



BENE-FACTS



December, 2010

www.butlerhealthplan.org



2011 Butler Health Plan ID Cards

Look for ID cards to arrive in your mailbox the last week of December. Throw away old ID cards. Need extra cards: Call Allied at 1-800-288-2078.

LabCard: If you request that your doctor's office collect your specimen and send it to LabCard, BHP pays the full cost of outpatient laboratory work covered by the Plan. If your doctor will not send to LabCard, call LabCard to locate a draw site near you. If you are unable to use the LabCard program, your regular benefits will apply.

Plan is the Medical Plan option you selected.

Subscriber is the name of employee enrolled in Plan. Dependent names are not listed.

Subscriber ID is a unique randomly assigned ID number to process your claims.

Medical Claim Submission lists information to process medical claims.

Dental Claim Submission lists information to process dental claims.

Front side

Allied
www.LabCard.com
1-800-646-7788

Subscriber
Group: Butler Health Plan
Group #: A08103
Plan: Choice
Subscriber:
Subscriber ID:

Medical Plan
Coverage: **Outside Primary Network:**
The Emerald Health Network
A HealthSmart Network
800-346-3141
PRIMARY NETWORK:
HEALTHSPAN PREFERRED
MultiPlan
800-672-2140
513-551-1400 or 888-914-7726
PROVIDER SEARCH: www.butlerhealthplan.org

Dental Plan
Dental Coverage:

Pharmacy Plan
RxBIN: 003858
RxPCN: A4
RxGRP: JCEA
EXPRESS SCRIPTS®
express-scripts.com
Member: 866-275-0044
Pharmacist: 800-824-0898

Medical Plan Coverage lists the tier you selected: Individual, Employee+1, or Family Plan.

Primary Network: Call HealthSpan Preferred to verify in-network providers or visit the website at www.healthspannetwork.com.

Outside Primary Network: When traveling or attending college out of the primary network area, call MultiPlan and Emerald for in-network providers.

Dental Coverage lists the tier you selected: Individual, Employee+1, or Family Plan.

Pharmacy Plan lists information to process your prescription claims.

Back side

Medical Claims Submission
EDI: Emdeon Payer ID 37308
Mail: Allied Benefit Systems, Inc.
PO Box 909786-60690
Chicago, IL 60690
312-906-8080 or
800-288-2078 (outside IL)
www.alliedbenefit.com
Network Copays: \$20 Primary Care,
\$35 Specialist, \$40 Urgent Care,
\$150 Emergency Room

Eligibility
Member Services: www.alliedbenefit.com or
call Allied at 312-906-8080 or 800-288-2078
(outside IL) Mon.-Thu. 8:30-8:00, Fri.
9:00-6:00, Sat. 10:00-1:00 E.S.T.
See plan description for coverage details,
limitations and exclusions. This card does
not guarantee coverage or eligibility.
GENERAL INFO: www.butlerhealthplan.org.

Dental Claims Submission
EDI: Emdeon Payer ID 37308
Mail: Allied Benefit Systems, Inc.
PO Box 909786-60690
Chicago, IL 60690
312-906-8080 or
800-288-2078 (outside IL)
www.alliedbenefit.com

Pre-Certification
Call HealthSpan at 513-551-1420 or
800-972-7726. See plan description for
details. Penalty may apply for failure to pre-
certify according to requirements.
Save money using HealthReports to
compare pricing on common healthcare
procedures. www.butlerhealthplan.org

Eligibility: Allied Benefit Systems, Inc. is the Claims Payor that processes all medical and dental claims. Contact Allied for eligibility, benefits or claim information.

Pre-Certification: To pre-certify an elective hospital admission, provider must call HealthSpan. Your plan has a non-compliance penalty, so be certain a call is made. Notify within two working days of emergency admissions.

HealthReports: Logon and research cost, quality and experience prior to procedures.

JANUARY 1, 2011

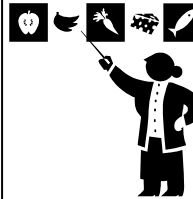
Preventive Services in All Medical Plan Options Covered 100%



Cost is no longer an excuse to skip your annual checkup, immunizations or screenings. Now, in all medical plan options, there is no copay or coinsurance for in-network preventive services.

NEW IN 2011

Nutrition Counseling Covered



If your physician orders nutrition counseling for the treatment of a chronic medical condition such as high cholesterol, high blood pressure, diabetes or obesity, you are covered for up to three office visits per year. Individuals at high risk for chronic disease are also covered. (See your Summary of Medical Benefits for Plan copays.)

SURVIVING THE HOLIDAYS TIPS

The holidays can be a joyous time of year shared with family and friends, but they can also bring stress and anxiety as we struggle to keep up with often-unrealistic demands and expectations. That's why it is important to relax and take good care of ourselves.



- ✓ Use a smaller plate and take a lesser portion
- ✓ Take time for yourself
- ✓ Don't set unrealistic exercise goals. Aim to exercise 20 minutes
- ✓ Enlist a friend or family member to exercise with you
- ✓ Create new, more active traditions
- ✓ Don't try to lose weight or stick to a restrictive diet
- ✓ Drink plenty of water
- ✓ Spread out meals
- ✓ Don't overdo it with alcohol or caffeine
- ✓ Don't aim for perfection and enjoy the imperfections.
- ✓ Laugh

Source: www.acefitness.org

Over-the-Counter Drug Tax Rules Change for FSA, HSA, HRA and Archer MSA

The cost of an over-the-counter medicine or drug cannot be reimbursed from flexible spending arrangements or health reimbursement arrangements unless a prescription is obtained. The change does not affect insulin, even if purchased without a prescription, or other health care expenses such as medical devices, eye glasses, contact lenses, copays and deductibles.

The new standard applies only to purchases made on or after Jan. 1, 2011, so claims for medicines or drugs purchased without a prescription in 2010 can still be reimbursed in 2011, if allowed by the employer's plan. A similar rule goes into effect on Jan. 1, 2011, for Health Savings Accounts (HSAs), and Archer Medical Savings Accounts (Archer MSAs).

