

**State & Higher
Education Employees
& COBRA Participants**

Join an employee webinar to learn more about 2022 benefits. Each webinar is CT.

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.

See page 2 for instructions.

Join a vendor webinar to learn about products and ask questions. Each webinar is at 3:30 p.m. CT.

Sept. 15: HSA/FSA

Sept. 16: Disability

Sept. 22: Life Insurance

Sept. 23: Medical Networks

Sept. 29: Vision

Sept. 30: Dental

See page 2 for instructions.

Please log in to Edison and make sure your email address is correct. It's easy! Just go to "self service", "my system profile" and "change or set up email address". Benefits Administration uses email addresses in Edison to send you important insurance-related information. You can unsubscribe at any time.

All health plan members will get new medical, pharmacy and behavioral health ID cards for 2022.

It's Time!

Each year, annual enrollment is your chance to choose benefits or make changes that will be effective the following Jan. 1 through Dec. 31. **Your annual enrollment period is Oct. 1-15, 2021.**

This newsletter gives you important information about your 2022 benefits choices. Find full details, premium charts and plan option comparison charts on our website at tn.gov/PartnersForHealth.

Networks and benefits may change and impact you. It's a good idea to review your enrollment selections each year. If you don't make changes, you will stay in the medical, disability, dental, vision and life insurance products you're enrolled in now.

You are not required to enroll in health insurance. If you do not enroll, no premium dollars for health insurance will be deducted from your paycheck.



Important 2022 Updates

Health insurance premiums are changing. For active employees in narrow networks, premiums will increase \$2-\$16 per month depending on the tier and plan you choose. Find premiums on page 4. Your premium will be automatically deducted from your paycheck each month.

Other benefits premiums (see Other Benefits on pages 7-10):

- Disability premiums will be lower.
- No premium increases for vision, life insurance or Cigna DHMO (Prepaid Provider).
- DPPO (Preferred Provider) monthly premiums will decrease depending on the coverage tier you choose.

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

If you want to enroll in health insurance:

Choose or change your health insurance option (see pages 2-3).

- Same health plan options as last year: Premier Preferred Provider Organization, Standard PPO and Consumer-driven Health Plan with a health savings account.
- Health insurance copays, coinsurance and deductibles are staying the same. The out-of-network, out-of-pocket maximum for all plan options will increase.

Choose or change your health insurance carrier and network (see page 3):

- Same health insurance carriers (BlueCross BlueShield and Cigna).
- An additional insurance carrier network will be offered in 2022 (see page 3). There will be four carrier network options.
 - » Narrow network options – BlueCross Network S and Cigna LocalPlus
 - » Broad network options – BlueCross Network P and Cigna Open Access Plus. The broad networks have an additional monthly cost, which is added to the monthly premium.

HSAs and FSAs: During annual enrollment, state employees enrolled in the CDHP **MUST** choose their HSA election amounts. All state and higher education employees **MUST** choose flexible spending account election amounts if they want to put money in them for 2022. **Important! For 2021 into 2022, FSA and L-FSA carryover rules are different.** HSA details are on page 3. FSA details are on page 9. CDHP/HSA and FSA restrictions are on page 3.

Other insurance carrier updates

- DPPO plan carrier will change to Delta Dental.
- All other insurance carriers remain the same in 2022.

If you want to revise your enrollment or you don't want to enroll: Employees have one opportunity to revise annual enrollment elections as described in Plan Document Section 2. The Plan Document is posted on the ParTNers website under **Publications** at tn.gov/PartnersForHealth.

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing toward your or your dependents' other coverage). However, you must request enrollment within 60 days after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

In addition, if you have a new dependent as a result of marriage, birth, adoption or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 30 days after the marriage, birth, adoption or placement for adoption.

To request special enrollment or obtain more information, contact your agency benefits coordinator or Benefits Administration.

How to Enroll:

You will use **Employee Self Service in Edison** at www.edison.tn.gov to add, remove or make changes to your insurance coverage (unless otherwise noted). Look for the green "Benefits Annual Enrollment" button. All the insurance plans you are currently enrolled in, or that are available to you, are listed in Edison unless otherwise noted.

You can enroll on your computer or mobile device. Use the web browser native to its operating system.

Find step-by-step login instructions at tn.gov/PartnersForHealth under **Annual Enrollment** and then **About Enrollment**. For password reset help, call Edison at 866.376.0104.

Watch videos on how to enroll. Go to the tn.gov/PartnersForHealth homepage. Click **Annual Enrollment** and then **About Enrollment**.

