

Combined ABC Conference Call Notes
Higher Education, Local Education, State and Local Government
Dec. 14, 2021

Communications

- **Materials and Communications Updates**
 - **Network Update:** We sent this information that you could share in a recent ABC email: **NorthCrest Medical Center** in Springfield, Tenn., **will be in BlueCross BlueShield Network S through Sept. 30, 2022.** This update does not impact the other networks. NorthCrest will remain in-network for BCBST Network P and Cigna Open Access Plus, and is out-of-network for Cigna LocalPlus.
 - On the ParTNeers website, you can [find an updated All Networks Hospital List for 2022](#) on the **Carrier Information webpage.**

- The following updates were also relayed in ABC emails. We wanted to make sure you were aware of this information.
 - **2022 Member Handbooks: The 2022 member handbooks have now been posted.** The BlueCross BlueShield and Cigna member handbooks are finalized, and electronic versions are available on the [ParTNeers for Health website under Publications.](#) The vendors will begin filling requests for printed copies as soon as their printing contractors can produce those.
 - There is a nationwide paper shortage which is impacting the printing industry. While BCBST and Cigna have taken steps to ensure adequate materials will be available to meet all requests, supplies are not unlimited.
 - **Electronic versions of the handbooks are exact copies of the print versions.**
 - Also, remember that each welcome packet going out to enrolled member households includes a postage paid postcard individuals can use to request a printed handbook and/or directory. BCBST and Cigna will honor any postcard requests by mailing materials directly to the individual homes.
 - Keeping these things in mind, please limit your requests for printed handbooks and directories to the number you anticipate you will need for employees asking you to provide printed copies. This will help ensure that anyone who wants printed materials can have them.

 - **2022 ID Cards:** We want to remind you that recently hired employees eligible for coverage in 2021 will get two separate sets of health insurance ID cards. These members will receive cards for 2021 and 2022. Mailings may overlap due to the timing of new enrollments and new cards being generated for the 2022 plan year. The carriers cannot guarantee which card members will get first, and this may cause some confusion. Impacted members should be reminded to pay attention to the different mailings to ensure that they present the 2021 card for services received between now and the end of the year, and they should use the 2022 card for services after Jan. 1. The following tips will help identify the correct card:
 - **All 2022 medical cards will now have deductible and out-of-pocket maximum information listed on the front of the cards.**
 - Cigna ID cards will also have an effective date on the card relative to the year, so the 2022 card will be 1/1/2022.
 - BCBST ID cards do not have an effective date; however, they will have (01/22) on the back lower right-hand corner.
 - As always, members can call BCBST at 800.558.6213 or Cigna at 800.997.1617 for assistance. Members may also call the BA Service Center at 800.253.9981 or 615.741.3590.

- **As a reminder, this year, all members will get new 2022 medical, pharmacy and behavioral health ID cards. Also, we were informed that in addition to all Delta Dental members receiving new 2022 dental cards, all Cigna DHMO prepaid dental plan members will receive new cards for 2022.**
- New ID cards were mailed to members in **The Tennessee Plan**. The new ID cards have UMR and ParTNers logos on them. “POMCO” is no longer on the ID cards because POMCO is now UMR. The Tennessee Plan benefits have not and will not be changing as result of the acquisition, platform and branding change. The difference in the ID cards is simply the removal of the POMCO logo to accurately reflect the legal name, UMR.
- **2022 Eligibility and Enrollment Guides:** Updated 2022 Eligibility and Enrollment Guides have been posted on the [Publications webpage](#), under **Eligibility and Enrollment Guides, titled 2022 Eligibility and Enrollment Guide, by plan type** (State and Higher Education or Local Education or Local Government). These guides were updated on Nov. 22, 2021, so please be sure you are using the version that is currently posted.
- **2022 ABC Conference Call Schedule:** The 2022 ABC conference call schedule has been posted on the [ABC webpage](#) under Conference Call Notes. Calls will continue on the second Tuesday of the month at the regularly scheduled time. The ABC Conference Call schedule for 2022 is available at www.tn.gov/content/dam/tn/finance/fa-benefits/documents/abc_call_schedule_2022.pdf

Benefits

- **State/Higher Ed: ActiveHealth Weight Management Update:** Effective Dec. 1, 2021, we are changing the total length of the ActiveHealth Weight Management Program from one year to six months. The last eight months of monthly sessions will be changed to eight weekly sessions, for a total of 24 weekly sessions. This change will benefit members because it will allow ActiveHealth to provide more focused support and check in with members more often on their progress. It will also reduce the overall time commitment that a member has to commit to the program. In January, ActiveHealth will be providing additional information on the Weight Management Program.

Operations

- **Fillable Forms Reminder:**
 - Benefits Administration forms can be filled out digitally and signed electronically
 - All forms now allow for electronic signatures
 - Fillable forms can be located on the Partners For Health website
 - Fillable forms increase readability and can reduce printing needs
 - Forms from our vendor partners (such as the Voluntary Term Life forms from Securian/Minnesota Life) are unchanged.
 - Electronic forms require Adobe Acrobat Reader 7.0 or later (available to download for free), non-Adobe products are not compatible.
- **Higher Ed/Local Ed/Local Gov: PPACA (Affordable Care Act) Information:** Information on how to run your PPACA report is found under the Training section on the [ABC website](#).
 - You can run your PPACA report through November now. You can run it for December information after the first of January. Just as a reminder, you will also need to run it again in January/February to pick up anyone that has coverage entered or changed retroactively after the date you run the report.

- You are responsible for preparing 1095 forms for any retirees of your agency that are enrolled (or have family members enrolled) in Medical coverage. The retirees should automatically show on the PPACA report for the ABC(s) in your agency that has/have security access to your retiree department ID. Please remember that retirees can have dependent-only coverage. This is noted in the coverage code field. There will still be a line for the retiree, but if the coverage code is E, I, J or K then the retiree is not enrolled in coverage.
 - Last week, BA sent a list of COBRA enrollees that are associated with your agency. You must also include them with your 1094/1095 reporting. We will also email you with the information for anyone else that signs up for COBRA after the date the report was generated.
 - All agencies on the State plan are considered to be self-insured and must do their own reporting. The vendors do not report for self-insured plans.
 - Employees do not have to have their 1095 forms to file their taxes, but you are required to send it to them.
 - We just found out that the IRS is proposing a permanent extension to the filing deadline for sending 1095 forms to employees. The IRS previously said it wouldn't be providing any more extensions. So if you were planning on the deadline being January 31 this should be good news for you!
 - Employers with less than 50 employees need to complete the 1094-B (IRS) form and 1095-B (employee) forms.
 - Provide 1095-B to employees/retirees/COBRA participants by March 2, 2022.
 - File 1094-B and 1095-B forms with the IRS by February 28 (if filing by paper) or March 31 (if filing electronically).
 - Employers with more than 50 employees need to complete the 1094-C (IRS) form and 1095-C (employee) forms.
 - Provide 1095-C forms to employees/retirees/COBRA participants by March 2, 2022.
 - File 1094-C and 1095-C forms with the IRS by Feb. 28 (if filing by paper) or March 31 (if filing electronically).
 - If you file 250 or more forms, you must electronically file with the IRS.
 - If you have specific questions, we have more information available on the ABC webpage under the PPACA documents section, or you can submit a ticket to our service center for help.
- **Service Center Metrics/Customer Service Rating**
 - **November 2021:**
 - Tickets via Email: 1,253
 - Tickets via Self-Service: 4,977
 - Tickets via Phone: 5,245
 - Tickets via Chat: 245
 - Total: 11,720
 - Satisfaction Score: 88.6%
 - **November 2020:**
 - Tickets via Email: 903
 - Tickets via Self-Service: 3,447
 - Tickets via Phone: 4,689
 - Tickets via Chat: 258
 - Total: 9,297

- Satisfaction Score: 96.2%
- We had almost 2,500 more tickets this year than compared to last November.
- We take the satisfaction of our customers seriously and ask that you please complete the Zendesk survey after your ticket is resolved. Our goal this year has been to have more of you complete the customer surveys so that we can take your feedback and improve your customer experience.
- Please continue to do this into 2022 as capturing this feedback builds a quality framework for us to make clear connections between what you need and what we're able to do based on your responses.
- Our satisfaction rate for November was 88.6%.
- We want to mention that we have received reports that some people haven't clicked on the "bad" rating yet it is showing "bad". We have researched this with Zendesk and have corrected this issue.

HIGHER EDUCATION QUESTIONS

- **Higher Ed:** When I get forms from employees, the checkmark is very tiny on my end. Does it show up normally on your end?
 - **Answer:** Once the form is signed and locked, it looks fine on our end.
- **Higher Ed:** Are any other vendors sending out new cards? I received a CVS Caremark. Is MetLife sending new cards? Cigna dental?
 - **Answer:** CVS Caremark is sending out new cards to all members for 2022. For dental, all Delta Dental members will receive new cards prior to Jan. 1, 2022. **We have just been informed that all Cigna DHMO prepaid dental plan members are also receiving new dental cards for 2022.**
- **Higher Ed:** When are Delta Dental DPPO cards being mailed?
 - **Answer:** Delta Dental will start to send out cards this week around Dec. 17 so employees will get them by the first of the year. You can contact Delta Dental at 800.552.2498 if you don't receive them in the next few weeks.

LOCAL EDUCATION QUESTIONS

- **Local Ed:** Is Davis Vision sending out new cards to all employees who have the vision plans?
 - **Answer:** If changes were made during the enrollment process, employees will receive new cards. If they did not make a change, they will not receive a new card, but members can always get a card from Davis Vision by going to their website at davisvision.com/stateoftn or calling Davis at 800.208.6404.
- **Local Ed:** When did we get the COBRA enrollee email?
 - **Answer:** The COBRA email went out on Dec. 9 from benefits.administration@tn.gov. Not all agencies will get a report. Only those agencies that have COBRA enrollees will get a report. If you believe you have enrollees and did not get a report, please submit a Zendesk ticket.
- **Local Ed:** When should we expect the Delta Dental cards to arrive?

- **Answer:** Delta Dental DPPO ID cards will be sent out this week around Dec. 17 so employees will get them by the first of the year. You can contact Delta Dental at 800.552.2498 if you don't receive them in the next few weeks.
- **Local Ed:** About the HSA payroll contributions, is this something that is in the end of year process or something separate? Is this something that if you use local government products is this part of the year end process? I was confused.
 - **Answer:** The information that has been sent out by email is about if your agency offers payroll contributions. The information gives an outline of how the contributions should be submitted toward the end of the year for the 2021 tax year and 2022 tax year and includes instructions on how to submit those files. Local Education ABCs who have any questions about this may contact the Optum ABC Support Center at 1.800.294.6620 or accountservices@optum.com.
- **Local Ed:** We have received an envelope from Good RX with savings cards in it. I know that this is not from the state, but do you have any guidance on if it's ok to give these out to employees or if we should not?
 - **Answer:** It is okay to use the Good RX savings card; however, members may not use the Good RX card with their benefits. They must use one or the other. If they choose to use the Good RX card, keep in mind that costs will not count toward the members' deductibles or out-of-pocket maximums.
- **Local Ed:** If a member's spouse is currently on the state's insurance plan and is turning 65 in February, will he/she receive a new insurance card for the month of January? Or do they use their current insurance card?
 - **Answer:** Anyone who is covered as of Jan. 1 should receive a card for 2022. If the member is an active employee, the spouse can remain on coverage after turning 65, and he/she will not be automatically removed. If they want to drop coverage, then the employee will need to submit a Cancel Request form. If the member is a retiree, then he/she will be removed from coverage due to turning 65, but the member will still receive a new card for 2022.

STATE QUESTIONS

- **State:** When did benefits stop taking Correction and Clarification forms for an employee? I sent one in to correct an employee's Social Security number and they said they do not do that anymore, only for dependents?
 - **Answer:** We still accept Corrections and Clarifications forms; however, we are not able to change a state employee Social Security number in Edison. That is not a new requirement. The Department of Human Resources is the primary owner for the personal information for state employees, so any SSN updates would have to go through them.

LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** Will members receive a Delta Dental DPPO ID card in the mail?
 - **Answer:** Yes. ID cards are being mailed by Dec. 17 so members should have them by Jan. 1, 2022.

- **Local Gov:** We are starting to receive our new Cigna cards and they have a new group number. Is this to be expected?
 - **Answer:** Yes, the group number on the Cigna medical ID cards did change.

- **Local Gov:** I am a new ABC with our agency. Do I have to go online to get the (PPACA) forms?
 - **Answer:** The IRS has forms on their website, and smaller agencies fill them out and send them in instead of filling out electronically. To find out more information about filing 1095-C forms, go here: <https://www.irs.gov/forms-pubs/about-form-1095-c>. To find out more information about filing 1095-B forms, go here: <https://www.irs.gov/forms-pubs/about-form-1095-b>.
 - **Follow up question:** I would go to the website and print out the template?
 - **Answer:** Yes, the IRS has a template to use to fill out the forms.

- **Local Gov:** I am new to my position and this is the first meeting like this I have attended. Will we be provided a copy of this presentation?
 - **Answer:** We send all this information in the ABC call notes that we send out on Friday with the ABC email. You can also pull up previous call notes that are updated every time we have calls here: https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/abc_notes_2021.pdf

- **Local Gov:** Has everyone with an HSA been notified of any information they need before year end?
 - **Answer:** Yes, we do believe they have received all the information they need.

- **Local Gov:** Am I correct that everyone will be getting new insurance cards?
 - **Answer:** Yes, all members will get new cards for medical, pharmacy and behavioral health prior to Jan. 1, 2022. Those with Delta Dental DPPO and Cigna Prepaid Dental DHMO will also get new cards. Only new enrollees and existing members with name changes will receive Davis Vision cards for 2022.
 - New ID cards were mailed to members in The Tennessee Plan. The new ID cards have UMR and ParTNers logos on them. “POMCO” is no longer on the ID cards because POMCO is now UMR. The Tennessee Plan benefits have not and will not be changing as result of the acquisition, platform and branding change. The difference in the ID cards is simply the removal of the POMCO logo to accurately reflect the legal name, UMR.

- **Local Gov:** I also received a new vision card?
 - **Answer:** Davis Vision is sending ID cards to new enrollees and to anyone with a name change.

- **Local Gov:** Do HSA participants receive information regarding year end contributions as well?
 - **Answer:** If Optum noticed a member has over-contributed to their HSA, the member will be sent a notice that they have contributed more than the maximum. Optum does not send a notification directly to employees on how to contribute to their HSA for the end of the year. If employees have specific questions on how to process any year end contributions for their HSA accounts directly, they can contact the Optum call center at 1-866-600-4984.
 - The information that has been emailed out to ABCs was about the 2021 and 2022 contributions, and how to format those contributions if your agency submits payroll

contributions or employer contributions via a file directly to Optum on behalf of your employees. Local Government or Local Education ABCs who have any questions about this may contact the Optum ABC Support Center at 1.800.294.6620 or accountservices@optum.com.

**Combined ABC Conference Call Notes
Local Education and Local Government
November 2, 2021**

Communications

- **Materials and Communications Updates**
 - **ABC Conference Calls:** This is the last weekly ABC Conference Call.
 - Regular monthly calls resume Nov. 9
 - **Cigna DHMO Website: cigna.com/stateoftn**
 - On this website, cigna.com/stateoftn, members can view dental network information specific to the State of Tennessee dental plan administered by Cigna.
 - To do this, users are required to sign in with a specific User ID and Password. (User ID = Dhmo01; Password = Stateoftn@1)
 - **Reminders**
 - Once a user is signed in, he/she is able to navigate to the profile information of this account by clicking “My Sot Dhmo” in the upper right-hand corner.
 - It is not necessary for members to access this page.
 - However, if employees end up on this page, please remind them to never enter their emails and/or phone numbers into this account.
 - **What’s Changed**
 - When a user views this account’s information, he/she will see new entries for **Email Addresses** and **Phone Numbers**.
 - Email Addresses include [do not enter your email@mail.com](mailto:do_not_enter_your_email@mail.com) and Thelma.ramos@cigna.com
 - Phone Numbers include (999) 999-9999 and (615) 504-8314.
 - Please advise employees that this information should not be changed.

Operations

- **Annual Enrollment Appeals**
 - Deadline to appeal is Dec. 1.
 - Submit written appeal with details on why deadline was missed to benefits.administration@tn.gov
 - Also submit enrollment change form and dependent verification (if applicable)

LOCAL EDUCATION QUESTIONS

- **Local Ed:** Do appeals that are submitted between now and Dec. 1 require an ABC signature?
 - **Answer:** No, not if they are annual enrollment appeals. We will include the ABC on the email back to the member if the member submits it directly to BA.
- **Local Ed:** We can upload the appeal in Zendesk correct?
 - **Answer:** Yes, that is correct.
- **Local Ed:** Is there a type of appeal that requires the ABCs supervisor's signature?
 - **Answer:** The only appeal that requires a supervisor’s signature is if there is an admin error. If the agency is responsible for the appeal, then you need the admin form, and you need the ABC’s signature and the supervisor’s signature.

- **Local Ed:** For query TN_BA311_ESS_NEW_DEP, I still have several employees with no proof of dependent marked. If the employee provided documents, how much longer until the dependents are verified? If by chance the dependent documents were not uploaded or verified, will the employee or ABC be notified for the employee to re-submit documents? What is the deadline to re-submit dependent documents?
 - **Answer:** We are still working through the dependent verification documents. For those who are still marked as no, if we have dependent verification on file, we will validate those and notify you via Zendesk that they have been enrolled. If we have not received any documentation, we will let you know dependents are being removed and the employee will have to file an appeal by Dec. 1, 2021. Historically, we get quite a few appeals. We do not only get annual enrollment appeals, but also regular appeals and administrative errors. The fastest way to see if the appeal has been reviewed is to check the Edison notes. We will also copy the ABC on the approval or denial once the change has been keyed.

- **Local Ed:** I was hoping that the recent email we got about the dependent amendments to the 2022 Plan Document would be talked about. Will this be discussed on any future calls or will we receive any more information about it? I wanted to make sure I completely understood everything before emailing it out to all our employees.
 - **Answer:** This week, we are only holding ABC calls for local education and local government. Next week, we have calls for all plans, including higher ed and state, and we will discuss the dependent eligibility amendment change as it pertains to placement orders in more detail during the Nov. 9 calls. We do encourage you to send the information out to all employees now, and you or the employees can reach out to the BA service center if you have questions.

- **Local Ed:** Which query is the one that you have to run during Annual Enrollment and immediately after AE closes? It seems like there is one that you can only run for so long right after AE closes. I ran it already, however, I just wasn't sure how long it would be available?
 - **Answer:** You need to run the TN_BA219_AETP_INS_ELECTIONS query now through mid-November so you can see all the changes. It includes the ESS changes, eForm changes and medical plan codes changes. It will only be available through mid-November.

- **Local Ed:** What date do we use for the TN_BA219_AETP_INS_ELECTIONS query?
 - **Answer:** 1/1/2022.

- **Local Ed:** Does the TN_BA219_AETP query include any changes submitted by the ABC?
 - **Answer:** Yes, it will also show changes through ESS and Benefits eForm and the medical plan code changes done by the system.

- **Local Ed:** This year, employees can submit appeals directly to BA and they do not have to go through the ABC?
 - **Answer:** Yes, employees can send their appeals directly to BA for AE by sending an email to benefits.administration@tn.gov by Dec. 1, 2021.

- **Local Ed:** Do they have until 4:30 p.m. on Dec. 1 to submit their appeals?
 - **Answer:** Correct, they have until Dec. 1, 2021, at 4:30 p.m. CT to submit their appeals.

- **Local Ed:** Do ABCs receive any other notification besides it being on the query when appeals are approved?
 - **Answer:** The first place you can check on an appeal is in the Edison notes. Also, if the member sends in the appeal, when we respond back to the employee, we will include the ABC on the response. If an annual enrollment appeal is sent in prior to Dec. 1, 2021, it will be approved.
 - **Local Ed:** What class and dates do we use for the TN_BA311_ESS query?
 - **Answer:** Event Class: Type in OE, for dates use 1/1/2022 for both.
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LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** Would you mind briefly chatting about the change to the plan description discussed on the last call? This is about the change about dependents.
 - **Answer:** This week, we only have local government and local education conference calls, so we will prepare more details about the dependent eligibility change as it relates to placement orders next week during all four ABC conference calls. Please share the information we sent in yesterday's email with all your employees now and reach out to the BA Service Center if you or your employees have any questions.

**Combined ABC Conference Call Notes
Local Education and Local Government
Oct. 26, 2021**

Materials and Communications Updates

- **Annual Enrollment:**
 - **Local Ed/Local Gov:** Enrollment for local education, local government and all retirees ends this Friday, Oct. 29.

- **ABC Conference Calls:**
 - **Local Ed/Local Gov:** Weekly calls continue next week. Next week's call will likely not go longer than a half-hour.
 - **Regular monthly calls resume Nov. 9**

- **ABC Message Board:** BA continues to post **Annual Enrollment Weekly Announcements** at the top of the [ABC webpage](#). These messages include a daily tracker with number of documents being reviewed, tips to assist you with password resets, queries and other important reminders. **Please be sure to check the message board.**
 - The ABC Message Board is available at <https://www.tn.gov/partnersforhealth/agency-benefits-coordinators.html>

- **Annual Enrollment Employee Benefits Webinar Information:** During the last week of Annual Enrollment, employees have access to a recorded version of the employee benefits webinar and a copy of the presentation with live links. You can find these materials on the ParTNers [Enrollment Materials webpage](#).

- **Annual Enrollment Insurance Carrier Webinar Recorded Sessions:** The Insurance Carrier webinar recorded sessions are posted on the ParTNers YouTube page under the **2021 Employee Benefits Webinar playlist** found here: <https://www.youtube.com/c/partnersforhealthtn/playlists>

Operations

- **No Agenda Items this Week**

LOCAL EDUCATION QUESTIONS

- **Local Ed:** I don't receive the webinar information and we thought this was at 10 a.m. Is there a list I can get on? I'm new to this role.
 - **Answer:** Yes, you can send an email to benefits.info@tn.gov. This will submit a Zendesk ticket and include your request. We will get the information to Nakeisha and the Education & Outreach team to have you added to the ABC directory.

- **Local Ed:** Some folks are with Delta Dental and they are deciding to get coverage elsewhere. If they decide to come back and get Delta Dental later, will there be a waiting period for them?
 - **Answer:** Yes, in this scenario, if they enroll in dental coverage outside of the state's coverage and want to enroll in the state's coverage later, there will be a waiting period. Any months of continuous previous enrollment in the State's MetLife DPPO will count toward the Delta Dental DPPO waiting periods. So, employees who were enrolled for a full year in the State's MetLife DPPO, who automatically transfer to Delta, will have satisfied the Delta Dental 12-month waiting period. For new hires

or those who change from the DHMO (prepaid), or those who were not enrolled for 6-12 months with MetLife, waiting periods will apply.

- **Follow up question:** What is the waiting period? Correct me if I'm wrong if they enroll there is not a waiting period?
 - **Answer:** It depends and will be either six months or 12 months for some services. If they are currently enrolled in MetLife and have satisfied the waiting periods and they roll over to Delta Dental, they will not have a waiting period they have to meet.
 - **Follow up question:** What about if they are in the Cigna DHMO, they will have the waiting periods?
 - **Answer:** There are no waiting periods for the Cigna DHMO dental plan. This document will show a lot of the specific waiting-period durations for certain services:
https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/benefit_grid_2022_dental_final.pdf
 - **Follow up question:** Delta Dental does it have a \$1,500 cap and does it roll over year over year?
 - **Answer:** There is a \$1,500 maximum per person, per year, and it does not carry over.
- **Local Ed:** Is Friday as the actual deadline? Or is it actually Oct 31st?
 - **Answer:** Yes, the deadline is Friday, Oct. 29 at 4:30 p.m. CT.
 - **Local Ed:** We will have some that missed the deadline. What is the process?
 - **Answer:** If they miss the deadline, they can send in an appeal by Dec. 1, 2021, to benefits.administration@tn.gov. Employees also need to include an [Enrollment Change Application](#). If they are adding any new dependents, they need to send in dependent verification documents as well.
 - **Local Ed:** The dependent verification form is a roadblock and some employees may not have this by Friday. What do they need to do?
 - **Answer:** If we receive partial or invalid dependent verification information, we allow 10 days after the Oct. 29th deadline to get the missing or incorrect information turned in. If employees don't send anything at all, then the 10 days do not apply. Employees can submit an annual enrollment appeal with an Enrollment Change Application and the required dependent verification by the Dec. 1 deadline.
 - **Local Ed:** I ran the TN_BA219 query and I had almost 1,300 entries. I usually only have around 90 changes. Is there something I have done incorrectly?
 - **Answer:** This year, we had to change all of the plan codes, and the query is picking up everyone. If you are looking for ESS changes, you can run query the TN_BA265_OE_ELTONS_ESS_AF_OCT20.
 - **Local Ed:** My question is about the best queries to run. Is there a query that shows only the changes that an employee has made during annual enrollment, and also a query that would show the changes that I as the ABC have made on their behalf?
 - **Answer:** You can run TN_BA_AETP_INS_ELECTIONS, but please note it will also include the changes to the medical plan codes. You can also run TN_BA219_MED_DEN_COVERAGE in mid-November to get a list of all coverage for your employees. If you just want to look at the TN_BA265_OE_ELTONS_ESS_AF_OCT20 query, it will have all of the changes made through ESS.

Local Ed: I have had a lot of employees who have not been able to get into Edison. When they reset their password it says they will get an email for reset. They are not getting the email. I have checked to see if the email is correct and it is. There are multiple employees this is happening to. When I go into Edison there are emails set up for these employees.

- **Answer:** If there is not an email on file in Edison, they will not get an email. Please refer the members to the Edison help desk at 866.376.0104 for further assistance. If you have specific employee examples, please send in a Zendesk ticket so that we can do some trouble shooting. We can manually reset the password for the employees as well. There are two sections within Edison where we must have an email address. It sounds like the email addresses are not in both sections.
 - **The email address for the one-time password is in a different location in their specific record which cannot be accessed by the ABC or by BA. This is why we refer you to the Edison team for assistance. You can also submit a Benefit eForm on their behalf.**
- **Local Ed:** Can you set up a new query showing just new changes made by either BA or employee and not all code changes?
- **Answer:** No, we are not able to as the medical code changes are still considered changes in the system although they are not changing the carrier or network in which the employee is enrolled. This year is an anomaly. Typically, the TN_BA219 query does not include this extra information, so we ask for your patience. That query should be back to normal next year.
- **Local Ed:** If we are not able to run TN_BA219 MED_DEN COVERAGE until mid-November to verify AE changes, will we be able to correct any errors?
- **Answer:** You will have until Dec. 1 if anything is incorrect to make corrections. If you are keying a Benefit eForm and you had an error in the keying, the process is the same as for new hires and we will correct that error for you. We will also be mailing confirmation statements to employees with changes in early November.
- **Local Ed:** Do we have to Dec. 1, 2021 to enter all changes we have received as ABCs?
- **Answer:** No, anything that comes in after this Friday, Oct. 29 will have to be sent to us an appeal with all required dependent verification documentation.
- **Local Ed:** Remind me where I can find what the (plan) codes are? For example, which code is Premier PPO Cigna LP?
- **Answer:** Here you go: https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/abc_codes_2022.pdf. This document and the plan coverage codes are on the [ABC webpage](#) under Edison Information section.
- **Local Ed:** What is the query that indicates the changes are not "submitted" and the "dep verif" hasn't been received?
- **Answer:** The TN_BA219_OE_NOT_SUBMITTED query; however, it will look like everyone has submitted as the plan codes have all changed for medical. We are reaching out directly to employees who have not submitted their enrollment. You can use the TN_BA311_ESS_NEW_DEPENDENTS query to see all new dependents that have been added and the status of their verification. Type in OE for the event class, and use 1/1/2022 for beginning and ending dates.

- **Local Gov:** If there are no changes for the 2022 plan, is there anything an ABC needs to do?
 - **Answer:** No, you do not need to do anything for employees who do not want to make changes for 2022. Their elections will carry over into next year.

**Higher Education, Local Education, State and Local Government
Combined ABC Conference Call Notes
Oct. 19, 2021**

Communications

- **Materials and Communications Updates**
 - **Local Ed/Local Gov/Retirees:** Annual Enrollment Continues: Now through Friday, Oct. 29

- **ABC Conference Calls**
 - **State/Higher Ed:** Regular monthly calls resume Nov. 9
 - **Local Ed/Local Gov:** Weekly calls continue through Nov. 2
 - Regular monthly calls resume Nov. 9

- **Local Ed/Local Gov: ABC Message Board:** BA continues to post **Annual Enrollment Weekly Announcements** at the top of the [ABC webpage](#). These messages include a daily tracker with number of documents being reviewed, tips to assist you with password resets, queries and other important reminders. **Please be sure to check this message board each week during Annual Enrollment.**

- **Materials Update**
 - **Coronavirus Benefits and Vaccine Document:** The COVID-19 National Public Health Emergency has been extended through Jan. 15, 2022, and the document found by clicking the yellow banner at the top of the ParTNeers website has been updated to reflect this extension. Here is a link to the updated version:
https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/coronavirus_public_info.pdf

- **Local Ed/Local Gov: Annual Enrollment Employee Benefits Webinars:** Our employee benefits webinars continue. Please continue to share the flyer we have included with the Friday ABC emails.
 - Employee informational webinars where 2022 benefits and changes are presented. Employees can ask questions about any of the benefits. Employees must register as directed. A link to webinar instructions is included.
 - **Local Ed/Local Gov:**
 - Oct. 20: 1-2 p.m. (session has been held)
 - Oct. 22: 3-4 p.m.

Operations

- **State/Higher Ed: Annual Enrollment Appeals**
 - Deadline to enroll was October 15th
 - Deadline to appeal is December 1st
 - Submit written appeal with details on why deadline was missed to benefits.administration@tn.gov
 - Also submit enrollment change form and dependent verification (if applicable)

- **Local Ed/Local Gov: No Operations topics this week.**

**Higher Education, Local Education, State and Local Government
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Oct. 19, 2021**

HIGHER EDUCATION QUESTIONS

- **Higher Ed:** Does the enrollment form need the ABC's signature?
 - **Answer:** No, Annual Enrollment appeals can come directly from the employee.

- **Higher Ed:** A few employees were requesting a call back late last Thursday and Friday afternoons as they were having access issues and the system was requiring them to call. Were these calls returned? Are these calls returned before Annual Enrollment ended? Many of the phone numbers will be from Jackson State.
 - **Answer:** We try to return calls the same day or it could be at night when working overtime. The employee can submit an appeal and include the date and phone number they called from. The phone number will show up in our Zendesk system. As long as they submit the appeal before Dec. 1, 2021, the appeal will be approved.

- **Higher Ed:** They can fax appeals to 615.741.8196 in addition to the email address?
 - **Answer:** Yes, if you receive the appeal, you can fax it to 615.741.3590 or you can upload it in Zendesk.

- **Higher Ed:** Since we weren't able to run the Saved but not Submitted report, will we get a list of people who didn't submit their enrollments? Will they have to appeal?
 - **Answer:** We emailed everyone who did not submit as of 2:30 p.m. on Friday. Only a few people did not have email addresses in Edison. We have notified ABCs of these individuals so the ABC can reach out and let the employee know. If the employees' changes were not made or if they have additional changes, then they can submit an appeal. We would recommend that the employees log back into Edison and review the preview statement to see if the changes they wanted went through before submitting an appeal.

- **Higher Ed:** Did all of the plan codes change?
 - **Answer:** Yes, all of the codes were changed for 2022. On the [ABC webpage](#) under Edison Information, you'll find the 2021 and the 2022 plan codes.

- **Higher Ed:** The BA311 report did not yield any information. What dates were to be used? I did use all, a begin and end date is on the report. The instructions said to use all.
 - **Answer:** You should use OE in the event class field and use 1/1/2022 for the beginning and the end date. The range is there because the report can also be run for new hires.

LOCAL EDUCATION QUESTIONS

- **Local Ed:** We have been moving this month and I have missed some of the calls. Have you given information about what codes to use for opening the queries?
 - **Answer:** We have not specifically covered queries during the calls but the information is available on the website on the ParTNers [ABC webpage](#). There is a

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banner at the top that has the recommended queries, and a link to the list that includes the prompts and what each query is for. Here is a link to the query list:

- https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/abc_query_list.pdf
- **Local Ed:** Have I missed details about new guidelines for special qualifying events coming for 2022?
 - **Answer:** Yes, we do have new guidelines for SQEs and the changes for the Plan Documents were covered during the Oct. 5 calls. We also had a session during the ABC Virtual Trainings and the recordings are on the ParTNers YouTube channel under the [2021 Virtual Roadshow Trainings for ABCs playlist](#). You can also reach out the BA Service Center with any questions you may have.

STATE – NO QUESTIONS THIS WEEK

LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** I tried to run the TN_BA219_AETP_INS_ELECTIONS report and did not get any data. I was trying to use a current date.
 - **Answer:** For this query, the way you can get information is by using 1/1/2022 for the date as it is the event date and the date the elections go into effect, and you should get results. You can call the Service Center or submit a Zendesk ticket and we can help you if you still have questions.
- **Local Gov:** If choosing the Premier PPO, are there more things such as phone calls or metrics that have to be met? I know several years back they did but just had that question.
 - **Answer:** I think you are referring to the Partnership Promise, and for the Premier PPO or any of the other plans, there are no longer any metrics or other requirements that have to be met.
- **Local Gov:** Where can I get the cost of dental premiums?
 - **Answer:** All premiums including dental are on the ParTNers website under the premiums tab:
 - <https://www.tn.gov/partnersforhealth/insurance-premiums.html>
- **Local Gov:** I made elections thru ESS on the 11th. I had to upload documents for my elections. How long will it be before I receive a response if it will be accepted?
 - **Answer:** We are currently working on documents we received on the 16th. We will send an email letting you know if we need anything else or if what you sent was acceptable. After reviewing this record, notification was sent to the primary ABC advising of the status of the enrollment.
- **Local Gov:** I just want to make sure that with the new dental insurance, if members already had MetLife, they will automatically be moved into Delta Dental, correct?

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- **Answer:** Yes, if members are currently enrolled in MetLife and they don't make any changes to their dental coverage, they will automatically be transferred to Delta Dental.

