

CEBT BENEFIT & ADMINISTRATIVE CHANGES
(Effective July 1, 2022)

CEBT Administrative Changes

Paperless Enrollment: Beginning 7/1/2022 all CEBT employer groups will be automatically defaulted as Online Enrollment users through the CEBT Community Portal. If your group would like to opt-out of paperless enrollment, please contact your Membership Premium and Accounting (MPA) representative to do so by April 1st, 2022.

CEBT Medical Plan Changes Effective 7/1/2022

****Network Change:** Rocky Mountain Health Plan will not be offering their network to group health plans as of 1/1/2023, requiring all employer groups currently on the RMHP network to be moved to the United Healthcare Choice Plus Network. Groups renewing in July will automatically be moved effective July 1st, 2022. Groups renewing in January will be automatically moved January 1st, 2023.

***Omada Health:** CEBT will offer a new digital disease management program focusing on pre-diabetes (prevention), diabetes, hypertension, & musculoskeletal issues. More information regarding this program will be included in enrollment materials posted to the Resource Center in the online Community Portal.

***UMR Cancer Resource Services Program (CRS):** A new cancer resource service through UMR will be available, on a voluntary basis, to members enrolled in a CEBT PPO, EPO or HDHP plan. Members diagnosed with cancer will have access to guidance, direction, and support through tenured oncology nurses as well as access to quality cancer Centers of Excellence (COE). More information regarding this program will be included in enrollment materials posted to the Resource Center in the online Community Portal.

****PPO & HDHP Plan Changes:**

Benefit Type	Current Coverage	Effective 7/1/2022
Urgent Care	\$50 co-pay on all PPO plans for in-network providers.	\$75 co-pay on all PPO plans
Advanced Imaging	Nuclear Medicine is carved out of advanced imaging and paid as a separate benefit	Include Nuclear Medicine as part of the advanced imaging benefit alongside MRI/MRA/CT/PET/SPECT scans
Extended Care Facilities Limit	Limited to 45 days per calendar	Increase limit to 75 days per calendar year
PT (Aquatic)/OT/ST Visit maximum	20 visit maximum combined between all therapies	20 visit maximum per separate therapy
Wellness Benefit Routine Mammograms	1 baseline allowed from 35-39 and then 1 annually for ages 40+	1 per year, no age limit
Bereavement Counseling	Benefit falls under Hospice	Included as any other mental health treatment



Oral Surgery Excision of partially or completely impacted wisdom teeth and excision of exostosis of jaws and hard palate	Excluded	Allow both, payable at deductible/coinsurance
Orthognathic, Prognathic and Maxillofacial Surgery	Excluded	Allow, payable at normal plan benefits based on services received
Family deductible (PPO Plans)	3X single deductible	2X single deductible

EPO Plan Changes:

Benefit Type	Current Coverage	Effective 7/1/2022
Urgent Care	\$50 co-pay on all PPO plans for in-network providers.	\$75 co-pay on all PPO plans
Extended Care Facility	\$0 co-pay, 100% coverage with a 45 day visit limit per calendar year	Inpatient co-pay applies: EPO 3 \$1,000 co-pay EPO 4 \$1,500 co-pay EPO 5 \$2,500 co-pay EPO 6 \$3,000 co-pay Increase visit limit from 45 days per calendar year to 75 days per calendar year
Prosthetic Appliances	\$0 co-pay, 100% coverage	\$250 co-pay (all EPO plans)
Medical Mammograms	\$0 co-pay, 100% coverage	Outpatient x-ray co-pay \$50 (all EPO plans)
Cochlear Implants	\$0 co-pay, 100% coverage	\$250 co-pay (all EPO plans)

****Program excludes Kaiser enrolled members***

*****ID Cards will be reissued for members on the RMHP Network due to the network change, as well as PPO Plans due to the change in Family Deductible from 3x to 2x the individual deductible.***

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