



Your source for the latest:

- Carrier Updates
- State and Federal Legislative Information
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Walsh Benefits Partner Press



By Kim Simpson and Dave Mordo

June 2005

Carrier Updates

We want you to know™



- Effective 7/1/05, **Aetna** is launching their new PPO HSA Compatible Plans for small groups in NJ. Contact Walsh Benefits for more details.
- **Aetna's** packaged life and disability insurance options have been posted in the "Forms Warehouse" in the Walsh Benefits online quoting system. Go to the Forms Warehouse – NJ – Aetna – Life Plans and select either the plan summary, which includes a price, or three other plan options. Contact Walsh Benefits for more details.
- **Aetna** is offering **three new dental options for NY groups** with a minimum of 3 employees enrolled and will require 25 % participation. Go to the Forms Warehouse on www.walshbenefits.com to download Aetna's NY Voluntary Dental brochure for details on all three plans. The Metro NY and Upstate NY 2nd Quarter Voluntary Dental Rates are also available in the Forms Warehouse.

• **Aetna Small Group 2006 Broker Incentive Trip**

Destination: Los Cabos, Mexico 2006

Qualifying Dates: February 1, 2005 to January 15, 2006

(Continued on Page 2)

Become Licensed Today!!!

Walsh Benefits has posted the licensing forms for Aetna, Cigna, Oxford, United Healthcare and Wellchoice on our online quoting system. Go to www.walshbenefits.com, click on the broker log in link in the upper right hand side of the page, log in then go to the Forms Warehouse. In the Bro-

ker Registration folder under each of the carriers listed above, you will find the forms that should be submitted in order to become licensed.



Help Walsh Benefits to serve you better!

Please try to refrain from submitting new business on or 1 day before the requested effective date. The logistics of getting the submission to the carrier in a timely manner becomes more difficult especially if the paperwork is incomplete or incorrect. We appreciate your cooperation.

Aetna Continued...

Eligibility: Appointed and licensed **Aetna** agents located in NY, NNJ, CT & ME who accumulate a minimum of **250** points in NNJ/NY and 200 points in CT/ME by selling **Aetna** Individual* & Small Group plans (new sales only)

Qualifications: 1 point per issued Medical NY/NNJ application, 1 1/4 point per issued Medical CT/ME application, 1 1/4 point per issued Individual (CT only) application, 1/2 point per issued application for the following: Packaged Life/Disability, Dental and Life.

• **Aetna Small Group Broker Bonus Program**

How to Qualify:

1. Brokers must sell a minimum of 25 small group medical applications to qualify for the bonus payment
2. After selling and enrolling the 26th application, the broker will receive the following bonus payment:
 - \$20 per medical application –enrollment date 5/1/05-12/15/05
 - \$40 per application for medical + dental or group insurance*
 - *enrollment date 5/1/05-12/15/05, dental or group insurance plan must be enrolled at the same time as medical.
3. Once qualified, broker will receive retro bonus payment on the first 25 applications sold and enrolled and a bonus for each application sold/enrolled thereafter until the program ends.



- **AIG has enhanced their vision and life products.** With AIG Group Vision, employees have access to a large Eye Network including Lens Crafters, Pearle Vision and Sterling Optical where they can choose any frame. With AIG Group Life, AIG has improved their employer-funded and Supplemental Life guarantee issue maximums. Call **Walsh Benefits** for more details.
- **AIG's** new quick reference product summary is now available in the "Forms Warehouse" on the **Walsh Benefits** Quoting System. Go to the Forms Warehouse – NJ – American General – Benefit Summaries then click on "Product Reference Guide."
- For new business starting with 1/1/06 effective dates, **AIG** now offers an Administrative Services Only (ASO) STD product with FMLA administration. This is available to groups of 300 to 10,000 lives.
- **AIG/American General** has made marketing their products easier. They have organized their product information into marketing campaign topics that are listed monthly. Here are June's topics:
 - Use Product ID 00850006-3327DOD to learn about **AIG's** employee benefits products
 - Use Product ID 06675006-1112BDOD to promote **AIG** Group Vision products.

Contact **Walsh Benefits** today to learn how you can register on Smartworks.com to access personalized marketing materials for the topics above.



