Combined Conference Call Notes
Higher Ed, Local Ed, Central State and Local Gov
January 10, 2017

Materials and Communications

- **Guide to Continuing Insurance at Retirement:** The retiree guides have been updated and are posted by plan type on the Benefits Administration website under the **For Retirement** tab.

- **ID Cards:** Following annual enrollment, members who should receive new ID cards should have received them by now, except for the remaining Caremark pharmacy cards and member handbooks, which are being mailed this week.
    - **Medical ID Cards**: As a reminder, cards cannot be delivered to an invalid address. If you are getting complaints from members who haven't received medical ID cards, you should first verify their current mailing address and make sure any necessary update is made in Edison. The carriers can't update addresses or mail ID cards to invalid addresses. Once the address on file is verified as being correct, members can contact the carriers to request new cards. Members also have the option of ordering new ID cards or printing temporary ones from the carrier's member home page.

COMMUNICATIONS QUESTIONS

- **Local Ed:** Will Caremark, MetLife (dental) and vision send everyone a new card or only if there has been a change?
    - **Answer:** This year, Caremark is sending new cards and handbooks to every member. As for dental and vision, if it's a brand new enrollment in the plan or a member is moving from one plan to the other, they will receive a new card.

- **Local Ed:** Do we have a bigger network (dental) in East TN? That is the reason why we do not promote the state dental plan because of the small network.
    - **Answer:** Our vendors are continually recruiting providers and members can also nominate a dentist to MetLife or Cigna. Members can go to the ParTNers website, **Contact Us** page, and go to the vendors' websites to learn more

- **Local Ed:** Can I pull this PowerPoint from Edison?
    - **Answer:** We don't publish this PowerPoint, but everything we cover today will be included in the notes we send out on Friday.

- **Local Ed:** Why are we not going to have the new employee PowerPoint with audio this year?
    - **Answer:** There are technological challenges this year with the software we were using. We are researching some different resources, but at this point we will not have a version with audio this year. The PowerPoint version is found on the ABC webpage and can be customized for your agency, and there is a version with notes for employees to reference (**For New Employees** page).

- **State:** Will there be a video (new hire PowerPoint) with audio on the ABC website?
    - **Answer:** We won't have a version with audio this year. On the ABC website, we do have the PowerPoint version, which you can edit for your use, as well as a version with notes for employees to reference.

- **Local Gov:** I know you can print cards on Cigna, can you for BCBS?

- **Answer:** Yes, you can. For BCBS cards, we've included the link below. Members must login. If they aren't registered, they will need to do so. **https://www.bcbst.com/secure/members/**

- **Local Gov:** An employee asked how does he login to print his cards? BCBS and Caremark? Does he just go to their website? He is not receiving his cards.
  - **Answer:** The employee would have to log on to the vendors websites. Employees can access these websites under the **Contact Us** tab on the ParTNers website and on the BA website under **Quick Links**. For Caremark, you need your Edison ID to register.

- **Local Gov:** Did I understand correctly that Caremark cards and member handbooks were mailed this week?
  - **Answer:** They've been mailing for several weeks and the remaining Caremark cards and handbooks were mailing out this week.

- **Local Gov:** Is there a particular browser you should use with BCBS's website? I use Google Chrome, and when I click on some of the links they do not work.
  - **Answer:** We've used Internet Explorer, Firefox, etc., and the links have all worked. We would suggest you try these browsers.

Benefits

- **Optum Health – Website Review:** Melissa Ward with Optum Health, our new behavioral health and EAP vendor, virtually shared the landing page and walked through key features of the leader page and trainings, which you can access at the same url – http://www.here4tn.com. Optum will join us at a later date to go into more detail about the website.

  OPTUM HEALTH QUESTIONS

  - **Local Ed:** Is there a cost associated with onsite training?
    - **Answer:** No, there is not a cost.

  - **Local Ed:** Have the network of facilities and things changed much from Magellan?
    - **Answer:** We are working hard to contract all facilities in Magellan's network that are not in ours. Network facility negotiations take more time than individual providers.

  - **State:** Are there materials we can order for new hire handouts for Optum?
    - **Answer:** Yes, please contact Melissa Ward at melissa.ward@optum.com

  - **Local Gov:** In December I received an Optum packet. In the future, once a new hire has enrolled into medical benefits, will employees receive the same packet at the employee's home address?
    - **Answer:** No, they won't this same packet. The next time we do a mailing to all members, they will receive information at home. But if you require information to give new hires, you can contact melissa.ward@optum.com and she will send information to you.

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- **Higher Ed/State: PayFlex Mailbox for HSAs and FSAs:** PayFlex has provided a unique mailbox for all state ABCs for **HSA questions** (stateoftennessee@payflex.com). This allows ABCs to direct any of their questions to one location, which PayFlex monitors consistently each business day. This service has been extended to the Central State and the Higher Ed ABCs for the **FSA products** going forward. This would include 2016 and 2017 FSA inquiries from the Higher Ed ABCs, which may be going to Sue Paolino today.
    - We feel this will provide the best coverage for everyone's needs since the dedicated PayFlex account management team who manages the mailbox is trained and familiar with the State of TN's plans.
    - Darlene Russo will remain as your point of contact.

- **Higher Ed: PayFlex Employer Portal Refresher:** Kathy Stanton gave a refresher on the Employer Portal. A PDF guide was sent with the Friday, January 6 ABC email for your reference.

PAYFLEX QUESTIONS

- **Higher Ed:** We have a few members who PayFlex has told they do not have an account for 2016. These members need to submit 2016 claims, but when they login, they are only seeing information for 2017?
    - **Answer:** Each member will have different credentials based on the plan year they are researching. They need to make sure they are using the right credentials and logging into the correct website. If there are specific members, send an email to stateoftennessee@payflex.com with the employee's name. Going forward there will be one stop (portal) for all products. The customer service rep may not understand that the person has two different accounts. For 2016, the website is healthhub.com. For 2017, it is stateoftennessee@payflex.com

- **Higher Ed:** I had an employee call me this morning who said she tried to call and order a second debit card for her husband for their FSA account. She was told that her husband was not on her insurance and they could not legally send her a second card unless she had lost her card.
    - **Answer:** I will have to get with you on the specifics on that. We should be able to get you a second card without any issue. I will need the member's name to research what might have occurred, so send me an email at stateoftennessee@payflex.com

- **Higher Ed:** I had an employee who called PayFlex to request an additional card for his spouse and he was told he would have to contact his HR department. What is the process to follow to get additional cards?
    - **Answer:** I would need the employee's name. I can get with the PayFlex service team and make sure this card gets issued. This could be a training opportunity for a specific PayFlex rep.

- **Higher Ed:** I have never logged into PayFlex. How do I get my login (UT employee)?
    - **Answer:** For UT, only central office employees have access at UT. For others, you need to be set up with a role.

- **Local Ed:** I have an employee who enrolled in the CDHP and also set up a HSA. We are one of those districts where our FSA runs from March to February of the next year. If he had used all the FSA funds, can he enroll in that? Can he set up the HSA?
  - **Answer:** The answer is no. If you have an FSA during the calendar year 2017, you can't enroll in the regular HSA in 2017, because you have access to a FSA.

- **State:** Is there a reason why the FSA card cannot be utilized at Kroger pharmacy?
  - **Answer:** You should be able to use the card at Kroger as long as it's for a qualified medical expense. If you're having difficulty, please send that to the stateoftennessee@PayFlex.com email inbox and we will research for you.

- **Local Gov:** Did anyone have a difficult time getting set up with PayFlex?
  - **Answer:** Several people on the call indicated they had troubles. PayFlex responded: We are working on internal issues. We have a lot of them (agency set-ups) completed now. We had to go through a brand new set up and it took a lot of time. We apologize for so many issues. If you are still having issues, please send an email to the stateoftennessee@PayFlex.com box and we will address them.
    - Please note, PayFlex is still getting brand new setups for 2017 where the agency did not offer payroll deductions last year and now the agency is offering them. It's a week long process (at least) to get these new groups setup with an SFTP, review the file, test the file, add the banking and get a production file in and processed.

- **Wellness Program** Paige Turner, our population health director, gave wellness program updates.

  - **2017 Welcome Mailer:** All members enrolled in the Partnership Promise PPO and the Promise HealthSavings CDHP will receive the welcome mailer from Healthways. The layout of the mailer will be the same calendar layout with the due dates for the WBA and screening clearly marked.
    - HOC version - Mail date 1/6 and began arriving in homes on 1/9.
    - Spouse version - Mail date 1/12 and will begin arriving in homes on 1/17.

  - **Well Being Connect:** WBC went live on January 1. Members can access the WBA. Reminder, the deadline is March 15.

  - **Onsite Screenings Update:** All members enrolled in the Partnership Promise PPO and the Promise HealthSavings CDHP are required to complete a biometric screening in 2017. We will continue to offer onsite screenings as a convenient option. Onsite Health Diagnostics (OHD) and Healthways are working to finalize the sites. Members can begin signing up for onsite screenings in early February and the screenings should start in late March or April and run to the July 15 deadline.
    - 104 - number of sites confirmed
    - 37 – number of sites pending confirmation
    - Once the final sites are confirmed, we will provide you with a list of sites in all counties.

- **#CommitToYourWhy Campaign:** Starting with the welcome mailer, we are encouraging members to think about "why" they want to set a health goal. So with that theme, we will be launching a "Commit To Your Why" social media campaign. Using **#CommitToYourWhy,** members will be encouraged to share their "why" and post pictures to social media.

- **EEOC update:** We mentioned earlier this year the EEOC rules for ADA and GINA went into effect on January 1. For information purposes, we wanted to share a few of the rules that have been implemented:
  - **Required Notice** – in the Decision Guide and with the eligibility guide attachment, members receive a notice that explains what medical information will be obtained, who will receive the information and how that information will be used.
  - **GINA Disclosure** – this notice is **specific to spouses only** and does not apply to the head of contract. A wellness program cannot ask the head of contract health questions about their spouse. Spouses will see a separate notice in the terms of use for the WBA and the biometric screening forms for both the Physician Screening Form (PSF) and the onsite screening that will allow the spouse to opt out of disclosing health information in the WBA and biometric screening, and they may do so with no penalty.

WELLNESS PROGRAM QUESTIONS

- **Local Ed:** Does the spouse have to complete the WBA?
  - **Answer:** The spouse can opt out of disclosing information, so if the spouse wishes not to complete the WBA, they will have to notify Healthways.

- **Local Ed:** If they opt out, the family does not lose the Partnership plan?
  - **Answer:** It does not have any impact on the plan choice if the spouse opts out. To make the process smoother, the spouse will need to notify Healthways of his/her wish to opt out.

- **Local Ed:** Does the spouse still have to complete the biometric screening?
  - **Answer:** The spouse can choose to opt out without penalty, but will need to notify Healthways.

- **Local Ed:** If I heard correctly, the spouse can opt out of the Partnership Promise, but they stay on that plan with the employee? Can you clarify?
  - **Answer:** That is correct. The GINA Consent allows spouses the option of not providing genetic information. The spouse will need to notify Healthways if they are choosing to opt out due to this GINA Consent.

- **Local Ed:** Will the GINA information be in the notes on Friday?
  - **Answer:** Yes, the GINA disclosure information is included.

- **Local Gov:** So, the spouse doesn't have to do the Partnership requirements anymore?
  - **Answer:** If the spouse chooses not to do the WBA or screening because they choose not to disclose genetic information, they do not have to. The head of contract cannot be penalized because a spouse opts out. The spouse **does** have to contact Healthways to notify them they are not going to do it.

- **Local Gov:** This is for the spouse. I had a member who enrolled in the No Partnership Promise PPO because the spouse is bed-ridden and cannot complete the requirements.
  - **Answer:** In this instance, the member could enroll in the plan with the Promise and notify the ParTNers wellness program at 888.741.3390 that the spouse was physically not able to complete the requirements. They would work with the spouse and/or the spouse's physician, if he or she wishes, to find an alternate way to meet the Promise.

<u>Operations</u>

- **Eligibility for Retirement Dental Enrollment:**
  - **Higher Ed:** Eligibility for retirement dental enrollment:
    - Member must be receiving a monthly TCRS benefit check OR be an ORP participant.
    - If member was not enrolled in dental plan as an active employee, they may elect to enroll in coverage at the time of retirement. If they do not enroll at the time of retirement, they may enroll throughout the year with a Special Qualifying Event, or during Annual Enrollment.
    - The retiree must enroll in coverage if dependents are to be covered. There is no such thing as dependent-only dental.
    - If a member was enrolled in the dental plan as an active employee, they may choose to enroll in either COBRA dental or retiree dental.

  - **Local Ed/Local Gov:** Eligibility for retirement dental enrollment:
    - Member must be receiving a monthly TCRS benefit check.
    - Member is eligible for retiree dental even if agency does not offer state dental to active employees.
    - If member was not enrolled in dental plan as an active employee, they may elect to enroll in coverage at the time of retirement. If they do not enroll at the time of retirement, they may enroll throughout the year with a Special Qualifying Event, or during Annual Enrollment.
    - The retiree must enroll in coverage if dependents are to be covered. There is no such thing as dependent-only dental.
    - If member was enrolled in dental plan as an active employee, they may choose to enroll in either COBRA dental or retiree dental.
    - If agency does not offer state dental to employees, and member wants to maintain their current agency coverage through COBRA, do NOT indicate retiree dental on the Application to Continue Insurance at Retirement.

  - **State:** Eligibility for retirement dental enrollment:
    - Member must be receiving a monthly TCRS benefit check.
    - If member was not enrolled in dental plan as an active employee, they may elect to enroll in coverage at the time of retirement. If they do not enroll at the time of retirement, they may enroll throughout the year with a Special Qualifying Event, or during Annual Enrollment.
    - The retiree must enroll in coverage if dependents are to be covered. There is no such thing as dependent-only dental.

    - If member was enrolled in dental plan as an active employee, they may choose to enroll in either COBRA dental or retiree dental.

- **State: New Hire Employee Self Service Participation Rate:** Patrice Steinhart shared the new hire ESS participation rates. We have attached the slides used during the presentation during the conference call for your reference. Our November ESS Participation Rate is 87%, the same as October with a YTD rate of 86%. Our goal is a 95% participation rate.
  - Many agencies have embraced this metric and met it and others still struggle with it. We view you, the ABCs, as ambassadors to your newly hired employees. We want, as you do, for your new hires to have a good first impression experience with you, your agency, Benefits Administration, and the State of Tennessee as their employer. We believe ensuring that your newly hired employees have access to Edison and can select their benefits via ESS as just one ingredient to the good experience.
  - We will be reaching out to agencies in the next six months who may be struggling with meeting our proposed participation rate and sharing best practices with you. Let me know if you would like to discuss next steps with meeting this metric.

- **Zendesk Updates:**
  - We have had increased volume to the call center in the past week. We ask that you please do not submit multiple tickets for the same question. This will only slow down our response time.
  - Also, we take the satisfaction of our customers very seriously. Please complete the survey after you complete your Zendesk ticket.
    - If you respond with a "Bad" rating to Zendesk, we will be reaching out to you to see how we can improve. We would ask that you please rate the service you received from our service center, not if you are unsatisfied with policy.
  - Zendesk has proven to be a great communication tool with you and our members for resolving issues. Please refrain from emailing or calling a BA staff member directly. We need you to submit a Zendesk ticket so that we can resolve your issue in the order that it is received and determine whether it's a one off or a systemic issue that all service center staff needs to be made aware of totroubleshoot other issues received. If you email one of our staff directly, we will request that you submit a Zendesk ticket. We have individuals who email multiple BA staff with the same question and we are using multiple resources to resolve the same issue, when we could be using the resources to resolve other issues.

- **Edison Implementation Upgrade:** There is an Edison/People Soft upgrade scheduled to occur on February 20. If there are changes we need to relay, we will share screenshots with you during the February ABC conference calls.

- **New ABC Training:**
  - **January 25**
    - **Session 1 – Local Ed:** 9 a.m. to 11 a.m. Central time
    - **Session 1 – State:** 1 p.m. to 3 p.m. Central time
  - **January 26**
    - **Session 1 – Local Gov:** 9 a.m. to 11 a.m. Central time
    - **Session 2 - All plans:** 1 p.m. to 3 p.m. Central time

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- **Local Ed/Local Gov and Higher Ed: ABC Workshops**
  - **January 12 (already occurred) and Jan 19**
  - Data Entry/eForm training
  - Trainings will occur at 10 – 12 p.m. and 1 – 3 p.m. Central time
    - Directions to register for training:

    1. Login in To Edison.
    2. Navigate to Main Menu above the TN red and white logo>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.
        - ABC Training Webinar (ABCT 5000) State/Higher Ed (Session 1)
        - ABC Training Webinar (ABCT 3000) Local Education (Session 1)
        - ABC Training Webinar (ABCT2000) Local Government (Session 1)
        - ABC Training Webinar (ABCT1000) Combined Entities (Session 2)
        - ABC Workshops (ABCT4000) – Workshops on various topics for New and Established ABC’s
    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.

OPERATIONS QUESTIONS

- **Higher Ed:** Can retirees enroll in retiree dental when COBRA runs out?
  - **Answer:** Yes. If they are set up with COBRA under their retirement record, we receive information before it expires. We would then send the retire information about enrolling in retiree dental so they can keep continuous dental coverage.
  - If they are set up as a retiree, they can apply for it once COBRA ends. The retiree would need to check the appropriate box on the Application to Continue Insurance at Retirement form (FA-1045). They would check ‘Add Coverage’ because it’s a new enrollment in Part 1; then also check the Plan and Coverage level in Part 5.

- **Higher Ed:** Does the vision work the same way as the dental for retirees?
  - **Answer:** The ability to enroll works the same and the retiree can pick it up at retirement if they don’t have it. Only members or dependents enrolled in group health insurance can enroll in vision. For example if you have a retiree at 67, with a spouse at 62 and he keeps his spouse on insurance. Only the spouse is eligible for vision. If the retiree had vision, he could have COBRA vision just like a regular COBRA person but not using the pension check. There is nothing available to him after 18 months.

- **Local Ed:** I had a retiree who elected our COBRA dental and then she also enrolled in retiree dental. I had to reach out to her and clarify what she really wanted because she had been paying for her COBRA.
  - **Answer:** Depending on what’s occurred, they may want to keep our dental and cancel your COBRA dental. That’s up to the agency and the member. We will need a statement from the retiree saying she made an error. Then we will need that to figure out if a refund is owed.

- **Local Ed:** Did I understand correctly that the retiree can keep the retiree dental as long as they receive a TCRS payment?

- **Answer:** That is correct. We keep the retiree on the retiree dental. The retiree would have to send a request to cancel to Benefits Administration; otherwise the member would remain enrolled in the dental coverage provided they remain eligible.

- **Local Ed:** Is it possible to have a "retiree workshop" for potential retirees before the end of the school year?
  - **Answer:** Yes. We will coordinate the details and get back to local ed ABCs.

- **Local Ed:** Sometimes the service center representative will email directly to the ABC. Is it alright to reply back to them directly, as they may be working on a particular issue?
  - **Answer:** You may be seeing a Zendesk ticket to you back as an email, which is what we want. Please always reply through Zendesk and do not reply or send an email directly to a service center analyst.

- **Local Ed:** If we have faxed in paperwork 1.5 to 2 weeks and it hasn't been processed, should we create a Zendesk ticket or call?
  - **Answer:** You could do either one. A Zendesk ticket may be quicker, but the paperwork definitely should be showing in Edison at this point because it should already have been keyed. We are currently keying documents received as of 1/9/2017.

- **Local Ed:** Are the new ABC trainings the same that were offered in the fall of 2016?
  - **Answer:** Yes, they are the same trainings.

- **Local Ed:** What if you did the training in July or August and received an email that you have been removed for not completing the training?
  - **Answer:** We'll have a trainer reach out to you directly to take care of this matter.

- **Local Ed:** I have a new member who elected the pre-paid dental plan and there is not a local dentist and the next county is not taking new patients. How do I proceed with this individual?
  - **Answer:** You need to submit an Insurance Cancel Request form. We will research and make sure there is not a dentist within 40 miles. If not, we will cancel and they can switch to the MetLife preferred dental plan.

- **Local Ed:** Are there any appeals still being accepted?
  - **Answer:** If you're referring to open enrollment appeals, no, the deadline was December 15 at 4:30 Central.

- **Local Ed:** Have all the appeals been answered?
  - **Answer:** No, we are still working on appeals that were forwarded to us. We have about 30 or 40 more to go to. You will get a notification directly from us when a decision has been reached.

- **Local Ed:** If an employee who signed up for the CDHP and then filed an appeal to have it changed, but received a HealthSavings CDHP card, should they just shred it?
  - **Answer:** Yes, they can shred it if the appeal was granted.

- **Local Ed:** Did Cigna pre-paid dental drop dentists after open enrollment was over this year?
  - **Answer:** Providers in networks can and do change, but we are not aware of any major changes to the pre-paid network.

- **Local Ed:** If there isn't a dentist within the 40-mile radius (pre-paid dental plan), and they want to cancel, can they enroll in the preferred dental plan?
  - **Answer:** Yes, you'll need to submit an Insurance Cancel Request form and we'll verify there isn't a dentist within 40 miles of the member. **Note:** Just a reminder that on the ParTNers for Health website, on the Contact Us page you'll find the contact information for all of the dental options. This is a great resource for all kinds of information, including available providers.

- **State:** A ticket was sent to me from Zendesk requesting a correction on an employee who was adding his or her spouse. I replied to it, uploaded the information on December 20 and I haven't received anything. I wanted to make sure I don't need to send another reply to check the status.
  - **Answer:** Please respond back to the ticket and we will research for you.

- **State:** When I go in to the notes section under the benefits tab in Edison, it shows where they've sent me the email where the matter was resolved, but I was never notified by Zendesk?
  - **Answer:** Please send us the ticket and we will look into this issue.

- **State:** What is the data entry/eform training?
  - **Answer:** State ABCs don't do eforms, so that does not apply to you.

- **Local Gov:** Is Zendesk covered in any of these training sessions?
  - **Answer:** It is covered in the New ABC training, Session 1. It is not in the data entry/eForm training (workshop).

- **Local Gov:** Last year we received a printout for each employee covered showing the months they were covered under insurance used to complete 1095s. Is this available this year?
  - **Answer:** This year you can pull the PPACA reports. The report will look like last year's report and it will list your employees and any retirees you have. We will only send out COBRA reports. The navigation is **Main Menu > HCM > Benefits > Review Employee Benefits > TN PPACA Tax Report.** Be sure you put in 2016. All ABCs should run this. It could take a couple of hours to run.

- **Local Gov:** Our office has less than 50 employees. I understand that this year I will be entering information. Are these the training dates where I would get the training for entering data?
  - **Answer:** Yes.

- **Local Gov:** Do we need to do all the training dates and times listed on the slide?
  - **Answer:** For the New ABC training, you need to complete Session 1 and Session 2.

- **Local Gov:** Has anyone used TeleHealth yet?
  - **Answer:** We have had several people use Telehealth on the medical side with good reports/feedback. Members need to preregister for these services on the carrier's website.

- **Local Gov:** Is Telehealth for any plan?
  - **Answer:** Yes, it is part of the benefits for plan members.

- **Local Gov:** Does everyone get a Telehealth card?
  - **Answer:** You don't need a card to use the service and it is available to all plan members. Members were sent information last year at the beginning of 2016, which included a card with contact information about the service. For BCBS, it is called Physicians Now. For Cigna, it is called MD Live. In December, BA sent a Telehealth flier with the Friday, ABC email. More information can be found on the ParTNers for Health website. Members can register to use Telehealth by registering on the carrier's website (BCBST or Cigna).

Combined Conference Call Notes
Higher Ed, Local Ed, Central State and Local Gov
February 14, 2017

Materials and Communications

- **Higher Ed/State: HSA Funds September 2 Through the End of the Year:** This is a reminder that members who enroll in the CDHP with the HSA with coverage effective dates September 2 through the end of the year will **not** receive state HSA funds. This information is included on the Eligibility and Enrollment Guide attachment, which was emailed to ABCs on January 20. The attachment is also found on the **BA website** under **Publications**. Please include the attachment with all enrollment guides you give to your new hires.
- **Higher Ed/State: Vendor Contact List:** We have added the new disability insurance vendor contact information to the Vendor Contact List found on the ABC webpage. The revised list was sent with Friday's ABC email and is found on the **ABC webpage** under **Conference Call Notes**.
- **Edison Down for Systems Upgrade:** As a reminder, Edison will be down February 17 beginning at 5 p.m. through February 21, ending at 8 a.m. Central time. The Operations team will go into more details about the Edison systems upgrade later during the call.
- **State Holiday:** State offices and the BA Service Center will be closed on Monday, February 20 for the President's Day holiday.

COMMUNICATIONS QUESTIONS

- **Higher Ed:** Do you know when AETP (annual enrollment) will be this year?
  - **Answer:** For state and higher ed, it will be the first two business weeks in October.

- **Local Ed:** Is there any news about the new employee audio video?
  - **Answer:** We will not have a version with audio this year. You have the option of using the PowerPoint version with your new hires, which includes notes for you to use when giving the presentation live, or members can use the PDF version that includes the notes.

- **State:** Is there a date yet for the annual benefits meeting in August?
  - **Answer:** The state ABC all day, in-person meeting is tentatively scheduled for Friday, August 11.

- **State:** I have ordered health supplies twice, and still have not received anything or any responses. Should I try again with the vendor listing that was forwarded to us in time for this call?
  - **Answer:** If no one has responded, you can send a list of the vendors to **benefits.info@tn.gov**. We need to know who you have contacted without receiving a response.

Benefits

- **Optum Health Website Review:** Melissa Ward with Optum Health joined us on the calls to go into more detail about what is available on the Optum website.

OPTUM HEALTH QUESTIONS

- **Higher Ed:** Is there a place online to order brochures?
  - **Answer:** Not online, but you can contact Melissa Ward directly at Melissa.Ward@optum.com to order materials.

- **Local Ed:** We used to order packets from Magellan Health Services to give in new employee packets. Can we do the same thing with Optum?
  - **Answer:** Yes, you can contact Melissa directly at melissa.ward@optum.com and she can assist you with materials.

- **Local Gov:** Is there a section on your website to help you keep motivated to lose weight?
  - **Answer:** You would go to here4tn.com, select Members, and under Members on the right, select "Articles and Resources." This will take you to liveandworkwell.com. Then, click on Health & Well Being and go to healthy eating. There are resources with trackers and food diaries.

- **Higher Ed/State: Disability Insurance Introduction:** MetLife is the new disability insurance vendor. Debbie Skelley with MetLife joined us and presented a high-level overview of the disability benefit that will be offered to members during the fall annual enrollment period.
  - We have attached the PPT slides for your reference.

DISABILITY QUESTIONS (state and higher ed only)

- **Higher Ed:** If a member has another source of income coming in, does this affect the short term benefits? What about retirement income from a previous job or spouse's income?
  - **Answer**: A spouse's income wouldn't apply, but retirement income from another job could impact your benefit. We don't want to get into details today as we are still finalizing how this will work.

- **Higher Ed:** How will it work with another source of income, specifically like sick and/or annual leave?
  - **Answer: Clarification - If a member is receiving sick leave or annual leave, our plan design is to reduce the STD benefit by annual leave or sick leave pay.** We are still working on refining these definitions and will have more information for you later during ABC training.

- **Higher Ed:** Will MetLife be the vendor for LTD as well?
  - **Answer:** No, MetLife is the vendor for STD in 2018. UT will conduct an RFP this year for 2018 LTD benefits and TBR will join UT's 2018 contract.

- **Higher Ed:** So for higher ed, Prudential will stay the LTD vendor?
  - **Answer:** Correct, we will offer STD with the state when that is available. At this time, the LTD vendor will stay the same.

- **Higher Ed:** When will we receive more information on the STD offered by MetLife?
  - **Answer:** As Debbie with MetLife said, we will roll more information out in the coming months to ABCs.

- **Higher Ed:** Will there be a contact for the disability vendor?
  - **Answer:** Yes, the disability contact information was included on the Vendor Contact list sent to ABCs with the Friday, February 10 ABC email. The list is also found on the ABC webpage.

Combined Conference Call Notes
Higher Ed, Local Ed, Central State and Local Gov
February 14, 2017

Wellness Program

- **WBA deadline is March 15:** Today marks one month until the March 15 WBA deadline. As of February 14, 31 percent of members have completed the WBA.
    - **Verification system update:** The Healthways verification system (IVR) that members can use to check completion status of their requirements is now operational. Members can call 888.741.3390 and select option 1 to verify their status. They will need their Edison ID number found on their Caremark card.

- **Onsite Screenings:** The sites are now available on the Onsite Health Diagnostics (OHD) website and members can register for an onsite screening. We have included the full list of sites in Friday's ABC email.

- **Q1 Wellness Challenge:** Fitness Frenzy is a four-week exercise challenge that's about adding a little more fun and fitness into every day. It's about finding a few minutes in your hectic schedule to enjoy an activity that makes you breathe deeply and grin from ear to ear. It's about taking the work out of workout. It's about strengthening your heart—and your heartstrings—by engaging in active get-togethers with friends, family and colleagues.
    - **Enrollment started last week and ends February 20**
    - **Challenge runs from February 13 to March 13**

WELLNESS PROGRAM QUESTIONS

- **Higher Ed:** The reminders do not mention the GINA opt-out. Is it okay to mention in communications?
    - **Answer:** The opt-out GINA consent is actually in the Consent and the Terms of Use before spouses choose an onsite screening or if they choose to select to download the Physician Screening Form. Spouses are being informed in the WBA as well.

- **Higher Ed:** So I can include this in a mass email to employees?
    - **Answer:** We defer that to you. We are following the law as the entity by delivering the information but you are more than welcome to share it if you are okay fielding questions. As a reminder, members are receiving the benefit of deeply discounted premiums and lower cost sharing every month in return for completing the Partnership Promise.

- **Local Ed:** Are the appeals done now?
    - **Answer:** For members asking to move from the No Partnership to Partnership, the appeals are done. If there was an error or an appeal already in process, then we are still processing these changes. Technically appeals are complete.

- **Local Ed:** Where are the onsite screenings listed?
    - **Answer:** Members can go to the ParTNers for Health website and click on "Complete Your Biometric Screening". This will take them to the Onsite Health Diagnostics website. On the Onsite Health Diagnostics website members can enter their zip code and it will pull up screening sites in their area. We have also finalized a list of sites and included with today's ABC email and will post the link on the ParTNers for Health website.

- **Local Ed:** I called Partners for Health to check the status of my Promise and the line was not up and running yet. When will it be available for employees?
  - **Answer:** Healthways has been making updates to the IVR. It is now up and running and members can call 888.741.3390 and select option 1 to check their requirement status.

- **Local Ed:** I have an employee whose spouse called 1-888-741-3390 to opt out of their promise requirements due to GINA Consent. He was told they weren't aware of the GINA Consent.
  - **Answer:** We informed Healthways and they have corrected this with the customer service representative.

- **Local Ed:** Did I understand correctly that any spouse of a covered employee makes a choice not to complete the WBA and screening, and the employee and spouse may still remain on the Partnership Promise with the same premium?
  - **Answer:** The spouse can choose to opt out of the WBA and/or the screening due to GINA Consent, which is opting out of releasing genetic health data. The spouse needs to inform Healthways of his or her decision to opt out. The member and spouse would remain on the Partnership Promise PPO.

- **Local Ed:** I have a new hire that started yesterday and his coverage is effective 3/1/17. He had a doctor's visit on Friday last week and wondered if he can have his doctor complete the Physician Screening Form (PSF) since the appointment was prior to his effective date?
  - **Answer:** Yes, he can use screening data from this appointment to complete the form. The appointment has to be within a year of his coverage effective date.

- **State:** The wellness verification option is not in service yet?
  - **Answer:** Healthways has been making updates to the IVR. The verification option is now live and members can call 888.741.3390 and press option 1 to check the completion status of their requirements.

- **State:** Can you talk about the on-site screenings? (Adding a screening site.)
  - **Answer:** The sites have been scheduled but we can consider another site. The site coordinators have received the list of scheduled sites and materials and they can share this information with ABCs. We will also provide a list of sites with the Friday ABC email.

- **Local Gov:** The WBA is what?
  - **Answer:** It is the Well-Being Assessment. It is one of the Partnership Promise requirements. You can find more information about the Partnership Promise requirements on the ParTNers for Health website, under Partnership Promise.

- **Local Gov:** I'm very new, on the WBA, do members get notified to do this and do all members have to do this? Should I remind them to do the WBA? What happens if they do not do the WBA?
  - **Answer:** Members who are enrolled in the Partnership Promise PPO have to complete the requirements. Members enrolled in the other PPOs do not have to

complete the requirements. Members are notified by mail, email (if we have their correct address) and ABCs can also remind members. Members receive discounted premiums for agreeing to complete the requirements. If members don't complete the requirements, they will receive notification from Healthways letting them know they haven't completed the requirements.

- We will have a trainer reach out to you to help you with information on the plans and the Partnership Promise.

- **Local Gov:** Is there a query that will show us who has NOT completed the WBA?
  - **Answer:** No, there is no query specific to each wellness requirement.

Operations

- **Local Ed/Local Gov: IRS Notice – Phishing Scam:** With the Friday, February 3 ABC email, we sent a copy of an IRS Notice warning employers and agencies about a phishing scam.
  - As a reminder: The Internal Revenue Service, state tax agencies and the tax industry issued an urgent alert to all employers that a Form W-2 email phishing scam has evolved beyond the corporate world and is spreading to other sectors, including school districts, tribal organizations and nonprofits.
  - One of our school systems did receive this phishing email (below).
  - If you receive an email, notify your finance and payroll directors.
  - Also, the IRS asks that you notify them following the directions in the notice.
  - Here is a screenshot of the email received by one of the LEAs:

Today's Request
To ROBIN MOODY
Links and other functionality have been disabled in this message. To turn on that functionality, move this message to the Inbox.
This message was marked as spam using a junk filter other than the Outlook Junk E-mail filter.
You forwarded this message on 2/9/2017 3:08 PM.
We converted this message into plain text format.

This sender failed our fraud detection checks and may not be who they appear to be. Learn about spoofing <http://aka.ms/LearnAboutSpoofing> Feedback <http://aka.ms/SafetyTipsFeedback>
Hi Robin,
Please send me a copy of every employee 2016 W-2 wage and tax statement.
Kindly prepare in PDF and send the report via email.
Thanks,

Buzz Thomas
Interim Superintendent

  - **Local Gov:** What is the subject title of the email containing the email scam?
    - **Answer:** Today's Request.

- **Appeals, Administrative Error Letters and More:**
  - **Newborns Removed Due to No SSN**: An appeal will no longer be submitted if the child was removed due to not submitting the SSN within 60 days. The ABC should provide the new SSN either through a Zendesk ticket or via a Corrections & Clarification form.

- **Pre-paid dental cancel requests**: This is not an appealable issue. ABCs should submit request to cancel on the *Insurance Cancel Request* form. BA will verify if we have any participating dentists within a 40 mile radius of the member's home address. If we do and they are accepting new patients, then the request to cancel will be denied.

- **Higher Ed/Local Ed/Local Gov: Employee was never hired in Edison when first eligible**: BA no longer needs an administrative error letter for this reason. For local ed and local gov, the ABC will need to use a hire date of 8/1/16 (this does not apply to higher ed) or greater (because the hire date has to be after the go-live date of eForms).

- **Higher Ed/Local Ed/Local Gov: Member hired with the incorrect hire date**: The ABC can either submit the correct hire date via a Zendesk ticket or submit a Corrections & Clarification form. BA will make the correction in Edison.

SSN FOR NEWBORNS QUESTION:

- **State:** With the 60 days requirement to provide the SSN for newborns, what if the employee has not returned to work to provide the newborn SSN?
  - **Answer:** You can still submit it via Zendesk if the employee has not returned to work and we will keep the child on the insurance.

- **Edison Upgrade – February 17, 2017:** Ian Harris with the Operations team provided more information on the Edison system upgrade.

EDISON UPGRADE QUESTIONS

- **Higher Ed:** Will this eliminate that blue Oracle screen from popping up?
  - **Answer:** No, but you shouldn't ever see that pop up now. If you see that now, you can close your browser and log back in or clear your cache. If you are still seeing it, send an email to Ian at Ian.harris@tn.gov

- **State:** Are the video links working again?
  - **Answer:** Edison sent out updated YouTube video links on the afternoon of 2/8.

- **January Metrics:**
  - 2017 - 9843 Zendesk tickets
  - 2016 - 6,766 calls
  - 45 percent increase in interactions with our customers!
  - We take the satisfaction of our customers very seriously. If you respond with a "Bad" rating to Zendesk, we will be reaching out to you to see how we can improve. Please rate the service you received from our service center, not if you are unsatisfied with policy. For the month of January, our satisfaction rate was 94 percent.

ZENDESK QUESTION

- **Higher Ed:** I like Zendesk, but why is it when the responses come back, the Edison ID isn't always included? Sometimes when I send something over it has the Zendesk number on it, and some have the ID number on it and sometimes not and I have to go dig the number up.

- **Answer:** The Head of Contract's Edison ID should always be included in the body of the message. We have notified our staff to be sure to insert the ID number in the Zendesk ticket.

- **State: Updates:**
  - **State:** We are working on the new hire orientation. If you are interested in volunteering to participate with testing in March. Please let Holly know by sending her an email to holly.m.girgies@tn.gov
  - **State:** We will no longer send emails at the 15th day of the 31-day period effective 2/15/2017.
  - **State:** You now have access to the query TN_BA385_HIRE_BENEFITS_STATUS This query will help you determine if your new hires have completed their enrollment and if the process has been completed.

- **State: New Hire Employee Self Service Participation Rate:** The YTD ESS participation rate remained the same at 87 percent with the month of December increasing to 89 percent. We have 50 percent of our agencies making or exceeding the 95 percent goal in December. I just know that 2017 is the year to attain 95 percent ESS participation rate statewide.

ESS PARTICIPATION RATE

- **State:** Does that measure those employees who waive but do not select anything in ESS? Is this part of the issue that they are not enrolling within the 31-day period?
  - **Answer:** We can send you the ESS report card with the details and that information may help. You can send a request to the BI box at benefits.info@tn.gov

- **State:** Since we are just under the desired percentage, I've been told to tell employees that they must be ready to enroll in benefits when they come to the HR office. Is the 31 days a federal law? How should I handle this? Some people may not be ready. Some cannot get it done on the first day.
  - **Answer:** Our plan document defines our enrollment period as 31days beginning on the hire date. The idea that you want an employee ready to enroll on the first day of employment is possibly an agency call. We do have a letter (on the ABC webpage under State plan, "Pre-Enrollment Benefits Information") that we recommend that state ABCs use and it has the links to our benefits. The goal is for employees to have an idea and/or be ready with questions about the benefits that the State of Tennessee offers during orientation.

- **Local Ed: Retirement Insurance Webinar Information:** Everything You Didn't Think To Ask" webinar will be on Tuesday, April 4, from 3 p.m. – 4 p.m. Central time. We will depend on the ABCs to get this information out to any employees who are considering retiring soon. More information to come in later calls.

- **Local Ed: PPACA Reports:** Local Education Agencies are responsible for reporting their pre-65 retirees on their PPACA reports. One agency was told by their PPACA reporting vendor to remove retirees from their report. The agency terminated the retirees in Edison resulting in all coverage terminating for these retirees. We have reinstated to retiree coverage and notified the agency that they are responsible for reporting retirees to the IRS and on the Form 1095.

- **Release of Information Request and Process:** Many of our members have family members or friends assisting them with their healthcare. In order to speak with someone other than the member about their insurance a Release of Information authorization must be on file. Please remind members that the form must be filled out completely including the expiration date or event. The ***Authorization for Release of Protected Health Information*** form is located here **http://tn.gov/finance/article/fa-benefits-forms**
    - This is the form a member can use if they do not have a power of attorney.

- **Annual HIPAA Training:** The annual HIPAA training will be available in Edison beginning March 13. Instructions to access training will be provided during the March ABC calls. **All ABCs are required to take the training every year.**

  HIPAA TRAINING QUESTIONS
    - **Local Gov:** Mandatory HIPAA training is when?
        - **Answer:** You will able to take HIPAA training any time after March 13, and it can be taken at your convenience.

    - **Local Gov:** I took HIPAA training, but have not received a certificate. Where or how to I get this as stated at end of training?
        - **Answer:** You will not receive a certificate. We keep track of everyone who has completed the training internally. You can also look in ELM and see if you have completed the training.

    - **Local Gov:** I did HIPAA training a few months ago. Do I need to do it again for 2017? Also, if I've always had view access only in Edison, do I need one of these training sessions?
        - **Answer:** Yes, you will need to complete HIPAA training each year, so you'll need to complete the 2017 HIPAA training, and yes, you will need to do one of the Edison trainings.

    - **Local Gov:** Since I'm new and took HIPAA training last week, do I take again after March?
        - **Answer:** We will have to check in the system to see if you need to take the 2017 training as the training should have been closed for 2016.

- **Upcoming ABC Training**
    - **Workshops:**
        - How to Manually Run Automatic Collections Applied and Past Reports and PPACA Reports
            - February 16, 1 p.m. to 2 p.m. Central time

        - Data Entry/eForms
            - February 21, 10 a.m. – 12 p.m. Central time

    - **New ABC Training:**

- **February 22**
  - Session 1 – Local Ed: 9 a.m. to 11 a.m. Central time
  - Session 1 – State: 1 p.m. to 3 p.m. Central time

- **February 23**
  - Session 1 – Local Gov: 9 a.m. to 11 a.m. Central time
  - Session 2 - All plans: 1 p.m. to 3 p.m. Central time

TRAINING QUESTIONS

- **Local Gov:** About the new hire training, Session 1 is for new ABCs, but Session 2 is for ABCs who have not had Edison entry. Is this correct?
  - **Answer:** Yes, if you need the data entry portion of the training, you can complete the Data Entry eForms workshop or Session 2 of the New ABC training.

- **Local Gov:** Will the data entry/eForm training on 2/21 be the same as Edison Keying training?
  - **Answer:** Yes.

- **Local Gov:** I have had the eForms training. Have all users been given keying access?
  - **Answer:** Yes.

GENERAL OPERATIONS QUESTIONS

- **Higher Ed:** Are other schools having issues with transfers and rules about their date of eligibility? Terming from one school and hired at another?
  - **Answer:** Per Lisa Reed, we do have the transfer processes that were agreed on in an email. We will send the email out as a refresher to the Benefits Coordinator list.

- **Higher Ed:** Since Edison will be down this weekend and Monday, will admin error letters be waived if someone's 31st day falls on Monday?
  - **Answer:** Generally, we will extend the enrollment to the next working day due to holidays.

- **Local Ed:** When we enroll a new employee and upload the enrollment application, why can we not pull them up later to look at them?
  - **Answer:** When enrolling a new employee via an eForm application, an Enrollment Form and dependent verification documents do not transfer into the Edison profile. But you can view it in the eForm. You can search by eForm ID or Edison ID.

- **Local Ed:** Is there a way to print a report for retirees only for PPACA?
  - **Answer:** The report will pull everyone, active employees and retirees into an excel spreadsheet. You can filter to obtain the group, either active or retirees. In Columns Y and Z, the field for the retirees has ***RETIREE*** in both columns, instead of a dollar figure.
    - On the PPACA report spreadsheet, the department numbers for all members is in column P; for most agencies there will be one that is for their active members, and another one for their retirees. As a reminder, you may also see the following dependent only codes for your retirees:
      - E-spouse only

- F-two or more children only
- I-child only
- K-spouse and child(ren) only

- **Local Ed:** Since I was not in this district all year, I don't know who the retirees may be? Not sure where I would find and who they would be? Are they on the normal bill?
  - **Answer:** No, because some are paying for the premium out of their pension check. Your retirees will on the PPACA report. We'll have a trainer reach out to you.

- **Local Ed:** It is hard to load the retiree information as we do not know them or their dependents. Retirement knows this information as they pay the retirement, it is hard for ABCs to do this when you don't know who they are. This is frustrating to try and do the PPACA report for people you do not know. It is trying to make sure the information is correct, when you do not know the dependents of the employee/retiree.
  - **Answer:** When you are running the PPACA report, you should have been given the security to view the retirees from your agency. So you would have the security from that retiree ID. You can submit a Zendesk ticket and we can help you with the report.

- **Local Ed:** Is there another option to enroll new employees other than the eForm?
  - **Answer:** No.

- **Local Ed:** We are working on our budget. Do we know if there would be a price increase for next year?
  - **Answer:** We don't have any information yet on premiums for 2017. We usually have this information in the late spring/early summer.

- **State:** I am new to working with benefits. Can you tell me a little about the orientation that you offer?
  - **Answer:** We have a New ABC training that you should attend. We will have a trainer reach out to you.

- **Local Gov:** This is our first year filling out the IRS 1095 form. Can you confirm whose information goes under part III? State of TN or BCBST?
  - **Answer:** Since your organization participates in the Local Government Plan, which is self-insured, the IRS considers you the coverage provider- employer providing self-insured coverage. See instructions for completing Part III of 1095B.
    - Part III. Issuer or Other Coverage Provider, lines 16–22. This part reports information about the coverage provider (insurance company, employer providing self-insured coverage, government agency sponsoring coverage under a government program such as Medicaid or Medicare, or other coverage sponsor). Line 18 reports a telephone number for the coverage provider that you can call if you have questions about the information reported on the form.

- **Local Gov:** I need to call BA with questions about health insurance for retiring employees. Which number do I push when I get the recording?
  - **Answer:** You will press option 2 and then option 3.

- **Local Gov:** When a new employee is added to insurance plan HealthSavings CDHP, how will the ABC be notified when the new employee's eligibility has been uploaded to Payflex to begin employee contributions?
  - **Answer:** It comes over to PayFlex from Edison. All ABCs should have access to the PayFlex system as well. When we complete open enrollments and any new agencies came on board, the ABCs should have been given access to the employer portal and you can confirm if the employee is in the active portal or not. You can email PayFlex at stateoftennessee@PayFlex.com and we can help. The PayFlex contact information is the on the Vendor Contact list found on the ABC webpage.

- **Local Gov:** We had an employee who was put in the wrong plan. We caught it and the employee was put in the correct plan but we were never notified.
  - **Answer:** You can submit a Zendesk ticket and we can follow up to make sure the employee is in the correct plan.

Combined Conference Call Notes
Higher Ed., Local Ed., Central State and Local Gov.
March 14, 2017

Materials and Communications

- We don't have any materials or communications updates this month.

Benefits

- Keith Athow, director of pharmacy, FSA and HSA addressed updates and information about PayFlex customer service.
    - If you have any employees who have mentioned to you that they may have had any kind of issues with PayFlex regarding the HSA or (including FSA for state and higher education employees), we would like to know.
    - In order to work with PayFlex if they are having any kind of customer service issues or trends, we need to have specific examples such as member names, SSNs (not Edison IDs), and if possible, dates that members have called PayFlex customer service.
    - This will help the PayFlex Account Team pull calls to see if they need to direct coaching and/or retraining for a certain employee.
    - Please send any trends that you see in a secure email to benefits.info@tn.gov
    - We also like to hear about any outstanding service or kudos that you might want to share!
    - Correct website for logging into a PayFlex HSA or FSA: stateoftn.payflexdirect.com
    - Correct phone number for PayFlex customer service: 855-288-7936

FSA AND HSA QUESTIONS

- **Higher Ed:** I have an issue about the payment of dependent care reimbursement requests. I believe it is a timing issue. My employees have been frustrated because they are doing it the same way they always have, but the payments aren't coming as they were. It wasn't an issue last year and is this year. Members are not getting the same answers from customer service people. They are being told it is a funding issue.
    - **Follow up question from BA:** Can you tell us what's different this year?
- **Higher Ed:** They are being told funds aren't there from the institutions, so they can't distribute them. We are giving the funds. The person answering can't see the funds when they are there. One person was told she was not in the plan.
    - **Answer:** We have had issue as in some cases, funds were going into the wrong Employer ID. We've been working hard to make sure the funding is going to the correct Employer ID. Once the 2016 plan year closes out, we should no longer have this issue.
        - **PayFlex will only pay out for a date of service one time.** So if you are looking for reimbursement for a DC account for the month of January, do not use dates of service of 1/1/17-1/31/17. Split them out so you have different dates of service. Instead, use the dates of service of 1/1/17 – 1/15/17 and then use 1/16/17-1/31/17.

- **Local Gov:** I have a couple of questions about HSA and the template. Does the "deposit date" have to be the day you are making the deposit, or can you set it for the month end. Can I look up previous downloads?
    - **Answer:** The deposit date can be the month end. We will not do the ACH debit until the deposit date on the file and the members will have their funds when that date hits. For example, you want to fund at the end of March, you can use a 3/31/17 deposit date and send the file in now. When 3/31 hits, the members will have access

to their funds. We will do the ACH debit the night of 3/31 and it would hit their bank account on 4/3.

Wellness Program

- **Well-Being Assessment Deadline Reminder – March 15:** The deadline to complete the WBA was Wednesday, March 15. On Monday we were at 82,000 WBAs completed, slightly ahead of where we were this time last year. We will give you updated WBA completion numbers as we have them.

WELLNESS PROGRAM QUESTIONS

- **State:** Is it correct that new employees will have longer than 3/15 (hired on 3/1) to complete the Partnership Promise requirements?
  - **Answer:** Yes. New hires have 120 days from their coverage effective dates to complete the requirements. There is a chart on the ParTNers for Health website, on the Partnership Promise page that shows that deadline dates that new hires have from their coverage effective date. We have also attached the new hire flier with the Friday, March 17 ABC email. This flier is found on the ParTNers website and new hires receive this flier by mail.

- **Local Gov:** I have an employee who did not provide an email last year for the Well Being Assessment and can't remember her user name/password. How can I get them logged in? I have tried but the email that shows up is none@none.com. Is there a number she can call to update her email address?
  - **Answer:** She can call Healthways at 888.741.3390, and they can walk her through getting her user name and password. We've got lots of people calling, so she might need to leave a voicemail.

- **Local Gov:** How soon after the coverage effective date will a new hire be able to complete the online Healthways Well-Being Assessment?
  - **Answer:** Usually when the member is loaded, it takes a little bit of time for the member to get in the system. I would give it a few weeks.

