

# FEDERAL FACTS

## Spring 2012

[www.fepblue.org](http://www.fepblue.org)

**Thank you for your contribution to another successful Open Season.**

**Attention Health Benefit Officers and other Primary Federal Agency Contacts:**

Your government account representatives want to be able to contact you via email with important updates and reminders. Please take a moment to send an email to your representative to confirm that he/she has your correct email address. You will find your representative's email address on the back page of this newsletter.

**Federal DentalBlue®**

Remember that you may enroll in Federal DentalBlue, our supplemental dental coverage, any time throughout the year, not just during Open Season. And, you may enroll your eligible dependents up to the age of 26.

## Earn Rewards through MyBlue Wellness Incentive Plan

MyBlue Wellness Incentive Plan is the first step toward taking a more active role in the health of your family and your health care decisions. Both Standard and Basic Option members can earn up to \$50 on the MyBlue Wellness Card (each family contract is eligible for two cards), and use the card to pay for qualified medical expenses. Earn \$35 just for completing the Blue Health Assessment, a quick and easy health and wellness questionnaire. Your answers are evaluated to help you create a unique action plan.

Need help reaching your health and wellness goals? Try one or all of the 12 online coaching sessions below to get feedback, advice and information on positive lifestyle changes. These modules cover a variety of topics, and in 2012 you'll receive a \$5 credit on your health debit card for each session you complete — up to three sessions.

Weight Management
Smoking Cessation
Stress Management
Nutrition
Depression
Back Care
Physical Activity
Chronic Condition Management
Diabetes Management
Pain Management
Insomnia Prevention
Binge Eating



*Additional incentives are available. Get started by setting up your MyBlue account at [www.fepblue.org](http://www.fepblue.org).*

# Exciting Additions to Blue365®

Blue365® is a discount program available to all Service Benefit Plan members that provides resources for healthier living in key areas. For 2012, Blue Cross and Blue Shield (BCBS) announced additional agreements that allow you to save even more. You will find detailed information about these new discount programs in your 2012 Federal Service Benefit Plan brochure.

## Fitness Your Way Your Budget – Your Goals – Your Time

Blue Cross and Blue Shield is pleased to offer affordable health club memberships to any Service Benefit Plan member over the age of 18. Your health club membership can be used at more than 8,000 participating locations nationwide – Gold's Gym, Curves®, Bally Total Fitness®, Snap Fitness and select YMCAs ... just to name a few. Besides the low membership fee, the best part of this program is that members are not locked into a contract with any one provider. They may choose to visit Gold's on Monday, their local YMCA on Tuesday, Bally's on Wednesday and go back to Gold's



### Members can register online at [www.fepblue.org](http://www.fepblue.org):

- \$25 one-time initiation fee per member
- \$25 per month per member for a three-month minimum
- If you drop out for more than three months, you will pay a new initiation fee

on Thursday. As always, Blue means choice. Membership privileges include all amenities,

programs and services that are normally associated with a basic membership at each fitness center. If the fitness center offers additional services, members may purchase these services directly from the fitness center for a fee. Hours are not restricted for Service Benefit Plan members.

Taking charge of your health is the best investment you can make. Join today and begin working on a healthier you!

## ARAG® Legal Center™ Reduce Stress and Gain Peace of Mind

Legal issues can have far-reaching effects:

- Twenty percent of people over 45 reported health problems due to financial stress.
- Medical expenses contributed to 62 percent of all bankruptcies in 2007.
- Seventy percent of Americans don't have a will, which can place a heavy burden on family members when death occurs.
- One out of three employees who experienced a legal life event took time off work.
- People who had at least one legal life event spent an average of 57 hours at work dealing with legal issues.



Blue Cross and Blue Shield offers Service Benefit Plan members access to ARAG's free Legal Education Center and a 30 percent discount on DIY Docs™.

### Education Center

All Service Benefit Plan members can access free legal online tools and resources that provide tips and simple explanations for complex legal terms regarding everyday legal issues. They will also receive direction on where to turn for more information and assistance.

