Materials and Communications

- State/Higher Ed: Updated COBRA Premium Charts: We posted updated separate premium charts for COBRA participants for active employees and retirees in the State Plan (only). This is due to the OPEB trust for retirees.
 - Premium charts are found on the ParTNers for Health website on the Premiums page:
 State Plan COBRA Participants Active
 State Plan COBRA Participants Retirees
- State (only): Updated Pre-Enrollment Benefits Information Letter: We have updated the digital letter you can send to your new hires prior to their first day of employment so they can learn about their benefits. The updated document is found on the <u>ABC webpage</u>, under State plan titled Pre-Enrollment Benefits Information.
- State/Higher Ed: Disability W2s: MetLife will be mailing a letter and W2 to each insured who received disability benefit payments in calendar year 2018. The letters and W2's will be mailed on January 16, 2019. The W2's are being issued to benefit recipients for their records. If employees have tax questions, they should consult with their tax advisors.
- Cigna and Tenet Healthcare Reach Agreement: In September of last year, we told you that Cigna and Tenet Healthcare were terminating their relationship for 2019. This has changed and the organizations have reached an agreement on a new commercial contract. This means your employees will continue to benefit from Cigna's in-network rates when they receive care at a Tenet facility or from a Tenet provider.
 - We have removed the addendums we had posted on the ParTNers for Health website that listed Tenet facilities that would be out-of-network as these facilities will now be in-network.
 - Last Friday, we sent updated Cigna LocalPlus and Cigna OAP hospital lists that you
 can share with your members. The lists are also found on the ParTNers for Health
 website on the <u>Carrier Information page</u>.
 - O Cigna is in the process of updating their online directories to reflect this change. If your members have questions about what facilities are in-network, the Cigna customer service advocates are prepared to help your employees 24x7. If your employees have any questions, they can call the number on their Cigna ID card or 1.800.244.6224.
- New Employee Resource Document: We have created a new one page document found on the For New Employees webpage under Resources titled New Employee Enrollment Help Sheet. The document includes links to Edison, videos, premium charts, medical plan comparison charts and ID/debit card information. You can use this as a resource and share it with your new hires:
 - o https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/new employee resource enrollment help.pdf

Vendor Presentation

• **Diabetes Prevention Program: BlueCross BlueShield – Retrofit:** Rhonda Bynum with BlueCross BlueShield presented information about a new online diabetes prevention program for BCBST members called Retrofit.

- Local Ed: Is there a charge for our participants with this program (BlueCross BlueShield Retrofit)?
 - **Answer:** No, if eligible, this is covered under preventive benefits for members. The same is true for the Cigna's Omada diabetes prevention program, and if members qualify, they can participate at no charge.
- o **Local Gov:** So everyone has to register (for the BCBST-Retrofit program)? I misunderstood. I thought everyone would get a mailer to register, and if we didn't register, we would receive an email reminding us to register?

Operations

- **Higher Ed/State: Transfers from State to Higher Ed:** Tameka Allen presented information about transfers:
 - We have had a few questions surrounding transfers from ST to HED. It's been a while since we discussed this subject and with it being the beginning of the year we felt this would be a good time to do a refresher and clear up any questions. If you recall in September of 2017, I reviewed plan document changes that identified State and HED as separate employer groups. These changes ended the requirement of continuation of coverage as a transfer from ST to HED or HED to ST. Since we now identified the two groups as separate employers group the completion of one full calendar month when transferring between the groups was now required. What was not well communicated in the training was that as the gaining agency this requirement could be waived. These sections of the Plan Document provide helpful information:
 - Section 1.17 provides the definition of separate employer groups.
 - Section 2.03 defines the effective date of coverage and the eligibility period of one full calendar month.
 - O As the gaining agency if you would like to waive the one full calendar month requirement you are permitted to do so by submitting a Zendesk ticket asking that we waive the requirement. Please submit an enrollment change form as well, as we will need to manually update the coverage. The member will not be eligible to make changes to coverages since the exception is being made to treat this as a transfer instead of a rehire.
- **State: ePAF Terminations:** Gena Bishop presented information about ePAF and separations. We have included the slides from her presentation below, and the call notes will be posted on the ABC webpage.

PPACA and Separations (state only)

- Once a medical insurance premium is taken from an employee's paycheck or bank account, the state can no longer retroactively cancel coverage
- Agency and the employee will be billed for the extra month of coverage



1

Separations (state only)

- REMINDER: Initiate the ePAF for separating employees as soon as you know they are leaving
- ePAF can be held at the agency level without being approved and it will still terminate the insurance
- NEW: ePAF must stay in a submitted status overnight before placing on hold

We previously advised the ePAF could be placed immediately on hold and insurance would terminate. We have discovered that is not currently the case. There is a process that runs overnight to create the termination event. We are currently working on a fix for this but until then, please remember in order for benefits to terminate correctly the ePAF MUST stay in a submitted status overnight. Please check to make sure the insurance was properly terminated.



2

Separations (state only)

- If the insurance was not properly terminated, make a Zendesk ticket for Billing and a billing specialist will reach out to you.
- The last day an ePAF can be entered in order for deductions to be stopped is two days before the end of the month payroll confirms. This date changes each month. For example in January, payroll confirms on the 24th. The last day an ePAF can be submitted for February 1st insurance terminations will be January 22nd.
- If the ePAF is entered after the designated cut off date, insurance will automatically terminate at the end of the month in which the employee's employment ends. The extension of insurance is done manually after the fact, which may cause service disruptions for the employee.
- If an employee works the last day of the month and the ePAF date is the
 first day of the following month, the employee will have benefits
 through that month. For example, employee works or has paid leave on
 1/31, ePAF date is 2/1, benefits will terminate effective 3/1.



3

• PPACA Reporting Updates:

- Higher Ed/Local Ed/Local Gov: PPACA (Affordable Care Act) Report Filing Deadlines and Form Information:
 - In December, the IRS extended the upcoming ACA employer reporting deadline. This extension applies to the due date for furnishing Forms 1095-C (or 1095-B, if applicable) to employees to March 4, 2019, (previously January 31, 2019). This extension is automatic; employers do not need to file a request with the IRS.
 - The due date for filing Forms 1095-C (or 1095-B, if applicable) electronically with the IRS remains April 1, 2019, (February 28, 2019 if filing on paper).
 - Employees can rely on information from their employers other than Forms 1095-C when completing their individual 2018 tax returns, including regarding eligibility for premium tax credits or having minimum essential coverage. Employees do not have to send this information to the IRS with their individual tax filings.
 - Employers with less than 50 employees need to complete the 1094-B (IRS form) and 1095-B (employee) forms.
 - Provide 1095-B to responsible individuals by March 4
 - File 1094-B and 1095-B with the IRS by February 28 (paper) or April 1 (e-file)
 - Employers with more than 50 employees need to complete the 1094-C (IRS form) and 1095-C (employee) forms.
 - Provide 1095-C to full-time employees by March 4
 - File 1095-C and 1094-C with the IRS by February 28 (paper) or April 1 (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).
- We encourage you to run your PPACA report again in January and February to pick up any late enrollments due to SQE for 2018.
- Since the State plan is self-insured, you are considered to be self-insured and must do your reporting. The vendors do not report for self-insured plans.
- Employees do not have to have their 1095-C to file their taxes, but you are required to send it to them.

State: PPACA Updates

- In December, the IRS extended the upcoming ACA employer reporting deadline. This extension applies to the due date for furnishing Form 1095-C to employees to March 4, 2019, (previously January 31, 2019). All employees should now receive their 1095-C in the mail by March 4, 2019. They will receive it sooner if they have elected to receive an electronic communication in Edison. We will be sending out an email to all state employees reminding them of this opportunity to receive their form electronically. As a reminder, employees do not have to send this form to the IRS with their individual tax filings.
- If employees elected to receive their 1095 electronically last year, they will receive it electronically this year as well.
- Any employees who elected to receive it electronically but have since terminated will be updated so that they receive a paper copy in the mail.

• Service Center Metrics/Customer Service Rating

December 2018:

■ Tickets via Email: 996

■ Tickets via Self-Service: 2,900

Tickets via Phone: 5,044Tickets via Chat: 130

■ Total: 9,070

■ Satisfaction Score: 95.9%

December 2017:

■ Tickets via Email: 662

■ Tickets via Self-Service: 2,633

■ Tickets via Phone: 6,025

Tickets via Chat: 56

■ Total: 9,376

Satisfaction Score: 89.8%

- We received about 1,000 less calls this year as compared to last December, and the number of tickets via email, self-service, and chat went up. Total interactions stayed about the same.
- We take the satisfaction of our customers very seriously. Please complete the survey after your Zendesk ticket is resolved.
- o If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy. Our satisfaction rate for December was 95.9% percent, up from 89.8% last December.

• State: ESS Participation Rates:

- o ESS % for November: 93%
- o YTD: 92%

• New ABC Training:

- o January 23: Local Education: 9-11 a.m. Central time
- o January 23: State/Higher Education: 1-3 p.m. Central time
- o January 24: Local Government: 9-11 a.m. Central time
- o January 24: Session 2 All Entities 1-3 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.

WELLNESS PROGRAM QUESTIONS

- o **Higher Ed:** With the ActiveHealth program incentive, will the incentives be sent to higher education monthly or quarterly?
 - **Answer:** They will be sent monthly.
- O Higher Ed: We are confused about the ActiveHealth website. If you go on the brochure it has the myactivehealth.com/wellnessTN as the website URL to enter. When you enter this and you go to the bottom blue site and type in the URL, it takes you in a loop back to the main page go.activehealth.com/wellnesstn. We cannot get logged in. Are we messing this up?
 - **Answer:** We discovered after the call that with some browsers, if our members omitted the "www" in front of the URL www.myactivehealth.com/wellnesstn, they would have seen MyActiveHealth, but not our custom page, which is why the "Create Account" link was missing as well as the ParTNers for Health logo.

 ActiveHealth has successfully re-directed the URL without the www in front of the URL above so that both now go to the correct page to avoid any confusion for our members.

OPERATIONS QUESTIONS

- o **Higher Ed:** Regarding transfers, we don't always know what the person is enrolled in at the prior agency and they may not remember what they have.
 - **Answer:** You can indicate that in the exception and we can notify you of their previous enrollment in the Zendesk ticket.
- Local Ed: It's my understanding that the deductible is not applicable to out-patient physical therapy (PT) for members in the Premier, Standard and Limited PPO plans and then employee only pays the 10% coinsurance. We have a member with PT in January and the provider is telling the member that she still owes a deductible when they look up benefits in the system they use. Is anyone hearing about issues with this?
 - **Answer:** We did make that improvement to our benefit and we have not heard of any issues. You can send your information to <u>benefits.info@tn.gov</u> and we will follow up with the provider.
- Local Ed: I am not seeing St. Francis hospital covered under Cigna LocalPlus but I am seeing this hospital for Cigna Open Access Plus. Please verify this for me. Also, can you send an updated PPACA for retires and COBRA.
 - **Answer:** St Francis hospital was never in the Cigna LocalPlus network and this will continue to be the case going forward.
 - For the PPACA retiree report, you can run this report now in Edison. Directions on running the PPACA report are on the ABC website under the Training section Instructions for Running Your PPACA Report. For the COBRA report, we did send out via secure email and we send updates as new people are enrolled. You can submit a Zendesk ticket asking to receive your COBRA report. We will review the report and send out a new COBRA report if necessary.
- O Local Ed: I know it's recommended to have two ABCs and for our LEA, and I am one ABC as is another co-worker. However, we have a new HR Supervisor and she would like to be an ABC as well. Can we do this?
 - Answer: We will have Nakeisha Myles will reach out to you after the call to discuss.
- State: Will this information (ePAF Terminations) be in the call notes?
 - **Answer:** Yes, we included the slides above. The notes will also be posted on the <u>ABC webpage</u> under Conference Call notes.
- Local Gov: I have an employee who just enrolled in dental. Does she have a waiting period for dental work (specifically for a root canal)? She is an existing employee who enrolled in MetLife during open enrollment.
 - Answer: For MetLife, there are no waiting periods for preventive or basic dental services. There is a six-month waiting period for major dental services, and a 12-month waiting period for orthodontia. Scott Halbert with BA will reach out to

you directly to discuss this member's situation. For Cigna dental, there are no waiting periods.

- o Local Gov: Is it too late to run the TN_BA219_AETP_INS query?
 - **Answer:** Yes, it is too late as that query can only be run right after Annual Enrollment. What information are you trying to gather?
 - Follow up question: I want to confirm changes made during AETP. I did them for our employees but I wanted to double check myself.
 - **Answer:** You can run the TN_BA219_MED_DEN_COVERAGE query for changes. The changes can also be found on the JAN collections applied report.
- Local Gov: We are a new agency and we have just completed our six month waiting period as a group (agency) for dental coverage. Who is responsible for letting the vendors know that our waiting period is over? We enrolled for July 1. Is January 1 the end of our six month waiting period? We have an employee trying to access benefits and the employee was denied trying to get a crown.
 - Answer: The vendors are updated via a file from Benefits Administration. It will show up directly in the MetLife file. Clarification: A crown would fall under a major service and has a six-month waiting period. You can clarify what is covered in the MetLife dental handbook found on the ParTNers for Health website under Publications Dental Insurance, and the MetLife Certificate of Coverage will also include this information. Members can also call the MetLife customer service department at 855.700.8001 if they have questions about their coverage. The contact information for our vendor is found on the Customer Service page.
- o **Local Gov:** I have many questions regarding PPACA. Would someone be able to call me and talk?
 - **Answer:** Patrice Steinhart will follow up with you.
- o **Local Gov:** What is the website where we can see the detailed information on waiting periods with the MetLife dental plan?
 - **Answer:** You can find dental plan information on the ParTNers for Health website at tn.gov/partnersforhealth under <u>Publications Dental Insurance</u>.

The link for the handbook is called **2019 DPPO – MetLife**. You can find it here: https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/dental_dppo19.pdf
You can find the MetLife Certificate of Coverage here: https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/dental_dppo-certificate.pdf

Materials and Communications

- Updates:
 - o **President's Day:** State offices and the Benefits Administration service center are closed Monday, Feb. 18 for President's Day
- Local Ed: Updated Memorandum of Understanding (MOU): An updated MOU will go out in February to your directors. We will provide more details later, but the updated MOU's will need to be signed by your agency and returned to BA.

Vendor Presentations

• Optum: New Quarterly Lunch & Learn Supervisor Webinars: Melissa Ward relayed information about new quarterly lunch & learn webinars that will be available to all ABCs, HR staff, managers and supervisors.

Optum will be hosting a "Drop In" webinar on Stress and Life Balance on March 20th.

- Webinar will focus on exploring methods of achieving a better balance in managing conflicting demands.
- Open to all ABCs, Supervisors, Managers, and Human Resources staff.
- No registration needed, webinar will be open until capacity is met.
- Session will be held on March 20th from 12 p.m. to 1 p.m. Central time.
- Webinar link and details:
- https://blievents.webex.com/blievents/onstage/g.php?MTID=ec13b73e3f3e3bf460478fa 08988687f4

Audio Details:

1-415-655-0002

Access code: 666 094 784

Please contact Melissa Ward at Optum with any questions, <u>melissa.ward@optum.com</u>. Additional information will also be available in the upcoming February newsletter.

OPTUM QUESTION

- State: The quarterly Optum Lunch & Learn webinars, are these just for ABCs, supervisors and managers, HR staff, or can anyone who is managing benefits or a team of staff join?
 - **Answer:** Yes, they are for ABCs, HR staff, supervisors and managers. They are not for employees.

Benefits

• Local Gov: Plan Document Updates: An updated version of the Local Government Plan Document was posted to the ParTNers for Health website, https://www.tn.gov/partnersforhealth/publications/publications.html. You will see "updated January 2019" in the footer beginning on page 1 if you are looking at the latest version.

Items updated for this posting include:

o **Footer** – pages 1 through 89 – changed to reflect posting of the current version: updated December 2018 updated January 2019

4.06 (A) – Page 30 - multiple changes to clarify the "opt-in" and "opt-out" language as approved by the LG Insurance Committee during their meeting on January 17 – we sent updates in a tracked document to you on Jan. 25, but they are included below.

4.06 Continuation of Health Coverage for Retirees.

(A) Effective January 1, 2019, each Each Local Government Agency must elect, in writing, whether or not to offer retiree coverage to its employees ("opt-in" or "opt-out"). All agencies must elect one of the following choices in writing by the deadline specified in the Retiree Coverage Election form (election).

form):

- (1) Provide coverage for retirees (or "opt in"). The election to opt in to providing retiree coverage shall be effective for the upcoming plan year of June 30 of the year in which the agency signs the election form, and shall entitle the agency to offer retiree coverage to active employees and to continue to offer retiree coverage to current retirees on the plan. An agency election to opt in will continue to be effective until such election is changed in writing at the time designated for submitting such notice; or
- (2) Not offer coverage for retirees (or "opt out"). The election to opt out of providing retiree coverage is effective upon January 1 of the upcoming plan year, and is a permanent decision not to offer retiree coverage to active employees or to continue to offer retiree coverage to current retirees on the planas of June 30 of the year in which the agency signs the election form. Agency elections to opt out of offering retiree coverage in the state sponsored plan are binding permanent and no employees or retirees shall be eligible to enroll in retiree coverage or to continue in retiree coverage as of the effective dateafter June 30 of the year of the agency's election to opt out. Once an election has been made to opt out for an upcoming plan year, the agency may not reinstate retiree coverage in a subsequent plan year; or
- Opt out as in (2) above, as to active employees only (or "limited opt out"), while continuing (3) to offer retiree coverage to its retirees that are on the retiree plan as of the effective date of the opt out (or "limited opt out"). No agency electing to opt out will be deemed to continue to offer coverage to its current retirees, unless this decision is selected in writing at the time of submitting an opt out. The limited election opt-out prohibits the agency from offering retiree coverage to active employees after June 30 of the year in which the agency signs the election form. The agency may continue to offer retiree coverage to its retirees that have insurance coverage on the retiree plan effective on or before June 1 of that year. Coverage starts on the first day of the month, and June 1 of the year in which the election form is signed is the last effective date which will qualify a retiree as a current retiree eligible to continue coverage prior to the June 30 opt out date. As in (2) above, once an election has been made to opt out for active employees for an upcoming plan year, the agency may not reinstate active retiree coverage in a subsequent plan year. However, an agency may elect to opt out of continuing coverage for current retirees by selecting "opt-out" (section 4.06 (A) (2)) status in a subsequent plan year by timely submission of the election form.
- (4) Annually, Benefits Administration's website shall display a list of agencies that have selected option no. 1(1) above to opt in to provide retiree coverage for that plan year, and a list of agencies that have selected option no. 3(3) above to continue to offer retiree coverage to existing retirees for that plan year.

• Local Ed: 25-Hour Resolution:

- o 25-Hour Resolution (AKA 25-Hour Rule) applies to non-certified employees who have:
 - 1. Completed 12 months of employment with a LEA participating in the plan, and
 - 2. have worked a minimum of 25 hours per week.
 - The school system's governing body must pass a resolution authorizing the 25-Hour Rule
 - In the case of a county school system, the county's chief legislative body (county commission) must also approve
- Resolution template forms have been created and are posted on the ABC section of the ParTNers for Health website:

ParTNers for Health/ABC webpage/Local Education Plan/25-hour Resolution

- <u>Amendment document</u> rule was amended in 2015, moving from 24 months of employment to the current 12-month requirement
- Board of Education
- Board of Commissioners

Operations

• Higher Ed/State: Death Claim Update Talking Points

- Last week, we made changes to the death claim section on the ABC website. We realized that we communicated changes to our applications but failed to update the death claim process on the website regarding which forms should be submitted. This delay caused unintended confusion.
- o If you recall in the fall we made changes to the Insurance Cancel Request form and the Enrollment Change Application. We shared the new forms with many of you during our July ABC call and the August road shows. The Insurance Cancel Request form became the only form you should submit to cancel coverage.
- o The Enrollment Change form should only be submitted to enroll or make changes. This form should not be submitted to cancel coverage.
- It is no longer necessary to submit an Insurance Cancel Request form if the decedent is an employee. The agency must enter the termination in Edison with the reason code "death". The effective date must be the date of death. All of the forms listed on the slide will still be required in order for BA to file a death claim.
- o If the decedent is a dependent you will need to submit an Insurance Cancel Request form, mark death in Part 2, and the employee does not have to sign this form but the ABC does.

Local Ed/Local Gov: Death Claim Update Talking Points

- Last week, we made changes to the death claim section on the ABC website. We realized that we communicated changes to our applications but failed to update the death claim process on the website regarding which forms should be submitted. This delay caused unintended confusion.
- o If you recall in the fall we made changes to the Insurance Cancel Request form and the Enrollment Change Application. We shared the new forms with many of you during our

July ABC call and the August road shows. The Insurance Cancel Request form became the only form you should submit to cancel coverage.

- o The Enrollment Change form should only be submitted to enroll or make changes. This form should not be submitted to cancel coverage.
- o If the decedent is a dependent it is no longer necessary to submit an Enrollment Change application instead you should submit a Cancel Request form since this form is now used to cancel coverage. You will continue to terminate coverage in Edison on the non-payroll job data page if the decedent is the employee.

o All groups: Zendesk Upload Reminders:

- We wanted to take a few minutes to do some housekeeping and provide helpful tips to keep in mind when uploading documents through Zendesk.
 - File name: Please avoid using the date or title of the form. When we receive multiple documents titled 2/12/19 or Corrections and Clarifications this increases our chances for error during the backlog process of adding the document to the correct Edison profile (good example of file name would be Allen1085, or TamekaAllen marriage, or T.AllenSQE).
 - Legible & Complete: Please make sure the document that you're attaching is legible, often time we receive documents that are either too dark or too light or pages with the information we need to determine eligibility are cut off. Double check that what you intended to upload is really attached.
 - File types: We would prefer if you change the file type from jpg or png to PDF. Please do not upload PowerPoint slides; also do not send pdf files that are password protected. We cannot move or copy these files to add to the members Edison profile.
 - One ticket/One member: Due to HIPAA please create one ticket for each member if you are uploading enrollment forms or dependent verification.

o Service Center Metrics/Customer Service Rating:

o January 2019:

■ Tickets via Email: 851

■ Tickets via Self-Service: 4,228

Tickets via Phone: 6,551Tickets via Chat: 297

■ Total: 11,927

■ Satisfaction Score: 97.9%

January 2018:

Tickets via Email: 584

■ Tickets via Self-Service: 3,318

■ Tickets via Phone: 6,962

■ Tickets via Chat: 70

■ Total: 10,934

Satisfaction Score: 94.1%

- We received about 400 fewer calls this year as compared to last January, and the number of tickets via email, self-service, and chat went up. Total interactions increased by 1,000.
- We take the satisfaction of our customers very seriously. Please complete the survey after your Zendesk ticket is resolved.
- o If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy. Our satisfaction rate for January was 97.9% percent, up from 94.1% last January.

State: ESS:

o ESS % for December: 94%

o YTD: 92%

Higher Ed/Local Ed/Local Gov: PPACA Reminders:

Retirees:

- We've gotten calls from several retirees requesting 1095-C forms. As a reminder, these are issued by the agency and not the state. The retirees are included on the PPACA Tax Report that you can run in Edison.
- The department ID is different for the retirees, and the premium column will show ***RETIREE***.
- Retirees who are enrolled in the Tennessee Plan (POMCO) do not need to receive 1095 forms and are not included on this report.
- At least one ABC from your agency is set up with security access to the retiree department ID for your agency. If you have retirees, and run the report but do not see any retirees listed, please have your other ABCs try running the report. You can also contact the BA Service Center to determine which ABC has access.
- Please remember that your agency should not alter or key on a retirement record under any circumstance in Edison. Any additions, changes or terminations necessary on a retiree's record must be submitted to the Benefits Administration Service Center to process.

Other Reminders:

- If a former employee* is showing on the PPACA report, then they need to be terminated by you in Edison on the Non-Payroll Job Data page. Otherwise they will continue to show as eligible. Only benefits-eligible employees should be active in Edison. This can impact your OPEB liability also. *Do NOT terminate retirement records of former employees.*
- If an employee transferred from one agency to another without a gap in coverage, it's possible that they may have been reported on the new agency's PPACA report for a month that they paid coverage through your agency. This happens because they were actively employed with the new agency during that month. If this happens, you will need to manually add a line on your report for the missing month.

• All groups: Edison Upgrade:

- o The Edison system will be down for an upgrade March 9-10.
- Some of the Benefits pages will look different, but there won't be any significant changes.

- The tabs will be green instead of blue.
- The spinning/refresh icon will be a bigger circle in the middle of the page instead of in the upper right corner.
- The saving icon will be a larger green banner displayed across the top of the page instead of in the upper right corner.
- These changes are in preparation for a smoother mobile enrollment process that we will be rolling out for Annual Enrollment this year.

• New ABC Training:

- o February 20: Local Education: 9-11 a.m. Central time
- o February 20: State/Higher Education: 1-3 p.m. Central time
- o February 21: Local Government: 9-11 a.m. Central time
- o February 21: Session 2 All Entities 1-3 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

- o **Higher Ed:** No questions during call.
- Local Ed: To clarify, this (25 Hour Rule) is at the school system's discretion correct?
 - **Answer:** That is correct, it is not a requirement. This is if the school system wants to do it.
- o **Local Ed:** For PPACA.....when the name is entered in Edison and it's different in Local Government....it creates errors. How/what do we do to get these corrected?
 - **Answer:** The names in both systems should match the name in Edison should be the name reported through the Social Security Administration. You can make name changes for employees in the Edison system. You can submit a Zendesk ticket and we can reach out to you if you have more questions.
- o Local Ed: Does the Edison software only ask for the middle initial?
 - **Answer:** The Hire eForm has a field for Middle Name. You can put the full middle name in Edison.
- o **Local Ed:** What is the PPACA report name to run in Edison?

- Answer: There are specific instructions on how to run the PPACA report and they are on the <u>ABC website</u> under the Training header, found here: https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/abc_run_ppaca.pdf
- Local Ed: Are we supposed to get a copy of their social security card at enrollment?
 - **Answer:** Yes, we recommend that you do get a copy of the card so the name you enter in Edison is the legal name in the social security system.
- o **Local Ed:** We are considering going on the State dental plan. Can you give me a name/contact of someone who I could speak to regarding this?
 - **Answer:** You can contact Nakeisha Myles at nakeisha handles the enrollment on and off the dental plans. BA only allows agency enrollment once a year during Annual Enrollment and we require certain information from the agency by July in order to enroll for the next year.
- Local Ed: An employee's 1095-C bounced back from IRS reporting with errors because names and SSN don't match for the child. The birth certificate has the correct name (and was uploaded to BA) but social security card does not. I have contacted the employee who told me she does not have time to get to the social security office to fix the child's name. Do we need to correct names with BA? Or does BA recognize the birth certificate name as the correct name?
 - **Answer:** The name we need in Edison is the name that is on the social security card and on file with the social security office.
- Local Ed: We have made it a practice to obtain the social security card with enrollment, however, there was a retiree who was added to the plan due to his employment with our district many years ago, and we now see on the PPACA report that his spouse's name does not match. The application was taken directly through BA. We haven't had any direct contact with the employee, so I am unsure how to proceed because we have just inherited the employee.
 - **Answer:** We will take this question offline and get back to you.
- o **Local Ed:** If a retiree has an address change, are we to send this to BA or to retirement (TCRS)? I sent the address change to BA, but was told I sent it to the wrong place.
 - Answer: If he has insurance, then we would need to make an update in our system. If he receives a TCRS pension check, then TCRS would need to be notified. If he has insurance and receives a pension check, then both of us would need to be notified. When a retiree is no longer affiliated with the agency, an address change cannot be initiated by the agency via Clarifications and Corrections form. The retiree must submit the address change request directly to Benefits Administration.
- o **Local Ed:** I have a question about Zendesk and submitting forms, if you are submitting a form for a new born, do we send the birth certificate and Enrollment Change Form with the ticket or separately?
 - **Answer:** You would send both the Enrollment Change Form and the birth certificate in one Zendesk ticket.

- o **Local Ed:** When the ticket says pending response from us, but nothing has been sent or requested from us, what does that mean?
 - Answer: We are pending the ticket or researching within another department within BA it doesn't always mean we are waiting on something for you. Make sure you put billing issue in the subject line.
- O Local Ed: We have a new ABC who handles our billing and we are seeing that sometimes billing adjustments are not corrected as expected within a couple of months. What or who is the best way to reach out regarding billing issues?
 - **Answer:** You can submit a Zendesk ticket and our billing department can research and get back to you.
- State: I have had several employees ask how we handle co-insurance between their insurance and their spouse's insurance. Is there any information I can give them on this other than reach out to BA or their provider?
 - **Answer:** It really will depend what their insurance coverage offers for each person. The carrier will have a better idea of what the carrier will provide. It is probably best for the member to start with his/her carriers to verify coverage.
 - Members can also find information on "coordination of benefits with other insurance plans" under the member handbooks for health topic on the <u>Publications</u> page of the <u>ParTNers For Health website</u>. The Table of Contents for the handbooks will indicate the page numbers where the information can be found, or members can word search for "coordination".
- State: I am with the Turney Center, and most of our security staff do not have email. I was wondering about the wellness program. I had asked about the incentive chart and posters so I could get more word out to them about the program. I was told there was nothing available. Is there something for institutions to let them know there is something available?
 - **Answer:** Yes. ActiveHealth is working on a draft. We can certainly share with anyone but this will be geared towards employees who don't have a computer or work at a desk.
- Local Gov: If we have never offered retiree health insurance, do we need to do anything (OPEB opt in/opt out form)
 - **Answer:** Yes. Each Local Government agency must make an election.
- Local Gov: What should we use for a file name for an attachment?
 - Answer: You need to make it specific for the employee you are sending the attachment for, and make sure in the ticket you are submitting everything we need, such as the Enrollment Change Form and the marriage license. You can use the employee's name as the file name.
- Cocal Gov: I entered a new employee in eForms and made a mistake and did not enter the health insurance that he had chosen. Therefore, BA had him coded as declined benefits. I did not realize the mistake until I printed the Collections Applied report. Is there a way that the ABC can be notified when this happens in case it is an entry error?

- Answer: We would not know that this is an entry error but as soon as you realize it, you can submit a Zendesk ticket and let us know that coverage he elected and submit the enrollment form and we will manually make the correction for you.
- Follow up response: I did what you suggested, but I had to include a letter of explanation that my supervisor had signed and then BA had to get a manager to approve it. The approval took about one week.
- Answer: An admin letter is not needed if you make a keying error. We discussed with the service center team to clarify that they do not need to require an admin letter in this instance. I apologize as this was not needed in your situation. Admin. Error letters should be submitted if your agency caused a late enrollment, or if you failed to hire a member into Edison when first eligible. For corrections to keying error, please submit a Corrections and Clarification form or a Zendesk ticket.
- Local Gov: Have you considered changing the way the "effective date" works in Edison since you are doing updates to it? There have been so many mistakes on both my part and BA with this.
 - Answer: There is not any way for us to change the process as the system is mainly designed for state employees and each of our groups have different rules. For example, Local Government is the only group that allows probationary periods before coverage begins. Unfortunately, there is not a way we can make changes to the system that will accommodate all groups.
- o Local Gov: What is the date for the opt in/opt out of retiree coverage, March 15th?
 - **Answer:** The deadline to submit the Local Gov OPEB form to either opt in or opt out is March 31.

Materials and Communications

- **Hospital Facility Updates:** We have posted an updated <u>BlueCross BlueShield hospital list</u> (dated 2.27.19) on the <u>ParTNers for Health website Carrier Information page</u> which notes that both Copper Basin Medical Center and Cumberland River Hospital are closed facilities.
 - We will post updated Cigna Open Access Plus (OAP) and Cigna LocalPlus hospital lists as soon as they are available.
- Prepaid Dental Cigna DHMO Identity Theft Program (2019): We have posted a flier about the Cigna identify theft program for prepaid dental plan members to the Publications webpage under the Dental tab.
- State: FSA Contributions Forms Reminder: Keith Athow joined us to talk about using upto-date forms for flexible benefits.
 - Please ensure that any *Flexible Benefits Family Status Change Application* that you give to employees to complete is the most current and up-to-date. If needed, it can be found on the ParTNers for Health website at www.tn.gov/partnersforhealth > Publications > Forms > Flexible Benefits > Family Status Change Application.

HIPAA Training Announcement

- **HIPAA Training Announcement:** 2019 HIPAA Annual training will begin in April for State and Higher Education, with other plans to follow.
 - The Health Insurance Portability and Accountability Act of 1996, known as HIPAA, is a federal law that protects the privacy and confidentiality of protected health information. Protected Health Information (PHI) is individually identifiable health information held or maintained by Benefits Administration or our business associates who act on our behalf that is transmitted or maintained in any form or medium. As an ABC, you and your agency are our business associates. The law requires that all covered entities and business associates be trained in HIPAA policies and procedures.

 All ABCs, backup ABCs, and directors who have access to Edison are required to complete the annual training. The HIPAA training is an example of Benefits Administration's commitment to educate and promote a culture that encourages ethical conduct and compliance with state and federal laws.
 - Our training is online in Edison. We have changed our process to ensure that everyone
 gets the required training in a timely manner. Each agency is assigned to a month to
 complete the training.
 - O ABCs, backups and directors must complete the annual HIPAA training every calendar year. You have 30 days to complete the training in your assigned month. Failure to comply with mandatory training requirements may result in suspension of insurance benefits access. Training requirements will not be waived unless approved in advance by BA HIPAA Compliance Officer.

• Training schedule:

- State & Higher Education you will have from April 1 to April 30 to complete the 2019 HIPAA training. Instructions for accessing the class will be provided in Friday's email.
- LEAs you will have from May 1 to May 31 to complete the 2019 HIPAA training. Instructions for accessing the class will be provided in an upcoming Friday email.

 LGAs - you have from June 1 to June 30 to complete the 2019 HIPAA training. Instructions for accessing the class will be provided in an upcoming Friday email.

Vendor Presentations

- Diabetes Prevention Program (DPP) and Wellness Program Updates: Paige Turner, our wellness program director, joined us to go over Diabetes Prevention Program (DPP) and Wellness Program updates.
 - O All Plans: DPP updates: Omada program through Cigna: 870 members enrolled and 5,683 pounds lost. Retrofit program through BCBST launched in January. They sent out a mailer in February and will start sending emails to BlueCross BlueShield members the middle of this month. A total of 210 members have enrolled as of February 25.

