Materials and Communications

- **State (only): Updated Pre-Enrollment Benefits Information Letter:** We have updated the digital letter you can send to your new hires prior to their first day of employment so they can learn about their benefits. The updated document is found on the <u>ABC webpage</u>, under State plan titled **Pre-Enrollment Benefits Information**.
- State Offices and Benefits Administration (BA) Service Center Closed: State offices and the BA service center will be closed Monday, January 20 for the Martin Luther King Jr. holiday.

Benefits

- **Higher Ed:** Quest Diagnostics:
 - Quest Site The Quest Diagnostics website has been updated. Members can now download the physician screening form or set up an account. There was a miscommunication between Quest and ActiveHealth so the site was not ready on 1/1/2020.
 - Onsite Screenings We will start scheduling screening sites for this spring. If you are interested in setting up an onsite screening, please email me at <u>paige.turner@tn.gov</u>. Those of you that scheduled a site in 2019, we will be following up with you to see if you would like to host a site this year.
- **State:** #4Mind4Body Lunch & Learns (In-Person/Webinars): We have worked with ActiveHealth and Optum to setup eight lunch and learns in 2020.
 - Three of the lunch and learns will be co-presented by the two vendors.
 - The sessions will be on a variety of topics, ranging from aging and mindfulness to exercise and quitting nicotine. The goal is to focus on the whole person.
 - The flier is attached with today's Friday ABC email with the dates for the first four sessions and encourage you to promote the sessions to your employees. Later this year, we will share the flier for the last four sessions.
 - No pre-registration is required.
 - All eight sessions will meet in Conference Rooms A&C in the TN Tower and those who work downtown may attend in person.
 - The sessions will also be available via WebEx.
 - They will start at 11:30 a.m. Central time and last one hour.

• **State:** Quest Diagnostics:

- Quest Site The Quest Diagnostics website has been updated. Members can now download the physician screening form or set up an account. There was a miscommunication between Quest and ActiveHealth, so the site was not ready on 1/1/2020.
- Onsite Screenings We will start scheduling screening sites for this spring. If you are interested in setting up an onsite screening, please email me at <u>paige.turner@tn.gov</u>. Those of you that scheduled a site in 2019, we will be following up with you to see if you would like to host a site this year.
- **Optum Presentation:** Matt Cramer, senior client services manager with Optum, joined us to go over the EAP and behavioral health services, and any benefits enhancements and new items.

Operations

- Edison Update: On Friday, January 17 beginning at 5:00 p.m. Central time, there will be an upgrade to the login application for the Edison website. Because of this upgrade, Edison will be unavailable for users from 5:00 p.m. Central time on Friday, January 17 until 5:00 p.m. Central time on Monday, January 20. Users will not be able to log into the system during this time.
 - **Changes:** As a result of this upgrade, the web address to Edison will be changing. For users who have any links, shortcuts, or favorites saved using the old Edison web address, there will be a temporary redirect in place to take users directly to Edison using the new correct Edison web address. More information regarding this change will be coming once the upgrade is complete on Monday, January 20.
- Higher Ed/Local Ed/Local Gov: PPACA (Affordable Care Act) Report Filing Deadlines and Form Information:
 - In November, the IRS extended the upcoming ACA employer reporting deadline. This extension applies to the due date for furnishing Forms 1095-C (or 1095-B, if applicable) to employees to March 2, 2020, (previously January 31, 2020). This extension is automatic; employers do not need to file a request with the IRS.
 - The due date for filing Forms 1095-C (or 1095-B, if applicable) electronically with the IRS remains March 31, 2020, (February 28, 2020 if filing on paper).
 - Employees can rely on information from their employers other than Forms 1095-C when completing their individual 2019 tax returns, including regarding eligibility for premium tax credits or having minimum essential coverage. Employees do not have to send this information to the IRS with their individual tax filings.
 - Employers with less than 50 employees need to complete the 1094-B (IRS form) and 1095-B (employee) forms.
 - Provide 1095-B to responsible individuals by March 2
 - File 1094-B and 1095-B with the IRS by February 28 (paper) or March 31 (e-file)
 - Employers with more than 50 employees need to complete the 1094-C (IRS form) and 1095-C (employee) forms.
 - Provide 1095-C to full-time employees by March 2
 - File 1095-C and 1094-C with the IRS by February 28 (paper) or March 31 (e-file)

Note: If you file 250 or more Forms 1095-B or Forms 1095-C, you must electronically file them with the IRS.

Higher Ed/Local Ed/Local Gov: PPACA Updates:

- Directions on running the PPACA report are on the ABC website under the Training section Instructions for Running Your PPACA Report.
- \circ This report will show you active employees and retirees (if your agency has any).
- We encourage you to run your PPACA report again in January and February to pick up any late enrollments due to SQE for 2019.
- Since the State plan is self-insured, you are considered to be self-insured and must do your reporting. The vendors do not report for self-insured plans.
- Employees do not have to have their 1095-C to file their taxes, but you are required to send it to them.

• **State: PPACA Updates:**

• In November, the IRS extended the upcoming ACA employer reporting deadline. This extension applies to the due date for furnishing Form 1095-C to employees to March 2,

2020, (previously January 31, 2020). All employees should now receive their 1095-C in the mail by March 2, 2020. They will receive it sooner if they have elected to receive an electronic communication in Edison. We will be sending out an email to all state employees reminding them of this opportunity to receive their form electronically. As a reminder, employees do not have to send this form to the IRS with their individual tax filings.

- If employees elected to receive their 1095 electronically last year, they will receive it electronically this year as well.
- Any employees who elected to receive it electronically but have since terminated will be updated so that they receive a paper copy in the mail.

• All Calls: Benefit statement Navigations available for ABCs in Edison:

- \circ Confirmation statements are now available in Edison for ABCs
- HCM > Benefits > Review Employee Benefits > Review Employee Statements

Local Ed/Local Gov/Higher Ed: Edison News- Display of Termination Date:

• We are pleased to announce that you will now see the termination date from the previous agency when hiring a new hire/rehire to your agency via the Hire eForm. In step 2 of 3 of the hiring process if the employee was previously employed by a participating agency you will see the termination date entered by the previous agency. The date will indicate the termination date entered into Job data not the date coverage ended. In the example below the termination date entered was 12/31/19 meaning coverage will end with the previous agency 1/31/2020. Note you will only see the term date if the termination was keyed prior to the creation of the Hire eForm, if no termination has been entered the form will route to the losing agency as normal.

• Annual Enrollment Appeals – High Volume

- We are still reviewing annual enrollment appeals.
- We have received over 700 appeals for annual enrollment so far.
- You may review Edison notes to check if an appeal has been approved or denied before it is processed in Edison.
- Due to high volume of tickets, we are backlogged about 10 business days. Thank you for being patient as we work through these calls, emails and documents. Please do not send duplicate requests.
- For any triage issues, you may send a ticket and write Triage in the subject line explaining if the member needs to see a doctor or needs prescriptions and we will prioritize these tickets first.

Service Center Metrics/Customer Service Rating

• **December 2019:**

- Tickets via Email: 978
- Tickets via Self-Service: 3,603
- Tickets via Phone: 5,100
- Tickets via Chat: 283
- Total: 9,964
- Satisfaction Score: 96.4%

• **December 2018:**

- Tickets via Email: 998
- Tickets via Self-Service: 2,900

- Tickets via Phone: 5,041
- Tickets via Chat: 130
- Total: 9,069
- Satisfaction Score: 96.3%
- We received about the same number of emails and calls with chats and tickets increasing this year as compared to last December. Our total interactions increased by almost 900.
- We take the satisfaction of our customers very seriously. Please complete the survey after your Zendesk ticket is resolved.
- If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy. Our satisfaction rate for December was 96.4% percent.

• New ABC Training:

- o January 22: Local Education: 9-11 a.m. CT
- o January 22: State/Higher Education: 1-3 p.m. CT
- o January 23: Local Government: 9-11 a.m. CT
- o January 23: Session 2 All Entities 1-3 p.m. CT

Here is how to sign up for training:

1. Login in To Edison.

2. Navigate to ELM Menu >ELM>Employee Self Service>Learning>Search Catalog>Enter ABC in the "Search the Catalog" field>Click the "Search Activities" button.

- 3. Locate the training you are interested in.
- 4. Locate the specific dates you would like to attend the webinar.
- 5. Click Enroll to the right of the training session you wish to participate in.
- 6. Click Submit Enrollment in the bottom lower left corner.

7. Once you have enrolled, you will see the following message under your name at the top of the page.

You have successfully enrolled in ABC Training Webinar/Workshop. This change in status will be updated on the All Learning page.

QUESTIONS

- **Higher Ed:** We have tried to use the key code SOT to obtain a biometric screening form and are still receiving "your program is over" message. Has the keycode changed?
 - Answer: That should have been resolved as of yesterday (Monday, Jan 10). The site is updated now. You may need to clear your cache or browser history. If you try this and still receive this message, please let us know.
- **Higher Ed:** Will we start discussing the benefit set up as Methodist acquires St. Francis Hospital?
 - Answer: As always, when we receive additional information about changes with providers, we will communicate it as soon as we are able to. The merger has not taken place yet. It is in the works. We must wait until things become final to communicate.

- **Higher Ed:** I'm working on billing from December, and I have an employee who has covered his wife for voluntary term life while not covering himself. Does he have to cover himself to cover spouse or child?
 - **Answer: Correction:** An employee may have spouse only coverage for voluntary term life provided the spouse is not an eligible employee. An employee must cover himself to cover a child.
- (Follow up question) Higher Ed: I only got a premium (for voluntary term life) for the spouse but no coverage for employee. Should I submit a Zendesk ticket?
 - **Answer:** We have confirmed that an employee **can** enroll a dependent spouse in spouse only term life. If the employee elected spouse only term life the bill you received was correct.
- **Local Ed:** Who is eligible for the services with Optum (behavioral health/EAP)?
 - To clarify for local education employees, behavioral health services are for those enrolled in medical. For EAP services, employees must be enrolled in the health plan, but their eligible dependents do not have to be enrolled.
- Local Ed: Do you offer pre-marital counseling for free?
 - Answer: This falls under the umbrella of EAP. Eligible employees and dependents get five EAP visits, per problem, per year at no cost. Visits are available in person or by virtual visit. They just need to call Here4TN at 855-Here4TN.
- Local Ed: Do you still need an authorization number or is the Optum card all you need?
 - Answer: Yes. You still need the authorization number. Members need to go to <u>www.Here4TN.com</u> or call 855-Here4TN. EAP benefits require prior authorization. They can go to the Here4TN.com website and find the form under the main members tab and select submit form. Eligible members and dependents will have to answer a few questions and submit, or they can call 855-Here4TN, 24/7.
- **Local Ed:** When our employees receive their Optum cards in the mail, does it include any information that we've seen in this slideshow?
 - Answer: The Optum ID cards mailed will have two cards on a page, explaining the ID card and how to use it. The information does list a few services included. We have included a copy of the presentation with today's notes and you can share any, or all of it with your members.
- **Local Ed:** I have tried several times to run PPACA report, but it does not appear. With whom do I need to speak about this?
 - Answer: You can submit a Zendesk ticket and put PPACA in the subject. It will route to us and we can help you. We've had a few instances in which the report is not opening.
- Local Ed: Can you review the statement from the most recent annual enrollment?
 - **Answer:** Yes. Right now, you see the benefits statement from Annual Enrollment. It will show the changes from October.
- Local Ed: Can appeals still be filed?
 - Answer: The deadline was 12/31. You can still send it in, but it will go to the Benefits Administration Review Team (B.A.R.T).

- **Local Ed:** Sullivan County DOE joined the State Dental effective 1/1/2020. When we are going into ehire and ebenefits to add a new hire, we are not getting the option to choose Dental Insurance. Please advise.
 - **Answer:** For any employees who are experiencing this, put in a Zendesk ticket. You can include an enrollment change form with their election.
- **Local Ed:** What is the timeline for an employee who was divorced, but the employee states there is a 30-day appeal process? So, she was waiting for the 30 days to expire. What is her deadline to drop coverage on her spouse, is it 30 or 60 days? Do we go by the date on the divorce decree or the 30 days afterwards?
 - **Answer:** We remove ex-spouses based on when the judge signs the final decree. It is not based on the extra 30 days to appeal. If the judge signs today (1/14), we would remove the spouse on 1/31.
- **Local Ed:** If a member on the CDHP plan uses Telehealth, do they still have to meet their deductible? If so, do they receive any discount for the Telehealth visit?
 - Answer: For CDHP plan members, they do have a deductible for Telehealth. Telehealth for medical is based on a negotiated rate. Behavioral health and Substance Use virtual visits are the same as an in-person mental health visit.
- Local Ed: Ok, so it's the same for them as if they walk into the doctor (for Telehealth)?
 - Answer: For CDHP members, a behavioral health/substance use virtual visit is the same as an office visit. CDHP members have a deductible and 30% coinsurance. Medical telehealth visits are different. The cost is the plan's negotiated cost (historically \$30-\$50 per visit, depending on the carrier and telehealth company) until the member meets the deductible. Then the member pays coinsurance which is 30% in-network for the Local Education CDHP. Please note that 30% for a medical telehealth visit vs. 30% for a medical office visit is not the same because the rates are different.
- **Local Ed:** When I enter the correct effective date, it defaults to 01/01/1900, and gives me an error message and I have to re-enter the date. Is there a fix for this?
 - **Answer:** I think that what you are referring to is when terminating someone. The fix was to make it be 1/1/1900. It will do that from now on. If you enter the action code first and then select the reason code of termination you will be able to change the termination date without receiving the error.
- (Follow up question) Local Ed: I understand the date is defaulting. When you put your date in and tab down and tell that you are terminating, it auto changes back to 1900. You'll have to do it a second time?
 - **Answer:** Yes, you must do it a second time.
- (Follow up question): I have now started with Action and Reason then went back to edit the date. Then you only enter the date one time.
 - **Answer:** Thank you for the tip. We have included this to the answer above.
- **State:** Was everyone supposed to get an (Optum) membership card? How do they request one if they did not?
 - **Answer:** Only members who have behavioral health benefits (enrolled in a medical plan) will receive the Member ID Card. Replacement cards can be requested by calling 855-Here4TN.
- State: When did you say we would be getting our W2 through Edison?

- Answer: 1095s must be issued by March 2, 2020. Payroll follows IRS rules for W2s. You can call payroll at 877-944-3878.
- **State:** Is there a list of the events the insurance participants do to get money (wellness program cash incentives)?
 - Answer: Yes, if you are referring to the wellness incentives, there are. Here is the incentive list: <u>https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/wellness incentive table 2020.pdf</u>
- **Local Gov:** Is the slide for work/life balance available on the website? I would love to have to give to employees.
 - Answer: If you visit <u>www.Here4TN.com</u> you will find the work life resources. You can also find an overview of Here4TN resources and materials in the ABC Marketing EToolkit found on the <u>ABC page</u>.
- **Local Gov:** Do you all do lunch and learns to discuss EAP services in general? I want our employees to understand the diversity of services provided through EAP.
 - Answer: That is not something to order in the catalog. There is a toolkit available to promote the Here4TN programs and resources on the ABC page. You can also contact Matt Cramer with Optum to schedule an overview of Here4TN services for your employees. Matt's email address is <u>Matthew.Cramer@optum.com</u>. As a reminder, you can find vendor contact information on the <u>Vendor Contact list, found on the ABC webpage, under Conference Call Notes.</u>
- **Local Gov:** Will we be able to have a copy of this slideshow e-mailed to us?
 - Answer: Yes, it is attached with today's Friday ABC email.
- **Local Gov:** This will be our agency's first time to report. Is there step-by-step reporting instructions on the ABC page as well? How to file with the IRS?
 - **Answer:** You will need to contact your tax accountant or visit the IRS website. We cannot advise on filing.
- **Local Gov:** What is the PPACA report # we would run for the 1094/1095 reports? I'm sorry I missed those details when she mentioned it.
 - Answer: PPACA Report instructions are posted on the ABC website under training. <u>https://www.tn.gov/content/dam/tn/finance/fa-</u> benefits/documents/abc_run_ppaca.pdf
- **Local Gov:** Is it normal to take a week or longer to set someone up on Payflex? The employee has completed their portion and we have completed our paperwork.
 - Answer: It takes 10-12 business days. PayFlex has a lot of setup in our system. January can be slower. We have your group in priority.
- **Local Gov:** We will have a new HR assistant who will need to be set up to enter new employees in Edison. Who do I contact?
 - Answer: Please reach out via Zendesk. You will get a user rights form to get them started with ABC roles.
- **Local Gov:** Are there any expenses associated with the Management Consultation and/or Training and Development for Managers and employees (Optum)?

Answer: There is no cost. You can find more information about Manager Resources on the Here4TN website under <u>Leaders</u>.

- **Local Gov:** For PPACA Reporting, last year it was mentioned the reporting may be discontinued, has there been any updated information about this?
 - **Answer:** Employers continue to be required to report.
- **Local Gov:** Did I understand correctly that the State Plan is considered self-insured for all entities. We are a local gov entity.
 - **Answer:** Yes. Your plan is a self-insured plan provided by the state to your employees.
- **Local Gov:** Will you be going over the Query for billing and when to expect that to be drafted from the bank?
 - Answer: If you are talking about the collections applied report, you can run them manually after the second working day of the month or they come around the sixth or seventh day of the month via email. The report will show what you'll be billed on the 15th if it is not a weekend or holiday. In that case it will be the following business day. I'm happy to talk with you after the call. Call the Service Center and ask to speak to Gena Bishop. Email: gena.bishop@tn.gov
- **Local Gov:** If an employee is wanting to leave our company insurance and find one on their own, can they do it now and will they need a letter requesting to do so?
 - Answer: To cancel insurance, they will need to submit a cancel request form and provide reason. Also, the employee must have proof of new insurance. The <u>Insurance Cancel Request Application</u> is on the ParTNers website under Forms. It gives all the eligible reasons outside of annual enrollment. The employee will need to have a qualifying event.
- **Local Gov:** We have an employee who recently had a stroke. Home health will not visit because he is not homebound. Can EAP help him in any way, i.e., speech therapy? Or anything else? Should I encourage him to contact EAP?
 - **Answer:** Yes, he can call Here4TN at 855-Here4TN. We can help him find resources available to him.
- Local Gov: Does Optum have annual or lifetime limits on behavioral therapy?
 - Answer: There is no annual or lifetime limit on behavioral health benefits.
- **Local Gov:** Are non-participating members not eligible for all EAP benefits or not eligible for the behavioral health provided by EAP?
 - **Answer:** EAP services are available to those enrolled in medical as well as their benefits eligible (not necessarily enrolled) dependents. Behavioral health benefits are available to members and dependents enrolled in medical insurance.

Materials and Communications

- **State/Higher Ed**: Premium Holiday Info for STATE, HIGHER ED employees only! What?
 - On January 24th, Benefits Administration (BA) recommended and the State Insurance Committee voted to give all active state and higher education employees **a premium holiday for June 2020 coverage**.
 - This means there will be no deduction for the health insurance premium this May.
 - The premium holiday is for health insurance (BCBST & Cigna) premiums only and will not include voluntary benefits.
 - The premium holiday is for active employees and COBRA participants only and does not impact retiree premiums.

Why?

- For the past several years, insurance claims in the state plan have been lower than expected.
- A premium holiday allows us to give back to our employees some of the surplus money on a one-time basis while maintaining sufficient reserves needed to operate the plan.

When?

No premiums for health insurance will be deducted from:

- 5/31 paycheck for state employees;
- A May paycheck for higher education employees (depending on payroll);
- May direct-bill invoices for state and higher ed employees; and
- 6/15 draft sent by BA to higher education administration.

Additional Information:

- Departments will not pay the 80% portion for the June insurance premium. Agency budgets will be adjusted to reflect these non-recurring savings in FY 2020.
- There is no stipulation that an employee has to work a specific amount of time to be eligible. If they are enrolled in coverage, they will not be charged premiums regardless of when their coverage began.
- All employees will still show on the premiums due report, with a \$0 premium due for medical (for Higher Ed).
- You may still see charges for medical coverage on the 6/15 draft for any retroactive changes (for Higher Ed).

Communicating to employees:

- **State employees:** Benefits Administration will send an email with a letter to all state employees letting them know that there will be a May premium holiday for their June health coverage. The emails will go out in May before the May end-of-month paychecks.
 - If employees reply to these emails, it generates a Zendesk ticket, so we can answer any questions state employees may have.
- **Higher Ed employees:** The email/letter we will send to state employees in May will be forwarded to Rob Chance, April Preston and Holly Girgies for them to distribute as they wish.

• **Presidents' Day Holiday:** State offices and the Benefits Administration service center are closed Monday, Feb. 17 for Presidents' Day.

Benefits

• Plan Document Updates: We went over the Plan Document updates listed below.

<mark>Higher Ed</mark>

Posted on the ParTNers For Health website under Publications at https://www.tn.gov/partnersforhealth/publications/publications.html

- Date change on the cover indicates the document is for the 2020 plan year
- Date in the footer beginning on page one reflects the date of most recent updates 1/24/2020

Section 4.07 "Continuation of Health Coverage for Retirees" - added language approved by the State Insurance Committee allowing a choice of retiree classification, subject to satisfying eligibility criteria: "<u>Employment with the Employer</u>" is defined as creditable service in a position where the incumbent qualifies for insurance coverage with the State of Tennessee or any agency participating in the state or local education plans. For purposes of this plan, accumulated unused sick leave is defined as employment with the employer. When eligible for retiree coverage by combining creditable state service and local education service, the retiree will be classified as a retiree in the plan from which employment ended immediately preceding retirement. When eligible for retiree coverage without combining creditable service, the retiree may choose to be classified as a retiree in the plan in which he or she first satisfied eligibility criteria, or in the plan from which the employment ended immediately preceding retirement.

Section 6.05 "Appeals Provision" - Clarification

- Inserted language to clarify that either the covered person or their authorized representative may request an appeal; and
- Updated language to recognize that not all appeals follow the same path during internal review (some cases are approved at level I making other levels unnecessary, some cases move from level I to IRO because a level II is highly unlikely to result in a reversal and would only consume time best spent in independent review, some cases proceed through all levels, etc.):

The covered person must first exhaust any and all levels of or their authorized representative should exhaust the internal complaint or grievance process available through the claims administrator before initiating an external level of appeal.

Section 8.01 "Employee Contributions" – Changes approved by Insurance Committees 1/24/2020

- Changed section title from Employee Contributions to Contributions by Covered Persons
- "Employee" and "Employee or dependent" language replaced with Covered Person
- Added language to clarify that premium deferral is specific to direct bill premiums
- Added language to permit a one-time coverage reinstatement when direct billed premiums are not paid within the premium deferral period:

The plan permits a 30 day premium deferral period of premium a full calendar month for premiums being billed directly instead of through payroll deduction. If the premium is not paid at the end of that within the deferral period, coverage will be canceled retroactive to the day a premium was last paid with no provision for reinstatement of coverage last month for which the premium was paid.

When coverage for Covered Persons who are billed directly has been canceled for failure to pay within the deferral period, the plan permits a one-time opportunity for coverage reinstatement. Covered Persons seeking reinstatement of coverage must request reinstatement within 30 days of being notified that

coverage was canceled. The Covered Person must sign and return the required documentation, and all current and past due premiums must be received within a 30-day deadline.

Section 11.03 "Hospital-Based Providers" – Clarification

- Refers to providers such as emergency room physicians, anesthesiologists, radiologists and pathologists who are generally not contracted with the insurance carriers
- Inserted language to clarify that reimbursement at network levels is specific to care at an in-network facility Example: in-network hospital, out-of-network ER physician
- Added language to clarify member responsibility at an out-of-network facility: *Covered Persons will be responsible for expenses exceeding the maximum allowable charge for hospital based providers at an out-of-network facility unless the claims administrator determines that the expenses were for emergency care.*

Section 13.02 "Covered Expenses"

Item (I) – clarification – updated language to remove "from" language which has caused some confusion; during a transport, the ambulance is going "to" another location:

Charges for medically necessary transportation by professional ambulance service (ground and air) to and from the nearest general hospital or specialty hospital which is equipped to furnish treatment incident to such illness or injury. Air ambulance charges and all other professional ambulance charges (including ground ambulance) are covered as detailed in Attachment A of the plan.

Section 13.02 "Covered Expenses"

Item (J) – change – added language reflecting new acupuncture benefit approved by the IC

Charges for treatment received by a licensed doctor of podiatric medicine or, for treatment by a licensed doctor of chiropractic, or for treatment by a licensed acupuncturist provided treatment was within the scope of his/her license, unless excluded under Section 13.04.

Section 13.03 "Other Covered Expenses"

Item (I) – change – added language reflecting improved coverage for dental expenses approved by the Insurance Committees (this is coverage specific to medical plan benefits):

Covered Dental Expenses.

Charges for treatment of accidental injury or damage to sound natural teeth and/or jaw (other than by eating or chewing). Treatment of accidental injury as described in this section is does not include injury from eating or chewing. Damage means deterioration or loss documented to be the direct result of medically necessary treatment that significantly impairs a covered person's ability to masticate and maintain a healthy weight. Services are limited to the cost of bridgework unless the claims administrator determines that teeth implants are medically necessary (for example if implants are medically necessary to anchor or support the bridgework). Treatment will not be covered if the claims administrator determines services are cosmetic or otherwise not medically necessary.

Attachment A - inserted new benefit grids for 2020 plan year

- Acupuncture added to Chiropractic line item; 50 visits of each noted
- Footnote added to the bottom of the grid enhanced benefit approved for facility-based substance treatment at select substance use treatment facilities

Updated sections of Part II of the State Plan Document – this part of the PD deals with Flexible Benefits

- Updated plan year references throughout Introduction, Section 1.06, Article II, Sections 2.16 and 4.01
- Introduction added language to clarify payroll deductions:
- Employees applying to enroll in the FSA or limited purpose FSA must consent to a payroll deduction agreement in Edison as a condition for being allowed to participate in either plan. This consent allows the State to make deductions from employee wages to repay expenses that employees fail to substantiate to the claims administrator. See the "Operations Questions" section of these notes for clarification.
- Updated Medical Flexible Spending Account (FSA) maximum contribution amount from \$2,650 to \$2,700 Article II, Sections 2.16 and 2.26

###

<mark>Local Ed</mark>

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- Date change on the cover indicates the document is for the 2020 plan year
- Date in the footer beginning on page one reflects the date of most recent updates 1/24/2020

Section 1.17 "Employer" - updated section references to match current numbering in the plan document; outdated references 1.26 and 1.19 changed to 1.37 and 1.17

Section 4.06 "Continuation of Health Coverage for Retirees" – added language approved by the Local Education Insurance Committee allowing a choice of retiree classification, subject to satisfying eligibility criteria:

"<u>Employment with the Employer</u>" is defined as creditable service in a position where the incumbent qualifies for insurance coverage with a local education agency in Tennessee that participates in the state-sponsored local education insurance plan or with the State of Tennessee or a higher education institution.

When eligible for retiree coverage by combining creditable state and local education service, the retiree will be classified as a retiree in the plan and employee classification from which employment ended immediately preceding retirement. When eligible for retiree coverage under another employee classification within the state or local education plan without combining creditable service, the retiree may choose to be classified as a retiree in the plan in which he or she first satisfied eligibility criteria, or in the plan and classification from which the employment ended immediately preceding retirement.

Section 6.05 "Appeals Provision" - Clarification

- Inserted language to clarify that either the covered person or their authorized representative may request an appeal; and
- Updated language to recognize that not all appeals follow the same path during internal review (some cases are approved at level I making other levels unnecessary, some cases move from level I to IRO because a level II is highly unlikely to result in a reversal and would only consume time best spent in independent review, some cases proceed through all levels, etc.):

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- Added language to permit a one-time coverage reinstatement when direct billed premiums are not paid within the premium deferral period:

The plan permits a 30 day premium deferral period of premium a full calendar month for premiums being billed directly instead of through payroll deduction. If the premium is not paid at the end of that within the deferral period, coverage will be canceled retroactive to the day a premium was last paid with no provision for reinstatement of coverage last month for which the premium was paid.

When coverage for Covered Persons who are billed directly has been canceled for failure to pay within the deferral period, the plan permits a one-time opportunity for coverage reinstatement. Covered Persons seeking reinstatement of coverage must request reinstatement within 30 days of being notified that coverage was canceled. The Covered Person must sign and return the required documentation, and all current and past due premiums must be received within a 30-day deadline.

Section 11.03 "Hospital-Based Providers" – Clarification

- Refers to providers such as emergency room physicians, anesthesiologists, radiologists and pathologists who are generally not contracted with the insurance carriers
- Inserted language to clarify that reimbursement at network levels is specific to care at an in-network facility Example: in-network hospital, out-of-network ER physician
- Added language to clarify member responsibility at an out-of-network facility: *Covered Persons will be responsible for expenses exceeding the maximum allowable charge for hospital based providers at an out-of-network facility unless the claims administrator determines that the expenses were for emergency care.*

Section 13.02 "Covered Expenses"

Item (I) – clarification – updated language to remove "from" language which has caused some confusion; during a transport, the ambulance is going "to" another location:

Charges for medically necessary transportation by professional ambulance service (ground and air) to and from the nearest general hospital or specialty hospital which is equipped to furnish treatment incident to such illness or injury. Air ambulance charges and all other professional ambulance charges (including ground ambulance) are covered as detailed in Attachment A of the plan.

Section 13.02 "Covered Expenses"

Item (J) - change - added language reflecting new acupuncture benefit approved by the IC

Charges for treatment received by a licensed doctor of podiatric medicine or, for treatment by a licensed doctor of chiropractic, or for treatment by a licensed acupuncturist provided treatment was within the scope of his/her license, unless excluded under Section 13.04.

Section 13.03 "Other Covered Expenses"

Item (I) – change – added language reflecting improved coverage for dental expenses approved by the Insurance Committees (this is coverage specific to medical plan benefits):

Covered Dental Expenses.

Charges for treatment of accidental injury or damage to sound natural teeth and/or jaw (other than by eating or chewing). Treatment of accidental injury as described in this section is does not include injury from eating or chewing. Damage means deterioration or loss documented to be the direct result of medically necessary

treatment that significantly impairs a covered person's ability to masticate and maintain a healthy weight. Services are limited to the cost of bridgework unless the claims administrator determines that teeth implants are medically necessary (for example if implants are medically necessary to anchor or support the bridgework). Treatment will not be covered if the claims administrator determines services are cosmetic or otherwise not medically necessary.

Attachment A - inserted new benefit grids for 2020 plan year

- Acupuncture added to Chiropractic line item; 50 visits of each noted
- Footnote added to the bottom of the grid enhanced benefit approved for facility-based substance treatment at select substance use treatment facilities

###

<mark>State</mark>

Posted on the ParTNers For Health website under Publications at https://www.tn.gov/partnersforhealth/publications/publications.html

- Date change on the cover indicates the document is for the 2020 plan year
- Date in the footer beginning on page one reflects the date of most recent updates 1/24/2020

Section 4.07 "Continuation of Health Coverage for Retirees" - added language approved by the State Insurance Committee allowing a choice of retiree classification, subject to satisfying eligibility criteria: "<u>Employment with the Employer</u>" is defined as creditable service in a position where the incumbent qualifies for insurance coverage with the State of Tennessee or any agency participating in the state or local education plans. For purposes of this plan, accumulated unused sick leave is defined as employment with the employer. When eligible for retiree coverage by combining creditable state service and local education service, the retiree will be classified as a retiree in the plan from which employment ended immediately preceding retirement. When eligible for retiree coverage without combining creditable service, the retiree may choose to be classified as a retiree in the plan in which he or she first satisfied eligibility criteria, or in the plan from which the employment ended immediately preceding retirement.

Section 6.05 "Appeals Provision" - Clarification

- Inserted language to clarify that either the covered person or their authorized representative may request an appeal; and
- Updated language to recognize that not all appeals follow the same path during internal review (some cases are approved at level I making other levels unnecessary, some cases move from level I to IRO because a level II is highly unlikely to result in a reversal and would only consume time best spent in independent review, some cases proceed through all levels, etc.):

The covered person must first exhaust any and all levels of or their authorized representative should exhaust the internal complaint or grievance process available through the claims administrator before initiating an external level of appeal.

Section 8.01 "Employee Contributions" – Changes approved by Insurance Committees 1/24/2020

- Changed section title from Employee Contributions to Contributions by Covered Persons
- "Employee" and "Employee or dependent" language replaced with Covered Person
- Added language to clarify that premium deferral is specific to direct bill premiums

• Added language to permit a one-time coverage reinstatement when direct billed premiums are not paid within the premium deferral period:

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are medically necessary (for example if implants are medically necessary to anchor or support the bridgework). Treatment will not be covered if the claims administrator determines services are cosmetic or otherwise not medically necessary.

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- Acupuncture added to Chiropractic line item; 50 visits of each noted
- Footnote added to the bottom of the grid enhanced benefit approved for facility-based substance treatment at select substance use treatment facilities

Updated sections of Part II of the State Plan Document – this part of the PD deals with Flexible Benefits

- Updated plan year references throughout Introduction, Section 1.06, Article II, Sections 2.16, 4.01 and 6.01
- Introduction added language to clarify payroll deductions: Employees applying to enroll in the FSA or limited purpose FSA must consent to a payroll deduction agreement in Edison as a condition for being allowed to participate in either plan. This consent allows the State to make deductions from employee wages to repay expenses that employees fail to substantiate to the claims administrator.
- Updated Medical Flexible Account (FSA) maximum contribution amount from \$2,650 to \$2,700 Article II, Sections 2.16 and 2.26
- Updated Parking and Transportation maximum contribution amount from \$260 to \$265 Introduction, Sections 5.05, 5.06 and 6.01
- Added language to clarify eligibility for the P&T Reimbursement Account, Section 5.01: *Who is eligible for the plan?*

Any State of Tennessee employee who has transportation expenses may participate in the P&T Reimbursement Account. Claims for your parking FSA and/or transportation FSA may only be incurred by yourself, as the state employee, as part of your daily parking at work or transportation to and from work. Expenses for other family members (spouse, children) are not allowed.

• Updated web address for locating the appropriate form for enrolling in a Transportation Account and/or Parking Account, Section 5.03:

...An employee may enroll by completing the appropriate form and faxing to 615-741-8196. The form can be accessed at

https://www.tn.gov/content/damtn/finance/fa-benefits/documents/1020.pdf

https://www.tn.gov/partnersforhealth/other-benefits/flexible-benefits.html.

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<mark>Local Gov</mark>

Posted on the ParTNers For Health website under Publications at

https://www.tn.gov/partnersforhealth/publications/publications.html

- Date change on the cover indicates the document is for the 2020 plan year
- Date in the footer beginning on page one reflects the date of most recent updates 1/24/2020

Section 1.17 "Employer" - updated section references to match current numbering in the plan document; outdated references 1.26 and 1.19 changed to 1.37 and 1.17

Section 1.37 "Memorandum of Understanding (MOU) – fixed outdated reference:

Benefits Administration acting as the committee's representative, supersedes and replaces all prior MOUs. A participating employer failing to complete and return a MOU as provided in this section, or failing to abide by all provisions of the MOU, shall be subject to administrative action as specified in TCA 8-27-303 8-27-703 or the MOU, up to and including, delayed enrollment, suspension of claims payment for persons covered through the employer, and an employer's termination from the plan. Benefits Administration reserves the authority to determine appropriate action for a participating employer's non-compliance or to extend compliance deadlines based on extenuating circumstances.

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- Inserted language to clarify that either the covered person or their authorized representative may request an appeal; and
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- Footnote added to the bottom of the grid enhanced benefit approved for facility-based substance treatment at select substance use treatment facilities

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• The Tennessee Plan – Plan Document Change: There is a change for The Tennessee Plan members included in the Plan Document. For those who are billed directly or payments are collected through ACH and coverage has been canceled for failure to pay within the deferral period, we will now allow for a one-time opportunity to reinstate the coverage.

The Tennessee Plan, <u>Plan Document copy changes</u> are in the FUNDING section on page 8, and noted below:

Change from:

After the first payment, a deferral period of a full calendar month is allowed. If the Plan contribution is not paid within this deferral period, coverage is terminated retroactively to the last month for which Plan contributions were paid. **Coverage cannot be reinstated if it is cancelled due to non-payment of Plan contributions**.

Change to:

After the first payment, a deferral period of a full calendar month is allowed for premiums being billed directly or collected through ACH instead of through payroll deduction. If the Plan contribution is not paid within the deferral period, coverage is terminated retroactively to the last month for which Plan contributions were paid. When coverage for Plan Participants who are billed directly or collected through ACH has been canceled for failure to pay within the deferral period, a one-time opportunity for coverage reinstatement is allowed. Plan Participants seeking reinstatement of coverage must request reinstatement within 30 days of being notified that coverage was canceled. The Plan Participant must sign and return the required documentation, and all current and past due premiums must be received within a 30-day deadline.

Operations

- Mid-Year Enrollments and Cancellations
 - Enrollments
 - Rules are explained in Section 2.08 of the Plan Document
 - Special Enrollment Provisions come from federal law Health Insurance Portability and Accountability Act
 - Voluntary termination of other insurance coverage is not a qualifying event, and it doesn't appear as a reason on the Enrollment Change Application
 - \circ Cancellations
 - Rules are explained in Section 4.01 of the Plan Document
 - Employees and dependents may only cancel coverage during the annual enrollment period except for certain events
 - Cost Change is not an approved cancel reason, and it doesn't appear on the Insurance Cancel Request Application

Questions and Answers

- 1. Will the plan allow a mid-year enrollment when another employer has a different open enrollment period? No. The state-sponsored insurance plans do not recognize a different enrollment period as an opportunity to enroll in the State Group Insurance Program.
- 2. What about an increase in the cost of coverage under another plan? No. The statesponsored insurance plans do not recognize a cost increase under another plan as an opportunity to enroll in the State Group Insurance Program. The exception would be if the increase comes from an employer stopping all contribution to the other insurance coverage.
- 3. Why don't the state-sponsored plans allow changes due to other plans having different enrollment periods or when the cost for other coverage changes? The plan is not required to recognize those events, and they aren't included in the plan rules.
- 4. Can an employee cancel coverage in this plan if they have an open enrollment opportunity with another plan? Yes.
- 5. Where can employees find more information? Section 2.08 and 4.01 of the Plan Documents, available on the ParTNers For Health website, under the publications tab and the Enrollment Change Application and the Insurance Cancel Application, also on the website under forms.
- > Other Questions?
- State: New Employee Orientation Update

- Beginning in March, we will discontinue the weekly New Employee Orientation held on Mondays at 1 p.m. Central time.
- Instead, we will be posting a recording to the training like we did last fall.
- This recording will be available on demand and will be especially useful to those employees working 2nd and 3rd shifts, or who work jobs that don't allow for them to attend the training at the specific time it is offered. It can also be watched at home, with spouses or other family members who will be impacted by the insurance decisions.
- We will also add a link to the webpage for employees to submit a request to our service center if they have questions during or after the presentation.

Local Gov: Retiree Coverage Opt-Out Opportunity

- If your agency previously opted-in for retiree health coverage, or selected the limited opt-out option, the primary ABC, Agency Head and Finance Officer will be receiving a letter by email giving you the opportunity to opt out beginning 7/1/20.
- We will provide this opportunity every year.
- \circ You will have until March 31^{st} to make a decision.
- \circ $\,$ If you do not respond, you will remain with your current option.
- Once you opt-out, you can't opt-in in the future.
- If your agency opted out of all retiree coverage, you will not receive the letter.

• **Higher Ed/Local Ed/Local Gov:** Reminder - Entering Employees in Edison:

- All eligible employees should be entered in Edison, even if they aren't enrolled in coverage.
- If someone loses eligibility for any reason (separation, change in status to part-time, etc.) then the employee should be terminated in Edison using the Non-Payroll Job Data page.
- All agencies have keying access in Edison and should be processing their own hires, terminations, and position number changes.
- BA still processes life events and special qualifying events for all employees (birth, marriage, divorce, loss of other coverage, etc.).
- \circ If you need help with entering a transaction, please reach out to our Service Center.

• Workaround for Benefits Workcenter Issue:

- On January 29th, we shared with you that there is an issue with using the Benefits Workcenter in Edison to access pages.
- The Workcenter is still not working properly, and the Edison team is working as quickly as possible to determine the problem.
- Please do not use the Benefits Workcenter to navigate to the commonly used pages in Edison for now.
- We suggest saving the pages as favorites/links in Edison. The instructions on how to do that were attached to the 1/29 email, and we will send them again this Friday.
- Below are some of the common paths to help you navigate to the pages you need:
 - Hire eForm HCM / Benefits / Hire eForm
 - Benefit eForm HCM / Benefits / Benefit eForm
 - Employee Profile Page HCM / Benefits / Review Employee Benefits / Employee Profile Page
 - Health Benefits HCM / Benefits / Enroll In Benefits / Health Benefits

- Non-Payroll Job Data HCM / Benefits / Non-Payroll Job Data
- Life and AD/D Benefits HCM / Benefits / Enroll In Benefits / Life and AD/D Benefits
- Life Insurance Beneficiaries HCM / Benefits / Employee/Dependent Information / Life Insurance Beneficiaries
- Modify a Person HCM / Workforce Administration / Personal Information / Modify a Person

• Service Center Metrics/Customer Service Rating:

- **January 2020:**
 - Tickets via Email: 858
 - Tickets via Self-Service: 3,860
 - Tickets via Phone: 5,910
 - Tickets via Chat: 419
 - Total: 11,047
 - Satisfaction Score: 98.4%

• **January 2019:**

- Tickets via Email: 851
- Tickets via Self-Service: 4,229
- Tickets via Phone: 6,555
- Tickets via Chat: 297
- Total: 11,932
- Satisfaction Score: 97.9%
- We received less calls and emails this year as compared to last January with our total interactions decreasing by almost 900 overall.
- We take the satisfaction of our customers very seriously. Please complete the survey after your Zendesk ticket is resolved.
- If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy. Our satisfaction rate for January was 98.4% percent.

• Annual Enrollment Appeals:

- Written appeals were due by 12/31/2019 to benefits.administration@tn.gov
- We are still receiving a few of these; most that are not administrative errors are being sent to the Benefits Administration Review Team (B.A.R.T.)
- Please review Edison notes for the status Notes:
- Written appeals for annual enrollment were due by 12/31/2019. We continue to receive these appeals and unless they are clearly administrative errors, the majority of these are being sent to our Benefits Administrative Review team. This team meets on an asneeded basis and the turnaround for a review at this time could be up to 2-3 weeks. Please check Edison notes for the status of the appeal. It will show when it was sent to B.A.R.T for review and then if it has been approved or denied once a decision has been

rendered. As the ABC, you will be notified through a Zendesk email of the final decision.

• New ABC Training

- February 19: Local Education: 9-11 a.m. CT
- February 19: State/Higher Education: 1-3. p.m. CT
- February 20: Local Government: 9-11 a.m. CT
- o February 20 Session 2 All Entities 1-3 p.m. CT

Here is how to sign up for training:

1. Login into Edison.

2. Navigate to ELM Menu >ELM>Employee Self Service>Learning>Search Catalog>Enter ABC in the "Search the Catalog" field>Click the "Search Activities" button.

- 3. Locate the training you are interested in.
- 4. Locate the specific dates you would like to attend the webinar.
- 5. Click Enroll to the right of the training session you wish to participate in.

6. Click Submit Enrollment in the bottom lower left corner.

7. Once you have enrolled, you will see the following message under your name at the top of the page.

You have successfully enrolled in ABC Training Webinar/Workshop. This change in status will be updated on the All Learning page.

