ANNUAL ENROLLMENT FOR 2019 BENEFITS

Oct. 1- Oct. 26, 2018, at 4:30 p.m. Central time

It’s About Time ... to Enroll!

This year, Benefits Administration is mailing this annual enrollment newsletter, instead of a decision guide. This newsletter highlights important information. You can find full details, including comparison charts for health, dental and vision plans, on our website at tn.gov/partnersforhealth.

Your annual chance to …

• Choose or update your benefits for 2019. Changes will be effective Jan. 1, 2019.
• Enroll or re-enroll in a health savings account (HSA) if enrolled in the Local CDHP/HSA.
  » HSA details are on page 2.

Important 2019 updates

Networks and benefits may change and impact you. So even if you don’t make any changes, it’s a good idea to review your enrollment each year. If you don’t make changes, your current enrollment selections will stay the same.

• Health insurance premiums will increase by 2.5%. See page 3 for details.
• Same health plans as last year—Premier PPO, Standard PPO, Limited PPO, Local Consumer-driven Health Plan/Health Savings Account (CDHP/HSA).

• Same network options—BlueCross BlueShield Network S, Cigna LocalPlus, Cigna Open Access Plus (OAP). See page 3 for details.

• Copays, coinsurance and deductibles are staying the same for all plans, except the Limited PPO—deductibles and maximum out-of-pocket will increase. Also in the Limited PPO, there will no longer be a $100 pharmacy deductible.

• Other benefits premiums:
  » Cigna DHMO (prepaid) dental plan – no premium increase.
  » MetLife DPPO dental plan – premiums will increase 2%.
  » Davis Vision plans – no premium increases.
• Please see CDHP/HSA and FSA restrictions on page 6.

Email
If you give us your email address in Edison, we may email you important information in 2019.

Join a Webinar ...

Join a Webinar ... to learn more about 2019 benefits:
Thursday, Sept. 27: 10-11 a.m.
Thursday, Oct. 4: 1-2 p.m.
Wednesday, Oct. 10: 3:30-4:30 p.m.
Thursday, Oct. 18: 10-11 a.m.
Wednesday, Oct. 24: 3:30-4:30 p.m.
All Central time.
See page 2 for instructions.

Premiums

To see all premiums, go to tn.gov/partnersforhealth/insurance-premiums.html

Follow us on Social Media

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Instagram  YouTube

Learn more: tn.gov/partnersforhealth | Enroll online: www.edison.tn.gov | Page 1
New!

**Medical benefit improvements**

- **Physical therapy benefit (if enrolled in a PPO plan)** - You no longer have to meet your deductible first for physical therapy, occupational therapy and speech therapy that is in-network and outpatient. You will only have to pay coinsurance.

- **Cardiac rehab benefit** - PPO members will not pay any costs for in-network, outpatient cardiac rehab. Local CDHP/HSA members must meet the deductible first before the coinsurance is waived.

- **Bone anchored hearing devices** will be covered when deemed medically necessary (subject to plan benefits).

- Members won’t have to pay for specific medications used to treat opioid dependency. Learn more at [tn.gov/partnersforhealth](http://tn.gov/partnersforhealth) under Health Options and Pharmacy.

**What you Need to do:**

- **Enroll or make changes online in Edison (unless otherwise noted):**
  - [www.edison.tn.gov](http://www.edison.tn.gov)

- **Watch videos for help - how to enroll or change your Edison password.**
  - On the [tn.gov/partnersforhealth](http://tn.gov/partnersforhealth) homepage – click the Video link at the top.

- **Enrolling new dependents?** We need documents to prove their relationship to you.
  - A list of required documents is found at [tn.gov/partnersforhealth](http://tn.gov/partnersforhealth) under Publications, and Forms.
  - Upload documents in Edison or fax to 615.741.8196.
  - Dependent documents deadline is Oct. 26.

**We can Help you!**

Go to [tn.gov/partnersforhealth](http://tn.gov/partnersforhealth). Here you’ll find:

- Videos about your benefits.
- A questions button to our help desk: [https://benefitssupport.tn.gov/hc/en-us](https://benefitssupport.tn.gov/hc/en-us)
- A help button to chat live with an agent.

