



Your Health Plan Update

A periodic newsletter from the Pension, Hospitalization and Benefit Plan of the Electrical Industry (PHBP)

The PHBP and MagnaCare: Working Together and Offering Choices

MagnaCare and the Joint Industry Board Hospitalization Department

MagnaCare is the PHBP's Preferred Provider Organization, also known as a PPO or Network. MagnaCare contracts with a wide range of hospitals, doctors, laboratories and other health care providers and facilities that accept a negotiated fee as payment in full. When you go to a MagnaCare provider, you need only show your MagnaCare ID card. MagnaCare providers send the patient claim directly to MagnaCare, who processes the claim and pays the provider directly. With few exceptions, you are only responsible for the applicable co-payment for covered services.

In addition, the PHBP gives all Plan Participants the choice of using a non-MagnaCare provider at any time. This is where the Hospitalization Department at the Joint Industry Board can work for you.

While MagnaCare processes all in-Network claims (and, as of August 1, 2007, all in and out-of-Network therapy, mental health and chiropractic claims), the Hospitalization Department processes all other out-of-Network claims. These types of claims can range from an out-of-Network doctor, anesthesiologist, and radiology provider to supplemental Medicare claims for retirees or Coordination of Benefits claims for participants whose spouses have other insurance.

So, as a rule, all in-Network claims (as well

as non-Network therapy, mental health and chiropractic claims) are processed by MagnaCare. All non-Network claims (with the exception of therapy, mental health and chiropractic claims) are processed by the JIB Hospitalization Department.

How the JIB Hospitalization Department Works for You

Besides processing the non-Network claims as described above, the JIB Hospitalization Department serves as your advocate in resolving both MagnaCare and non-MagnaCare related claim issues.

While most MagnaCare claim issues can be resolved with one phone call to the PHBP dedicated customer service call center at MagnaCare, sometimes more complex issues require a helping hand. That is what the JIB Hospitalization Customer Service Representatives are here for!

Nothing is more stressful than putting in a hard days work and then having to spend more of your valuable time navigating the sometimes-confusing waters of the health care system. The JIB Hospitalization Department Customer Service Representatives will assist you with both your out-of-Network claim problems and even in-Network claim problems that escalate beyond a call to MagnaCare.

The JIB Hospitalization Department is dedicated to serving you, the Participant, your family members, and to providing excellent customer service. Our representatives strive to make your experience a positive one.

Helpful Hints

Knowing how to use your benefits through the Hospitalization Department, the Medical Department at the Joint Industry Board and MagnaCare is the first step to maximizing your health benefits.

Here are some tips that could save you time and money (not to mention aggravation!):

Hospitalization Department Tips

File your out-of-Network claim properly:

A proper claim submission must include a PHBP claim form and an itemized bill. An itemized bill should contain information such as patient's name, diagnosis, procedure codes, doctor's credentials and doctor's tax ID number. **Please do not submit credit and collection notices because they do not contain the information necessary to process a claim.**

Avoid getting involved with credit and collection agencies:

There may be instances during an emergency room or hospital admission where a participant is seen by out-of-Network providers for services rendered by different departments within the hospital (such as cardiology, radiology or an ER physician). These services are billed separately from your hospital charges. **If you receive a bill like this do not ignore it hoping it will go away.** It is the participant's responsibility to submit these out-of-Network claims to the PHBP. If the bill that you receive is itemized you should attach it to a PHBP claim form and send it to the Plan.

If the billing statement you have received is not itemized you should call the provider to notify them that you have out-of-Network benefits and that you need an insurance claim form (Form CMS 1500) to be sent to you. This should be attached to a PHBP

claim form when submitting your claim to the Hospitalization Department. This call may also be helpful in slowing down any further collection proceedings.

Please note that the Plan will pay for medically necessary services rendered by a non-Network provider during a covered inpatient hospital stay or ER visit, when the participant has no choice as to the selection of a provider, the Plan will negotiate the reimbursement amount **so there is no out-of-pocket expense to the participant.** Examples of such services are anesthesiology, radiology and pathology services.

Mailing information:

The address where the out-of-Network claims must be submitted is located on the heading of the PHBP claim form. Green self-addressed envelopes are sent with claim form mailings. The back of the PHBP claim form gives special instructions and MagnaCare's mailing address for chiropractic, mental health, and therapy claims.

It is important to keep a copy of the claims you are submitting because in instances when the Plan is unable to negotiate with the provider, the payment may be sent to you directly.

JIB Medical Department Tips

Did you know the busiest times to call the Medical Department are Mondays and Tuesdays and also the first few days of each month? To ensure that your call will be promptly answered by a Patient Service Representative and your appointment quickly booked, the best times to call are Wednesday, Thursday or Friday from 12:00 to 2:30 PM or 4:30 to 7:00 PM or Saturday between 8:30 and 2:30.

If you cannot make an appointment, please call 718-591-2014 to cancel and reschedule. Also, if you know you will be more than 15 minutes late for an

appointment, call to let us know. We will do our best to fit you in, but this may not always be possible.

