

**University System of Georgia Staff Council
Kennesaw State University**

May 1, 2013

Meeting Minutes

Attendance

Abraham Baldwin Agricultural College, Albany State University, Clayton State University, Columbus State University, Dalton State College, Georgia Perimeter College, Georgia Southern University, Georgia State University, Kennesaw State University, Southern Polytechnic State University, University of Georgia, University of North Georgia, University of West Georgia, Valdosta State University

Welcome

A warm welcome to Kennesaw State University was given by Ms. Vanessa Biggers, President of the KSU Staff Senate. Dr. Daniel Papp, Kennesaw State University's President, welcomed all to KSU's campus and gave a brief KSU history lesson to all, culminating with the announcement of a Fall 2015 football team.

Speaker

Ms. Maria Britt, Associate Vice President for Operations at Kennesaw State University, gave a motivational speech about leadership. Take away points are: "Step up and Lean in" for the good of the group; overcome your personal fears, lead for the group not the individual (it's not about being liked, it's about being respected); keep your sense of humor. Please see Ms. Maria's article attached to the minutes.

Call to Order

The meeting was called to order at 10:24 a.m. by University System of Georgia Staff Council Chair, Kim Douglas of Albany State University.

Invocation

Ms. Geraldine Winns, USG Chair-Elect, gave the invocation

Old Business

Chair-Elect, Ms. Geraldine Winns, proposed that the USG Staff Council have polo shirts bearing the USG logo on the left side of the shirt with the words "USG Staff Council" underneath. Proposed that the shirts be black with white lettering. Estimate cost is \$25.00 per shirt with each institution purchasing their own shirts. These shirts can be worn to USGSC meetings. BOR approval of logo will be needed.

Institutional Roll Call and Treasurer's Report

Ms. Yvonne LeRoy-Landers, USGSC Treasurer, asked all in attendance to ensure that all delegates and alternates sign the attendance sheet. The roll call was taken and attendees were counted. A copy of the 2014 dues form was given to all and a reminder that the \$25.00 annual membership fee is due by August 1, 2013. The Treasurer's report shows a current balance of \$4,209.04 as of the time of this meeting.

A request from the floor to have the Treasurer's Report re-formatted into a simple report that all can understand was suggested. A concern regarding the donation from UGA given to

USGSC to be used for travel of the Executive Board and staff travelling to the annual conference/meetings was raised. Chair Douglas stated that the Executive Officers will figure it out and take up at the July meeting. Chair-Elect Winns stated that these funds were given to help staff come to meetings. UGA rep, Ms. Brenda Keen stated that these funds were intended to help the Chair to travel to BOR or State meetings as a representative for staff. Treasurer Landers will clarify the purpose of the donation at the July meeting. Ms. Nicole DeVries from Columbus State University approved the Treasurer's report, second by Chris Kinsey (ABAC).

Approval of Minutes

Ms. Debbie Chimeno, USGSC Secretary, asked for a motion on the floor to approve the minutes of February 2013 as stands. Ms. Yvonne LeRoy-Landers, Valdosta State University, moved to approve the minutes and seconded by Ms. Nicole DeVries, Columbus State University. Minutes approved with no corrections. The Secretary asked the consolidated institutions to update all email addresses and information of their Staff Councils and forward to: dchimenl@kennesaw.edu

New Business

Representative Charles Gilbreath (Georgia State University) offered to give interested universities, a copy of a survey developed by GSU to be used as a tool to determine the climate of its' staff.

Elections

USGSC Delegates and Alternates were counted to ensure a quorum was reached. Chair-Elect Ms. Winns and Treasurer Ms. Landers concurred that a quorum was met. Candidates were asked to tell the Staff Council about themselves and the position that they are running for. Per our bylaws, the Chair-Elect advances to the position of Chair with no vote required. Ms. Nancy Mattson (UNG) and Ms. Debbie Chimeno (KSU) are candidates for Chair-Elect; Ms. Yvonne Landers (VSU) candidate for Treasurer; Ms. Debbie Chimeno (KSU) candidate for Secretary. Election results are: Ms. Geraldine Winns (ASU) Chair, Ms. Debbie Chimeno (KSU) Chair-Elect, Ms. Yvonne Landers (VSU) Treasurer; Ms. Pattie Beblowski (Georgia Southern University) Secretary. Chair Kim Douglas (ASU) appointed Ms. Pattie Beblowski to the position of Secretary and Ms. Pattie verbally accepted.

Institution Reports

Columbus State University- Ms. Nicole de Vries informed the institutions that CSU is raising money by recycling pens as well as ink toner cartridges. CSU has "Employee Appreciation" day.

Southern Polytechnics- Ms. Alberta Cook informed the Council that they have "Employee Service Awards" whereby they recognize three staff members with a plaque and \$500.00 each. An employee picnic is done each year and the SPSU Council would like suggestions on how to get faculty interested to attend.

University of North Georgia – Ms. Nancy Mattson informed all that October 2-3, 2013 will be the USGSC Annual Conference on the Gainesville campus. They are waiting to hear from Governor Nathan Deal to be a speaker at the conference or Dave Ramsey. More details to follow.

