

Your health and that of your covered family are important to us. We are excited to sponsor some great new wellness initiatives for 2008.

Our benefit plan cost for the last 3 years has cost Your Company over \$4.5 million dollars (\$4,571,888). Trend projections for the next 3 years are expected to be over \$8.8 million dollars (\$8,878,438). This is an increase of +94%.

We do not want to change our benefits, and need your help to control costs. We want our employees and covered dependents to enter our new wellness and benefit programs. This brochure explains the programs and how it can help you and your family.

Please understand that Your Company will **NEVER** actually see any of your medical records. The records will be between you and your healthcare professional.

I know we can work together to accomplish the goals of our new wellness direction:

- GOAL #1:** Increase awareness of the health of the family unit to save lives and increase longevity
- GOAL #2:** Financial security of the family unit
- GOAL #3:** Maintain integrity of the health insurance program
- GOAL #4:** Increase work place production

Sincerely,

Jane Doe

In 2008 we will be starting our new wellness benefits:

NEW BENEFIT – Nurse on site program. We think you will like this new option. The nurse will help with health screenings as well as day to day medical issues. The nurse will be able to write prescriptions. The nurse will be able to handle:

1. Physicals
2. Lab work
3. Health Risk Assessments
4. Sick visits
5. Write prescriptions

In 2008, if you complete a full physical and a Health Risk Assessment, you will avoid a significant increase in your 2009 premiums.

COMMON Q&A:

Q: Why is Your Company doing this?
A: To increase health awareness for a better quality of life and to extend life if possible.

Q: Why is Your Company putting a nurse on site?
A: To make it easier for the employees to see the nurse with the plan GOALS.

Q: What will happen with my results on nurse on site visits?
A: The nurse on site will discuss your results with you and/or your doctor if you choose. The nurse will not have access to your records.

Q: What happens if I choose not to have my health screening and health risk assessment?
A: You will pay substantially more for your premiums in 2009.

Q: By what date must I complete my health screening and health risk assessment to receive the premium credit?
A: By December 31, 2008. A simple way to remember to do this is to have your screening in your birthday month.

Q: How does the nurse on site help me?
A: You can visit the nurse for any issue you wish, like a personal nurse. The nurse can also educate you on alternate medications for your symptoms.

DOCTORS NOTE:

Your patient is associated with Your Company. We have started a new wellness program that allows employees to pay less for healthcare premiums if they simply have a health screening and health risk assessment every year. We will pay 100% of the negotiated fee for preventive care services you feel are necessary for this employee. Here are a listing of the most popular services and corresponding CPT codes for clarification.

	CPT Code
Routine Checkup	99355
Colorectal cancer screening	82252
Pap Smear (females only)	88153
Mammogram (females only)	76092
Colonoscopy	45379
Health Risk Assessment (HRA) tests:	
CBC	85027
TSH (thyroid)	86020
PSA (males only)	84153
Complete metabolic panel IF currently on medication for diabetes, cholesterol control, etc.	80053
Lipid Panel	80061
Blood Sugar	84375
Hearing	92564
	92283

We need your help with our program. Once you complete the health screening and review the health risk assessment with the patient, could you please sign below. This will allow the employee to give proof back to our H.R. Department for the proper credit.

If you find anything within the health screening or health risk assessment, please address this with the patient and also mark below that the patient is being compliant with the your advice. Thank you very much for your help. If you have any questions or concerns about the plan, please call Jane Doe at Your Company at (864) XXX-XXXX.

This is to certify that _____ (employee name) has had his/her health screening including lab work and I have reviewed the health risk assessment.

This is to certify that _____ (employee name) is in compliance at this time with my recommendations and falls within the height/weight or BMI; cholesterol; blood pressure ranges; and is nicotine free as outlined on the back.

SIGNED: _____ (Doctor)

PRINT NAME: _____ (Doctor)

DATE: _____

Your Company's Insurance Provider is:
Blue Cross Blue Shield of S.C., Inc.
1-20 at Alpine Road
Columbia, SC 29219
(800) 810-2583

Your Company Wellness Program



Protect your health!

Save your money!



Medical Plan Reminders:
www.southcarolinablues.com
 (800) 810-2583

Benefit Plan Year: January 1 - December 31

For help finding network providers and facilities:
www.southcarolinablues.com

Preventative Care:
 High Plan / Core Plan
 Covered @ 100% after \$15 copay / \$25 copay

Office Visits:
 High Plan / Core Plan
 Primary: \$15 copay / \$25 copay

Deductible, per benefit plan year:
 High Plan / Core Plan
 Single - \$250 / \$750
 Family - \$500 / \$1,500

Co-Insurance: 80% / 20% (In-Network) - High Plan
 70% / 30% (In-Network) - Core Plan

Out of Pocket Maximum (per benefit plan year):
 High Plan / Core Plan
 Single - \$1,250 / \$3,750
 Family - \$2,500 / \$7,500
 (This includes out-of-pocket maximum)

Prescription Drug Copay (per 30-day supply):
 High Plan / Core Plan
 Generic - \$1 / \$1
 Preferred Name - \$30 / \$30
 Non-Preferred Name - \$40 / \$40

This brochure is intended to provide an easy-to-read overview of the Wellness Program benefit available at Your Company. Should there be any conflict between the explanations in this brochure and the actual terms of the plan documents and contracts, the terms of the plan document and contracts will govern in all cases.

Questions/Comments about this brochure: Please contact Rick Gantt @ 888-691-0273 x 115.

Tear this off and take to your In-Network Physician.

*If it is very difficult to get a medical condition for you to achieve the requirements of the wellness incentive programs, call us at 864-xxx-xxxx. We will work with you to develop an alternative.