HIPAA Training Update

- **HIPAA Training in Edison:** It is time to take your 2017 HIPAA Annual Training in Edison. Please follow the path below to enroll in the class. Make sure you enroll in the correct HIPAA class.
  - If you took the course in 2016, you will receive a message "You have already completed this class on," proceed anyways. Edison will record every year you have completed the course.
    - The course takes approximately 30 minutes to complete.
    - There is a 10 question quiz at the end of the course.
    - You must make at least an 80 percent otherwise you will be required to take the quiz again.
    - Here is the navigation in Edison:
    - NAV BAR >Navigator>ELM>Learning Home>Search for Learning HIPAA> HIPAA Annual Training (HIPA2016)>
      - BA_ABC_HIPAA_Higher Education, or
      - BA_ABC_HIPAA_Local Education, or

        - BA_ABC_HIPAA_Local Govt.
    - >Enroll

HIPAA TRAINING QUESTIONS

- **Local Ed:** Our superintendent has decided to look at a company that specializes in paperless records and cloud storage. They are coming up here to do a demonstration. They are asking us for information to use, including documents that have personal information. Can anyone tell me what kind of release forms we would need?
    - **Answer:** You would need to complete a business associate agreement between an agency and a vendor. It ensures HIPAA rules are being followed and puts the responsibility on the vendor. You can give me your contact information and I will follow up with you directly.

- **Local Ed:** Can other staff members in our office do the training as a "guest?"
    - **Answer:** Do they have Edison access? If they do, they can sign up for the training, but each staff member will have to complete the training individually.

- **Local Gov:** I am confirming that you type in HIPA2016 instead of HIPA2017?
    - **Answer:** You are going to type in HIPAA, and it will pull up 2016 for 2017. You do not need to type a date. HIPA2016 is correct.

- **Local Gov:** Who do we call about HIPAA training? Can you send us a copy of the slide?
    - **Answer:** You can contact Chanda at benefits.privacy@tn.gov. The instructions on how to complete HIPAA training are included above in the notes.

- **Local Gov:** I completed the HIPAA training as a new ABC in Feb. 2017. Will I need to do this HIPAA training?
    - **Answer:** You are complete for 2017 and you will not take the course again until 2018.

- **Local Gov:** I have two people in the office who have to complete the HIPAA training. Can we both watch and test at the same time?
    - **Answer:** Each of you has to take the class separately. It records each of you going through the slides, and you each have to take the test individually.

- **Local Gov:** My HIPAA training refuses to launch. I have tried several times. What do I need to do?
    - **Answer:** You can submit a Zendesk ticket and we will research this for you.

<u>Operations</u>

- **February Metrics: 2017**
    - **Tickets via Email: 356**
    - **Tickets via Self Service: 1,498**
    - **Tickets via Phone Call: 5,598**
    - **2016 – 5,589 calls**

- **Customer Service Rating for February:**

- We received about the same number of calls as last year. We received an additional 2,000 Zendesk tickets via email or Self Service.
- We take the satisfaction of our customers very seriously. Please complete the survey after you complete your Zendesk ticket.
- If you respond with a "Bad" rating to Zendesk, we will reach out to you to see how we can improve. We would ask that you please rate the service you received from our service center, not if you are unsatisfied with policy, our satisfaction rate was 92.6 percent.

- **State: ESS Rates:** Our January new hire ESS participation rates is 86 percent; the YTD rate of 86 percent. Our goal is a 95 percent participation rate.
  - We will be reaching out to agencies in the next six months who may be struggling with meeting our proposed participation rate and sharing best practices with you. Let Patrice know if you would like to discuss next steps with meeting this metric.

- **State: New Hire Orientation kick-off date is moving:** We will let you know on the April ABC call when our next kick-off date for the new hire orientation will be.

- **Local Ed: Retirement: "Everything You Didn't Think to Ask"** employee webinar will be on Tuesday, April 4 from 3 p.m. – 4:30 p.m. Central time.
  - This webinar will be set up as a WebEx. We will send out an email blast to all local education ABCs with the information on March 30, 2017. You will then be able to share this information with your employees.

- **Revised Benefits User Security Form:** There is an updated Edison Benefits User Security Authorization form on the ABC webpage under "Forms." The new form now has numbers assigned to the roles that coincide with the new long description when a user queries the role in Edison.
  - Also, the "Remove Access" button has been replaced with "Role Removal Only" as seen on other forms. When checking "Role Removal Only," the role you are requesting to be removed from will also need to be marked in the roles section. This will help auditors understand what access is being removed.
  - **You will use this new form going forward.**

- **2017 In-Person ABC Meeting Schedule:** This summer, BA will offer all-day, in person trainings to go over the 2018 benefits, and many of our vendors will be on hand to provide information and answer your questions in person. These meetings will be open to all ABCs, and we encourage all ABCs to attend. More details, including sign-up information will be coming as we get closer to the meeting dates. We will ask ABCs to pre-register for the events.

Combined Conference Call Notes
Higher Ed., Local Ed., Central State and Local Gov.
March 14, 2017

Meeting Location	Date of Meeting	Time
Meadow View Convention Center Kingsport, TN	August 15	8:30 a.m. – 4:30 p.m.
UT Conference Center Knoxville, TN	August 16	8:30 a.m. – 4:30 p.m.
Fall Creek Falls State Park Spencer, TN	August 17	8:30 a.m.– 4:30 p.m.
Paris Landing State Park Buchanan, TN	August 22	8:30 a.m. – 4:30 p.m.
Premier Place Jackson, TN	August 23	8:30 a.m. – 4:30 p.m.
MTSU Training Center Murfreesboro, TN	August 29	8:30 a.m. – 4:30 p.m.

- **Upcoming March ABC Training**
  - **ABC Workshop:**
    - **Edison Upgrade/BA Calls vs. Carrier Calls**
    - March 16: 1 - 2 p.m. Central time
  - **New ABC Training:**
    - March 22: 9-11 a.m. Central time - Local Ed Session 1
    - March 22: 1-3 p.m. Central time - State/Higher Ed Session 1
    - March 23: 9-11 a.m. Central time - Local Gov Session 1
    - March 23: 1-3 p.m. Central time - All Session 2

TRAINING AND MEETING QUESTIONS

- **Local Ed:** Do we need to register for the all-day meetings?
  - **Answer:** Yes. We will have more information about registering at a later date.
- **Local Ed:** Are they mandatory (in-person, all-day meetings)?
  - **Answer:** No, they are not. They are for your benefit only. They will include very helpful information about 2018 benefits and any changes.
- **Local Ed:** Will the information be sent out in email as well (all-day, in-person meetings)?
  - **Answer:** Yes. It will.
- **Local Gov:** Are these classes required to take?

- **Answer:** The new ABC training is required for new ABCs. They cover policies and procedures. The summer, all-day ABC meetings are not required, but they are beneficial. They will cover the 2018 benefits and any changes.

- **Local Gov:** Are the in-person ABC meetings for new ABCs or all ABCs?
  - **Answer:** They are for all ABCs, and many vendors will be there to talk with you about new benefits for 2018.

- **Local Gov:** Where can we sign up for the in-person trainings?
  - **Answer:** We don't have registration open at this time. You will get more details at a later date about how to sign up.

- **Local Gov:** Did I miss if there was going to be in-person ABC meeting in Chattanooga?
  - **Answer:** No, we won't have one in Chattanooga this summer, but there is a meeting in Fall Creek Falls, which is pretty close to Chattanooga.

OPERATIONS QUESTIONS

- **Higher Ed:** Yesterday, I tried to find a DHMO dentist prior to enrollment using the www.cigna.com, user ID = Dhmo01, password = Stateoftn1. It would not allow me to log in. I checked with UT Insurance and they are having the same problem.
  - **Answer:** That is the correct information found on the Cigna dental splash page where at the bottom of the page, there is a log in sheet that will help you search for a dental provider. There is a warning for users on the splash page about not resetting the password, but sometimes this happens. The password then needs to be reset by Cigna, and it has been reset. If you are having difficulty, you should contact Benefits Administration Service Center to have Cigna reset the password. As a reminder, ABCs and new hires can always call Cigna directly at 800.997.1617 to see if a dentist is available within the 40-mile radius of the new hire.

- **Higher Ed:** When we fax or scan documents, sometimes I am told by agents they see something different in the queue, and other times I am told the agent sees the same as us. What is the process of receipt of those items?
  - **Answer:** It depends on where they are looking. We have a work-flow system and we can look in to tell you what we received and what date we are keying on. What you see in Edison is exactly what we see. If you are uploading to a person's file in Edison, we see it within minutes. If you fax in applications or documents it is scanned into the workflow queues for processing and you will see the documents in scanned documents within 24 hours. Our goal is to key the application within 2-5 business days of the receipt day.

- **Local Ed:** Is Operations the correct department to address about not receiving informational emails? I did not get the COBRA coverage email for the PPACA reports and I have missed out on several key emails about participants.
  - **Answer:** Please put in a Zendesk ticket, and we will be happy to make sure the email address is correct in our directory. **Note: An ABC may want to check your spam folder and your IT department firewalls if you believe you are not receiving emails from Benefits Administration.**

- **Local Ed:** I am running my PPACA report. The report I am getting has everybody and their dependents. It has 40 rows. Can I get it down to the months for 2017?
  - **Answer:** If you could please copy a page of the report you are getting and submit it via Zendesk to Patrice's attention at patrice.steinhart@tn.gov. I would like to see what you are seeing to better address your issue. I can then send it to Edison to find out what is going on. (Several others said they have had this issue.)

- **Local Ed:** When a teacher retires and needs a Medicare Supplement, there are two applications, the Application to Continue Insurance at Retirement and another Medicare Supplement Enrollment Application. Which one is the correct application for a new retiree?
  - **Answer:** When your employee goes directly from active to retiree coverage, in all cases they should fill out the Application to Continue Insurance at Retirement. If they want the Medicare Supplement coverage, they will do that in part four of the application. The Medicare Supplement application is intended for folks already retired. It is not to be used for a member where we need your agency to certify the termination date of active insurance coverage.

- **Local Ed:** I need the COBRA PPACA email sent to me please.
  - **Answer:** If you did not have anybody on COBRA you would not have received an email. If you should have, please put in a Zendesk ticket.

- **Local Ed:** Any information on a projected increase or information on premiums/plan for 2018 that can be released prior to Spring Fiscal workshops?
  - **Answer:** There is no information to share at this time. As soon as we do have information to share, we will, probably in late spring.

- **Local Ed:** Do we need to fill out a new User Security Form or if there is a change?
  - **Answer:** You will need to use it going forward. If you are already in the system, you do not have to use the updated form.

- **Local Ed:** Has anyone had difficulty typing in the BA forms for adding health insurance for new employees?
  - **Answer:** Are you talking about eForms? There have not been any issues and none have been reported. You might try clearing your cache to complete the form. Instructions for clearing your cache can be found online. You might also try using a different browser.

- **Local Ed:** We have an employee retiring at the end of May, and he will be eligible for the Medicare Supplement. However, his wife, who is also under his coverage, is not eligible for Medicare coverage for four months after he retires. How do we handle that?
  - **Answer:** On the Application to Continue Insurance at retirement, he will mark spouse in the group health section (part 3) and retiree in the Medicare Supplement section (part 4) and list his spouse's information as a dependent in part 7. When his wife later becomes entitled to Medicare, it is the retiree's responsibility to contact our office or print the Medicare Supplement application from our website if he would like to add her to his Medicare Supplement coverage.

- **Local Ed:** Does the retiree have to have the Medicare Supplement before a spouse can take it?
  - **Answer:** Yes. The retiree must be enrolled in The Tennessee Plan with POMCO in order to add a spouse.

- **Local Gov:** I am completing a survey for my manager and it is asking if we are fully insured or self-funded. What is the correct answer?
  - **Answer:** The correct answer is self-funded or self-insured.

- **Local Gov:** I need to add our new Finance Director as a second ABC for our agency. Do I use the Benefits User Security Authorization form for this?
  - **Answer:** Yes, you would fill out the form and send it in to the benefits systems supports email at ben.admin.syssup@tn.gov

- **Local Gov:** Do I need to complete the User Security Authorization form if there are no changes?
  - **Answer:** No, you will use the form going forward for any changes or removals that you need to make.

Combined Conference Call Notes
Higher Ed., Local Ed., Central State and Local Gov.
April 11, 2017

Materials and Communications

- **State Offices Closed Friday, April 14:** State offices and the BA call center will be closed on Friday, April 14. Due to the office closing, we will email the conference call notes early next week, and not at the end of this week on April 13.
- **State/Higher Ed: Minnesota Life Fax Order Form:** The fax number on the order form for you to use if you need more group term life insurance or Accidental Death and Dismemberment handbooks has been updated. It is found on the ABC webpage under "**Forms**" and is titled "**Securian (Minnesota Life) Order Form**. Please use this order form and fax number going forward.

COMMUNICATIONS QUESTIONS

- **Local Gov:** When will you know if the health insurance premiums will increase next year?
    - **Answer:** As is always the case we will try to give you a preliminary idea sometime in May but it won't be before May. Premiums aren't finalized until the Insurance Committee meets in late June and approves the rates.

- **State:** Do you know the dates for Open Enrollment is for 2017?
    - **Answer:** For state and higher education, the annual enrollment period will be October 2 through October 13.
    - For local education, local government and retirees, the annual enrollment period will be October 2 through October 27.

- **Local Ed:** Can you give us a heads up for 2018 on health insurance?
    - **Answer:** No, we don't have a heads up yet but we may have an idea during the spring fiscal directors' workshops. The Insurance Committee will meet in late June and July to vote and determine the final plan design and premiums.

- **Local Ed:** It is unfortunate that we are not being given any insight on premiums for the upcoming year until July or August or later. Local Ed budgets are supposed to be done by May 1st, it is unfortunate we can't get any with this being such a large portion of employer expense, it is unfortunate we can't get any ideas on how much the increases may be for premium.
    - **Answer:** This is no different than any other year. We have to base premiums on claims. We try to give agencies a heads up in May. The premiums are typically finalized in June or July when the Insurance Committee meets to vote on them.

Benefits

- **MedAmerica Update:** Bob Smith, our director of voluntary benefits, shared information about changes with MedAmerica and long-term care. Phyllis Shelton, a long-term care consultant who works with MedAmerica, was available during calls and gave additional information. Her contact information and additional information follows the announcement about MedAmerica.
    - **STATE GROUP LONG TERM CARE INSURANCE PROGRAM, April ABC Calls, Talking Points.**
    - The State Group Insurance Plan has offered a long term care insurance program for State and higher education employees and retirees since 2003 and for local education and local government agency employees since 2012. The contract is with MedAmerica

Insurance Company. **The State's contract with MedAmerica expires on Dec. 31, 2017, and cannot be extended.**

- MedAmerica informed the State that when the contract expires, they will no longer accept new enrollment but will continue providing coverage for current insureds on a direct basis.
- Benefits Administration has researched the current market, conducted a Request for Information, and consulted with its actuarial/benefits consulting contractor to understand the current and future viability of group long term care insurance. The long term care industry has changed significantly. All but one of the companies that traditionally offered group long term care insurance are no longer marketing or accepting new enrollment. Research indicated that the one company still marketing and accepting new enrollment in group long term care insurance typically does not offer its program to employers that have previously offered a group long term care insurance program.
- Our current group plan would be difficult, if not impossible, to re-procure without significant changes or concessions. Given the market instability for this product, **the Insurance Committees decided not to procure a new contract for this program after the current contract expires.**
- Additionally, MedAmerica, along with other long term care insurers across the state and nation, is filing for premium rate increases for their long term care insurance plans. **MedAmerica has filed for a premium rate increase for our plan with the Tennessee Department of Commerce and Insurance.** The premium rate increase request was for a minimum and maximum percentage with the average increase being 80 percent. **Industry research shows that even with an 80 percent increase, other products are significantly higher for comparable benefits.** Premium rates vary by age range and coverage option. **The Tennessee Department of Commerce and Insurance will determine the final, approved rate increase.**
- Benefits Administration will let you know the final rate increase and implementation date as soon as it is communicated to us. **MedAmerica will send a letter to notify insureds of the premium rate increase and their options as a result of the increase.** Typical options include the insured paying the increased rate and maintaining the same level of coverage, reducing the level of coverage and paying a premium rate similar to their current rate, or canceling their coverage but retaining a benefit equal to the premium that has already been paid. Insureds always have the right to cancel or downgrade their level of coverage at any time.

  Here is what you need to know going forward:
  - Beginning in 2018, the State will no longer offer payroll deduction for this product. MedAmerica will communicate direct billing options to insureds.
  - Last paycheck deduction should be for December 2017 coverage.
  - June 1, 2017 is the last day a Local Education or Local Government agency can notify MedAmerica and Benefits Administration that they want to offer the State's group long term care insurance program to its employees and dependents. The agency's 60-day open enrollment period must start no later than Aug. 1, 2017.
  - 2017 new hires with participating agencies will have 90 days to apply for coverage without having to answer medical underwriting questions. Application must be made before the end of 2017. Therefore, new hires toward the end of 2017 will have less than 90 days to apply.

    - Eligible employees, retirees, and dependents of participating agencies that are not currently enrolled may apply for coverage prior to the end of the 2017 calendar year.
- More details will be shared with Agency Benefits Coordinators and insureds as they become available.
- Below is how to reach Phyllis Shelton, President, LTC Consultants and Got LTCi. You can ask her questions or set up a consultation with her or Lawrence Vivenzio.
    - www.ltcconsultants.com
    - www.GotLTCi.com
    - 615-590-0306 office direct
    - 615-590-0300
    - 888-400-1118 X 120
    - Phyllis writes a regular blog and has written articles about how to evaluate a rate increase like this one:

http://www.gotltci.com/2015/05/welcome-to-new-subscribers-and-how-to-evaluate-a-rate-increase/

LONG-TERM CARE QUESTIONS

- **Higher Ed:** I have a few questions. Is this coverage as it stands now, one that whatever age the employee enrolls, that premium continues for the employee? Additionally, if the person enters a direct bill relationship, is it captured prior month? November will be the last premium for December?
    - **Answer:** Yes, the insured is locked in at the inception age of the policy. This means that if they enroll at the age of 30, then their premium band will always be for the age of 30. Premiums will carry forward at the insurance age, and adjustments will be for everybody in that age band. The rate increase will be for all age bands in the table of premiums.
    - Edison collects for the next month; so yes, November will be the last premium deduction in Edison for December coverage. After that, the member will pay MedAmerica directly. When an insured changes over to a direct basis with MedAmerica, they keep the same benefit. They can keep paying monthly by bank draft or change to semi-annual, bi-annual or annual payments. If they pay annually, they save about eight percent in the total cost of their premium.

- **Higher Ed:** Let me see if I understand this correctly. There is going to a rate increase across the board. For the people who currently have a policy and are going through payroll deduction, we will stop the payroll in November for December and they will need to determine if they need to go through MedAmerica. If they want to continue with MedAmerica in January, the letter will be very specific. The member can continue with a monthly agreement or set up a pay MedAmerica semi-annually, bi-annually or annually. MedAmerica will send a letter directly to the member.
    - **Answer:** Yes, that is correct. Payroll deductions will stop after the premiums have been deducted for December coverage. Members will get a letter from the vendor that will take the employer out of it. MedAmerica will continue to insure the product to those who are enrolled as December 31, 2017. Current employees can still apply right now. Employees can call Phyllis Shelton, a long-term care consultant who works with MedAmerica at 615-590-0300 or 888-400-1118 ext. 120, and she can answer any questions they may have.

- **Local Ed:** We are in the middle of open enrollment for long-term care with an effective date of 6/1/17. Will our open enrollment cease or be permitted to move forward?
  - **Answer:** It will go on as scheduled.

- **Local Ed:** When will the new rates be available?
  - **Answer:** The Tennessee Department of Commerce and Insurance is still reviewing the premium rate increase that MedAmerica filed and we don't when the new rates will be available. We will let you know as soon as we know.

- **Local Ed:** Will the premiums for 2017 still be on the collections applied report?
  - **Answer:** Yes. There is no change for 2017. For 2017, reporting will continue as it has been. So can employees enroll during Open Enrollment 2017? Or only if they are new employees during the 90-day enrollment period?
  - **Answer:** Employees can enroll at any time as they are not limited to just the enrollment period. New hires have guaranteed issue for 90 days from their eligibility date. Anyone who did not enroll during their open enrollment period as a new hire can enroll later but they will have to answer health questions.

- **State:** Is this the number to contact to schedule a re-education class?
  - **Answer:** You can call Phyllis Shelton at 888-400-1118 x 120.

- **State:** What is the last day for new hires to enroll in long-term care?
  - **Answer:** The contract states that enrollment will be accepted through the end of the year; although that does not give MedAmerica time to do underwriting. For new hires they have 90 days from eligibility date. If any earlier than Dec 31 we will confirm that.

- **Local Gov:** Can payments for long-term care be made from their HSA with Payflex?
  - **Answer:** A person can pay for their long-term care insurance premiums; however, the amount that they may pay from their HSA is age-based and the limits change each year. We've added additional information about long-term care premiums.
  - For 2017, the limits are:

Attained age before the close of the taxable year:	Amount that counts as a medical expense OR paid through a Health Savings Account OR 1st dollar tax-deduction for self-employed
40 or less	$410
41 – 50	$770
51 – 60	$1,530
61 – 70	$4,090
71 and older	$5,110

- Source: http://www.aaltci.org/news/long-term-care-insurance-association-news/2017-tax-deduction-limits-for-traditional-long-term-care-insurance

  - So, for instance, I am in the age 41-50 age band so I can pay up to $770 toward my long term care insurance premiums out of my HSA. If my premiums were higher than that, I would need to pay the amount above $770 using other funds. The easiest way, of course, to do this is to pay the premium out of your own funds and then reimburse yourself out of your HSA funds up to the limit above via a transfer from your HSA to your checking account.

- **Local Gov:** Did you say this was for state and higher ed groups only?
  - **Answer:** No, any agency including local education and local government can participate in long-term care coverage. The agency would need to let BA and MedAmerica know by June 1 that they would like to participate. You can let Lawrence Vivenzio know at Lawrence@ltcconsultants.com that your agency may be interested, and he can let you know the steps.

- **Local Gov:** Will the long-term care be offered during open enrollment in October?
  - **Answer:** Long-term care insurance enrollment is daily and is not limited to the annual enrollment period so anyone can enroll at any time. If someone is interested at a participating agency, they can send a message to Lawrence Vivenzio at Lawrence@ltcconsultants.com and he can help you.

MINNESOTA LIFE INSURANCE QUESTIONS

- **Higher Ed:** I have an employee who wants to enroll in an optional term life policy. They sent in the policy to MN Life and were told it should have gone to BA. I gave them all of the information – that it was administered by MN Life and sent in a Zendesk ticket. I got an email back from BA that BA does not handle optional life administration. Same week, I have an employee who is retiring who wants to cancel her MN Life optional term life and she was told she has to go through the State. Additionally, MN Life will not set up direct billing for a member who is moving from one agency to another and the member was told they could not do it. I believe someone needs to contact MN Life. The issues seem to have just started. Is this the correct policy? If an employee wants to cancel the policy, can't they reach out to MN Life?
  - **Answer:** Tameka has reached out to you in regard to the third issue and the transfer has been resolved. If you could send in the examples of each instance to the BI box at benefits.info@tn.gov we'll send on to Bob to research. If voluntary term life, then yes, they need to reach out to MN Life directly and complete the service request form. BA will research the reported issues and discuss with MN Life.

- **Higher Ed:** We have an employee who has an optional term life policy and she is paying direct bill. She now wants to go through payroll deduction through us. Does she need to reach out to MN Life?
  - **Answer:** Yes, if the employee is changing billing, she will have to start the request with Minnesota Life.

- **Higher Ed:** I have an issue that state information is not getting to MN Life. When a new employee tries to call them about getting life insurance or trying to enroll online, MN Life doesn't have any record of who they are. The new employees keep calling back. We have called BA about this issue. We can get you the examples as this has been happening for the last few months.

- **Answer:** We send a weekly eligibility file to MN Life. We will need to see when we keyed the eligibility and when the file with the eligibility was sent over. We can check out timing versus what is happening with MN Life. You can send examples to the BI box at benefits.info@tn.gov and we can research.

- **Higher Ed:** I also have employees who transferred to from other agencies and I have been waiting two to three months for their optional term life benefits to be billed to us. I also have employees with incorrect monthly premiums billed to us and some of them change every month.
  - **Answer:** You can send the examples to us at the BI box at benefits.info@tn.gov. Sometimes it is a timing issue. Payroll deduction updates are only sent by MN Life to the State at the beginning of each month. It may take a month or two before the payroll deduction takes place. We will work with MN life to define the timing issue to get the correct budget code to MN Life.

- **Higher Ed:** In the past when we had an employee on direct bill it worked fine and now all of a sudden it has stopped running smoothly. So it is up to us the ABC to first contact MN Life that we have a new employee?
  - **Answer:** In this instance if the employee wants to change how they are going to pay, the employee should contact MN Life directly.

- **Higher Ed:** When that agency transfer is keyed into Edison, doesn't that electronic transfer go to MN Life?
  - **Answer:** MN Life receives an eligibility file. We will check with MN Life to see if they are looking at the budget codes for currently enrolled employees. It is unlikely that they are comparing the eligibility file to previously terminated employees. We will provide additional information after our research.

DENTAL BENEFIT QUESTIONS

- **Higher Ed:** I have an employee who has Cigna dental and the employee's dependent is out of state. What does the dependent do in this instance?
  - **Answer:** The dependent would use a different dentist than the employee and would need to call Cigna at 800.997.1617 to have them assign a different dentist. They would use the Cigna DHMO network.

- **BlueCross BlueShield:** Amy Jordan with BlueCross BlueShield went over the information and flier we emailed to ABCs with the Friday, April 7 ABC email about BlueCard WorldWide.
  - **BlueCard WorldWide is now Blue Cross Blue Shield Global Care:** BlueCross BlueShield of Tennessee announces a new name for the program that covers our members traveling or living abroad outside the United States. BlueCard Worldwide is now **Blue Cross Blue Shield Global Core (BCBS Global Core)**. While the name has changed, the coverage for our members has not.
  - GeoBlue is now the medical assistance vendor for all BCBS Global Core claims. The service center phone numbers are the same as before: 1-800-810-BLUE and (804) 673-1177, however, the program's URL is now bcbsglobalcore.com

- To contact Amy, email: amy_jordan@bcbst.com

BLUECROSS BLUESHIELD QUESTIONS

- **State:** Is this an added insurance or is this included in BCBS?
  - **Answer:** It is included for those who have BlueCross BlueShield as their carrier and who carry a BCBS insurance card.

- **State:** Will BlueCross send out a notification to employees regarding the update to the name change, etc?
  - **Answer:** No, but you can share the flier with your employees.

<u>Wellness Program and Employee Assistance Program</u>

- **Biometric Screening Update:** Onsite screenings have started. You have been and will continue to receive the most up to date list of sites to share with members. There are a total of 113 sites scheduled across the state. If you do not have a screening in your area, members have the option to download the Physician Screening Form from the Onsite Health Diagnostics (OHD) website and take it to their physician to submit to OHD.

  WELLNESS PROGRAM QUESTIONS

  - **Higher Ed:** Are employees still required to take the counseling calls?
    - **Answer:** If members are enrolled in the Partnership Promise PPO or the Promise HealthSavings CDHP and are called for disease management coaching (asthma, COPD, congestive heart failure, coronary artery disease and diabetes) then yes, they have to take coaching calls. If in the No Partnership Promise plan, they don't have to take the coaching calls.

  - **Higher Ed:** What is considered disease management? If they don't have disease management, do they have to take the coaching calls?
    - **Answer:** There are five diseases in the disease management program and they are asthma, diabetes, chronic obstructive pulmonary disease (COPD), congestive heart failure (CHF), coronary heart disease (CHD). You can find this information on the ParTNers for Health website on the Partnership Promise page.

  - **Local Ed:** Is it too late for an employee to complete their well-being assessment?
    - **Answer:** No. You can send the member name and Edison ID to the BI box at benefits.info@tn.gov and we can take a look at the member and follow up.

  - **Local Gov:** Are you going to provide any additional Biometric Screening locations? There isn't one for Wilson County right now.
    - **Answer:** The sites listed on the screening lists are the only scheduled screening sites we will have available this year.

- **Telemental Health and Flier:** Melissa Ward with Optum relayed information about the telemental behavioral health flier you received on Friday, April 7 and answered questions you had about the benefit.

OPTUM QUESTIONS

- **Higher Ed:** We are having issues getting Optum brochures. When will they be available? We also need to get the new Optum pdf file.
  - **Answer:** You can just email me at Melissa.ward@optum.com and we can send these right out to you.

- **Local Ed:** Did this flier (telemental health) go out to members or do we need to send to our employees?
  - **Answer:** It did not go directly to members. We sent the flier to ABCs and you can share it with your employees.

HIPAA Training

- **HIPAA Training in Edison:** It is time to take your 2017 HIPAA Annual Training in Edison. Please follow the path below to enroll in the class. Make sure you enroll in the correct HIPAA class. If you took the course in 2016, you will receive a message **"You have already completed this class on"** proceed anyways. Edison will record every year you have completed the course. The course takes approximately 30 minutes. There is a 10 question quiz at the end of the course. You must make at least an 80% otherwise you will be required to take the quiz again.
  - **NAV BAR >Navigator>ELM>Learning Home>Search for Learning HIPAA> HIPAA Annual Training (HIPA2016)> BA_ABC_HIPAA_Higher Education or BA_ABC_HIPAA_Local Education or BA_ABC_HIPAA_Local Govt. >Enroll**

HIPAA TRAINING QUESTIONS

- **Local Gov:** How do we contact Chanda about HIPAA training**?**
  - **Answer:** Email Chanda Rainey at **Chanda.rainey@tn.gov**

- **Local Gov:** I took my training in February 2017 as new ABC. Do I need to take it again?
  - **Answer:** No, you have satisfied he requirement for 2017.

- **Local Gov:** Who needs to take HIPAA besides ABC's? Do board chairs or CEOs need to?
  - **Answer:** ABCs need to take the training for sure. Anyone who accesses Edison or employees' PHI needs to take HIPAA training.

Operations

- **March Metrics: 2017**
  - **Tickets via Email: 416**
  - **Tickets via Self Service: 1,598**
  - **Tickets via Phone Call: 5,920**
  - **2016 – 4,818 calls**

- **Customer Service Rating for March:**

  - Our call volume increased by 1200+ calls in March from last year. We received an additional 2,000 Zendesk tickets via email or Self Service.
  - We take the satisfaction of our customers very seriously. Please complete the survey after you complete your Zendesk ticket.
  - If you respond with a “Bad” rating to Zendesk, we will reach out to you to see how we can improve. We would ask that you please rate the service you received from our service center, not if you are unsatisfied with policy. Our satisfaction rate was 94.1 percent.

- **State:** **ESS Rates:** Our February new hire ESS participation rates is 92 percent; the YTD rate of 89 percent. Our goal is a 95 percent participation rate.
  - We will be reaching out to agencies in the next six months who may be struggling with meeting our proposed participation rate and sharing best practices with you. Let me know if you would like to discuss next steps with meeting this metric.

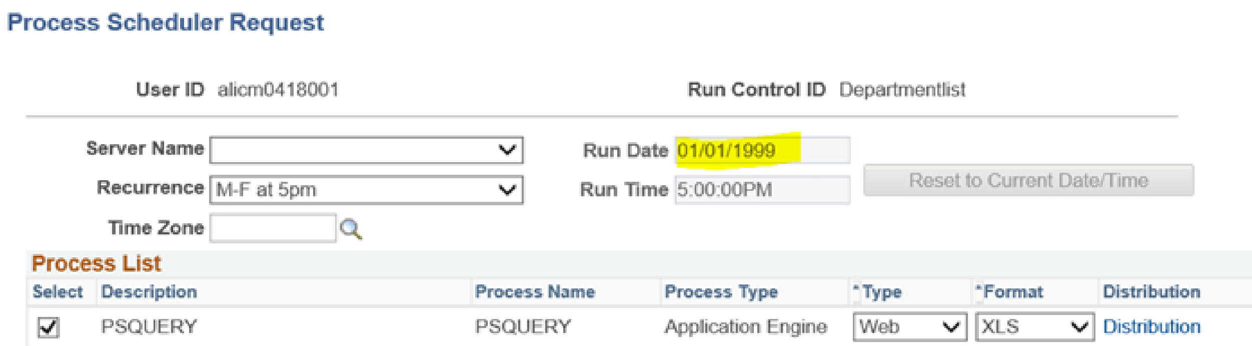
- **State:** **New Hire Orientation kick-off date is moving:** We will let you know on the May ABC call when our next kick-off date for the new hire orientation will be.

- **Local Ed:** **Retirement: “Everything You Didn’t Think to Ask”** employee webinar will be on Wednesday, April 26 from 4 p.m. – 5:30 p.m. Central time.
  - How to continue to coverage at retirement.
  - This webinar will be set up as a WebEx. We will send out an email blast to all local education ABCs with the information on 4/13/ 2017. You will then be able to share this information with your employees.

- **Higher Ed/Local Ed/Local Gov:** **New Hire Email Notifications:** New Hire email notifications are changing for NP ABCs. **The email notification will no longer contain the Access ID and initial password of the employee.** Instead, the 8 digit Employee ID will be provided along with instructions to use the “1st Time Login/Password Reset” link on the Edison login page. As you may recall, the “1st Time Login/Password Reset” functionality was rolled out for Annual Enrollment last fall. This new functionality is designed to help new employees easily navigate through their initial login process, and ensure increased protection of each employee’s personal credentials.

  All the employee will need to complete the initial login process is his or her 8 digit Employee ID provided in the email and personal information about themselves. Please note that your agency has the Employee ID required for login at the point the Hire eForm is entered. This means that as soon as the hire transaction is approved and the effective date is reached, the employee should be able to login.

- **Reoccurring Reports in Edison:** There is a glitch in Edison when setting up a report to automatically reoccur. It will default back to a date in the past, such as 01/01/1999. This will cause you get multiple reports until the reports are current. Edison is aware of this issue and is working on resolving it. In the meantime, we advise that if you could please try to not schedule a recurring report or you will get all the reports from the past date until the current date until the issue is resolved. Here is a screenshot of what this looks like in Edison:



- **2017 In-Person ABC Meeting Schedule:** This summer, BA will offer all-day, in person trainings to go over the 2018 benefits and many of our vendors will be on hand to provide information and answer your questions in person. These meetings will be open to all ABCs, and we encourage all ABCs to attend. More details, including sign-up information will be coming as we get closer to the meeting dates. We will ask ABCs to pre-register for the events.
  - **Higher Ed:** Will also have the Nashville all day, in-person training on Thursday, August 10 at the Tennessee Tower.
  - **State:** Will also have the Nashville all-day, in-person training on Friday, August 11 at the Tennessee Tower.

Meeting Location	Date of Meeting	Time
Meadow View Convention Center Kingsport, TN	August 15	8:30 a.m. – 4:30 p.m.
UT Conference Center Knoxville, TN	August 16	8:30 a.m. – 4:30 p.m.
Fall Creek Falls State Park Spencer, TN	August 17	8:30 a.m.– 4:30 p.m.
Paris Landing State Park Buchanan, TN	August 22	8:30 a.m. – 4:30 p.m.
Premier Place Jackson, TN	August 23	8:30 a.m. – 4:30 p.m.
MTSU Training Center Murfreesboro, TN	August 29	8:30 a.m. – 4:30 p.m.

- **Upcoming ABC Training**
  - **Training for April**
  - **ABC Workshop:**

- ABC Website and Vendor sites
- April 20: 1 - 2 p.m. Central time

- **New ABC Training:**
  - April 26: 9-11 a.m. Central time - Local Ed Session 1
  - April 26: 1-3 p.m. Central time - State/Higher Ed Session 1
  - April 27: 9-11 a.m. Central time - Local Gov Session 1
  - April 27: 1-3 p.m. Central time - All Session 2
- You can register for all trainings in Edison/ELM

OPERATIONS QUESTIONS

- **Higher Ed:** If you create or had existing (recurring report)?
  - **Answer:** Only if you create a new report.

- **Higher Ed:** Where are the reports (recurring reports)?
  - **Answer:** Either in your report manager or emailed to you depending on how they are set up. An example is a collections applied report.

- **Local Ed:** When will POMCO change to UHC?
  - **Answer:** BA was informed yesterday that the transaction had been completed as of March 31. There have been no decisions yet about the name of POMCO whether it will stay the same or change to something different.

- **Local Ed:** When is the POMCO contract up for bid?
  - **Answer:** In five years.

- **Local Ed:** I thought that the idea of in-person training in August would be that you would have an idea of what would be happening with the changes?
  - **Answer:** That is true. It is also the idea of bringing the state/higher ed meeting to you. So, many of the vendors will be there to answer your questions and we'll have information the plan design and changes.

- **Local Ed:** What email do we use to order BCBS provider directories for 2017?
  - **Answer:** You would email Amy Jordan at amy_jordan@bcbst.com. Amy's information and all of our vendor contact information is found on the Vendor Contact List on the ABC webpage.

- **Local Ed:** A retiree who is on Medicare/POMCO, but spouse under age 65...can the retiree stay on state Vision and Dental? Or can only his spouse stay on it?
  - **Answer:** The eligibility for retiree group health dental and vision are not all the same. For eligibility for retiree vision, the retiree must be receiving a pension check and only members who are covered on the retiree group health plan are eligible for retiree vision coverage. In this scenario, if the spouse is enrolled on the retiree group health plan the spouse would be eligible for retiree vision but the retiree would not be eligible for retiree vision for themselves because they are not enrolled on group health. Dental is a completely separate product. The retiree must be receiving a TCRS pension check to be eligible for retiree dental coverage.

- **Local Ed:** Can you give us a schedule for the spring fiscal workshops?
  - **Answer:** You will need to check with the Department of Education about the schedule.

- **Local Ed:** Will the retiree supplemental benefits under United Health Care be as good as they were with POMCO?
  - **Answer:** The retiree supplemental benefits will not change. In regard to changes to the Medicare Supplement benefits, BA designs the benefits and POMCO administers claims for benefits. POMCO has stated there will no be changes in service.

- **Local Ed:** In the year 2020, will POMCO change the way they pay the deductibles for retirees on Medicare?
  - **Answer:** Benefit design for 2020 is a little far out to predict. We present the design to the State Insurance Committee with the current trend and that will be determined as we near 2020.

- **Local Ed:** I know we are way past PPACA, but I realized in February that I had been sent the COBRA PPACA report that has incorrect information on it. I requested from the COBRA depart an updated PPACA with correct information and I have not been able to obtain that. Any suggestions on how to obtain that for my records? I have called in twice with no results.
  - **Answer:** We will have someone get back to you.

- **State:** When will we expect to get the other information regarding open enrollment?
  - **Answer:** The benefits updates and information is the same schedule as last year. It will be Sept 1 for annual enrollment information on the ParTNers website. We will do some earlier disability training. Disability vendor will travel with us to the onsite trainings.

- **State:** If we cannot make it to the meeting in Nashville, will the ones that are scheduled later give us the same information?
  - **Answer:** Generally, yes.

- **Local Gov:** One of our Local Govt. employees is asking what the difference between the Partnership Promise and No Promise options are. In the Decision Guide there is a comparison between the different plans but the No Promise isn't one of them. Is there a different printout?
  - **Answer:** The benefits and coverage are same but the cost is different and whether or not you have to do the Partnership Promise.

- **Local Gov:** We do not give those out to new hires. They do not use Edison. I have always faxed it for them. Is this still ok? Other than now, I will be entering in Edison and not faxing paper copies. But it's still ok for me to do it and not the employees, correct?
  - **Answer:** If you are referring to you entering the eForm then that is totally fine.

- **Local Gov:** What was on April 20?
  - **Answer:** ABC Workshop on ABC Website and Vendor sites, April 20: 1 - 2 p.m. Central time.

- **Local Gov:** One more question about No Promise or Promise option: if an employee currently has "No Promise" coverage, will they be bumped to Standard next year?
  - **Answer:** We don't know what the new benefit and plan design will be for next year, so we can't answer that question yet.

- **Local Gov:** Since the Edison website has been updated, are the instructions located on the ABC website still compatible?
  - **Answer:** The information is still compatible; the only thing that has changed is the initial navigation. We are posting the slides from the Edison Upgrade Workshop we held in March on the ABC Website as a reference.

- **Local Gov:** I was trying to run some queries the other day and couldn't locate them on Edison. Where do I go to run queries?
  - **Answer:** We will have a trainer reach out to you.

- **Local Gov:** For the in-person training, can we suggest topics of things we would like you to explain?
  - **Answer:** If you want, you can send your ideas to BI box at benefits.info@tn.gov. We will go over networks, vendor programs, benefits changes, optional products. Operations updates and the CDHP/HSA.

- **Local Gov:** Where is the document located on the website that includes all phone numbers for all benefits and sites?
  - **Answer:** If you are talking about the Vendor Contact list, it is on the ABC webpage under **Conference Call Notes**.

- **Local Gov:** Prior to upgrade, instructions were to go the "Main Menu". Main menu is no longer visible on Edison.
  - **Answer:** You now go through the navigation bar on Edison. It is on the top right hand corner in Edison.

- **Local Gov:** If an employer terminates that employee's health insurance are they required to send a notification to that employee stating that their insurance was cancelled? We have an employee and he was not notified. Is he required to be notified within a certain time period?
  - **Answer:** They may have had to send him a COBRA notice. We pulled this information about COBRA notices:
    - COBRA applies only to private-sector employers with 20 or more employees and a group health insurance plan. If your business employs fewer than 20 workers or does not offer its employees' health care coverage under a group plan, you have no responsibilities as an employer under COBRA. Keep in mind, however, that COBRA counts part-time worker equivalents, which means that it

will combine the hours of two or more part-time workers to make a single full-time worker under the law to meet the 20-worker minimum. An employer must notify its health insurance plan administrator of the employee's COBRA eligibility within 30 days of the employee's last day at work. The plan administrator then has 14 days in which to notify the employee of the right to elect COBRA coverage. They must be given at least 60 days to make the election.

- **Local Gov:** Holly, do you an email address or how would I reach you about training?
  - **Answer:** You can reach Holly at holly.m.girgies@tn.gov

- **Local Gov:** One of my board members seems to understand that local governments' opportunity to participate in the State's benefit plans is limited. Has there been any discussion about that?
  - **Answer:** That is a rumor, and is not true.

- **Local Gov:** If you have a court order to add a dependent, do I need to send a copy of their birth certificate to be added to the insurance? The employee is having a hard time getting the document from their ex.
  - **Answer:** No, we just need the court order and will add the child.

- **Local Gov:** When you have the in person training, can you go over deductibles, copays and coinsurance and other terms and information
  - **Answer:** The training team is putting together a training video that will help with this information and we will also have short video vignettes that explain those terms.

- **Local Gov:** Going back to the question about the son being dropped from coverage, he should also receive a cert of insurance from the creditable coverage. Can you not request one?
  - **Answer:** They are no longer required under ACA. But you can request one from the employer.

Combined Conference Call Notes
Higher Ed, Local Ed, Central State and Local Gov
May 9, 2017

Materials and Communications

- **2018 Benefits Guide:** This fall, we are combining the Decision Guide with the Eligibility & Enrollment Guide for the state/higher education, local education and local government plans. This means that the 2018 guide will be a benefits guide for all employees, including new hires. For annual enrollment, we will mail the guide to eligible employees and ABCs, **but this is the last year we will mail an annual enrollment guide.** You will be able to order guides this year.
    - Beginning next year, we are going to go digital with the guides. We do intend that the online digital guide will be printable and that you will be able to print out the whole guide or specific pieces of the guide from the ParTNers for Health website.
    - When we run out of our supply of 2018 Benefits Guides, we will direct you and new hires to the digital guide, which will be on the ParTNers for Health website.
    - The online guide will include links to animated videos we are creating to help members learn about benefits. Topics include Insurance 101, Network versus a Plan, What is a PPO, CDHP/HSA, etc. **These animated videos will be available for this year's fall annual enrollment.**
    - We are still determining if we will combine the guides for retirees or continue to produce a separate Decision Guide for retirees.
    - Next fall to alert eligible employees that the digital guide is online, we will send out a newsletter or quick guide well in advance of Annual Enrollment letting these employees know where they can go to find the digital guide and more information.

- **Local Ed: Benefits Administration Spring Fiscal Workshop Webinar Presentation:** Next Tuesday, May 16 at 10 a.m., Laurie Lee, the executive director of Benefits Administration (BA), will present to local education ABCs the information being presented by BA staff at the Fiscal Officers and Schools Directors' Regional Spring Fiscal Workshops. Topics she will cover include the Premium Setting Process and 2018 Plans Design considerations.
    - We will use the same login link and phone number you use for ABC calls. We've included the login information with the Friday, May 12 ABC email.

COMMUNICATIONS QUESTIONS

- **Higher Ed:** Any word on the long-term care rate increase?
    - **Answer:** We do not have any word on the long-term care rate increase yet.

- **Higher Ed:** During the on-site training sessions, will we discuss the new short-term disability with MetLife?
    - **Answer:** Yes. We will have representatives from MetLife there to talk about the specifics of those plans. And we are also going to offer additional webinars in July. We will release those dates to you soon.

- **Local Ed:** How will the members be notified about the digital guides? Email/mailer? We still have some employees who don't use computers.
    - **Answer:** We plan to mail a newsletter or a similar communication to all eligible employees prior to annual enrollment. We do have legal notices we have to mail to all eligible employees, so it will probably look like a newsletter. It will announce the changes to all eligible employees and where they can go for more information. For new hires, we will have the digital guide on the website, but the ABCs will need to let new hires know where to go for more information.

- **State:** Do we need to order any guides for new hires?
  - **Answer:** For this year, the process will be the same. You'll be able to order a few extra guides for annual enrollment, as well as guides for your new hires. We'll let you know the process for eligibility guides for new hires for 2018. But once again, this is the last year we are going to print them. Once we run out, we are going digital.

- **State:** So, we will not be allowed to order them anymore?
  - **Answer:** You'll be able to order a 2018 Benefits Guide this year for your new hires, but this will be the last year we are going to print them. Once we run out of our supply, new hires will need to use the digital version we will post on the ParTNers for Health website.

- **Local Gov:** How soon will the guide be ready?
  - **Answer:** Prior to annual enrollment and they will go out in the mail just like last year. Members will receive them at least two weeks prior to annual enrollment, which will start on October 2. We should have them available for ABCs a little sooner.

- **Local Gov:** When will the guides be available to order for ABCs?
  - **Answer:** That will be closer to annual enrollment. We will let ABCs know. We will put up a website link and let you know when you can order copies of the guide. We do not have a specific date yet.

- **Local Gov:** As Local Gov, can we add the life and short-term (disability) to our voluntary plan?
  - **Answer:** No, those voluntary benefits are not available for local government.

- **Local Gov:** When will we know about any premium changes?
  - **Answer:** That information is still being finalized and will have to be approved by the Insurance Committee, and this will probably be June at the earliest. We will share that information with you as soon as it becomes available. If we can give a preliminary estimate earlier, we will.

Wellness Program

- **Biometric Screenings:** Just a reminder that the biometric screenings are due July 15. Onsite screenings are on-going, and we will continue to update the screening flier and remove sites that have already been completed.

- **Well-Being Assessment (WBA) Non-Participation Letter:** Healthways mailed 10,332 letters on May 5 to members who did not complete the WBA. In that letter we are encouraging the member to complete the missed item as soon as possible. They will not have to file an appeal. We are just asking them to keep their promise in return for paying lower monthly premiums and complete the missed requirement.

WELLNESS PROGRAM QUESTIONS

- **Higher Ed:** We are having an onsite screening in May. If new employees are hired and their effective date isn't until June, can they still participate in our onsite screening?
  - **Answer:** Yes, they can. They cannot pre-register in the system, so they will be considered walk-ins, but they should be able to get their screenings. They just have to tell the staff that they are a new hire when they arrive at the on-site screening.

- **Local Ed:** Will the diabetes prevention program be required for pre-diabetics?
  - **Answer:** No. There will be no programs that will be required for anyone. The diabetes prevention program has some significant success in terms of reducing the risk of developing type 2 diabetes, and that program is offered at no cost to members. They will receive that benefit free of charge. It will be made available as a benefit, not requirement.

- **Local Ed:** Does eliminating the wellness benefit affect the wellness copays for preventive office visits?
  - **Answer:** The two are not tied together. They are still working on the final benefit design and we will be announcing the premiums and copays, but these two, copays and the wellness program, do not correlate.

- **Local Ed:** What will happen for members who do not complete the Partnership Promise for 2017? Will they be able to remain on the Partnership?
  - **Answer:** You will get more information in the near future about what the benefits structure will look like next year. Wellness will be outside of the health plan and will not be tied to any of the plans.

- **Local Ed:** Regarding the wellness program, can you clarify; does this mean no promise will be required in 2018?
  - **Answer:** That is correct. Wellness will be outside the health plan, so there won't be a Partnership Promise in 2018 and members will not be required to fulfill the Partnership Promise.

- **State:** We are having people receive letters about the Well Being Assessment (WBA) who are no longer on the Partnership Promise. Have you heard about that?
  - **Answer:** We did research and to clarify, members who are enrolled in the Partnership Promise PPO or the Promise HealthSavings CDHP are required to complete the Partnership Promise requirements. Members who did not complete the WBA by the deadline are receiving the WBA non completion letters. Members can still complete the requirement.

- **State:** If a member missed the WBA deadline, are they still eligible for the Partnership plan if they complete the WBA and biometric screening by July 15?
  - **Answer:** Yes. The letter that the member will receive tells them they have missed the requirement and gives them instructions on how to complete it as soon as possible.

- **Local Gov:** Is there a query to run to show who will get the WBA letters?

- **Answer:** No, there is not a specific query for each missed requirement.

HIPAA Training in Edison

- **HIPAA Training in Edison:** A reminder that it is time to take your 2017 HIPAA Annual Training in Edison. Please follow the path below to enroll in the class. Make sure you enroll in the correct HIPAA class. If you took the course in 2016, you will receive a message **"You have already completed this class on"** proceed anyways. Edison will record every year you have completed the course. The course takes approximately 30 minutes. There is a 10-question quiz at the end of the course. You must make at least an 80 percent otherwise you will be required to take the quiz again.
  - **NAV BAR >Navigator>ELM>Learning Home>Search for Learning HIPAA> HIPAA Annual Training (HIPA2016)> BA_ABC_HIPAA_Higher Education or BA_ABC_HIPAA_Local Education or BA_ABC_HIPAA_Local Govt. >Enroll**

HIPAA TRAINING QUESTIONS

- **Local Ed:** When do we have to complete the HIPAA training?
  - **Answer:** The training has to be completed by December 1 for 2017, but our goal is to get everyone completed as soon as possible.