• Wellness Program Updates:

- o Health assessment completions: 10,447 members have started the health risk assessment and 8,445 have completed it as of Friday, March 8.
- State/Higher Ed only: Total incentive dollars earned: January incentive files included 1,382 members and payment of over \$100,000, February files will include over 2,300 members and payments of over \$200,000.
- O All Plans: Reminder about coaching calls. ActiveHealth is outreaching to members via phone and email if they are at higher risk and via email if at lower risk [or for the weight management Program (state and higher ed only)]. This is regardless of what health plan the member is enrolled in. They are not required to participate and can opt out. ActiveHealth had been using robo calls to contact members. They are eliminating that system and will now be making manual calls.
- State/Higher Ed only: Lastly, just a reminder that you cannot enroll your spouse for incentive activities without the spouse's consent. We have seen a few instances of this happening, particularly with the weight management program.

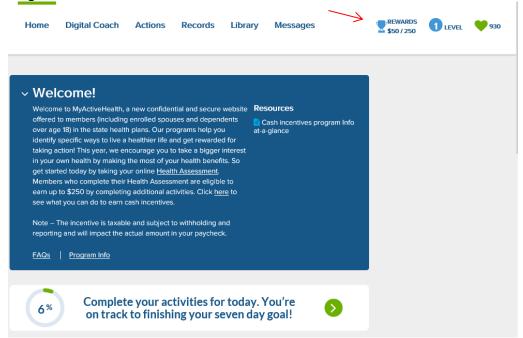
Weight Management program updates:

- State/Higher Ed only: Weight Management enrollment: 1,433 members enrolled as of March 5.
 - Note one change we are making to the weight management program incentive payments, effective April 1, 2019. Initially members earned the first \$50 when they enrolled in the weight management program. Now, they must participate in at least one class before earning the \$50. Reason for the change is we have a high number of members enrolling but not participating in the first session.

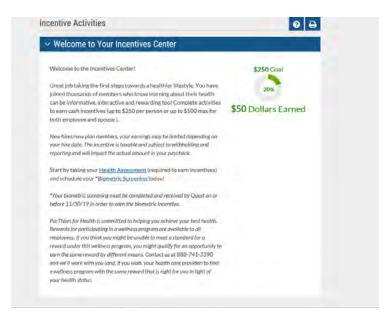
• State/Higher Ed only: Onsite screenings:

- o ActiveHealth and Quest (biometric screening vendor) have been working with some state and higher education locations to schedule biometric screenings.
- We have a total of 33 sites that are either finalized or in process. Members are able to log on to the Quest site and schedule their onsite biometric screening appointment now.
- Some of these sites are closed, meaning they are only open to the employee or employee and spouse of that location. If the site is closed, it will be noted online and on the list we are going to send you.

- O Quest will have a flier available for these sites to promote the screening. If your agency is near a location that has an open screening site, we encourage you to promote the screening to your members. We will include the flier in an upcoming Friday email.
- State/Higher Ed only: Incentive Center: I want to walk through a few slides to highlight where members can see and track the available activities and what they have earned so far.
- Rewards (trophy icon) Once you set up your account on the website, you will see the Rewards (trophy icon) in the upper right corner of the home page. Click on that icon to go to the Incentives Center.



o **Incentive Center** - When you go to the Incentive Center, you will see a wheel that will show your maximum incentive amount and how much you have earned to date.



Incentive Details – on the page, you will see a list of activity cards and the incentive amount available for each activity.



Example below is for the digital coaching or online activities. Expanding the activity card to work on it provides details about the activity and you will be able to see what you have completed and earned. For example – this shows the member earned 750 hearts and earned \$50.



WELLNESS PROGRAM QUESTIONS

- O **Higher Ed:** With the file that is supposed to come over with the incentives has this started? Maybe I don't have anyone that has come over yet. How will this show up?
 - **Answer:** The file is coming to TBR and if anyone is on the file, they know which school it is coming to and disseminating the incentive. UT and TBR are both getting files. This process is similar to how HSA funds are being distributed.
- State: I put my preference and second choice as to when we wanted to do the biometric screening. Will Quest let us know when it has been set up, or how do we find out? Will it be in the email you are sending?
 - **Answer:** Quest, our biometric screening vendor, will follow up with you. You will get a confirmation from them.
- State: When should we encourage new hires to enroll in ActiveHealth (<u>myactivehealth.com.wellnesstn</u>)? I had one employee who was not able to enroll yet, so is this after they are benefits eligible?
 - Answer: Yes, it is after they are benefits eligible. ActiveHealth normally loads members within a month of their coverage effective date. For example, if the employee's eligibility starts on April 1, ActiveHealth would load the member to have access by March 1. Because a member cannot earn the incentive before their benefits eligibility starts, we have asked ActiveHealth to change their process and wait until the member is eligible to allow them access.
- **Optum:** Training Catalog Update: Melissa Ward with Optum joined us to talk about updates made to their training catalog. We have posted the updated link to the training catalog on the ParTNers for Health <u>ABC webpage under Optum/Behavioral Health</u>.

Operations

- Special Enrollment for Active Population Due to Voluntary Termination of Other Plan Coverage: On our November 2017 ABC call, we reported that we would allow members removed voluntarily from their spouses' or parents' Open Enrollment to enroll on a state plan as a special qualifying event (SQE). After further review of the federal guidelines by our internal procedure team and our legal team, we will no longer accommodate this request going forward effective 4/1/2019.
 - A voluntary termination under another plan is not viewed as a loss of eligibility because the decision to terminate coverage is made by the insured, and the persons being termed would otherwise still qualify for coverage. For example, the coverage costs have gone up or they don't like changes that were made to the plan. In these situations, there is no special qualifying event to enroll in the state/local ed/local gov-sponsored plans.
 - o If an event occurs that causes a person to lose eligibility under the other plan, then there could be a SQE for coming onto our plan. For example, the spouse voluntarily resigns employment or reduces work hours or is laid off.
 - o Absent a SQE, employees can continue making changes (including adding and dropping dependents) during the state-sponsored plan's annual enrollment period.
 - Also, the state-sponsored plans will continue to accept cancel requests if covered persons become newly eligible for other coverage for the reasons listed on the cancel request form.

- Local Ed: Memorandum of Understanding (MOU) Reminder: The Memorandum of Understanding (MOU) was emailed to you, your director of schools and your finance director on Wednesday, February 27. The due date to return the signed MOU is March 31. If you have not received the MOU or if you have any questions, please contact us at Benefits.Administration@tn.gov.
 - Also, we wanted to let you know that the OPEB retiree opt in opt out information in the call notes that you may have read about only applies to local government, not to local education.
- Local Gov: OPEB Reminder: The retiree health insurance opt in/opt out Retiree Coverage Election Form is due on March 31. If you have any questions, please contact Benefits.Administration@tn.gov or you can contact me directly at Patrice.steinhart@tn.gov or 615-741-6909.
- Service Center Metrics/Customer Service Rating
 - o February 2019:

■ Tickets via Email: 789

Tickets via Self-Service: 3,675

■ Tickets via Phone: 5,152

■ Tickets via Chat: 190

■ Total: 9,806

■ Satisfaction Score: 97.1%

February 2018:

■ Tickets via Email: 522

■ Tickets via Self-Service: 3,019

■ Tickets via Phone: 5,569

Tickets via Chat: 55

■ Total: 9,165

■ Satisfaction Score: 97.0%

- We received about 400 less calls this year as compared to last February, and the number of tickets via email, self-service, and chat went up. Total interactions increased by about 600.
- We take the satisfaction of our customers very seriously. Please complete the survey after your Zendesk ticket is resolved.
- o If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy. Our satisfaction rate for January was 97.1% percent, up from 97.0% last January.

State: ESS

o ESS % for January: 94%

o YTD: 94%

• New ABC Training:

- o March 27: Local Education: 9-11 a.m. Central time
- o March 27: State/Higher Education: 1-3 p.m. Central time

- o March 28: Local Government: 9-11 a.m. Central time
- o March 28: Session 2 All Entities 1-3 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

- October, for example, we have an employee's Open Enrollment ends the middle of October, for example, we have an employee's Open Enrollment that starts the first week of November. They never know the changes for the spouse's plan and if they make significant changes to the spouse's plan in November it is past the state's enrollment. So employees can still make changes during our (the state's) Annual Enrollment, but if changes don't line up correctly they are double insured for a while. Some employees have spouse coverages that start the middle of the summer and they could drop the coverage for June 30 (they have a July 1 start date), so they are double covered for about six months.
 - Answer: That is correct. Employees in these instances may be double covered for a while until our next Annual Enrollment or if they did have a special qualifying event (SQE) they could make a coverage change sooner.
- Higher Ed: For the open enrollment changes, we understand that effective April 1, employees are no longer terminating coverage due to their voluntary enrolling in other coverage, but what if they add one of our employees to their (spouse's) coverage, is that a qualifying event? If we have a dependent on our plan who is enrolling to their own coverage, can they cancel?
 - **Answer:** This change is not about canceling coverage on the state plan. You can continue to cancel coverage using the reasons on the current <u>Cancel Request Form</u>.
- o **Higher Ed**: Is someone going to be on a future call about Davis Vision? I have a couple of issues about vision that I need to talk to someone about.
 - **Answer:** We will have our voluntary products director get back to you.
- o Local Ed: So, open enrollment of a spouse is no longer a reason to come off our plan?
 - **Answer:** This is incorrect. We are not changing our cancel request information. We will continue to accept a cancel request if they become newly eligible for other coverage- this is a special qualifying event (SQE) to come off our plan. The change is about a SQE for someone to come on to our plan because they were voluntarily

termed on another plan. We are not talking about canceling coverage because they were newly eligible; we are talking about SQE to come on our plans.

- O Local Ed: For example if its open enrollment (spouse) and prices went up so they decided to come off the plan due to price increase but it's not Open Enrollment (Annual Enrollment) for the state, then that is NO longer a qualifying event although it was their (spouse) Open Enrollment time?
 - **Answer:** That is correct.
- Local Ed: If a spouse quits his/her job and will not be able to pick up any insurance from his next employer, do they have to wait until open enrollment (state's Annual Enrollment)?
 - Answer: If a spouse is terminated and loses coverage, that is still a special qualifying event (SQE) because the spouse has been terminated by his/her employer and their insurance is ending. The spouse would not have to wait until Annual Enrollment to come on to the employee's insurance.
- o Local Ed: What about voluntary termination?
 - **Answer:** Even if the employee resigns and he/she is losing insurance, that still is a qualifying event and the employee is eligible to come on to our plan.
- Local Ed: So if an employee's spouse quits their job or voluntarily reduces their hours which results in their losing their health coverage then that will no longer create a SQE to come onto the employee's plan?
 - Answer: That is incorrect. If they quit or if their hours are reduced and they are no longer eligible for coverage then they can come on to the plan. This is a loss of eligibility on another plan. If an employee removes a spouse voluntarily during Open Enrollment and there was no loss of eligibility, that is the difference.
- Local Ed: If a couple goes through mediation with an ex-spouse, does that count as a reason to bring the kids on to coverage?
 - **Answer:** The only time they would be able to add the child due to divorce or mediation would be if they provide a finalized a divorcee decree. We would need the full decree and we would need proof that the children lost coverage on the other plan
- o **Local Ed:** If the spouse wanted to during his/her Open Enrollment drop their coverage come on to ours, they can no longer do that?
 - **Answer:** That is correct. If they drop coverage voluntarily.
 - Follow up question: If they have a different start and end time (enrollment) they will just have to pay two difference insurances?
 - **Answer:** Yes, that is correct.
- o Local Ed: When will we know about any rate increases or benefit changes for 2020?
 - Answer: Sometimes we can signal the changes when we go to the fiscal workshops in April, but the rates won't be final until the Insurance Committee meets in May. We will let you know of any rate increases just as soon as possible.

- o Local Ed: Many systems have to complete budget projections now.
 - **Answer:** We are usually able to release the premium rate information in April. We will let you know just as soon as we can.
- State: The class (HIPAA) is not yet available correct?
 - **Answer:** Correct. The 2019 HIPAA training course has not yet been posted but for state and higher education. It will be available on April 1.
- o **State:** Can you define what it means to voluntarily remove?
 - Answer: If my spouse decided to remove me and my dependents from his coverage, I would still be eligible to continue coverage under his plan, but he voluntarily discontinued our coverage under his plan. However, if the employee worked here at the state and the spouse worked someplace else, and if the spouse voluntarily terminated someplace else for example if the spouse resigns and everyone was covered under the spouse's plan, that is not considered voluntarily termed as everyone is losing eligibility. If during the spouse's Open Enrollment and you voluntarily took everyone off of the other plan, they cannot join the employee's state plan if not during Annual Enrollment or a SQE if they still had coverage available (did not lose eligibility).
- o **State:** What about during Annual Enrollment they can no longer put people on during Annual Enrollment?
 - **Answer:** No, this is for special qualifying events (SQE). During Annual Enrollment members can still make changes.
 - **Follow up question:** During Annual Enrollment they can still put them on? **Answer:** Yes.
- o **Local Gov:** I have an employee who elected coverage that will begin in April and he is bringing his spouse on as well. They currently have coverage somewhere else. If she is leaving her coverage and coming on to ours is this a special qualifying event (SQE)?
 - **Answer:** No, in this case he is a new hire. As a new hire he is eligible to enroll his eligible dependents. This is different from a SQE. A SQE happens outside of a new hire or Annual Enrollment. He can enroll his spouse or dependents in this situation.
- o **Local Gov:** For the OPEB opt in, I am the new HR employee I want to make sure I am receiving the opt in and opt out information you are sending.
 - **Answer:** We will have someone get in touch with you.
- Local Gov: I have an employee who was hired 30 hours a week. She had the option of taking the insurance as she was working 30 and she chose not to, and now she wants to drop her family and get on our plan. In this situation she cannot do it? Would she have to wait to Annual Enrollment? Our insurance is less expensive than her current insurance.
 - Answer: Yes, she will need to wait to enroll in our health insurance plan during Annual Enrollment in October. Voluntarily dropping current coverage on another plan is not a Special Qualifying Event (SQE) to come on our plan outside of the annual enrollment period.

- o **Local Gov:** Please give another example of a voluntary termination or drop?
 - Answer: The best example is if you have an employee and he/she is covered on their parents or spouse's insurance with a different company with an Open Enrollment period that is different from ours, if the spouse wants to drop our employee, they could drop our employee, but our employee would not be able to enroll on the state plan due to this voluntary drop. They would have to wait until our Annual Enrollment or unless they had a qualifying special qualifying event (SQE).
- O Local Gov: I just wanted to verify that we cannot distinguish between different groups of employees such as allowing current employees to retain pre-65 coverage but not allowing new employees that option through a resolution? Our law director is trying to say we can, through resolution cut these benefits off and by doing that reducing our OPEB liability?
 - Answer: We addressed this question at our November Webinars. See Questions #5 and #19 below. (These Q&As are found on the <u>ABC webpage under Local</u> Government.)
- 5. If the agency wants to continue to offer retiree health insurance benefits to pre-65 retirees that meet the local government service requirements, can the agency continue to use the 7/1/15 date to determine eligibility or will a new date have to be established?

Answer: No. The agency cannot continue to use the 7/1/15 hire date to determine eligibility, because the statute implementing the 7/15/2015 cutoff was repealed, and that limitation was removed from the plan document.

19. If our agency opts in to the retiree health insurance, do we go back and offer this benefit to everyone hired after the 2015 resolution?

Answer: Yes. The statutory prohibition to offer coverage to anyone hired on or after 7/1/2015 was eliminated this year by the General Assembly, resulting in the Local Government Plan Document being changed. The Committee has not chosen to institute the July 1, 2015 deadline under its own authority. Therefore, currently, all employees that meet other eligibility requirements for retiree health coverage can continue in the plan. If your agency passed a resolution that your employees are no longer eligible because they started work after 7/1/2015, then that resolution would have to be eliminated to be in compliance with our Plan Document.

- o **Local Gov:** Would you clarify if there are any requirements for the employer to pay for the retiree's coverage versus having the employer require the soon-to-retire employee pay for premiums?
 - **Answer:** No, there are no requirements for the employer to pay for the retiree's coverage.
- o **Local Gov:** What are the requirements for children being on health insurance? Do they have to be a dependent child, claimed on tax return, or is it just age 26?
 - **Answer:** We don't have a mandate, that is for the employee to decide. You can only cover dependents that are your own and you have to have proof with the birth certificate, or be the legal guardian with legal documentation. For the age 26 portion of the question, that is how long we can cover them, up until age 26.

- o **Local Gov:** Is there anything in writing that specifies that the retiree will be responsible for the premiums per the respective LGA's policies? Our board is asking for clarification that our agency would not be responsible for premiums if we opt in.
 - Answer: The retiree premiums are posted on our website. They are determined by the premium level for your agency. Generally, retirees are responsible for their retiree health insurance premium unless the agency has agreed to pay a portion or all of the premium amount. If they are a TCRS retiree, we pull the full premium from the pension check. If the pension check is not large enough, the retiree is direct billed.
- o **Local Gov:** So, then why do we have to worry about OPEB?
 - Answer: Your agency has an OPEB liability because your employees are <u>eligible</u> for retiree health insurance under current Plan Document language even though you may not contribute toward the retiree health premium. You can send any agency specific questions you have to <u>Benefits.Administration@tn.gov</u>.
- o **Local Gov:** We contribute 95% to employee only coverage for retirees and our liability is over 4.2 million. If we cut that contribution for retirees to 50/50 would that greatly reduce our liability?
 - **Answer:** That would need to be posed to actuaries. On the face there are so many assumptions. We could not answer this question.

Materials and Communications

- **ABC Survey:** Benefits Administration will send our annual ABC Survey to all primary ABCs in early May. Your responses to the 2018 Survey were extremely valuable in helping us understand areas where we could better meet your needs and improve our services to you and your members. The survey will take less than 10 minutes to complete. It is anonymous unless you choose to provide your name. We plan on sending the survey out Monday, May 6 and the survey will close out on May 17, but it would be great if you could go ahead and complete it when you get it.
- Local Ed: Memorandum of Understanding (MOU) Update: We want to thank all local education agencies as we have received all of the signed MOUs by the deadline. We appreciate your help in getting these signed and returned.

NOTE ABOUT THE FOLLOWING INFORMATION: We have only had one person contact us with this issue, so you don't need to alert your members. However, if you do have members who contact you because they may have received a call from a company/organization that seems questionable, please have them contact us or they can call the carrier directly.

- First Care Fraud Incident: We want to make you aware of a phone fraud incident that has impacted one of our members. A person representing themselves as with a company called First Care recently called one of our members regarding wellness and physical ailments. The caller knew some of the member's personal information and mentioned they were affiliated with BlueCross BlueShield. First Care is not affiliated with BlueCross BlueShield. We do not know how the caller obtained the member's information or why the member was targeted.
 - o The member did verify HIPAA with the caller which may have helped validate some of the information. The member did ask several times how First Care was affiliated with state insurance, and the First Care caller provided answers that seemed plausible to the member.
 - O At the end of the call, the First Care caller indicated that the member's file would be sent over to one of their in-network doctors to review and if the member needed a prescription, it would be called in to the member's in-network pharmacy to be filled. Later, a text was sent to the member indicating the file had been forwarded to a doctor for review and a prescription had been called into the member's in-network pharmacy.
 - O After the call and text, the member sensed that something was not right and contacted Benefits Administration. We put the member in touch with the member's carrier investigation unit and they are pursuing further investigation, resolution, and follow up. Benefits Administration also contacted our own investigative unit and informed them of the situation.
 - O As always, if you have members who receive calls from those claiming to be a part of, or affiliated with the state plan or a state program, members can always ask for a phone number for the caller to call them back and verify the organization, and/or they can contact Benefits Administration to verify the service and organization.
- State: #4Mind4Body Lunch and Learn Opportunities: As a part of Mental Health Awareness Month, we are partnering with the Department of Mental Health and Substance Abuse Services to offer four Lunch and Learn opportunities for state employees during the month of May. The schedule is below, and we have attached a flier with today's email that you can share with employees very soon. Emails will also be sent to employees. Employees will not have to pre-register for a date and time; they can join in person or login for the webinar just as

they do for an ABC call. We have also posted login information on the ParTNers for Health website on the EAP webpage.

- Wednesday, May 1, 11:30 12:30 p.m. Central time: **Substance Use** 3rd floor, Tennessee Tower, rooms A&C
- o Tuesday, May 7, 11:30 − 12:30 p.m. Central time: **Depression and Anxiety** − 3rd floor, Tennessee Tower, rooms A&C
- o Monday, May 13, 11:30 12:30 p.m. Central time: **Raising Kids and Teens** 3rd floor, Tennessee Tower, room D
- Wednesday, May 29, 11:30 12:30 p.m. Central time: Virtual Visits 3rd floor, Tennessee Tower, rooms A&C

Vendor Presentations

- BlueCross BlueShield of Tennessee: April Fitness Your Way Promotion: Amy Jordan with BlueCross BlueShield joined us to talk about their current April Fitness Your Way promotion.
 - Members Save with April Fitness Your Way Promotion
 As a mission-driven company, BlueCross BlueShield of Tennessee put our members' health first. That's why our upcoming April promotion offers to waive the \$29 enrollment fee for our discount fitness program, Fitness Your Way. Eligible members with an email address on file will get an email about this promotion.

When members sign up, they'll get:

- Unlimited access to more than 10,000 gyms across the country
- No long-term contract, just a three-month initial commitment
- Membership for just \$29 a month
- Members can start working out the day they join. To take advantage of this special offer, members will use promo code SPRING19 to waive the enrollment fee. They can find participating fitness locations online when they sign up through our Blue365 discount program. They'll also get discounts on wellness services like acupuncture, chiropractic visits and more.

BCBST FITNESS PROMOTION QUESTIONS

- State: Is the incentive for gym memberships (BCBST enrollment fee waived in April) just for employees or family members 18 and above?
 - **Answer:** It is for any dependent on the plan, as long as they are covered by the head of contract and 18 years and older. The cost is per person for those 18 and older.
- Higher Ed: PayFlex Presentation Employer Portal for FSA/HSA: Darlene Russo with PayFlex joined us to go over the Employer Portal information for FSAs and HSAs.
- State: PayFlex Presentation we did not have a PayFlex presentation as the Employer Portal information does not apply to state ABCs.
- Local Ed/Local Gov: PayFlex Presentation Employer Portal for HSA: Darlene Russo with PayFlex joined us to go over the Employer Portal information for HSAs.

PAYFLEX PRESENTATION QUESTIONS

- o **Higher Ed:** If we have never used the employer portal before and we want to start using it, what login and password do we need to use to access this portal? Do we get that from Payflex?
 - Answer: For access to the portal, you can send an email to stateoftennessee@payflex.com. You will get an email back with a user id and temporary password. Go to the portal URL address at: https://www.healthhub.com/Employer/EmployerLogin.aspx and log in using your user id and temporary password. You will then be asked to create another password. Then you will have access to the portal. If you don't have 10 or more people, it won't give you any information regarding reports. But you can look at information and add people to the system.
- o Local Ed: Is the PayFlex portal available to LEAs?
 - **Answer:** Yes, as long as you have employees who have an HSA with us, then employers are eligible to have access to the portal. If you don't have 10 or more people, it won't give you any information regarding reports. But you can look at information and add people.
- o **Local Ed:** Can you roll over 403Bs to the HSA?
 - Answer: No, you cannot rollover money from a 403(b), 401(k), 457 or retirement account into an HSA. However, the IRS will allow you to make a tax-free rollover from an IRA to an HSA only once in your lifetime, and you must qualify to make new HSA contributions that year The size of the rollover is limited to the annual HSA contribution limit minus any money you've already contributed for the year. For 2019, the contribution limits are \$3,500 for those with single coverage and \$7,000 for those with family coverage so please make sure that anything you may choose to rollover from an IRA plus whatever you may have already put in your HSA or will put in before the end of the year does not put you over the IRS maximum limit.
- o Local Gov: When is the HSA portal available?
 - **Answer:** The HSA portal is available now and it is available 24/7.
- o **Local Gov:** What is the daily usage limit for the HSA?
 - Answer: Much like your own personal bank account's debit card has a daily limit on it, the HSA debit card has a maximum daily amount of \$2,700.00 or eight transactions daily. This is to protect you in case your card is lost or stolen, to prevent someone from draining all of the funds in your HSA deposit account at a particular merchant. If you believe that you will need to use your card to spend a higher amount and you have that much in your HSA deposit account, contact PayFlex customer service at 855-288-7936. The coding can be changed on a member level for 48 hours to allow access to more funds.

HIPAA Training Reminder

• **Higher Ed/State: HIPAA Training – Now Through April 30:** The 2019 HIPAA Annual training opened in Edison for state and higher education on April 1. As you know, all ABCs,

backups, and directors who have access to Edison are required to complete this training each year as a part of your agreement with Benefits Administration (BA). Our 2019 training is online in Edison and instructions for how to enroll were emailed to you. We have changed our process to ensure that everyone gets the required training in a timely manner.

- You have from now to April 30 to complete the class. You must complete the annual HIPAA training every calendar year. Even if you completed the 2018 training in 2019, you must still take the 2019 HIPAA training. Failure to comply with mandatory training requirements may result in suspension of insurance benefits access. Training requirements will not be waived unless approved in advance by BA HIPAA Compliance Officer.
- For further instructions on accessing HIPAA Annual training, you can **click the link to watch a video** (found on YouTube channel) or follow the instructions below: https://www.youtube.com/watch?v=crMCBzo9vIk

HIPAA Annual Training Instructions

- O Make sure you have the most current version of Internet Explorer and Adobe Flash. You must allow pop-ups. If you do not have the most current versions or don't allow pop-ups the training will NOT run. Verify with your agency's IT department that you have current versions. If you are having difficulty accessing the training in Edison, please submit a Zendesk ticket to the BA training department to request assistance.
- 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.

ALL AGENCIES will take the ABC HIPAA 2019 class.

Here is the navigation after you log in to Edison at www.edison.tn.gov:
NAV BAR >Navigator>ELM>Learning Home>Search for Learning type HIPAA
> Annual HIPAA Training (HIPAA 2000)> ABC HIPAA 2019

Operations

- Higher Ed: Security Audit Information
 - Thank you! As of Monday, we only need to hear back from two of you.

Local Ed: Security Audit Information

- Email sent Thursday, April 4
- Deadline: Friday, May 3
- Security access will be removed for non-respondents
- Questions? Reply to the email or contact the service center
- The annual security audit email went out last Thursday, April 4. You have until Friday, May 3 to respond. A response from you is required since this yearly audit confirms your agency's current access to the Edison system. We will have to remove security access for the ABCs from the agencies that we do not hear back from so it is very important that you confirm the list and respond back to us. If you have any questions regarding the audit, you can reply directly to the email you received last Thursday. This email was sent to the primary ABC for each agency.

Local Gov: Security Audit Information

Reminder: Annual Security Audit will be conducted in May

• We just want to remind you that the annual security audit is coming up next month. At the beginning of May, you will receive an email from our office asking you to confirm the employees in your agency that have ABC roles in Edison. You will have approximately four weeks to review and respond.

Service Center Metrics/Customer Service Rating:

March 2019:

Tickets via Email: 917

Tickets via Self-Service: 3,937

Tickets via Phone: 4,808

Tickets via Chat: 192

Total: 9,854

■ Satisfaction Score: 96.3%

March 2018:

Tickets via Email: 528

Tickets via Self-Service: 3,077

■ Tickets via Phone: 4,949

■ Tickets via Chat: 37

Total: 8,591

Satisfaction Score: 95.8%

- We received about the same number of calls this year as compared to last March, and the number of tickets via email, self-service, and chat went up. Total interactions increased by about 1,300.
- We take the satisfaction of our customers very seriously. Please complete the survey after your Zendesk ticket is resolved.
- If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy. Our satisfaction rate for March was 96.3% percent, up from 95.8% last March.

State: ESS:

o ESS % for February: 94%

YTD: 94%

New ABC Training:

April 24th: Local Education: 9-11 a.m. Central time
 April 24th: State/Higher Education: 1-3 p.m. Central time
 April 25th: Local Government: 9-11 a.m. Central time

o April 25th: Session 2 - All Entities 1-3 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

- o Local Ed: Could you resend that flier out (BCBST Fitness Now April promotion flier)?
 - **Answer:** It has been posted on the ABC webpage, under 2019 emails, by the 03.29.19 date. You can print it from the website.
- o **Local Ed:** For open enrollment for spouses, we are no longer going to continue to allow this as a reason to cancel insurance?
 - Answer: You can still cancel coverage if the employee or dependent is enrolling elsewhere due to another enrollment, however, we will no longer allow them to enroll if they are voluntary dropped from other coverage. They can't enroll onto the state's coverage if they voluntary drop from other coverage.
- o Local Ed: Are there no premium increases in any of our products?
 - **Answer:** Correct, for local education, there are no premium increases for health, dental and vision coverage for 2020.
- o Local Ed: No changes to the plan, either?
 - Answer: We can't say this for certain as we won't know final changes until May. Right now we believe any changes will be to the benefit of your members. The Insurance Committee will vote on plan design. We don't believe there will be major changes options will remain the same, there are no premium increases and any changes will likely benefit the member. Our contract with Caremark expires at the end of the year, and we will conclude the request for proposal process very soon.
- o Local Ed: Can three people have ABC status in our agency?
 - Answer: You will need to submit the Edison security form and BA will review it. Please note from the Local Ed MOU, https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/abc_le_mou.pdf: [Section 1A Responsibilities of the LEA, item number 16.] If the LEA has more than twenty-five (25) members, it shall maintain two (2) ABCs who have access to Edison at all times. For security purposes, no LEA shall have more than two ABCs with Edison access unless additional ABCs have been authorized by BA.
- State: Do we need to let our people know about the First Care incident?
 - **Answer:** We have only had one person contact us with this issue, so you don't need to alert your members. However, if you have members who contact you as they may

have received a call from a company/organization that seems questionable, please have them contact us or they can call the carrier directly.

- o Local Gov: Do we know when we will have information for open enrollment?
 - Answer: We sent a letter to all agencies and ABCs on Thursday, April 11 with premium information. We have also attached the letter with the Friday, April 12 email. Note: premiums and plan design won't be final until the Insurance Committee meets at the end of May. We are recommending to the Insurance Committee that there are no premium increases for health, dental or vision for 2020. We don't believe there will be many benefits changes and any changes we do have we believe will be to the benefit of the member. Our contract with Caremark expires at the end of the year, and we will conclude the request for proposal process very soon. We should know the pharmacy benefits manager by the end of the month
- O Local Gov: Under our Memorandum of Understanding (MOU) can we offer any other carriers/plans other than what is offered under the state for our employees outside of what is offered for the state?
 - **Answer:** There is a prohibition on offering other plans. If you have something you would like to offer you can send the information to the <u>benefits.info@tn.gov</u> email and we'll get an answer for you.
 - For more information, see the Memorandum of Understanding (MOU)
 Responsibilities under the ABC section of the ParTNers website at
 https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/abc_lg_mou_resp.pdf. Section 1A, page 5, item number 10.
- Local Gov: Is there a list of things that MetLife requires for the six month waiting period (dental)?
 - Answer: Yes, you can find information on the <u>Publications page</u>, <u>under dental</u>. The <u>handbook</u> is there and it will include a list of any services that require waiting periods.
- o **Local Gov:** Where can I find a copy of our MOU?
 - **Answer:** It is on the <u>ABC webpage</u> under Local Government Plan <u>Memorandum of Understanding Responsibilities</u>.

Materials and Communications

- ABC Survey Reminder: Last week, Benefits Administration (BA) sent the annual ABC customer service survey to all primary ABCs. We also sent a reminder this week. Your responses to the 2018 survey were extremely valuable in helping us understand areas where we do well, and where we could better meet your needs and improve our services to you and your members.
 - o Primary ABCs have until today, Friday, May 17, to complete the survey. If you have already completed the survey thank you!
- State: #4mind4body Lunch and Learn Opportunity Virtual Visits: ParTNers for Health has teamed up with the Department of Mental Health and Substance Abuse Services to offer the #4Mind4Body lunch and learn series to state employees during Mental Health Awareness Month. There is one more #4Mind4Body presentation left in the series.
 - o No registration required. Employees can join in-person or <u>log in for the webinar</u>. More information is on the ParTNers for Health website, <u>under Other Benefits</u>, <u>EAP</u>.
 - o #4mind4body Lunch and Learn Virtual Visits
 Wednesday, May 29, 11:30 a.m. to 12:30 p.m. Central time

Tennessee Tower, 3rd floor, rooms A&C, or log in to the webinar

Description: Virtual Visits are an outpatient mental health treatment option that uses secure technology to deliver EAP, evaluation, therapy, medication management, information and education at a distance in real time. Learn how to find a provider, make an appointment and engage in a Virtual Visit with a licensed provider in the comfort of your home. A representative from Optum, the State's EAP and Behavioral Health provider, will also outline state employee benefits and answer any questions.

HIPAA Training Reminder

- Higher Ed/State: HIPAA Training Update: Every year, all ABCs, backups and directors
 who have access to Edison are required to complete the annual HIPAA training. Completion of
 this training is recorded in Edison. BA is required by the federal government to provide HIPAA
 training and track completion of the training. The deadline to complete your 2019 HIPAA
 online training was April 30.
 - o There is no record of 73 state and higher ed ABCs (23 are higher ed ABCs) completing the training for 2019. We are allowing these ABCs a one-time grace period. They will have until May 31st to complete the training or their Edison access will be terminated effective June 1st.
 - o If you have not completed your required HIPAA training, please complete this training as soon as possible to ensure you do not lose access to Edison. If you have questions, you can email benefits.privacy@tn.gov

STATE/HIGHER ED HIPAA QUESTIONS

- o **Higher Ed:** When you said there are 73 people who haven't completed the HIPAA training, is that just Higher Ed or State and Higher Ed?
 - **Answer:** It is state and higher ed, and there are 73 ABCs who have not completed the HIPAA training.
- Higher Ed: Are we supposed to get a certificate when we complete the HIPAA training?

- **Answer:** BA will not send a certificate, but you can print one for your personal records from Edison as this will keep a record of all your completed trainings.
- State: What happens when you lose access to Edison?
 - Answer: You will no longer have access to any benefits information in the system. You will no longer be able to submit enrollment forms for employees, and you will not be able to call the service center on an employee's behalf. We will not be able to share any benefits-related information with you for any of your employees.
- Local Ed: HIPAA Training Reminder Now Through May 30: The 2019 HIPAA annual training is open in Edison for Local Education. As you know, all ABCs, backups and directors who have access to Edison are required to complete this training each year as a part of your agreement with Benefits Administration (BA). Our 2019 training is online in Edison, and instructions for how to enroll are below. You have until April 30th to complete the training. You must complete the annual HIPAA training every calendar year. Even if you completed the 2018 training in 2019, you must still take the 2019 HIPAA training. Failure to comply with mandatory training requirements may result in suspension of insurance benefits access. We have an obligation to our members to understand and follow HIPAA. Training requirements will not be waived unless approved in advance by the BA HIPAA Compliance Officer. Please complete the training ASAP. I would love for Local Education to be 100% compliant. I appreciate all your help with protecting our members' health information.
 - For further instructions on accessing HIPAA annual training, please click the link below to watch a video (found on YouTube channel) or follow instructions below. https://www.youtube.com/watch?v=crMCBzo9vIk

HIPAA Annual Training Instructions

Make sure you have the most current version of Internet Explorer and Adobe Flash. You must allow pop-ups. If you do not have the most current versions or don't allow pop-ups the training will NOT run. Verify with your agency's IT department that you have current versions. If you are having difficulty accessing the training in Edison, please submit a Zendesk ticket to the BA training department to request assistance.

