



OPEN ENROLLMENT 2018

Presenters:

**Elizabeth Schafer,
Amanda Accatino,
Jennifer Bowling**

AGENDA

- **Open Enrollment Dates/Expos**
- **Benefit Changes**
- **Medical Flexible Debit Card**
- **Tuition Discounts**
- **Doctor on Demand**
- **Wellness Update**
- **Operations Update**



DATES

October 30 – November 17, 2017

Benefit elections must be made online at:

www.yes.az.gov



ACTIVE OPEN ENROLLMENT

ALL EMPLOYEES AND
RETIREES MUST ENROLL IN ALL
BENEFITS DURING OPEN
ENROLLMENT TO MAINTAIN
COVERAGES IN 2018!



OCTOBER 30 – NOVEMBER 17, 2017

- Deadline is November 17, 2017 @ 5pm.
- There are no exceptions.
- An employee will not have benefits in 2018 if the Open Enrollment process is not completed.



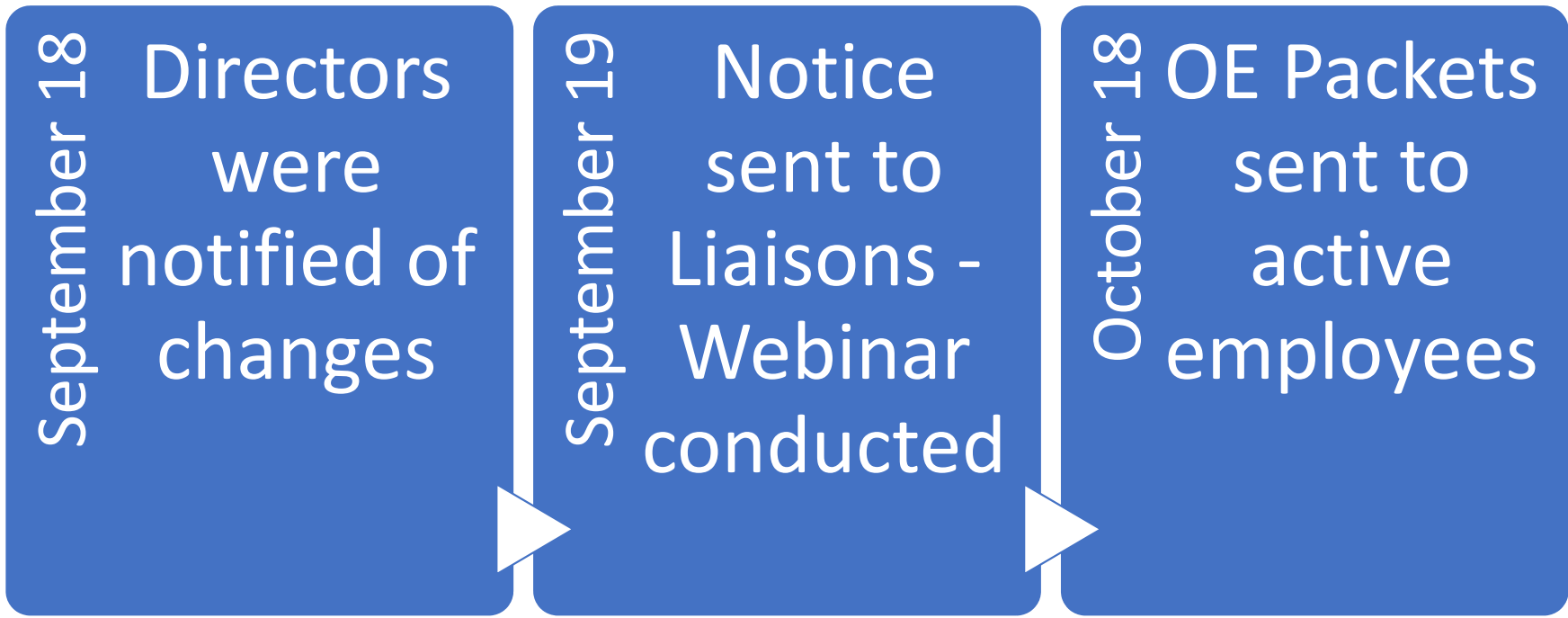
BENEFIT EXPOS

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
10/16	10/17	10/18	10/19	10/20
			AHCCCS*	
10/23	10/24	10/25	10/26	10/27
		Tempe Historical	ASU*	
10/30	10/31	11/1	11/2	11/3
ADOT <i>OE Begins</i>	ADOA	Tucson Gov Offices	U of A MAC Gym*	
11/6	11/7	11/8	11/9	11/10
Peoria Rio Vista Rec	DEMA*			
11/13	11/14	11/15	11/16	11/17
HCCC Flagstaff				<i>OE Closes @ 5pm AZ time</i>