- **Local Gov:** Is the Premier PPO plan mostly an advantage to the employee as far as lower out of pocket costs, deductibles, co-pays, etc., vs the Standard PPO plan with not really any other advantage?
 - **Answer:** Here is information about the four plans offered: With the **Premier PPO:** higher monthly premium – lower out-of-pocket costs (deductible, copays and coinsurance). **Standard PPO:** Lower monthly premium than the Premier PPO – higher out-of-pocket costs. **Limited PPO:** Lower monthly premiums than the other PPOs – higher out-of-pocket costs than the other PPOs. **Local CDHP/HSA:** Lowest monthly premium – you pay your deductible first before the plan pays anything for most services. Then you pay coinsurance, not copays.
 - These are the differences with the costs for the plans; the coverage with the plans is the same. Members need to take into account a higher premium versus lower out of pocket at the doctor's office. They need to look at overall spend at the doctor's office and pharmacy costs to determine the right plan fit for the member.
 - Here is a link to the newsletter that explains the plan differences:
https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/lg_news_final_links.pdf
 - Here is a link to the health plan comparison chart:
https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/benefit_grid_2022_le_lg_final.pdf

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Communications

- **Materials and Communications Updates:**
 - **Annual Enrollment Continues!**
 - **State/Higher Education:** Friday, Oct. 1- ends this Friday, Oct. 15
 - **Local Ed/Local Gov:** Friday, Oct. 1-Friday, Oct. 29
 - **Retirees:** Friday, Oct. 1-Friday, Oct. 29
 - **ABC Weekly Conference Calls Continue:**
 - **State/Higher Ed:** Now through Oct. 19
 - **Local Ed/Local Gov:** Now through Nov. 2
 - **Regular monthly calls resume Nov. 9**
 - **Materials Updates:**
 - **Marketplace Notices:** This information was shared in last Friday's ABC email. The marketplace notices on the [ABC webpage](#) under **PPACA Documents and then by plan, titled Required Federal Marketplace Notice**, have been updated for fall 2021. Please use this updated version **for your new hires** going forward.
 - **State:** Notice is a PDF that you can download or share directly with your new hires.
 - **Higher education, local education and local government:** Notice is a Word document that your agency is able to edit as instructed.
 - **Note:** In late November, we will post revised marketplace notices for you to use in 2022.
 - **ABC Message Board:** BA continues to post **Annual Enrollment Weekly Announcements** at the top of the [ABC webpage](#). These messages include a daily tracker with number of documents being reviewed, tips to assist you with password resets, queries and other important reminders. **Please be sure to check this message board each week during Annual Enrollment.**
 - **Virtual Physical Therapy to Start Jan. 1, 2022:** Plan members who are over 18 will have access to virtual physical therapy beginning Jan.1, 2022 through these carrier programs:
 - **Cigna – RecoveryOne**
 - **BCBST – Hinge Health**
 - Virtual physical therapy allows health plan members to get customized physical therapy from the convenience of home with no referral needed.
 - No need to drive to an appointment or worry about more costly care – there is no cost to you!
 - A physical therapist and certified health coach customize your care plan and exercises which you access in the multimedia app.
 - BlueCross BlueShield and Cigna will join ABC calls in early 2022 to provide additional details and materials.
- **Annual Enrollment Employee Benefits Webinars Continue:** Our employee benefits webinars continue. Please continue to share the flyer we have included with the Friday ABC emails.

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- Employee informational webinars where 2022 benefits and changes are presented. Employees can ask questions about any of the benefits. Employees must register as directed. A link to webinar instructions is included.
 - **State/Higher Ed:**
 - Oct. 14: 3-4 p.m.
 - **Local Ed/Local Gov:**
 - Oct. 15: 2-3 p.m.
 - Oct. 20: 1-2 p.m.
 - Oct. 22: 3-4 p.m.

Operations

- **ABC Annual Enrollment Resource Tool:**
 - **Higher Ed/Local Ed:** Ebony Davidson, from our Education and Outreach team, joined us and showed ABCs the new Annual Enrollment Resource tool found by going to the ABC webpage - and in the message board area at the top you'll see a link under **ABC Training**.
 - [State and Higher Education](#)
 - [Local Education Agencies](#)
 - **State/Local Gov:** Zac Colona, from our Education and Outreach team, joined us and showed ABCs the new Annual Enrollment Resource tool found by going to the ABC webpage, and in the message board area at the top you'll see a link under **ABC Training**.
 - [State and Higher Education](#)
 - [Local Government Agencies](#)

HIGHER EDUCATION QUESTIONS

- **Higher Ed:** Some emails were erroneously advising employees they had saved but not submitted, is that correct? I have also been running the saved but not submitted report and nothing is showing up. The Service Center checked it for me and it is running correctly.
 - **Answer:** The saved but not submitted query is not as useful this year as it normally is due to the addition of the new broad network and the change to new medical codes. We had to default everyone to the new code for the plan they are in currently. ABCs won't be able to use that query to see the people who are saved but not submitted. BA will continue to send emails to those who have not submitted their elections. If you are seeing any further issues with employees receiving emails who should not be receiving them, let us know.
- **Higher Ed:** An employee who is just now enrolling in health benefits asked me today if he would receive any type of confirmation that his plan has been accepted before the Oct. 15th deadline?
 - **Answer:** If he enrolled in ESS and he has an email address in Edison, then he would receive an email that his enrollment was received. He can also go back into Edison and see the changes on the confirmation statement preview on the Benefits Statements page in the annual enrollment event.

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- **Higher Ed:** We are not supposed to use the "not submitted" query?
 - **Answer:** Correct. It won't be helpful this year, as it won't show the saved but not submitted category. As long as we have email addresses in Edison for those who save but do not submit, we will continue to email those employees.

- **Higher Ed:** In the event there is no email available in Edison and they don't go back in to submit their enrollment, the employees will have to appeal if they didn't get the email from BA?
 - **Answer:** Correct. The appeal deadline is Dec. 1, 2021, at 4:30 p.m. CT for any changes that an employee made or intended to make. Any appeals that come in after Dec. 1, 2021, will not be eligible or evaluated for an appeal.

- **Higher Ed:** For those in MetLife, we are getting new cards and it will say which Delta plan they are in? They (Delta Dental) do not refer to the out of network (Delta Premier) as out of network?
 - **Answer:** All members who enroll or are automatically transferred to the Delta Dental DPPO will get new ID cards. The ID cards will show "DPPO" on the front of the cards. Dentists in the Delta Premier network are "out-of-network" for the State's Group Insurance Program; however, the Delta Premier dentists have agreed with Delta to charge DPPO members less than patients who are not in the DPPO or Delta Premier plans.

- **Higher Ed:** Are there any issues with Optum flexible spending enrollment? I went on last Friday and get a separate user name and they has some issues. (UT/University of Memphis reported issues as well.) There is some confusion on if to use the regular log in link.
 - **Answer:** We are not aware of any issues. Higher education employees who want to enroll or reenroll for medical flexible spending accounts, limited purpose FSAs or dependent care FSAs need to use the link on the Optum portal: www.optumbank.com/Tennessee and look for the grey box that says, "**Click here to enroll in your flex benefits**". Employees do not log into their account to re-enroll. If you or your employees have any difficulty, please contact Nicole Jardine at nicole.jardine@optum.com. Please note that Nicole's email address is only for ABCs' use; do not share it with your employees.

- **Higher Ed:** Is there a report to see who has already enrolled?
 - **Answer:** Yes. Once logged into the Optum Employer Portal you should click on the reports tab on the left-hand side of the page, and then select the "Enrollment" report. You should then click on the link in the upper right-hand corner that indicates "+ New Report." When you are choosing the parameters to run the report, you should choose the 1/1/2022 – 12/31/2022 plan year, and run the report with an as of date of 1/1/2022. This will give you visibility into the members who have already chosen their FSA benefits for the 2022 plan year. Please remember that the FSA Enrollment and Election tool is open through midnight on Oct. 31, 2021. To get a final determination of 2022 enrollments, this report can be ran any time after Nov. 1, 2021 with the same instructions above.

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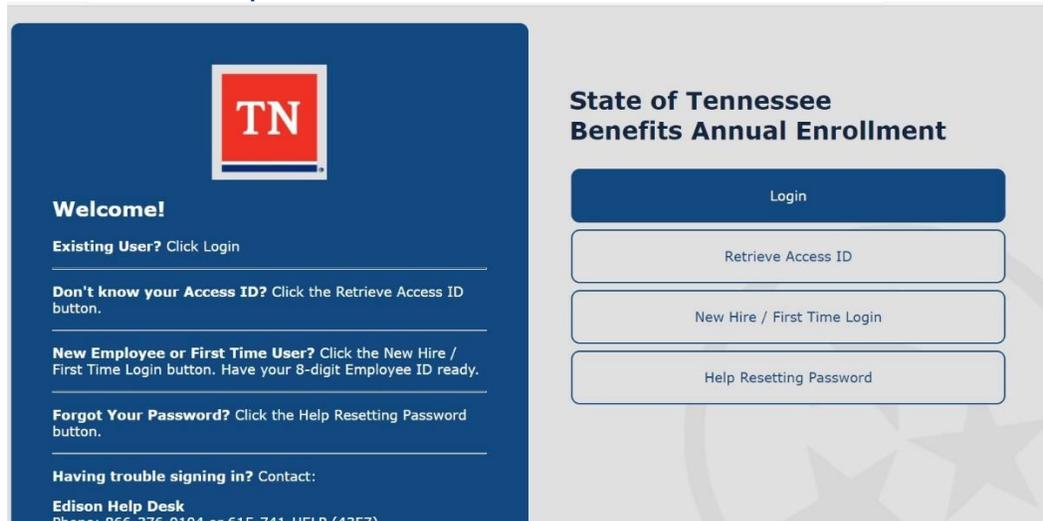
- **Higher Ed:** Where can we find instructions to create an employer portal account with Optum?
 - **Answer:** You should be set up already. If you are not sure of your username and password, send a message to Nicole Jardine at nicole.jardine@optum.com. Please note that Nicole's email address is only for ABCs' use; do not share it with your employees.
- **Higher Ed:** Is there a report to extract by Edison number from a date to a date for premiums and any adjustments?
 - **Answer:** We don't have a report with just benefit changes and premium information. If you are looking for Annual Enrollment changes, use the TN_BA219_AETP_INS_ELECTIONS query and run it with 1/1/2022, and it will show you the employees' elections before and now. The best place for premiums is the Premiums Due/Collections Applied Report, download it as an excel file and sort it.
- **Higher Ed:** I'm a new ABC. Who can help me with training for running reports?
 - **Answer:** Our BA trainer Darlene will reach out to you after this call.
- **Higher Ed:** And they start an appeal by sending an email to BA?
 - **Answer:** Yes, they can send an email to BA at benefits.administration@tn.gov. By sending an email to this email address, it creates a Zendesk ticket. You can also use benefits.info@tn.gov and it will be routed to the correct contact.
- **Higher Ed:** For voluntary term life insurance, are employees able to enroll in Edison or where do they enroll?
 - **Answer:** They have to go through Securian and enroll at <https://lifebenefits.com/stateoftn>. Voluntary term life insurance enrollment is not housed in Edison.
- **Higher Ed:** Does Securian send out an insurance certificate or does the employee have to request it?
 - **Answer:** We believe they do send a certificate but will check with Bob Smith and provide clarification in the notes.
- **Higher Ed:** Has there been a lot of enrollment activity i.e., password changes and such? Seems quiet this year.
 - **Answer:** We have had more changes at this point than we usually do. Our volume and enrollment is higher; however, the password reset call volume is similar to last year. We are continuing to work through password reset issues so people can get into the system timely.

LOCAL EDUCATION QUESTIONS

- **Local Ed:** Where can I find the Plan Code and Coverage Level Descriptions for 2022? I have an old one but some of them have changed.

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- **Answer:** On the ABC webpage under Edison Information, you will find Plan Code and Coverage Level Descriptions for 2021 and 2022. Here is a link to the webpage: <https://www.tn.gov/partnersforhealth/agency-benefits-coordinators.html>.
- **Local Ed:** Where can an employee get their access ID?
 - **Answer:** If they go to log in to Edison, there is a link on the page that takes them to retrieve their Access ID at edison.tn.gov. One of the buttons is called Retrieve Access ID (see below). If an employee has never logged in or if they have changed agencies since the last time they logged in, they will need their Edison employee ID and they will use the New Hire/First Time Login button. If they have trouble, they can call Edison help desk at 866.376.0104.



- **Local Ed:** Where can an employee get their Access IDs? Is an employee's Edison ID on their insurance card? If so, where can they find that?
 - **Answer:** An employee ID is on the insurance card. It is an eight-digit number with two zeros in front of the number. If they have already logged in, they won't need the employee's Edison ID. They would only need their first name, last name, date of birth and zip code. The only reason they would need the Edison ID in this instance if they have never logged in before or changed school systems. If that's the case, they will need to use the option for New Hire/First Time Login.
- **Local Ed:** I am getting a lot of conflicting questions regarding what places accept BlueCross BlueShield Network S. I have heard some places have already stopped accepting it and are already accepting BCBS Network P. Is there a deadline when facilities and/or doctor offices can decide what network to accept?
 - **Answer:** The directories that are published and on the carriers' websites are approved for the 2022 plan year. Providers can leave the network at any time and those directories are current as of the date they are published. Beyond that, if you have specific instances where you are getting conflicting information about a provider accepting one network or another, please send an email to benefits.inof@tn.gov and we will research for you. Employees can go online and search for providers to see what networks providers participate in.
 - **Additional information:** There are resources for comparing BCBS Network S and BCBS Network P. To see which hospitals are in which networks: SEE "All

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Networks Hospital List” - https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/directory_hospitals_2022.pdf

- Also, the annual enrollment tab on the BCBS website has links for Network S and Network P, https://www.bcbst.com/members/tn_state/annual-enrollment/
 - **Local Ed:** Are Annual Enrollment change queries available now?
 - **Answer:** Yes, here are the recommended queries:
TN_BA302_PERSON_AND_JOB – shows the Access ID for all active employees
TN_BA219_AETP_INS_ELECTIONS – shows changes made through all avenues
TN_BA265_OE_ELTPNS_ESS_AF_OCT20 – shows changes made through ESSTN_BA311_ESS_NEW_DEPENDENTS – shows new dependents with verification status
 - **Local Ed:** I tried running those queries (AE queries) today and nothing is showing? I've made several changes for employees but they aren't there?
 - **Answer:** We will have our trainer Darlene reach out to you.
 - **Local Ed:** I ran the queries last week and it appears all plan codes have changed. Is this going to stay like this?
 - **Answer:** Yes, all plan codes have changed for medical, and the new plan codes are posted on the [ABC webpage](#). On the ABC webpage under Edison Information, you will find Plan Code and Coverage Level Descriptions for 2021 and 2022. Here is a link to the plan codes document: https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/abc_codes_2022.pdf
 - **Local Ed:** It will just make me go through all employees to look for changes. Is there anything else I can run for changes?
 - **Answer:** If you are just looking for changes and not medical defaults to the new codes, the best query is TN_BA265_OE_ELTPNS_ESS_AF_OCT20 and it will show you all selections made through ESS.
 - **Local Ed:** TN_BA265_OE_ELTPNS_ESS_AF_OCT20, should this one be OCT21 vs OCT20?
 - **Answer:** The reason why it is Oct20 is because we redid the audit table in October 2020, so you will still run the Oct20 query and it will only pick up changes from Oct. 2020 forward.
-

STATE QUESTIONS

- **State:** When will the new marketplace letter be available?
 - **Answer:** The marketplace notices are updated and available now under PPACA on the ABC webpage. The current document will be used through the end of November, and then we will put up the one to be used through the end of the year into 2022. Here is a link to the document for state: https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/marketplace_st.pdf

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- **State:** I have an employee whose spouse's Annual Enrollment is not during our AE. They don't know which plan is going to be better. This employee wanted to exercise what was in the flyer/newsletter that the employee has one opportunity to revise their employee elections. In the Plan Document Section 2.07, Section E, employees have one opportunity to revise their selections provided they are submitted timely, etc. Can she use this section in the Plan Document if she finds out the spouse's plan is better to add him or vice versa? When we reached out to BA, we found it can only happen during a qualifying event.
 - **Answer:** The section in the Plan Document does cover the appeals process during AE. If this employee makes the change now to add or make a change or wants to later drop the state's coverage due to other coverage available through her spouse, the employee will need to submit an appeal in writing of what he/she would like to change and submit the appeal to BA before Dec. 1, 2021.
 - **Follow up question:** Is there any form that needs to be submitted? How does this work?
 - **Answer:** Employees can submit a letter explaining what led them to not being able to make their change before the close of annual enrollment. If he/she would like to add the spouse or dependents, supporting documentation should be included. A request to make changes to annual enrollment elections is really more of a request to revise an enrollment instead of an appeal.

- **State:** Several of my employees are receiving emails that they have saved but not submitted their enrollment choices. I have confirmed with Benefits Administration that their enrollment was complete. They continue to receive these emails each day. I was told there was a glitch. What is the status of this?
 - **Answer:** We are still working on that query. With the medical defaults changing to the new codes, we are having trouble identifying those who are saved but not submitted. Another round of emails were sent out and we had less problems. We continue to look at this query so we are sure to notify by email those who are saved but not submitted.

- **State:** I have an employee who started during Annual Enrollment. How does she make selections for both the rest of this year, and next year at the same time? She may want something different next year.
 - **Answer:** If she already made new hire coverage elections as this is the final week of Annual Enrollment, the employee can either go back into Edison and she can make 2022 elections as the OE event should be open, or you can submit a paper enrollment form and we will key the 2022 elections for her, or you can key a Benefit eForm.

- **State:** We have an employee who is a new hire and she went and completed the enrollment and came back in today to redo FSA for next year. When we went to do the agreement, it is not giving us the box to check. We called BA today and she was on hold for 12 min. Anything going on with this?
 - **Answer:** We are having some issues with the check box, and it is grayed out for some new hires. The best thing to do is to send an email to benefits.info@tn.gov and address it to Peggy Birthrong. We will see if Edison can open it up, and if not, we will accept a paper enrollment form.

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- **State:** I am having issues with pulling up the TN_BA311 ESS_NEW_Dependents query. Anyone else having issues with this query?
 - **Answer:** We did determine an issue with this query. This query was fixed in Edison Tuesday afternoon.
-

LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** I noticed the carrier presentation for BCBS and Cigna are available but they are combined into a single presentation. Do you have the Cigna presentation available separately?
 - **Answer:** You can find the Cigna health presentation for ABCs on the ABC webpage under Conference Call notes, Cigna health. Here is the direct link: https://www.tn.gov/content/dam/tn/partnersforhealth/documents/cigna_medical_presentation.pdf
- **Local Gov:** If an employee's children qualify and are enrolled in TennCare at a time after annual enrollment, can he drop them from this coverage at that time (outside of our annual enrollment)?
 - **Answer:** Yes, if the children are enrolled in TennCare, at a later date the employee can submit a cancel request form and proof of TennCare coverage. The employee would have 60 days from date of the TennCare enrollment to make the change.
- **Local Gov:** What query will show all changes made during AE including those made by the ABC using a Benefits eForm? The query I ran only showed the changes made in ESS by the employee.
 - **Answer:** You can use query TN_BA219_AETP_INS_ELECTIONS.
- **Local Gov:** Is there a separate card for pharmacy benefits?
 - **Answer:** Yes, there is a separate card for pharmacy benefits from CVS Caremark. For 2022, all members will get a new ID card. Members can also log in on the CVS Caremark portal and download one from portal or call CVS Caremark for a new card at 877.522.TNRX (8679). In addition, on the mobile app, members can download a digital pharmacy ID card to save in their online wallet.
- **Local Gov:** Can staff who are currently enrolled add a spouse or child during Annual Enrollment without having to provide supporting documentation?
 - **Answer:** Employees would not have to provide information that the dependents have lost coverage elsewhere during AE but we will still need dependent verification if the **dependent(s)** has not been enrolled previously.

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Communications

- **Materials and Communications Updates**
 - **Annual Enrollment Continues!**
 - **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
 - **Local Ed/Local Gov:** Friday, Oct. 1-Friday, Oct. 29
 - **Retirees:** Friday, Oct. 1-Friday, Oct. 29
 - **ABC Weekly Conference Calls Continue:**
 - **State/Higher Ed:** Now through Oct. 19
 - **Local Ed/Local Gov:** Now through Nov. 2
- **Vendor Annual Enrollment Communications:** As part of our communications plan and strategy working with our vendors, we have looked at new and different ways to reach employees to let them know about Annual Enrollment. These options include direct mail, email, and a vendor implementing text messages about network plan options. You may be hearing from members who received these text messages, and we can confirm they are approved messages from the vendor. However, due to questions we received from some ABCs and some members about these recent Annual Enrollment vendor text messages, we have asked this vendor to end the text messaging campaign to prevent confusion among our members.
 - Members and employees for whom we have email addresses in Edison will still receive direct Annual Enrollment emails from Benefits Administration. Members may also receive emails from some of our vendor partners. Employees/members always have the option to opt-out of these email communications.
- **Annual Enrollment Employee Benefits Webinars Continue:** Our employee benefits webinars continue. Please continue to share the flyer we have included with the Friday ABC emails.
 - Employee informational webinars where 2022 benefits and changes are presented. Employees can ask questions about any of the benefits presented.
 - Please continue to share the flyer sent with Friday ABC emails. Employees must register as directed. A link to webinar instructions is included.
 - **State/Higher Ed:**
 - Oct. 6: 1-2 p.m. (webinar event was held)
 - Oct. 11: 2-3 p.m.
 - Oct. 14: 3-4 p.m.
 - **Local Ed/Local Gov:**
 - Oct. 15: 2-3 p.m.
 - Oct. 20: 1-2 p.m.
 - Oct. 22: 3-4 p.m.
- **Insurance Carrier Webinar Recordings:** Recordings of the insurance carrier webinar sessions are posted on the [Partners YouTube page](#) under the **2021 Employee Webinars playlist**.

Benefits Presentations

- **Plan Document Presentation and Hospital List Demonstration:** Tresa Jones, BA's director of health plan policy, went over important information about plan rules and resources.
 - **You can find the All Networks Hospital List on the Carrier Information webpage:**

- <https://www.tn.gov/partnersforhealth/health-options/carrier-network.html>
- Direct All Networks Hospital List link:
https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/directory_hospitals_2022.pdf
 - To search the All Networks Hospital List type CTRL F.
- Please send feedback to BA if you see any errors, if you have questions or see anything that does not make sense in Plan Documents or new hospital list.

Operations

- **ABC Annual Enrollment Message Board:** Providing ABCs with weekly, even daily, updates on the Partners for Health ABC webpage throughout Annual Enrollment.
 - Why?
 - Will make Annual Enrollment easier for ABCs
 - A quick reference tool
 - How often?
 - Numeric updates – daily
 - Recommended queries, tips and reminders - weekly
- **Local Ed/Local Gov: Annual Enrollment Reminders**
 - **Benefit eForm:** ABCs can use Benefit eForm to assist their active employees during Annual Enrollment.
 - **Retiree Records:** Local education and local government agencies are not authorized to alter a retirement insurance record in Edison. All enrollments, changes and terminations to retiree coverage must be processed by the Benefits Administration Service Center.
- **Service Center Metrics/Customer Service Rating:**
 - **September 2021:**
 - Tickets via Email: 1,205
 - Tickets via Self-Service: 4,669
 - Tickets via Phone: 6,037
 - Tickets via Chat: 247
 - Total: 12,158
 - Satisfaction Score: 97.4%
 - **September 2020:**
 - Tickets via Email: 916
 - Tickets via Self-Service: 3,685
 - Tickets via Phone: 6,779
 - Tickets via Chat: 449
 - Total: 11,829
 - Satisfaction Score: 94.8%
 - We received more Zendesk tickets and less phone calls overall this year as compared to last September.
 - We take the satisfaction of our customers very seriously and ask that you please complete the survey after your Zendesk ticket is resolved. Our goal this year is to have more of you complete the surveys so that we can take your feedback to improve our services and your customer experience.
 - If you respond with a “Bad” rating to your ticket, we’ll reach out to you to see how we can improve. We ask that you rate the service you received from our service center, and not if you are unsatisfied with the policy.

- Our satisfaction rate for September was 97.4%.

HIGHER EDUCATION QUESTIONS

- **Higher Ed:** When it comes to 'counting' the 30 days, does the first day start on the day of employment or the first [full] day right after?
 - **Answer:** The counting of the 30 days begins on the hire date.
- **Higher Ed:** What is the purpose of the CDHP page confirmation when you check the box to select the coverage or not? The 'not' is questioning. It will not let you not enroll if you don't check the box. Also, there is some confusion at the end where it states the employee understands and agrees to the terms, and then they click save. It has created some confusion.
 - **Answer:** The box to select coverage shows up whether or not you enroll in coverage. Employees only have to select the box if they are enrolling in coverage. If they select the box, it does not automatically enroll them in the CDHP; however, for those who do enroll in that plan, we have to be sure that they have checked that box. The acknowledgment box is also for new hires and for Annual Enrollment, which may be the confusion as new hires do have to check the box even if not enrolling in the CDHP. We are revising the language at the top so that Annual Enrollment enrollees can submit their enrollments and won't have to check the box. Employees should not get errors if they do not check that box and do not enroll in the CDHP
- **Higher Ed Comment:** When you go to videos and YouTube, the higher education how to enroll video is further down, the name runs out and hard to find. Are there certain videos we could move up or some kind of priority to move up? For the ESS instructions, it doesn't take them to self-service first?
 - **Answer:** We have recently reviewed and discussed how to best organize the videos on the ParTners YouTube page. Following the call, on the [Home YouTube videos page](#), we did move the Edison navigation videos up closer to the top. The [Playlist header](#) is also a helpful location to direct members to certain videos for webinars or general information.
 - The ESS instructions include how to access the benefits enrollment on a mobile device and a computer, and include the link to the Edison homepage. From the Edison homepage, members will need to log in with their secure password information. Here is a link to the higher education ESS instructions: https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/ess_helelg_AE_21.pdf

LOCAL EDUCATION QUESTIONS

- **Local Ed:** In last Friday's ABC email, it states the dependents that are 18 may be permitted to continue coverage, due to potential changes. When will this be up for review?
 - **Answer:** We are evaluating options to take to the Insurance Committee during the October 21st meeting. We will communicate an update after that meeting.
- **Local Ed:** We have had a couple of retirees call us and say they received notice that they would not be receiving Delta Dental (ID) cards. I was under the impression everyone would be receiving a Delta Dental card?

- **Answer:** The Enrollment Change Application for 2022 is on the Forms webpage at <https://www.tn.gov/partnersforhealth/publications/forms.html> (under the Publications tab, then Forms).
- **Local Ed:** I assume the 2022 application to Continue Insurance at Retirement form is on the publications page as well?
 - **Answer:** Yes, links to the 2022 and 2021 versions are posted under [Publications](#) and then Forms.
- **Local Ed:** Our district offers dental, vision and disability privately, not through the state. Is there an Enrollment Change Application that doesn't have those options?
 - **Answer:** No, we just have one enrollment form that includes those options. If you are using a paper form you can cross out those options. If using ESS, and you do not offer those options, they will not show up in ESS for your employees.

STATE QUESTIONS

- **State:** If an employee is a new hire effective Oct. 4, 2021 and has completed the new employee enrollment but he/she does want to enroll in medical flex spending for 2022, will a new enrollment event open in Edison during annual enrollment or should a paper enrollment change or Benefit eForm be submitted?
 - **Answer:** The sooner the employee completes the new hire enrollment the better. After the employee has made new hire elections, let BA know about that so we can close the event manually. The next day an OE event will populate. You can reach out to us during Annual Enrollment via Zendesk.
- **State:** I have a question about Eliza Coffee Memorial listed in Florence, AL. It isn't there anymore, but a new hospital was built, is this hospital covered? We have a new employee that started yesterday and was asking.
 - **Answer:** We encourage members to contact the carriers about hospitals that are out of state. On the new hospital list, on the last page of the document, it mentions hospitals outside of Tennessee and includes the phone numbers for BlueCross and Cigna: https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/directory_hospitals_2022.pdf
 - BlueCross BlueShield of Tennessee — 800.558.6213
 - Cigna — 800.997.1617
 - If you need additional assistance, you can also send the question to benefits.info@tn.gov, and we are happy to assist.

LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** We would like to have access to a process for re-evaluation of our workforce demographics as an opportunity to qualify for one of the lower cost premium tiers. Our workforce has changed greatly since we joined the State's medical plan and we are currently in the highest cost tier.
 - **Answer:** Thank you for letting us know. We did complete a review last year with our actuarial consultants. We will look at doing that again in the future to see if there is something we need to change.

- **Local Gov:** Can you tell us the difference, aside from the premiums, between BCBS Network S and Network P?
 - **Answer:** BlueCross BlueShield Network P has some additional providers, and that is the reason for the higher cost. BlueCross BlueShield Network S is still a robust network, but Network P does have the additional providers.

- **Local Gov:** I'm not clear on the effective date of coverage. Our organization has a 30-day waiting period. If the employee is hired on the 2nd day of the month and it is a 31-day month, it is my understanding that the waiting period would be met in the month of August but when I called the Service Center and thought the coverage would start Sept. 1, they said it would be Oct. 1.
 - **Answer:** For this example, if the hire date is Aug. 2 with 31 days in the month, and there is a 30-day waiting period, the coverage would start Sept. 1. If you could send in a ticket with the employee's information in Edison, we will make sure the information is correct, and we will address this with the Service Center team.

- **Local Gov:** If an employee requested to drop/cancel coverage of dependent children as of Jan. 1, 2022 because the ex-spouse will start coverage, is this an Annual Enrollment change?
 - **Answer:** This could be handled one of two ways. The employee could log in during AE and remove the dependents so coverage would end Dec, 31 of this year, or if the employee does not have time during our AE but has proof that the children are being added to the other insurance, the employee can submit a cancel request form and proof of the new insurance within 60 days of obtaining the new coverage and we can process this as a special qualifying event.

- **Local Gov:** Are there any hospitals dropping out of the BCBS Network S as in-network covered hospitals?
 - **Answer:** Lauderdale Community Hospital in Ripley, Tennessee (Lauderdale County) will be out of network effective Nov. 1, 2021. Affected health plan members should receive a letter regarding this change. There was information early on about CHI Memorial leaving the network, but they will remain in BlueCross Network S. Another facility, TriStar NorthCrest Medical Center in Springfield (Robertson County), is not confirmed to be staying in the narrow networks for 2022. There are still discussions about the status of NorthCrest for 2022; however, we are showing them out of BlueCross Network S and Cigna LocalPlus after 2021.

- **Local Gov:** The broad networks for BCBST P and Cigna OAP are considered best for those who have dependents that are living outside of Tennessee or those who travel a lot. What happens if someone is outside of Tennessee and have a narrow network? Example: College student living in Georgia? For an employee who just travelled out of the area on vacation and needed hospital care?
 - **Answer:** For health plan members in the narrow networks who travel and/or live outside of Tennessee, they can contact the insurance carriers to find hospitals that participate in the national networks. BA's all-networks hospital list is for hospitals in Tennessee, but BCBS and Cigna can help find providers in other states. **For employees who enroll in Cigna LocalPlus**, it is important to remember that if there is an LP network in the area where a member is, then the member needs to use the LP network. If there is not an LP network, then the national network is accessible but employees will need to call Cigna to verify that there are no LP providers available and to request help with finding an OAP provider. Both BCBS and Cigna members have access to out-of-state providers through the carrier national networks,

whether they enroll in a narrow network or a broad network. Cigna members who live outside of Tennessee in an area without LocalPlus providers may find it more convenient to enroll in the broader Open Access Plus network, but they are not prohibited from electing LocalPlus.

- In an emergency, members should visit the hospital closest to where they are. All state-sponsored medical plans allow in-network benefits for emergency care whether a facility is in-network or out-of-network.
 - **BCBS** - The BlueCross BlueShield Global® Core program lets you see doctors nationwide and around the world. Visit bcbsglobalcore.com. **Call BCBS at 1.800.558.6213 for assistance.**
 - **CIGNA** - To get the most out of your Cigna plan, you should use in-network providers whenever possible. If you're away from home and in an area where there's no LocalPlus network, you can see any provider or facility. You should however look for providers that participate in the Away From Home Care feature by visiting www.mycigna.com. These providers are in-network. You'll save money by using them. **Call Cigna at 1.800.997.1617 for assistance.**
- **Local Gov:** As the ABC coordinator, can I handle the 2022 open enrollment change for employees?
 - **Answer:** Yes, you absolutely can. You can create a Benefit eForm for your employees to make changes for 2022 coverage.
 - **Local Gov:** So if an employee is changing from Network S to Network P, this is considered Premier PPO? Meaning if you choose BCBS Network P or Cigna Open Access, they should select Premier PPO, not Standard PPO? Just wanted to be clear.
 - **Answer:** No, the network options are separate from the plan options. So someone could have Network S or Network P and pick any of the plan designs, Premier PPO, Standard PPO, Limited PPO or the Local CDHP. It does not matter whether or not employees have BCBS or Cigna or whether or not they choose BlueCross Network S, BlueCross Network P or Cigna LP or Cigna OAP. Once the employee picks the carrier and network, he/she can pick any plan option they are eligible for.
 - **Local Gov:** If someone changes their mind on coverage during December, the change cannot be made unless there is a qualifying event? We won't encourage changes but if something comes up, can it be considered with Zendesk? We encourage people to review their elections in October to avoid mistakes.
 - **Answer:** If employees select something during AE and they made a mistake or change their mind, they can submit a request to make a change by Dec. 1. Changes requested after this date will not be allowed unless they have a qualifying event.
 - **Local Gov:** We only have medical insurance coverage with the state and ABCs enter changes for our employees. So, the enrollment mail, email and text message are confusing to our employees. We would really like to be able to opt out of the state's communication materials.
 - **Answer:** We can take this question offline with your agency; however, we have had similar question come up. It was determined that we could not suppress an agency from our communications. For mail, there are legal notices and other required communications sent to eligible employees and our members, and for some email communications, it is an additional way for members to receive important insurance-related information about network changes, any special enrollment

opportunities, or health savings account information. For email, employees can opt-out of receiving the communications.

- **Local Gov:** We are getting texts from BCBST about benefit enrollment. Is that from phone numbers being entered into Edison?
 - **Answer:** We did reference this earlier during the call that we asked our vendor, BCBST, to discontinue their text message campaign as some members and ABCs found the messages confusing.

Combined ABC Conference Call Notes
Higher Education, Local Education, State, Local Government
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Communications

○ **Communications Updates**

- Annual Enrollment starts this Friday, Oct. 1!
 - **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
 - **Local Ed/Local Gov:** Friday, Oct. 1-Friday, Oct. 29
 - **Retirees:** Friday, Oct. 1-Friday, Oct. 29
- **Annual Enrollment Weekly Calls Continue:**
 - **State/Higher Ed weekly ABC calls:** Now through Oct. 19
 - **Local Ed/Local Gov weekly ABC calls:** Now through Nov. 2

• **Materials:**

- **Annual Enrollment Materials:** These materials are posted and we want to make sure you are aware of them:
 - New [10 Things You Need to Know for Annual Enrollment video](#) found on the [Annual Enrollment webpage](#).
 - Edison Annual Enrollment log in videos are updated and posted on the [Videos webpage](#). These include how to reset your password, how to retrieve your access ID, how to log in for the first time and how to enroll using Edison.
 - ESS instructions are also posted on the [Enrollment Materials webpage](#).
- **New Network Hospital List!** A new network hospital list PDF has been posted on the [Carrier Information webpage](#) for your use and for members. This searchable list provides hospitals by county and shows which network they are in, so members can easily see which hospitals are in the narrow and broad networks. Again, the list is searchable and directions are included at the top of the document. The list will be updated as needed. The direct link was included in last week's Friday ABC email: https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/directory_hospitals_2022.pdf
- **2022 Summary of Benefits and Coverage:** The 2022 SBCs have been posted to the ParTNers for Health website. You can find the 2022 versions by going to the bottom of the ParTNers homepage and clicking on [Summary of Benefits](#).
- **Updated Medicare Part D Notice Posted:** An updated Medicare Part D notice has been posted to the ParTNers website under Publications, The Tennessee Plan (for retirees with Medicare), Part D Pharmacy Information. All plan options offered by the State Group Insurance Program are deemed creditable coverage. We include information about this notice in the Annual Enrollment newsletters, and you can find it here: https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/medicare_part_d_notice.pdf
- **Local Gov: Sept. 21 Call Notes Q&A Clarification**
 - **Local Gov:** Is there a waiting period with Delta Dental if a tooth has been worked on and when it can be worked on again?
 - **Answer:** For Delta Dental, restorative benefits are allowed once per surface in a 24-month period, regardless of the number or combinations of procedures requested or

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performed. The replacement, by the same dentist or dental office, of amalgam or composite restorations within 24 months is not allowed.

