





2022 State Health Plan Open Enrollment

Active and Non-Medicare Members

Open Enrollment October 11 – 29, 2021



Topics for Today

- Open Enrollment Reminders and Plan Options
- Benefit Highlights for 2022
- 80/20 & 70/30 PPO Plan Benefits
- Premium Rates
- Online Enrollment Process
- Important Phone Numbers



Dependent Eligibility Reminder

- Open Enrollment is the time to add/drop dependents and/or change plans.
- Outside of OE, there must be a Qualifying Life Event (QLE) to add/drop dependents.
 - You have 30 days from the date of the event to make changes.
- Dependent verification documentation is required for all dependents.
 This includes Social Security numbers.
 - During Open Enrollment, you have until October 29 to provide the required documentation.
 - A full list of required documents can be found on the Plan's website.
- Documents should be uploaded and stored in eBenefits. Need help?
 Contact your HBR or the Eligibility and Enrollment Support Center (855-859-0966).





Guidelines for a Qualifying Life Event (QLE) and dependent eligibility.





Action Required!



- ALL active and non-Medicare members, including dependents, will be moved to the 70/30 PPO Plan effective January 1, 2022.
 - You will see this change when you log in to eBenefits during Open Enrollment.
- You MUST take action if you want to enroll in the 80/20 PPO Plan and reduce your premium in either the 70/30 or 80/20 PPO Plan.
- If you do not take action by October 29, you will:
 - Remain on the 70/30 PPO Plan for 2022.
 - Pay more for subscriber-only premium for failure to complete tobacco attestation for active members in the 70/30 and 80/20 PPO Plans.
- The 70/30 PPO Plan remains premium-free for non-Medicare members in the Retirement Systems and does not require a tobacco attestation to reduce the premium. The tobacco attestation applies to non-Medicare members in the Retirement Systems who want to enroll in the 80/20 PPO Plan and reduce their monthly premium.



2022 Health Plan Options

• The State Health Plan will continue to offer two plan options to active members and non-Medicare retirees for 2022:

80/20 PPO Plan

Members pay a 20% coinsurance for eligible in-network services. For some services (i.e., office visits, urgent care or emergency room visits), members pay a copay. Affordable Care Act (ACA) Preventive Services performed by an in-network provider are covered at 100% by the Plan, at no cost to the member.

70/30 PPO Plan

Members pay 30% coinsurance for eligible in-network expenses. Similar to the 80/20 PPO Plan, members pay a copay for some services (i.e., office visits, urgent care or emergency room visits). Affordable Care Act (ACA) Preventive Services performed by an in-network provider are covered at 100% by the Plan, at no cost to the member.

Active members can reduce their employee premium by completing the tobacco attestation in both plans!





Benefit Highlights for 2022



Benefit News for 2022!

- No premium increases for the 4th year in a row!
- Members who select a Clear Pricing Project Provider as their Primary Care Provider will continue to enjoy a \$0 copay!
- Reduced copays for members who visit a Clear Pricing Project Specialist!
- Preferred and non-preferred insulin will continue to have a \$0 copay for a 30-day supply!
- Preventive Services & Preventive Medications will continue to have no copay or deductible on either plan!



Clear Pricing Project

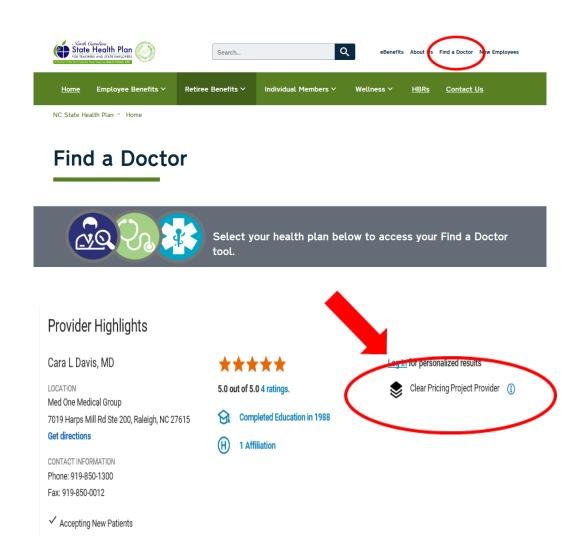
- Plan members currently utilize the NC State Health Plan network, which encompasses Clear Pricing Project (CPP) providers and providers in the Blue Options Network to ensure adequate access to health care.
- The goal of CPP is to ensure that members have this valuable benefit for years to come, while bringing transparency to health care costs and addressing the rising health costs that the Plan and members face each day.
- CPP providers have agreed to get rid of secret contracts, making health care more affordable and transparent.
- In 2022, the Plan will continue to offer significant copay reductions for members who visit a CPP provider in 2022 and if you select a CPP provider as your PCP and it appears on your ID card, any visit to that provider has a \$0 copay.