Kennesaw State University- Ms. Vanessa Biggers informed the Council that KSU has an "Owlympics" every year for staff. This year it will take place on May 17th

USG Benefits Update

The USGSC was honored to have Associate Vice Chancellor for Total Rewards, Ms. Karin Elliott and Ms. Jen Guilbeau from BlueCross BlueShield. The Total Rewards Steering Committee is appointed by the Chancellor at the recommendation of the Vice Chancellor for HR. Fall 2013 will be the kickoff for Wellness. Open enrollment might be later this year. Great new programs for the University System of Georgia are to be added like 24/7 NurseLine, My Health Coach, ConditionCare for members that suffer from a chronic condition and much more. Please see the PowerPoint Presentations attached to the email sent via Listserv for more information. Please send any Wellness benefit ideas to Ms. Karin Elliott at: Karin.Elliott@usg.edu

Future Annual Conferences to be held:

- 2013 University of North Georgia (Gainesville Campus)
- 2014 Albany State University
- 2015 Columbus State University
- 2016 Southern Polytechnic State University

Closing and Adjournment

The meeting was adjourned at 2:10 p.m. by Kim Douglas, USGSC Chair. The next USGSC Meeting will take place at Valdosta State University in July 2013.

Respectfully Submitted,

Debbie Chimeno
USGSC Secretary
Kennesaw State University



University System of Georgia Benefits Update

Office of Human Resources

May 1, 2013



Topics of Discussion

- Total Rewards Steering Committee
- Current State of Healthcare Plan
- Wellness 2013 - 2014
- 2014 Open Enrollment



Total Rewards Steering Committee

- Makes recommendations regarding the System's benefit programs to the Vice Chancellor for HR
- Committee members appointed by the Chancellor at the recommendation of the Vice Chancellor for HR
- Committee members represent a cross section of institutions and are appointed for a two year term
- Committee is split into an Executive Council which meets monthly and an Advisory Implementation Committee which meets 3-4 times a year



Total Rewards Steering Committee

Executive Council Members

- Mr. John Brown, Vice Chancellor for Fiscal Affairs and Treasurer, System Office
- Dr. Phaedra Corso, Professor, Health Policy & Management, University of GA
- Dr. William Custer, Associate Professor, Director of Center for Health Services Research, GA State University
- Ms. Marion Fedrick, Vice Chancellor for Human Resources, System Office
- Ms. Susan Norton, Vice President Human Resources, Georgia Regents University
- Dr. Valerie Hepburn, President, College of Coastal GA
- Mr. Tom Gausvik, Associate VP for Human Resources, University of GA
- Mr. Russ Toal, Clinical Associate Professor, College of Public Health, GA Southern University



Total Rewards Steering Committee

Advisory and Implementation Committee Members

- Mr. Ronnie Henry, VP for Business & Finance, Darton College
- Ms. Diane Kirkwood, Assoc. Director, Payroll & Benefits, Shared Services Center
- Ms. Lydia Lanier, HR Sr. Managing Director, University of Georgia
- Dr. Linda Noble, Associate Vice Chancellor for Faculty Affairs, System Office
- Ms. Cheryl Johnson Ransaw, Director of Employee Development and Wellness, Georgia State University
- Ms. Darlene Wright, Director of Benefits, Georgia Institute of Technology



Total Rewards Steering Committee

Current Activities of the Executive Council

- Procuring Data Analytics Vendor
 - Help us better analyze performance of our plan and give insight into provider quality and utilization by institution
- Evaluating 2012 healthcare plan performance
- Making recommendations for 2014 plan year & future strategy



Healthcare plan - what's ahead?

2014 – Plan Changes

- Could be some changes to plan benefits
- Focus on Wellness
- Continue Premium Alignment to plan benefits



Healthcare plan -what's ahead?

2014 – Affordable Care Act (ACA)

- Several of the law's requirements take effect
 - Health insurance coverage required
- Increased enrollment in the plan = USG pays more for employee healthcare coverage
- Additional fees for employers and suppliers
- Possible premium increase in 2014 due to ACA
- USG Task Force has been formed and is working on changing policies/procedures to meet requirements



Healthcare Plan -what's ahead?

2013 – 2014

- Release RFP for healthcare plan Third Party Administrator – currently vendors are BCBSGa and Kaiser (November)
- Restructure plans
- Wellness initiatives to be integrated with plans
- Possible restructuring retiree coverage
- Effective date of new plans will be 1/1/15



Healthcare Plan – Statistics QUIZ

- How many members, employees, retirees and dependents, are enrolled in the USG healthcare plan?
– 102,000
- What is the average age of active employees enrolled in the plan?
– 45.1



Healthcare Plan – Statistics QUIZ

- Approximately how much will USG pay towards the cost of the plan for all USG employees in 2013?
 - \$348 Million
- What percentage of our employees (and dependents) had an annual wellness visit in 2012?
 - 33%