- The replacement, by the same dentist or dental office, of a stainless-steel crown within 24 month of the initial placement is not allowed.

- **Annual Enrollment Insurance Carrier Webinars:** We have posted recordings of the first four sessions on the ParTNeers YouTube page under **2021 Employee Webinars**.
 - **Recordings of the vision and dental webinar sessions will be posted early next week.**

- **Annual Enrollment Employee Benefits Webinars Continue:** We had great attendance for our first employee benefits webinars. Please continue to share the flyer we are including with the Friday ABC emails.
 - **Join an employee informational webinar** where 2022 benefits and changes are presented. Employees can ask questions about any of the benefits presented. You would only need to attend one session as the same information is presented during the webinar. Just click the link in the flyer to register. Instructions are included.
 - **State/Higher Ed:**
 - Oct. 1: 2-3 p.m. (session has been held)
 - Oct. 6: 1-2 p.m.
 - Oct. 11: 2-3 p.m.
 - Oct. 14: 3-4 p.m.
 - **Local Ed/Local Gov:**
 - Sept. 30: 10-11 a.m. (session has been held)
 - Oct. 4: 1-2 p.m.
 - Oct. 15: 2-3 p.m.
 - Oct. 20: 1-2 p.m.

Insurance Carrier/Vendor Presentations

- **Cigna Medical Networks/Cigna DHMO (Prepaid) Dental:** Sharon Tansil with Cigna went over the Cigna medical networks and information for enrolled health plan members, as well as the Cigna DHMO prepaid dental plan option available for eligible employees.

- **Optum Here4TN EAP/Behavioral Health:** Matt Cramer with Optum Health joined us and talked about the Here4TN employee assistance program and behavioral health benefits available for eligible employees and other benefits available with these services.

- **State/Higher Ed: Securian Financial Life Insurance:** Michael Kretman with Securian Financial went over the life insurance options available for our state and higher education employees.

HIGHER EDUCATION QUESTIONS

- **Higher Ed:** Can employees opt to go out of state for Cigna OAP if they are enrolled in Cigna LocalPlus? For example, if someone lives in Tennessee but wishes to use

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doctors/hospitals in Kentucky who are in OAP, would that still be considered in-network?

- **Answer:** Yes, if an employee elected Cigna LocalPlus and he/she is seeking a LocalPlus provider and we do not have any LP providers in Kentucky, the member would have access to OAP providers and those providers would be considered in-network. LP members who are unable to locate an LP provider can call Cigna for assistance at 800.997.1617.

- **Higher Ed:** Is there a minimum number of people for the (Jet Dental) mobile clinic required?
 - **Answer:** The minimum is 20 people for the Jet Dental clinic. Jet Dental can accommodate up to 60 in a day but 20 people is the minimum.

- **Higher Ed:** Do they need to schedule an appointment or do they walk in (for Jet Dental)?
 - **Answer:** Appointments in advance are needed. There are no penalties for no shows for appointments. Cigna is creating a flyer about this service that will be posted to the Cigna microsite very soon.

- **Higher Ed:** When does the Jet Dental start?
 - **Answer:** It is available now, and if you are interested, you can call the representative in your area and they will coordinate with Jet Dental. Representative information is found on the Vendor Contact List located on the [ABC webpage](#) under Conference Call Notes.

- **Higher Ed:** Can an employee decrease their voluntary term life coverage amount during annual enrollment and is this guaranteed?
 - **Answer:** Yes, they can decrease their coverage for voluntary term life and there are no health questions asked. However, if they want to **increase coverage**, there are health questions asked.

- **Higher Ed:** There aren't any questions for the additional AD&D?
 - **Answer:** No, voluntary AD&D is always guaranteed coverage. Employees can only make changes during Annual Enrollment or if they experience a qualified family change.

- **Higher Ed:** Members can only drop or decrease coverage in Annual Enrollment for voluntary term life?
 - **Answer:** Members can only request to make changes to voluntary term life coverage during Annual Enrollment or if they experience a family status change (qualifying event). Subscribers (employees) may be eligible to increase voluntary term life insurance by \$5,000 during Annual Enrollment with no health questions asked if the new coverage amount is still below the guaranteed issue limit. Subscribers will receive a mailer about this increase. Increase of amounts over \$5,000 will require proof of good health/questions asked.

- **Higher Ed:** Can you decrease (voluntary term life insurance) at any time?

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- **Answer:** Only during annual enrollment or if a person experiences a family status change.

 - **Higher Ed:** Last week it was mentioned offering Identity Protection Services. When and how will our employees be provided this information to enroll?
 - **Answer:** The state does not have a plan to offer stand-alone Identify Protection but our vendors offer these services for enrolled health plan members:
 - **CIGNA** – Identify Theft Program is offered to members enrolled in the Cigna DHMO (prepaid) dental plan (ABCs can contact your Cigna representative, found on the Vendor Contact List, for more information).
 - **BCBS:** For enrolled health plan members, Experian identity protection services help keep your personal information safe at no extra cost to you. A flyer is available at https://www.bcbst.com/docs/members/tn_state/ID-protection-flyer.pdf.
 - **EAP** - In addition to counseling support, your EAP provides a variety of consulting services, including financial, legal, childcare, eldercare and identity theft support. Go to Here4TN.com for more information.

 - **Higher Ed:** If an employee went direct pay and now going back to payroll deduction, do they have to meet the (Delta Dental) waiting period all over again?
 - **Answer:** If the employee means direct pay due to a private policy with Delta Dental, then yes, the employee would have to meet the applicable waiting periods. If the employee is currently enrolled in the state’s MetLife DPPO plan and has met the applicable waiting periods of continuous coverage while enrolled in that plan, then, no, the method of payment does not have an impact on the waiting periods.
-

LOCAL EDUCATION QUESTIONS

- **Local Ed:** Can Human Resources use the EAP counseling as a resource during the course of discipline?
 - **Answer:** Our Optum management consultant can assist with any kind of workplace issues and will follow your HR guidelines. The consultant can help with any kind of referrals whether they are mandatory or voluntary. It is best to call the service at 855.437.3486 and speak with someone about your situation.

 - **Local Ed:** If you are in the Cigna LocalPlus network, and you live in an area where the only hospital is a TriStar hospital, can you go to the emergency room and be in network? With COVID, it’s hard to get transferred to other hospitals right now unfortunately.
 - **Answer:** Emergency care at the closest ER is covered at the in-network level. Post stabilization inpatient care may be considered out of network. If a transfer to an in-network hospital is not possible, a unique care approval may be appropriate. Either BlueCross BlueShield or Cigna will work with the hospital on approving care as in network if a transfer is not available.
-

STATE: NO QUESTIONS THIS WEEK

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LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** I have an employee who is looking to switch to Cigna DHMO (prepaid). They are looking to get a crown. I'm looking at the handbook and the way I see it a porcelain crown in network is \$200 or \$190. Is this all she would pay for that with the Cigna DHMO dental insurance?
 - **Answer:** Cigna suggests that any time you need a service over \$250, the employee should contact Cigna for a treatment plan and appropriate codes because in some cases, because of the type of crown, or build up or lab fees, there could be additional costs over the \$250 copay.

- **Local Gov:** If someone is being treated for a long-term illness and is considering changing carriers, who pays the claims related to that illness, the new carrier or the old?
 - **Answer:** If someone switches carriers, any claims incurred after that new coverage is effective would be paid by the new carrier subject to medical necessity.

- **Local Gov:** Is Optum available to any employee that has the Tennessee health insurance?
 - **Answer:** For those enrolled in a state-sponsored medical plan, they have behavioral health benefits through Optum. EAP services are available for those enrolled in medical and for their dependents, even if the dependents are not enrolled in the health plan.

- **Local Gov:** Where is the list of new hospitals mentioned earlier in the presentation?
 - **Answer:** It is located on the Carrier Information webpage here:
https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/directory_hospitals_2022.pdf.

- **Local Gov:** Why aren't diabetic testing supplies covered by insurance?
 - **Answer:** Diabetic testing supplies are covered by insurance. Supplies listed on the formulary are covered at preferred brand pricing. Here is the link to the formulary: https://www.caremark.com/portal/asset/state_tn_formulary.pdf. The diabetes products can be found in the “Endocrine and Metabolic” section and the supplies can then be found in the “Supplies” subsection. If a supply is not listed on the formulary, members may need a prior authorization to receive coverage for that supply. They will also pay a higher out-of-pocket cost for a supply not listed on the formulary.

- **Local Gov:** If someone is transferring from a state employee to a local government employee and are enrolled in the HSA, are there any specific protocols that need to be followed?
 - **Answer:** State employees who transfer to a local government agency will be treated as new employees. Once they enroll in the CDHP/HSA with their new agency, they will receive a new enrollment kit and debit card for their new HSA with that employer. The member should contact Optum Financial customer service at 1-866-600-4984 to consolidate their funds from their former state HSA into their new local

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government HSA. The state (Benefits Administration) cannot combine these HSAs, as they are personal bank accounts. If the member does not consolidate the HSAs, they will become responsible for paying the monthly administrative fee under the HSA they had with their former employer.

- **Local Gov:** Do you think that a decision will be made about Springfield hospital continuing in the LocalPlus network for 2022 before the close of Annual Enrollment.?
 - **Answer:** It is unlikely that a decision will be made about participation in LocalPlus prior to Annual Enrollment. However, Cigna will keep the state apprised of any changes. We can only confirm that NorthCrest will be in the Cigna OAP network for 2022.
 - For 2022, the BA [All Networks Hospital List](#) currently shows NorthCrest as out-of-network for the narrow networks (BCBS Network S and Cigna LP) and in-network for the broad networks (BCBS Network P and Cigna OAP). Remember, subject to medical necessity, the plan allows in-network benefits if you visit an out-of-network hospital for emergency services.

- **Local Gov:** When will the provider presentations from today be available?
 - **Answer:** They are posted on the [ABC webpage](#) under **Conference Call Notes**.

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Higher Education, Local Education, State and Local Government
September 21, 2021

Communications

- **Materials and Communications Updates**
 - Just a reminder that Annual Enrollment starts Oct.1:
 - **State/Higher Education: Friday, Oct. 1-Friday, Oct. 15**
 - **Local Ed/Local Gov: Friday, Oct. 1-Friday, Oct. 29**
 - **Retirees: Friday, Oct. 1-Friday, Oct. 29**

- **2022 Pharmacy ID Card Update:** This information was updated in last week’s call notes but we want to make sure you are aware of it. The information that all members would not receive a pharmacy ID for 2022 coverage has since changed. **All members will receive new pharmacy ID cards for 2022 coverage.**

- **The Tennessee Plan 2022 Premium Letters:** Last week, letters went out to retirees enrolled in The Tennessee Plan, the supplemental medical insurance for retirees with Medicare, letting them know that the total base premium will not increase for 2022. As noted in the letters to these members, \$140.55 is the base premium before any applicable state support is applied to the portion of the premium that is due.

- **ABC Annual Enrollment PowerPoint Presentations:**
 - Just a reminder that the AE PowerPoint presentations you can use to present 2021 benefits to your employees are posted on the [ABC webpage](#) by plan.
 - At the bottom of the ABC webpage, you’ll see **State, Local Education and Local Government accordions**. Click on the accordions and you’ll see the presentations titled **Annual Enrollment PowerPoint Presentation** and **Annual Enrollment Presentation PDF**.
 - You can customize the PPT presentation for your department or agency but please do not change the premium or key benefit information. You can share the PDF version directly with members.

- **Weekly ABC Conference Call Schedule**
 - **State/Higher Ed weekly ABC calls:** Now through Oct. 19
 - **Local Ed/Local Gov weekly ABC calls:** Now through Nov. 2
 - Vendors will continue to present during all weekly calls in September, and you’ll have the opportunity to ask questions. Here are the remaining September vendor presentations and information about one presentation in October:
 - **Sept. 28**
 - Cigna Medical Networks
 - Cigna DHMO (Prepaid) Dental
 - Optum EAP/Behavioral Health
 - Securian Financial Life Insurance (**state/higher ed only**)
 - **Oct. 5**
 - Plan Document Updates

- **Annual Enrollment Insurance Carrier Webinars Continue:** We have had a great turnout for the first few insurance carrier webinars held last week. We posted recordings of the first two sessions on the ParTNers YouTube page (found by going to the [Videos link from the ParTNers homepage](#)) under **2021 Employee Webinars**, and we are working on posting the chat questions from these sessions as well.

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- Please continue to share the flyer ([found on the About Enrollment webpage](#)) for employees to register for the remaining insurance carrier webinars. A link to webinar instructions is included in the flyer.
- **Here is information about the remaining webinars:**
- **Join an employee insurance Carrier webinar** where you can hear directly about products offered and ask questions. All webinars take place at 3:30 p.m. CT.
 - Sept. 22: Life Insurance (state/higher ed only)
 - Sept. 23: Medical Networks
 - Sept. 29: Vision
 - Sept. 30: Dental
- **Upcoming Annual Enrollment Employee Benefits Webinars:** We have shared a flyer about upcoming employee benefits webinars that start at the end of September. Employees must register as directed. A link to webinar instructions is included. **Please share the information and flyer** ([found on the About Enrollment webpage](#)) **with your employees:**
 - **Join an employee informational webinar** where 2022 benefits and changes are presented. You can ask questions about any of the benefits presented. You would only need to attend one session as the same information is presented during the webinar. Just click the link in the flyer to register. Instructions are included.
 - **State/Higher Ed:**
 - Sept. 27: 10-11 a.m.
 - Oct. 1: 2-3 p.m.
 - Oct. 6: 1-2 p.m.
 - Oct. 11: 2-3 p.m.
 - Oct. 14: 3-4 p.m.
 - **Local Ed/Local Gov:**
 - Sept. 27: 1-2 p.m.
 - Sept. 30: 10-11 a.m.
 - Oct. 4: 1-2 p.m.
 - Oct. 15: 2-3 p.m.
 - Oct. 20: 1-2 p.m.

Insurance Carrier/Vendor Presentations

Note: links to all insurance carrier/vendor splash pages for your use and for members are found on the [ParTNers Customer Service webpage](#).

- **Davis Vision:** Larry Sheehan with Davis Vision went over the vision benefits available for enrolled vision plan members.
 - Visit the ParTNers vision webpage at <https://www.tn.gov/partnersforhealth/other-benefits/vision.html> for more information.
- **CVS Caremark Pharmacy:** Lee Shackelford with CVS Caremark went over pharmacy benefits and where members can go for more information.
 - Visit the ParTNers pharmacy webpage <https://www.tn.gov/partnersforhealth/health-options/pharmacy.html> for additional pharmacy information.

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- **Delta Dental DPPO:** David Pemberton with Delta Dental of Tennessee went over the benefits offered under the DPPO plan.
 - Visit <https://www.tn.gov/partnersforhealth/other-benefits/dental.html> for dental plan information. The Delta Dental splash page is found here: <https://tennessee.deltadental.com/stateoftn/>
 - ABCs can contact Delta Dental by email at stateoftn@deltadentaltn.com. This information is also found on the **Vendor Contact List**, found on the [ABC webpage](#) under **Conference Call Notes**.
- **State/Higher Ed: MetLife Disability:** Joe Carroll with MetLife went over the disability plan options available for state and higher education employees.
 - Visit the Partners for Health Disability webpage for disability information: <https://www.tn.gov/partnersforhealth/other-benefits/disability.html>

Operations

- **No topics this week**
-

HIGHER ED QUESTIONS

- **Higher Ed:** What was the ABC website (for Delta Dental)?
 - **Answer:** It is an email address for ABCs, and it is stateoftn@deltadentaltn.com. This information is also found on the Vendor Contact List.
 - **Here is the Delta Dental splash page for employees:** <https://tennessee.deltadental.com/stateoftn/>
 - **Higher Ed:** When does MetLife consider an open enrollment to increase participation without medical evidence?
 - **Answer:** An open enrollment is available the first time they are eligible to enroll as a new hire. Any other enrollment other than during this time, a Statement of Health form would have to be completed. For short-term disability, if an employee wants to change from a 30-day elimination period to a 14-day elimination period, the employee you would have to complete the SOH. If you enroll in the 30-day and switch to the 14-day and the employee is denied, he/she would keep the 30-day elimination period.
-

LOCAL ED QUESTIONS

- **Local Ed:** Is there an actual EOB to see what was billed and what Davis Vision paid?
 - Yes. EOBs for in-network claims are available online within the member portal. EOBs for out-of-network claims are mailed to the member along with the claim reimbursement payment. If a member has trouble accessing an EOB, they should call the Davis Vision Customer Service line. In-network providers are supplied with each member's exact vision plan benefits, including all services/features. Unlike medical plan claims, vision claim charges are often the exact amount per benefit item that is eligible/payable. Therefore, you may not often see differences in 'charged amount' and 'allowed amount'.

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- **Local Ed:** Why would the cost savings not be under the PPO plans as well, as they cost the most to have? Also, does CVS consult with drug companies to keep the drug prices competitive and affordable? There are some drugs that our employees take for either diabetes or HBP, and they seem to be going up in price, why is that?
 - **Answer:** The maintenance tier is available under the PPO plans as well. Those drug classes that are filled in a 90-day supply through either mail order or at a participating Retail-90 pharmacy have lower copayments for generic and preferred brand drugs or lower coinsurance on the Local CDHP. Unfortunately, drug companies alone control the price of drugs, and our pharmacy benefits manager does negotiate large discounts on behalf of our plan membership. Members with flat dollar copayments don't see this as much as those on the Local CDHP. Overall, though, when looking at the total cost of drugs, the insurance plans pay 94% of the total cost of our prescription drugs in aggregate, and members pay 6%. In addition, the rebates received from the drug manufacturers flow back to each of our individual plans - such as local education actives and local education retirees - as a form of revenue. This revenue helps to keep premiums lower than they otherwise would be.

 - **Local Ed:** We as a school system have been offered insurance pharmacy cards, and normally I do not pass those on, in fear of scams and such. But does using these hurt our insurance costs in any way?
 - **Answer:** These prescription discount cards, as they are known, do not hurt your insurance costs in any way. Just know that members can either choose to use them OR their pharmacy benefits through the State Group Insurance Program; they can't use both. A member may ask their pharmacy to run their prescription using each card in order to find out where their (member) cost would be lower and choose what works best for them. Just be aware that the costs paid by members if they use a drug discount card DO NOT apply to their State Group Insurance Program's deductibles and/or maximum out of pocket costs, as the member is not using their pharmacy benefits at all and this is flowing outside the insurance plan altogether.

 - **Local Ed:** If an employee searches for a Delta Dental dentist without logging in, there is a drop-down menu with several options. Can you confirm that employees need to select Delta Dental PPO for the state-sponsored Delta Dental product?
 - **Answer:** Yes, employees will need to select Delta Dental DPPO to get the largest discount. Also, here is the Delta Dental email for ABCs to order supplies (handbooks and toothbrushes): stateoftn@deltadentaltn.com
-

STATE QUESTIONS

- **State:** Can you go back to the slide with the ABC webpage for Delta Dental?
 - **Answer:** It is an email address for ABCs and it is stateoftn@deltadentaltn.com. This information is also found on the Vendor Contact List.
 - **Here is the Delta Dental splash page for employees:**
<https://tennessee.deltadental.com/stateoftn/>

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- **State:** Will the 12-month waiting period begin again for Delta Dental if you were a previous member for one year?
 - **Answer:** If you were previously enrolled in the MetLife DDPO for one full year, the DPPO plan continuous enrollment will satisfy the 12-month waiting period.

 - **State:** If you are currently in MetLife DPPO plan and it is changing to Delta Dental you still will have a waiting period next year if you are in the new plan?
 - **Answer:** Any months of continuous previous enrollment in MetLife will count toward the Delta Dental waiting periods. So, if employees were enrolled for a full year in the MetLife DPPO, they will have satisfied the Delta Dental 12-month waiting period. For new hires or those who change from the DHMO (prepaid) plan, or those who were not enrolled for 6-12 months with MetLife, waiting periods will apply.
-

LOCAL GOV QUESTIONS

- **Local Gov:** Will the Davis Vision virtual annual enrollment site be linked to the state's annual enrollment site?
 - **Answer:** We have not finalized this detail yet, but you can always find the Davis Vision splash page by going to the [ParTNers Customer Service webpage](#). All our vendor contact information is found on this page. Also, on the [ParTNers vision webpage](#), there are multiple links back to the Davis Vision splash page.

- **Local Gov:** Are the drug lists/pdfs searchable?
 - **Answer:** You can search the drug lists/PDFs by using Control F.

- **Local Gov:** How do members get the local CVS to sync the 90-day supply maintenance medications so all are filled at the same time? My members have not been successful making this happen.
 - **Answer:** There is a program called ScriptSync, and the local pharmacy should be able to set this up. You can contact Heather or Keith by submitting a Zendesk ticket to benefits.info@tn.gov, and they will contact the CVS Caremark account team to follow up.

- **Local Gov:** Will we need to give a copy of the new ID card to the pharmacy?
 - **Answer:** No, there are no changes.

- **Local Gov:** Is there a waiting period if a tooth has been worked on and when it can be worked on again? MetLife doesn't cover the same tooth within two years to be worked on.
 - **Answer:** It depends on the continuous enrolled months in the plan, and if the tooth was extracted while you were previously in the current DPPO plan.

- **Local Gov:** When will the Delta Dental handbook be available to order?
 - **Answer:** The handbook is going out to all members next week, and then it will be available for all people to order. A downloadable version is on the website as well. You can contact David Pemberton directly by emailing stateoftn@deltadentaltn.com.

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- **Local Gov:** Can ABC's change their own address in Edison? I tried but received a message that I was not allowed.
 - **Answer:** That is correct, you cannot change your own address in Edison. You can either have a back-up ABC make that change for you or you can send in a Corrections and Clarifications form and we can make that change.

- **Local Gov:** Is there a report or anything where we can see the utilization amounts for deductibles and out of pocket maximums spent by employees?
 - **Answer:** No, we do not have these types of reports for our medical or voluntary products. At this level of detail, it may be a protected health information, known as PHI, issue and may not be able to be shared. Employees can view their combined accumulators for medical, behavioral and pharmacy deductibles and out-of-pocket maximums by logging in to their secure BCBS or Cigna medical accounts. Members can also call the vendors to check on their utilization.

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Communications

• **Materials and Communications Updates**

- **2022 Annual Enrollment Dates:** Annual enrollment starts Oct.1:
 - **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
 - **Local Ed/Local Gov:** Friday, Oct. 1-Friday, Oct. 29
 - **Retirees:** Friday, Oct. 1-Friday, Oct. 29

- **Annual Enrollment Materials:**
 - ParTNers website has been updated and you/members will find Annual Enrollment details including benefits changes, premiums and comparison charts under Annual Enrollment and the subpages **About Enrollment, Enrollment Materials** and there is a separate page for retirees – **For Retirement**. Digital copies of the newsletter are posted on the Enrollment Materials webpage.
 - [Annual Enrollment header](#) – includes AE dates/links to the other AE webpages
 - [About Enrollment webpage](#) – includes important updates and enrollment/webinar information for active employees
 - [Enrollment Materials webpage](#) – includes newsletter links/comparison charts
 - [For Retirement](#) – AE information for all retirees
 - [Premiums](#) – all premiums for all plans are on this page
 - **Newsletters:** Most of our members should receive their newsletter in the mail this week. The address file was pulled July 27 with a coverage begin date of Dec. 1, 2021, to capture the future effective date changes for retirees. If you have new hires with coverage begin dates after this date, you can use or direct them to the digital versions we have posted on the website.
 - **Employee Self Service Instructions:** ESS instructions are posted on the website for AE.
 - Find links to the ESS instructions on the [About Enrollment webpage](#) in the Enroll or Make Changes in Edison section.
 - **2022 Forms:** 2022 forms are found under the **Publications** drop down by [clicking on Forms](#) in the top navigation.
 - **Other Mailings:** Letters mailed to those retiree or COBRA members who have dental only letting them know they are able to make a change during annual enrollment.
 - **Local Gov: Other Mailings:** Letters went out to local government retirees telling them their premium levels and that a newsletter would be send to them.

- **CHI Memorial and BlueCross Reach Agreement:** We relayed this information in an ABC email. BlueCross BlueShield and CHI Memorial have reached an agreement. All CHI Memorial facilities and providers, including Chattanooga Heart Institute at Memorial will remain in Network S. Members receiving services from a CHI Memorial facility or provider will continue to receive in-network benefits. Updated information is posted on the Carrier Information webpage. We sent a message in last week’s Friday email that you can share with your affected members.

- **2022 Pharmacy ID card update:** The information we relayed during this week’s ABC calls that all members would not receive a pharmacy ID for 2022 coverage has since

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changed. **All members will receive new pharmacy ID cards for 2022 coverage. We will go over this information during next week's ABC calls.**

- **Legal Guardian Letters:** An email was sent to ABCs last week about legal guardian letters that went out to approximately 300 employees who have children 18 or older who are on the plan under a legal guardianship order. The letter lets employees know that the dependent will be removed from coverage effective Jan. 1, 2022 unless BA receives documentation that they have been adopted or meets one of BA's other categories. Please contact BA if you or your employee have any questions.
- **ABC Annual Enrollment PowerPoint Presentations:**
 - The AE PowerPoint presentations you can use to present 2021 benefits to your employees have been posted on the [ABC webpage](#) by plan.
 - There will be two different versions, a PPT and a PDF. You can customize the PPT presentation for your department or agency but please do not change the premium or key benefit information. You can share the PDF version directly with members.
- **ABC Weekly Conference Call Schedule:**
 - **State/Higher Ed weekly ABC calls:** Now through Oct. 19
 - **Local Ed/Local Gov weekly ABC calls:** Now through Nov. 2
 - As relayed in a Friday email, vendors will present during all weekly calls in September, and you'll have the opportunity to ask questions. Here is the remaining September vendor presentation schedule and information about one presentation about plan documents in October:
 - **Sept. 21**
 - Davis Vision
 - CVS Caremark Pharmacy
 - Delta Dental DPPO
 - MetLife Disability (**state/higher ed only**)
 - **Sept. 28**
 - Cigna Networks
 - Cigna DHMO Dental
 - Optum EAP/Behavioral Health
 - Securian Financial (**state/higher ed only**)
 - **Oct. 5**
 - Plan Document Updates
- **AE Insurance Carrier Webinars Start Wednesday:** We have shared a flyer with you about upcoming AE employee insurance carrier webinars. Emails have also been sent to employees for whom we have email addresses in Edison. Employees must register as directed. A link to webinar instructions is included in the flyer. **Please share the information about the remaining webinars and flyer with your employees:**
 - **Join an employee insurance Carrier webinar** where you can hear directly about products offered and ask questions. All webinars take place at 3:30 p.m. CT.
 - Sept. 22: Life Insurance (state/higher ed only)
 - Sept. 23: Medical Networks
 - Sept. 29: Vision
 - Sept. 30: Dental

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- **AE Employee Benefits Webinars:** We have shared a flyer about upcoming employee benefits webinars that start at the end of September. Emails have also been sent to those for whom we have email addresses in Edison. Employees must register as directed. A link to webinar instructions is included. **Please share the information and flyer with your employees:**
 - **Join an employee informational webinar** where 2022 benefits and changes are presented. You can ask questions about any of the benefits presented. You would only need to attend one session as the same information is presented during the webinar. Just click the link in the flyer to register. Instructions are included.
 - **State/Higher Ed:**
 - Sept. 27: 10-11 a.m.
 - Oct. 1: 2-3 p.m.
 - Oct. 6: 1-2 p.m.
 - Oct. 11: 2-3 p.m.
 - Oct. 14: 3-4 p.m.
 - **Local Ed/Local Gov:**
 - Sept. 27: 1-2 p.m.
 - Sept. 30: 10-11 a.m.
 - Oct. 4: 1-2 p.m.
 - Oct. 15: 2-3 p.m.
 - Oct. 20: 1-2 p.m.
 - Oct. 22: 3-4 p.m.
- **Optum Financial Webinar – Sept. 17:** The next Optum webinar, **Why Consider Enrolling in an HSA** will be held Sept. 17 and is open to all interested employees who want to learn more about the HSA. Emails have been sent to all of those for whom we have an email address in Edison. No registration is required – employees just click the link in the email. **We shared the information on the screen in ABC emails (Sept. 3 and Sept. 10).**
 - **Why to consider enrolling in an HSA** will be held on Friday, Sept. 17, starting at 11 a.m. CT. The webinar will explain what a health savings account is, cost-saving benefits and investment opportunities. Save the date on your calendar and click the following link when it's time to join: <https://tn.webex.com/meet/brady.delander>.
- **State: 4Mind4Body Webinar – Sept. 16:** The next 4Mind4Body webinar was held Thursday, Sept. 16. We shared the information on the screen with employees and ABCs.
 - In partnership with Optum, the next **4Mind4Body webinar, Suicide Prevention**, was held **Thurs., Sept. 16 from 11:30 a.m. – 12:30 p.m. CT.**

As suicide is the 10th-leading cause of death in the United States, suicide prevention must be taken seriously. This training program uses lecture and group discussion to raise awareness of the risk factors of suicide and how to intervene if you believe someone is at risk.

Participants will:

- Raise awareness of suicide warning signs
- Identify resources for yourselves and others
- Identify facts and dispel myths about suicide

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- Increase awareness of how suicide impacts Lesbian, Gay, Bisexual, Transgender (LGBT) people
- Discuss how depression, anxiety as well as substance and alcohol misuse impact the risk of suicide
- Discuss how to use QPR model (Question, Persuade, Refer) to intervene with someone at risk for suicide

Click this link below to register:

<https://tn.webex.com/tn/onstage/g.php?MTID=e42029626a867191e1b2fbbc9fdb5de2>

Registration is required. Session will **not** be recorded. **If Internet Explorer does not work for you to register, you may need to try a different browser.**

Find information about upcoming 4Mind4Body sessions at tn.gov/PartnersForHealth under Other Benefits, then EAP here: <https://www.tn.gov/partnersforhealth/other-benefits/eap.html>

Questions? Email partners.wellness@tn.gov

Insurance Carrier/Vendor Presentations

- **BlueCross BlueShield Networks Presentation:** Amy Jordan with BlueCross BlueShield joined us and went over important information for you and your employees as we prepare for Annual Enrollment.
- **ActiveHealth Presentation:** Matt Berte with ActiveHealth joined us and gave an overview of the wellness program available to our enrolled health plan members.
- **State/Higher Ed: Optum Financial HSA and FSA Presentation:** Linnie Stelk with Optum Financial went over important HSA and FSA information for you and your employees.
 - ABCs can contact Nicole Jardine with our Optum FSA and HSA questions at nicole.jardine@optum.com or by phone at 763.361.6087.
- **Local Ed/Local Gov: Optum Financial HSA Presentation:** Linnie Stelk with Optum Financial went over health savings accounts and will be available to answer your questions.
 - ABCs can contact Nicole Jardine with our Optum HSA questions at nicole.jardine@optum.com or by phone at 763.361.6087.

Operations

- **Service Center Metrics/Customer Service Rating**
 - **August 2021:**
 - Tickets via Email: 1,379
 - Tickets via Self-Service: 4,600
 - Tickets via Phone: 4,731
 - Tickets via Chat: 228
 - Total: 10,938
 - Satisfaction Score: 95.8%

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- **August 2020:**
 - Tickets via Email: 1,027
 - Tickets via Self-Service: 4,406
 - Tickets via Phone: 4,579
 - Tickets via Chat: 213
 - Total: 10,225
 - Satisfaction Score: 97.3%
- We received about 700 more interactions overall this year as compared to last August.
- We take the satisfaction of our customers very seriously and ask that you please complete the survey after your Zendesk ticket is resolved. Our goal this year is to have more of you complete the surveys so that we can take your feedback to improve our services and your customer experience.
- If you respond with a “Bad” rating to your ticket, we’ll reach out to you to see how we can improve. We ask that you rate the service you received from our service center, and not if you are unsatisfied with the policy.
- Our satisfaction rate for August was 95.8%.

HIGHER ED QUESTIONS

- **Higher Ed:** Will the dependent care FSA limit be increased to \$10,500 for 2022 similar to 2021? Our employees were able to up their limit this year.
 - **Answer:** No, the increase was allowed for the 2021 plan year only.
- **Higher Ed:** How long does it take for employees to access the money in the HSA investment account?
 - **Answer:** It typically takes 1-2 business days for funds to be credited to the cash account and be ready for spending once a sell request is made from the investment balance.
- **Higher Ed:** There were some changes for dependent care FSA spending usage from 2020 into 2021. Will there be a similar 'carry over' into 2022?
 - **Answer:** There was a temporary grace period added to the dependent care FSA for plan years 2020 and 2021. This allows members the ability to incur DC claims from Jan. 1, 2020-Dec. 31, 2021 (24 months), and they must file them by Dec. 31, 2021. This also allows members the ability to incur DC claims from Jan. 1, 2021-Dec. 31, 2022 (24 months), and they must file them by Dec. 31, 2022. This temporary grace period was added to the dependent care FSA only and does not apply to the medical FSA or the limited purpose FSA.
- **Higher Ed:** I have an employee who is taking advantage of the Perk Spot discounts, including buying a car but she needed a pin number. The other discounts did not require a pin number but the car did? Could someone help us with this?
 - **Answer:** It was determined the PIN was for a different program and did not apply to the Perk Spot employee discount program.

LOCAL EDUCATION QUESTIONS

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- **Local Ed:** What website would you recommend that our employees go to so they can check Network S and Network P?
 - **Answer:** You can find information about the BlueCross network for plan members at bcbst.com/members/tn_state/. You can also find links to directories and hospital lists on the ParTNers website on the [Carrier Information webpage](#).