*Limited to agency/location specific employees only



OPEN ENROLLMENT COMMUNICATIONS





BENEFIT CHANGES

- Premiums
- Copays
- Changes in Physician Categories
- Preventative Care
- HSA Limits Changes
- New Dental DHMO for 2018
- Flexible Medical Care Account - Debit Card
- Lower Supplemental Life Premiums



MEDICAL PREMIUMS AND COPAYS

- **The State is continuing to pay 90% of the premiums.**
- **The premiums have not increased for employees since 2011.**
- **Copayments have not changed since 2009.**
- **No change to what services are covered.**
- **No employer is able to keep rates the same with the rising costs of health care.**



MEDICAL PREMIUMS AND COPAYS

Self-Insured vs Fully-Insured

- On a Fully-insured medical plan the risk for the claims generated by the employees is carried by the insurance company.
- On a Self-insured medical plan the employer carries the risk for the claims generated by the employees.
- ADOA has a Self-insured medical plan. 100% of the risk is taken on by the State.

MEDICAL PREMIUMS

PREMIUM CHANGES FOR 2018

Plan Type	Tier	2017 EE Cost/Paycheck	2018 EE Increase/Paycheck	2018 EE Cost/Paycheck	FY2018 State Cost/Paycheck
Exclusive Provider Organization (EPO) Aetna, BCBSAZ, Cigna, UnitedHealthcare	EE only	\$18.46	\$1.85	\$20.31	\$285.88
	EE + Adult	\$54.92	\$5.50	\$60.42	\$587.38
	EE + Child	\$46.62	\$4.66	\$51.28	\$381.54
	Family	\$102.00	\$10.20	\$112.20	\$643.54
Preferred Provider Organization (PPO) Aetna, BCBSAZ, UnitedHealthcare	EE only	\$47.08	\$4.70	\$51.78	\$290.58
	EE + Adult	\$99.23	\$9.92	\$109.15	\$614.42
	EE + Child	\$66.46	\$6.65	\$73.11	\$411.15
	Family	\$115.85	\$11.58	\$127.43	\$716.81
Health Savings Account (HSA) Aetna	EE only	\$9.23	\$0.92	\$10.15	\$193.38
	EE + Adult	\$27.69	\$2.77	\$30.46	\$400.77
	EE + Child	\$23.54	\$2.35	\$25.89	\$262.00
	Family	\$51.23	\$5.12	\$56.35	\$446.50



COPAYS - EPO AND PPO

SERVICES	2017	2018
Routine Preventive Health Care	\$15	\$0
Office Visit		
Primary Care Physician (PCP)	\$15	\$20
Doctor on Demand video telehealth	\$15	\$20
Mental Health Provider	\$15	\$20
OB/GYN	\$10	\$20
Specialists (all other)	\$30	\$40
*Chiropractor	\$15	\$40
*Therapist: Occupational, Physical, Respiratory, Speech	\$15	\$40
Emergency Room	\$125	\$200
Urgent Care	\$40	\$75
Radiology (CAT, MRI, PET)	\$0	\$100
Outpatient Surgery Copay	\$50	\$100
**Inpatient Hospital Admission	\$150	\$250

**This provider is now included in the specialist category. **Not applicable for maternity.*



COPAYS PHARMACY

Pharmacy Changes for 2018 – All Plans						
Amount	Generic		Preferred Brand Name		Non-Preferred Brand Name	
	2017	2018	2017	2018	2017	2018
Retail 30 Days	\$10	\$15	\$20	\$40	\$40	\$60
Retail 90 Days	\$25	\$37.50	\$50	\$100	\$100	\$150
Mail Order 90 Days	\$20	\$30	\$40	\$80	\$80	\$120



BENEFIT CHANGES

- Routine Preventive Care visit are 100% covered by the State. No copays!
- Preventive drugs are 100% covered by the State. No copays!