USG Healthcare Plan - Statistics

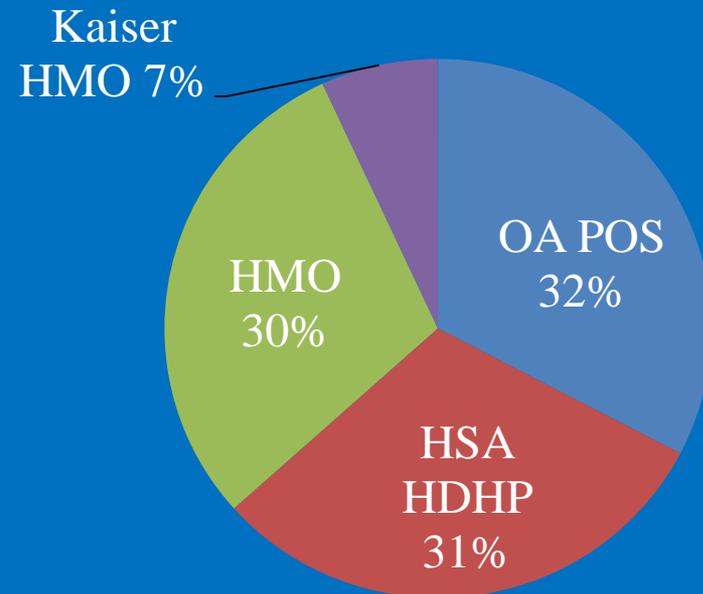
2013 Active Employees Plan Enrollment

32% Employees enrolled
in the OA POS

31% Employees enrolled
in the HSA OA POS

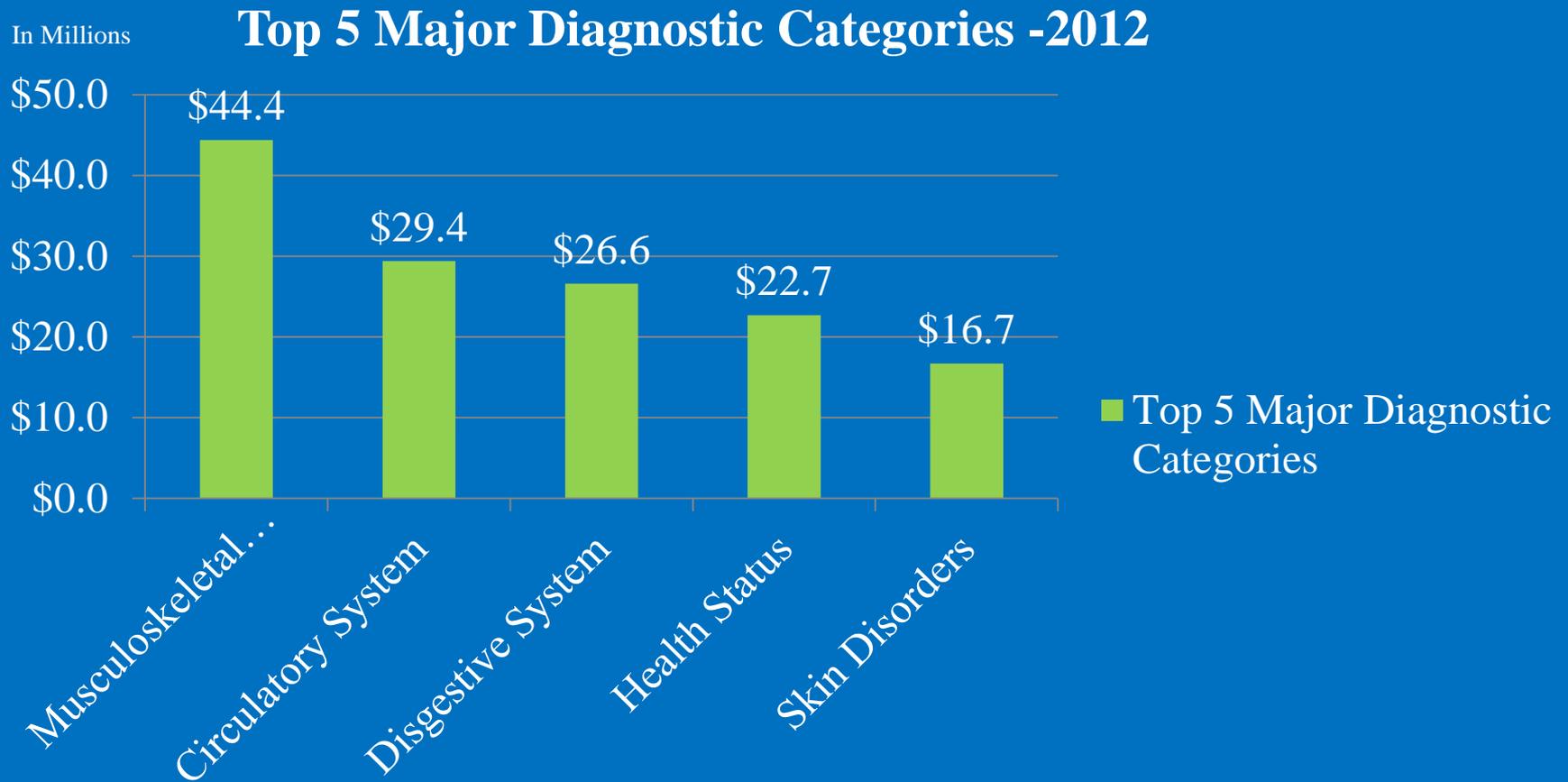
30% Employees enrolled
in the HMO

7% Employees enrolled in
Kaiser





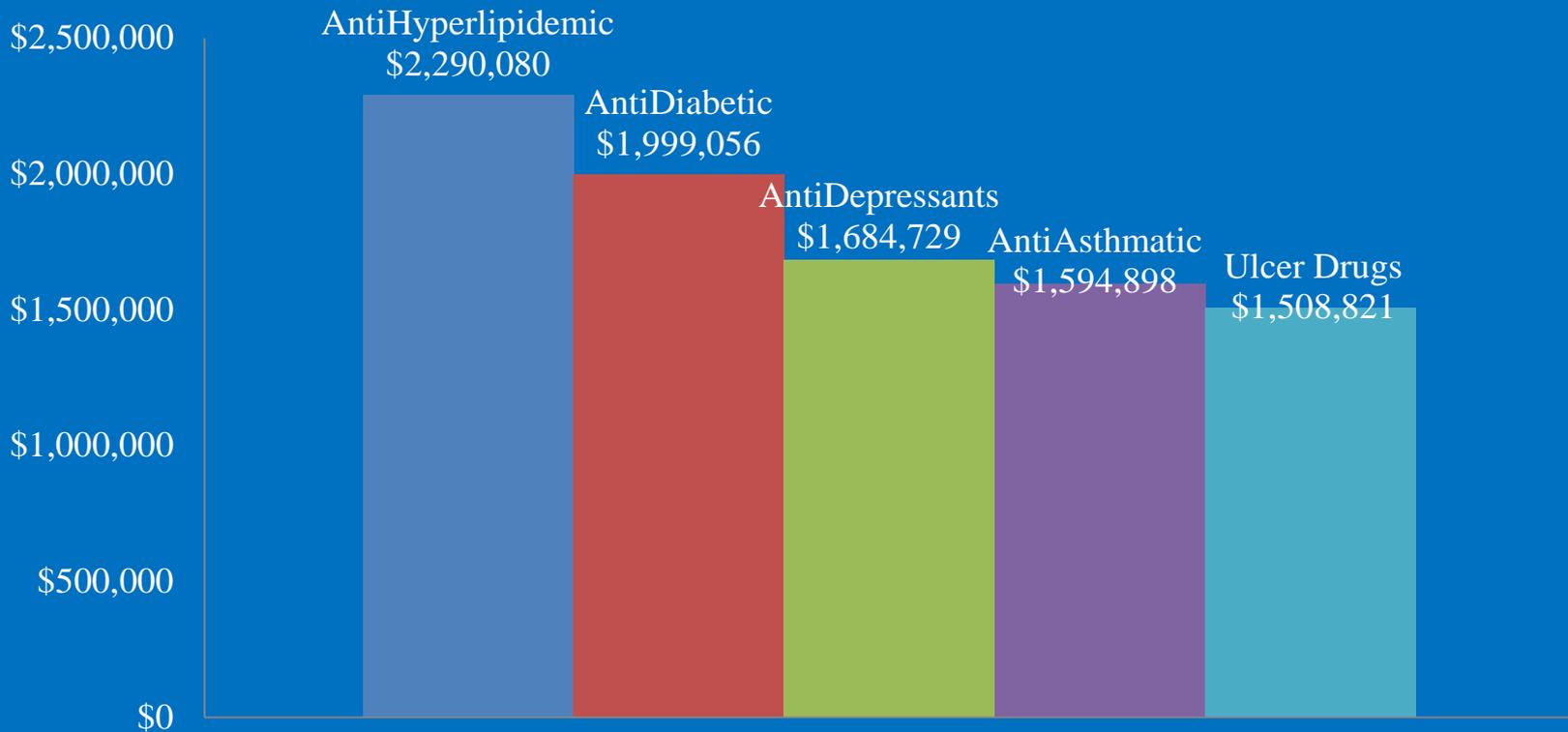
USG Healthcare Plan - Statistics





USG Healthcare Plan - Statistics

2011 Top 5 Drug Therapeutic Categories by Cost





USG Healthcare Plan - Statistics

Top 4 Lifestyle Conditions
by number of members
affected

- Hypertension
- Lipid Metabolism Disorders
- Osteoarthritis
- Diabetes

Top 3 Lifestyle Conditions
by Claim Costs

- Osteoarthritis
- Coronary Artery Disease
- Cancer - Breast



USG Healthcare Plan - Statistics

Why is this important?

If health of USG employees improves =

- Healthier, happier employees!
- Employees out of pocket medical costs decrease
- Overall claim costs go down
- Help control healthcare plan cost increases



WELLNESS INITIATIVE



Wellness

Fall 2013 Kickoff

- Inter-institution wellness competition
- USG Employee Wellness Website launch - resources and information for employees
- Institution specific wellness activities
- HR Leaders engage Staff Senate – help educate, spread the word, build excitement



Wellness

Wellness Mini-grants available

- \$10,000 to support a wellness activity on campus
- Targeting tobacco cessation or obesity
- Campus HR office needs to submit idea to BOR by mid-May



Wellness

2014

- Continue to communicate and educate employees
- Biometrics and Health Risk Assessments
 - Find out where you are to know where you need to go.....
- Continue working with BCBSGa and Kaiser and use resources to encourage wellness and appropriate use of plan benefits



2014 OPEN ENROLLMENT



2014 Open Enrollment

