Q&A for Wellness Participation

Q: Why do we have to have an annual wellness screening and age appropriate cancer screenings?

A: The MIT Health Benefits Trust has taken steps to lower healthcare cost and improve their participants' health. In analyzing the data on our claims, we found that more than 50% of our participants did not receive age appropriate cancer screenings and 70% were non-compliant for their annual physical prior to our requirements being in place.

Q: What are the requirements?

A: 1) Receive wellness screening every calendar year either through a primary physician, or other program supported by employer that does onsite screenings.

2) Receive age appropriate cancer screenings per American Cancer Society guidelines (Mammograms, Colonoscopy and PAP).

3) Participate in the PCM (Personal Care Management) Program - when outreach is made by nurse, you must participate until you are released by the nurse. Only individuals that have claims indicating they may be at risk for developing serious health issues will be invited into this program. It is a proactive health care program that helps educate and mentor individuals at no cost to the participant.

Q: What are the guidelines for the age appropriate screenings?

A: These requirements are based on guidelines from the American Cancer Society, which recommends a mammogram every year beginning at age 45 through age 54 and women 55 or older every 2 years, a pap test every 3 years beginning at age 21, and a colonoscopy every 10 years beginning at age 50. If your doctor prefers to follow separate guidelines, the Trust can accommodate that, as long as the doctor provides the alternative guidelines in writing. (Any alternative guidelines can be submitted to the Trust through your employer.) It is the Trust’s hope that you will take advantage of these free services to improve your quality of life and decrease health care costs.

Q: What happens if I do not meet a requirement?

A: Individuals that fail to meet a requirement will have a 10% surcharge on their premium. This surcharge is not for the employer to pay, but for the individual and it will be payroll deducted.
Q: What claims will the plan review to determine who pays 10% higher premiums for the 2016/2017 renewal?

A: The plan will be reviewing all claims filed calendar year 2016 for this information. You will pay 10% of premium until the following July 1 renewal.

Q: What if I am a new hire or a newly added spouse?

A: Any employee or spouse that has medical coverage effective 7/1 or later in any fiscal year would not have to meet requirements until the following calendar year. *Example:* employee effective 7/15/16, requirements must be met by 12/31/17. Anyone effective prior to 7/1 would have to meet requirements of current calendar year. *Example:* employee or spouse effective 6/26/16, requirements must be met by 12/31/16.

Q: What if I have a birthday that puts me in a category for an age appropriate screening near the end of the calendar year?

A: Anyone having a birthday after 7/1 that makes them fall under the age appropriate cancer screening category will have until the end of the next calendar year to fulfill the requirement. *Example:* 50th birthday 11/12/16, colonoscopy screening requirement must be met by 12/31/17. Anyone with a birthday prior to 7/1 would have to meet age appropriate screening requirements in the same calendar year. *Example:* 50th birthday 5/6/16, colonoscopy screening requirement must be met by 12/31/16.

Q: What if we are a new group?

A: If a group has a 7/1 start date, this will not affect their first renewal but will affect their second renewal unless employer indicates start immediately.

Q: Who falls under these requirements?

A: Employee, Spouse, and Pre-65 retirees covered under the MIT medical program.

Your health plan is committed to helping you achieve your best health. All employees have the ability to avoid any applicable penalties relating to the wellness programs. If you think you might be unable to meet a standard to avoid a penalty under this wellness program, you might qualify for an opportunity to avoid the penalty by different means. Contact Julie Hall (919) 715-9782 or Lisa Ervin at (919) 715-7973 and we will work with you and, if you wish, with your doctor to find a wellness program with the same reward that is right for you in light of your health status.