OPERATIONS QUESTIONS

- Higher Ed: Is dry needling covered under the plan's acupuncture benefit?
 - Answer: No, dry needling is not covered. Dry needling is not the same as acupuncture. It's a variant of trigger point injection. Our current medical vendors consider dry needling to be experimental, investigational or unproven, and the plan has a specific exclusion for medical or surgical procedures to be deemed experimental, investigational, or unproven.
- **Higher Ed:** How does payroll deduction language in the Plan Document change (copied and pasted below) apply to higher education?
 - Answer: It doesn't. The state handles payroll deduction for flex benefits for state employees, so that part of the change is directed just to state employees even though there is just one plan document for state and higher education employees. Higher education employees do not enroll in flex benefits in Edison. They do so via the PayFlex portal during annual enrollment or via paper enrollments during the rest of the year, and they handle their own payroll. We apologize for the confusion. Higher education agencies should continue to process flex enrollments and payroll deduction as usual. The other updates mentioned plan year references and change in the maximum contribution amount do apply to both state and higher education.

Updated sections of Part II of the State Plan Document – this part of the PD deals with Flexible Benefits

- Updated plan year references throughout Introduction, Section 1.06, Article II, Sections 2.16 and 4.01
- Introduction added language to clarify payroll deductions:
 Employees applying to enroll in the FSA or limited purpose FSA must consent to a payroll deduction agreement in Edison as a condition for being allowed to participate in either plan. This consent allows the State to make deductions from employee wages to repay expenses that employees fail to substantiate to the claims administrator.

- Updated Medical Flexible Spending Account (FSA) maximum contribution amount from \$2,650 to \$2,700 Article II, Sections 2.16 and 2.26
 - **Higher Ed:** Do we have dates yet for Annual Enrollment (AE)?
 - Answer: Yes, Oct. 1 through Oct. 16 for state and higher education employees. This AE period will include two weekends as higher ed ABCs have requested.
 - **Higher Ed:** I need some help from Davis Vision with cards. I have employees who are calling Davis for cards and Davis is telling them to call us (ABCs) for ID cards?
 - Answer: We will contact the Davis Vision account manager for retraining their call center staff. When this does happen, if you can tell us the names and dates that this occurred, it helps the Davis Vision account team research the issue.
 - Higher Ed: Has Edison been fixed for gathering the PPACA reports?
 - Answer: We believe it has been fixed but if you are having issues you can submit a Zendesk ticket.
 - **Local Ed**: Is there any talk as to when we may get insurance premium increases for 2021 for budget purposes?
 - **Answer:** We don't know yet, but we will let you know as soon as we can. We typically are able to provide an estimate in late April but the premiums won't be final until the Insurance Committee votes to approve them later this spring
 - **Local Ed:** I would like to understand the process for cancel request due to divorces. It appears it is taking longer than normal for those submitted.
 - **Answer:** We need a Cancel Request form, including the ex-spouse's address to send the COBRA notice in addition to the full final divorce decree. Sometimes we receive the marital dissolution paperwork, but we must have the full divorce decree *signed by the judge* to process the request.
 - Local Ed: Is it possible to have different vendor for dental and vison?
 - Answer: We issue request for proposals (RFP) for dental and vision, so vendor changes are contingent upon the RFP process. We may or may not have new dental vendors for 2021 as the dental contract will expire at the end of 2020, and RFPs will be issued this year. The current vision contract will expire on Dec. 31, 2022, so the vision vendor may or may not be different on Jan 1, 2023.
 - **Local Ed:** What do you do if your employee will not give you the divorce decree to drop his/her spouse and it's past the 60 day time frame?
 - Answer: In this case, we will need you to notify us by submitting a Zendesk ticket, and we can have our program integrity unit check vital records. It could be that Benefits Administration is incurring claims from a non-eligible dependent, so we may have to open a fraud case for any claims incurred by an ineligible ex-spouse. If you mention this to the employee, it might encourage them to provide the necessary documentation.
 - Local Ed: If a member is dropping a spouse/dependent and are currently on the Limited PPO plan, once they drop the spouse/dependent, can they change their plan to the Premier PPO plan and/or change their carrier at that time?
 - The only time members can make changes to their current coverage is if they experience a special qualifying event (SQE). All special qualifying events are listed on the Enrollment Change Application and Cancel Request forms. Under a SQE

they can change within the plan and change vendors. If the enrollment is due to a life event (birth, marriage), then they cannot change vendors but we do allow them to make changes within the plan (e.g., Limited PPO BCBS to Premier PPO BCBS).

- Local Ed: If it (SQE) is due to a child aging off or divorce that would be okay, correct?
 - A child aging off is not a Special Qualifying Event. A divorce is listed on both the Enrollment Change Application and the Cancel Request as a SQE, and a member could make changes to their plan and vendor under this SQE.
- **Local Ed:** Are we supposed to reach out to an employee that we know has gotten a divorce and has not contacted us to remove their spouse? Is that allowed?
 - Answer: I would encourage you to reach out as the employee is responsible for any ineligible claims incurred, and some employees may not realize this. Section 2.06 Substantiation of Dependent Eligibility requires an employee to submit the divorce decree.
- **Local Ed:** Is the repayment of claims and fraud investigation written somewhere that we can share with the employee?
 - Answer: Yes, there are two sections in the Plan Document that apply. 2.06 and 8.01 (B)(1), and this information is included below. Note: we can require divorce decrees, and if they are not provided, it can result in a dependent's eligibility being suspended and eventual termination.

2.06 Substantiation of Dependent Eligibility.

The insurance committee or its representative may, at its discretion, require marriage certificates, birth certificates, adoption papers, legal guardianship papers, divorce decrees, federal income tax returns (listing dependent spouse), or any other requested documentation. Failure to provide the requested information will suspend a dependent's eligibility until such information is provided to the insurance committee or its representative. In addition, dependents whose coverage has been suspended may be subject to termination. If coverage is terminated, those dependents may only be re-enrolled in the plan during the annual open enrollment period or through compliance with the late applicant requirements of Section 2.08.

8.01 (B)(1) Premium refunds will be subject to the following guidelines:

(1) Employee fails to notify agency of eligibility change: Employees who do not notify about a change in their insurance enrollments in a timely manner will receive a three month refund of their portion of the premium, from the date of notification to the agency unless the employee owes the plan for claims paid inappropriately, overpaid benefits above the employee premium refund amount will be billed to the employee. The agency will receive its entire portion.

- **Local Ed:** If an employee retires and has a dependent who is disabled, does the dependent coverage continue? The dependent is under 65.
 - Answer: It will depend. If are you referring to a spouse who is pre-65 and Medicare entitled, on the local education plan, a dependent who is entitled to Medicare is required to take Part A and B to remain eligible for the retirement plan, and then they would age off. For children, if they are entitled to Medicare and it is before they turn 26, they a required to take Medicare Parts A and B.
- **Local Ed:** Is the following eligibility requirement for insurance at retirement applicable to both licensed and non-licensed staff? "Retiree health and vision coverage are only available to employees hired by a participating agency before July 1, 2015. If you started working for a participating local education agency or the state of Tennessee for

the first time on or after July 1, 2015, you are not eligible to continue or enroll in insurance at retirement."

- Answer: Yes, that is applicable to the local education plan whether you are certified or a non-certified employee, and the employee must have been hired prior to July 1, 2015, to be eligible to continue or enroll in insurance at retirement. If there are questions about this, the employee is strongly encouraged to call the BA service center for assistance.
- **Local Ed:** So, the dependent must come off the state plan when the employee retirees and move to Medicare?
 - Answer: When a retiree is eligible to continue group coverage, it depends on different factors including, years of service, dates of service and other things. If the retiree has a dependent covered on the plan and the dependent is eligible for Medicare prior to 65, the dependent may continue coverage on the group health plan, but when they move to the retiree group plan, the dependent must take Medicare Parts A and B and the state coverage would be secondary. The dependent will then age off of the plan, if they turn 65, they will be ineligible for the state group health plan.
- **Local Ed:** If a member's spouse is on her coverage, but received Medicare in 2018, when their son ages off March 1st, does that open the window for the spouse to come off of her plan as well?
 - **Answer:** Typically, when they are eligible for coverage, they must notify us within 60 days. If you have a situation outside of 60 days, we will review and verify claims to make a determination.
 - Follow up question: Would you go back to 2018 or would it be going forward?
 - **Answer:** Our standard process is that we go back to 60 days. It would be an admin error if we approve outside of 60 days.
- **Local Ed:** Must dependents have (state plan) coverage at the time of employee's retirement or would the retiree be able to add dependents later such as during open enrollment or due to dependent losing other coverage?
 - Answer: When employment terminates, for a retiree to add new dependent on the plan, the retiree must be covered on the group health plan. The retiree may add an eligible dependent during Annual Enrollment or add an eligible dependent if they meet the special enrollment criteria, and if they apply to add them within 60 days. But if the retiree is no longer eligible for group health; they will not be able to add dependents to the plan.
- Local Ed: Is there specific contact information for the retiree staff?
 - **Answer:** The employee can call 800-253-9981 and select option 2 for retirement questions or email at <u>retirement.insurance@tn.gov</u>.
- **Local Ed:** If an employee retires and has coverage under the spouse, and the spouse retires, will the employee be able to join the state's plan at that time?
 - Answer: This situation depends on many variables. We will have to look at the record for the employee and will have to look at eligibility if one of the employees is over 65. This will impact the answers. If you have a specific scenario such as this, we encourage to contact us at the service center at 800.253.9981 and select option 2 when you call in.
- State: What about the Virta Diabetes management?

- **Answer:** We hope to launch the Pilot in early April.
- State: I missed the premium holiday info?
 - Answer: For state and higher education active employees and COBRA members, we are having a premium holiday for June coverage, so the May premium will not come out of checks.
- **Local Gov:** Even if the employee has not elected coverage, they should still be in Edison?
 - **Answer:** Yes, that is correct. If the employee is benefits eligible, he/she needs to be hired into Edison.
- Local Gov: When do we expect to receive notices of benefit increases?
 - **Answer:** We will let you know about premiums as soon as we can. We typically are able to provide an estimate in late April, but the premiums won't be final until the Insurance Committee votes to approve them later this spring.
- **Local Gov:** Once you have already been in Zendesk, are you already established? And if you have forgotten your password, do you just go back in and you don't you have to log in with your user ID and password?
 - Answer: If you have already created a profile, you are already established. If it has been awhile since you've been in Zendesk, you may need to reset your password. You can also email us <u>benefits.info@tn.gov</u> or <u>benefits.administration@tn.gov</u>, and it will create a Zendesk ticket.
 - **Follow up question:** So, it will prompt me to pick another password or choose another password?
 - Answer: Yes.

Materials and Communications

- ESS Instructions for New Employees: Benefits Administration (BA) has created and posted New Hire ESS Instructions with a version for state employees and a version for higher education, local education and local government. Both versions are <u>posted under</u> Resources on the For New Employees webpage.
 - They have also been posted on the <u>ABC page under Edison Information</u>:
 - <u>State Employee Self-Service (ESS) Instructions</u>
 - Higher Ed, Local Ed and Local Gov (ESS) Instructions
- Member Handbooks: The 2020 BCBS and Cigna Member Handbooks have been updated and posted to the <u>ParTNers For Health website under the Publications tab</u>. Information has been added to the "Benefit Updates" page at the front of both books to explain cost savings programs recently approved by the Insurance Committees. Savings for approved procedures will mean no cost for PPO members (deductible and coinsurance are waived) and no cost after deductible for CDHP members (coinsurance is waived). Cost savings programs include:
 - Transplants at certain preferred transplant facilities (BCBS and Cigna members) effective 3/1/2020; and,
 - Surgical Treatment and Support Program (STSP) certain approved orthopedic procedures (Cigna-specific program only available to Cigna members) effective 4/1/2020. Additional communications will be shared as materials are finalized, and Sharon Tansil from Cigna joined us later during this call to go over the program and answer your questions.

HIPAA Training

- **ABC HIPAA Training Announcement and Schedule:** Chanda Rainey, our HIPAA privacy security officer, went over upcoming training and the schedule.
 - HIPAA Training Announcement:
 - 2020 HIPAA Annual training will begin in April for Local Education, with other plans to follow.
 - The Health Insurance Portability and Accountability Act of 1996, known as HIPAA, is a federal law that protects the privacy and confidentiality of protected health information. Protected Health Information (PHI) is individually identifiable health information held or maintained by Benefits Administration or our business associates who act on our behalf that is transmitted or maintained in any form or medium. As an ABC, you and your agency are our business associates. The law requires that all covered entities and business associates be trained in HIPAA policies and procedures. All ABCs, backup ABCs, and directors who have access to Edison are required to complete the annual training. The HIPAA training is an example of Benefits Administration's commitment to educate and promote a culture that encourages ethical conduct and compliance with state and federal laws.
 - Our training is online in Edison. We have changed our process to ensure that everyone gets the required training in a timely manner. Each agency is assigned to a month to complete the training.
 - ABCs, backups and directors must complete the annual HIPAA training every calendar year. You have 30 days to complete the training in your assigned month. Failure to comply with mandatory training requirements may result in suspension of insurance

benefits access. Training requirements will not be waived unless approved in advance by BA HIPAA Compliance Officer.

- Training schedule:
 - Local Education Agencies you will have from April 1 to April 30 to complete the 2020 HIPAA training. Instructions for accessing the class will be provided in a Friday email prior to April 1. We will provide reminders throughout the month, but it is your responsibility to make sure you complete this training by April 30.
 - Higher Ed and State you will have from May 1 to May 31 to complete the 2020 HIPAA training. Instructions for accessing the class will be provided in an upcoming Friday email.
 - Local Government Agencies you have from June 1 to June 30 to complete the 2020 HIPAA training. We'll send more information as we get closer to this date.

Benefits

• **State/Higher Ed:** Wellness Program Update – Biometric Screening Sites

- Currently we have about 45 screening sites scheduled for the spring and fall and finalized sites have been added to the Quest site.
- $\circ~$ If you are thinking about hosting a site, please let me know. We can add some sites to the fall schedule.
- We will share our current list of sites in your Friday email.
- UPDATE: Due to the evolving situation with COVID-19, we will hold on providing the list of sites. Some sites are canceling their spring dates and moving to the fall. If you have an upcoming date and need to make changes, please contact Matt Berte with ActiveHealth. His email is <u>mberte@activehealth.com</u>.

• State: #4Mind4Body March 18 Lunch and Learn – Balance Your Diet and Your Life

- Our next lunch and learn is Wednesday, March 18th. The session will be led by ActiveHealth. They will talk about how food provides energy for our bodies. How to develop healthy eating habits and how to set goals to help you change your eating habits for good.
- There is more information about the sessions <u>on the ParTNers for Health page under</u> <u>EAP</u>. Including how to join the webinar. If you want to attend in person, we will meet in the TN Tower in Conference Rooms A & C.
- UPDATE: We will now only conduct this lunch and learn by WebEx. We will send an email to all state employees next week to let them know.

• **State/Higher Ed:** Virta Pilot Update

- The contract with Virta has been completed for the twelve-month diabetes reversal pilot.
- On March 31st, Benefits Administration will send an email to 15,000 members selected randomly to announce the pilot. As a reminder, the program is for anyone on the state health plan who has type II diabetes. This includes a spouse and adult dependent. We will share a copy of the email with you so that you will be aware of what the email says. The email will include a link to apply for the program. When a member applies, they will provide some basic information. If any of that information makes the member ineligible (i.e., type 1 diabetes diagnosis or not having access to a smartphone) the member will be notified they are not eligible. Once the application is complete, they will schedule an intake call with their assigned enrollment advisor who will walk them through the process of enrollment (i.e., labs and health history). This advisor will be

their point of contact throughout the process and will let them know the next steps and answer any questions. The Virta treatment does require medical approval, so the enrollment can take a week or two depending on how quickly applicants can complete the required steps.

- We hope to have the fifty slots filled in the first few weeks after sending the email. And we will periodically provide updates on the progress of the twelve month pilot program.
- **Optum Talkspace Program:** Matt Cramer, with Optum, our EAP and behavioral health vendor, joined us to go over the new behavioral health program called Talkspace.
- **Cigna Surgical Treatment and Support Program:** Sharon Tansil with Cigna joined us to go over their new Surgical and Treatment Support Program.

Operations

- **Local Gov:** OPEB/Retiree Coverage Opt-Out:
 - Agencies who selected to opt-in to retiree coverage or selected the limited opt-out option (to cover existing retirees but no new retirees) should have received an email on February 24th giving you the option to change your election beginning July 1st, 2020.
 - You only need to respond if your agency wants to change the election. You will be given the opportunity to opt-out every year. If you do not respond, you will retain your current option.
 - The deadline to make a change is Tuesday, March 31st. A reminder email will be sent the week prior to the deadline.
 - Once you opt-out you cannot later decide to opt-in to retiree coverage.
 - If you are already opted-out, you will not receive a notification.

• **Higher Ed/Local Ed/Local Gov:** Security Audit Schedule:

- **March:** Local Education (email was sent March 3rd and responses are due April 3rd)
- April: Higher Education
- May: Local Government
- The email has a spreadsheet attached that lists each ABC with your agency. It shows their level of access and the department IDs for which they have access.
- Please respond even if the list is correct.
- If people are missing, or should no longer have access, please submit a security authorization form (<u>https://www.tn.gov/content/dam/tn/finance/fa-</u> <u>benefits/documents/abc_edison_user_form.pdf</u>) by the deadline listed in the email.

• **State/Higher Ed:** Updating Beneficiaries:

- For basic term, AD&D and voluntary AD&D, navigate in Edison to Main Menu>HCM>Employee Self Service>Benefits>Dependents and Beneficiaries>Life Insurance Beneficiaries.
- For voluntary term life, the employee should log in and follow instructions on the Securian Financial (Minnesota Life) website: <u>https://lifebenefits.com/stateoftn</u>.
- Updating a beneficiary is sometimes the last thing a person thinks to do when they are going through a life event such as divorce or death of a dependent. It's important to help our members navigate through each stage of these major events they experience. To

better assist you and our members, we will now ask you in our ticket response to remind your employees they may want to update their life insurance beneficiaries when they experience these type events. For basic term, AD&D, and voluntary AD&D, the member may update their beneficiary in Edison by navigating to the Main Menu>HCM>Employee Self Service>Benefits>Dependents and Beneficiaries>then Life Insurance Beneficiaries. Voluntary term life beneficiaries can only be updated through Securian. Please advise the employee to log in to Securian and follow the instructions on their website.

• Service Center Metrics/Customer Service Rating -

• February 2020:

- Tickets via Email: 681
- Tickets via Self-Service: 3,009
- Tickets via Phone: 4,643
- Tickets via Chat: 291
- Total: 8,624
- Satisfaction Score: 97.7%

• February 2019:

- Tickets via Email: 787
- Tickets via Self-Service: 3,675
- Tickets via Phone: 5,149
- Tickets via Chat: 190
- Total: 9,801
- Satisfaction Score: 97.1%
- We received more chats this year as compared to last February with less calls and emails.
- As you know, we take the satisfaction of our customers very seriously. Please complete the survey after your Zendesk ticket is resolved.
- If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy. Our satisfaction rate for February was 97.7% percent, up from 97.1% last year.

• Zendesk 'Submit a Request' Update:

- This issue has been resolved. You can once again use the 'Submit a Request' link on our Help Center at <u>https://benefitssupport.tn.gov</u>, and it will allow you to upload file attachments. We apologize for any inconvenience this may have caused.
- **State:** New Employee Orientation Update: As of this past Monday, March 9, we have discontinued the weekly New Employee Orientation held on Mondays. Instead, we have posted a recording to the training like we had last fall.
 - This recording is available on demand and will be especially useful to those employees working 2nd and 3rd shifts, or who work jobs that don't allow for them to attend the

training at the specific time it is offered. It can also be watched at home, with spouses, or other family members who will be impacted by the insurance decisions.

- We have also <u>added a link to the webpage</u> for employees to submit a request to our service center if they have questions during or after the presentation.
- The orientation can be <u>found on the New Employees webpage</u> on our website. There is a <u>follow-along packet for employees</u> also found on the New Employees webpage.

• New ABC Training:

- March 25: Local Education: 9-11 a.m. CT
- March 25: State/Higher Education: 1-3 p.m. CT
- March 26: Local Government: 9-11 a.m. CT
- March 26: Session 2 All Entities 1-3 p.m. CT

Here is how to sign up for training:

1. Log in to Edison.

2. Navigate to ELM Menu >ELM>Employee Self Service>Learning>Search

Catalog>Enter ABC in the "Search the Catalog" field>Click the "Search Activities" button.

3. Locate the training you are interested in.

- 4. Locate the specific dates you would like to attend the webinar.
- 5. Click Enroll to the right of the training session you wish to participate in.
- 6. Click Submit Enrollment in the bottom lower left corner.

7. Once you have enrolled, you will see the following message under your name at the top of the page.

You have successfully enrolled in ABC Training Webinar/Workshop. This change in status will be updated on the All Learning page.

OPERATIONS QUESTIONS

- **Higher Ed**: If we have people traveling in Italy and South Korea for personal reasons and not for business, is there anything our members can do if they are not obeying the travel ban? Is there anything they can do?
 - Answer: We don't have any changes to our benefits regarding out of country travel at this point, so the out of country benefits would still apply. Specifically, we don't have direction on any impact from persons seeking to travel to where there may be a ban.
- **Higher Ed:** I have a question about beneficiaries and filing a death claim. As an ABC, I do not think we can see the beneficiaries that our employees have designated in Edison. To file a death claim for Basic Life Insurance, how would we proceed if we do not have a copy of the beneficiary form in the employee's file? Any suggestions as to how to update our practices if we have employees designate beneficiaries only via Edison?
 - Answer: You actually have the ability to review beneficiaries in Edison. There are two ways to view them. The first way is through the Navigation page: HCM> Benefits>Employee/Dependent Information> Life Insurance Beneficiaries, and you can see what your employees have entered. There are also two queries you can use, one is for a specific employee, and the other is a full audit and is for all of the employees for your agency:

- TN_BA355A_BENEF_FULL_AUDIT
- TN_BA355B_CUR_BENEFS_BY_EMPLID
- Higher Ed: Is there an update for Edison system (Workcenter)?
 - **Answer:** We do not have an update. Our recommendation is to go directly to the page you need in Edison or save pages you use as favorites. We will share information as soon as we have an update.
- Local Ed: What is the difference between Talkspace and virtual visits?
 - Answer: You can find this information on the <u>Talkspace flier</u> that includes FAQs. With Talkspace, you use a secure app for audio, text or virtual chat. Your selected therapist will respond up to once daily, five days a week. It is a different modality and may be helpful for those who are not able to get to a brick and mortar location or who do not have a provider in their area. Just like virtual visits, Talkspace provides the opportunity to connect with a therapist, no in-person office visit required. Also, just like other virtual visits, Talkspace sessions are subject to the same cost share or coinsurance rate (after deductible) as an outpatient office visit. Generally, one week (seven days) of unlimited messaging or one live video session is equivalent to one outpatient visit, with providers attesting to session completion.
- Local Ed: Will this information (Surgical Treatment Support Program) be sent out to our employees who have Cigna and can we as employers receive a copy of the fliers?
 - Answer: Currently, Cigna is in the process of creating a State of Tennessee flier and FAQ doc that will be mailed to each Cigna head of contract's home and for new hires, the flier and FAQs will be in each welcome kit. BA will also post information on the microsite.
- Local Ed: Is knee arthroplasty the same has a knee scope?
 - Answer: An arthroplasty is a replacement. Under the Surgical Treatment Support Program (STSP), replacements are covered, but scopes are not. Cigna will change the terminology and use replacement instead of arthroplasty as noted below. Below is what is covered under the program:
 - Low Back Disk Surgery
 - Hip Replacement
 - Knee Replacement
 - Laminectomy
 - Spinal Fusion
- **Local Ed:** So, the \$0 deductible is for everyone except for CDHP plans with the Surgical Treatment Support Program, correct?
 - **Answer:** Correct. If you are on the PPO and have an eligible procedure and utilize eligible providers, there will be no cost to you. If you are on the CDHP there will be no cost to you after the deductible is satisfied.
- **Local Ed:** When I last received my Temporary ID report (SSN report), it didn't reflect someone that I expected to be on there. The newborn was added in January.

- **Answer:** We have updated that report recently. If someone is not on the report and you think they should be, please submit a Zendesk ticket and we will research this for you.
- **Local Ed:** Any updates on health insurance rates for 2021? Will there be an increase and what percent?
 - **Answer**: We will let you know about premiums as soon as we can. We typically are able to provide an estimate in late April, but the premiums won't be final until the Insurance Committee votes to approve them later this spring.
- **Local Ed:** Who do we need to contact if we did not receive the Security Audit Schedule?
 - Answer: If you are a primary ABC and you didn't receive it, you can submit a Zendesk ticket and we will send it back out to you. It was only sent to primary ABCs.
- Local Ed: Will BCBS be doing a Surgical Treatment and Support Program?
 - **Answer:** We do not have any information at this point but will let you know if BCBS or Cigna come out with any additional programs.
- **State:** Can you take the HIPAA training earlier than May? Will it be available for you to take earlier than your allotted month?
 - Answer: It will be available April 1 and if you have a conflict, you can take it earlier but we do prefer that you take it during your allotted month. You cannot take it before the first of April and if you do, you will be taking the 2019 version and not the new version and it won't count for 2020.
- **State:** Are we going to have more information provided regarding COVID-19/Coronavirus disseminated to us as the concern among our employees grows?
 - Answer: We have a <u>button on the homepage</u> that you can refer your employees to for more information. It includes a 877 number to the TN Department of Health and other information specific to our members. As we get new information, we will post it there and alert ABCs of any new information.
- **Local Gov:** Have you had a lot of utilization with this so far (Talkspace program)? What would you say are some of the positive outcomes that you have seen?
 - **Answer:** We are just now rolling this out to members and it is too early to understand reporting. The presentation today is an introduction for ABCs and it is a little early to report for the State of Tennessee population.
- Local Gov: Do we know if BlueCross will have such a benefit?
 - **Answer:** We don't know at this time but will keep ABCs aware of any new programs from BCBS or Cigna.
- Local Gov: Have the Edison links (Workcenter) been fixed?
 - **Answer:** They have not. We recommend that you use Navigator or go to your frequent links and save them.

- **Local Gov:** It has been reported that insurance companies across the nation are waiving costs associated with testing for the coronavirus. Is the State Plan considering doing this also?
 - Answer: The state plan is looking closely at benefits for testing for coronavirus but we don't have any final information yet. We will update you as soon as we know more. We do have information <u>posted on the homepage of our website</u> (Coronavirus Public Information button) that we will continue to update and as we will do, we will send you an email.
- **Local Gov:** Who would the contact be for a local government agency that may be interested in enrolling their employees on State insurance?
 - Answer: Please contact Melissa McDonald, director of agency outreach at <u>Melissa.mcdonald@tn.gov</u>. She will be happy to give anyone information about joining the plan.
- **Local Gov:** Are we still supposed to receive Edison letters for new hires to select their insurance?
 - **Answer:** We haven't sent letters in a few years but if are you talking about emails with Access IDs, then yes, you should still be receiving those for your agency. If you are not receiving them then please submit a Zendesk ticket.
- **Local Gov:** If an employee does not pursue this benefit (Surgical Treatment Support Program) for a covered surgery, will they get feedback from Cigna during pre-cert or have any option to change the path of surgery to get these added benefits?
 - Answer: If the member already has plans or needs one of these eligible procedures, and if he/she is willing to wait until 4/1, then the member can contact the toll free number and the customer service representative will walk the member through the process as long as it is an eligible procedure and the member can utilize an eligible provider. The current providers are in Knoxville, Jackson and West TN and Cigna hopes to add groups from middle Tennessee and Chattanooga soon. If the member is willing to travel, then the travel benefit may apply.
- Local Gov: When will we know if health benefits will stay the same, or go up or down?
 - Answer: We will try to relay estimated premiums to you in late April, but we won't know until the Insurance Committee meeting later this spring if they are approved as final. For other benefits changes, we will let you know as soon as possible and walk through them with you during the regional trainings in August.
- **Local Gov:** Could you briefly explain if an ER transports an individual to another facility for testing if that is covered in the ER visit or if that transportation (ambulance) fee would be different?
 - **Answer:** The ambulance transport would be a different charge than the ER charge itself.
- **Local Gov:** For health club benefits, is there a list on their fitness benefits that will show where the location is for discounted fitness clubs?
 - Answer: For Cigna, that is part of Healthy Rewards and called the Active & Fit program. All of that information for existing members is found at <u>mycigna.com</u>, at

the bottom of the page. Members will need to look under Healthy Rewards and it will give the member gyms and fitness clubs. They can search by zip code.

- For BCBS, non-members can call 855-515-1332 M-F from 8 a.m. to 8 p.m. in any U.S. time zone or use the following link to access Fitness Your Way's gym location finder: <u>https://fitnessyourway.tivityhealth.com/locations</u>.
- BCBS members can call the toll-free number, or go to the "Plan & Benefits" tab on the BCBS splash page, scroll down to click on the "See more Discounts" button and log in as a member. Members will see information about the BCBS discount program including gym memberships and locations. Also, under the "Resources tab" on the BCBS member splash page, there's a link to the 2020 Member Guide. The Member Guide explains how to find gym locations as well as how to enroll in the fitness program.
- **Local Gov:** Will employees with Cigna insurance receive information regarding the Surgical and Treatment Support Program? Is there a flier that you will provide to the ABCs?
 - Answer: Yes. Cigna will send a mailing to head of contracts (HOC) that will include a flier and FAQs, and to any new hires after 4/1 will get the flier and FAQ in their new hire welcome packet. All communications will also be posted on the State of Tennessee microsite, and we will share the flier and FAQs with ABCs.
- Local Gov: Can you do the HIPAA training now?
 - Answer: It won't be available until April 1. We prefer that you complete the training in your assigned month. If you complete it now, it won't be the right version. If you have a conflict during your assigned month, you can complete it after April 1.
- Local Gov: There is a flier for TalkSpace that I can access on Here4TN.com, right?
 Answer: Yes, it is on <u>Here4TN.com</u>, at the top there is a banner with a link to the flier and it is also located on the ABC webpage under <u>Optum, ABC Marketing e/Toolkit</u>.

Materials and Communications

- **Coronavirus Benefit Information from Partners for Health Document:** We continue to update the COVID-19 resources document found on the ParTNers for Health website by clicking the yellow band at the top, **Coronavirus Benefits Information from Partners for Health**, with the most up-to-date information for you and your employees.
 - Please continue to share this resource with your employees.
 - Note these Tennessee resources:

Do Your Part. Stay Apart. - <u>tn.gov/health</u> COVID-19 Unified Command – <u>www.tn.gov/unifiedcommand</u> Daily COVID-19 Media Briefings -<u>https://sts.streamingvideo.tn.gov/Mediasite/Catalog/catalogs/mediasiteadmin-covid-19-media-briefing</u> Essential Businesses and Services - <u>https://www.tn.gov/governor/covid-19/essential-services.html</u> COVID-19 Small Business Resources - <u>https://www.tn.gov/ecd/covid-19-small-business-resources</u>

- **COVID-19 Resource On-Demand Webinar Recording:** We have posted a pre-recorded video of a COVID-19 resources webinar held in partnership with Optum and ActiveHealth for you and your employees to watch on-demand.
 - State: This is the same webinar held live at the end of March/beginning of April.
 - About the webinar: While people may be impacted from COVID-19 in different ways, support resources are available. Here4TN EAP offers several coping resources. In this webinar, members will learn about the COVID-19 benefit information offered through the State Health Plan, the various digital resources available including Virtual Visits, Talkspace, Sanvello and more. ActiveHealth reviews basic ways to prevent the spread of germs, helps you understand social distancing and explores ways to cope with isolation during this time.
 - Video and webinar slides are found at the top of the ParTNers for Health EAP page.
 - Video is also found on the ParTNers YouTube page: <u>https://youtu.be/K3zMbp9Sf5g.</u>
- **State:** April 22 #4Mind4Body Lunch and Learn: Virtual Resources WebEx Only: We will hold the April 22, #4Mind4Body webinar by WebEx only. It will be about the Virtual Resources available to you through Optum. We will send emails out next week to state employees with login information which will also be posted on the ParTNers for Health website on the EAP webpage.
- **ABC Emails:** Just a reminder that the recent updates we have sent the past few weeks about COVID-19 Benefits, HIPAA Training updates, webinars and on-demand video, the IRS Extension to File 2019 Income Taxes, etc., are all <u>found on ABC Webpage</u> under **Weekly Emails.**
- State/Higher Ed: Premium Holiday Info for State and Higher Education employees only: On May 4, we will send the premium holiday letter about June coverage to state employees enrolled in state health insurance by email. We will also send the letter to higher education leadership to distribute. Here is more information about the premium holiday:

What?

- Earlier this year Benefits Administration (BA) recommended and the State Insurance Committee voted to give all active state and higher education employees a premium holiday for June 2020 coverage.
- This means there will be no deduction for the health insurance premium this May.

- The premium holiday is for the health insurance (BCBST & Cigna) premiums only and will not include voluntary benefits. Premiums for dental, vision, voluntary life and disability will still be collected in June.
- The premium holiday is for active employees and COBRA participants only and does not impact retiree premiums.

Why?

- For the past several years, insurance claims in the state plan have been lower than expected.
- Since we are self-insured, a premium holiday allows us to give back to our employees some of the surplus money on a one-time basis while maintaining sufficient reserves needed to operate the state health insurance plan.

When?

No premiums for health insurance will be deducted from:

- o 5/31 paycheck for state employees;
- A May paycheck for higher education employees (depending on payroll);
- May direct-bill invoices for state and higher ed employees; and
- \circ 6/15 draft sent by BA to higher education administration.

Additional Information for ABCs:

- Departments will not pay the 80% portion for the June insurance premium. Agency budgets will be adjusted to reflect these non-recurring savings in FY 2020.
- There is no stipulation that employees have to work a specific amount of time to be eligible. If they are enrolled in coverage, they will not be charged premiums regardless of when their coverage began.
- All employees will still show on the premiums due report, with a \$0 premium due for medical (for Higher Ed).
- $\circ~$ You may still see charges for medical coverage on the 6/15 draft for any retroactive changes (for Higher Ed).

Operations

- LOA Insurance Coverage Related to COVID-19 Leave: We have sent this information to you by email (April 1 and 3) but as a reminder, if you find that during this uncertain period you may need to put any of your employees enrolled in the State Group Insurance Program on a leave of absence (LOA), please submit a Zendesk ticket or call the BA Service Center as soon as possible. We will work with you on what you need to know about how these changes will impact insurance coverage for your employees.
 - Contact us by submitting a Zendesk ticket with "COVID-19 leave question" in the subject line or call us at 800.253.9981 or 615.741.3590, Monday Friday, 8 a.m. 4:30 p.m. CT.
- **Higher Ed/ Local Ed/Local Gov: Security Audit Schedule:** We are almost complete with the local education security audit, and we are moving forward with the higher education security audit. The local government security audit is scheduled for May.
 - This audit is an annual requirement.
- Edison System Upgrade: On April 20, the Edison system will be upgraded. This will require an outage of the entire Edison system from Friday, April 17 at 5:00 p.m. CT, through Monday, April 20 at 7:00 a.m. CT. General users will be locked out of Edison beginning on Friday, April 17 at 5:00 p.m. CT.

Why does Edison need to upgrade?

Similar to how Microsoft periodically upgrades Word and Excel, the Edison software needs to be upgraded as well. Upgrades of this nature are critical to keeping the state current with advancing technology. In addition, to maintain our support with our vendor we must stay current or risk losing support. This support is critical as issues arise that require us to reach out to our vendor for help.

Where can I find information about the upgrade?

Upgrade alerts will be posted in the 'Edison News Alerts' section of the Edison Portal. These alerts will help to familiarize you with more specific changes once the upgrade occurs. All prior alerts can be viewed by clicking the link 'News and Events' at the bottom of that section.

We don't expect any impact to the Benefits pages as a result of the upgrade.

• Service Center Metrics/Customer Service Rating:

• March 2020:

- Tickets via Email: 795
- Tickets via Self-Service: 2,952
- Tickets via Phone: 4,229
- Tickets via Chat: 281
- Total: 8,257
- Satisfaction Score: 95.5%

• March 2019:

- Tickets via Email: 912
- Tickets via Self-Service: 3,936
- Tickets via Phone: 4,807
- Tickets via Chat: 192
- Total: 9,847
- Satisfaction Score: 96.5%
- We received about a 1,000 less self-service tickets this year as compared to last March.
- As you know, we take the satisfaction of our customers very seriously. Please complete the survey after your Zendesk ticket is resolved.
- If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy. Our satisfaction rate for March was 95.5%.

• New ABC Training:

- o April 22: Local Education: 9-11 a.m. CT
- April 22: State/Higher Education: 1-3 p.m. CT
- April 23: Local Government: 9-11 a.m. CT
- April 23: Session 2 All Entities 1-3 p.m. CT

Here is how to sign up for training:

1. Log in to Edison.

2. Navigate to ELM Menu >ELM>Employee Self Service>Learning>Search Catalog>Enter ABC in the "Search the Catalog" field>Click the "Search Activities" button.

- 3. Locate the training you are interested in.
- 4. Locate the specific dates you would like to attend the webinar.
- 5. Click Enroll to the right of the training session you wish to participate in.
- 6. Click Submit Enrollment in the bottom lower left corner.

7. Once you have enrolled, you will see the following message under your name at the top of the page.

• You have successfully enrolled in ABC Training Webinar/Workshop. This change in status will be updated on the All Learning page.

OPERATIONS QUESTIONS

- **Higher Ed:** The UT HR offices are asking about EAP utilization. Do we have any statistics on that?
 - Answer: Optum created a weekly dashboard so that we could monitor utilization and trends during the pandemic. Overall call volume is down, however, COVID calls are increasing from 0.4% of calls the week of 3/15 to 5.1% of calls the week of 4/5. The top presenting issue for EAP continues to be anxiety, however, overall EAP authorizations are down. Behavioral health virtual visits are trending up, with a huge spike the week of 3/23. Virtual EAP is also up.
- Higher Ed: Do you have any information on annual enrollment (vendors)?
 - Answer: Our pharmacy benefits manager will continue to be CVS/caremark. We will have an announcement about our HSA/FSA vendor and our two dental carriers after the May 21st meeting of the Insurance Committees. Our medical carrier contracts will be re-bid next year for a Jan. 1, 2022 start date. The Annual Enrollment dates for higher education employees will start Oct. 1 and run through Oct. 16, giving your employees the two weekends that you asked for.
- **Local Ed:** What if employees (Educational Assistants) are asking to cancel their insurance because they can't afford it because they are not working due to schools being closed?
 - Answer: This is a good example of what we would like for you to submit in a Zendesk ticket as there are a lot of variables, including if employees are not working at all or if they are working reduced hours. We ask that you send in a Zendesk ticket with COVID-19 so we are able to figure out what is best for these employees.
- **Local Ed:** Why does the Continuing Insurance at Retirement form not ask for an Edison ID but it does ask for it when completing the Zendesk ticket when uploading the form? It would be helpful to have it on the form if we have to enter it in Zendesk.
 - Answer: We ask for the Social Security number (SSN) because not all retirees know their Edison ID number. We looked at removing the Edison ID in the system, and the Edison ID is a field on the ticket, but it is not required. You only need to input the SSN when submitting the ticket, but if you have the Edison ID available it is helpful to us to have it when you submit the ticket as well.
- Local Ed: Will there be premium increases for 2021?
 - Answer: Yes, there will be an increase, and we will signal this preliminary information to you as soon as we can. Our actuaries want to have the latest claims

information to make their final recommendation to the Insurance Committees at their May 21 meeting.

- **Local Ed:** I've had a few employees who have tried to send me enrollment documents from home and they are having issues, which has caused some delays. Are there any grace periods with the 31 day window for the newly eligible?
 - **Answer:** We recognize you may run into issues. Please send each employee's enrollment in as soon as possible with a note with the individual circumstances why the submission was delayed.
- Local Ed: Any early news on 2021 health Insurance rates and the increase?
 - **Answer:** We do know not yet as our actuaries are still gathering information. We will know for sure after the Insurance Committee meeting in May. We may have an idea in late April, and as soon as we have any more information we will share it with you.
- Local Ed: Due to all this happening, are the June premiums still waived?
 - **Answer:** The premium holiday does not apply to local education. We are waiving premiums for the state and higher education but not for local education or local government.
- Local Ed: How would we get the June premiums waived for local education?
 - Answer: That is a decision made by the Insurance Committee, and it is based on several factors such as reserve funds available and claims experience for the plan. The local education plan does not have enough reserves to give employees a premium holiday, which is good, as this means that employees are paying the right amount for their coverage. If you think you will have issues with paying premiums due to the ongoing COVID-19 pandemic, please reach out to our office by submitting a Zendesk ticket with COVID-19 Billing Questions in the subject and we will reach out to you.
- Local Ed: When is HIPAA training due for Local Education?
 - **Answer:** The 2020 HIPAA training is available in Edison for all **new** ABCs. All ABCs who are new to their positions and have access to Edison must take the training within the first 30 days of assuming their new role.
 - For all other ABCs, **the annual HIPAA training for 2020 has been waived due to pandemic.** You will not have to take the online training this year. Regular annual training will resume in 2021.
- **Local Ed:** On the last call we talked about Cigna's Surgical Treatment and Support Program and the new bundled care. More information was to be sent out prior to 04/01 and an FAQ sheet was to be emailed. Did I miss this information?
 - **Answer:** We decided not to share this information right now since all elective surgeries are currently on hold. Cigna will be adding some information to the member splash page so you can look for it there. More information will be sent to you and to members when elective surgeries resume.
- **Local Ed:** Who do I need to reach out to about Security Audit questions as I have had trouble getting in contact with someone with a call to BA?
 - Answer: Please send a Zendesk ticket with Security Audit in the subject line.
- State: When will the notification for May 30 (premium holiday letter) go out?

- **Answer:** The information has been shared with ABCs twice, and a letter from the Commissioner will go out by email on May 4 to plan members.
- State: Do our fiscal director's know about the 80% premium charge in May?
 - Answer: The fiscal directors are not notified directly. F&A Budget has taken this savings into consideration and will be adjusting the agency budgets to account for not spending the one-month premium for the premium holiday. This means it is essentially budget neutral for the agencies. You can let them know if you would like to do so.
- **State:** Will the notification (premium holiday) sent to employees be in the physical mail or via email?
 - Answer: It will be an email, through the state government Outlook. Everyone who has an email through the state distribution sent through
 <u>TennesseeStateEmployees@tn.gov</u> will receive the email. We will send all ABCs a copy of the letter in advance which you can share with any plan members who don't use the state email system.
- State: Will the holiday premium include employees who are on terminal leave?
 - **Answer:** Yes, if the state employee is still covered on insurance, it will apply to him/her.
- State: Does that include retirees for the premium holiday?
 - Answer: No, their premiums are handled differently. The premium holiday just includes active state and higher education employees and COBRA participants.
- **State:** About the LOA notification, is this for anyone who is in a leave without pay status or does it have to be related to the COVID-19?
 - **Answer:** Anyone who is on a LOA other than for COVID-19 can use the regular process. We just want to speak with you if you have to put someone on a temporary leave due to COVID-19.
- Local Gov: Any word on 2020-2021 rates?
 - **Answer:** We do know not yet as our actuaries are still gathering information. We will know for sure after the Insurance Committee meeting in May. We may have an idea in late April, and as soon as we have any more information we will share it with you.
- **Local Gov:** Will there be any leniency given to employees who may have missed their enrollment period due to the tornado and COVID-19?
 - **Answer:** We recommend that you have employees fill out an application and send a letter explaining the extenuating circumstances, and we will review.
- Local Gov: Any information on new dental providers?
 - **Answer:** We will likely know when the Insurance Committee meets in May and the results of the request for proposal (RFP) for our dental providers is announced.