- **Join an employee webinar:**
  - Dates and times are on page 1.
  - Go to [tn.gov/partnersforhealth](http://tn.gov/partnersforhealth) and click on the Annual Enrollment page. Scroll down for instructions.

- **Call Benefits Administration** at 800.253.9981, M-F, 8 a.m. to 4:30 p.m. Central time.

**Benefits: We’ve got you Covered!**

Health plans offered (a summary of costs is on page 4): With all plans, you won’t pay anything for in-network preventive care.

- **Premier PPO:** Higher premiums - but lower out-of-pocket costs for deductibles, copays and coinsurance.

- **Standard PPO:** Lower premiums than the Premier PPO - but you’ll pay more out-of-pocket for deductibles, copays and coinsurance.

- **Limited PPO:** Lower premiums than the other PPOs – but you’ll pay more out-of-pocket for deductibles, copays and coinsurance compared to the other PPOs.

- **Local CDHP/HSA:** Lowest premiums – but you pay your deductible first before the plan pays anything for most services, and then you pay coinsurance, not copays.
  - A health savings account or HSA can help you save for your healthcare now and in the future, and it offers tax benefits.
  - Take the savings from your lower premium and put them in your HSA to cover your deductible! Your HSA balance carries over each year.

- **HSA IRS maximum contributions** - the 2019 amount is increasing:
  - $3,500 for employee only coverage.
  - $7,000 for all other tiers.
  - Members 55 or older can contribute $1,000 more each year.

**Need help with Edison?**

Visit [www.tn.gov/partnersforhealth](http://www.tn.gov/partnersforhealth) and click on Videos. You’ll find four Edison “how-to” videos: Retrieve your Edison ID, Log in to Edison for the first time, Reset your Edison password and Select/enroll in benefits in Edison.
**Important!** Local education employees who enroll in the Local CDHP need to check with your employers to see if they allow you to contribute to your HSA through payroll deduction. You may need to update this amount each year. You would provide this amount to your employer.

**Carrier networks**
Choose a network of providers (doctors, hospitals, facilities) for your medical care. Network choices are the same as last year, but the providers in each network can change. Check your providers—are they in the network for 2019? Once you make a choice, you are in this network for the year.

- **BlueCross BlueShield (BCBST) Network S**
- **Cigna LocalPlus (LP)**
- **Cigna Open Access Plus (OAP)** is a larger network. You have a choice of more providers, but you pay more each month. Monthly $40/$80 surcharge is included in the premium.

To find out if your doctor and hospital are in a network go to [tn.gov/partnersforhealth](http://tn.gov/partnersforhealth) and click on Health Options and Carrier Information. Or, contact the carrier.

Contact: **BCBST**, 800.558.6213, M-F, 7 a.m. to 5 p.m., [bcbst.com/members/tn_state](http://bcbst.com/members/tn_state)

Contact: **Cigna**, 800.997.1617, 24/7, [cigna.com/stateoftn](http://cigna.com/stateoftn)

**Pharmacy**
All of our health plans include comprehensive prescription drug benefits.

- The health plan you choose will determine your out-of-pocket prescription costs.

Find more information about benefits, vaccines and available discounts at [tn.gov/partnersforhealth](http://tn.gov/partnersforhealth) under Health Options and Pharmacy.

Contact: **CVS/caremark**, 877.522.8679, 24/7, [info.caremark.com/stateoftn](http://info.caremark.com/stateoftn)

**Telehealth**
You can talk to a doctor for a non-emergency visit by phone or computer from anywhere, at any time at a lower cost than a typical office visit.

**You must pre-register with your carrier, BCBST or Cigna.**
Find more information at [tn.gov/partnersforhealth](http://tn.gov/partnersforhealth) under Health Options and Telehealth.