- Active Open Enrollment – everyone must positively enroll!
- Open Enrollment may be later this year
- Evaluating BOR Voluntary Benefits offerings for 2014



QUESTIONS

Now you can take us on the go. Get our free mobile app!

Available on iPhones and Android smartphones.

On our app, you can:

- Find a doctor.
- Get to an urgent care center fast with maps and driving directions.
- Locate a hospital or emergency room.
- Access your Blue Cross and Blue Shield of Georgia ID card on your phone.

Using our mobile app can help make it easier than ever to manage your health care.

1. Go to the app store on your smartphone or mobile device.
2. Search for Blue Cross and Blue Shield of Georgia.
3. Select the app. Start the free download.

To use the mobile application, you must be registered on our secure member site and have a username and password. If you are an Blue Cross and Blue Shield of Georgia member but have not registered for access to the secure member website, go to bcbsga.com from your computer and click Register Now.

The BlueCard® Program

Across the country and around the world ...we've got you covered.

Health care coverage wherever you go

When you're a Blue Cross and Blue Shield of Georgia member, you take your health care benefits with you – across the country and around the world. With the BlueCard® Program, you can go to doctors and hospitals almost anywhere. So there's a good chance you'll find the care you need.

You have the freedom of choice

As a Blue Cross and Blue Shield of Georgia member, you have more freedom to choose the doctors and hospitals that best suit you and your family. In the United States, you're covered whether you need care in urban or rural areas. Outside of the United States, you can go to doctors and hospitals in more than 200 countries and territories around the world through the BlueCard Worldwide® Program.