EXAMPLES

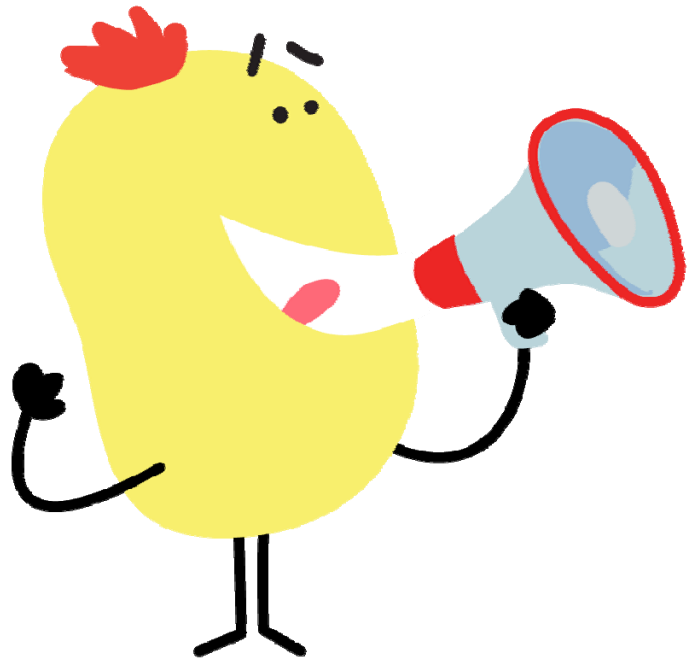
Ace Inhibitors - Some Asthma Medications - Birth Control - Prenatal Vitamins

- EPO plan now has a out-of-pocket maximum
 - Limits liability
 - \$7,350 single, \$14,700 family
- Full list of preventive screenings and drugs can be found on

Benefitoptions.az.gov.

HSA CHANGES

Contribution and Deductibles for Health Savings Account/High-Deductible Health Plan			
	2018	2017	Change
HSA contribution limit (employer + employee)	EE only: \$3,450 Family: \$6,900	EE only: \$3,400 Family: \$6,750	EE only: +\$ 50 Family: +\$150
HDHP minimum deductibles	EE only: \$1,350 Family: \$2,700	EE-only: \$1,300 Family: \$2,600	EE only: +\$ 50 Family: +\$100



ANNOUNCING ALEX!

A new tool is now available to assist employees in making their benefit selections for 2018.

<https://www.myalex.com/adoa/2018>



ALEX

<https://www.myalex.com/adoa/2018>



Three important things to know about the ALEX tool:

- **It's personalized**, so you can see which plan makes the most sense for YOU, not your coworkers, or your boss, or even me, your local benefits genius.
- **It's fun to use**. There's no boring insurance jargon or complicated legal jibber-jabber.
- **It's confidential**, so you can get the guidance you need without revealing all of your fascinating secrets.



ALEX

<https://www.myalex.com/adoa/2018>

User can discover the lowest-cost, best-coverage 2018 health plan option—or see if current plan choice is the best one —

from any computer, tablet, or smartphone at

<https://www.myalex.com/adoa/2018>





BENEFIT CHANGES

DENTAL

Went out for bid in 2017:

- Delta will remain our PPO/Indemnity Dental Provider.
- Cigna is now our DHMO provider.
- **There is a price reduction in premium for the DHMO.**



BENEFIT CHANGES

DHMO DENTAL PREMIUMS

TIER	Employee Premiums Per Pay Period		
	Current TDA	2018 Cigna	Change
EE only	\$1.86	\$1.64	-\$0.22
EE + Adult	\$3.72	\$3.29	-\$0.43
EE + Child	\$3.50	\$3.08	-\$0.42
Family	\$6.12	\$5.46	-\$0.66



BENEFIT CHANGES

DENTAL CIGNA DHMO

- ✓ Lower Premiums
- ✓ Nationwide Network
- ✓ Lab Fees included
- ✓ Copay is the same for General Dentist or Specialist
- ✓ Filling copay is the same for primary/permanent tooth
- ✓ Coverage for teeth whitening and athletic mouth guards.

Search providers at:

<https://hcpdirectory.cigna.com/web/public/providers>



BENEFIT CHANGES

Decrease in Supplement Life Premiums!

AGE BAND	MONTHLY RATES PER \$5,000 OF COVERAGE	
	Current Rates	New Rate
Under 30	\$.40	\$.35
30-34	\$.50	\$.40
35-39	\$.55	\$.45
40-44	\$.80	\$.75
45-49	\$ 1.30	\$ 1.00
50-54	\$ 2.10	\$ 1.60
55-59	\$ 3.00	\$ 2.30
60-64	\$ 5.40	\$ 4.10
65-69	\$ 5.40	\$ 4.10
70+	\$ 8.55	\$ 6.45

Employees will save over \$2.2 million with this reduction!