- **Local Ed:** On the HIPAA training, you said to proceed if it says it has been completed, but it does not give an option to proceed anyway. What should we do?
  - **Answer:** You should be able to click launch on that site even though it says you already completed the course. We will contact you and work with you directly.

Operations

- **ABC Survey:** The ABC survey link was emailed to primary ABCs on Wednesday, May 10. Please take a few minutes to respond by May 22 at 4:30 p.m. Central time.

- **April Metrics: 2017**
  - Tickets via Email: 384
  - Tickets via Self Service: 1,168
  - Tickets via Phone Call: 4,286

  - April 2016 – 4,365 calls
  - April 2017 – 5,841 interactions
  - Zendesk -25 percent increase in interactions

- **Local Ed:** **eForms**: We know you will be having a lot of transfers coming up in August and September. We wanted to remind you that the process for transfers is different than it was last year. Now the losing agency will receive an email notification to approve the termination. You will log in to Edison, click the link in the email and select the date that the insurance should end with your agency. If you need a refresher on this, you can view the New Edison Rehire/Transfer eForms Instructions on the ABC website.

- **Customer Service Rating:** 94 percent rating in April.

- **Local Ed/Local Gov: Adding/Dropping Voluntary Products:** For agencies not already enrolled in our dental or vision plan, if your agency would like to begin offering the state's vision and/or dental plan on January 1, 2018, you must notify Benefits Administration by July 1, 2017. Your notification letter to Benefits Administration must:
    - Be on agency letterhead.
    - State your agency's intent to join the vision 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 Holly Girgies at holly.m.girgies@tn.gov. When your agency joins the plan for 2018, your employees will be eligible to enroll during the Annual Enrollment Period this fall.
    - **Dropping Dental or Vision:** Also, if your agency would like to drop dental or vision coverage for the 2018 calendar year, the same July 1 deadline applies, and BA needs a written notice sent to Holly Girgies by this date.
    - **Note:** For long-term care, the deadline for agencies that wish to add long-term care coverage due to the contract expiring with the State is June 1, 2017. This was previously communicated during the April ABC conference calls. Please refer to the April conference call notes if you have questions.

- **State: ESS Rates:** Our March newly hired ESS participation rates remained at 92 percent; the YTD rate increased to 90 percent. Our goal is a 95 percent participation rate.

- **State: New Hire Orientation:** BA is continuing to work on an orientation for new hires and we hope to have something to share with you later this summer.

- **Higher Ed/State: ABC In-Person Training Nashville:** In August, Benefits Administration will hold all-day in-person trainings in Nashville for state and higher education ABCs. We have listed the dates and location below. We will have more details and registration information available at a later date.
    - **Higher Education: Thursday, August 10 - Tennessee Tower**
    - **State: Friday, August 11 – Tennessee Tower**

- **2017 In-Person ABC Meeting Schedule:** This summer, BA will hold all-day, in person trainings to go over the 2018 benefits and changes. Many of our vendors will be on hand to provide information and answer your questions in person. These meetings will be open to all ABCs, and we encourage all ABCs to attend. More details, including sign-up information will be coming as we get closer to the meeting dates. We will ask ABCs to pre-register for the events.

Meeting Location	Date of Meeting	Time
Meadow View Convention Center Kingsport, TN	August 15	8:30 a.m. – 4:30 p.m.

UT Conference Center Knoxville, TN	August 16	8:30 a.m. – 4:30 p.m.
Fall Creek Falls State Park Spencer, TN	August 17	8:30 a.m.– 4:30 p.m.
Paris Landing State Park Buchanan, TN	August 22	8:30 a.m. – 4:30 p.m.
Premier Place Jackson, TN	August 23	8:30 a.m. – 4:30 p.m.
MTSU Training Center Murfreesboro, TN	August 29	8:30 a.m. – 4:30 p.m.

- **Upcoming ABC Training**
  - **ABC Workshop:**
    - **Edison Upgrade Navigation**
    - May 18: 1 -2 p.m. Central time

  - **New ABC Training:**
    - May 24: 9-11 a.m. Central time - Local Ed Session 1
    - May 24: 1-3 p.m. Central time - State/Higher Ed Session 1
    - May 25: 9-11 a.m. Central time - Local Gov Session 1
    - May 25: 1-3 p.m. Central time - All Session 2

TRAINING QUESTIONS

- **Higher Ed:** Is higher education required to go to the training in Nashville, or can you go to one of the other sites?
  - **Answer:** You are welcome to attend any of the regional trainings. We will have vendors at all of the training locations this year. You will get a similar experience regardless of the training you decide to attend.

- **Local Gov:** Will there not be a training in Nashville?
  - **Answer:** Not directly in Nashville, but there will be a training in Murfreesboro on August 29 and Jackson on August 23.

- **Local Gov:** In the upgrade class, what is covered?
  - **Answer:** The main thing is the new navigation in Edison.

OPERATIONS QUESTIONS

- **Local Ed:** If we know an employee is leaving employment, is it okay to go ahead and term the employee?
  - **Answer:** Yes. If you know when the employee's last day will be, and therefore his or her last day of insurance, you can go ahead and term the employee.

- **Local Ed:** Is the form for new ABC information on the website?
  - **Answer:** For an ABC to be able to access Edison, you will use the Edison Benefits User Security Authorization Form. It is on the website under forms on the ABC webpage.

- **Local Ed:** If I am the primary ABC, but eventually someone else will be taking this role and I will be the backup, do we just need to fill out another form?
  - **Answer:** You will fill out the Edison Benefits User Security Authorization Form to get the new ABC signed up for the training. When the roles switch, notify us and we will get that updated in our directory.

- **Local Ed:** During the last couple of meetings we have discussed the PPACA reports in Edison. Has there been a resolution to the problem of the report printing out all of the year's information each month?
  - **Answer:** The Edison team is working on that. We will have an update in the next couple of weeks.

- **Local Gov:** If an employee enrolls in the Partnership Promise via ESS, does he also have to complete an enrollment change application and do I have to also complete a benefits eForm? I recently had this issue and could not understand why I had to have the employee do a paper form and enroll in ESS.
  - **Answer:** No, if the employee is enrolling in ESS, you do not have to have a paper form. If they are enrolling in ESS, that's the only thing that needs to happen. If enrolled in eForms, you also have to have a paper form.

- **Local Gov:** St. Thomas Rutherford informed me that they do not accept Cigna. Is this correct?
  - **Answer:** If they were referring to Cigna LocalPlus, then that is correct. Some of the St Thomas facilities in rural areas are in Cigna LocalPlus, but the St Thomas facilities in Middle Tennessee and Murfreesboro, including St. Thomas Rutherford are not in Cigna LocalPlus. All St. Thomas facilities are in the Cigna OAP network.

- **Local Gov:** Where do I find the form to fill out to allow a new employee (backup ABC) to use Edison?
  - **Answer:** You can find the Edison Benefits User Security Form on our ABC website at:
  https://tn.gov/assets/entities/finance/benefits/attachments/abc_edison_user_form.pdf .

Combined Conference Call Notes
Higher Ed, Local Ed, Central State and Local Gov
June 13, 2017

Materials and Communications

- **2018 Benefits Guide Reminder/Online Order Form:**
  - **2018 Benefits Guide:** A reminder that the 2018 Decision Guide and the Eligibility and Enrollment guide will be combined for each plan. We will mail this combined Benefits Guide to all eligible members before the annual enrollment period.
    - The exception will be retirees. We will create a Decision Guide for these members. It will not be combined with the "Continuing Insurance at Retirement" guide. We will mail the Decision Guide to retirees.
    - ABCs will be able to pre-order guides.
    - 2018 is the last year we are printing and mailing guides to members.
    - Next year, we will go digital with the guides.
  - **2018 Benefits Guide Online Order Form:** The online order form will be available by August 1. You'll have one month to pre-order your 2018 benefits guides for annual enrollment.
    - **Guides will still be available to regular order after annual enrollment, just like this year.**
    - **We will print enough guides to cover annual enrollment and new hires in 2018.**
    - **We will email an order form link to ABC emails in late July.**
- **Vendor Contract Status Update:** There are several request for proposals (RFPs) out this year. Here is a status update:
  - **Vision:** Contract has been awarded and more information is below.
  - **State/Higher Ed: Life Insurance:** RFP is out and the vendor should be announced at the end of June.
  - **State/Higher Ed: Wellness Program:** Includes a disease management and a diabetes prevention program which is available for all plans. RFP is also out and the vendor should be announced late July.
  - We may have new vendors for benefits fairs. We have made an update to the Vendor Contact list for vision and will continue to update this list as we have more information. As a reminder, you can use this list when you are planning your benefits fairs.
- **ALEX Update:** Our contract to use the ALEX decision tool ends at the end of June. If you have links to ALEX anywhere, on your websites, in new hire materials, etc., please take them down before the end of June.
- **Local Ed/Local Gov: Pharmacy Grid Correction:**
  - **Local Ed:** On May 31, we sent the 2018 plan design and benefits grids information to you. We have a correction to the 2017 and 2018 prescription drug section for the **Limited** PPO. Under Mail Order Prescription (90-day Supply), non-preferred brand, the cost should be $220, not $200. The correct amount was listed last year and is not changing. The corrected grid is attached with the Friday, June 16 ABC email.
  - **Local Gov:** On June 2, we sent the 2018 plan design and benefits grids information to you. We have a correction to the 2017 and 2018 prescription drug section for the **Limited** PPO. Under Mail Order Prescription (90-day Supply), non-preferred brand, the cost should be $220, not $200. The correct amount was listed last year and is not changing. We have attached the full local government benefits and plan design presentation, which includes the corrected grid.
- **State/Higher Ed: Disability Webinars:** In conjunction with MetLife, we will hold webinars for ABCs to go over the new voluntary disability benefits on the following dates and times. As

the benefit is different for state and higher education members, we ask that you attend the webinar specific to your type of organization.

- You'll pick one date as the information will be the same on each call. We'll send more information, including how to register as we get closer to these dates.
- **July 18**
  - **Higher Ed:** 9 – 10:30 a.m. Central time
  - **State:** 1 – 2:30 p.m. Central time
- **July 25**
  - **Higher Ed:** 9 – 10:30 a.m. Central time
  - **State:** 1 – 2:30 p.m. Central time

COMMUNICATIONS AND MATERIALS QUESTIONS

- **State:** Will there be any changes to the dental providers this year?
  - Answer: No, not to dental vendors (MetLife or Cigna) this year. We will go over the 2018 benefits during the July ABC call. Providers within the dental networks can change.

- **State:** Was the name of the new vision provider Davis?
  - **Answer:** Yes, Davis Vision.

- **State:** For the disability webinars, will the same information be presented at both of these July 18 and July 25?
  - **Answer:** Yes. Just pick the date that best suits your schedule.

- **Local Gov:** The open enrollment dates are Oct 2-Oct 27?
  - **Answer:** Yes, for local government, local education and retirees, the dates are October 2 through October 27.

- **Local Gov:** Some hospitals did not accept Cigna this year. When will we know which hospitals accept Cigna for 2018?
  - **Answer:** We don't know of any major changes to the Cigna network for next year, however, networks can change at any time. If we do hear of any major changes, we will let you know right away.

2018 Benefits

- **Local Gov: 2018 Benefits and Plan Design Presentation:** Laurie Lee, executive director of Benefits Administration, presented information on the 2018 Benefits and Plan Design for local government. We have **attached** the PowerPoint presentation for your reference.

2018 BENEFITS QUESTIONS (LOCAL GOV ONLY)

- **Local Gov:** If an employee does not complete the Partnership Promise requirements this year, will he or she be moved to another plan or will the member go to the Premier (PPO)?
  - **Answer:** I'll answer in two parts. If someone **does not** make a change during annual enrollment, where will the member go? All plan members currently in the Partnership PPO (or No Partnership PPO) will move to the Premier PPO unless they make a change to another plan. If in the Standard PPO, Limited or CDHP, they will stay in this plan unless they make a change. If someone does not complete the Partnership Promise he or she will **not** be defaulted to a different plan, but will move to the Premier PPO. However, the whole basis of the Partnership PPO is that the member benefits from paying lower premiums in return for keeping the promise to complete the requirements.

- **Local Gov:** The (Partnership) promise requirements include the biometric screening also?
  - **Answer:** Yes, it does include the biometric screening.

- **Local Gov:** Will you conduct the biometric screenings next year?
  - **Answer:** No, for local government plan members, we will not. However, you can always go to your primary care doctor for your annual exam at no cost. This is considered preventive care. We will continue to communicate this to you and to your members.

- **Local Gov**: Will this do away with coaching calls?
  - **Answer:** Yes, they will not be required or available. There are some agencies who are interested in how they can support their health initiatives. We will communicate other resources that you can communicate to your members.

- **Local Gov:** The Partnership Promise will be changing to Premier PPO and it has a 5% price increase. The cost savings from not paying Healthways was not enough to not incur a cost increase?
  - **Answer:** The price that we pay Healthways for the wellness program was very small compared to the plan's overall medical costs. Generally, people think the wellness plans are a good investment at a 1:1 ratio (for every dollar spent, you get a dollar in return on your investment). The cost for the wellness program is small compared to the medical costs incurred by our members.

- **Local Gov:** Just to be clear if an employee does not follow through with the Partnership Promise requirements for the remainder of the year, he or she will not be moved to Standard PPO?
  - **Answer:** That is correct. The member will automatically be moved to the Premier PPO. We hope members will continue with the commitment that they have made as they are paying lower premiums in the Partnership PPO for completing the requirements.

- **Local Gov:** Please explain the $40.00 surcharge for Open Access?
  - **Answer: Here is an example:** If you were going to promise to deliver a high volume of members (patients) you would get a lower price or a better discounted rate from the provider. If you have a broad network with a high number of providers, they are not assured of a high volume of patients, so you are not steering a lot of members to the providers. If you have a smaller network, you are steering more members to the network. A broad network does not have as good discounts, so broad choice is going to cost more. BCBST Network S and Cigna Local Plus are considered smaller networks. So, members will pay $40 or $80 more per month for Cigna Open Access Plus (OAP) to have access to more providers.

- **Local Gov:** Will you please define actuarial value once more?
  - **Answer:** If you think about a dollar spent on health care claims and the actuarial value is 85%, for every dollar that is spent on claims, on average the state pays 85 cents and the member pays 15 cents. The actuarial value for the Premier PPO is 84.6%. So for healthcare services, on average for the Premier PPO, 84.6% is paid by the plan and 15.4% is paid by the member. Likewise with the CDHP, the actuarial value is 68.3%, so on average 68.3% is paid by the plan and 31.7% is paid by the

member. Basically, the higher the plan premium, the more the plan pays out for the member; the more the plan pays out, the higher the actuarial value.

- **Local Gov:** If asked by new hires if they have to complete the (Partnership) Promise requirements, am I safe to tell them they do not have to meet those requirements anymore, correct?
  - **Answer:** Not technically. If they sign up for the Partnership PPO, they should commit for the year and complete the requirements as they are receiving a premium discount.

- **Vision Contract Awarded:** The current contract with EyeMed will expire at the end of 2017. Through a competitive procurement, Davis Vision has been awarded the next contract for benefits beginning January 1, 2018.
  - Davis Vision has been providing vision benefits for 100 years. Ten of their largest clients include The Boeing Company, FedEx, General Electric, Delta Airlines, United Auto Workers, Revlon, The Federal Employee Program, General Motors, Comcast and Verizon.
  - Of course, as with any new vendor, there will be some member disruption. Davis Vision's providers can be found on the Davis Vision website at www.davisvision.com/Provider/. Davis Vision's Exclusive Provider Network includes over 63,000 points of access nationwide and includes both independent providers and popular retailers, including the top five retailers: Visionworks, Walmart, Sam's Club, Costco and JC Penney.
  - On average the State of Tennessee's urban and suburban employees have 100% access, with their choice of five providers within 2.6 miles of their home zip code. For rural employees, the majority of members will have access to five providers within 10 miles of their home zip codes.
  - Benefits Administration has enhanced some of the allowances under the plan. Plan details will be sent soon to the ABCs.

VISION PLAN QUESTIONS

- **Higher Ed:** Are people going to have to enroll or will they automatically roll over?
  - **Answer:** Members will automatically roll over. No action is necessary. Also, every annual enrollment is an open enrollment for vision coverage and members can enroll with no health questions asked.

- **Higher Ed:** How are the vendors for Davis Vision compared to EyeMed? Are there a lot of doctors in the network?
  - **Answer:** There will be differences, but there are common providers. Davis Vision must meet all of our suburban/urban and rural requirements, and they did meet all of our access requirements.

- **Higher Ed:** Will employees who have EyeMed currently have to re-enroll or will it switch to Davis automatically?
  - **Answer:** Members will automatically switch to Davis Vision in Edison for 2018 coverage. No one has to reenroll.

- **Higher Ed:** With Davis Vision, will you be eligible to get frames every year?
  - **Answer:** No. Benefits Administration defines the benefits, and we left the frames benefit for new frames at every two years. But the dollar amount for frame allowance will be higher.

- **Higher Ed:** Will they (Davis Vision) be available for benefits fairs?
  - **Answer:** Yes, we believe so. We haven't met with them yet and we have not discussed any details.

- **Local Ed:** If we are already enrolled in EyeMed do we need to request to join Davis Vision?
  - **Answer:** There is no action needed by agencies if you are already offering vision coverage. Agencies and members will automatically be switched over to Davis Vision.

- **Local Ed:** I missed the first part of the meeting. On vision, did you go over providers?
  - **Answer:** You may search for providers on www.DavisVision.com. It is a national network. Davis Vision did satisfy the access requirements. There will be current providers who are not in the network, and some new providers added to the network.

Wellness Program

- **Biometric Screenings:** Just a reminder that the biometric screenings are due July 15. Onsite screenings are on-going, and we will continue to update the screening flier and remove sites that have already been completed.

WELLNESS PROGRAM QUESTIONS

- **Local Ed:** If an employee did not complete the Partnership Promise will he be moved to a different plan?
  - **Answer:** The plans are changing next year and wellness requirements will not be required.

- **Local Ed:** Do employees hired in August need to complete requirements?
  - **Answer:** If the member's coverage effective date begins before September 1, he or she will need to complete the requirements. Members who have coverage effective dates September 1 through December 31 will **not** have to complete the Partnership Promise.

- **Local Ed:** Since the "Promise" is not required for 2018, can you remind us what happens to those who do not complete the Partnership Promise this year?
  - **Answer:** Members will move to the Premier PPO for 2018 coverage, unless they choose a different plan (Standard PPO, Limited PPO or Local CDHP).

- **Local Ed:** Those currently in a plan with the Partnership Promise, if they do not make changes to their insurance during Open Enrollment (annual enrollment), which plan will they roll into?
  - **Answer:** These members will be moved to the Premier PPO unless they make a change during annual enrollment.

- **Local Ed:** What will happen to those employees in the No Partnership Promise PPO plan?
  - **Answer:** These members will move to the Premier PPO plan unless they make a change during annual enrollment.

- **Local Ed:** If they are hired 8/3 and their benefits are not effective until 9/1, they don't have to do the promise for 2017, correct?

- **Answer:** Correct. Members whose insurance coverage begins September 1 through December 31 will not have to complete the Partnership Promise requirements.

- **Local Ed:** We have new hires starting July 1. If they select Partnership Promise, what is the deadline to complete the requirements? Because the online survey is in March & the biometric screening is July.
    - **Answer:** New hires have 120 days from their coverage effective date to complete the Well-Being Assessment (WBA) and biometric screening. You can find the deadlines for new hires who need to complete requirements within 120 days on the ParTNers for Health website on the Partnership Promise page.

- **Local Gov:** What is the deadline for members to complete the biometric screening for this year?
    - **Answer:** July 15, 2017. If a new hire, the member has 120 days from his or her coverage effective date to complete the Well-Being Assessment and the biometric screening.

HIPAA Training in Edison

- **Training Reminder:** It is time to take your 2017 HIPAA Annual Training in Edison. Please follow the path below to enroll in the class. Make sure you enroll in the correct HIPAA class. If you took the course in 2016, you will receive a message **"You have already completed this class on" -** proceed anyway. Edison will record every year you have completed the course. The course takes approximately 30 minutes. There is a 10 question quiz at the end of the course. You must make at least an 80% otherwise you will be required to take the quiz again.
    - **State ABCs:** You will register for the BA_ABC_HIPAA Local Education course.
    - **NAV BAR >Navigator>ELM>Learning Home>Search for Learning HIPAA> HIPAA Annual Training (HIPA2016)> BA_ABC_HIPAA_Higher Education or BA_ABC_HIPAA_Local Education or BA_ABC_HIPAA_Local Govt. >Enroll**

HIPAA TRAINING QUESTIONS

- **Local Ed:** Will I receive an email regarding completing HIPAA training? I took the course in May, but I have not received a completion email.
    - **Answer:** You will not receive an email after you complete the course, but you can log back into My Learning and print a completion certificate.

- **State:** Should State ABCs take the local education training?
    - **Answer:** Yes, state ABCs complete the BA_ABC_HIPAA_Local Education training.

Operations

- **May Metrics: 2017**
    - **Tickets via Email:** 404
    - **Tickets via Self Service:** 1,465
    - **Tickets via Phone Call:** 4,659
    - **Total Ticket:** 6,528
    - **2016 –** 4,353 calls

- **State:** **ESS Rates:** Our April new hire ESS participation rates was 89 percent; the YTD rate of 90 percent. Our goal is a 95 percent participation rate.

- We will be reaching out to agencies in the next six months who may be struggling with meeting our proposed participation rate and sharing best practices with you. Let me know if you would like to discuss next steps with meeting this metric.

- **State: New Hire Orientation Video Update**
  - We are still working diligently on the New Hire Orientation. Our go live date has moved to January 1, 2018, to incorporate the 2018 short-term/long-term disability and new vision vendor information.

- **Local Ed/Local Gov: Adding/Dropping Voluntary Products:** As a reminder, the deadline for agencies wishing to add (not already enrolled in the plan) or drop dental coverage is July 1. The deadline for agencies to add or drop the vision plan is August 1.
  - Your notification letter to Benefits Administration must:
    - Be on agency letterhead.
    - State your agency's intent to join the vision 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 Holly Girgies at holly.m.girgies@tn.gov. When your agency joins the plan for 2018, your employees will be eligible to enroll during the Annual Enrollment Period this fall.
  - **Dropping Dental or Vision:** Also, if your agency would like to drop dental or vision coverage for the 2018 calendar year, the same July 1 deadline applies for dental; August 1 for vision. BA needs a written notice sent to Holly Girgies by these dates.

- **State/Higher Ed: ABC In-Person Training Nashville:** In August, Benefits Administration will hold all-day in-person trainings in Nashville for state and higher education ABCs. The dates and times are listed. We will have more details and registration information available at a later date.
  - **Higher Education:** Thursday, August 10 - Tennessee Tower
  - **State:** Friday, August 11 – Tennessee Tower

- **2017 In-Person ABC Meeting Schedule**
  - This summer, BA will offer all-day, in person trainings to go over the 2018 benefits and many of our vendors will be on hand to provide information and answer your questions in person. These meetings will be open to all ABCs, and we encourage all ABCs to attend. More details, including sign-up information will be coming as we get closer to the meeting dates. We will ask ABCs to pre-register for the trainings.

Meeting Location	Date of Meeting	Time
Meadow View Convention Center Kingsport, TN	August 15	8:30 a.m. – 4:30 p.m.
UT Conference Center Knoxville, TN	August 16	8:30 a.m. – 4:30 p.m.
Fall Creek Falls State Park Spencer, TN	August 17	8:30 a.m.– 4:30 p.m.

Paris Landing State Park Buchanan, TN	August 22	8:30 a.m. – 4:30 p.m.
Premier Place Jackson, TN	August 23	8:30 a.m. – 4:30 p.m.
MTSU Training Center Murfreesboro, TN	August 29	8:30 a.m. – 4:30 p.m.

- **Upcoming ABC Training**
  - **ABC Workshop:**
    - **Local Ed/Local Gov/Higher Ed: Rehires**
    - **June 15:** 1 -2 p.m. Central time

  - **New ABC Training:**
    - **June 28:** 9-11 a.m. Central time - **Local Ed Session 1**
    - **June 28:** 1-3 p.m. Central time - **State/Higher Ed Session 1**
    - **June 29:** 9-11 a.m. Central time - **Local Gov Session 1**
    - **June 29:** 1-3 p.m. Central time - **All Session 2**

OPERATIONS QUESTIONS

- **Higher Ed:** What is the difference between the August meetings (Nashville) vs. the training in local areas?
  - **Answer:** There isn't a lot of difference. The August meetings will include information for local ed and local gov ABCs. In Nashville, the August 10 all-day meeting will be higher education specific. ABCs can't always come to Nashville. You may want other members of your staff to attend these other regional meetings. A big difference this year is that vendors will be at the regional meetings.

- **Higher Ed:** At what time during the year is the HSA state contribution prorated?
  - **Answer:** The state funds are not prorated. They are put in at the beginning of the year, usually the first week in January. And for new hires, they can receive state HSA funds up until Sept 2. For anyone with a coverage effective date Sept 2 through the end of year, the state seed funds are not available.

- **Higher Ed:** Benefits for our employees will begin as of September 1, 2017. Will they be eligible for the seed contribution (state HSA funds)?
  - **Answer:** If the employees' coverage effective dates are September 1, then they would be eligible.

- **Local Gov:** What is the lab, x-ray, reading and diagnostics charge?
  - **Answer:** Depending on your plan, you will have coinsurance from 10% to 30% for in-network labs, x-rays, diagnostics, reading and interpretation. This was new starting in 2017.

- **Local Gov:** Will there be a coinsurance for labs if you get an annual physical and bloodwork?
  - **Answer:** If you use in-network providers, you should not have coinsurance for preventive labs for your annual physical. But if additional testing is done at the same time as your annual exam, or if the lab charges are coded as something other

than preventive, additional costs could apply. Charges will apply to out-of-network services.

- **Local Ed:** Will Davis Vision send out new cards to all employees?
  - **Answer:** Yes.

- **Local Ed:** What is the time of Rehire training?
  - **Answer:** It is on June 15 from 1-2 p.m. Central time.

- **State:** How do we sign up for the Rehire training?
  - **Answer:** This will cover eForms and state ABCs do not need this training.

- **State:** Where will the ABC training take place on June 28 and 29?
  - **Answer:** It is a webinar. You will register in ELM and we will send you the WebEx link to the training.

- **State:** If you attend the meeting at the Tennessee Towers, do you still need to attend one of the other (regional, in-person events)?
  - **Answer:** No, we will have our vendors at the regional meetings and the training will be similar. Many of you have ABCs in regional offices who cannot attend in Nashville, but could attend a regional training. The regional trainings are an opportunity for those who cannot attend in Nashville to attend or those in the field to attend.

- **State:** I am a new ABC and I am setup for the training on June 28, however, who do I contact to get on an email distribution list for webinars, meetings etc.?
  - **Answer:** We will add you to the ABC directory and you will automatically be added to the email distribution list.

- **State:** Are the trainings already in ELM?
  - **Answer:** Yes. Here are instructions on how to enroll:
    - Login in To Edison.
    - Navigate to ELM>Learning Home>Search for Learning>Enter **ABC** in the "Search" field>Click "Enter".
    - Locate the training you are interested in.
    - Locate the specific dates you would like to attend the webinar.
    - Click Enroll to the right of the training session you wish to participate in.

- **Local Gov:** I had an employee on the Partnership Promise plan with BCBS who went for a mammogram and was charged $900! That is not correct, is it?
  - **Answer:** It depends on what type of a mammogram it was. There should be no charge for an in-network screening mammogram. In and out of network diagnostic mammograms will have member cost share. You can send in the member's information via secure email and we will research for you.
  - **As a reminder, only in-network screening mammograms are no cost to members.** When a member has a mammogram out-of-network, even a screening mammogram, they will be charged, and the provider can bill them for anything not covered by insurance because there is no agreement in place that requires the provider to accept a contracted amount.

- **Local Gov:** Is the family deductible for the HDHP (CDHP) embedded or shared?

- **Answer:** It is a shared non-embedded deductible in the Local CDHP/HSA. With family coverage, the entire deductible must be met by the entire family.

- **Local Gov:** So with the HDHP (CDHP), just to be clear, does one individual within the family have to satisfy the entire family deductible before the benefits kick in?
  - **Answer:** Either one or more family members must satisfy the entire family deductible in order for coinsurance benefits to apply.

- **Local Gov:** Will there be a coinsurance for labs if you get an annual physical and bloodwork?
  - **Answer:** If you use in-network providers, you should not have coinsurance for preventive labs for your annual physical. But if additional testing is done at the same time as your annual exam, additional costs could apply to the member.

- **Local Gov:** Just to reiterate, will the Premier PPO have the same benefits as the Partnership PPO?
  - **Answer:** Yes.

- **Local Gov:** If you are in the Standard PPO with Blue (BCBS Network S), do you need a referral to see a specialist?
  - **Answer:** No. This information is located in our member handbooks:

    Choice of Doctors: This plan does not require you to choose a primary care physician or PCP, nor is there a required referral process for specialist services.

- **Local Gov:** Providers accepting the Partnership PPO will not change when it goes to the Premier PPO will it?
  - **Answer:** One actually doesn't have anything to do with one another. The plans (Premier, Standard, Limited and Local CDHP) are separate from the networks (BCBS Network S, Cigna LocalPlus and Cigna OAP). Providers are in the network.

- **Local Gov:** Does it cost anything to attend the in person ABC meeting in August?
  - **Answer:** No, there is no cost for the ABC to attend the meeting. You may have travel costs and those would have to be paid by your organization.

Combined ABC Conference Call Notes
Higher Ed, Local Ed, Central State and Local Gov
July 11, 2017

2018 Benefits

- **State/Higher Ed: 2018 Benefits and Plan Design Presentation:** Laurie Lee, Executive Director of Benefits Administration, joined us to go over the 2018 benefits and plan design information. We have attached the slides from the presentation.

BENEFTIS/WELLNESS PROGRAM QUESTIONS (State and Higher Ed)

- **Higher Ed:** What are the amounts of cash rewards for completing wellness activities?
  - **Answer:** That will be determined once we get bids from the new voluntary wellness program vendors. Once we see the cost proposals and who the ultimate vendor(s) will be, we will determine how much money we will be able to offer for as incentives for completing specific activities.

- **Higher Ed:** Will wellness rewards be available for offline agency state plan participants?
  - **Answer:** Yes. For any agency participating in our plan, the wellness program is still funded by the plan. Think of it this way - everybody's premium goes into the pool that funds the wellness program, so any participating agency will be able to participate in the program.

- **Higher Ed:** For the employees who don't complete the biometric screening, there won't be an appeal process, correct?
  - **Answer:** There won't be the appeal process, but we still would like to receive the biometrics, so they can still turn them in. We won't have a specific appeal process.

- **Higher Ed:** So go ahead and tell them to complete it, but there won't be an appeal?
  - **Answer:** Correct.

- **Higher Ed:** Would you repeat the number they can use to check the status on whether the Promise was received or not?
  - Answer: They can call 888-741-3390, and then select option 1. That will route you to the automatic verification system and then select option 1 again. Have your Caremark ID card with you because you will need your ID number.

- **Higher Ed:** Will it (incentives) come anywhere close to meeting the significant increase in premium for those remaining on the Premier PPO plan?
  - **Answer:** We do not know that answer to that right now. We will know more when the new wellness vendor is selected and the Insurance Committee approves the program when it meets in August.

- **Higher Ed:** The wellness activities you mentioned, what about healthy employees who are actually using the Partnership Promise?
  - **Answer:** Yes, the program will be available to all enrolled state and higher ed members. The construct of the wellness program is that to qualify for cash incentives, there will be some required activities like a health risk questionnaire and biometric screening, so there will be rewards for those two activities. Think of those as gateways to other rewards because we need those two requirements to find out what other programs members are eligible to complete. Based on that health status information, if members' health status is within certain parameters, they will receive

a healthy reward at that time, and they won't have to do anything else because they are in a healthy range. But if they are not in a healthy range, there is the Diabetes Prevention Program, weight management program and other online programs that we don't have now that will be available to members so they can achieve wellness rewards.

- **Higher Ed:** With the changes to plan benefits, I don't understand why the biometric screening would even be needed if that's going away?
  - **Answer:** Everyone who signed up for the Partnership Promise is paying a lot less in premiums each month because they promised they would do these things this year. They have already been rewarded for promising to complete this requirement.

- **State:** Will you be discussing the specific wellness incentives today?
  - **Answer:** We do not have specific dollar amounts to share today. We don't have much detail yet because we're still in the middle of the procurement process. We're using the same dollars that we have been spending on the wellness program. Since we don't know the results of the procurement yet, we don't know the cost yet. The budgeted dollars will go towards paying for the program and cash incentives. There will be some components that look very similar to the current program - like the biometric screening and the online health risk assessment. There are also some programs that you have to qualify for based on your specific biometric information like the Diabetes Prevention Program. The idea is to complete those first two steps so you can earn rewards. If your health status is in the healthy range, you will earn the remainder of the wellness bonus. If not in the healthy range, there will programs to help you get there and you can earn wellness dollars in the process. We are really excited because the technology in wellness has changed a lot, so we're anticipating using many different modalities to get and stay healthy.

- **State:** So will the Premier PPO be the same as the Partnership?
  - **Answer:** Yes. The Premier PPO has the exact same benefits as the current Partnership PPO. However, there are no wellness requirements.

- **State:** So, is the Premier PPO administered through a different company than Healthways?
  - **Answer:** Benefits for all three plan options, Premier, Standard and CDHP, will be provided through BCBST or Cigna, exactly like they are today. The Premier PPO will have no wellness requirement. We don't know who the new vendor for the wellness benefit will be yet. We have requested, through the RFP process, some new programs that we don't currently offer. The Premier PPO does not have a wellness requirement. That is the reason we changed the name. (Note: Benefits Administration administers the plans and benefits. The wellness program vendor will administer the wellness program.)

- **State:** Do members still have to complete biometric screening this year?
  - **Answer:** Yes. We want you to encourage members to complete their screenings because they committed to Partnership Promise and are being rewarded with lower premiums each month this year.

- **State:** Will they be defaulted to another plan if they don't complete it (wellness requirement)?
  - **Answer:** They will not be defaulted to another plan. If they don't make a change during this fall's Annual Enrollment period, they will stay in the Premier PPO in 2018, but, since they are still getting a premium discount through the end of this year, members should complete the requirement.

- **State:** But if someone said their form didn't go through, they won't have to appeal, correct?
  - **Answer:** That's correct. But we really do want to encourage people to finish out this year. And there will be cash rewards for completing a screening next year. If they don't submit this year's screening form by July 15, they can still get it in. There won't be an appeal process, but we would still like for them to submit the information.

- **State:** Did the State increase the percentage in employer contribution?
  - **Answer:** Yes. The average member increase is 1.1 percent, but there's not an across the board premium increase. It depends on the plan you choose. Employees will need to look carefully at the premiums for each plan for 2018.

- **State:** What were the deductibles? Are they increasing?
  - **Answer:** The deductibles are exactly the same as they are this year. We will send this slide out with the notes on Friday (slides are attached).

- **State/Higher Ed:** **Vendor Update – Life Insurance:** Through a competitive procurement process, Securian (Minnesota Life) has been awarded a new five year contract for the voluntary term life insurance program beginning January 1, 2018.
  - All benefits will remain the same, except for the portability (continuation) option. A member, upon leaving active employment (retirement, termination), may only port (continue) ½ of his/her active coverage up to a maximum of $250,000 and no lower than $5,000. Also, a spouse may only port ½ of his/her coverage, but no lower than $5,000.
  - The premium rates for the employee and spouse coverage will increase. The monthly administrative fee and the premium rate for a child term rider will be lower in 2018.

LIFE INSURANCE QUESTIONS

- **Higher Ed:** On the life insurance slide (attached), can you clarify what all other life insurance products refer to?
  - **Answer:** The decision was made by Insurance Committee to combine the basic term life/basic ad&d, voluntary ad&d, and voluntary term life insurance products into one contract, instead of having two separate contracts. Instead of canceling the basic term life/basic ad&d and voluntary ad&d insurance contract a year early, the decision was made to let the current contract run through 2018 and already have in place a new contract (combined with voluntary term life) with basic term life/basic ad&d and voluntary ad&d benefits starting January 1, 2019.

- **Higher Ed:** So you're not referring to universal with Unum?
  - **Answer:** No, that is not involved.

- **Vision Benefit Update:** The state will offer vision benefits through a new vendor in 2018, Davis Vision. The network will change. The new network is the Davis Vision Network for the State of Tennessee Group Insurance Program. It is important to check the network for your provider and other providers in your zip code area. Right now, you can look for your providers by going to: https://idoc.davisvision.com/davis/sharedfiles/memberhandoff.asp?GroupMember=8152&Group=ZZZ&DestinationURL=/davis/member/member_menu.asp . We will have a shorter URL ready soon.
  - The state offers two vision options.
    - **Basic Plan** offers discounted rates and allowances for services.
    - **Expanded Plan** provides services with a combination of copays, greater allowances than the Basic Plan and discounted rates.
  - Both offer the same services including:
    - Routine eye exam once every calendar year
    - Frames once every two calendar years
    - Choice of eyeglass lenses or contact lenses once every calendar year
    - Discount on LASIK/refractive surgery
  - There are many added values to this year's vision benefits, including an increased allowance for frames, lenses and contact lenses. Davis Vision offers some additional value added benefits which include:
    - Zero ($0.00) copay for single vision, bifocal, trifocal or lenticular lenses purchased at an in-network location.
    - Free pair of eyeglass frames from Davis' "The Exclusive Collection" under the in-network Expanded Plan.
    - Free pair of "Fashion Selection" eyeglass frames from Davis' "The Exclusive Collection" under the in-network Basic Plan.
    - Free pair of frames at Visionworks retail locations.
    - Forty percent (40%) discount off retail under the in-network Expanded Plan and thirty percent (30%) discount off retail under the in-network Basic Plan for an additional pair of eyeglasses, except at Walmart, Sam's Club or Costco locations.
    - Twenty percent (20%) discount off retail cost of an additional pair of conventional or disposable contact lenses under the in-network Expanded Plan.
    - One year warranty for breakage of most eyeglasses.
  - **Premium rates will decrease in 2018.**
  - We have attached the presentation slides from the call.

VISION QUESTIONS

- **Higher Ed:** Is Davis Vision open to accepting new providers? In West Tennessee, the network is a much smaller one than we had before.
  - **Answer:** Yes, as with any insurance company, they welcome nominations of providers. Their network recruiting staff will contact that provider. We do not have a form for that process yet, but you can send the information to benefits.info@tn.gov and we will pass that along to Davis Vision. We will have a formal process in place later. A Davis Vision representative will be at the August trainings.

- **Local Ed:** Can you please go over how we get into their website again?
  - **Answer:** We are just now meeting with Davis Vision, so more details will be sent. We will have a microsite set up soon for an easy-to-remember URL. Prior to that you can use the URL listed in the question above: https://idoc.davisvision.com/davis/sharedfiles/memberhandoff.asp?GroupMember=8152&Group=ZZZ&DestinationURL=/davis/member/member_menu.asp .

- **Local Ed:** Is the insurance coverage age-off still 26 years? Does this apply to vision?
  - **Answer:** Yes.

- **State:** Is there an automatic rollover for the plan?
  - **Answer:** Yes. Members enrolled today in the EyeMed plan will automatically be transitioned to the Davis Vision plan by Edison.

- **State:** We do not have anyone within 25 miles of us in the network. Can we try to recruit the facility in our town or does BA do that?
  - **Answer:** You can speak to your provider directly, but if you would like an official recruitment effort from Davis, send names and addresses of providers to benefits.info@tn.gov. You can go ahead and do that. There will be a form you can fill out at some point, but if you email us, we can go ahead and provide the information to Davis now so they can get started.

- **Local Gov:** Will the vision plan cover children up to age 26?
  - **Answer:** Yes. Vision is identical to medical and dental. Children up to age 26 are eligible to enroll.

- **Local Gov:** What was the 19 age?
  - **Answer:** Under the current plan, polycarbonate lenses at $0 copay are only available for children under the age of 19. Under Davis, polycarbonate lenses may be purchased for children at $0 copay regardless of age. So, 19-26 year olds can still get the polycarbonate lenses for $0 copay.

- **Local Gov:** If we already have vision through EyeMed, do we need to let you know that we want Davis or we will automatically have it?
  - **Answer:** It is automatic. There is no need to tell us your agency would like to continue coverage. All employees and dependents will automatically be transferred in Edison.

Materials and Communications

- **2018 Decision Guide Change/Eligibility & Enrollment Guides:** We have a change to announce in regard to what we will mail to members for annual enrollment. We have decided to go back to the Decision Guide format for annual enrollment and to create a separate Eligibility and Enrollment guide for new hires in 2018. Even though a combined guide was not that much longer in length than a Decision Guide, increasing the number of pages by just a few caused the weight of the guide to go over 4 ounces each, which caused the postage cost to skyrocket. So, for 2018, we will print the same types of materials we did last year. As a reminder, 2018 will be the last year we will mail any materials.

- **2018 Decision Guide Order Form**: The online order form will be sent to ABCs by email in late July. You'll have one month to pre-order your 2018 benefits guides for annual enrollment.
  - **You'll be able to order Eligibility & Enrollment guides after annual enrollment.** We'll send you more details when they are available.
- **No August ABC Conference Calls:** Due to the August ABC trainings across the state, we will **not** hold August ABC monthly conference calls during the second week of August (August 8).

- **Annual Enrollment Weekly Call Schedule**: This year, Benefits Administration will start weekly ABC calls after the Labor Day holiday. Weekly calls will stop two weeks after the annual enrollment period ends. The call dates are below:
  - **Local Ed and Local Gov:** Weekly calls every Tuesday, September 12 – November 7.
  - **State and Higher Ed:** Weekly calls every Tuesday, September 12 – October 24.
  - **Regular monthly ABC conference calls will resume on Tuesday, November 14.**
  - We will post a schedule on the ABC webpage next week.

COMMUNICATIONS QUESTIONS

- **Local Gov:** Will Decision Guides be digital in 2019?
  - **Answer:** Yes. They will be digital in 2019. We will not print or mail Decision Guides for 2019 benefits, which will be in fall of 2018. We will have info available on our website, but will not print or mail them.

- **Local Gov:** Will there be a difference in 2017 and 2018 Eligibility Guides? I have quite a few left over.
  - **Answer:** Yes, there will be a difference. Try to think of how many you have now and maybe consider not ordering as many next year because they will be different.

- **Local Gov:** When can we order Eligibility Guides for the 2018 plan year?
  - **Answer:** We will let you know when the order form is available…shortly after annual enrollment.

- **Local Gov:** How many ABCs can an agency have?
  - **Answer:** Typically, two – one primary and one backup.

- **State/Higher Ed:** **Disability Webinars:** In conjunction with MetLife, we will hold webinars for ABCs to go over the new voluntary disability benefits on the following dates and times. As the benefit is different for state and higher education members, we ask that you attend the webinar specific to your type of organization.
  - You'll pick one date as the information will be the same on each call.
  - We emailed information on Friday, July 7. You will login the same way you do for ABC conference calls.
  - **July 18**
    - **Higher Ed:** 9 a.m. Central time
    - **State:** 1 p.m. Central time
  - **July 25**
    - **Higher Ed:** 9 a.m. Central time
    - **State:** 1 p.m. Central time
  - **August 1**
    - **Higher Ed:** 9 a.m. Central time

- **State:** 1 p.m. Central time

DISABILITY ENROLLMENT QUESTION

- **Higher Ed:** Will the MetLife short term disability enrollment be available for employees online only or also by completing an enrollment form?
  - **Answer:** Annual enrollment requires online enrollment so they can enroll in ESS or through an e-Form.

Wellness Program

- **Biometric Screening Deadline:** Just a reminder that the biometric screenings are due this Saturday, July 15.
  - Members have this option as well to complete the requirement:
    - Download the Physician Screening Form and take it to an Urgent Care or Convenience Care clinic. First, tell the clinic you have BlueCross BlueShield or Cigna. Then confirm they can perform all of the required screening services (found on the ParTNers for Health website/biometric screening page) and ask if they charge a copayment for the visit.
  - Given that the July 15 deadline falls on a Saturday this year, Healthways Customer Service will be open Saturday, July 15 from 8 a.m. - 6:30 pm Central time.

WELLNESS PROGRAM QUESTIONS (Local Ed and Local Gov)

- **Local Ed:** With the Partnership Promise going away next year, is there really going to be any kind of penalty for employees who do not meet the Partnership Promise requirements for 2017?
  - **Answer:** They are getting a huge discount on their premiums each month. They made a promise. There's not a punitive penalty, but members should do what they said they were going to do and what they are still being rewarded for through the end of this year.

- **Local Ed:** When is the cut off for the biometric screening and questionnaire?
  - **Answer:** The deadline is July 15. Go to the ParTNers for Health website to download the Physician Screening Form. If members miss the deadline, we would like them to still complete the screening because we do want to get that biometric screening information. So, if they miss the deadline, encourage them to send it in anyway.

- **Local Ed:** Is there not a date where they are no longer required to do either of the requirements? Is it after September 1?
  - **Answer:** New hires from September 1 on are not required to complete the Partnership Promise.

- **Local Ed:** Do new employees that begin September 1 who enroll in the Partnership Promise need to complete a biometric screening before December 31?
  - **Answer:** If your coverage begins between September 1 and December 31, 2017, you will not have to complete the biometric screening requirement for 2017.

- **Local Ed:** If an employee is hired on July 1, do they have to do the screening?

- **Answer:** Yes, the employee would still need to complete the screening. They have 120 days to do so.

- **Local Gov:** Do you know how often they update the IVR?
  - **Answer:** Healthways gets regular updates from Onsite Health Diagnostics (OHD) on a weekly basis, and it usually takes one to three days to update the IVR system to have the new data reflected in the system

HIPAA Training in Edison

- **Training Reminder:** Please take your 2017 HIPAA Annual Training in Edison by following the path below to enroll in the class. Make sure you enroll in the correct HIPAA class. If you took the course in 2016, you will receive a message **"You have already completed this class on"** proceed anyway. Edison will record every year you have completed the course. The course takes approximately 30 minutes. There is a 10 question quiz at the end of the course. You must make at least an 80% otherwise you will be required to take the quiz again.
  - **NAV BAR >Navigator>ELM>Learning Home>Search for Learning HIPAA> HIPAA Annual Training (HIPA2016)> BA_ABC_HIPAA_Higher Education or BA_ABC_HIPAA_Local Education or BA_ABC_HIPAA_Local Govt. >Enroll**
  - **State ABCs:** You will register for the BA_ABC_HIPAA Local Education course.

HIPAA TRAINING QUESTIONS

- **Local Ed:** What do I do if the options will not come up if I don't type in the search box for HIPAA?
  - **Answer:** Make sure you type HIPAA, not HIPPA. That is a common mistake. If you type in HIPAA, it will show up.

- **State:** What's the deadline for the HIPAA training?
  - **Answer:** December 1 is the deadline, but we would encourage you to get it done as soon as possible.

- **State:** Is this for the 2016 HIPAA training?
  - **Answer:** It's for the 2017 training, but it's actually listed in ELM as 2016.

Operations

- **June Monthly Metrics and Customer Service Rating:**
  - Tickets via Email: 474
  - Tickets via Self Service: 1,363
  - Tickets via Phone Call: 4,965
  - Total Ticket: 6,802
  - 2016 – 4,574 calls
  - **Customer Service Rating** – 92.2%

- **Accepting Documents Through Zendesk:**
  - We are currently piloting a project to accept documents through Zendesk.
  - We will start accepting documents through Zendesk from all agencies August.
  - We will only be accepting documents for active employees and not retirees at this time.

- We will not accept documents that are emailed, only ones that are uploaded while the ABC is logged in to Zendesk. This is to ensure that the document routes to the correct place.
- The process is very similar to the tickets you submit through Zendesk now so we won't be conducting a training session.
- We will send out a training document later this month. If you need additional assistance after receiving this document, please contact the service center and we can have a trainer assist you.

- **Local Ed/Local Gov: Adding/Dropping Voluntary Vision:** As a reminder, the deadline for agencies to add or drop the vision plan is August 1.
  - Your notification letter to Benefits Administration must:
    - Be on agency letterhead.
    - State your agency's intent to join the vision 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 Holly Girgies at holly.m.girgies@tn.gov. When your agency joins the plan for 2018, your employees will be eligible to enroll during the Annual Enrollment Period this fall.
  - **Dropping Vision:** Also, if your agency would like to drop vision coverage for the 2018 calendar year, the same August 1 deadline applies. BA needs a written notice sent to Holly Girgies by these dates.

- **State: ESS Rates:**
  - **May ESS – 90%**
  - **YTD – 90%**

- **State/Higher Ed: ABC In-Person Training Nashville (August 10 and 11):** In August, Benefits Administration will hold all-day in-person trainings in Nashville for state and higher education ABCs. The dates and times are listed. We sent registration information to you last week and have included it again with the Friday ABC email.
  - **Higher Education:** Thursday, August 10 - Tennessee Tower
  - **State:** Friday, August 11 – Tennessee Tower

- **2017 In-Person ABC Meeting Schedule:** This summer, BA will offer all-day, in person trainings to go over the 2018 benefits and many of our vendors will be on hand to provide information and answer your questions in person. These meetings will be open to all ABCs, and we encourage all ABCs to attend. Last week, we emailed more information to all ABCs and the email included a registration link. We have included this information with the Friday ABC email.

Meeting Location	Date of Meeting	Time
Meadow View Convention Center Kingsport, TN	August 15	8:30 a.m. – 4:30 p.m.

UT Conference Center Knoxville, TN	August 16	8:30 a.m. – 4:30 p.m.
Fall Creek Falls State Park Spencer, TN	August 17	8:30 a.m.– 4:30 p.m.
Paris Landing State Park Buchanan, TN	August 22	8:30 a.m. – 4:30 p.m.
Premier Place Jackson, TN	August 23	8:30 a.m. – 4:30 p.m.
MTSU Training Center Murfreesboro, TN	August 29	8:30 a.m. – 4:30 p.m.