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.

ALL AGENCIES will take the ABC HIPAA 2019 class.

Here is the navigation after you log in to Edison at www.edison.tn.gov:

NAV BAR >Navigator>ELM>Learning Home>Search for Learning type HIPAA

> Annual HIPAA Training (HIPAA 2000)> ABC HIPAA 2019

LOCAL ED HIPAA TRAINING

• Local Ed: I've tried and several of us have tried to complete the HIPAA training, and we can't get into the 2019 HIPAA training in Edison?

- Answer: It seems like there may be something set up incorrectly in your profile. You can submit a ticket through Zendesk into the training team, and we will look at your teams' profiles.
- Local Gov: HIPAA Training: The 2019 HIPAA annual training will open in Edison for Local Government on June 1st. As you know, all ABCs, backups and directors who have access to Edison are required to complete this training each year as a part of your agreement with Benefits Administration (BA). Our 2019 training is online in Edison, and instructions for how to enroll will be sent to you. We have changed our process to ensure that everyone gets the required training in a timely manner. You have from June 1st to June 30th to complete the class. You must complete the annual HIPAA training every calendar year. Even if you completed the 2018 training in 2019, you must still take the 2019 HIPAA training. Failure to comply with mandatory training requirements may result in suspension of insurance benefits access. We have an obligation to our members to understand and follow HIPAA. Training requirements will not be waived unless approved in advance by the BA HIPAA Compliance Officer. Please mark your calendars next month about your HIPAA training. I would love for Local Government to be 100% compliant. I appreciate all your help with protecting our members' health information.

Operations

- New Edison Benefits Security Form (all calls):
 - New Security Form effective immediately
 - o BA-1001 BA Agency Ben Coordinator: Central State ABCs only
 - o BA-1013 BA External Agency Ben Coordinator: Keying Access for non-State ABCs
 - o **BA-1017 Benefits Inquiry Only:** View-only/Reports access for non-State ABCs
 - ABC Website > Forms > Edison Benefits User Security Authorization Form
 If an old form is used, we will send it back and request the new form

The Edison Benefits User Security Authorization form has been updated and should be used effective immediately. We have changed the descriptions on the form to be clearer. The Agency Ben Coordinator role should only be selected for Central State ABCs. The External Agency Ben Coordinator should be selected for non-state ABCs that need keying access. The Benefits Inquiry Only role should only be used if you have a backup ABC that needs access to reports only. The security form is housed on the ABC website under the Forms section. If an old form is used, we will send it back and request the new form. Please make sure that you always use the form on the website and don't save it for future use or print off copies to use later.

• Local Ed: Email Address Request:

- o Email request sent Friday, May 10th to primary ABCs only
- o Template attached to email name, email address, Edison Employee ID (or SSN) needed
- o TN_HR156_SYSTEM_PERSONAL_EMAIL lists all employees with email addresses
- o Upload in Zendesk: ABC Email Spreadsheet Upload form
- o Response required by May 24th

- O Based on a survey of state and higher ed employees, more than 80% indicated that they prefer to receive their benefit communication via email. We noticed there are many invalid or old email addresses on Edison. In an effort to update Edison with current email addresses, we sent an email to the primary ABC in your agency last Friday, May 10th with a request for employee email addresses.
- We have received feedback that this is a laborious effort on your part. We certainly don't want you to have to manually enter emails into the system. The best case scenario would be for you to provide a list of emails for all benefit eligible employees to upload in Zendesk.
- O Some of you have indicated that you provide the email when submitting the eForm which is stored on a field in the *Modify a Person* page. The employee can update their email address under the *My System Profile page*. Unfortunately these two email address locations do not talk to each other. So it is very possible for the same person to have an up-to-date email address in one location and not in the other.
- The Edison system is set up to use the email address from My System Profile for communications such as the Benefits Confirmation statement when they make changes during Annual Enrollment. As a result, almost all communications sent by Benefits Administration, Benefits vendors and the Edison website use the email address stored under My System Profile. As a reminder, this is the location you as an ABC will not be able view or update. However, if you run the query TN_HR156_System_Personal_email mentioned in last Friday's email, it will give you the email address currently stored in this location. We are looking into ways to move the email address that is in Modify a Person to My System Profile, but then we run the risk of overriding a more current email address that the employee may have entered directly into My System Profile.
- We have had a couple of questions from ABCs who see retirees on the list when they run the HR156 query. You do not need to update emails for retirees. You can either filter them out of the list by looking for the Business Units that start with "R", or you can run the query twice one with a business unit of LETEA for a list of teachers and one with a business unit of LETEO for support staff. And if this all seems too complicated, and you have a way to obtain a list of email addresses for all employees in your own system, we can take that list instead as long as it has the Edison employee ID or SSN on it.
- Also attached to that email last Friday was a template for you to provide updated email addresses for those employee records with out-of-date emails or missing emails showing on the TN_HR156 query. Since you do not have the access to My System Profile, you would not need to key these in Edison. However, we still need for you to provide us with either a full list of all employees and their current email addresses or a list of the ones you notice need updating, whichever is easier for you.
- There is a new type of document upload in Zendesk specifically for this project. It is called the ABC Email Spreadsheet Upload. You can create a ticket using this form and attach the excel file.

This information is due back to us by Friday, May 24th. I know this is a busy time of year for you, and I apologize for the timing of this request. We know that a lot of you aren't there in the summer, and that August can be even busier so we thought it would be better to request this information now. If you need an extension, please contact us using a Zendesk ticket with your name, agency name and how long of an extension you are requesting. Thank you for working with us to make sure we can get communications to employees in their preferred method.

LOCAL ED EMAIL ADDRESS REQUEST QUESTIONS

- Local Ed: Can you take a master email list with name, email and SSN instead of Edison ID?
 - o **Answer:** Yes, that will give us what we need.
- Local Ed: We have a master list but it does not include SSN or ID, just employee names and emails. What do you suggest to keep from having to key everyone in?
 - Answer: We will need the SSN or Edison employee ID on the spreadsheet. If someone is tech savvy in your organization, you could try to match up with the template in excel and plug in the email addresses that way. We will have to have one or other, the SSN or Edison ID, on the spreadsheet.
- Local Ed: Can the report you sent to us be updated and uploaded into Zendesk after we have reviewed? Or does it have to be a new list on your template?
 - Answer: We didn't send a specific list of emails for your agency, we just sent the template and the query you could run. You can run the query and update the template with that query, or send your own list as long as it includes the SSN or Edison ID. Be sure to upload the list into Zendesk and don't send it through email.
- Local Ed: At the Highway Department we have mostly older employees who don't have email. What do you recommend we do about updating those folks?
 - o **Answer:** We can't get an email address if they don't have one, but they may have a personal email address that you could include and that may also be beneficial for you in your communications.
- Local Ed: What do we do about employees who are benefits eligible but do not have a district email? Can we leave those blank?
 - Answer: If an employee doesn't have an email addresses, you can leave it blank or the employee could provide a personal email address.
- Local Ed: What do we do with employees if they don't have internet or an email address?
 - **Answer:** You don't have to provide one if the employee does not have one.
- o Local Ed: What should we be entering on the eHire form for employees who do not have a district-provided email? That field is required on the eHire form.
 - O Answer: You can help them create an email address through gmail or another free service and have an address tied to the employee instead of putting your email address in the eHire form. This will help us as we are trying to get the information

out to the employees during annual enrollment, or if we have vendor changes or hospital and facility changes. We will still rely on ABCs to share the information with their employees, but it gives us another avenue to supplement our communications to members.

- Local Ed: Will they (employees) still receive communications in ways other than emails? A great deal of our employees don't check their emails (or even know how to get into them).
 - Answer: Yes, we will still be sending communication via mail during annual enrollment, and we send information directly to you, the ABC, to push out to members.
- Local Ed: Most of the emails on my spreadsheet are personal emails. I can send a list of
 district emails, but that would that override their personal email. Which would you
 prefer?
 - Answer: We prefer the email address the employee checks regularly. If they have a personal email that they have provided to us, then I would include those email addresses on the list. The purpose is to find missing email addresses. We do know that there are some addresses that need to be corrected, and there are some agencies that have wrong domains that are no longer valid. We are cleaning up what we have and getting email addresses that we don't currently have.
- o Local Ed: We have employees who do not have cell phones or internet access.
 - Answer: We do know that, and that is why we communicate to you and why we
 mail newsletters to members. Email is one way to supplement communication to our
 members.
- o **Local Ed:** Our system is changing to a new email management and every email address will change. If we send them now, they will all change and be totally wrong.
 - **Answer:** You can send us a Zendesk ticket with that information and let us know when you will have the updated email address information.
- Local Ed: Are employees able to edit their email during the annual enrollment period in Edison? I have some employees hired in 2016 who are on the list of not having an email. I thought they had been required to have an email address longer than that when initially adding them to Edison.
 - **Answer:** Employees are able to edit their email during the enrollment process.
- Local Ed: Can they delete the email address? Can you make it so they cannot delete it?
 - **Answer:** Yes, they can delete their email address, but we have no way of knowing if they have done so.
- **Local Ed:** Security Audit
 - o Thank you! All but two agencies have responded.
- **Local Gov:** Security Audit
 - o Email sent Thursday, May 9th
 - o Deadline: Friday, June 7th

- Security access will be removed for non-respondents
- O Questions? Reply to the email or contact the service center
- O The annual security audit email went out last Thursday, May 9th. You have until Friday, June 7th to respond. A response from you is required since this yearly audit confirms your agency's current access to the Edison system. We will have to remove security access for the ABCs from the agencies that we do not hear back from so it is very important that you confirm the list and respond back to us. If you have any questions regarding the audit, you can reply directly to the email you received last Thursday. This email was sent to the primary ABC for each agency.

Service Center Metrics/Customer Service Rating

o April 2019:

■ Tickets via Email: 849

■ Tickets via Self-Service: 3,757

Tickets via Phone: 4,564

■ Tickets via Chat: 223

■ Total: 9,393

Satisfaction Score: 100%!

April 2018:

Tickets via Email: 728

Tickets via Self-Service: 3,334

Tickets via Phone: 4,535

Tickets via Chat: 63

■ Total: 8,660

Satisfaction Score: 96.8%

- We received about the same number of calls this year as compared to last April, and the number of tickets via email, self-service and chat went up. Total interactions increased by about 700.
- We take the satisfaction of our customers very seriously. Please complete the survey after your Zendesk ticket is resolved.
- o If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy. Our satisfaction rate for April was 100% percent, up from 96.8% last April.

State: ESS Participation Rates:

o ESS % for March: 95%

o YTD: 94%

State: PPACA Updates

- Remember that we need all benefit eligible employees to use ESS even if they are waiving coverage. We need proof that we offered and the employee declined coverage for PPACA purposes.
- The statement above is familiar to most of you. It is in the email with the ESS Participation Rates each month. I want to thank you for your continued focus to ensure

that our newly hired employees use ESS, particularly, when waiving coverage. Also, I want to thank you for responding quickly to our annual request and offer of benefits to PPACA eligible employees in December each year. Let me tell you the reason that we are so appreciative. We received an IRS communication regarding our PPACA 2016 reporting. Out of approximately 50,000 submissions, we had five state employees who were eligible for our benefits and obtained a Marketplace subsidy. In all cases we were able to determine and respond that we offered benefits to these individuals and that they waived coverage. Thank you for your diligence to ensure the State reports our ACA requirements accurately.

Billing and Payroll Workshop

- **Higher Ed**: Upcoming ABC Training
 - o ABC Workshop:
 - Billing/Payroll
 - May 30: 10:30 11:30 a.m. Central time

Link: https://tngov.webex.com/tngov/j.php?MTID=m5aae93819e002893277df9b95fbca72f

Meeting Number (access code): 648 965 219

Meeting Password: Highed1

Once the link is open, click Join Now, Enter your Full Name and Email Address so you will receive credit.

To listen to the presentation, choose the Call Me option on the screen and enter your phone number. No extension numbers are allowed to be entered.

Local Ed/Local Gov: Upcoming ABC Training

- o ABC Workshop:
 - Billing/Payroll
 - May 30: 9 -10 a.m. Central time

Link: https://tngov.webex.com/tngov/j.php?MTID=m35850bc6afdd6b83b2bde017fdeaa3fa

Meeting Number (access code): 644 096 015

Meeting Password: billing

Once the link is open, click Join Now, Enter your Full Name and Email Address so you will receive credit.

To listen to the presentation, choose the Call Me option on the screen and enter your phone number. No extension numbers are allowed to be entered.

State: Upcoming ABC Training

- o ABC Workshop:
 - Billing/Payroll
 - May 30: 1-2 p.m. Central time

Link:

https://tngov.webex.com/tngov/j.php?MTID=m00e9854865a99a8dbd856c4aae92d7d8

Meeting Number (access code): 643 387 990

Meeting Password: billing

Once the link is open, click Join Now, Enter your Full Name and Email Address so you will receive credit.

To listen to the presentation, choose the Call Me option on the screen and enter your phone number. No extension numbers are allowed to be entered.

• New ABC Training

- o May 22: Local Education: 9-11 a.m. Central time
- o May 22: State/Higher Education: 1-3 p.m. Central time
- o May 23: Local Government: 9-11 a.m. Central time
- o May 23: Session 2 All Entities 1-3 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:** Approximately how long does it take for an administrative error to be reviewed?
 - **Answer:** Typically, it will take 10 business days. If you have one that hasn't been reviewed within 10 business days, you can submit a Zendesk ticket, and we'll research it for you.
- **Higher Ed:** What if a person has to go to the doctor; do they just go and file a claim later?
 - Answer: If it's a triage situation and the member needs to get to a doctor, we ask that you contact Benefits Administration, and we'll update the vendor as soon as possible and work to get the member access to their ID cards and information they will need.
- **Higher Ed:** What exactly will the billing workshop cover?
 - **Answer:** It will basically go over our payroll calendar, when to run your collections applied report, what the report will show and specific dates on the payroll calendar that will be helpful.
- o Local Ed: I missed the first few minutes of the call... what spreadsheet are you talking about?
 - **Answer:** I'm talking about the email we sent out to primary ABCs asking about updating email addresses. We will include this information in the call notes.

- Local Ed: How long should we keep enrollment forms specifically for those who have left our system?
 - Answer: We keep the enrollment information in Edison indefinitely. You may have your own agency-specific document retention rules, but due to the lag in IRS reporting notices and MOU language indicating that copies of files may be requested by BA for audit determination, we recommend that you maintain enrollment information (including the Employee Checklist) for a minimum of five years beyond an employee's termination date.
- State: When there is communication between the ABC and Benefits Administration, is there a running record in the system of what is discussed that stays with the individual who is insured? There has been correspondence between me and one of the BA representatives, and there was not a record of it. I was able to get the issue resolved.
 - Answer: We do maintain records of all of the Zendesk tickets, and we note in Edison under the member profile page any calls that the member may have made. Any time we speak with an ABC or a member, we note it in the member record. That is not acceptable, so if you have a situation for a certain member you would like for us to research, you can submit a Zendesk ticket with the member's name and Edison ID, and we will look into it.
- o Local Gov: I have not received an email about the security audit. Can you please send to me?
 - **Answer:** We have you listed as a backup, so the primary ABC is the one who should have received the email. But if you think we need to change this, you can submit a Zendesk ticket, and we will look into it
- o Local Gov: Who do we speak to regarding our retiree billing?
 - **Answer:** The best way is to submit a Zendesk ticket with the retiree information, and we will have someone get back to you.
- o **Local Gov:** I have recently contacted BCBS and CIGNA trying to help employees with claims and other problems and both BCBS and CIGNA say I am not on the list to receive that information. How do I get on the list as an ABC?
 - Answer: You can send your information to benefits.info@tn.gov, and we will research for you. As a follow up, we confirmed that both carriers have access to the list of ABCs but don't necessarily publish the list for their call center representative since it is so extensive. Instead, BCBS and Cigna representatives are trained to disclose the minimum information necessary to complete a call when a caller identifies themselves as an ABC and verifies two pieces of HIPAA-required information. Also, the carriers have committed to conduct additional training for new call center employees, and BA will ensure the carriers have an updated list of ABCs.
- Cocal Gov: Once an employee is entered into Edison, how long is it before they can access Edison?
 - Answer: They will have access the day after their hire date if the hire date is in the
 past. You can reach out via Zendesk or call the service center if you need
 clarification.

Materials and Communications

• Save the Date - ABC Regional Training Schedule: Below are the locations, dates and times for the ABC regional trainings, by plan. On June 18, we will send registration links to both primary and back-up ABCs. All primary and back-up ABCs are encouraged to attend the regional ABC trainings.

2019 In-Person ABC Meeting Schedule Higher Education

Location	Date of Meeting/Registration
Wilson County Expo Center 945 Baddour Parkway Lebanon, TN 37087	Wednesday, July 31, 2019 8:00 to 4:00 Central
Tennessee Tower, Tennessee Room 312 Rosa L. Parks Ave. Nashville, TN 37243	Wednesday, August 7, 2019 8:00 to 4:00 Central
UT Conference Center 600 Henley Street Knoxville, TN 37902 (Floor 4, Room 413 ABC)	Tuesday, August 13, 2019 8:00 to 4:00 Eastern
Double Tree by Hilton 1770 Highway 45 Bypass Jackson, TN 38305	Tuesday, August 20, 2019 8:00 to 4:00 Central

2019 In-Person ABC Meeting Schedule Local Education

Location	Date of Meeting/Registration

Wilson County Expo Center 945 Baddour Parkway Lebanon, TN 37087	Thursday, August 1, 2019 8:00 to 4:00 Central
UT Conference Center 600 Henley Street Knoxville, TN 37902 (Floor 4, Room 413 ABC)	Wednesday, August 14, 2019 8:00 to 4:00 Eastern
Double Tree by Hilton 1770 Highway 45 Bypass Jackson, TN 38305	Wednesday, August 21, 2019 8:00 to 4:00 Central

2019 In-Person ABC Meeting Schedule State

Location	Date of Meeting/Registration
Wilson County Expo Center 945 Baddour Parkway Lebanon, TN 37087	Wednesday, July 31, 2019 8:00 to 4:00 Central
Tennessee Tower, Tennessee Room	Wednesday, August 7, 2019 8:00 to 4:00 Central
312 Rosa L. Parks Ave. Nashville, TN 37243	
Nasiiville, 11v 3/243	T 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
UT Conference Center 600 Henley Street Knoxville, TN 37902 (Floor 4, Room 413 ABC)	Tuesday, August 13, 2019 8:00 to 4:00 Eastern
Double Tree by Hilton	Tuesday, August 20, 2019 8:00 to 4:00 Central
1770 Highway 45 Bypass Jackson, TN 38305	

2019 In-Person ABC Meeting Schedule

Local Government

Location	Date of Meeting/Registration
Wilson County Expo Center 945 Baddour Parkway Lebanon, TN 37087	Thursday, August 1, 2019 8:00 to 4:00 Central
UT Conference Center 600 Henley Street Knoxville, TN 37902 (Floor 4, Room 413 ABC)	Wednesday, August 14, 2019 8:00 to 4:00 Eastern
Double Tree by Hilton 1770 Highway 45 Bypass Jackson, TN 38305	Wednesday, August 21, 2019 8:00 to 4:00 Central

REGIONAL TRAINING QUESTIONS

- o Local Ed: When can we register for the Aug 21 meeting (ABC regional trainings)?
 - **Answer:** We will send registration information and links out Tuesday, June 18.
- Social Media Sites Reminder: In addition to the information we directly share with you and that is mailed or emailed by BA and our vendors, we also have social media sites that you and our members can follow for more information. We invite you to follow us on the sites below, and we've included information in the Friday ABC email you can forward to your members:
 - o ParTNers for Health
 - Facebook https://www.facebook.com/ParTNersForHealthTN
 - Twitter https://mobile.twitter.com/ParTNerHealthTN
 - Instagram https://www.instagram.com/ParTNersForHealth/
 - Pinterest https://www.pinterest.com/ParTNers4Health/
 - YouTube https://www.youtube.com/user/partnersforhealthtn
 - State: For Working for a Healthier Tennessee, the workplace wellness program for State of Tennessee employees, we also have these social media sites you can join and share with your employees:
 - Facebook https://www.facebook.com/WFHTN/
 - Twitter https://twitter.com/WFHTN
 - Instagram https://www.instagram.com/workingforahealthiertn/
 - YouTube https://www.youtube.com/user/TNSiteChampions
 - Working for a Healthier Tennessee provides each department in the State of Tennessee with the tools and support they need to encourage and enable their

employees to lead healthier lives for years to come by focusing on three key areas: physical activity, healthy eating and tobacco cessation.

• The initiative creates a healthy, positive workplace and shows how taking small steps can help employees achieve their larger goals.

• State: Tennessee Employee Discount Program (DOHR) and Flier

- O The State of Tennessee Employee Discount Program exists to offer state employees discounts on products and services from various vendors in order to express appreciation for the valued service state employees provide Tennessee citizens. The discount program features over eighty (80) vendors offering value added savings in the following categories:
 - Attractions and Entertainment
 - Online Shopping
 - Products and Services
 - Recreational Facilities
 - Technology
- DOHR is excited to announce that the discount page has now transitioned to <u>TeamTN</u> with a new user-friendly format! All retirees can access the discount page through the <u>TCRS</u> website.
- We hope you take advantage of the wonderful discounts offered through the Tennessee Employee Discount Program! You can contact the DOHR – Employee Relations Division at 615-741-0623 for any questions.
- o We've included a flier with the Friday ABC email you can send to your employees.

State and Higher Ed: Quest Data Breach:

- You may receive calls regarding a news story about Quest Diagnostics and a data breach involving almost 12 million people. As a reminder, Quest is ActiveHealth's subcontractor for our biometric screenings in our Wellness program for state and higher education members.
- None of our members participating in the ParTNers for Health biometric screenings were impacted by this breach.
- The American Medical Collection Agency (AMCA) provides billing collection services for Quest, and AMCA's web payments page was compromised, so the breach was specific to those who had used a clinical lab services location and had been turned over to collections.

Benefits

- Higher Ed/State: 2020 Plan and Benefits Presentation:
 - Good News for All Plans! No Premium Increases for 2020 (except retiree health coverage).

No major benefits changes — all changes will likely benefit your members

- Health insurance No premium increase
 - Premier PPO
 - Standard PPO
 - CDHP/HSA

State retiree health insurance – 3.2% premium increase (state and higher education retirees only)

o Dental insurance – Same carriers & no premium increases for either option

- Cigna prepaid dental plan
- MetLife DPPO plan

Davis Vision plan – No premium increases

Carrier networks will remain the same:

- BlueCross BlueShield Network S
- Cigna LocalPlus
- Cigna OAP The surcharge for Cigna's large OAP statewide network will remain \$40/\$80
- Providers, hospitals and doctors do move in and out of networks so it's important to remind your members to check closely to make sure their preferred options are in the plan they choose

o New Acupuncture Benefit

- This is the same benefit as chiropractic. Each person will have 50 visits for each service.
- Visits 1-20 @ PCP copay and 21-50 at Specialist copay.
- Intent is to avoid opioid use, surgery, and other costly interventions.
- Individuals who choose acupuncture as a first line treatment for pain are much less likely to end up taking an opioid.
- Currently a very small statewide network due to the limited number of licensed providers in the state.

o New Preferred Substance Use Disorder (SUD) Treatment Facility Network

- Incentivize use of Preferred SUD Facility Network.
 - Implement effective July 1, 2019
 - Stigma and advertising causes many to seek anonymous help directly from Out of Network facilities vs. contacting Optum for a referral
- Optum will guide members to the preferred facilities that demonstrate the best clinical and cost-effective outcomes for substance use treatment.
- Benefit design incents members to utilize the preferred substance use facility at no member cost share – so PPO members won't have to pay copays or coinsurance;
 CDHP members must meet their deductible first before the coinsurance is waived.
- Benefit applies to facility based substance use treatment. Copays and coinsurance apply for standard outpatient treatment services.

o Pharmacy Benefits Manager

- The contract has not yet been awarded.
- BA will keep you posted.
- Here is the information we are able to provide at this time: We are unable to go forward with the PBM contract because a protest has been filed with the Central Procurement Office (CPO). CPO is in charge of the protest process and will issue a

decision. When Benefits Administration is able to share information, we will provide it as appropriate.

Disability Contract (state and higher ed only)

- Contract extension for the disability contract through 12/31/21
- No premium increase for the disability contract for 2020 and 2021

o Population Health Incentives (state and higher ed only)

- Maintain cash incentive up to \$250 per employee and spouse (\$500 annual max.).
- Add a look back period for preventive services and biometric screenings (12/1/2019 11/30/2020).
 - So your preventive screenings and tests at the end of the year during the month of December will count toward your 2020 cash incentives.
- Add annual physical (well visit) \$50 incentive.
- Add well woman exam \$50 incentive.
- Remove prostate screening as an incentive option (as this screening has been since downgraded to C or D rating grade from the U.S. Prevention Services Task Force (USPSTF).
- All other cash incentives currently in place remain unchanged.

Local Ed/Local Gov: 2020 Plan and Benefits Presentation:

Good News for All Plans! — No Premium Increases for 2020
 No major benefits changes — all changes will likely benefit your members

• Health insurance – No premium increase

- Premier PPO
- Standard PPO
- Limited PPO
- Local CDHP/HSA

o Dental insurance – Same carriers & no premium increases for either option

- Cigna prepaid dental plan
- MetLife DPPO plan

Davis Vision plan – No premium increases

Carrier networks will remain the same:

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- Cigna LocalPlus
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 - Implement effective July 1, 2019
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 CDHP members must meet their deductible first before the coinsurance is waived.
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- BA will keep you posted.
- Here is the information we are able to provide at this time: We are unable to go forward with the PBM contract because a protest has been filed with the Central Procurement Office (CPO). CPO is in charge of the protest process and will issue a decision. When Benefits Administration is able to share information, we will provide it as appropriate.

HIPAA Training Reminder

- Local Ed: HIPAA Training Announcement: The HIPAA training for local education ABCs has been extended. If you have not completed your training, we encourage you to log in and complete your training today.
- Local Gov: HIPAA Training Now Through June 30: The 2019 HIPAA Annual training opened in Edison for Local Government on June 1st. As you know, all ABCs, backups and directors who have access to Edison are required to complete this training each year as a part of your agreement with Benefits Administration (BA). Our 2019 training is online in Edison and instructions for how to enroll is below. We have changed our process to ensure that everyone gets the required training in a timely manner. You have from now to June 30th to complete the class. You must complete the annual HIPAA training every calendar year. Even if you completed the 2018 training in 2019, you must still take the 2019 HIPAA training. Failure to comply with mandatory training requirements may result in suspension of insurance benefits access. Training requirements will not be waived unless approved in advance by the BA HIPAA Compliance Officer.
 - o For further instructions on accessing HIPAA Annual training, please **click the link below to watch a video** (found on YouTube channel) or follow instructions that follow.
 - o https://www.youtube.com/watch?v=crMCBzo9vIk

HIPAA Annual Training Instructions

- Make sure you have the most current version of Internet Explorer and Adobe Flash. You must allow pop-ups. If you do not have the most current versions or don't allow pop-ups the training will NOT run. Verify with your agency's IT department that you have current versions. If you are having difficulty accessing the training in Edison, please submit a Zendesk ticket to the BA training department to request assistance.
- 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.
- ALL AGENCIES will take the ABC HIPAA 2019 class.
- Here is the navigation after you log in to Edison at www.edison.tn.gov:
- NAV BAR >Navigator>ELM>Learning Home>Search for Learning type HIPAA
 > Annual HIPAA Training (HIPAA 2000)> ABC HIPAA 2019

HIPAA TRAINING QUESTIONS

- Local Gov: I work with Local Ed and Local Gov. If we've already taken the 2019 HIPAA training with Local Ed last month, is there anything else we need to do for Local Gov?
 - **Answer:** No, you do not have to take the HIPAA training twice as you have completed the requirement for the year.
- Local Gov: I completed HIPAA training yesterday but got a message today that I was 'in progress'?
 - Answer: Sometimes Edison will get hung up. You can send me an email at Chanda.rainey@tn.gov, and we will research this for you.

Operations

- Local Ed/Local Gov/Higher Ed: Medicare Eligible Letter:
 - New letter to be sent to active employees enrolled in health insurance who are approaching age 65
 - o Letter will be sent two-three months before the employee turns 65
 - o First group of letters will be sent in July for those turning 65 in September
 - Letters will be sent to employees only, not spouses turning 65
 - o Information in letter:
 - Gives basic explanation of Medicare (Part A, Part B, Part C and Part D)
 - Advises state group health insurance is primary even if enrolled in Medicare while covered as active employee
 - Advises that if the member enrolls in any part of Medicare, he/she may no longer be eligible to make HSA contributions
 - If planning to retire this year, the member can contact Benefits Administration or TN SHIP (State Health Insurance Assistance) to discuss retirement insurance
 - Gives TN SHIP number: 877-801-0044
 - We've attached a sample with the Friday, June 14 ABC email.

- Local Ed: Email Address Request Update: First, we want to say thank you to so many ABCs and agencies who returned their lists of employee email addresses. We are thrilled to relay that we have just a few outstanding email lists and the majority of those are from agencies that asked for an extension.
 - o If we have not heard from your agency, we will reach out by phone within the next week.
 - Again, we want to thank you for your help in making sure we have the most up-to-date information for our members so we can reach them effectively with important information.
- Local Gov: Email Address Request: We need your help. A recent state employee survey found that the majority of members, more than 80 percent, prefer receiving email communications about benefits. Because of this, Benefits Administration (BA) and many of our vendors have increased email communications using email addresses in Edison.
 - o From error reports and email bounce backs, we have identified that many local government agency email addresses in Edison are incorrect or out of date. For example, we noticed some employees have the same email address as other employees instead of each employee having a unique email address.
 - Here's where you come in. On June 21st, we will send you a template that we need you to complete with your current employees' names, email addresses and Edison employee IDs. You can also send employee Social Security Numbers (SSN) in place of the Edison IDs. You do not need to send retiree email information.
 - o If you need a list of your agency's current employees in Edison, you can run the query called TN_HR156_SYSTEM_PERSONAL_EMAIL. This query will give you the name, employee ID and email address found in Edison. The query only gives active employee records assigned to your agency and will include the current email address, which could be incorrect. If there is no email address for an employee, it will say 'no address on file'.
 - You will use the attached blank template we will send you and return it to BA with your employees' names, current email addresses and Edison employee IDs by uploading it into Zendesk (https://benefitssupport.tn.gov/hc/en-us). There is a new form on Zendesk created just for this purpose titled 'ABC Email Spreadsheet Upload'. If you have not used the Zendesk website before, go to https://benefitssupport.tn.gov/hc/en-us, and look for the 'Submit a Request' option toward the top right.
 - Whether or not you choose to run the query, it is important that you individually verify the accuracy of each employee's email address. Once you've done this, please upload your email template by July 12. Based on your signed Memorandum of Understanding (MOU), this is a requirement. But most importantly, we want to ensure we are reaching as many members as possible with important insurance-related information, such as a hospital update or other benefit change.
 - If you check all the emails in your agency and find that no updates are required, please respond to Benefits Administration and let us know this. You can respond directly back to the email you receive.

• Again, we'll send this to primary ABCs on June 21, but we wanted to give you a heads up now.

• **Local Gov:** Security Audit:

- o Deadline was Friday, June 7.
- o If we haven't received a response, we will be reaching out again individually.
- o If no response is received, we will have to remove security access from all ABCs with your agency.

• Service Center Metrics/Customer Service Rating:

- o May 2019:
 - Tickets via Email: 1,034
 - Tickets via Self-Service: 3,830
 - Tickets via Phone: 4,395
 - Tickets via Chat: 196
 - Total: 9,455
 - Satisfaction Score: 97.9%

o May 2018:

- Tickets via Email: 829
- Tickets via Self-Service: 3,801
- Tickets via Phone: 4,827
- Tickets via Chat: 61
- Total: 9,518
- Satisfaction Score: 97.6%
- We received about 500 less calls this year as compared to last May, and our total interactions were about the same due to an increase in tickets via email and chat.
- We take the satisfaction of our customers very seriously. Please complete the survey after your Zendesk ticket is resolved.
- o If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy. Our satisfaction rate for May was 97.9% percent, up from 97.6% last April.

• State: ESS:

- o ESS % for April: 95%
- o YTD: 95%

• Local Ed/Local Gov: Agencies Adding or Dropping Dental and Vision Plans

- As a reminder, the deadline for agencies wishing to add (if not already enrolled in the plan) or drop dental and vision coverage has been extended to August 1.
- You must notify us in writing that you wish to add vision and/or dental coverage. Your notification letter to BA must:
 - Be on your agency's letterhead.
 - State your agency's intent to join the vision and/or dental plan.

- Be approved by your governing body, if appropriate, and signed by your agency director.
- Indicate your willingness to allow payroll deduction.
- o Please send your letter to me. My email address is (<u>nakeisha.n.myles@tn.gov</u>).
- October for coverage that will begin on January 1, 2020.
- O Dropping Dental or Vision: If your agency would like to drop dental and/or vision coverage for the 2020 calendar year, BA needs a written notice. Please send the written notice to me by the August 1 deadline.

• New ABC Training

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

Here is how to sign up for training:

- 1. Login in To Edison.
- 2. Navigate to ELM Menu >ELM>Employee Self Service>Learning>Search Catalog>Enter ABC in the "Search the Catalog" field>Click the "Search Activities" button.
- 3. Locate the training you are interested in.
- 4. Locate the specific dates you would like to attend the webinar.
- 5. Click Enroll to the right of the training session you wish to participate in.
- 6. Click Submit Enrollment in the bottom lower left corner.
- 7. Once you have enrolled, you will see the following message under your name at the top of the page.