Clear Pricing Project Provider Copay Reductions

CLEAR PRICING PROJECT PROVIDER COPAY COMPARISON CHART				
Provider	80/20 PPO Plan	70/30 PPO Plan		
Primary Care Provider (PCP)	\$0 for Clear Pricing Project (CPP) PCP on ID card; \$10 for non-CPP PCP on ID card; \$25 for any other PCP	\$0 for Clear Pricing Project (CPP) PCP on ID card; \$30 for non-CPP PCP on ID card; \$45 for any other PCP		
Specialist	\$40 for CPP Specialist; \$80 for other Specialists	\$47 for CPP Specialist; \$94 for other Specialists		
Behavioral Health Provider	\$0 for CPP Provider \$25 for non-CPP Provider	\$0 for CPP Provider \$45 for non-CPP Provider		
Speech, Occupational, Chiropractor and Physical Therapy	\$26 for CPP Providers; \$52 for other Providers	\$36 for CPP Providers; \$72 for other Providers		

Locating Clear Pricing Project Providers

- CPP providers can be located using the Find A Doctor search tool on the Plan's website.
 - The <u>Find A Doctor</u> tool can be found on the top of every page.
 - Select your plan and then North Carolina State Health Plan.
 - Search or browse for a provider. CPP providers will have "Clear Pricing Project Provider" next to their name within the Provider Highlights.



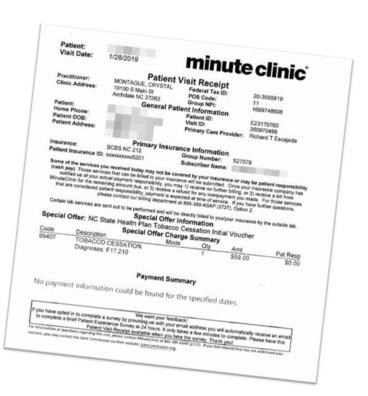
2022 Open Enrollment Tobacco Attestation

- Subscribers can attend a tobacco cessation counseling session at a CVS
 MinuteClinic or a Primary Care Provider's (PCP) office for free to lower their
 2022 employee-only premium by \$60.
 - Since subscribers can see a PCP, waivers will no longer be given to members who live more than 25 miles away from a CVS MinuteClinic.
- To earn \$60 premium credit, subscribers may complete the tobacco cessation counseling session between **now and November 30, 2021**. No need to wait until Open Enrollment!
 - This action is only for tobacco users who want to reduce their 2022 premium. If you
 as the subscriber are not a tobacco user, simply attest to that fact during Open
 Enrollment.

Tobacco Attestation Counseling Reminder



To ensure you receive credit for the office visit, upload the office visit summary (from PCP office or CVS MinuteClinic to the "Document Center" located in eBenefits, the Plan's enrollment system.



- Don't forget, Tobacco cessation counseling is available throughout the year!
- If you're interested in tobacco cessation counseling at any point in the year, you can just GO to a CVS MinuteClinic or PCP's office.





Tobacco Attestation Savings



	80/20 Plan	70/30 Plan
Total employee-only monthly premium without credit	\$110	\$85
Attest to being tobacco-free OR agree to visit a CVS MinuteClinic or PCP's office for at least one tobacco cessation counseling session, if a tobacco user.	-\$60	-\$60
TOTAL employee-only monthly premium with credit	\$50	\$25

Subscribers enrolled through the <u>Retirement Systems</u> that select the <u>70/30 PPO Plan</u> do NOT need to complete the tobacco attestation.