Enrolling new dependents? We need documents to prove their relationship to you. A list of required documents is at tn.gov/PartnersForHealth under **Publications** then **Forms**. Upload documents in Edison or fax to 615.741.8196. Dependent documents deadline is Oct. 15.

Here's Help!

Go to tn.gov/PartnersForHealth. You'll find:

- Videos about your benefits – click **Videos** link at top of the homepage.
- A blue **Questions** button to our help desk: <https://benefitssupport.tn.gov/hc/en-us>.
- A green **Help** button to chat during business hours.
- **Join an employee educational benefits webinar.** Dates and times are on page 1. Go to tn.gov/PartnersForHealth and click on the **About Enrollment** webpage. Scroll down for instructions.
- **Join an insurance carrier webinar.** The insurance carriers will present their products and you can ask questions about your insurance choices. Dates are on page 1. Sessions will be recorded and posted later. Go to tn.gov/PartnersForHealth and click on the **About Enrollment** webpage for more information.
- **Call Benefits Administration** at 800.253.9981, M-F, 8 a.m. to 4:30 p.m. CT.

Health Plan Options

You have a choice of three health plans (costs on page 4).

Preventive care is free with all plans if you use an in-network provider. Health insurance copays, coinsurance and deductibles are staying the same for 2022. The out-of-network, out-of-pocket maximum for all plan options will increase (see details in comparison chart on **Enrollment Materials** webpage). Here's a comparison of the three plans:

- **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.
- **CDHP/HSA:** Lowest monthly premium – you pay your deductible first before the plan pays anything for most services. Then you pay coinsurance, not copays.
 - » **The state will put \$250 (employee only) or \$500 (all other tiers) into your HSA.** This money applies to your yearly HSA IRS maximum contribution amount (see below). The state does not put money into your HSA if your coverage starts Sept. 2, 2022, through Dec. 31, 2022.
 - » The HSA can help you save for health care costs. You get tax benefits, the money rolls over each year and you keep it if you leave. Visit tn.gov/PartnersForHealth under **CDHP/HSA Insurance Options** for more information.

» **HSA IRS max contributions** – There are limits on how much money you can put in your HSA each year:

\$3,650 for employee-only coverage in 2022

\$7,300 for all other family tiers in 2022

Members 55+ can add \$1,000 more each year

These limits include the \$250 or \$500 you receive from your employer and any wellness incentive funds you may earn and add to your account (state employees only).

Debit card: Newly enrolled CDHP/HSA members will get a debit card from our vendor, Optum Financial, to use for qualified expenses. Current members who stay enrolled in the CDHP/HSA will use the same debit card.

Important! Your total HSA contribution is **not** available upfront at the beginning of the year or after you enroll. Your pledged amount is taken out of each paycheck, each pay period. You may only spend the money that is in your HSA at the time of service or care. You can pay out of your own pocket and pay yourself back later with funds from your HSA.

State employees enrolled in the CDHP **must** update their HSA contribution amounts each year in Edison.

Higher education employees enrolled in the CDHP can update their HSA contribution amounts by contacting their agency benefits coordinator.

If you enroll in Social Security at age 65, you will automatically be enrolled in Medicare Part A. If enrolled in a CDHP, this may have tax consequences and affect your HSA contribution. Consult with your tax advisor for advice.

CDHP/HSA restrictions: You **cannot** enroll in a CDHP if:

- You are also enrolled in another medical plan, including a PPO, your spouse's plan or any government plan (e.g., Medicare A and/or B, Medicaid, TRICARE or Social Security benefits); or
- You have received Department of Veterans Affairs benefits within the past three months, except for preventive care. If you are a veteran with a disability rating from the VA, this exclusion does not apply. If you are eligible for VA medical benefits but did not receive benefits during the preceding three months, you can enroll in and make contributions to your HSA. If you receive VA benefits in the future, you are not entitled to contribute to your account for another three months. However, if your veteran's hospital care or medical service was for a service-connected disability, you may contribute to your HSA; or
- You have received care from the Indian Health Services within the past three months.

In a broad network you may pay more per claim because the costs for services in these networks are generally higher than the narrow networks.

HSA and FSA restrictions: You **cannot** enroll in the CDHP/HSA if either you or your spouse have a medical FSA or a health reimbursement account, known as an HRA, at either employer. Instead, if you have one available, you can enroll in a limited purpose FSA for dental and vision costs.