Combined ABC Conference Call Notes Higher Education, Local Education, State and Local Government May 12, 2020

Materials and Communications

- Annual Enrollment Dates: Here are the annual enrollment dates for 2021 benefits:
 - State and higher education Oct. 1-16, 2020
 - Local education, local government and retirees Oct. 1-30, 2020

The dates have been posted on the ParTNers website under <u>About Enrollment</u>.

- **Coronavirus Benefit Information from Partners for Health Document:** We have continued to update the COVID-19 benefits and resources document, found by clicking the yellow band at the top of <u>ParTNers homepage</u>. The most recent version is dated May 12, and it includes information on dental and disability benefits and the dental premium discounts.
- Higher Ed/Local Ed/Local Gov: Optum Virtual Resources and WorkLife On-Demand Video: We recorded a recent webinar presented by Optum on Virtual Resources and WorkLife Services. You can find it at the bottom of our <u>ParTNers Video page</u> and on the ParTNers YouTube page. It's available for all those eligible for EAP and behavioral health benefits to watch on-demand. Find the video here: <u>https://www.youtube.com/watch?v=iduM78Fjv3A</u>.
- **State:** #4Mind4Body Lunch and Learn On-Demand Video: We recorded the recent April 22 #4Mind4Body webinar presented by Optum on Virtual Resources and WorkLife Services. You can find it at the bottom of our <u>ParTNers Video page</u> and on the ParTNers YouTube page for you and members to watch at your convenience. Find the video here: <u>https://www.youtube.com/watch?v=iduM78Fjv3A</u>
- Dental Discounts for MetLife and Cigna Members: In response to COVID-19, Cigna and MetLife will give a dental premium discount to enrolled members. MetLife will give a 25% discount for April and May coverage, and Cigna will give a 25% discount for March, April and May coverage. Discounts will impact May paychecks and direct bills for June 2020 coverage. Yesterday, we sent emails to enrolled members for whom we had email addresses in Edison. Member emails included a letter and a flier with a chart showing members' discounts. Cigna and MetLife will also mail letters to enrolled retirees.
 - We sent the letters and fliers to ABCs last Friday, and they are posted on our PFH website on the dental page.
 - o A message from Cigna about the 2020 premium discount
 - o Cigna 2020 premium discount savings by plan
 - o A message from MetLife about the 2020 premium discount
 - MetLife 2020 premium discount savings by plan

HIPAA Training

- **HIPAA Updates and Resources:** Chanda Rainey, our BA privacy and HIPAA compliance officer, is here to go over reminders and resources available to you.
 - **HIPAA Training Suspended in 2020 for Current ABCs:** Due to the current national health crisis, Benefits Administration has decided to suspend the annual 2020 HIPAA training for **current ABCs**. The annual HIPAA training will resume in 2021 during our regular training schedule.
 - All new ABCs are still required to take the HIPAA training within first 30 days of employment. This requirement has not been waived. While we are all dealing with the uncertainties of the COVID-19 pandemic; we are still focused and

committed to protecting our members' privacy and maintaining the security of their protected health information.

- If you have any related HIPAA questions or concerns, please contact the HIPAA Compliance Officer at <u>Chanda.Rainey@tn.gov</u>.
- HIPAA Compliance and the COVID-19 Coronavirus Pandemic: There is understandably concern about HIPAA compliance and the COVID-19 Coronavirus pandemic and how the HIPAA Privacy Rule and Security Rule apply.
 - It is important to remember that during a public health emergency such as a disease outbreak like COVID-19, the HIPAA Privacy and Security Rules still apply. The HIPAA Security Rule ensures the security of patients' protected health information (PHI) and requires reasonable safeguards to be implemented to protect PHI against impermissible uses and disclosures. The HIPAA Privacy Rule restricts the uses and disclosures of PHI to those related to treatment, payment, and healthcare operations.
 - Benefits Administration's YouTube channel has a video for HIPAA compliance. Take a few minutes to refresh your HIPAA knowledge and skills. There is no quiz involved.

Click on the link to watch: <u>https://youtu.be/D5pS3Q2VD18</u>

- There is a HIPAA reference guide on the ABC information page. The link is <u>https://www.tn.gov/content/dam/tn/finance/fa-</u> benefits/documents/abc_hipaa_reference_guide.pdf
- Working Remotely Safeguards: Many of us are working remotely to continue to support our insurance members' needs. Benefits Administration is dedicated to safeguarding and maintain the confidentiality, integrity, and availability of our member, employee, and proprietary information (collectively "Confidential Information") regardless of whether the information is written, electronic, or verbal while working remotely. Here are best practices:
 - Have a secured private designated workspace
 - Use JVPN every time you access state networks
 - Update virus/malware protection software as required
 - Use lockable file cabinet to secure documents while unattended
 - No Benefits Administration documents should be placed in the trash without being properly shredded
 - All laptops will be properly secured while transporting to and from remote work location
- If you have questions, please contact Chanda Rainey, BA's privacy officer at 615-741-3590.

Benefits

• **Cigna Available to Answer Questions:** Sharon Bowling Tansil with Cigna joined us to answer questions about the recent Cigna HCA/St. Thomas announcement and gave an update about the Surgical and Treatment Support Program (STSP).

You can find updated provider lists, Cigna HCA member letters and Cigna HCA FAQs on our Partners website, Carrier Information page here:

https://www.tn.gov/partnersforhealth/health-options/carrier-network.html

• Lists show hospital changes as well as provider groups terminating and provider groups joining the Cigna LocalPlus network.

Operations

- **ABC Summer Meetings:** We will not have in-person meetings this year but rather a series of webinars in August. We will send you more specific information about times and dates as we finalize the schedule.
- **Local Gov: Security Audit Schedule:** The annual security audit will be sent Thursday, May 14th. The deadline will be June 12th.

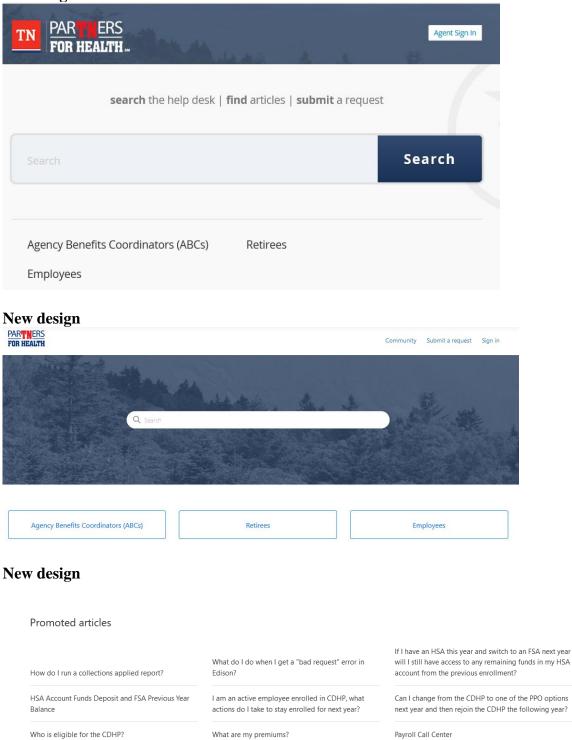
Service Center Metrics/Customer Service Rating

- April 2020:
 - Tickets via Email: 897
 - Tickets via Self-Service: 2,967
 - Tickets via Phone: 3,590
 - Tickets via Chat: 148
 - Total: 7,602
 - Satisfaction Score: 98%
- April 2019:
 - Tickets via Email: 849
 - Tickets via Self-Service: 3,757
 - Tickets via Phone: 4,564
 - Tickets via Chat: 223
 - Total: 9,393
 - Satisfaction Score: 99%
- We received almost 1,800 less tickets this year as compared to last April.
- As you know, we take the satisfaction of our customers very seriously. Please complete the survey after your Zendesk ticket is resolved.
- If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy.
- Our satisfaction rate for April was 98%.

• Zendesk Help Center Updates:

- On Friday, May 15th, the look and feel of the Help Center will be updated.
- New design makes Category pages and Promoted Articles more prominent.
- Sign-In link updated to make it more obvious that end users can sign into an account and see their ticket history.
- New "Recent Activity" section to see newest articles.

Old design



New design

Recent activity

General Questions Where can I find information about COVID-19 (coronavirus)

Article created 2 months ago 🎵 0

• Higher Ed/Local Ed/Local Gov: Reminder about Retiree Records

- 1. Retiree records can be identified by their department ID. They will also have a business unit that has an R.
- 2. The Agency is not authorized to alter a retiree record.
- 3. Any changes or terminations for retiree enrollments must go through the Service Center.
- 4. If you alter a retirement record by accident please submit a Zendesk ticket as soon as possible so the record can be reviewed and updated as necessary.

• New ABC Training

- May 20: Local Education: 9-11 a.m. CT
- May 20: State/Higher Education: 1-3. p.m. CT
- May 21: Local Government: 9-11 a.m. CT
- May 21: Session 2 All Entities 1-3 p.m. CT

Here is how to sign up for training:

1. Log in to Edison.

2. Navigate to ELM Menu >ELM>Employee Self Service>Learning>Search Catalog>Enter ABC in the "Search the Catalog" field>Click the "Search Activities" button.

- 3. Locate the training you are interested in.
- 4. Locate the specific dates you would like to attend the webinar.
- 5. Click Enroll to the right of the training session you wish to participate in.
- 6. Click Submit Enrollment in the bottom lower left corner.

7. Once you have enrolled, you will see the following message under your name at the top of the page.

You have successfully enrolled in ABC Training Webinar/Workshop. This change in status will be updated on the All Learning page.

OPERATIONS QUESTIONS

- **Higher Ed:** About the Cigna HCA change, an employee was on hold with Cigna for elective surgery and will now have to switch surgeons. Who can they contact with issues?
 - Answer: Members can contact Cigna with any feedback and questions. Cigna can also help members find new providers. There are certain situations where Continuity of Care could come into consideration. If members are in a situation where switching could be detrimental to their care, they can fill out the <u>Continuity of Care form</u>, and a decision can be made about continuing care with their current HCA provider for a specified period of time. Members can call the Cigna State of Tennessee specific number at 800.997.1617 for help. The Continuity of Care form, member letters and provider lists are all found on the <u>ParTNers for Health website</u>, <u>under Carrier Information</u>.
- Higher Ed: Any updates as to whether we will have benefits fairs this year?
 - **Answer:** We don't have any updates at this time. If you are planning one, go ahead and notify the vendors as you usually do. We don't know if we will have them at this point or not. Here is the <u>vendor contact list</u> for benefits fairs.
- **Higher Ed:** Does Cigna offer anything like eM Life that BlueCross BlueShield offers? eM Life offers interactive mindfulness programs for the new normal including social distancing, financial stress, mindful parenting; it's free for 90 days.

- Answer: Cigna does have some behavioral health resources for Cigna and non-Cigna members, but Optum, our EAP and behavioral health vendor, has great resources for eligible employees and members. You can go to the <u>HERE4TN.com</u> homepage and find information about <u>Sanvello</u>, a mobile app to help with anxiety, depression and stress. There is also information about <u>Talkspace</u> for those enrolled in behavioral health benefits where you can connect with a dedicated therapist anytime from anywhere, as well as <u>virtual visits for EAP and behavioral health</u>. All the virtual resources are on the <u>HERE4TN.com homepage</u>. There are also fliers about the resources available on the <u>ABC webpage under Optum in the Marketing eToolkit</u>.
- **Higher Ed:** If we have an employee who termed in April or May, are they eligible for the dental premium discount? Will we need to refund partial premium to this member?
 - Answer: Yes, anyone who was enrolled for each of those months would have been eligible and will be included on the collections applied report.
- **Higher Ed**: This question is about Quest Diagnostics and onsite screenings in June; are the screenings in June canceled, and if they are, do the employees know this and has the state sent anything to them? How do employees know if it is canceled?
 - Answer: ActiveHealth, our wellness vendor, will be sending information to members about onsite screenings, and they have been sending reminders about what members can do. They have not canceled the June screenings yet. They did cancel the April and May screenings. It depends on the facility, but members will receive an email letting them know if the screening is canceled.
- **Higher Ed**: Is there a list of cancelled centers?
 - **Answer:** Any screenings scheduled for April and May were canceled or rescheduled for the fall. ActiveHealth will contact all of the June sites and work with them, but it is up to the facility if they are going to hold the screening event.
- **Higher Ed**: I wanted to confirm that employees who are enrolled in a Cigna or MetLife dental plan will be eligible for the discount as of the actual date of eligibility and not the payroll deduction month?
 - **Answer:** It doesn't matter when you made the payroll deduction, it depends on if the employee had coverage the month the premium discount is offered. So MetLife will give a 25% discount for April and May coverage, and Cigna will give a 25% discount for March, April and May coverage.
- Higher Ed: If an employee transferred, who pays the discount?
 - **Answer:** In this case, the discount will show up on the new employer. If you have a specific employee that we need to review, we will look at it to determine what needs to happen in this situation.
- **Higher Ed:** I have several employees who had tier plan changes effective as of February and then changed again as of April. What is the dental premium discount in this situation?
 - **Answer:** We will be looking at what they were enrolled in for that particular month and making manual changes. You will see the updated information on the collections applied report in early June.

- **Higher Ed:** I missed the first part of the meeting. Will there be a recording or transcript available for me to go back and review? Can someone please send me a link to the meeting when it's available in the archive?
 - Answer: We do not record the ABC webinar, but all of the information presented will be in the call notes we send out on Friday., We also post the notes on the <u>ABC</u> webpage under Conference Call Notes.
- **Local Ed:** Will the (dental premium) discount show on the June billing as a separate line item, or will the credit be deducted from the employee's June amount on the billing?
 - **Answer:** The premium discount will all show on one line. You will see a reduced June premium to reflect all the premium discounts on the collections applied report that will be available in early June.
- Local Ed: Will the discount for all months show on the June bill?
 - **Answer:** Yes, it will be revised for June. You will just see the revised amount that shows all those refunds on one line.
- Local Ed: Did I understand that the dental refunds will all be reflected on June bill?
 Answer: That is correct.
- **Local Ed:** The May collection report for pays for June, so the June collection report will show the discounts?
 - Answer: The May premium dues report already reflects the dental premium discount, but we do want to caution you, we are still researching members that changed coverage levels, changed plans or added or termed coverage so that information is not yet available on the premiums due report that you can run now. The final collections applied report with this information included will not be available until the beginning of June.
- **Local Ed:** If an employee has had surgery and is being impacted by the TriStar HCA termination, is the employee allowed to stay with that surgeon until they have been released?
 - Answer: If a member is in the middle of post-surgical care and still needs follow up care, the member can fill out a <u>Continuity of Care form</u>. It is highly likely that post-surgical care would be authorized, and they could continue care with that provider for a specified period of time. Members can find the form on the <u>ParTNers for</u> <u>Health website under Carrier information</u>, or they can log into <u>myCigna.com</u> or call 800.997.1617 for help.
- Local Ed: Have members been provided with the new changes yet?
 - Answer: Members received letters that included the network facility information and list of terming HCA providers effective 6/1/20. The online directories are updated as changes are effective and will be updated on 6/1/20. As soon as we have the updated PDF directory after 6/1/20, it will be posted to the Cigna microsite and ParTNers for Health Carrier Information page.
- **Local Ed:** Is the State considering allowing members to change to the Open Access Plus (OAP) network outside of open enrollment due to this announcement?
 - **Answer:** No, the state is not looking at allowing plan changes related to this network change because IRS regulations do not allow it. Members can request a Continuity of Care exception by completing the form found on the ParTNers for

Health website. HCA leaving the LocalPlus network is not appealable. The BA review team (BART) does not have the authority to review these appeals.

- Local Ed: Can you remind me how much the dental discount is and is it for one month?
 - Answer: MetLife will give a 25% discount for April and May coverage, and Cigna will give a 25% discount for March, April and May coverage. We are applying the entire discount to the June premium.
- Local Ed: Do you have any information on insurance premium increases for 2021?
 - **Answer:** We won't know the 2021 premium information until the end of May when the Insurance Committee meets. For local education, it won't be more than 5%, and it could be less.
- Local Ed: We can update retiree addresses correct?
 - Answer: Any and all changes to a retiree's insurance record should go through the retirement unit at the BA Service Center.
- **Local Ed:** To clarify, a 5% or less increase is likely for 2021 health premiums, but pending approval by the Insurance Committee in May?
 - Answer: Correct. It won't be more than 5%, and it might be less. The forecast is based on claims and this year there are many variables. For local education, we won't know for sure until the Insurance Committee meets at the end of May. We will let you know sometime after that meeting.
- **Local Ed:** Our school system does not participate in dental and vision. What about when they retire, are they eligible for dental and vision? We do participate in retiree health insurance.
 - **Answer:** To be eligible for retire dental and vision, retirees must be receiving a TCRS monthly pension. If receiving a TCRS monthly pension, they are eligible for the state dental coverage. For vision coverage, to be eligible the retiree must be receiving a monthly TCRS pension check, and he/she must also be enrolled on the group health plan, then they are eligible for retiree vision. Information on the eligibility for retiree dental and retiree vision is accessible in the Local Education Guide To Continuing Insurance at Retirement at https://www.tn.gov/partnersforhealth/continuing-insurance-at-retirement.html.
- **Local Ed:** Will the Edison issue with new hire emails that are sent automatically likely be fixed by June? During the summer, we hire 100 new employees and it would be helpful if that is working properly.
 - **Answer:** Edison is still working on this issue, and we do not know when it will be resolved. We hope it will be resolved by June, but we don't know yet.
- **Local Ed:** Can a retiree carry the state health insurance if they do not receive a pension check?
 - **Answer:** The plan document does allow for non-TCRS employees who are not allowed to participate in TCRS to be eligible if they meet certain criteria. There is information in the <u>Continuing Insurance at Retirement guide</u>. If you have question about a specific employee, we can look at that employee's record to determine his/her eligibility.
- Local Ed: Any new carriers plan changes for 2021?

- Answer: Our health carriers, BCBS and Cigna, will remain. We don't know about any additional plan changes at this time and won't know until after the Insurance Committee meeting on May 21.
- **State:** I have a lot of employees that are very upset about HCA leaving Cigna LP. Does it look promising that HCA could stay in the Cigna OAP? I know the deadline is August 1, 2020, and employees are asking if they could switch to the OAP in order to keep their HCA providers before open enrollment.
 - Answer: Cigna is very hopeful that they will come to a long-term agreement with HCA for OAP. As far as switching to OAP, no, employees are not able to switch before the annual enrollment period for the next plan year, as there are not provisions in the plan document to allow for this change.
 - We have posted all of the provider lists and member communications on the ParTNers for Health site found by clicking the red button on the homepage – Cigna LocalPlus Network Change - which takes members to information on the Carrier Information page. Also, Cigna customer service representatives are available 24/7 at 800.997.1617 and can help employees find new providers. A <u>Continuity of Care</u> form can also be filled out for consideration.
- **State:** If your local hospital is an HCA (facility) and the next nearest hospital is more than 45 miles, would this be considered a special qualifying event (SQE) which would allow a change from Cigna to BCBS?
- Additional question: Can employees switch to BCBS?
 - Answer: No, the location of the nearest hospital being more than 45 miles away is not an SQE and therefore, it does not allow a change to another Cigna network or to BCBS. The SQE section of the plan document 2.08 talks about SQEs. For emergency care, members can always seek care at the nearest facility and it would be considered in-network.
- State: Am I remembering correctly that HCA is not in network for BCBS?
 - Answer: Correct. HCA facilities are not in the BlueCross BlueShield network. Also, we wanted to let you know HCA leaving is not an appealable event and is not referable to the BA review team (BART). In other words, BART does not have authority to allow a network change.
- **State:** One answer that I cannot seem to get a clear answer on is if an employee chooses to stay with their doctors for the remainder of this year, what is the maximum allowable amount for out-of-network doctor visits? The letter mailed to affected employees stated that the employee may be balance billed for any amount billed over the MAC for out-of-network care.
 - Answer: If a Continuity of Care agreement is signed by a HCA provider and approved by Cigna, that care is at the in-network level, and HCA providers should not balance bill the member. If the member gets out-of-network care outside of a Continuity of Care agreement, this question would apply, and members would be responsible for the maximum allowable charge (MAC) if the provider chooses to balance bill the member. The maximum allowable charge is the amount paid by Cigna to the provider what is important is whatever the provider is billing the patient. For example, if the provider bills \$100 and Cigna only pays \$50,the member pays the other \$50. The maximum allowable charge is typically a percent of the Medicare reimbursement rate for the provider based on their area. It is complicated and the member would have to know what the Medicare reimbursement rate is for his/her area, by the CPT code, then it depends on what CPT codes your provider is

billing for to calculate the MAC. Basically, whatever the total amount the provider is billing, that could be what the member may have to pay. If the member is not okay paying that amount, then the member may need to find in-network care.

- **State:** After talking to a customer representative at Cigna about Continuity of Care, the exception would for an additional three months, but Cigna would review because of COVID-19 for an additional 6 months?
 - Answer: Continuity of Care depends on each individual and what he/she needs for their care to determine the length of Continuity of Care. If the customer service rep told you a particular case would be approved for six months, that could be right. A Continuity of Care exception will be reviewed for each case, for each member's need, and approved for the length of time needed to transition care. Typically, it is a 90-day period; sometimes less sometimes more. Each member should fill out a Continuity of Care form based on their medical necessity.
- **State:** Should an agreement for OAP not be reached is there anything that could be done? Since OAP is so much more of a cost, are there talks for a different plan at a lower cost? Everyone is concerned that this happened to employees before annual enrollment, and were not told this before annual enrollment but midstream and they are stuck now. What assurances are there now that this won't happen again. Are the contracts biannually, yearly?
 - Answer: BA contracts with Cigna and BCBS for their commercial networks BCBS network S, Cigna LP and Cigna OAP. BA won't go out for bid for those contracts until plan year 2022. We will have the same three networks again for annual enrollment (AE) this fall for the next plan year. BA doesn't control the hospitals or providers in the networks as they are negotiated by Cigna and BCBS. BA can never make the assurance to members that they will always have access to their preferred providers or facilities. The network providers in the Cigna and BCBS networks come up for renewal throughout the year. We do try to communicate during AE that the networks can change at any time during a plan year. We cannot guarantee that the networks won't change at any time. For 2021, premiums and surcharges will be determined at the May Insurance Committee meeting.
- **Local Gov:** Do we anticipate any premium discounts from other carriers, such as vision or health?
 - Answer: Davis Vision will not be offering a discount as most members will wait until later in the year for eye exams and glasses. We don't anticipate any discounts for medical.
- **Local Gov:** My agency plans to give the premium discount amount back on the last check in May. Will the discount be visible on the June bill?
 - Answer: The discount is already visible on the premiums due report for June coverage. If you run the report, it will be on it now but some members who have changed carriers or coverage will have to be corrected. We are looking at these on an individual basis and will have to make these changes manually. It won't be finalized until you are able to run the collections applied report at the beginning of June.
- Local Gov: Does the premium discount effect June 2020 coverage only?
 - **Answer:** We are applying the discount to June 2020 coverage to make up for the retroactive discounts for coverage the vendors are giving. MetLife will give a 25%

discount for April and May coverage, and Cigna will give a 25% discount for March, April and May coverage.

- **Local Gov:** Is there a report I can run in Edison that will only show which employees have dental and which package?
 - Answer: There is a query that will show this, the TN_BA219_MED_DEN_COVERAGE query. Enter the coverage begin date you are looking for, and it will give you everyone enrolled in medical, dental and vision coverage. You can sort or filter it to get the information you need.
- **Local Gov:** How does HIPAA work with the COVID tracing that states are trying to implement?
 - Answer: HIPAA does provide safeguards concerning the release of protected health information (PHI) but when there is a national public health emergency determined by Health and Human Services (HHS), information may be released to notify a public health authority in order to prevent or control spread of disease without patient authorization. We have attached a February 2020 bulletin on HIPAA Privacy and Novel Coronavirus that explains what information may be shared during this emergency situation.
- **Local Gov:** Will there be a list of these facilities in the notes on Friday?
 - Answer: The information is available on the <u>ParTNers for Health website</u>, on the <u>Carrier Information page</u>. On the website you'll find:
 - a list of Cigna LocalPlus participating network hospitals,
 - <u>list of HCA Physician Groups terming</u>,
 - spreadsheet of HCA Physicians/Group Practices terming,
 - list of St. Thomas Medical Partners joining LocalPlus,
 - copies of the letters sent to <u>Middle TN members</u> and <u>East TN members</u>,
 - Cigna HCA FAQs,
 - and the <u>Cigna Continuity of Care document</u>.
- Local Gov: What about Skyline Medical?
 - Answer: TriStar Skyline Medical Center is a HCA TriStar facility in Nashville and is listed in the Middle TN letter as out-of-network as of June 1, 2020.
- **Local Gov:** Regarding the Summit mentioned regarding the Cigna change, is that a hospital? The Knoxville area has a physician group called Summit Medical Group that is NOT a hospital.
 - Answer: The Summit facility mentioned is TriStar Summit Medical Center in the Donelson/Hermitage area. This is a hospital and is not the same as the Summit Medical Group in Knoxville.
- Local Gov: Will providers be attending open enrollment activities in October?
 - **Answer:** We don't know at this time. If you are planning benefits fairs, please contact vendors and give them your dates. As we get closer to the dates, we will know more about travel restrictions. But you can contact them now so they will have it on their schedule. Here is the <u>Vendor Contact list</u>.
- Local Gov: When will the Insurance Committee vote on premiums rates?
 - **Answer:** It could be May or it could be at the June meetings. Our actuaries are waiting until the last minute so they can review the most recent claims, project how

COVID-19 will impact premiums, and make as accurate a recommendation as possible.

- **Local Gov:** When is the security audit due date?
 - Answer: It will be due June 12. We ask that you please respond as quickly as you are able to. If everything is okay, then you just need to respond back to the email saying so. If not okay, then you may have to submit forms to get everything updated.
- **Local Gov:** To confirm, with the dental discounts, we need to refund the 25% discount back to our employees for March and April, correct?
 - Answer: Correct. Unless you pay the premium, then yes. MetLife will give a 25% discount for April and May coverage, and Cigna will give a 25% discount for March, April and May coverage. You will need to refund the premium back to the employees for the plans they were enrolled in. You may consider providing the refund by reducing the amount collected for June coverage by the amount of the total discount.
- **Local Gov:** I don't recall signing in to Zendesk before. Is that our regular sign in for Edison or will we create a login?
 - Answer: It is a separate login from Edison. If you have received emails from us, you have received a Zendesk ticket or if you have emailed us at <u>benefits.administration@tn.gov</u> or <u>benefits.info@tn.gov</u> you have created a Zendesk ticket. You can create an account or you can call the service center and we can walk you through setting up your login and account.
- Local Gov: If we pay a portion of the dental, are we required to prorate the refund?
 - **Answer:** Yes, it will be up to your agency to calculate the amount of the refund depending on the amount that you prorate the premium.
- **Local Gov:** We have a time and attendance system that is offering free telehealth to our staff. Is this okay to send out to our staff ?
 - **Answer:** Please submit a Zendesk ticket with your telehealth question so that we can take a closer look at what is being offered.
- Local Gov: The report shows deductions?
 - **Answer:** Yes, the premiums due report in Edison shows deductions starting today. This report will be confirmed and turned into the collections applied report in early June and will be the final deductions from your agency.
 - Follow up question: My report is set up to come to my email. How do I do this? Answer: The instructions are on the <u>ABC webpage</u>, under the <u>Training section</u>. There are instructions for past collections applied reports and the instructions will help you run a new one.
- Local Gov: Is it okay to sign up for new ABC Training as a refresher course?
 - **Answer:** Absolutely! You can take the training any time you want.
- **Local Gov:** Is there a particular code for the dental premium discount that we will be getting for the dental when we go to put this in?
 - **Answer:** It will be the benefits plan names and it will be the same, you will just see a revised amount.

- **Local Gov:** Just to clarify, are we required to refund dental premiums? (We pay a portion).
 - Answer: We can't speak for what you do with the premium discounts, but we do recommend that if you are considering not passing them on, you discuss this with your legal advisor as it might affect your eligibility in a Section 125 Cafeteria plan if you do not pass it along.

Combined Call Notes – Limited Opportunity for Members to Change to Cigna OAP Higher Education, Local Education, State and Local Government June 2, 2020

Materials and Communications

• Limited Opportunity for Cigna Local Plus Members to Change to Cigna OAP network: The IRS issued guidance and the Insurance Committees approved a special mid-year opportunity for certain plan members to enroll in the Cigna Open Access Plus (OAP) network from June 8-19, 2020.

This limited offer allows all members enrolled in a narrow network (Cigna LocalPlus and BlueCross BlueShield (BCBST) Network S) as of May 21, 2020, to change their coverage from the narrow network to the broad Cigna OAP Network **only if the member's current network has lost 5 or more participating hospitals between January 1, 2020 and June 1, 2020.**

This change is important because the HCA/TriStar providers left Cigna LocalPlus on June 1, so members of Cigna LocalPlus ARE eligible to change their enrollment to Cigna OAP. The BCBST Network S has not lost 5 or more participating hospitals over this time period, so members in BCBST Network S DO NOT MEET the eligibility requirements and cannot enroll in OAP in June.

The reason someone might want to change from LocalPlus to Cigna OAP is because HCA hospitals and providers are staying in the OAP network.

LocalPlus members who choose to enroll in Cigna OAP must pay the higher premium which includes a monthly surcharge:

- \$40 for employee only or employee+child(ren) coverage, or
- \$80 for employee+spouse and employee+spouse+child(ren) coverage.
- New OAP coverage would begin July 1, 2020.

Member Communications: We are required to notify all members in Cigna LocalPlus and BCBST Network S (our narrow networks) so they all were sent an email or a letter (if we don't have an email address) letting them know about this change in IRS guidance, but only Cigna LocalPlus members ARE ELIGIBLE to change their enrollment to Cigna OAP.

- Letters/emails include instructions on how to enroll and FAQs.
- Copies were sent to ABCs on Friday, May 29. Even though we have sent 137,000 emails and another 7,000 letters to members, we know they will respond better when they hear from you, so if you have not already, we would ask you to share the information as well.
- The operations team is reaching out to everyone who contacted the service center and was told they could not enroll mid-year in OAP to let them know that they now can.

All member communications and information are found on the ParTNers for Health website > Health Options > Carrier Information

• Find the special mid-year **OAP enrollment premium charts**, member letter, FAQs, Enrollment Change Application and enrollment instructions, OAP Provider Directory, and more on the **ParTNers for Health website**, **Carrier Information page**.

OAP total premium charts are on the website:

• <u>State and Higher Education active employees</u>

- State and Higher Education retirees
- State and Higher Education COBRA participants
- Local Education active employees
- Local Education teacher retirees
- <u>Local Education support staff retirees</u>
- Local Education COBRA participants
- <u>Local Government active employees</u>
- Local Government retirees
- Local Government COBRA participants

Local Education and Local Government premiums do not reflect any employers' contributions.

As a reminder, HCA/TriStar providers are out of Cigna LocalPlus but St. Thomas facilities and providers are now in the LocalPlus network.

Plan Documents have been updated to reflect the change that is being allowed. See Section 2.10 (D).

Operations

• **How to Enroll:** LocalPlus members who wish to and agree to pay the OAP surcharge can enroll in OAP between June 8-19, 2020, by completing an Enrollment Change Application. Coverage would be effective July 1, 2020.

We have posted the <u>Enrollment Change Application</u> and instructions on the **ParTNers for Health website >Health Options > Carrier Information**

Steps to fill out the form:

- In the **Type of Action** box, select **Change coverage**
- In the **Coverage** box, select **Health**
- Leave the **Participants Affected** box blank, as we will apply the coverage change to all enrolled family members
- In the Reason for this Action box, mark Other and write Network Change on the line
- Fill out the information in Part 2
- In Part 3, leave the **Option** box blank because you will remain enrolled in the plan (Premier PPO, Standard PPO, Limited PPO, CDHP/HSA or Local CDHP/HSA) you are currently enrolled in
- In the Select a Carrier box, select the Cigna Open Access
- Leave the **Region Where You Live or Work** box blank since you will remain enrolled in the same region you currently have
- Leave the **Health Premium Level** box blank because you will remain enrolled in the premium level you are currently enrolled in
- Leave Parts 4, 6, and 7 blank as no changes are permitted in those sections
- Check the box to Accept in Part 8, and fill in the requested information

To process the form:

Submit the form to your agency benefits coordinator, or you may leave the Agency Section blank and submit the enrollment form directly to Benefits Administration (BA). (BA will notify ABCs if we receive a form from a member.)

The quickest way to submit a request is through our BA Help Center: https://benefitssupport.tn.gov/hc/en-us.

• In the upper right corner, select **Submit a Request**

- In the My issue concerns a/an box, select the Document Uploads for Active Employees option
- Enter your email address
- In the Subject box, enter Network Change
- In the Description box, enter Network Change
- In the **Coverage Effective Date** box, enter 7/1/2020
- Enter your **Edison Employee ID** (the 8-digit number found on your Caremark card) if you know it
- Enter your Social Security Number in the SSN field
- In the Type of Document dropdown, select Enrollment Change Application
- Select your group in the **Entity** box
- Click the **Add file** link to attach your signed enrollment change application. ****You must attach your document for the change to be processed****
- Click the **Submit** button

Or, members can fax the form to 615-741-8196, or mail it with a postmark by June 19, 2020, to the address at the top of the form.

Communications Reminder

- **ABC Conference Calls next week:** The June monthly ABC conference calls will be held next week.
 - Higher Ed Tuesday, June 9 at 8:30 a.m. Central time
 - Local Ed Tuesday, June 9 at 10 a.m. Central time
 - Central State Tuesday, June 9 at 12:30 p.m. Central time
 - Local Government Tuesday, June 9 at 2 p.m. Central time

Agenda and information will be sent on Friday.

STATE AND HIGHER ED QUESTIONS

- Are HCA/Tristar providers only in middle Tennessee?
 - Answer: They are in middle Tennessee, and the Parkridge hospitals in the Chattanooga area.
- Are St. Thomas (providers) in the OAP network in addition to LocalPlus?
 - **Answer:** Yes, St. Thomas facilities and affiliated providers are in the Cigna OAP. OAP has all HCA providers and St. Thomas hospital system providers.
- This does not impact the western region, correct?
 - Answer: Correct.
- Just wanted to verify that if a LocalPlus member has been approved for a Continuity of Care exception under LocalPlus and this was approved through December 31, 2020, does that employee need to change to OAP or will the Continuity of Care still cover them?
 - **Answer:** If someone has been approved for Continuity of Care through 2020, it is up to the member if they want to continue and remain in LP or change to OAP. Members do not have to change to OAP in this instance, as their Continuity of Care will provide them in-network benefits with the approved provider(s) or hospital. It does not give the member in-network access to other HCA/TriStar providers or hospitals. For 2021, the individual will want to look at all enrollment options based upon their provider preferences.

• I thought the original Continuity of Care exception in the letter only said 90 days?

- Answer: What we have tried to express in the information we have shared and during ABC calls is that the 90 days is a general standard. Every individual situation is reviewed and approved based on medical necessity and Continuity of Care is based on the individual and their medical necessity.
- Are you certain this network of hospitals is staying in OAP past 8/1 but not sure beyond 12/31/20?
 - Answer: Yes, HCA providers will be in the OAP network for our members through 12/31/21.
- It is my understanding that the only HCA/TriStar hospital in the Chattanooga and surrounding area is Parkridge hospital. Since the eligibility criteria requires the loss of five hospitals, would Chattanooga State employees be eligible to transfer to an OAP plan? They would only have our Erlanger hospital in-network facilities after losing Parkridge. I just need clarification.
 - Answer: The 5-hospital rule is for the entire network, not within a certain radius for an individual. Even though the Parkridge hospital is only the facility within an individual's area, the LocalPlus member is eligible to make a change now because 5 hospitals have left the entire network. For clarification, there are three Parkridge hospitals in the Chattanooga area that are in the HCA/TriStar system; Parkridge East Hospital and Parkridge Medical Center in Chattanooga and Parkridge West Hospital in Jasper.
- If an employee has met their out-of-pocket max with Cigna LocalPlus for 2020, will they have to pay a higher deductible with OAP for 2020 year?
 - **Answer:** We will be working with Cigna to make sure that all accumulators are transferred to the OAP plan so they won't have to meet a new deducible and out-of-pocket maximum if they make a change. Also, there is no difference in the out-of-pocket maximum and deductible with the change in LocalPlus to OAP as the member will be staying in the same enrollment tier (employee, family, etc.) and health plan option (Premier or Standard PPOs or CDHP).
- Is it possible for the HCA providers to return to LocalPlus after August 1?
 - **Answer:** No, it is not possible for the HCA providers and facilities to return to LocalPlus. Cigna has a new relationship with St. Thomas facilities and associated providers. The LocalPlus network also includes the Vanderbilt facilities and providers.
- Do ABC's need to wait to submit enrollment change application until 06/08 or are we allowed to go ahead and upload via Zendesk as this time as the applications are received
 - Answer: You can go ahead and send the enrollments in now.
- How long before new ID cards are mailed out?
 - Answer: The standard is for new ID cards to be mailed within 10 days after the new eligibility file is loaded by Cigna.
- The FAQs mention hospitals and providers, what about labs?
 - **Answer:** The standard labs that Cigna uses, LabCorp, Quest, etc., are all in-network providers. If you are using a hospital-based lab, whether or not they are in-network will be based on the relationship with that hospital.
- Will the higher premium be added at the end of July payment?

- Answer: Yes, we will be billing at the end of June for July premiums, so you will see the changes on your July 15th ACH.
- I have received several forms already. Do I need to submit separate Zendesk tickets for each one?
 - Answer: Yes, we do need a separate Zendesk ticket for each enrollment form.
- If an employee sends an application directly to Benefits Administration (BA) will BA send it to the ABC to have the bottom part filled out or will BA process it without that information?
 - **Answer:** In this particular situation, we will process without the bottom filled out. This is a busy time, and we want to make sure the enrollment is keyed before it goes into effect. We will process the enrollment and send a response to the member and copy the primary ABC so you are aware as well.
- So what happens during the month of June for those with HCA providers? We pay at the end of the month, but coverage doesn't begin until 7/1? What does the 6/30 payment go towards?
 - **Answer:** We will finalize the bill for your agency at the end of June/beginning of July and that is for July coverage. They won't pay for OAP coverage until that new coverage begins. If they visit an OAP provider during June, that will be considered an out-of-network visit unless they are approved for Continuity of Care.
- Did you exclude from communications, members in the western region?
 - **Answer:** No, we did not. We were required to communicate this mid-year enrollment opportunity to all members in both the BlueCross BlueShield Network S and Cigna LocalPlus narrow networks.
- How do we secure a Continuity of Care for our existing providers in the event of an emergency situation in June?
 - **Answer:** If there is an emergency, ER coverage still exists and is not out-of-network. Members can go to the nearest hospital. If you need to request Continuity of Care for non-emergency care, members can go onto the state's Cigna site, <u>cigna.com/stateoftn</u> and find the <u>Continuity of Care form</u> and submit it to Cigna.

LOCAL EDUCATION/LOCAL GOVERNMENT QUESTIONS

- Both Tri-Star and HCA are leaving Cigna LocalPlus?
 - Answer: The name of the system is HCA/TriStar and it is the TriStar hospitals in middle Tennessee and three Parkridge hospitals in Chattanooga that are now out of the HCA/TriStar system.
- Does this affect West Tennessee?
 - **Answer:** It really doesn't unless someone comes to a HCA/TriStar provider in middle Tennessee for their care.
- What if your agency isn't set up for self-service at this time?
 - Answer: You don't have to use self-service for these changes. BA has to key all of the enrollment forms and we will accept them from you or the employee. You also are not able to make the change in a Benefits eForm.

• Will we be able to run a query showing who elected to make the change?

- Answer: Yes, we have queries that are available that are typically used during the annual enrollment period. Run the TN_BA219_MED_DEN_COVERAGE query if you want to see coverage for all your employees, and run TN_BA219_MED_DEN_ELECTIONS to see changes made specifically during this time period. Use a date range from 6/1 through the current date until after the current enrollment period ends and this will show you who made a change. We recommend that you continue running this query until 7/1 to capture all changes made. We will also notify you via Zendesk ticket if we process an enrollment that does not have your signature on it.
- Can employees currently on Cigna LocalPlus change to BCBS if they want to?
 - Answer: No, the Insurance Committee approval does not allow this.

• Can we use Zendesk to upload the enrollment form?

- **Answer:** Yes, absolutely. This is the preferred way. Either the ABC or the employee can upload the form.
- You do not have the LocalPlus (network option) anymore?
 - Answer: Yes, we still have the LocalPlus network, but as of June 1, HCA/TriStar providers are no longer in LocalPlus, St. Thomas providers are now in the network. The limited opportunity allows LocalPlus members to change to OAP from June 8-19 if they want to and agree to pay the higher premium/surcharge.
- What if employees elect not to change from LocalPlus to Open Access? Or don't submit forms in time?
 - Answer: Members do not have to change from LocalPlus to OAP. This is only for people who want to keep their HCA/TriStar doctors and hospitals that are still in the OAP network and agree to pay the higher premium/surcharge. If they want to stay in the LocalPlus network, or if they do not submit a form by June 19th, they will have to wait until Annual Enrollment to make a change, effective Jan. 1, 2021.
- Can multiple forms be uploaded or just one at a time
 - Answer: We ask for just one form at a time as they are uploaded into Edison and need to be on separate tickets to do this.
- If we have multiple forms, can we scan them all at one time to Zendesk or will we need to do each ticket individually? This effects almost half of our employees.
 - Answer: You will need to submit separate Zendesk tickets. Also, your employees do **not** have to make this change. It will result in a higher premium unless your agency covers the premium for your employees. This is only if members want to enroll in the OAP network.
- Can you fax them in batches?
 - **Answer**: If you send in a batch, then we have to separate them in the system which will delay the processing of the enrollment forms, so please send them individually.
- Does this affect east TN area hospitals?
 - Answer: It only affects three Parkridge area hospitals in the Chattanooga area.
- They also could change later during annual enrollment if they aren't sure now about changing?

