

**#19676 NORTHERN ARIZONA PUBLIC EMPLOYEE  
BENEFITS TRUST (NAPEBT)  
2008 BENEFIT PLAN CHANGES**

**PPO Base and BuyUp Copay Plans**

**Effective Date: 07/01/08**

**Tobacco Cessation**

Prescription medications for tobacco cessation are currently excluded. Prescription medications for tobacco cessation will now be covered under the retail and mail order pharmacy benefit, subject to applicable member cost-sharing.

**Bariatric Surgery**

Currently, members pay an access fee (in addition to applicable deductible and coinsurance) for covered gastric bypass surgery, but not for other forms of bariatric surgery. The access fee will now apply to **all** covered bariatric surgeries (weight loss surgery), including but not limited to, gastric restrictive, malabsorptive gastric bypass surgeries and revisions to bariatric surgeries. The access fee applies in addition to applicable deductible and coinsurance.

**Behavioral and Mental Health Services**

Currently, covered electroconvulsive therapy (ECT) services are subject to the behavioral health outpatient visit limit. ECT covered services will no longer be subject to the behavioral health outpatient visit limit, but will still be subject to applicable deductible and 50 percent coinsurance.

**Benefit Plan Maximum**

The benefit plan maximum is being increased from \$3,000,000 to \$5,000,000. No benefits will be paid by or through BCBSAZ under this benefit plan in excess of \$5,000,000 per member.

**Medical Treatment of Obesity**

Currently, only medically necessary surgical treatment for morbid obesity is covered. Physician office visits and laboratory services for the medical treatment of members diagnosed with obesity are now a covered benefit and will be subject to any applicable cost-sharing depending on the provider used and/or place of service. Prescription medications for the treatment of obesity or for weight gain or loss will continue to be excluded from coverage.

**Nutritional Counseling/Training**

Currently, members diagnosed with the conditions listed below have a maximum benefit of three (3) nutritional counseling/training visits, per person, per calendar year. In addition, these visits **are not** currently subject to deductible, coinsurance or office visit copays.

- Coronary Artery Disease
- Heart Failure
- High Cholesterol
- Hypertension
- Pre-Diabetes
- Renal Failure/Renal Disease

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This benefit will change as follows:

- Obesity will be added to the above list of conditions. Members diagnosed with obesity can now
- receive nutritional counseling/training visits.
- Members will be responsible for the following cost-sharing:
  - ◆ Covered services received from Preferred dietitians will still not be subject to deductible, coinsurance or office visit copays.
  - ◆ Covered services received from Preferred physicians will now be subject to the Preferred physician office visit copays.
  - ◆ Covered services received from nonPreferred physicians and dietitians will now be subject to the nonPreferred deductible and coinsurance.
- Covered nutritional counseling/training visits received from Preferred and nonPreferred physicians and dietitians will **all** apply to a combined in- and out-of-network three (3) visit maximum per person, per calendar year.

### **Physical Therapy (PT), Occupational Therapy (OT) and Speech Therapy (ST)**

PT, OT and ST evaluations for developmental delay are currently covered under the plan's behavioral and mental health benefit. PT, OT and ST evaluations for developmental delay will now be covered under the plan's PT, OT and ST benefit. PT, OT and ST developmental delay evaluations performed by a physical, occupational or speech therapist, by a physician outside the physician's office or in a nonPreferred physician's office will be subject to applicable deductible and coinsurance. PT, OT and ST developmental delay evaluations performed by Preferred physicians in the physician's office will be subject to the applicable physician office visit copay.

### **Retail and Mail Order Pharmacy**

#### **Medication Limitations**

BCBSAZ applies quantity, age and gender limitations to certain prescription medications covered under the retail and mail order pharmacy benefit. Members can check the list of prescription medications subject to BCBSAZ prescription medication limitations at [azblue.com](http://azblue.com) or by calling the BCBSAZ Prescription Benefits Department at (602) 864-4273 or (800) 232-2345, ext. 4273. **BCBSAZ prescription medication limitations are subject to change at any time without prior notice.**

This benefit will change as follows: BCBSAZ has added Actiq to the list of quantity-limited covered prescription medications. (Actiq is approved by the FDA for management of breakthrough cancer pain in patients who are already receiving and are tolerant to opioids to treat the cancer pain.) Actiq is available in quantities of 50 units per cost-sharing amount.

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**Mail Order**

Currently, members may obtain compounded medications through the mail order benefit. Compounded medications will no longer be available through the mail order benefit, but will continue to be available from retail pharmacies.

**Urgent Care**

Currently, members pay one copay, per person, per day at Preferred urgent care facilities. Members will now pay one copay, per person, per provider, per day at Preferred urgent care facilities. Members will continue to pay applicable deductible and coinsurance at nonPreferred urgent care facilities.

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