Part D plan, but Tri-Care is not coordinating benefits. Members may ultimately need to choose between their PERS and Tri-Care benefits; however, PERS does consider Tri-Care group coverage, so members would be eligible to re-enroll with PERS at a later time should they decide to terminate their coverage.

PERS plan change survey results are in

The plan change meetings conducted this fall were a success. The confusion in 2005 about Medicare Part D has subsided, and members remain confident that PERS is looking out for the best interests of the program's nearly 50,000 members. Approximately 2,371 retirees and dependents attended. Attendees were able to have their questions answered by the PERS Health Insurance Program and health plan representatives. The PERS presentation team conducted 49 meetings in 33 cities and drove more than 4,000 miles in a seven-week period. Barbara Sandoval, PERS service representative, has been conducting the presentations for seven years. "It is always a delight to travel the great state of Oregon and meet with so many wonderful people," Sandoval said. "I am proud of to be part of this program!"

Those of you who have attended a plan change or pre-enrollment meeting in recent

years likely have completed a customer service survey. These surveys provide valuable feedback to the PERS retiree insurance manager and staff in determining how well we serve our members and also, how we can improve. The survey asks questions related to satisfaction with the member handbook, plan change meetings, telephone customer service, health plans and the use of computer technology. The results show satisfaction levels are high, with 97 percent to 99 percent of all respondents being satisfied or very satisfied with services. There is also a section for comments on the survey. Some of the improvements we have made based on member feedback have been to the PERS Member Handbook. A section for acronyms and definitions was added, and in 2007, we updated the look for rates and benefits comparison. We want to thank everyone who took the time to complete the survey.

A letter from the insurance program manager

Dear Retirees,
It is with a mixture of emotions that I am announcing to you my retirement from PERS, effective July 1, 2007. As some of you know, I have been the PERS insurance program manager 16 years, and have thoroughly enjoyed the opportunity to serve all of you in that capacity. At the

time I am writing this, a new program manager has not yet been selected, but I am confident that PERS will find an excellent successor.

While I am looking forward to spending time with my husband and family, I am also suffering from withdrawal at the thought of leaving this job I love so much. My husband and I live

on a small acre near Rickreall, Oregon, 11 miles west of Salem. This has been my home for 26 years. My three children attended Rickreall Grade School (now closed.) How time flies! My oldest son and his family live

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in Pueblo West, Colo., where he is a pastor. My daughter is a principal/owner in an electrical supply distribution company in Portland. My youngest son was killed in an auto accident October 21, 2000. Time marches on whether we like it or not, and brings both joy and sorrow.

I celebrated my 60th birthday in January of this year. Just as change has impacted my personal life, the past 16 years as the PERS insurance program manager has brought many changes in healthcare, Medicare and consequently, the PERS Insurance Program. Since April 1991, my first day at PERS, we have encountered both challenges and opportunities. For those of you who have been with us through this time, you will remember some of the milestones along the way. Following are a few of the highlights noted by the plan year those changes were implemented.

1992: Dental plans were added through ODS Health Plans and Kaiser Permanente. PERS began a joint agreement with the health plans to attempt to smooth fluctuations in premium rates from year to year. The Medicare plans offered by The Good Health Plan (Providence, Portland), SelectCare (PeaceHealth, Eugene,) and Kaiser Permanente were all Medicare replacement plans (billings are not sent to Medicare, but Medicare prepays a monthly premium to the health plan for the member's care.) ODS Health Plans was a Medicare Supplement plan (Medicare is billed first and ODS secondary.)

1993: The Retiree Health Insurance

Premium Account subsidy became available for eligible non-Medicare retirees from the state of Oregon. Approximately 4,000 new non-Medicare members were enrolled as they transferred from their state of Oregon plans.

1994: PERS offered open enrollment to all PERS retirees for the medical and dental plans. About 3,000 new members were enrolled. The prescription drug benefit was standardized across all health plans. Kaiser offered prescription drug benefits to their members, and prescription drug benefits for the other plans were combined under ODS Health Plans.

PERS began contracting with BestChoice Administrators, now called BenefitHelp Solutions, our current third-party administrator. This service is known to all of you as the PERS Health Insurance Program.

1995: PERS began a joint venture that included SelectCare (PeaceHealth, Eugene), the Good Health Plan (Providence, Portland) and ODS Health Plans, which allowed for additional expansion of service area options for PERS members into southern and Central Oregon, and Southwest Washington. During mid-1995, those expansions were realized, and retirees living in those areas who wanted to change health plans were able to enroll.

1997: Legislation was implemented allowing PERS to contract with out-of-state insurance plans. This allowed PERS to establish contracts with Kaiser California and Kaiser Hawaii on behalf of our members who live in those locations.