- **Answer:** Correct, if eligible, they can change now or during Annual Enrollment in October for coverage beginning January 2021.
- Due to payroll timing and the timing of the open enrollment, I realize I will not be able to catch the June payroll, but we run our July payroll in the 3rd week of June. Is there any way that all changes can be keyed in Edison by June 24th?
 - **Answer:** We are going to key the changes as quickly as we can. It will depend on volume. If you have enrollment forms please send them now. You don't have to wait until Monday, June 8 to start to submit them.
- What if you looked today and your physicians are still on the Cigna site as in-network? Does that mean the employee is okay?
 - Answer: Cigna has put effective terminations into their system, including HCA hospitals and HCA-owned provider groups. If you are doing a search using <u>myCigna.com</u> or are using the "Find a LocalPlus Network Medical Provider" link on the microsite, <u>https://www.cigna.com/sites/stateoftn/</u>, that information has been updated with what is effective at this time. There are some independent physicians still showing as in-network while they are waiting to obtain privileges at in-network hospitals. If those independent providers do not obtain privileges at an in-network hospital, they will become out-of-network providers and the online searches and directories will be updated accordingly. Cigna is also updating the 2020 PDF Provider Directory Listing on the Cigna microsite.
 - Until updates are complete, members should search for providers using the live search links or by calling Cigna at the dedicated state number, 800.997.1617. Cigna customer service will be able to answer any questions including whether an independent provider has privileges at a hospital in the LocalPlus network.
- Have the letters already been sent to members or did I understand they will begin to be sent out next week informing members of this special enrollment time?
 - **Answer:** The emails went out on Monday, and the letters were mailed this morning. We emailed those for whom we had an address, about 137K members, and we snail mailed to about 7K members who did not have an email address in Edison.
- How does the Community of Care forms submitted and approved affect changes switching over from LocalPlus to OAP? I have an employee who was approved but the employee asked if there was a limited time this approval would last and if should the employee should switch to OAP?
 - **Answer:** Based on their own medical necessity the letter of Continuity of Care should have the length of time the Continuity of Care is approved. The member can also call Cigna's customer service at 800.997.1617 for the length of time it was approved. In some cases it may be a short period of time and in some cases it may be longer. Based on their approval, the member may want to change to OAP to bridge the gap or if the Continuity of Care exception length of time is sufficient or if they plan to change providers, they may not want to make a switch.
- Last month, I was told HCA will stay on until 8/1 and it was pending the contract approval for the remainder of the year?
 - **Answer:** We have confirmation that HCA/TriStar hospitals and providers will stay in the Cigna OAP network for our members until Dec. 31, 2021.
- So if an employee has diabetes and wants to stay with their specialist will the Continuation of Coverage apply and work

• Answer: Continuity of Care is reviewed for each individual based on their medical necessity. If that patient is a standard diabetic patient and they go once every six months, it may not meet medical necessity. Any individual who has a complex medical condition needs to reach out to Cigna directly and file for Continuity of Care and get an approval or denial based on their needs. The <u>form is on the Cigna microsite</u>. If Continuity of Care is approved, it will be for a specified period of time and the member will need to take that time period into consideration when deciding if they should stay in LP or switch to OAP and pay the higher premium/surcharge.

• Is there a way to check to see if our providers are part of HCA/TriStar?

• **Answer:** Either go to the customer portal, <u>mycigna.com</u> if you are already a Cigna or <u>Cigna State of Tennessee microsite</u> and use the link there and search for your providers there. Or, call the service center at 800.997.1617, 24/7.

Higher Education, Local Education, State and Local Government ABC Conference Call June 9, 2020

Materials and Communications

• **ABC Survey:** The annual ABC survey was sent to primary ABCs, Wednesday, June 10. You will have until Wednesday, June 24 to complete the survey. Although not required, we welcome your feedback. Your responses to the 2019 survey were extremely valuable in helping us understand areas where we could better meet your needs and improve our services to you and your members.

• HSA/FSA Webinar: Get Familiar with the PayFlex Website – Held Wed., June 10:

On June 10 at 11 a.m., PayFlex held an informational webinar to help HSA and FSA members navigate the website. Emails were sent to all members for whom we have an address in Edison. We sent this information to ABCs on Tuesday, June 9 to share with your members:

HSA/FSA Webinar: Get Familiar with the PayFlex Website

- Join our team for an informational webinar designed to help you navigate the PayFlex website. Get the details about how to register and use all the available features, such as connecting to your bank account and setting up alert notifications. Bring any questions you have, including those related to a flexible spending account (FSA) and health savings account (HSA). The webinar will be live on Wednesday, June 10, from 11 a.m. to noon CT. All the login information you need is <u>available here</u>, or contact <u>brady.delander@tn.gov</u> with questions.
- Upcoming PayFlex Webinars: Both will take place from 11 a.m. to noon CT
 - July 8 How to Substantiate Debit Card Transactions
 - August 12 IRS Approved Healthcare Expenses

• **State (only)** #4Mind4Body Webinar

- Healthy Mind, Healthy Body, Tues., June 16, 11:30 a.m. to 12:30 p.m. CT
 - This session will explore the mind body connection, and how stress affects your body. Then, you'll learn about mindfulness and other strategies to reframe your thoughts.
 - We'll send emails about the webinar to state employees via Outlook, and more information to ABCs to share with employees.
 - Working for a Healthier Tennessee Wellness Councils will also be able to share the registration information.
 - Employees will join by WebEx. Pre-registration will be required.
- Surgical and Treatment Support Program Communications: The week of June 22, Cigna will begin to distribute information in new hire packets and Benefits Administration will send out a member email about the Surgical and Treatment Support Program available for Cigna members. Information about this program was presented a few months ago and it was put on hold due to elective surgeries being delayed.
 - At a very high level, the Surgical and Treatment Support Program is a program to provide you personalized support and guidance for certain surgical needs. Surgeries with select providers at select locations have no member cost-share for PPO members and no coinsurance after meeting your deductible for CDHP members. Procedures that are covered:
 - Low back disk surgery
 - Hip replacement

- Knee replacement
- Laminectomy
- Spinal fusion
- Annual Enrollment Dates for 2021 Benefits: Here are the dates for annual enrollment.
 - State and higher education Oct. 1-16, 2020.
 - Local education, local government and retirees Oct. 1-30, 2020.
 - Most of our vendor partners are under travel restrictions this summer and fall...many until the end of the year. And there are not likely to be many benefits fairs this summer and fall. Because of this, we are discussing the possibility of having webinars with specific vendor partners just for employees due to limited access to vendors. This would not replace the general employee webinars that we during annual enrollment. We will have more information available later.
- **2021 Newsletter Pre-Order:** With budget cuts, we need to save on printing and mailing costs wherever we can. We know some people are working in, and some out of the office, most of us have slower or no hiring right now and, as I mentioned earlier, there are likely to be no or very few benefits fairs this year, so, we have made the decision that we will **not print or mail** extra copies of the annual enrollment newsletters to ABCs this fall. We will of course snail mail to every eligible employee.
 - This means that you will need to email the Annual Enrollment newsletter or copy it to give to your new hires between August 3rd and October 15 (S/HE) or Oct 30 (LEA/LG). We will also, as usual, post PDFs of the newsletter on our website and you will be able to copy that link and/or direct members to the PDF on the ParTNers site.
 - We typically mail newsletters to retirees who pick up retiree coverage after we finalize the list for mailing. This year, if we have an email address on file, we will email a copy of the newsletter instead of mailing it. If we do not have an email address, we will mail the newsletter to them.
 - \circ We do appreciate your understanding of the need to make this change.
- Cigna LocalPlus to Cigna OAP Limited Opportunity Enrollment, Now through June 19
 - As relayed to you by email and during our special ABC webinar, Cigna LocalPlus members have the opportunity to make a change now through June 19, 2020, to Cigna OAP because the Cigna LocalPlus network has lost 5 or more participating hospitals between January 1, 2020, and June 1, 2020.
 - So far, we have received several hundred enrollment forms. Thank you for sending these in early and please continue to do so.
 - As a reminder, members **do not** have to make this change Cigna LocalPlus members, if they wish to and agree to must pay the higher premium which includes a monthly surcharge:
 - \$40 for employee only or employee+child(ren) coverage, or
 - \$80 for employee+spouse and employee+spouse+child(ren) coverage.
 - New OAP coverage would begin July 1, 2020.
 - Letters/emails were sent to all members (if we had an email address), including BlueCross members because we had to inform BCBST members about this information
 but only LocalPlus members can make a change to OAP.
 - HCA TriStar providers have left Cigna LocalPlus, but St. Thomas hospitals and affiliated providers have joined LocalPlus.
 - The reason someone might want to change from LocalPlus to Cigna OAP is because HCA hospitals and providers are staying in the OAP network.

- **Member Communications:** In addition to the email/letter sent, we sent another email out this week and will send another email next week reminding LocalPlus members about this limited enrollment opportunity.
- All member communications and information are found on the ParTNers for Health website > Health Options > Carrier Information
 - Find the special mid-year OAP enrollment premium charts, member letter, FAQs, Enrollment Change Application and enrollment instructions, OAP Provider Directory, and more on the <u>ParTNers for Health website, Carrier Information</u> <u>page.</u>

• 2021 Premiums and Benefits Updates

• 2021 health insurance:

- Active state and higher education employees 2.8% premium increase
- State and higher education retirees 3.6% premium increase
- Local education employees/local education retirees 2% premium increase
- Local government employees/local government retirees 5.4% premium increase
- \circ Health insurance premium charts were sent to ABCs Friday, June 5, 2020

• Voluntary benefits:

- **Vision coverage:** no premium increase for either the Basic or Expanded plans. Davis Vision continues to be the vendor for vision coverage.
- Dental coverage:
 - Dental Prepaid vendor will continue to be Cigna. Premium rates will increase by 3%.
 - Dental DPPO vendor and premium rates to be announced as soon as the procurement process is final.
- As soon as all vendors are finalized, we will send out the 2021 voluntary benefits premium charts.

• State/Higher Ed: HSA/FSA vendor

• Optum will be the vendor managing the HSA/FSA accounts for members starting in January 2021. More information will be included in the 2021 newsletter.

Local Ed/Local Gov: HSA vendor

- Optum will be the vendor managing the HSA accounts for members starting in January 2021. More information will be included in the 2021 newsletter.
- CVS/caremark: will continue to administer our pharmacy benefits.
 - The Committee adopted the Standard Control Formulary for prescription drugs.
 - This formulary is widely adopted by other plans and purchasers.
 - This will mean a change to 169 products and a savings to our plans and is estimated to save members approximately \$823,000. Letters will be sent to members from CVS caremark **in mid-November**.
 - A pathway for coverage of excluded products, if medically necessary, will exist for members.
- **Osteoporosis medications added to maintenance tier.** The Insurance Committees approved adding these medications to the drugs eligible for the maintenance tier, which allows members to receive a 90-day supply at a reduced cost.

State/Higher Ed: 2021 Wellness Program Incentive updates: We do have some 2021 wellness program updates and will share more information with you during the July ABC calls. For 2021, we will continue the dollar amount of \$250 per head of contract and spouse (\$500 maximum payment).

Operations

• Higher Ed/Local Ed/Local Gov: Email Addresses Update Request: We will be contacting agencies to update employee email addresses over the next few months. We will start with higher education in the next week or two.

• Service Center Metrics/Customer Service Rating:

- May 2020:
 - Tickets via Email: 950
 - Tickets via Self-Service: 3048
 - Tickets via Phone: 3,642
 - Tickets via Chat: 176
 - Total: 7,816
 - Satisfaction Score: 98.5%
- May 2019:
 - Tickets via Email: 1034
 - Tickets via Self-Service: 3,830
 - Tickets via Phone: 4,395
 - Tickets via Chat: 196
 - Total: 9,455
 - Satisfaction Score: 97.7%
- We received over 1,600 less tickets this year as compared to last May.
- As you know, we take the satisfaction of our customers very seriously. Please complete the survey after your Zendesk ticket is resolved.
- If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy.
- Our satisfaction rate for May was 98.5%.
- **Local Ed/Local Gov:** Adding or Dropping Dental and Vision Plans: As a reminder, the deadline for agencies wishing to add (if not already enrolled in the plan) or drop dental and vision coverage has been extended to August 1.
 - You must notify us in writing that you wish to add vision and/or dental coverage. Your notification letter to BA must:
 - Be on your agency's letterhead.
 - State your agency's intent to join the vision and/or dental plan.
 - Be approved by your governing body, if appropriate, and signed by your agency director.
 - Indicate your willingness to allow payroll deduction.

Please send your letter to me. My email address is (nakeisha.n.myles@tn.gov).

Your employees will be eligible to enroll during the annual enrollment period in October for coverage that will begin on January 1, 2021.

• **Dropping Dental or Vision:** If your agency would like to drop dental and/or vision coverage for the 2021 calendar year, BA needs a written notice. Please send the written notice to Nakeiska Myles by the August 1 deadline.

• New ABC Training:

- New ABC Training
 - June 17: Local Education: 9-11 a.m. CT
 - June 17: State/Higher Education: 1-3 p.m. CT
 - June 18: Local Government: 9-11 a.m. CT
 - June 18: Session 2 All Entities 1-3 p.m. CT

Here is how to sign up for training:

1. Login in To Edison.

2. Navigate to ELM Menu >ELM>Employee Self Service>Learning>Search

Catalog>Enter ABC in the "Search the Catalog" field>Click the "Search Activities" button.

3. Locate the training you are interested in.

- 4. Locate the specific dates you would like to attend the webinar.
- 5. Click Enroll to the right of the training session you wish to participate in.
- 6. Click Submit Enrollment in the bottom lower left corner.

7. Once you have enrolled, you will see the following message under your name at the top of the page.

You have successfully enrolled in ABC Training Webinar/Workshop. This change in status will be updated on the All Learning page.

CONFERENCE CALL QUESTIONS

- Higher Ed: Do you have any wellness program stats on utilization?
 - **Answer:** We will go over the stats from 2019 during the July 2020 ABC conference calls.
- **Local Ed:** Will members have new cards by July 1 (for the change to OAP from LocalPlus) and will they be available on the website? How soon can they print temporary cards from the Cigna site?
 - Answer: Members won't have new cards in the mail by July 1 due to the printing and mailing process. The majority of enrollment changes will have been sent to Cigna by July 1, so the majority of members should be able to find their new card information on the website. There may be a bit of a delay for some members depending on when their enrollment form is processed by BA and the data is transmitted to Cigna.
- **Local Ed:** Are the Cigna emails/letters being sent to west Tennessee as well, not just middle Tennessean and east Tennessee?
 - Answer: Yes, they are being sent to West Tennessee, as we are required to send to all LocalPlus members.

- **Local Ed:** Does the change in the formulary affect the drugs that have to be processed through the specialty pharmacy which seems to currently have a higher copay?
 - **Answer:** The change will affect multiple drugs, not just preferred brands or specialty pharmacy. Affected members will receive a letter in mid-November if their medication(s) is impacted by the formulary change.
- **Local Ed:** A lot of our employees have asked why our prescription plan does not do more for those with diabetes. It appears that the meds and products associated with diabetes is increasing. Just wanted to throw this out there as I am being asked about this.
 - Answer: We provide a very rich benefit for members with diabetes, actually. Anyone who fills a diabetes-related medication (oral or injectable), as well as insulin, test strips and lancets – when filled in a 90-day supply through either mail order or at a participating Retail-90 pharmacy (e.g., Kroger, Walmart, Food City, Publix or thousands of independents), will pay a lower copay than if you filled each 30 days 12 times per year. If you're in the CDHP, your diabetes meds in a 90-day supply will bypass the deductible, as allowed by the IRS, and will have a lower copayment as well. To find a participating Retail 90 pharmacy to fill your diabetes medications, go to info.caremark.com/stateoftn and click on "90 Day Retail Pharmacy List."
- **Local Ed:** I have employees asking if there has been an increase in copays for Cigna due to being charged for specialty visits when going to places like Fast Pace, an urgent care facility. They were told by Cigna there was an increase in February and they do not have to notify members. Can you check into this?
 - Answer: If the provider's services change from a primary to specialist or convenience care to urgent care, the provider contract would be updated and the copay would change. We set our benefit copays, so if Fast Pace is an urgent care facility, they will charge an urgent care copay. If members go to a convenience care clinic, this is a convenience care copay. We confirmed with Cigna that the contract with Fast Pace Urgent Care was updated effective 2/15 from multiple provider contracts with some as primary care and some as urgent care to a consolidated contract as urgent care.
- **Local Ed:** Following up to the previous question, can providers make that change whenever they feel like it? I thought that these were set once a year?
 - Answer: Providers are not necessarily making the change. This is similar to the contract negotiations that our carriers go through with provider systems. Providers come up for renewal throughout the year, and there is a recredentialing process. This includes what level of service they provide in their clinic and a renewal of the licensing for this provider. If the services are moving from basic to more urgent care, for example they are able to do IVs, some advanced imaging and more urgent care, this moves from basic care to more urgent care. When a primary care doctor is moving to a more specialist type of care, this can change the type of copay that is applied. Our plan copays, deductibles and coinsurance are established annually.
 - **Follow up question:** I have only been charged the regular copay, as well as other employees in our district?
 - **Answer:** We confirmed with Cigna that the contract with Fast Pace Urgent Care was updated effective 2/15 from multiple provider contracts with some as primary care and some as urgent care to a consolidated contract as urgent care.

- Local Ed: Can we send those emails in Excel (email address updates) and have BA upload?
 - **Answer:** Yes, this is the same process as last year.
- **Local Ed:** Are the email addresses that are being uploaded on the enrollment forms added into Edison by BA for those new employees or those employees who are adding dependents or taking dependents off?
 - Answer: For your new employees, when entering the new ehire form in Edison, you are prompted to enter the email address. You should enter the email address, and it won't let you move past it in the system. For the paper enrollment, SQEs and life events, our staff should be changing and adding the email address. If you noticed that we have missed entering an updated email address that was submitted on an enrollment form please submit a Zendesk ticket, and we will manually correct it in Edison.
- Local Ed: When will we know about the summer meetings?
 - **Answer:** We are finalizing our schedule for virtual meetings/webinars to be held in August and will send information to you as soon as it is available.
- **State:** I had an employee submit a form for the special enrollment from LocalPlus to OAP directly to BA for Treasury. Are ABC signatures required on these forms?
 - Answer: For this limited enrollment, an ABC signature is not required for these forms for LP to OAP. For any other forms, then yes, the form needs to be signed by you. Due to the tight time frame, we do not need the signature on the June 8-19 limited OAP enrollment form.
- **State:** We will not be able to order additional newsletters this year correct? Only eligible members will get something via mail from BA?
 - Answer: Yes, correct. You won't be able to order extra newsletters, and yes, all eligible employees hired before Aug 3 will get a mailed copy from BA.
- State: Do you have information about the benefits for those in the possible buy out?
 - **Answer:** No, we do not. We have not been asked to put anything together.
- State: Did you say there may be a possible change in vendors?
 - Answer: Yes, there will be a new HSA/FSA vendor beginning on Jan. 1, 2021, and that will be Optum. Our dental contracts were re-procured, and we may or may not have a new Dental DPPO vendor. Cigna is the prevailing vendor for the Dental prepaid plan. BCBS and Cigna will remain as will Davis Vision. CVS/caremark will be the pharmacy vendor going forward.
- **State:** With the new FSA/HSA vendor, will excess funds from FSA and HSA roll over to Optum? People who have an FSA can currently roll over up to \$500 each year.
 - Answer: We have not started the implementation with Optum yet, so all of the details are yet to be worked out. But no one will lose their funds in their PayFlex HSA. Further, anyone with a healthcare FSA or limited purpose FSA should be able to carry over up to \$500 with Optum. We will work with Optum over the summer and fall to iron out all of the details and will communicate those to you once we know more.

- **Local Gov:** Which middle Tennessee hospitals left Cigna LocalPlus? Our employees would like to know so they can make a decision.
 - Answer: You can find <u>a PDF of LocalPlus hospitals</u> on the ParTNers website. It shows which HCA/TriStar hospitals terminated and which Saint Thomas hospitals joined June 1.
 - The terminated HCA/TriStar hospitals in middle Tennessee include, Hendersonville Medical Center, Summit (Hermitage), Horizon Medical Center (Dickson), Stonecrest (Smyrna), Southern Hills and Skyline (Nashville), and Centennial (Nashville and Ashland City).
 - Effective June 1 in middle Tennessee, the hospitals that are in LocalPlus or contracted effective June 1 are the St. Thomas facilities and hospitals, Vanderbilt hospitals, Williamson Medical Center, among others.
- **Local Gov:** What is the procedure for a member filing paperwork for Continuity for Care? Will the response be returned in time if the member is denied to then change to Cigna Open Access?
 - **Answer:** Because of the time to enroll in OAP being short, it may not allow an individual to submit a Continuity of Care and receive a response prior to the deadline of June 19 at this point.
- **Local Gov:** I had a question from an employee that wants to change to OAP. Will the amount she has paid toward her deductible stay in effect if she elects to change to OAP?
 - Answer: Yes, the amounts the employee has paid to the deductible and out-ofpocket maximum will be applied to OAP after the July effective date. It may take a couple of weeks, and if members have some late arriving claims or if some feel that the amounts are not accurate, they can call Cigna at 800.997.1617 for assistance.
- **Local Gov**: The June 2 call notes say the OAP providers will be in the network until Dec. 2020, but the FAQs say 2021?
 - **Answer:** We do have confirmation that OAP providers will stay in network through 2021, which is when our current carrier contract expires.
- Local Gov: Are HSAs moving from Payflex to Optum?
 - **Answer:** Yes, that is correct, the PayFlex contract ends Dec. 31, 2020, and Optum will be the new HSA trust administrator from January 1, 2021-December 31, 2025.
- **Local Gov:** So Payflex will no longer be the HSA vendor beginning January 2021? Will there have to be changes made through your payroll system for submission of monies to account?
 - **Answer:** We are still working out these details with Optum at this point. We will be in touch with ABCs as we have more information.
- Local Gov: What were the annual enrollment dates?
 - **Answer:** For local government active employees and retirees, Oct. 1 through Oct. 30, 2020.
- Local Gov: Is there a contact person I can speak to about the Continuity of Care?
 - **Answer:** The best place to contact is to call Cigna directly, at 800.997.1617, and they can get you the form and help you submit the form directly for review and approval. Please note, the Continuity of Care will be approved for a specified amount of time, and it may not be through the end of the year.

- **Local Gov:** Some of our employees are wondering about the Cigna OAP deductibles and copays. Are they the same?
 - Answer: Copays, deductibles and out-of pocket maximums are the same no matter what network (Cigna LocalPlus, Cigna OAP or BlueCross BlueShield network S) a member is enrolled in. The premiums for OAP are more expensive because members have access to more providers. With OAP, there is a premium surcharge of \$40 for employee only or employee plus child(ren) and \$80 for employee plus spouse and employee plus spouse plus children.
- **Local Gov:** I know you said you had limited information but do you know what will happen to our balance in our Payflex accounts?
 - Answer: We will work with Optum over the summer and fall to iron out all of the HSA details and share those with you as we know more. No one will lose their HSA funds, as we are hopeful that we will be able to do a bulk transfer and move everyone's from PayFlex to Optum. We have to work with both companies and legal to iron out the logistics, though. We will let you know as we find out more.
- Local Gov: Is there a list of hospitals that left (LocalPlus)in east Tennessee?
 - Answer: We have posted <u>the hospital list on the Carrier Information page</u>. All hospitals are still in LocalPlus except for the three Parkridge hospitals in the Chattanooga and outlying Chattanooga area.
- **Local Gov:** Could an individual keep their Payflex account open but pay their own fees?
 - **Answer:** We believe so, but be aware the state's contract with Optum is from 2021 through 2025. When someone enrolls in the CDHP or the Local CDHP, the state sends the information to that vendor and that vendor will be Optum. If the member decides to keep money in the PayFlex account, the member will have to pay the fees. We have just started working with Optum and we will have more information to share later.
- Local Gov: What happens to the investment accounts with Payflex?
 - Answer: The HSAs are individually owned bank accounts. We have not talked to Optum about this yet, but we cannot wholesale move from one to the other. We will talk to Optum, and we will discuss if we need individual approval for each account and will share that with you. It is likely there will be different investment options under Optum, and once any member's HSA funds are moved from PayFlex to Optum the member will then have the choice to again invest their funds and from a new slate of different investment opportunities. We will also work with the State Treasury office staff to ensure that all investments meet their approval.
- **Local Gov:** We have several members who have not received notice of the Cigna change. Why could that be?
 - Answer: We emailed them and snail mailed for those we did not have an email. If they did not get or open their email all of the information, including copies of the letters and FAQs, is on our website. We have heard from some of you that the email went into a spam folder. This could occur for a number of reasons which could include a server or Internet Service Provider not allowing the email to go through. This is one reason why it is so important for ABCs to share the information we send you with your plan members.

- **Local Gov:** Regarding dental refunds, we did not receive refunds for employees that have terminated. Will we be getting these?
 - **Answer:** Yes, your agency will receive the refunds for the dental discounts for termed employees on the July bill as they did not populate on the June bill.

Higher Education, Local Education, State and Local Government ABC Conference Call July 14, 2020

Materials and Communications

• **ABC Survey Update:** For the 2020 ABC Survey, we had 370 responses for a 62% response rate – which is great! Thank you all so much for responding to the survey. The Operations and Communications teams are in the process right now of going through the results and your comments to determine how and where we can take steps to improve our service to you. We will share more details about the results over time as decisions are made.

• 2021 Vendor Updates:

- **Dental DPPO:** The Insurance Committees authorized the award of the Dental DPPO contract to the apparent winner of the procurement but Benefits Administration has been advised by the Central Procurement Office (CPO) that protests to the contract award have been filed. These protests result in a stay of the process to enter into a Dental DPPO contract. CPO must follow certain procedures to resolve the protests. So this means we are on hold in moving forward to announce the DPPO vendor for 2021. We will share information with you as it is available.
- **Dental Prepaid** vendor will continue to be Cigna.
- HSA/FSA, beginning in 2021, the contract was awarded to Optum Bank.
 - **Local Ed/Local Gov:** Once we have more information about how employer payroll deductions will work and any changes, we will share that information with you. For now, you will continue payroll deductions with PayFlex through the end of the year.
- **State only: Optum Navigating Your Finances Series:** Optum continues to host the Navigating Your Finances webinar series. We sent information for you to share, and also sent an email to state employees through the state email distribution on July 13. The dates and topics for the remaining webinars are on the screen. Employees must register for each session:
 - Wednesday, July 15 Four Ways to Rebuild Money Confidence (Part 1 of 4) (already held more than 500 state employees participated in the webinar)
 - Wednesday, July 22 Prioritizing Savings (Part 2 of 4)
 - Wednesday, July 29 Managing Debt (Part 3 of 4)
 - Wednesday, August 5 Maintaining Excellent Credit (Part 4 of 4)

All held from 11 a.m. – 12 p.m. CT. Members must register separately for each webinar they would like to attend. If Internet Explorer doesn't work to register, you may need to try a different browser.

- Annual Enrollment Virtual Vendor Employee Webinar Information: Due to COVID-19, the travel restrictions for many of our vendors and the decrease in the number of in-person benefits fairs, we will hold a series of virtual vendor (insurance carrier) employee webinars in September. We will include this information in the Annual Enrollment newsletters and will provide you with a flier to share with your employees. These webinars are in addition to the Employee Webinars that cover the 2021 benefits changes.
 - The topics for each date are still tentative, but our insurance carriers will give two, 10minute presentations on the dates below, one at 11:30 a.m. and then it will repeat at 3 p.m. CT on the same day.
 - Our insurance carriers will present their products and members will be able to ask questions about their insurance choices. We will record the presentations and post the one with the most questions on the website for members to listen to at their convenience.

Tentative dates/topics. Webinar times 11:30 a.m. and repeats 3 p.m. CT.
Thursday, Sept. 10 – State/Higher Ed only - Disability plan options (MetLife)
Friday, Sept. 11 – Medical options (BCBST and Cigna)
Thursday, Sept. 17 – Vision plan options (Davis Vision)
Friday, Sept. 18 – HSA/FSA options (Optum)
Thursday, Sept. 24 – State/Higher Ed only - Life insurance plans (Securian)
Friday, Sept. 25 – Dental options (Cigna Prepaid and Dental DPPO)

- Annual Enrollment ABC Weekly Conference Call Schedule:
 - August 11 ABC conference calls are canceled due to regional virtual ABC trainings. We will provide more information about the regional trainings later.
 - Weekly annual enrollment calls will start on Tuesday, September 8 for all plans. (day after Labor Day)
 - An updated schedule is posted on the ABC webpage and is attached to this email.

Benefits

State/Higher Ed: Wellness Program Statistics and 2021 Wellness Program Changes: Paige Turner, our population health director, and JJ Joralemon, the assistant population health director, went over the 2019 wellness program statistics and the 2021 Wellness Program changes. We have attached these slides with today's Friday ABC email for your reference.

• Local Ed/Local Gov: Optum – Talk It Out Tuesdays Campaign: Matt Cramer with Optum, our behavioral health and EAP vendor, joined us to talk about a new campaign that will start next week for local education and local government employees called Talk It Out Tuesdays. Talk It Out Tuesdays is a four-week program where members can call in to any or all of the sessions and listen and talk anonymously in a group setting with a licensed care clinician. Members can come and go as they please. It allows members to connect and process experiences surrounding the pandemic and current state of the world in a safe setting with guidance from a licensed therapist. The ParTNers Health and Wellness Center has been doing these sessions for state employees and the response has been extremely positive. We have attached a flier to the Friday email and encourage you to share it with your plan members. We will also send an email to all members for whom we have an email address in Edison next week.

Operations

- Local Ed: Employees not in Edison: BA recently conducted a review of Edison data versus TCRS data and identified local education employees that appear to be eligible for insurance based on service credits being reported to CONCORD but who are not active in Edison. We will be reaching out to the impacted agencies to confirm if these employees should be added to Edison and asking you to add them if they are eligible. This request has a tight turnaround time so that we can accurately report these employees for OPEB reporting with a 6/30/20 measurement date.
- Service Center Metrics/Customer Service Rating
 - **June 2020:**
 - Tickets via Email: 1,362
 - Tickets via Self-Service: 5,775
 - Tickets via Phone: 5,237
 - Tickets via Chat: 241
 - Total: 12,615

- Satisfaction Score: 98.0%
- June 2019:
 - Tickets via Email: 738
 - Tickets via Self-Service: 3,627
 - Tickets via Phone: 4,501
 - Tickets via Chat: 205
 - Total: 9,071
 - Satisfaction Score: 98.3%
- We received over 2,000 more email tickets this year as compared to last June with our total interactions increasing by over 3,500.
- As you know, we take the satisfaction of our customers very seriously and ask that you please complete the survey after your Zendesk ticket is resolved.
- If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy.
- Our satisfaction rate for June was 98.0%.
- August Summer Regional Virtual Training Dates: This year, due to the challenges of COVID-19, BA will not be traveling to conduct summer regional trainings for ABCs. We will hold virtual summer regional training sessions for three weeks in August.
 - Starting on August 11th through August 27th, we will conduct a session every Tuesday and repeat it on Thursday so you can choose the day and time that best suits your schedule for each training session. We will cover various topics each session. We will send session topics and login instructions via email.
 - **State/Higher Education sessions** will be at 9 a.m. on Tuesdays and 1 p.m. on Thursdays. All times are Central time.
 - August 11 9 a.m. Session One
 - August 13 1 p.m.
 - August 18 9 a.m. Session Two
 - August 20 1 p.m.
 - August 25 9 a.m. Session Three
 - August 27 1 p.m.
 - **Local Education/Local Government sessions** will be at 1 p.m. on Tuesdays and 9 a.m. on Thursdays. All times are Central time.
 - August 11 1 p.m. Session One
 - August 13 9 a.m.
 - August 18 1 p.m. Session Two
 - August 20 9 a.m.
 - August 25 1 p.m. Session Three
 - August 27 9 a.m.
- **Local Ed/Local Gov:** Adding or Dropping Dental and Vision Plans: As a reminder, the deadline for agencies wishing to add (if not already enrolled in the plan) or drop dental and vision coverage has been extended to August 1.

- You must notify us in writing that you wish to add vision and/or dental coverage. Your notification letter to BA must:
 - Be on your agency's letterhead.
 - State your agency's intent to join the vision and/or dental plan.
 - Be approved by your governing body, if appropriate, and signed by your agency director.
 - Indicate your willingness to allow payroll deduction.
- Please send your letter to Nakeisha Myles at <u>nakeisha.n.myles@tn.gov</u>.
- Your employees will be eligible to enroll during the annual enrollment period in October for coverage that will begin on January 1, 2021.
- **Dropping Dental or Vision:** If your agency would like to drop dental and/or vision coverage for the 2021 calendar year, BA needs a written notice. Please send the written notice to me, Nakeisha Myles, by the August 1 deadline.

• New ABC Training

- July 22: Local Education: 9-11 a.m. CT
- July 22: State/Higher Education: 1-3 p.m. CT
- July 23: Local Government: 9-11 a.m. CT
- July 23: Session 2 All Entities 1-3 p.m. CT

Here is how to sign up for training:

1. Login in To Edison.

2. Navigate to ELM Menu >ELM>Employee Self Service>Learning>Search Catalog>Enter ABC in the "Search the Catalog" field>Click the "Search Activities" button.

3. Locate the training you are interested in.

- 4. Locate the specific dates you would like to attend the webinar.
- 5. Click Enroll to the right of the training session you wish to participate in.
- 6. Click Submit Enrollment in the bottom lower left corner.

7. Once you have enrolled, you will see the following message under your name at the top of the page.

You have successfully enrolled in ABC Training Webinar/Workshop. This change in status will be updated on the All Learning page.

CONFERENCE CALL QUESTIONS

HIGHER EDUCATION

- Higher Ed: Is the prostate exam no longer considered an eligible incentive?
 - Answer: That is correct. We took this off the incentive grid for 2020. The preventive screening has been downgraded to a C/D rating, depending on a man's age. Undergoing this screening should be an individual decision that is best left up to the individual and their physician. We hope to replace this with the lung cancer screening, but we are on hold until the USPSTF completes their evaluation of the screening and updates the rating.
- **Higher Ed:** Are there many institutions that are still having their biometric screenings this fall?
 - **Answer:** We are communicating with ActiveHealth, and Quest has put safety measures in place. They are prepared to continue with the screening site if an institution wants to move forward and have their screening. Many state buildings

are still closed so we are canceling these screenings, but we are leaving the decision up to the higher education institutions to decide if they would like to hold their screenings.

- **Higher Ed:** Any word on the new FSA/HSA vendor?
 - **Answer:** The Insurance Committees met in late May and awarded it to Optum Bank. We are meeting with Optum Bank this week and will share more details as they are available.
- Higher Ed: Any dental vendor changes?
 - Answer: Cigna will be the Prepaid Dental vendor going forward. The DPPO vendor contract is still under review. We will let you know when we have more information to share about the DPPO vendor.

LOCAL EDUCATION

- Local Ed: Who is the new dental vendor?
 - **Answer:** The Prepaid Dental vendor will remain Cigna and for the DPPO vendor, at this time, we don't know. There is a protest and the Central Procurement Office is in charge of the procurement process at this point.
- **Local** Ed: Will local education employees receive an email about the Talk It Out Tuesday campaign?
 - **Answer:** Yes, we will send an email to those employees for whom we have an email address in Edison. We will also send a flier to all ABCs and would appreciate it if you will share it with your employees.
- **Local Ed:** What are the differences between the forms? Do I use Application for The Tennessee Plan and the Application to Continue Insurance at Retirement? I have a new retiree and this retirees wants to continue coverage but only wants to continue using the supplement.
 - Answer: Whenever you have an active employee wanting to enroll in retirement insurance, you should always use the Application to Continue Insurance at Retirement. They would use Part 4 on this form to enroll in The Tennessee Plan. As the ABC, you need to provide Benefits Administration the termination date of active insurance and the effective date of The Tennessee Plan enrollment. This is true even if the member was not enrolled in active insurance coverage or was enrolled as a dependent on another employee's coverage. The stand-alone application for UMR/POMCO is used for those already retired and becoming Medicare eligible.
- Local Ed: If MetLife is not awarded the dental contract, how do the waiting periods work?
 - Answer: The waiting periods won't change, so if a member has already satisfied them with the current DPPO vendor, MetLife, they will have been met with the next DPPO vendor. So if a member is enrolled in the DPPO and stays enrolled in the DPPO, the time applied to their waiting periods will transfer.
- Local Ed: When keying new hires, if they have an existing Edison ID, even if it's inactive, Edison doesn't allow me to key benefits right away, as it does for employees who do not have an existing Edison ID. Can you explain this?

- **Answer:** If you are using a future hire date, the system will not allow you to key the coverage until the hire date has occurred.
- **Follow up question:** But it does let me key benefits for those who didn't have existing Edison ID with a future date?
- Answer: Yes, if the person is new to Edison, you can key the future hire and the benefits at the same time. The system is not allowing you to key the benefits on an existing Edison record due to the future hire date because the employee does not technically belong to your agency until that hire date.
- Additional question: Just confirming the Edison ID emails for new hires will also populate on the future hire date?
- **Answer:** Yes, that is correct. Once you have put the eHire form in and put the email address in the form, once that date approaches it will all sync into Edison.
- **Local Ed:** Do we need to key termination for our retirees in Edison or will you term them?
 - Answer: You should always terminate any employee who is no longer eligible for insurance through Job Data. This is true even for an employee who is retiring and has applied for retirement insurance. You can key the termination in Edison once you are aware the member is retiring, even if the active coverage is effective until the beginning of the next school term. If necessary, Benefits Administration will terminate the active record if the retirement insurance enrollment is ready to be processed. Once a member is enrolled in retirement insurance, you should not make ANY changes to the member's record. All retirement insurance changes must be processed through Benefits Administration.
- Local Ed: When can we order the new booklets for benefits?
 - Answer: We are not going to print the annual enrollment newsletters this year for your new hires due to efforts to decrease our printing costs. We will send a PDF to you digitally that you can then email or print out for your new hires hired after July 27. We will pull the mailing list and will mail a newsletter to all eligible employees that are hired in Edison by July 27. For any employees hired after this time, you will be able to share the PDF of the newsletter or the 2021 Eligibility and Enrollment Guide which will be available in November.
- **Local Ed:** Do we continue to send our monthly employer contributions to PayFlex until further notice?
 - **Answer:** Yes, you would continue to do this through December. We will work with Optum on these details. Linnie Stelk, with Optum, will be on a future call and will walk you through how this will work.
- **Local Ed:** Can an HSA participant change their deduction amount throughout the year, i.e., increase, decrease or cancel?
 - Answer: Yes, participants can change their HSA during the plan year, but they cannot go over the federal limits depending on coverage, and if 55 or older, this includes the \$1,000 more allowed per month. This also includes any seed funds you may supply as the employer. You can find these amounts on our website at tn.gov/PartnersForHealth under CDHP/HSA Insurance Options.
- Local Ed: Do we only certify the years they have been with our system?
 - **Answer:** Yes, you can certify just the years of service with your agency. All service does not count towards eligibility for retirement insurance even if it counts towards the TCRS pension. We advise that you direct members with eligibility questions to

contact Benefits Administration at 800.253.9981. They would need to select option 2 when calling the service center so they can speak to a retirement insurance analyst.

- **Local Ed:** If I have hired my new hires in Edison as of 8/3/2020, will they receive the annual enrollment newsletter via email since their email address is set up in the new hire screen?
 - Answer: They will not receive one by mail as we are pulling the address/mailing list July 27, but you can email them a PDF version. Every employee who has a mailing address in Edison by July 27 will receive a newsletter by mail. For anyone hired after July 27, you will need to email a pdf or you can print one out for them.
- Local Ed: Have the new rates been announced?
 - **Answer:** Premiums were announced during the June conference calls. We also sent the premium charts on June 5 to all ABCs with the Friday email, and they are posted on the <u>ABC webpage under Weekly Emails</u>..
 - Here are the 2021 health insurance rates for local education: Local education employees/local education retirees will have a 2% premium increase.
- **Local Ed:** Is there any way to get a copy of the annual enrollment brochure before August 1? We are having a large new hire meeting on July 27. It would be great to give the new employees a copy at that time.
 - Answer: The newsletters won't go to print until the second week of August so they won't be ready at that time. The PDFs won't be ready until the second week of August..

STATE

- State: Have they opened the biometric screenings yet?
 - Answer: Yes, Quest is ready and they have protocols and safety measures in place just as if you were to go to the doctor's office. However, holding a screening will depend on if the building/site is open.
- **State:** About the vendor webinars during annual enrollment, how will they be disseminated to employees or how will this work?
 - Answer: We will send the information to ABCs first to share, and then we will include the information in the Annual Enrollment emails we send out to employees. We are still working out the details and not sure yet if employees will have to register or not. As soon as we have information available, we will share it with you. We also plan on recording the webinars and posting on our website for those who are not able to attend.

LOCAL GOVERNMENT

- **Local Gov:** Is the State staying with MetLife dental or are we changing to a different provider?
 - **Answer:** We don't know yet. There is a contract award in a review process, and we will let you know as soon as we know the outcome.
- **Local Gov:** Is the new HSA provider the same Optum that handles the EAP/Behavioral Health?

- Answer: It is the same company, but it is a different division and separate contract. We have one contract for EAP/behavioral health and one for HSA/FSA, called Optum Bank. We will share much more information with you in the months to come.
- Local Gov: Do we know if HCA will stay with Cigna OAP for the 2021 coverage?
 - **Answer:** Yes, Benefits Administration has confirmed with Cigna and HCA that HCA will remain in OAP for our plan members until the end of the current medical contract which expires 12/31/2021.
- **Local Gov:** We have an employee's dentist who is offering a second cleaning before the six months is up. Is this okay?
 - **Answer:** Yes, on the certificate of coverage is states that two cleanings per calendar year are allowed, they do not have to be six-months apart.

Materials and Communications

- Annual Enrollment Updates: As you know, Annual Enrollment starts soon!
 - Here are the enrollment dates:
 - State/Higher Education employees: Annual Enrollment starts Oct. 1 ends Friday, Oct. 16 at 4:30 p.m. CT.
 - Local Education/Local Government employees: Annual Enrollment starts Oct. 1

 ends Friday, Oct. 30 at 4:30 p.m. CT.
 - **Retirees**: Annual Enrollment starts Oct. 1 ends Friday, Oct. 30 at 4:30 p.m. CT.
- Website: A reminder that the <u>Partners For Health website</u> has been updated with a new look. We'll show you the new Annual Enrollment pages next week.
 - Active employees: 2021 materials and information for Annual Enrollment (AE) under the Annual Enrollment tab. An updated <u>2021 AE video</u> and enrollment details are found on the <u>About Enrollment page</u>.
 - **Retirees:** Have a special <u>For Retirement webpage</u> with specific enrollment information, links to retiree Edison enrollment videos and links to helpful information.
 - **2021 premiums** are on the <u>premiums page</u> and benefits webpages have been updated.
 - **Newsletters and Materials:** On the <u>Enrollment Materials page</u>, you'll find PDF copies of the newsletters that you can print or download and share with your employees
 - You'll also find ESS login instructions by plan, with a version for retirees, and comparison charts for health, dental and vision coverage.
- **The Tennessee Plan (POMCO/UMR) premium rates:** Will stay the same for the 2021 plan year. Premium letters will be mailed to these members toward the end of September.
- **Other mailings:** Letters mailed to those retiree or COBRA members who have dental only letting them know when they are able to make a change dropped Sept. 3.
- **Local Gov:** Other mailings: On Sept. 4, letters also went out to **local government retirees** telling them their premium levels and that a newsletter would be sent to them.
- Annual Enrollment PPT and PDFs: The Annual Enrollment PowerPoint presentations you can use to present 2021 benefits to your employees are posted on the <u>ABC webpage</u> by plan.
 - There are two different versions: a PPT and a PDF. You can customize the PPT presentation for your agency or department, but please do not change the premium or key benefit information.
 - The notes section is the "script" and may include additional information. You can share the PDF version directly with members.
- Annual Enrollment ABC Weekly Conference Call Schedule: ABC weekly calls will continue through Annual Enrollment.
 - **State and Higher Education:** Every Tuesday through Tuesday, Oct. 20.
 - **Local Education and Local Government:** Every Tuesday through Nov. 3.
 - Monthly calls resume on Tuesday, Nov. 10.
- Annual Enrollment Insurance Carrier Employee Webinars Start this Week: The first of our employee insurance carrier (also known as vendors) webinars will begin this week. These webinars give your employees the opportunity to hear directly from our insurance carriers about the products they offer and employees can ask questions.