Carrier Networks

NEW! You can now choose from four carrier networks for your medical care.

What you need to know. Each of the four networks has providers (doctors, hospitals, facilities) throughout Tennessee and across the country. There are two narrow network options, which don't include all providers to keep premiums, claims costs and rate increases low. There are now two broad network options, which give you more hospital choices in Tennessee than the narrow networks. The broad network choices have an additional monthly cost, which is added to your monthly premium. In a broad network you may also pay more per claim because the costs for services in these networks are generally higher than the narrow networks.

Narrow Networks (same as last year)

- BlueCross BlueShield Network S
- Cigna LocalPlus

Broad Networks (additional \$65 for employee only and employee + child(ren) tiers and \$130 for employee + spouse and employee + spouse + child(ren) tiers per month)

- BlueCross BlueShield Network P (**new 2022 network option**)
- Cigna Open Access Plus

It's important to check the networks carefully. The network choice you make during annual enrollment is for the entire calendar year (Jan. 1 until Dec. 31), subject to eligibility. After annual enrollment ends, you won't be able to change plans or networks for 2022. You may be able to make changes allowed by the plan if you have a qualifying event.

Network providers and facilities can and do change.

Benefits Administration cannot guarantee all providers and hospitals in a network at the beginning of the year will stay in that network for the entire year. **A provider or hospital leaving a network is not a qualifying event and does not allow you to make coverage changes.**

Contact BlueCross or Cigna if you have questions about a provider or hospital in a network:

BlueCross, 800.558.6213, M-F 7 a.m. - 5 p.m. CT, bcbst.com/members/tn_state/

Cigna, 800.997.1617, 24/7, cigna.com/stateoftn

Go to tn.gov/PartnersForHealth under **Health Options** and **Carrier Information** for network hospital lists and directories.

Along with your medical coverage ...

Your health insurance plan provides the following added benefits: pharmacy, telehealth, behavioral health and Employee Assistance Program services, wellness program and the Diabetes Prevention Program.

Pharmacy

Managed by CVS Caremark

All health plans include full prescription drug benefits.

- Your health plan (Premier PPO, Standard PPO or CDHP/HSA) determines your out-of-pocket prescription costs (copay or coinsurance, deductible and out-of-pocket maximum).
- How much you pay depends on three things:
 - » the drug tier – if you choose a generic, preferred brand, non-preferred brand or specialty drug;
 - » the day supply you receive – 30-day (or <30) or a 90-day (>31) supply; and
 - » where you fill your prescription – at a retail, Retail-90 or mail order pharmacy.

Learn more about benefits, vaccines and how to save money at tn.gov/PartnersForHealth under **Health Options** and **Pharmacy**.

Go to info.caremark.com/stateoftn to locate a pharmacy, compare 2022 estimated drug costs by plan and register on the CVS Caremark site. Once registered, get details about your drug costs and savings, download the mobile app and more!

Contact: **CVS Caremark**, 877.522.8679, 24/7, info.caremark.com/stateoftn

Telehealth

BlueCross PhysicianNow or Cigna MDLive

Virtual medical care through telehealth visits is available with your health insurance benefits. You can talk to a doctor for non-emergency medical care 24/7 by phone, computer or tablet from anywhere. The cost is less than a typical office visit

when you use PhysicianNow or MDLive programs sponsored by BlueCross and Cigna. Schedule appointments for minor illnesses such as cold, flu, allergies, etc., for you or your family, in the comfort of your own home.

Save time — create your user profile in advance.

BlueCross BlueShield of Tennessee members:

Log in at bcbst.com/members/tn_state/ and select **Talk With a Doctor Now** or go to the BCBSTN app and click the **Talk to a Doctor Now** button.

Or, call 888.283.6691.

Cigna members:

Log in to MyCigna.com and click the **Connect Now** button or go to the myCigna app and click the **Find Care & Costs** button and select **Talk to a Doctor 24/7**.

Or, call 888.726.3171.

Information is at tn.gov/PartnersForHealth under **Health Options** and **Telehealth**, or for BlueCross members at bcbst.com/members/tn_state/ and for Cigna members at cigna.com/stateoftn.