BENEFIT CHANGES

Medical Flexible Spending Accounts

For the first time members can now sign up for a Debit Card!

- Easy way to pay for out-of-pocket health care expenses
- Members do not have to pay upfront for out-of-pocket expenses and get reimbursed later.
- Entire year's election is available up front for use.
- Members pay merchant or health care provider directly from health care account.



BENEFIT CHANGES

Medical Flexible Spending Accounts

- Members will go to the ASI website to sign up to get a card.
- Members can choose if they want to use the ASIFlex Card or submit a traditional claim.

Members will need to remember this card does not make everything paperless. Members must comply with documentation requests to substantiate certain transactions. Standard medical copays should not require further documentation.



Flexible Spending Accounts - Pretax Savings

Example of Savings: \$2,000 Medical Care	Without FSA	With FSA
Annual Income	\$44,000	\$44,000
Pre-Tax FSA Contribution	\$0	\$2,000
Taxable Income	\$44,000	\$42,000
Estimated 30% Taxes	\$13,200	\$12,600
EXTRA MONEY	\$0	\$600



Tuition Discount








Management: Benefit Services Division

- Since April 2017
- Point Person Assigned

Partnerships: Growing

- ***Positive*** Response
- Prior Partners Returning
- New Partners Joining

Tuition Discount Partnerships

Institution	Discounts Available*			Programs			Offerings/Comments
	Active	Spouse	Dependents	BA	MA	DOC	
 Arizona State University	10%	10%			✓	✓	Spring 2018 – Spring 2021
 Benedictine University	10%	10%		✓	✓		Business, healthcare, human services, IT
 DeVry University	10%	-	-	✓	✓		Application fee waived Biomedical, engineering, IT
 GRAND CANYON UNIVERSITY	10%	-	5%	✓	✓	✓	On campus, online, evening
 LIBERTY UNIVERSITY	15% Online	15% Online	-	✓	✓	✓	Accounting, counseling, leadership, healthcare mgt, paralegal, public policy 25% discount first responders
 NORTH CENTRAL UNIVERSITY	10%	10%	10%				Weekly course starts Business, technology, education, psychology, counseling
 University of Phoenix	10%	-	-	✓	✓	✓	Business, health administration, social science, criminal justice, IT On campus, online, blended 25% discount-military/spouses



DOCTOR ON DEMAND



DON'T FORGET TO REMIND STAFF ABOUT DOCTOR ON DEMAND

- See a doctor right away from your mobile device or computer.
- App works with any smartphone, tablet or computer with front facing camera.
- Download the app from the App Store, Google Play or access care via Doctorondemand.com
- Cost is the same as a PCP office visit - \$20 or \$49 for PPO/HSA



DOCTOR ON DEMAND



Issues that can be treated include:	
Flu/Fever	Skin and Eye Issues
Bronchitis & Sinus Infections	Allergies
Urinary Tract Infections	Cough/Cold
Sore/Strep Throat	Diarrhea/Vomiting



DOCTOR ON DEMAND



“To be honest, I was a little skeptical about the program until one Friday afternoon my daughter was complaining about not feeling well. I couldn’t get her into the doctor and it was the start of the weekend. I took a chance. I got on line and downloaded the app. Within 10 minutes she saw a doctor. The doctor spent time discussing her concerns. She was prescribed medication (which was ready within the hour.) She even got a doctor’s note for the classes she missed that day! I myself have used it two times since and can’t tell you how great it is to sit in my house and talk to a doctor. No booking an appointment. No drive to the doctor’s office. No time missed from work. No waiting in waiting rooms with sick people. Everything is confidential! I could go on and on...”

Diann Engstrom, Administrator
Department of Corrections



2017 Health Impact Program

Presented by Amanda Accatino



2017 Health Impact Program (HIP)

- The Health Impact Program (HIP) is an incentive based employee wellness program for all benefits eligible State of Arizona employees.
- Employees logging 500 points, may earn up to \$200. Pay out will be in Q1 2018.
- The 2017 Health Impact Program (HIP) began January 1 and will close on December 31.
- There is still time to enroll and reach the “Focus on 500”.