- The schedule is on the screen. We shared a flier with you last week that you can send to your employees. **Please share the flier with your employees**
- The webinar at 11 a.m. CT will repeat at 3 p.m. CT each day.
 - Thursday, Sept. 10 Disability plan options (state/higher education only)
 - Friday, Sept. 11 Medical network options (BlueCross BlueShield & Cigna)
 - Thursday, Sept. 17 Davis Vision plan options
 - Friday, Sept. 18 Optum Bank HSA (all plans)/FSA options (state/higher education only)
 - Thursday, Sept. 24 Life Insurance plans (state/higher education only)
 - **Friday, Sept. 25 Dental options** (Cigna Prepaid & MetLife DPPO)
- Employees will have to click the date/time to register for the webinar they would like to attend. Registration is limited to 1,000 people per webinar, so we also plan on recording these sessions and posting the videos on our ParTNers YouTube page following the session.
- The webinar flier, WebEx login instructions and more details are posted on the <u>About</u> <u>Enrollment page</u>.
- State: #4Mind4Body Tobacco/Nicotine Free Living Webinar September 16: The next 4Mind4Body webinar will take place on September 16, from 11:30 to 12:30 CT. This session will cover Tobacco/Nicotine Free Living and help attendees increase awareness about the effects of tobacco products for users and non-users. Attendees will understand the impact of e-cigarettes, dip and second- and third-hand smoke. They will also identify ways to minimize exposure to tobacco products, learn how to prepare to quit and find resources to support tobacco free living.

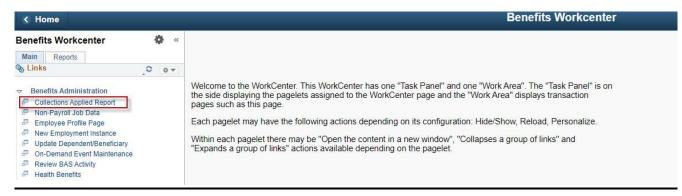
Benefits

- Flu Vaccination Flier and Information: Keith Athow, our director of pharmacy, HSA and FSA, joined us and went over the flu vaccination flier we sent you last Friday.
 - To find a participating vaccine network pharmacy, please go to <u>info.caremark.com/stateoftn</u> and scroll down to find "Network Lists" then click on the one that says Vaccine Pharmacies TN-WY (Tennessee-Wyoming).
- ActiveHealth Presentation: Scott Money, the director of account management with ActiveHealth, joined us and went over the wellness program for employees and answer any questions you may have.
 - In 2019, we paid out over 2.6 million in incentive dollars.
 - The ActiveHealth app is labeled as ActiveHealth in the app stores.
- **State/Higher Ed: MetLife Disability Presentation:** Today, Joe Carroll, the client consultant for national accounts and our new account representative for MetLife disability, went over the disability benefit options for members and to help answer your questions.
- **BlueCross BlueShield Presentation**: Amy Jordan, the major account coordinator for BlueCross, joined us and went over BCBST Network S and additional important information.

Operations

Higher Ed/Local Ed/Local Gov: Benefits WorkCenter – Collections Applied Link

Self Service	Quickly Find Knowledgebase Content	A Bright Idea
Human Resources	Avoid Long Wait Times	
Benefits	Easily Searchable Solutions	
Benefits News Benefits Support Info Benefits Workcenter	Submit Your Own Issues	Edison Self Service Help Desk



• Service Center Metrics/Customer Service Rating:

• August 2020:

- Tickets via Email: 1,032
- Tickets via Self-Service: 4,406
- Tickets via Phone: 4,579
- Tickets via Chat: 213
- Total: 10,230
- Satisfaction Score: 97.0%

• August 2019:

- Tickets via Email: 961
- Tickets via Self-Service: 4,631
- Tickets via Phone: 5,598
- Tickets via Chat: 289
- Total: 11,479
- Satisfaction Score: 97.0%
- We received about 1,000 less calls this year as compared to last August with emails and Zendesk tickets both increasing.

- As you know, we take the satisfaction of our customers very seriously and ask that you please complete the survey after your Zendesk ticket is resolved.
- If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy.
- Our satisfaction rate for June was 97.0%.

HIGHER ED ABC CALL QUESTIONS

- **Higher Ed:** For STD, will MetLife initiate the statement of health (SOH) form for those increasing coverage or enrolling for the first time during Annual Enrollment? If so, when is this done approximately, and how long do they have to provide the statement back? Also, does Edison provide the requirement for approval and information when enrolling?
 - Answer: For Annual Enrollment, MetLife will mail all SOH forms to those employees if they want to enroll or increase their coverage. Employees will have until Nov. 6 to mail, fax or email (postmark/timestamp) these back to MetLife. Once underwriting is complete, MetLife will let employees know if the application is approved or denied – the acknowledgement will not go through Edison. If someone newly enrolls or increases coverage, Edison will display a warning message letting them know that they will have to provide the SOH and Edison includes the November 6 deadline.

LOCAL ED ABC CALL QUESTIONS

- **Local Ed:** If an employee drops a plan with the HSA, what happens to the money in their HSA? If he is no longer contributing, does he lose the money he has in the HSA? I have an employee who has gotten married and he is wanting to change his plan when he adds his new spouse.
 - Answer: The member's HSA funds will stay with the member they do not lose the funds in the account and can continue to use the funds for qualified medical expenses if he/she switches from a CDHP to a PPO plan. However, if someone is enrolled in the Local CDHP and wants to switch to a PPO, the HSA funds will remain with PayFlex, not the new vendor for 2021, Optum Bank. The state has been paying the admin fees each month as long as the member is enrolled in a CDHP. If he/she decides to switch from the Local CDHP to the PPO, the member will become responsible for the monthly \$4.00 per month administrative fees and PayFlex will automatically deduct this fee from the member's HSA each month as long as it remains open. This causes the account to become a "retail account" between the member and PayFlex, and the State Group Insurance Program no longer has any role in this relationship. The member could continue to use the PayFlex debit card, but he/she will no longer be able to contribute or add any more money to the HSA.
 - If the member is going through a SQE, he/she will have 60 days to change their plan options, but there are certain requirements around dropping their CDHP. So the member would need to contact customer service so we can address his/her specific situation.

- **Local Ed:** I had an employee ask me about the age for the pneumonia shot. I was not sure if that was 60 years or if anyone could get one. Please advise?
 - Answer: Our plan covers the pneumococcal vaccine for anyone of any age, but the CDC typically only recommends the pneumonia shot for those 65 or older (or those who are younger with a health condition so their doctor recommends they need a pneumonia shot). Here is some additional information about pneumococcal vaccines: protect against pneumococcal disease, including infections in the lungs and bloodstream (recommended for all adults over 65 years old, and for adults younger than 65 years who have certain chronic health conditions). https://www.cdc.gov/vaccines/vpd/vaccines-age.html
 - Here is additional information about shingles vaccines: The two different shingles vaccines are covered at no cost for the following ages: Zostavax (older shingles vaccine) ages 60 and up; Shingrix (newer shingles vaccine) ages 50 and up and this is a 2-dose regimen.
- **Local Ed:** Is it possible to get a new vendor for Dental for 2022? I have had several complaints from employees about Met Life and the coverage?
 - **Answer:** We procure vendors through a state contract, and it is a rigorous process. We do know there will be a procurement for a Dental DPPO vendor for coverage starting Jan. 1, 2022, but we don't know who the vendor is going to be. Thanks for letting us know about the complaints, and you should let MetLife know, too.
- **Local Ed:** If we have shot nurse come in and do the flu shots, can an employee file the claim themselves for reimbursement? The shot nurse is a vendor on the list, so it would be covered?
 - Answer: If a vendor or pharmacy is on the vaccination list, this is the same as going in to the pharmacy but the nurse or provider coming in to give the shots will have to take the members' information that is on their member IDs and input it into their system back at the pharmacy just as if each person they provided a shot to had come into the pharmacy in person. CVS Caremark will not accept roster billing. The member's cost share for a flu shot is zero; there is no need for the member to file a claim themselves.
- Local Ed: Do members have to pay extra for ActiveHealth programs?
 - **Answer:** No, for members enrolled in medical coverage, they are available as a part of your benefits, at no extra cost.
- **Local Ed:** Will they have to be enrolled in benefits to be able to participate (in ActiveHealth wellness programs)?
 - **Answer:** Yes, they do have to be enrolled in medical benefits to access the ActiveHealth resources.
- **Local Ed:** Is the \$29 for gym fees per insured covered? Do you have to be on the health plan?
 - Answer: Members have to be enrolled in the medical plan and have their insurance with BlueCross to get the discount. For eligible enrolled members, each member would have to pay the \$29 enrollment fee plus the monthly fee. The gym benefit is a

discount program. The gym fees are not a covered medical expense under the health plan.

- **Local Ed:** I wish we had programs for those employees that have Diabetes already. Is this something that the insurance companies, both BlueCross and Cigna could look into covering.
 - Answer: Actually, ActiveHealth has a disease management program, and they do have programs for members who have diabetes. ActiveHealth will reach out directly to members if they are high risk, or members can reach out directly by calling 888-741-3390.
 - Follow up question: Okay, I thought that this (diabetes prevention program) was only for prediabetics, so I was unaware of this for ActiveHealth. I will pass this on to our employees.
 - **Answer:** The Diabetes Prevention Program (DPP) is offered through the medical carriers, BlueCross and Cigna. Those programs are for prediabetics.
- **Local Ed:** Has there been a change for 2021 regarding the Cost Share on dependents who have "double coverage" through other insurance in addition to the State's plan? Letters were mailed from Benefits Administration stating a possible change in 2021.
 - Answer: Yes, letters were mailed to some members. Members are still able to have double coverage so, there is no change to eligibility or the ability to obtain insurance either through the State if one individual is in Local Education plan and also enrolled in the State plan or a plan with another employer. What is changing is how the secondary claims will be processed. Members will have to pay the member cost share. Historically, in some cases the member cost share was not being charged. We have corrected this, and now the member will be charged the correct member cost share. There is more information, including the letter that mailed to members and coverage examples, at the bottom of the Carrier Information webpage.
- **Local Ed:** I have a question about the email that ABCs received regarding employee email addresses in Edison. Should we ONLY be updating the email addresses that were on the spreadsheet that we were sent or are we supposed to be supplying email addresses for all insurance eligible employees that are active in Edison?
 - Answer: We do need correct email addresses for all insurance-eligible employees in Edison. If you received a list, this is because we know the email address was no longer valid. If you have other individuals with email addresses that changed or are incorrect, please include those as well.
- **Local Ed:** I have an employee who is receiving emails for someone who is no longer employed here. Also her email address that was entered was a personal email address and not a school address. I have sent in a Zendesk ticket last week and still no response from anyone at BA?
 - **Answer:** If that ticket is still open and you have not heard anything, you can reply to the ticket and check back on the status. We will get back to you as soon as possible.

- Local Ed: The emails we are receiving about the Edison password expired my employees have asked about these and when they try to go in and change the password, they don't know their user ID. Do I have access to this? It is not the Edison ID, correct?
 - Answer: Correct, it is their Access ID. If they have logged in before, they do not need their Access ID. They can use the button "Retrieve Access ID". If they have never logged in, they can use the "First Time Login / New Hire" button. We are modifying TN_BA302_PERSON_AND_JOB query and adding the Access ID so that you can get it. The updated query should be available next Monday.
- **Local Ed:** I've had questions from employees who are wanting to know if/how air ambulance services are covered? Specifically if both Vanderbilt Lifeflight and AirEvac are covered?
- Additional question: Is there anywhere specific online that a member can view specific information on air ambulance coverage.
 - Answer: Air ambulance is covered in an emergency situation but has to be deemed a medical situation, and the member has to be taken to the nearest facility. They can't take the member back home, or to Vanderbilt, for example, if another facility is closer. If the member is already at a medical facility and being transferred, air ambulance has to be approved for use instead of ground transportation. As far as which companies, in an emergency, or if from a scene of an accident to a hospital, it is covered and there is no network requirement. If between facilities, it has to be approved in advance. The carrier would help direct you to an approved service and provider.
 - In addition to looking at the plan document, member handbooks and benefit grids, members can call the carriers to ask for help with finding providers. Benefits grids are on the <u>Publications webpage</u> under Insurance Comparison Charts.
 - Members can also search through the BCBS online find care tool. Type Air Ambulance and enter the city in which they want to search. The search begins at 25 miles but can be changed up to 100 miles. BCBS has confirmed that the specific providers questioned on the call are in the BCBS network (Vanderbilt does business as Rocky Mountain, AirEvac including Erlanger). Here is the listing of the air ambulance providers BCBS contracts with:

Air Medical Providers

- Contracted with effective dates of 1/1/2018
 - Air Medical Group Holdings (AMGH) operates 2 subsidiaries
 Med Trans Corporation: Erlanger Lifeforce; UT Lifestar
 - Med Trans Corporation:
 10 TN base locations
 - Air Evac EMS: operates in middle to west TN

 13 TN base locations
 - Air Methods operating as Rocky Mountain Holdings
 - Operates Vanderbilt Lifeflight
 - Operates in middle to west TN
 - 9 TN base locations
 - Memphis Medical Center Air operating as Hospital Wing
 Operates in west TN
 - Operates in west TN – 3 TN base locations
 - PHI Air Medical
 - Operates in Tri Cities/ East TN
 - 1 TN base location in Bristo

- **Cigna members** can view the air ambulance providers contracted with Cigna by searching the PDF Cigna directories for "air ambulance" or by searching online on the member page.
- For additional assistance, here is the contact information for Cigna or BCBST:

Cigna 800.997.1617 24/7 cigna.com/stateoftn

BlueCross BlueShield of Tennessee 800.558.6213 Monday - Friday, 7 - 5 CT bcbst.com/members/tn_state/

- **Local Ed:** I have had several employees having trouble updating their passwords in Edison and it is not giving them an option to update?
 - Answer: It is possible if they have changed school systems. They may have to log in as a new hire instead of retrieving their Edison ID and passwords, as they are the only one that can change their email address. We put a security profile change in place. If they do not see a link to reset their password, or a security image or phrase, this likely means they do not have a security profile set up and they will need to log in as a first-time user/new hire. BA is assisting with password resets now, and Edison will take over during Annual Enrollment. Also, they don't need to log in yet; they can wait until Annual Enrollment to reset their passwords. If they don't plan on making any changes during Annual Enrollment, they do not have to log in.
- **Local Ed:** When will the provider directories, member handbooks, and eligibility/enrollment guides will be updated on the publications page?
 - Answer: Our carriers are in process of updating the provider directories. Member handbooks will be updated by the first of November, and the Eligibility and Enrollment guides will be updated in November.
- Local Ed: Will passwords in Edison be reset again prior to Annual Enrollment?
 - **Answer:** We no longer send out mass password resets. Employees can reset their passwords by using the link in Edison. If they plan on making changes to their insurance, they can reset their password now or can wait until Annual Enrollment.
- **Local Ed:** Employees are being bombarded with emails concerning the changing of passwords. Is there a way to start sending those closer to Open Enrollment, possibly mid-September?
 - Answer: We have received additional information since the ABC call. We were originally told that the email was sent inadvertently to 1,900 employees. We have since found out that the email was part of a system update and was sent purposefully to 181,000 employees. They received emails for 10 days until or unless they reset their password. Those that didn't reset their password before the 10 days were up will be prompted to reset it the next time they log in. The Edison team also sent an email to this population to let them know this information Wednesday evening.

STATE ABC CALL QUESTIONS

- **State:** We have had employees tell us that MetLife is telling them that they cannot sign up for disability if they are on FMLA? They say it is due to the possibility that we have had paid FMLA that has not gone through. Do you have any information on this? During the course of the year, I had an employee was about to go out on parental leave and have a baby and wanted to file for disability. They told her if they put her on FMLA they would not be able to put her on disability due to the possibility that if our paid FMLA goes through, how would that money be paid back to MetLife?
 - **Answer:** MetLife is not aware of this with their service center and will take back and research.
- **State:** Regarding FMLA dependent care and day care, with people working from home and not requiring to pay for day care, if they stopped contributions to their dependent care FSA and cannot utilize the money in the account, is there any word on using this money so they won't lose it?
 - Answer: We don't have any guidance from the IRS on this. The IRS did provide some language in early May to allow employees to stop deductions, but we are not aware of any guidance to allow them to be refunded or carryover those funds into 2021, and claims will still need to be filed by April 30 of next year, just as with any other year.
- **State:** Will an agency still be able to request a vendor to come onsite to give flu shots this year?
 - Answer: At this point in the year due to COVID-19, most pharmacies are not likely going to come onsite as they have in the past. If you choose to do this, it is your responsibility to reach out to a pharmacy chain and make sure to verify that they are in the CVS Caremark Vaccine Network. They also cannot do roster billing so they have to collect each person's information from their ID card and file an individual claim, not do a roster billing, which is a list of names of those who received a shot.
 - You can find a participating vaccine network pharmacy by going to <u>info.caremark.com/stateoftn</u> and scrolling down to Network Lists and look for the TN-WY list (PDF).
- **State:** What network will HCA be in? Will it still be in Cigna LocalPlus?
 - **Answer:** No, HCA TriStar providers will be in Cigna OAP.

LOCAL GOVERNMENT ABC CALL QUESTIONS

- **Local Gov:** When will the link work to register (for the employee insurance carrier webinars)? I tried this morning and you could not register.
 - **Answer:** There may be some confusion with the links to register. You'll need to click the small AM or PM in the box with the date to register for the webinar session you would like to attend. If these links are not working, you may need to try a different browser.
- **Local Gov:** Will the ABCs be provided some extra post cards or access to them to have for new employees going forward to market the MyActiveHealth Website?

- Answer: Yes, you can contact Matt Berte, with ActiveHealth, and his contact information is found on the ABC <u>Vendor Contact list</u>, at 212.473.0483 or email <u>mberte@activehealth.com</u>.
- **Local Gov:** Does the no member cost share include co-pays? My question is relative to the telehealth services.
 - **Answer:** Yes. A member's cost share means copayments, deductibles and coinsurance.
- Local Gov: Will this presentation be available later?
 - **Answer:** The vendor presentations are on the <u>ABC webpage</u> under Conference Call Notes.
- Local Gov: Is there a side by side premium comparison from 2020 to 2021?
 - Answer: There is no side-by-side premium comparison from 2020 to 2021. However, the 2020 and the 2021 premium tables are available for comparison on the Partners for Health premium webpage at https://www.tn.gov/partnersforhealth/insurance-premiums.html
- **Local Gov:** Employees have been getting emails that Edison passwords are expiring. What does that mean?
 - **Answer:** We have received additional information since the ABC call. We were originally told that the email was sent inadvertently to 1,900 employees. We have since found out that the email was part of a system update and was sent purposefully to 181,000 employees. They got emails for 10 days until or unless they reset their password. Those that didn't reset their password before the 10 days were up will be prompted to reset it the next time they log in. The Edison team also sent an email to this population to let them know this information Wednesday evening. If they need assistance now, they can call the BA service center at 800.253.9981 during regular business hours. During Annual Enrollment, employees can call Edison to reset their password.

Materials and Communications

- Annual Enrollment Dates: A reminder about the Annual Enrollment dates.
 - **State/Higher Education employees**: Annual Enrollment starts Oct. 1 ends Friday, Oct. 16 at 4:30 p.m. CT.
 - **Local Education/Local Government employees**: Annual Enrollment starts Oct. 1 ends Friday, Oct. 30 at 4:30 p.m. CT.
 - **Retirees**: Annual Enrollment starts Oct. 1 ends Friday, Oct. 30 at 4:30 p.m. CT.
- **State:** HSA and FSA Employee Emails: We did want to let you know that emails went out this week to employees for whom we have email addresses in Edison who currently have HSAs, medical FSAs, limited purpose FSAs and dependent care FSAs. These emails include important information about these accounts for 2021.
 - If members have any questions about an email they received, they can send questions to <u>benefits.info@tn.gov</u>. This contact information is included in their emails.
- **Higher Ed, Local Ed and Local Gov: HSA Employee Emails:** We did want to let you know that emails went out this week to employees for whom we have email addresses in Edison who currently have HSAs. These emails include important information about these accounts for 2021.
 - If members have any questions about an email they received, they can send questions to <u>benefits.info@tn.gov</u>. This contact information is included in their emails.
- Annual Enrollment Website Information/Changes: As Debby told you last week, The Partners for Health website at <u>tn.gov/partnersforhealth</u> is updated for Annual Enrollment! We've made some improvements to put Annual Enrollment information front and center.
 - If you've visited, you've already seen that the homepage has a new look. Nothing was removed, but a few things moved and a few things were added.
 - The "sliding" images with links at the top are smaller now, making room for tiles that used to live farther down the page.
 - The tiles are the stacked blue boxes on the right-hand side that link to critical pages, like Annual Enrollment, Health and Other Benefits.
 - The Annual Enrollment sliding image is in the first position and links to <u>About</u> <u>Enrollment</u> when clicked.
 - The Annual Enrollment tile, or blue box, is in the first position for now so that it will be one of the first things members see. If they click this tile, they will be directed to the <u>Annual Enrollment page</u> with links to About Enrollment, Enrollment Materials and For Retirement.
 - In addition to the sliding image and the tile, Annual Enrollment pages can also be accessed from the top navigation and the footer.
 - If you click on Annual Enrollment in the top navigation or footer, you access a page that includes Annual Enrollment dates and links to the other Annual Enrollment pages, including <u>About Enrollment</u>, <u>Enrollment Materials</u> and <u>For Retirement</u>.
 - The <u>About Enrollment page</u> contains a wealth of information, including a link to the Annual Enrollment video. It also includes all the important updates for 2021, details on how to learn more by watching videos or attending webinars and how to enroll in Edison.
 - <u>Enrollment Materials</u> provided include pdfs of the Annual Enrollment newsletters by plan; important Edison information, insurance carrier webinar presentations and

insurance comparison charts for health options, dental and vision. When they are available, the employee webinar presentations will be added here.

- The <u>For Retirement page</u> puts all the information retirees need for Annual Enrollment in one spot for their convenience.
- As you assist members with Annual Enrollment, don't forget another very valuable online asset – our <u>Videos webpage</u>. We've put together new Edison videos for you that cover retrieving your access ID, logging in to Edison for the first time, requesting your Edison password and enrolling in Edison. And of course, educational videos are up to date and ready, including Insurance 101 and network vs. plan.
- For you, the ABCs, the Annual Enrollment presentations are on the <u>ABC webpage</u> by plan, including a PowerPoint presentation and a pdf of the presentation.
 - Also for ABCs, the vendor presentations are being posted on the ABC webpage under Conference Call Notes.
- Finally, the carrier webpages are updated. We often refer to these as microsites or splash pages. Please note that these are state of Tennessee plan specific. You can find links to all these pages on our <u>Customer Service webpage</u>. The link to the Customer Service webpage is in the top navigation.

• Annual Enrollment - Employee Webinars

• Employee Insurance Carrier (Vendor) Webinars: The NEW Insurance Carrier Webinar sessions continue this Thursday and Friday, Sept. 17 and 18, so please be sure to share the flier we sent to you with employees. Employees will click the date and AM or PM to register for the session they would like to attend.

Here is a list of the remaining webinars:

Sept. 24: Life insurance options (**state/higher ed employees only**) Sept. 25 Dental plan options (Cigna Prepaid and MetLife DPPO)

- After the webinar session topic has occurred, we will post a recording on the <u>ParTNers YouTube page</u>, under the **2020 Employee Webinars** playlist.
- The webinar flier, WebEx login instructions and more details are posted on the About Enrollment webpage.
- Benefits Webinars start September 23: Also, employees can join an informational webinar! Employees can learn about 2021 benefits and get answers to all of their questions. Each presentation date covers the same information. So, employees can find a day and time (all are CT) below that works best them and register by clicking the link in the flier we sent on Friday. Employees will receive a confirmation email with a calendar reminder. If they have trouble with registration, please email <u>benefits.administration@tn.gov</u>.

State and higher education (all Central time)

Wednesday, Sept. 23: 11 a.m. - noon Thursday, Oct. 1: 2-3 p.m. Monday, Oct. 5: 1-2 p.m. Friday, Oct. 9: 9-10 a.m. Wednesday, Oct. 14: 1-2 p.m.

Local education and local government (all Central time)

Wednesday, Sept. 23: 2:30-3:30 p.m. Thursday, Oct. 1: 3:30-4:30 p.m. Friday, Oct. 9: 1-2 p.m. Wednesday, Oct. 14: 2:30-3:30 p.m. Wednesday, Oct. 21: 3:30-4:30 p.m. Monday, Oct. 26: 10-11 a.m.

• **State:** #4Mind4Body Tobacco/Nicotine Free Living Webinar

- The 4Mind4Body webinar Tobacco/Nicotine Free Living occurred September 16, from 11:30 to 12:30 CT. We sent the flier you can share with employees on Friday. State employees were also sent an email yesterday morning via the state email distribution.
- This session covered **Tobacco/Nicotine Free Living** and helped attendees increase awareness about the effects of tobacco products for users and non-users. Attendees learned about the impact of e-cigarettes, dip and second- and third-hand smoke. They also identified ways to minimize exposure to tobacco products, learned how to prepare to quit and locate resources to support tobacco free living.

Benefits

- **State/Local Government:** Coordination of Benefits (COB): For those who are enrolled in two health plans at the same time, COB rules decide which insurance plan pays your claims first, how much each plan will pay, and how much you will pay.
 - Double Coverage means you have insurance under two medical plans. For example:
 - you might be enrolled in the State Group Insurance Program* plus another employer plan; or
 - you might be enrolled in two State Group Insurance Program* plans.
 - (e.g. as an employee in the State plan and as a dependent, spouse or child, in the Local Education plan)
 - Benefits Administration (BA) has prepared a letter and examples explaining COB, Double Coverage and why plan members with Double Coverage may notice a difference in claims processed on or after January 1, 2021. The letter and examples are both found on the Partners For Health website under <u>Carrier Information</u>.
 - If members want to make a change to their double coverage they can do so during Annual Enrollment, by talking to you, or by talking to the representative who manages the other employer coverage.
 - See COB information, including links to the letter and examples at <u>https://www.tn.gov/partnersforhealth/health-options/carrier-network.html</u>
- **Higher Ed/State:** Securian Financial Life Insurance Presentation: Michael Kretman, marketing specialist with Securian Financial, joined us and went over the life insurance plan options available for state and higher education employees.
- All plans: Cigna Medical and Dental DPPO Presentations: Sharon Tansil, Cigna's director of client and customer engagement, joined us and went over the Cigna network options, LocalPlus and OAP and additional information for members who choose one of these networks, and then she went over the Cigna Prepaid Dental plan option.
- **FYI -** Today's vendor presentations are posted on the <u>ABC webpage</u> under Conference Call Notes.

Operations

- State/Higher Ed: New ABC Training
 - September 16: State/Higher Education: 1 3 p.m. CT
 - Sessions 1 & 2 will be conducted on September 16

Here is how to sign up for training:

1. Log in to Edison.

2. Navigate to ELM Menu >ELM>Employee Self Service>Learning>Search Catalog>Enter ABC in the "Search the Catalog" field>Click the "Search Activities" button.

3. Locate the training you are interested in.

- 4. Locate the specific dates you would like to attend the webinar.
- 5. Click Enroll to the right of the training session you wish to participate in.
- 6. Click Submit Enrollment in the bottom lower left corner.

7. Once you have enrolled, you will see the following message under your name at the top of the page.

You have successfully enrolled in ABC Training Webinar/Workshop. This change in status will be updated on the All Learning page.

HIGHER EDUCATION QUESTIONS

- **Higher Ed:** When did the medical underwriting requirement begin for a spouse? I did not have to do this for my spouse (a new hire and not for term life). My understanding is you have employee only, spouse only, or employee/spouse, you could have the child rider, when did this change?
 - Answer: Medical underwriting is always required for spouse coverage. AD&D never requires evidence of insurability and there is the same coverage tiers.
- **Higher Ed:** If not approved for more vol term life insurance coverage, do you automatically default the coverage to the minimum?
 - **Answer:** You would be defaulted back to the life insurance amount you currently have. If you have guaranteed coverage and you are approved for the \$5,000 increase it will go to that amount of coverage, but you have to go in and elect the \$5,000 increase.
- Higher Ed: Will information regarding the guaranteed issue increases be mailed to participating members again?
 - **Answer:** Yes, these letters will mail to members' homes and should arrive on or around the first of October 1.
- **Higher Ed:** Can an employee cover just the child for voluntary life insurance, or just the spouse, without covering themselves? Also, do you require proof that the person being covered is really the employee's legal child or spouse? Are children required to have EOI submitted during Annual Enrollment?
 - Answer: Either the employee or the spouse has to have the voluntary term life coverage for the child to have coverage an employee cannot cover the child

unless the employee or spouse has coverage. The employee does not need to participate in the voluntary term life program to choose spouse voluntary coverage.

- Regarding proof that the person covered is the employee's legal child or spouse, the employee signs the application that they are a legal dependent and if the employee were to file a claim and he/she were not, the employee may have to refund premiums. An eligible child does not need to provide evidence of insurability.
- **Higher Ed:** If you are enrolled in Cigna LocalPlus (LP) and you travel outside of Tennessee and you need care, you would still have coverage if LocalPlus is not available where you are through the Open Access Plus; it doesn't matter that I am not enrolled in the Open Access Plus network?
 - Answer: Correct, if you are in the LP network and, for example, you were in Kentucky and it doesn't not have a LP network through Cigna, you would have access to OAP providers. Or, you are in a part of Texas and while Texas does have some locations that are in LP not all of the state is a LP market. You can go to mycigna.com and enter the city and state and it will let you know if LP is offered – it will automatically give you providers in LP. You can call our service center for help.
- **Higher Ed:** If there is no pediatric dentist in your area and you need for your child to see a pediatric dentist, can you get approval to go to one that is out of network for innetwork coverage?
 - **Answer:** If a Pediatric Dentist is not available within the customer's home zip code area, Cigna Dental will provide a referral for the customer to receive covered services at the non-network Pediatric Dentist at the in-network benefit level.
 - The customer needs to reach out to Cigna for the referral and they will be responsible for their Patient Charge noted on the Patient Charge Schedule and Cigna Dental will pay the difference between the dentist's billed charge and the customer's Patient Charge for the covered service.
- **Higher Ed:** Memphis has no endodontist. So they have let us go to another MetLife endodontist and the claim is processed out-of-network and then in-network because one is 70-miles away from Memphis.
 - Answer: If you have a situation and you need a specialist and you are out of a certain mileage, we will try to find you one within a reasonable mileage. If the provider is not available within a reasonable area, we can approve services at the innetwork level.
- Higher Ed: I have an employee who received a letter from BA that she or one of her dependents are enrolled in one or more plans and that coordination of benefits apply. She doesn't have secondary coverage on her, her spouse or dependents. She called the service center and was told that several letters were sent out incorrectly. Is there anything that she needs to do?
 - Answer: We are not aware of any letters that were sent incorrectly. If you could send in the person's name and ID, we can follow up. If that employee does not have other coverage in addition to the state of Tennessee coverage, then he/she does not need to worry about the coordination. For more information about Coordination of Benefits info, including links to a copy of the letter and examples, on the ParTNers

For Health website under the "Health Options" tab and "Carrier Information" at <u>https://www.tn.gov/partnersforhealth/health-options/carrier-network.html</u>.

- We'll also have someone on the calls next week to go over Coordination of Benefits (COB).
- **Higher Ed:** Will there be another medical webinar or are the vendors open to doing another one school-specific?
 - Answer: No, we won't have another employee medical webinar, but you can contact the vendors directly at the information found on the <u>Vendor Contact list</u> and try to set something up virtually with them directly.
- **Higher Ed:** When employees click SUBMIT at the end of making changes during Annual Enrollment, did you say they'd get a preliminary email indicating they'd made changes?
 - Answer: No, they will not get an email when they submit their changes. They will get an email after we finalize the enrollments at the end of the enrollment period. After they submit, they will see an Enrollment Preview statement that can be viewed, printed, or saved.
- **Higher Ed:** What about for the HSA/FSA? Will employees receive a confirmation email?
 - Answer: Higher Education employees will enroll in flexible benefits through the Optum Bank Portal at <u>optumbank.com/Tennessee</u>. This enrollment process does not include entering an email address, so employees would not receive an email confirmation. However, employees will see an onscreen enrollment that they can print for their records, if they like. For HSA, higher ed employees will enroll through Edison, and they will receive a confirmation email if they choose that option. (Note that the email from Edison will not contain flexible benefit elections, which are done outside of Edison on the Optum website itself.)
 - A welcome letter and two cards will be sent via USPS, in two separate mailings in mid-December. If you are enrolled in both an HSA and an L-FSA, you will receive one card to use for both accounts. If you are enrolled in only one produce, an HSA, FSA, or L-FSA, you will receive one card.
- **Higher Ed**: Is MetLife Dental definitely the dental vendor? I saw where it was still pending.
 - **Answer:** Yes, they are definitely the vendor for 2021. We had to go to press prior to final approval. The information on our website is updated and correct.
- Higher Ed: When will the new pharmacy formulary be available?
 - Answer: It will be posted on the <u>CVS Caremark microsite</u> and the <u>ParTNers for</u> <u>Health pharmacy webpage</u> on Friday, Sept. 18.
- **Higher Ed:** Are the Optum Bank enrollment dates the same as Edison enrollment dates?
 - Answer: Yes, Oct. 1-16.

LOCAL EDUCATION ABC QUESTIONS

- **Local Ed:** I did not see the 2021 BCBS and Cigna Handbooks, I may have overlooked those, but can you tell me if these are available on the ABC website? I apologize if this is something I have missed.
 - **Answer:** 2021 handbooks will be posted on Nov. 1 as they are not provided until after the end of Annual Enrollment. There are no big surprises, no benefit changes.
- **Local Ed:** What day will Optum talk to ABCs about the HSA changes? Is that next week?
 - Answer: Yes, Optum Bank will join calls on Sept. 22 to talk about HSAs.
- **Local Ed:** Will the employees still be able to delete their emails during the Annual Enrollment?
 - **Answer:** Yes, if they have an email in the My System Profile, they can delete it. We don't encourage them to do that, however, there is nothing we can do to stop them from deleting it.
- **Local Ed:** Is the Edison site working, specifically the forgot password link? Is it showing for everyone now so they can obtain a password reset?
 - Answer: The forgot your password link will only show for those who have logged in the past few years. We have updated the password videos. If employees do not see the link to reset their passwords or a security image and phrase, then they should follow the steps to sign in as a new user. They may have never logged in, or they logged in before the security process was implemented, or they have changed agencies and in this situation we have wiped out their security profiles since their one-time password email address is no longer valid if they were using a work email. If you have someone who is in this situation, please have them sign in as a new user. Here are links to the updated videos:

How to reset your password:

- <u>https://www.youtube.com/watch?v=S1WRLE_N_BU&t=1s</u> For retirees – how to reset your password:
- https://www.youtube.com/watch?v=O1_sjXZ4kuk&t=2s
- **Local Ed:** Recently I have received three to four Edison secure emails for new hires. Do we know why? They seem to all include the same information with Edison log in instructions, but was just curious why we are receiving multiple emails.
 - Answer: Please send us an email to <u>benefits.administration@tn.gov</u> or submit a Zendesk ticket so we can research as we were not aware this was occurring.
- **Local Ed:** Why would employees be allowed to delete emails, when we as ABC's have to supply email addresses?
 - Answer: There isn't a way for us to prevent them from doing this. Emails are stored under My System Profile and it is not part of the enrollment process. They would have to navigate to this page to delete their emails.
- **Local Ed:** I also received Edison log in instructions twice for all new hires. It just started yesterday.

- Answer: Thanks for letting us know. You can send us a Zendesk ticket with their employees' names and IDs and we will get back to you.
- **Local Ed:** About emails, can Edison not do something to keep employees from deleting an email, changing, but not deleting?
 - **Answer:** No, to our knowledge they cannot.
- Local Ed: Can we add an email on the Modify a Person page?
 - Answer: Yes, you can update a person's email on the Modify a Person's page. There are multiple places emails are stored. The one we use is in My System Profile. We move emails from Modify a Person to My System Profile once a month, and we will do this prior to Annual Enrollment, or you can submit a spreadsheet with updates and changes for your employees.
- **Local Ed:** BA is aware that we still have employees that are benefits eligible who do not have email addresses? Is there a way that we should indicate this upon hire?
 - Answer: Yes, we are aware, and we have previously said we encourage you to set up an email address so we can send information directly to them. They can use a personal email or a work email account. If the employee refuses, instead of putting your own email address in, we prefer you use something like <u>noemail@noemail.com</u> so it is clear the employee does not have one.
- **Local Ed:** When I hire someone that existed in Edison (at another district) I don't receive Edison log in instructions for them. They don't always know what to do. What information would you suggest I give them since I didn't receive Edison log in instructions to send them. I could create some for them?
 - Answer: The best thing you can do is to direct them to the <u>Partners For Health</u> <u>YouTube page</u> and the video for How to Log in to Edison for the First Time. This video will walk them through the process. When an employee changes agencies, we clear out the security profile and they must sign in again as a new user.

STATE ABC QUESTIONS

- **State:** If you have a spouse covered at the maximum of \$30,000, does the face value automatically drop to \$15,000 when the spouse reaches over the age of 55?
 - **Answer:** The overage will not reduce at age 55. The coverage amount depends on the amount they are eligible for.
- **State:** Do you receive notice to increase your amount (guaranteed issue of \$5,000) or does employee have to request through Securian?
 - **Answer:** If eligible, the employee will receive a mailer from Securian notifying them about this but the employee does have to take action to make this election. Mailers will be delivered on or around Oct. 1.
- State: What happens to this insurance when an employee retires?
 - **Answer:** There are a couple of options available. Employees can port up to 50% of term life insurance at retirement or they can convert to an individual policy.

Converting is more expensive but you can keep all of the coverage. Or employees can port half of the policy and convert the other half.

- **State:** Is the gym benefit only for the member or can dependents and/or family be included?
 - Answer: Employees have to be enrolled in a Cigna network for Healthy Rewards which includes the gym benefit; this includes medical and dental plans. Note, for Active and Fit, each individual has to enroll in the membership; one membership does not cover a family and each member has to enroll.

LOCAL GOVERNMENT ABC QUESTIONS

- **Local Gov:** Under the Cigna Prepaid dental plan, do you have to have a referral to a specialist for a covered 7-year old dependent for care?
 - **Answer:** For the Cigna Prepaid dental plan, they have extended pediatric dental coverage to age 13. If you have a child who is seeing a primary dentist and needs care outside of primary care for specialty care, the primary dentist will take care of those referrals.

Materials and Communications

- Annual Enrollment Updates
 - Annual Enrollment for all employees and retirees starts next Thursday, Oct. 1. Here are the dates:
 - State/Higher Education employees:
 - Annual Enrollment starts Oct. 1 ends Friday, Oct. 16 at 4:30 p.m. CT
 - Local Education/Local Government employees:
 - Annual Enrollment starts Oct. 1 ends Friday, Oct. 30 at 4:30 p.m. CT
 - Retirees:
 - Annual Enrollment starts Oct. 1 ends Friday, Oct. 30 at 4:30 p.m. CT
 - **AE PowerPoints with Audio:** We have posted Annual Enrollment PowerPoints with audio to the <u>ParTNers for Health YouTube page</u>. This is the same PowerPoint you will find on the ABC webpage and audio has been added to the slides. Below are links and are included in the Friday ABC email.

AE State/Higher Education Employee PowerPoint with Audio: <u>https://youtu.be/cfCgpkargmM</u>

AE Local Ed/Local Gov Employee PowerPoint with Audio: https://youtu.be/g9u_3BJx6Cc

- Annual Enrollment Employee Webinars: The final Insurance Carrier webinars were held this week.
 - Sept. 24: Life insurance options (state/higher education employees only)
 - Sept. 25 Dental plan options (Cigna Prepaid and MetLife DPPO)
 - After the webinar session topic has occurred, we will post a recording of these webinars on the <u>ParTNers YouTube page</u>. The webinar flier, WebEx login instructions and more details were posted on the <u>About Enrollment webpage</u>.
- Employee informational benefits webinars: Employees can also join these webinars to learn about 2021 benefits, changes and get answers to all of their questions. Each presentation covers the same information. So, employees can find a day and time (all are CT) below that works best to register. Employees will receive a confirmation email with a calendar reminder. If they have trouble with registration, they can email benefits.info@tn.gov

State and higher education (all Central time)

Thursday, Oct. 1: 2-3 p.m. Monday, Oct. 5: 1-2 p.m. Friday, Oct. 9: 9-10 a.m. Wednesday, Oct. 14: 1-2 p.m.

Local education and local government (all Central time)

Thursday, Oct. 1: 3:30-4:30 p.m. Friday, Oct. 9: 1-2 p.m. Wednesday, Oct. 14: 2:30-3:30 p.m. Wednesday, Oct. 21: 3:30-4:30 p.m. Monday, Oct. 26: 10-11 a.m.

- A flier with registration links was sent last Friday for you to share.
- Employees can go to the <u>About Enrollment page</u> to find the flier to register, <u>WebEx</u> <u>login instructions</u> and more information.
- **Local Ed/Local Gov: OPEB Response Update:** Our Data/Program Integrity team would like to thank you for your response to OPEB collection this year.

Benefits

- **Higher Ed and Local Ed: Coordination of Benefits (COB):** For those who are enrolled in two health plans at the same time, COB rules decide which insurance plan pays your claims first, how much each plan will pay, and how much you will pay.
 - Double Coverage means you have insurance under two medical plans. For example:
 - you might be enrolled in the State Group Insurance Program* plus another employer plan; or
 - you might be enrolled in two State Group Insurance Program* plans.
 - (e.g., as an employee in the State plan and as a dependent, spouse or child, in the Local Education plan)
 - Benefits Administration (BA) has prepared a letter and examples explaining COB, Double Coverage and why plan members with Double Coverage may notice a difference in claims processed on or after January 1, 2021.
 - COB the letter and examples are both found on the Partners For Health website under <u>Carrier Information</u> found here: <u>https://www.tn.gov/partnersforhealth/health-options/carrier-network.html</u>
 - If members want to make a change to their double coverage they can do so during Annual Enrollment, by talking to you, or by talking to the representative who manages the other employer coverage.
- **Davis Vision Presentation:** Larry Sheehan, the director, client management of national accounts with Davis Vision joined us and went go over the vision benefits for employees (**local** education/location gov: if offered by your agency).
- **CVS Caremark Pharmacy Presentation:** Lee Shackelford, the director of strategic accounts with CVS Caremark, joined us and presented information about pharmacy benefits and resources for members.
 - Find the updated CVS/caremark splash page: <u>info.caremark.com/stateoftn</u>
- **State/Higher Ed: Optum Bank HSA and FSA presentation:** Linnie Stelk, relationship manager with Optum Bank, joined us today to talk about HSA and FSA options, information available to members and to answer your questions.
- **Local Ed/Local Gov: Optum Bank HSA presentation:** Linnie Stelk, relationship manager with Optum Bank, joined us today to talk about the HSA option, information available to members and to answer your questions.