- **Local Ed:** Will Northcrest in Springfield remain in BlueCross BlueShield Network S for 2022 since HCA bought them?
 - **Answer:** Northcrest has been purchased by HCA. The hospital will stay in Network S through 2021. BlueCross is still in discussions for 2022. If Northcrest is a preferred hospital facility in your network, you can look at BlueCross Network P or Cigna OAP.
 - Here is the BlueCross BlueShield link: bcbst.com/members/tn_state/
 - Here is the Cigna link: cigna.com/stateoftn

- **Local Ed:** What is the difference in ActiveHealth and Omada?
 - **Answer:** Omada is the Cigna prediabetes/diabetes prevention program. We also have the Livongo program which is the BlueCross BlueShield prediabetes or diabetes prevention program. ActiveHealth is our wellness vendor who offers disease management for those already diagnosed with diabetes or other chronic conditions.

- **Local Ed:** Can your spouse have an health reimbursement account, or HRA, if you are in an HSA?
 - **Answer:** There are different types of HRAs. If you can reimburse your medical expenses through your spouse's HRA, you are not eligible to enroll in the CDHP/HSA. Please call Optum to discuss your specific situation. You can reach Nicole Jardine with Optum at 763.361.6087.

- **Local Ed:** Will everyone receive new dental and vision cards too, or is that just health?
 - **Answer:** For 2022, all members will receive new medical and behavioral health ID cards, as well as those enrolled in the Delta Dental DPPO plan. Any member who makes a dental or vision change or is newly enrolled in dental or vision will also receive an ID card.

- **Local Ed:** Employees will be happy to know about the addition of BCBS network P, however, I want to confirm that new hires from October through December will not have the opportunity to select Network P, correct?
 - **Answer:** That is correct. For the remainder for 2021, new hires will have the option to select BlueCross Network S, or either of the Cigna networks. BlueCross Network P will be an option for 2022 coverage. If the new hire has changes from 2021 to 2022, he/she has the option to fill out a paper form for changes for coverage starting Jan. 1, 2022. The elections for 2022 must be sent to BA within their 30-day new hire timeframe.

- **Local Ed:** Is the date getting fixed in the box that changes everything to 1900?

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- **Answer:** We use the 1900 date because often people would forget to change the date so actions such as terminations were happening at the wrong time. It is a reminder for you to put in the specific date you want the change to occur.
- **Local Ed:** If I have a new hire in October with coverage beginning Nov. 1, 2021, he/she can complete a paper enrollment form to choose Network P for Jan. 1, 2022. Can you provide the procedure in notes on this?
 - **Answer:** For new hires during October - December, the employee will need to either enter their new hire elections via Employee Self Service or the ABC can enter a Benefit eForm within the 30-day deadline. During this same 30-day enrollment period, the ABC should submit a paper enrollment form to BA for any election changes the employee would like to make for 2022.
- **Local Ed:** Will the ABCs have access to help employees make changes during Annual Enrollment like previous years?
 - **Answer:** Yes, employees can make their own changes in ESS or they can fill out a paper application and you can make the changes through a Benefit eForm in Edison.

STATE – NO QUESTIONS THIS WEEK

LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** Is there a report that we can run that will show who should get the legal guardian letter?
 - **Answer:** There isn't a query specific to this question but you can run the TN_BA354_MEDICAL_HOC_DEPS query for dependents. It will give you all enrolled employees and dependents in medical. It will show the relationship type of each dependent on medical coverage your agency. We are working on a long-term query solution.
- **Local Gov:** Does this form only need to be given to those with children who are not natural children, or any dependent regardless?
 - **Answer:** The letter was only sent to those who have dependents listed as legal guardian as a relationship type that are age 18 or over. This does not apply to natural children.
- **Local Gov:** Can you share training information for employees like the HSA with a lead time longer than 1 week? Two to three weeks would be helpful. from Denise to everyone: training for employees like HSA.
 - **Answer:** We did send the HSA webinar information two different times in ABC emails (Sept. 3 and Sept. 10) prior to the employee webinars, and emails are also sent directly to employees for whom we have email addresses in Edison about upcoming webinar opportunities.
- **Local Gov:** Is it correct that Local Government cannot participate in HSA?

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- **Answer:** No, members who are enrolled in the Local CDHP have the HSA available. It is the state's flexible benefits program that local government cannot participate in. You may choose to offer FSAs through your own vendor.
- **Local Gov:** Is the 2022 enrollment form available online yet? The current enrollment form doesn't show the dental change (Delta) or the addition of the BCBS network.
 - **Answer:** The new enrollment form is up as of yesterday, Sept. 13. It is on the forms page at <https://www.tn.gov/partnersforhealth/publications/forms.html> under Health, Dental, Vision, Disability.
- **Local Gov:** Will the HSA webinar be recorded?
 - **Answer:** Yes, the HSA webinar will be recorded and posted online. It will be available by the end of the day Friday, Sept. 17, here: <https://www.tn.gov/partnersforhealth/health-options/cdhp.html>
- **Local Gov:** Is BCBS considering any surcharges or reduced benefits for members who are unvaccinated from COVID?
 - **Answer:** We are reviewing benefits related to COVID and will alert ABCs and members of any changes. At this time we are not anticipating any changes.
- **Local Gov:** Can you send a link to this slide (BCBST COB) we can share with staff?
 - **Answer:** The entire presentation is posted on the [ABC webpage](#) under Conference Call Notes.
- **Local Gov:** When are COB notifications generally sent out?
 - **Answer:** Employees will receive the information first on their EOBs that it is time to update the information if they have not updated it. Then they will receive the first letter if BlueCross doesn't receive information within 30 days. If the information is still not updated, a second letter will be mailed after 30 additional days. If the information is not updated 90 days after the initial notice is sent, claims will stop processing until the information is received.
- **Local Gov:** Our agency is currently in Level 3 medical premiums. We have had lots of staffing changes since we joined the state's plan. Can we submit an updated census for review to get moved to a lower cost tier?
- **Similar question: Local Gov:** When will BA make a decision about reassessing premium tiers for participating employers? I have been told it is being discussed for over a year.
 - This was reviewed with our actuarial consultants for 2022 and it was determined that no changes were needed. BA will continue to re-evaluate to determine whether changes are needed.
- **Local Gov:** May BCBS and Cigna members participate in ActiveHealth?
 - **Answer:** All enrolled health plan members are eligible to participate in the ActiveHealth wellness program available to local government employees. Members can find more information on the [ParTNers website on the Wellness webpage](#). There is also a brief message in this year's Annual Enrollment newsletter.

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- **Local Gov:** For local gov't is there an option to pay to participate (in the ActiveHealth wellness program)?
 - **Answer:** The disease management program is available to all enrolled health plan members in any plan, and in any network (BlueCross or Cigna). Local government members also have access to the health assessment and online tools.

- **Local Gov:** How can we track employee activity (in the ActiveHealth wellness program)?
 - **Answer:** Due to low enrollment by local government employees in the disease management programs, we are unable to provide participation numbers at the individual agency level.

- **Local Gov:** If I have an active employee who is reaching his 65th birthday in October, will he still be eligible for active health insurance since he is eligible for Medicare?
 - **Answer:** Yes. Medicare status doesn't matter for members enrolled in our active health care plans. It only matters if he is retired.

- **Local Gov:** What query can I use to see who signed up for benefits during annual enrollment using ESS? Most of our employees go through us, but we have some that like to use the self-service option and forget to let us know for billing purposes.
 - **Answer:** You can use query TN_BA219_AETP_INS_ELECTIONS
You can also run the TN_BA_265_OE_ELECTION query.
Here is the query list: https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/abc_query_list.pdf

- **Local Gov:** Are employer contributions to the HSA for their employees also tax free?
 - **Answer:** Yes, all contributions are tax free for both the employee and employer.

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Communications

- **Materials and Communications Updates**
 - As a reminder, here are the Annual Enrollment dates for 2022 benefits:
 - **State/Higher Education: Friday, Oct. 1-Friday, Oct. 15**
 - **State/Higher Ed Retirees: Oct. 1-Friday, Oct. 29**
 - **Local Education/Local Government/Retirees: Friday, Oct. 1-Friday, Oct. 29**
 - **2022 Premium Charts and Benefits Updates:** 2022 health insurance premium charts were sent to ABCs on June 25. We will send voluntary products charts as soon as they are available.
 - **Annual Enrollment ABC Weekly Conference Call Schedule:**
 - **State/Higher Ed: Sept. 14 – Oct. 19**
 - **Local Ed/Local Gov: Sept. 14 – Nov. 2**
 - Reminder – will not have regular August ABC conference call
 - Regular monthly ABC conference calls resume Nov. 9
 - **Flu Flyer:** We sent this in a Friday ABC email, but we have posted an updated flu flyer on the ParTNers website, on the Pharmacy webpage under Flu and pneumococcal vaccine coverage. The flyer gives health plan members information on how to get these vaccines by using either their pharmacy or medical ID cards. Please share this updated version with your members. Here is a link to the flyer:
<https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/flu.pdf>
 - **2022 Minimum Value Certificate** posted on the ABC webpage under PPACA.
 - **State/Higher Ed: Updated Securian Life insurance flyers:** The following life insurance flyers have been updated and are posted on the ParTNers website under Publications, Life Insurance:
 - Securian Financial Lifestyle Benefits – Beneficiary Financial Coaching
 - Securian Financial Lifestyle Benefits – Legacy Planning Resources
 - Securian Financial Lifestyle Benefits – Travel Assistance
- **State: 4Mind4Body Webinar:** In partnership with ActiveHealth, the next **4Mind4Body** webinar, **A Safe and Savvy Summer**, will take place **Thursday, July 15 from 11:30 a.m. – 12:30 p.m. CT.**

School is out for the summer – but you can still learn about staying safe and healthy! Get tips on how to keep cool and hydrated in the blazing temps. You'll also learn ways to save your skin from biting bugs and scorching sun.

An email was sent to all state employees last week and employees can go to the ParTNers EAP to find the flyer to register:

<https://tn.webex.com/tn/onstage/g.php?MTID=e85707f91dfc78da960932f17d999bb88>

*Registration is required. Session will **not** be recorded. If Internet Explorer does not work to register, you may need to try a different browser.*

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Information about upcoming 4Mind4Body sessions is at [tn.gov/PartnersForHealth](https://www.tn.gov/PartnersForHealth) under Other Benefits, then EAP here: <https://www.tn.gov/partnersforhealth/other-benefits/eap.html>. Questions? Email partners.wellness@tn.gov

Benefits and Other Programs

- **Optum EAP and WorkLife Presentation:** Matt Cramer, senior client service manager with Optum, went over the Here4TN services available for employees and our members. Here is a link to the toolkit with flyers and emails for your use: <https://cx.optum.com/content/cex-consumer/here4tn-etoolkit/en.html>
- **Local Ed/Local Gov: OPEB PowerPoint and Survey:** Crissa Hubert, BA's director of analytics and accountability, joined us and went over the PowerPoint sent to primary ABCs and the upcoming survey that will be sent to agencies.
- **State Discount Program Presentation:** Prachi Patel with the state's Department of Human Resources joined us to talk about the state discount program that is available to health plan members. We've included additional information about this program with the Friday ABC email.
- **New Annual Enrollment Resource for ABCs:** Zac Colona, an education and outreach specialist, walked-through a draft of an Annual Enrollment new resource tool being created for ABCs.
 - **About the new AE resource for ABCs:** This will be an additional resource for ABCs to utilize during Annual Enrollment this year.
Why? At Benefits Administration, we are always striving to improve the way our members and ABCs receive important information from us. This resource/tool will give ABCs the option of seeing relevant Annual Enrollment information like deadlines, reminders, and plan changes in a different way if they should choose to do so. It is completely optional and not required.
Where? This tool will be located only in Edison's ELM.
When? This tool will become available starting at the beginning of September 2021 and be available for your use through the end of October 2021.
We are excited about this new resource and will announce its availability to you as soon as we have a concrete date.

Operations

- **Virtual Roadshow Dates:** We will facilitate virtual summer training sessions for three weeks starting on August 17 through September 2. We will conduct a session every Tuesday and repeat on Thursday. You will have the opportunity to choose the day and time that works best with your schedule. We will cover various topics each session. We will send topics and login instructions early August. Please mark the dates and times on your calendar.
 - **State/Higher Education sessions** will be at 9 a.m. on Tuesdays and 1 p.m. on Thursdays. **All times are CT.**
 - Aug. 17 – 9 a.m. Session One
 - Aug. 19 – 1 p.m.
 - Aug. 24 – 9 a.m. Session Two
 - Aug. 26 – 1 p.m.
 - Aug. 31 – 9 a.m. Session Three

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- Sept. 2 – 1 p.m.
- **Local Education/Local Government** sessions will be at 1 p.m. on Tuesdays and 9 a.m. on Thursdays. **All times are CT.**
 - Aug. 17 – 1 p.m. Session One
 - Aug. 19 – 9 a.m.
 - Aug. 24 – 1 p.m. Session Two
 - Aug. 26 – 9 a.m.
 - Aug. 31 – 1 p.m. Session Three
 - Sept. 2 – 9 a.m.

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

- As a reminder, the deadline for agencies wishing to add (if not already enrolled in the plan) dental and/or vision coverage is August 1.

You must notify us in writing that you wish to add dental and/or vision coverage. Your notification letter must:

- Be on your agency's letterhead.
- State your agency's intent to join the dental and/or vision plan.
- Be approved by your governing body, if appropriate, and signed by your agency director.
- Indicate your willingness to allow payroll deduction.

Please send your letter to me. My email address is on the screen.
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, 2022.

Dropping Dental or Vision: If your agency would like to drop dental and/or vision coverage for the 2022 calendar year, will need a written notice as well. Please send the written notice to nakeisha.n.myles@tn.gov by the August 1 in order to remove the option during annual enrollment.

- **Service Center Metrics/Customer Service Rating:**

- **June 2021:**
 - Tickets via Email: 1,232
 - Tickets via Self-Service: 4,529
 - Tickets via Phone: 4,280
 - Tickets via Chat: 190
 - Total: 10,231
- Satisfaction Score: 97.1%
- **June 2020:**
 - Tickets via Email: 1,357
 - Tickets via Self-Service: 5,729
 - Tickets via Phone: 5,237
 - Tickets via Chat: 241
 - Total: 12,564

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- Satisfaction Score: 98.0%
- We received about 2,300 less interactions overall this year as compared to last June.
- We take the satisfaction of our customers very seriously and ask that you please complete the survey after your Zendesk ticket is resolved. Our goal this year is to have more of you complete the surveys so that we can take your feedback to improve our services and your customer experience.
- If you respond with a “Bad” rating to your ticket, we’ll reach out to you to see how we can improve. We ask that you rate the service you received from our service center, and not if you are unsatisfied with the policy.
- Our satisfaction rate for June was 97.1%.

HIGHER EDUCATION QUESTIONS

- **Higher Ed:** For the Take Charge at Work program, there is a \$150 incentive?
 - **Answer:** Yes, for active state and higher education members enrolled in health insurance, those participants who complete the first Take Charge at Work engagement activity are eligible to receive \$150 as a part of the ActiveHealth wellness program. The \$150 is part of the total \$250 an eligible individual could receive in one year. ActiveHealth manages the entire incentive program, and some programs are outside of ActiveHealth that are part of the incentive program.
- **Higher Ed:** Have we been eligible for state employee discounts in the past? I thought we were not eligible for all of them?
 - **Answer:** Now that the state is partnered with PerkSpot, we can open the discount program up to more than just state employees and offer the discounts to state health plan members. Previously, some higher education institutions did have access but not all. Going forward, all state health plan members will have access.
- **Higher Ed:** This is separate from the State of Tennessee website login (for the discount program)?
 - **Answer:** There is a login housed on teamtn.gov but your employees will be able to sign up using the Formstack link we are sending on Friday.
- **Higher Ed:** Will employees use the Edison ID for access (to the discount program)?
 - **Answer:** No, we will just need their plan, agency and work email address.
- **Higher Ed:** How do they know that we are State of Tennessee employees?
 - **Answer:** They do not have to be state employees; the discount program is being opened up to higher education, local education and local government members.
- **Higher Ed:** When does it (discount program) go into effect?
 - **Answer:** It goes into effect right away. We will send the sign-in information with the Friday ABC email.
- **Higher Ed:** So TCAT employees can use this (discount program)?

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- **Answer:** Yes.
- **Higher Ed:** A lot of non-eligible employees have @tennessee.edu email addresses. How will this work?
 - **Answer:** We will send directly to ABCs, a Formstack link you can forward out to your health plan members along with a flyer about the program. Members will need to complete the questions in the link and give their work email address to have access to the available PerkSpot discounts.
- **Higher Ed:** Do employees have to be enrolled in benefits to access this program?
 - **Answer:** We ask that you share the Formstack link with your health plan members.
- **Higher Ed:** Is this (new ABC AE resource) only for Annual Enrollment or will you have a training for new ABCs?
 - **Answer:** For now, the new resource tool will just be for Annual Enrollment. We will start this off with AE this year and see how it may work out for other uses down the road.
- **Higher Ed:** I have completed HIPAA training and have a question. When I get a call from BA, I have to verify HIPAA to the BA person if you are calling about a member. Shouldn't you have to verify HIPAA from me as I'm giving information for an employee? For instance, I had information for someone about pharmacy from someone in Texas asking me to verify HIPAA – the call was coming to me. If you are calling from BA, should this go the other way and I ask you to verify HIPAA, or combined verification?
 - **Answer:** We have been instructed that when we are releasing information about an employee, we have to verify all of the items so we are on the same page about who we need information about. Companies that contact you may verify differently. If we are going to release any information about an employee on the plan, whether it is outgoing or incoming, we will verify HIPAA with you.
- **Higher Ed:** With the CDHP, once you have satisfied the out-of-pocket-maximum and the deductible, the employee is still responsible for 20% coinsurance, correct? Do they actually ever reach the point where the plan will pay 100%?
 - **Answer:** With the CDHP, it has a combined or a family deductible, so if family members are in the CDHP, they all contribute to the deductible and OOPM. They won't see a 100% plan benefit until the OOPM is met.
 - **Follow up question:** So, total, meaning all four have to meet it? They have to meet it together? If one person meets it all, then that one person hasn't met it?
 - **Answer:** To contrast with the PPOs, they have individual deductibles. With the CDHP, there is not an individual deductible – the full deductible and full out-of-pocket maximum (OOPM) has to be met before the plan pays 100%. With the CDHP, the deductible and OOPM can be met by one or more persons but has to be met in full before it is satisfied. For example, the CDHP in-network family deductible of \$3,000 and \$5,000 out-of-pocket maximum would have to be met before the family would see 100% coverage. With the Premier PPO, no single person enrolled under family coverage has to pay more than \$500 on the deductible

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or \$3,600 OOPM. With the CDHP, the family has to work together to meet the full deductible and OOPM amounts.

LOCAL EDUCATION QUESTIONS

- **Local Ed:** If a member is having an issue with an Optum claim and doesn't feel like they are getting the help they need when they call in for assistance, what is their next step?
 - **Answer:** The member can contact Optum at 1-855-437-3486. If the issue can't be resolved by phone, the member can write to:
Optum Appeals and Grievances
P O Box 30512
Salt Lake City, UT 84130-0512
Fax: 855-312-1470
Or, you can contact Matt Cramer directly at Matthew.cramer@optum.com
 - **Local Ed:** I am on vacation one of the weeks of the road show. Will there be an opportunity to complete the training at another time?
 - **Answer:** Each session will be available on the ABC webpage after we have completed the live sessions.
-

STATE QUESTIONS

- **State:** This particular flyer (about the discount program) we will receive in our notes, correct?
 - **Answer:** Yes, it is included with the Friday ABC email.
 - **State:** To confirm, this is an additional (Annual Enrollment) resource for ABCs only? Not for all employees?
 - **Answer:** For this year, this resource will just be for ABCs and housed within Edison/ELM. It will include information you can share with your employees.
 - **State:** I will be on vacation during the virtual training session 2. What do you need to do about missing the session?
 - **Answer:** Each session will be available on the ABC webpage after we have completed the live sessions.
-

LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** Does the plan for local government offer a flexible spending account?
 - **Answer:** No, we do not offer a flexible spending account program to local government members. We do offer the HSA, which is the health savings account for Local CDHP members.
- **Local Gov:** Is there a charge for critical response assistance if used for employees?

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- **Answer:** No. There is no additional charge. Critical Incident Response Services is included in the Employee Assistance Program and offered at no cost to all agencies.

- **Local Gov:** Do we need to respond if we do not participate in this process (OPEB)?
 - **Answer:** If you are with an agency that opted out of pre-65 retiree coverage, we already have this on record if you submitted your form. You will not receive the survey for the pre-65. However, every agency that participates with the Tennessee Consolidated Retirement System (TCRS) and has not passed Resolution 31 will receive a post-65 survey. If you do not contribute to post-65 retiree benefits, you just have to respond back that you do not contribute by responding to that part of the survey.

- **Local Gov:** So if an agency opted out, the agency would not receive a survey or need to participate in the survey?
 - **Answer:** There will not be a pre-65 portion of the survey if your agency has designated to opt-out, however, every agency that participates with the Tennessee Consolidated Retirement System and has not passed Resolution 31 will receive a post-65 survey. If you are not sure if your agency has opted in or completed the opt-in or opt-out form, we can check on that for you. **It is, however, too late to submit the opt-out/opt-in paperwork for this fiscal year (July 1, 2021 – June 30, 2022), as the deadline was March 31, 2021.**

- **Local Gov:** Would you mind repeating what response we need to put on the survey for the post-65?
 - **Answer:** You will only receive the survey(s) applicable to your agency. The request will be for your agency's contribution (specific dollar amount) to the premium by carrier/plan/coverage level. If you do not offer pre-65 retiree coverage or if your agency does not contribute to The Tennessee Plan, you will enter \$0. Every agency is different and some offer different contributions for pre-65 and post-65 coverage.

- **Local Gov:** Please clarify what is The Tennessee Plan retiree insurance?
 - **Answer:** The state offers The Tennessee Plan (Supplemental Medical Insurance for Retirees with Medicare) to eligible retired state employees, local education and local government employees and their eligible spouses and dependents through UMR. The Tennessee Plan can help cover some of the expenses that Medicare does not. This coverage helps fill most of the coverage gaps that Medicare creates. Retired local government participants hired by their qualifying employer prior to July 1, 2015, and enrolled in Medicare Part A who receive a monthly retirement allowance from TCRS based on their own service are eligible to apply for coverage.

- **Local Gov:** When we opted out, we opted out of contributing to The Tennessee Plan premiums?
 - **Answer:** No, you don't have to contribute to The Tennessee Plan as it is not something that the state directly provides. The state offers The Tennessee Plan to all eligible retirees. There is not an opt-out on the form for The Tennessee Plan. Unlike the pre-65 retiree health insurance plan, your response for the post-65 The Tennessee Plan would be that your agency does not contribute. You will get the

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survey every year because we do not have a form for the post-65 The Tennessee Plan.

To clarify; The Tennessee Plan is Supplemental Medical Insurance for Retirees who have Medicare. The eligibility criteria has nothing to do with if your agency has opted in or opted out of offering the state's pre-65 retiree health insurance coverage. Eligibility for The Tennessee Plan is based on the employee's hire date and if before July 1, 2015, the retiree must be enrolled in Medicare, and he/she must be receiving a monthly TCRS check based on their own service. State law does not provide any premium support, so the local government retiree could have 10-30 years of service and the retiree will pay the full premium for this coverage. If your agency has passed Resolution 31 to provide premium support at the same level the state provides for state, higher education and local education certified employees, you will not receive the post-65 survey because Benefits Administration already has that information. You would need to provide premium support information if your agency contributes towards the post-65 outside of Resolution 31.

- **Local Gov:** If we are local government but not technically state employees, can we still participate in this (discount) program?
 - **Answer:** Yes.

- **Local Gov:** Will the training sessions be recorded and made available on the website?
 - **Answer:** Each session will be available on the ABC webpage after we have completed the live sessions.

- **Local Gov:** The out-of-network, out-of-pocket maximum for all plan options will increase per the letter dated 6/25/21. When will we get those updated amounts?
 - **Answer:** We are working on the 2022 health plan comparison chart for Annual Enrollment and hope to have it finalized and sent to all ABCs soon.

Communications

- **Materials and Communications Updates**

2021 Annual Enrollment Dates for 2022 benefits:

- **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
 - State/Higher Ed Retirees: Friday, Oct. 1-Friday, Oct. 29
- **Local Ed/Local Gov/Retirees:** Friday, Oct. 1-Friday, Oct. 29

2022 Benefit Information

- **2022 Health Insurance Premium Information: Here is the aggregate average premium increase for your plan for 2022:**
 - Aggregate average active **state and higher education employees and retirees** – 3.2% premium increase.
 - Aggregate average **local education employees and local education retirees** – 2.5% premium increase.
 - Aggregate average **local government employees and local government retirees** – 4.4% premium increase.
- **Important! The health insurance premium increase percentage listed is in the aggregate; premium increases will vary slightly within the products and coverage tiers.** For example, the employee+spouse tier for all plan options will have slightly higher premium increases, and most of the other coverage tiers will have slightly lower premium increases than the aggregate percentage shown.
- **2022 Voluntary Benefits**
 - **Vision coverage:** No premium increases for either the Basic or Expanded plans.
 - **Dental coverage:**
 - The Dental Preferred Provider Organization (DPPO): Benefits Administration has been advised by the Central Procurement Office (CPO) that a protest to the contract award for Preferred Dental (DPPO) has been filed. Until the protest procedure has been resolved, BA is on hold with moving forward with a new contract as awarded. When BA is able to share information, we will provide it as appropriate.
 - The Dental Health Maintenance Organization (DHMO) (Prepaid Provider) carrier will continue to be Cigna in 2022. There will be no change in the Cigna premium rates for the DHMO insurance program for the next year.
 - **State/Higher Ed:** For **disability coverage**, MetLife will remain the carrier in 2022. Premium information will be announced as soon as we have more information.
- **2022 Carrier Networks:** BlueCross BlueShield and Cigna will remain the health insurance carriers.
 - **Carrier network change:** Next year in 2022, members will have four health insurance carrier network options. We will still offer the same three networks we do now but will add BlueCross BlueShield Network P as another broad network option. So, there will be two narrow networks, BlueCross Network S and Cigna LocalPlus, and two broad networks, Cigna Open Access Plus and

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BlueCross Network P. It will cost members more if they select one of the broad networks.

- **Broad network costs:** The additional monthly premium cost for the broad networks will change and go up slightly to \$65 or \$130 (up from \$40/\$80).
- **Annual Enrollment In-Person Benefits Fairs/Digital Vendor Webinars**
 - Last year due to COVID-19 and in the absence of on-site benefits fairs, BA held digital vendor webinars for those products in which members could make a choice during annual enrollment (e.g., medical carrier networks, dental, vision, disability, life, HSA/FSA's).
 - **Our question for ABCs;** do you plan on holding in-person Annual Enrollment benefits fairs this year and/or do you think we need to have digital vendor webinars again for those same vendor products previously mentioned? If you could let us know in the chat box today or send us your thoughts by email at benefits.info@tn.gov, we would greatly appreciate it. We are not sure if we will hold the digital vendor webinars prior to annual enrollment again this year and your input will help us understand if there is a need again this year.
- **Upcoming ABC Conference Call Schedule:** We wanted to let you know that we will hold our regular July ABC conference calls, but due to the upcoming virtual road show trainings, we will **not** have the regular August ABC conference calls. Then the weekly Annual Enrollment ABC conference calls will **start the second week of September on Sept. 14 (change from conference call)**. We have updated the ABC conference call schedule found on the [ABC webpage](#) and will send out the link to the updated schedule with this week's Friday ABC email.
- **State: 4Mind4Body Mental Health Matters Webinar - June 24:** Due to several requests, in partnership with Optum, we will again offer the Mental Health Matters webinar for state employees on Thursday, June 24. This one-hour presentation will again focus on the impact of COVID-19 and social unrest. Topics include mental health challenges, social isolation, grief and loss, self-care strategies, recognizing the signs and symptoms of underlying mental health conditions, what you can do for others, stress, anxiety and depression and available resources.
 - We will send webinar information to you this Friday that you can share directly with employees.
 - We will send out an email next week to state employees about the webinar. We are not able to record the webinar. If employees are not able to attend this repeat webinar, we can send them a copy of the slides after June 24.

HIPAA

- **State/Higher Ed: HIPAA Training Reminder:** All primary and back-up ABCs and directors who have access to Edison are required to take annual Health Insurance Portability and Accountability Act or HIPAA training. State and higher education departments/organizations have the month of June to complete the online HIPAA class.

Make sure you have the most current version of Internet Explorer. You must allow pop-ups. If you do not have the most current version or don't allow pop-ups, the training will NOT run.

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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%**, otherwise you will be required to take the quiz again.

You will take the ABC_HIPAA_2021 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_2021.

For further instructions on accessing HIPAA annual training – there is a video (found on the ParTNers YouTube channel):

<https://www.youtube.com/watch?v=WiBbK0r4TcU>

Benefits

- **COVID-19 Benefits Updates:**
 - **Telehealth and In-Network COVID-19 Medical Treatment Change**
 - The waiver of member cost share for medical telehealth visits and in-network COVID-19 medical treatment will end June 30, 2021.
 - Members will still have access to these benefits, but members will have to pay regular cost-sharing for carrier-sponsored telehealth visits and in-network COVID-19 medical treatment beginning July 1, 2021.
 - **COVID-19 Vaccines**
 - All Tennesseans age 12 and older are eligible to get COVID-19 vaccinations. **The State Group Insurance Program benefits continue to cover COVID-19 vaccines and their administration fees for members and covered dependents, at no cost.** Office visits may have applicable cost share if the visit is not billed as preventive.
 - For a vaccination appointment at a local health department, go to Vaccinate.tn.gov.
 - Members can also go to Vaccines.gov for vaccination locations in their community through the health department and private providers.

Find the latest State of Tennessee vaccine information at <https://covid19.tn.gov/>.
 - **COVID-19 Testing**
 - Members in all plans will still have all costs waived for all FDA-approved COVID-19 diagnostic (molecular and rapid) and antibody testing through July 19, 2021. This may be extended until the national public health emergency ends.
 - Members can talk with their health care providers about the need for a test.
 - **State health department test sites are found here:**
<https://covid19.tn.gov/testing-sites/>.
- **State/Higher Ed: FSA Transfer Announcement**
 - **FSA and L-FSA Carryover to Optum:**
The carryover of FSA and L-FSA balances from PayFlex to Optum Financial (Optum Bank) is complete. We had originally communicated this transfer would occur by July 1, 2021, so we are happy to make this announcement earlier than expected. The balance

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in members' FSAs or L-FSAs as of April 30, 2020, is the amount that was carried over to their respective Optum flex accounts.

If you had a medical FSA in 2020 but are now enrolled in the CDHP, you may not have a medical FSA but are allowed to have a limited purpose FSA (L-FSA). This is the type of account that your carryover funds were deposited into. Funds in a L-FSA may only be used for qualified vision or dental expenses, per IRS rules.

You can see your account detail, including the amount that was carried over, by logging into www.optumbank.com/Tennessee and looking at the "Recent Transactions" section of your account. Members should have access to their full FSA and L-FSA balances by using their Optum debit cards or by [filing a claim for reimbursement](#).

- **DC-FSA Transition to Optum:** Additionally, any remaining funds in member DC-FSA accounts have been transitioned to Optum. A 12-month grace period for unused DC-FSA funds was added to plan years ending in 2020 or 2021. All DC-FSA claims should be sent to Optum.

Operations

- **COBRA Subsidy Update:**

- We originally told you that you did not need to include retirees on your COBRA Subsidy lists if they were involuntarily terminated and chose to retire and enroll in retiree health insurance because they had other group health coverage. Based on further guidance from the IRS, we now believe these individuals may be eligible for the COBRA Subsidy. We need you to submit a list of your retirees who:
 - were involuntarily terminated (including retirees who terminated employment due to mandatory age limits and any retirees who retired to avoid dismissal for any reason); and
 - who would have been/will be eligible for COBRA on or after November 1, 2019; and
 - who are not eligible for other group health coverage or Medicare (excluding retiree coverage through the State Group Insurance Plan).
- We also need for you to send us any involuntary terminations that occurred between the time you submitted your spreadsheet and **Friday, May 21**.
- We have now updated the COBRA notice in Edison to include the COBRA Subsidy information, so anyone terminated after May 21 will receive the updated COBRA letter. If one of those individuals applies for the Subsidy, we will check to see if they were involuntarily terminated in Edison. If they weren't or if it's unclear, we will reach out to you for confirmation.
- **To Reply: Return a list of individuals you identify who meet the criteria above. Include your agency's name and your name and contact information (email and phone number) with your list. Submit the list in Zendesk.** Go to this page to submit a ticket: benefitssupport.tn.gov and click "Submit a request" in the upper right corner. Select "COBRA Subsidy Upload" in the "My issue concerns a/an:" box. Fill in the requested information and attach your document(s) before submitting.

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- **Deadline is as soon as possible so we can contact these individuals about the COBRA subsidy if they are eligible.**
- **If you do not identify anyone who meets the criteria, no action is required.** Also, you do not need to resend the names of any persons you included on a previous list or any retiree who is eligible for Medicare or not on state-sponsored retiree insurance.
- The guidance we are referring to is IRS Notice 2021-31 and can be found online at <https://www.irs.gov/pub/irs-drop/n-21-31.pdf>. The notice contains 86 Q&As and is 41 pages long. If you would like to learn more about a specific topic, try searching the document for a word or phrase. For example, right click on the first page of the document. That should give you a pop-up menu. From that menu, if you click on “Find” and type retiree in the search window, you’ll see Q&As that mention retirees.
- **Virtual Road Show Dates:** We announced earlier in the year that summer ABC training will be virtual again this year. We will hold virtual summer training sessions for three weeks starting on Aug. 17 through Sept. 2. We will conduct a session every Tuesday and repeat the same session on Thursday. You will have the opportunity to choose the day and time that works best with your schedule for each training session. We will cover various topics each session. We will send topics and login instructions via email early August. Please mark the dates and times on your calendar.

State/Higher Education sessions will be at 9 a.m. on Tuesdays and 1 p.m. on Thursdays. **All times are CT.**

- Aug. 17 – 9 a.m. Session One
- Au. 19 – 1 p.m.
- Aug. 24 – 9 a.m. Session Two
- Aug. 26 – 1 p.m.
- Aug. 31 – 9 a.m. Session Three
- Sep. 2 – 1 p.m.

Local Education/Local Government sessions will be at 1 p.m. on Tuesdays and 9 a.m. on Thursdays. **All times are CT.**

- Aug. 17 – 1 p.m. Session One
- Aug. 19 – 9 a.m.
- Aug. 24 – 1 p.m. Session Two
- Aug. 26 – 9 a.m.
- Aug. 31 – 1 p.m. Session Three
- Sept. 2 – 9 a.m.

- **Local Ed/Local Gov: Adding or Dropping Dental and Vision Plans:** As a reminder, the deadline for agencies wishing to add (if not already enrolled in the plan) dental and vision coverage has been extended to Aug. 1.

You must notify us in writing that you wish to add dental and/or vision coverage. Your notification letter to BA must:

- Be on your agency’s letterhead.

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- State your agency's intent to join the dental and/or vision plan.
- Be approved by your governing body, if appropriate, and signed by your agency director.
- Indicate your willingness to allow payroll deduction.