Take charge of your health, wherever you are

In the United States

1. Always carry your current ID card.
2. In an emergency, go to the nearest hospital.
3. To find doctors and hospitals near you, call BlueCard Access at 800-810-BLUE (2583) or see the BlueCard Doctor and Hospital Finder at bcbs.com.
4. Call the Customer Service number on your ID card for precertification or prior approval, if needed. *Note: This phone number is not the same as the BlueCard Access number above.*
5. At the participating doctor's office or hospital, show your ID card. A participating doctor or hospital is one that has joined BCBSGa or that serves BCBSGa members. Your benefits (the health services we offer) will be shown through one of these symbols:



Traditional/
Indemnity
Benefits



PPO
Benefits

After you get care, you should:

- Not have to fill out any claim forms
- Not have to pay up front for health care services, except for the normal out-of-pocket fees (noncovered services, deductible, copayment and coinsurance)
- Get an explanation of benefits online or by mail



Around the world

1. Check on your international benefits with a Customer Service representative before you leave the United States. Coverage may not be the same outside the U.S.
2. Always carry your current ID card.
3. **In an emergency, go to the nearest hospital.**
4. If you need to find a doctor or hospital, or need help getting health care, call the **BlueCard Worldwide Service Center toll free at 800-810-BLUE (2583) or call collect at 804-673-1177**, 24 hours a day, seven days a week. An assistance coordinator, along with a health care professional, will help you with a doctor office visit or if you need to stay in a hospital.
5. **Call the BlueCard Worldwide Service Center toll free at 800-810-2583 or collect at 804-673-1177 when you need 24-hour care (inpatient) in a hospital.** In most cases, you should not need to pay up front for inpatient care at participating BlueCard Worldwide hospitals. You will have to pay for the out-of-pocket fees (noncovered services, deductible, copayment and coinsurance) you normally pay. The hospital should send your claim for you. After you contact the BlueCard Worldwide Service Center, you should also call a Customer Service representative for precertification or prior approval. You can find the phone number on your ID card. *Note: This number is not the same as the phone number above.*
6. You will need to pay up front for care you get from a nonparticipating doctor and/or hospital. Then, fill out a BlueCard Worldwide claim form and send it with the bill(s) to the BlueCard Worldwide Service Center at the address on the form. You can get the claim form from the BlueCard Worldwide Service Center or online at **bcbs.com/bluecardworldwide**.

To learn more about the BlueCard Program, call a Customer Service representative at the phone number on your ID card, or visit **bcbs.com**.

Important

To find doctors and hospitals outside of the United States, go to the BlueCard Doctor and Hospital Finder at **bcbs.com** or call BlueCard Access at **800-810-BLUE (2583)**.



With the BlueCard Program, you can find doctors and hospitals quickly and easily. Just have your ID card handy, then:

- Visit the BlueCard Doctor and Hospital Finder at **bcbs.com** to find doctors and hospitals, along with maps and directions to find them.
- or**
- Call BlueCard Access at 800-810-BLUE (2583) for the names and addresses of doctors and hospitals in the area where you or a covered dependent (or family member) need care.

If you're a PPO member, always use a BlueCard PPO doctor or hospital to make sure you get of the most from your benefits.

Behind you all the way



ConditionCare

If you or a family member suffers from a chronic condition, our **ConditionCare** program may be able to improve your overall health. After all, we've already helped thousands of people deal with asthma, chronic obstructive pulmonary disease (COPD), diabetes, heart failure and coronary artery disease (CAD). By participating in our free program, you can get the tools and information you need to manage your symptoms. For instance, you'll receive:

- 24/7 toll-free access to a registered nurse who'll answer your questions and provide the latest information about your condition.
- A health evaluation and, if needed, follow-up consultations.
- Educational materials on prevention, self-management and lifestyle choices that can help you feel better and get more out of life.

Call ConditionCare toll-free at **800-785-0006** to see if we can help you.

MyHealth Coach

Could you use some cheering on to achieve your health goals? Many people find that it helps. That's why **MyHealth Coach** offers one-on-one professional assistance to help you be your healthy best.

Once you've enrolled in the program, you and your family members can access a health coach who helps you and/or your covered family members understand your benefits, get access to care and seize opportunities to feel better every day.

Whether you are looking to lose weight or lower your stress level, MyHealth Coach has strategies to help. If you're about to have surgery, a nurse with MyHealth Coach can help you prepare for the procedure and plan ahead for your recovery.

To get started, simply call **800-785-0006**.

24/7 NurseLine

If you've ever been up at 3 a.m. with a sick child or an illness of your own, then you know that round-the-clock access to health information is vital to your peace of mind and your physical well-being. That's why we have nurses available to speak with you about your general health issues any time of the day or night. Call us toll-free at **800-785-0006** to get information and support whenever you need it.



BlueCross BlueShield
of Georgia

ComplexCare

Outreach, education and support for those most at risk

ComplexCare helps employees stay healthy and be more productive, while lowering costs for employers. **For every dollar spent, ComplexCare returns \$1.98 in medical savings.** Also, the program has been shown to lower use of ERs (-5%) and inpatient admissions (-11%).*

Managing health care costs starts with helping those who need it the most. **ComplexCare** reaches out to members with various health care issues who are at risk for frequent and high levels of medical care.

We support and help these members take care of their health care needs. Members who sign up for this program may have major orthopedic, heart, nerve or cancer-related health issues.