2022 MONTHLY HEALTH PREMIUMS			
	BCBST NETWORK S & CIGNA LOCAL PLUS	BCBST NETWORK P & CIGNA OPEN ACCESS	EMPLOYER SHARE
PREMIER PPO			
Employee Only	\$143	\$208	\$573
Employee + Child(ren)	\$215	\$280	\$859
Employee + Spouse	\$308	\$438	\$1,232
Employee + Spouse + Child(ren)	\$372	\$502	\$1,489
STANDARD PPO			
Employee Only	\$98	\$163	\$573
Employee + Child(ren)	\$147	\$212	\$859
Employee + Spouse	\$210	\$340	\$1,232
Employee + Spouse + Child(ren)	\$253	\$383	\$1,489
CDHP/HSA*			
Employee Only	\$64	\$129	\$573
Employee + Child(ren)	\$96	\$161	\$859
Employee + Spouse	\$137	\$267	\$1,232
Employee + Spouse + Child(ren)	\$165	\$295	\$1,489

Premium charts, including COBRA, are found at tn.gov/PartnersForHealth. Click on **Premiums** in the top navigation.

*The state will put \$250 (emp. only) or \$500 (other tiers) into your HSA annually. Not available if your coverage starts Sept. 2, 2022, through Dec. 31, 2022.

IN-NETWORK 2022 HEALTH PLAN COMPARISON			
Your Costs for Covered Services	Premier PPO	Standard PPO	CDHP/HSA
Annual Deductible			
Emp only	\$500	\$1,000	\$1,500
Emp + Child(ren)	\$750	\$1,500	\$3,000
Emp + Spouse	\$1,000	\$2,000	\$3,000
Emp + Spouse + Child(ren)	\$1,250	\$2,500	\$3,000
Maximum Out-of-Pocket			
Emp only	\$3,600	\$4,000	\$2,500
Emp + Child(ren)	\$5,400	\$6,000	\$5,000
Emp + Spouse	\$7,200	\$8,000	\$5,000
Emp + Spouse + Child(ren)	\$9,000	\$10,000	\$5,000
Preventive Care	No charge	No charge	No charge
Primary Care/Convenience Care	\$25 copay	\$30 copay	20% coinsurance after deductible
Specialist/Urgent Care	\$45 copay	\$50 copay	20% coinsurance after deductible
Telehealth (approved carrier program only)	\$15 copay	\$15 copay	20% coinsurance after deductible
Behavioral Health and Substance Use (and virtual visits)	\$25 copay	\$30 copay	20% coinsurance after deductible
Routine X-Rays, Labs and Diagnostics	10% coinsurance	20% coinsurance	20% coinsurance after deductible
Pharmacy (30-day supply)			
generic	\$7 copay	\$14 copay	20% coinsurance after deductible
preferred brand	\$40 copay	\$50 copay	
non-preferred brand	\$90 copay	\$100 copay	
specialty	10% coinsurance min \$50; max \$150	10% coinsurance min \$50; max \$150	
Hospital/Facility Services	10% coinsurance after deductible	20% coinsurance after deductible	20% coinsurance after deductible
Maternity	10% coinsurance after deductible	20% coinsurance after deductible	20% coinsurance after deductible
Outpatient Physical, Speech and Occupational Therapy	10% coinsurance	20% coinsurance	20% coinsurance after deductible
Emergency Room Visit	\$150 copay	\$175 copay	20% coinsurance after deductible

Find a complete health plan comparison, as well as dental and vision comparisons, at tn.gov/PartnersForHealth. Click on **Publications** in the top navigation and go to **Insurance Comparison Charts**.

*Covered services: Covered services are generally the same whether you choose BlueCross BlueShield or Cigna. For some procedures, different medical criteria may apply based on the carrier you select. For detailed information on covered services, exclusions and how the plans work, view the BCBST or Cigna Member Handbook and your Plan Document, available at tn.gov/PartnersForHealth on the **Publications** page.*

If you have questions about your benefits or medical criteria for a specific service, contact the carriers' member services.

Need hip, knee or back surgery? Check into Cigna's Bone and Joint Health Benefit. It offers no member cost share (after deductible for CDHP) for some hip, knee and back surgeries with program providers. All Cigna health plan members have access and must enroll prior to surgery. Go to cigna.com/stateoftn or call 800.997.1617 for details.

Behavioral Health

Managed by Optum

All health plan members and enrolled dependents have access to outpatient and facility-based behavioral health and substance use disorder services.

Optum can help you find a provider for in-person or virtual visits, explain benefits, identify best treatment options, schedule appointments and answer questions.

