

Community First GBP Fact Sheet

Plan Year 2010

Community First is proud to be offered by the Texas Employees Group Benefits Program (GBP). Here are some facts you might want to know about Community First:

Community First is the only locally owned and managed not-for-profit HMO serving the following counties: Atascosa, Bandera, Bexar, Comal, Guadalupe, Kendall, Medina and Wilson.

The administrative staff, including the Member Services Department, is located in San Antonio, allowing easy access to assistance.

The provider network includes 26 hospitals, more than 550 primary care physicians and 2,000 specialists.

The dedicated member services lines for GBP participants are (210) 358-6262 or toll-free, (877) 698-7032. Member services hours are Monday to Friday, 8:30 a.m. to 5 p.m. After hours, phone calls are routed to Community First's nurse advice line.

Our offices are located at 12238 Silicon Drive, Suite 100, San Antonio, Texas 78249. For more information, visit Community First through the ERS website at www.ers.state.tx.us. Click on insurance, click on medical/prescription drugs and click on HMOs.

If you decide to enroll in Community First, you must select a PCP from the Community First provider directory available through the ERS website. If you do not choose a PCP at the time of enrollment, Community First will assign one to you. You may, however, change the PCP selected for you by calling the Community First Member Services Department or through the Member Portal on the Community First webpages.

During Summer Enrollment, you can designate your primary care physician (PCP) through ERS OnLine at www.ers.state.tx.us.

Community First has three established disease and population management programs for our members:

- **AsthmaMatters** – was developed to provide you with some of the tools you need to prevent chronic and troublesome symptoms and improve your well-being. Members who have asthma are encouraged to complete a health survey. Based on the results, you will be enrolled in the asthma program that is right for you.
- **Healthy Expectations** – for high-risk pregnancies, can provide you with health educators and nurses to work with you and your doctor to provide information and answer questions about your pregnancy.
- **Diabetes in Control** – gives you ongoing information on diabetes education topics.
- **Behavioral Health** – staff is available to provide information and help you choose a professional counselor or doctor who can help you sort out your problems.
- **Case Management** – staff is available to assist members who have chronic health conditions that require health care services from several different providers. Community First Case Managers work with you, your family members, your doctors and other members of your health care team to be sure you are getting the type and level of care you need.

Summer Enrollment is July 6 through July 31. ERS will conduct statewide enrollment fairs. Dates and locations of the enrollment fairs can be found at www.ers.state.tx.us. As Community First confirms participation in Summer Enrollment fairs, the information will be posted on our website.

As of this posting, Community First will participate in the following ERS-sponsored Summer Enrollment fairs:

July 16, 2009

9 a.m. to 12 p.m. (Noon)
Texas Department of
Transportation (TxDOT)
3500 NW Loop 410,
Lobby, 1st Floor
San Antonio 78284

July 17, 2009

9 a.m. to 12 p.m. (Noon)
Alamo Community College District –
San Antonio College
1300 San Pedro Ave.
VATC Room 120
San Antonio 78212

Wellness is important to Community First. Our Preventive Health and Disease Management Department provides a variety of avenues to educate and remind members of preventive measures they can take. These include:

- Online Health Assessment Program – This web-based program assists in managing the member’s health and also allows members to actively participate in programs that include, but may not be limited to, pain improvement, weight management and physical activity, smoking cessation, stress self management, nutrition improvement, and sleep improvement.
- Youth Obesity Program for children between the ages of 8 and 17 offered through the Texas Diabetes Institute.
- Flu Shot direct mail campaign.
- Mailed reminders to women who are late getting their mammograms and reminders for Pap smears begin at age 19.

Community First allows you to seek help for mental health or substance abuse problems without a referral from your PCP. Your treatment may require authorization from Community First for further services, but the strictest confidentiality is maintained. Unlike most health plans, Community First manages your behavioral health benefits in our Health Services Management Department, just like your medical benefits. Our behavioral health care coordinators are onsite to help you get the assistance you need.

Once you have chosen Community First, if you or a dependent are interested in enrolling in one of these programs, call our dedicated GBP participant member services line and they will connect you to our Preventative Health and Disease Management Department. They can explain these programs to you in detail and tell you how to enroll.

What’s new at Community First?

- Our web-based Member Portal is now operational. You can look at your eligibility information, check the status of your claims, and communicate in a secure environment with our Member Services Department.
- We offer a prescription medication discount card for family members who do not have pharmacy benefits. Anyone in the family can use it.

ERS cannot and does not guarantee the length of time that a specific type of “Value-Added” product shall be offered. Any questions or concerns about these products should be directed to the sponsoring HMO.