HIGHER EDUCATION QUESTIONS

- **Higher Ed**: Is the new formulary more restrictive, loss of generics, etc.?
 - Answer: Any generic is going to be covered. There are some brands that there are some alternatives to those brands. We're not excluding any drugs, we're just requiring— that members require a prior authorization through the medical necessity process on some medications and other products starting 1/1/2021. Generics are preferred. There will be a targeted mailing that will go out that lists the drugs that are impacted by this formulary change in mid-November. Only the people who are affected by this change will receive that letter.
- **Higher Ed:** If enrolled in Medicare A only and still working with State and enrolled in CDHP, can you continue having an HSA? If not, do you all notify those turning 65 they must drop the HSA?
 - Answer: When employees enroll in Edison and they choose the CDHP, there's an acknowledgement they have to read and to check that they are not enrolled in Medicare, or other non-higher deductible health plan coverage (even as a dependent on their spouse's health plan). If you do become enrolled in Medicare during the year, you don't have to drop the CDHP plan coverage, but you would no longer be able to make contributions to your HSA and you must prorate any contributions that you make to your HSA during the year since you will have not been eligible to contribute to your HSA during the time that you were enrolled in Medicare.
- **Higher Ed:** For employees hired through the year, will they be able to access the Optum Bank system to enroll or will there be a form to complete for new hires?
 - Answer: With the FSA option, there will be a form for them to complete. The online enrollment will be available 10/1-10/30. This portal is only open during the enrollment period. After that, they will use a paper form, and they should contact their agency benefits coordinator
- **Higher Ed:** Some dental and vision services are health plan covered. Can the limited purpose FSA (L-FSA) pay out-of-pocket costs associated with those covered expenses?
 - Answer: The only expense that your limited purpose FSA can be used for are those that are dental or vision related. In other words, those provided by your dentist, optometrist, ophthalmologist, etc.
- Higher Ed: What is the transition period for rollover amounts from PayFlex to Optum?
 - Answer: The up to \$500 in carryover funds on the medical FSA and limited purpose FSA will take extra time this year before they are available in members' accounts. The reason is because PayFlex will be processing the 2020 runout claims that members can still file from 1/1/2021-4/30/2021. At that time, PayFlex will complete the final processing of all claims filed toward the end of April (of which there will be lots) during May and early June 2021. They will then send a bulk file of all the carry-over amounts to Optum Bank in late June. Optum will then add the carry-over amounts to members' 2021 Optum FSA or L-FSA balances. No one will receive their carryover funds until late June or July 1. We are encouraging everyone to spend down their carryover funds this year so that they do not have to wait for these funds. In early January, you'll only have access to your Optum Bank funds you've elected to contribute for 2021.

- **Higher Ed:** Please review the procedure for recent hires for Annual Enrollment; those recently hired on or before 9/1/2020 with benefits beginning 10/1 will have access to Edison for Annual Enrollment? Those hired on or after 9/2 with benefits beginning 11/1 or later will need to complete a form and submit to their ABC to be forwarded to BA via Zendesk?
 - Answer: It doesn't have to do with the hire date, it's about the date the benefits are processed. The day after the new hire enrollment is processed, an enrollment will be opened for AE. If the employee waits until the end of the 31-day new enrollment period to submit their elections, that's when we would need the paper form for annual enrollment. It depends on when the new hire benefits are keyed.
- **Higher Ed:** Will those electing a dependent care FSA account receive a debit card as well?
 - Answer: No, they will not. As is the case under PayFlex, the DC-FSA does not have a debit card. You'll file online or with a paper form next year with Optum Bank just like you do with PayFlex.
- **Higher Ed:** Is that in any communications to members regarding run-out claims (for the FSA)?
 - Answer: Everything we sent out to our own state employees was shared with Holly at the TBR and Pam at UT so they could consider whether they wanted to tweak or share similar emails with all ABCs and/or their employees

LOCAL EDUCATION QUESTIONS

- **Local Ed:** Is it still possible to have my maintenance prescriptions synced so they can all be filled at the same time? If so, how should I request that?
 - **Answer:** Yes. It depends on the pharmacy you use. We suggest you call the pharmacy or when you go to the pharmacy the next time, ask them to sync it. Sometimes you'll get a partial fill.
- **Local Ed:** Going back to new formulary, did you say that all members will get a letter about the new formulary in November, or will it just go to those who are affected due to med they are taking?
 - Answer: Members who are currently taking a medication that will no longer be covered in 2021 will receive a customized letter in mid-November from CVS Caremark. It will list the affected (no longer covered) medication as well as the covered 2021 medication. Their prescribing physician will also receive a similar letter. Both letters will explain the steps to take if the prescriber believes that the member should stay on the non-covered medication. This will provide a pathway to *possible* continued coverage. CVS Caremark will request clinical records from the physician in order to make this determination. Benefits Administration does not make the determination if a medication is covered or whether the plans will pay for it.
- **Local Ed:** Will ABCs be contacted directly on how to send the payroll deductions (for HSAs) or will we be responsible for reaching out?

- Answer: We are working on getting Optum Bank documents on the Partners for Health ABC page that are the same or similar to what you've used for PayFlex. We are waiting on a couple of others that will correlate for Optum Bank. You can access via phone or email the ABC support center. Reach out to us for any information you need. Documents are on the <u>ABC webpage</u>, under the PayFlex drop-down, under Optum 2021. <u>Vendor Contact list</u> on the ABC webpage also has information for Optum Bank.
- **Local Ed:** What happens to the HSA money in the PayFlex Accounts of the current HSA members?
 - **Answer:** We're working on it with vendors now. We ask that you please stay tuned, and we'll share it with you. We've found out that we have to request approval from each health savings account holder before we move the funds. We plan to survey all existing HSA account holders this fall, and for those who indicate that they want their HSA balance (cash account plus any investments) moved to Optum Bank, we will work with both PayFlex and Optum to initiate that transfer. The plan at this point is that PayFlex HSA debit cards and those HSA funds can continue to be accessed through February 7, 2021. On February 8, 2021, the debit card and account will be deactivated (and not accessible in any way) so that PayFlex can liquidate the funds and start the transfer process. We are hoping that the transferred balances will be added to members' Optum Bank HSAs sometime the first week of March 2021. For members who do not respond to our survey or who indicate that they do not want their PayFlex HSA funds transferred, those funds will remain in their PayFlex HSA account and the member will become responsible for the monthly administrative account fee, which will deducted automatically each month from the account.
- Local Ed: How soon can we set up our account through payroll (for HSAs)?
 - **Answer:** That happens after the accounts are established mid-Dec. The accounts can't accept the contributions until after Jan. 1. It could happen as soon as the first payroll period.
- **Local Ed:** What if you have employees pay a month ahead and you hold it out of previous months check for that current month (HSA). We pay in Dec. for Jan.
 - Answer: When you make the contribution to the HSA, it will have an effective date on the file. It will need to be a 2021 effective date because it's not effective until 1/1/2021. So as long as the effective date works with the plan year, it doesn't really matter because when you get to the end of the year, the same year applies. Go to the ABC webpage and click on the PayFlex drop down box. Inside that, look for the Optum Bank 2021 section, and you can find the contribution spreadsheet there. Optum Bank is working between now and the end of the year to get as many correlating documents as was there for PayFlex loaded as possible. On the file when you send it to Optum, you will note the pay date and the contribution year. No file can be sent to Optum that is for a 2020 or prior contribution year, since Optum is not effective until 2021.
 - **Follow-up question:** What if they are already enrolled in HSA, we will fill out the new form correct and send it in? Put 1/1/2021 on the form? The pay date that it comes out of is 12/15/2020.

• **Answer:** The same rules would apply on the contribution file. The ABC would indicate both the payroll period and contribution year (which should be 2021).

STATE QUESTIONS

- State: What did you say about Lasik surgery?
 - Answer: If you enroll with Davis Vision, we have partnered with a network of LASIK specialists so you can get a discount with an in-network specialist. To access that discount, you first have to call Davis Vision to get the referral. We will get you an appointment with a LASIK specialist near you that's in-network. You'll go there for an assessment because there are different types of LASIK. If you decide to go forward with the surgery with the in-network specialist, it will be provided at a deep discount. I can't tell you the exact discount since it depends on the type of LASIK surgery, but it's typically 40 to 50 percent.
- **State:** If an employee is enrolling in benefits for the first time during Annual Enrollment but has an HSA from former employee insurance and the employee plans to enroll in our CDHP plan, what will the procedure be for combining the HSAs?
 - Answer: Transfers are very common. If anyone has an HSA at any provider and wants to transfer balances, the IRS allows transfers without any limitations, as long as it's transferred from account to account. The first step is to contact your current provider and then you'll need your new account number and routing number after Jan. 1. So, you'll have to wait until 2021. Wait until early 2021 when your Optum HSA is set up and you have your Optum HSA account number and relevant details. Then contact your existing HSA custodian and tell them that you want to transfer your HSA funds to a new HSA. They should have a transfer form that you will complete (including adding your Optum HSA account number) and send it in to them. This will allow for a direct transfer of the funds.
- **State:** How complicated will it be for members to have access to their HSA funds in 2021 to pay for expenses incurred in January?
 - Answer: The Optum Bank accounts will be accessible Jan. 1 and seed funds from the state should be added around January 5th. State employee contributions for plan year 2021 won't be available until paydays January 15th and January 31st, however, so your Optum HSA balances in January will be low. Members will still have access to the PayFlex HSA balances and debit card through February 7, 2021. The state is working with PayFlex on when those funds will be transferred to the Optum Bank account if you elect to do so. We intend to survey all existing HSA accountholders this fall. Members who answer "yes" that they want the state to work with PayFlex to transfer their HSA balance to Optum should see those funds in their Optum HSA sometime the first week of March (and they will not be able to access their PayFlex HSA funds for approximately 3 weeks in February 2021, starting February 8, so that the funds can be transferred.) Members who say "no" to the transfer of their PayFlex HSA funds OR who do not respond to our survey will have their funds stay with PayFlex and they will become responsible for paying the monthly account administrative fee.

LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** How will the upcoming webinars be different than the webinars finishing up tomorrow?
 - Answer: The vendor webinars end Friday with dental. With these webinars the carriers are covering the benefits of their specific products. These webinars were all recorded and you can find them and/or direct your employees to them on our <u>Partners YouTube page</u> under the 2020 Employee Webinars playlist. The employee benefits webinars starting tomorrow cover 2021 benefits options, changes and premiums.
- **Local Gov:** We haven't had anyone choose the CDHP so there hasn't been a need for the HSA but I do have a question. Is there a hosting fee from Optum or is this simply provided as a benefit if the employee is funding it?
 - Answer: The HSA automatically is provided to an employee who enrolls in the Local CDHP option. If an HSA is opened, the State Group Insurance Program pays Optum each month for the monthly account fee as long as someone stays enrolled in the Local CDHP. If they leave employment, terminate, or switch to a PPO in a future year, they would then become responsible for the monthly HSA monthly account fee and these funds would be taken directly out of their HSA.
 - **Optum Bank added:** The employer pays the fee on behalf of the account holder. If the employee leaves employment, they become a retail account holder and pay the fee.
- **Local Gov:** What is the monthly account fee (for HSAs)?
 - Answer: There is not a monthly account fee for account holders who are enrolled in a the CDHP or Local CDHP health plans. The state group insurance program is paying the monthly account administrative fee as long as a member is enrolled in the CDHP or Local CDHP. Members only have to pay this fee if they leave employment, terminate, or move to a PPO plan in a future year and keep an HSA balance remaining with Optum.

Follow up question: So, is the retail account fee a percentage based on account balance?

Answer: The retail fee is \$3.75 per month typically when the balance is below \$3.000.00. If above \$3,000.00, it is zero.

- **Local Gov:** Does Optum's website offer receipt uploads for transactions that are made by the member? And possibly categorize them, e.g., pharmacy, doctor bill, etc.
 - Answer: Yes, it does. That can be accessed by logging into the account or using the mobile app.
- **Local Gov:** Will there be training for ABC's to set up the employer portion with Optum?
 - Answer: There is no training set up at this time. There is an ABC support center and you can call or email. There will also be information on the <u>ABC webpage</u>. We have posted some information and we will post more, just like we did with PayFlex. It will be in the same place. We may have presentations during calls in October or November and if needed, will set up additional ABC trainings.

- **Local Gov:** If employee leaves CDHP for 2021, will their funds transfer from PayFlex to Optum?
 - Answer: We have emailed all current HSA account holders with plans for transfers. We have gotten additional legal guidance and we cannot require transfer of funds from PayFlex to Optum Bank. We are still working on specifics on what it will look like and when it will occur. We are working with vendors on the best way to do this. For now, the plan is this: We intend to survey all existing HSA accountholders this fall. Members who answer "yes" that they want the state to work with PayFlex to transfer their HSA balance to Optum should see those funds in their Optum HSA sometime the first week of March (and they will not be able to access their PayFlex HSA funds for approximately 3 weeks in February 2021, starting February 8, so that the funds can be transferred.) Members who say "no" to the transfer of their PayFlex and they will become responsible for paying the monthly account administrative fee.
- **Local Gov:** We had an employee get married. Spouse does not work and is going to school. They do not have insurance. The spouse has to take the same insurance as the employee, correct?
 - Answer: That is correct. If the employee enrolls the spouse, the spouse will be on the exact same plan. You need to provide the marriage certificate and complete the Enrollment Change Application in order to add the spouse due to the recent marriage event. The effective date due to marriage can be the date of the marriage or the first of the following month. If the employee waits until Annual Enrollment to add the spouse, the employee can enroll through Employee Self Service or you can create an eBenefit form and that coverage will begin 1/1/2020.

Materials and Communications

- Annual Enrollment Updates
 - Annual Enrollment for all employees and retirees started Thursday, Oct. 1.
 - Here are the dates:
 - State/Higher Education employees:
 - Annual Enrollment starts Oct. 1 ends Friday, Oct. 16 at 4:30 p.m. CT
 - Local Education/Local Government employees:
 - \circ Annual Enrollment starts Oct. 1 ends Friday, Oct. 30 at 4:30 p.m. CT
 - **Retirees**:
 - Annual Enrollment starts Oct. 1 ends Friday, Oct. 30 at 4:30 p.m. CT
 - **Employee Informational Benefits Webinars Continue:** Our benefits webinars where employees can learn about the 2021 benefits, changes and ask questions continue.
 - We sent an email to employees for whom we have an email address in Edison about these webinars on Sept. 29.
 - Each presentation covers the same information. So, employees can find a day and time (all are CT) that works best to register by clicking the links in the flier we have sent to you.
 - Employees will receive a confirmation email with a calendar reminder. If they have trouble with registration, please email <u>benefits.info@tn.gov</u>

State and higher education (all Central time)

Thursday, Oct. 1: 2-3 p.m. Monday, Oct. 5: 1-2 p.m. Friday, Oct. 9: 9-10 a.m. Wednesday, Oct. 14: 1-2 p.m.

Local education and local government (all Central time)

Thursday, Oct. 1: 3:30-4:30 p.m. Friday, Oct. 9: 1-2 p.m. Wednesday, Oct. 14: 2:30-3:30 p.m. Wednesday, Oct. 21: 3:30-4:30 p.m. Monday, Oct. 26: 10-11 a.m.

- Insurance Carrier Webinar Recordings: We have posted recordings of the insurance carrier webinar sessions on the <u>Partners for Health YouTube page</u> under the 2020 Employee Webinars playlist for employees to watch at their convenience.
 - Go to Videos webpage > click ParTNers for Health YouTube channel
- Vendor Contact List Reminder: The Vendor Contact list found on the ABC webpage is only for ABCs to use for materials, benefits fairs and to contact our vendors. Please do not share this document or forward out to your employees or members.
 - We have contact information for employees for all of our participating vendors on our ParTNers <u>Customer Service webpage</u>.

<u>HIPAA</u>

• **HIPAA Privacy and Security Review:** Last Friday, we sent a HIPAA Compliance flier for your review and reference. Chanda Rainey, our director of HIPAA Compliance, joined us and gave a HIPAA Privacy and Security review.

Benefits

- **Optum EAP and Behavioral Health Presentation**: Matt Cramer, senior client services manager with Optum, joined us to cover Behavioral Health and EAP benefits.
- MetLife DPPO Dental Presentation: Joe Carroll, client consultant for national accounts with MetLife, went over the MetLife DPPO plan and information for employees.

Operations

- Local Ed/Local Gov: Annual Enrollment Reminders:
 - **Local Ed and Local Gov:** ABCs can use Benefit eForm to assist their active employees during Annual Enrollment.
 - **Local Ed and Local Gov:** Local education and local government agencies are not authorized to alter a retirement insurance record in Edison. All enrollments, changes and terminations to retiree coverage must be processed by the Benefits Administration Service Center.
- **ABC Annual Enrollment Message Board:** Benefits Administration will be introducing a message board on the ABC page during Annual Enrollment. The message board will provide helpful tips, a daily tracker, password info and queries to run for the week. The message board is a quick reference tool that will assist ABC during Annual Enrollment. It went live Thursday, October 1st.
- Virtual Trainings: If you missed or would like to review the virtual trainings from August, you can find them on the <u>ABC webpage</u> under 2020 Virtual Trainings. We have video presentations for all three sessions and the slides from each session posted.

HIGHER EDUCATION QUESTIONS

- **Higher Ed:** They are available virtually (EAP and BH services)?
 - Answer: Yes, you can access EAP and behavioral health (BH) services via virtual visits. For behavioral health, virtual visit copays are the same as an office visit. For EAP, prior authorization is required, and members have five visits at no cost. Members can go to <u>HERE4TN</u> and click on the Virtual Visits tile found on the homepage for more information.
- **Higher Ed:** When are (Optum Behavioral Health) cards being mailed out? And where is this (Optum Behavioral Health/EAP) presentation or when will it be made available to us?
 - Answer: ID cards were mailed out to all enrollees the beginning of 2020 and will continue to be mailed out to those newly enrolled in medical coverage. You can also download a pdf of your card from Here4TN.com. Go to: Members/Claims Login/Benefits & Claims/View ID Card. You will have to register if you have not already set up an account. If you have set up your account, then sign in to access your card. The HERE4TN presentation is posted on the ABC webpage under Conference Call notes.

- **Higher Ed:** Are there any plans to update the system so that you can go out and see your family's panoramic X-rays dates?
 - Answer: MetLife members can log into MyBenefits and have access to claims where you can see your EOB, so you can see what services were rendered on what date.
- **Higher Ed:** Does the system (MetLife MyBenefits site) work better in a certain browser?
 - Answer: It is mobile-optimized, so there should not be one browser that works better than another. For the MyBenefits site you can go to: <u>http://www.mybenefits.metlife.com/StateofTN</u>
- **Higher Ed:** Am I correct that employees really won't need their Edison ID to get their Access ID or accessing Edison? They would only need it for LifeBenefits (website)?
 - Answer: It depends on if they have ever logged in before or if they have logged in since they have worked for your institution. If they need to log in as a new user and set up their security profile, they will need their Edison ID to set up their account and retrieve their Access ID. They will need their Access ID to log into Edison to enroll or make changes.
- **Higher Ed:** The Optum Bank site is not live yet? It comes up as an error. When I visited it yesterday, it had that '404' error page can't be found. Originally, the link in the newsletter was giving that error.
 - Answer: The main website has been live since Oct. 1; however, we did check the state/higher education newsletter and the Optum Bank website link was showing an error and has been fixed. The link/site to enroll in FSAs went live on Oct. 1. You can find that link here by going to the main Optum Bank website: https://www.optumbank.com/tennessee.html
- **Higher Ed:** The MetLife state microsite is having issues as well. I am using Chrome and had problems yesterday and today?
 - Answer: We have verified that the site is working correctly here is the link: <u>https://www.metlife.com/stateoftn/</u>
 - We did verify that a link in the state/higher education newsletter was not working correctly and it has been updated.
 - If you are still having issues, you may try clearing your cache or you may want to try a different browser.

LOCAL EDUCATION QUESTIONS

- **Local Ed:** If an employee emails me to get their Edison ID for annual enrollment, can I email their Edison ID to them?
 - Answer: You can use email to communicate with insurance members. You should use a secure email function. You will need to check with your agency IT department to see if you can do that. Do not include PHI in subject line.
- Local Ed: Can the information in these slides be accessed online?
 - **Answer:** Yes, we have posted the PDF of this presentation, and all vendor presentations, on the <u>ABC webpage</u> under Conference Call notes.

- **Local Ed:** If an employee comes to me for help with making changes to their health insurance, I can make those changes for them in Edison through Benefits eForm without them doing anything?
 - **Answer:** You can make changes through a Benefits eForm in Edison. We do ask that you have them fill out and sign an enrollment form, so you have a record of the changes they requested.
- **Local Ed:** What is a good query to use for retirees? For example, if they are changing tiers, dependents coming off, etc.
 - **Answer:** Retirees should appear on any query you run for active employees. Some queries have a prompt for Department ID so retirees will show separately. If you have access to the Department ID, then you can run any of the queries for retirees.
- **Local Ed:** Remind me again on new hires that we just hired on 8/1 how will they access their Access ID in Edison? Will I need to run the query in Edison that was sent to ABCs this week to get that for them, or is there a better way for the employee to directly get this?
 - Answer: They can retrieve/access their Access ID themselves in Edison. We now have the green benefit button that says "Benefits Annual Enrollment" on the Edison homepage. If employees click that button, there is an option for New Hires/First Time Login. This is an option for a new hire enrollees to get their Access ID.
- **Local Ed:** It seems all my folks are having trouble with changing/setting up a new password. When following the link stating they are a first-time user, they seem to receive the message that they have entered incorrect information that their information does not match Edison information. Are others having this issue?
 - Answer: We haven't heard any widespread issues. Employees can contact the Edison Help Desk for help logging in. Here is the phone number: 866-376-0104 or 615-741-HELP (4357).
- **Local Ed:** I have a document I got off of the website that is called Employee Self Service instructions. Would this be helpful when they try to make open enrollment changes?
 - Answer: Yes, we have a document out there with ESS instructions, here is the link: <u>https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/ess_helelg_AE_20.pdf</u>
 And we have a video that walks employees through the process that will help them make their changes. Here is the link to all of our videos: https://www.tn.gov/partnersforhealth/videos.html

STATE QUESTIONS

- **State:** For Talkspace, will the employee need to contact EAP to receive the authorization code to utilize the premium functions?
 - Answer: Yes, for members to utilize their EAP benefits for Talkspace, an EAP authorization is required and can be obtained by calling 855-Here4TN or visiting <u>Here4TN.com</u> and submitting for an authorization on the homepage. Note, there is not a premium function for Talkspace. You can access the Sanvello premium version that is applicable to Sanvello and does not require an authorization. For Talkspace, to use EAP benefits, you do require an authorization.

- State: In the MetLife slides, what does "Jar Openers" mean?
 - Answer: MetLife has branded giveaways every year, and that's what was chosen this year for benefits fairs. Typically, our vendors would be having more of a need for giveaways at benefits fairs. If you are having an event or a need for any small giveaways, you can contact the vendors (Vendor Contact list) and they may have items and materials they can send to you.
- **State:** If an employee doesn't want to make any changes to their benefits, they don't have to as Benefits Administration will automatically roll their benefits over to the next year correct?
 - **Answer:** In general that is correct, with the exception for those enrolled in the HSA, medical FSA, Limited Purpose FSA or DC-FSA, as these employees will have to make elections in Edison for those plans.
- **State:** I have a 120-day employee who is enrolled in retiree dental. Does he need to do anything if he is not making any changes to his benefit?
 - Answer: No, retirees do not do anything if they want to keep their same coverage.

LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** Have there been any changes to HIPAA due to COVID-19 such as reporting to employers?
 - Answer: No, there are no changes with COVID. However, different parts of the guidance were put in place that people were not used to when it first came out. A lot of health department information that has been released, some people thought it was covered by HIPAA and it was a health violation.

The HIPAA Privacy Rule recognizes the legitimate need for public health authorities and others responsible for ensuring public health and safety to have access to protected health information that is necessary to carry out their public health mission. Therefore, the Privacy Rule permits covered entities to disclose needed protected health information without individual authorization: To a public health authority, such as the CDC or a state or local health department, that is authorized by law to collect or receive such information for the purpose of preventing or controlling disease, injury or disability. An employer is not recognized as a public health authority and <u>does not</u> have the right to receive information without an individual authorization. This has not changed since the pandemic.

- **Local Gov:** There are placeholders on the website for "Employee Webinar Presentation Coming Soon!" When will these be ready?
 - Answer: We have posted links to PDFs for the employee benefits webinars on the <u>Enrollment Materials page</u>. We do also encourage employees to join one of the live webinars that will be held during the month of October. Here is a link to information and registration for the Annual Enrollment information webinars: <u>https://www.tn.gov/content/dam/tn/finance/fabenefits/documents/AE_employee_ed_webinars.pdf</u>
- **Local Gov:** We have a local in-network Urgent Care facility that is charging a visit or service fee to employees that are coming to be tested for COVID. It was my understanding that any visit that is COVID related was free. Is that correct?
 - Answer: If it was COVID related and the facility charged the member, the member needs to call the carrier to possibly have the claim reprocessed. We have heard that

some urgent care facilities have charged members up front and have refused to file a claim with the member's carrier. The member will need to follow up with the carrier, and possibly the facility to get a copy of the bill or claim to have a claim reprocessed. Once the claim is processed/reprocessed and the EOB shows no member cost share, the member will have to contact the Urgent Care facility for any refunds owed.

- **Local Gov:** We have an employee who currently has employee+child medical insurance and family MetLife dental. She is planning on dropping the medical coverage but would like to know if she can keep her family dental coverage only?
 - **Answer:** Yes, she can keep her family dental coverage. There is no requirement to be enrolled in the medical coverage to have the dental coverage for active employees.
- **Local Gov:** Back in May of this year, we were informed Tristar/HCA hospitals and doctors committed to be in the Cigna Open Access Plus network through the end of 2021. Has this changed?
 - Answer: This has not changed This is still the correct information.

Materials and Communications

• Annual Enrollment Updates

- **Employee Informational Benefits Webinars Continue:** Employees can still sign up for the employee informational benefits webinars to learn about 2021 benefits, changes and ask questions.
- Thank you for sharing the flier we have sent as we have had hundreds of employees already participate in these webinars. You'll see the schedule on the screen and we'll continue to hold these during Annual Enrollment for your members. Please continue to share the flier with employees so they can register, and/or direct them to the <u>About</u> <u>Enrollment page</u> for details.
- We will also post a recorded version on our Partners YouTube page.

State and higher education (all Central time)

Friday, Oct. 9: 9-10 a.m. (now complete) Wednesday, Oct. 14: 1-2 p.m.

Local education and local government (all Central time)

Friday, Oct. 9: 1-2 p.m. (now complete) Wednesday, Oct. 14: 2:30-3:30 p.m. Wednesday, Oct. 21: 3:30-4:30 p.m. Monday, Oct. 26: 10-11 a.m.

• **Insurance Carrier Recorded Webinars:** A reminder, for those who couldn't join the individual employee insurance carrier (vendor) webinar sessions – employees can watch them on the <u>Partners YouTube page</u> under the <u>2020 Employee Webinars playlist</u>.

Benefits

- **Higher Ed: CDHP/HSA Enrollment Clarification:** All employees will make their health plan election (including CDHP) in Edison, but if they want to contribute to their HSA via payroll deduction, they should see you, their ABC.
- **State: CDHP/HSA Enrollment Clarification:** All employees who choose to enroll in the CDHP must make their health plan election in Edison **and** also tell us how much they want to contribute to their 2021 HSA via payroll deduction in Edison.
- **Local Ed/Local Gov: Local CDHP/HSA Enrollment Clarification:** All employees will make their health plan election (including Local CDHP) in Edison, but if they want to contribute to their HSA via payroll deduction, they should see you, their ABC, and you can work with Optum Bank to set up your payroll deductions.

Operations

• Audit Queries: We are in the process of updating the audit queries - TN_BA133 and TN_BA265. The new queries will have enhanced functionality including the ability to see changes that were saved but not submitted. The new audit table is in the Edison system and is recording all of the changes, but the queries are not quite ready yet due to Edison system performance issues this week and last week. The current queries in Edison will show changes made just for this annual enrollment period. We are working to make another query available with all the historical information.

• Service Center Metrics/Customer Service Rating:

• September 2020:

- Tickets via Email: 913
- Tickets via Self-Service: 3,671
- Tickets via Phone: 6,729
- Tickets via Chat: 444
- Total: 11,757
- Satisfaction Score: 94.8%

• September 2019:

- Tickets via Email: 809
- Tickets via Self-Service: 4,227
- Tickets via Phone: 6,031
- Tickets via Chat: 459
- Total: 11,526
- Satisfaction Score: 96.3%
- We received about the same number of interactions this year as last year with phone calls increasing by 700 and tickets decreasing by a little over 500.
- As you know, we take the satisfaction of our customers very seriously and ask that you please complete the survey after your Zendesk ticket is resolved.
- If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy.
- Our satisfaction rate for September was 94.8%.

HIGHER EDUCATION QUESTIONS

- **Higher Ed:** Employees also cannot set up direct deposit with Optum Bank until December, correct?
 - Answer: In order to set up direct depot to an HSA, the account needs to be open. Employees will need the routing number and the account number to provide information to the bank funds flow into and out of. The account is not set up until the enrollment file is ready. This will be in mid-December. A welcome kit will go out to employees in mid-December and it will include the account number and routing number. That is when the account can be set up.
- **Higher Ed:** Is there an HSA employee contribution form for 2021 available to our employees? Many of my employees are asking for that form.
 - Answer: On the Partners for Health website on the <u>ABC page</u> there is a sample Optum Bank Employee Payroll Deduction Form in the Optum Bank (2021) drop down box
- Higher Ed: Do we use the same contribution (HSA) form we've always used?

- Answer: You can continue to use the same PayFlex form you have been using. Or, there is also a 2021 sample Employee Payroll Contribution Form from Optum Bank on the ABC webpage under Optum Bank 2021.
- **Higher Ed**: I received an email from PayFlex requesting a file. We don't have to provide it do we?
 - **Answer:** Yes, you do need to provide the information. PayFlex is requesting the information so they can send files without issues.
- **Higher Ed:** We thought employees had to create an account in Optum but it looks like they can't do it yet. Are we waiting on the state to submit the enrollments for FSA/HSAs next year?
 - Answer: The only thing employees should do at this point is enroll in the CDHP in Edison or the FSAs on the Optum Bank website. The HSA and FSA accounts will be created later. Right now, we are not opening accounts. Employees are just enrolling.
- **Higher Ed:** And they enroll in FSA in Edison?
 - Answer: No, for higher education, you enroll in the FSA through the Optum website, <u>www.optumbank.com/tennessee</u>. The link is prominently displayed at the top of the homepage where higher education employees click to enroll in FSAs. (<u>Only</u> state employees enroll in FSA in Edison.)
- **Higher Ed:** Does the HSA form need to be filled out each year or just whenever you want to make a change in the amount contributed?
 - **Answer:** For higher education employees, the form does not need to be filled out each year unless the employee wants to make a change. The HSA payroll contribution will carry over from the year prior.
- **Higher Ed:** When will Optum Bank provide instructions on how to pull reports from their system for 2021?
 - Answer: We have included this information on the <u>ABC webpage</u> (now under the Optum Bank 2021 header), including guides, for anyone who wants to start taking a look at that now. We are also talking internally about providing more information on these calls. We can prepare information to do that. The ABC webpage has file feed and more information. We will continue to add more helpful information. You will receive login credentials via email to log in and take a look at the portal. ABCs will not have portal access for a while. For additional questions, please contact the ABC Service Center at Optum Bank: <u>accountservices@optum.com</u> or 1-800-294-6620, Monday-Friday, 7 a.m.- 6 p.m. CT
- **Higher Ed:** We had employees try to create an account for their FSA next year and they couldn't. I called Optum Bank and they are showing Austin Peay as an inactive group.
 - **Answer:** We asked the ABC to send in a Zendesk ticket to have it routed to Heather Pease. This situation has been resolved.
- **Higher Ed:** If an employee wants to lower their term life, do they send form directly to Securian?
 - **Answer:** Yes. Employees will need to log in to Securian and lower the voluntary term life amount from there.

- **Higher Ed:** HSA elections carry over from year to year without new elections? They have increases in limits as well.
 - Answer: For higher education employees, the form does not need to be filled out each year unless the employee wants to make a change. The HSA payroll contribution will carry over from the year prior. Just know that the maximum HSA contributions for 2021 are \$3,600 for those with employee only coverage and \$7,200 for those with any other coverage type. If any of your employees are maxing out their HSA for retirement or future medical expenses, they may want to be able to increase their contribution. Unless you advise them and allow them to change their election, their current payroll contributions will continue.
- **Higher Ed:** The Saved But Not Submitted query, is it working for this enrollment period? I didn't understand that part.
 - **Answer:** Yes. It is working. What I was referring to is the audit queries. They never had "saved but not submitted;" however, they will have that information going forward. The new query picks up changes that happened before, during and after hitting submit.
- Higher Ed: Can you tell us the saved but not submitted query name again?
 - Answer: TN_BA219_OE_NOT_SUBMITTED
- **Higher Ed:** There have been calls to Securian to make changes for Annual Enrollment, but they have been routed back to us to complete forms, etc. Would you mind contacting them to discuss this please? We would prefer this to be handled directly with Securian.
 - **Answer:** We followed up with Securian, and Securian's Customer Service has been retrained to ensure calls related to voluntary life do not come back to ABCs.
- **Higher Ed:** For retirees, if they are making a change and retiring as of Jan. 1, 2021, do they just complete the form? There is not an ESS for them right?
 - Answer: Yes, if the employee's active insurance is going to terminate on or before January 1, 2021, and if the employee wants to make a change during the Annual Enrollment period, he/she will need to complete the Annual Enrollment retiree participant form, if not already enrolled as a retiree. If he/she still has an active record and tries to make a change in their active record, it won't automatically transfer to the retiree record, so we recommend that they send in the Annual Enrollment retiree form in this scenario.

LOCAL EDUCATION QUESTIONS

- **Local Ed:** Has Edison had issues since Annual Enrollment started? I keep getting emails/calls from employees stating that they cannot get anyone to answer. Just letting you know, not sure if this is true or not, but would like to know if they are experiencing any issues.
 - Answer: Yes, there have been several issues. We did hear about login problems last Thursday due to statewide network issues. Those have been resolved. There were intermittent issues last Friday morning. They are resolved now, and they were fixed before we could send an email. Yesterday, the state had VPN issues which affected staff's ability to get into the network. It is possible people had trouble yesterday as

well. As of right now everything is working properly. If they need password help, they should get through to the Edison Help Desk now.

- **Local Ed:** I am getting copies of birth certificates, etc., proof of joint ownership, etc. from Benefits Administration (BA) for those who are making online changes during open enrollment. Is there anything for me to do other than to keep a copy of the documents in their employee files?
 - Answer: If you are receiving notices from BA asking for dependent verification such as marriage certificates and birth certificates, we need a copy. You just need to send it back to us via Zendesk so we can finalize the event on our end. However, if the employee submitted dependent verification via Employee Self Service in Edison, our scanning team is loading it in Zendesk for our active service center to review, and you're getting the email as notification that we have dependent verification on file. This does not require any action from you. If it is determined that we're missing information or the submitted information is invalid, we will reach out to you.
- **Local Ed:** Do our employees have to do anything if they are not changing their amounts being sent (for HSAs). Also, when will we do set up with Optum Bank?
 - Answer: For Local Education and Local Government employers: unless one of your employees fills out a new payroll deduction form and you take action to pull a different amount from their paycheck and send it pre-tax to the vendor each year, it will not change. However, whatever amount has been sent to PayFlex pre-tax via payroll contributions will NOT continue over to Optum Bank. You will need to set up payroll contributions with Optum Bank using the forms on the ABC webpage and ask your employees how much they want taken from their 2021 paychecks (you can use the 2021 payroll deduction form on the ABC webpage, under the Optum Bank (2021) header) and you will need to set up this payroll deduction with Optum as they are a new vendor. For assistance setting up payroll contributions with Optum Bank, you can also contact their ABC Support Center at 1-800-294-6620, Monday-Friday, 7am-6pm CT.
- **Local Ed:** I need to find out who I need to talk to about HSA insurance plan; we have employee's inquiring about this and we have never had anyone on this plan.
 - Answer: Please send a Zendesk ticket and ask that it be directed to Heather Pease, I can talk to you in detail about that and am happy to work with you. There is also information on the website on the <u>CDHP/HSA Insurance webpage</u>. And there is also a <u>video on our website</u> about the CDHP/HSA (2020 CDHP).
- **Local Ed:** So do we need to have our setup with Optum Bank done in December? Do we have a date where we need to have this in place?
 - Answer: Yes, if you have employees enrolling in the Local CDHP and you offer payroll contributions you will need to work with Optum Bank to get that done in December. You need a plan in place by end of year. You can reach out to Optum Bank via email or phone, and they can walk you through it. Optum Bank's number is 800-294-6620. There is also a guide on the <u>ABC webpage</u>, now under the **Optum Bank (2021)** header. For Local Education and Local Government employers: unless one of your employees fills out a new payroll deduction form and you take action to pull a different amount from their paycheck and send it pre-tax to the vendor each year, it will not change. However, whatever amount has been sent to PayFlex pre-tax via payroll contributions will NOT continue over to Optum Bank. You will need

to set up payroll contributions with Optum Bank using the forms on the ABC webpage and ask your employees how much they want taken from their 2021 paychecks (you can use the 2021 payroll deduction form on the ABC webpage, under the Optum Bank 2021 header) and you will need to set up this payroll deduction with Optum Bank as they are a new vendor. For assistance setting up payroll contributions with Optum Bank you can also contact their ABC Support Center at 1-800-294-6620, Monday-Friday, 7 a.m. – 6 p.m. CT.

- Local Ed: Can you repeat the website for Optum?
 - Answer: <u>www.optumbank.com/Tennessee</u> (This website is for Optum Bank HSAs only; it is not the website for the Optum behavioral health and EAP benefits).
- **Local Ed:** Two of our employees enrolling in dental and vision this year (this is our first year to be with the state's vision and dental) who have been enrolled in the health insurance for many years, have received the message that they need to provide dependent eligibility on their spouse for dental and vision coverage. Is this necessary?
 - Answer: They should not have to provide it again if the employee's spouse is already covered on medical. But I am concerned because that message should only display if the dependent is not enrolled in any plans currently. Please send a Zendesk ticket so we can look at this.
- **Local Ed:** The dependent verification is happening on my employees as well. I helped one yesterday who had the message displayed to send in dependent documents and the dependent is currently already covered through medical?
 - Answer: Please send in the example in Zendesk so we can take a look at that as well.
- Local Ed: I have helped several employees who are trying to reset their passwords. When they ask for an email, it does not send an email. When I go look, there is no email listed in Edison. They were not on the file from the state sent requesting email addresses. If I go in and add email in Edison will that correct this so they can get the password reset email?
 - Answer: No. It is only available for the employee to add when they do set up or edit their account. If they cannot log in and they don't get the email, they will need to call the Edison help desk for a password reset at 866.376.0104. When they get in to Edison, they should add their email in their "My System Profile" page under the one-time password email section.
- Local Ed: Which query do we run to get Access IDs for members?
 - Answer: TN_BA302_PERSON_AND_JOB

STATE QUESTIONS

- State: Do any of the Edison issues affect this group?
 - Answer: No, we are not aware of any right now at all. All Edison issues from last week, plus yesterday's VPN issue, have all been resolved.
- **State:** Is there an update on how or when the transfer of funds from PayFlex to Optum Bank will take place?

- Answer: For the HSA, beginning on Jan. 1, 2021, we are changing to a new administrator, Optum Bank. In November, we will email all HSA participants and ask them to answer yes or no for their approval to move their HSA funds from PayFlex to Optum Bank. If they agree, we plan to have PayFlex move the funds the first week of March. For those who say no, the HSA funds will stay with PayFlex, and the member will be responsible for the monthly account service fee. Members can continue to access and use their existing PayFlex HSA funds through February 7, 2021. On February 8, the current PayFlex HSA debit cards will become inactive. On this same date, February 8, HSA funds will start to move to Optum Bank for those who agreed to move the funds, and the funds will take several weeks to move. We anticipate that members who agree to have their PayFlex HSA funds moved to Optum will have those funds in their Optum HSA toward the end of the first week of March 2021.
- For the FSA and LFSA, it allows for a \$500 carryover. Any balance remaining in your medical FSA or limited purpose FSA over \$500 on 12/31/2020 will be forfeited. The carryover funds of \$500 or less will stay with PayFlex until April 30, so PayFlex can finish 2020 claims, which have to be finished by April 30. After this date, PayFlex will transfer funds to your Optum FSA or L-FSA by July 1, 2021. For those enrolling in the FSA or L-FSA for 2021, those funds will be available upfront at the beginning of the year with Optum Bank, and members will have a debit card for those funds. We encourage people to spend down the money in their PayFlex FSA and L-FSA so they don't have to wait for these funds by July 1, 2021.

LOCAL GOVERNMENT QUESTIONS

- Local Gov: Do we have to contact Optum to do the employee deposit?
 - Answer: Yes, you would want to contact Optum Bank to set this up for 2021. Here is contact information: <u>accountservices@optum.com</u>, and the ABC Support Center number is 800-294-6620 M-F, 7a.m. - 6 p.m. CT.
- **Local Gov:** If your employees do not have changes, are there any requirements for them to do?
 - **Answer:** No, if they do not have any changes, then they do not have to log into Edison and you do not have to fill out a Benefit eForm.
- **Local Gov:** How can we verify that an employee made changes for their 2020 health insurance?
 - Answer: The best way is to look at their records individually in Edison or use the audit queries. The audit queries are the TN_BA133 (for individuals) or TN_BA265 (for agencies). The current BA133 and BA265 queries in Edison just show changes for this year. We are working on new versions of the queries so that you can see historical changes as well. We will share more information about those queries as soon as they are available.
- **Local Gov:** If an employee wants to employer to make the changes for them, can we do that?
 - Answer: Yes, employees can fill out an <u>Enrollment Change Application</u>, and you can complete the Benefits eForm for them. However, you cannot log into Edison for them.

- **Local Gov:** If the employee makes changes thru employee self-service (ESS) in Edison, does the ABC still need to complete an Enrollment Change Application?
 - Answer: No, you only need an Enrollment Change Application if you are keying the change in Benefit eForm.
- Local Gov: What is the process for employees that are hired after Annual Enrollment?
 - Answer: It will depend on the timing of their hire. You can process the Benefit eForm for their hire event, and the following day, the Benefit eForm will be open for the Annual Enrollment event. If it is closer to the end of Annual Enrollment, you will have to fill out an Enrollment Change Application and submit that, but only if the employee has additional changes for 2021. If he/she doesn't have changes, you don't need to submit a form.
- **Local Gov:** Can you give those (audit) query numbers again please? This year we are allowing our employees to use the self-service option. I need the information for our internal system so I can make changes for 2021.
 - Answer: The TN_BA133 and TN_BA265 queries. They have the same general information. The TN_BA133 query is at the employee level, so if you want to see all changes, will want to run the TN_BA265 as it lists changes made by all employees.

Communications and Materials

- Annual Enrollment Updates
 - **State/Higher Ed:** Annual Enrollment Employee Informational Webinars: As you know Annual Enrollment ends this week. There is just one remaining webinar, on Wednesday, Oct. 14, for state and higher education employees.
 - Employees can click the link in the flier to register or you can direct them to the <u>About</u> <u>Enrollment page</u> for details.
 - We have posted a recorded version on our Partners YouTube page, under 2020 Employee Webinars, titled Annual Enrollment Educational Webinar for State and Higher Ed Employees.

State and higher education (Central time) Wednesday, Oct. 14: 1-2 p.m. (completed)

- Local Ed/Local Gov: Annual Enrollment Employee Informational Webinars: Employees can still sign up for the employee informational webinars to learn about benefits, changes and ask questions. We'll continue to hold these during Annual Enrollment for your members. Please continue to share the flier with employees so they can register, and/or direct them to the <u>About Enrollment page</u> for details.
- We have posted a recorded version on our Partners YouTube page, under 2020 Employee Webinars.

Local education and local government (all Central time) Wednesday, Oct. 14: 2:30-3:30 p.m. (completed) Wednesday, Oct. 21: 3:30-4:30 p.m. Monday, Oct. 26: 10-11 a.m.

