





HBR Monthly Webinar

September 20, 2023







Agenda

- Get Ready for Open Enrollment
- Dependent Eligibility
 Documentation
- Tobacco Cessation Reminder
- Premium Payment Reconciliation
- New Enrollment Exception Form
- Flu Shot Clinic Reminder

Get Ready for Open Enrollment

- HBRs are encouraged to get ready for Open Enrollment (OE), set for Oct. 9-27, 2023!
- Here are a few tips:
 - The 2024 OE poster is available for HBRs to print out and display at worksites. HBRs can find and print the OE poster online by visiting the <u>HBR section of the Plan website</u>.
 - The Plan's website now has videos and additional information for your employees.
 - Start communicating now to encourage members to take a look!



Employee Benefits

Retiree Benefits
Individual Members
Wellness
HBRs







QUESTIONS AND SUPPORT Call the Eligibility and Enrollment Support Center at 855-859-0966.

EXTENDED HOURS DURING OPEN ENROLLMENT

MONDAY - FR**I**DAY 8AM - 10PM SATURDAY 8AM - 5PM



"As State Treasurer, it's my honor to continue our mission to lower health care costs for

teachers, state employees, and others who serve the people of North Carolina. I'm

hrilled that we have frozen premiums for

State Health Plan

Enroll and Learn More at

PNC.ORG

he sixth year in a row!

Open Enrollment October 9-27, 2023 BASE PPO PLAN (70/30)

2024 State Health Plan

- ALL members will AUTOMATICALLY be moved to this plan.
- \$25/month employee-only premium (after you complete tobacco attestation).

ENHANCED PPO PLAN (80/20)

- You MUST take action to enroll in this plan.
- \$50/month employee-only premium (after you complete tobacco attestation).

HIGHLIGHTS FOR 2024

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No premium increases for the 6th year in a row!

Members who select a Clear Pricing Project Provider as their Primary Care Provider will continue to enjoy \$0 copay!

Members will continue to enjoy a reduced copay when visiting a Clear Pricing Project Provider!

Preferred and non-preferred insulin continues to have a \$0 copay for a 30-day supply!

Preventive Services remain covered at 100% - no copay or deductible on either plan!

There are no significant benefit changes for 2024. The formulary (drug list), which determines what medications are covered and what tier they fall under, changes on a quarterly basis, so there is a possibility that you will have changes in your prescription coverage in 2024.





Open Enrollment Mail Files

- The State Health Plan pulled mail files for Open Enrollment Decision Guides on Aug. 28, 2023. Please keep in mind that anyone hired after that date, planning to move or who doesn't have an updated mailing address in eBenefits WILL NOT receive a decision guide.
- Open Enrollment Decision Guides will get posted to the Plan's website prior to Open Enrollment and employees that may fall into these categories can be directed to the Plan's website for their materials.
- It's also important to remember to communicate to employees who are on leave of absence. Make sure they're aware that they will need to check their mail for the materials and take action during Open Enrollment.



2024 OPEN ENROLLMENT DECISION GUIDE October 9-27, 2023

"As State Treasurer, I pledged to preserve and protect the State Health Plan for those that teach, protect and otherwise serve the citizens of North Carolina. We have been on a mission to bring transparency, lower cost and increased access to quality health care.

I'm happy that we've been able to freeze premiums for the sixth year in a row without raising deductibles or copays! We've also been able to eliminate the costs of insulin for members. We're not stopping our hard work to lower family premiums to make this benefit more affordable especially for entry-level employees who must work one week out of every month just to pay for their health plan coverage.

I encourage you to review your options in the Decision Guide. Take action to choose what is best for you and your family knowing that the employees of the State Health Plan are working hard every day to maintain this valuable benefit."

Dale R. Folwell, CPA State Treasurer





Reminder! Employees Can Get Head Start on Open Enrollment

- Employees who are tobacco users and want to earn their monthly premium credit for 2024 don't have to wait until Open Enrollment this fall. They can take action **now** to save money throughout 2024!
- Tobacco users can attend a tobacco cessation counseling session at their Primary Care Provider's office for FREE to earn a lower premium for 2024.
- They have until November 30, 2023, to take action. (Note: If employees combine their tobacco cessation visit with another service, there may be a copay.)
- To ensure they receive credit for their visit, employees must upload their office visit summary to the "Document Center" located in <u>eBenefits</u>.
- They should make sure to request a copy of their summary during their visit.