80/20 & 70/30 PPO Plan Benefits



2022 80/20 & 70/30 PPO Plans

Plan Design Features	80/20 PPO Plan	70/30 PPO Plan
Deductible	\$1,250 Individual \$3,750 Family (Combined Medical & Pharmacy)	\$1,500 Individual \$4,500 Family (Combined Medical & Pharmacy)
Medical/Rx Out-of-Pocket (OOP)	\$4,890 Individual \$14,670 Family (Combined Medical & Pharmacy)	\$5,900 Individual \$16,300 Family (Combined Medical & Pharmacy)
Preventive Services	\$0	\$0
Primary Care Provider (PCP)	\$0 for CPP PCP on ID Card \$10 for non-CPP PCP on ID card \$25 for any other PCP	\$0 for CPP PCP on ID Card \$30 for non-CPP PCP on ID card \$45 for any other PCP
Specialist Copay	\$40 for CPP Specialist \$80 for other Specialists	\$47 for CPP Specialist \$94 for other Specialists
Speech, Occupational, Chiro and Physical Therapy Copay	\$26 for CPP Providers \$52 for other Providers	\$36 for CPP Providers \$72 for other Providers
Hospital & ER Copays	\$300 + Ded/Coins.	\$337 + Ded/Coins.

Copay Waiver for Insulin

• For January 1, 2022, members will continue to have a \$0 copay for Preferred and Non-Preferred Insulin.

Rx Tier	80/20	70/30	HDHP
Tier 1 – Generics <u><</u> \$150	\$5	\$16	Ded/Coins
Tier 2 – Preferred Brands & High Cost Generics	\$30	\$47	Ded/Coins
Tier 3 – Non-Preferred	Ded/Coins	Ded/Coins	Ded/Coins
Tier 4 – Low Cost Generic Specialty	\$100	\$200	Ded/Coins
Tier 5 – Preferred Specialty	\$250	\$350	Ded/Coins
Tier 6 – Non-Preferred Specialty	Ded/Coins	Ded/Coins	Ded/Coins
Preventive Medications	\$0	\$0	\$0
Preferred Diabetic Supplies	\$5	\$10	Coins
Preferred and Non-Preferred Insulin	\$0	\$0	\$0

Pharmacy Benefit Reminders

CVS Caremark is the Pharmacy Benefits Manager for the State Health Plan.
 Remember that the Plan continues to maintain a customized closed formulary, or drug list.

Closed Formulary – In a "closed" formulary, certain drugs are excluded.

- The formulary is updated on a quarterly basis and members should always review it to see if there have been any coverage changes to their prescribed medications.
- An exception process is available to providers who believe that, based on medical necessity, it is in the members' best interest to remain on the excluded drug(s).
- Excluded drugs approved for coverage through the exceptions process will be at the tier 3 or tier 6 member copay level.

Premium Rates





2022 Premium Rates

Monthly Premium Rates	2022 Rates *		
80/20 PPO Plan			
Subscriber Only	\$50.00		
Subscriber + Child(ren)	\$305.00		
Subscriber + Spouse	\$700.00		
Subscriber + Family	\$720.00		
70/30 PPO Plan			
Subscriber Only	\$25.00		
Subscriber + Child(ren)	\$218.00		
Subscriber + Spouse	\$590.00		
Subscriber + Family	\$598.00		

^{*}Assumes completion of tobacco attestation. The employee-only premium will be \$60 higher per month if the tobacco attestation is not completed. NOTE: 70/30 PPO Plan for retiree-only coverage remains premium free.

Online Enrollment Process





Online Enrollment: Getting Started!

Benefits is the Gateway to your Enrollment

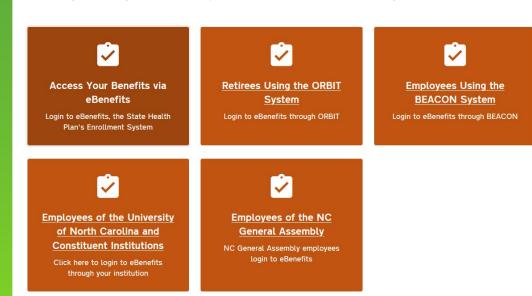
To log into eBenefits, click the gold button for YOUR enrollment system. If your employer is not listed, select the gold "eBenefits" button or contact your HR representative for assistance.