Please send your letter to 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 Jan. 1, 2022.

Dropping Dental or Vision: If your agency would like to drop dental and/or vision coverage for the 2022 calendar year, BA will need a written notice. Please send the written notice to nakeisha.n.myles@tn.gov by Aug. 1 in order to remove the option during annual enrollment.

- **Service Center Metrics/Customer Service Rating:**

- **May 2021**

- Tickets via Email: 1,327
- Tickets via Self-Service: 3,253
- Tickets via Phone: 3,463
- Tickets via Chat: 151
- Total: 8,194

- Satisfaction Score: 96.4%

- **May 2020**

- Tickets via Email: 949
- Tickets via Self-Service: 3,046
- Tickets via Phone: 3,642
- Tickets via Chat: 176
- Total: 7,813

- Satisfaction Score: 98.5%

- We received almost 400 more interactions overall this year as compared to last May with the biggest difference being more emails.
- We take the satisfaction of our customers very seriously and ask that you please complete the survey after your Zendesk ticket is resolved. Our goal this year is to have more of you complete the surveys so that we can take your feedback to improve our services and your customer experience.
- If you respond with a "Bad" rating to your ticket, we'll reach out to you to see how we can improve. We ask that you rate the service you received from our service center, and not if you are unsatisfied with the policy.
- Our satisfaction rate for May was 96.4%.

- **Reminder on Administrative Errors:** We want to provide a friendly reminder when submitting administrative error letters. Your explanation must be complete with details. You

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should include the nature of the error such as if the paperwork was misplaced, lost or if you were out of the office sick, for example. Simply stating you made an administrative error is not sufficient. We must know what the error was and the circumstances surrounding it.

HIGHER ED QUESTIONS

- **Higher Ed:** What exactly is the Virtual Road Show for ABCs?
 - **Answer:** The virtual roadshow is a series of trainings where we will cover various topics related to your duties as an ABC. Typically these trainings are held in person; however, Benefits Administration decided to host the training sessions virtually again this year.

LOCAL ED QUESTIONS

- **Local Ed:** When will we have specific changes for medical increases?
 - **Answer:** We are working on the premium charts for each plan and will send those to ABCs as soon as the information is finalized.
- **Local Ed:** Is the \$65/\$130 surcharge change for both Cigna Open Access Plus and BlueCross Network P?
 - **Answer:** Yes, it will be for both of the broad networks available in 2022.
- **Local Ed:** We had two involuntary terminations. Their coverage ends June 30, 2021, and they have been entered in Edison. Do you need their names added to the list?
 - **Answer:** Only if you keyed their termination prior to May 21. If you keyed it recently, employees will get the updated COBRA notice from the Edison system and they will not need the separate letter.
- **Local Ed:** Does BCBS Network P include TriStar HCA facilities?
 - **Answer:** TriStar HCA facilities are in BlueCross BlueShield Network P. BlueCross is working on a list of facilities in Network P that we can post to the ParTners website. We will let you know when that list is available.

STATE QUESTIONS

- **State:** One of our employees asked about the biometric screenings returning to being in person. Do you have any updates?
 - **Answer:** Yes, on-site biometric screenings are returning, and we are in the planning stages. They will be held August through late October, and we plan on holding them all over the state to include the Tennessee Tower in downtown Nashville. If you would like to hold an on-site screening, we would be happy to work with you on setting one up. You can email partners.wellness@tn.gov.

LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** This (COBRA subsidy) only applies to employees that were involuntarily terminated, correct? We don't need to send a list of people who voluntarily quit or retired voluntarily?
 - **Answer:** Correct. If you don't have anyone who was involuntary terminated, then you don't need to send in a list.

- **Local Gov:** What if you don't have anyone to add to the list (COBRA subsidy)?
 - **Answer:** Then you don't need to send anything in.

- **Local Gov:** Is the COBRA info due today?
 - **Answer:** Please send it in as soon as possible so we can get the information out to people and let them know they qualify for the subsidy.

- **Local Gov:** Can you clarify what "mandatory age limits" means in regards to retired employees?
 - **Answer:** We can use the state as an example. We have some classifications for some jobs that people can only work until a certain age. For example, law enforcement officer is one of those positions.

- **Local Gov:** Will a link be provided for the Virtual Road Show?
 - **Answer:** Yes, we will provide session topics and links for you to join in early August.

- **Local Gov:** For local government, 4.4% is the increase in medical for actives and retirees?
 - **Answer:** Yes, that is the aggregate average. There are differences in the tiers. We will provide more information in an upcoming ABC call.

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Communications and Materials Updates

- **Annual Enrollment Dates/2022 Benefits Information:** The 2021 Annual Enrollment dates for 2022 benefits have been announced:
 - **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
 - **Local Education/Local Government/Retirees:** Friday, Oct. 1-Friday, Oct. 29
 - **Premiums:** 2022 premiums will be relayed to ABCs as soon as this information is available.
 - **Local Ed/Local Gov:** The Insurance Committees will meet at the end of May and we hope to have 2022 premium information for you following this meeting.
 - **Vendor announcements:** The following vendors have been determined for 2022 going forward:
 - BlueCross BlueShield and Cigna will remain the health insurance carriers
 - Optum will remain the behavioral health/EAP vendor
 - **State/Higher Ed:** MetLife will remain the disability vendor
 - We will relay any additional benefits or vendor information for 2022 as it becomes available.
 - Members will find Annual Enrollment information posted on the ParTNeRS for Health website and mailed to them in early September 2021.
- **ABC Survey:** The annual ABC survey will be sent to primary ABCs this month. Although not required, we welcome your feedback. Last year, we had about 62% of ABCs respond, so we hope you will take the time to complete the survey again this year, and we do want to note it will include a few new questions this year.
 - Your responses to the 2020 survey have been extremely valuable in helping us understand areas where we could better meet your needs and improve our services to you and your members. Here are just a few examples of changes made due to feedback we received from the survey:
 - We updated all enrollment and leave forms to be fillable with signature blocks, based on feedback that the forms were difficult to fill out and sign electronically.
 - We recorded and posted New Employee Orientation videos for all agencies, based on feedback that some agencies don't have the staff to conduct training.
 - We updated the call options for our service center, based on feedback that there were too many options and it was too difficult to get to a person.
- **Pharmacy Flier and Email:** In last Friday's ABC email, we included a pharmacy flier about medication adherence for your reference and for you to share. This Thursday, May 13, BA sent out an email to our members for whom we have an email address in Edison with the same flier information.
- **Optum Bank HSA Member Webinar:** The next Optum Bank (Optum Financial) member webinar – **How to invest HSA funds over \$1,000 – will be held on May 28, starting at 11 a.m. CT.** The webinar is open to all interested HSA members. BA will send an email about the webinar to all members for whom we have an email address in Edison. We will also share information with you in this week's Friday ABC email that you can forward out to your members.

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- **State: 4Mind4Body Webinar:** The next 4Mind4Body webinar in the series, **Mental Health Matters**, will take place on May 26, from 11:30 a.m. – 12:30 p.m. CT. This one-hour presentation will focus on the impact of COVID-19 and social unrest. Topics include:

• Mental health challenges	• Recognizing signs and symptoms of underlying mental health conditions
• Social isolation	• What you can do for others
• Grief and loss	• Stress, anxiety and depression
• Self-care strategies	• Available resources

- BA will send an email and flier out to all state employees about the webinar and the upcoming webinars in the series. Employees must register for the upcoming sessions.

HIPAA

- **Local Ed: HIPAA Training Reminder:** All primary and back-up ABCs and directors who have access to Edison are required to take annual Health Insurance Portability and Accountability Act or HIPAA training. Local education agencies have the month of May to complete the online HIPAA class.

Make sure you have the most current version of Internet Explorer. You must allow pop-ups. If you do not have the most current version or don't allow pop-ups, the training will NOT run.

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** correct, otherwise you will be required to take the quiz again.

You will take the ABC_HIPAA_2021 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_2021.

For further instructions on accessing HIPAA annual training, please click the link below to watch a video (found on the ParTNeers YouTube channel).

<https://www.youtube.com/watch?v=WiBbK0r4TcU>

- **State/Higher Ed: HIPAA Training Reminder:** All state and higher education primary and back up ABCs and directors who have access to Edison are required to take annual Health Insurance Portability and Accountability Act or HIPAA training. You will have the month of **June** to complete the online HIPAA class. BA will include a reminder in an upcoming ABC email about this training.

Make sure you have the most current version of Internet Explorer. You must allow pop-ups. If you do not have the most current version or don't allow pop-ups, the training will NOT run.

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** correct, otherwise you will be required to take the quiz again.

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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_2021.

For further instructions on accessing HIPAA annual training, please click the link below to watch a video (found on the ParTNeers YouTube channel).

<https://www.youtube.com/watch?v=WiBbK0r4TcU>

Benefits

- **HSA Report Clarification:** Some reports you run from the Optum Bank (Optum Financial) portal may display a charge for each employee with an HSA. As long as members are actively enrolled in the CDHP/HSA or Local CDHP/HSA, the state pays the administrative fee to Optum for the management of each HSA. No agency is responsible for covering any of these administrative fees.

Once a member terminates employment or health insurance coverage altogether, then the member who still has an HSA with a balance in it at Optum will become responsible for paying the monthly administrative fee and it will be deducted automatically from the employee's HSA each month by Optum. Your agency will not pay this fee.

Operations

- **COBRA Subsidy Update:** As a reminder, if your agency has employees who qualify for the COBRA subsidy, **the deadline was May 11, 2021 to complete steps 2 and 3 as outlined in the memo sent to ABCs. Please be sure to submit your spreadsheet as an Excel file – not as a PDF.**

If you do **not** have any employees who were involuntarily termed (for any reason, including abolished position, reduction in force and/or termination for cause except for gross misconduct), had a reduction in hours or moved from full-time to part-time, please respond by email (Zendesk) to let BA know as we are tracking this information.

2021 COBRA SUBSIDY – INVOLUNTARY TERMINATIONS

DISCLAIMER: We have not seen any additional federal guidance on voluntary vs. involuntary termination. We will keep you updated if we do. In the interim, we are sharing previous guidance from the 2009 COBRA subsidy. It is unknown if additional guidance will reverse the previous guidance, but that is possible. The information presented is for information only and does not constitute legal advice.

What IS an involuntary termination?

- Determination needs to be made on a case-by-case basis, depending on the facts
- In general:
 - Treasury guidance from 2009 indicates that an involuntary termination means a severance from employment due to the independent exercise of the unilateral authority of the employer to terminate the employment

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- Termination is other than due to the employee's implicit or explicit request

Under 2009 Treasury Guidance, the following ARE involuntary termination examples:

- **termination for cause** (e.g., poor performance)
- **employer's failure to renew a contract** at the time the contract expires
- **retirement** (ONLY WHEN the facts and circumstances indicate that, absent retirement, the employer would have terminated the employee and the employee knew that he or she would be terminated)
- **resignation** (WHEN the facts and circumstances indicate that, absent resignation, the employer would have terminated the employee and the employee knew that he or she would be terminated OR WHEN resignation is due to a material change in the geographic location of employment for the employee)
- **termination elected by the employee in return for a severance package/a "buy-out"** (ONLY WHEN the employer indicates that after the offer period for the severance package, a certain number of remaining employees in the employee's group will be terminated)
- **lay-off period with a right of recall or a temporary furlough period** if it results in loss of health coverage
- **employer takes action to end an individual's employment** while the employee is absent from work due to illness or disability

What IS NOT an involuntary termination?

- **Gross misconduct**
- **An employee's absence from work where the employer takes no action to end employment**

Still Unknown:

Q: If someone takes early retirement due to the pandemic, is that an involuntary termination?

A: We are still waiting on Treasury guidance

REMINDERS

- **If a qualified beneficiary was eligible but did not elect COBRA, the employer must give them a second chance to elect it now**
- **If the qualified beneficiary elected COBRA but discontinued it, they can elect it again now**
- **Subsidy applies to all group health plans, including dental and vision**
- **COBRA subsidies are not available to those who are eligible to enroll in:**
 - another group health plan (other than excepted benefits coverage),
 - a flexible spending arrangement,
 - a qualified small employer health reimbursement arrangement, or
 - Medicare
- **The availability of the COBRA subsidy does not extend the availability of COBRA continuation coverage itself.** This means that an individual can apply the COBRA subsidy through September 30, 2021 to COBRA continuation coverage, but only if they would otherwise have been eligible for coverage. For example, if an individual's COBRA continuation coverage is set to expire in July 2021, the American Rescue Plan does not require it to be extended through the end of September simply because the subsidy is available.
- **An "assistance eligible individual," or AEI, is defined as a COBRA qualified beneficiary.** AEIs are those who lost health coverage due to involuntary termination of employment or reduction in hours.
- **Qualified beneficiaries who lose coverage are eligible:**

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- spouses and other dependents
- non-spouse domestic partners ARE NOT eligible
- **The COBRA subsidy period is from April 1, 2021 to September 30, 2021, but benefits end earlier if:**
 - the individual's maximum period of COBRA coverage (generally, 18 months) ends earlier than September 2021, or
 - the individual becomes eligible for coverage under another group health plan or Medicare
- **Not covered – not eligible for the COBRA subsidy:**
 - voluntary terminations of employment, and
 - other COBRA qualifying events (e.g., death or dependent aging out of coverage).
- **REDUCTION IN HOURS can be voluntary or involuntary as long as it results in loss of insurance, for example:**
 - change in business hour of operation
 - change from full-time to part-time status
 - temporary leave of absence
 - participation in a lawful labor strike

- **Local Gov: Security Audit:** Yesterday, Benefits Administration sent its annual security audit of Edison access to your agency. Primary ABCs received an email from BA with a spreadsheet containing a list of all ABCs for your agency, along with the level of access they have to Edison and for what Department IDs.
 - Please respond to that email at your earliest convenience with whether the information is correct, and an Edison Security Form if any changes are required.

- **Service Center Metrics/Customer Service Rating:**
 - **April 2021:**
 - Tickets via Email: 766
 - Tickets via Self-Service: 3,290
 - Tickets via Phone: 3,782
 - Tickets via Chat: 174
 - Total: 8,012
 - Satisfaction Score: 98.0%

 - **April 2020:**
 - Tickets via Email: 896
 - Tickets via Self-Service: 2,967
 - Tickets via Phone: 3,590
 - Tickets via Chat: 148
 - Total: 7,601
 - Satisfaction Score: 97.6%
 - We received about 400 more interactions overall this year as compared to last April.
 - As you know, we take the satisfaction of our customers very seriously and ask that you please complete the survey after your Zendesk ticket is resolved. Our goal this year is to

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have more of you complete the surveys so that we can take your feedback to improve our services and your customer experience.

- If you respond with a “Bad” rating to your ticket, we’ll reach out to you to see how we can improve. We ask that you rate the service you received from our service center, and not if you are unsatisfied with the policy.
- Our satisfaction rate for April was 98.0%.

HIGHER ED QUESTIONS

- **Higher Ed:** Is higher ed's LTD vendor going to be MetLife or remaining with Lincoln?
 - **Answer:** Right now, UT is staying with Lincoln.
 - **Follow up question:** Is each individual university supposed to work on the contract with Lincoln or is that BA?
 - **Answer:** The long-term disability or LTD contract for higher ed doesn't expire until December 2022. Lincoln will remain the vendor until at least that time. TBR Central Office will work on the contract.
- **Higher Ed:** So this is a list (eligible for COBRA subsidy) of those in this category whether they enrolled in COBRA or not?
 - **Answer:** Correct. They do not have to be enrolled in COBRA already to be eligible for this subsidy. Even if they did not enroll, if they are deemed eligible they can pick up COBRA coverage effective April 1, 2021.
- **Higher Ed:** It's the individual's responsibility to contact you all about COBRA?
 - **Answer:** There are a couple of different responsibilities. It is the employer's responsibility to provide the list of eligible employees. BA's responsibility is to notify all potential eligible individuals, and this will include a form the employee will need to complete. If an individual deems themselves eligible, then the employee will need to send the form back to BA.
- **Higher Ed:** How are agencies charged for COBRA?
 - **Answer:** We are still waiting on guidance on how the subsidy payments will work. We are assuming that it will be set up similarly to the 2009 subsidy and that all of the payments and charges went through BA. We do not expect payments to go through agencies. As soon as we get confirmation, we will let ABCs/agencies know.
- **Higher Ed:** Are these slides going to be emailed to participants?
 - **Answer:** We can include the slides this month; however, all of the information presented during the calls is included in the notes. Also, for your reference, the COBRA subsidy FAQ information was emailed out to all ABCs prior to today's call. We do ask that you do **not** share the slides directly with your employees; they are for ABC use only.
- **Higher Ed:** Does BA ordinarily absorb COBRA costs?
 - **Answer:** Typically, the former employee is responsible for all of the costs. BA will bill the employee for 102% of the costs, and this covers the premium and the administrative costs. Assistance Eligible Individuals will not be billed for COBRA

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premiums during the 2021 COBRA subsidy period. Billing will continue as usual for COBRA participants who are not eligible for the subsidy.

LOCAL ED QUESTIONS

- **Local Ed:** Our school system has received an email from a (recovery) company that wants a list of our employees with BlueCross BlueShield health and dental coverage. We are not going to provide this, but I need some guidance as to what I am supposed to do as an ABC for our school system. Should I email those employees directly who have BCBS health and dental and tell them about this class action suit, since the state is not handling this? I am not sure that I should be doing anything, other than the subsidy spreadsheet, which I have already turned in. Any help would be appreciated.
 - **Answer:** You are correct in your decision not to share employee information. There's also no need for you to forward the email to your employees. It is our understanding that some employees are receiving notifications from BCBS, indicating that they may be included in the settlement. If you receive inquiries from any of your employees or your school system's officials, we suggest that you advise them to review the information and FAQs on the settlement website (www.bcbssettlement.com), so that they can determine if they want to file a claim. Should they have additional questions about their rights in this matter, they may want to consult legal counsel. We believe that the information required for filing an online claim related to the lawsuit is very basic and does not necessitate the need for a recovery company. If you receive such an inquiry and decide to respond to it, we suggest that you indicate that your agency has access to the resources necessary to assist your company and your employees and that no additional assistance is required. As always, you can let us know if you have additional questions or if you need our help in responding to other inquires or specific questions from employees.

- **Local Ed:** Would an interim teacher, whose contract ends at the end of the school year and isn't offered employment next year, be eligible for the COBRA subsidy? An interim assignment is temporary employment with a predetermined end date.
 - **Answer:** Yes, if the employee had insurance during the contract period and lost that coverage when the contract ended, he/she is eligible, unless they are eligible or become eligible for any other group health plan or Medicare.

- **Local Ed:** What time frame of terminations (for COBRA subsidy) are we talking about? People that have been terminated from what date to what date?
 - **Answer:** It would be anyone whose coverage ended Nov. 1, 2019 and later, so going back 18 months. A person is still eligible for COBRA back to that time and going forward to Sept. 30, 2021.

- **Local Ed:** We have a teacher who was filling an interim position for a teacher on leave of absence. During this time we offered her health insurance. She took single health coverage. The teacher returned and we offered her another interim position. She refused. Is this considered involuntary termination?

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- **Answer:** We don't think that would be considered involuntary if she refused the position.
- **Local Ed:** Could you go back and clarify; you have a teacher in an interim position and offered this person health insurance, and then the teacher is not offered a position into the next year and only there for one year. The teacher is eligible for the subsidy?
 - **Answer:** If we apply the 2009 guidance, failure to renew the contract is considered an involuntary termination if the person was able and willing to keep working but lost insurance as a result of the termination and is not eligible for any other group health plan or Medicare. This is different from the scenario above where the employer essentially offered to renew or extend a contract and the employee wasn't willing.
- **Local Ed:** If an interim employee with a predetermined end date refused coverage, we would not turn in their name, correct?
 - **Answer:** This is still considered the end of a contract that didn't get renewed. For COBRA subsidy eligibility, it is an involuntary termination of employment. However, if the employee was offered regular insurance and did not take it, then the employee is not eligible because termination would not have resulted in loss of insurance. If the employee had regular insurance that ended when the job terminated and was offered COBRA but did not take COBRA, then the employee has another opportunity to elect COBRA now and can apply for the COBRA subsidy.
- **Local Ed:** What information is needed on the spreadsheet that we submit to you for those who may be eligible?
 - **Answer:** We sent out a spreadsheet template on April 27. If you need a copy, you can submit a Zendesk ticket, and we will send it to you.
- **Local Ed:** Can you explain the procedure for reporting employees that ARE eligible going forward?
 - **Answer:** BA is working to get the COBRA subsidy notice added to the COBRA notice generated by Edison, so we won't need to send a separate notice in addition to the one that is automatically sent out. However, we will need some time to set this up. We will have to send a separate notice during the time it takes to set this up in Edison, and we may need for ABCs to send another spreadsheet with additional eligible employees. We will notify you of the time period to use once the updated letter is in Edison.
- **Local Ed:** If we had an interim employee who had health insurance, the insurance terminated when their interim was over but the employee was rehired on a permanent basis and now has coverage again. Do we need to list them on the subsidy spreadsheet?
 - **Answer:** No, you don't need to list them in this situation because you know the employee has other health coverage.
- **Local Ed:** Can we get a copy of the current and updated (when available) COBRA subsidy notice?
 - **Answer:** Here are links to the model notices

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COBRA SUBSIDY RESOURCES

- The following resources are included for your information.
 - <https://www.dol.gov/agencies/ebsa/laws-and-regulations/laws/COBRA/premium-subsidy> - DOL link to FAQs and model notices for COBRA premium assistance under the American Rescue Plan Act of 2021
 - <https://www.irs.gov/pub/irs-drop/n-09-27.pdf> - Notice 2009-27 – IRS guidance issued on March 31, 2009 for the 2009 subsidy

- **Local Ed:** When we term the coverage for an interim who had elected coverage, we use the voluntary term code in Edison. Do we now need to start using the involuntary code?
 - **Answer:** Yes, please use the involuntary term code. If you missed anyone, please let us know they are eligible for the COBRA subsidy.

- **Local Ed:** So, we only send in names of interims who enrolled in regular coverage at interim hire date and lost coverage when interim position ended?
 - **Answer:** That is correct.

- **Local Ed:** We need to enter ALL employees that were terminated, retired, etc., since November 1, 2019, right? Then BA will determine if they are eligible for COBRA? Or, do we only send the ones that were termed involuntarily?
 - **Answer:** We need only the employees were termed involuntarily. We will assume that everyone you include on the list was an involuntary termination. We will check to see if they were enrolled in health, dental and vision, but we do need for you to tell us who was termed involuntarily.

- **Local Ed:** You made the reference to age 65, prompts me to ask. If someone is over 65 at termination, do they receive a COBRA offer?
 - **Answer:** Yes. If they are on active coverage, they will receive a COBRA offer. You can have COBRA and Medicare together if you were already enrolled in Medicare when you become eligible for COBRA. For example, if you're 67 years old and using a combination of Medicare coverage and coverage from your employer but then retire or scale down to part-time hours, you could be eligible for both COBRA and Medicare.
 - On the other hand, if you become eligible for Medicare while you're already enrolled in COBRA, your COBRA coverage will end. So, if you leave your job at age 64 and enroll in COBRA, your COBRA coverage will end when you turn 65 years old and enroll in Medicare.

- **Local Ed:** Could you tell me about the premium rates and when they will be available?
 - **Answer:** We have not announced the 2022 premiums. We will announce this information as soon as it is available. The Insurance Committee meeting is coming up at the end of May, and we expect to have more information following that meeting.

- **Local Ed:** I thought it was a 2.5% (premium) increase (for 2022)?
 - **Answer:** We should have 2022 premium information after the Insurance Committee meets in May, and we will send information out to you as soon as possible.

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- **Local Ed:** You can receive a COBRA offer no matter your age, but if you turn 65 while on COBRA, it goes away? This has nothing to do with the subsidy, correct? I just wondered about COBRA and an employee age 70 who quit and termed. Would she receive a COBRA offer? Employees can receive COBRA offers past age 65, but if they turn 65 while on COBRA, it goes away?
 - **Answer:** That is correct. If your employment is terminated resulting in a loss of insurance at any age, you can get a COBRA offer. Keeping COBRA depends on whether COBRA or Medicare comes first. You can have COBRA and Medicare together if you were already enrolled in Medicare when you become eligible for COBRA. For example, if you're 70 years old and using a combination of Medicare coverage and coverage from your employer but then retire or scale down to part-time hours, you could be eligible for both COBRA and Medicare.
 - On the other hand, if you leave your job at age 64 and enroll in COBRA, your COBRA coverage will end when you turn 65 years old and enroll in Medicare.

- **Local Ed:** If someone went on direct bill, and was unable to pay the premium, resulting in cancellation of coverage, would we put them on our list or will BA research these individuals?
 - **Answer:** They would not need to be included on the COBRA subsidy list. Failure to pay premiums is usually considered a voluntary act. Unless insurance coverage ended due to involuntary termination of employment or a reduction in hours, an employee in this scenario would not be eligible for the subsidy. If you have a specific person you would like for us to research please send into Zendesk.

- **Local Ed:** Should we receive an email stating BA received our COBRA subsidy excel file that was sent through Zendesk?
 - **Answer:** You will not get a response right away. We have more than 600 agencies to process, but when we do process your information, you will receive a response. If we don't receive anything from your agency, we will reach out to determine if you have any eligible employees.

- **Local Ed:** If we have already submitted our COBRA subsidy eligible list and need to add to it, do we just add to the original report and resubmit or send a separate list?
 - **Answer:** We prefer to have a separate list with the additional people to add to your initial list.

- **Local Ed:** Will we have to keep sending BA these (COBRA subsidy) reports?
 - **Answer:** No, but we may need to get one more report from you. We are working to update the COBRA notice in Edison, and it will include the information needed for employees. However, there will be some time until we can get the letter updated in the system. We will let you know when this occurs.

- **Local Ed:** I received an email from BA the other day stating that I had a lot of employees with incorrect addresses in Edison. But when I went into Edison, the addresses were correct. This takes up a lot of my time looking at each one of these, so just wondering, where does BA get this information for their incorrect addresses?

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- **Answer:** You were sent an email with the subject line: [Secure Email] NCOA Address Changes that had outdated address information within it. Please disregard the May 4 email. Benefits Administration will revise the address list. If you have employees who need address changes in Edison, you will be emailed a new, updated list by the end of May. We are sorry for any confusion the May 4 email may have caused you.

- **Local Ed:** So if someone retires and they are 65, they can't keep the health insurance through the COBRA subsidy since they are eligible for Medicare, but can they keep COBRA for 18 months?
 - **Answer:** If they already have Medicare when they retire, yes. A person can have COBRA and Medicare together if they were already enrolled in Medicare when they became eligible for COBRA. On the other hand, if a person retires and enrolls in COBRA before they enroll in Medicare, COBRA coverage will end when the person enrolls in Medicare. However, delaying Medicare in this situation is cautioned. Medicare does not look at COBRA as creditable coverage so if the employee terminated and took COBRA, and then he/she tried to enroll in Medicare at a later date, they may have to pay a penalty.

- **Local Ed:** Which query do we run for termination information? Will the Edison query give us the information we need to send in the future report?
 - **Answer:** Yes. The query will give you the information you need if they are keyed as involuntarily terminated. You can use this query, and it includes the coverage end date: **TN_BA432_EMPLS_TERMED_BY_DATE2**.

- **Local Ed:** If an employee has a spouse and/or children on their retiree insurance, and the employee turns 65 before her spouse and children, can the spouse and children still stay on the retiree insurance, or will they have to get other coverage somewhere else?
 - **Answer:** If they are already on the retiree insurance, the eligible dependents can remain on retiree coverage, but they must have already been enrolled.

- **Local Ed:** If an employee was sent a separation notice for failing to show up to work, will this be considered involuntary?
 - **Answer:** Upon further consideration and review of additional information, this is considered involuntary since there is no indication that termination was due to gross misconduct.

- **Local Ed:** For a terminated employee who lost coverage and moved on to another school system, we can't pull them up in Edison in order to have a correct address. I used the address we had on file while they were employed with us. So, some of the addresses on the report may be incorrect.
 - **Answer:** The billing team will research the address information to generate the letters; however, in this situation we most likely won't send this employee a letter if he/she is eligible for other coverage or has coverage with another agency.

- **Local Ed:** What date will we put into this query to get those that we need for the COBRA subsidy?

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- **Answer:** For local ed, use Oct. 1, 2019 to current date. This will pick up the individuals whose coverage ended Nov. 1, 2019 or later.

STATE QUESTIONS

- **State:** I submitted my COBRA Subsidy spreadsheet through the Zendesk, but did not receive the usual notification that it was received via email?
 - **Answer:** We are working through the spreadsheet submissions and have more than 600 agencies to process. You will receive a response when we process your submission. If we don't receive one from your agency, we will reach out to confirm.
- **State:** Is termination for job abandonment considered involuntary?
 - **Answer:** For purposes of the subsidy, this is considered involuntary since there is no indication that termination was due to gross misconduct.
- **State:** The subsidy report I have to submit today is for 11/01/2019-04/30/2021. Then it is my understanding that I would need to run additional reports for May through August 2021. Is this correct?
 - **Answer:** We hope to only have to request this information one more time. We are updating the COBRA notice in Edison to include the COBRA subsidy information. We will notify you when we need updated information in another spreadsheet, but hopefully it will just be one more request.
- **State:** Do you have a query number or numbers that will assist on this?
 - **Answer:** Here is the query and be sure to only include involuntary terms in your response: TN_BA432_EMPLS_TERMED_BY_DATE2.
- **State:** Is mandatory retirement an involuntary retirement?
 - **Answer:** Yes, UNLESS the retiree became eligible for any other group health plan or Medicare.
- **State:** What if someone is a resignation (No Rehire Agency) which started as a dismissal but due to appeals was changed to the Resignation No Rehire Agency?
 - **Answer:** We believe this would be considered involuntary since they knew they would be terminated if they did not resign.
- **State:** What about deceased employees whose family members have six months free coverage. Would they be eligible, and if yes, what effective date do we use?
 - **Answer:** The federal government does not consider death to be an involuntary termination for purposes of the COBRA subsidy.
- **State:** Do we need to include job abandonments today or later after we find out the situations?
 - **Answer:** Please put these employees on your list and in the bottom of the Zendesk ticket, include more information. We will follow-up with you. **UPDATE: Upon further review and considering additional information, terminations due to an employee being absent or having abandoned the job will be considered involuntary**

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for subsidy purpose when there is no indication of gross misconduct and provided the person hasn't become eligible for other insurance.

- **State:** How would we know if an employee opted to retire because of the pandemic?
 - **Answer:** You would not know unless he/she included this in the resignation. There is a possibility that someone may reach out directly. If this happens and you did not include the person on your list, we will reach out to determine if the employee is eligible.

- **State:** A lot of this information (termination) may not be available due to the nature of the situation, then what do we do?
 - **Answer:** Send anyone with an involuntary term on the list. If there are any situations that they might need to be included, you can explain the situation either in the Zendesk ticket or in the spreadsheet. If there is an employee you are not aware of and the employee contacts us, we will reach out to confirm.

- **State:** If your agency does not have anyone that meets the criteria for involuntary termination, do we still need to submit a query via Zendesk?
 - **Answer:** You would not have to submit a spreadsheet in Zendesk, but we do need the signed attestation that you do not have any eligible employees.

- **State:** If I have anyone on a 120-day appointment that expired, do I add them?
 - **Answer:** Most 120-day appointments are not eligible for insurance as an active employee unless they recently retired and are eligible under PPACA. If they were enrolled in active insurance, they may be eligible if they did not enroll in retirement insurance after separation. Please include those individuals.

- **State:** Where do I locate the attestation form?
 - **Answer:** We emailed out the attestation form on April 27. If you need a copy, you can submit a Zendesk ticket, and we will send it to you.

- **State:** This would only apply to employees that actually had worked and had insurance but not if they started and then ended on the same day due to failed hiring process procedures required?
 - **Answer:** Correct. Employees are only eligible if they lost insurance. If they never had coverage, then the COBRA subsidy would not apply.

- **State:** Resignation/retirement for an employee who instead of being dismissed was given opportunity to retire. So they are currently already enrolled in retiree insurance. It sounds like they would qualify, and if so, how do the premiums paid as retiree affect this?
 - **Answer:** First, please submit the employee on our spreadsheet, and we will send them the information. If the employee ends up applying for the COBRA subsidy, it is possible that they might not be eligible because they have other group coverage due to the retiree insurance. **UPDATE: Upon further review and considering additional information after the call, it's our understanding that persons who become eligible for any other group health plan or Medicare are not eligible for the subsidy even if the termination was involuntary.**

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- **State:** If an employee did not meet probation, do I add them?
 - **Answer:** If they were eligible and enrolled in coverage, then yes.

- **State:** What if someone was dismissed but is already working again, are they eligible?
 - **Answer:** Most likely the employee is not eligible if he/she is already working. If working for your agency then no, they are not eligible. If the employee is no longer working for your agency, then include them on your list. We are reviewing and removing the employees who have coverage under another agency before we send the letters out.

- **State:** Would you please give the Edison query that we can run (for the COBRA subsidy)?
 - **Answer:** TN_BA432_EMPLS_TERMED_BY_DATE2

- **State:** What about those who have a mandatory age retirement based on law? Would they be eligible for COBRA?
 - **Answer:** We are not sure about this and will reach out to you directly. The employee may not be eligible if they are picking up retiree coverage. Include them on the spreadsheet, but include a note in the spreadsheet or in the Zendesk ticket. UPDATE: Following further review and considering additional information, this would be an involuntary termination, and the retiree would be eligible for the COBRA subsidy, UNLESS he/she becomes eligible for retiree coverage.

- **State:** What about a reduction in hours like a temporary leave of absence or one of the others mentioned? How would it be known since the report deals with terminated employees?
 - **Answer:** If someone is on leave of absence from the state, he/she would not have lost coverage. The employee is still eligible as an active employee. If hours were reduced from full to part-time and if they met PPACA eligibility, then they are still eligible for active coverage. There are probably not many situations for active state employees in these situations.

- **State:** How would we know if a mandatory retirement was the reason for retirement?
 - **Answer:** This only applies to specific agencies as some employees are not allowed to work in a certain classification past a certain age. If you are not aware of any situations, then you probably don't have any employees in one of these classifications.

- **State:** When is the next ABC Training?
 - **Answer:** ABC training is now available on-demand in Edison. It is not a scheduled training as in the past. If you submit a Zendesk ticket, we can send you the information on how to access this training.

LOCAL GOV QUESTIONS

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- **Local Gov:** What is the deadline for local gov agencies to notify BA they want to drop out of the insurance plan for 2022?
 - **Answer:** Your agency will need to give BA a 60-day notice if you want to leave the State Group Insurance Program.

- **Local Gov:** Will we receive a confirmation that our spreadsheet was received?
 - **Answer:** Yes, we are receiving spreadsheets from more than 600 agencies, so there is a bit of a delay but we will respond when we process your information. We will also reach out if we do not receive a spreadsheet from your agency.

