

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 |



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|---|----------------------|---|
| 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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Kaiser (All Plans)

Video Visits: Video visits for Physical, Occupational and Speech Therapy will follow the same authorization rules and apply to the visit limits as in person visits. Video visits for ABA therapies will follow the same authorization rules as in person ABA therapy visits.

Drug Manufacturer Coupons: Members may be able to apply approved manufacturer coupons towards their cost share for certain covered drugs and/or items obtained at a Kaiser Permanente pharmacy. Members will owe any additional amount if the coupon does not cover the entire amount of cost sharing for the prescription or item.

Dental Services Pursuant to Transplant: Medically necessary dental services required for the direct treatment of a covered transplant procedure will be covered.

Kaiser DHMO Plans Only

Family deductible reduced from 3x single to 2x

Kaiser HDHP Plans Only

Chat with a Plan Provider: Online chat encounters will be covered at the applicable plan co-payment or coinsurance once the plan deductible is met.

Email and E-visits with a Plan Provider: Email and E-visit encounters with affiliated plan providers will be covered at the applicable plan co-payment or coinsurance once the plan Deductible is met.

All Plans

Effective 1/15/2022 through the Public Health Emergency Period (set to expire April 15th, 2022)

At Home Covid Tests: Free tests can be ordered through the federal government by visiting [COVIDtests.gov](https://www.covidtests.gov).

Coverage for at home COVID tests will be reimbursable with proof of purchase under CEBT or Kaiser plans (reimbursement limits may apply), or at the pharmacy point of sale with CVS Caremark ID cards.

CEBT Medical - Effective 1/1/2022

The age limit for diagnostic colonoscopies was reduced from age 50 to 45 and is covered at 100% on the PPO and EPO plans.





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