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### Monthly Health Premiums

<table>
<thead>
<tr>
<th></th>
<th>BCBS &amp; CIGNA Local Plus</th>
<th>CIGNA Open Access</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Premier PPO</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employee Only</td>
<td>$627</td>
<td>$667</td>
</tr>
<tr>
<td>Employee + Child(ren)</td>
<td>$1,034</td>
<td>$1,074</td>
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<tr>
<td>Employee + Spouse</td>
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<td>$1,710</td>
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<tr>
<td>Employee + Child(ren)</td>
<td>$969</td>
<td>$1,009</td>
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<tr>
<td>Employee + Spouse</td>
<td>$1,146</td>
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<tr>
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<td>$1,606</td>
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<td><strong>Limited PPO</strong></td>
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<td>$537</td>
<td>$577</td>
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<tr>
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<td>$925</td>
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<td>Employee + Spouse</td>
<td>$1,047</td>
<td>$1,127</td>
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<tr>
<td>Employee + Spouse + Child(ren)</td>
<td>$1,395</td>
<td>$1,475</td>
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<tr>
<td><strong>Local CDHP/HSA</strong></td>
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<tr>
<td>Employee Only</td>
<td>$456</td>
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<tr>
<td>Employee + Child(ren)</td>
<td>$751</td>
<td>$791</td>
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<tr>
<td>Employee + Spouse</td>
<td>$889</td>
<td>$969</td>
</tr>
<tr>
<td>Employee + Spouse + Child(ren)</td>
<td>$1,184</td>
<td>$1,264</td>
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</tbody>
</table>

The premium amounts shown reflect the total monthly premium. Please see your agency benefits coordinator for your monthly deduction, the state’s contribution and your employer’s contribution, if applicable.

Premiums charts, including COBRA, are found at [tn.gov/partnersforhealth](http://tn.gov/partnersforhealth) on the Premiums page. Click on Premiums in the top navigation.

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### Health Plan Cost Sharing Comparison

<table>
<thead>
<tr>
<th>PLAN</th>
<th>COPAYS</th>
<th>COINSURANCE</th>
<th>DEDUCTIBLE</th>
<th>Maximum Out-Of-Pocket</th>
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</thead>
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<tr>
<td>Premier PPO</td>
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<td>Lowest</td>
<td>Lowest</td>
<td>Lowest</td>
</tr>
<tr>
<td>Standard PPO</td>
<td>Mid-range</td>
<td>Mid-range</td>
<td>Mid-range</td>
<td>Mid-range</td>
</tr>
<tr>
<td>Limited PPO</td>
<td>Highest</td>
<td>Highest</td>
<td>Mid-range</td>
<td>Highest</td>
</tr>
<tr>
<td>Local CDHP/HSA</td>
<td>N/A</td>
<td>Highest</td>
<td>Highest</td>
<td>Mid-range</td>
</tr>
</tbody>
</table>

Employee premiums vary by employer. To make a full cost comparison, you will need to check your premiums with your employer.

Learn more: [tn.gov/partnersforhealth](http://tn.gov/partnersforhealth) | Enroll online: [www.edison.tn.gov](http://www.edison.tn.gov) | Page 3
Behavioral health – managed by Optum (not BCBST or Cigna)

All health plan members and enrolled dependents have access to the same behavioral health and substance use disorder services. Optum can help:

- Find a provider (in person or Virtual Visits)
- Explain your benefits
- Identify the best treatment options
- Schedule an appointment
- Answer questions

Find more information at [tn.gov/partnersforhealth](https://tn.gov/partnersforhealth) under Health Options and Behavioral Health.

To access all programs and services, including help finding a provider, contact: Optum at 855.HERE4TN (855.437.3486), 24/7, or [HERE4TN.com](http://HERE4TN.com).

Employee Assistance Program (EAP) – managed by Optum

EAP services are available to all enrolled health plan members and eligible dependents – even if your dependents are not enrolled in a health plan. COBRA participants are also eligible.

- Get five EAP counseling visits, per problem, per year at no cost to you.
- A new telephonic coaching program called Take Charge at Work helps people dealing with stress or depression. It’s available at no additional cost for those who qualify.