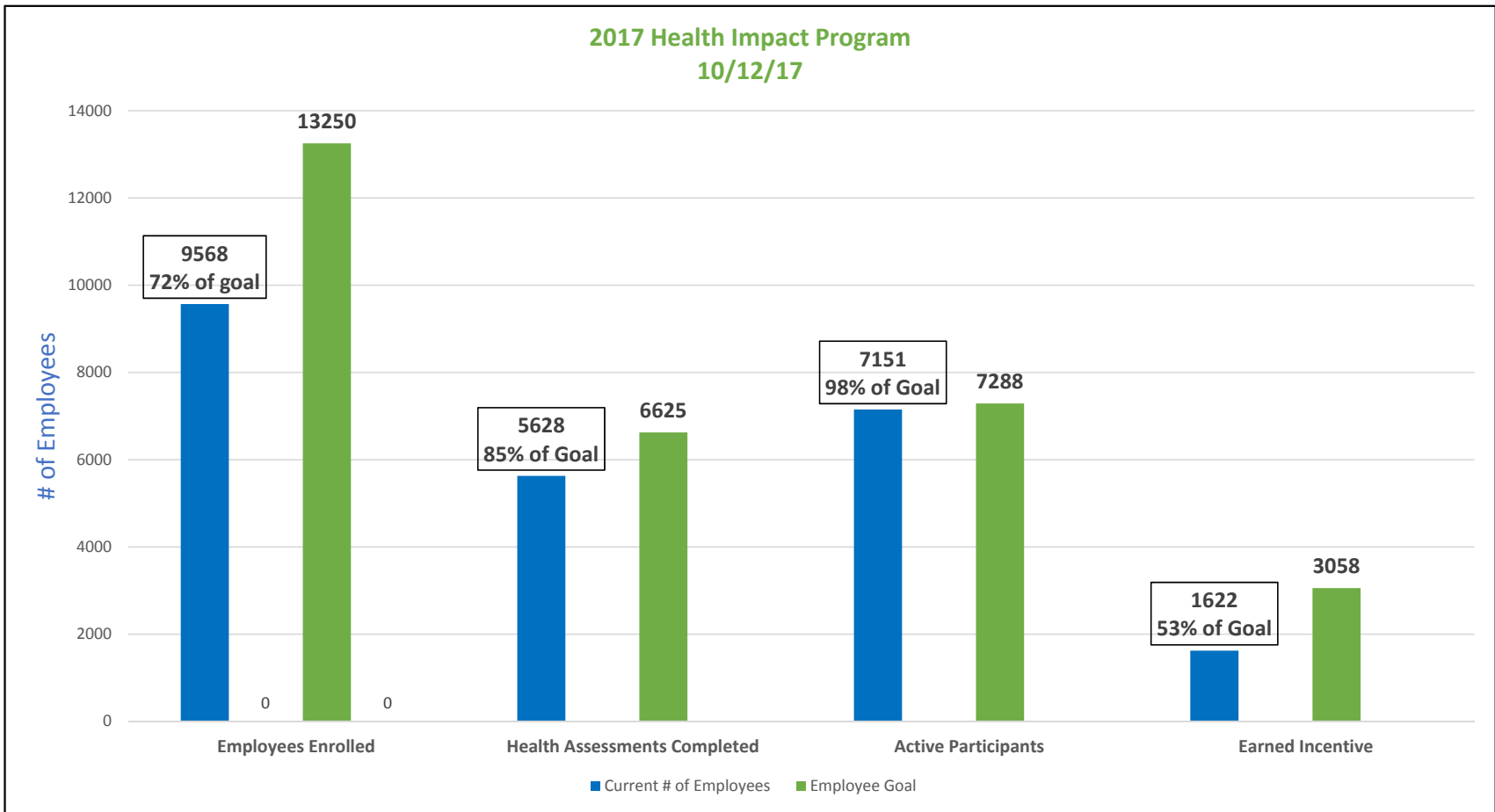


Did You Know?

- Our website is interactive and provides one-stop for programs and resources.
- Since the program lasts the entire calendar year, your preventive services and activities will count for 2017 regardless of when you completed them.
- All wellness activities (with the exception of the health assessment) are self-reported and you will see the points automatically update on your account once you mark a wellness activity complete.
- Once you complete the health assessment, your points will be applied in one-week and you will receive an email letting them know that the points have been applied.
- You have the option to sync your fitness tracker (over 30 different options) to download your exercise directly. If you do not use a fitness tracker, the information can be easily updated on the site.
- There are various ways for you to stay engaged in your health and earn points in the program. Such as; preventive screenings, assessments, education and program support, and quarterly challenges focus on areas of exercise, nutrition, well-being and finance.

