April 2023 HBR Update



End of COVID Public Health Emergency

The State Health Plan put multiple temporary benefit provisions in place to assist Plan members during the COVID-19 public health emergency. In January 2023, the federal government announced that the COVID-19 public health emergency will end on May 11, 2023.



Here's what it means to employees regarding coverage as it relates to COVID-19:

- The Plan will continue to cover both the cost of the COVID-19
 vaccine and vaccine administration at 100% when employees receive
 the vaccine at an in-network provider as part of the Plan's preventive
 care benefits. If employees receive any other service during the visit,
 the visit may be subject to a copay. This is true for all other vaccines
 the Plan covers.
- The Plan will continue to cover COVID-19 tests that are administered by a provider. If employees receive any other service during the visit, the visit may be subject to a copay.
- The Plan will no longer cover the cost of over-the-counter (OTC)
 COVID-19 tests. Employees will be responsible for the cost.

• The Plan will no longer cover "return to work" COVID testing. "Return to work" testing includes having to provide an employer a negative test outside of the standard COVID-19 exposure testing guidelines.

The Plan continues to cover telehealth. Employees should always ask their provider if they offer telehealth services. The Plan implemented a new telehealth policy effective January 1, 2023. Below are the services that will no longer be covered at the same copay as in-person care (if a person receives these services via a telehealth appointment). The services below will continue to be covered, but employees will have to pay the appropriate copay.

- Dialysis services
- Physical Therapy/Occupational Therapy evaluations
- COVID testing services
- Emergency Department Evaluation and Management Services
- Hospitalization Evaluation and Management Services
- Extended Office Visits
- New Patient Preventative/Annual Wellness Exams

Please call Customer Service at 888-234-2416 if you have any questions about your telehealth benefits.

Through Dec. 31, 2022, the State Health Plan has spent nearly \$445.5 million on efforts to fight COVID, including tests, vaccines and treatment.

State Health Plan Operations: Eligibility and Enrollment

Last month, the Plan <u>reviewed</u> its cash management policies regarding our vendors that support the receipt and disbursement of Plan funds. This month we'll focus on the Plan's Eligibility and Enrollment Services (EES) vendor, Benefitfocus. While the Plan utilizes Benefitfocus' enrollment platform (eBenefits) and data exchanges, the eligibility and enrollment rules, as well as many of the processes used to support Plan members, have been customized for the Plan. Benefitfocus also administers NCFlex eligibility and enrollment.

Enrollment Rules

Benefitfocus manages the Plan's eligibility and enrollment rules, transmitting and receiving enrollment with the Plan's other vendors and some employing units as well as providing support via telephone and enrollment to Plan

members. Health Benefit Representatives (HBRs) are very familiar with the enrollment rules that ensure that employees are only able to enroll or make enrollment changes at specific times. These rules are a combination of regulations outlined in the North Carolina General Statutes, the Affordable Care Act, and other federal regulations.

The Eligibility and Enrollment Support Center is also managed by Benefitfocus. The call center is available each state business day between 8 a.m. and 5 p.m. to assist Plan members as well as HBRs through the account management team.

Eligibility Rules

Eligibility rules are more "Plan-specific" and include things like the 12-Month RIF (Reduction in Force) rules or what we call the "Forever RIF" rules. While you only have to manage the subscriber for the first 12 months of RIF, the Plan must ensure they are offered the appropriate coverage at the end of the 12-month RIF period and that their Medicare status is correct. Towards the end of the 12-month RIF period, Benefitfocus mails members a letter offering them "Forever RIF" coverage and providing enrollment instructions. Of course, it all hinges on the HBR accurately setting them up as a 12-month RIF on a timely basis as well as terminating them on a timely basis. See instructions here.

The Plan has established similar, custom procedures with Benefitfocus to support surviving dependents. The termination due to death sets off a process that includes enrolling the dependents in surviving dependent coverage and mailing them a letter with enrollment and billing instructions.

Another Benefitfocus custom process is a letter mailed to all active members right before they turn 65. The letter includes all the information they need to know about enrolling in Medicare and/or making changes to their Plan coverage. It is a helpful resource even if the member does not intend to make any enrollment changes due to this qualifying life event.