Find more information at [tn.gov/partnersforhealth](https://tn.gov/partnersforhealth) on the EAP webpage under Other Benefits.

To access all EAP programs and services, including help finding a provider, contact: Optum at 855.HERE4TN (855.437.3486), 24/7, or [HERE4TN.com](http://HERE4TN.com).

<table>
<thead>
<tr>
<th>IN-NETWORK 2019 HEALTH PLAN COMPARISON</th>
<th>Premier PPO</th>
<th>Standard PPO</th>
<th>Limited PPO</th>
<th>Local CDHP/HSA</th>
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</thead>
<tbody>
<tr>
<td>Your Costs for Covered Services</td>
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<tr>
<td>Annual Deductible</td>
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</tr>
<tr>
<td>Emp only</td>
<td>$500</td>
<td>$1,000</td>
<td>$1,800</td>
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<tr>
<td>Emp + Child(ren)</td>
<td>$750</td>
<td>$1,500</td>
<td>$2,500</td>
<td>$4,000</td>
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<tr>
<td>Emp + Spouse</td>
<td>$1,000</td>
<td>$2,000</td>
<td>$2,800</td>
<td>$4,000</td>
</tr>
<tr>
<td>Emp + Spouse + Child(ren)</td>
<td>$1,250</td>
<td>$2,500</td>
<td>$3,600</td>
<td>$4,000</td>
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<tr>
<td>Maximum Out-of-Pocket</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Emp only</td>
<td>$3,600</td>
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<td>$6,800</td>
<td>$5,000</td>
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<tr>
<td>Emp + Child(ren)</td>
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<td>$10,000</td>
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<tr>
<td>Emp + Spouse</td>
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<td>$8,000</td>
<td>$13,600</td>
<td>$10,000</td>
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<tr>
<td>Emp + Spouse + Child(ren)</td>
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<td>$10,000</td>
<td>$13,600</td>
<td>$10,000</td>
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<tr>
<td>Preventive Care</td>
<td>No charge</td>
<td>No charge</td>
<td>No charge</td>
<td>No charge</td>
</tr>
<tr>
<td>Primary Care/Convenience Care</td>
<td>$25 copay</td>
<td>$30 copay</td>
<td>$35 copay</td>
<td>30% coinsurance after deductible</td>
</tr>
<tr>
<td>Specialist/Urgent Care</td>
<td>$45 copay</td>
<td>$50 copay</td>
<td>$55 copay</td>
<td>30% coinsurance after deductible</td>
</tr>
<tr>
<td>Telehealth (approved carrier program only)</td>
<td>$15 copay</td>
<td>$15 copay</td>
<td>$15 copay</td>
<td>30% coinsurance after deductible</td>
</tr>
<tr>
<td>Behavioral Health and Substance Use (and virtual visits)</td>
<td>$25 copay</td>
<td>$30 copay</td>
<td>$35 copay</td>
<td>30% coinsurance after deductible</td>
</tr>
<tr>
<td>Routine X-Rays, Labs and Diagnostics</td>
<td>10% coinsurance</td>
<td>20% coinsurance</td>
<td>30% coinsurance</td>
<td>30% coinsurance after deductible</td>
</tr>
<tr>
<td>Pharmacy (30-day supply)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>generic preferred brand</td>
<td>$7 copay</td>
<td>$14 copay</td>
<td>$14 copay</td>
<td>30% coinsurance after deductible</td>
</tr>
<tr>
<td>non preferred brand</td>
<td>$40 copay</td>
<td>$50 copay</td>
<td>$60 copay</td>
<td>30% coinsurance after deductible</td>
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<tr>
<td>specialty</td>
<td>$90 copay</td>
<td>$100 copay</td>
<td>$110 copay</td>
<td>30% coinsurance after deductible</td>
</tr>
<tr>
<td>Hospital/Facility Services</td>
<td>10% coinsurance after deductible</td>
<td>20% coinsurance after deductible</td>
<td>30% coinsurance after deductible</td>
<td>30% coinsurance after deductible</td>
</tr>
<tr>
<td>Maternity</td>
<td>10% coinsurance after deductible</td>
<td>20% coinsurance after deductible</td>
<td>30% coinsurance after deductible</td>
<td>30% coinsurance after deductible</td>
</tr>
<tr>
<td>Outpatient Physical, Speech and Occupational Therapy</td>
<td>10% coinsurance</td>
<td>20% coinsurance</td>
<td>30% coinsurance</td>
<td>30% coinsurance after deductible</td>
</tr>
<tr>
<td>Emergency Room Visit</td>
<td>$150 copay</td>
<td>$175 copay</td>
<td>$200 copay</td>
<td>30% coinsurance after deductible</td>
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</tbody>
</table>