ComplexCare is staffed by nurse coaches trained in helping higher-risk patients. The nurse coach will work with the member and the treating doctor to make a personal nursing care plan.

The nursing care plan creates personal goals for members to help them improve their health. Members will have a nurse coach who will offer:

- Personal attention, goal planning, and health and lifestyle coaching
- Ways to aid self-management skills and drug adherence
- Resources to answer health-related questions for certain treatments
- Access to other needed medical management programs
- Depression screening with referral to our behavioral health services as needed
- Coordination of care between many providers and services

*Results gained from the study of a large client representing 1.4 million members (WellPoint Study, 2010). Client-specific results may vary.



ComplexCare uses predictive modeling on claims to find members with serious health problems. Then we reach out to them with help. We also find members through:

- Health risk assessment data
- Utilization management reports
- Referrals from a doctor or one of our other programs, such as the 24/7 NurseLine

Members report very positive experiences with **ComplexCare**, including:

- **86%** of **ComplexCare** members say they are “**satisfied**” or “**very satisfied**” with the program.
- **94%** of **ComplexCare** members say they had an **excellent experience** talking with a nurse coach.

Source: WellPoint Study, 1Q 2012 Member Satisfaction Study for **ComplexCare**





Where to get care when you need it now

What do you do when you need care right away, but it's not an emergency?

The last place anyone wants to sit and wait hour after hour is the emergency room (ER). And it can cost you more than you might need to pay if you could get care from somewhere else quickly.

You should know you have more options than just the ER.

First call your primary care doctor

He or she is the doctor you see for most care. When you call this doctor, he or she will tell you if you should make an appointment with the doctor or go to the ER. Your doctor might even suggest you go to a retail health clinic or urgent care. But when you can't see your doctor or if your doctor's office is closed, you can choose an option below. It often takes less time than the ER and costs about the same as a doctor visit. Plus, most are open weeknights and weekends.

Choose a care option that could save time and money

Retail health clinic — A clinic staffed by medical professionals who provide basic medical services to “walk-in” patients. Usually in a major pharmacy or retail store.

Urgent care center — A group of doctors who treat conditions that should be looked at right away but aren't as severe as emergencies. Can often do x-rays, lab tests and stitches.

Pick a care facility and call before you go

Ask:

- What are your hours?
- Tell them what has happened (for example, “I have a cut” or “I twisted my ankle.”) Then ask, do you have services that I need?
- What age range do you treat?
- Are you a provider that is part of my health plan network?

What you pay

\$100 - \$150*

ER visit

\$25 - \$60

Retail health clinic, Urgent care center

*Average health plan copays. For many members, deductibles and coinsurance may apply, which can make an even greater difference in the cost between an emergency room and alternate site of care.

When to use the ER

Always call 911 or go the ER if you think you could put your health at serious risk by delaying care.

Want to find ER alternatives fast?

Go online to bcbsga.com/eralt. Click on your location on the map of the state of **Georgia**. It will show you locations for care options in your area. You also can type in your street address or ZIP code to get this information.

If you don't have internet access, call the 24/7 NurseLineSM for help finding a care location. The phone number is on your member ID card.**



See the other side for examples of when to go to the ER and when to consider other options. ▶

Deciding where to go

	Who usually provides care	Sprains, strains	Animal bites	X-rays	Stitches	Mild asthma	Minor headaches	Back pain	Nausea, vomiting, diarrhea	Minor allergic reactions	Coughs, sore throat	Bumps, cuts, scrapes	Rashes, minor burns	Minor fevers, colds	Ear or sinus pain	Burning with urination	Eye swelling, irritation, redness or pain	Cost
Retail health clinic	Physician assistant or nurse practitioner									•	•	•	•	•	•	•	•	\$25-\$40 copay
Urgent care center	Internal medicine, family practice, pediatric and ER doctors	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	\$60 copay

When to go to the ER

Some examples of ER medical emergencies are:

Any life-threatening or disabling condition	Severe shortness of breath	Cut or wound that won't stop bleeding
Sudden or unexplained loss of consciousness	High fever with stiff neck, mental confusion or difficulty breathing	Major injuries
Chest pain; numbness in the face, arm or leg; difficulty speaking	Coughing up or vomiting blood	Possible broken bones

Options have different services and copays. Call and ask before you go.

Remember you have choices. If it's not an emergency, call your doctor first or the 24/7 NurseLine. The phone number is on your ID card. The nurse on the phone can help you decide what to do next.

If you are an HMO member, you should call your primary care doctor's office or medical group to find out your ER alternatives for urgent care.



Scan the code on the left with your mobile capable device for a direct link to bcbsga.com/eralt

Don't have a QR code reader? Download the free ScanLife app to your mobile device or visit www.scanlife.com.

At Blue Cross and Blue Shield of Georgia, we're always looking for new ways to save you time, money and help you get more value from your health care.

If you get care from a provider that is NOT part of your health plan network, you may have significantly higher out-of-pocket costs.

Today I will

take the health assessment and take action

Log in to bcbsga.com, click on health and wellness and start your health assessment today.

Here's how the health assessment works — and why taking it can be a good move for you.

1. Answer some questions to get a snapshot of your current health — like what's going great and any at-risk areas you should know about.
2. Get tips on simple steps you can take today to reduce your health risks and avoid serious treatment.
3. Find out about all the free programs and easy-to-use tools on bcbsga.com that can help you live healthier.

Anything you put in your health assessment is protected information.

This tool is for you. Your information will not be used by your company or by Blue Cross and Blue Shield of Georgia to decide if you're eligible for coverage. And it cannot affect the amount you pay for coverage.