Your benefits also include these treatment options:

- **Talkspace online therapy:** Available for all members with behavioral health benefits. Communicate with a therapist by text, audio or video, 24/7 from your smartphone or desktop within the secure app. Talkspace sessions are subject to the same cost share or coinsurance rate (after deductible) as an outpatient office visit.
- **Preferred substance use treatment facilities:** Costs are waived for members who use preferred treatment facilities. Go to tn.gov/PartnersForHealth under **Health Options** and **Behavioral Health** for details.
- **Virtual visits:** Meet with a provider through private, secure video conferencing. Costs are the same as an office visit.

For all programs and services and help finding a provider, contact **Optum:** 855-HERE4TN (855.437.3486), 24/7 or visit HERE4TN.com.

Employee Assistance Program

Managed by Optum

EAP services are available to all benefits-eligible state/higher education employees and their eligible dependents, even if they are not enrolled in a health plan. COBRA participants are also eligible.

Master's level specialists are available 24/7 to assist with stress, legal, financial, mediation and work/life services. With EAP services:

- Get five counseling visits, per problem, per year, per individual at no cost to you. Available in person or by **virtual visit** – get the care you need in the privacy and comfort of your own home.
- **Sanvello:** On-demand mobile app to help with stress, anxiety and depression, available anytime at no extra cost at HERE4TN.com.
- **Take Charge at Work:** Telephonic coaching program that helps people (EAP-eligible and working) dealing with stress or depression improve performance at work. Available at no additional cost if you qualify. Participants can earn a wellness program cash incentive, if eligible.

More EAP information is at tn.gov/PartnersForHealth under **Other Benefits** and **EAP**.

For all EAP programs and services and help finding a provider, contact **Optum** 24/7 at 855-HERE4TN (855.437.3486) or HERE4TN.com

Wellness Program

Managed by ActiveHealth

To help you achieve your health goals, the 2022 wellness program is available for active state/higher education employees and spouses enrolled in the health plan.

Your wellness program also includes:

- **Cash incentives up to \$250 each for enrolled employees and spouses:** Current wellness program cash incentives will not change in 2022.

The wellness program includes cash incentives up to \$250 each for enrolled employees and spouses.

Find information about programs, activities and a printable Incentive Table at tn.gov/PartnersForHealth under **Wellness**. ActiveHealth will mail information to members in December.

Enrolled state employees can choose to put wellness program cash incentives into their HSAs during annual enrollment. Note: any wellness incentives deposited into the HSA count toward the overall HSA IRS annual maximum.

- **Weight Management Program:** 12-month program for those ready to lose weight and learn more about healthy lifestyle changes. Contact ActiveHealth for information and to see if you qualify.

Contact: **ActiveHealth**, 888.741.3390, M-F 8 a.m. - 8 p.m. CT, go.activehealth.com/wellnesstn

The **Diabetes Prevention Program** continues to be offered free to you in 2022. If eligible, the DPP helps adult health plan members prevent or delay type 2 diabetes. Find the **DPP webpage** at tn.gov/PartnersForHealth under **Other Benefits** and **Wellness**.

Along with health insurance ...

You are offered dental, vision, voluntary term life, voluntary accidental death and dismemberment, flexible spending accounts and disability benefits. These benefits provide additional coverage for you and your eligible dependents. Employees pay 100% of the premiums as noted.

Dental Coverage

Offered through Cigna and Delta Dental¹

Two different dental plans are offered. You pay the full monthly premium.

- **Cigna Dental Health Maintenance Organization (DHMO*) – Prepaid Provider**
 - » Premiums will stay the same in 2022.
 - » You are required to select and use a Cigna network general dentist. You must notify Cigna of your choice. See the list of dentists at cigna.com/stateoftn.
 - » Members pay copays. Review the Patient Charge Schedule at tn.gov/PartnersForHealth under **Publications**, then **Dental** before having procedures performed.
 - » Completion of crowns, bridges, dentures, implants, root canal or orthodontic treatment already in progress on a new member's effective date will not be covered.
- **Delta Dental¹ Dental Preferred Provider Organization (DPPO**)**
 - » Monthly premium rates will go down in 2022.
 - » Use any dentist, but save money staying in network. Review Delta Dental's DPPO network at tn.gov/PartnersForHealth under **Other Benefits** and **Dental**.
 - » Discuss any estimated expenses with your dentist or specialist. Charges for dental procedures are subject to change. Members pay deductibles and co-insurance.
 - » Waiting periods apply to select procedures.

Information, including a comparison of the two plans, is at tn.gov/PartnersForHealth under **Other Benefits** and **Dental**.

Contact: Delta Dental contact information is to be determined. Find more details at tn.gov/PartnersforHealth under **Dental**.

