



North Carolina
State Health Plan
FOR TEACHERS AND STATE EMPLOYEES



Proposed Open Enrollment Strategy for 2017 Benefit Year

Board of Trustees Meeting

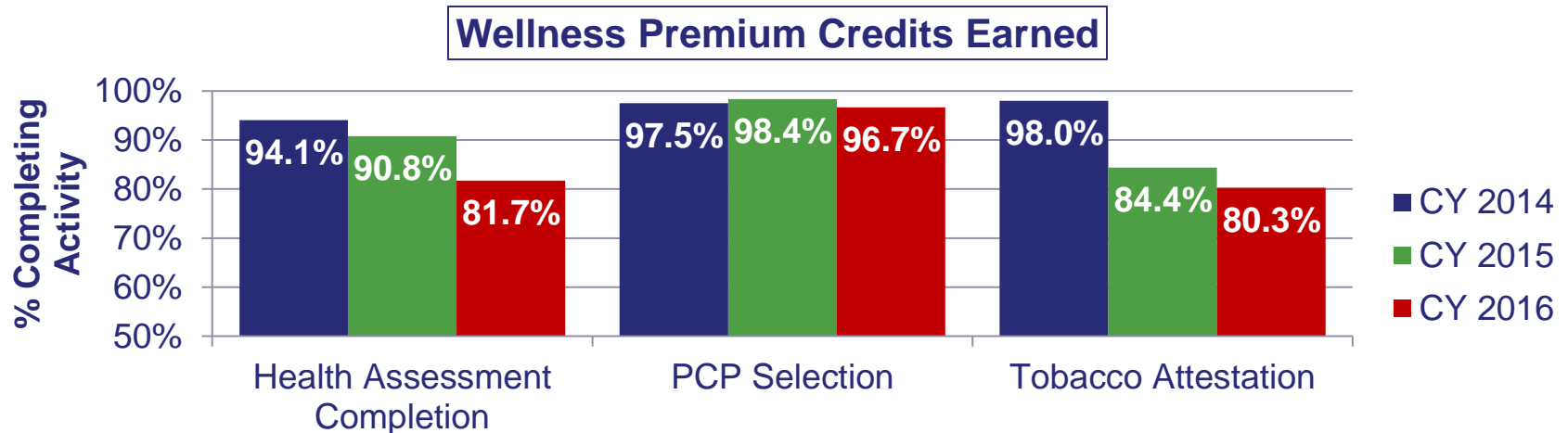
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A Division of the Department of State Treasurer

2017 Open Enrollment: Non-Medicare Primary Subscribers Default Strategy

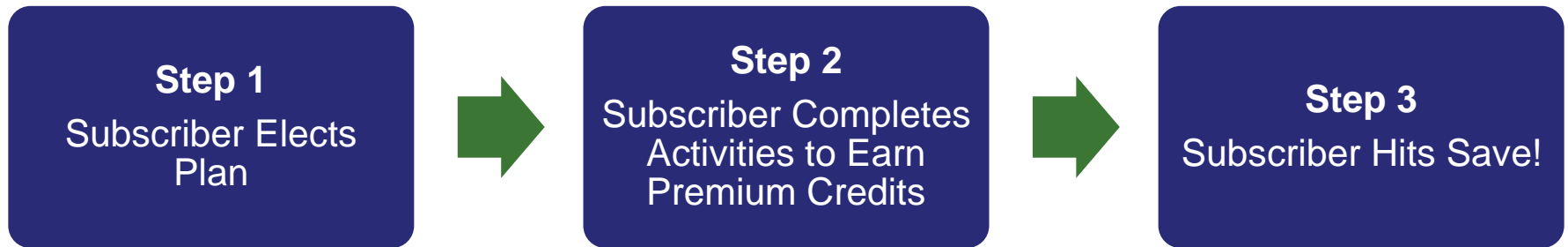
The year that we introduced wellness premium credits into the enrollment strategy was the year that our members had the most success completing them.

- **2014 Open Enrollment (OE)** – All members were moved to the Traditional 70/30 Plan and subscribers had to elect a higher value plan **and** complete healthy activities to earn premium credits
- **2015 & 2016 OE** – Members remained in the plan they elected for 2014 and if they did not want to change plans, only had to complete some of wellness premium credits during OE



2017 Open Enrollment: Non-Medicare Primary Subscribers Default Strategy

- Based on the first three years of experience, Plan staff believes the best strategy to engage members during OE is to move everyone back to the Traditional 70/30 as a starting point.
- Communicating that they **must take action** to elect the plan of their choice seems to resonate more with members. Like they did in year one, members will have to elect a higher value plan **and** complete the wellness premium credits.



