



ARBenefits Newsletter

Q1 | 2023

PREVENTATIVE CARE

The new year is the perfect time to start prioritizing your health; and preventative care is one of the many ways to do this. It is estimated that only 8% of adults schedule necessary preventative checkups and screenings in the U.S.; These appointments are essential in maintaining and improving health. There are so many reasons to receive preventative care, including:

- Detects health conditions sooner: If you are getting screened regularly, it is much harder to miss a diagnosis. Early detection could save your life!
- Live longer and healthier: If you get regular checkups with your doctor, you are much more likely to have a healthier and more comfortable life.
- Saves money: The sooner you know about a health condition, the sooner you can work with your doctor on a course of action. Typically, the longer you wait to diagnose a health condition, the more expensive it can become.

How to Find a Doctor on the Blueprint Portal

Finding a doctor is easy through the [Blueprint Portal](#). If you don't have an account, you can register by clicking the "Register" button on the login page. Otherwise, once you sign in, select "Find Care." You can find a provider by name, specialty or a particular hospital or clinic.

February is Heart Health Month!

February is Heart Health Month and it is the perfect opportunity to learn more about what it means to be heart-healthy. Over 600,000 Americans die from heart disease each year. Heart disease is caused by the clogging of the arteries leading to our heart. Factors can include high cholesterol, blood pressure, smoking, diabetes and alcohol abuse.

Facts about heart attacks:

- Heart attacks can be silent, with 1 in 5 heart attacks happening without the person even knowing.
- Heart attacks affect women differently. Women have been noted to experience back, arm, and shoulder pain along with nausea and shortness of breath.
- Women under the age of 50 are more likely to experience a heart attack than men.



Bariatric Surgery is back for ARBenefits Members!

Act 109 of 2022 allows for the coverage of bariatric surgery for eligible ARBenefits members as of January 1, 2023. This includes coverage for one bariatric surgery (gastric bypass surgery, adjustable gastric banding, sleeve gastrectomy or duodenal switch biliopancreatic diversion) per lifetime and one revision surgery if complications were caused directly by bariatric surgery. This does not include weight loss drugs. Participants must meet [all eligibility requirements](#). Please consult with your doctor or specialist about this procedure.

Eligibility Requirements

- Has a formal diagnosis of morbid obesity
- Is currently an active or retired state or public school employee
- Is 20-65 years old
- Has at least five years (or more) of continuous employment as a state or public school employee
- Has not previously undergone bariatric surgery
- Has met all the providers' program requirements and has received prior authorization for this surgery from Health Advantage on behalf of ARBenefits

Approved bariatric surgeries will be subject to deductibles, co-insurance, and any other cost-sharing required by the Summary of Plan Benefits. Coverage will be limited to surgeries in a medical center accredited by the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program.

Please remember there is [no guaranteed approval](#). If you have any further questions, please get in touch with EBD at 877-815-1017 or Ask.EBD@arkansas.gov.

Health Benefits Advisory Commission Meetings

Our state and public-school health benefits advisory commissions will continue to meet in 2023 to help make important decisions for the ARBenefits plan. You can learn more about these commissions [here](#).

[Sign up](#) to receive emails about the advisory commission meetings.



Close to Retirement?

If you are considering retiring, we are here to ensure a seamless transfer of coverage. To enroll in retiree coverage, you must complete a retirement packet within 30 days of retiring. We will only accept packets submitted up to 30 days before retirement.

You may choose between the Basic, Classic or Premium Plan if you are not yet Medicare eligible. If you are Medicare eligible, you will automatically be opted into the ARBenefits Group Medicare Advantage PPO Plan with the option to opt-out and enroll in the ARBenefits Medicare Primary Plan. Learn more [here](#)!

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