- **Local Gov:** What is the Zendesk email please?
 - **Answer:** The email address for Zendesk is benefits.info@tn.gov

- **Local Gov:** At what age are people eligible for Medicare?
 - **Answer:** Typically, people become eligible at age 65; however, they may become eligible earlier due to a disability.

- **Local Gov:** Will those termed employees on the list we submit receive something from BA regarding their COBRA subsidy eligibility?
 - **Answer:** Yes, we are asking for those spreadsheets from you so we can send employees the notification the federal government put together and let them know of their eligibility, what the requirements are and what they need to do.

- **Local Gov:** For COBRA subsidy, are we speaking of employees who have left employment since April 1? If not, what is the time frame?
 - **Answer:** This goes all the way back to employees who lost coverage Nov. 1, 2019. Here is a query you can run - `TN_BA432_EMPLS_TERMED_BY_DATE2` - to identify all involuntarily terminated employees as we won't know if they are eligible or not. You will have to send the list back so we can send the notification to the employees.

- **Local Gov:** We have no involuntary terminations and no reduction in hours for medical coverage employees. Can I just indicate no information on my spreadsheet or on a Zendesk report?
 - **Answer:** Yes, just let us know and send back the signed attestation. Please note, if they were enrolled in dental or vision, they will need to be sent on your spreadsheet since they may be eligible for a subsidy for those plans.

- **Local Gov:** What is the timeframe we are looking at for the termed employees who may receive COBRA Assistance?
 - **Answer:** Anyone whose coverage ended Nov. 1, 2019 and later, so going back 18 months. A person is still eligible for COBRA back to that time and going forward to Sept. 30, 2021.

- **Local Gov:** Will we be informed if employees elect to take COBRA?
 - **Answer:** We don't generally inform the agency since everything is handled by our office.

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- **Local Gov:** If an employee is eligible for Medicare but has dependents, are the dependents still eligible for the subsidy?
 - **Answer:** At this point, go ahead and include the employee on your spreadsheet.
UPDATE: Upon further review and considering additional information, the dependents are eligible for the subsidy if they lost insurance coverage as a result of the employee's involuntary termination or reduction in hours and they don't become eligible for Medicare or other insurance.
- **Local Gov:** What if the employee was full-time but left for other employment and then came back within a couple of weeks and is now part-time. Is he eligible for COBRA subsidy?
 - **Answer:** If the person left because they got another job, then they would not be eligible for the subsidy due to the termination because the termination was not involuntary. They wouldn't be eligible based on their part-time status unless they were eligible for insurance when they returned and then subsequently lost their insurance due to a reduction in hours.
- **Local Gov:** I have two employees who retired due to medical reason (they would have continued to work), but qualified for retiree insurance. Do I need to include them?
 - **Answer:** Our understanding that since they have retiree coverage it is considered other coverage and they would not be eligible.
- **Local Gov:** Can you please post the query/directions for Edison to run that report?
 - **Answer:** Here is the query you can run:
TN_BA432_EMPLS_TERMED_BY_DATE2. Use a date range of Oct. 1, 2019 to the current date to get a list of all terminated employees. You will need to determine who was terminated involuntarily and just send the list of those individuals to us.
- **Local Gov:** Since BA handles COBRA administration, will local government agencies have any involvement with the subsidies?
 - **Answer:** We have not received all of the guidance yet. At this point, we believe it will be handed similarly to 2009 COBRA subsidies and BA will be able to apply for the subsidies from the government. If this changes and agencies need to be involved, we will let you know.
- **Local Gov:** If employees did not take the COBRA coverage, is it even applicable?
 - **Answer:** Yes, even if employees did not take COBRA coverage from the beginning, if they were enrolled in active coverage and were involuntarily terminated or lost coverage due to a reduction in hours, they can pick it back up to April 1, 2021.
- **Local Gov:** I ran the wrong dates for my COBRA report. Do I now need to re-run a new report and submit it today?
 - **Answer:** I would recommend that you re-run and send any additional people that you deem eligible. You do not need to send the full list again.
- **Local Gov:** What if there is person on the security audit that we already submitted changes for from last year's audit?

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- **Answer:** If we didn't make those changes last year, we must have overlooked it, so please let us know again.
- **Local Gov:** If we have already submitted our spreadsheet do we still need to run the query?
 - **Answer:** No, you don't have to run the query if you have already submitted your spreadsheet. The query helps you see everyone terminated. You don't have to resubmit.
- **Local Gov:** What should I do if I did not receive the security audit email yesterday?
 - **Answer:** Send an email to benefits.administration@tn.gov with "Security Audit" in the subject line and let us know.
- **Local Gov:** If we don't have any employees who left involuntarily we just need to respond to the email and send the signed attestation?
 - **Answer:** Correct. You will need to respond to the email we sent out on April 27.
NOTE: As a reminder, you also need to consider people who lost insurance due to a reduction in hours.
- **Local Gov:** Please confirm the date to run the query?
 - **Answer:** Coverage started Nov. 1, 2019 or later, so separations Oct. 1, 2019 or later.
- **Local Gov:** On COBRA, I have an employee who was terminated as an employee October 23, 2019 but coverage would have ended at a later date. Do I include them?
 - **Answer:** Yes. If coverage ended Nov. 1, 2019 or later and if involuntarily terminated.
- **Local Gov:** There is no place on the COBRA attestation form to indicate we are not submitting a spreadsheet because we didn't have anyone that qualifies for the subsidy. Do we just write in that comment?
 - **Answer:** Yes, you can write in a comment in the Zendesk ticket or include this on the spreadsheet, either way is fine.
- **Local Gov:** What was the email to request the BA Security Audit email?
 - **Answer:** Email benefits.administration@tn.gov
- **Local Gov:** I am looking for the (attestation) form and can't find it?
 - **Answer:** It was sent out in an April 27 email to all ABCs. You can submit a Zendesk ticket and we will send it to you.
- **Local Gov:** Just so I am sure, the spreadsheet for the COBRA subsidy is to include any employees who were involuntarily termed on 10/1/2019 or after, correct?
 - **Answer:** Correct. NOTE: As a reminder, you also need to consider people who lost insurance due to a reduction in hours.
- **Local Gov:** We, like everyone else, are planning our budgets. What will be the latest day we should know about premium increases?

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- **Answer:** We hope to have premium information available for you after the Insurance Committee meets at the end of May. We will relay information to ABCs as soon as we have more information to share.

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Communications and Materials

- **Materials and Communications Updates**
 - **Introduction of Shelley Walker, director of communication and marketing:** Last month, Debby Koch informed you that she would retire. We now have a new Director of Communication and Marketing, Shelley Walker. Shelley joins us from the Tennessee Department of Health, where she had served since 2006.
 - **Materials Updates:**
 - **The Tennessee Plan application** was updated about a month ago, and the revised version is found on the ParTNeers website by clicking on the [Publications](#) drop down, going to [Forms](#), then Retirement and clicking on [Application for The Tennessee Plan](#). Please use this version going forward.
 - **Vendor Contact List** was updated last week and sent out with the Friday April 9 ABC email. You can find it by going to the [ABC webpage](#) and clicking on **Conference Call Notes, [Vendor Contact List](#)**.
 - **ActiveHealth Member Webinars:** ActiveHealth will host two upcoming webinars about **How to Better Understand the MyActiveHealth Website (myactivehealth.com/wellnesstn) on April 21 and 28, at 11:30 a.m. CT.**
 - Registration links are included in this month's ActiveHealth etip email sent out to members for whom we have an email address in Edison.
 - **Higher Ed/State: Optum Bank Member Webinar:** For HSA, FSA and L-FSA members, Optum Bank will hold a webinar, **IRS Approved Expenses – How to Find on the Website and Interpret It, on April 23 starting at 11 a.m. CT.** Benefits Administration will send emails to those for whom we have email address in Edison. We'll share information with you that you can forward to your members.
 - **Higher Ed/ State:** For members who could not attend the March 31 Optum Bank (Optum Financial) webinar on **How to Substantiate Debit Card Transactions**, a link to the webinar video has been posted on the [Flexible Benefits webpage](#) along with the presentation slides. Here is a direct link to the recording found on our Partners YouTube channel:
<https://www.youtube.com/watch?v=TIC-tUb8dAo>
 - **Local Ed: HIPAA Training Reminder**
 - **Local Ed ABCs:** You will have from May 1 to May 31 to complete the HIPAA training.
- 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. You do not need to print a certificate. 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 correct otherwise you will be required to take the quiz again.

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- ALL AGENCIES will take the **ABC_HIPAA_2021** 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_2021

- Reminder instructions for accessing the class have been provided in the Friday ABC emails.

- **Local Gov: HIPAA Training Reminder**

- **Local Gov ABCs:** You will have until April 30 to complete the HIPAA training.

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. You do not need to print a certificate. 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 correct otherwise you will be required to take the quiz again.

- ALL AGENCIES will take the **ABC_HIPAA_2021** class.

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

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- Reminder instructions for accessing the class will be provided in an upcoming Friday email.

Benefits

- **Cigna Dental Plan Provider Pre-Enrollment Search Change:** Sharon Tansil with Cigna joined us and went over a dental plan provider pre-enrollment search change. We have included an attachment with the Friday, April 16 ABC email about this change.
- **Higher Ed/State: ActiveHealth Presentation:** Scott Money with ActiveHealth joined us and went over some changes with the weight management program which included a Fitbit change for members enrolled in this program.
- **Higher Ed/State: Weight Management Program Update/Biometric Screening Update:** JJ Joralemon, our population health assistant director, joined us and gave an update about the Fitbit change and fall biometric onsite screenings.
 - **Weight Management Program:** Those members currently participating in the Weight Management Program will not be able to exchange their trackers for the newer Fitbit trackers. Any member that enrolls after May 1, will be able to use the new Fitbit products.

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- **State/Higher Ed: Fall Screening sites:** Paige Turner, our population health director, will be sending out an email later this week to anyone who hosted a screening site in 2019 to see if you have any interest in hosting a fall screening. We are working with ActiveHealth and Quest to compile the list of sites, and we hope to have sites scheduled between late August to mid-November.
 - Yngwie Coleman, Quest Event Specialist and Matt Berte, our account manager with ActiveHealth will follow up with you and help coordinate the screening site.
 - As a reminder, Quest is still following COVID-19 protocols, so the site will be arranged to allow for social distancing and masks must be worn.
- **Local Ed/Local Gov: ActiveHealth Disease Management Presentation.** Scott Money with ActiveHealth joined us and went over the disease management program offered to members.

Operations

- **Higher Ed/State: Premium Holiday Info for State and Higher Education employees only:** In early May, we will send the premium holiday letter about June coverage to state employees enrolled in state health insurance by email. We will also send the letter to higher education to distribute. **As a reminder, here is more information about the premium holiday:**

What?

- On December 4, Benefits Administration recommended and the State Group Insurance Committee voted to give all active state and higher education employees **a premium holiday for June 2021 coverage.**
- This means there will be no deduction for the health insurance premium this May.
- The premium holiday is for the health insurance (BCBST & Cigna) premiums only and will not include voluntary benefits. Premiums for dental, vision, voluntary life and disability will still be collected in June.
- The premium holiday is for active employees and COBRA participants only and does not impact retiree premiums.

Why?

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

When?

No premiums for health insurance will be deducted from:

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

Additional Information for ABCs:

- Departments will not pay the 80% portion for the June insurance premium. Agency budgets will be adjusted to reflect these non-recurring savings in FY 2021.

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- There is no stipulation that employees have to work a specific amount of time to be eligible. If they are enrolled in coverage, they will not be charged premiums regardless of when their coverage began.
- **Higher Ed:** The employees WILL NOT show on the premiums due report for medical, unless there is a retroactive change for another month.
- **Higher Ed:** You may still see charges for medical coverage on the 6/15 draft for any retroactive changes.

- **Virtual Roadshow**
 - Due to the unknown nature of the pandemic over the next few months, we will hold virtual ABC trainings again this year. The training setup will be similar to last year with multiple sessions spread out over several weeks. We will share more details and a schedule in a couple of months.

- **COBRA Subsidy**

BA is expecting the federal government to issue additional guidance on the subsidy. The information provided in these call notes is accurate based on our understanding of the information available to us at this time. We will continue to provide updated information as we receive additional guidance. If any information conflicts with federal regulations, the federal regulations will control. **Links to additional resources will be provided at the end of the call notes.**

 - The American Rescue Plan Act was passed in March of this year. Section 9501 of the Act provides for COBRA premium assistance for eligible individuals to continue their health benefits. This assistance covers 100% of the premium from April 1 through September 30 of this year
 - Not all terminated or COBRA-eligible individuals qualify for the premium assistance. Only those employees who were terminated involuntarily or had a reduction in hours that caused them to lose their insurance eligibility are eligible. Employees or former employees are NOT eligible if they are eligible for other group coverage, such as through a new employer's plan or a spouse's plan, or if they are eligible for Medicare.
 - The premium assistance program covers anyone whose 18-month COBRA eligibility period extends past April 1, so we will be looking for people who became COBRA-eligible due to the qualifying reasons back to November 1, 2019. The individuals meeting the criteria will be eligible whether or not they enrolled in COBRA when first eligible and the coverage does not have to be retroactive back to their COBRA eligibility date.
 - As you can imagine, this is a large undertaking that will take some time. We will be requesting a list of eligible individuals from all agencies soon. We are waiting for clarification on whether we must notify all terminated employees since the eligibility period began, or if we can just send notification and applications to employees that your agencies deem eligible. We will also be updating our COBRA notices that will generate during this period to let individuals know of their potential eligibility.
 - *[Non-State agencies only: One way you can help is by entering all terminations with the action/reason TER/XIT (X-Benefits Involuntary Term) so we can more easily identify these individuals.]* We must notify all eligible individuals by May 31. Please be on the lookout for more information from us soon, including the request for the list of eligible individuals.

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- **Higher Ed: ABC Security Audit:** Last week, Benefits Administration sent its annual security audit of Edison access to your agency. Primary ABCs received an email from BA with a spreadsheet containing a list of all ABCs for your agency, along with the level of access they have to Edison and for what Department IDs.
 - Please respond to that email at your earliest convenience with whether the information is correct, and an Edison Security Form if any changes are required.

- **Local Gov: ABC Security Audit:** This year’s annual Edison Security Audit has begun and will roll out to your agencies in **May**. Please keep an eye on BA communications for notification on when the audit will begin for your agency.
 - Primary ABCs will receive an email from BA with a spreadsheet containing a list of all ABCs for your agency, along with the level of access they have to Edison and for what Department IDs.
 - Please respond to that email at your earliest convenience with whether the information is correct, and an Edison Security Form if any changes are required.

- **Service Center Metrics/Customer Service Rating**
 - **March 2021:**
 - Tickets via Email: 940
 - Tickets via Self-Service: 3,216
 - Tickets via Phone: 4,428
 - Tickets via Chat: 196
 - Total: 8,780
 - Satisfaction Score: 96.7%

 - **March 2020:**
 - Tickets via Email: 794
 - Tickets via Self-Service: 2,952
 - Tickets via Phone: 4,229
 - Tickets via Chat: 281
 - Total: 8,256
 - Satisfaction Score: 95.6%

 - We received about 500 more interactions this year as compared to last March.
 - As you know, we take the satisfaction of our customers very seriously and ask that you please complete the survey after your Zendesk ticket is resolved. Our goal this year is to have more of you complete the surveys so that we can take your feedback to improve our services and your customer experience.
 - If you respond with a “Bad” rating to your ticket, we’ll reach out to you to see how we can improve. We ask that you rate the service you received from our service center, and not if you are unsatisfied with the policy.
 - Our satisfaction rate for March was 96.7%.

HIGHER EDUCATION QUESTIONS

- **Higher Ed:** I just went to that link (Cigna) and it is broken?

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- Answer: The link on the presentation slide was incorrect. The correct link is:
<https://www.cigna.com/sites/stateoftn/>
- **Higher Ed:** What is the username for mycigna.com? For employees considering it, what username do they use?
 - **Answer:** The username is User ID = Dhmo01
It's easy to look up a Cigna Dental Care DHMO dentist. (We have set up a special account for individuals who are considering the DHMO Dental plan.)
Alert*****this site ID/password has been created for use by all State of Tennessee participants to view contracted DHMO dentists. You must not change and or request a reset of this ID/password.
Visit www.myCigna.com
Password = Stateoftn@1
- **Higher Ed:** So, the (COBRA) notice will go out to anyone involuntarily terminated since November 1, 2019?
 - **Answer:** That is correct. Now would be a good time to start working on your list of anyone involuntarily terminated so that you will be ready when we ask for it.
- **Higher Ed:** Do you have any idea how billing (for the COBRA subsidy) will work?
 - **Answer:** We aren't sure right now. We think it will be similar to the 2009 COBRA subsidy. In 2009, everything went through our agency. But for this COBRA subsidy, we are not sure yet. We hope to make it seamless for agencies, and BA will get the premium credit and we won't have to go through agencies for billing. We will communicate with you when we find out how it will work.
- **Higher Ed:** Can members with a BMI of less than 30 participate in the Weight Management Program?
 - **Answer:** The Weight Management Program is set up for members with a BMI over 30. There are other programs for those with lower BMIs. There is a shorter weight management group class. There is also one-on-one coaching. There are incentives for one-on-one coaching.
- **Higher Ed:** On the ParTNers for Health website, the Cigna dental URL takes you to a page without a login link or I do not see it? Is this link directed correctly?
 - **Answer:** We checked the link on the ParTNers for Health website, [Dental webpage](#), and the link was going to the correct site.
 - We have attached instructions from Cigna on how to search for a dental provider with today's Friday, April 16 ABC email.

LOCAL EDUCATION QUESTIONS

- **Local Ed:** Who do we reach out to for (ActiveHealth) fliers?
 - **Answer:** You reach out to Scott Money for ActiveHealth fliers:
smoney@activehealth.com
- **Local Ed:** So we are not required to send out a COBRA subsidy notice? You (BA) will send out a notice?

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- **Answer:** Correct. We are the COBRA administrator, so we will send out notices.
- **Local Ed:** The date range goes back to Nov. 2019?
Answer: Yes, that is correct. That is not a typo. The temporary subsidy is available to persons eligible for COBRA due to an involuntary termination of employment or a reduction in hours, including those who become eligible on or after April 1, 2021 and before the subsidy expires on September 30, 2021. The reason for the look back to 2019 is because coverage for persons who became eligible for 18 months of COBRA as early as Nov. 2019 could extend into the 2021 subsidy period.
- **Local Ed:** Will the state bill the local education agency for those that elect it (COBRA)?
Answer: We are still trying to work out billing. We think it will be similar to 2009 where we were able to handle all the billing. As of right now, we plan on no money flowing through an agency to us. We will let you know if that changes.
- **Local Ed:** Just to clarify, only involuntary terminations or those employees with a cut in hours are eligible?
Answer: Yes. If you need help in determining whether a termination was voluntary or involuntary, reach out to us for assistance.
- **Local Ed:** So if someone is eligible, we are required to pay from Nov. until now or just from April - Sept.?
Answer: You as the agency won't be required to pay anything. We hope to coordinate that with IRS and the Department of Labor. The temporary federal subsidy is only for the months of April 2021 through September 2021 and won't necessarily align with a person's total COBRA coverage period.
- **Local Ed:** If we do not have a list ourselves (for COBRA subsidy), but you find one of our employees, will we be notified?
Answer: We need a list from you. BA will not have a way of knowing unless you process terminations in Edison with the correct code. We are relying on you for eligibility.
- **Local Ed:** Would this include interim positions that may have ended and not COBRA related? Those employees hired just to fill a temporary position through the end of the school year?
Answer: It all depends on if the person was eligible and enrolled in insurance, and if they were terminated involuntarily. Then the employees would potentially be eligible, assuming they are not eligible for other coverage. Under 2009 Treasury guidance, an involuntary termination may include the employer's failure to renew a contract at the time the contract expires if the employee was willing and able to execute a new contract and continue providing the services. If guidance is updated for 2021, it may impact this scenario.
- **Local Ed:** But if it is gross misconduct, those aren't included?
Answer: Correct. An employee who is terminated for cause (but not for gross misconduct) is eligible for the COBRA subsidy.

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- **Local Ed:** Is there a query to run to get a list of those that termed in that time period?
 - **Answer:** We have created query TN_BA432_EMPLS_TERMED_BY_DATE for this purpose. It will be available in Edison on Monday, April 19.

- **Local Ed:** If someone was going to be involuntarily termed, but they opted to resign instead, would we consider the employee eligible?
 - **Answer:** Under 2009 Treasury guidance, if the facts and circumstances indicate that, absent resignation, the employer would have terminated the employee and the employee knew that he or she would be terminated, then the resignation is an involuntary termination. If guidance is updated for 2021, it may impact the answer for this scenario,

- **Local Ed:** So if employees waived coverage, then they are not eligible regardless of why they left correct?
 - **Answer:** Correct. The employees had to be enrolled in coverage, and they had to be eligible for COBRA when they left, even if they did not elect COBRA coverage.

- **Local Ed:** If an employee was terminated due to not being rehired, their interim was over, this is involuntary, but most of those employees I am sure have went on to other jobs with other school systems?
 - **Answer:** We still want to know about these employees. That way we can reach out to them. They will have to certify that they are eligible if they apply. If they do apply and receive the COBRA subsidy, they can be fined if the IRS determines they were eligible for other coverage.

- **Local Ed:** What if an employee asked to be dropped back to part-time and they had insurance. Do they qualify for the COBRA subsidy?
 - **Answer:** Only if the reduction in hours resulted in a loss of insurance coverage. The requirement that an event be involuntary applies only to termination of employment, not a reduction in hours.

- **Local Ed:** Any there any situations where employees who did not have insurance would be eligible for this benefit?
 - **Answer:** I'm not aware of any.

- **Local Ed:** So we had a couple employees that are apparently gross misconduct, however, I keyed them as involuntarily termed. What do I need to do about those?
 - **Answer:** Let's handle that offline. Please submit a Zendesk ticket.

- **Local Ed:** I have been notified that full-time to part-time whether voluntary or involuntary is still eligible?
 - **Answer:** We have confirmed that a change from full-time to part-time is an example of a reduction in hours that will qualify for the subsidy if the reduction results in the loss of insurance coverage. Also, we've confirmed that the question of voluntary vs. involuntary only applies to termination of employment.

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- **Local Ed:** What if the full-time employee went to part time due to their hours changing, but it was voluntary on their part, would they still qualify?
 - **Answer:** We have confirmed that this is an example of a reduction in hours that will qualify for the subsidy if the reduction results in the loss of insurance coverage. Also, we've confirmed that the question of voluntary vs. involuntary does not apply to a reduction in hours. It only matters if employment is terminated.

- **Local Ed:** Is there a sample updated COBRA letter that we can view?
 - **Answer:** The Department of Labor has issued model notices. We'll include links in the Friday email. Please see the resources section at the end of these notes.

- **Local Ed:** Do we send the (COBRA subsidy) notice letter? I thought I understood that BA would be sending those?
 - **Answer:** BA is sending the notice letters. You do not need to. The link to the model notices we will include is just for your information.

- **Local Ed:** Will there be an email from BA that ABCs will respond to concerning the list of names that we might think are eligible for COBRA subsidy or do we need to send that through Zendesk?
 - **Answer:** BA will be sending an email with instructions for you to reply to.

- **Local Ed:** We will send to BA a list of terminations, and BA will send the new COBRA subsidy notice to them?
 - **Answer:** That is correct. We need a list from you of potentially eligible employees or former employees. We will send out the COBRA Subsidy notices.

- **Local Ed:** Can we upload our (COBRA subsidy) list to Zendesk?
 - **Answer:** We will send instructions with the email asking for the list.

- **Local Ed:** Does the subsidy cover dental and vision as well, or just health insurance? We were notified it was all three.
 - **Answer:** We have confirmed that the subsidy is available for dental and vision benefits as well as health.

- **Local Ed:** Just to clarify, the local education agency will not be responsible for paying for the COBRA premiums? Additional related question: I would not think this would be up to the local education agencies to fund but please let us know as soon as possible on that?
 - **Answer:** We are not sure yet. We are hoping not, and we are planning not. But we are waiting for clarification on how the state can receive the premium funds from the federal government. We will share more information with you when we have it.
Comment: We were told yesterday that the subsidy covered vision and dental. Thanks for sharing this comment. Following the ABC call, we also received information confirming that the subsidy is available for dental and vision benefits as well as medical.

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- **Local Ed:** If the employee left our school and went to another school, we still show them (on our COBRA subsidy list)?
 - **Answer:** If the employee is eligible, you would include that on your list. It would be up to the employee to apply if they felt they were eligible by not having other coverage.

 - **Local Ed:** We send our (COBRA subsidy employee) list through Zendesk, correct?
 - **Answer:** BA will soon send an email with instructions on how to send your list.

 - **Local Ed:** What are the dates for the (COBRA subsidy) list?
 - **Answer:** Anyone who became COBRA eligible Nov. 1, 2019 or later, so the term dates will depend on how long you extend coverage when an employee terms. You might need to look at terms back to September 2019.

 - **Local Ed:** Those employees leaving our system who carried insurance would only be those employees who were involuntary terminated, correct?
 - **Answer:** Correct. Only involuntary terms are included. If you need help in determining whether a termination was voluntary or involuntary, you can reach out to us for assistance.

 - **Local Ed:** What about retirees?
 - **Answer:** Under 2009 Treasury guidance, retirement can be an involuntary termination if the facts and circumstances indicate that the employer would have terminated the employee, absent the retirement, and the employee knew that. If guidance is updated for 2021, it may impact the answer to this scenario.
-

STATE QUESTIONS

- **State:** So, you're saying it (COBRA subsidy) only applies to those terminated who lost their jobs, not those who left their jobs voluntarily?
 - **Answer:** BA has received information that under 2009 Treasury guidance, termination scenarios can be involuntary if the facts and circumstances indicate that the employer would have terminated the employee, absent the employee leaving, and the employee knew that. If guidance is updated for 2021, it may impact the answer to this scenario.

- **State:** Employees are eligible due to death or downsizing?
 - **Answer:** No. Under 2009 Treasury guidance, involuntary termination does not include the death of an employee. If guidance is updated for 2021, it may impact the answer to this scenario.

- **State:** So, they can be terminated not in good standing and still be eligible, correct? As long as it is **not** gross misconduct?
 - **Answer:** That is our current understanding based on the information available to us. I want to put the caveat that there is still some guidance for which we are seeking clarification. If guidance is updated for 2021, it may impact the answer to this scenario.

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- **State:** Is there a query we can run to find eligible employees?
 - **Answer:** There is an HR query you can run:
TN_HR146_EMPLOYEE_SEPARATION. We also created query
TN_BA432_EMPLS_TERMED_BY_DATE for this purpose. It will be available in
Edison on Monday, April 19.

 - **State:** On the premium holiday, will employees who are retiring and running out terminal leave be eligible for the premium holiday?
 - **Answer:** Yes, if they are still enrolled in active coverage, they will still receive the premium holiday.

 - **State:** If an employee retires without terminal leave as of May 29, is he/she eligible for the premium holiday?
 - **Answer:** It's going to depend. Technically the employee should not be eligible since coverage will end May 31. Because we would not take the premium for the month of June, we would not extend the benefit for that month. The premium holiday is specific for health. So, when there's not a premium deduction we would not extend it.
-

LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** Can you confirm that members are required to "declare" a dentist with the prepaid plan? Do they receive information from Cigna about this when they enroll?
 - **Answer:** Yes, if an individual selects the Cigna prepaid plan it does require the member to select a primary dentist. It must be done online at <https://www.cigna.com/sites/stateoftn/> (click on the Dental Plan tile) or in the form found in the handbook. Or, of course, members can call Cigna at 800.997.1617, 24/7, 365 days a year and we can help them over the phone. The dental selection form is also on the website.

- **Local Gov:** Am I correct this (COBRA subsidy) is only for involuntary terminations?
 - **Answer:** It is only for involuntary terminations and for those who have a reduction of hours that caused them to have a loss in coverage.

- **Local Gov:** Our dental and vision is self-funded. Is this (COBRA subsidy) something we have to do for that as well?
 - **Answer:** Our understanding is that the COBRA subsidy does apply to dental and vision as well as medical coverage. If you are on state dental or vision, we are going to handle it. If you offer your own dental and vision, you may want to check with your legal counsel.

- **Local Gov:** Will you explain bullet eight (COBRA subsidy presentation)?
 - **Answer:** An example of this is someone who terminated in June 2020, and did not elect COBRA. If still eligible, meaning they are not eligible for any other group coverage, they could enroll in COBRA as of April 2021 and not back to their initial COBRA eligibility.

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- **Local Gov:** Does our health insurance cover gym membership?
 - **Answer:** It does not. But BlueCross and Cigna do have fitness discounts for health plan members. Members can log in or call their carrier for more information. Cigna's fitness discount is part of their Healthy Rewards Program. The BlueCross fitness program is called Blue365.
 - BlueCross BlueShield of Tennessee
800.558.6213
Monday - Friday, 7 - 5 CT
bcbst.com/members/tn_state/
 - Cigna
800.997.1617
24/7
cigna.com/stateoftn

- **Local Gov:** I have a spouse who is currently on COBRA due to the death of her husband that worked with us. Does the COBRA subsidy apply to her as well?
 - **Answer:** No. Under 2009 Treasury guidance, the death of an employee is not an involuntary termination of employment that would make qualified beneficiaries such as the spouse eligible for a subsidy. If guidance is updated for 2021, it may impact the answer to this scenario.

- **Local Gov:** Any word if there will be a change in premiums this year?
 - **Answer:** We don't know yet as our actuaries are still gathering information. We will know for sure after the Insurance Committee meets in May. We may have an idea in late April, and as soon as we have any more information we will share it with you.

- **Local Gov:** It was my understanding that (COBRA subsidy) notices must be provided 15-45 days before the individual's premium assistance expires. So, if someone elected COBRA November 2019, their coverage would end April 30, 2021. So, should they have a letter as well no later than April 15?
 - **Answer:** Given the guidelines, yes. But since they haven't received the premium subsidy, that's not going to be possible. But yes, the guidelines do say that. So as soon as we get all of our changes in the system, we will be incorporating that as well. Individuals will have 60 days after receipt of the subsidy notice to apply for the subsidy and in the case of COBRA coverage ending April 30, 2021, the subsidy can be retroactive back to April 1.

COBRA SUBSIDY RESOURCES

- The following resources are included for your information. BA will continue to share information as additional guidance is received.
 - <https://www.dol.gov/agencies/ebsa/laws-and-regulations/laws/cobra/premium-subsidy> - DOL link to FAQs and model notices for COBRA premium assistance under the American Rescue Plan Act of 2021
 - <https://www.irs.gov/pub/irs-drop/n-09-27.pdf> - Notice 2009-27 – IRS guidance issued on March 31, 2009 for the 2009 subsidy

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Communications and Materials

- **Materials and Communications Updates**
 - **Retirement announcement; Director of Communications announcement**
 - Debby Koch, our current director of communications, is retiring at the end of March and this week's calls were her last. The new Director of Communications, Shelley Walker, joins us from the Tennessee Department of Health, and has been with that agency since 2006. She was named Assistant Director and then was appointed Director, Communication & Media Relations, in 2017. Prior to that she was Public Relations Specialist at Tennessee State University. She also was a News Producer at channels 2 and 4 here in Nashville. She received her BS degree in Communications from the University of Tennessee.
 - **30-day New Hire Enrollment Period Change:** We have completed updating materials and information with the new hire enrollment period change. As a reminder, members now have 30 days to complete their new hire enrollment in ESS or have you submit the Benefit eForm with their enrollment selections.

Updates were made to the webpages, forms, handbooks, PowerPoints, ABC Guides, Plan Documents, Eligibility and Enrollment Guides, all Certificates of Insurance, videos and other materials. We have tried to find and change every instance where 31 days was used to 30 days but if you happen to see something where it is incorrectly stated, please send an email to benefits.info@tn.gov

- **Feb. 26 Optum Bank webinar posted on Partners YouTube page:** For HSA and FSA members who could not attend, a recording of the Feb. 26 Optum Bank webinar, **How to register on the Optum Bank website/App and use the features**, has been posted on the Partners YouTube page. Find it by [going to tn.gov/PartnersForHealth](https://www.tn.gov/PartnersForHealth) and clicking on [Videos](#) at the top, and then clicking on the Partners YouTube channel link. A direct link is here: <https://www.youtube.com/watch?v=If50izldkt8>
- **Omada Diabetes Prevention Program Email Campaign:** Omada has created a four-week email campaign about their Diabetes Prevention Program for Cigna plan members. Next week, we will start to email members for whom we have an email address in Edison about how to join the program, if they are eligible. Emails will go out every week for four weeks to all Cigna members about the digital program.
 - As a reminder, BlueCross also offers a program call Livongo for its enrolled members and they can find more information by logging into BlueAccess.
- **Higher Ed/State only: Optum Bank Member Webinar – March 31: How to Substantiate Debit Card Transactions:** Optum Bank will hold the next webinar for FSA and L-FSA members on Wednesday, March 31, about how members can substantiate debit card transactions. We'll send more information you can share with members as we get closer to this date and we'll send an email out to all members for whom we have email addresses in Edison.
- **State: Upcoming #4Mind4Body Webinar – March 17: In partnership with Optum and ActiveHealth, the next #4Mind4Body webinar, Developing Emotional Intelligence: Overcoming Emotional Eating,** will be held Wednesday, March 17. from 11:30 a.m. – 12:30 p.m. CT. We will send the flier about this webinar that you can share with employees in an

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upcoming Friday ABC email. Employees can click the link in the flier to register or go to the [Partners EAP page](#) for more information.

Developing Emotional Intelligence: Overcoming Emotional Eating
Wednesday, March 17
11:30 a.m. – 12:30 p.m. CT

We all have struggles in our lives. And they often come with feelings like stress, anger, and loneliness. Many of us eat to cope with these feelings. But this can lead to weight gain. In this session we'll talk about healthy ways to overcome emotional eating. Attendees will also learn all about Emotional Intelligence (EQ) – from its definition to strategies for enhancing it. This program will help participants identify stress reduction techniques and guide them through writing their own action plan for developing their EQ.

HIPAA Training

- **2021 HIPAA Training Announcement:** 2021 HIPAA training is new and improved in Edison. HIPAA Annual training will begin in **April for Local Government**, with other plans to follow.
 - The Health Insurance Portability and Accountability Act of 1996, known as HIPAA, is a federal law that protects the privacy and confidentiality of protected health information. Protected Health Information (PHI) is individually identifiable health information held or maintained by Benefits Administration or our business associates who act on our behalf that is transmitted or maintained in any form or medium. As an ABC, you and your agency are our business associates. The law requires that all covered entities and business associates be trained in HIPAA policies and procedures. All ABCs, backup ABCs, and directors who have access to Edison are required to complete the annual training. The HIPAA training is an example of Benefits Administration's commitment to educate and promote a culture that encourages ethical conduct and compliance with state and federal laws. Our training is online in Edison. We have changed our process to ensure that everyone gets the required training in a timely manner. Each agency is assigned to a month to complete the training. ABCs, backups and directors must complete the annual HIPAA training every calendar year. You have 30 days to complete the training in your assigned month. Failure to comply with mandatory training requirements may result in suspension of insurance benefits access. Training requirements will not be waived unless approved in advance by BA HIPAA Compliance Officer.