The health assessment may use information to help suggest programs or other health or wellness tools that you might want to use, and that are part of your coverage. All your answers are protected by HIPAA Privacy and Security rules.



Use this chart — the more info you have, the more accurate your score.

So, do your health assessment now — then do it again whenever you get more info. Or use the chart to gather as much as you can, then take it. Your choice.

Weight	Height	Blood pressure Systolic (top number) Diastolic (bottom number)	Blood sugar (glucose) level
Total cholesterol	LDL cholesterol	HDL cholesterol	Triglycerides
When's the last time you had the below preventative care?			
Check up	Mammogram	PSA test (a test for prostate health)	Colonoscopy
Vision exam (including screening for glaucoma)	Dental exam	Flu shot	

Take care of yourself

Remember to get preventive care

Getting regular checkups and exams can help you stay well and catch problems early. It may even save your life.

Our health plans and policies cover 100% payment of the services listed in this preventive care flier.¹ When you get these services from doctors in your plan's network, you don't have to pay anything out of your own pocket. You may have to pay part of the costs if you use a doctor outside the network.

Preventive versus diagnostic care

What's the difference? Preventive care helps protect you from getting sick. Diagnostic care is used to find the cause of existing illnesses.

For example, say your doctor suggests you have a colonoscopy because of your age when you have no symptoms. That's preventive care. On the other hand, say you have symptoms and your doctor suggests a colonoscopy to see what's causing your symptoms. That's diagnostic care.

[Here's a listing of the types of preventive services we cover. See your benefit plan to learn more.](#)

Child preventive care (birth through 18 years)

Preventive care physical exams are covered. So are the screenings, tests and vaccines listed here. The preventive care services listed below may not be right for every person. Ask your doctor what's right for you.

Preventive physical exams

Screening tests (depending on your age) may include

- Behavioral screening and counseling to promote a healthy diet
- Blood pressure
- Cervical dysplasia screening
- Cholesterol and lipid level
- Depression screening
- Development and behavior screening
- Type 2 diabetes screening
- Hearing screening
- Height, weight and body mass index (BMI)
- Hemoglobin or hematocrit (blood count)
- Lead testing
- Newborn screening
- Screening and counseling for obesity
- Oral (dental health) assessment
- Screening and counseling for sexually transmitted infections
- Vision² screening

Immunizations

- Diphtheria, tetanus and pertussis (whooping cough)
- Haemophilus influenza type b (Hib)
- Hepatitis A
- Hepatitis B
- Human papillomavirus (HPV)
- Influenza (flu)
- Measles, mumps and rubella (MMR)
- Meningococcal (meningitis)
- Pneumococcal (pneumonia)
- Polio
- Rotavirus
- Varicella (chicken pox)



Adult preventive care (19 years and older)

Preventive care physical exams are covered. So are the screenings, tests and vaccines listed here. The preventive care services listed below may not be right for every person. Ask your doctor what's right for you.

Preventive physical exams

Screening tests and services (depending on your age) may include

- Aortic aneurysm screening (men who have smoked)
- Blood pressure
- Bone density test to screen for osteoporosis
- Breast cancer, including exam and mammogram
- Breastfeeding support, supplies and counseling (female)^{3,4}
- Cholesterol and lipid (fat) level
- Colorectal cancer, including fecal occult blood test, barium enema, flexible sigmoidoscopy, screening colonoscopy and CT colonography (as appropriate)
- Contraceptive (birth control) counseling and FDA-approved contraceptive medical services provided by a doctor, including sterilization (female)^{4,5}
- Depression screening
- Type 2 diabetes screening
- Eye chart test for vision²
- Hearing screening
- Height, weight and BMI
- HIV screening and counseling
- HPV screening (female)⁴
- Intervention services (includes counseling and education):
 - Behavioral counseling to promote a healthy diet
 - Counseling related to aspirin use for the prevention of cardiovascular disease (does not include coverage for aspirin)
 - Counseling related to genetic testing for women with a family history of breast or ovarian cancer
 - Counseling related to chemoprevention for women with a high risk of breast cancer
 - Primary care intervention to promote breastfeeding
 - Screening and behavioral counseling related to alcohol misuse

- Screening and behavioral counseling related to tobacco use
- Screening and counseling for interpersonal and domestic violence
- Screening and counseling for obesity
- Pelvic exam and Pap test, including screening for cervical cancer
- Prostate cancer, including digital rectal exam and PSA test
- Screenings during pregnancy (including, but not limited to, gestational diabetes⁴, hepatitis, asymptomatic bacteriuria, Rh incompatibility, syphilis, iron deficiency anemia, gonorrhea, chlamydia and HIV)
- Screening and counseling for sexually transmitted infections

Immunizations

- Diphtheria, tetanus and pertussis (whooping cough)
- Hepatitis A
- Hepatitis B
- HPV
- Influenza (flu)
- Meningococcal (meningitis)
- MMR
- Pneumococcal (pneumonia)
- Varicella (chicken pox)
- Zoster (shingles)

This sheet is not a contract or policy with BCBSGA. If there is any difference between this sheet and the policy, the provisions of the policy will govern. Please see your combined Evidence of Coverage and Disclosure Form or Certificate for Exclusions & Limitations.

1 The range of preventive care services covered at no cost share when provided in-network are designed to meet the requirements of federal and state law. The Department of Health and Human Services has defined the preventive services to be covered under federal law with no cost-share as those services described in the U.S. Preventive Services Task Force A and B recommendations, the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC), and certain guidelines for infants, children, adolescents and women supported by the Health Resources and Services Administration (HRSA) Guidelines. You may have additional coverage under your Georgia insurance policy. To learn more about what your plan covers, see your certificate of coverage or call the customer care number on your ID card.