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

OPERATIONS QUESTIONS

- **Higher Ed:** Will the Medicare letter also go out to people who cannot continue insurance at retirement?
 - Answer: The letter is currently identifying those who are working and turning 65; it is not identifying those who are eligible for retirement insurance. Those who are still working and turning 65 have a lot of questions about what will happen and what steps they need to take. The letter does say that if they are planning on retiring to contact our office. When they call, we are going over their options, and we will go over eligibility with them. If The Tennessee Plan/POMCO option is not an option for them, we will refer them to the TN SHIP office for more information.
- o **Higher Ed:** Does the Medicare letter reference the Medicare plans and the difference between the four different parts or just reference what they need to do?
 - **Answer:** It does go into the four different parts of Medicare at a high level to guide them and to look into more information if they are turning 65. The important thing is that the letter points them in the right direction regarding what they need to be

looking into and the resources that are available to them such as the TN SHIP office for objective information on all of their Medicare options, not just our state TN Plan option

- Higher Ed: If an employee is on direct bill but they don't pay Benefits Administration and then they come back to work, is there a gap in their coverage? How does that work? For example, after I explained to an employee that she would be charged 100 percent of the premium, she is now pressing her doctor to come back before she is ready. If there is a month that she does not pay or there is a month that is not accounted for, is she responsible for that month's premium?
 - Answer: If an employee is enrolled in direct bill, does not pay the premiums and returns to work before she/he shows on the cancel for nonpayment report, benefits for the time period she/he was enrolled in direct bill and did not pay will be canceled and there will be a break in coverage. If the member is enrolled in direct bill, does not pay premiums and shows on the cancel for nonpayment report before returning to work, benefits will be canceled for nonpayment. The employee would be allowed a one-time exception to reinstate benefits in this case and if she/he did not choose to reinstate benefits she/he would have to wait until annual enrollment.
 - **Note:** BA does not retroactively bill for the full month of premiums if you have someone who has exhausted all of their time.
 - Note: If you do not place someone on direct bill because they are paying you directly, you will not be able to cancel them for non-payment if they fail to pay their premiums to your agency.
 - Note: Once an employee is no longer on FMLA and is on an unpaid leave of absence, she/he is responsible for both the employee and employer premiums.
 - There are Leave of Absence forms found on the publications page of the ParTNers for Health website:
 - https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/1037.pdf
 - https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/1036.pdf
 - We will talk about direct billing during the ABC regional training.
- **Higher Ed:** What are the annual enrollment dates?
 - **Answer:** For higher education and state, the dates will be September 30 through October 11.
- Higher Ed: Can you report about ActiveHealth participation?
 - **Answer:** Yes, we plan on reporting on member participation during the July ABC conference calls.
- o **Higher Ed:** What about the Quest breach information that was reported in the news?
 - **Answer:** The Quest breach does not impact our members participating in the ParTNers for Health biometric screenings.
 - Here is the information shared above and emailed to ABCs: You may receive calls regarding a news story about Quest Diagnostics and a data breach involving almost 12 million people. As a reminder, Quest is ActiveHealth's subcontractor for our biometric screenings in our Wellness program for state and higher education members.

- None of our members participating in the ParTNers for Health biometric screenings were impacted by this breach.
- The American Medical Collection Agency (AMCA) provides billing collection services for Quest, and AMCA's web payments page was compromised, so the breach was specific to those who had used a clinical lab services location and had been turned over to collections.
- Local Ed: With us not knowing who the pharmacy vendor will be, we don't know if there will be any changes yet?
 - Answer: That is correct. Here is what we can tell you at this time: We are unable to go forward with the PBM contract because a protest has been filed with the Central Procurement Office (CPO). CPO is in charge of the protest process and will issue a decision. When Benefits Administration is able to share information, we will provide it as appropriate.
- Local Ed: Regarding out-of-pocket maximum for in-network Premier PPO employee+spouse (\$7,200), it says two or more must meet this. I have a scenario, husband has met his \$3,600; the wife has not. The husband has been hospitalized with very large bills, etc. So, he still must pay the co-pay of 10% on major services? Meaning, they will never meet the out-of-pocket maximum until the wife meets her half, correct?
 - Answer: No, that is not correct. In the Premier PPO, no single individual has to meet more than the employee only share of the out-of-pocket maximum. Once an individual meets the employee only share then that individual's eligible expenses will be covered at 100% for the remainder of the plan year. If the husband has met the employee only share of the total out-of-pocket maximum, but the wife hasn't, then the wife will still have to meet her part. Here is an example that may help In-Network EXAMPLE:
 - Employee + spouse in the Premier PPO where the out-of-pocket maximum (OOP max) amount is \$7,200 and the employee only amount is \$3,600. One of the parties has \$3,600 out-of-pocket expenses with in-network providers, but the other party does not. The party meeting the \$3,600 will have the rest of their eligible in-network expenses paid at 100% for the remainder of the plan year. The party not having out-of-pocket expenses totaling \$3,600 will continue paying the 10% coinsurance for eligible services (after any remaining deductible).
 - Party 1 (has met OOP max) has new eligible expenses totaling \$1,000 member owes \$0,plan pays 100%,
 - Party 2 (has not met OOP max) has new eligible expenses totaling \$1,000 and still has \$300 remaining on the \$500 deductible member owes \$300 deductible + 10% (\$1000-\$300 = \$700 X 10% = \$70) for a total of \$370.
 - See also: the 2019 BCBS and Cigna Member Handbooks under "Publications" at https://www.tn.gov/partnersforhealth/publications
 - **Follow up question:** So, in this scenario, the husband has met his employee only out-of-pocket maximum, he will have 100 percent paid even though he has an employee+spouse Premier PPO plan with a \$7,200 out-of-pocket maximum?
 - **Answer:** Yes, he would have 100% of eligible expenses paid even though the spouse has not met her out-of-pocket maximum. What you have stated is

correct. There are additional explanations of cost sharing in the Cigna and BCBST member handbooks. You can find these on the <u>publications page on the ParTNers</u> for Health website.

- Local Ed: Do you have any suggestions for a new ABC? Where do we start when the previous ABC is already gone?
 - **Answer:** All ABCs have an assigned trainer. We will have that trainer reach out to you.
- o Local Ed: No change in premiums for 2020 for medical/dental/vision?
 - **Answer:** That is correct.
- State: Is the regional summer training required?
 - **Answer:** No, but highly recommended.
- State: Can you go back in layman's terms and explain about why the prostate incentive was changed?
 - Answer: The U.S. Prevention Services Task Force (USPSTF) has downgraded the screening from a C or D, so that is why we will no longer be incentivizing the test. It may still be recommended for some men by their doctor, but not for all men, so we will not incentivize the screening in 2020.
- o Local Gov: Is there the possibility that massage therapy will ever be covered?
 - Answer: At this time, we are not aware of any plans to cover massage therapy. However, if you are enrolled in the Local CDHP/HSA or enrolled in a FSA you can use the money in your HSA or FSA for massage therapy as long as you provide evidence of medical necessity (i.e., a doctor's note or letter of medical necessity that identifies that the recommendations and expense is for treatment of a medical condition).
- Cocal Gov: Do you anticipate any changes in costs for medication if there is a change in pharmacy manager?
 - Answer: We are not able to answer any questions such as this at this time. Here is the information we are able to provide at this time: We are unable to go forward with the PBM contract because a protest has been filed with the Central Procurement Office (CPO). CPO is in charge of the protest process and will issue a decision. When Benefits Administration is able to share information, we will provide it as appropriate.
- o Local Gov: Can we keep our insurance with the state after we turn 65?
 - **Answer:** If you are an active employee, yes, you can continue coverage no matter what age you are.
- Local Gov: What if our employees do not have an email addresses?
 - Answer: You can help create a free email address for them in gmail or another free email service. And, you don't have to have an agency address, you can use personal email addresses.

- o Local Gov: Will the email say security audit?
 - **Answer:** Yes, it does say security audit and it was sent to primary ABCs. We've also been sending weekly reminders to the ABCs who have not yet responded.
- o Local Gov: My primary ABC retired in May, and I am now the new ABC. Is there some way I can find out if she submitted the security audit?
 - **Answer:** You can send an email to <u>benefits.administration@tn.gov</u> and we will take a look at what we have received for your agency.
- o **Local Gov:** I was informed that our retirees could not receive vision and dental because they do not receive a pension check from TCRS. Our older employees have an older pension plan; however, one is still receiving dental and vision on our bill. They retired together and have the same benefits, so I don't understand why they are different?
 - Answer: It would be best to send in a Zendesk ticket so we can review. We can't answer this question without looking at the specific records for each person. Vision coverage for retirees is different. With vision you have to be enrolled in medical to receive coverage. Dental you don't have to be enrolled in medical to receive coverage.
- o **Local Gov:** Would you please confirm the deadline for employees to add dental and/or vision.
 - Answer: The deadline to submit the intent for your agency to enroll in dental and/or vision is Aug 1st. Employees will enroll in the coverage during the Annual Enrollment period.
- Local Gov: Who did you say we need to speak with to make sure we completed the security audit?
 - **Answer:** You can send an email to **benefits.adminstration@tn.gov** and we will research it for you.

Materials and Communications

• ABC Regional Training Registration Reminder

- Emails with registration links have been sent to all back-up and primary ABCs about the upcoming ABC regional trainings. We encourage you to sign up for a location near you – the dates, locations and times are on the screen. The trainings are not required, but highly recommended.
- o You'll be getting another reminder later today, so watch your email.

2019 In-Person ABC Meeting Schedule Higher Education

Location	Date of Meeting/Registration
Wilson County Expo Center 945 Baddour Parkway Lebanon, TN 37087	Wednesday, July 31, 2019 8:00 to 4:00 Central
Tennessee Tower, Tennessee Room 312 Rosa L. Parks Ave. Nashville, TN 37243	Wednesday, August 7, 2019 8:00 to 4:00 Central
UT Conference Center 600 Henley Street Knoxville, TN 37902 (Floor 4, Room 413 ABC)	Tuesday, August 13, 2019 8:00 to 4:00 Eastern
Double Tree by Hilton 1770 Highway 45 Bypass Jackson, TN 38305	Tuesday, August 20, 2019 8:00 to 4:00 Central

2019 In-Person ABC Meeting Schedule Local Education

Location	Date of Meeting/Registration

Wilson County Expo Center 945 Baddour Parkway Lebanon, TN 37087	Thursday, August 1, 2019 8:00 to 4:00 Central
UT Conference Center 600 Henley Street Knoxville, TN 37902 (Floor 4, Room 413 ABC)	Wednesday, August 14, 2019 8:00 to 4:00 Eastern
Double Tree by Hilton 1770 Highway 45 Bypass Jackson, TN 38305	Wednesday, August 21, 2019 8:00 to 4:00 Central

2019 In-Person ABC Meeting Schedule State

Location	Date of Meeting/Registration
Wilson County Expo Center 945 Baddour Parkway Lebanon, TN 37087	Wednesday, July 31, 2019 8:00 to 4:00 Central
Tennessee Tower, Tennessee Room 312 Rosa L. Parks Ave. Nashville, TN 37243	Wednesday, August 7, 2019 8:00 to 4:00 Central
UT Conference Center 600 Henley Street Knoxville, TN 37902 (Floor 4, Room 413 ABC)	Tuesday, August 13, 2019 8:00 to 4:00 Eastern
Double Tree by Hilton 1770 Highway 45 Bypass Jackson, TN 38305	Tuesday, August 20, 2019 8:00 to 4:00 Central

Local Government

Location	Date of Meeting/Registration
Wilson County Expo Center 945 Baddour Parkway Lebanon, TN 37087	Thursday, August 1, 2019 8:00 to 4:00 Central
UT Conference Center 600 Henley Street Knoxville, TN 37902 (Floor 4, Room 413 ABC)	Wednesday, August 14, 2019 8:00 to 4:00 Eastern
Double Tree by Hilton 1770 Highway 45 Bypass Jackson, TN 38305	Wednesday, August 21, 2019 8:00 to 4:00 Central

• Annual Enrollment Weekly Call Schedule:

- o August 13 ABC monthly conference calls canceled due to Regional Trainings.
- Weekly annual enrollment ABC conference calls will begin Sept. 10 for all plans.
- o An updated schedule was emailed with the Friday, June 28 ABC email.
- We will post the updated schedule this week on the ABC webpage under Conference Call Notes.

Benefits

• **Vision Benefits Updates:** Scott Halbert, our assistant director of voluntary products, joined us to go over some updates and new information from Davis Vision. The vision presentation slides follow:

Hearing Aid Discount Partner - change

Your Hearing Network

Your Hearing Network (replaces EPIC) - effective immediately

- Benefit Hearing examfor you and any family members covered through the Davis Vision Plan is free.
- Savings 40% off national average selling prices
- Access licensed hearing providers in all 50 states (audiologists and hearing aid dispensers)
- Choice Offers access to major brands and styles of hearing aids
- Features:
 - o 4 year manufacturer warranty
 - o 4 year free battery supply
 - o 1 year free follow up care
 - o 60 day satisfaction guarantee

How Does it work?

Members simply need to contact Your Hearing Network directly at: (888) 809-0044 / davisvision.yourhearing.com

DavisVision*

Deeper discounts on hundreds of hearing aid makes & models

Eyewear Dispensing Program - NEW

New program for fulfillment of eyewear orders for Independent In-Network providers

Independent Provider's choice of labs

- Access to any of 75 Essilor network labs nationwide (no longer required to use a Davis Vision lab)
- Essilor is the largest eyewear manufacturer in the world with a nationwide network of labs, advanced technology and lens innovation

Improved provider ordering system

 Streamlined ordering process through a brand-new online portal, with a catalogue featuring innovative lens products from top manufacturers

Enhanced and expanded product offering

 Larger variety of lenses, including the most utilized and requested digital progressives, antireflective coatings, and blue light protection

NOTE: New eyewear dispensing program will be fully implemented by 1/1/2020

DavisVision

For providers: improved ordering, choice of labs & enhanced product selection

New lens and coatings categories Providing you the latest in lens and coating technology Basic Plan Expanded Plan New LensandCoatingscategories Blue Light Filtering (Available as Lenses or Coatings) - Protection against harmful Blue Light Digital Single Vision and Computer Lenses Expanded choice of highest quality omfortable, relief from digital eye strain/stress Member Allowances / Copays for digitaland Progressive Lenses-Ultimate fier these new items will be Best in digital design and cutting edge technology communicated prior to the technology - Offers widest viewing areas for both reading & distance beginning of the Annual Enrollment Period. Anti-Reflective Coating - Ultimate tier -Exceptional visual clarity and protection against glare/reflections - Repels dust & dirt for clearer vision & less lens cleaning Provides comprehensive UV protection - Floribles complete sive ov protection -Some coatings in this new category fier will also provide protection from harmful Blue Light DavisVision

Visionworks — continued retail partnership In-Network provider with enhanced frame benefit On June 27, 2019, VSP announced that it signed an agreement to acquire Visionworks. This will have no impact on our relationship, nor our provider relationship and agreement with Visionworks. We now have a long term agreement in place with Visionworks/VSP. Visionworks and Davis Vision will continue to partner in the same manner we do today. Benefits not listed in this overview will not change under The State of Tennessee Voluntary Vision plan.

- **Cigna Dental Benefits Announcement**: Sharon Tansil with Cigna gave a brief announcement about a dental benefits change.
 - Effective 9/1/19, the age limit for a child to use a pediatric dentist has changed from 7 years to 13 years.

- State/Higher Ed: Securian Benefits Scout Presentation: Representatives Michael Kretman and Paul Romauld with Securian Financial joined us and presented information about a new enrollment tool, Benefit Scout that can help employees understand and make decisions about their life insurance benefits. Benefits Scout will be live Friday, July 12, and Securian will start to send it to new hires by email after this date. You can find this new tool on the Securian website: http://www.lifebenefits.com/stateoftn
- State/Higher Ed: Wellness Program Update: We will share some incentive and program participation stats for the wellness program at the in-person ABC meetings in August as well as during one of the September weekly calls.
 - Our screening vendor, Quest, has completed a total of 39 onsite screenings through the end of June, and we have 8 screening dates currently scheduled for late summer/early fall.
 - o We are starting to hear from more members as we get closer to the deadline about options for more onsite screenings. We would like to add some additional sites. If you have an interest in hosting a site this fall or have already hosted and feel that you have enough interest in hosting an additional site, please email Paige Turner at paige.turner@tn.gov. She will share your contact information with the ActiveHealth team.

Operations

- Celebrating our own Tameka Allen! Benefits Administration is proud to announce that our own Tameka Allen, service center manager, was the recipient of the Governor's Excellence in Service Award for the Department of Finance and Administration.
 - O This honor is given to employees who have exceeded leadership and customer expectations by going above and beyond what is expected, improving a department's customer service and ability to serve its customers. Each state department selects one person for the semi-annual award. Congratulations, Tameka!
- o Google Sheets: We are not able to accept documents sent using Google Sheets.
 - BA does not support the Google platform use Microsoft Office products instead (Word, Excel).
 - If you don't have access to Microsoft Office products and we are requesting information from you on a spreadsheet, please let us know so we can work something out with you.

• Local Gov: Memorandum of Understanding:

- An updated Memorandum of Understanding (MOU) will be emailed on July 15 to you, your director, and finance director if we have a contact in our files. The updated MOUs will need to be signed by your agency and returned to BA by August 15th.
- Once you received the updated version, if you have any questions, please contact us at **Benefits.Administration@tn.gov**.

• Local Gov: Security Audit Information

- o Thank you!
- Thank you for completing the annual security audit. All but 1 agency has responded and we are working directly with that agency.

- Local Gov: Email Address Request Reminder: On June 21, we sent you an e-mail regarding updates to employee email addresses.
 - o If you have not returned an updated list or responded back to you BA, the deadline is July 12.
 - Also, if you do not have Microsoft Excel or a spreadsheet program, you can reply to the email you received by putting your email addresses in the following format in the body of the email: EmplID OR SSN / Employee Name/ Employee Email Address
 - O Please do not send a separate email with this information unless you have a program installed that allows you to send email securely.

• Service Center Metrics/Customer Service Rating:

- June 2019:
 - Tickets via Email: 738
 - Tickets via Self-Service: 3,627
 - Tickets via Phone: 4,501
 - Tickets via Chat: 205
 - Total: 9,071
 - Satisfaction Score: 98.3%

June 2018:

- Tickets via Email: 813
- Tickets via Self-Service: 3,267
- Tickets via Phone: 4,809
- Tickets via Chat: 97
- Total: 8,986
- Satisfaction Score: 97.9%
- We received about 300 less calls this year as compared to last June, and our total interactions were about the same due to an increase in tickets and chat.
- We take the satisfaction of our customers very seriously. Please complete the survey after your Zendesk ticket is resolved.
- o If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy. Our satisfaction rate for June was 98.3% percent, up from 97.9% last year.

• State: ESS:

- o ESS % for May: 94%
- o YTD: 94%
- Our ESS monthly percentage dropped a little bit to 94% but we have plenty of time to bring it back up before the end of the year. Thank you for continuing to work towards our goal of 95%.

• Local Ed/Local Gov: Adding or Dropping Dental and Vision Plans

As a reminder, the deadline for agencies wishing to add (if not already enrolled in the plan) or drop dental and vision coverage has been extended to August 1.

- O You must notify us in writing that you wish to add vision and/or dental coverage. Your notification letter to BA must:
 - Be on your agency's letterhead.
 - State your agency's intent to join the vision and/or dental plan.
 - Be approved by your governing body, if appropriate, and signed by your agency director.
 - Indicate your willingness to allow payroll deduction.
- o Please send your letter to (nakeisha.n.myles@tn.gov).
- Your employees will be eligible to enroll during the annual enrollment period in October for coverage that will begin on January 1, 2020.
- O Dropping Dental or Vision: If your agency would like to drop dental and/or vision coverage for the 2020 calendar year, BA needs a written notice. Please send the written notice to me by the August 1 deadline.

Local Ed only: ABC Workshop:

- o Rehires/eForms/dates to use
- o July 25: 1-2 p.m. Central time

Link: https://tngov.webex.com/tngov/k2/j.php?MTID=ta564801e285c0f3c6e44896ff1616a45

Meeting Number (access code): 643 348 832

Meeting Password: workshop

o Once the link is open, click Join Now, Enter your Full Name and Email Address so you will receive credit.

To listen to the presentation, choose the Call Me option on the screen and enter your phone number. No extension numbers are allowed to be entered.

• New ABC Training

- o July 17: Local Education: 9-11 a.m. CT
- o July 17: State/Higher Education: 1-3.p.m. CT
- o July 18: Local Government: 9-11 a.m. CT
- o July 18: Session 2 All Entities 1-3 p.m. CT

Here is how to sign up for training:

- 1. Login in To Edison.
- 2. Navigate to ELM Menu >ELM>Employee Self Service>Learning>Search Catalog>Enter ABC in the "Search the Catalog" field>Click the "Search Activities" button.
- 3. Locate the training you are interested in.
- 4. Locate the specific dates you would like to attend the webinar.
- 5. Click Enroll to the right of the training session you wish to participate in.
- 6. Click Submit Enrollment in the bottom lower left corner.
- 7. Once you have enrolled, you will see the following message under your name at the top of the page.

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

ABC CALL QUESTIONS

- o **Higher Ed:** Will employees now have access to VSP providers?
 - Answer: No, this does not have any impact on our providers or network. VSP has acquired Visionworks. Davis Vision is still our vendor provider and members will utilize the Davis Vision network of providers which will continue to include Visionworks.
- **Higher Ed:** Will the selection of a pediatric dentist be resubmitted or how will this work?
- **Answer:** The dependent can remain with that pediatric dentist and will not have to change until the age of 13. If you have any dependents who have made a change to a different dentist who is not a pediatric dentist, then they will have to make a change back to a pediatric dentist. Members can contact Cigna at 800.997.1617 or they can make the change online at myCigna.com after creating a personalized account
- o **Higher Ed:** Can you speak to the number of eye care providers that have dropped out of the Davis Vision Network due to service concerns and issues, and what effort will be made to bring them back into the network.
 - Answer: The Davis Vision account manager team will be reaching back out to providers to let them know about the lab and portal changes, and we believe word will get out to the marketplace. We do know that the total number of providers has continued to grow. For example as of 12/31/18, the total number of providers was 23,865 and as of 03/31/19 the number grew to 24,018. We do not have information as to why a provider has left a network they may be moving, retirement or it may be dissatisfaction as you mentioned. With the Davis Vision changes, they expect continued growth in the network.
- O Higher Ed: What happens to the funds in an employee's flexible spending account (FSA) when a higher education employee directly transfers to a new university? For example, I have a UTK employee who directly transferred to ETSU. He still has funds in his FSA at UTK, and I don't know if those funds will be forfeited or somehow transferred to ETSU.
 - Answer: The funds that are in with old agency remain at the old agency and the employee will start new FSA accounts at the new agency, but they cannot exceed the total annual maximum contribution amount for the year. The prior funds do not transfer to the new agency; however, the employee can submit claims toward the old funds at the old agency. Any new claims can be applied toward the new agency limit.
 - **Follow up question:** So the employee would have to re-enroll in FSAs (if they switch employers)?
 - **Answer:** Yes, they would, but they would have to stay under the IRS annual maximums.
- **Higher Ed:** Is the health savings account contribution from the state pro-rated based on months of service in the plan year?
 - **Answer**: No, as long as your coverage effective date is on or before Sept. 1 you get the full contribution amount.

- **Higher Ed:** Does anyone know if Visionworks offers more discounts than other providers?
 - **Answer:** If you are comparing Visionworks to other vendors or outlets, we don't have that type of information. Each vendor has their own promotional items. The discounts a vendor offers is proprietary and we don't have that information. For example, if a frame costs \$100.00 and you get a 40% discount, we don't have access to the pricing.
- o Local Ed: Does Davis Vision have coverage outside of the State of Tennessee? I have an employee whose son is continuing his education in Virginia, and is covered under her vision and health insurance. Would he have any issues with using his parents insurance while he is outside of the state?
 - Answer: The Davis Vision network is nationwide. Members can go to the website and look up a provider across the country/network. Also, providers just need the name and ID number, that is all that they need and they can find you in the system members don't need an ID card. If you have questions or need a card, members can always call Davis Vision at 800.208.6404 for a duplicate or they can go online and print another ID card at davisvision.com/stateoftn.
- Local Ed: I received a call from an employee yesterday that they had received a letter from Davis that as of July 8th, Walmart would no longer be an in network provider. They had called some of the surrounding Walmarts and they did acknowledge this as being true. Any feedback on this?
 - **Answer:** We are working with Davis Vision, but as of now, do not have confirmation. We are trying to obtain a copy of the letter, and will follow up as soon as we have an answer.
- o **Local Ed:** Is Edison still in a black out period? I tried entering a new hire and could not today.
 - **Answer:** No, Edison is not in a black out period. We will have someone reach out to you.
- Local Ed: I'm curious as to why there is no confirmation reply as when I submit a retiree insurance application in Zendesk?
 - Answer: You should receive a confirmation when you create the Zendesk ticket that the ticket is submitted. We typically are not able to process the retirement insurance application right away and have to wait until the retiree is put in an approved status with TCRS. Many times retirement insurance application tickets may be in a pending status while we are waiting for the pension to be approved. However, you should be able to see the ticket status if you are the person who submitted it.
- o **Local Ed:** If we are hiring an employee who has Medicare. Will our insurance be primary or secondary
 - **Answer:** When a person is covered on the health insurance as an <u>active</u> employee, the state plan will be primary to Medicare.
- State: Can you post the link to Securian financial?
 - Answer: http://www.lifebenefits.com/stateoftn

- State: What exactly does "blue light protection" mean?
 - Answer: The light from your computer and iPad. There is information on the Davis Vision website that explains it. You can find information here at: https://versanthealth.com/blog/what-you-need-to-know-about-blue-light/
- Local Gov: Can we get the materials (from the Regional trainings) if we are unable to attend?
 - **Answer:** Yes, we are going to make the materials available online and we will let you know when they are available.
- Local Gov: Do you think that the change in labs with the independent doctors is going to help?
 - Answer: We cannot answer this definitively as the contract with Essilor is not in effect now. We do not have metrics to indicate how Essilor will compare with what we have now. On most occasions, given turnaround times, most of the turnaround times have been met. We would expect that with the size of the Essilor labs that you will see an improvement. Also, providers know the name Essilor. We will work to get you metrics in the future.
- o **Local Gov:** How will the acupuncture benefit work next year? Will BlueCross BlueShield and Cigna provide a list of preferred providers to choose from?
 - Answer: BCBST and Cigna will have providers identified who can perform acupuncture services, and members will be able to search for providers online and in the provider directories. The benefit will be like the chiropractic benefit and will have a maximum separate visit limit. The network may start smaller but will grow over time.
- o **Local Gov:** What is the purpose of turning in the email lists? I was just notified by the main ABC about this request today and I will most likely not make the deadline.
 - Answer: There are a couple of reasons actually. We recently sent out a survey to state employees and found that the majority of members prefer email communications, and with the emails we currently send out to members, we receive a lot of errors as the addresses are incorrect or out of date. We send information out via email in addition to what you communicate to members. If you need an extension, let us know by replying to the email you received with the date you can provide the updated list.
- o **Local Gov:** Will CVS be our pharmacy benefits provider for next year?
 - **Answer:** We are unable to go forward with the PBM contract because a protest has been filed with the Central Procurement Office (CPO). CPO is in charge of the protest process and will issue a decision. When Benefits Administration is able to share information, we will provide it as appropriate.
- Local Gov: Is the employee paid portion of health, dental and vision considered pretax for payroll withholdings? We are not offering anything besides the benefits offered by the State.

- **Answer:** It depends if you have a cafeteria plan in place to allow for pre-tax contributions. Your payroll office should be able to answer this question for you. Your paychecks should reflect if the deduction is pre-tax or after-tax.
- o Local Gov: What happens if an employee refuses to provide or create an email?
 - **Answer:** If they don't have an email, then you don't have to send us anything for that employee. We do encourage employees to create an address in Gmail. If the employee doesn't have one, then don't include their information on the list.
- o **Local Gov:** I have entered email addresses for employees when they first are first entered into Edison, but the report did not show these email addresses?
 - **Answer:** You can respond back to that email and we will have someone research this for you.
- o Local Gov: I pulled the e-mail report from Edison. I found only six incorrect e-mails. Do you just want the updated emails?
 - **Answer:** Yes, you can just send information for those six employees or if easier to send the full list then that is perfectly fine too.

Combined ABC Conference Call Notes Higher Education, Local Education, State and Local Government September 10, 2019

Materials and Communications

- Annual Enrollment Updates
 - o **Annual Enrollment Dates:** We've been relaying the annual enrollment dates for a few weeks now, but as a reminder, here are the 2020 enrollment dates:
 - State and higher education active employees: September 30 through October 11, ending at 4:30 p.m. Central.
 - o Retirees: September 30 through October 25, ending at 4:30 p.m. Central.
 - Local education, local government and retirees: September 30 through October 25, ending at 4:30 p.m. Central.
 - Annual Enrollment Newsletters: Annual Enrollment newsletters mailed last week to all groups. You can find PDFs of the newsletters on the Enrollment Materials page by plan.
 - o **ABC Newsletter Pre-Orders:** Pre-orders for newsletters ended Wed., September 4.
 - ABC newsletter orders will be filled within the next two weeks. If you ordered a large quantity, you may receive fewer than requested. After receiving newsletters, if you believe you need more, you can submit a request for additional copies on the traditional order form, and send it to our Admin team. We will do our best to fulfill additional requests.
 - You can also print PDFs from our website Enrollment Materials page.
 - If you missed the pre-order period, you can use an ABC order form to write in what you need. You will need to mail or fax the order form to the Admin team, per the usual process.
 - If you click the pre-order link in an "old" ABC email after the pre-order period ended (Sept. 4), this will not work. We will not receive your order. The pre-order form is no longer on our website.
 - New enrollment video check it out! We have <u>posted a new 2020 annual</u> enrollment video on the website on the About Enrollment page and it is also on the main video and YouTube pages.
 - Next week, Crystal Mallery, our print and digital publications manager, will join us to go over all of the 2020 annual enrollment website information.
 - Annual Enrollment PowerPoints Posted: The Annual Enrollment PowerPoint
 presentations you can use to present 2020 benefits to your employees are posted on the
 ABC webpage by plan. They are also on the Enrollment Materials webpage.
 - There are two different versions: a PPT and a PDF. You can customize the PPT presentation for your agency or department, but please do not change the premium or key benefit information.
 - The notes section is the "script" and may include additional information. You can share the PDF version directly with members.

Here is a direct link to the State and Higher Education PDF version with the notes.

Here is a direct link to the Local Ed and Local Gov PDF version with the notes.

o The Tennessee Plan (POMCO/UMR) premium rates: Will increase by 1.5% next year. Premium letters will be mailed to these members at the end of September.

- o **Other mailings:** Letters mailed on Sept. 4 to retiree or COBRA members who have dental only coverage letting them know when they are able to make a change.
- State and Higher Ed only: PayFlex FSA Webinar: On Thursday, September 12, PayFlex and the State of Tennessee hosted the following webinar: "What is a FSA and a L-FSA and how can you use it?" No pre-registration required. Log in instructions were sent to all employees (with a current email address on file in Edison) today, Tuesday, September 10.

Vendor Presentations and Benefits

- BlueCross BlueShield of Tennessee Presentation: Amy Jordan with BlueCross BlueShield joined us to answer network questions and go over the value adds for members to include the Diabetes Prevention Program and Fitness Your Way, as well as the member tools and resources available for members. You can find the presentation on the ABC webpage under Conference Call notes.
- MetLife Dental Presentation/Disability for State/Higher Education: Julie Salomone with MetLife joined us to answer your questions and to go over the MetLife dental plan highlights and resources available for you and our plan members including ID card information, the mobile app and how they can help with benefits fairs. You can find the presentation on the ABC webpage under Conference Call notes.
- **Higher Education/State: MetLife Disability Presentation:** Julie also went over disability coverage options and how members can enroll, and answer any questions you had. You can find the presentation on the ABC webpage under Conference Call notes. <u>Here is the state presentation</u> and <u>here is the higher education presentation</u>.
- Flu Vaccination Flier and Information: Keith Athow, our director of pharmacy, HSA and FSA, joined us to go over the flu vaccination flier we sent on Friday, Sept. 6 and was available to any questions you had.

FLU VACCINATION QUESTIONS

- Higher Ed: I was advised by the CVS Rep attending our benefits fair that the
 pneumococcal vaccine must be pre-authorized, as the vaccine is age and condition
 based. The flier appears to show no pre-authorization required. Please confirm no preauthorization required.
 - Answer: A prior authorization (PA) is <u>not</u> required for any vaccines, including pneumonia. The pharmacist, at their own discretion, may decide whether someone is or is not a proper candidate for the pneumococcal vaccine, however. That is up to them to decide whether to administer it or not, and the insurance plans cannot require a pharmacist to administer it. The shingles vaccines, however, do have certain age requirements before the insurance plans will cover them-
 - Shingles vaccines: There are two (2) different kinds of shingles vaccines that our plans cover: Zostavax (zoster vaccine live), which was first approved by the FDA in 2006 and Shingrix (recombinant zoster vaccine), approved by the FDA in 2017. Zostavax is covered for those age 60 and older, while Shingrix is covered for those age 50 and older. Shingrix is a two-dose regimen. Immunization schedules are based on the Centers for Disease Control and Prevention guidelines and are subject to change.

- **Higher Ed:** If you choose to go to your family doctor for the flu vaccine, do you have to wait a full 12 months before you get your next flu vaccine before insurance will pay for it?
 - **Answer**: No, there is not a 12-month waiting period between vaccines. If you have employees who have issues, please let us know.
- o **Local Gov:** Is the free flu shot available for local gov groups?
 - **Answer:** Yes, it is available for all plan members.

• State: Transportation FSA:

- O Allows for reimbursement for eligible parking and transportation expenses for parking and mass transportation.
- Examples of eligible expenses: out of pocket costs you pay for parking and bus pass expenses, vanpool expenses, and light rail while commuting to/from work or parking while at work.
- o Examples of ineligible expenses: oil changes or repairs on your vehicle, parking while attending non-work related events and activities.

Operations

- Retiree Annual Enrollment Reminder: If a member is retiring with active coverage ending on or prior to 1/1/20 and the member wants to make a change for their 2020 enrollment, the member needs to submit an Annual Enrollment form as well as the CIAR form.
- **State: Benefits eForm:** Melissa Wiseman went over the new Benefits eForm process available for state ABCs. The slides from this part of the ABC presentation are attached.
- ABC Training
 - State: Upcoming ABC Training (this training has occurred as of the Friday email)
 - o ABC Workshop:
 - Benefit eForm
 - September 12: 11 a.m.-12 p.m. CT

Link: https://tngov.webex.com/tngov/j.php?MTID=m935e14d152e39f9dbe92f30b7e7aaece

Meeting Number (access code): 642 664 860

Meeting Password: training

Once the link is open, click Join Now, Enter your Full Name and Email Address so you will receive credit.

To listen to the presentation, choose the Call Me option on the screen and enter your phone number. No extension numbers are allowed to be entered.

- State: Upcoming ABC Training
 - o ABC Workshop:
 - Benefit eForm
 - September 25: 1 p.m.-2 p.m. CT

Link: https://tngov.webex.com/tngov/j.php?MTID=m8ef5118984bc87119de83cef50ff8cca

Meeting Number (access code): 646 681 190

Meeting Password: workshop

Once the link is open, click Join Now, Enter your Full Name and Email Address so you will receive credit.