- **Updated Marketplace Notice:** Marketplace notices have been updated by plan type. You can find them on the <u>ABC webpage</u> under PPACA Documents. These are updated in October, and they include the current premium and the increase for the coming year. We will also update it again in November.
 - ABCs should provide the marketplace notice to all new employees within 14 days of their start date. (*Per the Employee Checklist explain the marketplace letter and provide the web address or a printed copy if requested.*)
- State: #4Mind4Body Social Isolation and Loneliness Webinar: In partnership with Optum, the #4Mind4Body webinar series continues with the next session, Social Isolation and Loneliness, being held Tuesday, Oct. 20, from 11:30 a.m. to 12:30 p.m. CT.
 - Social isolation and loneliness can have a very negative impact on an individual's mental and physical health. Identifying the signs is an important step. Learn how loneliness differs from social isolation along with the importance of social connectedness.
 - Pre-registration is required. The session will **not** be recorded. An email will be sent to state employees via Outlook on Monday. You can <u>share this flier</u> with your employees.

Benefits

• **Higher Ed: Optum Bank Workshop** – **CHANGE - CANCELED:** The Optum Bank Workshop we had scheduled for higher education ABCs on Nov. 5 will be canceled. We will have a refresher presentation during next week's Oct. 20 conference call about member communications and timeline.

- Local Ed/Local Gov: Agencies Offering HSA Payroll Deduction Contributions: In most years, local education and local government employees do not have to fill out paperwork to change their HSA contribution if they do not want to change the amount. However, whatever amount has been sent to PayFlex pre-tax via payroll contributions will NOT continue over to Optum Bank. You will need to set up payroll contributions with Optum Bank using the forms on the ABC webpage and ask your employees how much they want taken from their 2021 paychecks. You can use the new 2021 payroll deduction form on the ABC webpage, under the **Optum Bank (2021) header**, and you will need to set up this payroll deduction with Optum Bank as they are a new vendor.
 - Once the applicable agency employee contributions are set up with Optum Bank for 2021, <u>then</u> the employee will never have to make a change for the next several years <u>unless they choose to</u>.
 - For assistance setting up payroll contributions with Optum Bank, you can contact their ABC Support Center at 1-800-294-6620, Monday-Friday, 7 a.m. to 6 p.m. CT.
 - Local Ed/Local Gov: Optum Bank Workshop: We plan to have an Optum Bank Workshop that will go over information for you as we transition from PayFlex to Optum Bank for HSAs. The date and time is below. We'll have more information for you as we get closer to this date:
 - Local Ed: Nov. 6 at 10 a.m. CT
 - Local Gov: Nov. 6 at 12 p.m. CT

Operations

- Materials Update HIPAA and COBRA Brochures: From now on, we ask that you print the HIPAA brochure (link at bottom of homepage) and COBRA brochure (found under Publications, Miscellaneous) directly from the website to give to your employees upon request, or you can send them the brochure electronically. We will remove the order forms that are on the ABC webpage that reference these two brochures. If you need materials from the vendors listed on the order form, please use the Vendor Contact list found on the <u>ABC webpage</u> (under Conference Call Notes) to contact the vendors directly.
 - If an employee contacts us directly for a printed copy of either brochure, our administrative team will print one from the website and mail to the employee directly.
 - **COBRA brochure:** We are making an update to this brochure and it will be reposted in the next couple weeks, so always check the website for updated documents.
- All plans: Audit Query Updates: If you have saved these queries as favorites, you will need to search for these queries as the names have changed.
 - TN_BA133 Queries (audit for individual employees)
 - TN_BA133_AUD_ESS_BEFORE_OCT_20
 - \circ Shows changes made in ESS before 10/1/20
 - Fields are the same as the old BA133 query
 - TN_BA133_AUD_ESS_AFTER_OCT_20
 - \circ $\;$ Shows changes made 10/1/20 and later $\;$
 - Instead of seeing the Elect after Submit field, you will see **Submission Status** and **Enroll Act** field
 - **Submission Status** shows Update before Submitted, Submitted, and Update after Submitted
 - Enroll Act shows Submitted Enrollment, Upd Empl Pln, or Upd Dpnd Plan

- TN_BA265 Queries (audit for whole agency)
 - TN_BA265_OE_ELTNS_ESS_BF_OCT20
 - \circ Shows changes made in ESS before 10/1/20
 - \circ Fields are the same as the old BA265 query
 - TN_BA265_OE_ELTNS_ESS_AF_OCT20
 - \circ Shows changes made 10/1/20 and later
 - Instead of seeing the Elect after Submit field, you will see Submission Status and Enroll Act field
 - **Submission Status** shows Update before Submitted, Submitted, and Update after Submitted
 - Enroll Act shows Submitted Enrollment, Upd Empl Pln, or Upd Dpnd Plan
- **ABC Guides:** The Education and Outreach team has added a new **ABC Guide** to the <u>Agency</u> <u>Benefit Coordinator webpage</u>. It can be found under the **Training section**.
 - The guide is designed as a quick reference tool to help with daily task and tasks that are not used frequently. Because it will be updated often, we recommend not printing this document.
 - The guide can be used to help with topics like running queries, termination dates, adding new employees, and finding commonly used forms.

HIGHER EDUCATION QUESTIONS

- **Higher Ed:** Did the BA133 Audit query go away completely? I have it saved as a favorite and now cannot find anywhere?
 - Answer: Yes, the TN_BA133 query as you knew it before is no longer available. The new audit TN_BA133 queries are split into two: one for changes before and one for changes after Oct. 1, 2020. You can search for TN_BA133, and that will pull up the two new 133 queries. You can then save those new queries as favorites.
- Higher Ed: So you cannot look up the one employee's Edison number any longer?
 - Answer: The TN_BA133 query is still available for you to look up individual employees by Employee ID. The query you use will depend on if you are looking for changes before or after Oct 1, 2020. The TN_BA265 queries are for the entire agency not for individual employees.
- **Higher Ed:** Are higher education employees required to update their HSA contribution each year?
 - Answer: For higher education, no they do not have to update their HSA during annual enrollment, and they do **not** have that option in Edison. Higher education employees only have to update their HSA amounts if they want to make changes, and they use a paper form to make their changes.

- **Local Ed:** How is COVID testing handled through the insurance plans, specifically the CDHP Plan? We have an employee that has had to have three tests over the past month. She has been billed a total of \$225 and she was thinking it should have been covered completely.
 - Answer: It sounds like this is a member-specific issue. Please send the member's information and Edison ID to <u>benefits.info@tn.gov</u>, and we will review the claims with the carrier.

[Additional information added: The State Group Insurance Program is waiving all member costs for all FDA approved COVID-19 diagnostic and antibody testing and in-network outpatient visits associated with these tests until the national public health emergency ends. The waiver applies to all plan options. Visit the Partners for Health website at https://www.tn.gov/partnersforhealth, and click on the gold banner at the top of the page (Coronavirus Benefits Information from Partners for Health) for detailed coronavirus benefits information.]

STATE QUESTIONS

No questions this week.

LOCAL GOVERNMENT QUESTIONS

- Local Gov: Is the HSA Optum workshop for ABCs only or employees also?
 - Answer: The November Optum Bank workshop will be for ABCs only as it will go over portal support, logistics on files, payroll deduction and other information specific to ABCs. However, you can direct employees to our benefits employee webinars – we have three left, and during these webinars we go over the Local CDHP/HSA and take questions or employees can call Optum Bank at 866.600.4984, 24/7.
- **Local Gov:** Is November 6th the only date that Optum Bank will host the workshop? Our office is closed on Fridays.
 - Answer: This is the only date we have scheduled. We are checking on recording the session and any additional training materials that will be provided. You can also contact Optum Bank directly for support: Optum Support ABC Contact info: <u>accountservices@optum.com</u>. The Optum Bank ABC Support Center number is 800-294-6620, M-F, 7 a.m. 6 p.m. CT.
- Local Gov: Where do we pull the TN_BA133 report?
 - Answer: You can find the Edison Query Manual on the <u>ABC webpage</u> (found by going to the Partners for Health website and then going to the Agency Benefits Coordinators dropdown). A link to this manual is also in the new ABC Guide, found on this same page, <u>ABC Guide Local Government</u>. Instructions on how to run queries are included in this manual.
 - Here is a link to the query manual:

https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/abc_edison_query_manual.pdf

- **Local Gov:** I have a new employee who was entered into the system and did not complete the probationary period; the employee was hired 9/3 and termed 10/7. What date would I put in? I put in the prior month? The prior month would be what?
 - Answer: In this case where the employee terminates or resigns before the coverage begin date, we ask that the agency submit a Corrections and Clarification form and note that the employee left before coverage started. Our active team will manually key the termination using the hire date as the termination date.
- **Local Gov:** I have an employee retiring Dec. 31 who is not going to use the state insurance plan, he will use Medicare. How do I stop his insurance coverage starting in January so it won't hit the Collections Applied report?
 - **Answer:** The standard termination rules would apply in this case. If the employee is retiring and you want his active coverage to end on 12/31/2020, you would use the last date in November 11/30/2020 as the termination effective date.
- Local Gov: How can I find out when I need to take the annual HIPAA training?
 - Answer: Benefits Administration waived the requirement in 2020 unless you are a new ABC. We will be sharing more information about the 2021 HIPAA training soon. Additionally, our Director of Compliance presented a refresher about HIPAA Privacy and Security during the call held the last week of September, and we sent a document out to ABCs about HIPAA Compliance on September 25. You can find a copy of this document in the archived ABC emails on the <u>ABC webpage</u> under Weekly Emails.
- **Local Gov:** Just to clarify, if an employee does not want to make any changes he/she does not have to fill out forms, correct?
 - Answer: Yes, that is correct. The employee only needs to fill out an Enrollment Change Application and then you would complete a Benefit eForm in Edison if the employee has changes, or employees can use ESS in Edison themselves if they have changes to make.
- **Local Gov:** The Annual Enrollment employee education webinars are recorded, correct? Will the flier take employees to the recorded webinars or only to the upcoming webinars?
 - Answer: The flier has links for employees to register for the live webinars. Employees can find a recorded version on the <u>Partners YouTube page</u>, under the 2020 Employee Webinars playlist titled <u>Annual Enrollment Education Webinar</u> <u>Local Gov/Local Ed.</u>
- Local Gov: What do we put in for employee ID when trying to run the audit query?
 - Answer: When you are running the TN_BA133 query you will want to put the specific employee you are looking for. If you are looking for all employees, you will use the TN_BA265 query to get all employees.

Communications and Materials

- Annual Enrollment Updates
- **Higher Education/State:** Today's October 20 call is the last weekly Annual Enrollment conference call. The regular monthly call will be held November 10.
 - Optum Bank Member Timeline/Communications Presentation: We had on the agenda a presentation from Optum Bank on the member timeline/communications, however, we have decided to move this presentation to the next scheduled ABC call.
 Higher Ed/State: November 10
- Local Ed/Local Gov: Annual Enrollment continues through Friday, October 30.
 Optum Bank Member Timeline/Communications Presentation: We had on the agenda a presentation from Optum Bank on the member timeline/communications, however, we have decided to move this presentation to the next scheduled ABC call.
 - Local Ed/Local Gov: October 27
- **Local Ed/Local Gov: Employee Informational Benefits Webinar:** Employees can still sign up for a webinar to learn about benefits, changes and ask questions. Please continue to share the flier with employees so they can register, and/or direct them to the <u>About Enrollment page</u> for details.
 - We have posted a recorded version on our Partners YouTube page, under 2020 Employee Webinars, <u>Annual Enrollment Educational Webinar Local Gov/Local</u> <u>Ed.</u>

Local education and local government webinars (Central time) Wednesday, Oct. 21: 3:30-4:30 p.m. (completed) Monday, Oct. 26: 10-11 a.m.

- **Local Ed/Local Gov: Optum Bank Workshop:** We will have an ABC Workshop that will go over information as we transition from PayFlex to Optum Bank for HSAs.
 - You'll sign in for the workshop using the same WebEx link you use for ABC calls. We'll send the webinar link and agenda to all ABCs prior to the workshop.
 - We will record the session and post later for those who are not able to attend, but we do recommend attending the live session so you can have your questions answered.
 - Local Ed: Friday, Nov. 6 at 10 a.m. CT
 - Local Gov: Friday, Nov. 6 at 12 p.m. CT

Operations

- Higher Ed/Local Ed/Local Gov: IRS Extends 2020 Reporting Due Dates for 1095 Forms Sent to Individuals
 - Employers are encouraged to provide the forms to individuals as soon as possible, but no later than March 2, 2021. Individuals who file their 2020 federal income tax returns before receiving their 1095-B and 1095-C forms will not be required to amend their income tax returns once they receive their forms. They should keep their forms, once received, with their tax records.
 - It is important to note the IRS has not extended the due date for filing 2020 Forms 1094-B, 1095-B, 1094-C, or 1095-C with the IRS. The deadline remains February 28, 2021, for those with 250 or fewer forms filing by paper, or March 31, 2021, if filing electronically.

- Higher Ed/Local Ed/Local Gov: Edison Benefits User Security Authorization Form
 Update
 - The Edison Security Form for Benefits Users to obtain ABC access to Edison has been updated. The new version should be less confusing with the options applicable to non-State agencies all on a separate page. The new form can be found in the Forms section of the ABC webpage. You will want to download the LE/LG/HE version of the form.

• State: IRS Extends 2020 Reporting Due Dates for 1095 Forms Sent to Individuals

• Benefits Administration will provide the forms to employees as soon as possible, but no later than March 2, 2021. Individuals who file their 2020 federal income tax returns before receiving their 1095-B and 1095-C forms will not be required to amend their income tax returns once they receive their forms. They should keep their forms, once received, with their tax records.

• State: Edison Benefits User Security Authorization Form Update

• The Edison Security Form for users to obtain ABC and Benefits access to Edison has been updated. The new version has a separate page for non-State users which is not required for State users to submit. You can download the new form from the Security Information menu in Edison or from the Forms section of the ABC webpage. (The state version on the ABC webpage has the page with non-State options removed.)

HIGHER EDUCATION QUESTIONS

- **Higher Ed:** What is the process for appeals if someone missed the annual enrollment deadline?
 - Answer: If you intended to make changes, you must appeal to Benefits Administration by Dec. 31, 2020. Please submit a written appeal as soon as you can to: Benefits.Administration@tn.gov that includes the details about why you were unable to meet the Oct. 16th deadline. If you have a Zendesk ticket number (customer service HELP desk) for your situation, include it with your written appeal details. You must provide a completed copy of an *enrollment change application* (found at the link below) along with valid dependent verification information if you are trying to add new dependents. For new dependents, we need dependent verification to prove their relationship to you. Examples of valid dependent verification are mentioned on the *enrollment change application* which is found here: <u>https://www.tn.gov/content/dam/tn/finance/fabenefits/documents/1043_2020.pdf</u>.
- **Higher Ed:** Some employees were on hold with Edison more than half an hour and then just got cut off. I guess in that case they still have to appeal?
 - **Answer:** Yes. They would file an appeal and include that information in the description of why they are filing an appeal.
- Higher Ed: What about the flex plan if past the deadline and employees want to enroll?
 - Answer: The portal will be open until the end of the month if employees have not enrolled. They have until Oct. 30 to enroll in FSAs at <u>www.optumbank.com/Tennessee</u>.

- **Higher Ed:** Has anyone else had employees having difficulty logging into Optum Bank to create their FSA? I had an employee using MS Edge browser who had difficulty enrolling. They switched to Chrome and it worked. Another comment: We called the customer care line and they've been very helpful.
- Additional comments: When employees put in information, they were not recognized by the system. I got the same message. One had to call in. One tried later and something changed with questions. I was never able to use my own account last Friday.
 - Answer: From Optum Bank: We appreciate the feedback, and we will share it. The customer care line has worked with several employees who had issues getting a match on information. What we've found is some folks were successful if they used a private browser outside of work due to firewalls. Employees can call customer care 24/7 at 866.600.4984. Most of the time within minutes, they can help.
 - If you need additional assistance, you can reach out to Heather Pease by submitting a Zendesk ticket at <u>benefits.info@tn.gov</u> and ask to send the ticket to Heather Pease.
- **Higher Ed:** Is there an age limit for a legal guardian to add a dependent? Does the dependent need to be under age 18 or does the age 26 rule still apply?
 - Answer: It depends on the guardianship orders as far as age limit. Some expire at a certain age or date. Otherwise, if there is no age limit or date limit on it, the eligibility extends through the month the dependent turns 26.
- **Higher Ed:** Is there a way to find out which employees have enrolled in Optum Bank before 11/10? Another similar question: Is there a report ABCs can get to see the employees and what they enrolled in through Optum Bank so we can send to payroll?
 - Answer: If you are looking for an enrollment report prior to credentials, we can get that for you. For higher education ABCs, your direct contact is Nicole Jardine. She is there for you. <u>Nicole.jardine@optum.com</u>. Once you have credentials, you can get that information on your own.
 - Employees who need assistance with FSA or HSA call: 866-600-4984, or email: <u>service.tennesse@optum.com</u>.
- **Higher Ed:** This may have been discussed, but when would employees who applied for STD during Annual Enrollment expect to receive the SOH from MetLife, and how will that be sent to them? Especially for employees whose forms were entered manually by ABCs.
 - **Answer:** We are working on preparing a list of people who made changes. The list goes to MetLife tomorrow (Wed, Oct. 21), and the SOH will be sent shortly from MetLife to those employees who applied for STD.
- **Higher Ed:** What's the procedure if someone accidentally enrolled in the LFSA? Will Optum be able to move the funds over?
 - Answer: The Optum Bank portal will be open until Oct. 30. If employees have enrolled in the wrong type of FSA, they may access the portal at <u>https://www.optumbank.com/tennessee.html</u> and change their enrollment until Oct. 30.
 - After the enrollment period concludes, members are not permitted to transfer funds from one type of FSA to another type.

- **Higher Ed:** If a Zendesk ticket is sent with a corrected dependent doc, will that be applied as a correction before enrollments are processed?
 - **Answer:** Yes. If we receive the correct verification after the first one, we will apply the corrected one.
- **Higher Ed:** When will the AE premiums due report be ready?
 - **Answer:** It will be ready the first week of Dec. We will publish the calendar during the month of November. It will probably be ready on either Dec. 3 or 4.
- **Higher Ed:** Does the changes for any basic life apply in Dec. or Jan? Like age, premiums, etc.?
 - Answer: For age and salary, the changes went into effect Oct. 1. So the premiums for the Sept. 30 check will include changes as far as coverage tiers which affect basic life. Any changes made to other coverage during Annual Enrollment will be on the Dec. check for Jan. coverage.

LOCAL EDUCATION QUESTIONS

- **Local Ed:** If an employee brings me their paperwork for Annual Enrollment, do I just upload it thru Zendesk? Also, can a spouse be removed during Annual Enrollment without any kind of documentation?
 - Answer: If the employee provides you with a paper enrollment for Annual Enrollment, you would either need to complete a Benefit eForm for the employee or ask the employee to submit his/her own elections through Employee Self Service in Edison. Yes, a dependent can be removed during Annual Enrollment with no documentation needed.
- **Local Ed:** If I have a payroll person who isn't an ABC and needs to attend the Optum Workshop, is this ok? Can this person just click the same link that I usually click on as an ABC to attend?
 - **Answer:** Yes, that would be great. They are more than welcome. It will be the same link as you would normally use for an ABC meeting.
- **Local Ed:** How does an employee get their password when there is not an email address for them in Edison?
 - **Answer:** It depends on if they have set up a security profile or not. If the employee has never logged in or if he/she changed agencies since their last login, the employee will need to log in as a New Hire/First Time Login. If they created a security profile while at your agency, the employee will have to contact the Edison help desk at 866.376.0401 to get the password reset. If they don't have an email or if his/her email has changed and not working, they will need to call Edison.
- **Local Ed:** If an employee is going through a divorce but the divorce is not final, can the employee drop that spouse during open enrollment?
 - **Answer UPDATE:** Following the call, we reviewed divorce questions with legal counsel. It is now our understanding that:

- During Annual Enrollment <u>BA can process an employee's request to</u> remove a spouse.
 - The intent of PD Section 4.02 is to message that it is the employee's responsibility to comply with Tenn. Code Ann. § 36-4-106 Complaint for divorce or legal separation Temporary injunctions and § 56-7-2366 Notice of termination of coverage for spouses and former spouses.
 - If an employee removes a spouse during annual enrollment in opposition to either one of those sections of the code, they may find themselves in trouble with the courts.
 - We cannot interpret the law or offer legal advice to members. They should consult with their legal counsel regarding state law.
- Outside of Annual Enrollment BA can't process an employee's request to remove a spouse for divorce UNLESS we receive a final divorce decree.
 - PD Section 4.01 applies "Voluntary cancellation of a covered person shall not be permitted outside of the annual enrollment transfer period unless the covered person experiences a special qualifying event, family status change, or other qualifying event as approved by Benefits Administration."
 - The Insurance Cancel Request Application specifies that in the case of a divorce, the required documentation is a final divorce decree.
 - It doesn't matter if the parties agree to the termination or if they produce a document stating that enrollment is not required. Agreement doesn't change our requirement that we must have a final divorce decree for mid-year termination.
- **Local Ed:** Just for clarification, if someone has filed for divorce and says they are not required to carry insurance on their spouse, this person CANNOT drop them during open enrollment?
 - Answer UPDATE: BA can process an employee's request to drop a spouse during annual enrollment, but the employee is responsible for compliance with state law.
 SEE additional details in the answer above.
- **Local Ed:** What if the divorce is final but the employee is having a hard time getting the letter from her former spouse showing insurance for the SQE to enroll?
 - Answer: You would need to contact us at <u>benefits.info@tn.gov</u> so we can look at the specific scenario.
- Local Ed: When can we open the Optum Bank account?
 - Answer: Employees have until the end of annual enrollment (Oct. 30) to enroll in the Local CDHP/HSA. The State will send a file to Optum Bank that will include all CDHP/HSA enrollments. Optum Bank will open the HSA accounts based on this file and send HSA account holders a welcome kit and debit card in December. Optum Bank will offer training on the following dates for ABCS on how to set up payroll deductions, how to use the portal, and file types accepted by Optum. You will login to the training using the regular ABC conference call link.
 - Local Ed: Nov. 6 at 10 a.m. CT
 - Local Gov: Nov. 6 at 12 p.m. CT

- **Local Ed:** I have an employee who wants to cancel dental and vision. Do I have her fill out cancelation form and upload it in Zendesk?
 - Answer: She would fill out an Enrollment Change Application, then you would submit the changes via Benefit eForm. Or, she can log into ESS and make the changes herself.
- **Local Ed:** Where can we get the dates that need to be used to open the queries like (01/01/2020)?
 - **Answer:** All of that information can be found on the <u>ABC webpage</u> under Training. There is an Edison Query List and Edison Query Manual. The manual tells you how to run queries. The list includes queries and criteria.
- **Local Ed:** Can we, as the ABC, enroll an employee through Annual Enrollment, on his/her behalf without them going in to self-service themselves?
 - Answer: Yes. You can do so by submitting a Benefit eForm. Instructions are on the <u>ABC webpage</u> under Training. There is a presentation that walks you through it, or you can call the service center, and we can walk you through it.
- **Local Ed:** If an employee brings me their paperwork for Annual Enrollment, do I just upload it thru Zendesk? Also, can spouses be removed during Annual Enrollment without any kind of documentation?
 - Answer: If the employee provides you with a paper enrollment for Annual Enrollment, you would complete a Benefit eForm for the employee. Or, the employee can submit his/her own elections through Employee Self Service in Edison. A dependent can be removed during Annual Enrollment with no documentation needed.

STATE QUESTIONS

- **State:** I have questions about the changes with PayFlex and Optum Bank for both FSA and HSA. How will employees be notified on what they need to do? Do we need notify them or is Benefits Administration preparing information for them? I know we should encourage them to use their FSAs. For the HSA, they need to select to have funds transferred to Optum Bank, correct? How will this notification go out?
 - Answer: For HSAs: We are going to email all HSA participants for whom we have an email address in Edison and ask them to select yes or no to transfer funds. If they agree, then PayFlex will transfer funds to Optum Bank on March 1, 2021, and the funds are expected to be available in their Optum HSA by March 5, 2021.
 - Follow up question: If employee email addresses are not up to date, will you mail to home addresses?
 - Answer: No. If employees don't respond or if they answer no, the funds will remain with PayFlex, and they will be responsible for the monthly HSA account maintenance fee with PayFlex (\$5 per month). We will send three emails during the first three weeks in November. We will try to reconcile at the end of the email campaign for those who did not respond; however, we will not mail unless we have to.

- **Follow up question:** So, we can encourage email information in Edison, we could do that to help?
- **Answer:** Yes, it would be great for you to message to employees to get correct emails in Edison that would help.
- Answer: For FSAs: We do allow a \$500 carryover. Anything over \$500 that an employee has not used will be forfeited. For those with \$500 or less in their medical FSA or L-FSA, those funds will stay in the PayFlex accounts so they can finish processing those claims. Members can file a paper claim no later than April 30 with PayFlex. After PayFlex has had a chance to process those claims, anything that can be carried over will be transferred to the Optum Bank medical FSA or L-FSA on July 1, 2021. This is why we encouraged all employees in our September 15th email blasts to spend down all of their funds this year so that they do not have to wait until July 1st for their carryover funds to appear in their Optum FSA or L-FSA. Note, if a person enrolls in a medical or L-FSA for 2021, those funds will go into the Optum Bank accounts and be available in January 2021.
- **Follow up question:** With the FSA, any allowable \$500 carryover that employees have that they do not use will automatically go to Optum Bank on July 1 with no action on the employee's part?
- Answer: Yes, but the employee does need to elect an FSA program for 2021 for the funds to rollover, and they will not have those <=\$500 carried over funds until early July 2021. So we encourage everyone this year to spend down their FSA and L-FSA funds so they don't have to wait.
- **State:** Do we have to re-submit the (security) form if you have been an ABC for several years?
 - Answer: No, you do not have to resubmit again. and the updated security form should be used going forward for new users and for any changes
- **State:** I received the following message from an employee yesterday morning. "I received an email Friday saying that I didn't submit my changes for my visual insurance. I'm am sure I did. How do I make sure this happened?
 - **Answer:** You can verify if the employee submitted their vision elections by running the TN_BA133 query or the TN_BA219 Not Submitted query. The employee can reach out the service center, and we can verify if the election was submitted or not and give instructions on filing an appeal.
 - If the employee did not submit the enrollment, he/she would now have to submit an appeal. Here is information for employees on filing an appeal: If you intended to make changes, you must appeal to Benefits Administration by Dec. 31, 2020. Please submit a written appeal as soon as you can to:
 Benefits.Administration@tn.gov that includes the details about why you were unable to meet the October 16th deadline. If you have a Zendesk ticket number (customer service HELP desk) for your situation, include it with your written appeal details. You must provide a completed copy of an *enrollment change application* (found at the link below) along with valid dependent verification information if you are trying to add new dependents. For new dependents, we need dependent verification to prove their relationship to you. Examples of valid dependent verification which is found

here: <u>https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/1043_2020.pdf</u>

LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** Just want a final confirmation that if there are no changes to the 2021 enrollments, the ABC does not have to submit anything?
 - Answer: Correct. You only have to submit an employee's enrollment through Benefit eForm (have the employee fill out an Enrollment Change Application) or the employee can make changes directly in ESS in Edison if they want to make a change.
- Local Gov: Is a new ABC security authorization form required annually?
 - **Answer:** It is not required annually. We do have an annual audit, and we do ask that you respond to this audit each year.
- **Local Gov:** I am having trouble running my queries for new enrollments, are the reports working right now?
 - Answer: Yes, they are working correctly. If you are having issues, submit a Zendesk ticket, and we will look at it.
- **Local Gov:** What reports do we need to run to see changes that employees have made during Annual Enrollment?
 - Answer: TN_BA133 query for individual changes and TN_BA265 for changes for all employees in your agency. Also, there are separate queries for before and after Oct. 1 when we switched over the audit tables.
- **Local Gov:** Can you share your screen and show us how to run TN_BA265? I can't get my queries to run.
 - **Answer:** Use schedule ID OEG20 on the TN_BA265 query. You can also submit a Zendesk ticket if you are having trouble.
- Local Gov: Where is the security form located?
 - **Answer:** On the Partners for Health website at tn.gov/PartnersForHealth on the <u>ABC webpage</u> under Forms.

To find the ABC security authorization form, look for the Forms dropdown on this webpage: <u>https://www.tn.gov/partnersforhealth/agency-benefits-coordinators.html</u>

- **Local Gov:** I am retiring and we will have a new ABC. Will we need to use the security form, dated for Jan. 1, 2020?
 - **Answer:** You can submit a Zendesk ticket, and we will work with you on the transition and retirement.
- **Local Gov:** I am getting a lot of questions about the double coverage letter that was sent out?

Answer: Information was sent to let people know when they have a primary and secondary policy, that they will have a cost share under our plan. Under the Health Options tab on the Carrier Information webpage on the Partners website, you can find at the bottom of the page, a Coordination of Benefits (COB) section. This section has a copy of the letter and some benefits processing examples for 2021. This is not a plan change. We are clarifying the intent of how COB is supposed to work. Members will see an impact if they have two policies and are not used to paying any cost share. Normally, if you have a primary and a secondary policy, unless the secondary is a lot richer, you should expect to pay something. If you have follow-up questions or specific scenarios, you can contact us at benefits.info@tn.gov, and we will research those for you. Here is the link to the COB information:

https://www.tn.gov/partnersforhealth/health-options/carrier-network.html

- **Local Gov:** There is just one ABC per agency, correct? We are a small organization with 50 employees.
 - **Answer:** You can have two ABCs one primary and one backup ABC.
- Local Gov: When will the 2021 eligibility/enrollment guide drop?
 - **Answer:** It will be posted on the Partners for Health website in mid-November. We will let you know when the guide is finalized and posted on the website.
- **Local Gov:** If an employee's spouse carries the current insurance and the employee takes medical, would the employee's new insurance become primary?
 - **Answer:** For the active employee, his/her insurance becomes primary.
- **Local Gov:** If a child ages out and is on his mother's insurance with BCBS with another company, and the child is an employee of ours, is this considered special qualifying event (SQE) if he gets a letter from his Mother's company stating that his coverage has ended?
 - Answer: Yes, that would be considered a SQE. You would need to get a letter from the mother's company and submit it with the Enrollment Change Application (form), and we will enroll the employee for you.
- **Local Gov:** An adult child, age 23, does not have to take the employer's insurance if covered by parent, correct?
 - **Answer:** No employees are required to take our insurance. If an employee has other coverage, then he/she can take that coverage, and then when they age out, that is a qualifying event for the employee to pick up our state coverage.
- Local Gov: What is the process to enroll in HSA?
 - Answer: Members must enroll in the Local CDHP/HSA during annual enrollment, and Optum Bank will open an HSA for anyone who enrolls in the Local CDHP/HSA. Members will receive a welcome kit and an HSA debit card from Optum Bank in December, and they may start using the HSA as soon as it has available funds.

- **Local Gov:** Our plan started on March 1, 2020 will it renew annually starting January 1, 2021.
 - **Answer:** Yes, the plan year is Jan. 1 through Dec. 31.
- **Local Gov:** Who do I need to contact to get my email added to the notifications for webinars? I am new to HR for our county government.
 - Answer: You can contact us at <u>benefits.info@tn.gov</u>

Combined ABC Conference Call Notes Local Education and Local Government October 27, 2020

Communications and Materials

- Local Ed/Local Gov: Annual Enrollment ends this Friday, October 30.
- **Local Ed/Local Gov: Optum Bank Workshop:** The ABC Optum Bank Workshop will be held Nov. 6. This workshop will go over information as we transition from PayFlex to Optum Bank for HSAs.
 - Local Ed: Friday, Nov. 6 at 10 a.m. CT
 - Local Gov: Friday, Nov. 6 at 12 p.m. CT
 - You'll sign in using the same WebEx link you use for ABC calls. We'll send the webinar link and agenda to all ABCs prior to the workshop:
 - https://tngov.webex.com/meet/JoanWilliams
 - We will record the session and post later for those who are not able to attend, but we do recommend attending the live session so you can ask questions.

Benefits

• **Optum Bank HSA Member Timeline Presentation:** Linnie Stelk with Optum Bank went over the member timeline of communications and information. The PowerPoint slides from the presentation are **attached** with the October 30 ABC email.

Operations

- Benefits Form Updates:
 - Benefits Administration Forms that were not previously able to be filled out electronically (such as Leave of Absence forms and the Certification of Incapacitation for Dependent Child) can now be filled out electronically. These updated forms are now posted on the Partners for Health website.
 - All Forms now allow for electronic signatures.
 - Forms that require only the employee's signature will be locked (the contents can no longer be changed) after signing by the employee.
 - Forms that require multiple signatures (such as employee and Agency Benefits Coordinator) will be locked after the final signature has been made.
 - Forms from our vendor partners (such as the Voluntary Term Life forms from Securian/Minnesota Life) are unchanged.
 - Forms can still be filled out and/or signed by hand, electronic filling and signing is not required.
 - Electronic forms require Adobe Acrobat Reader 7.0 or later (available to download for free), non-Adobe products are not compatible.

Below is information about how to download and save a fillable form. This information is found on the Partners website, on the <u>Forms webpage</u>:

Downloading and Saving a Fillable PDF Form

Fillable PDF forms may be completed and saved using Adobe Acrobat Reader (this software must be loaded on your computer). To accomplish this, you must first save the empty form on your own computer:

--Position your cursor on the form link and click with your right mouse button (do not activate the link and open the form)

--From the menu that pops up, select the Save target as... option in Internet Explorer or the Save link

as... or similar option in another browser

--You should then be prompted to choose a location to save the file

--Select the location on your own computer or network and click on the Save button

--Once saved, navigate to the file

LOCAL EDUCATION QUESTIONS

- **Local Ed:** The Optum Bank form online shows 2020 contribution limit. Is there another form?
 - Answer: Yes. It is the 2021 form on the <u>ABC webpage</u>. You may need to clear your cache to see the updated version. Here is the link to the form. <u>https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/optum_2021_payroll_deduction_form.pdf</u>
- **Local Ed:** If our agency does not participate in the HSA plan, is it necessary for me to attend on Nov. 6?
 - Answer: As a reminder, all of our agencies do have to offer all of our plans, including the Local CDHP/HSA health plan, to employees. It is up to you and your agency if you want to attend the workshop – it is not mandatory.
- **Local Ed:** We were asked to send a test file on 10/5/2020 to PayFlex to check our connectivity. Should we have received reply for this? The email was from <u>communication@m.payflex.com</u>.
 - Answer: If you have sent a connectivity email, you would have received a reply. I do have a list of those who did not send a connectivity file, and I do not have any HR representatives with State of Tennessee agencies that PayFlex needs to follow up with.
- o Local Ed: I did not receive this email (test file) from PayFlex at all?
 - Answer: That means your connectivity is all set with PayFlex.
- **Local Ed:** Does each current member who participates in the Local CDHP/HSA and has a payroll deduction, need to complete an Optum Bank payroll authorization form?
 - Answer: The payroll authorization form is for the ABC who will put the funding into the system. It is also your resource of what the member did elect. All members will need to complete the <u>Optum Bank payroll deduction form</u> though for 2021, if they want deductions taken from their paychecks. Note: the maximum contributions for 2021 are higher. Some employees may be trying to max out their contributions, and it may behoove you for employees to see those limits. If they don't make a change, then the amounts would stay the same.
- **Local Ed:** Can you please remind me when the testing email went out? I think I may have missed it in the masses of emails I have been receiving during Annual Enrollment.
 - Answer: The email from PayFlex was sent on Oct. 5. If PayFlex had any issues, you would have been contacted to send a test email. If you did not receive an email from PayFlex on Oct. 5, then your agency is all set.
- **Local Ed:** Just making sure payroll deductions made in Dec. still need to go to PayFlex, correct?

- Answer: Any HSA contributions for plan year 2020 need to go to PayFlex. Any contributions for 2021 need to go to Optum Bank.
- **Local Ed:** How do you search outside of Tennessee for BCBS provider? I have a member wanting to add her college student in Texas and I was trying to assist her, but she currently has Cigna and wants to change to BCBS.
 - Answer: UPDATE: Members who live outside of Tennessee, including children attending college out of the service area, still have access to in-network providers through the BlueCard® PPO program which links PPO network providers from Blue Plans across the United States.
 - Go to bcbst.com and click on Find Care. Use the drop-down menu to select BlueCard PPO (Outside of Tennessee) and enter the rest of your search criteria. Start typing a location in the city/state window and you will see a list of suggestions, for example, Cleveland, OH – 44101. Use the drop-down menu in the browse by category window to specify the type of providers you're interested in, for example, Urgent and Convenience Care. You might be prompted to log in, but you can search without doing so.
 - Also, if you are looking for doctors and hospitals outside of the United States, you can call **1-800-810-BLUE (2583) or visit bcbsglobalcore.com.**
- Local Ed: Is there a query we can run for the Access ID?
 - Answer: Yes, TN_BA302_PERSON_AND_JOB
- Local Ed: What is the fax number for LEA Retirement forms?
 - Answer: TCRS confirmed 615-401-6818 is the correct fax number or you can scan and email the LEA premium support form to <u>TCRS.Financial@tn.gov</u>. For BA retirement forms, the fax number is 615-741-8196 or you can use the Retirement Document Upload option in Zendesk.
- Local Ed: Do we have a list of any drugs that will not be covered in 2021?
 - Answer: You can find a list on the CVS Caremark site. Look for Medications Requiring Prior Authorization for Medical Necessity. These are medications we are covering now in 2020 and will require prior authorization in 2021.
 Medications requiring Prior Authorization in 2021: https://www.caremark.com/portal/asset/Advanced_Control_Specialty_Meds_R equiring_PA_Medical_Necessity_OE.pdf
 - Also, any affected member will receive a customized letter in mid-Nov. that their prescription will no longer be covered along with the covered medication available. Their doctor will also receive a letter. If the member's doctor feels it is medically necessary, the doctor could request a prior authorization, which provides a pathway for "possible" continued coverage, if approved by CVS Caremark, our pharmacy benefits manager.
- **Local Ed:** Did letters go out to employees about changing from PayFlex to Optum Bank?
 - Answer: Information was in the Annual Enrollment newsletter that all employees received and information has been posted on the Partners for Health website <u>https://www.tn.gov/partnersforhealth/health-options/cdhp.html</u>. Emails are also going out to those for whom we have email addresses in Edison. As far as HSA funds, we are going to send out a survey three times, on Nov. 5, 12 and 19, asking existing account holders if they want to transfer their funds to Optum Bank. If employees say yes, we will work with PayFlex to transfer the HSA funds to Optum.

If they do not respond or if they say no, the funds will stay with PayFlex, and they will be responsible for the administrative fees, which are currently \$5 per month.

- **Local Ed:** Can you please remind me of changes with coordination of benefits (COB) effective 1/1/2021 or refer me to which call that was on?
 - Answer: You can find the information on the Partners for Health website on the Carrier Information page <u>https://www.tn.gov/partnersforhealth/health-options/carrier-network.html</u>. See COB section at the bottom of the page. Information was relayed to local education ABCs during the Sept. 22 ABC call and included in the call notes.

LOCAL GOVERNMENT QUESTIONS

- **Local Gov**: I'm having trouble with the queries. I've tried the TN_BA133 with Edison IDs of employees who I know have changed. I've tried the TN_BA265 (am I putting the wrong schedule ID in the search?). Both reports return no information in the spreadsheet.
 - Answer: It would be best to send in a Zendesk ticket, and we will have a trainer reach out to you. You can find information on queries under Training on the <u>ABC</u> webpage. There is an Edison Query Manual and Edison Query List.
- Local Gov: What are the dates emails (with survey) will go to PayFlex participants?
 - Answer: The emails will be sent to all existing HSA accountholders for whom we have an email address in Edison. These emails will go out on Nov. 5, 12 and 19 in an effort to get everyone to respond. Those who say no in their response, or who do not respond at all, will have their HSAs remain with PayFlex, and they become responsible for the monthly administrative account fee of \$5 per month.
- **Local Gov:** I have two participants who are moving out of the CDHP plan. If they opt into Optum Bank, will they have to pay fees since they are no longer HSA eligible?
 - Answer: If they are not staying enrolled in the Local CDHP, then they will not have an Optum Bank HSA. Their existing funds will remain at PayFlex, and yes, they will have to pay the monthly administrative fee that the group insurance program has been paying. This account will become a retail account with PayFlex, and they will deduct \$5 per month, each month. So, those who might have \$500 in their HSA but they enroll in the PPO, in addition to those funds staying in the HSA, they can continue to use those funds for eligible healthcare expenses, however, they cannot contribute to the HSA.
- **Local Gov:** For clarification, member PayFlex accounts will be closed on 2/8/21 and their Optum Bank accounts will be active 3/5/21? If so, what happens if I need to access my funds in this "between" time?
 - Answer: Your Optum Bank account will be active 1/1/21, and you can utilize your payroll contributions or if the employer offers employer contribution you'll have access to those funds. On March 5, the funds that were in the PayFlex account will be added to the Optum Bank HSA if the member has responded to the BA survey and said "YES". There are a few weeks that the funds that are in the PayFlex account will not be accessible. You can always withdraw funds prior to February 8th to pay for expenses, or you can pay for expenses out of your pocket and once your funds have moved by on March 5, you can pay yourself back. You do have to

keep records of any funds that came out of the account were used for qualified health care expenses in case you are audited.

- **Local Gov:** We 'pre'' fund our employee HSAs and have done so for quarter four to PayFlex. We would need to 'pre' fund quarter one 2021 through Optum Bank at the end of December. Will this work the same as PayFlex?
 - Answer: Any contributions that are for 2021, you would fund in the HSA account as long as the accounts are open at the end of December. We can process a 2021 file at Optum Bank.
- **Local Gov:** One member has dropped the CDHP for 1/1/21 and signed up for FSA. If he has a balance left in the HSA, can he elect a medical FSA?
 - **Answer:** Yes, you can select a FSA as long as there are funds in the HSA. You can't do the opposite you can't open a HSA if there are funds in an FSA.
- **Local Gov:** Will the interest for the first quarter from Optum start on 3/5/21 when transferred balances start? If so, does anyone know if PayFlex will pay the interest in Jan. and Feb.?
 - **Answer:** The interest will start on the transferred balance on the day it is transferred and on the money that is in the Optum Bank account. For PayFlex, they will have the interest paid through March 8 before it is transferred out.
- **Local Gov:** If we have an employee add their spouse on Friday, can we go ahead and send in the application without proof of marriage and send the marriage certificate on Monday?
 - Answer: Yes, if you go ahead and have them add the spouse by the deadline and submit partial dependent verification by the deadline, we will give the employee 10 additional days from the Annual Enrollment deadline to submit the remaining documents. For example, if the member submits a bank statement by the AE deadline, we will allow the member 10 additional days to provide the marriage certificate.
 - But if the employee doesn't send any dependent verification documents, then the dependent will not be enrolled and they would have to file an appeal to try and add the dependent.
- **Local Gov:** Are we still required to complete the ABC checklist if our employees use Edison to sign up for their own benefits?
 - **Answer:** Yes, you are still required even though employees are signing up in Edison. You should still go over all of the required information with new hires beforehand.
- **Local Gov:** I recently submitted for a coverage change based on divorce for an employee. Will I receive a loss of coverage letter to provide to employee for the exspouse or will that be directly mailed to them? Zendesk shows that the activity is solved so I wanted to check.
 - Answer: The COBRA notification will be sent either directly to the ex-spouse or the attorney. If the contact information is not available for either the ex-spouse or attorney, the notification will go to the home address for the employee listed in Edison.
- Local Gov: Is the checklist required for annual enrollment or just for new hires?
 - **Answer:** Just for new hires.

