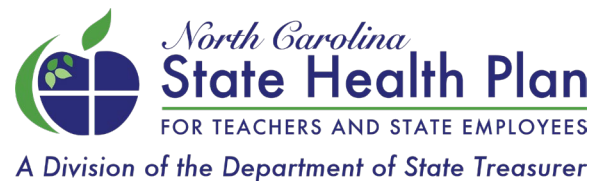




## Health Benefit Representative Open Enrollment Training

**2026 Open Enrollment:  
October 13 – 31, 2025**



# Topics for Today

---

- HBR Role Prior to and During OE
- Plan Changes
- Premiums
- New Initiatives
- eBenefits Enrollment Overview
- Communicating OE to Employees
- HBR Resources







 *North Carolina*  
**State Health Plan**  
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# HBR Role Prior To and During Open Enrollment

# Your Critical Role as an HBR

You serve as AMBASSADORS for the State Health Plan.



HBRs are the main avenue through which members receive benefit information.



It is critical that you are knowledgeable about Plan changes **PRIOR** to Open Enrollment.



Being well-prepared to handle questions, will create a better member experience.



Your role is to educate employees on benefits; **NOT** enroll them in the eBenefits system as this is a self-service system.



Given that OE will take place over 2.5 weeks, it will be very **IMPORTANT** to approve tasks in a timely manner.

# Reports & Enrollment Approvals

- It is important to utilize reports in eBenefits, such as the found under the Benefits tab.
  - You will need to select **MEDICAL** in the Benefit Type, if applicable, and **OPEN ENROLLMENT** in the Current Benefits/Open Enrollment drop down to identify members that still need to take action.
  - Members that have not yet taken action will have a blank in the field labeled DECLINATION\_REASON.
- Changes are **NOT** sent to any vendors, including CVS and Aetna, until the task has been approved.
- The Task List report (Data & Reporting, Standard Reports, and Task List report) provides a list of tasks which require attention.
- The Account Management team at Benefitfocus will provide an **OE Toolkit**, which will include useful reporting.

TASK_TYP	TASK_DESCRIPTION
MEMBER_VERIFICATION_REQUIRED	Sections Need to be Reviewed by Employee

# NEW ENROLLMENTS During Oct.13-Dec. 31, 2025

Set up new hires as quickly as possible to ensure they have **THE FULL 30 DAYS** to complete their enrollment.

Newly eligible/enrolling members during and after OE:

- Will be automatically prompted to complete their OE elections.
- Will need to select a Primary Care Provider (PCP).
- Please advise new enrollees that they will receive two ID cards fairly close together (one for 2025 and one for 2026) and will need to use them at the appropriate times or they will not work.

**NOTE:** The 2026 New Employee Kit will be posted in November, on the New Employee Resource Center available on the Plan's website.



## New Employee Resources

Welcome aboard! As a new employee, we're here to help you navigate through your State Health Plan options. This page includes resources to help you understand your plan options and how to enroll in benefits.

# 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 within 30 days of the event.
- Dependent verification documentation is required for all dependents.
- It is the **HBR'S RESPONSIBILITY** to ensure proper documentation is uploaded for all new dependents, including dependents added during OE!
- Mass approvals are not allowed for dependent verification, so HBRs still need to **REMIND EMPLOYEES** about their need for documentation and **BE RESPONSIBLE** for approving them.
- These transactions should not be approved without proper dependent verification and/or QLE documentation.
  - Full list of required documents is on the Plan's website.
  - Documents should be uploaded and stored in eBenefits.
- Contact HBR Support at Benefitfocus or your Account Manager for help.



## Qualifying Life Events & Dependent Eligibility

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

*NOTE:* The Plan audits a percentage of these actions monthly, however, HBRs cannot rely on the Plan's audits to find transactions without the proper documentation. The Plan WILL NOT approve an enrollment exception just because an Employing Unit has not collected proper documentation.



# Plan Changes



# Plan Name Changes



**NEW PLAN NAMES** will be introduced in an effort to move away from numerical/actuarial plan names.

70/30 Plan → Standard PPO Plan

80/20 Plan → Plus PPO Plan

Humana® Group Medicare Base and Enhanced Plans

→ Humana® Medicare Advantage & Humana® Prescription Drug Base (PPO) and Enhanced (PPO) Plans

# 2026 Plan Options: Active & non-Medicare



The State Health Plan will continue to offer **TWO PLAN OPTIONS** to active employees and non-Medicare retirees for 2026:

## Standard PPO Plan

Members pay **30% COINSURANCE** for eligible in-network services after meeting a deductible.