To listen to the presentation, choose the Call Me option on the screen and enter your phone number. No extension numbers are allowed to be entered.

- All Groups: Upcoming ABC Training (this training has occurred as of the Friday email)
 - o ABC Workshop:
 - AE Do's and Don'ts
 - September 12: 1 p.m. 2 p.m. CT
 - o ABC Workshop:
 - Queries to Run During Annual Enrollment
 - September 26: 1 p.m. 2 p.m. CT
 - New ABC Training
 - September 18: Local Education: 9-11 a.m. CT
 - September 18: State/Higher Education: 1-3 p.m. CT
 - September 19: Local Government: 9-11 a.m. CT
 - September 19: Session 2 All Entities 1-3 p.m. CT

Here is how to sign up for training:

- 1. Login in To Edison.
- 2. Navigate to ELM Menu >ELM>Employee Self Service>Learning>Search Catalog>Enter ABC in the "Search the Catalog" field>Click the "Search Activities" button.
- 3. Locate the training you are interested in.
- 4. Locate the specific dates you would like to attend the webinar.
- 5. Click Enroll to the right of the training session you wish to participate in.
- 6. Click Submit Enrollment in the bottom lower left corner.
- 7. Once you have enrolled, you will see the following message under your name at the top of the page.

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

OPERATIONS QUESTIONS

- **Higher Ed:** Can an employee update their address on your site under their profile, or do they have to contact their HR representative?
 - Answer: Employees can update their own addresses in Edison, or the ABC can make the update in Edison for them. The enrollment process will direct them to review and update their address if needed. We ask that all employees update their addresses in Edison because we then share this information directly with our vendors.
- **Higher Ed:** Will this information be available after the meeting?
 - **Answer:** We will send the notes out on Friday and have posted the vendors' presentations on the ABC webpage.
- o **Higher Ed:** Where is the retiree annual enrollment form?
 - Answer: It is included in the retiree newsletter mailed to all eligible retirees, and it is also posted on the For Retirement enrollment page and on the Enrollment Materials page.

- O **Higher Ed:** When will the 2020 Eligible and Enrollment Guides be posted on the website?
 - **Answer:** By the end of November.
- O **Higher Ed:** When we went through training, we viewed a demonstration of Edison for open enrollment and the screens will look different. When will that be available?
 - **Answer:** We don't have an actual date and they are working on it. We will let you know when it is posted.
- Local Ed: Sullivan County Dept of Education will be joining the state dental effective 1/1/2020. Regarding MetLife, can you give me the plan numbers that are available for us? I was told PDP and PDP+. Is this correct?
 - **Answer:** With the State of Tennessee we have a custom SOT network, so if you log into the generic MetLife site, it will ask for the PDP or PDP+. So instead you should use the specific SOT link that takes you to the custom SOT network. You can find it here at https://www.metlife.com/stateoftn/ and then you'll go to the dental page: https://online.metlife.com/edge/web/public/benefits/index?groupNumber=161596
- Local Ed: I have an employee retiring in December and his group health with our LEA ends on 12/31/19. He is planning to enroll on his spouse's retiree health coverage through the state. I assume nothing is needed on our LEA's end, correct?
 - Answer: If your retiring employee is not eligible or does to intend to continue coverage or is going to a spouse's coverage, there is nothing that your agency needs to submit to continue coverage as a retiree. If his spouse is also a retiree on our plan, then she would need to submit a change application and note the loss of coverage under his active record on the state plan along with any dependent verification documents to add him as a retiree to make him eligible for the coverage.
- o **Local Ed:** Is there a difference in seeing a provider listed with Optum for behavioral health versus BCBS? I've run across a difference in copays and also lists of providers.
 - Follow up question: If someone is seeing an Optum provider for a virtual visit, such as a psychiatrist, then they would be paying the BCBS copay? Or are the copays different?
 - Answer: Although health insurance premiums cover behavioral health and medical benefits, the benefits and provider networks are different. Optum manages the behavioral health network and processes behavioral health claims. BCBS (network S) and Cigna (LocalPlus or Open Access Plus networks) process medical claims. Member copays or coinsurance for outpatient behavioral health visits (including virtual visits) match primary care office visit costs on the medical side. However, the cost for medical telehealth visits is a little different than the cost for behavioral health virtual visits. This is due to contracting with different entities for telehealth visits on the medical side, MDLive and Amwell.
 - Information about networks can be found on the ParTNers for Health website under the "Health Options" tab. The "Carrier Information" link has information about BCBS and Cigna networks, and the "Behavioral Health" link has information about Optum. Partial detail from the Local Education/Local Government Insurance Comparison chart follows. You can find the full comparison under the "Publications" tab at the ParTNers for Health website.

Covered Service In-Network/Out-of-Network	Premier PPO	Standard PPO	Limited PPO	Local CDHP/HSA
Primary Care Office Visit	\$25/\$45	\$30/\$50	\$35/\$55	Deductible + 30%/50%
Behavioral health and Substance Use including virtual visits	\$25/\$45	\$30/\$50	\$35/\$55	Deductible + 30%/50%
Telehealth Approved carrier programs only	\$15/NA	\$15/NA	\$15/NA	Deductible + 30%/NA

- o **Local Ed:** If we are keying changes for our employees' annual enrollment, do we have any additional days to key their information into Edison for them beyond October 25?
 - **Answer:** No, you will not be given additional time to key enrollments. All annual enrollments must be submitted by the deadline.
- Local Ed: We have a new hire who is replacing someone on FMLA. They will be working full time until the end of this school year. Are they eligible for health, dental & vision benefits since he is working full time?
 - **Answer:** If the person is working full-time, then yes the employee is eligible for coverage. You will need to hire the person in Edison.
- o **Local Ed:** What about any supporting documentation? How long does the employee have to provide that information before his/her enrollment is deleted?
 - **Answer:** We ask that you collect that information from them by the enrollment deadline it will not be deleted by the enrollment deadline in the Benefits eForm but if it is not submitted in time, we will only add the dependents for which you are able to provide the dependent verification documents.
- Local Ed: If an ABC is making an annual enrollment change for the employee, do we use the E-Benefit form?
 - **Answer:** Yes, you can use the Benefit eForm or the employee can use ESS in Edison.
- Local Ed: Would you mind explaining the use of Cigna LocalPlus (LP) network vs Cigna Open Access Plus (OAP) network please, as a reminder? If you are out of the middle TN area and need to see a doctor, and you are in the Cigna LP network, can you see an OAP participating doctor or facility if there is no LP network? Is that in any state, correct?
 - Answer: That is correct. If you are in a market that has LP, then you need to use LP. The entire state of Tennessee is a LP market, however, there are states that do not have comprehensive LP markets, for example, Kentucky does not offer LP as a network and in this case you would use OAP network. If in an area that does not offer LP, then you use OAP. You can go to mycigna.com, put in the area you are searching and if LP is not available then it will let you know you need to use OAP, or you can call the Cigna directly and ask.
- Local Ed: I get several employees who make the statement "well why would I choose the Open Access network"?

- Answer: If you are located in middle Tennessee, LocalPlus does not have the St. Thomas suite of physicians, so the OAP network might be attractive if you want to enroll in Cigna, be aligned with St. Thomas and have access to a larger network.
- o **State:** Can the same eForm process be used to cancel terminated employee's coverage?
 - **Answer:** No, this process is only used for new hires and annual enrollment however the current existing ePAF process does trigger a termination event.
- o **State:** For the Benefits eForm training, will the workshop dates be sent to all ABCs?
 - **Answer:** The Sept 12 training is already in ELM. The information for the workshop that is on Sept 26 will be included in the Friday ABC email.
- o **State**: How is the Benefit eForm different from what we are currently using?
 - Answer: Currently we don't have a way to enter enrollments for benefits into the Edison system. It is the same process that you do for HR transactions but it is a new functionality that we have not offered before. We rolled out this out for non-payroll two years ago and they really liked the functionality. Some small agencies do all enrollments through eForms and it gives them an additional option. If you have employees who can't use ESS or if they have trouble getting contacted to enroll, then you will be able to use Benefits eForms.
- Local Gov: Is the insurance card for BlueCross BlueShield available on the app to be used in apple wallet?
 - **Answer:** We researched this question and it is not available at this time but BCBST is working to add it sometime in 2020.
- Local Gov: If a person is currently in the MetLife dental plan and wants to stay in for next year, does the waiting period start over?
 - **Answer:** No, in this instance, he/she would not have any waiting periods for 2020.
- Local Gov: Who is the contact for benefits fairs for MetLife phone and email?
 - Answer: You can send an email to stateoftn@metlife.com Julie Salomone will review it and send to the onsite team that attends the benefits fairs. The representative that attends will contact you 1-2 weeks prior to the event. This information is also on the vendor contact list located on the ABC webpage under Conference Call notes.
- o **Local Gov:** Is there an update on a PayFlex contact for benefit fairs? Jo Montgomery is who we have emailed but email came back undeliverable.
 - **Answer:** You can contact Hira Pahore at <u>pahoreh@payflex.com</u>.
- o **Local Gov:** If a person currently waived coverage for 2019 and would like to do the same for 2020, they don't have to do anything or will it roll over?
 - **Answer:** Yes, if they still don't want coverage, then you don't have to do anything.
- o Local Gov: Will there be another round of PayFlex trainings? The three HSA investment webinars were full.
 - **Answer:** Not this calendar year, however, we may consider it for next year.
- o Local Gov: When is the registration for the Sept 18 PayFlex webinar?
 - **Answer:** Employees won't need to register. We have attached the registration information with today's Friday email.

- o **Local Gov:** Are those PayFlex trainings be somewhere or were they recorded?
 - **Answer:** No, but we do have the presentations. You can submit a Zendesk ticket and we can send it to you.
- o **Local Gov:** I will be retiring at the end of the year. Do I go in and put in 11/30/19 end date to end my insurance 12/31/19?
 - o Answer: Yes, that will be the date you will use for your end date/termination date.
- o **Local Gov:** If you can't attend the AE Do's and Don'ts training, will there by notes you can send?
 - **Answer:** If you can't attend, we will post the training on the website the following day, probably by Friday.

Combined ABC Conference Call Notes Higher Education, Local Education, State and Local Government September 17, 2019

Materials and Communications

- Annual Enrollment Updates:
 - o **Annual Enrollment dates:** We know we have been telling you these dates for a while, but we will keep including them through annual enrollment:
 - State and higher education active employees: September 30 through October 11, ending at 4:30 p.m. Central.
 - **Retirees:** September 30 through October 25, ending at 4:30 p.m. Central.
 - Local education, local government and retirees: September 30 through October 25, ending at 4:30 p.m. Central.
 - o **Annual Enrollment emails:** We have "Save the Date" emails going out right now to all eligible members, if we have an email address for them in Edison. We will continue to send out a more emails prior to, and during annual enrollment.
- PayFlex Contact Reminder: ABCs should no longer directly contact Darlene Russo, as she has transitioned off of day-to-day duties associated with the State account at PayFlex.
 - For PayFlex assistance, email <u>stateoftennessee@payflex.com</u>
 - PayFlex team monitors this box regularly and will assist ABCs
 - Not for member use; only for ABCs
- Annual Enrollment Website Presentation: Crystal Mallery, our print and digital publications manager, joined us to go over the annual enrollment website changes and updates. We have posted the slides on the ABC webpage under Conference Call notes.
 - Note: The Annual Enrollment newsletters are arriving in employees' homes! We do want to point out one thing in case you get questions. We worked with a new printer this year. These newsletters are sent to all eligible employees, by name. The printer added "or current resident." While it's not ideal, there is nothing sensitive in the newsletters. All of the newsletter information and much more is posted on our ParTNers website.

Vendor Presentations and Benefits

• State and Higher Education: Securian Financial Life Insurance Presentation: Michael Kretman with Securian Financial joined us to go over coverage options and costs, how to enroll and additional resources for members. We have posted the presentation on the <u>ABC webpage under Conference Call notes</u>.

SECURIAN FINANCIAL/LIFE INSURANCE OUESTIONS

- **Higher Ed:** When employees enroll in voluntary term life, do they actually get a certificate or anything?
 - **Answer:** When an employee signs up for voluntary term life, they do get a certificate with a full coverage page of what they are insured for. If they enroll dependents, they will also receive a spec page for each dependent enrolled and their respective covered amount.
- o **Higher Ed:** Did you say that employees could enroll online (for voluntary term life) outside of Annual Enrollment as opposed to using the form?
 - **Answer:** As long as it is due to a family status change or as a new hire, they can enroll online. It could take up to a week for a new hire's credentials to be created.

- Securian will send an email to the new hire the Tuesday after Securian receives information from BA. This is the prompt that the employee is able to enroll.
- The following process to enroll should be followed, which can be found in the Securian handbook:
 - Log in to **LifeBenefits.com/stateoftn** using your user ID, which is TN + your Edison ID number, and your password. Your initial password is your eight-digit date of birth (MMDDYYYY) followed by the last four digits of your social security number. If you have already logged in to **LifeBenefits.com/stateoftn**, your password will be what you changed it to. If you have questions or are not able to log in, please contact group customer service directly at **866-881-0631**.
- Higher Ed: Is there a way to update dependent information on the (Securian) website without having to mail the forms that were sent out back?
 - Answer: Securian does actually need a "wet" signature on the form. If you are adding dependents, the form tells the head of contract (HOC) that his/her dependent information is not on file and they have to have the social security information for dependents and spouse on file. For an initial enrollment or to make changes, Securian does not have online functionality, so the employee would need to mail the form back.
- **Higher Ed:** When an employee terminates, if they just have group life insurance do they receive anything regarding porting or is this only if you have voluntary life insurance?
 - **Answer:** Portability only applies to voluntary term life and conversion applies to both voluntary and basic term. Employees will receive information about their ability to convert if they have both basic and voluntary term life, however, they will only be eligible to port 50%. They can convert any of the lost coverage.
 - For basic term life group coverage, Securian will inform the employee of his/her ability to convert to an individual policy. Our basic term life insurance is a whole life policy, no questions asked and it would only insure the Basic Life amount inforce at the end of their employment.
 - For voluntary term life, Securian will send information telling them to contact Securian and will inform them they can only port 50%. Securian will give them information about porting and conversion, which is dependent on their age.
- State: Do employees receive the plan brochure for life insurance or do we need to direct them to the website?
 - Answer: Securian does not mail out a copy of the handbook to existing employees. For new hires, they are mailed a handbook and will receive two emails from Securian. Existing employees will receive a mailer and you can direct them to the website at www.lifebenefits.com/stateoftn as the existing handbook and mailers are there. You may also try the following process, which can be found in the Securian handbook:
 - Log in to www.LifeBenefits.com/stateoftn using your user ID, which is TN + your Edison ID number, and your password. Your initial password is your eight-digit date of birth (MMDDYYYY) followed by the last four digits of your social security number. If you have already logged in to LifeBenefits.com/stateoftn, your password will be what you changed it to. If you have questions or are not able to log in, please contact group customer service directly at 866-881-0631.
- o **State:** We are receiving complaints that employees are having trouble logging onto Benefit Scout?

- **Answer:** First, we need to make sure they have credentials and if they are new hires, they may need to wait a week. If you have existing employees who are having issues, please submit a Zendesk ticket and we will research for you.
- The following process to enroll should be followed, which can be found in the Securian handbook:
- Log in to www.LifeBenefits.com/stateoftn using your user ID, which is TN + your Edison ID number, and your password. Your initial password is your eight-digit date of birth (MMDDYYYY) followed by the last four digits of your social security number. If you have already logged in to LifeBenefits.com/stateoftn, your password will be what you changed it to. If you have questions or are not able to log in, please contact group customer service directly at 866-881-0631.
- ActiveHealth Wellness Program Presentation/Optum Behavioral Health/EAP Presentation: Paige Turner, our wellness program and EAP director, joined us to go over the 2020 wellness program changes, and updates about the behavioral health and EAP program. We have posted the presentations on the ABC webpage under Conference Call notes. You can find the state and higher ed presentation here, and the local ed and local gov presentation here.

State and Higher Ed ABC call notes

Wellness Program

- We want to share some program utilization and participation stats. All stats are through June 14,239 HRA completions and 1090 biometric screening completions.
- A total of 43,606 members are engaging in lifestyle or disease management. As a reminder, members can participate in a variety of ways: secure messaging, group coaching, digital coaching and addressing gaps in care.
 - Gaps in care could be adherence to recommended preventive services for your age/gender or specific testing/exams for a chronic condition. Example is for a diabetic: testing A1c, or eye and foot exams.
 - We have over 3,700 members using the mobile app with over 96,000 log ins. So members are utilizing and finding value in the mobile app.
 - Member Satisfaction with the programs is a 99% positive response rate.
 - Currently we have 2,700 members enrolled in the weight management program and they have lost over 1,880 pounds and 40 members have hit the 5% weight loss target since the start of the program.
 - Reminder about our Diabetes Prevention Programs available through our carriers. Omada offers a lifestyle change program that can help Cigna members lose weight and Retrofit offers a similar program to BlueCross BlueShield Members. Any plan member who qualifies can take advantage of these online programs.
 - To find out more information or how to enroll go, to tn.gov/ParTNersforHealth. Select Wellness then Diabetes Prevention Program.
 - Next we are going to talk about the incentive payments. Through August, we have paid over 1.8 million in incentive dollars.
 - We have some members that completed an activity that made them eligible to earn the incentive, but they have not yet completed the Health Risk Assessment which is the required first step. In fact, most often when a member inquires as to why they have not received the incentive payments it is because they have not yet done the HRA. As of late June, we had over \$800,000 incentive dollars that have yet to be claimed.
 - ActiveHealth sent an email recently to over 12,500 of these members, reminding them of the incentives and how to set up an account. We shared a sample of that email with you in the Friday, July 19 BA Updates email. ActiveHealth will send another of these reminders later in the year.

- If a member asks you about the status of their incentive payment, I encourage you to ask them if they have completed the health assessment. The instructions on how to set up an account is on the ParTNers for Health wellness page.
- Now we will talk about the 2020 Incentives. The Insurance Committee has approved the following:
 - We will keep the maximum dollar amount the same as 2019. \$250 per employee and spouse or a \$500 maximum payment.
 - The committee also approved a lookback period for the preventive services and physician screening form. In December of 2019, members who receive preventive services or annual physicals in the month of December will be able to receive incentive credit in the next calendar year. So the date ranges to receive credit for these services would be December 1, 2019 through November 30, 2020.
 - There will be two new preventive services that members can do to earn the incentive: annual physical and a well woman exam.
 - Lastly, we are removing prostate screening as an incentive option. Rationale (if asked): This screening has been downgraded to a C rating by the USPSTF and is recommended based on professional judgement and patient preference.

Behavioral Health and EAP

- O In December, Optum will mail behavioral health ID cards. The cards will be mailed to the head of contract and include additional cards for those enrolled in behavioral health. The intent of these cards is to reduce or eliminate member and provider confusion about where claims or inquires related to behavioral health benefits should be directed. Members should present this card to their mental health professional just as they present the medical card when seeking medical care.
- We also wanted to share some statistics related to Substance Use Disorder.
- o In 2018, claimants increased by 14% and represented 39% of the high cost behavioral health claimants
- O The main driver of the higher costs for SUD treatment is a member seeking care at an out of network facility. 52% of substance use treatment cost was for out of network facilities. 26% of the out of network utilization represents 52% of our total substance use spend.
- ON facilities are often destination facilities. They try to influence consumers to choose high-cost, ineffective treatment centers. They advertise the benefits of the location rather than the treatment. They are expensive and most use non-evidenced based care and have high readmission rates.
- As you can see in this chart, there is a significant difference in readmission rates between in network and out of network facilities across all levels of care for our members.
- o To address high out of network utilization, Optum recommended a new approach to guide members to seek the best clinical care. In May, the Insurance Committee approved a new tiered network for substance use that took effect on July 1, 2019.
- O This Preferred Substance Use Disorder Network incentivizes members by eliminating member cost share if they use a high performing facility. Whether the care is inpatient, partial hospitalization, residential or intensive outpatient. For members enrolled in the CDHP, they will still have to meet their deductible before the coinsurance is waived.
- Optum will guide members to use a preferred facility. Members can contact Optum at 855-Here4TN for benefit related financial information and network options.
- o Lastly, I want to remind you about two great resources through Optum. The first is Take Charge at Work. It is offered at no cost as part of your Here4TN benefits.

- The goal of this confidential program is to help employees find better work-life balance so they can get back to feeling productive and enjoying their lives. And they could earn up to \$150 dollars by participating.
- The second resource is Virtual Visits. Virtual Visits are available for both EAP and Behavioral Health. You can schedule appointments at your convenience and find support for depression, substance use and much more
- You can either call 855-Here4TN or schedule an appointment through the here4TN website.
- o On the website, you can search based on a provider's name, area of expertise or based on the condition.

LEA and Local Gov ABC call notes

Wellness Program

- o Local ed and local government plan members have access to a disease management program through ActiveHealth.
- ActiveHealth will continue to outreach to members who are eligible for the disease management programs. The programs are free to members, and they are not required to participate.
- They also have access to a Diabetes Prevention Program. Omada offers the program for Cigna members and Retrofit offers a similar program to BlueCross BlueShield Members.
- o Any plan member who qualifies can take advantage of these online programs.
- o To find out more information or how to enroll, go to tn.gov/ParTNersforHealth. Select Wellness, then Diabetes Prevention Program.

Behavioral Health and EAP

- o In December, Optum will mail behavioral health ID cards. The cards will be mailed to the head of contract and include additional cards for those enrolled in behavioral health.
- The intent of these cards is to reduce or eliminate member and provider confusion about where claims or inquires related to behavioral health benefits should be directed.
- o Members should present this card to their mental health professional just as they present the medical card when seeking medical care.
- We also wanted to share some statistics related to Substance Use Disorder.
- o In 2018, claimants increased by 14% and represented 39% of the high cost behavioral health claimants
- O The main driver of the higher costs for SUD treatment is a member seeking care at an out of network facility. 52% of substance use treatment cost was for out of network facilities. 26% of the out of network utilization represents 52% of our total substance use spend.
- On These OON facilities are often destination facilities. They try to influence consumers to choose high-cost, ineffective treatment centers. They advertise the benefits of the location rather than the treatment. They are expensive and most use non-evidenced based care and have high readmission rates.
- As you can see in this chart, there is a significant difference in readmission rates between in network and out of network facilities across all levels of care for our members.
- o To address high out of network utilization, Optum recommended a new approach to guide members to seek the best clinical care. In May, the Insurance Committee approved a new tiered network for substance use that took effect on July 1, 2019.
- o This Preferred Substance Use Disorder Network incentivizes members by eliminating member cost share if they use a high performing facility. Whether the care is inpatient,

- partial hospitalization, residential or intensive outpatient. For members enrolled in the CDHP, they will still have to meet their deductible before the coinsurance is waived.
- Optum will guide members to use a preferred facility. Members can contact Optum at 855-Here4TN for benefit related financial information and network options.
- o Lastly, I want to remind you about two great resources through Optum. The first is Take Charge at Work. It is offered at no cost as part of your Here4TN benefits.
- The goal of this confidential program is to help employees find better work-life balance so they can get back to feeling productive and enjoying their lives. And they could earn up to \$150 dollars by participating.
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- o On the website, you can search based on a provider's name, area of expertise or based on the condition.

WELLNESS PROGRAM/BEHAVIORAL HEALTH/EAP QUESTIONS

- o **Higher Ed:** Employees who have reached their maximum cash incentive are still receiving emails from ActiveHealth about earning cash incentives. Could they add a line on their communications about the maximum?
 - **Answer:** Thanks for bringing up. We will make a note about that. We do want them to continue engaging, but we don't want to confuse them.
- o **Higher Ed:** If an employee has their wellness exam with one physician and their well women exam with another physician, is that one \$50 incentive or two separate \$50 incentive?
 - **Answer:** They are two separate cash incentives.
- Higher Ed: Do the Behavioral Health (BH) and EAP programs partner with BCBS and Cigna medical? Optum? If someone goes and gets treatment, how is that paid for?
 - Answer: The behavioral health and EAP services are separate claims and paid through Optum, but the vendors may do referrals back and forth. Members may think that behavioral health is through their BCBS or Cigna medical plan but that is not right. These benefits are provided through Optum.
- o **Local Ed:** Will the behavior health flier on the Partners for Health site be updated to show 2020? Currently it still shows 2018.
 - **Answer:** We researched the flier and the information is correct; we just needed to correct the date on the second page. We did that and apologize for any confusion.
- o **Local Ed:** For local ed, dependents don't have to be enrolled in the health plan to use EAP correct?
 - **Answer**: Correct. For local education, local government, COBRA and retirees, EAP services are available to those enrolled in medical insurance as well as their benefits eligible (not necessarily enrolled) dependents. The head of contract (HOC) does have to be enrolled in medical. You can find this information in our Plan document in 12.07D.
- o **Local Ed:** Will the virtual visits for behavioral health cost less than seeing a therapist in person if you are paying a copay, similar to Telehealth?

- No, Virtual visit copays are the same as behavioral health office visit copay. If you are using Virtual Visits for EAP, there is no cost. Costs are <u>found on the health plan</u> comparison chart.
- o **Local Ed:** Do employees have to enroll in EAP and are not automatically enrolled? I have employees ask me that all of the time about enrolling in EAP. In regards to EAP, it's confusing for employees during annual enrollment to see this. They don't know if they need to choose it or not, so why is that on there?
 - Answer: If they enroll in medical and previously did not have medical coverage, they will need to enroll in this plan in the system in order to complete their enrollment. If they previously had medical coverage but choose to waive coverage during Annual Enrollment they will need to waive the EAP coverage. EAP coverage is only available to Local Ed and Local Government employees that are enrolled in Medical. The purpose is for us to send the file over to our vendor. We have a file specific to EAP services.
- Local Gov: How do employees enroll in Take Charge at Work? Is it a structured program or one-on-one counseling?
 - **Answer:** You can call Optum at 855-437-3486 to take the assessment and enroll if you qualify. Or, you can enroll by going to the www.HERE4TN.com homepage and taking the assessment. It is a structured program with a workbook and you will work one-on-one as you go through the workbook.
- o **Local Gov:** How would you promote Take Charge at Work? Do you have materials for this?
 - **Answer:** Yes, on the ABC webpage at www.tn.gov/partnersforhealth, under Optum, there is a marketing tool kit with fliers for Take Charge at Work and other programs. We do highlight the program in the leader and employee newsletter and we would love for you to share the information in those newsletters.
- o **Local Gov:** I am not sure I get a monthly EAP newsletter. How and when is that distributed?
 - Answer: The member version goes out the last Thursday of the month and the leader version goes out the last Tuesday of the month. It comes from HERE4TN. It is sent to all of those enrolled in medical and eligible for EAP, if we have an email address for them in Edison. If you would like for us to check your email address, you can submit a Zendesk ticket
- o Local Gov: I get asked a lot about behavioral health virtual visits but since I haven't personally used them I can't really offer much insight on it. Is utilizing this pretty simple? Have you heard a lot of success with it?
 - Answer: We are seeing the utilization increase for virtual visits as it does offer members another option for care as they may not be near a provider or are not comfortable going to a provider's office. Members just need to register by going to www.HERE4TN.com and clicking click virtual visit to register. If they have questions or concerns, they can also call 855-HERE4TN and they can help members walk through the steps to access service. Also, with the virtual visit, members can use it for EAP and behavioral health services.
- o **Local Gov:** We would like to schedule an EAP counselor to be on site periodically to meet individually with employees. We envision that employees would schedule the

appointment with EAP during that time with the designated provider. Is this a possibility?

Answer: The State's EAP benefit includes telephonic and virtual visit EAP as well as the management consultation resource (CIRS). CIRS is in person, however, it is not EAP consultation but the staff sent to debrief individuals after a disruptive event in the workplace such as an employee death, violence in the workplace, etc. There are a whole host of trainings that are available as an onsite resource, and I have included the <u>link</u> here to that resource. Aside from that, Optum does not have onsite EAP consultation to support this request.

Operations

- Service Center Metrics/Customer Service Rating
 - o August 2019:

Tickets via Email: 961

■ Tickets via Self-Service: 4,631

■ Tickets via Phone: 5,598

■ Tickets via Chat: 289

■ Total: 11,479

■ Satisfaction Score: 97.0%

o August 2018:

■ Tickets via Email: 762

■ Tickets via Self-Service: 4,485

Tickets via Phone: 6,337Tickets via Chat: 155

■ Total: 11,739

■ Satisfaction Score: 97.6%

- We received about 700 fewer calls this year as compared to last August with chats almost doubling. Our total interactions were about the same overall.
- We take the satisfaction of our customers very seriously. Please complete the survey after your Zendesk ticket is resolved.
- o If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy. Our satisfaction rate for August was 97.0% percent.
- ABC Training
 - State: Upcoming ABC Training
 - o ABC Workshop:
 - Benefit eForm
 - September 25: 1 p.m.-2 p.m. CT

Link: https://tngov.webex.com/tngov/j.php?MTID=m8ef5118984bc87119de83cef50ff8cca

Meeting Number (access code): 646 681 190

Meeting Password: workshop

Once the link is open, click Join Now, Enter your Full Name and Email Address so you will receive credit.

To listen to the presentation, choose the Call Me option on the screen and enter your phone number. No extension numbers are allowed to be entered.

- All Groups: Upcoming ABC Training
 - o ABC Workshop:
 - Queries to Run During Annual Enrollment
 - September 26: 1 p.m. 2 p.m. CT
 - New ABC Training (these trainings have occurred as of the Friday ABC email)
 - September 18: Local Education: 9-11 a.m. CT
 - September 18: State/Higher Education: 1-3 p.m. CT
 - September 19: Local Government: 9-11 a.m. CT
 - September 19: Session 2 All Entities 1-3 p.m. CT

Here is how to sign up for training:

- 1. Login in To Edison.
- 2. Navigate to ELM Menu >ELM>Employee Self Service>Learning>Search Catalog>Enter ABC in the "Search the Catalog" field>Click the "Search Activities" button.
- 3. Locate the training you are interested in.
- 4. Locate the specific dates you would like to attend the webinar.
- 5. Click Enroll to the right of the training session you wish to participate in.
- 6. Click Submit Enrollment in the bottom lower left corner.
- 7. Once you have enrolled, you will see the following message under your name at the top of the page.

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

OPERATIONS QUESTIONS

- o **Higher Ed:** Who is the CVS rep?
 - **Answer:** There is not a CVS representative, but you can always reach out to **benefits.info@tn.gov** with questions and for help.
- o Local Ed: I was trying to sign up for the Query training next week and am unable to find it when I search in Edison.
 - **Answer:** We will have a trainer reach out to you.
- o **Local Ed:** Can employees who do not have an email account submit a paper enrollment form?
 - Answer: The answer is no. If an employee does not have an email account, they can still enroll in Edison or you, as the ABC, can submit a Benefits eForm. For annual enrollment, employees will either enroll in Edison Self Service or you can key the enrollment via Benefits eForm. If an ABC needs help entering a Benefits eForm, we will review this during our weekly calls in the weeks to come.
- o Local Ed: Can retirees still use a paper form or do they have to use Edison?
 - **Answer:** Retirees can use a paper form, which is the Retiree Annual Enrollment Application that is included in the back of the retiree newsletter or available to print from our website, or they can use ESS in Edison.
- o Local Ed: The eForm is submitting your documents through Zendesk, right?
 - **Answer:** No, it is submitting a document through Benefits eForm, the same place you do for new hires, by going to the Benefit eForm (HCM > Benefit > Benefit

eForm), you then click the "Create a Benefit Enrollment eForm" link and enter the employee ID and click "Search" to enter benefits changes during annual enrollment.

- o Local Ed: Where will I find the new enrollment form for 2020?
 - **Answer:** There is not a new enrollment form this year as there were no changes for 2020. The form is in the same place on our website, <u>under Publications</u>, and then Forms.
- o **Local Ed**: I have a member enrolled in the CDHP/HSA. I learned she opened an FSA with another vendor during Open Enrollment. She plans on opting out of the CDHP during our upcoming annual enrollment. Can she still have the FSA at this time since her coverage is still active with her CDHP? She signed up for the FSA with this vendor in August, which will take effect on 10/1/2019. We do not offer a limited purpose FSA.
 - Answer: If anyone enrolls in their local education or local government medical FSA, they cannot enroll in the Local CDHP/HSA and contribute to the HSA at the same time. IRS rules do not allow someone to have a HSA and a medical FSA at the same time. Someone may, however, have a limited purpose FSA (for vision and dental expenses only) if their school system or local government employer offers one, and this can be in addition to their HSA.
- o Local Ed: Are COBRA letters still being sent out to anyone who has their insurance terminated, whether that is through retirement or not?
 - **Answer:** Yes, if an employee is terminated for any reason other than gross misconduct, the employee will receive a COBRA letter.
- o Local Ed: Did I see that if we are helping our employees during open enrollment we can help them make changes through Benefits eForm?
 - **Answer:** Yes, that is correct. If employees are unable to enroll through Edison ESS, you as the ABC can make changes for them through Benefit eForm.
- o Local Ed: Even if they have previously waived their benefits and they want to enroll?
 - **Answer:** Yes, you would have the option to enroll them and you would key their enrollment in Edison.
- o **Local Ed:** Will BA be providing sample emails to ABCs to send out to employees about open enrollment as they have done in the past?
 - **Answer:** Yes, we usually send out samples around Sept. 20 and they are attached with this week's Friday ABC email.
- o **Local Ed:** Do most ABCs send out this information before September 20th to their employees?
 - Answer: You can but we don't recommend sending any information out prior to September 1st as the website is updated for the next year's benefits and new information by the beginning of September. We recommend sending information that will drive employees to the website before annual enrollment and then as employees are able to enroll in Edison, we will add information and direct links that will help them enroll.
- o **Local Gov:** Our employees did not receive an email this week about the HSA webinar scheduled for Wednesday? They have emails in Edison.

- **Answer:** Send us your email and we will research it for you. It would be helpful if you would send us some of your agency email addresses via Zendesk, so we can check to see if they were delivered or what the problem is.
- o Local Gov: How often are we required to change our Edison password? Is it monthly?
 - **Answer:** It expires every 90 days.
- Local Gov: Will everyone get new insurance cards for medical and pharmacy in addition to the behavioral health?
 - **Answer:** Only those new to coverage or those who make a change to their coverage will receive new medical, pharmacy, dental and vision cards for 2020.
- Local Gov: Is everything still the same with CVS/Caremark?
 - o **Answer:** Yes, they will be our partner in 2020.
- Local Gov: I've received several pharmacy cards randomly it seems?
 - Answer: I am not sure why that would be happening and it should not be. It may be a system glitch and we may need to contact CVS Caremark. If you could submit a Zendesk ticket about the issue, we will research it for you.