AmeriHealth Formulary Changes

On July 1, 2005, formulary updates from AmeriHealth’s Select Drug Program will be effective for certain Over-The Counter Exclusions and Brand Deletions. Please check the list of exclusions and deletions on www.walshbenefits.com in the Forms Warehouse.

AmeriHealth’s 2nd Quarter 2005 Bonus Program

This bonus applies to any new business submitted and approved for effective dates between April 1, 2005 and June 15, 2005. AmeriHealth will pay:

# of Eligible Employees	Amount per Contract
2- 50	\$25
51- 499	\$20
500 – 999	\$15

Effective July 1, 2005, the following Amerihealth Options will **no longer** be available to clients:

- All PPO medical options with \$5 and \$10 visit co-payments.
- All Select Drug Program PPO rider options with \$5 and \$10 generic formulary co-payments
- All Standard Drug Program PPO rider options, with the exception of the 50% coinsurance option featuring retail dispensing of up to a 90-day supply

Contact Walsh Benefits for more details.

Effective July 1, 2005, AmeriHealth’s new Select Drug Program Options will be available for 51+ and small groups.

	\$5/\$25/\$50	\$7/\$35/\$50	\$10/\$40/\$60
Generic Formulary Co-payment	\$5	\$7	\$10
Brand Formulary Co-payment	\$25	\$35	\$40
Non-Formulary Co-payment	\$50	\$50	\$60

Contact Walsh Benefits for more information.

With www.amerihealthexpress.com members can:

- Compare hospital and provider performance
- Review prescription drug benefits—including comparing drug costs for certain medical conditions, requesting mail order prescription refills and finding generic drug equivalents
- Access health care benefits information— view claims information and view and print referrals on line.
- HR personnel can also update their enrollment .

When submitting new business, please make sure you include dates of birth and social security numbers for ALL insureds and dependents. Also, please try to include any proof of full-time student status with the ORIGINAL submission as opposed to a few days afterward. Your full cooperation will speed along the underwriting process.



Visit AmeriHealth online to view expanded information on hospital ratings, physician information and relative hospital cost data.

Walsh Benefits will be happy to order directories to be shipped directly from the carrier of choice to your office or your client's place of business.

As a general rule, Walsh Benefits does not mail out directories.



*If you are sending us documentation to assist you in resolving a claim issue, **PLEASE SEND US THE EXPLANATION OF BENEFITS (EOB)**. We cannot help you with the issue without this important piece of documentation.*

BENECARD®

- Benecard has launched its Medicare Modernization Act (MMA) Subsidy Recovery Program., which assists clients with the detailed process to receive savings from the MMA. Benecard will perform actuarial examination of Rx plans and complete all the necessary paperwork for the Centers for Medicare and Medicaid Services. Contact Walsh Benefits for details.



CIGNA
A Business of Caring.

- Cigna HealthCare announced that it is expanding the availability of its consumer-driven CIGNA Choice Fund(SM) Health Savings Account (HSA) plan to businesses with 51-200 employees in the New York and New Jersey markets. The CIGNA Choice Fund HSA had previously only been available to employers with more than 200 employees. CIGNA is offering the expanded availability now for plans that take effect on or after June 1, 2005.
- On myCIGNA.com, members can:
 - View prescription claim history
 - Obtain prescription drug price quotes
 - View prescription drug list, compare medications and review information on drugs
 - Review their prescription drug plan coverage details



for what happens next®

- Colonial offers a new, updated cancer plan, Cancer 1000. The plan offers 4 levels of coverage, 3 optional riders and helps offset out-of-pocket expenses. Contact Walsh Benefits for more details.
- Colonial is offering a new medical plan, Medical Bridge (sm) 1000. The plan provides indemnity benefits for hospital confinement and outpatient surgery. Three different plan designs are available with five levels of benefits that are provided for a covered accident or covered sickness only. This product is available in all states except AZ, KS, MA, NJ, NY and Washington. Call Walsh Benefits for more information.
- Colonial is also offering Group Supplemental Health 1000 for your Pennsylvania clients. Five different plan designs are available and benefits are provided for a covered accident or covered sickness only. Call Walsh Benefits for more information.