- This strategy may have financial implications for employees beyond earning premium credits if a base premium is added to the Traditional 70/30 plan.

2017 Open Enrollment: Premium Credit Strategy

- Similar to the default enrollment strategy, Plan staff believes the best course of action for the wellness premium credits is to require subscribers to complete all three credits again during OE.
- By requiring subscribers to complete all three activities, there should be less confusion about what is required during OE. Subscribers will have to take action to enroll in the plan of their choice **and** to reduce their premiums.
 - **PCP Elections** – All subscribers will have to elect a PCP for themselves and any enrolled dependents during OE. **Even if they had elected a PCP for a previous plan year, they will have to re-elect a PCP during OE to earn the wellness premium credit for 2017.**
 - **Health Assessment** – All subscribers will have to complete a new Health Assessment to earn the credit for 2017. Their answers to the previous years' assessment will be removed, and they will need to complete the entire assessment. The time period for the completion will be shortened as well. Instead of allowing members to have a year from the last Annual Enrollment, members will have to complete the Health Assessment between March 1, 2016, and the end of OE.

2017 Open Enrollment: Premium Credit Strategy (continued)

- **Tobacco Attestation** – Instead of requiring the subscriber to attest that he or she and if applicable, his or her spouse, is not a tobacco user or is participating in a tobacco cessation program, Plan staff proposes streamlining it so that the subscriber only attests to his or her tobacco status:



Non-tobacco user or



Tobacco user who agrees to participate in the QuitlineNC or



Tobacco user

- Those who attest that they agree to participate in the QuitlineNC will have their enrollment in that program validated. They will not receive the credit unless they have enrolled.

2017 Open Enrollment: Premium Credit Strategy

- While the strategy for wellness premium credit completion is the same for both active and retired non-Medicare primary subscribers, only the active subscribers will have a tobacco attestation on the Traditional 70/30 plan.

2017 Wellness Premium Credits						
Active Subscribers				Non-Medicare Prime Retirees		
Plan Option	Traditional 70/30	Enhanced 80/20	CDHP	Traditional 70/30	Enhanced 80/20	CDHP
Premium Credits	Tobacco Attestation	Tobacco Attestation	Tobacco Attestation		Tobacco Attestation	Tobacco Attestation
		Health Assessment	Health Assessment		Health Assessment	Health Assessment
		PCP Election	PCP Election		PCP Election	PCP Election

- Please note that some or all of the plan options may also include a base premium that will be due regardless of the completion of healthy activities and premium credits earned.

2017 Open Enrollment: Member Experience

In addition to moving to an enrollment strategy that we believe will be more straightforward, Plan staff is also working with Benefitfocus, other Plan vendors and Plan partners to improve the overall member experience during open enrollment.

Technical Improvements

- **Single-Sign-On (SSO)/Web Service with the Health Assessment (HA)** – There is already a project scheduled to re-implement the SSO & Web service between eEnroll and the HA so that the member can complete the HA as part of the enrollment workflow in eEnroll. This enhancement will also allow the HA credit to be applied to the members' eEnroll election immediately upon completion as long as the HA was accessed and completed from eEnroll. There will continue to be a delay in the application of the HA if a member completes it telephonically, but the delay should only be a couple of days, not a few weeks.
- **eEnroll Navigation** – The Plan has requested that Benefitfocus add additional messaging throughout the enrollment site to provide directions about where to go to complete specific activities and how to confirm their elections have been successfully completed. Other possible workflow enhancements are also under review.

2017 Open Enrollment: Member Experience

Partner Collaboration

- **Enrollment Stakeholder Council**– The Plan has also formed a stakeholder council with a steering committee composed of executives representing some of the employing units or groups of employing units. The intent is to share information with this group about the Board’s benefit and enrollment strategy, update them on eEnroll’s status including issues resolution and upcoming enhancements and receive feedback on proposed system and process changes. The council will also form workgroups as necessary to address technical and operational aspects of the enrollment process and experience.
- **Employing Unit User Council** – While we already hold HR round tables to discuss all aspects of the Plan’s programs, we are forming more eligibility and enrollment focused groups to get feedback on defect resolution prioritization and desired enhancements.
- **HR Round Tables and Training** – We have expanded our HR round tables to include more representation from employing units and will continue to recruit more participants. Additionally we have committed to move to a quarterly meeting schedule to ensure they have opportunity to learn about plan and program changes as soon as possible and to provide feedback. As discussed in the communications update, we are also providing more enrollment training opportunities for HBRs.