BenefitsWise
"BETTER BENEFITS THROUGH COLLABORATION"

Did you hear about our exciting, new benefits!

Teladoc for only $5 per consult

During your Open Enrollment meetings, you may have heard about our new telemedicine benefit through Teladoc for a low $5 copay!

Teladoc gives you access 24 hours, 7 days a week to a U.S. board-certified doctor through the convenience of phone, video or mobile app visits. Set up your account today so when you need care, a Teladoc doctor is just a call or click away.

Registering online is the first step! It’s important to set up your account in advance so you don’t have to step through the process when you’re feeling under the weather. Visit Teladoc.com, get started as a Member. Enter your general information, select “I do not have a username” and the Company Name is ICUBA. Next you will provide some medical history information (similar to a doctor’s office).

Requesting a consultation is easy! If you wake up in the middle of the night with a scratchy throat or feel a sinus infection coming on while you’re at work, simply request a consultation, identify the best time for a doctor to contact you and get the quick attention you need to feel better! It’s super quick and easy and members only pay a low $5 copay per consultation. Finally, don’t forget to download the mobile app so you have access to a doctor from anywhere!

OptumRx Health Care Advisor

ICUBA is excited to announce our new, specialized OptumRx Health Care Advisor customer service number. The Health Care Advisor team is your one-stop resource for personalized pharmacy support and guidance. The team at OptumRx can be reached at 1-855-811-2213 and is specifically trained in ICUBA’s prescription drug benefits. They can answer any questions you may have regarding the ICUBA pharmacy tiers, formulary questions, treatment options, preferred vs. non-preferred medications, and more!

Watch your mailbox! Your new OptumRx ID card is on the way! The reason for the new ID card is our specialized Health Care Advisor phone number—the insurance information on the card did not change (ID #/RxGroup/RxBIN).

Reminder! ICUBA’s new pharmacy tier changes took effect April 1, 2017. The pharmacy tiers are divided into preferred and non-preferred generic, brand and specialty drugs. Please have a discussion with your physician to see if a preferred drug is right for you—it will save you money!
ICUBAcares Pharmacist Advocate Program

Our ICUBAcares Pharmacist Advocate Program (PAP) is comprised of Real Pharmacists who are Real Advocates with Real Solutions! Our ICUBAcares PAP will assist members with closing gaps in care attributed to Prior Authorizations, Quantity Limits, Step Therapy and Generic Drug Requirements; assist members with formulary changes; serve as a liaison between doctors, pharmacy and insurance company; encourage members to use therapeutically appropriate, cost-effective therapy; and more.

ICUBAcares will make outbound phone calls to members and offer services and assistance as a Pharmacist Advocate. Members can also make inbound calls to a real pharmacist if a question arises. Speak with a pharmacist directly, and have your personal questions answered over the telephone.

ICUBAcares Pharmacist Advocate Program
1-877-286-3967 (also on the back of your new Optum ID Card!)

Retiring Past Age 65? Don't Get Trapped by Medicare Enrollment Rules: The cost of making a mistake can be high.

You may choose to stay with your employer’s health plan rather than signing up for Medicare, but you could risk going without insurance for several months, and pay an annual penalty for life, if you don’t follow Medicare’s strict enrollment rules.

If you have coverage through your employer’s group health plan you don’t have to sign up for Medicare when you turn 65 because the group policy pays first and Medicare pays second. (If your spouse is covered under your policy, the same rules apply.) Most people with employer coverage enroll in Part A at 65 because it’s free but you don’t have to sign up for Part B if you’re happy with your existing coverage. You’ll avoid a future penalty if you sign up for Part B within eight months of leaving your job. This eight-month period is known as the "special enrollment period."

You should enroll in Part B as early as you can because the penalties and waiting periods for not doing so can be substantial and ongoing. If you miss the deadline and your employer coverage expires, you could find yourself uninsured for many months. You will not be allowed to enroll in Medicare Part B until the next “general enrollment period,” which runs from January 1 to March 31 and your coverage won’t begin until July 1, and you may have to pay a lifetime late-enrollment penalty of 10% of the current Part B premium for every year you should have been enrolled in Part B. Even if you leave your job before you turn 65, you could face trouble if you ignore the enrollment rules.

Example: Assume you retired in January 2016 and went on COBRA. You turned 65 nine months later, in October 2016. In this case, the "initial enrollment period" applies to you. The initial enrollment period starts three months before the month of your 65th birthday and ends three months after your birthday month. Because your 65th birthday was in October 2016, your initial enrollment period would run until the end of January 2017.

Let’s say you decided instead to stick with COBRA for the full 18 months, until it expired in June 2017. You would not be able to enroll in Part B until the next general enrollment period starting January 1, 2018 and you would not be covered until July 2018, about a full year after your COBRA coverage ends. To add insult to injury, you’ll also be hit with lifetime penalties for missing an enrollment period. For each 12-month period you delay enrolling when you’re eligible, you’ll pay a penalty of 10% of your Part B premium -- forever.

People who receive Medicare benefits as well as the family and friends caring for their loved ones on Medicare should visit Medicare.gov, the official U.S. website for benefit information regarding Medicare, including different coverage options, costs, preventative services, and tools for Medicare beneficiaries.