A complete health plan comparison, as well as dental and vision comparisons, can be found at [tn.gov/partnersforhealth](https://tn.gov/partnersforhealth). Click on Publications in the top navigation. Under Publications, you’ll find Insurance Comparison Charts.
Voluntary wellness program

In 2019, two programs will be offered to enrolled health plan members and spouses. Members must qualify for these programs.

- **Disease management:** Members with chronic diseases that include asthma, diabetes, coronary artery disease, congestive heart failure (CHF) and chronic obstructive pulmonary disease (COPD) will have access to this program to better manage their chronic condition.

- **Diabetes Prevention Program:** Will continue to be offered in 2019. Go to tn.gov/partnersforhealth for details under Wellness and Diabetes Prevention Program and to see if you qualify.

Find more information at tn.gov/partnersforhealth on the Wellness page.

Other Benefits

**Dental coverage**—contact your agency to see if they participate

*So you can smile pretty and save.* Two different Dental plans offered. You pay the premium.

- **MetLife DPPO:** Use any Dentist, but you’ll save money when staying in-network.
  - **Premiums will increase 2%** in 2019.

- **Cigna DHMO prepaid plan:** Required to use a Network Dentist. Select your Network General Dentist and notify Cigna.
  - **Premiums will stay the same** in 2019.

In 2019, there are no changes in benefits, deductibles, copays or allowances.

Find more information at tn.gov/partnersforhealth on the Dental webpage under Other Benefits.

**Vision insurance**—contact your agency to see if they participate

*Set your sights on savings.* Vision benefits are offered through Davis Vision. You pay the premium. Choose from two options:

- **Basic Plan:** Offers discounted network rates and allowances for services.
- **Expanded Plan:** Provides services with a combination of copays, greater allowances and discounted rates.
- **Premiums will stay the same in 2019.** No changes in benefits and/or allowances.
- **Vision plan members get:**
  - Routine eye exam every calendar year.
  - Frames once every two calendar years.
  - Choice of eyeglass lenses or contact lenses once every calendar year.

Find more information at tn.gov/partnersforhealth on the Vision webpage under Other Benefits.

**Contact:** Davis Vision, 800.208.6404, M-F, 7 a.m. - 10 p.m., Sat, 8 a.m. - 3 p.m., Sun 11 a.m. - 3 p.m.; davisvision.com/stateofTN

**2019 MONTHLY VISION PREMIUMS**

<table>
<thead>
<tr>
<th></th>
<th>BASIC PLAN</th>
<th>EXPANDED PLAN</th>
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</thead>
<tbody>
<tr>
<td><strong>ACTIVE MEMBERS</strong></td>
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<tr>
<td>Employee Only</td>
<td>$3.07</td>
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<td>Employee + Child(ren)</td>
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<tr>
<td>Employee + Spouse</td>
<td>$5.82</td>
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<tr>
<td>Employee + Spouse + Child(ren)</td>
<td>$9.01</td>
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**2019 MONTHLY DENTAL PREMIUMS**