For some services (i.e., office visits, urgent care or emergency room visits), members pay a copay.

## Plus PPO Plan

Members pay **20% COINSURANCE** for eligible in-network services after meeting a deductible.

Similar to the Standard Plan, members pay a copay for some services (i.e., office visits, urgent care or emergency room visits).

*For Both Plan Options:* 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.

# ACTION REQUIRED: for Active Employees

All Active employees, including dependents, will be **AUTOMATICALLY ENROLLED** in the Standard PPO Plan, for the 2026 benefit year.

Subscribers **MUST TAKE ACTION** during Open Enrollment if they would like to enroll in the Plus PPO Plan or if they need to make any changes regarding dependents.

The Tobacco Attestation premium credit has been removed. Subscribers no longer have to attest to earn down their monthly premium. Premiums did **not** go up \$60 as a result.



# 2026 Plan Design Changes *Active and Non-Medicare*

SERVICES	2025		2026	
	70/30	80/20	STANDARD	PLUS
Annual Deductible	\$1,500 / \$4,500	\$1,250 / \$3,750	\$3,000 / \$9,000	\$1,500 / \$4,500
Out-of-Pocket Maximum (Combined Medical and Pharmacy)	\$5,900 / \$16,300	\$4,890 / \$14,670	\$6,500 / \$16,300	\$5,000 / \$15,000
In-Patient Hospital / Emergency Room	\$337 +ded/coins	\$300 +ded/coins	\$600 +ded/coins	\$500 +ded/coins
Out-Patient Surgical Copay	ded/coins	ded/coins	\$350 +ded/coins	\$300 +ded/coins
Primary Care Provider Office Visit	\$45 / \$30 / CPP \$0	\$25 / \$10 / CPP \$0	\$50 / \$40 / \$15*	\$40 / \$30 / \$10*
Specialist Visits	\$94 / CPP \$47	\$80 / CPP \$40	\$94 / \$50*	\$80 / \$40*
Behavioral Health Provider	\$45 / CPP \$0	\$25 / CPP \$0	\$15	\$10
Speech, Occupational, Chiropractic and Physical Therapy	\$72 / CPP \$36	\$52 / CPP \$26	\$62	\$42
Rx Tier 1	\$16	\$5	\$25	\$15
Rx Tier 2	\$47	\$30	\$75	\$55
Rx Tier 4	\$200	\$100	\$200	\$100
Rx Tier 5	\$350	\$250	\$600**	\$500**
Actuarial Value	79.8%	84.6%	74.8%	81.5%

\*Lowest copay for preferred providers. \*\*Manufacturer's coupons would generally cover increased copay. \*\*\*Premiums to be determined in Aug.



# Clear Pricing Project (CPP) Ending


The Clear Pricing Project is ending Dec. 31, 2025.


The State Health Plan continues its **COMMITMENT** to **PROVIDING MEMBERS** access to **HIGH QUALITY** and **AFFORDABLE** Health Care through **PREFERRED PROVIDERS**.

When members select and see a Preferred Provider, they will receive the lowest copay.

## IMPORTANT NOTES

- Members that have a selected PCP that has both badges, no action is needed to select a different PCP.
- If members switch PCPs during OE, that action is going to generate a new ID card immediately.
- If you want to select a different PCP, members will need to wait until 1/1/26.

**Bruckert, Joseph W., MD**  
Family Practice


  
Clear Pricing Project Provider


100 Ridge View Drive, Suite 105 Cary, NC 27511  
0.85 miles from you


(919) 851-7867

☐ Compare

[View Details](#) [Select as PCP](#)

Group and IPA Affiliations 

**Gupta, Sachin Kumar, MD**  
Family Practice

  
Preferred Provider

4000 Glenaire Circle, Cary, NC 27511  
0.99 miles from you

(919) 447-4476

☐ Compare

[View Details](#) [Select as PCP](#)

# 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).
- Exception requests for tier level changes are not permitted.




Excluded drugs approved for coverage through the exceptions process will be at the Tier 3 or Tier 6-member copay level.