Community First Summary of HMO Benefits

Plan Year 2010

The Texas Employees Group Benefits Program

Benefit Description	Member's Copayment FY2010
Physicians and Lab Services	
Physician Office Visit Primary Care Physician	\$30
Specialist Office Visit	\$40
Routine physicals—One per plan year for adults; periodic for children, or as directed by the primary care physician	\$30 or \$40
Diagnostic x-rays, mammography, and lab tests	No copayment
Immunizations—For Children 0 to 6 years of age	No copayment
Immunizations—For Children 7 years and older, and adults	\$30
Well woman exam—One per plan year	\$30 or \$40
Vision, speech, and hearing screenings—For all enrolled participants	\$40
Speech & hearing testing—(covered for all participants)	\$40
Speech therapy and rehabilitative therapy, including physical and occupational therapy—Covered as any other illness and not subject to any maximum	\$40
Allergy testing	\$40
Allergy serum	50%
Allergy serum administration—When allergy shot is administered without an office visit	No copayment
Routine eye exam—one per plan year	\$40
Office surgery & procedures (all office surgeries, excluding vasectomies and tubal ligations)	\$30 or \$40
Maternity care—Physician services, including diagnosis of pregnancy, pre- & post-natal care and delivery (including delivery by C-section)— <i>see "Hospital Services" for Inpatient charges</i>	No copayment
Family planning	\$40
Vasectomy and tubal ligation	No copayment
Infertility benefits	50%
Hospital Services	
Inpatient hospital—Semi-private room & board or intensive care units	\$100 per day copayment per admission, 5 day max. \$1500 max. per person per year
Outpatient day surgery	\$100
Other inpatient charges, including medically necessary surgical procedures. Includes orthognathic surgery. Guest trays, cots, telephone, maternity kits, paternity kits, and other personal items not covered.	No copayment
Blood and blood products—Inpatient & outpatient	No copayment
Private Duty Nursing, based on medical necessity	No copayment
Outpatient facilities, including pre-admission testing and/or treatment room	No copayment
Emergency care—In-area and out-of-area covered at listed copayment. If hospitalized, copayment is waived.	\$100
Urgent care—Includes physician's after-hours care or at an urgent care facility	\$50
Extended Care Services—(Based on medical necessity)	
Skilled Nursing facility—covered up to 60 days per plan year	No copayment
Hospice Care—Inpatient and outpatient	No copayment
Home health	No copayment
Private duty nursing	No copayment
Other Medical Services	
Hearing aids—\$500.00 per ear every 3 years (Repairs not covered.)	Plan pays \$500 per ear every 3 years
Hearing aid batteries—Not subject to any maximum amounts	No copayment
Dental—Restoration & correction of damage caused by external violent accidental injury to healthy, natural teeth, occurring while covered under the plan for services provided within 24 months of the date of the accident. Certain oral surgeries are covered.	\$40

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COMMUNITY FIRST
HEALTH PLANS

Summary of HMO Benefits Group Benefits Program • Plan Year 2010

Benefit Description	Member's Copayment FY2010
Durable Medical Equipment—Includes medically necessary purchase and/or rental. Benefits for rental are limited to, and will not exceed, the purchase price of the equipment. (Repairs are covered if not due to neglect or abuse.) This benefit also includes diabetic supplies other than insulin, diabetic oral agent(s), and syringes as specified in Section 1358.051(2), Tex. Ins. Code	20%
Prostheses—Artificial devices, surgical or non-surgical, which replace body parts, including arms, legs, eyes, and cochlear implants are covered. Replacements and repairs are covered as required by medical necessity	20%
Organ Transplants—Covered as any other illness for kidney, cornea, liver, heart, heart-lung, lung, pancreatic-kidney, bone marrow, and other organ transplants that the HMO determines to be not experimental and/or not investigational according to current medical plan guidelines. Donor expenses are covered. Artificial organs (e.g. heart) not covered	No copayment (Hospital copayments will apply)
Ambulance—professional local ground or air ambulance transportation services to the nearest hospital, appropriately equipped and staffed for the treatment of the participant's condition	No copayment
Behavioral Health	
Inpatient mental health—Covered in full up to 30 days per plan year	\$100 per day copayment per admission, 5 day max. \$1500 max. per person per year
Inpatient serious mental illness—Covered as any other illness	\$100 per day copayment per admission, 5 day max. \$1500 max. per person per year
Inpatient chemical dependency—Covered as any other illness, based on medical necessity	\$100 per day copayment per admission, 5 day max. \$1500 max. per person per year
Outpatient mental health—25 visits per plan year	\$40
Outpatient serious mental illness—Covered as any other illness	\$40
Outpatient chemical dependency—Same as any other illness and not subject to any maximums	\$40
Prescription Drugs (Plan Year Deductible) If a Brand-Name medication is dispensed when a Generic is available, member shall be responsible for the Generic Copayment plus the cost difference between the Generic and the Brand-Name medication	\$50
Participating Retail Pharmacy—Tier 1, Tier 2 and Tier 3 Up to a 30-day supply per prescription or refill of Non-Maintenance medication	\$10/\$25/\$40
Up to a 30-day supply per prescription or refill of Maintenance medication	\$15/\$35/\$55
Infertility drugs are paid at 50% copayment	50%
Up to a 30-day supply of insulin for one copayment	\$10/\$25/\$40
Up to a 30-day supply of each diabetic oral agent for one copayment	\$10/\$25/\$40
The supply of necessary disposable syringes for the insulin supply for one copayment	\$25
This benefit also includes diabetic supplies other than insulin, diabetic oral agent(s), and syringes as specified in Section 1358.051(2), Tex. Ins. Code. Up to a 30-day supply for a 20% copayment	20%
Mail Order Pharmacy—Tier 1, Tier 2 and Tier 3	
Up to a 90-day supply per prescription or refill for one mail order copayment	\$30/\$75/\$120
Oral contraceptives up to a 90-day supply for one mail order copayment	\$30/\$75/\$120
Infertility drugs are paid at 50% copayment	50%
Up to a 90-day supply of insulin for one mail order copayment	\$30/\$75/\$120
Up to a 90-day supply of each diabetic oral agent for one mail order copayment	\$30/\$75/\$120
The supply of necessary disposable syringes for the insulin supply for one mail order copayment	\$75
This benefit also includes diabetic supplies other than insulin, diabetic oral agent(s), and syringes as specified in Section 1358.051(2), Tex. Ins. Code. Up to a 90-day supply for a 20% copayment	20%

Community First's Pharmacy Benefit Manager is NPS. The mail-order service is also through NPS. NPS can be reached through the ERS website, www.ers.state.tx.us. From the Community First home page, see the "Mail Order Prescriptions" heading in the menu on the left. The phone number for mail order NPS is (800) 546-5677.

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