1998: Prescription drug claims continue to

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increase, necessitating a reduction in prescription drug benefits to offset premium increases.

2000: PERS began offering long-term care insurance to retirees. During the first year, more than 1,500 retirees signed up to purchase long-term care insurance.

2001: Clear Choice Health Plans was added for members in central and eastern Oregon on July 1, 2001. Providence Health Plans cancelled their coverage in these areas. More than 3,000 members were required to change health plans.

2002: A standard PPO plan was implemented for non-Medicare members through ODS Health Plans, Providence Health Plans and ClearChoice Health Plans. Kaiser continued to offer an HMO plan to non-Medicare members.

2003: Non-Medicare members experience co-payment increases for some services.

2004: ODS pharmacy benefits changed to limit payment for brand drugs when an approved generic is

available.

2005: The \$2 additional co-payment was removed from prescription drug purchases.

2006: Prescription drug coverage co-insurance is lowered to 40 percent to a maximum \$150 out-of-pocket per prescription.

2007: The prescription drug coverage maximum will be \$3,850 out-of-pocket per person, per calendar year. ODS Health Plans now offers a Medicare PPO option in addition to the Medicare supplement plan.

As you can see, many changes have been made to your benefits and health plans along the way. The goal of the PERS Insurance Committee and my personal goal for this program has been to bring you the best benefits we can at an affordable premium cost. This has not been easy throughout the years. Both the use and the cost of healthcare have continued to increase far beyond the general rate of inflation of other goods. As we all know, this is due to the rapidly increasing array of high-technology services available in healthcare and the increased use of healthcare options.

During the past 16 years,

we have held approximately 800 retiree meetings throughout the state, with an average attendance of about 50 people per meeting. To conduct those meetings, we have driven thousands of miles throughout the years. Thousands of telephone calls have been received by the customer service staff and/or Linda Weber, my assistant, and myself. It has been a joy to serve you and meet many of you. I know you and your health insurance options will continue to be a top priority for PERS.

Now it is time for me to say goodbye, aloha, auf wiedersehen, sayonara, adios. I will miss you all. May your path be easy, the Oregon raindrops refreshing and the warmth of the summer sunshine be with you always. I wish God's blessings on all of you.



Gloria English

Numbers You Should Know



PERS Health Insurance Program
www.pershealth.com
P.O. Box 40187
Portland, OR 97240-0187
503-224-7377 • 1-800-768-7377

PERS Pension Office
www.pers.state.or.us
Mailing Address
P.O. Box 23700
Tigard, OR 97281-3700
Street Address
11410 S.W. 68th Pkwy.
Tigard, OR 97223-8634
503-603-7777 • 1-888-320-7377

Kaiser Permanente
www.kaiserpermanente.org
500 N.E. Multnomah, Suite 100
Portland, OR 97232-2099
503-813-2000 • 1-800-813-2000

Providence Health Plan
www.providence.org
3601 S.W. Murray Blvd. #10
Beaverton, OR 97005
503-574-8000 • 1-800-603-2340
Mailing Address
P.O. Box 4327
Portland, OR 97208-4327
Claims
P.O. Box 3125
Portland, OR 97208-3125
Providence RN
503-574-6520 • 1-800-700-0481

Clear Choice Health Plans
www.clearchoicehp.com
2650 N.E. Courtney Drive
Bend, OR 97701
541-385-5315 • 1-888-863-3637
Claims
P.O. Box 7469
Bend, OR 97701

ODS
www.odscompanies.com
601 S.W. Second Ave.
Portland, OR 97204-3156
Medical
503-243-3880
1-800-962-1533 (Oregon)
1-800-852-5195 (National)
Dental
503-243-4494
1-800-452-1058 (Oregon)
1-800-852-5195 (National)
Pharmacy
503-265-4709
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Health Wise Editor
Katie Paullin

Get your health plan questions answered with the first call

PERS is committed to providing you with the best customer service. As part of our pledge, we are always happy to answer any questions you may have. In an effort to save you time, we have outlined in this article the specific purpose of the PERS Health Insurance Program, the PERS Pension Office and your health plan. By following the guide below, you will always make the right call the first time.

Call the PERS Health Insurance Program for the following:

- Questions about your health insurance premium
- To change your address (we will notify your health plan of your change in address)
- To terminate your insurance coverage (requires a signed and

- dated written request)
- To request a change in your premium payment method
- To receive a member handbook (these are mailed out annually each fall)
- Any other eligibility, enrollment or premium billing question

To reach the PERS Health Insurance Program, call 503-224-7377 or toll-free at 1-800-768-7377.

Call the PERS Pension Office for the following:

- Questions about your pension benefit check
- Requests for a change in your pension check payment method (change in banking

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