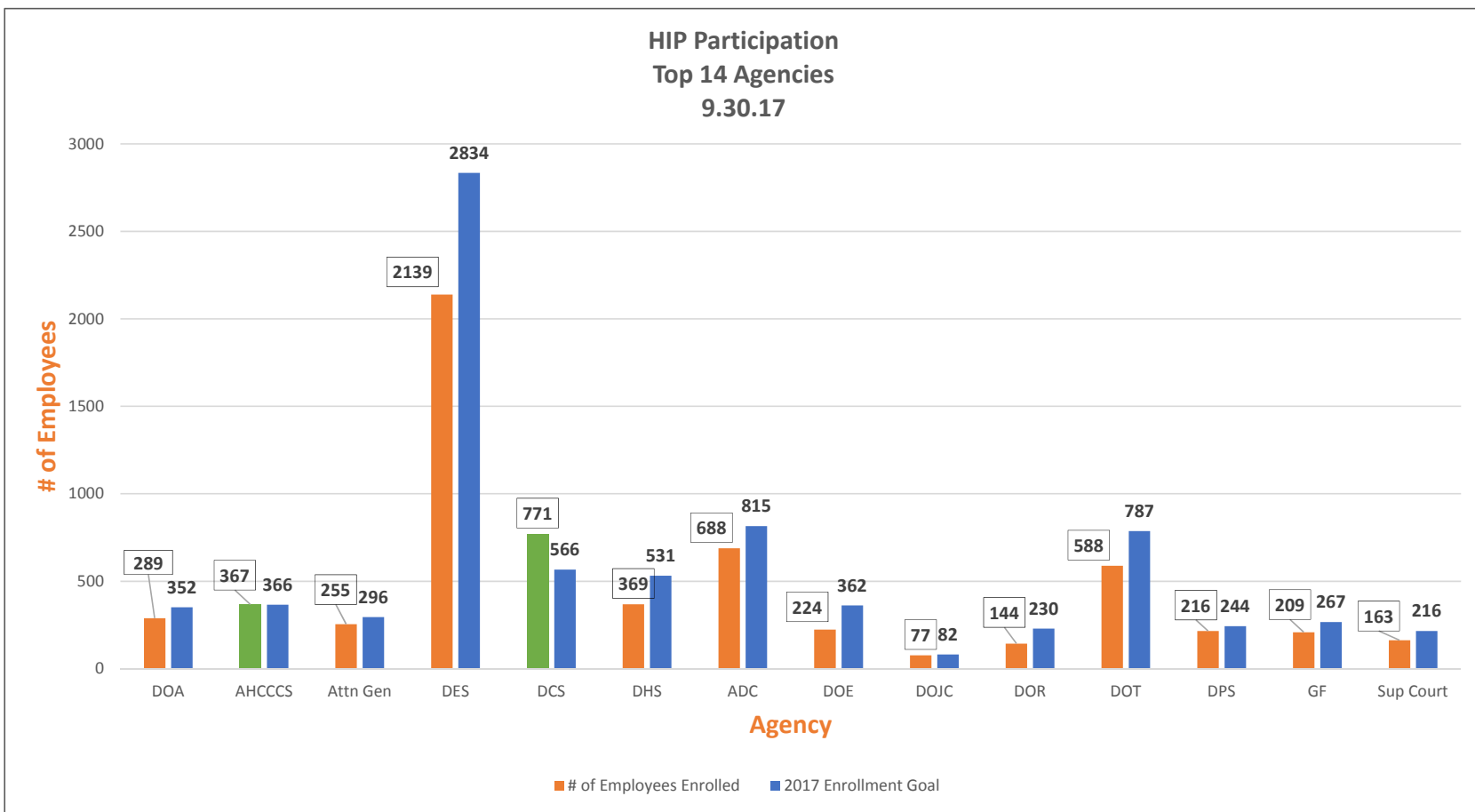


2017 Health Impact Program 10/12/17





HIP Participation Top 14 Agencies 9.30.17





New for 2018

Look for more program details and guidelines in January by visiting benefitoptions.az.gov/wellness.



OPERATIONS UPDATE

Presenters:
Jennifer Bowling



Benefit Liaison Contact Information

- Please review agency information at sign in desk
- Who is the Agency benefit liaison?
- Benefit Communication



Your Employee Services (Y.E.S.)

- Active employees must enroll through Y.E.S.
- Personal Email / Phone Requirements
- Supported Browsers
 - Supported: Internet Explorer and Chrome
 - Not Supported: Microsoft Edge
- Agency Reports
 - Identifies employees who have enrolled and those who have not
 - BSD will send benefit liaison the report at the end of each week for the first two weeks then daily for the third week



Your Employee Services (Y.E.S.)

