

CHANGES IN REQUIREMENTS TO UTILIZE UNIVERSITY CENTER IMAGING (UCI)

Effective January 1, 2015

Brevard County, FL Harris Medical Plan Participants

There's news for Harris Medical Plan participants in Brevard County, FL*. As of January 1, 2015, you will no longer be required to use University Center Imaging for any diagnostic imaging, such as x-rays, CT scans and MRIs. Beginning in January, you will have the freedom to select any Cigna imaging facility for these services, including UCI, on an in-network basis. In 2014, you would generally not be reimbursed for non-emergency, outpatient diagnostic imaging received outside UCI.

*** Included zip codes: 32901–32919; 32925; 32934–32937; 32940–32941; 32949–32951**

The change maximizes your choices for imaging services and allows Harris to provide the same benefit levels for advanced imaging to employees across the continental United States. In addition to network services, you will now have the flexibility to use out-of-network imaging providers — although you won't benefit from network rates.

ALL Harris Medical Plan Participants

Going forward, imaging services both within UCI and outside of UCI, are subject to the same terms as all other non-UCI providers have been, such as coinsurance, deductibles and the out-of-pocket maximum. The UCI copay will no longer be applicable to any Harris Medical Plan participant.

WANT TO KNOW MORE?

Read on to familiarize yourself again with your plan's network reimbursement levels

The following chart will familiarize you with the network reimbursement levels for preventive and advanced imaging under Harris Medical Plan provisions. Remember, any advanced imaging delivered at UCI after December 31, 2014 will be reimbursed at these levels, after the deductible is met.

Types of services	OAP 2, 3, 4		CDHP1		CDHP2	
	IN-network	Out-of-network	IN-network	Out-of-network	IN-network	Out-of-network
Preventive (mammograms, bone density)	Plan pays: 100%	Plan pays: 60% of MRC You pay: The balance	Plan pays: 100%	Plan pays: 60% of MRC You pay: The balance	Plan pays: 100%	Plan pays: 50% of MRC You pay: The balance
Advanced Imaging ¹	Plan pays: 80% You pay: 20%	Plan pays: 60% of MRC You pay: The balance	Plan pays: 80% You pay: 20%	Plan pays: 60% of MRC You pay: The balance	Plan pays: 70% You pay: 30%	Plan pays: 50% of MRC You pay: The balance

¹ Some imaging will now require precertification through Cigna.

When precertification is needed — As of January 1, your advanced imaging will require precertification through Cigna. Imaging requiring precertification includes MRIs, MRAs, PET scans, CT scans, etc. If you are seeing a network provider, it is your provider's responsibility to request precertification. If you are going out-of-network, you or your doctor must contact Cigna in advance of the imaging for precertification. Without precertification, when needed on an in- or out-of-network basis, you may receive a reduction in, or denial of, benefits

Deductibles must first be met — You must meet your deductible before the plan will reimburse you for imaging services, other than services that are considered preventive care. When you use a network provider, you benefit from lower negotiated rates and you will know up front the percentage of the cost that you will be required to pay. Out-of-network reimbursements will be based on the Maximum Reimbursable Charge (MRC) for the service you are receiving, as defined by Cigna, based on data collected in your geographic area. If your provider charges more than MRC, you'll be responsible to pay the difference or balance between the MRC and the actual cost of your advanced imaging.

If you would like to see which network imaging facilities will be available to you after December 31, please go to www.mycigna.com and search the provider directory for the OAP Plus network in your area. If you have any questions or concerns about the change, please contact the Harris Benefits Service Center at **1.800.225.4343, Option 1** from 8:30 a.m. to 5:30 p.m. ET, business days.