

#19676

**Northern Arizona Public Employee Benefit Trust (NAPEBT)
2010 BENEFIT PLAN CHANGES**

PPO \$500 (BuyUP) Copay Plan

Effective Date: 07/01/10

COST-SHARING CHANGES

THE PPO \$500 IS NOW THE BUY-UP PLAN – SEE CHANGES BELOW

PPO/IN-NETWORK CHANGES

Deductible: \$250 (\$500) to \$500 per member (\$1,000 per family) per calendar year

PCP: \$15 to \$25 copay per member, per provider, per day

Specialist: \$15 to \$35 copay per member, per provider, per day

Chiropractor: \$15 to \$35 copay per member, per provider, per day

Emergency: \$50 to \$100 access fee per member per provider, per day

Urgent Care: \$25 to \$50 copay per member, per provider, per day

Retail Prescription Copays:

Level 1: \$7 – no change

Level 2: \$20 to \$30

Level 3: \$40 to \$50

Level 4: \$80 to \$100

Mail Order Prescription Copays:

Level 1: \$14 – no change

Level 2: \$40 to \$60

Level 3: \$80 to \$100

Level 4: \$160 to \$200

NON-PPO/OUT- OF-NETWORK CHANGES

Deductible: \$350 (\$700) to \$1,000 per member (\$2,000 per family) per calendar year

Coinsurance: 70% to 60% Plan pays; 30% to 40% member pays

AUTISM

Currently, members have coverage for treatment of the following autism spectrum disorders: (1) Autistic disorder; (2) Asperger's syndrome; and (3) Pervasive development disorder. Certain behavioral therapy services to treat the above autism spectrum disorders are subject to a maximum of fifty thousand dollars (\$50,000) for members under the age of nine (9) and a maximum of twenty-five thousand dollars (\$25,000) for members between the ages of nine (9) and sixteen (16).

Behavioral therapy services to treat autism spectrum disorders will no longer have limits of \$50,000 for members under nine (9) and \$25,000 for members between nine (9) and sixteen (16). Benefit plan maximums will continue to apply to covered autism spectrum disorders.

Precertification will continue to be required for all behavioral therapy for the treatment of autism spectrum disorders.

DEPENDENTS

Currently, unmarried dependent children who are full-time students are eligible for coverage under this benefit plan until age 23, but will lose coverage if they lose student status. Now, unmarried dependent children who are no longer full-time students due to a medically necessary leave of absence and who provide documentation of such medical necessity as required by BCBSAZ will continue to be eligible for coverage under this benefit plan until the earlier of the following: the date that is one (1) year after the first day of the leave of absence or the date on which the dependent child is otherwise no longer eligible under this benefit plan.

PREVENTIVE SERVICES

Currently, foreign travel immunizations are not covered when provided by an out-of-network provider. Certain foreign travel immunizations will now be covered when provided by out-of-network providers, as determined by BCBSAZ. Members will pay deductible and out-of-network coinsurance plus the balance bill for covered foreign travel immunizations. Call the BCBSAZ Customer Service Department or go to azblue.com for information regarding the foreign travel immunizations that will be covered when provided by out-of-network providers.