- **Great-West** has expanded their Generic Incentive Program. This program automatically fills members' prescriptions with the generic equivalent when available unless the doctor writes "dispense as written" on the prescription or if the member specifically requests the brand-name version. This applies at retail pharmacies as well as mail order pharmacies.
- Select drugs (mostly injectable drugs) will be limited to a select group of pharmacies within the larger pharmacy network. The pharmacies in this specialty pharmacy network specialize in dispensing and delivering these drugs. If members currently receive one of these specialty drugs from a pharmacy not included in the network, Great-West Healthcare sent a letter informing them of the new pharmacies and provided directions in getting their prescription transferred. Contact Walsh Benefits for more details.



Set yourself apart with "My Coverage Connection"

Offer your clients online access to their benefits with their own website.

Call Kim at Walsh Benefits for details.



- **Health Net's** Pharmacy Discount Program for individual Health Net Medicare Advantage and Medicare Supplement plan members allows them to receive discounts on prescriptions. It applies to those who do not have a pharmacy benefit or those who have pharmacy benefits and have exceeded their annual maximums or those who have a generic-only prescription benefit and want to access brand name medications. Contact Walsh Benefits for more details.
- **Health Net** HSA compatible plans offer:
 - Lower premiums from a high-deductible health plan
 - Ability to contribute set amounts to employees' HSAs
 - PPO coverage
 - Lifetime ownership of HSA funds
- **Health Net's** New Business Standard Commission Schedule
All 51+ cases in NY, CT and NJ are eligible for a 4% commission. This does not apply to in-force cases and Guardian & Health Net Healthcare Solutions cases.

Health Net New Business Bonus Plan

Effective dates: July 1, 2005—January 1, 2006

New Case Sold	And	New Subscribers	% of Premium or Equivalents
2	and	100 to 299	.5%
3	and	300 to 499	1.0%
4	and	500 to 749	1.5%
4	and	750 to 999	2.0%
5	and	1,000+	2.5%

Health Net Continued...

- **Health Net Persistency Bonus Plan**

Level	Min. Renewing Sub-	And	Minimum Member	% of Annualized
1	250	and	88%	0.50%
2	1,000	and	90%	0.75%
3	1,500	and	92%	1.00%

- **Medicare Commission Schedule**
Health Net SmartChoice—Employer Group: \$100 per member in an employer group



Horizon Blue Cross Blue Shield of New Jersey

- **Effective on your client's plan's anniversary on or after June 1, 2005, employees are required to receive prior authorization for certain drugs.** Should an employee and their physician determine a medication on the list is required, the employee or their physician **MUST** initiate a prior authorization review. A list of the drugs that require pre-authorization is available on www.walshbenefits.com in the forms warehouse under Horizon in the "Other" Folder.

Horizon BCBS 2005 Second Quarter Bonus Plan for small groups.

For every small group (2-50) new business contract sold with an effective date between April 1, 2005 and June 28, 2005, **Horizon BCBS** will pay an additional \$25.00 per contract. New business bonus payouts are in addition to standard commission for these groups.

Horizon BCBS 2005 2nd Quarter Bonus Plan for midsize groups.

Listed below are the incentive program qualifications that you must meet:

1. The new business must be effective by June 28, 2005.
2. The case must have 51 to 499 eligible employees and must be new to **Horizon BCBSNJ**.
3. You must submit the notice of sale by June 15, 2005.

What you can earn ... For every case that qualifies, your firm receives:

- 51 to 99 eligible employees: \$30 per enrolled subscriber beginning with the first enrolled subscriber.
 - 100 to 250 eligible employees: \$25 per enrolled subscriber beginning with the first enrolled subscriber.
 - 251 to 400 eligible employees: \$20 per enrolled subscriber beginning with the first enrolled subscriber.
 - 401 to 499 eligible employees: \$15 per enrolled subscriber beginning with the first enrolled subscriber.
- **Horizon BCBS** introduces new Direct Access product suite to the midsize market

Effective June 1, 2005, **Horizon BCBS** will introduce 10 Direct Access plan designs for groups of 51 to 99 employees. These plans offer a large provider network and cost-effective price options. Contact **Walsh Benefits** for more details.



Brand New MetLife CE Credit Class!!!