- **Local Gov:** We had a member pass away last week. I termed this person in Edison yesterday with code of term-death. My understanding the dependents will now receive insurance on COBRA for six months. Will they receive any paperwork they must fill out? Anything further I must do?
 - Answer: There isn't anything the surviving dependents must do as the health insurance is free for six months. They will get a COBRA offer asking if they want to continue on COBRA following this six months. If enrolled in dental or vision coverage, they will get a COBRA notice as this is not extended for six months.
- **Local Gov:** Did you say the extension (for dependent coverage following an employee death) is only on the health, not the dental and vision?
 - **Answer:** Correct, it is only for health insurance. If currently enrolled in dental and vision at time of death, the dependents will receive COBRA notices for dental and vision asking if they want to extend dental and vision.
- **Local Gov:** I have an employee changing from one plan to another. The system then requires documentation. Can I move past that step since the documentation was provided upon initial enrollment? I did not complete the change because documentation is on file in the office and I am doing data entry from home.
 - Answer: If you are completing the enrollment on the Benefit eForm and you know they are on coverage, then you can bypass that step. We did find an issue that sometimes the system is asking for documentation when it is not required. We should have it fixed in Edison within the next week or two.
- Local Gov: What are the queries to run for Annual Enrollment?
 - Answer: You can go out to our website on the <u>ABC webpage</u> and you will find query information under the Training section. There is an Edison Query List and Edison query manual. It explains all of the queries to run during and after AE. Edison Query List: <u>https://www.tn.gov/content/dam/tn/finance/fabenefits/documents/abc_query_list.pdf</u>
 - The query information is also included in the ABC Annual Enrollment weekly announcement found at the top of the ABC webpage, and there is a tab for Local Ed/Local Gov Queries.
- Local Gov: How do I update an employee's address?
 - Answer: We will reach out after the call to help you update the address. We also have a very helpful ABC Guide on our ABC website which includes a video on how to update an employee's address. In the how Edison works section. Here is the link to the guide.
 - https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/abc_guide_lg.pdf

Combined ABC Conference Call Notes Local Education and Local Government November 3, 2020

Communications and Materials

- **Local Ed/Local Gov: Optum Bank Workshop:** The ABC Optum Bank Workshop will be held this Friday, Nov. 6. This workshop will go over information as we transition from PayFlex to Optum Bank for HSAs.
 - Local Ed: Friday, Nov. 6 at 10 a.m. CT
 - Local Gov: Friday, Nov. 6 at 12 p.m. CT
 - You'll sign in using the same WebEx link you use for ABC calls. We'll send the webinar link and agenda to all ABCs on Thursday:
 - https://tngov.webex.com/meet/JoanWilliams
 - We will record the session and post later for those who are not able to attend, but we do recommend attending the live session so you can ask questions.
- HSA Email/Survey for Current Account Holders: The first email survey will be sent to HSA account holders for whom we have an email address in Edison this Thursday, Nov. 5. Additional emails will be sent Nov. 12 and Nov. 19.
 - The email survey will ask existing account holders to let BA know if they want to transfer their funds to Optum Bank. If employees say yes, we will work with PayFlex to transfer the HSA funds to Optum Bank. If they do not respond or if they say no, the funds will stay with PayFlex and they will be responsible for the administrative fees, which is currently \$5 per month.

• Materials Update:

- Updated BA Forms that allow electronic signatures are posted on the Partners website under Forms – also on ABC webpage under Forms.
- Instructions are posted at the top of the Forms page.
- **COBRA brochure** has been updated. Please use the updated version found on the Partners website, under **Publications, Miscellaneous**.
- 2021 Eligibility and Enrollment Guide will be posted mid-November.
- **2021 New Hire PowerPoints** working to post these **early next week**. Will include information in an ABC email when posted.

LOCAL EDUCATION QUESTIONS

- **Local Ed:** If employees have life events, such as the birth of a baby, they can change the plan option to what they want but remain under the same carrier. Can they add a spouse at the same time?
 - **Answer:** With the birth of a child, the employee can add other previously eligible dependents, including a spouse, at the same time.
- **Local Ed:** Which query is the best one to be able to see all employees with Annual Enrollment changes through the self-service portal and through the Benefit eForm?
 - Answer: There are a couple of query options. You can find the list of queries to use during Annual Enrollment at the top of the <u>ABC webpage</u>, under the Annual Enrollment Announcements for Local Ed/Local Gov Queries. Also, on the ABC webpage, under Training, you will find the full list of queries <u>Edison Query List</u>. Likely the query you would want to use in this instance is TN_BA219_AETP_INS_ELECTIONS.

Combined ABC Conference Call Notes Local Education and Local Government November 3, 2020

- **Local Ed:** If a dependent child is on the insurance, she is pregnant can the newborn be added when born?
 - Answer: No, children of covered dependents are not eligible to be added to the plan.
- **Local Ed:** When will we be notified if employees who made Annual Enrollment changes did not submit dependent verification?
 - **Answer:** We are finishing our outreach to state and higher education employees who did not submit verification, so we should be starting the local education list of those who did not submit their dependent verification soon. ABCs should be notified in the next two weeks if we have not received that documentation for an employee.
- **Local Ed:** Will those employees be notified as well (about the need for dependent verification) or just ABCs?
 - **Answer:** Normally, just the ABCs are notified, and we ask that you notify the employee. But if we have the employee's email as well, we will copy the employee on the notification to the ABC.

LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** I have an employee retiring Dec. 31, what form and when do I submit it to end his insurance by Dec. 31?
 - Answer: You would term them in Edison and use 11/30 as the date in the system.
- **Local Gov:** Can the old BA forms still be used and not use the new electronic signature forms?
 - **Answer:** You need to use the forms that are on the website now, but you do not have to use the electronic signature.
- Local Gov: Will employees receive confirmation of changes that BA has made?
 - **Answer:** If the employee made changes, or you made changes on their behalf on a Benefit eForm, then the employee will receive a confirmation statement by mail later this month.

Communications and Materials

- HSA Emails/Survey for Current Account Holders Continue: The second email/survey was sent to HSA account holders for whom we have an email address in Edison Thursday, November 12. And additional email will be sent Nov. 19.
 - Emails/surveys are only sent to those members currently enrolled in the CDHP/HSA or Local CDHP/HSA who will continue in this same plan next year.
 - The email survey will ask existing account holders to let BA know if they want to transfer their funds to Optum Bank. If employees say yes, we will work with PayFlex to transfer the HSA funds to Optum Bank. If they do not respond or if they say no, the funds will stay with PayFlex and they will be responsible for the administrative fees, which is currently \$5 per month.
 - State offices and the BA Service Center were Closed for Veterans Day Wednesday, Nov. 11.
 - Higher Ed/State: Materials Update:
 - **Updated BA Forms** that allow electronic signatures are posted on the Partners website under **Forms.** A few of the forms are also on the ABC webpage under forms.
 - **COBRA brochure** has been updated. Please use the updated version found on the Partners website, under **Publications, Miscellaneous**.
 - 2021 Eligibility and Enrollment Guide should be posted mid-November.
 - **2021 New Hire PowerPoints** working to post updated versions by the end of this week. Will include information in the ABC email when posted.
- **State/Higher Ed: Wellness Program Weight Management Flier and Video:** New weight management materials have been posted on the Partners for Health website, on the Wellness program page and includes a new flier and weight management video.
 - Link to Testimonial flier
 - Link to new video
- Local Ed/Local Gov: Talk It Out Tuesday Nov. 17: Talk It Out Tuesday phone-in program will be offered the third Tuesday of the month, for three months. Starts next Tuesday, Nov. 17. This program offers an opportunity to boost your emotional well-being, get support and offer support to others. All calls can be joined anonymously and will be facilitated by a licensed Here4TN clinician, from our partner, Optum®. Employees can join for one session or all three. Ask questions. Offer ideas. Or just join and listen.
 - Employees will just dial in and use the conference ID number. Information about the sessions and the dial-in information is on the screen. We will send you a flier on Friday that you can share with your employees.
 - Local Ed:
 - Details:
 - Tuesdays November 17, December 15 and January 19
 - 3:30 PM CST
 - No RSVP required
 - Stay for the whole session or come and go as needed
 - Local Gov:
 - **Details:**

- Tuesdays November 17, December 15 and January 19
- 11:30 AM CST
- o No RSVP required
- Stay for the whole session or come and go as needed

Benefits

• **Higher Ed/State: Optum Bank HSA Member Timeline Presentation:** Linnie Stelk with Optum Bank joined us and went over the member timeline of information and communication. The presentation was attached with the Friday, Nov. 13 ABC email.

Operations

Higher Ed/State: Benefits Forms Updates:

- Benefits Administration Forms that were not previously able to be filled out electronically (such as Leave of Absence forms and the Certification of Incapacitation for Dependent Child) can now be filled out electronically.
- o All Forms now allow for electronic signatures
- Forms that require only the employee's signature will be locked (the contents can no longer be changed) after signing by the employee
- Forms that require multiple signatures (such as employee and Agency Benefits Coordinator) will be locked after the final signature has been made.
- Forms from our vendor partners (such as the Voluntary Term Life forms from Securian/Minnesota Life) are unchanged.
- Forms can still be filled out and/or signed by hand, electronic filling and signing is not required
- Electronic forms require Adobe Acrobat Reader 7.0 or later (available to download for free), non-Adobe products are not compatible.
 - Here is more information about downloading and saving the form, found on the Forms webpage:

Downloading and Saving a Fillable PDF Form

Fillable PDF forms may be completed and saved using Adobe Acrobat Reader (this software must be loaded on your computer). To accomplish this, you must first save the empty form on your own computer:

--Position your cursor on the form link and click with your right mouse button (do not activate the link and open the form)

--From the menu that pops up, select the Save target as... option in Internet Explorer or the Save link as... or similar option in another browser

--You should then be prompted to choose a location to save the file

--Select the location on your own computer or network and click on the Save button

--Once saved, navigate to the file

Higher Ed/State: Annual Enrollment Appeals:

- Written appeal must be submitted by 12/31/2020 to <u>Benefits.Administration@tn.gov</u> or uploaded through Zendesk
- o Must include details about why deadline was missed
- \circ Must also include an enrollment change form with 2021 elections
- o If adding new dependents, valid dependent verification must also be included

• You may review Edison notes to check if appeal has been approved or denied

If an employee intended to make changes and missed the annual enrollment deadline, they must appeal to Benefits Administration by December 31. Please ask the employee to submit a written appeal as soon as possible to either <u>Benefits.Administration@tn.gov</u> or you may upload it in Zendesk. The appeal must include the details about why they were unable to meet the October 16 deadline. The employee must provide a completed copy of an enrollment change application along with valid dependent verification information if they are trying to add new dependents.

Appeals are being reviewed daily and you will be notified of the decision. To check if one has been approved or denied, you will first see it by reviewing Edison notes.

• **Local Ed and Local Gov**: Annual Enrollment Appeals:

- Written appeal must be submitted by 12/31/2020 to <u>Benefits.Administration@tn.gov</u> or uploaded through Zendesk
- o Must include details about why deadline was missed
- Must also include an enrollment change form with 2021 elections
- o If adding new dependents, valid dependent verification must also be included
- You may review Edison notes to check if appeal has been approved or denied

If an employee intended to make changes and missed the annual enrollment deadline, they must appeal to Benefits Administration by December 31. Please ask the employee to submit a written appeal as soon as possible to either <u>Benefits.Administration@tn.gov</u> or you may upload it in Zendesk. The appeal must include the details about why they were unable to meet the October 30 deadline. The employee must provide a completed copy of an enrollment change application along with valid dependent verification information if they are trying to add new dependents.

Appeals are being reviewed daily and you will be notified of the decision. To check if one has been approved or denied, you will first see it by reviewing Edison notes.

• Service Center Metrics/Customer Service Rating:

• **October 2020:**

- Tickets via Email: 1,416
- Tickets via Self-Service: 5,937
- Tickets via Phone: 9,140
- Tickets via Chat: 966
- Answer Bot: 43
- Total: 17,502
- Satisfaction Score: 95.5%

• **October 2019:**

- Tickets via Email: 1,271
- Tickets via Self-Service: 8,355
- Tickets via Phone: 10,764
- Tickets via Chat: 1,542
- Answer Bot: 8
- Total: 21,940

- Satisfaction Score: 93.9%
- We worked almost 4,500 less interactions this year as last year with both tickets and chats decreasing.
- As you know, we take the satisfaction of our customers very seriously and ask that you please complete the survey after your Zendesk ticket is resolved.
- If you respond with a "Bad" rating to your ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you receive and not if you are unsatisfied with the policy.
- Our satisfaction rate for October was 95.5%.

HIGHER EDUCATION QUESTIONS

- **Higher Ed:** If someone doesn't respond to the survey but has a CDHP again for 2021, the funds won't transfer to Optum?
 - Answer: That is correct. Funds will stay with PayFlex; however, employees have not lost the opportunity. After January 1 when their Optum HSA is active, employees can log onto the Optum member website and download the HSA Rollover/Transfer Request Form and send it to PayFlex. However, members may avoid this by participating in the "bulk transfer" and completing the survey from Benefits Administration now.
- **Higher Ed:** If an employee has a medical FSA in 2020 and has less than \$500 in that account with PayFlex at the end of Dec., and they are switching over for 2021 to the CDHP/HSA, what happens to their PayFlex funds with that FSA that were left over? They can normally carry over up to \$500 in the FSA, but if they are switching over to an HSA for 2021, will those FSA funds be forfeited?
 - Answer: The HSA would not be able to be opened and funded until the medical FSA dollars are down to zero. IRS rules preclude a person from having and contributing to a HSA at the same time they have available dollars in a general-purpose FSA (not a limited purpose FSA, though). This is another reason why we are encouraging all state and higher education employees to spend down their FSAs to zero by the end of the year, otherwise their FSA funds will not be available until July 1, 2021. New this year, thanks to the Coronavirus Aid, Relief and Economic Security (CARES) Act participants may use their FSA funds to buy over-the-counter medications without a prescription, like Advil, Tylenol or other pain relievers, heartburn medication and allergy relief and more. Funds can also be used for feminine care products including tampons, pads, liners, cups and sponges.
- **Higher Ed:** Will all these timeframes and this information be provided to members in the letters (emails) they will receive? Will emails be sent that include everything that has been discussed in the Optum presentation?
 - Answer: We did have a presentation that was specific to employees (vendor webinar), and the timeline was shared with those who participated. They will not receive one communication that encompasses all of this information, but they are getting it through different resources. We have included the presentation in the Nov.

13 email to all ABCs, and you are welcome to share it with your members. It might be helpful to them.

- **Higher Ed:** I wrote down that the CDHP employees don't have to do anything but they should respond to the survey? But if they are not enrolled in the CDHP next year, the funds stay with PayFlex?
 - Answer: Yes, they should respond to the email with the survey if they are enrolled in the CDHP again in 2021 and want to have their funds transferred from PayFlex to Optum Bank automatically. And yes, if they aren't enrolled in the CDHP in 2021 and won't have a HSA next year, the funds will stay in the PayFlex account and they can continue to save or spend those funds. The account will become a PayFlex retail account, and members will be responsible for any PayFlex fees, including the monthly administrative account fee which is currently \$5 per month.
- **Higher Ed:** If a person enrolls in the CDHP/HSA and has funds left in their FSA from the previous year, would it become a limited purpose FSA for dental and vision expenses only?
 - Answer: The member can contact Optum to have the FSA funds converted over to a limited purpose FSA for vision and dental expenses only. This may only occur once the carried over funds of \$500 or less are transferred to Optum around July 1, 2021. The member will need to contact Optum Bank customer care and request the funds be put into a limited purpose FSA (for vision and dental expenses only). Members may not have both a HSA and general-purpose FSA at the same time.
- **Higher Ed:** What about the ABC signature (on the electronic forms)?
 - Answer: On a form that has multiple signatures, the employee will sign and then they will email to you. Then the ABC will sign, and as the last signature, it will lock the form.
- **Higher Ed:** If the forms are locked after signatures, will the ABCs still be able to make notations for in-house processing?
 - **Answer:** The forms are locked after the final signature has been added. If you want you can type information into the top of the form, but once the form is locked no information can be added to it.
- **Higher Ed:** So there is personal information on this form. Is there something advising the individual not to send this via regular email?
 - Answer: No, there is not anything on this form. For many of your agencies, your IT agencies will automatically have your emails set as secure. You can check with your IT department; however, there is not anything on the form that says not to email it if it is not secure. It's up to you to communicate to your employees if they should not be emailing it to you.
- **Higher Ed:** Can the new hire send the form without a Social Security number and we just add the Edison ID later?
 - Answer: Yes, the form isn't locked until the ABC signs it so you could add a Social Security number or ID after the employee signs it and before you do.

- **Higher Ed**: Can you all offer a Retirement training at some point? I am taking over many of retiree enrollment duties and there are many nuances. The retirement people at BA have been very helpful, but I hate having to bug them. I need help with the Continuing Insurance at Retirement form and some of the things that go on when retiring with TCRS and ORP, the Medicare form and The Tennessee Plan and all that goes with that. I'm trying to make sure the employee gets all of the information they need. For instance, how long is the process for their insurance ending and then the premiums coming out of their TCRS? What does that look like?
 - Answer: We do have the Continuing Insurance at Retirement Guide that addresses both TCRS and ORP members, and there is also information on pages 3 and 4 of the Application to Continue Insurance at Retirement on how to complete the form. There are a lot of moving parts between the monetary benefit and the insurance benefits. If you have retirees, there are many different variables with processing their enrollments. We would like you to call the BA Service Center with your questions; you are not bothering us at BA. We can also look at ways we can improve the resources.
 - Here is some more information about processing retiree enrollments: We can't enroll a TCRS retiree until he/she is receiving a pension check the TCRS pension must be approved. We have to pend the application until the pension is approved, and this can take 60-90 days. We pend the application, and we have timeframes when we will check to see if the pension has been approved. And then the application retros back to the original date, back to the original coverage. For example, if active coverage ended on 10/1/20, and if retroactively approved back to 9/5/20 on 11/17/20, we would retroactively enroll coverage back to 10/1/2020.

LOCAL EDUCATION QUESTIONS

- **Local Ed:** If a retiree does not elect to continue insurance at retirement and is a dependent on their spouse's plan through their employer group, can they later elect to choose retiree insurance if there's a special qualifying event and the employee is losing coverage through spouse's plan or through Open Enrollment for retirees?
 - Answer: A retiree who does not immediately continue coverage on the retiree plan may only enroll if the retiree meets all of the special qualifying event criteria. Retirees/employees are not eligible to enroll themselves in the retiree group health plan during the Annual Enrollment period, so we would recommend that you contact our Service Center with this scenario as we need to review their eligibility. You can email us at retirement.insurance@tn.gov or call the Service Center at 800.253.9981 and select option 2.
- **Local Ed:** I received two emails from BA saying that two employees did not get their dependent verification submitted by the deadline to add dependents to their insurance. Does BA also send notification to these employees as well?
 - **Answer:** We do not reach out to the employee directly. The notification goes to the ABC, and we ask that you pass this along to the employee.
- **Local Ed:** When will the January collections applied report be available to download in December?

- **Answer:** We are working on finalizing the final payroll calendar. You will be able to run the Premiums Due report the first week in Dec. We try to run it earlier so you can get ahead on changes in December. The finalized Collections Applied report will be available the first week in January.
- **Local Ed:** I am still receiving multiple emails from Edison regarding login instructions when adding new hires in Edison. Is there an estimated time on when this may be fixed?
 - **Answer:** We do not have an estimated timeline from the Edison team. We are checking regularly, but at this point Edison does not know when it will be resolved; however, they are working on it.
- **Local Ed:** To the Edison issues, I keyed five new hires today and received two Edison log in emails for three of them?
 - **Answer:** Yes, that is the issue previously mentioned. Edison is aware and trying to correct it.
- Local Ed: Is there a time limit on the queries for Annual Enrollment?
 - Answer: The queries should be able to be run at any time, and we recommended using the TN_BA219_AETP_INS_ELECTIONS query as soon as possible as this query may change and results will go away this month. Please run this query now. All other queries can be run at any time.
- **Local Ed:** This enrollment period is the first time we have offered enrollment in the state's dental and vision plans. For new hires in November, how should I handle these enrollments, since their health insurance would be effective 12/1/2020, but dental and vison on 1/1/2021?
 - Answer: For new hires hired after the annual enrollment period, you can send a paper <u>Enrollment Change Application</u> for those interested in dental and vision for 1/1/21.

STATE QUESTIONS

- **State:** We have some employees who have PayFlex cards that expire in Dec. What do they do until March 5?
 - Answer: If employees have PayFlex debit cards that are expiring in Dec., these employees will receive new debit cards in December, which they can use through February 7, 2021, if they still have funds in their HSA and have agreed through the BA survey to have their funds transferred to their 2021 Optum HSA. Those who did not respond or who said NO will have their PayFlex HSA funds remain at PayFlex and the HSA debit card will continue to be usable for their eligible healthcare expenses. All PayFlex FSA and L-FSA debit cards will be deactivated on 12/31/2020.
- **State:** Who did the email come from that was sent out to employees who had PayFlex HSA or FSA? I just want to make sure my region goes back and finds that email and responds.

- Answer: The email was sent to members from the <u>benefits.info@tn.gov</u> account through Outlook. Emails were sent out at 11:50 a.m. on Thursday, Nov. 5, and did not go out to ABCs unless you have a CDHP/HSA and will stay enrolled in this plan next year.
- **State:** I had an employee contact me yesterday who was trying to transfer over her balances and it was not giving her the options for her facility (in the HSA email/survey). How would that be handled? She was following the steps in the email that she received.
 - Answer: We have had a few instances where an agency was not included. If they are not seeing their exact agency, please let us know through <u>benefits.info@tn.gov</u>. The survey link stays the same. The yes or no in the survey and who is responding is the most important information as we want to know who sent it in. We can add or update the agency in the survey information. We pulled the most recent agency list and we apologize if we missed an agency.
- **State:** For employees who will utilize greater than the seed money (\$500) from the state beginning Jan. 1, 2021, what is the recommendation to have access to be able to have monies available from their HSA prior to March 5 to be able to purchase their medications and pay for medical office visits?
 - Answer: Employees cannot spend any funds greater than what their HSA account balance is at any point in time. State employees will receive the state seed funds of \$250 or \$500 in their Optum HSA sometime the first week of January, and if they are contributing funds through payroll deduction, then those funds will start to be added with the January 15 and January 31 paydays and so on. But only the balance that is in their account at any point in time is all that can be spent. An employee may choose, after January 1, to log on to their Optum HSA account at <u>optumbank.com/Tennessee</u> and download the HSA Rollover/Transfer Request Form and send it to PayFlex. This will initiate a direct transfer of their PayFlex HSA balance directly to their Optum HSA rather than waiting on the state's bulk transfer process to complete in early March. Members who agreed "YES" to the BA HSA funds transfer survey will still have access to their PayFlex HSA funds and debit card through February 7, 2021.

LOCAL GOV QUESTIONS

- **Local Gov:** Now that Annual Enrollment is over, what reports should we run to confirm employees' selections? I need to provide my payroll specialist the new premiums that will go into effect 1/1/21.
 - Answer: There are several queries based on whether you want to look at just changes made during Annual Enrollment, or if you want all enrollments as of 1/1/21. At the top of the <u>ABC webpage</u> is a message board, and you will see you will see a tab called Local Ed/Local Gov Queries that lists the queries you can run and includes a link to the query manual in case you need additional information on the queries.

- **Local Gov:** I have a new employee who will just become eligible for coverage effective 12/1. Do I need to do anything special since he didn't do Annual Enrollment? He hasn't returned enrollment information yet.
 - **Answer:** You will enter the employee new hire coverage as normal through a Benefit eForm, and if the new hire coverage is what the employee wants to maintain for 2021, you will not need to do anything else. However, if the employee wants to make changes for 2021, you can submit a paper application for the new coverage, and we will process it since the hire date was after Annual Enrollment ended.
- **Local Gov:** I had an employee who had a notice to cover insurance for a dependent per a court order. On the court order it says 10/28/20, and that he was going to have to pay for the whole month of Oct. I called and it was not supposed to start coverage until 11/10/20 they are going to send me the documentation. What do I need to do when I get the actual form that it was supposed to be effective 11/10/20? The court order has been submitted to BA, effective 10/28/20. Would the employee have to pay for the entire month? I called child support to see if they could do something so he would not have to pay \$500 for services not received.
 - **Answer:** Once you get the revised information and updated order, send it to us, and we will void the current coverage and key for coverage starting 11/1/20.
- **Local Gov:** If someone doesn't get the HSA email, can they just get the email forwarded from a co-worker who got the email? Should I send the name now?
 - Answer: Yes, but you can forward the email, and it will work. However, we want to know who is not receiving the email so we can capture that contact information. This is an important request so we don't miss anyone. Yes, you can send the name now to <u>benefits.info@tn.gov.</u>

Communications and Materials

- Material Updates:
 - The **2021 Cigna Handbook** has been posted on the Partners for Health website under <u>Publications</u>, under the **Member Handbooks Health**.
 - The 2021 BlueCross BlueShield handbook was posted on Tuesday afternoon on the <u>Publications</u> page also under Member Handbooks - Health.
 - **The 2021 New Hire PowerPoints** are posted on the <u>ABC webpage</u> by plan (state, local education or local government). There is a PowerPoint version that you can edit for your agency (please do not change the premium or key benefit information) as well as a PDF with notes you can share directly with your new employees.
 - We are working on a New Hire PPT version with audio and will post it very soon.
 - For New Employees webpage links have been updated, and we will update the For Retirement webpage with the 2021 Continuing Insurance at Retirement Guides which should be completed very soon.

• Higher Ed/State:

- Marketplace Notices: Updated marketplace notices have been posted on the <u>ABC</u> webpage under PPACA documents by plan (state, higher education). This notice includes the applicable 2021 premium amount. Please use this version going forward.
- **Employee Checklists:** The Employee Checklists found on the <u>ABC webpage</u> under the plan headers (state) have been updated. The **Eligibility and Enrollment** and **Information to be Provided** sections have changed. Please use the updated version going forward.

Local Ed/Local Gov:

- Marketplace Notices: Updated marketplace notices have been posted on the <u>ABC</u> webpage under PPACA documents by plan (local education and local government). This notice includes the applicable 2021 premium amount(s). Please use this version going forward.
- Employee Checklists: The Employee Checklists found on the <u>ABC webpage</u> under the plan headers (local education and local government) have been updated. The Eligibility and Enrollment and Information to be Provided sections have changed. Please use the updated version going forward.
- 2021 ABC Conference Call Schedule: The 2021 monthly ABC conference call schedule has been posted on the <u>ABC webpage</u> under Conference Call Notes. Our next ABC conference calls will be held on Jan. 12.
 - Note: We could change the call schedule due to in-person trainings, and additional weekly calls may be added prior to and during next year's Annual Enrollment period.
- **BA Holiday Hours:** State offices and the BA Service Center will be closed December 24 and 25 for the Christmas holiday and December 31 and January 1 for the New Year holiday. We will send the holiday hours for our vendors in an ABC email.
- **Local Ed/Local Gov:** Talk It Out Tuesday Dec. 15: Talk It Out Tuesday phone-in program will be offered the third Tuesday of the month for two more months. This program offers an

opportunity to boost your emotional well-being, get support and offer support to others. All calls can be joined anonymously and will be facilitated by a licensed Here4TN clinician, from our partner, Optum[®].

- $\circ~$ Employees can join for one session or both. Ask questions. Offer ideas. Or just join and listen.
- Employees will just dial in and use the conference ID number below. We sent you the flier again last Friday please share with your employees.

Local Ed:

Dial In Number: 952-222-7450 Phone Conference ID: 250 527 001#

- Details:
 - Tuesdays, December 15 and January 19
 - 3:30 p.m. CT
 - No RSVP required
 - Stay for the whole session or come and go as needed

Local Gov:

Dial In Number: 952-222-7450 Phone Conference ID: 420 476 566#

- Details:
 - Tuesdays, December 15 and January 19
 - 11:30 a.m. CT
 - No RSVP required
 - \circ $\;$ Stay for the whole session or come and go as needed

Benefits

• **Higher Ed only: Optum Bank FSA Administrative Fee Billing:** Linnie Stelk with Optum Bank joined us and went over FSA Administrative Fee Billing information. A PDF copy of the presentation is attached with the Dec. 11 Friday ABC email.

Operations

- Higher Ed/State: Premium Holiday Info for STATE, HIGHER ED employees only! What?
 - On December 4, Benefits Administration (BA) recommended and the State Insurance Committee voted to give all active state and higher education employees a premium holiday for June 2021 coverage.
 - This means there will be no deduction for the health insurance premium this May.
 - The premium holiday is for health insurance (BCBST & Cigna) premiums only and will not include voluntary benefits.
 - The premium holiday is for active employees and COBRA participants only and does not impact retiree premiums.

Why?

- Insurance claims in the state plan have been lower than expected.
- A premium holiday allows us to give back to our employees some of the surplus money on a one-time basis while maintaining sufficient reserves needed to operate the plan.

No premiums for health insurance will be deducted from:

- 5/31 paycheck for state employees;
- A May paycheck for higher education employees (depending on payroll);
- May direct-bill invoices for state and higher ed employees; and
- 6/15 draft sent by BA to higher education administration.

Additional Information:

- Departments will not pay the 80% portion for the June insurance premium. Agency budgets will be adjusted to reflect these non-recurring savings in FY 2021.
- There is no stipulation that an employee has to work a specific amount of time to be eligible. If they are enrolled in coverage, they will not be charged premiums regardless of when their coverage began.
- The employees WILL NOT show on the premiums due report for medical, unless there is a retroactive change for another month (for Higher Ed).
- You may still see charges for medical coverage on the 6/15 draft for any retroactive changes (for Higher Ed).

Communicating to employees:

- **State employees:** Benefits Administration will send **an email** with a letter to all state employees letting them know that there will be a May premium holiday for their June health coverage. The emails will go out in May before the May end-of-month paychecks. If employees reply to these emails, it generates a Zendesk ticket, so we can answer any questions state employees may have.
- **Higher Ed employees:** The email/letter we will send to state employees in May will be forwarded to Rob Chance, April Preston and Holly Girgies for them to distribute as they wish.

• **Higher Ed/Local Ed/Local Gov:** PPACA (Affordable Care Act) Information:

- Information on how to run your PPACA report can be found here: <u>https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/abc_run_ppaca.pdf</u> (under the training section on the ABC website).
- You can run your PPACA report through November now. You can run it for December information after the first of January. Just as a reminder, you will also need to run it again in January/February to pick up anyone that has coverage entered or changed retroactively after the date you run the report.
- You are responsible for preparing 1095 forms for any retirees of your agency that are enrolled (or have family members enrolled) in Medical coverage. The retirees should automatically show on the PPACA report for the ABC(s) in your agency that have security access to your retiree department ID. Please remember that retirees can have dependent-only coverage. This is noted in the coverage code field. There will still be a line for the retiree, but if the coverage code is E, F, I or K then the retiree is not enrolled in coverage.
- BA sent you a list of COBRA enrollees mid-week that are associated with your agency. You must also include them with your 1094/1095 reporting. We will also email you with the information for anyone else that signs up for COBRA after the report is generated. (If you do not receive a report, you do not have COBRA participants.)

- All agencies on the State plan are considered to be self-insured and must do their own reporting. The vendors do not report for self-insured plans.
- Employees do not have to have their 1095 forms to file their taxes, but you are required to send it to them.
- Employers with less than 50 employees need to complete the 1094-B (IRS) form and 1095-B (employee) forms.
 - Provide 1095-B to employees/retirees/COBRA participants by March 2, 2021.
 - File 1094-B and 1095-B forms with the IRS by February 28 (if filing by paper) or March 31 (if filing electronically).
- Employers with more than 50 employees need to complete the 1094-C (IRS) form and 1095-C (employee) forms.
 - Provide 1095-C forms to employees/retirees/COBRA participants by March 2, 2021.
 - File 1094-C and 1095-C forms with the IRS by February 28 (if filing by paper) or March 31 (if filing electronically).
- If you file 250 or more forms, you must electronically file with the IRS.
- If you have specific questions, we have more information available on the ABC webpage under the PPACA documents section, or you can submit a ticket to our service center for help.

• Higher Ed/State: Annual Enrollment Appeals

- Written appeal must be submitted by 12/31/2020 to <u>Benefits.Administration@tn.gov</u> or uploaded through Zendesk
- Must include details about why deadline was missed
- Must also include an enrollment change form with 2021 elections
- If adding new dependents, valid dependent verification must also be included
- You may review Edison notes to check if appeal has been approved or denied
- If an employee intended to make changes and missed the annual enrollment deadline, they must appeal to Benefits Administration by December 31. Please ask the employee to submit a written appeal as soon as possible to either <u>Benefits.Administration@tn.gov</u> or you may upload it in Zendesk. The appeal must include the details about why they were unable to meet the October 16 deadline. The employee must provide a completed copy of an enrollment change application along with valid dependent verification information if they are trying to add new dependents.

Appeals are being reviewed daily and you will be notified of the decision. To check if one has been approved or denied, you will first see it by reviewing Edison notes.

Local Ed/Local Gov: Annual Enrollment Appeals

- Written appeal must be submitted by 12/31/2020 to <u>Benefits.Administration@tn.gov</u> or uploaded through Zendesk
- o Must include details about why deadline was missed
- Must also include an enrollment change form with 2021 elections
- $\circ~$ If adding new dependents, valid dependent verification must also be included
- You may review Edison notes to check if appeal has been approved or denied

If an employee intended to make changes and missed the annual enrollment deadline, they must appeal to Benefits Administration by December 31. Please ask the employee to submit a written appeal as soon as possible to either <u>Benefits.Administration@tn.gov</u> or you may upload it in Zendesk. The appeal must include the details about why they were unable to meet the October 30 deadline. The employee must provide a completed copy of an enrollment change application along with valid dependent verification information if they are trying to add new dependents.

• Service Center Metrics/Customer Service Rating:

• November 2020:

- Tickets via Email: 911
- Tickets via Self-Service: 3,447
- Tickets via Phone: 4,689
- Tickets via Chat: 258
- Total: 9,305
- Satisfaction Score: 96.2%

• November 2019:

- Tickets via Email: 768
- Tickets via Self-Service: 4,286
- Tickets via Phone: 5,211
- Tickets via Chat: 371
- Total: 10,636
- Satisfaction Score: 89.1%
- We received less calls and tickets this year for a total of over 1,300 less interactions as compared to last November.
- As you know, we take the satisfaction of our customers very seriously. Please complete the survey after your ticket is resolved.
- If you respond with a "Bad" rating, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy.
- Our satisfaction rate for November was 96.2%.
- **Higher Ed/State:** New ABC Training: New ABC training is now a web-based course. The course is 13 modules including a quiz.
 - Here is how to take the training:
 - 1. Log in to Edison.
 - 2. Navigate to ELM Menu >ELM> Self Service>Learning>Find Learning>Enter "ABC" in the search box>Click enter.
 - 3. Locate State/Higher Education New ABC Training.
 - 4. Click Launch to the right of the training session.
 - 6. Under Class Syllabus select launch for the first module.
 - 7. You will navigate back to the Class Progress page to proceed to the next module.
 - 8. Once you have completed all 13 modules, your status will change to complete and will be updated on the All Learning page.

- Higher Ed: At what point are they expecting our seed file at Optum?
 - Answer: We are working to confirm the 2021 seed file funding transfer date and additional information and will share this with all higher education ABCs in next week's ABC email.
- **Higher Ed:** If an employee missed Annual Enrollment for the FSA, are they still allowed to enroll or will they have to wait until next year open enrollment?
 - **Answer:** If they have missed Annual Enrollment for the FSA, they cannot enroll unless they have a special qualifying event or an appeal. They have missed the Annual Enrollment period for FSAs for 2021.
- Higher Ed: Can they have a FSA and not have any other insurance?
 - **Answer:** Yes, there is no stipulation that you must be enrolled in insurance to participate in flexible benefits.
- **Higher Ed:** For people who missed the HSA survey email, what are they supposed to do?
 - Answer: For those who are currently enrolled in the CDHP and will be again in 2021, you may wait until sometime after January 1 when your Optum HSA is open and you have that account number. You can then complete steps 1, 3 and 4 on the "Optum Bank HSA Transfer Request" form and send it directly to PayFlex in order to request that your existing HSA funds there be sent directly to Optum. This form can be found on the <u>ABC webpage</u> under Optum Bank.
 - You must be enrolled in the CDHP for state and higher education employees in 2021 in order to transfer your HSA balance to Optum. If you are not enrolled in this plan, then your previous HSA funds must stay with PayFlex or you may move them to a custodian of your own choice.
- **Higher Ed:** The premium holiday is only for active employees and doesn't include retirees, correct?
 - **Answer:** Yes, that is correct. It does not include retirees but does include COBRA members.

LOCAL EDUCATION QUESTIONS

- **Local Ed:** If a CDHP member didn't complete the Optum email survey relating to their HSA balance, is it too late to do it now? I gave them the customer service number to call, and they were referred back to HR.
 - Answer: For those who are currently enrolled in the Local CDHP and will be again in 2021, you may wait until sometime after January 1 when your Optum HSA is open and you have that account number. You can then complete steps 1, 3 and 4 on the "<u>Optum Bank HSA Transfer Request</u>" form and send it directly to PayFlex in order to request that your existing HSA funds there be sent directly to Optum. This form can be found on the <u>ABC webpage</u> under Optum Bank.
 - You must be enrolled in the Local CDHP for local education and local government employees in 2021 in order to transfer your HSA balance to Optum. If you are not

enrolled in this plan, then your previous HSA funds must stay with PayFlex or you may move them to a custodian of your own choice.

- Local Ed: When will PPACA reports be ready?
 - **Answer:** You can run the report now for 2020 through November coverage. You will need to run the report again to pick up December coverage at the beginning of January.
- **Local Ed:** If you didn't make a change for the new year, you won't get new ID cards correct?
 - Answer: Correct, only those newly enrolled or who made changes will get new medical, pharmacy, behavioral health, dental and vision ID cards. Those who enrolled in the Local CDHP/HSA will get new debit cards from Optum Bank.
- **Local Ed:** For employees who want to contribute to their Optum Bank HSA, do we need to send in the request form to Optum or just to our payroll department? We allow payroll contributions to everyone, and they are allowed to contribute. Do we need to send something to Optum or right now?
 - Answer: You would need to work with Optum Bank to make sure your agency is set up for employee payroll contributions if offering through your agency.
 - The <u>Employee Payroll Deduction form</u> is for use only for ABC purposes. Optum does not need a copy of this form, as any contributions sent to Optum will be verified by submission from your agency on the <u>Optum Employer Portal</u>.
 - You can use the <u>Employee Payroll Deduction form</u> to capture employee's payroll elections and track them in your system of record.
 - Please refer to the <u>Optum Employer Portal Guide</u>. Pages 19-30 of this guide will help lead you through submitting both payroll and employer contributions through the <u>Optum Employer Portal</u>.
 - Please make sure you have sent the <u>HSA Funding Form</u> to Optum to get your agencies bank account information on record so you are able to deposit funds for 2021 contributions.
 - We recommend that you contact Optum to assist with the employee contributions process. Please feel free to contact the Optum Account Services team M-F, 7 a.m. 7 p.m. CST. Please have your group ID/employer ID available when calling.
 - Account Services Phone Number: 1-800-294-6620 and Account Services Email: <u>accountservices@optum.com</u>

Local Ed: Has the Optum Bank HSA (payroll deduction) form been updated to allow a place to record employer contributions? The form allows the employee to select the total amount but doesn't allow the employer to select the total contribution. It does not address that we need to deduct the employer contribution and we would need to create our own form?

- Answer: The <u>Employee Payroll Deduction form</u> is for use only for ABC purposes. Optum does not need a copy of this form, as any contributions sent to Optum will be verified by submission from your agency on the <u>Optum Employer Portal</u>.
- You can use the <u>Employee Payroll Deduction form</u> to capture employee's payroll elections and track them in your system of record.

- Please refer to the <u>Optum Employer Portal Guide</u>. Pages 19-30 of this guide will help lead you through submitting both payroll and employer contributions through the <u>Optum Employer Portal</u>.
- Please make sure you have sent the <u>HSA Funding Form</u> to Optum to get your agencies bank account information on record so you are able to deposit funds for 2021 contributions.
- If you have any questions on how to send contributions to Optum, please feel free to contact the Optum Account Services team M-F, 7 a.m. - 7 p.m. CST. Please have your group ID/employer ID available when calling.
- Account Services Phone Number: 1-800-294-6620 and Account Services Email: <u>accountservices@optum.com</u>

STATE QUESTIONS

- State: Does the appeal also apply to FSA / LPFSA / HSA accounts?
 - Answer: Yes, if you have an appeal for these accounts, the same deadline of Dec. 31 applies.
- **State:** We ABCs at the Dept. of Health aren't able to log in to Zendesk anymore. Is there a reason for this?
 - Answer: We are not aware of any issues. We do know that the preferred browser to use is Chrome and not Internet Explorer (IE) as Zendesk does not officially support IE. If you try a different browser and also try clearing your cache and if both of these don't work, please send us an email at <u>benefits.adminstration@tn.gov</u> and ask to route to the system support team so we can help you get logged back in.
- **State:** I am unable to find the new hire PPT?
 - **Answer:** It is on the ABC webpage under the state plan header toward the bottom of the page:

https://www.tn.gov/partnersforhealth/agency-benefits-coordinators.html

LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** When were the updated materials posted? I just pulled them for my use and want to make sure I pulled the correct ones.
 - Answer: The Marketplace Notices were posted Tuesday, Dec. 1. The updated Employee Checklists were posted Wednesday, Dec. 2.
- **Local Gov:** When will we receive the new template to use for HSA now that PayFlex is gone?
 - Answer: The template for payroll contributions is posted on the Partners for Health website on the <u>ABC webpage</u> under the Optum Bank 2021 drop down. All of the current Optum Bank documents are on this webpage. If you need assistance, you can also contact Optum Bank directly. Here is their contact information: Account Services Phone Number: 1-800-294-6620

Account Services Email: accountservices@optum.com

- **Local Gov:** I sent my documents (funding info/checklist) to Optum on 11.12.20 and have not heard from anyone. Should they have gotten back to me?
 - Answer: Yes, you should have heard back from Optum Bank, and they will reach out to you directly. You can also contact Optum Bank Account Services at the phone number and email address below: Account Services Phone Number: 1-800-294-6620 Account Services Email: accountservices@optum.com
- **Local Gov:** I don't recall seeing a funding info/checklist for Optum. What is this, exactly?
 - **Answer:** The <u>HSA Funding Information Form</u> needs to be filled out and returned to Optum in order to have your agencies banking information on record to fund both employer seed money, and payroll contributions.
 - The <u>New Client Checklist</u> form should be used only when access needs to be granted to the Optum <u>Employer Portal</u>, and your agency does not yet have access.
 - These forms can be returned to <u>accountservices@optum.com</u>.
 - If you have any questions on these forms, or on how to send contributions to Optum, please feel free to contact the Optum Account Services team M-F, 7 a.m.-7 p.m. CST. Please have your group ID/employer ID available when calling.
 - Account Services Phone Number: 1-800-294-6620 and Account Services Email: <u>accountservices@optum.com</u>
- Local Gov: Are we still able to print the changes made during Annual Enrollment?
 - Answer: Everyone should have received an email that you can log into Edison and review your confirmation statement. From this navigation, you can view, save or print the confirmation statement.