2 Some plans and policies cover additional vision services. Please see your contract or Certificate of Coverage for details.

3 Breast pumps and supplies must be purchased from an in-network medical provider for 100% coverage; we recommend using an in-network durable medical equipment (DME) supplier.

4 This benefit is covered under health care reform's women's preventive services. For group plan members, these services are covered with policy years beginning after August 1, 2012. For members with individual coverage, these benefits are effective for new members on or after August 1, 2012 and for current members on January 1, 2013. This benefit also applies to those younger than 19.

5 To get 100% coverage for a covered prescription for birth control, it must be a generic drug or a brand-name drug that doesn't have a generic equivalent. Also, you'll need to fill the prescription at an in-network pharmacy. A cost-share may apply for other prescription contraceptives, based on your drug benefits.



Learn about the online tools that come with your health plan.

It's easy with our “Web Overview eTutorial” at bcbsga.com.

Our “Web Overview eTutorial” is a guide that walks you through all of the helpful tools you could — and should — be using. The guide will explain where you can find these tools and how to use them. It's fun, interactive and anything but boring.

With the “Web Overview eTutorial” you can learn how to:

- Register at bcbsga.com.
- Check the status of your claims
- Compare cost and quality for common medical procedures.
- Find a doctor.
- Take a health assessment to get an accurate picture of where you stand health-wise.
- Personalize your own health record, where you can keep all of your health information in one place.
- Find discounts on vitamins, health and beauty products, fitness center memberships, weight-loss programs and more. You can even get 20 dollars off at 1-800 Contacts and glasses.com.

How to get started with our “Web Overview eTutorial”

All you need to do is go to bcbsga.com and click on “Guided Tour” which is located near the Member Log In box. Then sit back and get ready to learn and have fun, all at the same time.





Overcome the Fear:

Women in Higher Education Need to Own the Opportunity

By Maria L. Britt

You can be a person to whom life happens, or you can choose to be a person who makes life happen. There is a distinct difference. Your life is shaped by upbringing, education and various experiences that create a frame of reference. It is how you choose to use this frame of reference that sets you apart, or not. Early on I realized that I couldn't be satisfied by going along with the norm and not engaging for the greater good. It took confidence and courage to step up and grasp the opportunities that were presented.

As a young girl, I attended a high school in upstate New York. My parents were both school teachers and instilled the value of learning in me. My father, an American History teacher, was keenly aware of the struggle for equal rights for all U.S. citizens. So when Congress authorized the admission of women to the U.S. Service Academies in 1976, he immediately knew this would be an amazing opportunity for me to start charting my own history. I wasn't so sure.

When the West Point acceptance letter came January 2, 1979, I decided to overcome my fear, step up and own the opportunity. The next four years were the toughest in my life. They were also my most rewarding. I learned several valuable lessons, but there is one in particular that has served me well throughout my 28 year career in the military and now as the Associate VP for Operations at the third largest state university in Georgia. I learned that I must overcome fear! F.D.R. was spot on when he stated, "There is nothing to fear but fear itself".

No matter how dire the circumstances may be, you must exhibit confidence and trust in yourself, or no one else will. Shortly after commissioning as a second lieutenant, I was stationed at Fort Hood, Texas as a Military Police platoon leader of 36 soldiers. Eight months into the assignment, I was given the mission to assist an all-male unit from the armored cavalry division during a night river crossing. Understanding this was a risky mission since it was at night and involved armored vehicles, I did my homework and conducted several reconnaissance missions to make sure my platoon was well prepared.

The evening came, my platoon rolled out as planned and I reported in to the cavalry headquarters to receive last minute updates. Shortly after reporting in, I received a call from my company commander. He informed me that the unit had requested our best platoon leader for the risky mission, but, and he hesitated, they weren't expecting a woman. Struggling to understand what he meant and then becoming angry, I asked if I was being taken off the mission and he paused. No, he said, the request was for my best platoon leader, so get back out there and prove me right! The spot light was brighter and failure was not an option. I could cave to my fear of failure or rise to the challenge. I chose to rise and lead my platoon. The platoon did an outstanding job that night and received a note from the cavalry unit leadership thanking us for keeping them on course and safe through the exercise. That note provided me with a renewed sense of confidence and energy.

Throughout the next twenty plus years, I would have many chances to overcome my fear and make life happen. I don't consider myself overly ambitious. My principle desire is to work for leaders that are competent and inspiring. I believe that promotions will result from a job well done. Often times my motivation for accepting positions of greater responsibility was to keep from stagnating by avoiding working for someone I thought was less competent or did not share my same sense of servant leadership. I had to take risks and place myself in the path to success or just let life happen and accept the consequences.

As I reshape my vision in academia, I continue to call on the confidence that allowed me to rise from Second Lieutenant to Major General. Whether serving soldiers or students, I still struggle to overcome the fear that comes with leadership. I have made mistakes and experienced setbacks. That's life. What's more important is what you learn from the mistakes and how you recover from the setbacks. Keeping a wider perspective on life and believing that 'this too shall pass' has given me the strength to soldier on. Life naturally places plenty of obstacles in our way. Don't allow your own fear be an obstacle to your success. Conquer the fear and own your opportunities, in so doing you will own your happiness as well!

Britt is a Guest Lecturer on Leadership and the Associate Vice President of Operations of Kennesaw State University. Prior to accepting this position, she was the Commanding General of the 11,000 soldiers of the Georgia Army National Guard.