Combined ABC Conference Call Notes Higher Education, Local Education, State and Local Government September 24, 2019

Materials and Communications

Annual Enrollment Updates

- Annual Enrollment Dates: As a reminder, here are the annual enrollment dates:
 - State and higher education active employees: September 30 through October 11, ending at 4:30 p.m. Central.
 - o Retirees: September 30 through October 25, ending at 4:30 p.m. Central.
 - o **Local education, local government and retirees:** September 30 through October 25, ending at 4:30 p.m. Central.
- 2020 Participating Network Hospital Lists: We have posted the updated 2020 participating network hospital lists on the Carrier network page for BlueCross BlueShield Network S, Cigna Local Plus and Cigna OAP. Note: the lists are alphabetical and they continue to highlight changes in yellow.

Vendor Benefits Presentations

- **Davis Vision Presentation:** Larry Sheehan with Davis Vision joined us to go over the Davis Vision plans and benefits.
- **Cigna Health and Dental Presentation:** Sharon Bowling Tansil with Cigna joined us to go over Cigna's carrier network options, value added programs and tools, as well as Cigna's prepaid dental plan.

Operations

- New Login Process for Rehired Employees
 - o Employees who terminated with one agency on our plan and rehired with another agency were never able to log in to Edison without calling the Service Center.
 - o This was due to their One-Time Password email address no longer being valid
 - o New Process: when they terminate, their security profile will be wiped out.
 - When they are rehired, they will have to set up a new security profile and request a password.
 - o This will allow them to log in to Edison without having to call the Service Center for a password reset.
- We recently made a change for employees who terminate and are rehired with a new agency on our plan. Previously, if an employee had set up an account in Edison and provided a one-time password email address, and then later terminated to move to another agency on the state plan there was no way for them to reset their password on their own to log back into Edison the next year. They would click the link to send an email to their email address on file, which was their old email address so they never got it. Now, when an employee terminates, we will reset their account and wipe out the one-time password email address they had on file. This may cause some confusion for employees since they don't consider themselves a new hire. They will need to set up a security profile again like they have never logged in before. It will take a little more work on their part on the front end to set up their account, but it also gives them the opportunity to log in without having to call our service center. We hope that this helps to reduce the number of calls we receive so that we can help answer more benefits-related questions during annual enrollment. Please let your employees know prior to annual enrollment that if they have switched employers in the last year they may be required to set up a new account.
- Higher Ed/Local Ed/Local Gov: New How to Enroll video is ready!

- O You can find it here: https://www.youtube.com/watch?v=8qJfANyDKhg
- Video is posted on several places on the on tn.gov/PartnersforHealth website and are found here:

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

https://www.tn.gov/partnersforhealth/ae/about-enrollment.html

https://www.tn.gov/partnersforhealth/ae/materials.html

https://www.tn.gov/partnersforhealth/ae/for-retirement.html

- o We also have video tools for retirees on the For Retirement page.
- o A step by step guide is also be posted on the website if your employees would prefer to use that instead of a video
- o Reminder: You can also submit Benefits eForms for your employees if they need to make a change, instead of having them use ESS
- State New How to Enroll video is ready!
 - O You can find it here: https://www.youtube.com/watch?v=jMxDDuSBuwQ
 - O Video is posted on tn.gov/PartnersforHealth on several pages and are found here:

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

https://www.tn.gov/partnersforhealth/ae/about-enrollment.html

https://www.tn.gov/partnersforhealth/ae/materials.html

https://www.tn.gov/partnersforhealth/ae/for-retirement.html

- We also have video tools for retirees on the For Retirement page.
- o <u>A step by step guide is also posted on the ABC website</u> if your employees would prefer to use that instead of a video under Annual Enrollment > Enrollment Materials > Edison
- **Retiree Annual Enrollment Reminder:** If a member is retiring with active coverage ending on or prior to 1/1/20 and the member wants to make a change for their 2020 enrollment, the member needs to submit an Annual Enrollment form as well as the CIAR form.

CONFERENCE CALL QUESTIONS

Note: We had several questions about the Cigna LP and Cigna OAP networks and access for those outside of Tennessee. Please note this clarification:

Cigna offers two networks – LocalPlus (LP) and Open Access Plus (OAP). The networks are different, and different monthly premiums apply. For more information, refer to your **Annual Enrollment Newsletter**, or visit the ParTNers for Health website at https://www.tn.gov/partnersforhealth.html. See also the Cigna OAP and LocalPlus flyers at https://www.cigna.com/sites/stateoftn/.

- Cigna customers who live in Tennessee can choose either the LP or OAP network, based on the one that best suits their needs. Both networks have statewide coverage.
- Cigna customers who live outside of Tennessee in an area that offers both LP and OAP networks (such as Atlanta, GA; Chicago, IL; RI; and more listed on the LP flyer), can choose between the two networks, based on the one that best suits their needs.
- Cigna customers who live outside of Tennessee in an area that does not offer the LP network can still enroll in LP and access the coverage they need. Cigna ensures that members enrolled in LP outside of a LP area automatically have access to the OAP network. The member's Edison record will continue to reflect LP, and LP premiums will apply, but the member's medical insurance ID card from Cigna will reflect the OAP network. If you receive questions from members living outside of Tennessee who signed up for LP and they

see OAP on their insurance card or they have called customer service and have been told that they have been moved to OAP, do not be alarmed. You can check the member's Edison enrollment and premium deductions to verify they are still enrolled in LP. You can then tell them that they have just been given access to the OAP network because there is no LP network where they live. You can contact BA or Cigna, of course, if you think errors have been made.

- ALL members will receive Welcome Packets from Cigna, following enrollment, with one of three letters explaining their specific network access. See sample language from the letters below:
 - 1. **Enrolled in OAP/with OAP network access** You have selected the statewide plan option. Your Cigna network for 2020 will be Open Access Plus (OAP). The option you have chosen provides access to quality care close to where you live and work.
 - 2. **Enrolled in LP/with LP network access** Your Cigna network for 2020 will be LocalPlus. The option you have chosen provides access to quality care close to where you live and work.
 - 3. **Enrolled in LP/with OAP network access** Because you live outside of a Cigna LocalPlus market area, your Cigna network for 2020 will be Open Access Plus (OAP). You are still enrolled in the LocalPlus network in the State of Tennessee benefit system. However, Cigna is providing you access to the OAP network to ensure you have in-network doctors and hospitals close to you.
 - o **Higher Ed:** I submitted retirement papers on October 16 and have not heard anything. I did receive a confirmation on some other things about retirement, but have not received a confirmation? I need to know if the paperwork has been approved.
 - Answer: If you are inquiring about a monetary pension and if it has been approved, you will need to contact TCRS at 800-922-7772. If you've applied to continue insurance at retirement, we do pend the retirement until TCRS has approved the pension portion. To check on the status of an Application to Continue Insurance at Retirement, you can call us at 800.253.9981 and select option 2 to speak with a retirement representative to check on it.
 - o **Higher Ed:** Can we get clarification regarding having access to the "open access" Cigna plan if the LocalPlus network is unavailable?
 - Answer: Click the following link to go back to the full clarification above,
 [Note: We had several questions about the Cigna LP and Cigna OAP networks and access for those outside of Tennessee. Please note this clarification:]

 Cigna offers two networks LocalPlus and Open Access Plus. The networks are different, and different monthly premiums apply. For more information, refer to your Annual Enrollment Newsletter, or visit the ParTNers for Health website at https://www.tn.gov/partnersforhealth.html. See also the Cigna OAP and LocalPlus flyers at https://www.cigna.com/sites/stateoftn/.
 - Local Ed: If they are enrolling in the retiree health effective 1/1/20 and not making changes to their health coverage, but are enrolling in the dental and vision for the first time with the state as a retiree effective 1/1/20, will they need both forms or just the application to Continue Insurance at Retirement?
 - Answer: If they don't want to make any changes to their health coverage, they would only need to submit the application to Continue Coverage at Retirement and they can select a dental and/or vision plan. They would not need to submit the Annual Enrollment Application for Retirees in this scenario. The eligibility criteria is different with dental and vision and they need to be receiving a monthly pension from the TCRS based on own service or an optional retirement plan retiree from UT or a TBR higher education institution and for vision they must also be enrolled on the retiree group health plan. If the employee did not have dental or vision coverage when the employee's coverage ended, he/she is able to enroll in dental and/or vision when starting retirement as long as they meet the eligibility criteria.

- Local Ed: How can I print what we are viewing?
 - Answer: We have posted the Davis Vision and Cigna vendor presentations on the ABC webpage under Conference Call Notes.
- Local Ed: Will vision cards be sent to all employees this year? A lot of employees did not receive a vision card initially. Can they print ID cards off the website or use the mobile app on their phone?
 - Answer: Vision cards are sent out to all new enrollments. We do get requests for new cards and we will send out replacements for those requests. During implementation during the first year, we sent out cards to all enrollees, but they may not have been received. Members can always request a new card. Also, members don't need a card for service. The member's ID is his/her Edison ID. Yes, you can download the mobile app and the ID card is on the app or they can download a card from the Davis Vision website: davisvision.com/stateoftn.
- Local Ed: Is there a special way for vision doctors to contact Davis Vision if they want to be a provider for Davis Vision?
 - O Answer: Yes, on the website, under Find a Provider, there is a New Provider Nomination link and members can nominate a provider. This goes to the provider team and they will submit a packet to the provider and follow up with a phone call.
- Local Ed: You mentioned if you seek care in Kentucky (KY), LocalPlus doesn't have network in KY and it would automatically use Open Access. Does this mean if a member lives and sees providers in KY, they should not choose the LocalPlus network?
 - Answer: Click the following hyperlink to go back to the full clarification above, [Note: We had several questions about the Cigna LP and Cigna OAP networks and access for those outside of Tennessee. Please note this clarification:]

Cigna offers two networks – LocalPlus and Open Access Plus. The networks are different, and different monthly premiums apply. For more information, refer to your **Annual Enrollment Newsletter**, or visit the ParTNers for Health website at https://www.tn.gov/partnersforhealth.html. See also the Cigna OAP and LocalPlus flyers at https://www.cigna.com/sites/stateoftn/.

- Cigna customers who live outside of Tennessee in an area that does not offer the LP network can still enroll in LP and access the coverage they need. Cigna ensures that members enrolled in LP outside of a LP area automatically have access to the OAP network. The member's Edison record will continue to reflect LP, and LP premiums will apply, but the member's medical insurance ID card from Cigna will reflect the OAP network. If you receive questions from members living outside of Tennessee who signed up for LP and they see OAP on their insurance card or they have called customer service and have been told that they have been moved to OAP, do not be alarmed. You can check the member's Edison enrollment and premium deductions to verify they are still enrolled in LP. You can then tell them that they have just been given access to the OAP network because there is no LP network where they live. You can contact BA or Cigna, of course, if you think errors have been made.
- Members enrolled in LP with OAP network access should receive a Welcome Packet from Cigna with a letter explaining their specific network access. See sample language from the letter below:

Because you live outside of a Cigna LocalPlus market area, your Cigna network for 2020 will be Open Access Plus (OAP). You are still enrolled in the LocalPlus network in the State of Tennessee benefit system. However, Cigna is

providing you access to the OAP network to ensure you have in-network doctors and hospitals close to you.

- Local Ed: Is there a timeline when Cigna should have a final decision made in regards to the three rural hospitals in NW TN?
 - Answer: Good news! We're happy to announce that Cigna has provided the following update. The three hospitals, Baptist Memorial Hospital in Huntington, Baptist Memorial Hospital in Union City and Baptist Memorial Hospital Tipton in Covington, will remain in the Cigna networks.
- o **Local Ed:** I assume that your dependents have to be on your health plan to participate in the diabetic prevention program and the gym memberships, correct?
 - **Answer:** Yes, the dependents have to be on medical coverage and for the diabetes prevention program it is only for those over 18. Details about the Diabetes Prevention Programs (DPP) can be found on the ParTNers for Health website under Other Benefits, Wellness DPP webpage. Information on the gym memberships can be found on the BCBS and Cigna member home pages. Fliers are also attached.
- o Local Ed: How would we be informed of this on KY residents? I have several KY residents in my district...and I believe some have chosen LP network. I haven't been informed saying they are moved to Open Access Plus (OAP) or if they chose OAP, not to charge them the surcharge?
 - Answer: Click the following link to go back to the full clarification above, [Note: We had several questions about the Cigna LP and Cigna OAP networks and access for those outside of Tennessee. Please note this clarification:]

Cigna offers two networks – LocalPlus and Open Access Plus. The networks are different, and different monthly premiums apply. For more information, refer to your **Annual Enrollment Newsletter,** or visit the ParTNers for Health website at https://www.tn.gov/partnersforhealth.html. See also the Cigna OAP and LocalPlus flyers at https://www.cigna.com/sites/stateoftn/.

- Cigna customers who live outside of Tennessee in an area that does not offer the LP network can still enroll in LP and access the coverage they need. Cigna ensures that members enrolled in LP outside of a LP area automatically have access to the OAP network. The member's Edison record will continue to reflect LP, and LP premiums will apply, but the member's medical insurance ID card from Cigna will reflect the OAP network. If you receive questions from members living outside of Tennessee who signed up for LP and they see OAP on their insurance card or they have called customer service and have been told that they have been moved to OAP, do not be alarmed. You can check the member's Edison enrollment and premium deductions to verify they are still enrolled in LP. You can then tell them that they have just been given access to the OAP network because there is no LP network where they live. You can contact BA or Cigna, of course, if you think errors have been made.
- Members enrolled in LP with OAP network access should receive a Welcome Packet from Cigna with a letter explaining their specific network access. See sample language from the letter below:

Because you live outside of a Cigna LocalPlus market area, your Cigna network for 2020 will be Open Access Plus (OAP). You are still enrolled in the LocalPlus network in the State of Tennessee benefit system. However, Cigna is providing you access to the OAP network to ensure you have in-network doctors and hospitals close to you.

- Local Ed: For Cigna LocalPlus, is the surgery center at Park West hospital in East Tennessee covered? I see that the hospital itself is but what about the tower at Parkwest Tennessee doctors and their surgery facilities?
 - Answer: Parkwest Surgery Center in Knoxville is listed in Cigna LocalPlus as innetwork.
- o Local Ed: I am assuming that the retirees have been informed of this upcoming increase for POMCO....am I correct?
 - Answer: Those who are enrolled in The Tennessee Plan were mailed a letter letting them know about the 2020 premium, which will automatically increase as of 1/1/2020. We have attached a sample letter. So, if they are paying via deduction, the increase will be reflected in their pension check in December. If they are direct billed and the TCRS pension check is not large enough it will reflect on their January invoice or the bank draft that occurs.
- o Local Ed: Does BCBS offer a discount on gym memberships?
- Answer: They have a member gym discount program called Fitness your Way, and members can find information on the BCBS member home page. A flier is also attached.
- o Local Ed: We will not make changes on the website in Concord for each member?
 - **Answer:** If your agency is subsidizing the premium on the retiree's pension check, your agency will need to contact TCRS directly for assistance with that.
- Local Ed: I am confused on the KY residents price... we have a couple KY residents and they selected OAP since LP wasn't available in KY but they have been charged the surcharge I believe. So do they need to select LP to not be charge the surcharge?
 - Answer: Click the following link to go back to the full clarification above, [Note: We had several questions about the Cigna LP and Cigna OAP networks and access for those outside of Tennessee. Please note this clarification:]
 Cigna offers two networks LocalPlus and Open Access Plus. The networks are different, and different monthly premiums apply. For more information, refer to your Annual Enrollment Newsletter, or visit the ParTNers for Health website at https://www.tn.gov/partnersforhealth.html. See also the Cigna OAP and LocalPlus flyers at https://www.cigna.com/sites/stateoftn/.
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Because you live outside of a Cigna LocalPlus market area, your Cigna network for 2020 will be Open Access Plus (OAP). You are still enrolled in the LocalPlus network in the State of Tennessee benefit system. However, Cigna is providing you access to the OAP network to ensure you have in-network doctors and hospitals close to you.

- State: What were the hospitals in West TN that may possibly be out of network in 2020?
 - Answer: Good news! We're happy to announce that Cigna has provided the following update. The three hospitals, Baptist Memorial Hospital in Huntington, Baptist Memorial Hospital in Union City and Baptist Memorial Hospital Tipton in Covington, will remain in the Cigna networks.
- State: If someone completes a wellness activity and they haven't received any money can you explain the process and how long it takes?
 - Answer: Either the member has actually received the cash incentive money and doesn't realize it or he/she hasn't completed the health assessment, which is the trigger that starts those payments. If you want us to research this for you, you can submit a Zendesk ticket.
- State: If someone completes a wellness activity today, how long until the cash incentive money is deposited into his/her paycheck? I have one person who completed a wellness activity and has not received a payment yet. I also had another person who didn't realize that she had received some of the pay.
 - Answer: If it is a preventive service, it has to be processed and it may take a few months. Cash incentives are deposited into the end of month paycheck. If you complete something today, for example, such as participating in mini-coaching, you could see the cash incentive payment in one to two months, in the end of month paycheck. As this program is new, many people are not used to receiving the incentive in their paychecks. If you have someone you would like for us to research, you can send submit a Zendesk ticket and we will research it for you.
- Local Gov: Will we be notified when the decision is made about the three rural West TN hospitals?
 - Answer: Good news! We're happy to announce that Cigna has provided the following update. The three hospitals, Baptist Memorial Hospital in Huntington, Baptist Memorial Hospital in Union City and Baptist Memorial Hospital Tipton in Covington, will remain in the Cigna networks.
- Local Gov: For Active&Fit, how are those memberships utilized? Are members given a membership number for each place? Especially the 24 hour gyms, how would you get in?
 - Answer: You have to already be a Cigna customer and log in to the portal. From there you can start the application process. Once you pay the application fee and monthly fee, you will receive information on how to access your membership and your membership card. Additional details and step by step illustrated instructions are available on the Cigna member home page under "Annual Enrollment & Other Important Flyers" "Active and Fit Gym Membership Flyer". The direct link to the Active&Fit flyer is https://www.cigna.com/sites/stateoftn/pdf/active-and-fit-gym-membership.pdf.

- Local Gov: Our city has just joined the state program recently and signed up our employees. Do we need to re-enroll?
 - Answer: No, it is not necessary; the coverage will carry over to 2020. However, if your employees want to make change, you can make the changes for them in Benefits eForm or they can enroll in Edison ESS.

Combined ABC Conference Call Notes Higher Education, Local Education, State and Local Government October 1, 2019

Materials and Communications

- Annual Enrollment Continues
 - State and higher education active employees: Now through October 11, ending at 4:30 p.m. Central.
 - o **Retirees:** Now through October 25, ending at 4:30 p.m. Central.
 - o Local education, local government and retirees: Now through October 25, ending at 4:30 p.m. Central.
- Cigna West TN Network Update: Good news! Cigna confirmed that the three hospitals in West Tennessee, Baptist Memorial Hospital in Huntingdon (Carroll County), Baptist Memorial Hospital in Union City (Obion County) and Baptist Memorial Hospital Tipton in Covington (Tipton County) will remain in the Cigna networks. Updated hospital lists are on the ParTNers website, under Carrier Information and Cigna is updating their provider directories.

Benefits Update

• <u>Dental Care 2020 Contract Process:</u> We relayed the information below during ABC calls this week and we are sharing it directly with members via email. **Note:** there has been an update to the Preferred Dental Program (MetLife) information for certain benefits in process if the vendor changes 1/1/21. The link below includes all of the information relayed this week and the updated information.

Dental Care 2020 Contract Process

- The dental contracts with Cigna and MetLife expire on December 31, 2020.
- By law, the state must put these contracts out to re-bid.
- This re-bidding **may** result in new dental vendors on 1/1/21. The vendors could stay the same. It will not be known until mid-2020.
- If the vendors change and you have dental care in process that is not completed by 1/1/21, please be aware of how this will be handled by each vendor. Please <u>click here</u> to review this information.

Prepaid Dental Program (Cigna)

- If the vendor changes:
 - Benefits under the prior Cigna contract will be covered as follows when using an innetwork dentist:
 - Coverage for completion of a dental procedure (other than orthodontics) which was started before 1/1/21 will be extended for 90 days unless you are dis-enrolled due to nonpayment of Premiums/Prepayment Fees.
 - Coverage for orthodontic treatment which was started before 1/1/21 will be extended to the end of the 1st quarter 2021, unless you are dis-enrolled due to nonpayment of Premiums/Prepayment Fees.
- If the vendor does not change:
 - Coverage for dental care in process under the prior Cigna contract will continue to be covered. The member copay for dental procedure codes could be different as of 1/1/21.

Preferred Dental Program (MetLife)

• If the vendor changes:

- Certain benefits in process under the prior MetLife contract will continue through January 31, 2021:
 - We will pay benefits for a 31 day period after your insurance ends for completion of root canal therapy if:
 - the Dentist opened into the pulp chamber before your insurance ends; and
 - the treatment is finished within 31 days after the date the insurance ends.
 - We will pay benefits for a 31 day period after your insurance ends for the completion of installation of a prosthetic device if:
 - the Dentist prepared the abutment teeth or made impressions before your insurance ends; and
 - the device is installed within 31 days after the date the insurance ends.
 - We will pay benefits for a 31 day period after your insurance ends for the completion of installation of a Cast Restoration if:
 - the Dentist prepared the tooth for the Cast Restoration before your insurance ends; and
 - the Cast Restoration is installed within 31 days after the date the insurance ends.
- o Benefits for orthodontic care in process will end as of December 31, 2020.
- Waiting periods satisfied under the MetLife contract will carry forward to the new vendor's contract.
- If the vendor does not change:
 - Coverage for dental care in process under the prior MetLife contract will continue to be covered under the new contract. How much you pay for dental procedures could be different as of 1/1/21.

Vendor Benefits Presentations

- Local Ed/Local Gov: PayFlex HSA Presentation: Hira Pahore with PayFlex joined us to go over HSA information with you.
- State/Higher Ed: PayFlex HSA and FSA Presentation: Hira Pahore with PayFlex joined us today to go over HSA and FSA information and some common questions, and program reminders.
 - o State: Regarding the seed funds for state employees enrolled in the CDHP/HSA. If you are a new employee whose coverage starts on or after Sept. 2, you will not get seed funds in 2019. If you stay enrolled for the following year into 2020, you will get seed funds at the beginning of the year.

HSA and FSA QUESTIONS

- O Higher Ed: If you choose to invest health savings account (HSA) funds, is there a waiting period to access the funds if you need them? Are the funds still accessible just by using the card?
 - Answer: You would have to sell back your investments and wait two-three business
 days to have access to those funds. Your funds are not available while they are
 invested.
- **Higher Ed:** I think it should be noted that if employees are enrolled in an HSA one year, then move to an FSA the next year because they changed their health plan, they will be charged an administrative fee monthly for the HSA. The \$4 fee is per month for the HSA, correct?
 - o **Answer:** That is correct. There is a \$4 monthly administrative fee but this is only for those who are no longer enrolled in the CDHP. If you are actively enrolled in the CDHP, the State pays the administrative fee every month. If you leave the CDHP

and go to a PPO or terminate employment and leave funds in the HSA, then the account transitions to a retail account with PayFlex and PayFlex will begin taking the monthly administrative fee out of your HSA.

- o **Higher Ed:** Can employees use their FSA funds for a massage?
 - Answer: Only if they have a letter from their physician stating it is a medical necessity, then it is covered. There is a list of what is covered at stateoftn.payflexdirect.com under healthcare expenses [stateoftn.payflexdirect.com
 Use Planning Tools > Healthcare expenses] This provides a list of healthcare expenses from A-Z and will show you which expenses are eligible and which are not, and those that require a letter of medical necessity (LOMN) or a prescription.
- O **Higher Ed:** I have a newly hired employee and her benefits do not go into effect until Nov.1, 2019. She does not want to enroll in the FSA for 2019, but does want to enroll for 2020. What is the process for those new employees to enroll for 2020 since they are not able to sign up during annual enrollment?
 - **Answer:** For higher education, the enrollment for FSA is not in Edison. For higher education, she will need to fill out a paper form and submit it to her payroll department.
- O **Higher Ed:** Can you confirm that if someone leaves employment and has overspent on their FSA, the employer cannot collect the overage?
 - Answer: That is correct. When you offer a FSA, you are receiving a benefit from the IRS in reduced FICA taxes that you would normally pay on the earnings that an employee has instead decided to shield from taxes by contributing those funds before taxes to a qualified FSA. If an employee spends all of their FSA up front at the beginning of the year and then leaves employment, this is a risk that all employers take just as employees take a risk in contributing too much and possibly forfeiting it at the end of the year. No, an employer may not collect the difference between what an employee spent versus what they have contributed year-to-date if they terminate employment.
- **Higher Ed:** If an employee, who does not currently have health insurance, decides to enroll in the CDHP during annual enrollment and also enroll in a HSA, are they eligible to get the seed money?
 - Answer: Yes. The CDHP is the health plan that a member enrolls in; the HSA is the savings vehicle that is paired with it. If an employee has a CDHP, they get an HSA. It will be opened in late December with PayFlex, and the employee will receive a debit card from PayFlex in the mail. Employees will get the seed money in January. We push the seed funds out to higher education, and they in turn send those seed funds to PayFlex to contribute to employees' HSAs. New employees whose coverage effective date is on or after Sept. 2 do not get seed funds. However, if they stay enrolled in the CDHP the following year, they will get the funds the next year.
- State: Note about LFSA and vision expenses: If you have employees in limited purpose FSAs for vision and dental, you may have employees who have used debit cards to pay for prescriptions that are vision-related. Those funds are not reimbursable even if it is for vision care products. Pharmacy comes out of an FSA or HSA. LFSA is for expenses incurred at a vision center, for example, for glasses, contacts, etc. Prescriptions are not reimbursable under an LFSA.

- o **Local Gov:** Besides saving on premiums, what would you say is the selling point for individuals to make the switch to the CDHP/HSA?
 - Answer: With a HSA, employees can put more funds into this account compared to a FSA. The funds also continue to grow it each year as the money rolls over. You won't lose the funds if you leave or retire. You can let the funds accrue and use them when you retire.
 - The HSA offers triple tax benefits: the money you add is tax free, any savings or investments you choose to make and that accumulate are tax free, and the money that you take out to pay for qualified healthcare expenses now or later on is tax free.
 - With HSAs you can spend the funds on eligible healthcare expenses tax free. If you use them on anything else (for example to fix a roof) you have to pay your regular income tax rate plus a 20% penalty. Once you turn 65, you can use it tax free on any healthcare expenses, and on anything else (but taxes are applicable, but no 20% penalty after age 65).
- o **Local Gov:** If the spouse is turning 55, can you still contribute the \$1,000 makeup to the HSA?
 - **Answer:** No. Since the employee would be the primary account holder, the employee would have to be the person turning 55 and putting the money in the HSA.

Operations

• **Retiree Annual Enrollment Reminder:** If a member is retiring with active coverage ending on or prior to 1/1/20 and the member wants to make a change for their 2020 enrollment, the member needs to submit an Annual Enrollment form as well as the Continuing Insurance at Retirement (CIAR) form.

• State: Benefit eForms:

- o Benefits eForms are now available for new hires and AE!
- Not publicizing to employees up to you if you want to offer this.
- New hires will either need to use ESS or you will need to submit an eForm, no forms will be accepted.
- o Attach the Enrollment Change Application to the eForm for PPACA purposes.
- o Training materials posted on ABC website, under Training
- Issue with pledge amounts for FSA and HSA be sure to include enrollment forms on the eForm so that we can key the amount after submission.

• State: New Hire ESS Enrollment Update

- We are still working on updating new hire ESS enrollment to the new process.
- We should have the new process in place within the next couple days.
- If you have anyone whose enrollment period is expiring this week then you can submit a paper enrollment form (or use the new Benefits eForm process!).

Higher Ed/ Local Ed and Local Gov: New Hire ESS Enrollment Update

- We are still working on updating new hire ESS enrollment to the new process.
- We should have the new process in place within the next couple days.
- If you have anyone whose enrollment period is expiring this week then you can submit a Benefits eForm.
- Higher Ed/ Local Ed and Local Gov: Service Center AE Process: We would like to give you some insight on how our Service Center annual enrollment process plan works here at

BA. If you or an employee needs to call us, please choose Option 6 for questions not related to password reset so you are routed to the correct queue where we have extra staff manning the phones during our busiest season. If you are calling about a password reset, then please select Option 3. We hope by telling you this it will keep you from having to listen to the entire phone welcome greeting.

- o We have staff monitoring Zendesk and voicemails all day every day throughout annual enrollment. The best and quickest way to get us is to send a Zendesk ticket during this time. We ask you only send one ticket and not follow ups on the same issue while you are waiting for a response. Our normal service level agreement will most likely not be met between now and Thanksgiving, but please know we are working all tickets in order received as fast as possible. If you have a TRIAGE issue we ask you mark the ticket TRIAGE and put TRIAGE in the subject area of the ticket. This will automatically catch our attention faster and these tickets will be worked first. You may also try to call and choose the TRIAGE option in the phone queue which is #5 for immediate assistance, but with the phones so busy the quicker way is to submit a TRIAGE ticket during this busy season. Please remember a TRIAGE if when someone is at the pharmacy and cannot obtain a prescription or at a doctor's office waiting to be seen. If they have already paid out of pocket for medicine or medical services then this would not be considered TRIAGE and not prioritized over other tickets.
- We try diligently to get everyone logged in Edison who needs a password reset but if our Tier 1 staff cannot do this then we have a plan in place this year to escalate the member to our Tier 2 staff. This group will be able to access the employee's screen and guide them through the process. As a last resort, if they still cannot log in, then we will send the employee back to you as the ABC for you to create an eForm on their behalf.
- Please remember we cannot work password resets over chat. A password reset will need to be a phone call to our service center.
- State: Service Center AE Process: We would like to give you some insight on how our Service Center annual enrollment process plan works here at BA. If you or an employee needs to call us, please choose Option 6 for questions not related to password reset so you are routed to the correct queue where we have extra staff manning the phones during our busiest season. We hope by telling you this it will keep you from having to listen to the entire phone welcome greeting.
 - We have staff monitoring Zendesk and voicemails all day every day throughout annual enrollment. The best and quickest way to get us is to send a Zendesk ticket during this time. We ask you only send one ticket and not follow ups on the same issue while you are waiting for a response. Our normal service level agreement will most likely not be met between now and Thanksgiving, but please know we are working all tickets in order received as fast as possible. If you have a TRIAGE issue we ask you mark the ticket TRIAGE and put TRIAGE in the subject area of the ticket. This will automatically catch our attention faster and these tickets will be worked first. You may also try to call and choose the TRIAGE option in the phone queue which is #5 for immediate assistance, but with the phones so busy the quicker way is to submit a TRIAGE ticket during this busy season. Please remember a TRIAGE if when someone is at the pharmacy and cannot obtain a prescription or at a doctor's office waiting to be seen. If they have already paid out of pocket for medicine or medical services then this would not be considered TRIAGE and not prioritized over other tickets.
 - O Please remember if an employee needs help with a password reset they should call the Edison Help Desk at 866-376-0104.

• State: New Employee Orientation Update during Annual Enrollment: The weekly live session of the New Employee Orientation will be temporarily suspended due to the annual enrollment period from October 7th through October 28th. Employees will be able to view a recording of the New Employee Orientation at any time. The recording can be located on the New Employee page on the website along with the New Employee Orientation Worksheet.

OPERATIONS OUESTIONS

- O Higher Ed: If making insurance changes, would an active employee who is retiring need to make changes in Edison during annual enrollment and also submit the Continuing Insurance at Retirement form?
 - Answer: Any time an employee is retiring and wants to continue insurance, they always need to fill out the application to Continue Insurance at Retirement form. If the employee is retiring and has coverage terminating on or before Jan. 1, 2020, and he/she intends to make changes to health coverage for 2020, he/she should also submit the retiree Annual Enrollment application. If the employee doesn't make any changes, he/she just needs to submit the application to Continue Insurance at Retirement form.
- **Higher Ed:** Are email confirmations supposed to be sent out once someone changes their enrollment? We are not getting confirmations.
 - Answer: We are not sending email confirmations during the enrollment process this year as the process is different. Once employees hit submit, they get an enrollment preview they can print. They can look at their enrollment preview statement during the enrollment period. They will get an email after the enrollment period letting them know they can log in to Edison and get their final confirmation statement. Higher Education, Local Education, and Local Government employees will also get a final statement in the mail. They can print or save or look at it at any time. The great thing is that they can go in and look at their enrollment confirmation statement at any time, and you, the ABC, will have the ability too. Our staff will also have that ability. There will be multiple ways to access it. We have had complaints over the years about the secure email they received with their enrollment selections being very confusing and hard to access. We decided it was not needed since they could go back in and print the enrollment statement. The email they get now does not have personal information and will not be sent via secure email.
- Higher Ed comment: We have had some confusion with employees on the new Edison with the way everything looks. The Submit Enrollment button is third from bottom step. The process takes you through though you haven't completed until you Complete Enrollment. It doesn't tell you how to get back. It would be nice if after the process takes you through the next, next, next you have some way to Submit Enrollment at very end. ABC: Say "before you proceed, hit Submit Enrollment."
 - **BA's response:** They are supposed to hit Submit Enrollment before the "Next" button to go to from the Annual Enrollment page to the summary page. We have modified the language on the Annual Enrollment step to make this clearer.
- **Higher Ed:** Employees will not get email confirmation but if they want to get confirmation they have to print the summary statement? I thought that was the whole reason people had email address updated?
 - Answer: Email address updates were requested in order to ensure communications going out would get to in-boxes and for logging into the system. Employees will get an email saying their confirmation statement is available once enrollment is done. They can go in and print it. Once they successfully submit, they get an enrollment

preview. They can save it or print it from there. After annual enrollment, they can print the final at any time. After annual enrollment is over and enrollment is verified, employees will get an email letting them know that a final confirmation statement is ready in Edison. Additionally, they will be mailed a confirmation statement to their house.