- New Hire / Rehire Enrollment*:
 - During Open Enrollment (10/30 – 11/16)
 - First Step: Must complete new hire / re-hire enrollment through Y.E.S.
 - Second Step: Wait one business day, then complete open enrollment
 - This is required during a full positive enrollment
 - After Open Enrollment (11/17 – 12/31)
 - First Step: Must complete new hire / re-hire enrollment through Y.E.S.
 - Second Step: Complete a paper enrollment form
 - This is required during a full positive enrollment
 - 2018 Enrollment forms will be available on Benefitoptions.az.gov starting on November 17th 2017
 - Submit forms to ADOA Benefit Services Division

*Return to Work Retirees – employees that are retired from ASRS and enrolled as a retiree in the ADOA Health Plan (e.g. enrolled in Delta Dental as a retiree) must contact HRIS Help Desk to change bookmarks or submit paper election form to ADOA BSD.



Affordable Care Act (ACA)

- 2016 feedback from IRS
 - Top Error: dependent social security mismatch
 - If employee contacts agency regarding notice of any error or discrepancy regarding 1095-C statement from ADOA, IRS or Healthcare Marketplace, please have employee verify personal information and dependent information in Y.E.S.
 - If everything is correct in Y.E.S., please direct employee to contact Social Security Administration to ensure information is correct
 - Need agency support to communicate to employees that they are required to report dependent information to their employer (name, SSN, and date of birth) accurately or employee may be subject to \$50.00 fine from the IRS
- Dependent Social Security number now required in Y.E.S.
 - If unknown due to a birth, employee may enter 999-99-9999
 - Employee must contact BSD Member Services once the social security number is issued



Affordable Care Act (ACA)

Appeal Notices

- If your agency receive a Marketplace Appeal letter, please send copy of letter to ADOA Benefits Services: BenefitsOperations@azdoa.gov

Health Insurance Marketplace	DEPARTMENT OF HEALTH AND HUMAN SERVICES 465 INDUSTRIAL BOULEVARD LONDON, KENTUCKY 40750-0001
Nice Guys Printing John Smith 12345 9th Ave North Somewhere, VA 55555	July 16, 2014



Affordable Care Act (ACA)

- 2017 Standard Measurement Period is ending!
 - Benefit Eligible Employees:
 - Eligible for ADOA health plans in 2018 if the employee was paid on average of 30 hours per week during the standard measurement period (SMP)
 - SMP = 10/10/2016 to 10/09/2017
 - Benefits Operations will summarize hours paid to determine who is benefit eligible for 2018
 - Notices will be sent to agency benefit liaisons by the end of October



2018 Benefit Eligibility

- Employee was eligible for benefits in 2017 and is still eligible for benefits in 2018
 - No action required as employee is in correct employee status code and will be allowed to enroll during 2018 Open Enrollment
 - Employee must enroll during open enrollment to continue benefits
- Employee was not eligible for benefits in 2017 and is eligible for benefits in 2018
 - Benefit Liaison will receive notification that your employee was deemed eligible for 2018
 - Employee will receive notification explaining that they are eligible for benefits for 2018 plan year
 - Employee will not be eligible to complete enrollment through Y.E.S. – they MUST submit a paper application
 - Employee must remain in a non-benefit eligible status until 12/31/2017 which at that time they need to be changed to a benefit eligible status code



ASRS Reimbursement Form

Return To Work Retirees

ARIZONA STATE RETIREMENT SYSTEM (ASRS)
REIMBURSEMENT OF MEDICAL AND/OR DENTAL COST (SIX-MONTH REIMBURSEMENT PROGRAM)

PLEASE PRINT
 COMPLETE AND SEND TO: Phoenix (602) 240-2000
 ASRS - Health Ins. Dept. Tucson (520) 239-3100
 PG Box 33910 Phoenix, AZ 85067-3910 Toll-Free (800) 621-3778
 www.azasrs.gov

Disclosure of member's Social Security number is mandated by Section 6109 of the IRC. The ASRS will use Social Security numbers only to obtain information about an individual's ASRS account and to inform the IRS of distributions and withholdings with respect to the individual's account.

