

Your 2020 health benefit changes



**Stephanie
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PPO provider.

- We now cover eating disorders under our educational classes and programs benefit.
- We no longer cover over-the-counter Vitamin D supplements for adults 65 and older.
- We now limit the number of definitive and presumptive drug tests we will cover in a calendar year.
- We now offer a standard drug formulary with prior authorization. See below for more information.

Changes to our High Option only:

- We now cover the charges for a non-PPO assistant surgeon at the PPO benefit level when services are performed at a PPO hospital or ambulatory surgical center, and the primary surgeon is PPO.
- We increased the Plan payment for hearing aids and related examination to \$1,000 per ear. Previously, we paid \$500 per ear.
- We increased the Plan payment for one pair of custom functional foot orthotics to \$500 with replacement every two years.
- You will now pay a \$350 copayment per admission to, or observation stay in, a PPO hospital.
- You will now pay a \$450 copayment and 35 percent coinsurance, plus the difference between our allowance and the billed amount, per admission to a non-PPO facility.
- We reduced the copayment for telemental/virtual visits to \$10.
- We now cover up to four visits to treat postpartum depression at 100 percent when you use an in-network mental health provider.
- You will now pay 50 percent of the Plan allowance for prescriptions purchased at a non-network retail pharmacy.
- You will now pay 50 percent of the cost for non-formulary brand drugs purchased at a retail pharmacy if NALC is primary. Medicare prime members will now pay 40 percent of the cost.

Below you will find a summary of the 2020 benefit changes. Please keep in mind that at the time this article was submitted for print, we did not have approval to release the 2020 premium rates. As a result, please refer to the official 2020 Health Benefit Plan brochure or check our website at nalchbp.org.

Changes to this Plan:

- We now cover medical telehealth visits.
- We now cover osteoporosis screening for all postmenopausal women, age 65 and younger, who are at increased risk for the disease.
- We now cover vasectomies at 100 percent when performed by a

- You will now pay the following copayments for mail order prescriptions: 60-day supply for NALC prime members, \$10 generic, \$60 formulary brand, \$84 non-formulary brand; 90-day supply for NALC prime members, \$15 generic, \$90 formulary and \$125 non-formulary. Medicare prime members, 60-day supply: \$7 generic, \$50 formulary brand and \$75 non-formulary brand. 90-day supply: \$10 generic, \$75 formulary brand and \$110 non-formulary brand.
- You will now pay \$200 for a 30-day supply of a specialty medication, \$300 for a 60-day supply and \$400 for a 90-day supply.
- We now require prior authorization from 510K dermatological products and artificial saliva.
- We now offer the Real Appeal® weight loss program. Previously, we offered Weight Talk.

Changes to our Value Option only:

- We now cover the charges for administration of anesthesia billed by an out-of-network provider at the in-network benefit level when services are performed at an in-network hospital or ambulatory surgical center.
- We now cover the replacement of customer functional foot orthotics every two years.
- We now cover telemental/virtual visits.
- You will now pay the following copayments for mail order prescription drugs: \$90 for formulary brand and \$125 for non-formulary brand.

Changes to our Consumer Driven Health Plan only:

- We now cover the charges for administration of anesthesia billed by an out-of-network provider at the in-network benefit level when services are performed at an in-network hospital or ambulatory surgical center.
- We now cover the replacement of customer functional foot orthotics every two years.
- We now cover telemental/virtual visits.
- You will now pay the following copayments for mail order prescription drugs: \$90 for formulary brand and \$125 for non-formulary brand.

2020 prescription changes:

Effective Jan. 1, 2020, as part of your prescription benefits managed by CVS Caremark, the NALC HBP will move to the NALC Health Benefit Plan Formulary Drug list with Advanced Control Specialty Formulary, which is a Standard Control Drug Formulary. This new formulary is a list of “preferred” prescription drugs that are identified by the CVS Health team of physicians and pharmacists (Pharmacy and Therapeutic Committee) to be the best overall value based on quality, safety and effectiveness. The NALC Health Benefit Plan Formulary Drug list with Advanced Control Specialty Formulary includes nearly all generic medications and specific brand name medications. NALC requires prior authorization for all Non-preferred medications. More information will follow over the next few weeks.