- Local Ed: We have opted to rejoin the state dental plan this year. We currently have a private dental plan that will expire 12/31/19. We have an employee and her son is currently in the middle of orthodontic treatments. How does the transition of care work for MetLife for the orthodontia treatment? Does the 12-month waiting period apply?
 - **Answer:** Yes, your dental plan benefits begin on 1/1/2020, and the member will have to satisfy the 12-month waiting period for orthodontics. Because you are new to the state plan, the 12-month wait for orthodontia will apply.
- o **Local Ed:** If an active retiree wants to make changes to their retiree dental plan and wants to use a paper form, which form do they need to complete?
 - Answer: If the retiree has group health coverage, he/she received a newsletter for Annual Enrollment that has a retiree Annual Enrollment form to elect to change dental coverage. If the retiree has dental only or The Tennessee Plan and dental, he/she received a different mailing specific to dental only with a dental only application, and they can use that application.
- o **Local Ed:** If the retiree didn't receive the newsletter, do we need to have them call the retiree division of BA for another form?
 - **Answer:** No, they can find a form on the ParTNers website under Annual Enrollment and Enrollment Materials. It's under Retirees on the Enrollment Materials page, the third item is <u>Annual Enrollment Application for Retiree Participants</u>.
- o Local Ed: I have an employee who has single coverage and may deliver her child during open enrollment. I will complete a Benefit eForm to add the baby probably in October; however she wishes to drop the child for 1/1/20. Would we do a paper form to drop the child or would the child show up in Edison after I add the dependent during OE to do the drop? She is only going to cover her child until the end of this calendar year then switch the child to her spouse's coverage.
 - **Answer:** You will need to submit an Enrollment Change Application along with the birth certificate to add the child and we can key this on the date of the birth. At the same time, you will want to submit a paper Cancel Request Application form so we can remove the new dependent 1/1/2020.
- o Local Ed: Where can I find the list of the codes for open enrollment?
 - **Answer:** They are on the <u>ABC website under Edison Information</u>. It says 2018 plan code descriptions. They are still applicable for 2020.
- Local Ed: We had an employee receive a letter from BCBS. The letter states due to ACA, BCBS is required to return money to employers paid toward monthly premiums. I'm guessing since we pay state BA the premiums, the state would receive this refund. How should we respond to employees asking about refunds? Another ABC: We also have emails have been coming to us from BCBS. It has to do with the claims filed versus what payment is received I believe. There is an IRS minimum and if it's outside that there is a refund to the employee I can forward copies to you.
 - **Answer:** We have researched these questions.

- Medical Loss Ratio (MLR) Notices: Thanks to the two ABCs who sent copies of notices. We reviewed those with BCBS. Here's a summary of that review:
 - The MLR rebate does not apply to self-funded groups at all, so communications about the rebate have nothing to do with the medical coverage under the State of TN account.
 - BlueCross BlueShield of Tennessee is required to communicate MLR rebate information to persons who have direct coverage with BCBST for medical, dental or vision coverages.
 - Persons who receive rebate notices will need to direct questions about their individual or small group medical, dental and vision coverages to the entities and numbers identified in the notices. BA is unable to advise on communications for products outside of the state-sponsored plans.
- State: I have had an employee ask me if he decides not to take the health insurance, can he still use the Wellness Plan and receive the \$250 money?
 - Answer: No, the employee cannot. The wellness incentive is tied to the health plan. Non plan members are not eligible.
- State: We have an out-of-state employee who is having problems making a \$1,500 election on the HSA account for CDHP/HSA BCBS Middle insurance. The election allows for only HSA Cigna OAP?
 - **Answer:** You can enter a Zendesk ticket with the employee information, and we will take a look at it and get it fixed.
- State: So when the open enrollment opens for new employees it will be for 2020?
 - Answer: If you have a new employee who has not elected new hire enrollments, once they do that through ESS or Benefit eForm or paper application, then yes the system will open an Annual Enrollment event for them for 2020 to go in and make changes. This will typically occur the day after we finalize their new hire event. It is a manual process done by the Edison team and it will usually be complete by 9 a.m. the next day.
- Local Gov: If a person uses telehealth, gets a prescription or goes to urgent care on this plan (CDHP/HSA) what would the price be? That's the question I get for our employees. They have to meet the deductible first before the plans pays anything for that, correct?
 - Answer: The cost in the CDHP for Telehealth medical care is the plan's negotiated cost until the member meets the deductible. Then the member would pay coinsurance. Historically, the rate has been around \$40 per visit, give or take \$5, but it depends on the carrier and the telehealth "company", (Physician Now, MDLive, or Amwell). It's a little different for Behavioral Health and Substance Use virtual visits. In that case, the cost is the same as an in-person visit, for example deductible plus 30% coinsurance in-network. For urgent care services, the cost is deductible plus coinsurance (for example, in-network, the cost would be deductible plus 30% coinsurance for the Local CDHP).
 - For prescription drugs, the in-network cost for Local CDHP members is deductible plus 30% coinsurance for a 30-day supply, a 90-day supply at a 90-day network or mail order, or a 30-day supply specialty medication from a specialty network pharmacy. The in-network cost for a 90-day supply of a maintenance medication from a 90-day network pharmacy or mail order is 20% coinsurance

without first having to meet the deductible. Members can compare the plans costs based on tier by going to: info.caremark.com/stateoftn

- Then scroll to "Compare Your Plan Options" and select the plan and coverage type that you have (individual or family).
- Click on "change my pharmacy" and then enter a zip code to find a pharmacy in your area.
- Find your pharmacy, and then click on "Price a drug."
- Then enter the first few letters of the drug name and let the system find your drug and strength before you click on "Search." Once you find your drug name and strength, click on it, and then click "Search." Click on yours then it will give you the approximate price for your plan (whether a flat dollar copay if in a PPO) or the negotiated price if in a CDHP. Note that drug prices vary widely from pharmacy to pharmacy and can change each day.
- o **Local Gov**: If someone who is retiring is keeping the same coverage, do we only fill out the Continuing Insurance at Retirement (CIAR) form, or only the enrollment form?
 - **Answer:** The only form you need to submit is the Application to Continue Insurance at Retirement form.
- o Local Gov: Will everyone need to log in to Edison during open enrollment?
 - **Answer:** No, not unless they need to make changes for 2020. There is no need for employees to log in if they are not making changes or not submitting an enrollment form.
- o **Local Gov:** We are offering dental and vision for the first time. I ran one of the open enrollment election queries and it showed the medical and dental change, but did not show the vision election. Is there a query for vision elections?
 - Answer: Vision elections will show up on the TN_BA219_MED_DEN_COVERAGE and TN_BA219_MED_DEN_ELECTIONS queries. If someone made a change and it is not on there, please submit a Zendesk ticket with the employee's ID and we will check on it.
- o **Local Gov:** After open enrollment closes and we get new staff, what do they select for benefits? Will it apply for 2020 as well?
 - Answer: Yes. New enrollments will continue into 2020 if the new employees don't want to make any changes for 2020. Employees will be able to make a change for 2020 as long as they make this change during their 31-day new hire enrollment period. They would need to submit a separate application for annual enrollment if they have changes for 2020.
- Local Gov: If someone is adding their spouse to dental and vision during annual enrollment, do we have to show proof of marriage?
 - **Answer:** If they are not currently on any other coverage, then yes, they have to show proof of marriage. If they are already enrolled in medical, then no, you don't have to re-submit the information.

Materials and Communications

- Annual Enrollment Updates
 - o Enrollment Dates
 - State and higher education active employees: Annual enrollment ends this coming Friday, October 11, at 4:30 p.m. Central.
 - o **Retirees:** Now through October 25, ending at 4:30 p.m. Central.
 - Local education, local government and retirees: Now through October 25, ending at 4:30 p.m. Central.
 - o Local Ed/Local Gov: Employee Webinars: Our employee webinars continue and we have another one scheduled this Thursday, Oct. 10 at 1 p.m. Central. The dates and times are below. Members do not have to pre-register. They can go to the About Enrollment page on the website and scroll down for instructions on how to join.
 - Thursday, Oct. 10: 1-2 p.m. (already occurred)
 - Thursday, Oct. 17: 3:30-4:30 p.m.
 - Monday, Oct. 21: 3:30-4:30 p.m.
 - Thursday, Oct. 24: 10-11 a.m.
 - o **Marketplace Notices:** Marketplace notices have been updated by plan type. You can find them on the <u>ABC webpage under PPACA Documents</u>.
 - ABCs should provide the marketplace notice to all new employees within 14 days of their start date. (*Per the Employee Checklist explain the marketplace letter and provide the web address or printed copies if requested.*

Operations

- Service Center Metrics/Customer Service Rating:
 - September 2019:

• Tickets via Email: 809

Tickets via Self-Service: 4,227

■ Tickets via Phone: 6,031

■ Tickets via Chat: 459

■ Total: 11.526

Satisfaction Score: 97.1%

September 2018:

■ Tickets via Email: 619

■ Tickets via Self-Service: 3,390

■ Tickets via Phone: 5,854

Tickets via Chat: 185

■ Total: 10,048

Satisfaction Score: 95.8%

 We received over 800 more tickets and documents via Zendesk this year as compared to last September with chats also increasing more than double. Our total interactions increased by almost 1,500 overall.

- We take the satisfaction of our customers very seriously. Please complete the survey after your Zendesk ticket is resolved.
- o If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy. Our satisfaction rate for September was 97.1% percent.

• State – Edison Updates:

- o Edison ESS is available for new-hire enrollment.
- o Thanks for your patience!

• Higher Ed/Local Ed/Local Gov – Edison Updates:

- o Edison ESS is available for new-hire enrollment.
- o Reminder: your employees will see the enrollment pages as a state employee sees them, including CDHP and FSA Acknowledgement pages.
- Please ask them to ignore these steps.
- We are working as quickly as possible to get the enrollment pages separated so they only see the pages applicable to them.
- o The system will still display only the plans they are eligible to enroll in.
- o Thanks for your patience!

- o **Higher Ed:** We noticed that our short-term disability rates went up? Has there been a change with disability coverage?
 - **Answer:** We recalculate the rates based on salary every September, and then the premium rates are changed in October based on those rates.
- O **Higher Ed:** I had an employee who had an issue with ESS after they had logged in. They chatted with someone who kept directing the employee to the call center. But my second chat person resolved the issue. It wasn't a password issue.
 - Answer: Thanks for the feedback. If you would like for us to look at the ticket, you can send an email to Tameka. We do use the chat for quick response, but we can look at this and remind our staff. We ask for the member to call so that we can conduct additional trouble shooting/training.
- o **Higher Ed:** To enroll in your HSA, where is the form for TBR?
 - **Answer:** For TBR schools, Holly sent out the form you would need to use. You can email Holly if you need a copy and then submit it to your payroll department.
- o Higher Ed: For voluntary term life during open enrollment, do you enroll using a form
 - **Answer:** For voluntary term life enrollment, you will enroll <u>on the Securian</u> Financial website; for voluntary AD&D, members enroll on the Edison website.
- o **Local Ed**: We have opened up our enrollment for dental and we have a tremendous number of people who are not able to reset their password for dental.
 - Answer: Typically if they don't have a link to reset their password, the employees have not set up a security profile yet or they set up a profile at a different school. So these employees may need to click the First Time Login/New hire button on the Edison homepage to get started.

- o Local Ed: I have 14 married couples who work for us and they are adding the dental coverage. They are being asked for dependent information, but they are already in medical. Is this standard?
 - Answer: If they have already been verified as covered under the spouse's coverage, you could let us know that the dependent verification is already under the other spouse there is no way for the system to know that. If you know that the dependents are already on the coverage under another ID, you can reference this in the comments box, and you'll want to include the other ID as a reference. You can just put the information in the comment box that the documents are already on file, and we will research it for you.
 - **Follow up question:** Will the hold come off?
 - **Answer:** The form will be pending until we verify the documentation submitted. As a FYI, we are current on processing documents in Benefit eForms.
- o **Local Ed**: We will be new to the state's dental plan for 2020. We have current dependents on our current BCBST COBRA dental plan. Our current dental plan went to age 23 and then you could get COBRA. So I'm having them add the dependents through the same process. When billing rolls around in January, will those families roll into the COBRA family plan, or will it be the family is on the active plan and the dependent will roll on to the COBRA dental plan?
 - **Answer:** No, the dependents will not be enrolled in the COBRA dental plan; the entire family will be enrolled in the regular dental plan as dependents can be on this plan until age 26.
- o Local Ed: Where or how do employees upload their documents if they are adding spouse/dependents? Does the system ask for the documents after they hit submit?
 - Answer: If the employee is using Edison Employee Self Service (ESS), they will be prompted to upload the dependent verification documents after clicking the Submit Enrollment button. This page will display for all employees regardless of whether or not they are adding new dependents to coverage.
- o Local Ed: All ABCs should be receiving dependent documents?
 - Answer: Employees can provide them to you to upload to Zendesk, the employee can upload in Edison directly or they can fax them to our service center. We recommend, if you want to see them or need to be verified, that you run the TN_BA311 query. It will show you the new dependent who has been added.
- o **Local Ed:** I am getting a document from BA about dependents without a notice? (Other ABCs are receiving these as well). Is this something new this year?
 - Answer: When we load the dependent's documents into Zendesk, we are putting your name as the requestor. These are the documents the employee is loading directly into Edison. This is to notify you we are receiving the document in Edison. We started this after annual enrollment last year and it continued throughout the year last year, it is just occurring at a higher rate right now.
- o Local Ed: Can annual enrollment docs be uploaded in Zendesk?
 - Answer: Yes.
- o **Local Ed:** If we key benefits for employees through the Benefit eForm for annual enrollment, is there a way to print a confirmation or have the system send them a confirmation for the elections? If not, what is the best practice to provide proof to employee that election was made in Edison?

- **Answer:** When we finish up the annual enrollment period, all employees will receive a mailed confirmation at the address we have on file for them in Edison.
- State: I'm trying to run the query for employees and I can run the saved but not submitted query and it lists everyone in the department. Is there a way to only list those who have not submitted?
 - Answer: That is the correct query, TN_BA219_OE_NOT_SUBMITTED, and you can filter it by the 8th column for a value of "SAVED" and it will only show those who have saved not submitted. Our query list is on the ABC webpage, under Training, Edison Query List. You can run the TN_BA311_ESS_NEW_DEPENDENTS query to give you a list of those who have added new dependents through ESS.
- o **State:** I had an employee who couldn't get into Annual Enrollment and make changes. I talked with someone and they were working on the problem. The employee asked if it's not complete until after Annual Enrollment, will she not be penalized and still get to make her changes?
 - **Answer:** We will do everything we can to get the employee enrolled. You do have the option for Benefits eForm to enroll the employee as well.
- o Local Gov: Is there a date when you should start using the new Marketplace Notice?
 - **Answer:** Yes, you can start using the new Marketplace Notice now for any of your new hires.
- o **Local Gov:** One of the employees here has asked about transgender healthcare and what all is covered? Specifically, gender continuation surgery (split top and bottom) as well as hormone replacement therapy (endocrinologist)?
 - **Answer:** For a specific question such as this, the best option is to call the service center or to call the carrier directly to discuss. You can also find information in the <u>Local Government Plan Document</u> at 1304A29.
- Local Gov: Would that be the same for abortion care? The employee wants to know if this is covered?
 - Answer: Again, the best way to find out what exactly is covered is to call the service center or to call the carrier directly. You can also find information in the <u>Local Government Plan Document</u> at1303B1.
- o **Local Gov:** As an ABC, what is my deadline to make changes in Edison for any employees wishing to change anything?
 - **Answer:** You have the same deadline as employees.
- o **Local Gov**: I have a new employee who has made elections for January, but will need coverage for November and December. How do they go about making that election?
 - **Answer:** The employee shouldn't be able to make changes for January until they make changes for Nov. and Dec. If you could submit a Zendesk ticket, then we can take a look at this for you.
- One is thinking about changing to the Premier PPO but she wants to know if her husband can use the HSA to pay for Rx med and copays?
 - **Answer:** If they are married and they are filing jointly, then they can use the HSA to pay for a dependent's care, however, whoever keeps the PPO coverage must not

cover the person who is enrolled in the CDHP. So if you are enrolled in the CDHP/HSA, you cannot enroll in the PPO. If they file separately, the husband could not use the HSA in this scenario.

- o Local Gov: What query do we run that shows OE changes?
 - **Answer:** You can go to the ABC webpage, under Training, and you'll find the Edison Query Manual. We will talk about queries during the call next week and about the specific queries for annual enrollment.
- O Local Gov: In reference to the CDHP, if a parent is enrolled and the child is not eligible for our insurance due to the age limit, can the parent use the HSA funds to pay for their child's medicine?
 - Answer: You can only use your HSA funds to pay for a qualified IRS dependent that is listed on your taxes. If the child is not listed as a dependent on the tax return, then you are not able to use those funds.
- o **Local Gov:** I have an employee plus spouse on the CDHP does the whole deductible have to be met before their plans starts to pay? Or, does one of the members have to meet a single portion of their deductible before the plan starts to pay?
 - Answer: For the Local CDHP plan, the deductible does have to be met before their plans start to pay. There is no single portion. Deductible and out-of-pocket maximum amounts can be met by one or more persons, but must be met in full before it is considered satisfied for the family. No one family member may contribute more than \$8,150 to the in-network family out-of-pocket maximum total.
 - Additional Information: The Local CDHP in-network deductible amount for Employee + Spouse is \$4,000 and the in-network out-of-pocket maximum amount is \$10,000. The couple will have to meet a combined \$4,000 deductible and a combined \$10,000 out-of-pocket maximum. When we say the amounts can be met by one or more persons, we mean that either the employee or spouse can meet the \$4,000 deductible alone (one could have \$0 and the other \$4,000), or the two of them can meet it together by any combination of dollar amounts adding up to the \$4,000 total. It will take the two of them to meet the \$10,000 out-of-pocket maximum, though, because of the IRS rule that prohibits either one of them from contributing more than \$8,150 toward their combined out-of-pocket. Also, as a reminder, the deductible does count toward the out-of-pocket maximum.
- o **Local Gov:** If an employee is unable to make changes in Edison for annual enrollment, how can I make their selection for them? Would I upload the enrollment form or is there a preferred way?
 - **Answer:** You would need to submit a Benefit eForm for this person as we don't accept a form for annual enrollment or for new hires. We only accept a paper form for SQEs.

Materials and Communications

- Annual Enrollment Updates
 - o Enrollment:
 - State/Higher Ed: State and higher education active employees: Enrollment has ended for active state and higher education employees. Retirees: Enrollment continues through October 25, ending at 4:30 p.m. Central.
 - Local education, local government and retirees: Enrollment continues through October 25, ending at 4:30 p.m. Central.
 - o Local Ed/Local Gov: Employee Webinars: Employee webinars continue the dates and times are on the screen. Members do not have to pre-register. They can go to the About Enrollment page on the website and scroll down for instructions on how to join.
 - Thursday, Oct. 17: 3:30-4:30 p.m. (has occurred)
 - Monday, Oct. 21: 3:30-4:30 p.m.
 - Thursday, Oct. 24: 10-11 a.m.

Operations

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 SUBMITTED

- o Event Date: 1/1/2020
- O Query will show all employees who have not submitted
- o Look for value of "SAVED" in the Saved but not Submitted column
- o Please reach out to these employees
 - This query should be run with an event date of 1/1/2020. This query will show all employees who have not submitted an election. Anyone with a value of "SAVED" in the "Saved but Not Submitted" 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 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

- o Event Class: OE
- o Beginning and Ending Event Dates: 1/1/2020
- o Query will show all new dependents who have been added through ESS
- o Last column will show if they have submitted and we have verified the documentation
- Please reach out to employees with a "N" in the last column to make sure they have submitted their documentation
 - The event class should be "OE" and the Beginning and Ending Event Date should be 1/1/2020. 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 an "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 an "N". Please reach out to these employees and let them know that they must submit dependent verification by 4:30 p.m. on Friday, October 25 in order to add the dependents to coverage. They can either go back in Edison and upload it, they can fax it, or you can upload the documents via Zendesk for them.

TN BA265 OE ELECTIONS IN ESS:

o Schedule ID:

Local Education: OET19

■ Local Government: OEG19

This query is an audit of all elections made by your employee during AE. If they submit
an enrollment multiple times, each enrollment they submit will show with a date and a
time stamp.

TN_BA219_AETP_INS_ELECTIONS: This query shows all changes made through both ESS and eForms. It will show you what the employee was enrolled in this year, and what he or she will enroll in next year. You will use 1/1/2020 for the date.

- Note: Retirees may show up on these queries. Please DO NOT touch any retiree records in Edison. If you inadvertently change a retirement record, please contact Angie Gargaro at <u>Angela.Gargaro@tn.gov</u>.
- Queries to Run during Annual Enrollment: There is a detailed training on Queries to Run During Annual Enrollment on the www.tn.gov/partnersforhealth website. Select <u>Agency Benefits Coordinator</u>, Training, and there you will find the presentation.

OPERATIONS QUESTIONS

- **Higher Ed:** For those who didn't try to enroll until Friday, if they saved but didn't submit, are they out of luck?
 - **Answer:** We sent an email notification letting them know they can appeal and what they have to do. The email includes a link to the Enrollment Change Application. We have attached samples of the emails sent to these employees.
- o **Higher Ed:** You will still send something letting us know they have outstanding dependent verification docs?
 - **Answer:** If we received partial documents, we will give the employee 10 additional days to submit those documents. If the employees did not submit any documents, then they will have to appeal.
- Higher Ed: Will the open enrollment reports still be updated?
 - **Answer:** Yes, we are still working on the dependent verification documents. We still have several hundred to verify, and the enrollment is still ongoing for local education and local government, so we are working on the documents during evenings and weekends.

Follow up question: So keep running reports for two weeks? **Answer:** Yes.

O Higher Ed: If Tennessee is a community state, how come you have to submit documents proving joint ownership? I have one couple saying they have been married, but they don't have anything showing joint ownership together?

- Answer: We have to have proof that they are still married. For example, they could have been married and then gotten divorced in another state, and we would not know this as we don't have access to those records. There are a couple of recommendations for joint ownership. They can open up a checking or savings account, or if they file taxes separately, on their tax forms if it says married but filing separately, we can take the front two pages of their tax forms as proof.
- Higher Ed: For employees who did not submit documents to enroll their dependents, will they receive an email?
 - **Answer:** We will work a query toward the end of processing the dependent verification documents, and if employees added dependents but did not send in any documents, we will send an email out to the ABC advising that the dependent has been removed. We will also provide the appeal instructions and deadline.
- O Higher Ed: I believe on the previous call someone mentioned that going forward, when new hires forget to upload needed documents the email will go to the employee instead of the ABC. Is this correct?
 - **Answer:** As long as we have the employee's information in the system, we can copy the employee, but we will initiate sending the information to the ABC.
- o **Higher Ed:** I need the query to run for beneficiaries on our employees to enter into our benefit screens in banner.
 - Answer: TN BA355A BENEF FULL AUDIT
- O **Higher Ed:** We are having emails sent to ABCs who are no longer with our Agency. What can we do to prevent this from happening?
 - Answer: You can send an email to <u>benefits.adminstration@tn.gov</u> or submit a Zendesk ticket and let us know which ABCs to remove. If they are still employees but no longer ABCs with your agency, then you will need to submit a security form to terminate their ABC access if you haven't already done so.
- o **Higher Ed:** Was there an option for Eligibility of Insurance for STD in Edison?
 - **Answer:** Yes, if they elected to newly enroll or up their level of coverage, then they would see a warning in Edison. MetLife will mail the Statement of Health (SOH) documentation and will give the employee until the end of the month to return that documentation to MetLife.
- **Higher Ed:** Does anyone know about Lincoln LTD? Are they doing the same?
 - **Answer:** Lincoln's open enrollment (OE) is a true OE so there is no need for evidence of insurability (EOI).
- o **Higher Ed:** When will the 2020 premiums due be available?
 - **Answer:** In December we typically try to run that report earlier in the month, the day after confirming the deductions for December coverage, so you should be able to run the first premiums due on December 4th.
- o **Local Ed:** Is anyone else having employees having difficulty logging into Edison? I'm getting a significant number of call and emails from people who can't seem to figure it out.
 - **Answer:** We do have some people calling, but not everyone has needed help. If people are not getting a link to reset their password, it means they have not logged in before, so they need to follow click on First Time Login/New Hires and follow

- those instructions. Or it might be that they are not clear on what is the Edison ID or the Access ID.
- We have four, very helpful videos to that walk members through logging into Edison for the first time, resetting passwords, getting their Access ID and enrolling in benefits. The links are below:
 - Log in to Edison if you've forgotten your Access ID
 - Log in to Edison for the first time
 - Reset your Edison password
 - Select/enroll in benefits in Edison for higher education, local education and local government
- Local Ed: I've had the password reset missing, which I figured out how to correct, but others are saying there is no option to change/waive coverage once they are in. I'm not sure if they just aren't looking in the correct place or what is happening but I've advised them to call BA if they aren't seeing those choices.
 - Answer: You can direct them to our service center, or you can also direct them to the video that walks them through the enrollment process step by step Select/enroll in benefits in Edison for higher education, local education and local government.
- State: I know this year when I went to make changes for flexible benefits, there was nowhere to submit to enrollment and then it had all of these next buttons that would never stop. I had a lot of employees who could not find the "Submit Enrollment" button.
 - Answer: We do appreciate the feedback. We did highlight this information in yellow as something to help people see what they needed to do. For next year, we are going to take out the "Summary Step" and we will definitely look to see if we can add additional information to make it clearer. We may also take out the dependent information step, as we think that confused people as well. We do have a great video that walked employees through the enrollment process. It shows the employee every step on how to enroll, but we only had about 2,500 people view it which is not near the number who enrolled, so we clearly need to make the video more visible and promote the video more to people.

State: We had issues with the HSA monthly and the per paycheck amounts did not match?

- Answer: That is an issue we were aware of and did not have time to fix before we started annual enrollment. Most employers split the deduction by paycheck, so the two choices were per paycheck or per month, which means that every medical, dental and other deduction calculation would have been wrong. We do hope to fix this soon.
- State: The issue with the new employees trying to complete their 2019 enrollment online and then it was not available. It was very confusing trying to get them back in for 2020 enrollment and then they did not have 2019.
 - **Answer:** We completely agree, this was confusing this year and not ideal. It had to do with the timing of getting the new enrollment process ready and in the system. We don't anticipate having this problem in future years.

- State: I have a few folks on my saved but not submitted list who were not able to go back into Edison and submit, and couple of employees out of town. Would you be able to finalize their ESS elections if I submit a Zendesk ticket?
 - **Answer:** When they get back into town, the employee can submit a Zendesk ticket with an appeal. We are sending emails directly to employees letting them know that they can submit an appeal and what they have to do. The email includes a link to the Enrollment Change Application. We have attached a copy of that email to this email so you will see what we told employees in this situation.
- State: Edison kept telling people they had until midnight on the 11th to submit their enrollment, but some of the information said 4:30 p.m.?
 - Answer: Technically they did have until 11:59 p.m. to submit the enrollment. We used to communicate that time, but we had complaints as the service center is not open until 11:59 p.m. We switched to including the 4:30 p.m. time as that is when we are open to help with enrollments and answer questions, but employees could submit their enrollment up until 11:59 p.m.
- **State:** We had an employee try to get in and make changes at 7:30 pm on the 11th, and they were not able to?
 - **Answer:** It is possible that they had another event that closed out their annual enrollment event. The employee can submit an appeal or you can submit an appeal for the employee and we will take a look at it.
- State: We had several employees concerned when they checked the CDHP/HSA acknowledgement when they didn't want the HSA?
 - **Answer:** We will take that into consideration for next year. We did put language at the top that told them it may not apply to them, but we may add language next year to make it clearer that if they checked the box and don't enroll it won't impact anything.
- o **Local Gov:** Do we have to do anything for former employee who is currently using COBRA services?
 - **Answer:** No, if the former employee doesn't have any changes, then you don't have to do anything. If he/she would like to make a change, the former employee can fill out the Enrollment Change Application, and we will make the change for 2020.
- Local Gov: When a lot of employees are signing on, they have to have their password, and there is not the little box saying "Forgot Password"?
 - Answer: If they are trying to log in and they are entering their Access ID and it gives them their security phrase and image, then they should get the "Forgot Password" link to reset it. If they don't see their security phrase and image, they have not set up their profile yet, so they will first have to log in as "First Time Login/New Hire and set up their profile and then they will be able to enroll.
 - We also have four, very helpful videos to that walk members through logging into Edison for the first time, resetting passwords, getting their Access ID and enrolling in benefits. The links are below:
 - Log in to Edison if you've forgotten your Access ID
 - Log in to Edison for the first time
 - Reset your Edison password
 - Select/enroll in benefits in Edison for higher education, local education and local government

- o **Local Gov:** I have an employee who has a newborn. I know we have sixty days to enroll them, but if they do not get the birth certificate in time, can we still enroll them and give an explanation that we don't have the birth certificate yet?
 - Answer: You can submit the copy of the mother's certificate received at the hospital. We know they will not have a SSN yet, so we will enroll them using all 9s. When you do have the correct SSN, we ask that you submit a Corrections and Clarifications form with a copy of the Social Security card so that we can correct the information.
- Local Gov: If someone is enrolling in the CDHP option, and they do the enrollment themselves, would they be contacted by PayFlex or someone from BA to set up their account?
 - Answer: We will send enroll information for the employee to PayFlex. PayFlex will then contact the plan member to work through the CIP (Customer Identification Program) process to verify the ID of the member and get certain information from the member to set up the account. Because the health savings account is similar to a bank account, PayFlex is required by the USA PATRIOT ACT to verify the identity of all persons opening an account. Members who do not respond to PayFlex after three letters will not have their HSA opened.
- O Local Gov: We currently deduct in Oct. for Nov. insurance but are thinking about going to where we deduct the same month the insurance is effective. Is there any reason this would not work with Benefits Administration?
 - **Answer:** That will not really impact Benefits Administration (BA); we will deduct it at the same time that we do now. We currently have agencies that deduct at different times.
- o Local Gov: Does Davis vision work in conjunction with other vision insurance?
 - Answer: Davis Vision is the insurance provider and there is no coordination of vision benefits. Vision insurance does not coordinate.
- Local Gov: How do we run the report to see which employees have added, dropped or made changes themselves in Edison during open enrollment? Also, how can I run the report to see what employees don't have an email on file?
 - Answer: The query to see who added, dropped or made changes, you can run either the TN_BA265_OE_ELECTIONS_IN_ESS query that will show the AE changes made in ESS by the employee or you could run the TN_BA219_AETP_INS_ELECTIONS query and it will show all changes you make or the employee made via ESS. For emails, you can use the TN_BA282_INVALID_EMAIL query.
- Local Gov: Back to the CDHP, we do have payroll deduction. Will we be instructed
 where to send the deduction money to? I am sorry but we haven't had anyone use the
 CDHP before.
 - **Answer:** If you email <u>stateoftennessee@PayFlex.com</u>, PayFlex will assist you with how to set up payroll deduction and/or how to send your deposit (either employee payroll deduction and/or any seed funds you may provide). It will be an automated process after that.
- o **Local Gov:** Can you tell me what the query is where I can see all changes made and who made them, including the changes I had made for employees?

- **Answer:** That is the TN_BA219_AETP_INS_ELECTIONS query; it will show you the changes you made and the changes the employee made. You have to run it during the annual enrollment period it won't be available after October 28th.
- o Local Gov: Where do you get a list of providers for the Davis Vision plan?
 - Answer: It is found on the link on the ParTNers website, https://www.tn.gov/partnersforhealth/other-benefits/vision.html will link you to the microsite. Or, you can go to Customer Service link on the homepage — it lists all of our vendors and their contact info with links to their websites. Or you can call Davis Vision's Customer Service Center at 800.208.6404, Monday - Friday, 7-10; Saturday, 8-3; Sunday, 11-3 CT.

Materials and Communications

- Annual Enrollment Updates
 - Local education, local government and retirees: Enrollment ends this Friday, October 25. Note: the call center hours on Friday are 8 a.m. to 4:30 p.m. Central.
 - Weekly enrollment calls: Weekly ABC calls will continue Oct. 29 and Nov. 5, and then the regular monthly calls resume Nov. 12.
 - Local Ed/Local Gov: Employee Webinars: We have one more employee webinar left this Thursday. Members do not have to pre-register. Employees can go to the <u>About</u> <u>Enrollment page on the website</u> and scroll down for instructions.
 - Thursday, Oct. 24: 10-11 a.m. (has occurred)

- Local Ed: When someone fills out a paper form for annual enrollment, and we make changes through Benefits eForm, do we have to upload the Enrollment Change Applications? I have been, but didn't know if I had to?
 - Answer: No, you don't have to upload the documentation, but we do ask that you keep it somehow so that you have something on file. You can upload it if you want to. We ask that you keep it in case you get questions about PPACA from the IRS.
- o **Local Ed**: I have a question about a new hire with benefits starting 11/1. How do I get an annual enrollment event for dental to start 1/1/2020?
 - Answer: After the new hire enrollment event closes, the annual enrollment event will open up a few days afterward, if the event was processed prior to the end of annual enrollment. If you don't have enough time to enroll the dental coverage for 2020 during annual enrollment, we will accept a paper form in this instance as long as it is submitted within the 31 day new hire eligibility period. You can send us a Zendesk ticket about this specific scenario, and we will look at it and get back to you.
- o Local Ed: Where is the code list (codes for plan types)?
 - Answer: The list of codes for specific plan types is on the <u>ABC page under Edison Information</u>. The document is titled <u>2018 Plan Code and Coverage Level Descriptions</u>; this is correct as the plan codes and coverage level descriptions did not change in 2019 or 2020.
- o **Local Ed:** I have uploaded a marriage certificate last Monday, but the query is not showing that is has been received. Is there somewhere I can verify it has been received?
 - Answer: We are currently processing a lot of documents and getting them into the system. If the documents have been received and scanned you will see them in Zendesk. That means the documents are in the queue. We are getting to them as quickly as possible.
- O Local Ed: I have an employee whose spouse lost coverage, and she is adding him as a qualifying event. While she was in the office to add him, she also wants to switch plans from Cigna Open Access to BCBS. How do we do that?

- Answer: Since it is a special qualifying event (SQE) you would use a paper form, and because the spouse lost coverage, you would be able to switch vendors, so you would need to mark this on the form, and then send it in to us with proof of loss.
- o **Local Ed:** Is there a query to check if the employee has entered changes in Edison however the employee did NOT click submit?
 - **Answer:** Yes, you would run the TN_BA219_OE_NOT_SUBMITTED query if you are looking for those who have saved but not submitted, including those who made changes in ESS but have not submitted their enrollment. Look for employees with "SAVED in the "Saved but not submitted" column of the query.
- Local Ed: Where do we find the information to run the queries to run during annual enrollment?
 - Answer: It is on the <u>ABC webpage under Training</u>, Titled "Queries to Run After Annual Enrollment."
- Local Ed: I have an employee who is not currently on our insurance but is expecting a baby in November/December and they want to add family coverage in January. They added the baby to coverage during open enrollment. When the baby gets here do I just send the birth certificate through Zendesk for coverage starting January?
 - Answer: You won't be able to add the baby to coverage until the child is born, so if you have added the baby now during annual enrollment, we will need to remove the child. When the child is born, we will add the child on the date of birth with proof of eligibility, such as the mother's certificate received at the hospital. We will automatically continue coverage for 2020. You will most likely not have the Social Security number when you submit the form to enroll the baby. You will have to provide the updated Social Security number by submitting a Corrections and Clarifications form with a copy of the Social Security card when it is issued so that we can correct the information.
- o Local Ed: What query is only available during annual enrollment?
 - **Answer:** The TN_BA219_AETP_INS_ELECTIONS query is only available during and immediately after annual enrollment. You can no longer run it after we start closing out the events. Please run this query by Monday, October 28th.
- Local Ed: I have an employee who added coverage effective 1/1/20. What if the proof of joint ownership is not accepted? Do we have to send something else by the annual enrollment Oct. 25 deadline?
 - **Answer:** We will send a notification to the ABC that the documentation is not accepted, and we will give the employee an additional 10 days to provide acceptable proof.
- Local Ed: My new dependent query report doesn't update showing dependents coverage received. However, I do receive emails showing document received for proof of relationship. I just want to make sure I don't need to do something with the emails I have received showing the supporting documents?
 - Answer: As long as you have received an email from us letting you know that the documents have been received, you don't need to send in anything else. We will reach out to you if we need something else from you.