- **Upcoming ABC Training**
  - **ABC Workshops:**
    - Password Reset/Alternate Browsers
      - July 20: 1 - 2 p.m. Central time
    - Rehire/Transfer Process in eForms
      - July 13: 1-3 p.m.
      - July 20: 10-11 a.m.
  - **New ABC Training:**
    - July 26: 9-11 a.m. Central time - Local Ed Session 1
    - July 26: 1-3 p.m. Central time - State/Higher Ed Session 1
    - July 27: 9-11 a.m. Central time - Local Gov Session 1
    - July 27: 1-3 p.m. Central time - All Session 2

TRAINING

- **Local Ed:** Did you say you included a link for us to sign up for the meeting in August?
  - **Answer:** We sent it out separate from last Friday's email. We have included it today with the ABC email.

- **State:** Is the ABC training at the Tower different from the initial training I completed?
  - **Answer:** Yes, this training will feature many of our vendors and they will present on their various products, so it will be quite different than the initial training you took as an ABC. The vendors will be set up so you can talk to them before the meeting or during breaks. They will bring materials that they hand out at benefits fairs. So, it's very different. We would love for you to come to Nashville, but if you have ABCs in the regional areas, the trainings will be the same in all the cities. It will be a full day with our vendors.

- **State:** Will I need to register?
  - **Answer:** Yes. We sent the registration link last week and we will also send this week (included in today's email).

- **State:** Will vendors be at satellite locations with information?
  - **Answer:** Yes, they will. They will all be in Nashville and at all the regional trainings.

- **State:** Do you have an agenda for these meetings?
  - **Answer:** We are still working on agenda. We will share it with you before the meetings.

- **State:** Do you have to pre-register for the webinar (disability)?
  - **Answer:** No, you do not. We will be sending the webinar link in an upcoming email. It will be the same link as the monthly calls.

- **State:** What is the date for the state ABC training at Tennessee Tower?
  - **Answer:** It is Friday, August 11 for state.

OPERATIONS

- **Local Ed:** Are we required to provide written notification to employees who are terming with us and what benefits are termed and when? Or, will that automatically be emailed to them through COBRA?
  - **Answer:** That is handled through the initial COBRA letter that we mail out when we are notified of the termination.

- **Local Ed:** How do we notify you if employees are not returning to work in the new school year?
  - **Answer:** You would term the employee in Edison.

- **Local Gov:** Can you have more than one ABC in Zendesk? More than two ABCs?
  - **Answer:** Typically the agencies have one primary and one back up ABC. If there's a need for something different, please reach out and we will talk offline. Email us at benefits.info@tn.gov and a trainer will get back in touch with you.

Combined ABC Conference Call Notes
Higher Ed, Local Ed, Central State and Local Gov
September 12, 2017

Materials and Communications

- **Annual Enrollment Weekly Call Schedule**: Our weekly annual enrollment conference calls started today (September 12). Weekly calls will continue until two weeks after the annual enrollment period ends. Call dates are listed below.
    - **State and Higher Ed:** Every Tuesday through October 24.
    - **Local Ed and Local Gov:** Every Tuesday through November 7.
    - **Monthly ABC conference calls will resume on Tuesday, November 14.**
    - A schedule has been posted on the **ABC webpage** under Conference Call Notes.
- **Enrollment dates:** The enrollment dates are listed below. Enrollment will end at 4:30 p.m. Central on the last day of enrollment.
    - **State/Higher Ed:** October 2 through October 13, ending at 4:30 p.m. Central.
    - **Local Ed/Local Gov:** October 2 through October 27, ending at 4:30 p.m. Central.
    - **Retirees:** October 2 through October 27, ending at 4:30 p.m. Central.
- **Decision Guide Update**
    - **ABCs:** Pre-orders started to mail last week. We are continuing to send out pre-orders this week.
        - **Ordering more guides**: If you still need to order guides, you will need to use the order form found by plan on the **ABC webpage**. As a reminder, eligible employees are receiving guides in the mail, so you only need to order guides for new hires through the end of year. In Jan 2018, you will give new hires the 2018 Eligibility and Enrollment Guides.
    - **State/Higher Ed**: Employees should receive guides in the mail by mid-September, if not sooner.
    - **Local Ed/Local Gov:** Employees should receive guides in the mail by mid-September.
    - **Retirees:** Retirees should receive them in the mail by mid-September.
- **Employee Webinars:** We will hold employee benefits webinars by plan type so members can learn more about their benefits.
    - **State/Higher Ed:** Will be held during the first two weeks in October.
    - **Local Ed/Local Gov:** Will be held during annual enrollment in October.
    - Registration information is found on the **ParTNers for Health website,** and we have included a flier with the Friday, Sept. 15 ABC email.
- **Flu Shots:** A flier was sent with the Friday, September 8 ABC email with information about getting flu shots.
    - **State:** For those in the downtown Nashville and Metro Center areas, we will have flu shot clinics in October. We will send out a flier to the downtown area ABCs later this month.

COMMUNICATIONS QUESTIONS

- **Higher Ed:** Where can we find the order forms to order Decision Guides for employees?
    - Answer: The form is found by plan type (State Plan) on the **ABC webpage**, called Order Form. You will need to write “2018 Decision Guide” on the form.

- **Local Ed:** Is there a possibility that you have any webinars after school hours?
    - **Answer:** We have scheduled them at 11 a.m. and 1 p.m.to be around the lunch hour, but we will look at posting one or recording the webinar and get back to local education during the conference calls.

- **State:** Will you be sending out a summary of all changes to benefits to help staff?
  - **Answer:** In the Decision Guide and the annual enrollment PowerPoint we have highlighted the changes in the "What's Important in 2018" section.

- **State:** In regard to the YouTube videos about benefits, can you block what our employees see that does not pertain to employee benefits?
  - **Answer:** We cannot block the videos that appear on the right hand side of YouTube, but you can tell the employee to view the videos that are on the ParTNers for Health video page (there are 10 of them). They are animated videos branded with the ParTNers for Health logo.

- **Local Gov:** I have tried to order decision guides by faxing in the form about five times, and the form will not go through using the fax number on the form?
  - **Answer:** We have not heard of an issue with the fax number. We did check the fax number found on the form, and it is working. We ask that you send an email to **benefits.info@tn.gov** with your order, and we will process that for you.

- **Local Gov:** When will the Enrollment Change Application be updated for 2018?
  - **Answer:** It has been updated and is on the **BA website** under Forms.

HIPAA Training in Edison

- **HIPAA Training Completion Percentages:**
  - **Local Ed-73%**
  - **Local Gov-30%**
  - **State- 65%**
  - **Higher Ed-62%**
- **HIPAA Training Reminder:** For those who still need to complete the training, please take your 2017 HIPAA Annual Training in Edison. Follow the path below to enroll in the class. Make sure you enroll in the correct HIPAA class. If you took the course in 2016, you will receive a message **"You have already completed this class on"** proceed anyway. Edison will record every year you have completed the course. The course takes approximately 30 minutes. There is a 10 question quiz at the end of the course. You must make at least an 80% otherwise you will be required to take the quiz again.
  - **NAV BAR >Navigator>ELM>Learning Home>Search for Learning HIPAA> HIPAA Annual Training (HIPA2016)> BA_ABC_HIPAA_Higher Education or BA_ABC_HIPAA_Local Education or BA_ABC_HIPAA_Local Govt. >Enroll**
  - **State ABCs:** You will register for the BA_ABC_HIPAA Local Education course.

Operations

- **Continuing Coverage at Retirement On or Prior to 1-1-2018:** Reminder: employees who will be continuing coverage as retirees on or prior to 01/01/2018 should **not** elect changes via ESS. They must complete and submit the **Annual Enrollment Application for Retiree Participant** (called the 2018 Annual Transfer Application on the **BA website Forms** page).

RETIREE QUESTIONS

- **Local Ed:** Retirees will enroll using ESS?
  - **Answer:** No, retirees need to complete the form found in the back of the Decision Guide. They can either fax or mail the form in to Benefits Administration. Retirees can also find a copy of this guide on the **ParTNers for Health website under Enrollment Materials**.

- **State:** I have an employee who has asked, "Is the CDHP available to retirees? My husband is getting ready to retire this year?"
  - **Answer:** Yes, the CDHP is available to retirees. With this plan and also as an active employee, the retiree will need to be aware of tax implications and restrictions. We suggest that retirees consult with a tax professional for assistance on restrictions when considering a CDHP/HSA.

- **Local Gov:** We have someone who retired at the end of August. Will she need to fill out the form? July 31 was the term date.
  - **Answer:** It sounds like her insurance should have continued through the end of August as an active employee. That would make her retiree coverage effective Sept. 1. So any change she wants to make effective Jan. 1 she will have to use the retiree **Annual Enrollment Application** (found on the BA and ParTNers for Health websites) for retiree participants and fill this out during the annual enrollment period and fax or mail it in to BA.

- **Local Gov:** Are all the local government agencies eligible for retirement insurance?
  - **Answer:** There are minimum eligible retirement criteria to continue coverage which include minimum creditable service requirements, length of continuous coverage on the state plan immediately preceding termination of employment and age at the time employment terminates and they retire. If your agency participates in the TCRS system, the employee must also have a date of retirement on or before the date the insurance terminates. If your agency does not participate in TCRS, there are guidelines that pertain to length of service with your agency, length of continuous coverage under the plan immediately preceding termination of employment and their age when they terminate insurance. Information is available in the Local Government Plan Document and the Guide to Continuing Insurance at Retirement found on the **BA website under the For Retirement tab**. You call us if you have questions at 800.253.9981 or email us at **retirement.insurance@tn.gov.**

- **Local Gov:** I have someone who is retiring 12/30/17. What form do I need to submit to continue his insurance?
  - **Answer:** Anytime you have active employees who are applying to continue coverage at retirement they should always fill out the Application to Continue Coverage at Retirement. If they are Medicare eligible, receive a TCRS pension and wish to apply for the POMCO Medicare supplement upon retirement, they can elect the Med Supplement part 4. And on this form, there is a place for the ABC to certify the application the correct date the insurance would term with the agency, whether or not they are TCRS. If you happen to be an agency that does not participate in TCRS, then you have to certify how many years the employee has been with your agency.
  - The form is on the **BA website, on the left hand menu under For Retirement**. This will take you to a page specific to local government.

- **Local Gov:** When we have an employee retiring, do I need to terminate them in the system? Or should this be faxed to the state?
  - **Answer:** If you are an agency that has keying ability you should be terminating active employee coverage. If they are eligible to continue coverage as a retiree, then they fill out the **Application to Continue Coverage at Retirement**, and if they participate in TCRS we can confirm eligibility. If you are an agency that does not

participate in TCRS, then we rely on the agency to determine how many years of service the member has completed.

- **Local Gov:** If an employee is vested and decides to leave, will they be refunded the amount that they have contributed to retirement as well as what the employer has contributed? This is regarding TCRS.
  - **Answer:** BA does not oversee the monetary pension benefits. That would a question for TCRS, and the employee would need to ask them about pension eligibility.

- **Monthly Metrics:**
  - **August 2017:**
    - Tickets via Email: 583
    - Tickets via Self-Service: 2,321
    - Tickets via Phone: 5,646
    - Total: 8,550
    - 2016: 9,811

- **Customer Service Rating for August:** We received about 1,300 less calls this year than last year. We think it may be because we rolled out forms in August last year, and we were all learning the new process together. Our satisfaction rate was **93.3** percent.

- **State: ESS Rates:** Our August new-hire ESS participation rates dropped from 90 percent to 88 percent; the YTD rate of 90 percent decreased to 89 percent. We encourage you to require your new employees to use Edison to select their benefits.

- **Higher Ed/Local Ed and Local Gov: Submitting Multiple E-hire/ E-benefits form**
  - This is a busy time of year for us. The volume of E-hire and E-benefits forms has increased drastically. Thank you for embracing this change. Now that we have a year under our belts, we felt this would be a good time to offer reminders.
  - Please do not create multiple forms for the same employee. If you notice that you have made an error on a form you have two options to correct it. You can either update the form or submit a Zendesk ticket for BA assistance.

- **Higher Ed/Local Ed and Local Gov: Transfer Scenario Agency to Agency E-forms**
  - When you receive the email notification alerting you that you have an employee leaving your agency to go to another agency, it is very important that you review the notification and click the link provided in the notification to take action. What we've noticed is that the losing agency will receive the notification and then log into Edison to key the termination on the job data page instead of through the eForm. This causes the form to remain in a pending status with the gaining agency and in error under the losing agency, and this prevents a notification from being sent to the gaining agency. **Using the link will create a smooth transaction between the losing and gaining agency.**

TRANSFER SCENARIO QUESTIONS

- **Higher Ed:** So we should wait for the link?
  - **Answer:** You should wait on the link and email notification if you are not aware that the employee is leaving your agency. If you know in advance that the employee will be leaving, you can go ahead and key the termination as normal through the non-payroll job data page.

- **Higher Ed:** Sometimes the employee won't tell us they are going to another state agency. I will go in and terminate them, what happens, why is that an issue?
    - **Answer:** If you are doing the termination timely, you wouldn't receive a notification. This is for agencies that are losing and gaining. The losing agency hasn't put the termination in. If the losing puts the termination in late, this is what causes the issue. The losing agency in this instance needs to complete the eForm during the process so the gaining agency receives the notification.

- **State/Higher Ed: Death Claim Process – Reminder**
    - Benefits Administration made changes to the Death Claim process over a year ago. We have continued to monitor the new process and have looked for additional ways to streamline this procedure while showing compassion and sympathy during a very difficult time. As a reminder, you can notify us of a death by submitting a Zendesk ticket or by calling the service center. At the time of the notice our staff will inform you of the required documentation we will need to file a death claim with Minnesota Life. In order to file a claim we need the following documentation: Enrollment Change Form (check death in upper right corner of Part 1), Notice of Death Form, Beneficiary Designee and the Death Certificate. You can also locate the process on the ABC website and in Zendesk.

- **Plan Document (PD) Updates:** We have recent updates made to the plan document that we want to review. The updated versions are on the ABC website for review but we wanted to discuss the highlights. The major changes center on employer definitions and effective dates of coverage after a status change.

  State/Higher Ed:

    - **Definition of Employer - PD 1.17:** Starting 7/1/2017 for the State plan which includes Higher Education, the PD has defined each employer group as their own employer group.

  State Plan:

  Employer shall mean the State of Tennessee, University of Tennessee, other State of Tennessee Public Institutions of Higher Education or any agency of the State of Tennessee, which is authorized by statute to participate in the plan. The State of Tennessee, University of Tennessee, and the other public institutions of higher education are separate employers.

- **Employee Enrollment and Effective Date of Coverage – 2.03:** PD Language was updated to reflect our actual operational practice which allows employees transferring in from another group or those experiencing a status change to be subject to the same initial minimum employment criteria as other employees and those experiencing a status change must also meet the eligibility period. True transfers between HED/State will not be affected by this language change.

  State Plan:

  The effective date of coverage for an employee will be:

  1) First day of the month following the date of attainment of conditions relating to seasonal employees hired before July 1, 2015, or;

  2) First day of the month following the date of the status change and completion of one full calendar month of employment for employees transferring from the local education or local

government plan, or the first day of the month following the date of the status change for employees and employee dependents transferring from active coverage to retired coverage.

Local Ed and Local Gov: Plan Document (PD) Updates: We have recent updates made to the plan document that we want to review. The updated versions are on the ABC website for review but we wanted to discuss the highlights. The major changes center on employer definitions and effective dates of coverage after a status change.

- **Definition of Employer - PD 1.17:** Starting 7/1/2017 for the Local Education and Local Government Plans, the PD has defined each employer group as their own employer group.

Local Education Plan:

Employer shall mean a local education agency, pursuant to TCA 49-3-302, that participates in this plan. Each participating agency is a separate Local Education employer.

Local Government Plan:

Employer shall mean one of the following local government and quasi-governmental organizations which participates in the plan and meets one of the following criteria. Each participating agency is a separate Local Government employer.

Local Ed

- **What's New?:** PD Language was updated to reflect our actual operational practice which allows employees transferring in from another group or those experiencing a status change to be subject to the same initial minimum employment criteria as other employees and those experiencing a status change must also meet the eligibility period.

Local Education Plan:

The effective date of coverage for an employee will be:

1) First day of the month following the date of the status change or the first day of the subsequent month for employees transferring from the state or local government plan, or;

2) First day of the month following the date of the status change for interim teachers accepting permanent teaching positions, or the first day of the month following the date of the status change for non-certified employees accepting certified positions, or the first day of the month following the date of the status change for employees and employee dependents transferring from active coverage to retired coverage.

Local Gov

- **With Or Without Employee Enrollment and Effective Date of Coverage – 2.03:** The change here addresses employee's transferring from the state or local government to Local Education plan. Prior to the change PD language stated that the member should be allowed to transfer to the new agency and resume coverage as normal. So now the PD language reflects our actual practice.
    - The changes here also address agencies with or without a probation period for employees transferring in from a state or local education plan. Before the language change the Plan document did not require the member to meet a new eligibility period.

Local Government Plan:

The effective date of coverage for an employee will be:

1) First day of the month following the date of the status change or the first day of the month following completion of the agency's probationary period for employees transferring from the state or local education plan, or the first day of the month following the date of the status change for employees and employee dependents transferring from active coverage to retired coverage;

EFFECTIVE DATE OF COVERAGE QUESTIONS

- **Local Gov:** When are these changes effective again regarding the effective dates? If someone is hired on 09/12 and their coverage is to start on 10/01, would the effective date entered on the new hire form 10/01?
  - **Answer:** It would be the actual date of hire.

- **Local Gov:** I am confused about the effective date of coverage for an employee. Currently, we have a new hire eligible for coverage the first of the month after 60 days. Is this going to change for us?
  - **Answer: No, if you have a probationary period, this will not change.** If you have an employee who comes from the state plan and if your agency has a probationary period, that employee has to satisfy your probationary period.

- **Upcoming ABC Training**
  - **ABC Workshop:**
  - Topic: ABC - Queries During Annual Enrollment (AE)

    Host: Holly Girgies

    Date: Thursday, September 21, 2017

    Time: 12:30 pm, Central Daylight Time (Chicago, GMT-05:00)

    Session number: 649 096 464

    Session password: ABCworkshop

    To join the training session

    ----

    1. Go to https://tngov.webex.com/tngov/k2/j.php?MTID=tc4aec76aa4776aa6bd4d6816552a8372

    2. Enter your name and email address (or registration ID).

    3. Enter the session password: ABCworkshop.

    4. Click "Join Now".

    5. Follow the instructions that appear on your screen.

  - **New ABC Training:**
    - September 27: 9-11 a.m. Central time - Local Ed Session 1
    - September 27: 1-3 p.m. Central time - State/Higher Ed Session 1
    - September 28: 9-11 a.m. Central time - Local Gov Session 1
    - September 28: 1-3 p.m. Central time - All Session 2

  - **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 Enroll in the lower left corner.

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

8. 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 Higher Ed staying with Prudential for Long Term Disability?
  - **Answer:** Higher education did their own RFP for LTD and Lincoln Financial was the successful proposer for 2018. We will have more information available later this week.

- **Higher Ed:** Do we know who will be the wellness vendor?
  - **Answer:** We do not. We will have more information as it becomes available.

- **Higher Ed:** Will retirees have the chance to earn the incentive money by doing the biometric screening, etc.
  - **Answer:** No, they will not. It is only for state and higher education active employees and spouses.

- **Higher Ed:** Can employees sign up for Short Term Disability through ESS in Edison during open enrollment?
  - **Answer:** Yes.

- **Local Ed:** How long do new employees have to accept insurance benefits?
  - **Answer:** They have 31 days to enroll in coverage.

- **Local Ed:** Is that 31 days from their hire date?
  - **Answer:** Yes, so if hired today, they would have 31 days from Sept 13 to enroll.

- **Local Ed:** What is the death claim process reminder on the agenda?
  - **Answer:** That is an agenda item for the state and higher education ABC calls.

- **Local Ed:** I have a question about the individual contribution to out-of-pocket maximums for PPOs and CDHP. How does this work? I had an instance in which one person met the full $3,000, but it was not met by the family.
  - **Answer:** With the PPOs each person has to meet the individual out-of-pocket maximum until the total out-of-pocket maximum is met. With the CDHP, the family unit works together as a whole and the family has to meet it before it is satisfied. With the PPOs, no individual will have to contribute more than the individual (employee only) amount.
  - **Here is more information about deductibles and out-of-pocket maximums:**

How Do the Deductibles and Out-of-Pocket (OOP) Maximums Work For the PPO and CDHP Plans?

Deductibles – For both PPOs and CDHPs, members generally pay all costs up to the deductible amount before the plan begins to pay. This only applies to services subject to a deductible.

There is a significant difference in the way the deductible works for family coverage:

- **PPOs** – Members in a family plan **DO have an individual deductible** amount equal to the "employee only" amount, which varies from one PPO to another; no family member will have to pay a deductible amount greater than the "employee only" amount; if an individual family member meets their deductible amount, the plan will begin to pay for that family member's claims, and their deductible amount will count toward the overall family deductible; other family members will continue to pay costs until they meet their individual deductible amounts or until the overall family deductible is met
- **CDHPs** – Members in a family plan **DO NOT have an individual limit**; each family member will contribute to the overall family deductible which must be met before the plan begins to pay for any family member's claims subject to a deductible

<u>Out-of-Pocket Limits</u> – For both PPOs and CDHPs, the out-of-pocket limit is the most members will pay in a year for covered services.

There is a significant difference in the way the out-of-pocket limit works for family coverage:

- **PPOs -** Members in a family plan **DO have an individual out-of-pocket limit** equal to the "employee only" amount, which varies from one PPO to another; no family member will have to pay more than the "employee only" out-of-pocket amount; if an individual family member meets their out-of-pocket limit, the plan will cover that family member's eligible expenses at 100% for the remainder of the Plan Year, and their out-of-pocket amount will count toward the overall family out-of-pocket limit; other family members will continue to pay until they meet their individual out-of-pocket limits or until the overall family out-of-pocket limit is met
- **CDHPs** – Members in a family plan **DO have an individual out-of-pocket limit FOR IN-NETWORK EXPENSES ONLY**; no family member will pay more than $7,350; if a family member has eligible in-network out-of-pocket costs totaling $7,350, the plan will cover that family member's eligible in-network expenses at 100% for the remainder of the Plan year; all eligible out-of-pocket amounts will count toward the overall family out-of-pocket limits; other family members whose in-network out-of-pocket expenses do not total $7,350 will not have their eligible in-network expenses paid at 100% until the overall family in-network out-of-pocket limit has been met

Premier PPO Deductible	**PPO - How the Deductible Works** Generally, you must pay all of the costs from providers up to the deductible amount before this plan begins to pay.	**Local CDHP/HSA Deductible**	**Local CDHP/HSA - How the Deductible Works** Generally, you must pay all of the costs from providers up to the deductible amount before this plan begins to pay.
<u>In-network/Out-of-network</u>: **$500/$1,000** employee only; **$750/$1,500** employee + child(ren); **$1,000/$2,000** employee + spouse; **$1,250/$2,500** employee + spouse + child(ren)	If you have other family members on the plan, **each family member must meet their own individual <u>deductible</u>** until the total amount of deductible expenses paid by all family members meets the overall family deductible. **Members in a family plan DO have an**	<u>In-network/Out-of-network</u>: **$2,000/$4,000** employee only; **$4,000/$8,000** employee + child(ren); **$4,000/$8,000** employee + spouse; **$4,000/$8,000** employee + spouse + child(ren)	If you have other family members on the policy, **the overall family deductible must be met before the plan begins to pay. Members in a family plan DO NOT have an individual limit.**

	individual limit. No family member will pay more than the "employee only" amount which varies from one PPO to another.		
Premier PPO Out-of-Pocket (OOP) Limit	**PPO- How the OOP Limit Works** The out-of-pocket limit is the most you could pay in a year for covered services.	**Local CDHP/HSA Out-of-Pocket (OOP) Limit** .	**Local CDHP/HSA - How the OOP Limit Works** The out-of-pocket limit is the most you could pay in a year for covered services
In-network/Out-of-network: **$3,600/$4,000** employee only; **$5,400/$6,000** employee + child(ren); **$7,200/$8,000** employee + spouse; **$9,000/$10,000** employee + spouse + child(ren)	If you have other family members in this plan, **each family member must meet their own out-of-pocket limit** until the overall family out-of-pocket limit has been met. **Members in a family plan DO have an individual limit. No family member will pay more than the employee only amount which varies from one PPO to another.**	In-network/Out-of-network: **$5,000/$8,000** employee only; **$10,000/$16,000** employee + child(ren); **$10,000/$16,000** employee + spouse; **$10,000/$16,000** employee + spouse + child(ren) No family member will pay more than $7,350.	If you have other family members in this plan, **the overall family out-of-pocket must be met. No family member will pay more than $7,350 toward the family's in-network out-of-pocket limit.**

- **State:** Are retirees eligible to participate in the money for completing biometric screenings**?**
  - **Answer**: No, they are not eligible.

- **State:** This question is regarding the disability insurance. If an employee signs up for Short Term Disability this year with no health questions asked, but then has an event in 2018 that ends up being something that would need Long Term Disability, what would they do at this time? Could they enroll?
  - **Answer:** If the employee enrolls in STD during the 2018 annual enrollment and wants to enroll in LTD mid-year 2018, they cannot do this. This year is an open enrollment for both Short Term and Long Term Disability Insurance during this year's enrollment period. If the employee decides to wait and enroll in Long Term Disability during next year's annual enrollment period, he or she will have to answer health questions.
    - Only new hires going forward will **not** have to answer health questions if they enroll within 31 days of their eligibility date.
    - **This annual enrollment is the only time current employees will not have to answer any health questions.** If current employees want to enroll in LTD next year, they will have to answer health questions.

- **State:** We are often training with new hires staff outside of internet connectability. Can we download the videos on thumb drive?
  - **Answer:** We are still researching if we can provide the videos for you to download and will update ABCs during the next conference calls.

- **Local Gov:** Cigna covers Centennial hospital but not all of the doctors. BCBS does not cover the hospital but some of the doctors. Is there a plan that covers both the Centennial facility and the Centennial doctors? Will there be any one network in 2018 that includes both Centennial hospitals and Centennial Physicians?
  - **Answer:** It is correct that Centennial facilities are in the Cigna networks. The short answer is there are hundreds of doctors at the Centennial facilities. This does not consider various provider groups affiliated with Centennial but working outside the hospitals. Members should call the carrier networks directly (Cigna or BCBST) if they have a question about a specific provider in 2018.
  - **We have included specific information about how to find out about networks below.** The information about how members can find a provider is also on the **ParTNers for Health website under Carrier Information**.

1. **BCBS Network S:**
   Centennial Hospitals? NO
   Centennial Physicians? MAYBE
   Contracting for facilities and physicians is separate. Individual physicians or physician groups may or may not be in-network.
   Members can check the status of specific providers by:
   a. calling BCBS customer service at **800-558-6213**; or
   b. searching online at http://www.bcbst.com/members/tn_state/index.page*; or
   c. viewing the 2018 Provider Directory, http://www.partnersforhealthtn.gov/documents/directory_bc.pdf *
2. **CIGNA LocalPlus:**
   Centennial Hospitals? YES. Centennial Medical Center - Nashville (Davidson County), and at Ashland City (Cheatham County)
   Centennial Physicians? MAYBE
   Contracting for facilities and physicians is separate. Individual physicians or physician groups may or may not be in network.
   Members can check the status of specific providers by:
   a. calling Cigna customer service at **800-997-1617**; or
   b. searching online at http://cigna.arvatocim.com/TNLO/*; or
   c. viewing the 2017 Provider Directory, http://www.partnersforhealthtn.gov/documents/directory_cigna_lp.pdf *
3. **CIGNA OAP:**
   Centennial Hospitals? YES. Centennial Medical Center - Nashville (Davidson County), and at Ashland City (Cheatham County)
   Centennial Physicians? MAYBE
   Contracting for facilities and physicians is separate. Individual physicians or physician groups may or may not be in network.
   Members can check the status of specific providers by:
   a. calling Cigna customer service at **800-997-1617**; or
   b. searching online at http://cigna.arvatocim.com/TNOAP/*; or
   c. viewing the 2017 Provider Directory, http://www.partnersforhealthtn.gov/documents/directory_cigna_oap.pdf *

*NOTE: The information in the online searchable directories is only applicable for the 2017 plan year. The information in the 2018 PDF printed directories is only 100 percent accurate the day it is sent to print. **Providers and facilities in the carriers' networks can change.** Be on the lookout for 2018 network updates. Additional information will be posted to the ParTNers For Health website as soon as it is available. **In the meantime, you can check the 2018 network status of your preferred providers by calling BCBS or Cigna member services.**

- **Local Gov:** We have an employee who is being charged for their biometric screening, and she has been turned over to collections. How or who does she need to contact? She has already contacted the physician and talked with them.
  - **Answer:** Send the information to **benefits.info@tn.gov,** and we will respond to you. As a reminder, members can get one annual in-network preventive physical exam each year at no cost. If other tests are completed at the time of the appointment, other charges could apply.

- **Local Gov:** During annual enrollment when employees would like to make changes, we do not use ESS, we have faxed them or made changes online. What is the proper way to make these changes? Do I need to take a class?
  - **Answer:** You won't be able to fax in forms any longer. If you have employees who need to make changes, you will need to do so during eForms or the employee can enter changes in ESS in Edison directly. The employee will have an open enrollment (OE) event out there and you will need to enroll them in coverage.
  - **For training:** We would suggest enrolling in Session 2 new ABC class. New ABC training session 2.

- **Local Gov:** I submitted a question to Zendesk and was then referred to benefits. privacy. How long does it normally take for a response?
  - **Answer:** If about claims data or supplemental plans it would have been referred to benefits.privacy@tn.gov. You can submit a ticket at benefits.info@tn.gov and we can research this for you.

- **Local Gov:** If we have an employee who wants to make changes during annual enrollment, do we do this through the eForm system?
  - **Answer:** Yes, you can do so in eForms for the employee or they can make changes in ESS on their own.

- **Local Gov:** During open enrollment, if the employee is not making any changes they do not have to do anything. Correct?
  - **Answer:** Correct.

- **Local Gov:** Will everything be done online or are there paper forms that can be filled out?
  - **Answer:** If you are an active employee, everything needs to be done online in eForms or in ESS in Edison. However, if you are a retiree, you will complete a paper form. For the retirement unit, the process is different. We still use paper forms. For active employees, the process is electronic enrollment in eForms or ESS in Edison.

- **Local Gov:** Regarding the vision coverage with the change of vendor, do we have to do anything if the employee wants to keep their vision coverage?
  - **Answer:** No, only if they want to change plans (switching from Basic to Expanded or vice versa).

- **Local Gov:** You won't need any applications uploaded as we had to if they chose the Partnership Promise?

- **Answer:** Correct, you will not need to upload any forms as previously this was for members who agreed to the Partnership Promise and biometric screenings.

- **Local Gov:** How do we handle open enrollment if the employee insurance is effective 10-01-17, will they need to submit a paper application?
  - **Answer**: If the employee's coverage is beginning 10-1/17, the employee should still have time to make their annual enrollment selections in ESS or through eForms. It depends on when you go in and hire the member. If the employee is hired toward the end of the AE period, you can complete a paper form for 2018 coverage. The paper enrollment form for 2018 coverage would still need to be submitted within the 31 day deadline for their new hire coverage.

- **Local Gov:** On the enrollment change form for 2018, what effective date of coverage will be used?
  - **Answer:** This enrollment form should be used for coverage that will become effective 1/1/18 or later. The actual effective date of coverage would depend on the member's hire date if enrolling due to a new hire. Or if enrolling due to loss of coverage the effective date would vary based on when the member lost coverage.

- **Local Gov:** Where did you say the 2018 Enrollment form is located? I looked on ABC page.
  - **Answer:** It is on the **Benefits Administration website**, (Insurance & Benefits) under **Forms**.

- **Local Gov:** If the ABC enrolls employees in the Premier PPO, than they don't have to upload an enrollment form, but just click what they want, correct?
  - **Answer:** Correct.

- **Local Gov:** Does the employee's vision benefits start over in January? If an employee gets new glasses in October, would he or she be eligible to get new ones again next year?
  - **Answer:** Yes, the benefits will start over for all members beginning on Jan 1, 2018.

- **Local Gov**: If an employee makes a change in medical plan for 2018, is the effective date 1-1-2018?
  - **Answer:** If the employee makes the change during annual enrollment, then yes, the change is effective 1-1-2018.

Combined ABC Conference Call Notes
Higher Ed, Local Ed, Central State and Local Gov
September 19, 2017

Materials and Communications

- **Annual Enrollment Updates:**
  - **Annual Enrollment Dates:** Annual enrollment starts soon. Here are the dates:
    - **State/Higher Ed:** October 2 through October 13, ending at 4:30 p.m. Central.
    - **Local Ed/Local Gov:** October 2 through October 27, ending at 4:30 p.m. Central.
    - **Retirees:** October 2 through October 27, ending at 4:30 p.m. Central.

  - **Decision Guides:** Decision Guides are arriving in members' homes.
    - **ABCs:** If you still need to order guides for your new hires, fill out the order form found by plan type on the **ABC webpage**. Write 2018 Decision Guide and the quantity on the form.

  - **Employee Informational Benefits Webinars:** We will hold employee benefits webinars by plan type so members can learn more about their benefits.
    - **State/Higher Ed:** Will be held during the first two weeks in October.
    - **Local Ed/Local Gov:** Will be held during annual enrollment in October.
  - Registration information is found on the **ParTNers for Health website.** A flier you can share with your employees was sent with the Friday, Sept. 15 ABC email.
    - **Local Ed:** Some ABCs asked about a webinar for employees who could not make the times available. We will record and post an employee webinar. We will let you know when and where we post it for your employees.

- **State:** **Nashville - Flu Shot Clinics:** For those in the downtown Nashville and Metro Center areas, we will have flu shot clinics in October. We will send out a flier to the downtown area ABCs later this month.

- **New Animated Videos:** We will not have ALEX this year for employees, so we have created a new animated video series. The series is hosted on YouTube, but you can access it through **www.partnersforhealthtn.gov.** We have videos on the following subjects:
  - Insurance 101
  - Network VS. Plan
  - CDHP
  - PPO
  - FSA
  - Dental
  - Vision
  - Long Term Disability
  - Short Term Disability
  - Pharmacy

COMMUNICATIONS/MATERIALS QUESTIONS

- **Higher Ed:** Excluding the Baptist dropping from the Cigna OAP, what is the difference in the number of providers between Cigna Local Plus and the OAP? This is for the physician network, can we get those numbers?
  - **Answer:** Local Plus is a very narrow network. OAP is a broad network in the Nashville network and costs $40 to $80 more per month. Here are numbers of providers (physicians) we received from Cigna:

Counts for OAP and LP Physicians as of 9/13/2017:

Total of Providers (Networks)	Primary	Specialists
OAP	4212	19558
LP	3847	18228

As a reminder, the facilities in each network are different. We have included facility lists on the **ParTNers for Health website on the Carrier Information** page.

Benefits

- **Pharmacy – Diabetes Test Strips Update:** Beginning 1/1/2018, we will have a quantity limit on test strips that diabetics may fill:
  - 200 test strips per 30 day fill (allows for testing 6x per day).
  - 600 test strips per 90 day fill (allows for testing 6x per day).
  - For members whose physician believes they need to test even more frequently, there is a post quantity limit prior authorization process (PA) available.
    - Members who are approved for more test strips may fill up to 300 test strips every 30 days or 900 test strips every 90 days. This allows for testing up to 10x per day.

- **State/Higher Ed: MetLife Disability Presentation:** For those ABCs who were not able to join us for an in-person training or for those who need a refresher on the NEW disability benefit, Julie Salomone with MetLife presented information on the new benefit.

DISABILITY INSURANCE QUESTIONS

- **Higher Ed:** Going forward, will this show up on the Enrollment form, or will there be a separate form for it?
  - **Answer:** It is on the form. As a reminder, during Annual Enrollment, members will need to enroll in ESS in Edison.

- **State:** If the employee is in the sick leave bank, will it pay if they are on sick leave bank? And if the employee has leave but is off on workers comp being paid at 66 and 2/3, will it pay?
  - **Answer:** Employees are not required to withdraw days from the sick leave bank, but if they do, that pay will offset the disability benefit. The disability benefit will not pay for days that workers comp will pay for.

- **State:** Are there a certain number of weeks that are covered when an employee is out for the birth of a child?
  - **Answer:** MetLife does have specific time frames. It is six weeks for a normal delivery and eight weeks for a C-section. If a complication would require time beyond that, MetLife would require medical documentation beyond those time frames.

- **State:** What happens if the employer decides to separate the employee while they are on LTD?
  - **Answer:** The disability is determined on the date of the disability, so there would be no impact to the claim already in progress.

- **State:** Also, how does social security disability affect LTD?
  - **Answer:** Any social security benefits are considered an offset and would reduce the amount a member would receive in benefits from the disability insurance.

- **State:** If a person is on maternity coverage, does the employee use all of the leave time and then the 6-8 weeks start, or is combined with all the employee's leave times? For example, if someone has 20 days of leave time and they meet the elimination period, does the 6-8 weeks start or does it include the time they have (the 20 days of leave)?
    - **Answer:** The amount of time that a person takes for leave will count toward the elimination period and must be satisfied. Disability benefits will not start until all leave is used. As far as the elimination period, it is consecutive. The benefits start date is the same date the 6 or 8 weeks of maternity will start. The elimination period is not included in the maximum determination of the benefit.

- **State:** Is information about LTD and STD going to be mailed to employees?
    - **Answer:** Yes, a postcard has already been mailed and an information packet will be mailed soon. We will also send out reminder emails.

- **<u>HIPAA Training in Edison</u>**
    - **HIPAA Training Reminder:** For those who still need to complete the training, please take your 2017 HIPAA Annual Training in Edison. Follow the path below to enroll in the class. Make sure you enroll in the correct HIPAA class. If you took the course in 2016, you will receive a message **"You have already completed this class on"** proceed anyway. Edison will record every year you have completed the course. The course takes approximately 30 minutes. There is a 10 question quiz at the end of the course. You must make at least an 80% otherwise you will be required to take the quiz again.
        - **NAV BAR >Navigator>ELM>Learning Home>Search for Learning HIPAA> HIPAA Annual Training (HIPA2016)> BA_ABC_HIPAA_Higher Education or BA_ABC_HIPAA_Local Education or BA_ABC_HIPAA_Local Govt. >Enroll**
    - **State ABCs:** You will register for the BA_ABC_HIPAA Local Education course.

HIPAA TRAINING QUESTIONS

- **State:** Related to the HIPAA training, are we supposed to have (Secure Email) in the subject for any email discussing FMLA timesheet records?
    - **Answer:** FMLA is an employer function and is not considered protected health information, so you do not have to send via secure email.

- **Local Gov:** Edison will not let me enroll to take training. I need help to see if I'm not doing it right.
    - **Answer:** You can send an email to Chanda.Rainey@tn.gov and we will help you.

- **Local Gov:** I took the HIPAA test this morning in Edison and passed, but did not receive an email confirmation. How can I know the system acknowledges my completion?
    - **Answer:** If you log back into the Edison/ELM, it will tell you if you have completed the course or not. Go to Learning Home in Edison. Look in the "My Current Learning" section for "My Learning" which is highlighted in blue. Click on "My Learning." Find the completed HIPAA class and click on Printer Icon. This will print a certificate of completion for your records.

- **Local Gov:** When does the HIPAA training need to be completed?
    - **Answer:** As soon as possible, but the deadline is December 1, 2017.

- **Local Gov:** I'm having issues launching the HIPAA Training. I have clicked launch and just a blank window opens. My pop up blocker has been disabled. Any advice?
  - **Answer:** You can try a different internet browser. Generally Edison works better with Internet Explorer.

- **Local Gov:** I've been trying to launch the HIPAA training. It says everything is pending and it won't let me go on to do the training?
  - **Answer:** It might be the browser. We suggest using Internet Explorer.

Operations

- **New Zendesk Chat Feature:** Ian Harris with Benefits Administration is presented information about a new chat feature available for ABCs and our members.
  - **Note:** Live chat is only available during BA service center office hours.

BA SERVICE CENTER CHAT QUESTIONS

- **Higher Ed:** So this is for ABCs and employees?
  - **Answer:** Yes, and it is HIPAA compliant, but you will have to verify information for our service staff to discuss any protected health information with you.

- **Higher Ed:** What's the little bell (on the screen)?
  - **Answer:** That is the default image if the person on our end responding to the chat does not have an image available.

- **Higher Ed:** Can employees request password reset and/or Edison ID using the chat feature?
  - **Answer:** Yes, our chat is HIPAA secure. We can verify HIPAA (identify verification – member's name, SSN or Edison ID, DOB and address) and do password resets via chat.

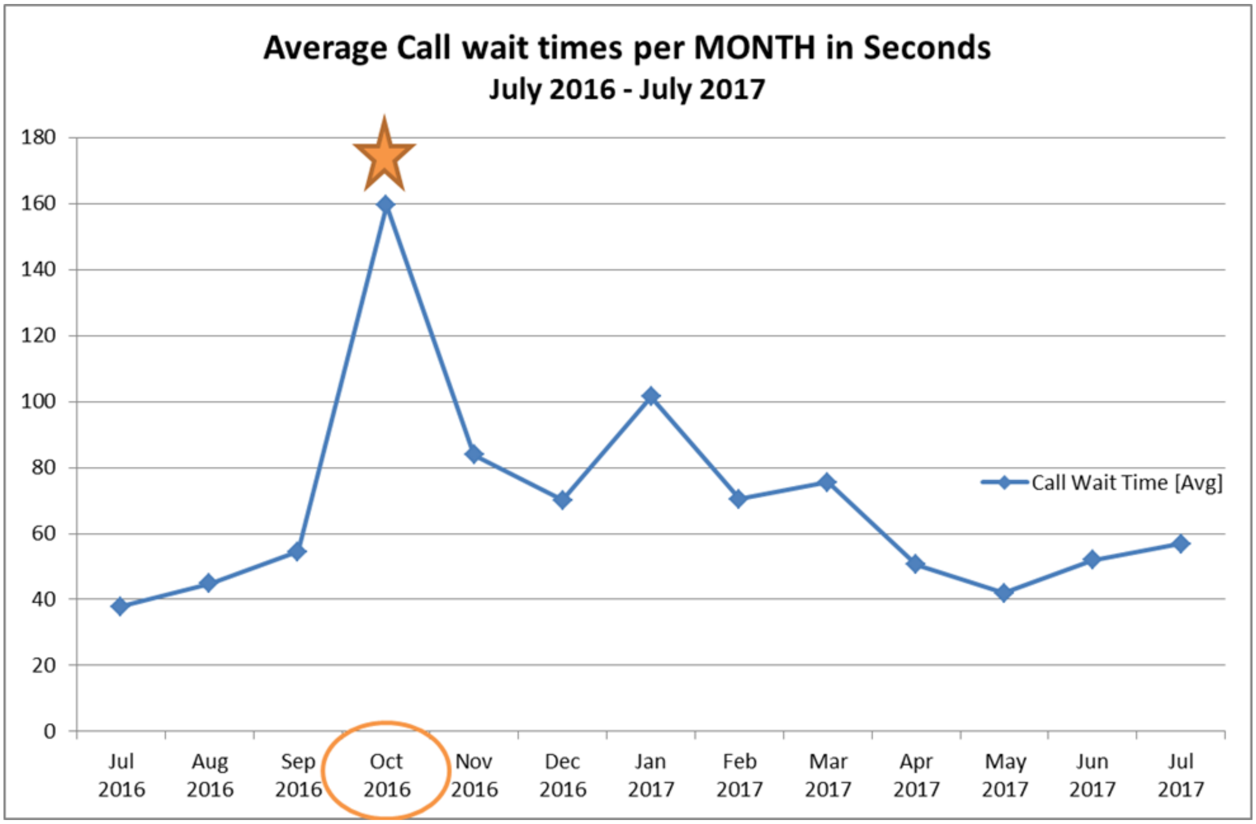
- **Higher Ed:** What if they need their Edison ID number?
  - **Answer:** The employee would need to provide enough information for us properly verify HIPAA (identity verification) then we will be able verify the Edison ID.

- **Local Gov:** What hours will the chat option be available?
  - **Answer:** The hours are 8:00 a.m. to 4:30 p.m., M-F, except during holidays.

- **ABC Survey Results: ABC Survey:** We sent the annual survey to our main 600+ ABC (no back up ABCs) community with about 350 ABCs responding in June of this year. The results showed that the Service Center exceeded or met expectations by 95.35% of this population. We want you to know how much we appreciate your feedback and how thrilled we are with your rating.

  We compiled some of the most common comments and I would like to discuss them with you today. As you know, we are in a mode of continuous improvement so we take your feedback seriously.

  - **Wait times too long**



- We pulled the Average Wait Time data from July 2016-July 2017. This data is based on seconds, not minutes. Our longest average wait time was during Annual Enrollment with an under three minute average wait time (2:40 seconds). This is an average so there are times when an individual wait time could be longer.
- We will continue to communicate issues via email. You can always send us a Zendesk ticket when wait times are higher than usual. Or use our new Chat feature.

- **Improve Timeliness:** We added Zendesk chat and document upload to improve timeliness. What other ways do ABCs suggest that we can improve timeliness?

- **Need consistency with documents and answers:** Our team is trained on the most common questions annually. Then, all of us are required to obtain a 100% score on the Recalibration Test. I would like you to tell us immediately when you receive an inconsistent answer. That way, we can research the correct answer, coach our team on the scenario and possibly publish a Zendesk article for future reference. It is difficult to respond to inconsistent answers without knowing the particulars. Please email **Renee.Boles@tn.gov** when this happens.
    - As always, we are open to suggestions for improving our service delivery to you and our members. You can send those suggestions to me at **Patrice.Steinhart@tn.gov**

- **Upcoming ABC Training**
    - **ABC Workshop:**
        - Queries to Run During Annual Enrollment
        - September 21: 1 -2 p.m. Central time

Link for ABC Workshop:
Topic: ABC - Queries During Annual Enrollment (AE)
Host: Holly Girgies
Date: Thursday, September 21, 2017
Time: 1:00 pm, Central Daylight Time (Chicago, GMT-05:00)

Session number: 649 096 464
Session password: ABCworkshop

To join the training session
----
1. Go to
https://tngov.webex.com/tngov/k2/j.php?MTID=tc4aec76aa4776aa6bd4d6816552a8372
2. Enter your name and email address (or registration ID).
3. Enter the session password: ABCworkshop.
4. Click "Join Now".
5. Follow the instructions that appear on your screen.

- **New ABC Training:**
  - September 27: 9-11 a.m. Central time - Local Ed Session 1
  - September 27: 1-3 p.m. Central time - State/Higher Ed Session 1
  - September 28: 9-11 a.m. Central time - Local Gov Session 1
  - September 28: 1-3 p.m. Central time - All Session 2

TRAINING QUESTIONS

- **Higher Ed:** Please explain how to get to the training links for new ABCs?
  - **Answer:** To register for new ABC training, go to ELM, search for learning and then search for the training you are looking for.

- **Local Gov:** Is this training for new ABCs only?
  - **Answer:** No, any ABC who would like to take these trainings can, especially Session 2 as it goes over eForms.

- **Local Gov:** Do we go into Edison and take the training?
  - **Answer:** You sign up for the training in ESS in Edison in ELM. This is a live webinar training.

- **Local Gov:** Is this the same training that was taken in August?
  - **Answer:** If you are referring to the August workshop, it is a different workshop.

- **Local Gov:** The training on Thursday, Sept. 21, will it be available at a later date?
  - **Answer:** We will only have the one workshop, but we will post the slides on the ABC webpage.

WELLNESS PROGRAM QUESTIONS

- **Higher Ed:** I didn’t see the dollar amount on the website members can earn on the website for the 2018 wellness program?
  - **Answer:** The total amount that can be earned will be $150 for the member and $150 for the eligible spouse. It is not on the website and we don’t have the information as the contract is not yet finished. The 2018 wellness program is not tied to annual enrollment. The dollar amount was approved by the Insurance Committee, but we have not finalized the dollar amount for each activity, just the total amount.

- **State:** When will you have the information available regarding the rewards for the Promise?
  - **Answer:** There will not be a Partnership Promise in 2018.We have shared what the total dollar amounts will be for the member and eligible spouse and that will be $150 each, but we have not shared the details of how members can earn those cash

incentives. We will not share this information until the wellness contract has been finalized.

- **Local Gov:** I know there's no Partnership Promise for 2018, but will the WBA still be an option, (I've been asked this from an employee) and also the biometric screening?
  - **Answer:** You will not have access to the Well-Being Assessment (WBA) but members can get an annual exam each year. There will be no onsite screenings for local government members nor will they have to complete a biometric screening form.

- **Local Gov:** What about coaching?
  - **Answer:** Your members would have access to Disease Management (DM) coaching (diabetes, asthma, chronic obstructive pulmonary disease (COPD), congestive heart failure (CHF) and coronary artery disease (CAD), and if a member is deemed high risk, they will be contacted, but do not have to participate. There will not be biometric screening forms, but members can get an annual physical at no cost. If they qualify, members can also participate in the Diabetes Prevention Program (DPP). More information to come on that program.

OPERATIONS QUESTIONS

- **Higher Ed:** Will there be a different process as the Partnership Promise is different and now we have to submit the enrollment form. Will we still have to submit the form?
  - **Answer:** No, you will not have to submit the enrollment form unless it is for a new hire or is a SQE.

- **Higher Ed:** Just for clarification, there's no need to upload any documents into eBenefit unless it is Partnership?
  - **Answer:** Correct – currently (for 2017) if they are enrolled in the Partnership Promise we need the form and also dependent verification documents if they are adding dependents. In 2018, if they are adding dependents we won't need the paper form for the Partnership Promise, but we would still need dependent verification documents if they are adding dependents.

- **Higher Ed:** Some of the new hires I have go right through and sign up and others do not. How long should I wait before calling to see why I can't proceed?
  - **Answer:** Higher Education agency employees have the option to enroll into new hire benefits via ESS or through eForms. If you suspect that the member has enrolled via ESS you can check your Premium Due Reports, or run the TN_BA133 query. You may also call the service center or create a Zendesk ticket and we will be happy to check.

- **Higher Ed:** What about dependent verification documents next year?
  - **Answer:** We will still need dependent verification documents next year and you can attach them to the form.

- **Higher Ed:** If I'm keying the coverage, I don't need to send the form, just the dependent verification documents?
  - **Answer:** Yes, that is correct.

- **Higher Ed:** Is the red footnote on page 4 of decision guide correct? "state will not contribute funds to your HSA in 2018?