<table>
<thead>
<tr>
<th></th>
<th>CIGNA PREPAID PLAN</th>
<th>METLIFE DPPO PLAN</th>
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</thead>
<tbody>
<tr>
<td><strong>ACTIVE MEMBERS</strong></td>
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<tr>
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<td>$13.44</td>
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<td>Employee + Child(ren)</td>
<td>$27.91</td>
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<td>Employee + Spouse</td>
<td>$23.83</td>
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<tr>
<td>Employee + Spouse + Child(ren)</td>
<td>$32.76</td>
<td>$87.50</td>
</tr>
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</table>

Learn more: tn.gov/partnersforhealth | Enroll online: www.edison.tn.gov | Page 5
Legal Notices

Anti-Discrimination and Civil Rights Compliance

Benefits Administration does not support any practice that excludes participation in programs or denies the benefits of such programs on the basis of race, color, national origin, sex, age or disability in its health programs and activities. If you have a complaint regarding discrimination, please call 1-866-576-0029.

If you think you have been treated in a different way for these reasons, please mail this information to Benefits Administration:

- Your name, address and phone number. You must sign your name. (If you write for someone else, include your name, address, phone number and how you are related to that person, for instance wife, lawyer or friend.)
- The name and address of the program you think treated you in a different way.
- How, why and when you think you were treated in a different way.
- Any other key details.

Mail to: State of Tennessee, Benefits Administration, Civil Rights Compliance, Department of Finance and Administration, 19th Floor, 312 Rosa L. Parks Avenue, William R. Snodgrass Tennessee Tower, Nashville, TN 37243-1102.

Need free language help? Have a disability and need free help or an auxiliary aid or service, for instance Braille or large print? Please call 1-866-576-0029.

You may also contact the: U.S. Department of Health & Human Services – Region IV Office for Civil Rights, Sam Nunn Atlanta Federal Center, Suite 16T70, 61 Forsyth Street, SW, Atlanta, Georgia 30303-8909 or 1-800-368-1019 or TTY/TDD at 1-800-537-7697.

If you speak a language other than English, help in your language is available for free.


Learn more: tn.gov/partnersforhealth | Enroll online: www.edison.tn.gov | Page 6
Benefits Administration website at https://www.tn.gov/partnersforhealth/

The plan documents will govern in all cases. You can find a copy on the
between the information in this newsletter and the formal plan documents,
is contained within the formal plan documents. If there is any discrepancy
the benefits available to you through the State of Tennessee. More information
The information contained in this newsletter provides a detailed overview of
coverage options. You can view it online on or after September 30 at https://

Summary of Benefits and Coverage (SBC). The SBC describes your 2019 health

Prescription Drug Coverage and Medicare

Medicare prescription drug coverage became available in 2006 to everyone
with Medicare. By law, we are required to inform plan members of this
coverage yearly. You can find a copy of the required notice regarding your
options on the Benefits Administration website.

If you are actively employed or a pre-65 retiree enrolled in health coverage,
you have pharmacy benefits. You do not need to enroll in Medicare
prescription drug coverage regardless of your age. Once your retiree group
health coverage terminates due to becoming Medicare eligible you may
want to enroll in Medicare prescription drug coverage if you need pharmacy
benefits.

Summary of Benefits and Coverage

As required by law, the State of Tennessee Group Health Plan creates a
Summary of Benefits and Coverage (SBC). The SBC describes your 2019 health
coverage options. You can view it online on or after September 30 at https://
www.tn.gov/partnersforhealth/summary-of-benefits-and-coverage.html or
request that we send you a paper copy free of charge. To ask for a paper copy,
call Benefits Administration at 855.809.0071.

Plan Document

The information contained in this newsletter provides a detailed overview of
the benefits available to you through the State of Tennessee. More information
is contained within the formal plan documents. If there is any discrepancy
between the information in this newsletter and the formal plan documents,
the plan documents will govern in all cases. You can find a copy on the
Benefits Administration website at https://www.tn.gov/partnersforhealth/
publications/publications.html.
IT'S ANNUAL ENROLLMENT TIME!

» Local Education Employees

WHAT YOU'LL FIND INSIDE

Details on available benefits

Premiums

Helpful resources including websites, webinars and videos

How to enroll

Questions? Go to tn.gov/partnersforhealth

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