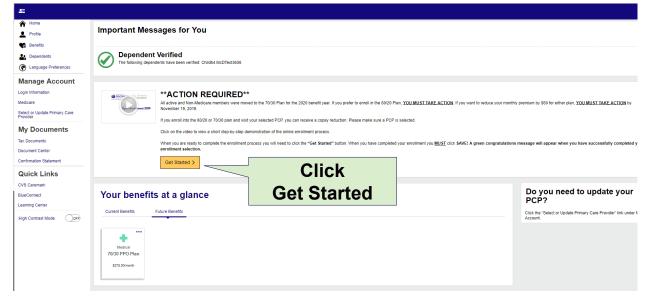
Once you're logged into eBenefits, you can complete your OPEN ENROLLMENT, make changes and access your benefit information through Blue Connect, where you can find your EOBs and order new ID cards.

Important Note Regarding Passwords:

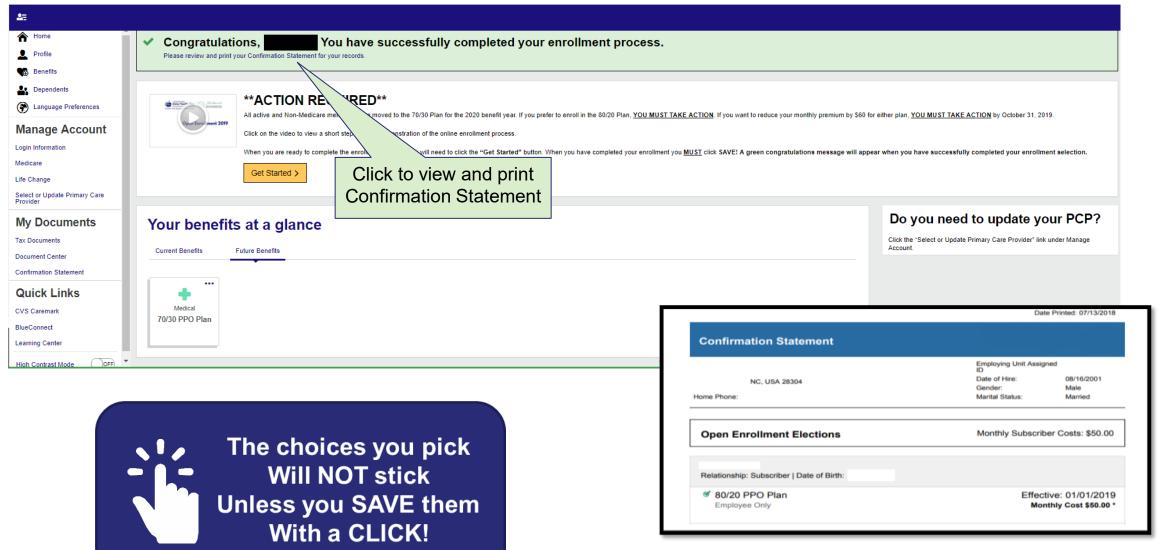
If you are having issues logging into eBenefits, do not continue to attempt to log in or you will lock your account. Instead you have the option to reset your password. Simply click "Reset your account" then "I can't remember my password." From there you will be prompted to a screen that will ask you to enter your username so a passcode can be sent to the email address you have in eBenefits.

- To get started, visit shpnc.org
- Click "eBenefits"
- Select the appropriate colored box to access eBenefits
- Once you are logged into eBenefits, click "Get Started"





Confirmation Page



Password Resets for eBenefits

- For members that log in directly to eBenefits (not through an employer portal) you can reset your password yourself and DO NOT need to call the Eligibility and Enrollment Support Center to reset your password.
- If you are having issues logging into eBenefits, do not continue to attempt to log in or you will lock your account. Instead, you have the option to reset your password.
- Simply click "Reset your account" on the log-in page, and then click "I can't remember my password." From there, you will be prompted to a screen that will ask you to enter your username, so a passcode can be sent to the email address you have in eBenefits.

Extended Call Center Hours



- The Eligibility and Enrollment Support Center will have extended hours during Open Enrollment:
 - Monday-Friday, 8 a.m. 10 p.m.
 - Saturdays, 8 a.m. 5 p.m.
- You are encouraged to NOT wait until the last minute to enroll! As we near the end of the enrollment period, call wait times will be longer than usual. Act early!

855-859-0966



Member Resources

• ELIGIBILITY AND ENROLLMENT SUPPORT CENTER 855-859-0966

CVS CAREMARK

(PHARMACY BENEFITS)

888-321-3124

 BLUE CROSS AND BLUE SHIELD OF NC (BENEFITS, CLAIMS)
 888-234-2416

Thank You! Questions?

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