- **Answer:** Yes. The guide is for 2018 benefits and coverage, with benefits starting Jan. 2018. If a new hire or member enrolls in the CDHP/HSA during this fall's annual enrollment for 2018 coverage, then they would qualify for state HSA funds for 2018, available in Jan 2018. **The full sentence is "If your insurance coverage starts on or after Sept. 2 through the end 2018, the state will not contribute funds to your HSA in 2018."** Sometimes members or new hires have access to the Decision Guide later in the year, and this lets them know that state HSA funds are not available for coverage effective dates Sept. 2 or later in 2018.

- **Local Ed:** Will the Caremark page be updated with the 2018 plan options so that members can research their drug costs? The Partnership Plan options have not been updated as of today.
  - **Answer:** Yes, Caremark is working on making updates and we will keep you posted.

- **Local Ed:** How do you know if a certain doctor/group is in-network?
  - **Answer:** The best way is to call the carrier and ask about 2018 providers. This will give you most accurate information. We have links to facility PDFs, the carriers' provider directories and how to contact them on our **ParTNers for Health website under Carrier Information**. You can direct your employees to this information.

- **Local Ed:** We have had several employees ask why the premiums went up so much for the CDHP and Limited. What is a short answer we can provide?
  - **Answer:** BA did present information this summer on the plans and premiums but the short answer is that we have right-sized the premiums based on member claims.

- **Local Ed:** Those on Partnership plans will automatically move to the Premier PPO unless they choose another plan in ESS, correct?
  - **Answer:** Correct.

- **Local Ed:** I know something was mentioned about the gap insurance causing the increases as well?
  - **Answer:** That is true and there is some adverse impact on premiums from that.

- **Local Ed:** Members enrolled in the No Promise PPO will be moved to the Premier PPO?
  - **Answer:** Yes, unless they go in and make a change for 2018 coverage.

- **State:** If someone gets married during open enrollment how do they enroll their spouse for 2018? Does it have to be during that enrollment period?
  - **Answer:** The member has the choice to enroll the new spouse on the date of marriage or first day of the following month via a paper enrollment and copy of marriage certificate. If they get married during Annual Enrollment and want coverage to begin 1/1/18, then the member must enroll via ESS, add the new spouse as the dependent and submit the marriage certificate during Annual Enrollment.

- **State:** Will Benefits Administration be sending out updated hospital lists for the upcoming plan year?
  - **Answer:** We did send the latest version out with the Sept. 8 ABC email and they are posted on the **ParTNers for Health website on the Carrier Information** page.

- **State:** Will there be a new RX list for 2018?
  - **Answer:** The preferred drug list (PDL) is updated on the first day of each January, April, July, and October and we share it with all ABCs and post it on the ParTNers for Health website on the pharmacy page. Caremark also posts it right around that same time on our splash page. The January 2018 version will be shared with the ABCs sometime in mid-to- late December and it will be posted on the Caremark splash page they maintain for us sometime around the first of the year.

- **State:** So enrollment for STD/LTD is not on Edison? During Annual Enrollment (AE) can I enroll in disability in ESS in Edison?
  - **Answer:** Enrollment for Disability Insurance will be during Annual Enrollment in ESS in Edison. The paper form is for SQEs and new hires.

- **Local Gov:** Please explain how the enrollment is handled for new hires during this Annual Enrollment (AE) period. Do we use ESS for remainder of 2017 AND then a paper form for 2018 choices? I couldn't find a 2018 Enrollment form.
  - **Answer:** For the remainder of 2017, you can use eForms or ESS for 2017 benefits. For the 2018 Annual Enrollment, you can use eForms or ESS. If employees are hired during the last week of AE, you can submit their new hire benefits for 2017 in ESS (they have 31 days), and you can submit an AE form for the 2018 benefits. The new enrollment form is on the BA website, under Forms: **http://www.tn.gov/finance/topic/fa-benefits-publicationsforms**

- **Local Gov:** Is it too late to have additional Decision Guides mailed to us?
  - **Answer:** No, you can use the order form on the **ABC webpage** found by plan. Write decision guides and the number you need on the form and fax or mail it to us.

- **Local Gov:** You may have already mentioned this, but have the Decision Guides been mailed to members yet?
  - **Answer:** Yes, they have dropped in the mail.

- **Local Gov:** If a new hire's insurance begins after October, but before Jan. 1 would we have the employee fill out a 2017 and 2018 enrollment form?
  - **Answer:** It depends on when the employee is hired as a new hire. You have a couple of options. Employees can use eForms or ESS for 2017 benefits and once this is finalized, we will create an Annual Enrollment (AE) event and the employee can get online and enroll in ESS, or you can complete the eForms for 2018 coverage. If they are hired during the last week of enrollment, you will complete the 2017 enrollment via eForms and you can attach the 2018 AE form and BA will key that for you.

- **Local Gov:** If the employee's selection for 2017 will not change in 2018, employee doesn't need to do anything, correct?
  - **Answer:** Correct.

- **Local Gov:** I had an employee ask me about her dental. Last year she stayed with Delta Dental on her own. Do you know if Delta Dental will send out anything? She has not received anything from them about 2018?
  - **Answer:** We don't as Delta Dental is not our vendor and we don't have any information. She could reach out to their call center.

- **Local Gov:** I know we are switching to Davis Vision and some people are asking what to do if their providers will not participate?
  - **Answer:** They should call Davis Vision and ask them about participating providers. Members can also nominate a provider by filling out the form online. Please visit http://www.davisvision.com/stateofTN and click on "Find a Provider" and then "New provider information."

- **Local Gov:** I have an employee thinking of retiring. He will be 62 in Oct. How does health insurance work for him?
  - **Answer:** As each situation is different for retirees, we recommend that the retiree call the service center and press 2 to talk with someone directly.

- **Local Gov:** What is the best way to explain the pros and cons of CDHP/HSA and the Premier or Standard PPO? Is there anyone available that would come out to offices to explain to us?
  - **Answer:** We don't have the staff to come out to offices to go over the benefits, but the Decision Guide and the new videos help explain the differences between the plans. There is also the AEP PowerPoint found on the ABC webpage (by plan type) that you can use to walk employees through their benefits.

- **Local Gov:** Don't know if the Administration prints the provider list or not, but a doctor was listed on the Cigna Local Access Plan (LocalPlus). I called Cigna and the doctor's office and he is not in the network. That was yesterday.
  - **Answer:** The provider lists are created by Cigna, and the lists for 2018 have just been posted on the **ParTNers for Health website on the Carrier Information** page. As a reminder, the best way for members to determine if their provider will be in-network for **2018** is to call the carrier directly.

- **Local Gov:** Does using out-of-network for Davis Vision mean you are paying for the vision service yourself? Although you're paying a monthly premium for Davis Vision?
  - **Answer:** You will receive some benefits, but you will pay out of network rates. You will pay some costs for services for in-network as well. There are out out-of-network benefits. You pay the premium and if you go to an out-of-network provider you can submit a claim for the expense and Davis Vision will pay the out-of-network benefits, but the benefits are lower. Information is found in the Davis Vision handbook, on the **BA website under publications**, or you can go to the microsite: **davisvision.com/stateofTN**

- **Local Gov:** I read somewhere that when a new employee enrolls through ESS for 2017 coverage, he or she has to wait until the next day before enrolling in 2018 coverage. Did I read that correctly? I try to sit with my employees and help them, but it is hard to get them in to see me ONCE...to try to get them to come back the following day will be really hard. Can't we do it all at the same time?
  - **Answer:** That is correct. They will complete this year's event, and then it will be the next day before the event for next year will open. That is a system process as we have to process that enrollment. We don't have the capability to change this. One suggestion is to have them fill out a paper enrollment for 2018 benefits and then you can go in and complete an eForm for their 2018 benefits.

- **Local Gov:** Do you terminate an employee from insurance through Edison?

        - **Answer**: If you are trying to term their job record then yes, in Edison. If you are trying to waive coverage because they have coverage someplace else, then you need to send a form and proof of insurance for us to key into the system.

- **Local Gov:** One of our local dentists said that MetLife is not in network for them, but cleanings are covered there at 100% using MetLife.
    - **Answer:** The coverage on cleanings must be through some other type of arrangement with MetLife. The dentist has to be in our network with MetLife in order for our plan benefits to be paid.

- **Local Gov:** If I have a new employee who does not want any insurance, can I send in a paper form?
    - **Answer:** No, if you have a new employee that is waiving coverage then you do so in the eForm.

- **Local Gov:** Is there a list that shows when we should and should not use the paper form?
    - **Answer:** No, there isn't a list, but that is a good suggestion. All new hires and rehires should be completed through eHire and eBenefits and all SQE's through a paper form.

- **Local Gov:** An employee has quit and I need to terminate his coverage. What do I do?
    - **Answer:** You would term the employee in Edison.

- **Local Gov:** If an employee has a dependent that will be going on Medicare next year, is on TCRS, but their previous employer did not participate in the state insurance, can that person get the supplemental state insurance?
    - **Answer:** Retirees are eligible for our Med Supp (MS) if they are receiving a monthly TCRS pension benefit under their own service and they are enrolled in Medicare. Retirees have to be covered on our supplement to add an eligible dependent.

- **Local Gov:** The training on Sept. 28, does it need to be attended?
    - **Answer:** If you are new ABC, then you need to attend.

- **Local Gov:** Who can I contact to get assistance with running a report to see names of all employees listed under my agency? I believe may have to clean up my list because I've noticed that there are terminated employees that I missed that may still be listed as active.
    - **Answer:** It would be helpful for you to attend the workshop on September 21 about queries to run during Annual Enrollment. You can also run the TN_BA302_PERSON_AND_JOB query. That will show you all the Personal and job information for all the active employees in your agency. We have a complete list of queries available on the **ABC webpage** under **Training**, called **Edison Query List**.

- **Local Gov:** If we are on the EyeMed Expanded plan, we will be on Davis Expanded plan unless we choose to change? Is this correct?
    - **Answer:** Yes, members currently enrolled in vision coverage who do not make a change will automatically be enrolled in Davis Vision as of Jan. 1, 2018, in the same benefit plan (Basic or Expanded) in which they are currently enrolled.

Combined ABC Conference Call Notes
Higher Ed, Local Ed, Central State and Local Gov
September 26, 2017

Materials and Communications

- **Annual Enrollment Updates:**
  - **Annual Enrollment Dates:** Annual enrollment starts next week!
    - **State/Higher Ed:** October 2 through October 13, ending at 4:30 p.m. Central
    - **Local Ed/Local Gov:** October 2 through October 27, ending at 4:30 p.m. Central
    - **Retirees:** October 2 through October 27, ending at 4:30 p.m. Central

  - **Employee Informational Benefits Webinars:** As a reminder, we will hold employee benefits webinars by plan type so members can learn more about their benefits.
    - Registration information is **found on the ParTNers for Health website**. A flier you can share with your employees was sent to ABCs and is also found on the ParTNers website.

- **State: Nashville - Flu Shot Clinics:** For those in the downtown Nashville and Metro Center areas, we will have flu shot clinics in October. We sent out a flier to the downtown area ABCs on Monday. Here are the dates, times and locations:

Building	Date	Time	Location
Andrew Jackson 500 Deaderick St.	Friday, October 6	9 a.m. - 3 p.m.	Hearing Room, room 201
Davy Crockett 500 James Robertson Pkwy.	Friday, October 13	9 a.m. - 3 p.m.	Conference Room 1C
WRS Tennessee Tower 312 Rosa L. Parks Ave.	Friday, October 20	9 a.m. - 3 p.m.	Tennessee Room #2
MetroCenter - Labor & Workforce Development 220 French Landing	Friday, October 27	9 a.m - 11 a.m.	Volunteer Room
MetroCenter – TennCare 310 Great Circle	Friday, October 27	1 p.m. - 3 p.m.	Darin J. Gordon Room 4EA

COMMUNICATIONS QUESTIONS

- **Local Ed:** When will the 2018 Enrollment Change Application be available?
  - **Answer:** It is available on the **BA website under Forms** and also **on the ABC webpage under Forms**.

Benefits

- **Enrolling in Flexible Spending Accounts**
  - **Higher Ed:** As a reminder, all higher education employees (at the University of Tennessee system schools, the Tennessee Board of Regents System office, and at any TBR college or university) will enroll in their flex benefits on the PayFlex portal as they have done for the past few years.
    - Please remember that employees cannot enroll in the healthcare FSA if they choose to enroll in a CDHP. However, they *are* eligible for the limited purpose FSA for

vision and dental expenses only. Enrollment for the FSA, L-FSA, and DC-FSA is not automatic; you must re-enroll each year if you want to stay in flex.

- **State:** As a reminder, during our annual enrollment period State employees will utilize Edison employee self-service system complete their enrollments for any of the flex products (FSA, L-FSA, or DC-FSA) for 2018 and we (the State) will send those later this fall on an enrollment file to PayFlex.
  - Please remember that employees cannot enroll in the healthcare FSA if they choose to enroll in a CDHP. However, they ***are*** eligible for the limited purpose FSA for vision and dental expense only. Enrollment for the FSA, L-FSA, and DC-FSA is not automatic; you must re-enroll each year if you want to stay in flex. The only exception to this is the parking and transit flex benefits for state employees; enrollment in that option continues until an employee decides to dis-enroll.

Operations

- **Operations Updates:**
  - **Retirement:**
    - Reminder that retirement cannot accept applications via Zendesk. But you can upload, fax or mail the applications.

    - Employees transitioning from active to retirement coverage on or prior to 1/1/18 will need to submit the Retiree Annual Enrollment application to elect changes.

- **Upcoming ABC Training**
  - **New ABC Training (this training has been completed)**
    - September 27, 9-11 a.m. Central Time - Local Education Session 1
    - September 27, 1-3 p.m. Central Time - State/Higher Education Session 1
    - September 28, 9-11 a.m. Central Time - Local Government Session 1
    - September 28, 1-3 p.m. Central Time – All Session 2

  To register for any training, please follow these instructions:

  1. Log into Edison.
  2. Navigate to ELM Module>Select Learning Home>Find Learning>Enter ABC in the “Search Box” field> press the enter key or the arrows button.
  3. Search your results.
  4. Click the “Enroll” button to the right of the training you wish to attend.
  5. Click the “Submit Enrollment” button to the lower left.
  6. Once you have enrolled, you will see a message under your name at the top of the page. (You have successfully enrolled in the ABC training you select)
  7. You will receive an email shortly after enrolling providing your current email is listed in Edison.

  - **Reminder:** The slides for **Queries to Run During Annual Enrollment** will be **posted on the ABC webpage** by Monday, Oct. 1 and are located in Zendesk under the Annual Enrollment link.

  - **Benefits Administration has added this training:**
    - **ABC Workshop:**
      - **ABC eForms Process**
      - Thursday, October 5, 1-2 PM
      - Thursday, October 12, 1-2 PM

Here is login information for Oct. 5:
Link for ABC Workshop:
Topic: ABC – Eforms Process (AE)
Host: Holly Girgies

Date: Thursday, October 5th, 2017
Time: 1:00 pm, Central Daylight Time (Chicago, GMT-05:00)

Session number: 648 919 365
Session password: Workshop

To join the training session
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1. Go to https://tngov.webex.com/tngov/k2/j.php?MTID=tb202fecfd9963f6253eecc09546102e7
2. Enter your name and email address.
3. Enter the session password: Workshop.
4. Click "Join Now".
5. Follow the instructions that appear on your screen.

DISABILITY QUESTIONS (Higher Ed and State)

- **Higher Ed:** I have a question about Short Term Disability. Since there are no pre-existing conditions, if an employee enrolls during Annual Enrollment, what happens if the employee is currently on an active disability and they sign up for STD and then try to file a claim effective Jan 1, 2018?
  - **Answer:** The disability insurance program does not begin until 1/1/18. If the employee is diagnosed as disabled prior to 1/1/18 and not actively at work on the first work day of 2018, coverage would not be in force and would not cover this specific disability incident which began prior to 1/1/2018.

- **State:** How does disability work with separations and a person who possibly will have to be relieved due to the good of the service? Does this have any repercussions on the person's disability benefit?
  - **Answer:** If the determination of when the person became disabled in order to be approved or denied for benefits determines that the member was disabled while the coverage was in force and prior to separation of employment, the claim will continue until the maximum benefits are paid or the member no longer meets the definition of being disabled. The member's disability insurance coverage for future disabilities will end on the day after the employee's separation of employment.

OPERATIONS QUESTIONS

- **Higher Ed:** If an employee is not computer literate, can they fill out a 2018 Enrollment Change App with their changes and fax it in, instead of going to Edison to make their changes?
  - **Answer:** No, but they can complete the form and then you can use eForms and enter the enrollment for them this way. We will not accept a faxed enrollment form for annual enrollment.

- **Higher Ed:** If the employee can come in and sit with me and we complete the enrollment in eHire, am I logged as that person or am I logged in as me with a new hire?
  - **Answer:** You need to be logged in with your information in order for you to process the enrollment through a benefit eForm. You cannot use his or her Edison ID as this would be a security violation. You can also assist the employee with enrolling through self-service, as long as the employee is the one using the computer.

- **Local Ed:** When will passwords be sent to ABCs?
  - **Answer:** We no longer send password letters. We have improved the process and employees can set up and reset their passwords in Edison. We have new "how to videos" and we have **posted these on the ParTNers for Health YouTube page**.

- **Local Ed:** We will no longer be offering the state dental plan for 2018. Will my employees need to go in and drop coverage during open enrollment?
  - **Answer:** If your agency notified us, then BA will take them off of coverage

- **Local Ed:** If someone is on the No Promise, do they need to make a decision?
  - **Answer:** No, if they don't want to make any changes they will automatically move to the Premier PPO.

- **Local Ed:** If I have an employee who does not accept benefits and the employee signs as a refusal, do I enter them in Edison?
  - **Answer:** Yes, we would like for you to enter them in Edison. When you run your PPACA reports, it will show you that you offered the employee insurance and the employee waived the coverage. This is for your records in case you are audited by the IRS.

- **Local Ed:** When do I run the PPACA reports?
  - **Answer:** You can run them anytime. Some agencies run them more often than others. BA will run them right before we complete our 1095s in January for state employees.

- **Local Ed:** I have an employee whose husband is going to be 65 in June and he will go on Medicare. Will he automatically go off of her insurance?
  - **Answer:** If your employee is on active coverage, her spouse will not lose eligibility on the active group health plan and will not be removed. If she wishes that he be removed from coverage, she will have to request to do so by filling out the cancel request form. She can submit an insurance cancel requests form with proof of newly acquired coverage. This must be submitted within 60 days of eligibility.

- **Local Ed:** I am a new ABC and I am not familiar with 1095s?
  - **Answer:** We will have a trainer get back to you.

- **Local Ed:** If someone was hired 8/3 with a 9/1 eff date, will the employee have received a 2018 Decision Guide?
  - **Answer:** No, we pulled the mailing list on 7/31 so the employee would not have received a guide in the mail.

- **Local Ed:** How long do you have to be enrolled in active coverage in order to qualify for retiree coverage?

    - **Answer:** The continuous coverage immediately preceding termination of coverage is just one of the criteria you have to meet. A retiree with at least 10 years of service must have at least three years of continuous coverage before terming employment. If the employee has 20 years of service, then they only have to be continuously covered for one year. This information including eligibility criteria that must be met is available in the Guide to Continuing Insurance at Retirement, which you can **find on the BA website under For Retirement**. If you have an employee interested in coverage at retirement, they need to call our service center.

- **Local Gov:** Can other retirement related questions be submitted via Zendesk?
    - **Answer:** Yes.

- **Local Gov:** I'd like to reconfirm that Vanderbilt will be in the BCBS network for 2018?
    - **Answer:** Yes.

- **Local Gov:** If a person is not making changes do they need to do anything?
    - **Answer:** No, members don't need to do anything if they don't have any changes. If they are in the Partnership PPO or No Partnership PPO, they will automatically be transferred to the Premier PPO. If they are enrolled in vision coverage and don't make a change, they will automatically be enrolled in Davis Vision in the same plan (Basic or Expanded) they are currently enrolled.

- **Local Gov:** Please remind how to get a decision guide.
    - **Answer:** We have a PDF of the guide **on the ParTNers for Health website under Enrollment Material.** You can also pre-order guides for your new hires by completing the order form found by plan type of the ABC webpage. Write 2018 Decision Guides and the quantity on the form.

- **Local Gov:** It is my understanding that any changes to any of our employees coverage should be done by the ABC in Edison. Since this is my first annual enrollment period keying changes, should we have them complete a form so that we have record of their changes in the event something should happen?
    - **Answer:** Yes, you should do that. You won't have submit the form as we don't need the signature for Partnership Promise, but we would encourage you to get a form so you have a record.

- **Local Gov:** Will those currently enrolled in vision insurance be auto enrolled into Davis Vision?
    - **Answer:** Yes.

- **Local Gov:** What is the reason that we do not need to do the WBA, health screening & coaching next year? And why have the prices gone up 5-6%? In case an employee asks me.
    - **Answer:** We are eliminating the Partnership Promise next year and wellness requirements will not be tied to any health plan. Local government members and enrolled spouses will have access to disease management and have access to the Diabetes Prevention Program. There is more information in the Decision Guide and **on the ParTNers for Health website, under 2018 Wellness Program**. We hope to have more information to share early next year.
    - As for premiums, basically the reason they have gone up is that they are based on claims. The premiums reflect the members' expenses.

- **Local Gov:** For agencies with less than 100 employees, are we still required to fax our enrollments forms in?
  - **Answer:** No, agencies are not allowed to fax in forms for annual enrollment. All agencies will be required to use eForms or members can enroll in ESS in Edison. In the beginning of 2017, we made this announcement and offered training. We will not accept faxed forms for annual enrollment. To help you, **on the ABC webpage under Training**, there is a slide deck about eForms. We will also be holding a couple webinars in October for anyone who needs a refresher. The schedule will be shared on the ABC calls next week.

- **Local Gov:** So, if we are making no changes to our plan, there is nothing we have to do?
  - **Answer:** That is correct. But we do encourage all members to review their current coverage to make sure it best suits their needs.

- **Local Gov:** Please remind the process for a new hire whose coverage will begin 12/1 versus a new hire whose coverage will begin 1/1?
  - **Answer:** For a person whose new hire coverage will begin 12/1/2017, the agency will hire the employee using the e-hire form in Edison and enroll the member into benefits using the e-benefit form. Since this is after Annual Enrollment, the agency will attach the 2018 enrollment form as an upload so that we can key the 2018 coverage.

- **Local Gov:** If we have an employee who has not met his Partnership Promise requirements, will they be moved to the Standard PPO even though there are no more Partnership requirements?
  - **Answer:** No. Partnership and No Partnership PPO members will be automatically moved to the Premier PPO unless they select a different plan option during annual enrollment.

- **Local Gov:** Are ABCs able to submit open enrollment change forms for employees? Especially if they are experiencing technical difficulties?
  - **Answer:** No, employees can submit an enrollment form to the ABC and you can enter it into eForms completing the enrollment in the eForms process.

- **Local Gov:** I have an employee who is getting married this weekend and wants to add her husband to her health insurance after that. Can I add him by eForms or do I need to fax in an enrollment form?
  - **Answer:** You will have to fax that form into us. We will also need a copy of the marriage certificate.

- **Local Gov:** Do they have to sign those forms? We have a new Police Officer and he has gone to the Police Academy and will not be back until December. He refused coverage but is not here to sign the form.
  - **Answer:** They don't have to sign for the form, but I would make a note in case you get audited. This form is really for your records with the IRS in case of an audit. You may want to consider mailing or emailing him a letter that states that his coverage was waived per his request, stating the reason why he wasn't able to sign the enrollment form. That way you will have documentation if the IRS requests it.

- **Local Gov:** Remind everyone about employees hired after 9-1-2017, and that you have to enter the new hire twice into Edison?

- **Answer:** New hires entered into Edison after 9/1/17 will need to be entered into Edison as soon as possible so that the ABC can key their 2017 benefits and 24 hours later we will open up an Annual Enrollment Event in Edison. Once the Annual Enrollment Event has opened 10/2/2017 the employee can either make their own elections in ESS or the ABC can complete the OE e-benefit form in Edison. If an employee is hired during the last week of AE period the ABC will have to submit a paper enrollment form for 2018 at the same time that they submit the e-benefit form for the new hire elections. They can submit it via upload to the actual form.
  - **BA has scheduled two training sessions to go over the Annual Enrollment eForms process. Login information for the Oct. 5 call is provided below:**
    - Thursday, October 5, 1-2 PM
    - Thursday, October 12, 1-2 PM

    Link for ABC Workshop:
    Topic: ABC – Eforms Process (AE)
    Host: Holly Girgies

    Date: Thursday, October 5th, 2017
    Time: 1:00 pm, Central Daylight Time (Chicago, GMT-05:00)

    Session number: 648 919 365
    Session password: Workshop

    To join the training session
    ----
    1. Go to **https://tngov.webex.com/tngov/k2/j.php?MTID=tb202fecfd9963f6253eecc09546102e7**
    2. Enter your name and email address.
    3. Enter the session password: Workshop.
    4. Click "Join Now".
    5. Follow the instructions that appear on your screen.

- **Local Gov:** Does Optum Health have a website or portal where employees can find behavioral health providers?
  - **Answer:** Yes, you can **go to here4tn.com**.

- **Local Gov:** Why do we have to enter new hires twice after 9-01-17?? I have 3 NH + 4 more coming.
  - **Answer:** You don't have to enter them twice, but you have to enter their benefits for the remainder for 2017, and then if they want to make changes for 2018, you would need to have them make benefits selections for 2018 either in ESS in Edison or by completing a 2018 form that you enter into eForms.

- **Local Gov:** Why are they sending new health insurance cards to everyone? Is it so that they can change the name from Partnership to Premier?
  - **Answer:** Yes, and there are some new phone numbers on the back of the cards.

- **Local Gov:** For Local Gov, only those enrolled in a health plan can access Optum Health, right?
  - **Answer:** Yes, for local government and local education, that is correct.

- **Local Gov:** I have an employee who was covered under his spouse's coverage. She has retired and gone on Medicare, so he no longer has coverage. I have had him fill out an Enrollment Change form and a special qualifying event (SQE) form. I have the letter from his wife's employer for backup documentation. He was covered at one time and is in Edison as "waived." Can I upload the forms and backup into his current Edison record, or do I have to fax everything?
  - **Answer:** That is a SQE and you can upload the forms in Edison, fax them, or submit a Zendesk ticket with the forms.

- **Follow up question: Local Gov:** Do I need to do anything in Edison for my employee who is showing as waived and is enrolling as an SQE. Do I need to go into Edison and un-waive him or wait until his SQE is approved and his annual enrollment event is opened up? I thought I could upload the forms?
  - **Answer:** If they are enrolling as a SQE, then you will need to send in the forms (can fax, upload or submit a Zendesk form with them). You won't need to do anything after that.

- **Local Gov:** On the entering twice, I received my information from an email from BA that I received. You would enroll for 2017 period and 24 hours after the new hire enrollment is entered, you will be able to go in and complete benefits for the 2018. I am confused?
  - **Answer:** That 24 hour period is giving Edison 24 hours to populate in the system. You will enroll for 2017 benefits and that 24 hour time period will give Edison time to populate the enrollment so the employee can then make 2018 benefits selections if they have any changes to make. If they do not have changes for 2018, no additional action is needed.

- **Local Gov:** How do you change a person's name after they are married? Do you use a change form?
  - **Answer:** Yes, **use the Corrections and Clarifications form.**

- **Local Gov:** Will there be more training available on eForms?
  - **Answer:** We have scheduled a couple of eForm training sessions during the month of October. That information will be shared on the ABC calls next week.

- **Local Gov:** Are updated (2018) enrollment change forms available on the website?
  - **Answer:** Yes, they are **on the BA website under Forms**.

Combined ABC Conference Call Notes
Higher Ed, Local Ed, Central State and Local Gov
October 3, 2017

Materials and Communications

- **Annual Enrollment Updates:**
  - **Annual Enrollment Dates:** Annual enrollment has started! The dates are listed below.
    - **State/Higher Ed:** Now through October 13, ending at 4:30 p.m. Central
    - **Local Ed/Local Gov:** Now through October 27, ending at 4:30 p.m. Central
    - **Retirees:** Now through October 27, ending at 4:30 p.m. Central

  - **New ESS Videos:** We have posted four new ESS videos on our YouTube page. These videos can help employees with enrolling and accessing ESS in Edison. We have posted links to these videos on the **ParTNers for Health homepage**, and the BA website on the **QuickLinks page** and on the **Annual Enrollment webpage**. Here is a description and link to each video:
    - You'll need to log in to Edison to enroll in your benefits. **Click here** to watch a step-by-step guide for selecting and enrolling in your benefits.
    - If you've never logged in to Edison or you're not sure, **click here** to watch a brief video on how to log in for the first time.
    - Did you forget your Edison password? **Click here** for instructions on how to reset it.
    - If you don't know your Edison Access ID, **click here** to see how to retrieve it.

  - **Employee Informational Benefits Webinars:** As a reminder, employee webinars are starting. Members do not have to register, and they can join following the **registration information found on the ParTNers for Health website.**
    - There is a flier on the website you can share with your employees.
    - **Note: Members may need to clear their cache to participate. Space is limited.**

COMMUNICATION QUESTIONS

- **Higher Ed:** When will the 2018 Member Handbooks-Health be on the ABC website?
  - **Answer:** We will try to have them approved and ready to post on the ABC webpage by mid-November. They will be mailed by BlueCross BlueShield and Cigna to those ABCs who have contacted the vendors and requested them in mid-December. ABCs can contact the BCBS and Cigna (contact information is on the **Vendor Contact list)** to order handbooks.
  - **Vendors will not mail the 2018 member handbooks this year, but members will receive a postcard.** They can mail this postcard back in and the vendor will mail a handbook to the employee, but only upon request.
  - If you have employees asking for BCBS and Cigna Member Handbooks, please remind them, that handbooks are not provided until annual enrollment has ended. Encourage employees to use their Decision Guides for 2018 plan elections. The Decision Guide includes all the information needed to make a decision and includes plan and network options as well as costs. The benefit grids in the BCBS and Cigna Member Handbooks will be consistent with those already provided in the Decision Guides. Covered services will be consistent across all plan options with the understanding that BCBS and Cigna may have different medical policies for specific services or procedures. The 2018 Member Handbook information about covered and excluded services will generally be the same with the exceptions noted below. If employees anticipate needing specific services or

procedures not currently mentioned in the 2017 Member Handbooks, they should contact the medical carriers (BCBS or Cigna) to ask about coverage.

- The following coverage changes approved by the Insurance Committees for 2018 will apply to all medical plan selections, and so, should not impact a member's 2018 medical plan choice:
  (1) Bariatric Surgery Criteria – Bariatric surgery coverage will continue in 2018 however, the plan-specific bariatric surgery criteria will be eliminated; beginning 1/1/2018, as is the case with all other surgical procedures, coverage will be subject to either the BCBST or Cigna criteria, depending on a member's chosen carrier.
  (2) Therapies (speech therapy, physical therapy, and occupational therapy) – current coverage is for rehabilitation therapy. In 2018, coverage for habilitative therapy will be added; subject to medical necessity as determined by the claims administrators, members will have coverage for both habilitative and rehabilitative therapies without limit (the 90-day limit will be removed); habilitation services help a person keep, learn or improve skills and functioning for daily living, for example, therapy for a child who isn't walking or talking at the expected age; rehabilitation services help a person keep, get back or improve skills and functioning for daily living that have been lost or impaired because a person was sick, hurt or disabled.

- **Local Gov:** Employee Webinars...is the same information in each webinar, or does each webinar go over different information?
  - **Answer:** It is the same information during each webinar.

- **Local Gov:** If employees are not able to view the webinars scheduled, will they be able to view them at a later date?
  - **Answer:** We have recorded a webinar and posted it to our **YouTube page** for employees to view when it is convenient for them. The video is called **Local Education and Local Government Annual Enrollment Webinar.**

Benefits

- **Davis Vision:** Jay Storey with Davis Vision, our new vision vendor, joined us and gave an overview of Davis Vision benefit.

VISION QUESTIONS

- **Local Ed:** Do you cover eye exams if a member has had cataracts?
  - **Answer:** Yes, the provider would have to be a contracted provider and it would have to be a routine eye exam in order to be covered.

- **Local Gov:** When an employee goes to a hearing doctor, would the employee give them a vision card? Is there a provider list for in-network on the hearing benefit?
  - **Answer:** The employee will need to contact EPIC. Based upon where you live, they can tell you what providers are available within your area. All you need to do is tell them you are a Davis Vision member. You can find information for EPIC on the **Davis Vision website under "Access Benefits and Forms"**.

- **State:** If we have sent in the information to try to recruit Davis Vision will we hear the decision on that?
  - **Answer:** No, the network recruiting team will not be able to notify you directly of your provider's decision on joining the Davis Vision network. Our online provider

listing is updated regularly, so check the online directory for the most current listing.

- **BlueCross BlueShield:** Rhonda Bynum and Amy Jordan with BlueCross BlueShield joined us to talk about Network S and to answer your questions.

  BLUECROSS BLUESHIELD QUESTIONS

  - **Higher Ed:** Would you please let us know if West Clinic will be in this network?
    - **Answer:** West Clinic, aka Methodist Diagnostic, is attached to Methodist and all Methodists facilities are terminating as of 12/31. We have updated the **BCBST Network facility list** found on the ParTNers for Health website and it includes this information.

  - **Higher Ed:** In regard to identity protection, can children on the coverage who are over the age of 18 participate?
    - **Answer:** We have attached a flier about the BCBS ProtectMyID program. ProtectMyID provides credit monitoring, fraud protection and fraud resolution support to adults with eligible BlueCross medical coverage. Each covered member age 18 or older will need to enroll separately. Therefore, all members age 18+ would need to enroll themselves.

  - **Higher Ed:** I called the number to sign up my kids for the free identity protection and I was told that I could not sign them up, they have to call themselves?
    - **Answer:** Members age 18+ will need to enroll themselves**.**

  - **Local Ed:** When are the provider directories going to be mailed to the LEA?
    - **Answer:** You can order provider directories right now by contacting Amy Jordan at amy_jordan@bcbst.com. As a reminder, member handbooks will not be mailed this year, but members will receive a postcard with an offer to have one sent to them. ABCs can order handbooks to have on hand.

  - **Local Ed:** When can we order BCBST directories for our new employees for 2018?
    - **Answer:** You can order these now. Send the order to Amy Jordan at amy_jordan@bcbst.com.

  - **Local Ed:** Are we able to get fliers on the different programs offered by BCBST?
    - **Answer:** Yes, all of the fliers are posted on the BCBST website. If you would like them mailed to you, you can email amy_jordan@bcbst.com.

  - **Local Gov:** Are Centennial Hospital and affiliates in Network S in Middle TN?
    - **Answer:** No. They are in the Cigna LocalPlus and OAP networks.

  - **Local Gov:** Does BlueCross BlueShield still have a phone line to call a nurse? They (a nurse line) helped me when my husband was ill and said we should call 911. It turned out that he was having a stroke.
    - **Answer:** No, for the state, BCBST does not have the nurse line available.

- **Cigna:** Sharon Tansil with Cigna joined us to talk about Cigna's networks and other important information for your members.

  CIGNA QUESTIONS (Medical and Prepaid Dental)

- **Higher Ed:** What about urgent care and if you are taken to the closest facility which could be out of network? Do they still stabilize and then transfer you?
  - **Answer:** Urgent care and emergent care are two different things. If you seek care at the nearest emergency room, this will be processed at the in-network benefit. This is for something like you feel like your life is in danger (chest pain, can't breathe). For urgent care (strep throat, sprains, illness) Cigna has a large number of in-network urgent care facilities. You can go to Cigna.com and search for facilities or call Cigna's 24/7 customer service center and they can help find an in-network urgent care facility. Care received at an out-of-network urgent care facility will be processed at the out-of-network benefit.

- **Higher Ed:** Can you call with the prepaid dental selection rather than mailing in?
  - **Answer:** Yes, you can call the customer service center and speak to a customer service rep and he or she will make dental provider changes. You can also make this selection online. You can call or go online or you can mail the postcard in.

- **Higher Ed:** Are the copays on the schedule consistent for all participating dentists (Cigna prepaid dental plan)?
  - **Answer:** Yes, the patient charge schedule does represent the copays that are applied for those particular services from all Cigna Prepaid providers. Incidentals or lab fees may apply. If you are having a crown, there could be several fees that could apply to that total service .It is recommended that you ask your dentist to itemize all the charges for a major procedure.

- **Local Ed:** I am located in Northwest Tennessee and have several employees who travel approximately 25 miles to Murray, KY to seek care. There has been a lot of confusion regarding the LocalPlus network. They are being told that they cannot access the Open Access Plus (OAP) and that the doctor is not in-network with Local Plus. Are you now saying that they can access the Open Access Network since it is technically out of state?
  - **Answer:** Members in LocalPlus (LP) can access OAP network provider in non-LP areas. For example, Kentucky does not have LP and therefore members need to use the broader OAP network when in KY. When members search online for a LP provider in KY, they will see a message indicating that they are not in a LP area – *"LocalPlus Customer: The location you're searching doesn't have LocalPlus network coverage; this plan is limited geographically."* Below that message, they will see an option to check a box if away from home and needing medical care. Even if members live just a short distance from KY, they need to check the away from home box. Once that is checked, the system will automatically search for OAP providers. Once the member follows these instructions, the provider(s) they are searching for will show as in-network if they are able to access those providers through the OAP network. You will tailor your search by physician and or Facility / hospital.

- **Local Ed:** My issue has been specifically with employees finding OBGYNs in the Cigna networks in our area. I see now that I've searched Open Access Plus that the issue is that the Women's Clinic is apparently not in either Cigna network. I will communicate this to my members.
  - **Answer:** If they are not in either LocalPlus or Open Access Plus, then they are considered out-of-network, but if you want to send the information in we can send to our recruitment network. You can send the facility information to benefits.info@tn.gov.

- **State:** If an employee uses the Telehealth benefit will the provider give the member an excuse for work and/or school?
  - **Answer:** Both Cigna and BCBS responded no.

WELLNESS PROGRAM QUESTIONS

- **Higher Ed:** Any word on cash rewards (for the wellness program)?
  - **Answer:** We don't have any other information yet other than the amount of the incentive is $150 for the head of contract and enrolled spouse each. On the exact activities and cash incentive amounts for each activity, we are still finalizing the details and won't have this information until after annual enrollment. The two, wellness program and annual enrollment, are not tied together. Members are not making a plan choice based on wellness or the Partnership Promise

- **State:** Our employees want to know how much the cash incentive is for the wellness program activities.
  - **Answer:** It will be $150 for HOC and if a dependent spouse is enrolled, they will get $150 as well, but all cash incentives will go into the employee's paycheck.

- **State:** When is the wellness incentive paid?
  - **Answer:** Once we get the contract finalized, we will have more information to share with you. The process will be the vendor will have to submit a file to us. The goal is the month after the employee completes the activity, the incentive will be paid.

- **State:** If employees participate in the cash incentive wellness activities, where do they send paperwork?
  - **Answer:** Once the contract is finalized, we will be sharing information with ABCs on all of the details. Wellness is not tied to annual enrollment.

- **State:** Will there be a biometric screening form to download for 2018?
  - **Answer:** Yes, but we won't have the details until early next year.

DISABILITY QUESTIONS

- **Higher Ed:** On the Short Term Disability Insurance plan, can you switch from the 14 to 30 day waiting period or vice versa without a health questionnaire?
  - **Answer:** On the Short Term Disability Insurance during annual enrollment next year, you can switch from the 14 to 30 without answering any health questions as this is lowering your benefit. If you wanted to go from 30 to 14 days, you would have to answer questions as this is improving your benefit.

- **Higher Ed:** On Short Term Disability, can employees enroll during a Special Qualifying Event (SQE)?
  - **Answer:** Yes, they can enroll in Short Term Disability Insurance due to a SQE, but they must show evidence of insurability and answer health questions. They will be considered a late applicant.

- **State:** Are there preexisting conditions or associated waiting periods for the Short Term or Long Term disability? For example: a current cancer patient enrolls.
  - **Answer:** During annual enrollment, all active employees are eligible for STD and LTD insurance. They can enroll in one or both and there will be no questions asked – this one and only time for current employees.

- For Short Term Disability, there are no pre-existing exclusions; however, the coverage will not start for an employee already out on disability until the employee returns to work.
- For Long Term Disability, there are pre-existing exclusions. If a person becomes disabled within the first 12 months of their coverage becoming effective, the plan will not cover a sickness or accidental injury for which that person received treatment, consultation or care, or took medications or were prescribed medications in the 3 months prior to their participation in the plan. After the first 12 months of coverage, the person has satisfied the pre-existing clause.

- **State:** With the long term disability, if the employee has completed treatment in 2017 and has follow-up visits into 2018 but no treatments - would that make him not qualify for the 12 months?
  - **Answer:** If a person becomes disabled within the first 12 months of their coverage becoming effective, the plan will not cover a sickness or accidental injury for which that person received treatment, consultation or care, or took medications or were prescribed medications in the 3 months prior to their participation in the plan. The issue is whether or not the person received treatment, consultation or care, or took medications or were prescribed medications in the three months prior to the person's effective date of coverage.

- **State:** Just want to make sure I understand correctly on the Short Term Disability. If an employee is pregnant and due at end of January 2018, but the baby comes early in December, would the employee be eligible for the benefit if they are already on the maternity leave as of 1/1/18?
  - **Answer:** No, since the delivery of the baby occurred prior to the member's effective date of coverage, there would be no disability insurance benefit available.

FSA QUESTIONS

- **State:** If an employee wants to enroll in a CDHP/HSA for 2018, but still has funds from their 2017 FSA, how does the rollover work and will the FSA amount be used before the HSA amount?
  - **Answer:** If you have a 2017 FSA and you choose to enroll in the CDHP/HSA for next year and you still have funds in your FSA, you need to spend down the funds to open the HSA. You cannot have a FSA and a HSA at the same time. If you do not, you can carryover $500 to next year, but you cannot start using your HSA until April 1 and any claims must be for 4/1 or later. The best way is to use up all of your FSA funds by Dec. 31 and not enroll in a medical FSA next year.

- **State:** If an employee has funds in his FSA and he wants to enroll in a CDHP, what does he need to do?
  - **Answer:** The employee would need to either use all of their FSA funds before the end of this year OR enroll in a Limited purpose FSA so the funds can carry over into that account.

- **The following scenarios apply to State and Higher Education employees flex benefits with PayFlex**
  - ***Are you currently enrolled in FSA or L-FSA, plan to stay in a PPO health insurance option for 2018 and plan to have $500 or less in your FSA or L-FSA to carry over into 2018?***

        - You must choose to re-enroll in the same kind of flex plan next year (enrollment does not continue from year to year) and in addition, you may not enroll in the CDHP. You will have to enroll in the Standard or Premier PPOs. Note, if you do not take action during open enrollment you will not automatically be re-enrolled in flex next year. State employees must elect flex coverage in **Edison**; Higher Education employees must elect flex coverage **on the PayFlex portal**. Any funds greater than $500 will not be carried over and will be forfeited.

    - ***Are you currently enrolled in FSA, plan to have $500 or less in your account on December 31st and want to enroll in the CDHP for 2018?***
        - You must choose to enroll in the CDHP and also elect to enroll in the Limited Purpose FSA for 2018. This will allow PayFlex the opportunity to move your current FSA funds into a new L-FSA (for vision and dental expenses only), in order to preserve your ability to enroll in the CDHP and open an HSA on January 1st.

Operations

- **Remember New Hires After 9/1/17:** New Hires entered into Edison AFTER 9/1/17 will need to elect benefits as soon as possible via ESS or ABC can enter benefits via eForms.
    - **Note: All agencies should be enrolling new employees via eForms or the employees should be enrolling themselves via ESS**
    - **Note: A step-by-step guide for the eForm process is found on the ABC website.**
        - Once the New Hire event has been processed it will close and that will trigger the AE event to open.
        - The employee will then be able to elect Annual Enrollment Benefits through ESS the following day or the ABC will be able to complete the AE Event via e-benefits forms.
        - If an employee is hired during the last week of the AE period or after the AE period, submit a paper enrollment form for 2018 changes.

- **Higher Ed/Local Ed/Local Gov: Upcoming ABC Training**
    - **ABC Workshops:** Two ABC Workshops on the Process for Annual Enrollment will be offered.
        - Thursday, October 5, 1-2 p.m. (this has already occurred)
        - Thursday, October 12, 1-2 p.m.
        - Here is the call-in information:

    - **ABC Workshop:**
        - **eForms Process for Annual Enrollment**
        - **October 12: 1 -2 p.m. Central time**

      Link for ABC Workshop:
      Topic: ABC – Eforms Process (AE)
      Host: Holly Girgies

      Date: Thursday, October 12, 2017
      Time: 1:00 pm, Central Daylight Time (Chicago, GMT-05:00)

      Session number: 640 280 284
      Session password: Workshop

      To join the training session
      ----

1. Go to
https://tngov.webex.com/tngov/k2/j.php?MTID=t2a27a8b38ea9e41cf69a0bf5558b47d0
2. Enter your name and email address.
3. Enter the session password: Workshop.
4. Click "Join Now".
5. Follow the instructions that appear on your screen.

OPERATIONS QUESTIONS

- **Higher Ed:** If I have a new hire on 11/01, whose benefits are effective 12/01, and that employee wants short-term disability, are you saying that after I ehire them, etc....I can't go back in later on e-benefits and pick up short-term disability for them? I have to complete a paper form?
  - **Answer:** Correct, because the annual enrollment (OE) will be closed and you won't have an OE event for them. You can upload the 2018 form or we will have to manually create the OE event.

- **Higher Ed:** Since the Liberty Financial Long Term Disability enrollment is online, will there be a report available to download with a list of employees enrolled in the plans and their monthly deductions for their plans?
  - **Answer:** April Preston with TBR responded: Those reports will come from Lincoln Financial and not from Edison as this is a higher education benefit not a state benefit.

- **Higher Ed:** Someone made issue that the Decision Guide did not specify Cigna OAP excluded Baptist, which is a big change since they are no longer in-network. What are your suggestions regarding a response?
  - **Answer:** The Decision Guides went to print before the Cigna OAP change about Baptist was available. As we have always relayed, providers can change at any time. Members need to call the carriers and ask them about 2018 providers when making their decisions. Note: The **online** Decision Guide does include information about Cigna OAP and that Baptist facilities will be out-of-network in 2018.

- **Higher Ed:** Will employees who are currently enrolled in a No Partnership Promise PPO plan be transferred to a Premier PPO for 2018?
  - **Answer:** Yes, that is correct. If they want to make a change they need to do this during annual enrollment.

- **Local Ed:** If we have members who have trouble making changes online, can we send in a paper change form for them?
  - **Answer:** No, you can submit either an eBenefit form or the employee can enroll in ESS in Edison.

- **Local Ed:** I have some employees requesting a letter of some sort that explains if they do not make any changes during open enrollment that they will have insurance next year. They are nervous about not doing anything.
  - **Answer:** No, we won't mail anything to the member if no actual change has occurred. We will mail a summary of benefits if the member makes a change or if we transferred them to the Premier PPO plan.

- **Local Ed:** I have a retiree who wants to search MetLife Dental providers, but when I use the link from the BA website, it wants me to log in. Is there a way to see providers for those who aren't already enrolled?

    - **Answer:** If a screen appears asking the employee to enter an account name, they need to type in “State of Tennessee”. This will bring up a screen and they can search at the bottom of the screen for providers by zip code. The screen requiring entry of “State of Tennessee” will not always appear as the system is referencing “cookies” to see if the person has visited the site previously.

- **Local Ed:** If you get new frames this year with EyeMed can you get new frames next year with Davis?
    - Answer: Yes, they can get new frames next year as the benefits are starting over with Davis Vision.

- **Local Ed:** Is there a flier/pdf other than what is in Decision Guide on how to enroll using ESS? I'm just not sure they will watch the videos.
    - **Answer:** No, we don’t have a flier, but the Decision Guide is available online (the member could print the ESS enrollment page) and we do recommend the new “How to enroll” video you can find on the **ParTNers for Health website.**

- **Local Ed:** Is the low-dose statin a new change for 2018?
    - **Answer:** It is a new benefit that will start Jan of 2018. These are the low-dose statin benefits that will start on 1/1/2018. For this group of people, there is zero cost for these meds. These are based on the US Preventive Services Task Force “A” and “B” recommendations. **Anyone younger than 40 will still pay their regular copayment or coinsurance, as will anyone taking a dose not listed here or any brand name statin.**
        - Men and women ages 40 through 75 years old
            - No quantity limit
            - No prior authorization
            - Low to moderate dose statins, generics only (no high dose or brand statins are included)
                - Atorvastatin 10 mg, 20 mg
                - Fluvastatin 20 mg, 40 mg
                - Fluvastatin ER 80 mg
                - Lovastatin 10 mg, 20 mg, 40 mg
                - Pravastatin 10 mg, 20 mg, 40 mg, 80 mg
                - Rosuvastatin 5 mg, 10 mg
                - Simvastatin 5 mg, 10 mg, 20 mg, 40 mg

- **State:** So if we had some new employees start yesterday, do they need to make the new hire selections within the next two weeks in order to also do an open enrollment event?
    - **Answer:** That is correct. And then within the next 24 hours after making their new hire selections, we will create an OE event for them.

- **State:** Even if they have not submitted all necessary dependent verification documents?
    - **Answer:** Yes, they can submit the dependent verification documents within 31 days. If the 31 days ends after annual enrollment, then you can submit a paper form with their selection.

- **State:** If a retiree wants to make a change, is a paper form the only way to do that?
    - **Answer:** Yes, if they are on retiree coverage then they must complete and fax or mail the form. They cannot email the form or enroll in ESS.

- **State:** If an employee is hired 12/1/17, can he still use ESS?
  - **Answer:** For new hire enrollment, yes, but not for annual enrollment.

- **State:** But it will not open (OE) after 24 hours if 2017 is not complete, correct?
  - **Answer:** Correct.

- **State:** Does orthodontics count toward the annual maximum?
  Answer: The orthodontics lifetime max is separate. Orthodontics is $1250 lifetime.
  Follow up question: State: Anything over this the employee would pay?
  Answer: Yes.

- **State:** Where can we find the max allowable charges for MetLife?
  - **Answer:** There is not a form or document with the maximum allowable charges, but you could call MetLife and ask for a pre-treatment estimate.

- **State:** How long will a new hire who is hired after annual enrollment (AE) closes do they have to send in an AE application?
  - **Answer:** The new hire has 31 days from the date of hire to submit both their new hire and AE elections.