Managing Dependent Eligibility Documents

- Collecting and validating dependent eligibility documentation is the responsibility of the HBR.
- Because of the volume of new dependent adds during OE, the Plan allows unverified dependents to be approved for enrollment for the following year without documentation verification with the intent that the appropriate documentation will be collected and validated in the weeks following OE.
- This year, the Plan will once again give HBRs additional time after OE to review and approve dependent verification documentation.
 Verification must be completed by November 17, 2023.
- On **November 20, 2023**, the Plan will begin terminating coverage for unvalidated dependents. The goal is to complete the termination process prior to the January premium invoice production.
- If a dependent is terminated for lack of documentation, an enrollment exception will be required to reinstate the dependent. All reinstatement and exception rules continue to apply.





Timely Premium Payment Reconciliation Reminder

- The State Health Plan will not approve enrollment correction exceptions more than two billing cycles in arrears.
- As a reminder, all premium payments are due by the first of the effective month. Equally important, employing units are required to pay as billed. Each employing unit should reconcile their invoice every month to ensure that enrollment changes are captured appropriately.
- It is critical that the employing unit is cognizant of their billing cutoff window so that any terminations or additions impacting the invoice are finalized prior to the cutoff. If an enrollment correction is needed, it must be processed prior to the cutoff date of the next month's premium invoice; otherwise, it will not be reflected in the next month's invoice.
- Updates made and approved in eBenefits 48 hours before your bill date should show on your next invoice. In the event an enrollment appears to be accurate in eBenefits but inaccurate on the invoice, you must open a case to Benefitfocus account management via One Place 365 so they can research the discrepancy.
- Employing units should not remit payment based on changes they anticipate will take place after the billing cutoff. Underpaying the invoice because of a termination that was processed after the cutoff, for example, impacts the claims processing timeline for the entire employing unit.
- The State Health Plan holds all claims as of the effective date of the billing month and only advances the "paid through" date once the premium invoice is paid in full.



Enrollment Exception Form Update

- The State Health Plan launched a new Enrollment Exception Request Form!
- The new form will be from the same location on the Plan's website, but the form will have a new look and streamlined required data fields. If you have bookmarked this page, please update your link, as the new form will have a new link and your old bookmark will not work.
- The new form does not require HBRs to have a login to complete submission.
- The Enrollment Exception Request Form will have fewer data fields to reduce the data that needs to be submitted. The Request Type and Error Type fields can now have multiple values selected.
- Important Reminders:
 - Required fields are marked with an asterisk * and will ensure the submission can be processed in a timely manner.
 - Exception requests can only be submitted by an HBR. Requests submitted by a member will be denied.
 - If the member does not have a Social Security number or other alternate ID, please enter N/A for that field.
 - In the reason field, please enter an appropriate level of detail to ensure Plan staff have enough information.
 - Any supporting documentation should be uploaded to the member's document center record in eBenefits.
- Currently HBRs receive exception communications from the HBRInquiries@nctreasurer.com email address regarding submitted exceptions request forms (for confirmation of receipt and decisions).
- Going forward, all communications will now be sent from the SHPExceptions@nctreasurer.com email address.



Flu Shot Clinic Reminder

- The State Health Plan will not be hosting flu shot clinics this year.
- The Plan encourages you to communicate to your employees that they should take advantage of other local opportunities such as pharmacies or provider offices to receive the flu vaccine.
- If your group would like to arrange your own worksite flu shot clinic, please make sure to utilize an in-network provider to avoid your employees being charged.
- Some groups received an automated email from CVS about setting up a flu shot clinic. That offer may be confusing as it offered multiple ways to bill your group and does come with a fee associated with unused vaccines.
- The only way the State Health Plan will cover the flu shot at 100% (no charge to employee) is if it comes through as an innetwork claim.



Upcoming 2023 HBR Monthly Webinars

- All webinars begin at 10 a.m. To register for the monthly webinars, see below or visit the Plan's <u>website</u>.
 - October 25, 2023, 10-11 a.m.
 - November 15, 2023, 10-11 a.m.
 - December 20, 2023, 10-11 a.m.