Contact: **Cigna**, 800.997.1617, 24/7, cigna.com/stateoftn

*DHMO – you must select and use a network general dentist

**DPPO – you may use any dentist of your choice and your cost will vary depending upon use of an in-network or out-of-network dentist

¹Pending final approval. Note: If you are currently enrolled in the MetLife DPPO and do not change your plan, you will automatically be enrolled in the Delta Dental DPPO on Jan. 1, 2022.

Vision Insurance

Offered through Davis Vision

You pay the full monthly premium. Choose from two options:

- **Basic Plan:** Pays for your eye exam and various “allowances” (dollar amounts) for materials such as eyeglass frames, lenses, contact lenses, etc.
- **Expanded Plan:** Includes greater “allowances” (dollar amounts) and additional materials versus the Basic Plan.

In both plans, you pay copays and coinsurance on materials or other services when the cost exceeds the allowed dollar amount.

- **Premiums will stay the same in 2022.** You'll save money when using in-network providers.
- **All members in both vision plans get:**
 - » Routine eye exam every calendar year
 - » Frames once every two calendar years
 - » Choice of eyeglass lenses or contact lenses once every calendar year

Information is at tn.gov/PartnersForHealth under **Other Benefits** and **Vision**. Go to the website for a comparison of the plans' 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. CT, davisvision.com/stateofTN

2022 MONTHLY DENTAL PREMIUMS	CIGNA DHMO PLAN	DELTA DENTAL DPPO PLAN
ACTIVE MEMBERS		
Employee Only	\$13.84	\$19.82
Employee + Child(ren)	\$28.75	\$52.70
Employee + Spouse	\$24.54	\$38.98
Employee + Spouse + Child(ren)	\$33.74	\$80.72

2022 MONTHLY VISION PREMIUMS	BASIC PLAN	EXPANDED PLAN
ACTIVE MEMBERS		
Employee Only	\$3.07	\$5.56
Employee + Child(ren)	\$6.13	\$11.12
Employee + Spouse	\$5.82	\$10.57
Employee + Spouse + Child(ren)	\$9.01	\$16.35

Life Insurance

Offered through Securian Financial (MN Life)

Securian Financial has an online web tool, Benefit Scout, that can help you estimate the amount of life insurance you may need. Log in and find it at lifebenefits.com/stateoftn.

Basic term life/basic accidental death & dismemberment

All benefits-eligible employees receive \$20,000 basic term life insurance and \$40,000 basic accidental death and dismemberment coverage paid by the state with no cost to you. If you enroll in medical insurance, life insurance and accidental death and dismemberment coverage increases based on your salary. You pay a premium for this additional coverage. Keep your beneficiary information current in Edison.

- Overall, premium rates will stay the same in 2022.
 - » If your salary goes up as of Sept. 1, 2021, compared to Sept. 1, 2020, your monthly premium may increase as of October 2021.
 - » At ages 65 and over, your coverage amounts will reduce.

- Basic dependent term life/basic accidental death and dismemberment insurance will automatically apply to your dependent(s) enrolled in your family medical insurance. You will pay premiums for your dependent(s) coverage.

Voluntary accidental death & dismemberment

You can buy this insurance to give you and your family additional protection if you or your covered dependent's death or dismemberment is due to an accident. Enroll and/or keep beneficiary information current in Edison.

- Premium rates stay the same in 2022.

Voluntary term life insurance

You can buy voluntary term life insurance for yourself, your spouse and children. You must apply for this insurance.

- Voluntary term life insurance rates are staying the same, but your monthly premium could go up if you increase your life insurance amount or you move into a higher age-bracket as of January 1.
- **To apply for coverage and update your beneficiaries, go to lifebenefits.com/stateoftn**

Life insurance information is at tn.gov/PartnersForHealth under **Other Benefits** and **Life Insurance**.

Contact: **Securian Financial**, 866.881.0631, M-F 7 a.m. - 6 p.m. CT, lifebenefits.com/stateoftn



Don't Forget to Update Your Beneficiaries

It's important to keep your **life insurance beneficiaries** up-to-date.

For basic term life/basic AD&D and voluntary AD&D insurance, make changes online in Edison.

Review and keep your voluntary term life insurance beneficiaries current at lifebenefits.com/stateoftn.

Flexible Spending Accounts

Use flexible spending accounts to pay for health care and dependent care while saving money on your taxes. For medical and limited purpose FSAs, known as L-FSAs, all of your contribution is available upfront.