Training schedule:

- **Local Gov ABCs:** You will have from April 1 to April 30 to complete the HIPAA training.
- **Local Ed ABCs:** You will have from May 1 to May 31 to complete the HIPAA training.
- **Higher Ed and State ABCs:** You have from June 1 to June 30 to complete the HIPAA training.

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,

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please submit a Zendesk ticket to the BA training department to request assistance. Edison will record every year you have completed the course. You do not need to print a certificate. 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% correct otherwise you will be required to take the quiz again.

ALL AGENCIES will take the ABC_HIPAA_2021 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_2021

Reminder instructions for accessing the class will be provided in an upcoming Friday ABC email.

Benefits

- **Higher Ed/State: Temporary FSA Provision Changes:**

FSA/L-FSA

The Consolidated Appropriations Act of 2021 was signed into law on December 27, 2020. The Act includes a new rule that may provide temporary relief to members with a Flexible Spending Account (FSA).

For State and higher education employees enrolled in a FSA or L-FSA, the following temporary provision has been adopted:

- FSA and L-FSA members may carry over ALL unused funds from plan year 2020 to 2021 and from plan year 2021 to 2022. This change only applies to current and active employees; not terminated employees.

Before this change, members could carry over a maximum of \$500 on FSA and L-FSA accounts. FSA funds and L-FSA funds will be transferred to the state's new FSA vendor, Optum Bank, from PayFlex, the former vendor, by July 1, 2021. At that time, all unused funds will be transferred.

DC-FSA

For State and higher education employees enrolled in a DC-FSA, two temporary provisions have been adopted:

- A 12-month grace period for unused DC-FSA funds will be added for plan years ending in 2020 or 2021. This will allow members to incur expenses against their 2020 DC-FSA from Jan. 1, 2020 through, Dec. 31, 2021, and file claims by Dec. 31, 2021; after that date, the remaining balance will be forfeited. Members will be able to incur expenses against their 2021 DC-FSA from Jan. 1, 2021, through Dec. 31, 2022, and file claims by Dec. 31, 2022; after that date, the remaining balance will be forfeited.
- The maximum age of eligible dependents will increase from 13 years old to 14 years old for the 2020 plan year only. Participants will be able to file 2020 claims up to their child's 14th birthday through the end of 2021. Prior to April 30, 2021, members should file DC-FSA claims with PayFlex and after that date, file them with Optum Bank. This change only applies to current and active employees, not terminated employees.

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Benefits Administration sent an email to all state employees with a FSA or L-FSA, and a separate email to those with a DC-FSA on Monday, March 1. The email included the previous information along with more details, including how the new temporary rule will impact members and answers to frequently asked questions.

Benefits Administration also shared our emails with UT and the TBR system office, should they wish to tweak the language in them for their higher education employees.

- **Plan Document (PD) Changes:**

- **Higher Ed/State:**

- 2020 and 2021 State Plan Documents have been updated to reflect the FSA changes previously discussed.
- You can find the PDs on the Partners for Health website under the Publications and ABC tabs
- Summaries of the temporary provisions adopted by the State Insurance Committee have been added to the Introduction Sections in Part II, on page 2.
 - When you look at the documents, the added text will be labeled as “Special Notice”
- A reference to the special notice has also been added to specific sections within the PD
- “See Special Notice” text will appear as a hyperlink in:
 - Sections 2.16, 3.01, 3.12, 3.13, 3.18 and 4.01 in the 2020 PD; and
 - Sections 2.16, 3.12, 3.13, 3.18 and 4.01 in the 2021 PD
 - Readers will be directed back to the special notice on page 2 of the FSA portion of the PD
- As part of an ongoing project, BA continues to work on updating the medical Plan Documents, and the Insurance Committees recently approved changes to clarify what the plan does and does not cover.
 - These changes don’t add or eliminate benefits.
- Some items have been combined and repetitive language has been deleted, and several items have been renumbered to support those changes.
- Other Items have been rewritten to make the benefits easier to understand
 - **13.02(A)** – preventive services have been grouped together and moved to the top of the covered expenses section making it easier for readers to identify those services. Additional language in (A)(2) references the U.S. Preventive Services Task Force recommendations but recognizes that a covered person’s physician has prescribing authority.
 - **13.02(P)(7)** – prosthetic devices and supplies, artificial eyes and limbs and replacement prosthesis have been organized into a single item to simplify the intent of the benefit.
 - **13.02(P)(18) and 13.04(A)(29)** – family planning services language has been modified to provide a better description of covered and excluded services.
 - **13.04(A)(50)** – language has been added to reinforce that the plan will not cover services, treatments or expenses prohibited by law.
 - **13.04(D)** – the exclusion for mental health and substance use expenses has been updated to reflect the current edition of the appropriate reference manual.
- The plan updates discussed today are posted on the Partners for Health website under the Publications and ABC webpages.

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• **Plan Document (PD) Changes:**

○ **Local Ed/Local Gov:**

- As part of an ongoing project, BA continues to work on updating the medical Plan Documents, and the Insurance Committees recently approved changes to clarify what the plan does and does not cover.
 - These changes don't add or eliminate benefits.
- Some items have been combined and repetitive language has been deleted, and several items have been renumbered to support those changes.

- Other Items have been rewritten to make the benefits easier to understand
 - **13.02(A)** – preventive services have been grouped together and moved to the top of the covered expenses section making it easier for readers to identify those services. Additional language in (A)(2) references the U.S. Preventive Services Task Force recommendations but recognizes that a covered person's physician has prescribing authority.
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 - **13.04(D)** – the exclusion for mental health and substance use expenses has been updated to reflect the current edition of the appropriate reference manual.

- The plan updates discussed today are posted on the Partners for Health website under the Publications and ABC webpages.

Operations

- **Higher Education: Security Audit:** This year's annual Edison Security Audit has begun and will roll out to your agencies in **April**, so please keep an eye on BA communications for notification on when the audit will begin for your agency.
 - Primary ABCs will receive an email from BA with a spreadsheet containing a list of all ABCs for your agency, along with the level of access they have to Edison and for what Department IDs. Please respond to that email at your earliest convenience with whether the information is correct, and an Edison Security Form if any changes are required.

- **Local Ed only: Security Audit:** Last week, Benefits Administration sent its annual security audit of Edison access to your agency. Primary ABCs received an email from BA with a spreadsheet containing a list of all ABCs for your agency, along with the level of access they have to Edison and for what Department IDs.
 - Please respond to that email at your earliest convenience with whether the information is correct, and an Edison Security Form if any changes are required.

- **Local Government: Security Audit:** This year's annual Edison Security Audit has begun and will roll out to your agencies in **May**, so please keep an eye on BA communications for notification on when the audit will begin for your agency.

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- Primary ABCs will receive an email from BA with a spreadsheet containing a list of all ABCs for your agency, along with the level of access they have to Edison and for what Department IDs. Please respond to that email at your earliest convenience with whether the information is correct, and an Edison Security Form if any changes are required.
- **New ABC Retirement Presentation:** **Located on the ABC webpage > Training > Titled: Retirement Guide for ABCs.**
- **Higher Ed/Local Ed/Local Gov: New Hire Administrative Error Form:** Thank you for using our new hire administrative error form that was implemented last month. We have one additional change for this form. We are now asking that you use this form for ALL administrative errors. The form is located on the ABC website under Agency Benefits Coordinators>Forms.
- **Service Center Metrics/Customer Service Rating:**
 - **February 2021:**
 - Tickets via Email: 761
 - Tickets via Self-Service: 3,006
 - Tickets via Phone: 3,825
 - Tickets via Chat: 202
 - Total: 7,794
 - Satisfaction Score: 97.0%
 - **February 2020:**
 - Tickets via Email: 681
 - Tickets via Self-Service: 3,009
 - Tickets via Phone: 4,643
 - Tickets via Chat: 291
 - Total: 8,624
 - Satisfaction Score: 97.7%
 - We received about 800 less interactions this year as compared to last February with the biggest difference showing in less phone calls.
 - As you know, we take the satisfaction of our customers very seriously and ask that you please complete the survey after your ticket is resolved. Our goal this year is to have more of you complete the Zendesk surveys so that we can take your feedback and improve our services.
 - If you respond with a “Bad” rating to your ticket, we’ll reach out to you to see how we can improve. We ask that you rate the service you received from our service center, and not if you are unsatisfied with the policy.
 - Our satisfaction rate for January was 97.0%.
- **New Employee Orientation**
 - The New Employee Orientation video and corresponding follow-along packet have been added to the agency benefit coordinator page on the Partners for Health website. This video should be used to equip new employees with information about benefits available to them. The follow along packet allows employees to take notes during the

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video and includes links that will take employees directly to the corresponding information on the Partners for Health website.

- To find the video and packet on the website, navigate to the ABC page. Scroll down to the Plan tab and locate the New Employee Orientation Video that is right for your agency.

HIGHER EDUCATION QUESTIONS

- **Higher Ed:** Adobe flash is no longer supported (HIPAA Training).
 - **Answer:** We have been able to run it with no problems; however, we will check to make sure there are no issues with it.
- **Higher Ed:** What will happen to the PayFlex funds of an employee who will no longer be employed before July? And who should employees contact to file their claims?
 - **Answer:** PayFlex funds will not transfer for any employee who is terminated. Your FSA coverage terminates on the day your employment ends. You will then have up to 90 days to file claims for eligible services and purchases that happened from the beginning of the plan year to your termination date. After 90 days, your funds are forfeited.
 - For assistance, members should contact Optum Financial at 866.600.4984. Prior to April 30, 2021, members should file their plan year 2020 FSA or L-FSA claims with PayFlex. After that date, they can no longer file claims with a date of service from 2020, as April 30 is the deadline to file claims. But their balance will carry over, and you can file plan year 2021 FSA or L-FSA claims with Optum Bank by April 30, 2022.

[PayFlex FSA Claim Form](#)

[Optum Financial Claim Form](#)

- **Higher Ed:** Does the administrative error form now take the place of submitting an administrative letter?
 - **Answer:** Yes, you will just need to complete the administrative error form. It still needs to be signed by the ABC and supervisor. You no longer have to submit an administrative letter.
- **Higher Ed:** All claims with PayFlex must be paper forms now though. No access to online account information anymore, correct?
 - **Answer:** Yes, that is correct. For FSA and L-FSA accounts, PayFlex debit cards were shut down as of 12/31/2020. Paper claims must be filed now, and the deadline to file with PayFlex is 4/30/2021. Please use the [PayFlex claim form](#).

Higher Ed: For someone who did not open an FSA for 2021 but has funds leftover from 2020. What would happen with those funds? Also, do I need to send out information to my 2020 participants?

- **Answer:** Optum will open a new FSA or limited purpose flexible spending account (L-FSA) for members who did not enroll in an FSA or L-FSA for plan year 2021

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but who had a balance in their FSA or L-FSA at the end of 2020. Their full balance will transfer to the new Optum account by July 1, 2021, and Optum will send them a debit card.

- For TBR institutions, information was sent out to you via email last week, and it is up to you to share that with your employees.
- UT has sent emails directly to applicable employees with balances.

LOCAL EDUCATION QUESTIONS

- **Local Ed:** Currently an employee has a CDHP w/HSA with her spouse as a dependent. If she removes him from the plan due to a special qualifying event, can she still continue to use her HSA funds towards her spouse's qualified medical expenses including dental and/or vision?
 - **Answer:** Yes, the employee may still pay for qualified medical expenses for her spouse (or any dependent children) with her HSA. The spouse (or any dependent children) does not also have to be covered by her insurance plan to use the HSA for qualified medical expenses.
- **Local Ed:** When would we use the corrections and clarifications form vs administrative error form?
 - **Answer:** You will use the administrative error form when you as the agency caused the employee to not be able to get coverage. You will use the corrections and clarifications form if there was some form of a typo or you transposed a number for a DOB or SSN when you created the eForm, or if there is an incorrect plan type when you enrolled the employee or for any correction that you need us to make along those lines.
- **Local Ed:** Can this onboarding (New Orientation video and follow-along packet) be copied and downloaded on the agency's website?
 - **Answer:** No, the video link cannot be downloaded, but the links on the ABC webpage will take you to a website that you can use the video directly from there. We would recommend the same with the follow-along packet. We will update the video and packet so you will need to be sure you are always using the correct, most up-to-date versions.
- **Local Ed:** An employee has the CDHP/HSA plan, his spouse's employer would like to make a contribution to our employee's HSA, is this possible?
 - **Answer:** Your Optum HSA does not have an account and routing number for which contributions can be made from another employer directly. We suggest asking the employer to pay the funds directly to their employee, and he or she could deposit the funds into the HSA via check or by linking a personal bank account to your Optum web portal. Remember that these funds would count towards the annual maximum amount.

STATE QUESTIONS

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- **State:** I missed who needed to take the HIPAA training. It said all agencies, but does that mean all ABCs in each agency?
 - **Answer:** Anyone who has access to Edison, all ABCs including all backup and primary ABCs for each agency.

 - **State:** Could you show the navigation again to the retirement guide for ABCs?
 - **Answer:** It is located on ABC webpage, under Training, and it is called the Retirement Guide for ABCs. You can find it here:
<https://www.tn.gov/partnersforhealth/agency-benefits-coordinators.html>

 - **State:** Did any of the changes make substantive changes to the policy?
 - **Answer:** No, the changes we made to the medical part of the plan documents aren't substantive. The changes were mostly just clarifying information. The biggest changes are to those in section 13, where information was re-written so the information makes better sense. The changes were not about adding or removing coverage.

 - **State:** I have had an employee ask me if acupuncture is covered in our insurance plans?
 - **Answer:** Yes, acupuncture is covered. You can find a comparison of the acupuncture benefit across plan design options on the 2021 Health Plan Comparison: https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/benefit_grid_2021_st_he_final.pdf
-

LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** Is the wording (in the plan document changes) so drastic that we should alert employees specifically?
 - **Answer:** No, the changes will hopefully just help you and plan members when you're looking to see what types of services we cover. For example, for fertility services, we do cover testing. We do not cover services to create pregnancy. We have included some language showing exactly what changed with the call notes. The changes don't require any action from you or plan members. We just want to make sure that you know a new version of the Plan Document is available and that you are looking at the correct version when you quote coverage information.

- **Local Gov:** When will that spreadsheet (security audit) be sent out?
 - **Answer:** The first week in May, an email will be sent out to your primary ABC with the spreadsheet.

- **Local Gov:** Do you offer help with finding an agency that will help them find a Medicare Supplement other than the Tennessee Plan?
 - **Answer:** Our Benefits Administration staff does not handle this service; however, we can assist with eligibility with The Tennessee Plan. If you want to explore other options or if you are not eligible for The Tennessee Plan, there is another state agency, Tennessee SHIP, that can help and they can be reached at 877.801.0044. This agency will help employees compare other plans that are on the market, answer

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questions about Medicare and processes, offer you help about getting set up and information about other supplements that are available. Tennessee SHIP will not sell employees anything but will help with the other options.

- **Local Gov:** If our agency chooses not to participate in retiree insurance. Would retiring employees still be eligible for some of the benefits offered?
 - **Answer:** If you are local government agency that has opted out of offering continuation of coverage on the medical plan, your retirees will not be eligible for the state group health or vision. If they participate in TCRS, then any of your retirees that receive a monthly pension check are eligible for the retiree dental plans offered by the state. If they were hired before July 1, 2015, and they receive a pension check based on their own service and are Medicare enrolled, then they are eligible for The Tennessee Plan, but are not eligible for the state's group health plans if your agency has opted out of this coverage.

- **Local Gov:** Do you think we will have in person summer training this year?
 - **Answer:** We are not really sure. We are evaluating what that might look like. As soon as we have a decision, we will communicate that to you.

- **Local Gov:** If we took the HIPAA training as a new hire in August 20, do we need to take it in April?
 - **Answer:** Yes, you have to take HIPAA training every calendar year.

- **Local Gov:** I must have missed the instructions on how to pay in HSA contributions. Where can I go to get the information?
 - **Answer:** You would need to work with Optum Bank to make sure your agency is set up for employee payroll contributions if offering through your agency. We recommend that you contact Optum to assist with the employee contributions process. Please feel free to contact the Optum Account Services team M-F, 7 a.m. - 7 p.m. CST. You may contact Optum Account Services at 1-800-294-6620 or accountservices@optum.com
You can find the forms you need on the [ABC webpage](#) under Optum Bank (2021):
 - The [Employee Payroll Deduction form](#) is to be used only for ABC purposes. Optum does not need a copy of this form, as any contributions sent to Optum will be verified by submission from your agency on the Optum Employer Portal. You can use the Employee Payroll Deduction form to capture employee's payroll elections and track them in your system of record.
 - You will need to send the [HSA Funding Form](#) to Optum to get your agencies bank account information on record so you are able to deposit funds for 2021 contributions.
 - Please refer to the [Optum Employer Portal Guide](#). Pages 19-30 of this guide will help lead you through submitting both payroll and employer contributions through the Optum Employer Portal.

- **Local Gov:** We have an employee who is looking at getting private insurance for his wife. Since it is not through her employer what paperwork has to be submitted?
 - **Answer:** In order to remove the spouse from the state plan, the employee would need to submit an insurance cancel request form, note which special qualifying

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event the dependent has experienced in Part 2 of the form and provide the corresponding documentation required to remove a dependent mid-year. The member has 60 days from the qualifying event to submit.

- **Local Gov:** Just wanted to let you know that the New Hire Video presentation is not working. It says "An error occurred. Please try again later (Playback ID: 8AxYawap7w_oOyj4)". It was the video for Local Government Agencies offering Health, Dental and Vision Insurance.
 - **Answer:** You can try holding shift while also clicking to reload the page. This is a hard refresh. It also may be a firewall issue, and you may need to follow up with your IT department. If you are still having an issue, you can send an email to us at benefits.info@tn.gov so we can help you with a solution.

- **Local Gov:** If an employee has dependent coverage on their kids but the kids qualify/get approved for Cover Kids, is that a qualifying event?
 - **Answer:** Yes, it is a qualifying event. The member would need to complete the insurance cancel request form, mark Entitlement to Medicare, Medicaid, Tricare in part 2 of the form and provide proof of new insurance. The member has 60 days from the qualifying event to submit the documentation.

- **Local Gov:** When will we receive the new rates?
 - **Answer:** We just don't know right now. We expect next year's rates will be approved by the Local Government Insurance Committee at its May meeting, but if we have information we can share before that we surely will.

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Communications and Materials

- **Materials and Communications Updates**
 - **New hire enrollment period change:** We did include this information in a Friday ABC email, but a reminder that the following materials have been updated to reflect the 31 to 30-day new hire enrollment period change that will be effective March 1.
 - **Eligibility and Enrollment Guides**
 - **Employee Checklists**
 - **New Hire PowerPoint presentations and PDFs**
 - **Plan documents, ABC Guides and additional materials** will also be updated and we will let you know when these are posted.
 - **Closed Presidents' Day – Monday, Feb. 15:** State offices and the BA Service Center will be closed Monday, Feb. 15 for the Presidents' Day holiday.
- **Optum Bank Member Webinar: How to register on the Optum Bank website/App and use the features:** On Feb. 26, we will hold a member webinar for all HSA and FSA members (FSA is for state and higher education only) in which Optum Bank will walk through how to register on the website and mobile app and use the features. More details will be coming as we get closer to this date, and we'll send emails to members for whom we have email addresses in Edison. This webinar is the first in a series for HSA/FSA members that will be held throughout the year.
- **State: Upcoming #4Mind4Body Webinar – Feb. 24:** In partnership with Optum and ActiveHealth, the next #4Mind4Body webinar, A New Year of Health: Setting Realistic Goals and Preventing Burnout, will be held Wednesday, February 24 from 11:30 – 12:30 CT. More information about the webinar is below. We will send the flier about this webinar that you can share with employees in a Friday ABC email. Employees can click the link in the flier to register or go to the [Partners EAP page](#) for more information.

A New Year of Health: Setting Realistic Goals and Preventing Burnout
Wednesday, Feb. 24
11:30 a.m. – 12:30 p.m. CT

 - It's a new year, and that means a new chance to make a healthy lifestyle change. If you're having trouble getting motivated, we're here to help. You can learn to set goals, overcome challenges, and stay the course for the upcoming year. Attendees will examine causes of burnout and potential solutions along with ideas to stay healthy in the new year.

Benefits

- **Optum HSA Update:** Whenever an HSA participant leaves one agency (this does not apply within Central State agencies) to go work for another agency on the state group insurance plan or if someone retires, he or she will receive a new enrollment kit and debit card for their new HSA, along with instructions on how to close or combine their HSAs. If they don't combine them by working with Optum Bank, the member will become responsible for paying the monthly administrative fee under the HSA they had with their former employer. The State cannot combine these HSAs, as they are personal bank accounts.

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- **Cigna Members: Surgical Treatment Support Program:** As a reminder, Cigna launched their Surgical and Treatment Support Program last year which provides enhanced benefits for members who are having select orthopedic surgeries like a joint replacement or spine surgery if the member pre-enrolls and uses a program provider. Enhanced benefits included a personal health navigator and no member cost share for the procedure for PPO enrollees and no member cost share after meeting the deductible for CDHP enrollees.
 - Cigna will be sending out email and mail communications to certain Cigna enrollees starting this week through 3/1.
 - Additional information regarding the program, including a list of program providers and FAQs, is located on the left side panel of the Cigna splash page under “Surgical & Treatment Support Program” or members can call the Cigna STSP team at 855.678.0042 between the hours of 8:00 am-5:00 pm ET, M-F.
 - <https://www.cigna.com/sites/stateoftn/surgical-treatment-support-program.html>

- **Optum/HERE4TN Services:** Benefits Administration and the Optum HERE4TN team want to hear from you, our ABCs. HERE4TN is here to serve you and our members’ and we want to know how we can better meet your needs. From Critical Incident services to Trainings and Webinars, to fliers posted in the ABC/Marketing eToolkit, Optum and HERE4TN can help. Do you want/need more trainings, more webinars, more fliers? What do you think would be the best way to meet members where they are, especially right now when many are stressed and overworked at work and at home and may not feel they have time to engage in support services? Feel free to start a discussion now or even better, please email us at benefits.info@tn.gov and mention EAP/BH support in your email so we route your request to the correct person. We will work with you and Optum to find a solution and resources to meet your members’ needs.

Operations

- **New Hire Enrollment Period Change Reminder:**
 - New Hire enrollment period is changing from 31-days to 30-days, effective March 1
 - The change applies to enrollment in all medical and all voluntary products
 - Applies to anyone hired March 1 or later
 - Employees will continue to have 60 days for special qualifying events (SQEs)
 - All materials will be updated by March 1
 - Make sure to update any materials you have created with this new information

- **State: Employee 2021 Benefits Confirmation Email:** On Wednesday, February 10, employees who have an email address in Edison will receive an email notifying them that their 2021 Benefits Confirmation statement is available. Even if employees did not make any benefit changes for 2021, they may receive the notice. Therefore, you may get questions from your employees, especially if they did not make any changes.

- **Higher Ed/Local Ed/Local Gov: New Hire Administrative Error Form:** We now have a form specific to new hire administrative errors. You must complete the form to acknowledge that BA’s acceptance of a late enrollment due to an administrative error does not constitute tax or legal advice. All questions regarding impact to your agency’s IRS pretax benefit status must be determined by your agency’s attorney or accountant. This new form will only be used for new hire administrative errors and for no other reason. It has been posted to the ABC website under Agency Benefits Coordinators>Forms under the Corrections and Clarifications form.

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- **Service Center Metrics/Customer Service Rating:**

- **January 2021:**

- Tickets via Email: 881
- Tickets via Self-Service: 3,387
- Tickets via Phone: 5,085
- Tickets via Chat: 262
- Total: 9,615

- Satisfaction Score: 99.2%

- **January 2020:**

- Tickets via Email: 858
- Tickets via Self-Service: 3,860
- Tickets via Phone: 5,910
- Tickets via Chat: 419
- Total: 11,047

- Satisfaction Score: 98.4%

- We received about 1,400 less interactions this year as last year with the biggest difference showing in less chats and phone calls.
- As you know, we take the satisfaction of our customers very seriously and ask that you please complete the survey after your ticket is resolved. One of our goals this year is to have more of you complete these Zendesk surveys so that we can take your feedback and improve our services.
- If you respond with a “Bad” rating to your ticket, we will reach out to you to see how we can improve. We do ask that you rate the service you received from our service center, and not if you are unsatisfied with the policy.
- Our satisfaction rate for January was 99.2%.

- **Special Qualifying Event Update**

Special Enrollment Provisions

- New dependent spouse is acquired through marriage; or
- New dependent newborn is acquired through birth; or
- New dependent is acquired through adoption or legal custody
- Death of a spouse or ex-spouse;
- Divorce;
- Legal separation;
- Loss of eligibility (does not include a loss due to failure to pay premiums or termination of coverage for cause);
- Termination of spouse’s or ex-spouse’s employment (voluntary and non-voluntary);
- Employer’s discontinuation of contribution to the spouse’s, ex-spouse’s, or dependent’s insurance coverage (total contribution, not partial);
- Spouse’s or ex-spouse’s work hours reduced causing loss of eligibility for insurance coverage;
- Spouse maintaining coverage that has reached their lifetime maximum; or
- Loss of TennCare other than non-payment of premium

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- We have some great news to share regarding Special Qualifying Events (SQE). After careful review of HIPAA regulations, BA will allow employees with SQEs to choose between any medical plan option that they are eligible for, just as if they were a new employee or a newly eligible employee. In terms of enrollment, this includes carrier, network and plan design changes.
- As a reminder, the types of events listed only allow for special enrollment if the event results in (1) acquiring a new dependent, or (2) losing eligibility for other coverage. For example, divorce alone does not create a special enrollment opportunity. But if the divorce causes the employee to lose coverage under another plan, then the divorce is considered a SQE.

HIGHER EDUCATION QUESTIONS

- **Higher Ed:** Is that only for CDHP (Surgical Treatment Support Program)?
 - **Answer:** The program is available for both PPO and CDHP members enrolled with Cigna. Because of IRS rules, when we have an enhanced benefit program, eligible CDHP members must meet their deductibles prior to waiving any cost share for the program. PPO members do not have to meet the deductible or pay coinsurance if eligible for the program.
- **Higher Ed:** What's available (with Optum/HERE4TN) to help people who are working at home with children in school at home?
 - **Answer:** It would depend on what they need. We can take a broad approach and put together a flier and they can also call into HERE4TN and talk to a representative and find out what they might need at home. HERE4TN can connect and help them with customized resources at home, or we can work with you, the ABC, on an overall campaign for your employees. Maybe something like that could help with your employees with children at home.
- **Higher Ed:** Is there a way to highlight EAP and other services on the front of your webpage?
 - **Answer:** We looked at what we could update on the website and have added a slider (image that scrolls across the screen at the top) specific to EAP that an employee can click on for more information.
- **Higher Ed comment:** The (Optum/HERE4TN) webinars are great. Our agency has been using them and has requested more trainings in the last week.
 - FYI - here is a link to the Optum training catalog:
https://www.here4tn.com/content/dam/cex-consumer/state-of-tn/documents/SOT_Training_Catalog-Q1-2021.pdf
- **Higher Ed:** Once the HSA rollover finalizes, will employees still have access to their previous PayFlex transaction information?
 - **Answer:** The PayFlex portal will be available to members until December 31, 2022.

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- **Higher Ed:** In our agency there are sometimes admin errors that we make and sometimes by the department or the employee. Do they all have to put on this form and whose signature are applicable for them? For example, an employee was late turning in her form and the administrator was out due to COVID or other emergency so the employee was not able to get the paperwork in on time. In that instance the person responsible wrote the letter. An ABC sent it in and they wanted another signature from a manager, and we had to move her letter to a form. It was not an ABC error, it was a department error.
 - **Answer:** If it is an error that an ABC, staff member or department makes, then you will use this new admin error form. If it is an error an employee makes, then that should be submitted as an appeal. If you need to submit an admin error and a letter is provided, then you can attach the letter along with the form and reference the letter on the form. The new form is a fillable form only for new hires and signatures should be the ABC and their supervisor. We need these signatures to make sure your agency understands that these types of changes can impact your status as a Section 125 plan and compliance with Federal laws.
 - You can email Renee.Boles@tn.gov and Melissa.Wiseman@tn.gov with additional questions about the new hire admin error form.

- **Higher Ed:** Will you walk through an example of the change to 30 days for new hires?
 - **Answer:** For example, if hired on March 1, new employees/hires have 30 days from March 1 to make their enrollment selections by using ESS or for you to enter benefits selections through an eForm. So going forward, instead of 31 days to make their selections, they now have 30 days.

- **Higher Ed:** Why is the SSN being required? Isn't the Edison ID sufficient? Why is the (new) form necessary?
 - **Answer:** The Social Security number is the identifier that ties the form to the correct person in the system and that is why we require it. The form is necessary to make sure you understand that it is your agency's responsibility to comply with Section 125 cafeteria plan guidelines for admin errors for new hires.

- **Higher Ed:** Just to clarify, if we complete this new hire admin error form, do we still have to have an admin error letter like in the past as well? Or is the form all that is needed? Just want to make sure if both are needed or just the form.
 - **Answer:** If you have an admin letter from someone else, you can attach it with the form and reference it. However, you don't have to have a separate document as there is a freeform section that you can include additional information so you don't have to include a separate document.

- **Higher Ed:** When will the materials be updated?
 - **Answer:** They are being updated as we speak.

- **Higher Ed:** Can you remind us about the waiver of health insurance premiums for May 2021? Is that BlueCross BlueShield and Cigna?
 - **Answer:** Correct, for all medical insurance regardless of the carrier, we will have a month without premiums for State and Higher Education active employees. We will share more information as we get closer to that time.

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- **Higher Ed comment:** Thank you to Optum Bank for great customer service.
- **Higher Ed:** If people can go from one plan to another, are they still restricted to their Short-term Disability (STD) selection? If they have a qualifying event and they go from BlueCross to Cigna and change dental plans, can they switch between 14 to 30 calendar days?
 - **Answer:** A higher education employee who has a qualifying event may:
 - apply to enroll in STD, if not already enrolled. Approval through the MetLife medical underwriting process is required.
 - apply to change to a lower elimination period (30 to 14 days) if already enrolled. Approval through the MetLife medical underwriting process is required.
 - apply to change to a higher elimination period (14 to 30 days) without medical underwriting.

If the qualifying event results in a loss of other coverage, the loss must be specific to loss of other disability insurance.
Higher education employees should consult with their ABC regarding the separate Higher Education LTD plan that is not part of the State group insurance program.

LOCAL EDUCATION QUESTIONS

- **Local Ed Comment:** For Optum/Here4TN services needed - possibly posters for workrooms/lounges with quick information for services offered would be nice for teachers to have available. I know our employees just call me if there is a question they have or if they are in need of any help. Every time that you send out information, I pass that on to our employees.
 - Here is a link to Optum fliers and emails that you may share with your employees. We will work with Optum on posters for your use:
 - <https://cx.optum.com/content/cex-consumer/here4tn-etoolkit/en.html>
- **Local Ed:** Will BA tell us if this new administrative form is needed or what?
 - **Answer:** The new form should be used any time you have an administrative error for a new hire. If we need the form and you did not fill it out, we will reach out to you.
- **Local Ed:** What about a spouse picking up our employee on their open enrollment, can the employee cancel?
 - **Answer:** That reason is listed on the cancel request form. The employee will need to fill out the form and provide the required documents.
- **Local Ed:** Do you have any updates on the dental plan options for 2022? I believe MetLife extended their contract for 2021 but will they be replaced in 2022?
 - **Answer:** We are engaged in the RPF process right now. We will share information when we have it.

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- **Local Ed:** If a retiree elects to continue insurance at retirement and he/she currently has the spouse on the employee's active insurance, do we need to re-send in the required documents such as marriage certificate and proof of joint ownership with the retiree application?
 - **Answer:** No, you do not need to do that. When the dependent is already covered when active coverage ends and they continue onto retirement, additional information is not necessary.

- **Local Ed:** I know it's very early, however, have you heard any updates on increases on health premiums for 2022 yet?
 - **Answer:** No, we have not. As soon as we have more information we will share it.

- **Local Ed:** Who can I contact directly to talk with them about Optum Bank issues?
 - Answer:** ABC Phone: 800-294-6620
ABC Email: accountservices@optum.com
 - Member contact information:**
Phone: 866-600-4984
Email: service.tennessee@optum.com

- **Local Ed:** If the retiree did not cover their spouse/children on his/her health plan while employed, can they be added at the time of retirement?
 - **Answer:** If they are not covered at the time active employment ends, they can only add dependents to the policy if the retiree is still covered and dependents qualify via a special qualifying event or during the next Annual Enrollment.

- **Local Ed:** So they can't be added on the application to continue insurance at retirement form?
 - **Answer:** That is correct. If they are not already covered and they have a loss of coverage on a different plan, the retiree must apply via a special qualifying event on the change application.

- **Local Ed:** If a retiree chooses one tax option, I am sure they can change that sometime during the year, or am I wrong?
 - **Answer:** That is a question for the Tennessee Consolidated Retirement System (TCRS). They handle all things that deal with monetary pension benefits. We just handle the insurance portion of it.

- **Local Ed:** Do you mind covering the changes on the Special Enrollment Provision one more time please?
 - **Answer:** Due to HIPAA regulations, we will allow employees with special qualifying events (SQEs) to choose between any medical plan option that they are eligible for, just as if they were a new employee or a newly eligible employee. In terms of enrollment, this includes carrier, network and plan design changes.

- **Local Ed:** Is this (special enrollment provision) change effective now for the SQE?
 - **Answer:** Yes. It is effective now.

- **Local Ed:** I was under the impression that is how it was already?