Online tools and resources include:

- The Law Guide
- Guidebooks and videos
- LawEspresso® E-newsletter
- Legal Glossary
- Personal Information Organizer

### DIY Docs

DIY Docs enables Service Benefit Plan members to take control of life's issues on their own. With an annual subscription of \$69.95, members receive the following DIY resources:

- More than 300 legally valid, state-specific documents
- Interactive document assembly tool
- DIY Docs online document storage
- Unlimited use
- Legacy planning
  - Living Will
  - Healthcare Power of Attorney
  - Financial Power of Attorney

## QualSight® LASIK

Few health issues rival eyesight in importance. QualSight Lasik offers a nationwide network of credentialed

ophthalmologists at more

than 800 locations to provide easy and convenient access to Lasik procedures for Blue Cross and Blue Shield Service Benefit Plan members. Your savings represent 40 to 50 percent off the overall national average price of traditional LASIK.

- Guaranteed pricing enables members to budget procedures and Federal Flexible Spending Account Program (FSAFEDS) calculations
- Your prescription will not affect your price
- Savings include newer technologies such as Custom LASIK and bladeless IntraLase

Call 877-358-9327 today to schedule a free consultation and to see if you are a candidate for a life-changing procedure.



## Helpful Information

Blue Health Connection®  
Available 24 hours a day,  
seven days a week  
888-258-3432

Customer Service  
Monday through Friday,  
8 a.m. – 5 p.m. Central Time  
800-722-3130

Precertification  
800-672-2378

Preferred Provider Directory  
[www.fepblue.org](http://www.fepblue.org)

Prescription Mail Order Service  
800-262-7890  
[TDD 800-216-5343]

Retail Pharmacy Program  
800-624-5060  
[TDD 800-624-5077]

Health and Wellness Products  
[www.fepblue.org/benefitplans/blue365](http://www.fepblue.org/benefitplans/blue365)

Affinity Discount Vision Care Program  
800-551-3337

Contact Lens Replacement  
800-LENS-123 [800-536-7123]

Complementary Health Care Discount  
Affinity Program Providers  
877-760-2746

To find a provider or learn more about the Service Benefit Plan, go to [www.fepblue.org](http://www.fepblue.org).

## Government Account Representatives

Contact your Government  
Account Representative  
with any questions.

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## BlueCross BlueShield of Oklahoma

Federal Employee Program  
1001 E. Lookout Dr.  
Bldg. A, 05.401C  
Richardson, TX 75082

Presorted  
Standard  
U.S. Postage  
PAID  
Dallas, Texas  
Permit No. 6010

## Medicare Part B – Working Together with Service Benefit Plan Coverage

Medicare Part B pays a significant portion of a retiree's medical expenses, but it does not pay for the full cost of care. When Medicare Part B pays as the primary payer, the Service Benefit Plan fills in the gaps, even when Medicare increases its deductibles, coinsurance and copayment amounts.

Everyone pays a premium for Medicare Part B, and Service Benefit Plan members can decide if they want to enroll. But, with Medicare Part B and the Service Benefit Plan working together, the cost of Medicare Part B premiums may be offset by the savings realized with Service Benefit Plan coverage.

Under Standard Option, combining Service Benefit Plan coverage with Medicare Part B paying first minimizes out-of-pocket expenses. Service Benefit Plan deductible, copayment and coinsurance amounts are no longer required for covered services, except for prescription drugs. In 2012, the coinsurance

amount for generic drugs purchased at a Preferred retail pharmacy and the copayment for generic drugs purchased through the mail service pharmacy are less with Medicare Part B as the primary coverage.

With Basic Option and Medicare Part B as the primary payer, the copayments are waived for covered services when using Preferred providers. The Basic Option prescription drug copayment is not waived.

- For more information about how Medicare Part B works alongside the Service Benefit Plan, refer to the 2012 Service Benefit Plan brochure (RI 71-005).
- To learn about important enrollment requirements, go to [www.medicare.gov](http://www.medicare.gov).
- To help members nearing age 65 make sure they are prepared, contact your Government Account Representative to schedule a Pre-Retirement Seminar.