For currently enrolled medical FSA and L-FSA members, temporary provisions allowed by the IRS will allow your entire 2021 medical FSA or L-FSA balance to carry over into your 2022 account (only up to \$500 could be carried over in past years). This temporary change will expire after this year. This does not impact the maximum you can contribute in 2022.

Optum Financial manages FSAs, L-FSAs and dependent care-FSAs (DC-FSA). For more information, go to tn.gov/PartnersForHealth under **Flexible Benefits**.

Insurance-eligible state and higher education employees (excludes offline agencies) can enroll in these **FSAs**:

- **Medical FSA:** For medical, dental and vision expenses. Annual limit – \$2,750. You can carry over a maximum of \$500 at the end of 2022.
- **L-FSA:** For dental/vision expenses only and members enrolled in a CDHP. Annual limit – \$2,750. You can carry over a maximum of \$500 at the end of 2022.
- **DC-FSA:** Annual limit – \$5,000 (up to \$2,500 per spouse for married couples filing separately). No carryover amount allowed.

Important: You cannot enroll in both a medical FSA and a L-FSA in the same year.

You must re-enroll in your medical FSA, L-FSA and DC-FSA each year and choose how much money you'll put in your account during annual enrollment.

» **Debit card:** Current enrolled medical FSA and L-FSA members will use the same Optum debit card to use their funds at the pharmacy or provider's office (not applicable for DC-FSA). Newly enrolled medical FSA and L-FSA members will get a new debit card from Optum. Per IRS rules, Optum may need you to verify FSA or L-FSA debit card purchases by providing your explanation of benefits /claims document. Make sure to respond or your debit card may be suspended.

- **Transportation/parking FSA** is also available (state employees only) and is **managed by Benefits Administration**. The maximum amount that you may contribute to the transportation FSA and/or the parking FSA is \$270 per month. Debit card not provided. You will file claims with Benefits Administration.

Find a FSA/HSA grid showing contribution amounts, tax benefits and how to use your funds at tn.gov/PartnersForHealth under **Publications** and **HSA/FSA**.

FSA Enrollment Information

You must re-enroll in your medical FSA, L-FSA and DC-FSA each year and choose how much money you'll put in your account during annual enrollment (unless you have a special qualifying event).

- » State employees enroll in Edison. For transportation/parking, state employees can enroll now or make changes later by submitting a paper form found at **Other Benefits** and **Flexible Benefits**.
- » Higher education employees enroll in flexible benefits on the Optum website at optumbank.com/Tennessee.

Find more information at tn.gov/PartnersForHealth under **Other Benefits** and **Flexible Benefits**.

Contact: **Optum Financial** (medical FSA, L-FSA, DC-FSA), 866.600.4984, 24/7, optumbank.com/Tennessee

Find flexible benefits rules at tn.gov/PartnersForHealth under **Publications** and **Medical Plan Documents, State Plan, Part II**.

Disability Insurance

Offered through MetLife

Disability insurance is offered to full-time state and higher education employees. You pay the full monthly premium. **All sick leave, annual leave and comp time must be used before benefits are payable.**

- **Short-term Disability:** Replaces a percentage of your income for up to 26 weeks during a disability. Two coverage options are available.
 - » Frequently asked questions, including about pregnancy: tn.gov/PartnersForHealth under **Other Benefits** and **Disability**.
- **Long-term Disability (state employees only):** Replaces a percentage of your income during a disability that is expected to last longer than 90-180 days. Four options are available.

- » Higher education employees: contact your agency benefits coordinator/HR office about available LTD options.

Premiums adjust as of October 2021 if your salary is different on Sept. 1, 2021, compared to Sept. 1, 2020, or you move into a higher age-bracket for LTD. **In 2022, disability premium rates will decrease. LTD age-brackets will stay the same.**

Apply for coverage or increase your coverage, if already enrolled. In Edison, pick the benefit you want under STD and/or LTD (state only). MetLife will email to you a link to the **Statement of Health** form with medical questions. Complete the form and submit it online. If you prefer, print the form, complete and fax, email or mail it with a timestamp or postmark by **Nov. 5** to MetLife.

All sick leave, annual leave and comp time must be used before disability insurance benefits are payable.

Application is subject to review and approval by MetLife based on underwriting rules. After receiving your form, MetLife may need more information from you.