- **State:** If an employee is only changing their health benefits, is this all we mark even if they have dental and vision or do we need to mark all they have?
  - **Answer:** For state employees hired after AE ends you can submit a paper enrollment form and you only have to mark the changes that they want for 2018.

- **State:** Why does an employee have to enroll twice?
  - **Answer:** If you have a new hire, he or she needs to select 2017 benefits, and if the new hire has changes for 2018, he or she needs to elect 2018 benefits. Here is the information presented earlier: New Hires entered into Edison AFTER 9/1/17 will need to elect benefits as soon as possible via ESS or ABC can enter benefits via eForms.
  - **Note: All agencies should be enrolling new employees via eForms or the employees should be enrolling themselves via ESS**
  - **Note: A step-by-step guide for the eForm process is found on the ABC website.**
  - Once the New Hire event has been processed it will close and that will trigger the AE event to open.
  - The employee will then be able to elect Annual Enrollment Benefits through ESS the following day or the ABC will be able to complete the AE Event via e-benefits forms.
  - If an employee is hired during the last week of the AE period or after the AE period, submit a paper enrollment form for 2018 changes.

- **State:** Just to clarify, new hires have 31 days to apply for new enrollment and for annual enrollment?
  - **Answer:** Yes, if they are hired after annual enrollment (AE) closes then we need both submissions within 31 days.

- **State:** I have an employee whose spouse has adopted her twins and changed their names as well. I have the new birth certificates but not the new social security cards. What forms and documents need to be provided for the update. The employee is wanting to make the change and not have an effect on Annual Enrollment changes.

    - **Answer:** You would need to submit the birth certificates. We don't require the SSN unless they are newborns.

- **Local Gov:** Will EPIC's number be listed in the Decision Guide?
    - **Answer:** No, it is not in the Decision Guide, but it is on the Davis Vision website. The Davis Vision presentation is found on the **ABC webpage**, and there is a slide with information about EPIC. Here is the phone number, 844.246.0544.

- **Local Gov:** I have an employee who said the annual physical sometimes does not cover what the doctor does when he takes in the physician screening form. He wants to know what are the normal things that a doctor checks during an annual physical. Is there any kind of list of these things?
    - **Answer:** Everything on the physician screening form is included as part of an annual physical. They usually check blood glucose, blood pressure, lipids, etc.

- **Local Gov:** For employees who do not have internet access, the ABC can enter their changes in eForms, right?
    - **Answer:** Yes, that is correct.

- **Local Gov:** If a new hire (after 9/1) doesn't want to make changes for 2018, I assume they do not have to do anything just the same as other employees. Is that correct?
    - **Answer** That is correct.

- **Local Gov:** If we do eForms during annual enrollment, do we initiate a new hire form or do we go directly to the eForms benefits tab?
    - **Answer:** You will not create an e-hire form if you are making AE elections for an existing employee. You will only need to create an e-benefit form. The AE event is already open and the coverage will show a start date of 1/1/18 in the e-benefit form that you create.

- **Local Gov:** When will the 2018 Employee Insurance Checklist - Local Government Plan be available on our ABC website? I can only find the 2017 list.
    - **Answer:** We will have the 2018 version ready and posted by November 15, 2017. With your new hires for 2017 benefits, you can continue to use the current list.

- **Local Gov:** Please clarify; I have a new employee who started today. We have a 60 days waiting period, so we would sign the employee up 12/1/17 for effective date of 1/1/18? Would we use the 2018 information? Or 2017?
    - **Answer:** You will use the 2018 enrollment choices.

- **Local Gov:** Which class would you take to learn how to make changes which employees make during open enrollment using eForms? The class that I took just covered adding a new hire and not how to make changes during open enrollment.
    - **Answer:** The ABC workshops that we are offering in the next two weeks (10/5 and 10/12) will go over how to use eForms for open enrollment.

- **Local Gov:** I want to make sure I am doing this right. To make changes for Open enrollment, I use the e-hire form?
    - **Answer:** You will use an e-benefit form. A hire form is only used to hire a new employee into Edison.

- **Local Gov:** If no changes are being made, nothing needs to be submitted?

- **Answer:** That is correct.

- **Local Gov:** A lot of our employees have not received the Decision Guide. I ordered some for new employees but have had to use them for employees. Can I order more?
  - **Answer:** Yes, send in an email to benefits.info@tn.gov with the number you need and your shipping information and we will send you more guides. A PDF of the guide is also on the **ParTNers for Health website under Enrollment Materials**.

- **Local Gov:** Standard PPO premiums in my book are going down? Is the Premier PPO open to everyone? What do they have to do to change from Standard to Premier?
  - **Answer:** Yes, the premiums for the Standard PPO are going down and the Premier PPO is open to everyone. The ABC can enroll the member using the OE benefit eForm. So if they are not a new hire, when you go to click the eForm, that will be the only form that is available to them.

- **Local Gov**: The ABC workshop on Oct 5, do we need to sign up?
  - **Answer:** Yes, you will need to register in ELM.

Combined ABC Conference Call Notes
Higher Ed, Local Ed, State and Local Gov
October 10, 2017

Materials and Communications

- **Annual Enrollment Updates**
  - **Annual Enrollment Dates:**
    - **State/Higher Ed:** **Annual enrollment ends Friday, Oct 13 at 4:30 p.m. Central.**
    - **Local Ed/Local Gov:** Annual enrollment continues through Oct. 27.
    - **Retirees:** Annual enrollment continues through Oct. 27.

  - **Pre-Recorded Employee Benefits Webinars:** In addition to the live webinars we are holding for employees, we have pre-recorded benefits webinars they can watch on their own time. There are two videos on our YouTube page by plan type:
    - **State and Higher Education Annual Enrollment Webinar**
    - **Local Education and Local Government Annual Enrollment Webinar**

  - **Local Gov:** **Decision Guide Mailing:** We have heard from a few local government agencies that their guides were delayed or may not have been received by some of their employees. The United States Postal Service has told us that the hurricanes may have interfered with some deliveries.
    - If you are out of your extra supply of guides ordered for new hires, we can send extra guides to you as long as we have them. Send an email to **benefits.info@tn.gov**
    - As a reminder, there is a PDF of the guide on the **ParTNers for Health website under Enrollment Materials**.
      - You can also share these tools:
      - 2018 Annual Enrollment PowerPoint Presentation found on the **ABC webpage** by plan type (need to download to use it)
      - Employees can **submit Zendesk questions**
      - Chat with the BA service center (green **HELP** button on ParTNers homepage)
      - **Watch a pre-recorded employee webinar**
      - **View 10 animated videos**
      - Call the BA service center directly at 800.253.9981 or 615.741.3590

  - **BlueCross BlueShield Network Facility List:** Following calls last week, we wanted to point out that the facility list for BCBST found on the **ParTNers for Health website on the Carrier Information page** has been updated. It now includes information about the Methodist Outpatient facilities, which are terminating effective 12/31/2017, and the Baptist Hospital in Collierville and the Baptist Outpatient facilities that will be in Network S effective 1/1/2018.

COMMUNICATIONS QUESTIONS

- **Local Gov:** Is there going to be an updated enrollment form for 2018 that includes the Premier Plan as a choice instead of the Partnership Plan?
  - **Answer:** There is an updated enrollment form for 2018 and it is located on both the **BA website under Forms** and it is on the **ABC webpage** titled "**2018 Enrollment Change Application**." As a reminder, you may need to clear your cache or refresh your webpage for updated forms to appear.

HIPAA Training

- **HIPAA Training Reminder:** For those who still need to complete the training, please take your 2017 HIPAA Annual Training in Edison. Follow the path on the screen to enroll in the class. Make sure you enroll in the correct HIPAA class. If you took the course in 2016, you will receive a message **"You have already completed this class on"** proceed anyway. Edison will record every year you have completed the course. The course takes approximately 30 minutes. There is a 10 question quiz at the end of the course. You must make at least an 80% otherwise you will be required to take the quiz again.

- **NAV BAR >Navigator>ELM>Learning Home>Search for Learning HIPAA> HIPAA Annual Training (HIPA2016)> BA_ABC_HIPAA_Higher Education or BA_ABC_HIPAA_Local Education or BA_ABC_HIPAA_Local Govt. >Enroll**

- **State ABCs:** You will register for the BA_ABC_HIPAA Local Education course.
- Any questions, send them to Chanda Rainey at Chanda.rainey@tn.gov

Benefits Questions

DISABILITY QUESTIONS (State and Higher Ed)

- **Higher Ed:** We do have one employee pushing for the certificate of insurance for MetLife Short Term Disability. It is referred to in the documentation, but is not available anywhere?
  - **Answer:** The certificate is under review by Benefits Administration staff and has to be filed with the State of Tennessee Department of Commerce and Insurance and cannot be released until approved. There have been some questions about exclusions and we have included the draft list of Short Term Disability Insurance exclusions below. If there are questions, you can submit them to benefits.info@tn.gov.

STATE OF TENNESSEE GROUP INSURANCE PROGRAM
SHORT TERM DISABILITY INSURANCE

SHORT TERM DISABILITY INSURANCE EXCLUSIONS

We will not pay for any Disability caused or contributed to by:

1. war, whether declared or undeclared, or act of war, insurrection, rebellion or terrorist act;
2. Your active participation in a riot;
3. intentionally self-inflicted injury;
4. attempted suicide; or
5. commission of or attempt to commit or taking part in a felony.

We will not pay Short Term Benefits for any Disability caused or contributed to by elective treatment or procedures, such as:

1. cosmetic surgery or treatment primarily to change appearance;
2. sex-change surgery;
3. reversal of sterilization;
4. liposuction;
5. visual correction surgery; and
6. in vitro fertilization; embryo transfer procedure; or artificial insemination.

However, pregnancies and complications from any of these procedures will be treated as a Sickness.

- **State:** If employees sign up for both Short Term Disability and Long Term Disability and they are unhappy, can they cancel at that time?
  - **Answer:** Yes, the disability insurance can be cancelled at any time during the year. If they decide later that they wish they had kept it, there is no longer a guaranteed

issue. They would have to answer health questions to enroll after this annual enrollment period.

- **State:** With canceling disability, is there any proof needed?
  - **Answer:** No, they just need to submit the cancel request form, and it must be sent in 30 days in advance of the cancellation date. There is a 30 days written notice requirement.

- **State:** Do employees have to use their sick leave bank option when making a claim for short or long term disability insurance?
  - **Answer:** According to State of Tennessee law, it requires employees to use sick leave, annual leave or comp time, but not their sick leave bank as this is voluntary. Disability insurance will not require employees to use sick leave bank, but if they use sick leave bank time, those days would not be also paid by the disability insurance.

- **State**: If an employee signs up for the Short or Long Term Disability Insurance and his or her birthday occurs during the year, will this move them to the next age bracket? Will the premiums increase at the time of his or her birthday or at the beginning of the next year?
  - **Answer:** Edison will look at the employee's salary and age as of Sept 1 and it is effective on Oct. 1 of each year.

- **State:** Back to the birthday question, you stated the audits will begin Sept. 1 and premium increases will happen Oct 1. Does this only affect those whose birthday fell before Sept 1, or does that take into account birthdays throughout the whole year?
  - **Answer:** The birthday checkpoint is age as of Sept 1. If someone's birthday is Sept. 5, that won't matter. It is the age as of Sept. 1 and is effective Oct. 1.

FSA QUESTIONS (State and Higher Ed)

- **Higher Ed:** When will the PayFlex HSA employee contribution form be available for 2018? Also, is the FSA $500 carryover approved for higher education employees in 2018?
  - **Answer:** The carryover is approved on the medical FSA and the limited purpose FSA. Anyone who has $500 or less will carryover for 2018. The TBR HSA contribution form is on the TBR website, on the TBR annual enrollment tab. It is a TBR form that we had access to last year.
  - Note: If a member has a healthcare FSA this year and enrolls in the CDHP/HSA, those funds will need to move to a limited purpose FSA. This information was sent to higher education ABCs on October 11:

PLEASE NOTE! THIS STEP WILL REQUIRE STATE, U.T. OR TBR INSTITUTION ACTION- For those plan members who are currently enrolled in a PPO in 2017 and have a general purpose FSA, but enroll in a CDHP for 2018 and still have <=$500 in their general purpose on 12/31/17, PayFlex will send a carryover file to State, UT, or the TBR university or school in early January (around January 5th). The file will go to BA (for State employees), to Rob and Pam (for UT), and to each TBR institution ABC. The university/college will need to review their enrollment records against the employees listed on this file to determine if the employee is still an active employee and if the product code needs to be changed to a limited purpose FSA (L-FSA) in order to allow the employee to have access to their HSA. *(** Reminder that employees in a CDHP and who have a HSA are not allowed, per IRS guidelines, to have* *a general purpose FSA. They may, however, have a L-FSA for dental or vision expenses*.) When you take action to change the code on the file and send this file back to PayFlex (similar to how you may upload files to them now), this helps your employee by having any remaining 2017 FSA funds moved into a 2018 L-FSA fund and those dollars available in early January. Changing the product code on the file will tell PayFlex that the member is moving from an FSA to a L-FSA and they will create an account for them and do the carryover of the funds. Their debit cards will deactivate the old account and add the new account and the funds appropriately. PayFlex will need this file back from each ABC by January 15, 2018.

Higher Education ABCs will need to work on this between January 5-15, 2018, so that any of their affected employees will have access to their funds.

- **Higher Ed:** Is this 2017 FSA carryover the first one that has been available for Higher Education? Can FSA funds be transferred to a LFSA for 2018?
  - **Answer:** Yes, this is the first time. You can enroll in the CDHP and not have a FSA, but if you are enrolled in the CDHP and if you anticipate a lot of dental or vision, it might be a good option for the employee to enroll in the L-FSA. You will have one card for both HSA and L-FSA and eligible vision and dental purchases will come out of the L-FSA first before tapping into the HSA funds. This allows the HSA funds to continue to grow.

- **Higher Ed:** Will PayFlex be notifying those employees (employees who had an FSA this year but are switching to the CDHP for next year and have $500 to carry over)?
  - **Answer:** PayFlex will not notify the employee; however, for these kinds of affected employees PayFlex will send a file to each affected institution (BA for state employees), UT for all UT employees, and each TBR institution in early January and the ABC at each institution will need to take certain action in order to have those FSA funds moved into an L-FSA for newly enrolled CDHP participants. For details on this, please see the "Please note!" comments above.

- **Higher Ed:** I understand that higher education can't have both a carryover and a grace period. Will the runout be applicable for 2018 through March 2018?
  - **Answer:** You can carryover up to $500 for FSA or L-FSA this year and next year. Any and all claims for a date of service in 2017 have to be filed by April 30, 2018. Any 2017 claims filed with PayFlex after that date will be denied.

- **Higher Ed**: If a person has medical flex this year and has money left, what is the minimum that they have to put in their L-FSA to carryover the account? Could you do $1?
  - **Answer:** Correct, there is not a minimum needed in the account to carryover the funds into the account.

- **State**: How does the $500 FSA rollover work? Will that happen automatically? What if someone does not open an FSA account for 2018 but has $500 remaining from 2017? If someone transfers from a PPO 2017 to a CDHP in 2018, would it be rolled into a L-FSA?
  - **Answer: This information was sent to state ABCs on Oct. 11:**
  - Plan members who are currently enrolled in a FSA or L-FSA in 2017 and who elect to re-enroll in the same product for 2018 will automatically have any funds of less than $500 carry over into the same account next year. PayFlex will handle this without any action needed by the State or the Higher Education institution. <u>Any</u>

funds in excess of $500 will be forfeited, per IRS rules. Also, they will only forfeit funds in excess of $500 if they do not submit any additional 2017 claims by April 30, 2018 (when the 2017 plan year closes out). Any funds carried over into 2018 will be used first, before PayFlex begins to draw against the pledged funds for 2018.

- Any plan members who are currently enrolled in a FSA or L-FSA in 2017 but who did not re-enroll in any flex product for 2018 and who have <=$500 remaining in their account will be able to continue using the funds on their flex debit card until they either expend the funds or terminate – whichever comes first.

- **PLEASE NOTE! THIS STEP WILL REQUIRE STATE, U.T. OR TBR INSTITUTION ACTION-** For those plan members who are currently enrolled in a PPO in 2017 and have a general purpose FSA, but enroll in a CDHP for 2018 and still have <=$500 in their general purpose on 12/31/17, PayFlex will send a carryover file to State, UT, or the TBR university or school in early January (around January 5th). **The file will go to BA (for State employees)**, to Rob and Pam (for UT), and to each TBR institution ABC. The university/college will need to review their enrollment records against the employees listed on this file to determine if the employee is still an active employee and if the product code needs to be changed to a limited purpose FSA (L-FSA) in order to allow the employee to have access to their HSA. *(** Reminder that employees in a CDHP and who have a HSA are not allowed, per IRS guidelines, to have a general purpose FSA. They may, however, have a L-FSA for dental or vision expenses*.) When you take action to change the code on the file and send this file back to PayFlex (similar to how you may upload files to them now), this helps your employee by having any remaining 2017 FSA funds moved into a 2018 L-FSA fund and those dollars available in early January. Changing the product code on the file will tell PayFlex that the member is moving from an FSA to a L-FSA and they will create an account for them and do the carryover of the funds. Their debit cards will deactivate the old account and add the new account and the funds appropriately. PayFlex will need this file back from each ABC by January 15, 2018.
  Note: Benefits Administration (BA) will be completing bullet #3 on behalf of State ABCs.

- **State:** So they couldn't just move it to the HSA (FSA funds)?
  - **Answer:** No, they cannot move FSA funds into HSA accounts.

- **State:** Does the $500 carryover amount only apply for the medical FSA or will it count for a L-FSA?
  - **Answer**: It works for both of those accounts, but not for the dependent care account. If you have $500 in the medical and you enroll again, the $500 will rollover. If you select the maximum amount of $2,600, the $500.00 will be added to the maximum amount and it will rollover.

- **State:** On the flex accounts, you can't purchase over the counter products, correct? It has to be used for things like copays, glasses?
  - **Answer:** Over-the-counter items would require a prescription. You can go to stateoftn.payflexdirect.com and there is a hyperlink on the site with a full list of items that can be reimbursed. Click on "Common Eligible Expense Items" and then the blue hyperlink for a full alphabetical list.

- **State:** If an employee is enrolled in a FSA for 2017 and goes to a HSA does the employee receive a new Payflex card?
  - **Answer: Per Darlene Russo, account manager at PayFlex:** No, PayFlex will update the "purse" or dollar amount on the existing card. So no new debit card is needed. Members will need to use the FSA balance up in order to put the state HSA seed money in the HSA in January. If not, the employee will have to wait until April 1, 2018, to contribute to and access HSA funds.

- **State:** For clarification - for the FSA monies that rollover, can that be claimed only for remaining 2017 claims or can it be applied to the 2018 claims?
  - **Answer:** Any funds of $500 or less in the FSA or L-FSA that carry over into 2018 may be used on any of your claims during 2018; it is not limited to just your 2017 claims.

- **State:** In the enrollment guide, I keep seeing a limit of $2,600 for the FSA. Just wanted to clarify that it is for employee only or if that applies to family coverage too?
  - **Answer:** If a person is a state employee, and the employee is covering the family, he or she can only put $2,600 into the FSA. If the spouse is also a state employee, then both can have a FSA for $2,600. On the dependent care FSA, the maximum amount is $5,000. If each parent is working for the state then each parent can only contribute $2,500.

Operations Updates

- **Service Center Annual Enrollment Common Topics:** Week one of Annual Enrollment 2018 is down in the history books. Please continue to ask your employees to enroll early and not wait until the deadline.
  - We wanted to share with you some of the frequently asked questions from last week. In addition to what we shared last Tuesday, we have seen an increase in questions about the difference between Eye-med vision and Davis Vision. For those questions, we explain our new plan, the new networks and the lower premium.
  - We've had concerns from members who do not wish to make a change and they want to know what will happen if no action is taken. We've explained that if the member is currently enrolled in a Partnership Promise or No Promise PPO plan we will default them to Premier PPO. The same with vision, if no action is taken we will default the member to Davis Vision.
  - We've had questions about our new disability products, specifically about plan exclusions, coverage begin date and premiums.
  - Each day we pull the most common questions and we write Zendesk articles. We've promoted the articles on our **Zendesk website** and we encourage you and your employees to view this area. The answer to your question may be found here and this could avoid holding on the phone during our high volume time of the year.

ZENDESK QUESTIONS

- **Local Gov:** Where is Zendesk website?
  - **Answer:** Here is the link: **https://benefitssupport.tn.gov/hc/en-us.** You can find it on the **ParTNers for Health website**, on the right hand side the link says "**Do You Have Questions**" and it will take you to the Zendesk website.

- **Local Gov:** I was under the impression that only ABCs could access Zendesk. Are you saying all of our employees can access it?

        - **Answer:** Yes, employees can access as well. They can also chat with us! The link to Zendesk and the Chat button (green HELP button) are both found on the **ParTNers for Health website homepage**.

- **September Metrics:** September 2017:
        - Tickets via Chat: 136
        - Tickets via Email: 495
        - Tickets via Self-Service: 2,057
        - Tickets via Phone: 5,777
        - Total: 8,465
        - 2016: 8,857
    - **Customer Service Rating for September:** We received about 1,000 less calls this year than last year. We have also added chat this past month and we have had a great response from it.
    - We take the satisfaction of our customers very seriously. Please complete the survey after you complete your Zendesk ticket.
    - If you respond with a "Bad" rating to Zendesk, we will reach out to you to see how we can improve. We would ask that you please rate the service you received from our service center, not if you are unsatisfied with policy, our satisfaction rate was **94.1** percent.

- **State: August Employee Self Service (ESS) Participation Rates:** Our August new hire ESS participation rates dropped from 88 percent to 87 percent; the YTD rate of 89 percent remained the same. We encourage you to require your new employees to use Edison to select their benefits.

- **Queries to Run During Annual Enrollment:**
    - **Higher Ed/State: Queries to Run during Annual Enrollment:** As the enrollment period winds down to a close, we wanted to remind you of a few queries you should be running this week in order to assist your employees with making their elections.
        - **TN_BA219_OE_NOT_SUBMITTED** – This query should be run with an event date of 1/1/2018. Anyone with a value of "SAVED" in the "Saved but Not Submitted" (8th) column of the query has made changes in Edison but has not submitted their elections. Please reach out to them and let them know that the changes will not be made unless they go back into Edison and submit. We will also send emails this week to this group of people if they have an email address in Edison. Since not all employees have an email address, we rely on you to reach out to them as well.

        - **TN_BA311_ESS_NEW_DEPENDENTS** – The event class should be "OE" and the Beginning and Ending Event Date should be 1/1/2018. This query will show you all new dependents that have been added through ESS during Annual Enrollment. The last column on the query results, "Proof Recvd?" will say Y or N for Yes or No. If it has a "Y" then we have received the necessary dependent verification. If it has a "N", then we either haven't received the verification or we have received it but not yet processed it. We recommend reviewing the people with a "N" to see if they have dependent information in Scanned Documents in Edison. If not, please reach out to these employees and let them know that they must submit dependent verification by 4:30 p.m. on Friday in order to add the dependents to coverage. They can either go back in Edison and upload it, or you can upload or fax it to us for them.

- **Note:** Retirees may show up in the queries with the actives. There should not be any changes made at the agency level to a retiree record. Retirees have different eligibility rules and premium collection methods and their records should NOT be altered by the agency. Any retiree changes need to be made through the service center, so please do not alter these records. **If you inadvertently terminated a retiree record that showed up on a query, contact Angie Gargaro at angela.gargaro@tn.gov**

  - **Local Ed/Local Gov: Queries to Run during Annual Enrollment:** As the enrollment period gets going, we wanted to remind you of a few queries you should be running each week in order to assist your employees with making their elections.
    - **TN_BA219_OE_NOT_**– This query should be run with an event date of 1/1/2018. Anyone with a value of "SAVED" in the "Saved but Not Submitted" (8th) column of the query has made changes in Edison but has not submitted their elections. Please reach out to them and let them know that the changes will not be made unless they go back into Edison and submit. We will also be sending emails weekly to this group of people if they have an email address in Edison. Since not all employees have an email address, we rely on you to reach out to them as well.

    - **TN_BA311_ESS_NEW_DEPENDENTS** – The event class should be "OE" and the Beginning and Ending Event Date should be 1/1/2018. This query will show you all new dependents that have been added through ESS during Annual Enrollment. The last column on the query results, "Proof Recvd?" will say Y or N for Yes or No. If it has a "Y" then we have received the necessary dependent verification. If it has a "N", then we either haven't received the verification or we have received it but not yet processed it. We recommend reviewing the people with a "N" to see if they have dependent information in Scanned Documents in Edison. If not, please reach out to these employees and let them know that they must submit dependent verification by 4:30 p.m. on Friday, October 27 in order to add the dependents to coverage. They can either go back in Edison and upload it, or you can upload or fax it to us for them.

    - **Note:** Retirees may show up in the queries with the actives. There should not be any changes made at the agency level to a retiree record. Retirees have different eligibility rules and premium collection methods and their records should NOT be altered by the agency. Any retiree changes need to be made through the service center, so please do not alter these records. **If you inadvertently terminated a retiree record that showed up on a query, contact Angie Gargaro at angela.gargaro@tn.gov**

- **Welcome Nakeisha Myles!** Please join Benefits Administration in congratulating **Nakeisha Myles** on her promotion to Manager over Training and Administration. She is filling Holly Girgies position. Nakeisha has been with Benefits Administration since October 2013. She started as an Insurance Benefits Analyst and was promoted to an Insurance Benefits Specialist on the Training team in October 2015. We are excited for all of the great ideas Nakeisha has for this role!

- **Higher Ed/Local Ed/Local Gov: Upcoming ABC Training**
  - **ABC Workshop:**
    - **eForms Process for Annual Enrollment**
    - **October 12: 1 -2 p.m. Central time**

Link for ABC Workshop:
Topic: ABC – Eforms Process (AE)
Host: Holly Girgies

Date: Thursday, October 12, 2017
Time: 1:00 pm, Central Daylight Time (Chicago, GMT-05:00)

Session number: 640 280 284
Session password: Workshop

To join the training session
----
1. Go to https://tngov.webex.com/tngov/k2/j.php?MTID=t2a27a8b38ea9e41cf69a0bf5558b47d0
2. Enter your name and email address.
3. Enter the session password: Workshop.
4. Click "Join Now".
5. Follow the instructions that appear on your screen.

OPERATIONS QUESTIONS

- **Higher Ed**: Will the Long Term Disability carrier be MetLife (for higher education)? Or are we still waiting on vendor information?
  - **Answer:** No, for higher education Long Term Disability Insurance, it will be Lincoln Financial.

- **Local Ed:** Can you please explain the surcharge that applies to the Cigna Open Access?
  - **Answer:** The surcharge associated with the Cigna Open Access plus is because this plan offers a larger, broader network of doctors and facilities, so a monthly surcharge applies. Below is additional information included in the 2018 Decision Guide:
  - Cigna OAP: This is a large network with a choice of more doctors and facilities, but you will pay more. In 2018 in the Memphis market, Baptist facilities will be out-of-network, but Methodist facilities will remain in-network. (Included in online guide version.)
    - Monthly surcharges will apply:
      - »» $40 more for employee only and employee+child(ren) coverage
      - »» $80 more for employee+spouse and employee+spouse+child(ren) coverage
- **Local Ed:** Is that cost (Cigna OAP) included in the premium?
  - **Answer:** Yes. If the member makes this selection, the cost is included in the monthly premium. If you look in the Decision Guide, it is included in the chart on page 14.

- **Local Ed:** Anyone hired after 10/1/2017, we can upload forms or use Zendesk correct?
  - **Answer:** New hires hired after 9/1/2017 will need to be hired into Edison as soon as possible. Advise the member to elect benefits via ESS or key the elections via the Benefit eForm. Once the new hire event is processed and closed, the Annual Enrollment event will open. This is normally a 24 hour process. At this point the member will can enroll for 2018 elections via ESS or the ABC can make elections for 2018 through the Benefit eForm.

    - For employees hired during the last week of the Annual Enrollment period, or after the Annual Enrollment period, you can submit a paper enrollment form for 2018 changes either via Edison Upload, Zendesk or you can attach the paper form via upload through their new hire benefit e-form.

- **Local Ed:** If the dependent child is a teacher also, is that a qualifying event to get her own coverage? She turned 26 in August.
    - **Answer:** If the dependent turns 26 in August, we will keep them on their parent's coverage until the end of August. BA automatically removes all dependents aging off of coverage. She has 60 days from the date her coverage ended to enroll in her own coverage through an SQE.

- **Local Ed:** Will BA go back and refund the parent's premium for September deduction?
    - **Answer:** Yes, but there shouldn't be a refund. There is a query you can run that will show you the dependents that are aging off in a certain month - TN_BA103_CHILD_AGE_26. If she is still showing coverage, send in a Zendesk ticket so we can take a look at the record.

- **Local Ed:** The eForm will have 1/1/2018 date so I did not think we could do eForms for 2017 coverage?
    - **Answer:** If they are hired 10/1 and enrolling as a new hire their new hire coverage will begin 11/1/2017. The eForm will open for whatever coverage they have available, if a new hire, then that is what will open. After they enroll as a new hire, then an OE event will open up for their annual enrollment benefit selections the following day after the event is finalized.

- **Local Ed:** We have a new hire coming on Oct 30, when can her benefits begin?
    - **Answer:** Her new hire benefits would begin 11/1/2017.

- **Local Ed:** What if an employee doesn't have a computer, can they come to the ABC and have me fill out paperwork?
    - **Answer:** They can come to you and you can complete an eForm for their 2018 elections. In this case we recommend that you collect a paper form for your records.

- **Local Ed:** Can an employee add a spouse to coverage even if he has health insurance at his employment? Can this process be completed online by the employee during open enrollment?
    - **Answer:** Yes and yes.

- **Local Ed:** We do not have to do paper forms for Premier PPO for 2018, correct?
    - **Answer:** We don't require paper forms in BA, but we suggest that you get a paper form for your records due to PPACA (in case you are audited by the IRS). If the employee is already enrolled and we are defaulting them from the Partnership PPO to the Premier PPO, we do not need an enrollment form. The form is only recommended if newly enrolling in this plan or any plan.

- **Local Ed:** About the Women's Clinic in Jackson - this is a large clinic in West Tennessee. I was told they do accept Cigna. Can anyone confirm or check it out for us this week? This is for the LocalPlus network.
    - **Answer:** Per Sharon Bowling with Cigna, The Women's Clinic in Jackson is participating in Cigna LocalPlus.

- **State:** Are there any circumstances that allow employees an extension for open enrollment? Like a death in the family?
  - **Answer:** You would need to submit an appeal and include the circumstances and BA would review.

- **State:** There is a dentist in Jackson, Tennessee that is in-network for Cigna dental but is not showing up on the Cigna website. How do we get that resolved?
  - **Answer:** Be sure you are accessing the Cigna prepaid dental directory from the State of Tennessee microsite at cigna.com/stateoftn. If the provider still does not appear in the directory, call Cigna customer service at 800.997.1617

- **State:** I have two employees who went from part time to full time. One of them does not have access to enroll in 2017 benefits or annual enrollment. Do these employees need to fill out forms? Also, I have a new hire who has benefits starting 11/17. She is enrolled in 2017 benefits but would like to make changes for annual enrollment. She does not have the capability in Edison.
  - **Answer:** We will have Tameka reach out to you and get the Edison information to make sure they have an OE event.

- **State:** Can employees only enroll in additional life insurance (voluntary term life) during annual enrollment?
  - **Answer:** Yes, unless a SQE, employees can enroll in voluntary term life only during annual enrollment and they will be required to answer health questions.

- **State:** I had an employee who got married this week and he has a temporary marriage certificate. Can I upload this into Edison and then send a permanent certificate in when he gets it? Does his spouse use her maiden name or married name?
  - **Answer:** We would accept the temporary certificate and we will put the married name if this is what they want to use.

- **State:** I have an employee who has a stepchild. She wants to know if she could provide secondary coverage on a PPO plan for the stepchild and how that would work with calculating the deductible?
  - **Answer:** She can add the dependent and would need to show proof of marriage, joint ownership, and the child's birth certificate. If whether or not the plan is primary or secondary, this is handled through the insurance vendor and the carrier (vendor) will be able to tell her where she is in her deductible during the year.
  - In addition to checking with the insurance vendor, enrolled employees can register and log in for online account access to personalized information like deductible amounts met so far. BlueAccess for BCBS members at http://www.bcbst.com/members/tn_state/index.page, or https://my.cigna.com/ for Cigna members.

- **State:** I have had several employees call saying they are turning 65 and having to sign up for Medicare A and that they are being told that they can no longer have the HSA. They want to know what to do with the funds that they have in their HSA account. What should we tell them?
  - **Answer:** The answer we provided on the phone earlier this week was incorrect, after having had a chance to review it more in-depth.

    Employees may not enroll in the CDHP/HSA if they are enrolled in Medicare. Once you enroll in any part of Medicare, you will not be able to contribute to your HSA.

If you would like to continue making contributions to your HSA, you can delay both Part A and Part B until you (or your spouse) stop working or lose your employer coverage. You will NOT pay a penalty for delaying Medicare, as long as you enroll within 8 months of losing your coverage or stopping work (whichever happens first).

The takeaway here is that you should delay Social Security benefits and decline Part A if you wish to continue contributing funds to your HSA. For more information, employees should consult their tax advisor. Neither the State Group Insurance Program nor employing agencies are able to, nor can we, provide tax advice.

- **State:** For 2018, if an employee is participating in the Wellness Program, will there be screening locations available like there has been in the past for the biometric screenings?
  - **Answer:** Yes, we will have onsite screenings available next year.

- **State:** I thought the balance when changing to a CDHP/ HSA had to be $0 on the FSA account before anything could be deposited from the state for the CDHP/HSA card?
  - **Answer:** Please see detailed answers further above and also in the email that went out to State ABCs and Higher Ed ABCs on October 11th (also included above).

- **State:** If an employee is moving from a CDHP plan to a PPO plan, the employee will still have access to their unused funds in the HSA correct?
  - **Answer:** Yes, once the funds are deposited they are yours to use for eligible expenses. The state has been paying the administrative fees. If you move to the PPO, the administrative fees will now come out of your account for the maintenance of the account. The fees are currently $2.72 per month.

- **Local Gov:** Will we receive an email about this training (ABC workshop)?
  - **Answer:** If you registered for the training through ELM, you will be sent an email with the login instructions. If you did not register, you can follow the link and instructions (sent in the Oct. 3 call notes) to join the workshop.

- **Local Gov:** If an employee has retired and is not in TCRS and paying the state directly for insurance, can they get Medicare supplement insurance when they are Medicare eligible?
  - **Answer:** To be eligible for the POMCO plan you must be receiving a monthly TCRS pension based on your own service or be a higher education Optional Retirement Plan retiree (ORP) from UT or a TBR higher education institution. If not receiving a pension from TCRS, then the employee is not eligible for the Medicare Supplement from POMCO.

Combined ABC Conference Call Notes
Higher Ed, Local Ed, State and Local Gov
October 17, 2017

<u>**Materials and Communications**</u>

- **Annual Enrollment Updates**
  - **State/Higher Ed:** Congratulations! We have completed a busy and successful annual enrollment period! We wanted to share these statistics with you about our new animated videos and the new ESS enrollment videos:
    - **To date, we have had close to 35,000 views of the animated benefits videos:**
      - Insurance 101 – 4,245
      - Network versus Plan – 1,608
      - PPO – 5,066
      - CDHP – 3,923
      - Pharmacy – 1,648
      - Vision – 4,047
      - Dental – 5,407
      - Short Term Disability – 3,622
      - Long Term Disability – 3,871
      - FSA – 1,497

    - **Here are the number of views for the "how to" ESS videos (to date):**
      - How to select and enroll – 17,732
      - How to reset your password – 6,559
      - How to log into Edison for the first time – 3,911
      - How to retrieve your Edison Access ID – 6,745

    - We also had more than 2,800 people click on the state/higher education annual enrollment pre-recorded employee webinar.
  - **Retirees:** As a reminder, for retirees, annual enrollment continues through Oct. 27.

  - **Local Ed/Local Gov:** Annual enrollment continues through Oct. 27.
    - **Retirees:** As a reminder, for retirees annual enrollment also continues through Oct. 27.
    - We know everyone is very busy helping members enroll in their benefits. We do want share our marketing stats from our new animated videos and the new ESS enrollment videos with you:
    - **To date, we have had close to 26,000 views of these animated benefits videos (those videos applicable to local ed and local gov employees):**
      - Insurance 101 – 4,245
      - Network versus Plan – 1,608
      - PPO – 5,066
      - CDHP – 3,923
      - Pharmacy – 1,648
      - Vision – 4,047
      - Dental – 5,407

    - **Here are the views for the "how to" ESS videos (to date):**
      - How to select and enroll – 17,732
      - How to reset your password – 6,559
      - How to log into Edison for the first time – 3,911

- How to retrieve your Edison Access ID – 6,745

- We also had more than 530 people click on the local education/local government Annual Enrollment pre-recorded employee webinar.
- Please continue to encourage your employees to use these resources when making their benefits selections.

Operations Updates

- **State/Higher Ed:** The counts are in, and we believe we have set a new enrollment record (since 2010 anyway).

	Friday	%	Total (12 days)
State	4569	24%	19441
HE	2205	23%	9493
Total	6945	24%	28934

Active	Friday	%	Total (last 5 days)
Phones	918	33%	2773
Chats	105	32%	328
Total	1023	33%	3101

- **State/Higher Ed:** Here are the disability enrollment numbers. Please note the correction in the number of higher education employees enrolled in Short Term Disability Insurance.

Disability	State	HE
STD A	1574	733
STD B	1583	882
STD Total	3157	1615
LTD 01	1349	
LTD 02	1435	
LTD 03	1071	
LTD 04	1170	
LTD Total	5025	

- **State/Higher Ed**: If employees call this week and say they tried to call us prior to 4:30 p.m. Friday 10/13, as long as we can confirm that they did, we will help them enroll. The person must submit a paper enrollment no later than 4:30 p.m. Friday 10/20.

- **State/Higher Ed: Saved but not Submitted Elections:** During the calls this week, you told us that your BA 219_OE_NOT_SUBMITTED query was not as large as it has been in years past. The reason that the size is smaller is because when we moved members from the Partnership plans to the Premier plan (or the Promise/No Promise CDHP to the equivalent plan), the members' records were automatically updated to a "Submitted" status. The TN_BA219_OE_NOT_SUBMITTED query will only show either:
  1) members who have not made any changes, or
  2) members who were not defaulted but are saved not submitted.

  - BA notified ABCs on Wednesday who had employees in a Saved status. These applicable ABCs were instructed to contact and advise the employee if they intended to submit these changes, they need to contact Benefits Administration at 800.253.9981 so that we can make their changes by Friday, October 20 at 4:30 p.m. Central Time.

- **Local Ed/Local Gov: Operations Team was Available for Questions**

OPERATIONS QUESTIONS

- **Higher Ed:** For employees hired after the annual enrollment (in October) period you state we can submit a paper enrollment form for 2018 changes. What is the last day we can do that?
  - **Answer:** Employees would have 31 days to submit their new hire enrollment AND their annual enrollment form. For employees hired during the last week of the Annual Enrollment period, or after the Annual Enrollment period, you can submit a paper enrollment form for 2018 changes either via Edison Upload, Zendesk or you can attach the paper form via upload through their new hire Benefit eForm. Please include "AE 2018" in the notes section of the paper form.

- **Higher Ed:** Where can we find instructions to run the queries?
  - **Answer:** On the **ABC webpage**, there is an **Edison Query Manual**, **Edison Query List** and a PDF that walks you through **Queries to Run through Annual Enrollment**.

- **Higher Ed:** What is the last day an employee can file an appeal?
  - **Answer:** Dec. 1, 2018.

- **Higher Ed:** How can a person prove that they tried to reach BA
  - **Answer:** We will have proof if they tried to call, chat and if they left a voicemail.

- **Higher Ed:** When I run the Saved but Not Submitted Elections report to show employees what they are going to do and where they are going to do, I am never on this file and depending on when I am going to run it, some people I think are supposed to be on it, are not. Why would the ABC not be on the file? One day I ran it for Wednesday and no one was on it for Thursday?
  - **Answer:** The reason that the size is smaller is because when we moved members from the Partnership plans to the Premier plan (or the Promise/No Promise CDHP to the equivalent plan); the members' records were automatically updated to a "Submitted" status. The TN_BA219_OE_NOT_SUBMITTED query will only show either:

    1) members who have not made any changes, or
    2) members who were not defaulted but are saved not submitted.

- **Higher Ed:** On the dependent verification documents file, I have a lot of people who say they have not submitted, but I can see them. How long does it take to show up?
  - **Answer:** We are still working these documents and are trying to finish them up as quickly as we can. The service center will be working dependent verification nightly as well as on the weekends. You can run the query periodically and you will notice a reduction as we validate dependents and finalize Annual Enrollment events.

- **Higher Ed:** I have a few employees who did not receive the one-time password change from Edison and couldn't get into their account to make benefit changes. What do they need to do?
  - **Answer:** For those employees who may have not received an email to change their password, they will need to file an appeal. To submit an appeal, have the member

write a letter stating what has happened. It could have been there is no email address on file for Edison to send the message for them to reset their password. As a reminder, these members could have also called the BA service center to help them change their password.

- **Local Ed:** If an employee is enrolling for new coverage during annual enrollment the employee will complete a paper application for to ABC to submit, correct?
    - **Answer:** If the employee is not enrolling as a new hire during annual enrollment you will key their new hire coverage through benefit eForm. If they have changes to their coverage for 2018, you can attach the paper form for their 2018 coverage or you can fax or send it in through Zendesk. Or they can upload the 2018 enrollment in the actual new hire eForm.

- **Local Ed:** If they are not a new hire, but enrolling for the first time in the insurance, do you still do a paper form?
    - **Answer:** No, every eligible employee should be in Edison. If the employee is not using ESS the only other option is to use eForm. So they should already be in Edison and you can enroll them using benefit eForm. You would not need to submit a paper enrollment form to Benefits Administration.

- **Local Ed:** If we have board member making a change to their current health coverage. Can we have him complete a paper form rather than log into Edison?
    - **Answer:** If they are making a change due to annual enrollment then the employee can either make the change through ESS or you can do it through an eForm.

- **Local Ed:** Is there a 2018 Payflex form available? If so, where can I find it? Also, if they are not changing their employee contribution, do they need to complete a new form for HSA contribution form?
    - **Answer:** There is a sample HSA contribution form and we have updated it for 2018. It is on the **ABC webpage under the PayFlex header**, called "**Sample Employee Payroll Deduction Form**." It is up to the agency if they require the employee to fill out a new form each year. The maximum amounts an employee can contribute have changed – employee only amount is $3,450 and the family HSA contribution amount is $6,900. This includes any employer contributions.

- **Local Ed:** I have several new hire enrollments or changes that I completed last week but they have not been updated in Edison. Is this due to annual enrollment?
    - **Answer:** We are currently working all eBenefit new hires daily and nightly. We are a little behind due to annual enrollment.

- **Local Ed:** If the ABC makes open enrollment changes for an employee already enrolled using eForms, does the paper enrollment application have to be attached?
    - **Answer:** No, you will not need to attach a paper form, but you should keep the form for your records due to PPACA.

- **Local Ed:** If they use ESS for enrolling the first time, wouldn't it be best for us to have a paper form so we know up front that we will need to make deductions from their check?
    - **Answer:** If they are enrolling through ESS you do not need to keep a paper form. You can run the TN_BA265 query in Edison to see what changes have been made by your employees through ESS.

- **Local Ed:** If an ABC makes changes using eForms do they show up in the queries?
  - **Answer:** If changes are entered using eForms, you can run TN_BA219_AETP_INS_ELECTIONS to view these changes. This query shows all changes made through both ESS and eForms.

- **Local Ed:** When should we expect the 2018 Eligibility and Enrollment Guide and the Insurance Checklist for 2018?
  - **Answer:** They should both be completed around mid-November.

- **Local Ed:** What is the difference on the queries in Central BA and ESS? Under the Elect Source - Queries in Edison?
  - **Answer:** ESS is the employee completing the enrollment through ESS. Central BA will display if an eForm was used or if they were defaulted into one of the medical plans by BA.

- **Local Ed:** Can you remind us of the best queries to run during open enrollment (OE)?
  - **Answer:** There is a PDF on **ABC webpage**, **Queries to Run During Annual Enrollment - 2018** that can help you.

- **Local Ed:** I want to verify for new employees who start later in October they will need to fill out a 2018 form if they want different benefits for 2018?
  - **Answer:** Yes, if they are a new hire and make 2017 benefit selections and want different benefits in 2018, then they can fill out a form for 2018 benefits. If you are coding the eHire for 2017 benefits in eForms, you can attach the paper form for 2018, fax it or upload in Zendesk.

- **Local Ed:** What if the employee is refusing coverage?
  - **Answer:** If the employee is refusing 2017 coverage, the employee will need to waive the coverage for 2017 and then complete the form for 2018. If the employee is refusing for 2018, we will keep everything the same as if the employee didn't make any changes from 2017 to 2018.

- **Local Ed:** If you have sent an eForm instead of an employee using ESS, then you can use the 219 AETP INS ELECTIONS query?
  - **Answer:** Yes. Eform elections can be captured by running the TN_BA219_AETP_INS_ELECTIONS query.

- **Local Ed:** If a new hire's insurance starts on 11/1/2017, do we need to send a 2018 enrollment form? This is only if they are changing the plan, correct?
  - **Answer:** Yes, if they are changing benefits for 2018, you would hire the employee using the hire eBenefit form for the 2017 coverage and you can attach a 2018 form or fax it or send it as a Zendesk upload.

- **Local Ed:** In the 219 AETP query, the change is still in pending and not showing in the query?
  - **Answer:** It is possible that we have not processed the changes yet.

- **Local Ed:** Will their 2018 coverage be messed up if the 2018 form was not sent?
  - **Answer:** No, their 2017 coverage will roll over to 2018. For example, if they are in the Partnership PPO, they will roll over to the Premier PPO.

- **Local Ed:** If I run the 219 OE Not Submitted query and the column labeled "Saved but Not Submitted" is blank, does that mean that I don't have any employees who have "Saved but Not Submitted"?
  - **Answer:** Be sure to use event date 1/1/2018 when running the query. If you continue to receive blank query results, submit a Zendesk ticket. If you see results but just the last column is blank, that means that no changes have been submitted by or for the employee.

- **State:** For my new hires who started 10/16, they are enrolling for effective date December 1. Do they need to do anything additional for Jan 2018?
  - **Answer:** If they want to make changes for 2018, then you would need to submit the 2018 paper form during their first 31 days of their hire date.

- **State:** Is it too late for an employee to submit dependent verification documents?
  - **Answer:** The deadline was Friday by 4:30 Central time, however if they sent in partial documents we will give them until this Friday, Oct. 20 to submit the remaining documents. If they did not submit any dependent verification documents, then it is too late and they can send in an appeal if they want to add a family member.

- **State:** If employees enrolled in Edison for a December effective date, it will not roll into next year they need a paper form?
  - **Answer:** No, the 2017 selections will rollover. But if they are enrolling for this year, 2017, and if they want to make changes or if they want a benefit not offered in 2017 such as short term disability, then you can submit a paper form for 2018 benefits.

- **State:** On the query that shows the dependent verification documents it has an "N" in the last column. I went to check and it showed the documents. How long until it will show that the documents have been added?
  - **Answer:** We are working the documents nightly and this weekend. We have a deadline of before Thanksgiving. As we complete them, you'll notice more and more of the dependent verification documents showing a "Y" in the query.

- **State:** If an employee did not sign up for Voluntary Life Insurance during their first 31 days of employment, can they do that at any time, or just during open enrollment each year?
  - **Answer:** From the Eligibility and Enrollment guide: If you do not enroll when first eligible, you can apply for coverage during the annual enrollment period by answering health questions.

- **State:** For short term and long term disability, if the employee has a short term disability policy through their home owner's insurance, how would this affect the coverage they have with the State?
  - **Answer:** Assuming it is an individual policy, it would not offset any benefit from MetLife. Only group disability benefits will offset group disability coverage.

- **Local Gov:** Can an employee who participates in the CDHP/HSA also participate in an employer offered FSA?
  - **Answer:** No, they can only participate in a limited purpose FSA. Further, if an employee is married and their spouse is enrolled in a general purpose FSA through his or her workplace (even if your employee is not enrolled on the spouse's

insurance through family or spouse coverage), then your employee may not enroll in the CDHP. No one may enroll in the CDHP and have a HSA if he or she is either enrolled in a general purpose FSA or his/her spouse is enrolled in any general purpose FSA. You may only have a limited purpose FSA and your spouse may only have a limited purpose FSA if you want to enroll in a CDHP.

- **Local Gov:** Where do I go to run the PPACA report?
  - **Answer:** Here is the path for the PPACA report: The navigation in Edison is NavBar > HCM > Benefits > Review Employee Benefits > TN PPACA Tax Report. In order to run the report, you will need to create a run control or select an existing one. To add a new run control, click the Add a New Value tab, type in PPACA (or another name of your choosing). After entering or selecting a run control, you will be taken to a page to enter the year for which you want to run the report. Make sure that this field says 2017. Click the Run button. The report does take a little time to run. Your report can be found on the Home Page of Edison under "My Reports." Your report will be listed as TN_HCM_4873. Click the link for the report.

- **Local Gov:** Are the requirements the same for the ACA rules as far as the penalties for employees if they do not have insurance?
  - **Answer:** Nothing has changed so far with the ACA.

- **Local Gov:** Can retirees enroll in dental or vision? We do offer it to our employees.
  - **Answer:** Your retirees who receive a TCRS pension check are eligible for dental. For vision, eligible retirees are those who are enrolled in the retiree group health plan and who are receiving a monthly pension from TCRS or an optional retirement plan retiree from the University of Tennessee or a TBR Higher Education agency. If you have retirees over the age of 65, but they have a spouse who is under the age of 65, the spouse can have vision.
  - **Note:** A retiree's eligibility for either dental or vision is not dependent on the agency offering the state's dental/vision to their active employees, only on the eligibility criteria outlined above.

- **Local Gov:** I have an employee who is showing active on the address query, but she has been terminated since February. Do I go to eBenefits to get her terminated?
  - **Answer:** **<u>If the employee is not a retiree</u>**, you would terminate the member using the Non Payroll Job Data link in Edison.