SECTION 1 - Retired/LTD Participant Member Information - TO BE COMPLETED BY THE MEMBER

Social Security Number _____ Name (Last) _____ (First) _____ (Middle Initial) _____
 Mailing Address _____ Daytime Telephone Number _____
 City _____ State _____ ZIP _____ Date of Birth (MM/DD/YYYY) _____

SECTION 2 - Retired/LTD Participant Member Status Information - TO BE COMPLETED BY THE MEMBER

A. Indicate member status with the ASRS (check only one):
 Arizona State Retirement System retiree
 Long Term Disability Plan participant (Medicare Eligible? Yes No)

B. Indicate member status with the employer (check only one):
 Return to work retiree on active employee group plan
 Long Term Disability participant on active employee group plan
 Dependent on active employee group plan

NOTE: If the retirement/LTD date is on or after August 2, 2012, you may not be eligible for reimbursement. Please see instructions.

SECTION 3 - Insurance Coverage Information - TO BE COMPLETED BY THE EMPLOYER

	Last Name	First Name	Social Security Number	Date of Birth (MM/DD/YYYY)	Effective Date of Coverage (MM/DD/YYYY)
Policy Holder					
Dependent					
Dependent					
Dependent					

SECTION 4 - Six-Month Reimbursement Totals (Jan. to June OR July to Dec.) - TO BE COMPLETED BY THE EMPLOYER

Date (List each MM/YYYY)	Total Medical Plan Premium Per Month	Total Dental Plan Premium Per Month	Employee Out-of-Pocket* Medical Premium Per Month	Employee Out-of-Pocket* Dental Premium Per Month	Total Employee Monthly Out-of-Pocket* Premium Per Month
*Out-of-Pocket Premium means payroll deductions per month.					Total \$



Unpaid Benefit Premium Project

Benefit Premium Adjustments

- GAO 73B- One Time Benefit Premium Adjustment Form
 - Updates HRIS to reflect that the employee owes the employer portion
 - Updates the “Unpaid Benefit Premium Report” to reflect the employee owes the employer portion of benefit premium
 - Refunds the agency the employer portion of the benefit premium
- Common Errors
 - Not submitted timely (Noon on Friday Pay week to be captured by Billing)
 - Incorrect deduction amount
 - Incorrect employer deduction code
 - If employer medical is charged, the employer dental should also be charged



Unpaid Benefit Premium Project

- Unpaid Benefit Premium Statements
 - Each pay period, agencies must mail the Unpaid Benefit Premium Statement this includes the following:
 - Deceased members
 - If there is unpaid benefit premium when beneficiary submits claim, the claim will be rejected including basic life
 - Employee returning to work and expecting to receive a paycheck
 - Employee stated the check is in the mail
 - Statement should include all unpaid benefit premium on report / in HRIS even past due amounts
 - Add more lines to Benefit Premium Statement, if needed
 - ADOA expectation is that the employee will receive multiple notices for their unpaid benefit premium
 - Common statement from agencies: We mailed it last pay period!



Unpaid Benefit Premium Project

- How to identify if employee owes benefit premium?
 - Run Unpaid Missing Benefit Premium report
 - Drill Around in HRIS
 - Also need to look for employees paid less than 30 hours in a pay period
- Benefit Premium Research Request Forms
- Benefit Premium Report
 - Request to add Option Code and to include headers to each page of the report
 - Dates for QLE, Appeals, and any other type of adjustments
 - Benefit Coverage Start Date and End date will not appear correctly
 - Due dates should appear correctly
- Benefit Premium Policy
 - Employees who work less than 30 hours per pay period
 - If unpaid benefit premium exist and the employee receives paycheck, HRIS will deduct all amounts owed if there are sufficient funds are available



Unpaid Benefit Premium Project

- Benefit Terminations
 - Benefit Premium Termination letter is sent by BSD Member Services
 - Past pay period, BSD telephoned employees on 9/25/2017 explaining the benefit termination process to ensure employee received proper notification
- Centralized Billing for Unpaid Benefit Premiums
 - Agency HR/Benefits staff will:
 - Continue to handle questions regarding policy, premium, FMLA
 - Follow process at: <http://benefitoptions.az.gov>, then click Rules, Policies, and Procedures / Benefit Premium
 - Be responsible for reviewing data from Data Warehouse to ensure the transactions in HRIS are accurate
 - Submit GAO 73B adjustment forms due by pay week Friday @ Noon (or sooner if a handwrite is needed)
 - ADOA General Accounting Office (GAO) will:
 - Pull the unpaid premium data from HRIS on Billing Statement Monday (non-pay week)
 - Print, fold, stuff envelopes, mail out, and email agency a PDF copy