Some appointments require you to do specific things like fasting, drinking water or not using deodorant prior to arriving at the Medical Department. You will be given these instructions when you make the appointment. Please follow all instructions exactly to avoid having to have your appointment rescheduled.

Medical Department Facts

The Medical Department at the Joint Industry Board is a benefit provided by the Pension, Hospitalization and Benefit Plan of the Electrical Industry for use by its eligible active and retired participants and dependents.

The philosophy of the Medical Department is to combine the warm, friendly, personalized approach of a traditional family doctor with state-of-the-art medicine. Your primary care physician works together with our specialists to ensure your good health. With expanded diagnostic and therapeutic programs and services, the Medical Department can serve virtually all of your family's health care needs. And, when you use the services of the Medical Department, there are no co-pays!

Some of the many services available to eligible PHBP Participants and their families are:

- ▶ Annual Physical Examination
- ▶ Acupuncture
- ▶ Diagnostic Radiology
- ▶ Laboratory
- ▶ Pulmonary Function Test
- ▶ Complete Audiologic Evaluation
- ▶ Electrocardiogram (EKG)
- ▶ Optical Department

Specialists on staff include those in the areas of:

- ▶ Cardiology
- ▶ ENT – Ear, Nose and Throat
- ▶ General Surgery

- ▶ Dermatology
- ▶ Nutrition Counseling
- ▶ Obstetrics and Gynecology
- ▶ Neurology
- ▶ Orthopedics
- ▶ Ophthalmology
- ▶ Pediatrics
- ▶ Podiatry
- ▶ Proctology
- ▶ Urology

Consultant Specialist Referrals

There is a panel of consultant specialists located throughout the Greater New York Metropolitan area to render services not provided at the Medical Department. These services consist of the use of qualified medical consultants in highly specialized fields of medicine and specialized laboratory and diagnostic testing. Upon completion of these tests, all reports are forwarded to the Medical Department for review and follow-up evaluation by your primary care physician or specialist. When referred for consultation by the Medical Department, no co-payment is necessary. The co-payment for referrals for diagnostic testing is \$25.

MagnaCare Tips:

Did you know that the MagnaCare telephone system has been simplified to make navigation easier? For efficient and effective determination of where your call should go, you will be asked 2 questions at the beginning of your call:

- ▶ Is the call related to workers' compensation; and
- ▶ Is the call for pre-certification.

After that, you will be asked to identify yourself as a member, client or provider (you are a member) and then you can either use the Interactive Voice Response ("IVR") system, or go directly to a PHBP-dedicated Customer Service Representative.

Use the JIB and MagnaCare Websites

Not only should you get in the net and use the MagnaCare Network whenever possible to minimize your out of pocket expenses, but getting on the “net” (the internet, that is), can save you time and provide you with a wide array of tools that will assist you when using your health plan.

The JIB Website

Did you know that the JIB has a website where you can view the most current Plan information, view frequently asked question and download benefit claim forms? Just log on to www.jibei.org and select the benefit plan you’d like to learn more about. *The most current Summary Plan Descriptions are now available on the JIB website.*

The MagnaCare Website

The MagnaCare website not only has a new look, but has been modified to make the search for a MagnaCare Provider much easier.



MagnaCare’s Online Provider Directory not only assists you in finding an in-Network provider in your area, it also lets you know what hospital the provider is affiliated with and what specialty or credentials they have. It will even let you know what languages they speak! You can now search for a provider by specialty. In addition, the MagnaCare website has an expanded list of freestanding radiology centers.

There will be more exciting changes coming to the MagnaCare website in the future, so go to www.magnacare.com and take a look!

Important Contact Information

MagnaCare PHBP Dedicated Service Center:

Number: **877-624-6210**

Select option #2 for all non-workers’ compensation claims; then

- (a) For pre-cert, select #:5; or
- (b) For Customer Service, select #2 and choose either the automated system or a Customer Service Representative; or
- (c) To Locate a Provider: select #4.

Website: www.magnacare.com

MagnaCare has been working to expand the PPO network of participating providers to include providers in Connecticut, Pennsylvania and Florida. These affiliated out-of-area plans also have websites and customer service representatives that will help you find in-network providers.

Connecticut:

Network: Multiplan, NEHCA-HMC PPO

Number: **866 575-5553**

Website: <http://www.multiplan.com/>

Pennsylvania:

Network: Intergroup Services

Number: **800 537-9389**

Website: <http://www.igs-ppo.com>

Network: Preferred Care

Number: **800 222-3085**

Website: <http://www.preferredcareinc.net/>

Retired members and dependents with permanent residence in Florida who are not yet eligible for Medicare may access the Superien – First Health Network.

Number: 800 346-3141

Website: www.superienhealthnetwork.com

JIB Hospitalization Department:

(718) 591-2000, ext. 1350

Website address: www.jibei.org

Your Health Plan is working for you!

Look for future updates in the mail and log on to the JIB website for the most up-to-date Plan information!