Refer to the MetLife attachment for details on a special continuing education symposium on July 12 in Somerset, NJ. Earn 7 hours of CE Credit toward your NJ, NY & CT Insurance Licenses.



- For those of you NOT YET APPOINTED with Oxford, PLEASE, PLEASE either log on to www.oxhp.com, call the licensing department at 888-666-6844 or go to www.walshbenefits.com, log in as a broker and download the licensing forms from the "Forms Warehouse". You MUST be licensed and have a "broker code" in order to be paid commissions.
- Oxford now offers Medco's Medicare-approved prescription discount card to their customers. The cards will provide Medicare beneficiaries with access to discounts ranging up to 30% or more on prescription medications from the Centers for Medicare and Medicaid Services approved list. Registration for the discount cards will begin on May 3rd. Contact Walsh Benefits for more details.
- Effective 5/1/05, the UnitedHealthcare Choice Plus Network is available to most Oxford members on an in-network basis. Log onto www.oxfordhealth.com to access Oxford's provider search. You can search Freedom Network and Liberty Network doctors in the Oxford service area as well as UnitedHealthcare Choice Plus Network doctors outside the Oxford service area.

Please make sure you are familiar with Oxford's Broker of Record policy. All Broker of Record letters should be mailed or faxed to Oxford's commissions department. The effective date will be the first day of the month following the receipt of the letter provided the broker is licensed and appointed with Oxford.



Important!!!

All United Healthcare appointed agents and agencies will be required to sign a new standard agreement in order to maintain their appointment with United Healthcare.



- Prudential has updated their group disability insurance products. They now offer:
 - Critical illness benefits which provides additional payment for serious illness.
 - Continued Healthcare Contributions Benefit to help cover the cost of COBRA payments
 - Survivor benefit for STD
 - Accelerated Survivor Benefit for STD and LTD that allows terminally ill employees to collect their Survivor Benefit while still living



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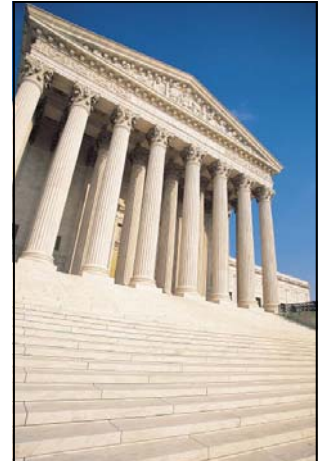
- United Healthcare Quarterly Medical Bonus Discontinued for 2005**
 The small business quarterly medical bonus program for NY, NJ, CT and PA has been discontinued for 2005. The fourth quarter 2004 payment was the final payment made under this program.
- Visit United Healthcare eServices for their HSA High-deductible Verifier Tool. It allows you to compare various plan designs against IRS requirements. This tool was designed to help you to advise your clients on what changes they might need to make to their existing plans to make them HSA-compliant.
- United Healthcare** will begin notification of brokers online when they will be distributing the policy pre-termination and termination letter to their clients. Notice of pre-termination will begin rolling out on May 21 and notice of termination will begin rolling out on June 2.
- Some of your clients may have received notification of changes for **United Healthcare's** Out-Of-Network Diagnostic Services. Enrollees residing in the following states will not have this change take place at this time:
 CT, FL, Maryland (including D.C.), MA, NJ, NY, NC, Ohio, RI, TN
- United Healthcare** has expanded their Dental In-Network plans. Clients have access to United's new coinsurance INO plans and groups with 200+ enrollees have more fixed copay plans to choose from.



- Two new, enhanced voluntary products will be available on March 1, 2005 by **UnumProvident**, although the products are still awaiting final approval in some states. The specified critical illness insurance now includes the option of base or enhanced coverage. Base coverage features a benefit payout for heart attack, stroke, permanent paralysis, kidney failure, organ transplant or coronary artery bypass surgery. Enhanced coverage includes all conditions listed under the base plan, plus an additional benefit if diagnosed with cancer. Enhancements also include increased benefit amounts for covered children, and, for eligible employee groups, the first \$10,000 in coverage is guaranteed-issue (some restrictions apply).
- A new five-year benefit period tops the list of enhancements to the individual short term disability insurance, which also includes a new optional rider that covers mental illness. Contact Walsh Benefits for more information.
- UnumProvident** now provides a step-by-step guide to filing and checking on a claim specific to maternity and long term disability. Go to www.unumprovident.com for details.