- **Local Gov:** Does BCBS have Methodist Hospitals?
  - **Answer:** For BCBST, Methodist Hospitals are terminating as of 12/13/2017, and Baptist hospitals will be in-network as of 1/1/2018.

- **Local Gov:** I have an employee who is resigning effective 12/31. When do I terminate him in Edison so he won't show up on my January collections applied report? His insurance needs to continue until 12/31 so what is my effective date?
  - **Answer:** You can terminate him now and use 11/30/2017 as the termination date.

- **Local Gov:** Transferred employees will need to submit a paper application, correct?
  - **Answer:** If the employee is new to your agency and you are enrolling the employee for the first time, then you will need to complete the new hire enrollment in eBenefits. If the other agency subscribes to our plan, you will still need to use the eBenefits form. If the old agency has not termed the employee, then the old agency

will receive a link terming the employee, and you will receive an email. This is all done in eBenefits; you would not need to submit a paper application. The old agency will receive an email notification with a link asking them to term them. Once the old agency terms the member using the link, you as the gaining agency will receive an email notification advising you to proceed in the hiring process. This is all done in eBenefit. You will not need to submit a paper application.

- **Local Gov:** If we enroll someone during annual enrollment, do you all send out confirmation or should we check through Edison to ensure everything went ok? Or if something is incorrect or missing a document, would you notify us and let us know it is incomplete?
  - **Answer:** We will reach out to you for dependent verification documents if we are missing anything. If members enroll during open enrollment, they will get a confirmation via mail or by email if they select this option in ESS.

Combined ABC Conference Call Notes
Higher Education, Local Education, State and Local Government
October 24, 2017

Materials and Communications

- **Annual Enrollment:**
  - **Local Ed/Local Gov:** Enrollment ends this Friday, Oct. 27 at 4:30 p.m. Central.
  - **Retirees:** Enrollment ends this Friday, Oct. 27 at 4:30 p.m. Central.

  - **Annual Enrollment Calls/Monthly Call Schedule:**
    - **State/Higher Ed:** This is our last weekly annual enrollment call. Regular monthly ABC calls will resume the second week of November on November 14. Here is the remaining call schedule for 2017 **at the regularly scheduled call times:**
      - **Higher Ed:**
        - Tuesday, November 14 at 8:30 a.m. Central
        - Tuesday, December 12 at 8:30 a.m. Central
      - **State:**
        - Tuesday, November 14 at 12:30 p.m. Central
        - Tuesday, December 12 at 12:30 p.m. Central

    - **Local Ed/Local Gov:** Here is the schedule for the remaining annual enrollment weekly calls. Regular monthly ABC calls will resume on Tuesday, November 14. and continue in 2017 **at the regularly scheduled call times.** Calls will continue on the second Tuesday of the month in 2018.
      - **Local Ed:**
        - Tuesday, October 31 at 10 a.m. Central
        - Tuesday, November 7 at 10 a.m. Central
        - Tuesday, November 14 at 10 a.m. Central
        - Tuesday, December 12 at 10 a.m. Central
      - **Local Gov:**
        - Tuesday, October 31 at 2 p.m. Central
        - Tuesday, November 7 at 2 p.m. Central
        - Tuesday, November 14 at 2 p.m. Central
        - Tuesday, December 12 at 2 p.m. Central

  - **2018 Eligibility & Enrollment Guides:** Eligibility and Enrollment Guides are with the printer and will be available online soon.
    - **Order form:** We have posted an order form for you to use for the 2018 Eligibility and Enrollment Guides. You can go the link below to complete the form and indicate the number of 2018 Eligibility and Enrollment Guides you will need. Guides should mail to ABCs in mid-November.
      - 2018 Eligibility and Enrollment Guides
    - We will post PDFs of each Eligibility and Enrollment Guide on the ABC page on Nov. 1.
  - **2018 New Hire Checklist:** We will revise the checklist for 2018 and it will be posted on the ABC webpage in mid-November.

HIPAA Training

- **HIPAA Training Reminder:** For those who still need to complete the training, please take your 2017 HIPAA Annual Training in Edison. Follow the path below to enroll in the class. Make sure you enroll in the correct HIPAA class. If you took the course in 2016, you will receive a message **"You have already completed this class on"** proceed anyway. Edison will record every year you have completed the course.

   - The course takes approximately 30 minutes. There is a 10 question quiz at the end of the course. You must make at least an 80% otherwise you will be required to take the quiz again.
   - **NAV BAR >Navigator>ELM>Learning Home>Search for Learning HIPAA> HIPAA Annual Training (HIPA2016)> BA_ABC_HIPAA_Higher Education or BA_ABC_HIPAA_Local Education or BA_ABC_HIPAA_Local Govt. >Enroll**
     - **State ABCs:** You will register for the BA_ABC_HIPAA Local Education course.

Operations Updates

- **Annual Enrollment Stats:** During annual enrollment our service center staff work required overtime. This ensures that all submitted dependent verification, Zendesk tickets, Special Qualifying Event Enrollments, and new-hire enrollments are worked timely. On Saturday, we all worked a full day and we wanted to share with you the progress we made so that you would be aware of where we are on keying enrollments.
   - **State and Higher Ed:** We completed all ST/HED dependent verification that was submitted prior to the deadline. In the days to come we will be reaching out to you regarding employees who did not submit dependent verification and what process they should take to appeal if desired. We have currently identified 113 Higher Education employees and 280 State employees in this category.
   - All e-hire/e-benefits forms have been approved or recycled.
   - The oldest document we have is dependent verification in our Local Education queue, which has a received date of 10/9/2017. We are currently working on regular enrollments received 10/16/2017. We normally process all submitted documents with 2-5 business days, as we displayed on the slide we're a little behind due to Annual Enrollment.
   - Thank you for being patient with us during our busy season.

- **Local Ed/Local Gov: Queries to Run during Annual Enrollment:** As the enrollment period winds down to a close, we wanted to remind you of a few queries you should be running this week in order to assist your employees with making their elections.
   - **TN_BA219_OE_NOT_SUBMITTED** – This query should be run with an event date of 1/1/2018. Anyone with a value of "SAVED" in the "Saved but Not Submitted" (8th) column of the query has made changes in Edison but has not submitted their elections. Please reach out to them and let them know that the changes will not be made unless they go back into Edison and submit. We will also be sending emails this week to this group of people if they have an email address in Edison. Since not all employees have an email address, we rely on you to reach out to them as well.

   - **TN_BA311_ESS_NEW_DEPENDENTS** – The event class should be "OE" and the Beginning and Ending Event Date should be 1/1/2018. This query will show you all new dependents that have been added through ESS during Annual Enrollment. The last column on the query results, "Proof Recvd?" will say Y or N for Yes or No. If it has a "Y" then we have received the necessary dependent verification. If it has a "N", then we either haven't received the verification or we have received it but not yet processed it. We recommend reviewing the people with a "N" to see if they have dependent information in Scanned Documents in Edison. If not, please reach out to these employees and let them know that they must submit dependent verification by 4:30 p.m. on Friday in order to add the dependents to coverage. They can either go back into Edison and upload it, or you can upload or fax it to us for them.

QUERY QUESTIONS

- **Local Ed:** How long does the TN_BA311 query take for the documents to show up?
  - **Answer:** The document will only change to a "Y" on the query after we have entered the documents into the system. You can look into scanned documents to see the documents which have been uploaded and not yet approved.

- **Local Ed:** Will the BA311 query take longer than normal to run than other queries?
  - **Answer:** Yes, that query can take significantly longer to run.

- **Local Gov:** If employees don't make changes in Edison, their names will be on the not submitted query, correct?
  - **Answer:** Yes, unless they were defaulted from the Partnership or No Partnership PPOs. If BA defaulted them to the Premier PPO, then they will not show up on the query.

- **Local Gov:** I have entered all open enrollment changes myself by e-forms. What query is best to make sure that I made the changes correctly?
  - **Answer:** At this point, you should run the TN_BA219_AETP_INS_ELECTIONS. It will show you what the employee was enrolled in this year, and what he or she will enroll in next year. This query will include ESS and eForms changes.

- **Local Gov:** When I run the query for any changes, apparently I am doing something wrong. It looks like the list has all of our employees' coverages listed, not just what changes were made this year?
  - **Answer:** The query will include those who defaulted from the Partnership plans to the Premier PPO.

- **Local Ed:** How long will be have access to the queries after open enrollment is closed?
  - **Answer:** Most queries you will have access to for a long period of time. The exception is TN_BA219_AETP_INS_ELECTIONS query and it should be run immediately after annual enrollment. You will no longer see all of the changes after we begin to close out the Annual Enrollment events next week.

- **State: PPACA Updates:**
  - We are about to begin our yearly review process for part-time employees. We will be evaluating part-time employees who will be newly eligible for coverage under PPACA, who will continue eligibility, and those who will no longer be eligible. You will receive individual Zendesk tickets for each affected employee with instructions on what needs to be done. Any changes to coverage will take effect 1/1/18. It is important that we receive completed enrollment change forms back for each of the members who are acquiring, continuing or making changes to their coverage for 2018 due to PPACA eligibility. We need the form back ASAP to assure there is no break in coverage or double deductions on premiums. You will have 31 days from the date of the notification to provide the form back to BA.
  - You can now run the **TN_BA350 and TN_BA351** queries for the new measurement period. The new measurement period dates are 10/8/17 – 10/6/18. There will be a new process this year for agencies in the Legislative and Judicial branches. We will be reaching out to you this week with information regarding this new process.

- **ABC Workshop – Queries to Run after Annual Enrollment:** Benefits Administration will have a workshop for ABCs on Queries to Run after Annual Enrollment. The date, time and login information is below (**this same information was included in the Friday, Oct. 20 ABC email**).
    - **Date: November 2, 2017**
    - **Time: 1 p.m. to 2 p.m. Central time**
    - **ABCs can register for the workshop in ELM by following this path:**
        - Login in to Edison.
        - Navigate to NavBar>Navigator>ELM> Employee Self Service>Learning>Find Learning>Enter ABC in the "Search Box" field>Click the "arrows" button.
        - Locate "*ABC Webinar Workshop (ABCT2000)*"
        - Click *Enroll*
    - **ABCs can also follow the instructions below the day of the workshop for access:**
        - **Topic: ABC Workshop - Queries to Run after Annual Enrollment**
          Host: Nakeisha Myles
          Date: Thursday, November 2, 2017
          Time: 1 p.m., Central Daylight Time (Chicago, GMT-05:00)

          Session number: 640 856 315
          Session password: ABCworkshop

          To join the training session
          ---
          1. Go to
          https://tngov.webex.com/tngov/k2/j.php?MTID=teeb098f88876c04a5979d65280a5c883
          2. Enter your name and email address.
          3. Enter the session password: ABCworkshop.
          4. Click "Join Now".
          5. Follow the instructions that appear on your screen.
          To view in other time zones or languages, please click the link
          https://tngov.webex.com/tngov/k2/j.php?MTID=t12cf1e0cee6cef8f8dee678085ad2628

          To join the session by phone only

          To receive a call back, provide your phone number when you join the training session, or call the number below and enter the access code.
          US TOLL:+1-415-655-0003
          Global call-in numbers:
          https://tngov.webex.com/tngov/globalcallin.php?serviceType=TC&ED=607924892&tollFree=0
          Access code: 640 856 315

          For assistance

          You can contact Nakeisha Myles at:
          nakeisha.n.myles@tn.gov
          1-615-253-4685

          Can't join the training session?

https://help.webex.com/docs/DOC-5521

To add this session to your calendar program (for example Microsoft Outlook), click this link:
https://tngov.webex.com/tngov/k2/j.php?MTID=t247714514176d3c479a76005e81bc512

OPERATIONS QUESTIONS

- **Higher Ed:** The chat feature was good...but toward the end I got an email stating chat could not be used to reset passwords. Why was that?
  - **Answer:** We starting getting really busy and the analysts were on a chat for over an hour and ½ with password reset requests. We couldn't spend that much time on a chat for this request when it is much quicker by phone.

- **Higher Ed:** How will new hires enroll in Long Term Disability going forward now that open enrollment is over?
  - **Answer: April Preston with TBR responded:** They will continue to use the website for the TBR colleges. If they are not registered they will have to call in to the Lincoln Financial enrollment service center number to get registered to go into the portal to sign up. That number is 800-523-2178. Questions regarding login and navigation on the site for new hires and their enrollment process can be directed to the Enrollment Service Desk or at steps2enroll@lfg.com. Any questions regarding benefits should be directed to the customer service number 1-800-423-2765.
  - **Rob Chance with UT responded:** We will have an open enrollment from January 29th to March 2nd. More details will be provided at a later date.

- **Higher Ed:** We had a couple of employees who entered the information on the recover password site and it indicated that the information was incorrect. It was not incorrect - I witnessed the information entered. They then had to call in and be on hold over 20 minutes trying to get their password reset.
  - **Answer:** We are sorry this happened. We had a few callers who called with this situation and when we gave them a temporary password, it worked just fine. I'm not sure what happened in your situation. We also had some employees entering correct information, but their birthdate or other information was wrong in the Edison system. If this is happening for one of your employees, check their information in Edison to make sure it is accurate.

- **Higher Ed:** We have a team member looking for the Short Term Disability certificate of insurance. Is that available yet?
  - **Answer:** Not yet. We have to file the draft with the Department of Commerce & Insurance for approval. It cannot be published until Commerce & Insurance approves it. We will announce when the certificate is posted on the BA and MetLife websites.

- **Higher Ed:** Any more information about the wellness incentive?
  - **Answer:** We don't have anything to share at this time, but hope to provide something on next month's call.

- **Higher Ed: For TBR schools:** This is about PayFlex, when is the end of cleanup? Is it the end of this month? Can employees still make a change at this time?

- **Answer: April Preston with TBR responded:** Yes, you can run queries and see who has signed up for the CDHP and who may have a FSA and will need to move to the LFSA. All changes and clean up must be complete by 10/31/17.
- **Darlene Russo with PayFlex responded:** You can send an email to stateoftennessee@payflex.com if the employee is supposed to be in the LFSA and he or she is in the FSA. As for making changes, no, once they make a selection they cannot go in and make a change. We have to go in and make those changes for you.

- **Higher Ed:** For new hires beginning November 1, will we use a paper form for PayFlex enrollment for December 2017 and for 2018, is that correct?
  - **Answer: Darlene Russo with PayFlex responded:** Yes, you can send that to PayFlex as well. For 2018, they should have come over to us on the file. If they are not on that file, and we don't have their demographic information, then we can enroll them manually. You can send to the stateoftennessee@payflex.com.

- **Local Ed:** How do we check for employees uploaded documents?
  - **Answer:** You can look on the Scanned Documents tab on the Employee Profile Page in Edison. If you don't see the documents on this page, you can submit a Zendesk ticket and someone will get back to you.

- **Local Ed:** Should the dependent verification be completed by Friday?
  - **Answer:** They must be submitted by the employee by the deadline. We won't be able to process them all by Friday, but they do need to be submitted by the deadline.

- **Local Ed:** Where can I find the list of coverage plans by abbreviation -example PRPV1E, the way the plans are listed on the queries?
  - **Answer:** On the **ABC webpage** under **Edison Information** section **titled 2018 Plan Code and Coverage Level Descriptions.**

- **Local Ed:** There is an employee adding a child and he only has the mother's copy of the birth certificate. Will this document work for open enrollment?
  - **Answer:** Yes, that will work.

- **Local Ed:** Can you remind me what the deadline is for dep verification if you are only awaiting one piece (i.e., you have marriage cert, but awaiting proof of joint ownership)?
  - **Answer:** The dependent verification document deadline is Friday at 4:30 p.m., however, if a member submits partial or incomplete documents we are giving them ten days from the end of annual enrollment to submit this information, so employees in this situation would have until **November 6 at 4:30 p.m. Central time**.

- **Local Ed:** If an employee has Eye Med coverage now will they automatically be switched over to Davis Vision? I think this answer is yes, I just wanted to make sure.
  - **Answer:** Yes, that is correct.

- **Local Ed:** I had a new employee start yesterday. She will become eligible for benefits on Dec 1. I hired her and created a benefits work order yesterday. She does not intend to change benefits in 2018. She doesn't have to worry about the 10/27 enrollment deadline does she?
  - **Answer**: No additional action is needed if she wants to maintain her coverage from 2017. If she enrolled in the Partnership/No Partnership PPO plan she will be defaulted to the Premier PPO.

- **Local Ed:** When is the best time to run the PPACA report in Edison for upcoming end of the year reporting?
  - Answer: We recommend waiting until after the first few days in December. The December information won't populate until after we run payroll the first working day in December

- **Local Ed:** I have an employee in the CDHP/HSA who covers her spouse. Her spouse turns age 65 in June 2018. Can she continue to cover the spouse under the CDHP and make contributions to the HSA if the spouse does not take Medicare A or B and does not take social security?
  - **Answer:** Yes, the eligibility requirement is just on the member. As long as the member is not enrolled in the Medicare it is fine for the member to continue contributing to the HSA. In addition, as long as the spouse does not enroll in Medicare or collect social security and the employee has family coverage on both her and her spouse, then he or she may contribute up to the family maximum IRS contribution in 2018 of $6,900. In addition, if the employee (the HSA account holder) is age 55 or older, then he or she may make an additional $1,000 "catch up" contribution each calendar year.

- **Local Ed:** If an employee adds a spouse during open enrollment, but the spouse signs up for their own insurance during their annual enrollment, would the employee be able to cancel the spouse insurance as a qualifying event?
  - **Answer:** The employee can cancel a spouse on the cancel request form due to open enrollment but that spouse has to be newly eligible. It can't be due to just deciding to come off of coverage.

- **Local Ed:** Is there a good link for employees to find their Edison ID if they do not have insurance currently and cannot look at a card? Is that something we could work on for the next open enrollment?
  - **Answer:** The best way is through the ABC. You can run the TN_BA302_PERSON_AND_JOB query (on the list on the **ABC webpage**). It will show you all of your employees and their Edison ID numbers. We've had numerous discussions with Edison to figure out the best way to get that information to employees, but as the Edison ID is tied to the social security number and health information, the best way in this situation is for the employee to go through the ABC.

- **Local Ed:** I have a retiree who is covering his spouse on the retiree health plan. When the retiree turns 65 and goes on Medicare, but the spouse is not 65, can the spouse remain on the retiree health plan without the retiree, or would they be offered COBRA instead?
  - **Answer:** Yes, as long as the spouse is already covered on the retiree health plan when the retiree ages off. If the spouse is covered on the retiree health plan when the retiree ages off due to Medicare, the policy automatically changes to a retiree only coverage level.

- **Local Ed:** One employee just called me and said that Benefits Administration told him yesterday that he couldn't use Google Chrome and to use Internet Explorer or Firefox and it would recognize him. He changed and it worked. Just thought I would share that we worked it out.
  - **Answer:** Yes, Google Chrome is not a recommended browser to use when completing an enrollment in ESS in Edison but it does work for some people.

- **Local Ed:** Is there a 2018 PayFlex form?
  - **Answer:** I believe you are referring to the payroll deduction form, and yes, we put the revised on the PayFlex section of the **ABC webpage** and it is called **Sample Enrollment Payroll Deduction Form**.

- **Local Ed:** If I am helping someone who did not get an email confirmation. Is there a place in Edison where I can see the changes without having to run a query? I thought there used to be a place where you could see the employee's changes.
  - **Answer:** The best and easiest is to run the TN_BA133 query – you only need the employee's Edison ID and it will show their changes. The employee can also log back in to Edison and view an enrollment statement by navigating back to the Benefits Enrollment page and clicking the "View" button under View/Print Confirmation Statement.

- **Local Ed:** Can you repeat the last query # that we need to run immediately after open enrollment?
  - **Answer:** TN_BA219 AETP_INS_ELECTIONS – it will show this year's changes and what employees are changing to next year.

- **Local Ed:** Do we need to run the TN_BA219 query on Friday evening this week or is it best to wait until the following week after open enrollment closes?
  - **Answer:** I would recommend running it on Monday morning (Oct. 30) so you would catch anyone making changes late Friday afternoon (last day of annual enrollment, Oct 27).

- **Local Ed:** When will the medical and dental query be fixed?
  - **Answer:** When it will show all of the elections? We close out all of the events by the Wednesday before Thanksgiving. You can run it the last week in November and it will show the final elections.

- **Local Ed:** What is that query name (medical/dental query)?
  - **Answer:** TN_BA219_MED_DEN_COVERAGE. As a reminder, all queries are listed on the **ABC website**, on the **Edison Query List.** Here is the Query Manual - **http://www.tn.gov/assets/entities/finance/benefits/attachments/abc_edison_query_manual.pdf.**

- **State:** This is about the checklist. We have some new employees coming on in November 2 with effective dates of January 1. What do we use for now?
  - **Answer:** You can use the 2017 checklist and write in disability insurance on the form. We will let you know when the 2018 checklist has been posted.

- **State:** Can an employee sign up for short-term disability and long-term disability insurance throughout the year not only during annual enrollment?
  - **Answer:** No they can't sign up throughout the year, unless there is a qualifying event or they are a new hire (guaranteed issue within 31 days). They can apply next year during annual enrollment with medical underwriting (questions).

- **State:** When will get an updated PowerPoint for benefit orientation?
  - **Answer:** Yes, we are working on it now and it should be ready within the first week or two of November.

- **State:** When can we order the vendor member handbooks or provider directories?
  - **Answer:** You can order them now by contacting the vendor contacts via the information on the **Vendor Contact list** (found on the ABC webpage).

- **Local Gov**: I have husband and wife employees. One has the CDHP and one has the PPO. Can the spouse who has the PPO use the other spouse's HSA debit card?
  - **Answer:** If they are enrolled in single coverage, either person can use the funds for the HSA. The spouse who is enrolled in the PPO can use the HSA funds. Dependents can have their own cards too. The spouse enrolled in single coverage on the PPO can use the HSA with the employee who has the CDHP. Note: Neither employee can enroll in a medical FSA.

- **Local Gov:** I need the name and phone number of our contact with PayFlex.
  - **Answer:** The email address is **stateoftennessee@payflex.com** and ABCs should send questions to this address. You may also call Darlene Russo at 860-273-5413.

- **Local Gov:** If you need to do a social security number correction and also a name and address change, when making the correction in Edison, should we upload the Corrections and Clarifications form in Edison?
  - **Answer:** You can submit it through Edison or Zendesk – either is fine.

- **Local Gov:** Retirees will be rolled into the Premier plans if they do not change anything just like active employees...correct?
  - **Answer:** Yes, if they were enrolled in the Partnership or No Partnership PPO, they will be defaulted into the Premier PPO unless they submit a form to change their elections.

- **Local Gov:** Can a retiree contribute to a HSA from their pension check? If not, why?
  - **Answer:** No, they cannot. We are not set up to do this for retirees. We are only set up for automatic payroll for state and higher education employees. Any retiree who wants to enroll in the CDHP, as long as they are not enrolled in Medicare or Social Security, they can contribute after tax and take an above the line deduction when they file their tax return each year.

- **Local Gov:** Will Davis Vision mail out cards?
  - **Answer:** Yes.

Combined ABC Conference Call Notes
Local Education and Local Government
October 31, 2017

Materials and Communications

- **Annual Enrollment:**
  - **Annual Enrollment Calls/Monthly Call Schedule:**
    - **Local Ed/Local Gov:** Here is the schedule for the remaining annual enrollment weekly calls. Regular monthly ABC calls will resume on Tuesday, November 14. and continue **at the regularly scheduled call times.** Calls will continue on the second Tuesday of the month in 2018.
      - **Local Ed:**
        - Tuesday, November 7 at 10 a.m. Central
        - Tuesday, November 14 at 10 a.m. Central
        - Tuesday, December 12 at 10 a.m. Central
      - **Local Gov:**
        - Tuesday, November 7 at 2 p.m. Central
        - Tuesday, November 14 at 2 p.m. Central
        - Tuesday, December 12 at 2 p.m. Central

  - **2018 Eligibility & Enrollment Guides:** 2018 Eligibility and Enrollment guides have been sent to the printer. We have posted digital versions of the guides on the Benefits Administration website on the Publications page found here: http://www.tn.gov/finance/article/fa-benefits-publications.
    - **2018 Eligibility and Enrollment Guide – Local Education**
    - **2018 Eligibility and Enrollment Guide – Local Government**
    - **Order form:** An order form for ABCs specific to the 2018 guides has been posted at the top of the **ABC webpage**. Guides should mail to ABCs in mid-November.
    - **As a reminder, for your remaining 2017 new hires, you can use the 2017 Eligibility and Enrollment guide for the current year benefits, and the 2018 Decision Guide (the extra guides you ordered for your new hires) to help them make their 2018 benefits selections.**
  - The **Marketplace Letters** have been updated and links are posted on the **ABC webpage** under PPACA documents.
  - **2018 New Hire Checklist:** The checklist has been revised for 2018 and is posted on the **ABC webpage** by plan type. You will use this checklist for those members who are enrolling in 2018 benefits.
  - **2018 Order Form for Member Materials:** Also, the order form for ABCs to use to order BA or vendor materials found on the **ABC webpage** has been updated.
  - **Note: For the checklist, form and other materials, you may need to refresh your webpage or clear your cache to see the updated versions.**
  - **2018 New Hire PowerPoints:** We are working on the 2018 new hire PowerPoints – the version for your use and the version with notes for your new hires. We hope to have them posted within the next two weeks. We will let you know when they have been posted.

- **Member ID Cards:** We had several questions about medical and other ID cards for 2018 and what happens if a member has a name or other status change. Here is information about ID cards and the process:
  - **Following Annual Enrollment:**

- **Medical:** All members will get new medical ID cards. Members who were changed from Partnership plans to the Premier PPO will get new cards and there are changes to the phone numbers on the back on the new cards.
  - **BCBST Members:** Cards will only have the HOC names. The dependents will be located on the piece of paper that comes with the cards.
  - **Cigna Members:** All plan members will have their own cards, so the HOC and all dependents will receive a card with their name on it.
- **Pharmacy:** If members are new to health insurance, they will get a new pharmacy ID card. Members who are currently enrolled in health insurance but change their plan during annual enrollment will get a Welcome Kit from CVS/caremark, but not an ID card.
  - Employees who receive cards will receive a card for each covered member.
- **Dental:** If you are new to dental coverage or make a change to current coverage, you will get a new dental ID card.
- **Vision:** All members enrolled in vision coverage will get new vision ID cards.
- **If members need a new card, they can call the insurance vendor to ask for extra cards or print a temporary card from their website. Some vendors also show ID cards on their mobile apps.**

- **Following a Special Qualifying Event (SQE) or other change such as the name:**
  - File changes will necessitate new cards being sent. The carriers get a weekly eligibility file from BA communicating information like new members, names and address changes, etc. These changes are loaded within a day or two and ID cards are at the same time. It typically takes 10-15 business days for ID cards to arrive in a member's mail box. So, employees will need to give the vendor time to get the new file from Benefits Administration and for the vendor to mail out a new card. Members should be able to go the carrier or vendor's website and print out a temporary card after about a week or so from the file being sent from BA to the vendor.
    - **For medical**: BCBS sends two cards with the HOC name; Cigna sends cards with the HOC and each dependent name on them. Members can call the insurance carrier and ask for extra cards or print a temporary card from their website. As mentioned, please wait at least a week for the file to transfer with the changes to the carrier.
      - BCBS login and customer service number- https://www.bcbst.com/secure/members/, 800-558-6213
      - Cigna login and customer service number - https://my.cigna.com/web/public/guest, 800-997-1617
    - **For pharmacy**, when there is a change to the plan, employees will get one card for each person enrolled in the plan, including the spouse and dependents. The employee should receive a card for each covered member. Members can go to info.caremark.com/stateoftn and log in from there to print a pharmacy card. They need wait long enough for the information to transmit and make sure they verify name change and verify address. The Caremark customer service number is 877-522-8679.

Combined ABC Conference Call Notes
Local Education and Local Government
October 31, 2017

Operations Updates

- **Local Ed/Local Gov:** If a member calls this week and they say they tried to call us prior to 4:30 p.m. Friday 10/27 and as long as we can confirm that they did, we will help them enroll. The person must submit a paper enrollment no later than 4:30 p.m. Friday November 3.

- **Local Ed/Local Gov: Saved but not Submitted Query Reminder:** We have approximately **130** employees who made changes in Edison, but did not submit their elections.
  - Please run the TN_BA219_OE_NOT_SUBMITTED to identify these employees. The event date to use to run the query is 1/1/2018. The employees who are in this status have a value of "SAVED" in the second to last column on the query. If these employees call the BA Service Center by this Friday, November 3, 2017 at 4:30 p.m. Central Time we will finalize their elections for them over the phone. Otherwise, they will need to wait until next year's annual enrollment period to make changes. Please reach out to the employees to notify them of this opportunity.

- **Annual Enrollment Stats:**

2017	**ESS**	**Eforms**	**Total**
Local Ed	7,962	1,339	9,301
2017	**ESS**	**Eforms**	**Total**
Local Gov	1,419	1,976	3,395

- **Reminder: How Members Can File Annual Enrollment Appeals:** If members want to file an appeal, they need to write a letter as to why they were not able to make changes, include proof with their submission, and they or the ABC can upload into Zendesk on the appeals form.
  - **Members have until December 15, 2017, at 4:30 p.m. Central time to file an appeal. But please encourage employees to file their appeal as soon as possible.**

- **(This training occurred prior to the notes being issued.) ABC Workshop – Queries to Run after Annual Enrollment:** Benefits Administration will have a workshop for ABCs on Queries to Run after Annual Enrollment on November 2. The date, time and login information is below: (this same information was included in ABC emails)
  - **Date: November 2, 2017**
  - **Time: 1 p.m. to 2 p.m. Central time**
  - **ABCs can register for the workshop in ELM by following this path:**
    - Login in to Edison.
    - Navigate to NavBar>Navigator>ELM> Employee Self Service>Learning>Find Learning>Enter ABC in the "Search Box" field>Click the "arrows" button.
    - Locate "*ABC Webinar Workshop (ABCT4000)"*
    - Click *Enroll*

OPERATIONS QUESTIONS

- **Local Ed:** Have all of the documents that employees uploaded been verified by the State (BA)? I have several employees worrying about that. I do not see any of them showing on any query I ran, so I am assuming that all is well.
  - **Answer**: No, we haven't made it through all of the dependent verification. We have about 600 documents left and we will be working overtime to finish these up. We

will reach out to ABCs to let you know which employees did not submit dependent verification, or if we are missing necessary documentation.

- **Local Ed:** What was the deadline for appeals again?
  - **Answer:** The appeals deadline is December 15, 2017, at 4:30 p.m. Central**.**

- **Local Ed:** Will the workshop be recorded?
  - **Answer:** It will **not** be recorded. But we will publish the slides from the workshop on the ABC webpage after the training.

- **Local Ed:** I have one employee who asked me this morning if he could make a change. I do not think that he has used ESS during the open enrollment.
  - **Answer:** If this is for annual enrollment, then he is outside of the deadline to make a change, so at this time he could not make a change. He could file an appeal, but appeals are not guaranteed to be approved.

- **Local Ed:** Did you say how long members will have to submit information if they show up on the TN_BA219_OE_NOT_SUBMITTED query?
  - **Answer**: They have until 4:30 p.m. Friday, November 3 and we can validate the changes over the phone.

- **Local Ed:** I have an employee who went on and tried to enroll last Friday. He emailed me this morning and said he never received an email that he had completed his enrollment. Does he also need to do an appeal?
  - **Answer:** You can run the TN_BA133 query – this will show you if he submitted changes in ESS. If nothing shows up, then he will need to file an appeal. You can also check the TN_BA219_OE_NOT_SUBMITTED query to check the status of his submission. If members show up on this query with a value of "SAVED" in the 8th column, we will need to hear from them by Friday, November 3 if they want to make changes.

- **Local Ed:** I know that some employees were saying that they had not received their confirmation emails. Were we having any issues about this?
  - **Answer:** No, we are not aware of any issues. Not every employee has an email in the Edison system and this could be why we did not receive an email. Also, the emails are sent via secure email and the employee may not have recognized it when it came through.

- **Local Ed:** What query is the best to give to payroll for adding or making changes for insurance?
  - **Answer:** You can use the TN_BA219_MED_DEN_ELECTIONS query. You will use the dates from the beginning to the end of the election period and will show all of the changes through the election period. You will also be able to run the Premiums Due report in early December to get an up to date view of enrollments.

- **Local Ed:** Will members who file appeals, etc., show up on that query (MED_DEN query) if we wait to run it in mid-December?

   - **Answer:** They will show up on the TN_BA219_MED_DEN_ELECTIONS query, but you will have to extend the election dates to include the time after annual enrollment (AE).

- **Local Ed:** Will everyone get new ID cards or just Premier folks?
   - **Answer:** Everyone will get new medical ID cards this year due to phone number changes on the back of the cards.

- **Local Ed:** Were there a lot of employees changing overall? I think most of our employees were staying with their plan, except for those on the Limited plan, some of those moved.
   - **Answer:** We had about 2K less make changes this year than last year. We will know more information later as to what changes were this year. We don't have the final outcome yet.

- **Local Ed:** Do you get a new Caremark card with any type of change made?
   - **Answer:** For 2018, if you are new to coverage, you will get a pharmacy ID card and a welcome kit. Those who moved to a new plan or those in the Premier PPO or other plans, will just get a welcome kit. Only those **new to coverage** will get a new pharmacy ID card.

- **Local Ed:** What is the normal occurrence for medical and pharmacy cards? Is it usually two cards sent when there is employee and dependent coverage?
   Answer: For pharmacy, when new to the plan, employees will get one card for each person enrolled in the plan, including the spouse and dependents. The employee should receive a card for each covered member.
   - For medical, if there is a change in coverage or file changes, it is different for each carrier. BCBS sends two cards with the HOC names on them. The dependents will be located on the piece of paper that comes with the cards. Cigna's cards have dependent names.
   - For both carriers, members can request as many cards as they need.

- **Local Ed:** What about with name change for marriage, do new cards (2) go out for employee with new name and for spouse? I have new employees and cards questions about when they have to go through BA or go to the insurance company to get the cards. For an update for names, as long as keyed at BA, can they call the insurance company?
   - **Answer:** File changes (like adding new dependents, making a name change, or enrolling in a different product) go through BA and get passed over to the carriers once a week on an electronic eligibility file. Such changes will necessitate new cards being sent out by the carriers or vendors. Benefits Administration does not issue or mail ID cards. Employees will need to give the vendors a few weeks to mail out ID cards after processing any file changes from Benefits Administration. Within a week or so of BA transmitting eligibility changes to the vendors, members can go to the carrier or vendor's website and print out a temporary card while waiting on ID cards to arrive in the mail. Members needing additional assistance with ID cards can contact the vendor customer service numbers.

- For medical: BCBS sends two cards with the HOC name; Cigna sends cards with the HOC and each dependent name on them.
  - BCBS login and customer service number- https://www.bcbst.com/secure/members/, 800-558-6213
  - Cigna login and customer service number - https://my.cigna.com/web/public/guest, 800-997-1617
- For pharmacy, when there is a change to the plan, employees will get one card for each person enrolled in the plan, including the spouse and dependents. The employee should receive a card for each covered member. Members can go to info.caremark.com/stateoftn and log in from there to print a pharmacy card. They need wait long enough for the information to transmit and make sure they verify name change and verify address. The Caremark customer service number is 877-522-8679.

- **Local Ed:** What would be a good date to use go run a final query for payroll changes? We take January premiums out of the last Dec. check.
  - **Answer:** The best thing is to wait until after we do our first payroll calculation for January coverage. We will run the first payroll calc on December 4th, so you can do the premiums due report on December 5th and catch all of the changes. If you want to start looking in the meantime, the TN_BA219_MED_DEN_ELECTIONS query is the one to use. The longer you wait you run it, the more changes it will have on it.

- **Local Ed:** So I ran my queries today. Should I run them again at the end of the week?
  - **Answer:** Yes, to catch anyone in the saved but not submitted query (TN_BA219_OE_NOT_SUBMITTED) or any pending due to dependent verification documents, you may to wait a week or two. We will accept appeals up until Dec. 15, so there will be changes up until that point and time.

- **Local Ed:** There are still 600 dependent verification documents pending uploads. If Dec 15 is the last date to appeal, that doesn't give us a lot of time to make changes?
  - **Answer:** If you have employees who want to appeal, please ask them to do so right away.

- **Local Gov:** We have an employee who added a spouse to their coverage but did not have verification documentation handy to upload. How much time do they have to get the documents in?
  - **Answer:** The employees have until Friday, November 3 to submit all of their dependent verification if they submitted partial documents, for example they sent in the marriage certificate but not send in proof of joint ownership.
  - Members can file an appeal by sending in a letter to BA explaining why they were not able to enroll timely. They can send to Zendesk using the Annual Enrollment Appeals form. The appeals deadline is Dec 15, but please have your employees submit their appeal as soon as possible so you can load their payroll changes for 2018.

- **Local Gov:** Can we order 2018 materials now?
  - **Answer:** Yes, and the 2018 order form is on the **ABC webpage** by plan type.

- **Local Gov:** Who took Holly's place (on the training team)?
  - **Answer:** NaKeisha Myles, if you want to send information or documentation to her you can submit a Zendesk ticket with her name and it will get forwarded to her.

- **Local Gov:** Regarding the current slide about the WebEx address, if we are in the Eastern time zone would we use the bottom address?
  - **Answer:** No, you would use the same link to register for the session. The bottom link allows you to change your time zone preference.

- **Local Gov:** Our group is making no changes in coverage. Do we have to do anything?
  - **Answer:** The enrollment period ended last Friday (Oct. 27) so changes had to be made by that date. But if your employees did not want to make any changes then no, they would not have had to make any changes by that date.

Combined ABC Conference Call Notes
Local Education and Local Government
November 7, 2017

Materials and Communications

- **ABC Conference Calls:**
  - **Local Ed/Local Gov:** Today is the last weekly conference call in 2017! Regular monthly ABC calls will resume on the second Tuesday of every month at the regularly scheduled time unless otherwise noted:
    - **Local Ed:**
      - Tuesday, November 14 at 10 a.m. Central
      - Tuesday, December 12 at 10 a.m. Central
      - Tuesday, January 9 at 10 a.m. Central
    - **Local Gov:**
      - Tuesday, November 14 at 2 p.m. Central
      - Tuesday, December 12 at 2 p.m. Central
      - Tuesday, January 9 at 2 p.m. Central

- **2018 Eligibility & Enrollment Guides:** We have posted digital versions of the 2018 Eligibility and Enrollment guides on the Benefits Administration website on the **Publications page** found on the BA website: **http://www.tn.gov/finance/article/fa-benefits-publications**.
  - **Order form:** An order form specific to the 2018 guides was posted at the top of the ABC webpage. The order form was removed at the end of the week (Nov. 9).
  - Guides should mail to ABCs in mid-November.
  - You will still be able to order guides using the regular order form found on the ABC webpage by plan type.
  - As a reminder, for your remaining 2017 new hires through the end of the year, you can use **the 2017 Eligibility and Enrollment guide** for the current year benefits, and the **2018 Decision Guide** (the extra guides you ordered for your new hires) for their 2018 benefits selections.
- **2018 New Hire PowerPoints:** We are working on the 2018 new hire PowerPoint presentations which will include a version with notes for your new hires. We hope to have them posted very soon.

- **Local Ed/Local Gov: Declaration page and Q&A –Exclusions of Coverage for Spouses:** We were asked about updating the contact information (now Training Manager) found in the Declarations page and Q&A documents and this information has been updated. These documents are found on the ABC webpage by plan type.

- **Closed Friday, November 10:** State offices and the BA service center will be closed on Friday, November 10 for the Veteran's Day holiday.

COMMUNICATIONS QUESTIONS

- **Local Gov:** I had one question about insurance (documents you mentioned). You're saying that the employer has the authority to deny coverage for a spouse if they are offered insurance through their own employer?
  - **Answer:** Yes, there is a Q&A on the **ABC webpage** under plan type that explains everything. In 2016, the Insurance Committees approved a change to the plan document that would PERMIT local education and local government agencies to deny health insurance coverage to the spouses of employees if the spouse is employed and eligible for group health insurance through their own employer. This change **does not mandate anything**. It simply allows LE and LG agencies to

implement this practice if they so choose using the agency's process to approve such changes.

- **Local Ed:** Who can we contact to see if we have already put in an order for the 2018 Eligibility Guides? I can't remember if I ordered (guides).
  - **Answer:** You can send your request to benefits.info@tn.gov and we will look it up for you.

HIPAA

- **Privacy & Security of Protected Health Information:** I think all of you know how important HIPAA privacy and security is. Did you know, however, what can happen to you if you mishandle Protected Health Information?

HIPAA Civil Penalties: $100 - $1,500,000 / year fines; More fines if multiple year violations
HIPAA Criminal Penalties: $50,000 - $250,000 fines; Imprisonment up to 10 years

- **P**rotected **H**ealth **I**nformation (**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.

  Electronic PHI (ePHI) is protected health information that is computer based, e.g., created, received, stored or maintained, processed and/or transmitted in electronic media.

  Security Rule is designed secure the transfer and storage of electronic health information (ePHI) by enforcing:

  - **Administrative Safeguards:** These measures manage the selection, development, implementation and maintenance of security measures and include workforce security, security training, policies and procedures. All ABCs are required to complete HIPAA training. This is an example of an administrative safeguard.
  - **Technical Safeguards:** The technology that protects ePHI and controls access and transmission security. An example is your Edison user name and password, which ONLY YOU are authorized to use.
  - **Physical Safeguards:** Physical measures to protect the electronic information systems and related buildings and equipment from natural and environmental hazards and unauthorized intrusion. Examples include controlled access such as computer locks or restricted areas for personnel who have access to PHI.

  A breach is defined as the acquisition, access, use or disclosure of unsecured PHI which is not permitted by the HIPAA Privacy Rule and which compromises the security or privacy of the PHI.

  Edison USER ID and Password are assigned specifically for an individual. Under no circumstances should an ABC allow another individual or organization to gain access to Edison using their assigned Edison User ID. Allowing an unauthorized individual or organization to access Edison constitutes a HIPAA breach and non-compliance of Memorandum of Understanding between the state and its agencies. The Edison security statement is provided below and is available for review on the Edison login screen.

  "This system may contain Government information, which is restricted to authorized users ONLY. Unauthorized access, use, misuse, or modification of this computer system or of the data contained herein or in transit to/from this system constitutes a violation of state and federal laws including, but not limited to Title 18, United States Code, Section 1030, and may subject the individual to Criminal and Civil penalties pursuant to Title 26, United States Code, Sections 7213(a), 7213A (the Taxpayer Browsing Protection Act), and 7431."

We conduct audits regularly to determine compliance and will reach out to you to ensure you have completed HIPAA training or to address other issues.

HIPAA QUESTIONS

- **Local Ed:** If a teacher has a child who is going to Roane State or another college, the form asks them to put their Edison ID number on this form. Should this form request that information? This is for a teacher to receive a discount for their child attending these colleges. I do not like to put this information on the forms I sign.
  - **Answer:** Yes, you should put it in there. This is how the employee is getting the correct discount.

- **Local Gov:** I did my training and took the test and passed, however it shows the training is still in progress in Edison?
  - **Answer:** For some people, the system is holding it up and showing the course as "in progress." I can look at your scores and change it over to completed for those who have completed it. You can submit a Zendesk ticket and we can take a look at it.

- **Local Gov:** I completed the HIPAA training 2017 LG. It shows status completed. Someone at Benefits Training said they did not see that I had completed it. I replied to that email with a print out from Edison showing that I had completed it. I haven't heard back from anyone about it. Who do I need to contact?
  - **Answer:** Our privacy officer, Chanda Rainey will get back to you directly. If another ABC has a similar situation, they can email Chanda at Chanda.rainey@tn.gov.

- **HIPAA Training Reminder:** For those who still need to complete the training, please take your 2017 HIPAA Annual Training in Edison. Follow the path below to enroll in the class. Make sure you enroll in the correct HIPAA class. If you took the course in 2016, you will receive a message **"You have already completed this class on"** proceed anyway. Edison will record every year you have completed the course.
  - The course takes approximately 30 minutes. There is a 10 question quiz at the end of the course. You must make at least an 80% otherwise you will be required to take the quiz again.
  - **NAV BAR >Navigator>ELM>Learning Home>Search for Learning HIPAA> HIPAA Annual Training (HIPA2016)> BA_ABC_HIPAA_Higher Education or BA_ABC_HIPAA_Local Education or BA_ABC_HIPAA_Local Govt. >Enroll**
  - BA has developed a new video to help you enroll in the course: Go to this link below and click on the video **How to Enroll in HIPAA Training in Edison:** youtube.com/partnersforhealthtn

Operations

- **Local Ed/Local Gov: Annual Enrollment Appeal Deadline:** As a reminder the Annual Enrollment appeal deadline is 12/15/2017 at 4:30 p.m. All appeals filed thorough your office should be submitted via Zendesk, through the ABC Appeal Form.
  - Members can fax their appeals to this number (615-741-8196).

- The appeal would need to address the reason the deadline was missed and any evidence supporting the appeal should be filed with the appeal.
- We have a two week turnaround time on appeals. Once we have come to a determination, we will reach out to your office.
- Please encourage your members to file appeals now so that any changes made through approved appeals can be processed in enough time for your payroll and for your employees to get their insurance ID cards before the first of the year.

- **Enrolling and Canceling Due to Open Enrollment:** BA received several questions during Local Ed and Local Gov calls this week about spouses who had Open Enrollments, if this qualified as a Special Qualifying Event (SQE), and if members could cancel coverage. **BA will discuss SQEs and Cancel Requests on our Nov. 14 ABC calls.**

OPERATIONS QUESTIONS

- **Local Ed:** I missed the workshop regarding Queries to Run after Annual Enrollment but I do have copies of the slides. However, I was wondering which report you recommend using in order to make the payroll changes?
  - **Answer:** The best report to run after Dec. 4 so you can make your first payroll calculations is the Premiums Due Report. If you want to start looking at changes now, you can run the TN_BA219_MED_DEN_ELECTIONS query starting with the beginning AE date through today and that will show you the elections through today.

- **Local Ed:** Wouldn't it be more efficient for BA to email the employee directly about employee documents instead of sending the ABC an email and then we email the employee?
  - **Answer:** We don't have email addresses for all employees and if we didn't inform ABCs, they wouldn't know when certain things are approved. We determined it was best to go through the ABCs so you know what has been provided to BA by the employee.

- **Local Ed:** Are these appeals in conjunction with those employees who did not meet requirements for the Partnership plan, or what is the appeal for? So far I have had no employee to ask me about an appeal.
  - **Answer:** No, the appeals are for those who missed the Annual Enrollment deadline or they didn't submit dependent verification documents. Please note that appeals are not guaranteed to be approved for any reason.

- **Local Ed:** If an employee missed annual enrollment, but she has a spouse who is going through open enrollment this month and he wants to pick up himself and the children on his plan effective 1/1/18, does this provide our employee an opportunity to cancel her spouse and children from her plan?
  - **Answer:** BA is still working on the policy regarding SQEs and cancel requests due to Open Enrollment. We will discuss during our Nov. 14 ABC calls.

- **Local Ed:** I received an email from BA regarding an employee who sent in one piece of dependent verification documentation and would go into suspense and they had 10 days to submit the other information. I received another email stating BA could not process anything and the member would have to go through an appeal?
  - **Answer:** It sounds like the initial email was incorrect. We were giving the employee 10 additional days to provide the additional verification information. It sounds like

the employee only had until Nov. 6 (10 days from the end of annual enrollment) without requiring an appeal to be submitted.

- **Local Ed:** When will employees be notified that the changes they made during OE have been approved? I am concerned they may not know they need to appeal.
  - **Answer:** We have generated the first batch of confirmation statements and they will go out later this week.

- **Local Ed:** I have an employee who needs to drop the child because the spouse is in open enrollment. Can someone call me to talk through this? I had searched Zendesk, and it indicated this is a reason to cancel.
  - **Answer:** BA is still working on the policy regarding SQEs and cancel requests due to Open Enrollment. We will discuss during our Nov. 14 ABC calls.

- **Local Gov:** I have an employee who is currently covered under her spouse. It is now her spouse's open enrollment period and he is thinking about dropping her off his coverage. If he drops her, will she be eligible to enroll in our plans as a Special Qualifying Event (SQE)?
  - **Answer:** BA is still working on the policy regarding SQEs and cancel requests due to Open Enrollment. We will discuss during our Nov. 14 ABC calls.

- **Local Gov:** Is there a list of behavioral health doctors under the different networks?
  - **Answer:** The best way to search for behavioral health doctors is to go to **HERE4tn.com** and you can search for a provider. The behavioral health network is national and not plan specific.

- **Local Gov:** During a SQE, can the whole plan be changed? An example is our employee's spouse having a baby and adding the baby to coverage. Can he then add the spouse and change the whole coverage?
  - **Answer:** Yes, if adding a spouse at the same time as a baby, the employee can change the coverage at the same time.

- **Local Gov:** What are the employees' options if they did not realize that they would need to enroll during annual enrollment due to thinking they would have coverage elsewhere in 2018? Would that go back to the list discussed earlier that will be sent out?
  - **Answer:** If they didn't make a change during annual enrollment they will have to follow the appeal process and BA would either approve or deny their appeal to add coverage. If a member files an appeal, it is not a guarantee that it will be approved. If denied the employee cannot add or change coverage until next fall's annual enrollment unless he or she has a qualifying event.
  - Members can file an appeal by sending in a letter to BA explaining why they were not able to enroll timely. They can send it through to Zendesk using the Annual Enrollment Appeals form. The appeals deadline is Dec. 15, but please have your employees submit their appeal as soon as possible so you can load their payroll changes for 2018.

- **Local Gov:** We have third party vendors that come after Open Enrollment. One of our employees thought this was when he had to deal with health. Is that something he can appeal? He wanted to drop his daughter off of his coverage.
  - **Answer:** The employee can appeal but it is not guaranteed to be approved. But the employee can certainly appeal the situation.

- Members can file an appeal by sending in a letter to BA explaining why they were not able to enroll timely. They can send it through to Zendesk using the Annual Enrollment Appeals form. The appeals deadline is Dec. 15, but please have your employees submit their appeal as soon as possible so you can load their payroll changes for 2018.

