

SR 80194
Default Remaining Aetna Enrollments into Blue Cross Plans

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July 25, 2002
Revised August 13, 2002

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Background

The University selected Blue Cross of California to provide an array of medical plans to UC employees and their eligible family members beginning January 1, 2003.

Blue Cross choices will be the Point-of-Service (POS) plan, a Preferred Provider Organization (PPO) plan, as well as the Core and High Option plans.

Employees will strongly be directed to enroll in the new plans via the Open Enrollment IVR when they are in the existing Aetna plans; however, a one-time program to ensure that no residual enrollments in Aetna plans remain active for January 2003 coverage,

New Plans

The following codes and names will be used for the new medical plans:

Code	Plan Name
BC	Blue Cross Plus
BP	Blue Cross POS
BH	High Option
CM	Core Medical (no change in plan code or name)

Code Translation Table

The Code Translation Table should be modified to include the new plans:

EDB	0292	BC	18	Blue Cross Plus
EDB	0292	BH	18	High Option
EDB	0292	BP	18	Blue Cross POS

Data Dictionary

Modify the data dictionary to include the new Blue Cross medical plans and deactivate the Aetna medical plans.

PPS EDB Data Element Definition

System Number: EDB0292

User Access Name: 0292-1

Programming Name: HLTH_PLAN IN PPPBEN

Revision Date: 01/01/02

Comments

Location(s): HBN 4532 - Medical Plan Code-HBN in HDB
 APS 0953 - Primary Health Plan Code
 BCS 0953 - Primary Health Plan Code
 CPS 0953 - Primary Health Plan Code
 IPS 0953 - Primary Health Plan Code
 OPP 0953 - Primary Health Plan Code

Name: MEDICAL PLAN CODE-EDB

Type: ALPHANUMERIC

Length: 2

Format

N/A

General Description

Code indicating the medical insurance plan in which the individual is enrolled.

Code Interpretation

- BC - Blue Cross Plus
- BH - High Option (Blue Cross)
- BP - Blue Cross POS
- CM - Core Major Medical (Blue Cross)
- FP - PacifiCare
- HN - Health Net
- KN - Kaiser North
- KS - Kaiser South
- KU - Kaiser Umbrella
- NH - Blue Premier HMO New Mexico
- WH - Western Health Advantage
- DM - Medical plan not yet selected by the employee
- XX - Opted out of medical
- XC - Cancelled medical
- XD - Deenrolled due to suspension of premiums

EDB 0292 -- MEDICAL INSURANCE PLAN CODE Previously Valid Codes

- BC - Blue Shield
- FN - Foundation
- HA - Heals
- HG - FHP Health Care
- NA - PruNet
- PH - Prudential High Option
- UC - UC Care

System Number: EDB0680

User Access Name: 0680-4

Programming Name: FCB_HEALTH_PLAN

Revision Date: 04/07/00

Comments

Location(s):

Name: FUTURE MEDICAL PLAN CODE

Type: ALPHANUMERIC

Length: 2

Format

N/A

General Description

Code indicating the future medical insurance plan in which the individual will be enrolled.

Code Interpretation

BC - Blue Cross Plus
BH - High Option (Blue Cross)
BP - Blue Cross POS
CM - Core Major Medical (Blue Cross)
FP - PacifiCare
HN - Health Net
KN - Kaiser North
KS - Kaiser South
KU - Kaiser Umbrella
NH - Blue Premier HMO New Mexico
WH - Western Health Advantage
DM - Medical plan not yet selected by the employee
XX - Opted out of medical
XC - Cancelled medical
XD - Deenrolled due to suspension of premiums

Conversion Process

High Option (PH)

Individuals enrolled in “PH” with a Medical Coverage End Date (EDB0300) equal to initial values or greater than December 31, 2002:

Change the Medical Coverage End Date (EDB0300) for the “PH” plan to December 31, 2002. The Benefits Coverage End Date (EDB 0698) associated with the current entry should also be set to 12/31/2002.

Establish a future enrollment with these attributes

Future Benefit Type (EDB0694) = “M”
Benefits Coverage Plan Information (EDB0697) = “BH”
Future Coverage Effective Date (EDB0695) = 01/01/03
Enrollment Reason Code = “OE”

UC Care (UC)

Individuals enrolled in “UC” with a Medical Coverage End Date (EDB0300) equal to initial values or greater than December 31, 2002:

Determine if the Home Zip Code is on the Blue Cross Plus Table, if it is:

Change the Medical Coverage End Date (EDB0300) for the “UC” plan to December 31, 2002. The Benefits Coverage End Date (EDB 0698) associated with the current entry should also be set to 12/31/2002.

Establish a future enrollment with these attributes

Future Benefit Type (EDB0694) = “M”
Benefits Coverage Plan Information (EDB0697) = “BC”
Future Coverage Effective Date (EDB0695) = 01/01/03
Enrollment Reason Code = “OE”

If the Home Zip Code is **not** on the Blue Cross Plus Table:

Change the Medical Coverage End Date (EDB0300) for the “UC” plan to December 31, 2002. The Benefits Coverage End Date (EDB 0698) associated with the current entry should also be set to 12/31/2002.

Establish a future enrollment with these attributes

Future Benefit Type (EDB0694) = "M"

Benefits Coverage Plan Information (EDB0697) = "BP"

Future Coverage Effective Date (EDB0695) = 01/01/03

Enrollment Reason Code = "OE"

Core Medical (CM)

Individuals enrolled in "CM" with a Medical Coverage End Date (EDB0300) equal to initial values or greater than December 31, 2002:

Change the Medical Coverage End Date (EDB0300) for the existing "CM" plan to December 31, 2002. The Benefits Coverage End Date (EDB 0698) associated with the current entry should also be set to 12/31/2002.

Establish a future enrollment with these attributes

Future Benefit Type (EDB0694) = "M"

Benefits Coverage Plan Information (EDB0697) = "CM"

Future Coverage Effective Date (EDB0695) = 01/01/03

Enrollment Reason Code = "OE"

Other Requirements

The one-time should ensure that the Next Future Benefits Action Date (EDB0692) is set so that the daily process handles the update correctly.

The daily process should properly derive the Plan Coverage Effective Date (PCED – EDB0294) and Medical Dependent Coverage Effective Date (DCED – EDB0639) for the new plan in all cases, except Core Medical ("CM"). A process needs to be developed so that the PCED and DCED set to same date as the Employee Coverage Effective Date.

Reports

The one time should produce an employee change file for recording in History,