UnumProvident Continued...

- **Unum/Provident** also offers a free virtual training academy for brokers who sell individual income protection and/or long-term care insurance products. The learning sessions detail Unum/Provident products, provide tips for initiating sales and completing applications and explain the underwriting requirements. Sales partners receive a schedule and registration information in advance of each month's course offerings. Contact Walsh Benefits for more details.



You can look up various pieces of state and federal legislation by logging on to one of the following websites:

www.njleg.state.nj.us

www.cspan.org

<http://thomas.loc.gov>



- **WellChoice** now has their Access HMO approved. This is their new, referral free program. These options are available for June 1st effective dates and \$40 and \$50 office visit copays are now available. Contact Walsh Benefits for more information.
- **Wellchoice** has also expanded the options for their basic HMO plan designs. More cost-sharing options are available for office visits, hospitalizations and emergency room charges including office copays of \$40 and \$50. These new options are also available under Wellchoice's new Access HMO.

New Jersey Legislation

****THE NEW RULES CONCERNING NEW JERSEY CONTINUATION OF COVERAGE TAKE EFFECT MARCH 7, 2005.**

- Assemblywoman Loretta Weinberg has introduced **A2006**, a bill that would establish joint purchasing alliances for people covered by individual health insurance plans. This bill is in its second reading in the Assembly.
- **A3379** is a bill that will allow for credit to be given towards minimum participation percentage for people covered under Medicaid and NJ Family Care. This bill is currently in its second reading in the Assembly.
- **A2835** is a bill that was introduced which would make 2 acts of insurance fraud a second degree crime. Current law allows for 5 acts or more.
- **A3759** has been introduced by Assemblyman Cohen. This bill would allow for the extension of health benefits coverage for certain dependants up to the age of 30.
- Senator John Adler has introduced Senate Bills **S2164**, **S2165** and **S2166** all of which deal with tax credits for employers who offer healthcare benefits and tax deductions for employees who contribute to the cost of their health insurance. These bills have been referred to the Senate Commerce Committee.
- The Mandated Health Benefits Advisory Commission is considering **S556**, a bill which require coverage of hearing aids for children



718 River Road
Fair Haven, NJ 07704

Phone: 732-936-0100
Fax: 732-936-9109

Website:
www.walshbenefits.com

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Federal Legislation

- About 15 million low income Medicare beneficiaries who qualify for additional prescription cost assistance will soon be receiving applications for the new prescription drug benefit scheduled to begin in 2006.
- **S406** has been introduced by Senator Olympia Snowe. This bill would create Association Health Plans under the authority of the Department of Labor. The companion bill in the House, **H.R. 525** did pass in committee but now needs to pass the entire house. Passage in the Senate remains doubtful.
- **S. 109** has been introduced in the Senate as the "*Pharmaceutical Market Access Act of 2005*." This bill would allow for reimportation of drugs into the states from a designated permitted country. **S. 184**, the "*Safe Import Act of 2005*" would allow for reimportation from Canada 1 year after enactment of the law.
- The House passed legislation this week that would loosen restrictions on federal funding for embryonic stem cell research. The Senate is also likely to pass a similar bill however the President has indicated he will veto any such measure.
- **H.R. 218** has been introduced into the house. "*The Health Care Tax Deduction Act of 2005*" would provide for a tax deduction for amounts paid towards health insurance and prescription drugs.
- **The new COBRA rules now require six different notices:**
 - The initial notice to the employee about the availability of COBRA;
 - The notice that the employer must provide to the plan administrator regarding the occurrence of an event that triggers a loss of coverage under the plan ("qualifying event");
 - The notice that the plan administrator must provide to covered employees and dependents upon the occurrence of certain qualifying events;
 - The notice that a covered employee or dependent must provide to the plan administrator at the occurrence of certain qualifying events (e.g., divorce or a child's loss of dependent status under the terms of the plan);
 - A new notice from the plan administrator to an individual that he or she is determined to be ineligible for COBRA coverage; and
 - A new plan from the plan administrator notice regarding the termination of COBRA coverage prior to the maximum period permissible under COBRA.

Thank you for your business!!!!