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- **Answer:** Before, we were looking at employees acquiring new dependents and only allowing certain changes. Now, considering events that can lead to acquiring new dependents or loss of other coverage, we understand that people with special qualifying events (SQEs) can elect any medical option that they're eligible for, considering plan design, carriers and networks. Special enrollment opportunities are mandated by federal HIPAA portability regulations, and those regulations have not changed.
-

STATE QUESTIONS

- **State:** What is the difference between HSA and FSA?
 - **Answer:** Here are some key differences:
 - Enrollment:** You must be enrolled in the CDHP/HSA health plan (Consumer-driven Health Plan) in order to open an HSA. You may enroll in an FSA or L-FSA regardless of your health plan choice. Additionally, you do not have to be enrolled in a health plan to enroll in an FSA.
 - Carryover:** Any remaining balance in your HSA rolls over at the end of the year. You can only carry over a maximum of \$500 in your FSA or L-FSA at the end of the year. Any unused funds beyond the carryover amount of \$500 will be forfeited.
 - Annual Contribution Limits:** For HSA, the annual contribution limit is up to \$3,600 for employee only or up to \$7,200 for all other tiers. Members 55 or older can save an extra \$1,000 each year in an HSA. It's called a catch-up contribution. For the FSA or L-FSA, there is an annual contribution limit of \$2,750.
 - Funds Availability:** For HSA, only the amount of funds taken from your paycheck each pay period and any employer contributions that have been deposited into your HSA are available. Your full HSA pledge is not available for use at the beginning of the year, and you may only use the funds that have been deposited into your account. For the FSA or L-FSA, the full amount of funds that you pledge during the fall annual enrollment period are available on January 1 of the next year and may be used immediately.
 - **State:** What is changing with the Special Enrollment Provisions?
 - **Answer:** We are clarifying our understanding of the HIPAA regulations about special enrollments. There are no changes in the law, however, there has been some confusion, so we are clarifying the kind of changes that are allowed as the result of a special enrollment opportunity. Any medical plan choices that would be available as a new hire would be available to members under Special Enrollment Provisions.
 - **State:** Is Talkspace still available? Some people expressed a need for some support and I didn't know if I could mention they could utilize TalkSpace as an option?
 - **Answer:** Sanvello is free to all EAP-eligible employees, and Talkspace, as well as virtual visits, are available to all members with benefits. We have information about all of the programs on our website and fliers are in the [ABC/Marketing eToolkit](#).
-

LOCAL GOVERNMENT QUESTIONS

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- **Local Gov:** I'd like to hear some ways that we as management can provide some support or something verbal. We are working remotely now, so how can we pat our team members on the back, or what are some encouraging ways to improve morale?
 - **Answer:** We can look at a type of resource we could pull together that would allow to you send an email or notice to some employees or all employees regarding their performance or something else.

- **Local Gov:** I have several employees who are caregivers now due to their loved ones staying distant. Emotional support and information about the sandwich generation would be helpful.
 - **Answer:** Yes, we do have resources on the HERE4TN.com website and there is also a training specific to caregiver support – Caring for Elders. Here is a link to the leaders page on the HERE4TN website: <https://www.here4tn.com/content/cex-consumer/state-of-tn/en/leaders.html> - on this page you'll find a training catalog found here: https://www.here4tn.com/content/dam/cex-consumer/state-of-tn/documents/SOT_Training_Catalog-Q1-2021.pdf
 - Find Optum fliers and emails at: <https://cx.optum.com/content/cex-consumer/here4tn-etookit/en.html>

- **Local Gov:** Several years ago we elected to implement a full month waiting period for new employees. Does this new guideline (30-day new hire enrollment period) affect this? Example, if an employee begins working February 15 they become eligible for insurance April 1?
 - **Answer:** It does somewhat. In this case we would consider March 17 (30 days from February 15) to be their eligibility date, and that is the date that the 30 days start going forward from. So they now have 30 days from March 17 to submit their selections in ESS or for you to submit a benefit eForm. Employees no longer have 31 days to submit the enrollment.

- **Local Gov:** I ask this often, hoping the squeaky wheel will get greased. Will we ever have the opportunity to have our premium level reassessed? I ask because our employee demographics have changed drastically since first assessed. Hoping it will make a difference. Are we asked for information during the reassessment?
 - **Answer:** We are studying reassessment but we don't have any news to share. We don't know if there will be a reassessment. Since we have not made a decision we cannot give you any additional information right now.

- **Local Gov:** Will the 1095 information be available this year?
 - **Answer:** For the 2020 plan year, information is already available. Instructions on how to run your PPACA report for your employees is found on the [ABC page](#) of the website, under Training – here is the link:
https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/abc_run_ppaca.pdf

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Communications and Materials

• **Materials Updates**

- **Coronavirus Benefits and Vaccine Information Document:** We have made some updates to the [Coronavirus Benefits and Vaccine Information from Partners for Health](#) document found by clicking the yellow bar at the top of the [Partners for Health website](#). For your reference, the current version is dated Jan. 12, 2021, and includes the COVID vaccine informational flier (dated Dec. 23) followed by helpful benefits information for our members. We will share the updated version with this week's Friday ABC email. **Please continue to share the link and/or document with members.**

○ **State: #4Mind4Body Webinar: Connecting in Uncertain Times During COVID-19:**

In partnership with ActiveHealth and Optum, the #4Mind4Body webinar series continues with the first 2021 webinar, **Connecting in Uncertain Times During COVID-19**, being held Thursday, Jan. 14 from 11:30 a.m. – 12:30 p.m. CT.

- Employees can click the link in the flier we sent last Friday to register for upcoming sessions, or go to the [Partners EAP page](#) for more information. We also sent an email to state employees via Outlook Tuesday morning.

Connecting in Uncertain Times During COVID-19

- **Thursday, Jan. 14**
- **11:30 a.m. – 12:30 p.m. CT**

We are living in unprecedented times, which fosters worry and anxiety. Heightened worry and fear can only make trigger events even worse than they already are. When life gets tough, having someone to lean on is important. Being around a loved one or trusted friend is a big part of good health. Whether hanging out or talking on the phone, learn how being social is valuable.

- **Local Ed/Local Gov: Talk It Out Tuesday: Talk It Out Tuesday** is a phone-in program held the third Tuesday of the month, for three months, with January 19 being the last call in this series. This program offers employees an opportunity to boost their emotional well-being, get support and offer support to others.

The call can be joined anonymously and will be facilitated by a licensed Here4TN clinician, from our partner, Optum®. You can ask questions. Offer ideas. Or just join and listen. Just dial in and use the conference ID number on the date/time listed below.

Local Ed:

Call-in Information

- Dial In Number: 952-222-7450
- Phone Conference ID: 250 527 001#
 - **Tuesday, January 19**
 - **3:30 p.m. CT**
 - **No RSVP required**
 - **Stay for the whole session or come and go as needed**

Local Gov:

Call-in Information

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- Dial In Number: 952-222-7450
- Phone Conference ID: 420 476 566#
 - **Tuesday, January 19**
 - **11:30 a.m. CT**
 - **No RSVP required**
 - **Stay for the whole session or come and go as needed**

Benefits

- **Higher Education/State: HSA/FSA Reminders:**
 - State employees' \$250 or \$500 2021 seed funds have been added to their HSAs on Jan. 5, 2021.
 - All members should have received their FSA/HSA debit card by now and if they have not, they can call Optum Bank customer care at 866-600-4984.
 - On February 7, 2021, the HSA accounts of those members who elected to transfer (via our November survey) their HSA funds from PayFlex to Optum will be frozen and members will not be able to use the funds to pay a provider, pay a bill, or use their HSA debit card. Their HSA will remain frozen until the transfer process is complete the first week of March, and the HSA funds should be deposited into their Optum HSA by March 5.
 - HSA participants who did not respond to the survey or who said no to the transfer will have their HSA funds remain at PayFlex, and they will become responsible for the monthly account maintenance fee.
 - We cannot accept any additional member HSA transfer requests. If members did not respond to our survey and they now want to transfer their funds, they can complete the [Optum Bank HSA transfer request form](#) (located on the ABC webpage) and return it directly to PayFlex. Their funds will be moved earlier and outside of our bulk transfer process in February.

FSA

- PayFlex FSA and L-FSA debit cards were deactivated on Dec.31, 2020. Also, if an HSA member had a L-FSA “purse” on their PayFlex HSA debit card, that purse has been deactivated but the HSA portion will remain active through February 7, 2021. Members with any existing 2020 claims should file them with PayFlex as soon as possible in order to avoid losing any of their funds.
- **Local Ed/Local Gov: HSA Reminders:**
 - All members should have received their HSA debit card by now and if not, they can call Optum Bank customer care at 866-600-4984.
 - On February 7, 2021, the HSA accounts of those members who elected to transfer (via our November survey) their HSA funds from PayFlex to Optum will be frozen and members will not be able to use the funds to pay a provider, pay a bill, or use their HSA debit card. Their HSA will remain frozen until the transfer process is complete the first week of March and the HSA funds should be deposited into their Optum HSA by March 5.
 - HSA participants who did not respond to the survey or who said no to the transfer will have their HSA funds remain at PayFlex, and they will become responsible for the monthly account maintenance fee.
 - We cannot accept any additional member HSA transfer requests. If a member did not respond to our survey and they now want to transfer their funds, they can complete the

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[Optum Bank HSA transfer request form](#) (located on the ABC webpage) and return it directly to PayFlex. Their funds will be moved earlier and outside of our bulk transfer process in February.

- **Higher Ed/State: Wellness Program Presentation – 2021 Biometric Screenings and Website Updates:** Paige Turner gave an update about 2021 biometric screenings, and then Matt Berte with ActiveHealth went over website updates.

2021 Biometric Screenings:

- Given that the COVID numbers are still spiking and many offices remain closed, we have made the decision to not schedule large numbers of screening sites until later this summer and into the fall.
- Quest needs between 8-12 weeks, so Paige Turner will circle back in April to those ABCs who have previously held a screening to see if you have any interest in scheduling a site for later this year.
- If your office or campus is open and you want to schedule a screening for late spring or early summer, please send an email to paige.turner@tn.gov today. Paige will share that information with Matt Berte at ActiveHealth. Matt and Quest will start working on getting your site scheduled and listed on the Quest website for members to sign up.

Operations

- **New Hire Enrollment Period Change:**
 - New Hire enrollment period is changing from 31 days to 30 days, effective March 1
 - Applies to anyone hired March 1 or later
 - Employees will continue to have 60 days for special qualifying events (SQEs)
 - All materials will be updated by March 1
 - Make sure to update any materials you have created with this new information
- Benefits Administration is changing the new hire enrollment period from 31 days to 30 days effective March 1, 2021. We have been reviewing our plan documents and other program materials for consistency and to ensure compliance with Federal and state laws. We have concluded that the best practice is to require that the enrollment period should be no longer than 30 days.

The change will apply to anyone hired on March 1 or later. Current employees who become eligible for coverage due to a status change (for example, part-time to full-time) also have 30 days to submit changes, so this will be consistent. Employees adding or changing coverage due to a special qualifying event (SQE) (like acquiring a new dependent due to marriage or losing coverage under a spouse's plan because they terminated employment) will still have 60 days to submit the change request.

We will soon begin the process of updating all our materials, including the plan documents, the Partners for Health website, Zendesk, and our training materials. Please make sure to update any materials that you have with this information prior to March 1.

- **Service Center Metrics/Customer Service Rating:**
 - **December 2020:**
 - Tickets via Email: 1,017
 - Tickets via Self-Service: 3,142

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- Tickets via Phone: 5,167
- Tickets via Chat: 313
- Total: 9,639

- Satisfaction Score: 96.6%

- **December 2019:**
 - Tickets via Email: 978
 - Tickets via Self-Service: 3,603
 - Tickets via Phone: 5,100
 - Tickets via Chat: 283
 - Total: 9,964

 - Satisfaction Score: 96.4%
- The overall number of interactions was about the same this year as last December.
- We take the satisfaction of our customers very seriously and ask that you please complete the survey after your Zendesk ticket is resolved. One of our goals this year is for more ABCs to complete these surveys so that we can improve our service based on your feedback.
- If you respond with a “Bad” rating to your ticket, we will reach out to you to see how we can improve. Please rate the service you received from our service center, and not if you are unsatisfied with the policy.
- Our satisfaction rate for December was 96.6%.

HIGHER EDUCATION QUESTIONS

- **Higher Ed:** When will money for the FSA be transferred?
 - **Answer:** PayFlex will begin the process of transferring any rollover funds (\$500 or less) to Optum Bank after April 30. Those funds will be available by July 1.
- **Higher Ed:** We had several employees call to tell us they were not able to get their wellness exams until December due to COVID. Will those be honored?
 - **Answer:** We now have a lookback period that was approved by the Insurance Committee. So if anyone completed a screening, whether it was an annual visit or preventive screening, in December it will count toward 2021, not toward 2020, but it will count as an incentivized activity.

LOCAL EDUCATION QUESTIONS

- **Local Ed:** How will the money that has been invested with PayFlex be transferred to Optum?
 - **Answer:** The HSA investment funds will be liquidated and transferred with the HSA balance. The funds will be available in members’ HSA Optum accounts hopefully by March 5, 2021. They may reinvest their funds through Optum Bank if they have a minimum balance of \$1,000.

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- **Local Ed:** Is there a PayFlex fee for those who transferred to the Optum Bank HSA for the months of January and February?
 - **Answer:** Members who responded “yes” to the survey allowing their HSA funds to be transferred to Optum Bank will not be charged an account maintenance fee by PayFlex.

- **Local Ed:** I uploaded the January HSA money to Optum Bank, but it has not shown up on their account yet. Will that be in February as well?
 - **Answer:** Please contact Optum Bank for assistance with this issue. ABCs may contact Optum at accountservices@optum.com or 800.294.6620 for any questions regarding your payroll contributions.

- **Local Ed:** Does Optum have a minimum of \$1,000 before investing like PayFlex?
 - **Answer:** Yes, Optum also has a minimum balance requirement of \$1,000 before investing funds.

- **Local Ed:** My employees are not able to access their accounts after receiving cards. Can you speak a bit about that issue?
 - **Answer:** Please contact Optum Bank for assistance. Local education and local government ABCs may contact Optum at accountservices@optum.com or 800.294.6620 for any questions regarding your payroll contributions. Members should call Optum Customer Care at 866-600-4984. (State and higher education ABCs should contact Nicole Jardine at nicole.jardine@optum.com, or at 763-361-6087.)

- **Local Ed:** Would we still key the 1st (day of the month) in Edison for coverage to start on the first of the next month?
 - **Answer:** Yes, the coverage begin dates in relation to the hire or eligibility dates will stay the same. This new enrollment period changes just the amount of time they have to submit their enrollment in ESS or submit their paperwork for you to key the eForm.

- **Local Ed:** Is the contact information for Optum Bank account services for just the ABCs or is it for employees as well?
 - **Answer:** It is just for ABCs. Members can call the number found on the back of their debit cards and contact information is also found on the Partners website [under Customer Service](#).

- **Local Ed:** Is it allowable for an employee to drop medical coverage after experiencing a divorce? I have an employee who becomes the ex-spouse. For it to be allowable, would they have to prove they have attained coverage elsewhere, possibly if they are young enough to still be their parent’s coverage?
 - **Answer:** Yes, if an employee wishes to drop his/her coverage due to divorce, he/she would need to submit a copy of the final divorce decree and show proof of becoming newly eligible for coverage under another plan. An employee just requesting to drop a dependent spouse due to divorce would only need to provide a copy of the final divorce decree showing that the spouse has become ineligible. Refer to the Insurance Cancel Application on the ParTNers for Health website under

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publications and forms, https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/1047_2020.pdf

- **Local Ed:** If an employee is adding a new spouse, can they change plans, (example: from Standard PPO to Premier PPO)?
 - **Answer:** Yes, acquiring a new spouse is a special qualifying event (SQE). The employee can change plan options (like Standard to Premier). HIPAA provisions allow employees with SQEs to change to any different healthcare option, carrier and/or network for which they are eligible. Refer to the Enrollment Change Application on the ParTNers for Health website under publications and forms, https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/1043_2020.pdf

STATE QUESTIONS

- **State:** What happens to FSA funds at the end of 2020. Do they transfer to Optum?
 - **Answer:** PayFlex will begin the process of transferring any rollover funds (\$500 or less) on the medical FSA and the limited purpose FSA to Optum Bank after April 30. Those funds will be available by July 1. The dependent care FSA does not have a carryover provision; members should file their 2020 claims with PayFlex no later than April 30, 2021.
- **State:** What date will the ActiveHealth website changes be effective?
 - **Answer:** They were effective 1/1/21.
- **State:** Will the new hire PowerPoint change or do we just tell them of the change?
 - **Answer:** Yes, it will change. We will be updating all of the materials with the new date change, including the new hire PowerPoint. We are working on updating materials now, and will notify you as guides and PPTs are posted.
- **State:** I get confused when coverage ends after someone resigns or terminates?
 - **Answer:** Coverage for state employees ends at the end of the month in which the employee resigns or terminates. The only exception is if the termination is entered in Edison after the payroll confirms for the end of the month check and the deduction has already been taken for the next month's premiums. Then the benefits are extended for an extra month.

LOCAL GOVERNMENT QUESTIONS

- **Local Gov:** Do we still continue to send employee contributions during the frozen period?
 - **Answer:** You would send employee contributions to Optum Bank, but do not send any contributions to PayFlex. If you are funding employee accounts with either employer seed funds or employee payroll contributions, you will need to fill out and submit back to Optum Bank the [HSA Funding Information Form](#), which can also be found on the ParTNers for Health website under the [ABC webpage](#). This form will need to be on file prior to you submitting contributions to Optum to ensure that Optum has your banking information in order to fund accounts appropriately.

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- **Local Gov:** I am a new ABC, and I still have not received new insurance cards but have received prescription cards. What do I need to do?
 - **Answer:** For medical, you can log on to your online account and print a temporary card or order a replacement card or you can contact the insurance carrier directly. Here is the contact information for BlueCross and Cigna:
 - BlueCross BlueShield of Tennessee
800.558.6213
Monday - Friday, 7 - 5 CT
bcbst.com/members/tn_state/
 - Cigna
800.997.1617
24/7
cigna.com/stateoftn
 - You can also contact the Benefits Administration Service Center, give us your name and Edison ID number and we will make sure your address is correct and request that the vendor(s) send you a temporary card and a replacement card.
 - For many of our other vendors, you can also print a temporary card from their websites or access your card information from their mobile apps. You can also always contact vendors directly, and you will find their contact information on the [Partners Customer Service page](#).
- **Local Gov:** Did the insurance companies send out new insurance cards whether you made changes or not?
 - **Answer:** You would not have received a new card unless you had a change. For medical coverage, this would include if you changed your carrier or plan option, such as changing from the Premier to the Standard PPO. For dental and vision, the same applies; members only received new cards if they enrolled in new coverage or made a change. However, all Local CDHP/HSA members will get a new debit card from Optum Bank.

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Communications

- **Materials and Communications Updates**
 - **ABC Conference Calls:** Our regular monthly calls resume today and will continue the second Tuesday of every month at this same time. We'll email and post the 2022 ABC conference call schedule soon.
 - **State: Materials Update – Flexible Benefits Form:** This was included in a Friday ABC email. The flexible benefits enrollment form for 2022 medical, limited purpose and dependent care FSAs has been updated. You'll find the link on the ParTNers website under Forms, Flexible Benefits Enrollment. If you need a copy of the 2021 form, contact Peggy Birthrong at peggy.x.birthrong@tn.gov.
 - **Higher Ed/Local Ed/Local Gov:** This was included in the last ABC email but state offices and the BA Service Center were closed this Thursday, Nov. 11, for the Veterans Day holiday.
- **Higher Ed/ State:** In partnership with Optum, we will hold a second finance webinar, **The Financial Wellness Playbook, Wednesday, Dec. 8, from 11:30 a.m. to 12:30 p.m. CT.** We've included a flyer with the Friday ABC email. Here is information about the session:
 - This class shares the 10 habits most people practice when they have little financial stress in their lives. The MSA coaching staff has conducted over a million financial consultations, and the most experienced coaches were interviewed to develop this list of ten habits. The goal is for attendees to take pride in the habits they are practicing well, and to develop an action plan to address the habits they would like to improve.
 - View a recording of the webinar, after it is completed, at Here4TN.com.
 - Go to Member Benefits > click the "Financial Webinars" button.
 - **State:** We'll also send out an all-state employee email prior to the webinar with a direct link for employees to register.
- **State: 4Mind4Body Webinar – Cold Weather Exercise & Stretching, Wednesday, Nov. 17:** ActiveHealth Management will present the next 4Mind4Body webinar, **Cold Weather Exercise & Stretching.** The session will be held **Wednesday, Nov. 17, from 11:30 a.m. to 12:30 p.m. CT.** We'll send this information below to all employees by email and send to you to share with the Friday ABC email. Information is found, along with the flyer we have been sharing about this series on our EAP webpage:

Don't let cold weather slow you down. You don't have to stop being active when the weather turns cold. You just have to prepare for it. As a country, we sit a lot – whether it's at work or getting around. This, plus the cold weather, can affect our bodies over time. We'll go over some stretches you can do while sitting or standing. Are you ready to get up and get moving? Join us!

Click the link to register:

<https://tn.webex.com/tn/onstage/g.php?MTID=e969ffb673e55eacbe4795c8847b4d280>

Registration is required. Session will **not** be recorded. If Internet Explorer doesn't work for you to register, you may need to try a different browser.

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Questions? Employees can email partners.wellness@tn.gov

- **Higher Ed/State: Cigna DHMO Website: cigna.com/stateoftn**
 - On this website, members can view dental network information specific to the State of Tennessee dental plan administered by Cigna.
 - To do this, users are required to sign in with a specific User ID and Password. (User ID = Dhmo01; Password = Stateoftn@1)
 - **Reminders**
 - Once a user is signed in, he/she is able to navigate to the profile information of this account by clicking “My Sot Dhmo” in the upper right-hand corner.
 - It is not necessary for members to access this page.
 - However, if employees end up on this page, please remind them to never enter their emails and/or phone numbers into this account.
 - **What’s Changed**
 - When a user views this account’s information, he/she will see new entries for **Email Addresses and Phone Numbers.**
 - Email Addresses include [do not enter your email@mail.com](mailto:do_not_enter_your_email@mail.com) and Thelma.ramos@cigna.com
 - Phone Numbers include (999) 999-9999 and (615) 504-8314.
 - Please advise employees that this information should not be changed.

Operations

- **Dependent Eligibility Plan Document Changes (PowerPoint slides are included with today’s email):**

In the October Insurance Committee meeting, the committee members voted to change the dependent eligibility requirements to define eligibility more clearly for dependents other than spouses and children of employees. These changes will go into effect Jan. 1, 2022.

The stepchild requirements were changed to remove the criteria of “providing care and support” to make it clear all stepchildren are eligible and no other documentation is needed.

The section describing dependents not eligible for coverage was updated to reflect that “foster children” are specifically children in the care, custody, or guardianship of the Tennessee Dept. of Children’s Services or equivalent placement agency, who are placed with the head of contract for temporary or long-term foster care, but not including a person who is placed with the head of contract for purposes of adoption.

The third change to the language is about dependents under age 26 who are placed with the head of contract by a valid order of guardianship. This language was expanded to include valid orders of custody or conservatorship in addition to legal guardianship. Language was also added to require a certification upon enrollment and upon request.

The certification (or attestation as we also call it) for dependents under age 18 requires employees to certify that the placement order is still in effect and has not expired or been terminated, and that the employee will notify BA immediately when the placement order terminates or expires.

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The certification for dependents age 18-25 is a little different. For these dependents, the employee must meet additional criteria:

- The employee and the person must have a specific type of relationship, including **one** of the following:
 - The dependent must be a descendant of a son/daughter, stepson/stepdaughter of the employee, **or**
 - The dependent must be a brother/sister, half-brother/half-sister, stepbrother/stepsister, son/daughter-in-law, brother/sister-in-law, or niece/nephew of the employee, **or**
 - The dependent must live in the same house as the employee.
- Additionally, the employee must provide over half of the dependent's financial support for the calendar year, **and**
- The dependent must be a U.S. citizen, a U.S. national, or a resident of the U.S., Mexico, or Canada.

As we mentioned in prior ABC emails, we have communicated the new requirements to the employees who have dependents between 18 and 25 that fall into one of these court-ordered categories. We mailed them a letter and a copy of the certification/attestation to return. They must fill this out and return it with a copy of the most recent court order by Dec. 1. If the documentation is not provided, then the dependents will be removed from coverage effective March 31, 2022.

You may also have employees who have dependents that are now eligible for coverage under these new guidelines that were not previously eligible. Specifically, custody orders were not an eligible category prior to this plan document change. We shared documents with you on Monday, Nov. 1, and asked you to share the information with all your employees. We want to make sure everyone who has a dependent in one of these categories is aware they now may be eligible. If you haven't shared this information yet, please do so as soon as possible. The employees have until Dec. 1 to submit an enrollment change application with a copy of the court order and the appropriate certification. If we don't receive the enrollment request with the documentation by Dec. 1, then the employee will have to wait until Annual Enrollment next fall to add the dependent, unless they experience a special qualifying event during the year.

We will also be reviewing all the dependents on the plan under legal guardianship who are under age 18 next year. We will let you know when we will be reaching out to them to provide this additional documentation to return. We are also developing a process to identify and contact the employees who will have dependents turning 18 next year. We will reach out to them to request this new documentation so that the dependents can stay on the plan if they are still eligible under the new requirements.

Other important things to note:

- Employees do not have to submit this documentation for children or stepchildren. This only applies to dependents placed with the employee through a court order.
- Employees do not need to provide proof that the dependent is on their tax return. All we need is a copy of the court order and the signed certification.
- If the order terminates or expires, and the employee fails to notify BA, then the certifications state that if claims were paid on behalf of the dependent the employee will be responsible for reimbursing the state for all amounts paid.

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- The placement order must be signed by a judge.
- Pending adoption papers from an adoption agency are not acceptable documentation. A signed court order must be provided.
- Employees can't add anyone on the plan that just meets the relationship requirements. They must also have a court order or expired court order if over 18.
- Court orders in Tennessee generally expire at age 18. Even if an expiration date isn't specified in the order, the order is still considered expired once the dependent turns 18 and the head of contract must turn in the certification for post-18 dependents.
- We do not need the certification for children enrolled due to a Medical Support Order.

- **Annual Enrollment Appeals**
 - Deadline to appeal is Dec. 1
 - Submit written appeal with details on why deadline was missed to benefits.administration@tn.gov
 - Also submit enrollment change form and dependent verification (if applicable)

- **Service Center Metrics/Customer Service Rating**
 - **October 2021:**
 - Tickets via Email: 1,479
 - Tickets via Self-Service: 6,206
 - Tickets via Phone: 9,154
 - Tickets via Chat: 722
 - Total: 17,561

 - Satisfaction Score: 94.9%

 - **October 2020:**
 - Tickets via Email: 1,414
 - Tickets via Self-Service: 5,937
 - Tickets via Phone: 9,140
 - Tickets via Chat: 966
 - Total: 17,457

 - Satisfaction Score: 95.6%

 - We had a busy October again and were really neck and neck with very similar numbers this year as compared to last year.
 - We take the satisfaction of our customers seriously and ask that you please complete the Zendesk survey after your ticket is resolved. Our goal this year is to continue to have more of you complete the surveys so that we can take your feedback and improve your customer experience.
 - If you respond with a "Bad" rating to your ticket, we'll reach out to you to see how we can improve.
 - Our satisfaction rate for October was 94.9%.

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HIGHER EDUCATION QUESTIONS

- **Higher Ed:** When will the Annual Enrollment Premiums Due Report be ready?
 - **Answer:** We have not finalized the payroll calendar for the month of December yet. It is typically finalized the third or the fourth working day of December. We will finalize and post the calendar as soon as we can.

- **Higher Ed:** We had an employee who had her spouse in her 2006 coverage and during annual enrollment in 2011, she dropped the coverage and the spouse was not covered. We recently got a lot of notices about removing the dependent and they said they needed the divorce decree and the Insurance Cancel Request form. We are not sure about the Insurance Cancel Request form? Is this because we are submitting the divorce decree because the ex-spouse hasn't been on coverage since 2011? I have to go back to the employee and request this and she has not added her second spouse. We are trying to figure out if we would need a cancel form if he didn't have coverage to begin with? I do have a copy of the divorce decree, and I have the new marriage certificate on file. The employee is now trying to add the new spouse.
 - **Answer:** We should only be asking for the divorce decree since this is more than a year old. We don't need the Insurance Cancel Request form and will clarify this internally with our staff. Please submit the divorce decree, and we will take care of this for you. To add the new spouse, we will need an appeal letter and the new marriage certificate.

- **Higher Ed:** I had a few employees state they did not receive the short-term disability Statement of Health for Annual Enrollment. I called BA last week and was told MetLife was late in sending out the SOH. Was the deadline extended past Nov. 5 since MetLife was late?
 - **Answer:** The deadline has been extended to Dec. 10. This decision was made this week, and we had not relayed this information yet. Information is also included in this week's email.

- **Higher Ed:** If the employee didn't receive the short-term disability statement, should they call MetLife to request it or BA? How long should they give it?
 - **Answer:** The SOH was mailed Oct. 29 and Oct. 30, so please give it two business weeks to receive the form. If members have questions, they can call MetLife at 855.700.8000 to have a SOH sent to them.

- **Higher Ed:** Many of the reports only have the Edison ID number to cross reference in our system. We don't use the Edison number. Are they still looking at updating with the Edison and SSN to omit this extra step for us because some of the reports for Annual Enrollment and general use still only have the Edison ID?
 - **Answer:** We are still working on updating those queries and those reports. If you have a specific report to which you would like for us to add the Social Security number, please put in a Zendesk ticket so we can make sure it is on our list.

- **Higher Ed:** I'm new to the benefits field and am wondering about the 401(k) plan forms that TCRS legacy plan holders filled out upon employment with the university. Are

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these forms still necessary? Do new hires who are in the legacy plan already have accounts with Empower where they can select 401(k) elections?

- **Answer:** Benefits Administration doesn't handle enrollments in the 401(k) plan. We recommend you reach out to the Tennessee Consolidated Retirement System, or TCRS at TCRS.CustomerSupport@tn.gov or 800.922.7772 (Main line) Empower Call Center.

LOCAL EDUCATION QUESTIONS

- **Local Ed:** Does the new dependent eligibility for custody orders include temporary custody orders? Also, what if the child is currently on TennCare?
 - **Answer:** The new dependent eligibility does include temporary custody orders and this is why we have the employee sign the attestation agreeing to let us know if the court order is no longer in place. If the dependent is on TennCare, the dependent should be able to join our plan as long as they meet the eligibility criteria.
- **Local Ed:** Concerning annual enrollment period changes, is report TN_BA219_AETP_INS_ELECTIONS the best report to capture changes?
 - **Answer:** Yes, it will have all of the changes on it made through Employee Self Service or ESS, Benefits eForm and also the medical plan codes changes.
- **Local Ed:** Will we be notified if appeals are granted by BA and changes have to be made or should we rely on the 219 (TN_BA219_AETP_INS_ELECTIONS) report?
 - **Answer:** Yes, you will be copied on the Zendesk ticket letting the member know if the appeal is approved or denied. You can also check for a note in Edison.
- **Local Ed:** When will the 219 report be completed?
 - **Answer:** We are still processing the dependent verifications for new dependents being added to coverage and processing appeals. We will finalize all new dependent verifications around Nov. 19; however, we will continue to accept appeals through Dec. 1. We will have additional changes. If there are additional changes that impact you, you will be notified.
- **Local Ed:** How do we know if an employee has submitted an appeal?
 - **Answer:** The ABC is copied when we respond to the employee's Zendesk ticket when we approve or deny the appeal.
- **Local Ed:** How long is the TN_BA219_AETP_INS_ELECTIONS query available to us?
 - **Answer:** Through the end of November.
- **Local Ed:** When will the 2022 Eligibility and Enrollment Guide be made available?
 - **Answer:** We are finalizing the guides and hope to post next week. We'll let you know in the ABC email when complete.
- **Local Ed:** Can the availability of the TN_BA219_AETP_INS_ELECTIONS query be extended into December?

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- **Answer:** No because it is looking at the effective date of the previous row in the system to identify changes, and we are only able to do this prior to Dec. 1.
 - **Local Ed:** When will the 2022 New Hire PowerPoint Presentation be ready?
 - **Answer:** We plan on posting it by the end of next week (Nov. 19).
 - **Local Ed:** We have not had any other changes with the (carrier) networks have we? The Cigna and Blue (networks) are what they were during the Annual Enrollment?
 - **Answer:** We have not had any additional network changes reported to us. The information that has been shared previously remains the same, but there are some changes from 2021 to 2022, so make sure that you look at the 2022 network information.
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STATE QUESTIONS

- **State:** This in no way affects incapacitated children over 18, correct?
 - **Answer:** Correct.
 - **State:** You said the employee has to be providing at least half the financial responsibility for the child? How do you validate that?
 - **Answer:** That's correct. If the dependent is between 18 and 25, the employee must be providing at least one-half of the financial support. They also need to meet the relationship requirement and citizenship requirement in that category. We are not requesting specific information to validate financial responsibility. This is why we are requiring the signed attestation where the employee is agreeing that everything is true on the attestation.
 - **State:** I have a new employee and I was not able to give them a 2022 Eligibility and Enrollment guide and provide them with the 2022 New Hire presentation. I had to use the 2021 presentation. Anyone who started as of yesterday through the end of the year, their insurance starts on Jan. 1 and the information is wrong.
 - **Answer:** BA is finalizing guides and presentations now. We should have them completed by the end of next week. We will notify ABCs when they are ready. The Annual Enrollment PowerPoints are still found on the [ABC webpage](#), and you can use these in the interim.
 - **State:** Do we have updated enrollment change forms with all four medical networks and Delta Dental choices?
 - **Answer:** Yes, the 2022 Enrollment Change form was posted prior to Annual Enrollment on the forms page and is also found on the ABC webpage. You can find it here: https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/1043_2021.pdf
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LOCAL GOVERNMENT QUESTIONS

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- **Local Gov:** Is there a way for us to know which employees the letters (dependent eligibility) were sent to?
 - **Answer:** This letter was sent to the approximately 300 heads of contract who received the other two previously sent letters, so most agencies won't have anyone in that category. You can run a query TN_BA354_MEDICAL_HOC_DEPS to locate members with legal guardians currently enrolled. It has all of the dependents on coverage, along with relationship type and date of birth.

- **Local Gov:** When will the 2022 Eligibility and Enrollment Guide be available? And the 2022 insurance books?
 - **Answer:** The 2022 Eligibility and Enrollment Guides should be available early next week, and we will alert you when they are posted. The member handbooks are typically available later during the month of November, and we will also let you know when these are posted.

- **Local Gov:** I had employee with claims denied for spouse due to name. The reason was a spouse's name was changed to the marriage certificate name and claims were coming with the married name. The spouse has been on plan for years. Is there an audit going on that caught this? I have submitted a Zendesk ticket and this has already been resolved. I'm just wondering if it will happen again for others. The Social Security card was required to validate the married name.
 - **Answer:** We are not doing any type of audit. The spouse will be enrolled based on what was submitted during enrollment. Unless a Social Security card is submitted reflecting the new name, the spouse will be added based on what is on the marriage certificate. We can only make name changes or corrections if a Social Security card is submitted, reflecting the name change. We do this to limit the number of Patient Protection and Affordable Care Act, or PPACA errors.

- **Local Gov:** When we enter a spouse, we use the married name but the marriage certificate has the maiden name. Should we always have the Social Security card to validate the married name?
 - **Answer:** Yes, that is correct. You should enter the spouse's name as it appears on the Social Security card, not the marriage certificate. If the Social Security card is not submitted, then the dependent should be added with name as shown on the marriage certificate.

- **Local Gov:** The certification of eligibility requirement only applies to those who have dependents who will be eligible for coverage starting on Jan. 1, 2022, correct? This does not affect anyone whose dependents are already enrolled and active in the plan prior to Jan. 1, 2022?
 - **Answer:** It currently impacts any dependents coming on to coverage and those already age 18. Next year, we will reach out to those dependents turning 18 to get post-18 certification for those dependents, and for those not yet turning 18 to get the pre-18 certification.