- o **Local Ed:** The only plan code and coverage level descriptions I saw on the ABC page were for 2018. Are these the same for 2019-2020?
 - **Answer:** Yes, we have not changed the plan codes for 2019 or 2020. That is the current document.
- Local Ed: On a divorce, is the coverage dropped for the spouse on the date of the divorce or the last day of the month the divorce was final or can it be either/or?
 - **Answer:** The end date of coverage due to divorce is the last day of the month the divorce is finalized; it can't be either/or.
- Local Ed: I have an employee who has coverage 30 days after the divorce decree is finalized. What would I do in that situation?
 - Answer: I would recommend that you submit a Zendesk ticket, and we can take a look at this specific scenario and get back to you. We cannot continue coverage for a dependent that has been deemed ineligible. COBRA coverage can be offered to the divorced spouse if the divorce is reported within 60 days of the date of divorce.
- O Local Ed: If an employee can't find his/her marriage certificate, can two forms of joint ownership be used?
 - **Answer:** No, we have to have a copy of the marriage certificate. The employee should be able to go back to the county of marriage to request a copy, or the office of vital records to get a copy. If all they have is joint ownership now during annual enrollment, they can submit that and let us know they are working on marriage certificate.
 - Employees may be able to get copies of marriage certificates online: https://www.vitalrecordsonline.com/marriage-certificate/application
- o **Follow up question to above: Local Ed:** I have two employees who are both employed by our system, so can I send both ID #'s and it shows their address as the same? They are changing from having separate insurance with two HOCs to HOC/dependent.
 - **Answer:** That will work to show they are both employees, but we will have to have the marriage certificate and one form of joint ownership from the list that is on our website. If one is a dependent, we have to have proof of marriage.
- Local Ed: Several of my employees have added dependents but when they finish the process, it sends them back to the first page. It does not let them know that they have submitted their documentation correctly. Should they receive confirmation?
 - Answer: If they can see an enrollment preview statement on the Benefits Statements step, they have submitted their enrollment correctly. They will also get a pop-up and the status will show submitted. If they do not get a pop-up message, then they will need to check to see if they can see the enrollment preview. If they cannot see the enrollment preview, then the employee has saved but not submitted and the employee can go back in and submit. If we have an email on file for employees, we are sending them emails letting them know they have not submitted. You can also run the TN_BA219_OE_NOT_SUBMITTED query and contact them directly. You can find this information in last week's call notes too if you need more help.

- o **Local Ed:** I have a couple that both work for CCS. They are on a family plan. Also, going through the process of divorce which may be the same time as annual enrollment (AE). The wife has already enrolled through AE for 1/1/2020 single coverage. Does the husband need to do anything. Will she automatically drop off his family plan? Does he have to drop her? She can't be on two state plans. I don't know how much I can tell him, that she has already signed up for her own plan.
 - Answer: If they have filed for divorce, he is not allowed to drop her without an order from the court or a notarized statement from them both agreeing to the change. You are correct; she cannot be on the plan twice. If this is the case, we would have to remove her single coverage and add her back on his plan. You can send in a Zendesk ticket about what would be required before the divorce is final.
- Local Gov: I have an employee who needs to add a spouse and the documentation is not legible. I have asked them to resubmit.
 - **Answer:** If they aren't able to provide a copy by Friday go ahead and upload the one you have received with a note and we will work with you on this.
- o **Local Gov:** I have an employee that has a 21-year-old who lost her coverage with another carrier. Do I send in the same information to add her as I would as a SQE? Is there a certain time limit that the employee has to add her dependent?
- Additional questions: The employee wants her dependent coverage to start on January 1 even though her other coverage ends November 5th. Would this still be considered a SQE?
 - Answer: In this case if she wants to add her effective January 1, she could add her to her coverage during annual enrollment for a start date of 1/1/2020. If she wants the coverage to begin prior to January 1, the employee would need to submit an enrollment change form and proof of loss, and we will add the dependent either the day after the loss or the first of the following month. In this case, it would be either November 6 or December 1. They have 60 days back from the date of loss of coverage to add her to the employee's plan.
- Local Gov: Annual enrollment goes through Monday, correct?
 - Answer: No, it ends 4:30 on Friday, October 25. Technically, employees can enroll until 11:59 p.m. in Edison but the service center closes at 4:30 p.m. Central.
- Local Gov: We have an employee whose spouse with another employer's Open Enrollment occurs in November. They are thinking about changing to our insurance and we told her they could wait until his Open Enrollment to add them to her policy here as a result of his change during his Open Enrollment. Did I tell her correctly?
 - Answer: No, she cannot come on our plan because he is dropping coverage on his plan in November. She would need to add him now during our Annual Enrollment, unless he had a SQE to lose eligibility to join our plan. He would have to be added to her state insurance during our Annual Enrollment in this scenario.
- Local Gov: When I go to run query the TN_BA219 AETP_INS_ELECTIONS, it is just showing the first few that signed on, but is not showing the rest. Is there a reason for this?
 - **Answer:** If you can submit a Zendesk ticket with a couple of IDs, we can research this for you.

- o Local Gov: How long does it take for changes to show up on queries?
 - Answer: The TN_BA265_OE_ELECTIONS_IN_ESS query and the TN_BA219_AETP INS ELECTIONS query changes will show up right away. For the TN_BA219_MED_DEN_COVERAGE query, the changes won't show up until we close up the event. We have two training documents on the <u>ABC webpage under Training</u>: Queries to Run During Annual Enrollment and Queries to Run After Annual Enrollment that will help you.
- Local Gov: I have an employee with the spouse on insurance. The employee could possibly retire from his full-time job in March 2020 to start a part-time job, but we are not sure. Should anything be done at present time?
 - Answer: If the employee retires, you would key the termination in March. If they are starting a part-time job at your agency, there may be some PPACA implications. If you need us to look at a specific person, please submit a Zendesk ticket.
- Local Gov: I just received notification from a dentist that is listed on the Cigna dental plan that they will not be a participant. Will our employees who have selected Cigna have additional time to make a change to MetLife after Friday?
 - **Answer:** The employees will be able to make changes through Friday. If they select Cigna and there are no dentists within a 40-mile radius, then they could possibly make a change to their dental coverage. If you would like to submit a Zendesk ticket, we will take a look at this.
- o **Local Gov:** We have a new employee coming to work on November 1, will he need to choose the plan that he wants for the last couple months of 2019, and that will also be his same plan for 2020?
 - Answer: He would make his enrollment for 2019, and if he wants the same coverage in 2020, he doesn't need to do anything additional. But if he wants to make 2020 changes, you can send us the changes within his initial 31 day eligibility period, and we will make them for 2020.
- Local Gov: I thought if you were on Medicare you could not stay on the state insurance? I received a letter yesterday that I would be eligible for COBRA. Is this correct?
 - **Answer:** COBRA is different than state insurance. We will have someone reach out to you.
- Local Gov: We have decided to enter benefit changes for our employees. I would need to use the Benefit eForm, correct? The second question is about 2020 when will new ID cards come out?
 - Answer: Yes, you will need to use Benefit e-Form. As for new ID cards, we are sending files to our vendors in November. Members will start to receive cards in December so they will have them by January 1.
 - As a reminder, all health plan members will get an Optum behavioral health and substance use card this year. Optum will mail behavioral health ID cards to the head of contract and include additional cards for those enrolled in behavioral health. The intent of these cards is to reduce or eliminate member and provider confusion about where claims or inquires related to behavioral health benefits should be directed.

Members should present this card to their behavioral health professional just as they present the medical card when seeking medical care.

- For medical, pharmacy, dental and vision, only members who are new to coverage or who made changes to existing coverage will get new cards.
- Local Gov: Where can I find the paper form, and can I just use the Enrollment Change form?
 - **Answer:** Yes, you would use the Enrollment Change Application that is <u>on our website under Forms</u>, under Health, Dental, Vision and Disability.
- Local Gov: I have to have some tests run tomorrow. I recently turned 65 and am on Medicare but don't know much about it. The hospital called me yesterday and said that Medicare will be my primary insurance and my employer insurance will be secondary. Is that correct? I thought that as long as I worked, my insurance with the State would be primary?
 - **Answer:** The employee coverage should be primary over Medicare. Our vendors do coordinate to determine primary or secondary. You can contact BCBS or Cigna to coordinate your benefits:
 - BlueCross BlueShield
 - 800.558.6213
 - https://www.bcbst.com/members/tn-state/index.page
 - Cigna
 - 800.997.1617
 - https://www.cigna.com/sites/stateoftn/
- o **Local Gov:** Will everyone get cards or only those new to coverage?
 - **Answer:** Those new to coverage or who made changes will get ID cards, and everyone will get an Optum card for behavioral health and substance use services.
- o **Local Gov:** To get a list of providers for the eye vision plan do I go to the ParTNers for Health website?
 - **Answer:** Yes, go to the vision page or you can go to the Davis Vision website: http://www.davisvision.com/stateofTN.
- O Local Gov: I have new employees whose medical insurance starts October 1 and November 1. When will I be able to enter them for dental and vision for a January 1 start date? This is the first time we are offering dental and vision. There is not an option to add them right now through eForms.
 - Answer: You will submit the Benefit eForm for the new hire elections. We are processing these as quickly as possible, usually within a day or two, and then you will be able to go in and create another Benefit eForm for the annual enrollment. Right now we are current on our Benefit eForms, but we are at the end of enrollment, so you may need to contact us if the employees don't get their annual enrollment selection submitted in time.

Materials and Communications

- Updates:
 - o Local education, local government and retirees: Annual enrollment ended last Friday, Oct. 25.
 - Weekly calls: Weekly ABC calls will continue next Tuesday, Nov. 5, and then the regular monthly calls resume Nov. 12.
 - o **Saved but not submitted email:** An email went out Monday, Oct. 28 to approximately 95 local ed and local gov employees who had made changes to their benefits enrollment for 2020 in Edison, but did not submit the changes, and that enrollment is now closed. The email explains that if the member did not want to make changes, no additional action is needed, but if they intended to make changes, they can appeal to Benefits Administration by December 31, 2019. The email relays to the member what they have to do to appeal. We've attached the draft email for your reference.

Operations

- Local Ed and Local Gov: Appeals: Annual Enrollment Appeals
 - Written appeal must be submitted by 12/31/2019 to <u>Benefits.Administration@tn.gov</u> or uploaded through Zendesk
 - o Must include details about why deadline was missed
 - o Must also include an enrollment change application with 2020 elections
 - o If adding new dependents, valid dependent verification must also be included
 - o If an employee intended to make changes and missed the annual enrollment deadline, they must appeal to Benefits Administration by December 31, 2019. Please ask the employee to submit a written appeal as soon as possible to either Benefits.Administration@tn.gov, or uploaded in Zendesk, that includes the details about why they were unable to meet the October 25th deadline. They must provide a completed copy of an enrollment change application along with valid dependent verification information if they are trying to add new dependents.

- o Local Ed: We have a teacher who was hired as an interim from 07.31.19 to 10.04.19 and signed up for health coverage. She will do another interim from 12.4.19 to 03.13.20. Should we term her coverage as of 10.31.19, and then turn around and have her sign up again for health coverage during her eligible months? If considering ACA, would we just leave her with coverage during that time?
 - **Answer:** Yes. In this situation, you will need to term her so that her current coverage will end 10/31/19 and then rehire for the next interim for coverage to begin 1/1/2020 due to the length of time of the separation.
- Local Ed: I ran two queries yesterday to check on the changes, but not submitted. It was blank? Also, I ran the other query for all the changes and it came up blank too? I am too late for the first query and too early for the other?
 - **Answer:** Right now, you can run either the TN_BA219_MED_DEN_COVERAGE or TN_BA219_MED_DEN_ELECTIONS queries. If you had individuals who made changes, they should be showing up on these queries. We can take your name and research this for you.

- o **Local Ed:** Is there a query that we can run to make sure anyone who added new dependents uploaded all of their dependent verification? I've looked but can't find one.
 - **Answer:** The TN_BA311_ESS_NEW_DEPENDENTS query will show you all of the dependents that were added by the employee through ESS. BA is still processing dependent verification documents, and we will contact you if we need further information.
- Local Ed: I had one employee that I changed benefits through a Benefits eForm and the change isn't showing on the AETP elections query. Will it show up there? Others that I changed through Benefit eForms are showing.
 - Answer: Right now, we recommend running the TN_BA219_MED_DEN_COVERAGE query as it will show all coverage effective for Jan. 1. If the change is not showing up on this query, please submit a Zendesk ticket for us to review.
- Local Ed: Should all changes be updated now on the queries?
 - Answer: We are still working on dependent verification documents, so not all dependents will show up yet. We will have all changes processed by November 22nd to send to the vendors. We recommend running TN_BA219_MED_DEN_COVERAGE if you want to see all coverage for 1/1, or TN_BA219_MED_DEN_ELECTIONS if you just want to see changes made, AFTER November 22nd in order to pick up all changes. The only exception to this will be if we receive an appeal that is approved after that date. In the case of appeals, we will notify you if we key a coverage change.
- o **Local Ed:** We have a new hire with an effective date of 11/1/19, and she incorrectly elected employee coverage instead of family through ESS. Do we just need to have her complete an enrollment change application and correction form to get this corrected? She's already submitted her dependent verification documents through ESS.
 - **Answer:** Yes, you will need to submit a Corrections and Clarifications form and have her complete the Enrollment Change Application.
- Local Ed: Which query shows the changes made during open enrollment?
 - **Answer:** Right now, you can run the TN_BA219_MED_DEN_COVERAGE or TN_BA219_MED_DEN_ELECTIONS queries. The TN_BA219_AETP query has been closed following annual enrollment.
- Local Ed: I also used Benefits eForm on two of my employees. One is showing on the TN_BA219 query and one is not. I did send submit a Zendesk ticket
 - **Answer:** If the two employee IDs are on the ticket, we will be able to research this for you.
- o **Local Ed:** Can we receive an email from BA when all entries are completed? I have to give the query to payroll for them to make changes. We collect premiums the previous month to pay for the next month's coverage.
 - Answer: Anytime we key something in Zendesk, you should receive an email letting you know what the change is. We also have the premiums due query you can run that will show the premium we will take. You should receive an email each time

you make a change. All changes, except for an appeals received after mid-November, will be in the system by November 22nd. You can run the queries after that date to capture all changes. In December, we also calculate your premiums due for January sooner than usual. You will be able to run a Premiums Due report for January coverage on December 4th.

- Local Ed: Would it be possible next year to make the login process easier? I like the
 ability to get the access ID, but most employees enrolling don't have their Edison IDs
 because they've never had coverage and therefore don't have a prescription card to
 reference.
 - Answer: We are looking every year at improving this process. There are very strict federal verification requirements and processes in place in order to verify a person. We were able to simplify the process this year and made some changes, but we are not able to remove all of the verification requirements. You can run the TN_BA302_PERSON_AND_JOB query as this is the best way to get a list of all of the people in your agency with their Edison IDs. We will continue evaluating to simplify the process.
- Local Ed: Since we can only run the TN_BA219_AETP_INS_ELECTIONS report for a short period of time, if there are additional changes made, will we receive an email from BA notifying us of the change? Assuming the employee worked directly with BA with an issues and not the ABC or if something may have not been processed yet?
 - **Answer:** You can run the TN_BA219_MED_DEN_COVERAGE query after November 22^{nd,} and this will show all coverage as of Jan 1st.
- Local Ed: With the changes made during AETP, I heard it said they would be working through Nov. to get everything updated?
 - Answer: We will continue processing appeals, and we are still going through dependent verification documents. If the appeal has been approved, you will get notified that the appeal has been approved. As far as the changes to the enrollment, the only changes made outside of an appeal are the dependent verification documents, and you will be notified if we have removed a dependent from coverage.
- Local Gov: Is there still time to run the query to changes made?
 - Answer: You can no longer run TN_BA219_AETP_INS_ELECTIONS, but you can still run TN_BA219_MED_DEN_COVERAGE and TN_BA219_MED_DEN_ELECTIONS queries. These will capture any elections they made on their own as well as those made in Benefit form.
- o Local Gov: Do you think it is safe to erase old conference call notes, say from 2017?
 - o **Answer:** Yes, but you may want to take out things you may need. We save the notes in our records. We do have policy changes, so you may want to keep information from them if you want to remember the changes.
- o **Local Gov:** When will the medical handbooks be ready?
 - o **Answer:** They are in the very last stages of being finalized and will be posted by the end of this week (Nov. 1). They are not printed unless the member asks for a printed

copy. The welcome packets that go out in December will have a postcard that will allow the member to request a printed copy.

- o **Local Gov:** Our payroll handles HSA contributions being sent. Are there any specific steps that need to be taken due to Annual Enrollment? This is our first renewal.
 - **Answer:** No, if you are already set up to make payroll contributions for the HSA, you just need to make sure when you send the first file for 2020, you update the year for 2020. Everything else in the file will stay the same.
- Local Gov: It is our first time getting vision coverage. Will Davis Vision send out something to the employees that signed on?
 - **Answer:** Yes, they will get their ID cards from Davis Vision.
- Local Gov: If we just recently had someone sign up for the HSA, who will receive the debit card information needed for the 2020 year, the ABC or the person that signed up? Will Pay flex reach out to the person choosing that option?
 - **Answer:** Yes, PayFlex will send the debit card and information directly to the member.

Materials and Communications

- Updates:
 - o **ABC conference calls:** The regular monthly calls resume Nov. 12.
 - Updated Forms: Revised order forms have been posted on the <u>ABC webpage</u> by plan. You use these forms for COBRA brochures, HIPAA privacy notices and for contact information to order vendor materials. The revised forms include a new contact for Optum and PayFlex.
 - Cigna Handbook: A PDF of the Cigna 2020 Member Handbook has been posted to the ParTNers website, under Publications, Member Handbooks Health. We will let you know when the BCBST Handbook has been posted.

Operations

- Local Ed and Local Gov: Appeals: Annual Enrollment Appeals
 - Written appeal must be submitted by 12/31/2019 to <u>Benefits.Administration@tn.gov</u> or uploaded through Zendesk
 - Must include details about why deadline was missed
 - o Must also include an enrollment change form with 2020 elections
 - o If adding new dependents, valid dependent verification must also be included
 - o If an employee intended to make changes and missed the annual enrollment deadline, they must appeal to Benefits Administration by December 31, 2019. Please ask the employee to submit a written appeal as soon as possible to either Benefits.Administration@tn.gov, or uploaded in Zendesk, that includes the details about why they were unable to meet the October 25th deadline. They must provide a completed copy of an enrollment change application along with valid dependent verification information if they are trying to add new dependents.

- O Local Ed: Kroger pharmacy has approached our nursing department about coming to our schools about doing flu shots. The nurse said yes, and all day yesterday I've been trying to find out if these are going to be covered. I've called BCBST, Cigna and Caremark and I have not been able to get a definite answer. Pharmacy is billing through CVS but it will it be out of network if Kroger came right to the school? The provider is retro billing back to the actual Kroger for the immunizations.
 - **Answer:** First, we provide a comprehensive benefit, so members can go to a pharmacy themselves, or go to an in-network provider through BCBS or Cigna for their flu shots. We have a <u>flier that helps members who want to get the shot</u>, and they can go to many of the grocery pharmacy chains that are in-network to get the shot. Here is the link to find the list of participating pharmacies on the CVS/caremark website: info.caremark.com/stateoftn.
 - Now to address your question about on-site flu shot clinics: when a pharmacy comes out to your site to give flu shots, they often do what they call "roster or global" billing. That is not allowed under our pharmacy plan. What has to happen and is incumbent upon you, the agency to make sure happens, is
 - First, the flu shot provider must be in-network. The current list of participating retail pharmacies is available at <u>info.caremark.com/stateoftn</u>.
 - o If the member wants to get the flu shot onsite, the pharmacy has to capture all of the details found on the member's Caremark ID card and process the cost of the shot it as if the member was in the pharmacy.

- The pharmacy **cannot** put all of the member ID numbers on one page and submit a roster to Caremark for reimbursement.
- In your particular scenario, the Kroger pharmacy is in the network. After the Kroger pharmacy staff comes out to the school and provides the shots, they would need to go back to the pharmacy and process it as if the member actually came to the Kroger and had the immunization. If each person presented their CVS/caremark ID card, then it will process through the CVS pharmacy network. You have to look at it from the perspective as if the member were at his/her physician's office or clinic, or pharmacy.
 - Follow up question: Do we have a Caremark representative we could speak to? When I called, the person I spoke to said she was the representative, but when I called back the person said that they are all representatives?
 - **Answer:** You can route all questions to Keith by submitting your questions to the benefits.info@tn.gov email address and we will follow up with you.
- Local Ed: Does everyone get new ID cards including pharmacy cards for 01/01/2020, or just those who made changes during Open Enrollment?
 - **Answer:** Those who are newly enrolled or made changes will receive new medical, pharmacy and dental and vision cards, if applicable. All members will receive a new card from Optum this year for behavioral health and substance use services. Cards will start to arrive to members mid-December, so they have them by 01/01/2020.
- o Local Ed: Is Cigna Open Access (OAP) accepted at CHI Memorial in Chattanooga?
 - Answer: Yes, we've confirmed that Memorial Hospital in Chattanooga is also known as CHI Memorial Hospital, and it is in the Cigna OAP network. Cigna is going to update their online directory and add CHI to the Memorial Hospital name, and we have added it to the hospital PDF list on the ParTNers website to make it clearer for our members.
- Local Ed: If an employee was contacted directly from Benefits Administration (BA) because they were on the saved but not submitted query, will I be contacted from BA if their appeal is granted?
 - **Answer:** Yes, we will notify you via Zendesk about all appeals granted or denied for your employees.
- o Local Ed: Where did you say we could order our new brochures for 2020?
 - Answer: You can find the vendor contact list on the <u>ABC webpage</u> under Conference Call Notes. You can also find the order form on the ABC webpage by plan type – you use this form for COBRA brochures, HIPAA privacy notices, and it includes contact information to order vendor materials. The revised order form includes new contacts for Optum and PayFlex.
- Local Ed: I am perplexed about what reasons to have employees submit an appeal. I wonder should I just refer all employees, no matter the reason to submit an appeal?
 Most reasons seem to excuses or procrastination, although there have been some very valid reasons.
 - Answer: Anyone can appeal for any reason, and we will review all of them. It does not mean we will grant all of them. We will notify the ABC of approval or denial. If

someone wants to appeal, they can send it in or you can send it in for them. We will review all of the appeals that we receive by the December 31, 2019 deadline.

- O Local Ed: We have had some complaints about the quality of lenses from Davis Vision. I even sent an email to Benefits Administration from one of our employees. I got a call back from Davis Vision but was already gone for the day. When contacting them back I never got anyone to call me back about the issue.
 - **Answer:** We will contact you directly about this issue.
- Local Ed: All of the new enrollments for January will be ready for payroll no later than Dec 4?
 - **Answer:** Yes, we will calculate the premiums the night of December 3rd, so you will able to run the Premiums Due report on Dec 4.
- o Local Ed: Will employees going on MetLife dental in 2020 receive dental cards? If so when?
 - Answer: If they are enrolled in MetLife dental for the first time, they will receive a dental card. The cards will go out mid-December, so members will have them by January 1, 2020. Members currently enrolled in MetLife dental will not receive new cards.
- o Local Ed: How close is BA to getting through any paperwork for documentation that was sent in for AETP? I'm just wondering about some of my employees.
 - **Answer:** We are still processing the paperwork. Our deadline is Nov. 22, so we can send the enrollment files to our vendors.
- Local Ed: What is the best query to run to use to make our changes for plans for the new year?
 - Answer: There are several available. You can go to the <u>ABC website</u> under Training, and you will find the Queries to Run After Annual Enrollment document that lists the different queries to choose from to meet your needs.
- o **Local Gov:** If someone does appeal, when will they have a decision?
 - **Answer:** We are working the appeals as they come in and we are trying to turn them around in 10 business days. You will be notified if they are approved or denied.

Materials and Communications

- Updates:
 - State/Higher Ed: Updated Forms: Revised order forms have been posted on the <u>ABC</u> webpage by plan. You use these forms for COBRA brochures, HIPAA privacy notices and for contact information to order vendor materials. The revised forms include a new contact for Optum and PayFlex.
 - Cigna and BlueCross BlueShield Handbooks: PDFs of the Cigna and BlueCross
 BlueShield 2020 Member Handbooks have been posted to the <u>ParTNers website</u>, <u>under</u>
 <u>Publications</u>, Member Handbooks Health.

Benefits

- Higher Ed: ActiveHealth emails
 - O ActiveHealth, our Wellness program and Weight Management vendor, is migrating to a new email platform that will make it more flexible and easy to send out email communications to members. It's called Sales Force Marketing Cloud, and it works similar to other platforms like Mailchimp and Constant Contact.
 - o In preparation for the move, they have been testing the platform by using it to send some recent program emails reminders about incentives, group coaching and other programs. They have noticed that most have been sent successfully, except addresses that end with .edu. For some reason, any .edu email address is blocking emails and are not going through.
 - This can usually be solved by IT personnel "whitelisting" or allowing the emails to come through and not considering them spam.
 - After today's call, an email communication will be sent from the <u>benefits.administration@tn.gov</u> email address to you if you have active employees with an email address ending with ".edu" We are asking for you to please forward the email to your IT department to see if they would consider helping us.
 - We want to make sure members get appointment reminders as well as reminders about the incentive program.
- Omada Diabetes Prevention Program/Email Campaign Presentation: Sara Raycroft with Omada joined us to talk about the Diabetes Prevention Program for Cigna health plan members, and the email campaign that is currently underway.

Operations

- Service Center Metrics/Customer Service Rating
 - October 2019:

■ Tickets via Email: 1,271

■ Tickets via Self-Service: 8,355

Tickets via Phone: 10,764

■ Tickets via Chat: 1,542

■ Total: 21,932

Satisfaction Score: 93.4%

October 2018:

■ Tickets via Email: 1,089

• Tickets via Self-Service: 5,140

Tickets via Phone: 14,150

Tickets via Chat: 910

■ Total: 21,289

Satisfaction Score: 94.4%

- We received over 3,000 less calls this year as compared to last October with both chats and Zendesk interactions increasing. Our total interactions increased by almost 700 overall.
- We take the satisfaction of our customers very seriously. Please complete the survey after your Zendesk ticket is resolved.
- o If you respond with a "Bad" rating to your Zendesk ticket, we will reach out to you to see how we can improve. We ask that you please rate the service you received from our service center, and not if you are unsatisfied with the policy. Our satisfaction rate for October was 93.4% percent.

• Higher Ed/State: Appeals: Annual Enrollment Appeals

- Written appeal must be submitted by 12/31/2019 to <u>Benefits.Administration@tn.gov</u> or uploaded through Zendesk
- Must include details about why deadline was missed
- o Must also include an enrollment change form with 2020 elections
- o If adding new dependents, valid dependent verification must also be included
- O You may review Edison notes to check if appeal has been approved or denied
 - If an employee intended to make changes and missed the annual enrollment deadline, they must appeal to Benefits Administration by December 31st. Please ask the employee to submit a written appeal as soon as possible to either Benefits.Administration@tn.gov or you may upload it in Zendesk. The appeal must include the details about why they were unable to meet the October 11th deadline. The employee must provide a completed copy of an enrollment change application along with valid dependent verification information if they are trying to add new dependents.
 - Appeals are being reviewed daily and you will be notified of the decision. To check if one has been approved or denied, you will first see it by reviewing Edison notes.

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

- Written appeal must be submitted by 12/31/2019 to <u>Benefits.Administration@tn.gov</u> or uploaded through Zendesk
- o Must include details about why deadline was missed
- o Must also include an enrollment change form with 2020 elections
- o If adding new dependents, valid dependent verification must also be included
- O You may review Edison notes to check if appeal has been approved or denied
 - If an employee intended to make changes and missed the annual enrollment deadline, they must appeal to Benefits Administration by December 31st. Please ask the employee to submit a written appeal as soon as possible to either Benefits.Administration@tn.gov or you may upload it in Zendesk. The appeal must include the details about why they were unable to meet the October 25th deadline. The employee must provide a completed copy of an enrollment change application along with valid dependent verification information if they are trying to add new dependents.
 - Appeals are being reviewed daily and you will be notified of the decision. To check if one has been approved or denied, you will first see it by reviewing Edison notes.

• State: ePAF Issue Resolved!

- o ePAFs entered for separations were not creating an event to terminate benefits coverage.
- o Issue occurred when the ePAF was submitted and then placed on hold the same day.
- You can now place a separation ePAF on hold the same day as it is submitted and the insurance will be terminated.

• New ABC Training:

- o November 20: Local Education: 9-11 a.m. Central time
- o November 20: State/Higher Education: 1-3 p.m. Central time
- o November 21: Local Government: 9-11 a.m. Central time
- o November 21: Session 2 All Entities 1-3 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.

- o **Higher Ed:** With the wellness incentive, will anything be sent out to employees reminding them of the deadline? Also, has it been determined how the incentive can be applied to the member's HSA?
 - Answer: ActiveHealth has been sending reminders throughout the year. The final reminder went out on October 28 to allow time for members to complete activities before the end of the year. For the wellness incentive applying to the HSA, we are doing a test run for state employees. Once we have tested this process for state employees we will share the information with higher education institutions and then you would have to set that up yourselves for your agency.
- O **Higher Ed:** If an employee appeals directly to Benefits Administration (BA), does BA let us know it has been received and is being reviewed, or will we only get notice whether it was approved/denied?
 - Answer: If an employee faxes or emails an appeal to our office, you will be notified when we load the appeal in Zendesk because the ticket will be in your name. If the employee directly loads an appeal in Zendesk, it is possible you won't be notified until the decision is rendered. You can look in the Edison notes to find out sooner, but we are currently at about a 10 business day turnaround on all appeals.
- **Higher Ed:** I thought that the deadline is December 1 for appeals? Then if the appeal is approved, then the employee will be behind on the December premium?
 - **Answer:** The deadline has always been December 31st. We do want appeals to be submitted as quickly as possible, but if it does come in December 31st, then there

may be a retroactive premium change. The quicker the appeals are submitted the better.

- Local Ed: Did you say the emails (Omada) will go out to Cigna members or to the ABC to send out to employees?
 - Answer: The Omada emails are going out directly to Cigna health plan members, if we have their email address in Edison. We are also sending a sample email out to ABCs the Friday prior to the Omada email going out to Cigna members so you have it for your information.
- Local Ed: What query can we run for those who made changes during open enrollment?
 - Answer: I would recommend that you go to our <u>ABC website</u> at tn.gov/partnersforhealth and look under Training, there is a link to a document called <u>Queries to Run After Annual Enrollment</u> and you can find the query you are looking for.
- o Local Ed: Will we be hearing about appeals submitted soon?
 - Answer: We are reviewing appeals every day. We have many appeals that we are processing and have at least a 10 business day turnaround. If it has been more than 10 days, you can check the Edison notes. You will be notified via Zendesk if the appeal has been approved or denied. After we have rendered a decision on the appeal it may be a couple of days before the analyst is able to notify you by email.
- o Local Ed: We are joining the State's dental in 2020. When we add employees in Benefits eForm, it is not giving us the option to add dental?
 - **Answer:** If the employee's insurance starts before 1/1/20, you will have to submit his/her new hire enrollment via Benefits eForm, and then submit a paper enrollment form for 2020 coverage with dental marked. If the employee's insurance doesn't start until 1/1/2020, you can send us a Zendesk ticket and we will research this for you.
- O Local Ed: I just received an email from Benefits Administration that someone did not submit the correct document for joint ownership. This is the first I have heard this, and it says the spouse was removed. So, would we now submit an appeal?
 - Answer: Yes. At this point it would be an appeal. The email saying that the spouse is being removed is because we did not receive any documentation at all, so you or the employee could file an appeal at this time. You would need to include the correct missing documents with the appeal.
- o Local Ed: Is the PPACA query available now?
 - Answer: You can run this query at any time. On the <u>ABC website</u>, under Training, you will find instructions for running your PPACA report. Note, you will not have the December information on it. That information won't be included until the second week of December. Also, remember that you will need to account for any retroactive changes (hires, SQEs) after you run the report.
- Local Ed: We have also had emails stating employees are missing documentation, but the employee states they have sent the documents into Benefits Administration. Should they resend everything again?
 - **Answer:** We will reach out to you to make sure so you don't send in duplicates.

- Local Ed: Will the PPACA query include retirees and COBRA participants, sorry I can't recall.
 - Answer: It does not include COBRA participants as we have to send these to you separately. When you run the query in Edison if you have retirees and the person running the report has security access to the retiree department ID, they will be included on the report.
- o Local Ed: Any idea when we would receive the COBRA PPACA report?
 - o **Answer:** We will generate the COBRA PPACA report and send it to the agencies mid-December.
- State: Is Omada for Cigna plan members only?
 - Answer: Correct. Only Cigna members can enroll in the Omada program. BCBST has a program through Retrofit.
- State: The Retrofit link (BCBS Diabetes Prevention Program) is broken on the ParTNers tn.gov site. Is there a more accurate link available? Also, I have previously tried to reach out to BCBS and ask about Retrofit and they denied that the state was a part of that program.
 - **Answer:** BlueCross BlueShield has corrected the link on the ParTNers for Health website. Members can also go to https://www.bcbst.com/ to log in to BlueAccess and select Diabetes Prevention Program from the Managing Your Health menu. Or, they can call 888-599-7483 for assistance.
- o **Local Gov:** Are these emails (Omada Diabetes Prevention Program) sent to the employees?
 - **Answer:** Yes, the emails are sent to Cigna health plan members if we have their email address on file. We are sending sample emails to the ABCs first for your information and reference.
- o Local Gov: Just curious as to why we aren't notified when a child ages out?
 - Answer: We have a query you should run on a monthly basis. Removing a dependent when they age out is an automated process that terminates the dependents. Our team is not going in and removing the dependent. All queries are available on the <u>ABC website</u> under Training, <u>Edison Query Manual</u>. The manual lists all of the frequently run queries you are responsible for running.