

Health Matters



October 2009

Wells Fargo Insurance Services is New Claims Administrator

On July 1, 2009, Wells Fargo Insurance Services (WFIS) became the new claims administrator for the AlaskaCare Health Plans. The benefits provided by the AlaskaCare Health Plans have not changed; this is a change in the claims administrator only.

You should have received a new ID card and a Welcome Pack providing you with information about the transition to the new administrator. Up to two ID cards were issued in the member's name which may be used by you or your eligible spouse and/or children.

When your ID card is shown, the provider may contact WFIS to confirm eligibility and coverage for you and/or your dependents. Additional or replacement ID cards

may be requested at AlaskaCare.gov where you may also print a temporary card. You may also call WFIS to obtain a card.

If you've misplaced your Welcome Pack or would like to access the same information online, you can go to the new web site for the AlaskaCare plans, AlaskaCare.gov.

The benefits provided by the AlaskaCare Health Plans have not changed.

Costco/Envision is the name of the AlaskaCare Health Plan's pharmacy network. The network includes over 100 pharmacies in Alaska and over 61,000 nationwide. You are not required to use a Costco pharmacy, or any pharmacy in the network; however, using an in-network pharmacy ensures your claims are filed for you and provides your prescription at the lowest possible cost to you and to the Plan.

Note: Non-network pharmacy claims from *active employees* will be reimbursed at 60% after the deductible. Network pharmacies can be located on the AlaskaCare.gov website.



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Wells Fargo Opens Alaska Offices

Wells Fargo Insurance Services (WFIS) has two Alaska locations to serve our members:

- Juneau** - 400 Willoughby Ave., Suite 202
- Anchorage** - 1500 W. Benson Blvd., 2nd fl.

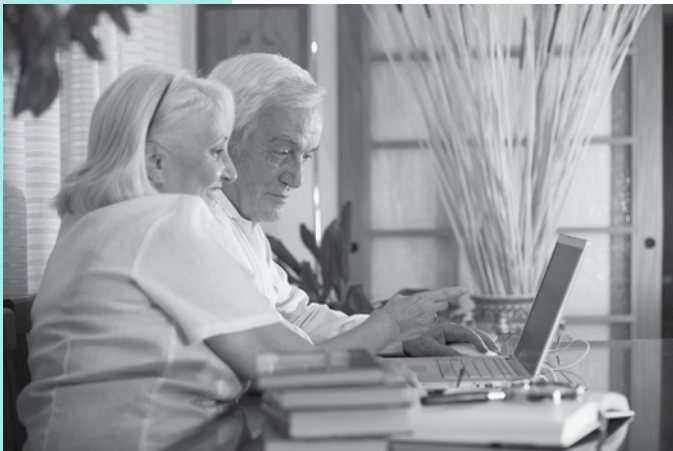
Customer service representatives are available in both locations to assist members in person and on the WFIS toll-free number, 1-877-517-6370.

MyMedicare.gov Personalizes Information

MyMedicare.gov is an innovative web portal that you can access at www.medicare.gov. It is a free, secure online service for accessing personalized information regarding your Medicare benefits and services. Only people with Medicare who register as portal users, or trusted individuals they choose, will be able to view this information using a unique password. This tool is available in English and Spanish. You can use MyMedicare to do the following:

- View claim status (excluding Part D prescription claims).
- Order a duplicate Medicare Summary Notice (MSN) or replacement Medicare card.
- View eligibility, entitlement, and preventive services information.
- View enrollment information, including prescription drug plans.
- View or modify your drug list and pharmacy information.
- View address of record with Medicare and Part B deductible status.
- Access Centers for Medicare and Medicaid (CMS) online forms, publications, messages.

This article provided by the state's Medicare Information Office. More information is available online at hss.state.ak.us/dsds/medicare/ or by calling 800-478-6065 or in Anchorage 269-3680.



To get started, have your red, white and blue Medicare card handy and register at www.mymedicare.gov for a password. You can then take a tour and use the website.

It's important to review the Medicare Summary Notices that you receive by mail or view them online to be sure you received the services for which Medicare was billed. If you don't have a convenient way to track your healthcare services, feel free to ask for a Personal Health Care Journal from Alaska's Medicare Information Office, toll-free at 1-800-478-6065 or in Anchorage at 907-269-3680.

File Health Claims Timely

Remember to file your health claims as soon as possible. You must file a claim within 12 months of the date of service for the claim to be considered for payment. Even if another health plan, such as Medicare, is your primary insurance, and you have a claim pending with them, file your AlaskaCare health plan claim before the 12-month limit is reached.

