

Plan Document Notice

The State and School Employees' Life and Health Insurance Plan Document is available online. You can access this valuable resource by visiting the Plan's website at http://knowyourbenefits.dfa.ms.gov.

A paper copy may be requested by completing the bottom section of this form and returning it to:

Department of Finance and Administration c / o Office of Insurance P.O. Box 24208 Jackson, MS 39225-4208

Note: a paper copy is automatically mailed to all state agency human resource offices, schools, universities, colleges and libraries that participate in the Plan.

PLEASE PRINT LEGIBLY.

Name:

Address: _____

City, State, ZIP Code:



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The *State and School Employees' Life and Health Insurance Plan Document* contains the benefits and eligibility guidelines of the State and School Employees' Life and Health Insurance Plan (Plan). You can find the latest Plan Document on our website, <u>knowyourbenefits.dfa.ms.gov</u> under *Publications*. Also on the site are links to find a participating provider, information on covered wellness and preventive services, and the latest premium rates.

You may request a paper copy of the Plan Document by calling the Department of Finance and Administration (DFA) Office of Insurance toll free at (866) 586-2781 or (601) 359-3411 or by sending an email to KnowYourBenefits@dfa.ms.gov.

- The DFA Office of Insurance provides day-to-day management of the Plan for the State and School Employees' Health Insurance Management Board.
- Blue Cross & Blue Shield of Mississippi (BCBSMS) is the Plan's medical claims administrator. BCBSMS processes health claims and maintains eligibility information.
- Keystone Peer Review Organization, Inc. (Kepro) is the Plan's medical case management administrator. Kepro provides medical case management and pre-certification services.
- CVS Caremark is the Plan's pharmacy benefit manager and is responsible for processing prescription drug claims and managing the Plan's prescription drug mail order program.
- The AHS State Network is a system of physicians, hospitals and other health care providers who have agreed to accept the allowable charges set by the Network and file claims for medical services provided to Plan participants. Participant will receive the maximum benefit by using a "participating" network provider.

