

**#19676 Northern Arizona Public Employee Benefit Trust (NAPEBT)  
2011 BENEFIT PLAN CHANGES**

**HDHP \$1250**

**Effective Date: 07/01/11**

**DEPENDENTS**

Currently, unmarried adult children age 19 and older who are full-time students are eligible for coverage under this benefit plan until the adult child turns age 23, but lose coverage if they lose student status. Now, children will be eligible for coverage under this benefit plan until the child turns age 26. Adult children between age 19 and 23 no longer have to be full-time students to be eligible for coverage under this benefit plan. Children no longer have to be unmarried to be eligible for coverage under this benefit plan.

**EOSINOPHILIC GASTROINTESTINAL DISORDER**

Currently, this benefit plan has a combined in- and out-of-network per member, per plan year limit of \$20,000 for amino acid formula for members with EGID. Members will continue to pay applicable deductible and 25% coinsurance for the first \$20,000 of coverage during the plan year. Members will then pay 80% coinsurance and the plan will pay 20% for any amounts that exceed the first \$20,000 of coverage during the plan year.

**MEDICAL FOODS**

Currently, this benefit plan has a combined in- and out-of-network per member, per plan year limit of \$5,000 for medical foods. Members will continue to pay applicable deductible and 50% coinsurance for the first \$5,000 of coverage during the plan year. Members will then pay 80% coinsurance and the plan will pay 20% for any amounts that exceed the first \$5,000 of coverage during the plan year.

**PLAN MAXIMUM**

Currently, this benefit plan has a \$5,000,000 per member benefit plan maximum. This benefit plan will no longer have a per member benefit plan maximum.

**PRE-EXISTING CONDITION EXCLUSION WAITING PERIODS**

Currently, this plan applies a 12-month pre-existing condition waiting period to members regardless of the member's age. Pre-existing conditions are conditions, regardless of the cause of the condition, for which medical advice, diagnosis, care or treatment was recommended or received during the 6 month period immediately preceding a member's enrollment date. Coverage for service related to a pre-existing condition exclusion or complications related to the condition will not begin until 12 consecutive months have elapsed from the member's enrollment date. The waiting period is shortened by prior creditable coverage. See your benefit plan booklet for additional information regarding pre-existing condition waiting periods.

This benefit plan will no longer apply pre-existing condition exclusion waiting periods to members under the age of 19.

**PRESCRIPTION DRUGS AND SPECIALTY SELF INJECTABLES**

Your medical plan through BlueCross BlueShield of Arizona will continue to cover specialty self-injectable medications through the home health benefit. However, your retail pharmacy, mail order pharmacy, or specialty self-injectable medications received from a specialty pharmacy will no longer be provided through BlueCross BlueShield of Arizona. You can find more information on your new prescription drug program at [www.napebt.com](http://www.napebt.com).

*Federal and state statutes and regulations may require additional changes to this benefit plan. BCBSAZ will advise employer groups and members of any additional changes to this benefit plan required by applicable federal and state law.*