

## Ask the Welfare Fund – February 2009

Now that we are firmly in the midst of the winter months, it seems like a good time to remind those retirees who have not yet received a shingles shot of the procedures required in order to have the procedure covered by insurance. Medical research has determined that those who had chickenpox as a child are most susceptible to contracting shingles as an adult, and to contract the condition after turning 60 years of age. Since most of our members, both active and retired, are covered by some type of GHI-CBP plan the procedures below will work for GHI. If you are covered by another plan, and experience difficulty on getting coverage for the shot, please call our office and we will help resolve your problems.

If you are between 61 and 64 years of age ( not yet covered by Medicare ), GHI will cover the vaccination and administration of the medication by your doctor. In order to have the procedure reimbursed, the doctor must bill for the shot using CPT code 90736. As we understand it, this will be covered bit through a participating and non-participating provider ( but if you have not yet met your non-participating deductible the reimbursement for the shot will first be applied to the deductible).

If you are Medicare eligible, Medicare will not, for some inexplicable reason, cover this procedure. In order to receive reimbursement, you will need to get a prescription from the doctor for the medication. Take this prescription to a local pharmacy, and have it filled by the pharmacy. Since the vaccine is shipped frozen, you must bring a cold pack or some type of insulating material to take the medication from the pharmacy to the doctor. The doctor will inject the medication. Your cost for medication is dependent upon where you are in the prescription program, so I advise you to get it as soon as possible after January to reduce your costs.

**QUESTION:** I am an active CSA member. My husband just had major back surgery, and I have received over \$20,000 of bills for anesthesia, surgeons, and other costs where GI only paid a very small amount. How can I get GHI to pay the rest of these bills?

**ANSWER:** You probably will not get more from GHI, but we can help with that \$ 20,000 amount. Please send us a copy of the doctors' bills and the explanation of benefits statements received from GHI. We will review what GHI paid and see if we can get them to pay more. Once we have received all we can from GHI, we will process through our Catastrophic Stop-Loss medical benefit. Under this benefit, the first \$ 1,500 of unreimbursed expenses is taken as a deductible. The next \$ 1,250 in allowable charges is reimbursed at 80% ( you absorb another \$ 250 in unreimbursed costs and the welfare fund reimburses you \$ 1,000). We then reimburse 100% of allowable charges to a maximum of \$ 50,000 per year, \$ 250,000 lifetime. Assuming the doctor's fees are reasonable for this part of the country, you will only have \$ 1,740 in unreimbursed expenses to incorporate within your household expenses. Please remember that, ultimately, you are responsible for the doctor's bill, so I recommend you let them know that you will be reimbursed most of the costs, ask for their patience, and make arrangements to pay them the \$ 1,750 that will not be reimbursed.