Information, including how to calculate your rates, is at tn.gov/PartnersForHealth under **Other Benefits** and **Disability**. **Monthly premium rates are also in Edison.**

Contact: **MetLife**, 855.700.8001, M-F 7 a.m. - 10 p.m. CT, metlife.com/stateoftn

Notes:

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 615-532-9617.

If you think you have been treated in a different way for these reasons, please mail this information to the Civil Rights Coordinator for the Department of Finance and 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, Civil Rights Coordinator, Department of Finance and Administration, Office of General Counsel, 20th Floor, 312 Rosa L. Parks Avenue, William R. Snodgrass Tennessee Tower, Nashville, TN 37243.

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 615-532-9617.

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 **OR** U. S. Office for Civil Rights, Office of Justice Programs, U. S. Department of Justice, 810 7th Street, NW, Washington, DC 20531 **OR** Tennessee Human Rights Commission, 312 Rosa Parks Avenue, 23rd Floor, William R. Snodgrass Tennessee Tower, Nashville, TN 37243.

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

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-576-0029 (TTY: 1-800-848-0298).

866-576-0029 (مقرر) : ةذووحلم - 576-0029-مقرر
1. مقرب لصلتا، ناچماب كل رفاوتت ةذوخلل
(800-848-0298) مقرر لصلتا

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-866-576-0029 (TTY:1-800-848-0298)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-866-576-0029 (TTY:1-800-848-0298).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-866-576-0029 (TTY: 1-800-848-0298) 번으로 전화해 주십시오.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-866-576-0029 (ATS : 1-800-848-0298).

Ni songen mwohmw ohte, komw pahn sohte anahne kawehwe mesen nting me koatoantoal kan ahpw wasa me ntingie [Lokaiahn Pohnpei] komw kalan-gan oh ntingidieng ni lokaiahn Pohnpei. Call 1-866-576-0029 (TTY: 1-800-848-0298).

ማስታወሻ: የግንባታ ቋንቋ አግርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያገዝዎት ተዘጋጅተዋል። ወደ ሚከተለው ቁጥር ይደውሉ፡ 1-866-576-0029 (መስማት ለተሳናቸው: 1-800-848-0298)።

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-866-576-0029 (TTY: 1-800-848-0298).

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-866-576-0029 (TTY:1-800-848-0298)

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-866-576-0029 (TTY:1-800-848-0298) まで、お電話にてご連絡ください。

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-866-576-0029 (TTY: 1-800-848-0298).

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-866-576-0029 (TTY: 1-800-848-0298) पर कॉल करें।

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-866-576-0029 (телетайп: 1-800-848-0298).

یاری نایاری تروصب ی نابز تالی هست، دینی کی ویگتفگی سراف نابز هب رگا: هجوت دیری گب سامت اب. دشاب کی مهارف (866-576-0029 (TTY: 1-800-848-0298) امش

The Notice of Privacy Practice

Your health record contains personal information about you and your health. This information that may identify you and relates to your past, present or future physical or mental health or condition and related health care services is referred to as Protected Health Information (PHI). The Notice of Privacy Practices describes how we may use and disclose your PHI in accordance with applicable law, including the Health Insurance Portability and Accountability Act (HIPAA), including Privacy and Security Rules. The notice also describes your rights regarding how you may gain access to and control your PHI.

We are required by law to maintain the privacy of PHI and to provide you with notice of our legal duties and privacy practices with respect to PHI. We are required to abide by the terms of the Notice of Privacy Practices. The Notice of Privacy Practice is located on the Benefits Administration website at <https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/hipaa.pdf>. You may also request the notice in writing by emailing benefits.privacy@tn.gov.

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 2022 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>.

Other Publications

In addition to the documents mentioned above, the Benefits Administration website contains many other important publications, including, but not limited to, a sample basic term life/basic AD&D certificate, sample optional AD&D certificate, brochures and handbooks for medical, pharmacy, dental, vision, life insurance and the plan document, brochure and handbook for the Supplemental Medical Insurance to Retirees with Medicare.

Notice Regarding Wellness Program

Find the **Notice Regarding Wellness Program** at [tn.gov/PartnersForHealth](https://www.tn.gov/PartnersForHealth) under **Wellness**.



STATE OF TENNESSEE
 BENEFITS ADMINISTRATION
 DEPARTMENT OF FINANCE AND ADMINISTRATION

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State and Higher Education Employees

IT'S ANNUAL ENROLLMENT TIME!



**FRIDAY, OCT. 1 -
 FRIDAY, OCT. 15**

Questions? Go to tn.gov/PartnersForHealth