The most complex process the Plan has is the retirement process. The Plan and Benefitfocus have developed a process that automatically enrolls a member into the Retirement Systems group once a retirement is approved. As with other custom processes, the subscriber is mailed a letter advising them they have been enrolled and giving them the timelines for making changes. As a reminder, new retirees will not auto-enroll into retirement until their active termination is processed. It is not uncommon for a new retiree to miss their opportunity to enroll into a Medicare Advantage plan because of a delayed termination by the active group.

File Exchanges

Many groups have established payroll file exchanges with Benefitfocus, which are employing-unit specific. Similarly, we have custom daily enrollment files between Benefitfocus and other Plan vendors: Blue Cross NC, iTEDIUM, CVS and Humana. We also have monthly files to the Plan, and some audit vendors. Many of those also return daily files to Benefitfocus. A great deal of the Plan's staff time every month is devoted to ensuring the data exchanges between Plan vendors is audited and reconciled. Ensuring members are properly enrolled at all the vendors is the foundation for everything we do.

For Employees Planning Retirement: 'Understanding Your Medical Plan Options When You Become Medicare-Eligible' Series Under Way

HBRs are encouraged to share the following information with their employees thinking of retirement: A limited number of <u>in-person sessions</u> have been added. These sessions – set for April and May – will offer the same information as the <u>webinars</u> already under way and scheduled through August.

These popular, free onsite sessions and webinars are designed for active employees who will soon be 65, are already 65 or older, and retirees getting ready to turn 65. Each event lasts approximately 2 hours and will explain important information regarding Medicare, retirement health benefit options and offer the opportunity to ask questions. These events are also a great resource for HBRs, so feel free to attend one as well so you can assist employees as needed.

Interested employees and HBRs are encouraged to <u>register</u> soon, as these events are expected to fill quickly!

In-Person Session Schedule		
Date & Time	County	Location
April 20, 2023 2 p.m.	Forsyth	Forsyth Technical Community College, Robert L. Strickland Center, Room 3340, 1615 Miller Street, Winston-Salem, NC 27103
April 21, 2023 10 a.m.	Guilford	Guilford Technical Community College, Jamestown Campus, Sears Applied Technologies Center, Room 120, 601 E. Main Street, Jamestown, NC 27282
May 11, 2023 2 p.m.	Pitt	Pitt Community College, Craig F. Goess Student Building, Multipurpose Rooms, 2000 Eddie Smith St., Winterville, NC 28590
May 17, 2023 10 a.m.	Durham	Durham Technical Community College, Building 5: Educational Resources Center, Room 5-100, 1637 East Lawson Street, Durham, NC 27703

Click here to register for online or in-person events →

2023 HBR Monthly Webinars

The State Health Plan continues to utilize monthly HBR webinars as monthly training opportunities. The monthly webinars serve as the main source of updates and guided training. Given this emphasis, HBR attendance at each monthly webinar is required.

All webinars are scheduled to take place from 10 a.m. to 11 a.m. To register for the monthly webinars, see below or visit the Plan's website.

- April 26, 2023, 10-11 a.m.
- May 24, 2023, 10-11 a.m.
- June 21, 2023, 10-11 a.m.
- July 26, 2023, 10-11 a.m.
- August 23, 2023, 10-11 a.m.
- <u>September 20, 2023, 10-11 a.m.</u>



- October 25, 2023, 10-11 a.m.
- November 15, 2023, 10-11 a.m.
- December 20, 2023, 10-11 a.m.



Next HBR Monthly Webinar April 26, 2023 - 10am

Click to Register! >





Fontina & Prosciutto Stuffed Chicken with Spring Veggies

Get the Recipe! >





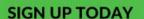
Autism Awareness Month

Learn More!





- Sign up to receive State Health Plan updates by text! Just text
 "Join" to 76971.
- Text messages will be general information regarding your State Health Plan benefits.









Message Frequency may vary. Message and Data rates may apply.

Reply STOP to cancel.

Eligibility and Enrollment Questions: 855-859-0966

Prescription Questions: 888-321-3124

For questions on this newsletter, e-mail: ppo.inquiries@nctreasurer.com