Combined ABC Conference Call Notes
Higher Education, Local Education, State and Local Government
November 14, 2017

Materials and Communications

- **Monthly Calls:**
  - **State/Higher Ed:** Here is the remaining call schedule for 2017 and the first few 2018 calls**:**
    - **Higher Ed:**
      - Tuesday, December 12 at 8:30 a.m. Central
      - Tuesday, January 9 at 8:30 a.m. Central
      - Tuesday, February 13 at 8:30 a.m. Central
    - **State:**
      - Tuesday, December 12 at 12:30 p.m. Central
      - Tuesday, January 9 at 12:30 p.m. Central
      - Tuesday, February 13 at 12:30 p.m. Central

  - **Local Ed/Local Gov:** Here is the remaining call schedule for 2017 and the first few 2018 calls.
    - **Local Ed:**
      - Tuesday, December 12 at 10 a.m. Central
      - Tuesday, January 9 at 10 a.m. Central
      - Tuesday, February 13 at 10 a.m. Central
    - **Local Gov:**
      - Tuesday, December 12 at 2 p.m. Central
      - Tuesday, January 9 at 2 p.m. Central
      - Tuesday, February 13 at 2 p.m. Central

- **2018 Eligibility & Enrollment Guides:** A digital version has been posted on the BA website on the Publications page:
  - http://www.tn.gov/finance/article/fa-benefits-publications
  - Guides started to mail to ABCs this week.
  - If you still need to order guides, use the regular order form found on the ABC webpage by plan type.
  - As a reminder – **now through the end of 2017** for your new hires you can use the 2017 Eligibility and Enrollment guide for current year benefits and the 2018 Decision Guide.

- **2018 New Hire PowerPoints:** We are working on the 2018 new hire PowerPoints including a version with notes for you to use with your new hires. We hope to have them posted very soon.

Benefits

- **2018 Wellness Program Update:** Paige Turner, population health director, shared an update about the 2018 wellness program.

- **Know Your Health/Hospital Safety Program Flier:** Kendra Gipson, our director of vendor services and contracts, relayed information about a new campaign.
  - Benefits Administration is launching a member education campaign called "Know Your Health." The goal is to inform and educate members about the various resources available to them to help them become more knowledgeable healthcare consumers. It will focus on topics such as Know Your Hospital, Know Your Costs, Know Your Options, etc.

- The first piece of this campaign is a flier included in all member welcome packets (to be mailed & posted online in early December) that focuses on hospital safety. The flier provides information on hospital safety grades; it includes several points on what members can do to stay safe in the hospital and web links where additional information on this topic can be found. The safety grade is just one factor in choosing a hospital and our goal is to provide information, not to steer members to any facility or provider. Members should also never refuse care in an emergency.
- Additional resources and information for the "Know Your Health" campaign will be rolled out over the coming months, most likely beginning in January. Emails, videos and web resources will be the main form of communication with members, but of course agencies are encouraged to share or promote materials with members in ways that most effectively reach their population.

KNOW YOUR HEALTH/HOSPITAL SAFETY PROGRAM FLIER QUESTION

- **Local Ed:** Are all hospitals listed on the website?
  - **Answer:** No. A hospital must have enough safety data available to issue them a letter grade. Hospitals missing more than six process measures or more than five outcome measures are not graded. Also, the focus is on general acute-care hospitals only. At this time grades are not assigned to military or VA hospitals, critical access hospitals, specialty hospitals, children's hospitals, or outpatient surgery centers but this could change in the future.

- **ParTNers EAP Presentation– Take Charge at Work:** Melissa Ward with Optum also joined us to talk about **Take Charge at Work**, a telephonic program that will be offered to help people with depression improve performance at work.
  - BA will send more information to ABCs including a flier you can share with your employees in early December.

OPTUM HEALTH QUESTIONS

- **Local Gov: What are CIRS Services?**
  - **Answer:** Critical Incident Response Services. These are services used in a medical emergency or a death or a major event within your population. We can provide group counseling for your site to help with this difficult time.

- **Local Gov**: I was told that if you are diagnosed with depression, you can lose your gun carry permit and the ability to purchase firearms. That made a member, who really needed help, NOT call EAP. I told them it was confidential, but he wouldn't believe me. Any advice?
  - **Answer:** EAP services are completely confidential – as far as Optum is aware there is no connection with EAP and losing a permit. Under HIPAA laws, if someone calls to access EAP, no one has access to that information. Optum can explain that to the member. It is completely confidential.

HIPAA

- **Higher Ed/State:** **Privacy & Security of Protected Health Information:** I think all of you know how important HIPAA privacy and security is. Did you know, however, what can happen to you if you mishandle Protected Health Information?

HIPAA Civil Penalties: $100 - $1,500,000 / year fines; More fines if multiple year violations
HIPAA Criminal Penalties: $50,000 - $250,000 fines; Imprisonment up to 10 years

- **P**rotected **H**ealth **I**nformation (**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.

  Electronic PHI (ePHI) is protected health information that is computer based, e.g., created, received, stored or maintained, processed and/or transmitted in electronic media.

  Security Rule is designed secure the transfer and storage of electronic health information (ePHI) by enforcing:

  - **Administrative Safeguards:** These measures manage the selection, development, implementation and maintenance of security measures and include workforce security, security training, policies and procedures. All ABCs are required to complete HIPAA training. This is an example of an administrative safeguard.
  - **Technical Safeguards:** The technology that protects ePHI and controls access and transmission security. An example is your Edison user name and password, which ONLY YOU are authorized to use.
  - **Physical Safeguards:** Physical measures to protect the electronic information systems and related buildings and equipment from natural and environmental hazards and unauthorized intrusion. Examples include controlled access such as computer locks or restricted areas for personnel who have access to PHI.

  A breach is defined as the acquisition, access, use or disclosure of unsecured PHI which is not permitted by the HIPAA Privacy Rule and which compromises the security or privacy of the PHI.

  Edison USER ID and Password are assigned specifically for an individual. Under no circumstances should an ABC allow another individual or organization to gain access to Edison using their assigned Edison User ID. Allowing an unauthorized individual or organization to access Edison constitutes a HIPAA breach and non-compliance of Memorandum of Understanding between the state and its agencies. The Edison security statement is provided below and is available for review on the Edison login screen.

  "This system may contain Government information, which is restricted to authorized users ONLY. Unauthorized access, use, misuse, or modification of this computer system or of the data contained herein or in transit to/from this system constitutes a violation of state and federal laws including, but not limited to Title 18, United States Code, Section 1030, and may subject the individual to Criminal and Civil penalties pursuant to Title 26, United States Code, Sections 7213(a), 7213A (the Taxpayer Browsing Protection Act), and 7431."

  We conduct audits regularly to determine compliance and will reach out to you to ensure you have completed HIPAA training or to address other issues.

- **HIPAA Training Reminder:** For those who still need to complete the training, please take your 2017 HIPAA Annual Training in Edison. Follow the path below to enroll in the class. Make sure you enroll in the correct HIPAA class. If you took the course in 2016, you will receive a message **"You have already completed this class on"** proceed anyway. Edison will record every year you have completed the course.
  - The course takes approximately 30 minutes. There is a 10 question quiz at the end of the course. You must make at least an 80% otherwise you will be required to take the quiz again.

- **NAV BAR >Navigator>ELM>Learning Home>Search for Learning HIPAA> HIPAA Annual Training (HIPA2016)> BA_ABC_HIPAA_Higher Education or BA_ABC_HIPAA_Local Education or BA_ABC_HIPAA_Local Govt. >Enroll**
  - **State ABCs:** You will register for the BA_ABC_HIPAA Local Education course.

Operations

- **Annual Enrollment Appeals Deadline:**

  Higher Ed/State:
  - As a reminder the Annual Enrollment appeal deadline is 12/1/2017 at 4:30 p.m. Central. All appeals filed through your office should be submitted via Zendesk, through the ABC Appeal Form.
  - Members can fax their appeals to the number provided on the slide (615-741-8196).
  - The appeal would need to address the reason the deadline was missed and any evidence supporting the appeal should be filed with the appeal.
  - We have a two-week turnaround time on appeals; once we have come to a determination we will reach out to your office.
  - Please encourage your members to file appeals now so that any changes made through approved appeals can be processed in enough time for your payroll and for your employees to get their cards before the first of the year.

  Local Ed/Local Gov:
  - As a reminder the Annual Enrollment appeal deadline is 12/15/2017 at 4:30 p.m. Central. All appeals filed through your office should be submitted via Zendesk, through the ABC Appeal Form.
  - Members can fax their appeals to the number provided on the slide (615-741-8196).
  - The appeal would need to address the reason the deadline was missed and any evidence supporting the appeal should be filed with the appeal.
  - We have a two-week turnaround time on appeals; once we have come to a determination we will reach out to your office.
  - Please encourage your members to file appeals now so that any changes made through approved appeals can be processed in enough time for your payroll and for your employees to get their cards before the first of the year.

- **Enrolling and Canceling Due to Open Enrollment:** Not all companies hold their Open Enrollment periods at the same time as the state's Annual Enrollment period. For many of our members enrolling in insurance benefits is a family decision, and if they have a spouse with a different enrollment period it can be hard for them to decide which plans to enroll in and with which employer.
  - If a member enrolls in our plan during the state's Annual Enrollment period and later enrolls as a dependent during his or her spouse's/parent's Open Enrollment, the following rules will apply:
    - **Cancel Request:** We will treat a spouse's/parent's Open Enrollment as a Special Qualifying Event to cancel coverage on our plan. The member would need to submit an **Insurance Cancel Request Application** and proof of newly obtained coverage. The member has a 60-day deadline to cancel.
    - **Enrolling on our Plan:** In the past if our plan member was voluntary removed from coverage during his or her spouse's or parent's Open Enrollment it has not been considered as a Special Qualifying Event to enroll in the state plan because the member did not lose eligibility.
  - After careful consideration, we have revisited this decision and, effective immediately and going forward (but not retroactive before the current Annual Enrollment period),

will now allow those removed during their spouses' or parents' Open Enrollment to enroll on the State plan as a Special Qualifying Event. The member would need to submit an **Enrollment Change Application** and show proof of loss of coverage under another plan. The member has a 60-day deadline to enroll.

- **Enrollment Counts:**
  - **Higher Ed Enrollment Counts:** We want to share the enrollment counts with you from the Annual Enrollment period. The 2017 enrollments are as of 11/1/17. As you can see we had a shift from the Partnership PPOs to the Standard PPO for 2018. For dental, we had a shift from Prepaid to Preferred Dental. For vision, we had an increase in both plans. We had about 1,500 enrollments for our inaugural year of short-term disability.

Operations

Higher Ed - Enrollment Counts

Medical	2017	2018	Difference	%
CDHP	2,072	2,186	114	6%
Partnership/Premier PPO	18,017	16,433	(1,584)	-9%
Standard PPO	5,555	7,362	1,807	33%

Dental	2017	2018	Difference	%
Preferred	13,385	13,904	519	4%
Prepaid	6,751	6,590	(161)	-2%

Vision	2017	2018	Difference	%
Basic	4,270	4,561	291	7%
Expanded	11,558	12,175	617	5%

Disability	2018
Short Term Disability	1,557

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1

  - **Local Ed Enrollment Counts:** We want to share the enrollment counts with you from the Annual Enrollment period. The 2017 enrollments are as of 11/1/17. As you can see we had an increase in all plans except for the Limited PPO for 2018. For dental, we had a decrease in both plans. For vision, we had a slight increase in both plans.

Operations

Local Education - Enrollment Counts

Medical	2017	2018	Difference	%
CDHP	1,499	1,533	34	2%
Partnership/Premier PPO	30,414	31,163	749	2%
Standard PPO	9,512	9,867	355	4%
Limited PPO	8,952	8,284	(668)	-7%

Dental	2017	2018	Difference	%
Preferred	8,449	8,300	(149)	-2%
Prepaid	1,268	1,136	(132)	-10%

Vision	2017	2018	Difference	%
Basic	2,435	2,437	2	0.1%
Expanded	8,360	8,457	97	1%

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PARTNERS FOR HEALTH

2

- **State Enrollment Counts:** We want to share the enrollment counts with you from the Annual Enrollment period. The 2017 enrollments are as of 11/1/17. As you can see we had a shift from the Partnership PPOs to the Standard PPO for 2018. For dental, we had a shift from Prepaid to Preferred Dental. For vision, we had an increase in both plans. We had about 3,000 enrollments for our inaugural year of short-term disability, and close to 5,000 enrollments for long-term disability.

Operations

State - Enrollment Counts

Medical	2017	2018	Difference	%
CDHP	2,855	2,779	(76)	-3%
Partnership/Premier PPO	24,019	21,144	(2,875)	-12%
Standard PPO	8,556	12,087	3,531	41%

Dental	2017	2018	Difference	%
Preferred	18,393	19,251	858	5%
Prepaid	10,813	10,576	(237)	-2%

Vision	2017	2018	Difference	%
Basic	6,339	6,618	279	4%
Expanded	17,110	18,119	1,288	5%

Disability	2018
Short Term	3,029
Long Term	4,952

PARTNERS FOR HEALTH

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- **Local Gov Enrollment Counts:** We want to share the enrollment counts with you from the Annual Enrollment period. The 2017 enrollments are as of 11/1/17. As you can see we had an increase in the CDHP and Premier PPO, and a decrease in the Standard and Limited PPOs for 2018. For dental, we had a slight shift from the Prepaid to the Preferred plan. For vision, we had an increase in both plans.

Operations

Local Government - Enrollment Counts

Medical	2017	2018	Difference	%
CDHP	719	753	34	5%
Partnership/Premier PPO	5,219	5,500	281	5%
Standard PPO	3,160	3,003	(157)	-5%
Limited PPO	6,031	5,995	(36)	-1%

Dental	2017	2018	Difference	%
Preferred	4,189	4,232	43	1%
Prepaid	1,247	1,201	(46)	-4%

Vision	2017	2018	Difference	%
Basic	1,106	1,197	91	8%
Expanded	4,266	4,711	445	10%

PARTNERS FOR HEALTH

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- **Service Center Metrics/Customer Service Rating for October:**
  - We received about 500 less calls this year than last year. Total interactions increased by 1300.

- We take the satisfaction of our customers very seriously. Please complete the survey after you complete your Zendesk ticket.
- If you respond with a "Bad" rating to Zendesk, we will reach out to you to see how we can improve. We would ask that you please rate the service you received from our service center, not if you are unsatisfied with policy. Our satisfaction rate for October was **92.4** percent.

- **State: ESS Rates:** Our September new hire ESS participation rates increased from 89 percent to 90 percent; the YTD rate is 89% percent. We encourage you to require your new employees to use Edison to select their benefits.

- **Edison System Upgrade:** On December 4, 2017, the Financial and Supply Chain Management (FSCM) applications within the Edison system will be upgraded. This will require an **outage of the entire Edison system from Friday, December 1 at 4:00 p.m. Central time through Monday, December 4 at 7:00 a.m. Central time.** General users will be locked out of Edison beginning on Friday, December 1 at 4:00 p.m. The functionality changes resulting from this upgrade are minor and will only impact FSCM Edison Users.
    - **Why do we 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.
    - **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 'View All Articles and Sections.'

    - **NOTE:** The My Links and My Favorites section of the NavBar will be refreshed due to this upgrade. This refresh will require users to recreate their former My Links and/or My Favorites under the NavBar. Please remember to research and document your links and favorites via the NavBar>Navigator, so they can be easily recreated after the upgrade.

      Please click the link below to be directed to a document that will walk you through the process of adding a page within Edison to the My Links and My Favorites section under the NavBar as well as a video that will walk you through the entire process. This will help you recreate your favorites after the upgrade on December 4.

      My Links/My Favorites Document:
      https://upk.edison.tn.gov/EHD/MyFavoritesMyLinks.pdf

      Video Link:
      https://www.youtube.com/embed/TdjFn1Dq1wk?rel=0&modestbranding=1;controls=0%22frameborder=%220%22allowfullscreen

- **Retirement Insurance Applications Reminder:** Retirement insurance applications cannot be submitted via Zendesk. Retirement insurance documents should be directly uploaded into Edison or faxed to 615-741-8196.

OPERATIONS QUESTIONS

- **Higher Ed:** How does BART work?

    - **Answer:** If an Annual Enrollment appeal has been denied and the member requests the appeal be reviewed again due to extenuating circumstances, the **member must write in directly to B.A.R.T.** and include additional information than what was initially submitted for the first appeal. This information should be emailed directly to Takashi Gordon at takashi.gordon@tn.gov or faxed to 615-741-8196. If the member does not have access to email or a fax, they will need to mail the written appeal to:
        - **Benefits Administration**
c/o B.A.R.T.
1900 WRS Tennessee Tower
312 Rosa L. Parks Avenue
Nashville, TN 37243

- **Higher Ed:** So if a spouse's Annual Enrollment (AE) period is in a month and the spouse comes off of the state's coverage, does this count for this year?
    - **Answer:** If their Annual Enrollment has not occurred yet, then it will count for this year (2018). If the spouse's AE is after our AE period this year for 2018, they will be able to make a change.

- **Higher Ed:** Are you planning on not running the Dec. premiums due until after the Edison upgrade?
    - **Answer:** BA will run it the night of Dec. 4 and you can run Dec. 5. We will finalize payroll on Dec. 1. We recommend you run the Collections Applied report on Dec. 4 and the Premiums due report on Dec. 5.

- **Higher Ed:** We normally mail in our retirement docs. Do we need to stop doing that?
    - **Answer:** No, direct mail is still an option as is fax and direct upload.

- **Higher Ed:** I ran into a problem with employees who come to work from other places and it is impossible to get documentation indicating why the coverage ended. It will state the employee's last day, and the date the coverage ended, but there is not a reason. The employee has not terminated or resigned. Is there a way around that?
    - **Answer:** If the letter says the employment ended on this date and the coverage will end and it lists the coverage that they had, that is sufficient. Sometimes all we are getting is a COBRA notice. That is when we will come back to you for more information. What we need is exactly when their coverage ended and why it ended. If you feel the information you have provided is sufficient, you can let us know that. We can also accept a combination of letters like the COBRA notice, separation notice and letter from the carrier. We are currently reviewing this process to determine if any adjustments can be made.

- **Higher Ed:** I have a couple who are married and they are not merging anything – they have separate taxes, they don't have joint bank accounts, etc. How do you get around that when you need to prove joint ownership?
    - **Answer:** Are they filing married filing separately? We do require proof of joint ownership. One option is for the employee to open up a joint savings account. If the employee is filing married filing separately we can use the first page of their tax returns to show they are married but filing single.

- **Higher Ed:** I have an assistant who found an offer of a consumer assistance program on her EOB. She is wondering how to get assistance?

    - **Answer:** The consumer assistance information on the EOBs is required language related to appeal rights for adverse determinations specific to insurance coverage – like where payment is denied for medical services. If a member has a question about an EOB or appeal rights, the best first step is to contact the insurance carrier. Information that appears on the EOB above the consumer assistance paragraph contains details about appeal rights. If a member has already contacted the carrier and still needs assistance, they can contact the U.S. Department of Health and Human Services Insurance Assistance Team, which is a federal-level assistance program. And of course, as the paragraph indicates, they can always call Benefits Administration, and we are happy to help them work through any coverage issues they might be experiencing.
    - Another option is to call Optum at 855-HERE.4.TN. Optum offers help through Worklife Services and the counselors available may be able to help this member find assistance.

- **Higher Ed:** When will the queries for AETP no longer be available?
    - **Answer:** All remain available except for TN_BA219_AETP_INS ELECTIONS as it may not be entirely accurate at this point. You can run all of the other queries.

- **Higher Ed:** Any updates on ACA?
    - **Answer:** No, there are no changes at this point.

- **Local Ed:** If an employee is on the state health plan and is also on Medicaid, can she drop her state health plan if she is being told by DCS that she doesn't need it? She has been on Medicaid since 2016; therefore she's not newly eligible for Medicaid.
    - **Answer:** Please submit the Insurance Cancel Request form and proof of other coverage so that we can review. It is possible that we can cancel her current coverage since she has other insurance. We would need to review it.

- **Local Ed:** Can you explain the disease management update? Is this required?
    - **Answer:** We have changed the structure of the wellness program for Local Ed and Local Gov. So for asthma, COPD, congestive heart failure, coronary artery disease and diabetes. The program is available for members. If they are at high risk, they will be contacted, but it is not required for them to participate. It is just to help them manage their chronic condition.

- **Local Ed:** Should notice to withhold healthcare coverage be sent to Benefits Administration or should they be handled at the district level for Local Education?
    - **Answer:** Are you referring to a medical support order? You would fill out the employer portion and then send it back to the issuing agency.

- **Local Ed:** An employee and her spouse are currently on the state's medical coverage. She will be eligible for Medicare in April. Will he still be able to keep the coverage at that time?
    - **Answer:** Assuming that they are on coverage as active employees then entitlement does not affect a person's eligibility to be on active coverage.
    - **Answer:** He (the spouse) will not be able to stay on coverage if she comes off as an active employee. The employee must remain on active coverage to cover their spouse or children.
        - **Follow up question:** If she decides to enroll in a Medicare supplement through us, does that allow him to stay in the plan?

        - **Answer:** An active employee is not eligible to enroll in POMCO. To be eligible for state Medicare supplement, she must be a retiree receiving a monthly pension from the Tennessee Consolidated Retirement System. So your employee would not be eligible for our Medicare supplement. If she retires and meets the eligibility criteria to continue group health at retirement, she could continue spouse only coverage if she is Medicare eligible.

- **Local Ed:** Regarding the SQE adding/canceling insurance – is this effective at any time of the year or just this time of the year?
    - **Answer:** It would be effective when the Open Enrollment period is for the spouse or parent. Different companies have their enrollment periods at different times of year.

- **Local Ed:** When will be able to see what the retirees picked for 2018 coverage? I still see a lot of Partnership showing as coverage which I know just means the 2018 selection is not loaded.
    - **Answer:** The retirement team is still processing enrollment for 2018 coverage. We will be closing out those events this week, so by Monday (Nov. 20) at the latest, you will be able to see 2018 coverage for retirees.

- **Local Ed:** I have employees calling me about a letter they received saying something about their recent changes at Open Enrollment. These employees did not even sign in to Edison and made no changes?
    - **Answer:** A letter did go out to those who made a change – even those who defaulted from Partnership plans to the Premier PPO.

- **Local Ed:** I had employees confused why their dependents are on the letter (referenced above) even though they are no longer on their health plan. I told them I believe it's just because they were on there at one time, but that they still have access to the EAP through the employee is this correct? On the letter it would say health, EAP and then it listed dependents that use to be on the plan, but it only says EAP. So it may just mean they still have access to EAP?
    - **Answer:** Yes, the rule is if employees are enrolled in medical, their dependents do not have to be enrolled in medical to get EAP. So as long as they're benefits eligible dependents, they still have access to EAP. Not all dependents are going to show as enrolled in EAP. If they are not on the file, we assume that they are covered. You can send an email to Melissa Ward Melissa.Ward@optum.com if you have questions about EAP eligibility.

- **Local Ed:** Some queries that I pulled included my retirees. Should I not use those since the retirement team was still working on updating the changes?
    - **Answer:** The queries are okay, but you may have new enrollment changes that show up next week. We recommend rerunning the queries next week as all of the AE changes (except for any outstanding appeals) will be keyed by then.

- **Local Ed:** We have two ABCs, including myself, who enroll employees and make changes, etc. However, our emails from BA come to our HR director and we are not copied, creating some lag in turnaround response. Can we change that?
    - **Answer:** Yes, you can change that. Just submit a Zendesk ticket with the changes and we will get that updated.

- **State:** What should we tell employees about the 2018 wellness program? If they ask about the delay?

    - **Answer:** We do not have anything to share at this point. When we have information available, we will share with the ABCs and members.

- **State:** I just expect that someone will ask me about whether or not they have the opportunity to get their money still (regarding the wellness program)?
    - **Answer:** And that is why we are working on the Bridge Contract with Sharecare, formerly Healthways as a plan B so that state and higher education members will still have the opportunity to earn the incentive.

- **State:** I have emailed Cigna twice about 2018 Insurance materials and I have not gotten a response from them. Can you please give me the contact information so I can make sure that I am sending it to the correct contact?
    - **Answer:** Celeste Sims is the contact with Cigna for packets and materials. She can be reached at 615.595.3134 or celeste.sims@cigna.com

- **State:** Could you repeat the process for the limited time bridge contract again please?
    - **Answer:** BA has recommended and sought approval from the Insurance Committee that we begin the approval process for a limited-time bridge contract with Sharecare (formerly Healthways). This would require a successful negotiation with Sharecare as well as approval by both Central Procurement and the Comptroller's office.

- **State:** With Cigna Dental, I have an employee who tried to contact Cigna to elect their dentist, but she said they had not received enrollee information from the state. When should that be sent over?
    - **Answer:** The selection of the general dentist can still be sent in to Cigna. In the back of the member handbook, there is a form the employee or family member can complete and send in. Cigna will hold the form until the enrollment is received from BA.

- **Local Gov:** If an employee just found out they are losing coverage in December, would we treat this as a qualifying event?
    - **Answer:** Yes, if they are losing coverage then that would be a qualifying event. We would just need proof of losing the coverage along with the enrollment application.

- **Local Gov:** Will the SQE form be updated with this new option?
    - **Answer:** We haven't gotten to that form yet, but we will look at it to see if we need to add it.

- **Local Gov:** The 60-day deadline is from the spouse enrollment or our end of enrollment?
    - **Answer:** The 60 days is from when the employee loses the other coverage.

- **Local Gov:** I have an employee who is covered with her spouse through the marketplace. Her spouse will be eligible for Medicare in March and they wish to drop their marketplace coverage. Can she apply with us?
    - **Answer:** Yes, becoming eligible for Medicare is a qualifying event.

- **Local Gov:** We have an employee whose daughter's insurance is going up significantly in 2018 and he wants to add her to his health insurance. Does this mean that he can do that now, even though OE is over? She is on the Marketplace.

    - **Answer:** If she has the option to drop her coverage during her OE then he can add her to his coverage. To qualify to make a change has to be due to OE or another qualifying event. We can have someone get back to you directly about this.

- **Local Gov:** Who do I need to call or email to clarify this (Open Enrollment) for one of our employees?
    - **Answer:** Any questions about this you can enter a Zendesk ticket.

Combined ABC Conference Call Notes
Higher Education, Local Education, State and Local Government
December 12, 2017

Materials and Communications

- **2018 Monthly ABC Conference Call Schedule:** The 2018 Monthly ABC conference call schedule has been posted to the **ABC webpage** under Conference Call Notes.
- **Holiday Hours:** We included this information in the November 22 ABC email. State offices and the Benefits Administration service center will be **closed** on **Monday, December 25 and Tuesday, December 26** for the Christmas holiday, as well as closed on **Monday, January 1 and Tuesday, January 2** for the New Year's holiday.
  - Additionally, we've included the vendors' holiday hours. Please note, for **Cigna**, these are the office hours – the call center is open 24/7.

Healthways Holiday Schedule		
Holiday	**Date**	**Status**
Christmas Day	Monday, December 25	Closed
Day-after Christmas	Tuesday, December 26	Closed
New Year's Day	Monday, January 1	Closed

BCBS Holiday Closure Schedule		
Holiday	**Date**	**Status**
Christmas Day	Monday, December 25	Closed
Day-after Christmas	Tuesday, December 26	Closed
New Year's Day	Monday, January 1	Closed

Cigna Holiday Schedule – office hours – Call Center is open 24/7		
Holiday	**Date**	**Status**
Christmas Day	Monday, December 25	Closed
New Year's Day	Monday, January 1	Closed

MetLife Holiday Schedule		
Holiday	**Date Observed**	**Closing Time**
Christmas Eve	Sunday, 12/24/2017	Closed
Christmas	Monday, 12/25/2017	Closed
New Year's Eve	Sunday, 12/31/2017	Closed
New Year's Day	Monday 1/1/2018	Closed

PayFlex Holiday Closure Schedule:		
Holiday	**Date**	**Status**
Christmas Day	Monday, December 25	Closed
New Year's Day	Monday, January 1	Closed

CVS/caremark Call Center:
Regular business hours: open 7 days a week, 24 hours a day.

Optum:
Regular business hours: open 24 hours a day, 7 days a week.

EyeMed Call Center (times are Central time):			
Date	**Open**	**Closed**	**Open & Closed Hours**
Friday (12/22)	x		Normal hours 7:30 a.m. to 11 p.m.
Saturday (12/23)	x		Normal hours 7:30 a.m. to 11 p.m.
Sunday - Christmas Eve (12/24)	x		12 p.m. to 6 p.m. (abbreviated)
Monday - Christmas Day (12/25)		x	Closed all day
Friday (12/29)	x		Normal hours 7:30 a.m. to 11 p.m.
Saturday (12/30)	x		Normal hours 7:30 a.m. to 11 p.m.
Sunday - New Year's Eve (12/31)	x		12 p.m. to 6 p.m. (abbreviated)
Monday - New Year's Day (1/1)	x		12 p.m. to 6 p.m. (abbreviated)

Davis Vision Holiday Schedule (times are EST):		
Holiday	**Date**	**Status**
	Friday, December 22	8 a.m. – 8 p.m. (reduced hours)
	Saturday, December 23	9 a.m. – 4 p.m. (normal hours)
Christmas Eve	Sunday, December 24	Closed
Christmas Day	Monday, December 25	Closed
	Friday, December 29	8 a.m. – 8 p.m. (reduced hours)
	Saturday, December 30	9 a.m. – 4 p.m. (normal hours)
New Year's Eve	Sunday, December 31	12 p.m. – 4 p.m. (normal hours)
New Year's Day	Monday, January 1	Closed

Minnesota Life Holiday Schedule:		
Holiday	**Date**	**Status**
Christmas Day	Monday, December 25	Closed
New Year's Day	Monday, January 1	Closed

MedAmerica Holiday Schedule:		
Holiday	**Date**	**Status**
Christmas Day	Monday, December 25	Closed
New Year's Day	Monday, January 1	Closed

- **CVS/caremark ID Cards and Welcome Kits:** The information we are sharing with you about pharmacy Welcome Kits and ID cards is slightly different than what was printed in the 2018 Decision Guide.
  - All plan members who are newly enrolled with a 1/1/18 effective date (i.e., those who have never had coverage prior to 1/1/18) will receive a Welcome Kit and ID card.
  - Plan members currently enrolled and who change plans for 2018 will receive a Welcome Kit **and an ID card. This includes members who were automatically transferred from any 2017 Partnership plan** (Partnership PPO to Premier PPO or Wellness HealthSavings CDHP to CDHP/HSA).
  - Plan members **currently enrolled** who do not change plans will not receive anything - they will not get a Welcome Kit or an ID card.
  - Caremark's systems view the Welcome Kit and ID card as one and the same. Therefore, if a Welcome Kit is triggered an ID card will also mail. Therefore, members in either of the first two categories will receive both a Welcome Kit and an ID card.

- **2018 New Hire Presentations:** We have posted the 2018 New Hire PowerPoint presentations for your use on the **ABC webpage** by plan. You will need to download and save the presentation in order for the graphics to appear correctly in the PPT. We have also posted a PDF version with notes for your employees to use at their convenience.
    - **Higher Ed/State:** There is a presentation for enrollment/health insurance and a separate presentation just for voluntary benefits. **Note: We revised the voluntary benefits presentation on 12/15/17, and it has been posted. Please use the revised version.**
    - **All plans:** We will have wellness program changes. When we have more information to share, we will revise the presentations and will let you know when they have been posted.
    - We do plan on creating a version with audio as soon as all edits are complete.

- **tn.gov New Content Management System:** Crystal Mallery, print and digital publications manager, shared changes to the state's website and URL, tn.gov, and how this impacts us.
    - Any letters that you send out with our URL, www.tn.gov/finance/fa-benefits, will need to be updated. Or, if you email employees with this information make sure you send the right web address.
    - We have attached the presentation slides about the tn.gov content management system changes which include the impacted webpages.

NEW tn.gov CONTENT MANAGEMENT SYSTEM/URL QUESTIONS
- **Higher Ed:** Does the change affect the Zendesk website?
    - **Answer:** No, it did not affect Zendesk or Edison.

COMMUNICATIONS QUESTIONS
- **Local Gov:** If you switched from the Partnership PPO to Premier PPO for 1/1/17, will you get a new CVS card?
    - **Answer:** Yes, for 1/1/2018 coverage.

Benefits
- **Long-term Care Insurance Final Reminder that Plan Ends 12/31/17:** Don't forget that the contract with MedAmerica for long-term care insurance ends on 12/31/17 and will close to new applicants permanently. Any eligible employee or eligible dependent who is enrolled effective 12/31/17 can keep their coverage as long as their premium is paid in a timely manner. **Please be sure your employees are aware of this since there will not be a replacement plan for 2018.**
    - Here are four things eligible individuals interested in enrolling can do:
        1. Go to **www.ltc-tn.com** for rates, enrollment information and online applications; submit electronic application no later than December 31.
        2. Schedule a personal consultation at **www.gotltci.com/ltciconsultations/ltc-tn**
        3. Email Lawrence Vivenzio for help at **Lawrence@ltcconsultants.com**
        4. Mail paper application with post-mark on or before December 31.
    - **IMPORTANT:** After the group contract with MedAmerica ends on 12/31/17, *LTC Consultants*, a third-party long-term care insurance firm, will be pleased to continue helping your employees and their families with long-term care insurance in the open market.
    - **https://www.gotltci.com/contact-us/** or **Lawrence@ltcconsultants.com** 615-590-0300, X 120

LONG-TERM CARE INSURANCE QUESTIONS
- **Higher Ed:** The payroll deduction for the MedAmerica premium should end as of 11/30/2017?

        - **Answer:** The state process to deduct premiums has ended and there will be no more state process to collect long-term care premiums. The state process that ended in November was for December coverage. It is understood that your higher education payroll system deducts on the same schedule as the state's system. Therefore, the premium you deducted out of your system should have been for December. There should be no more deductions out of payroll as of now.

    - **Higher Ed:** Did MedAmerica send participants letters?
        - **Answer:** MedAmerica will be sending a letter to payroll deduct members in the next few days as a reminder to select to a different pay option. The MedAmerica letter will be similar to the letter BA sent advising members that payroll deductions were ending. We also sent a letter as a courtesy to members who do not pay by payroll deduction to advise them that the state's contract for long-term care insurance coverage would be ending, but that the coverage would continue directly with MedAmerica.

- **Higher Ed/State: Upcoming Disability Insurance Claims Contacts Training:** The Tennessee Department of Human Resources is working with each agency of state government to identify a person and a backup in their agency to serve as claims contacts for MetLife on disability claims. TBR and UT representatives have already named their claims contacts.
    - Training for these contacts will be via a webinar on January 19. State claims contacts training will be from 9:00 a.m. – 10:30 a.m., Central time, and Higher Education claims contacts training will be from 1:00 p.m. – 2:30 p.m., Central time. An invitation for the webinar will be sent soon.

  DISABILITY AND CLAIMS CONTACTS QUESTIONS
    - **Higher Ed:** Will the disability training be recorded for future use?
        - **Answer:** Yes, that is our intention so that if a claims contact changes next year or sometime in the future, we can use the recording to train the new contact.

    - **Higher Ed:** Does Higher Ed set-up all Short-Term Disability employee deductions using the M1A code for all exempt and non-exempt employees since the rates are the same across the board? The M2A code is also listed for non-exempt employees?
        - **Answer:** There is no distinction between exempt and non-exempt for the disability premiums.

    - **State:** Will you record the training (claims contacts)?
        - **Answer:** Yes.

    - **State:** To become a (claims) contact, do you only enroll in the training?
        - **Answer:** No, the human resource officers for each agency will be advising the Tennessee Department of Human Resources of the agency contact and backup. TN DOHR will let BA know who has been chosen. You need to talk to your HRO about who in your agency is going to be the claims contact for your agency.

- **The Tennessee Plan (Supplemental Medical Insurance) Name Change:** It has been common to refer to our insurance plan whose claims are processed by POMCO as a Medicare Supplement Plan. Actually, our plan is not a publicly issued Medicare Supplement plan subject to federal rules because our plan is an employer sponsored health (medical) plan. Tennessee Code Annotated specifies that supplemental medical insurance for retirees with Medicare shall be made available. Therefore, we are transitioning away from the term "Medicare Supplement." The official name of our plan has been and will continue to be "The Tennessee Plan." We will where possible use the label "The Tennessee Plan (Supplemental Medical Insurance for Retirees with Medicare) or just "The Tennessee Plan." The POMCO brochure and handbook are being revised for 2018 to reflect this name change. The Tennessee Plan is still comparable to a National Association of Insurance Commissioner's Model D Medigap Plan.

- **Higher Ed:** If retirees want The Tennessee Plan, are they also allowed and would it be advantageous to enroll in a Medicare supplemental plan as well?
  - **Answer:** It's allowed, but it would not be advantageous. If a person enrolls in a Medicare Advantage plan, our Tennessee plan will pay zero. Only one plan will pay the 20% that Medicare leaves behind. They both (The Tennessee Plan and the Medicare Supplement) will not pay the 20%. There would be nothing for the second plan to coordinate with, so it would be better for the member to choose one or the other.

- **Higher Ed:** Is the Tennessee Plan available or will it be available for new hires after 2015?
  - **Answer:** The Tennessee Plan is only available for retirees first hired as employees before July 1, 2015. It is not available for employees who date of first hire is on or after July 1, 2015.

- **Higher Ed:** What about Medicare A (and a Medicare Supplement and The Tennessee Plan)?
  - **Answer:** Medicare Part A is one of the parts that The Tennessee Plan will help pay, so there is not going to be anything left for the Medicare Supplement plan to pay. We would pay our part; there would not be any reason for anyone to have a Medicare Advantage plan or a Medicare Supplement plan in addition to The Tennessee Plan.

HIPAA

- **HIPAA Training Deadline:** If you still have not completed your HIPAA training, you have until **Dec. 30**. Make sure you enroll in the correct HIPAA class. If you took the course in 2016, you will receive a message **"You have already completed this class on"** proceed anyway. Edison will record every year you have completed the course.
  - The course takes approximately 30 minutes. There is a 10 question quiz at the end of the course. You must make at least an 80% otherwise you will be required to take the quiz again. The path to enroll is below:
  - **NAV BAR >Navigator>ELM>Learning Home>Search for Learning HIPAA> HIPAA Annual Training (HIPA2016)> BA_ABC_HIPAA_Higher Education or BA_ABC_HIPAA_Local Education or BA_ABC_HIPAA_Local Govt. >Enroll**
    - **State ABCs:** You will register for the BA_ABC_HIPAA Local Education course.
  - As a reminder, BA has developed a new video to help you enroll in the course. Go to the ParTNers for Health YouTube page (you can find it on the ParTNers homepage) and click on the video **How to Enroll in HIPAA Training in Edison:** **youtube.com/partnersforhealthtn**

HIPAA QUESTIONS

- **Local Gov:** What if we weren't on line as of Nov 15? I am new and want to take the training for HIPAA.
  - **Answer:** We will contact you directly to set up the training, or you can submit a Zendesk ticket and we will get back to you.

- **Local Gov:** I am pretty sure I took the HIPAA Training, but is there a way to be certain?
    - **Answer:** We can look it up for you. If you are not sure if you have completed the training, you can submit a Zendesk ticket and we will route it to Chanda Rainey to check.

Operations

- **Higher Ed/Local Ed/Local Gov: PPACA (Affordable Care Act) Report Filing Deadlines and Form Information:**
    - 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 January 31
        - File 1094-B and 1095-B with the IRS by February 28 (paper) or April 2 (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 January 31
        - File 1095-C and 1094-C with the IRS by February 28 (paper) or April 2 (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.
    - This report will show you active employees and retirees (if your agency has any).
    - If your agency has anyone enrolled in COBRA, you will receive a **revised** list from Benefits Administration next week. We will send emails going forward with any new COBRA enrollees since COBRA can be backdated a few months.
    - We encourage you to run your PPACA report again in January and February to pick up any late enrollments due to SQE for 2017.
    - 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**
    - The deadline for sending 1095 forms to employees is 1/31/18.
    - 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.

- **Customer Satisfaction**
    - **November 2017:**
        - Tickets via Chat: 66
        - Tickets via Email: 474
        - Tickets via Self-Service: 2,585
        - Tickets via Phone: 6,579
        - Total: 9,704

      Satisfaction Score: 95.6%
    - **November 2016:**
        - Tickets via Email: 268

        - Tickets via Self-Service: 1,978
        - Tickets via Phone: 6,437
        - Total: 8,683

        Satisfaction Score: 83.6%

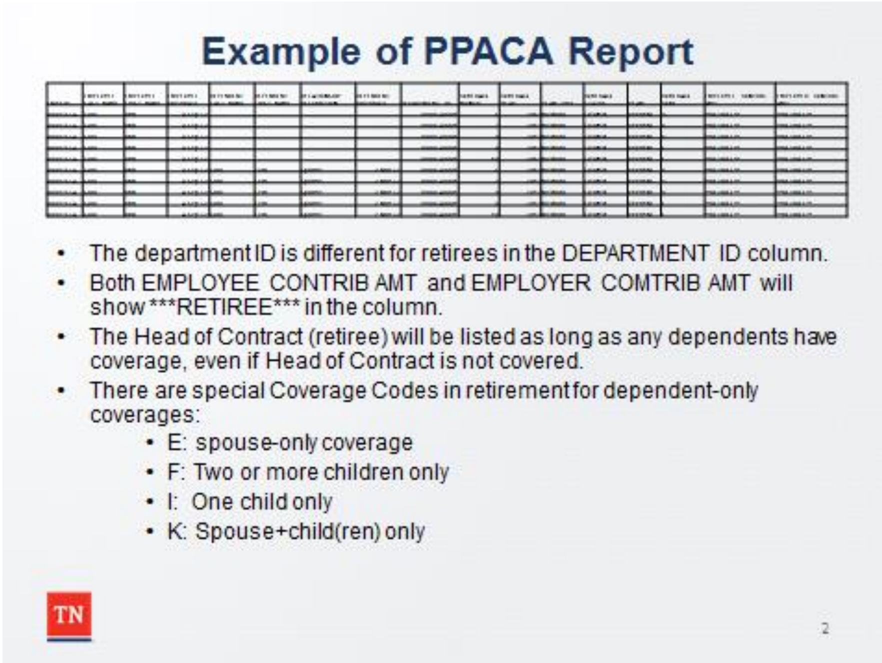
- **Customer Service Rating for November:**
    - We received about the same number as calls this year as we did last November. Total interactions increased by about 1,000.
    - We take the satisfaction of our customers very seriously. Please complete the survey after you complete your Zendesk ticket.
      If you respond with a “Bad” rating to Zendesk, we will reach out to you to see how we can improve. We would ask that you please rate the service you received from our service center, not if you are unsatisfied with policy. Our satisfaction rate for November was **96.6** percent, up from 83.6% last November

- **State: October New Hire information**
    - ESS % for October: 86%
    - YTD: 89%
    - Our October new hire ESS participation rates decreased to 86 percent; the YTD rate remains at 89% percent. We encourage you to require your new employees to use Edison to select their benefits.

- **Zendesk Updates**
    - If you have not yet used Zendesk to send in enrollment forms or documents, we would encourage you to start doing so. In the near future, we will be removing the document upload page in Edison and will only be accepting documents from ABCs through Zendesk, or by mail or fax. Zendesk is the preferred method for submitting documents. Employees will still be able to upload documents directly in Edison. We do not have a specific date for this yet, and will share it once we determine when that will happen. Our goal is to make this change by the end of January. We will also be routing all of the faxes and mail into Zendesk. We hope to be doing this by the first of the year. We have scheduled several Zendesk trainings in January if you need a refresher.

- **Retirement Zendesk Updates**
    - Effective tomorrow, we will begin accepting retirement forms through Zendesk. There is a form specifically for retirement uploads. Please use that form if you are uploading retiree information so that it gets routed to the appropriate queue. You may continue to upload documents in Edison, fax them, or mail them. The preferred method is through Zendesk. The benefit of using Zendesk is that you will receive a notification when we receive the application or document, and you will receive a notification when it has been keyed.

    - **Higher Ed/Local Ed/Local Gov: Retiree Information on PPACA Reports:**
    - **Note: Local Ed/Local Gov:** Not all agencies have retirees on group health. If your agency has not had retirees on group health, it does not have the special retiree department ID number.
    - The retirees are listed on the same PPACA report as employees.
    - At least one ABC at each agency has been given security access to retiree records.
    - The ABC given security access to retirees must be the ABC running the PPACA report for the retirees to be listed on the report.
    - There are ways to tell the retiree records from the employee records on the report.



- **Upcoming ABC Training**
  - **New ABC Training:**
    - December 13: 9-11 a.m. Central time - Local Ed Session 1
    - December 13: 1-3 p.m. Central time - State/Higher Ed Session 1
    - December 14: 9-11 a.m. Central time - Local Gov Session 1
    - December 14: 1-3 p.m. Central time - All Session 2

  - **ABC Workshop:**
    - Uploading Documents in Zendesk
    - January 10: 9-10 a.m. & 1-2 p.m. Central time
    - January 11: 9-10 a.m. & 1-2 p.m. Central time
    - January 16: 9-10 a.m. & 1-2 p.m. Central time
    - January 18: 9-10 a.m. & 1-2 p.m. Central time

  - **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.

OPERATIONS QUESTIONS

- **Higher Ed:** When you upload the documents in Zendesk, I have documents that I can't see. What is the time frame for documents to appear? If it is taking longer than a week, should I send in another Zendesk ticket?
  - **Answer:** The backlog runs about a week behind, but everything should be in there now on the #1 tab or on the #5 tab. If it has been longer than a week, you can always submit another Zendesk ticket. Note: When you submit documents via Zendesk you will get an initial response that the document has been received. Once we have processed the application you will get a second notification that it's complete. From the complete date it will take 2-5 days to appear in Edison as backlog under the scan documents tab.

- **Higher Ed:** For retirement forms through Zendesk, are you referring to the insurance application and/or the TCRS retirement application?
  - **Answer:** We are talking only about the insurance application. TCRS does not use Zendesk and you would need to continue to submit your TCRS applications as instructed. BA gets insurance applications and TCRS receives information about pensions.

- **Higher Ed:** At one time we were to send the Application to Continue Insurance at Retirement with the TCRS retirement application, has that changed?
  - **Answer:** That changed several years ago. TCRS should only receive the pension application. BA receives the insurance application. You will have to send the pension application to TCRS. BA has access to the TCRS pension system to verify a member's years of service.

- **Higher Ed:** I have always included MedAmerica deductions for our higher education employees using the same rule that applies to health, dental and vision plan deductions, which are paid one month in advance of coverage. I plan to end all MedAmerica LTC deductions prior to processing December 2017 payroll. The only voluntary benefit deductions that are for current month coverage is our Long-Term Disability plans not administered through Edison. Is that correct?
  - **Answer:** Yes, for long-term care you won't need to deduct a premium for December, the November premium covered December coverage.

- **Higher Ed:** What about death claims?
  - **Answer:** We already accept death claims through Zendesk.

- **Higher Ed:** I have a new employee who has a spouse who does not have a SSN (not a citizen). Is she able to add him?
  - **Answer:** We already have a default SSN for those dependents who do not have a SSN or will not be issued a SSN. We will assign a SSN for this person.
  - **Follow up question:** Do I need to put a note on the enrollment?
  - **Answer:** Yes, and we will as well.

- **Higher Ed:** I received the spreadsheet with the Short Term Disability AETP enrollees on it. Will the upcoming Premiums Due reports have Short Term Disability enrollees on it?
  - **Answer:** No, the next report will not have Short Term Disability enrollments on it. The Edison team is still working on getting them added. We plan to have them added by the end of the month so that they will show on your Collections Applied report for January.

- **Higher Ed:** Sometimes when I'm putting a new employee in ehire, and then he or she has changed their mind about coverage, you can't go back and update it. Do you have to send the form in? When I go back in, it is asking me to rehire the person and it is coming up with multiple approvers?
  - **Answer:** You do not want to go back through the hire process again and rehire the employee. You can send in a Zendesk ticket or chat and we will reopen the hire event and you can go back in and make changes. If you create a new hire again, it will create issues.

- **Higher Ed:** When will the premiums due report be available with the updated optional (voluntary) term life premiums?
  - **Answer:** The premiums due report that includes voluntary term life insurance premiums was available on December 13 with the term life insurance deductions.

- **Higher Ed:** In regard to Short Term Disability, will employees get information that they are enrolled in it?
  - **Answer:** Yes, MetLife will mail a letter to enrolled members. The letter won't indicate the plan, but it will welcome the members with contact information and refer them to their enrollment confirmation statement.

- **Local Ed:** How soon can we run the PPACA report to capture all 12 months of coverage?
  - **Answer:** You can run it now to capture all 12 months, but if there are any additional changes, you will need to run it again. To capture the majority of employees, you can run it now.

- **Local Ed:** Will we be able to upload actual retirement applications?
  - **Answer:** For insurance applications yes, but not for the TCRS pension application, that is separate and handled through TCRS. TCRS does not use Edison and this process is not changing.

- **Local Ed:** Please include instructions for running the PPACA report in the notes.
  - **Answer:** The instructions are very detailed and are located on the **ABC webpage**, under the training section. Here is a link to the instructions:
    - **https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/abc_run_ppaca.pdf**

- **State:** Are 1099s going to be mailed by 1/31 also?
  - **Answer:** Per Darlene Russo with PayFlex, 1099s for HSAs will be mailed by 1/31/18 for 2017.

- **Local Gov:** If we don't know who has (security) access (for retiree records) how do we find out?
  - **Answer:** If you have a question you can submit a Zendesk ticket, and we can look it up.

- **Local Gov:** Which type of documents do you want through Zendesk?
  - **Answer:** We will accept pretty much anything through Zendesk. There is a drop down by type you can upload, and you will need to select the appropriate type. This is for the retirement insurance application and not the TCRS pension applications. Pension applications are sent to TCRS.

- **Local Gov:** I am with a new agency for this plan. If any assistance e-mails have gone out about PPACA, please resend.
  - **Answer:** We have not sent out any emails this year. As you are a new agency, you won't have to do any PPACA reporting **under the State plan** until 2019. You would need to check with your current insurance about what needs to happen for your 2017 reporting. For existing agencies, if you have questions about the process, you can review the call notes from the previous years about PPACA.

- **Local Gov:** Where are instructions in Zendesk for employees who enrolled and their plan option?
  - **Answer:** It is not available in Zendesk yet, but there is information on the **ABC webpage** under the Training section.

- **Local Gov:** Are we supposed to send the marketplace letters to all employees or just new hires?
  - **Answer:** All new hires going forward. When the marketplace letter first came out, it was given to all employees, so all current employees should have it.