

February 2010

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Employer Update

from MEDICA.

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As administrator of your group plan, Medica is entrusted with your members' protected health information (PHI), and we take great care to ensure that this confidential information is properly safeguarded. New federal requirements designed to provide additional protection of PHI went into effect February 17, 2010.

The requirements are part of the Health Information Technology for Economic and Clinical Health (HITECH) Act, which Congress passed in February 2009. Medica is taking steps to ensure we are complying with the new rules. As a result, you may be asked—by Medica or your broker—to provide more details when you request PHI.

If you have questions about the new HITECH requirements, please contact your account manager or broker. We will continue to provide updates as new guidance is issued in this area.

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Access health and wellness information on a single site

Now it's easier than ever to access health and wellness information and tools for your employees. For everything you need to get started, promote your program, and assess participation, simply go to medica.com/healthandwellness.

Our goal is to make health and wellness as easy as 1, 2, 3. Check out the site today, and let your Medica Account Manager know if you have any questions or feedback. (Note that this site replaces the Wellness Resource Center.)

For personalized assistance in starting a health and wellness program at your worksite, contact your Medica Account

Manager.

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Last call to sign up for the Shape Up Challenge

There's just a couple days left to sign up for the Shape Up Challenge, our most popular worksite wellness activity. This challenge is fun, motivating and *free to all customers*.

The Shape Up Challenge rewards your employees for adopting healthy habits, such as getting enough sleep, exercising and eating right.

The Challenge runs six weeks: April 5-May 10, 2010. During the campaign, participants earn points for engaging in healthy behaviors. A grand prize is awarded to the worksite with the highest average number of points.

To participate, you will need to appoint a coordinator for this program to promote the Challenge and track participation. While onsite training has already occurred, WebEx training is still available:

- February 23 1:00-2:00 p.m.
- February 25 10:00-11:00 a.m. (for previous coordinators)
- February 25 1:00-2:00 p.m.

Sign up today at medica.com/healthchallenges.

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Genetic counselors added to Medica provider networks

Today, consumers have access to more than 1,500 genetic tests, many of which cost more than \$3,500. With the growing consumer interest in genetic testing, Medica is now accepting board-certified genetic counselors employed by Medica network clinics into our network. This provides your employees and their family members with better access to counselors who we are confident will deliver affordable, appropriate care.

Genetic counselors are highly trained professionals uniquely equipped to assist members in making educated decisions. By seeing a genetic counselor, members are more likely to:

- Receive the right tests at the right time. While valuable for some members, genetic testing is not appropriate for everyone.
- Have access to follow-up care in order to accurately interpret test results and understand next steps.
- Avoid costly, unnecessary testing by making informed decisions.

Medica will soon list clinics with network genetic counselors on [Find a Doctor](#).

Learn more about genetic testing:

- [National Institutes of Health](#)
- [Genetics Home Reference](#)

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Redesigned Medica Encore available for those ineligible for group coverage

Individuals who don't qualify for group health care coverage will find an affordable, flexible option in the new Medica EncoreSM. The recently redesigned product, which is available to those age three months through 64 years old, is now available for individuals or for any two people to purchase together. Purchasers can select their deductible level (\$6,000, \$7,500 or 9,000 for a two-person policy; or \$4,000, \$6,500 or \$9,000 for a one-person policy). They can also select their copay amount for office and urgent care visits (\$20, \$40 or \$60), with no limit on the number of visits.

Medica Encore provides:

- \$500 in preventive coverage for each policyholder annually (with no copay or deductible)—after the first \$500, the deductible applies
- \$5 generic drug copay, with all other eligible drugs covered at 80 percent
- \$125 eyewear allowance within a rolling 24-month period

The following policy combinations are available:

- Any one or two adults on one plan
- Any one or two children (with a guarantor adult signature) on one plan
- An adult and a child on one plan

For more information, contact your broker or Medica representative.

[View Medica Encore information.](#)

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