Remember to file any claims you may still have for dates of service *prior* to July 1, 2009, with Premera as soon as possible. Claims for dates of service *on or after* July 1 should be filed with Wells Fargo Insurance Services. Claims must be filed within 12 months of the date the service was provided.

File now! Your claim will be denied if you file it outside of the 12-month filing limit.

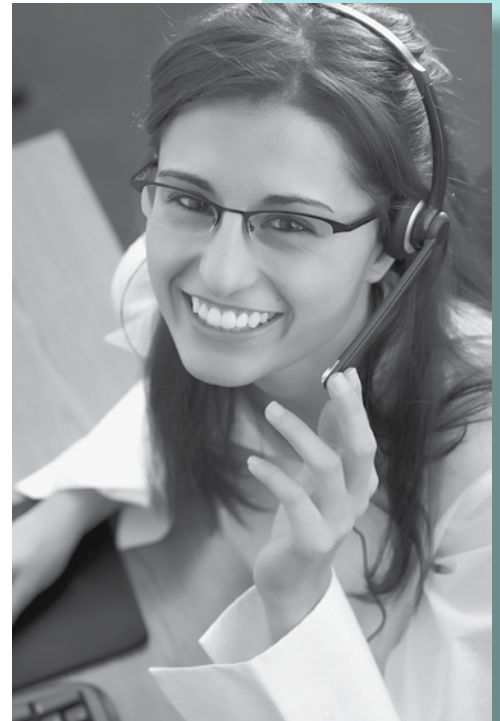
Medical Claims or Questions?

Here's Who to Call

Many members have been calling the Division of Retirement & Benefits – Benefits Section with questions the claims administrator, Wells Fargo Insurance Services (WFIS), should handle. Here are some guidelines to help you decide when to call WFIS and when to call the Benefits Section:

Call Wells Fargo Insurance Services Customer Service for questions about these topics:

- ID cards – request additional or replacement cards.
- Benefits – specific questions regarding your medical, dental, vision, or audio benefits; for example, to find out whether or not a particular medical procedure is covered by your plan.
- Providers – to locate a network provider in your area. The plan does not require that you use a network provider but doing so helps save both you and the plan money.
- Claims or Explanation of Benefits (EOB) statements – questions regarding status, denials, and other information about how your claim was processed.
- Precertifications and preauthorizations – for any inpatient stay, MRIs of the knee or spine, travel, or mental health treatment.
- Long-Term Care – to initiate a claim or to request information. Customer service staff will answer your Long-Term Care (LTC) questions, and will give you additional information if you need to file a claim for LTC benefits.
- COBRA/Direct Bill – enrollment and premium payment/deduction.
- Student verification – semi-annual validation of student eligibility status for dependent children aged 19-23.
- Coordination of Benefits – notification of other health insurance for yourself and/or eligible dependents.



Call WFIS Customer Service toll free at 1-877-517-6370. To locate a participating pharmacy, call the 24-hour pharmacy help desk at 1-800-361-4542, available 365 days a year. For pharmacy mail order assistance or refills, call 1-800-607-6861.

Call WFIS Customer Service toll free at 1-877-517-6370.

Call the Division's Benefits Section for questions about the following:

- How much are my health insurance premiums?
- Eligibility of members and dependents.
- How do I enroll in the health insurance plan?
- When can I elect different coverage?
- Name and address changes for retirees. (Active employees need to contact the Division of Personnel, Payroll Service Center.)

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Health Matters is published quarterly by the Division of Retirement and Benefits.

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1-800-821-2251

Benefits (907) 465-8600

Fax: (907) 465-4668

TDD hearing impaired:
(907) 465-2805

The Alaska Department of Administration complies with Title II of the 1990 Americans with Disabilities Act (ADA). This health newsletter is available in alternative communication formats upon request. To make necessary arrangements, contact the ADA Coordinator for the Division of Retirement and Benefits, at (907) 465-4460 or contact the TDD for the hearing impaired at (907) 465-2805.

Disclaimer:

Information in this newsletter summarizes the plan provisions, is supplemental only, and does not supersede the applicable Information Booklet's provisions.

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Medical Claims or Questions?

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Call Benefits Section staff toll free at 1-800-821-2251, option 1, or in Juneau at 465-8600, or send an email to doa.drb.benefits@alaska.gov.

Let Your Fingers do the Walking

AlaskaCare's website, AlaskaCare.gov, includes claim forms and a member-specific secure site to access your personal health plan information. You can request ID cards, find a preferred provider or participating pharmacy, print forms, request refills from the mail order pharmacy and more.



Take Good Care of Yourself!

1-800-807-2997
24/7 Health Line

to speak with a registered nurse about your **nonemergency** health concerns

Free to ALASKACARE members