# NEW ID CARDS

ALL MEMBERS, regardless of action taken during Open Enrollment, will receive a new ID card in late November-December.

Members will need to begin using this card Jan. 1, 2026, for all medical and pharmacy services.

 <b>North Carolina State Health Plan</b> FOR TEACHERS AND STATE EMPLOYEES A Division of the Department of State Treasurer		
<b>LUCY 6 JEANTEST</b>		
<b>ID: MMR8WNPRKQKC</b>		
<b>DEPT OF NATURAL &amp; CULTURAL RESOURCES</b>		
<b>Group No:</b>	<b>Eff Date:</b>	
<b>0192681</b>	<b>01/01/2025</b>	
<b>Plus PPO Plan</b>		
<b>Choice POS II</b>		
<b>RXBIN:</b>	<b>RXPCN:</b>	<b>RXGRP:</b>
<b>004336</b>	<b>ADV</b>	<b>RX0274</b>
<b>SELF INSURED</b>		
<b>Provider Type</b>		
Selected Pref PCP	\$10	
Selected Other PCP	\$30	
Non-Selected PCP	\$40	
Preferred Specialist	\$40	
Other Specialist	\$80	
Urgent Care	\$70	
Hosp/ER	\$500+Ded+20%	
<b>Other Info</b>	<b>INN</b>	<b>OON</b>
Ind Deductible	\$ 1,500	\$ 3,000
Ind OOP Max	\$ 5,000	\$10,000
Family Deductible	\$ 4,500	\$ 9,000
Family OOP Max	\$15,000	\$30,000
<b>Primary Care Provider (PCP)</b>		
Maria V Delbono		
<b>VA Preferred</b>		<b>NAP</b>
<b>Paid for by YOU and other NC Taxpayers</b>		

<b>Third Party Administrator:</b>	<b>Pharmacy Benefits Administrator:</b>
	
<b>Benefits &amp; Claims Number</b>	<b>1-833-690-1037</b>
<b>Eligibility &amp; Enrollment</b>	<b>1-855-859-0966</b>
<b>Behavioral Health</b>	<b>1-800-424-4047</b>
<b>Provider Relations/Precert</b>	<b>1-888-632-3862</b>
<b>24-Hour Nurse Line</b>	<b>1-800-556-1555</b>
<b>Pharmacy Help Desk</b>	<b>1-800-364-6331</b>
<b>CVS Caremark</b>	<b>1-888-321-3124</b>
<b>Lantern \$0 Surgery</b>	<b>1-833-916-3826</b>
<b>Aetna Life Insurance Company</b>	<b>Payer No: 60054 0155</b>
<b>Submit Claims To: PO Box 14079</b>	<b>www.SHPNC.gov</b>
<b>Lexington, KY 40512-4079</b>	
<small>Aetna provides administrative services only for the self funded plan, and assumes no financial risk for claims. Claims may be subject to review. Members are responsible for obtaining the prior review/cert for professional and/or outpatient services for non-participating providers.</small>	

# High-Deductible Health Plan (HDHP) Enrollment

- Employees selecting the HDHP will enroll through eBenefits.
- Employees that are currently enrolled and are still eligible do not need to take action unless they need to update their dependents. They will be automatically re-enrolled.
- The HDHP features a higher deductible than other traditional medical and pharmacy benefit plans.
- Employees should check with HBRs to confirm their eligibility prior to enrolling.
- Employees eligible for this plan will click eBenefits at the top of the State Health Plan home page, then click the appropriate box to register with a username and password before enrolling.





# Teladoc

Teledoc Health will no longer be offered by the State Health Plan after Dec. 31, 2025.

- Any Teladoc Health **CLAIMS** after this date will be considered out-of-network.
- Other virtual care **OPTIONS** that are available to you as part of your benefits.
  - Check with your provider. Some providers offer telehealth or virtual services as part of their practice. If you receive care in this manner, the same copay applies as an in-person office visit.
  - Visit the Aetna app and click “*Find Care*” under “*Additional Care Options*”, here you will find a complete list of virtual care options.
- Members that have **QUESTIONS** about virtual care options, contact:  
**Aetna Concierge Team** at **833-690-1037**.



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# Targeted Initiatives

# New Targeted Initiatives

In 2026, members that meet certain criteria will have access to these new initiatives.

## Ventricle health

Ventricle Health is a national, value-based cardiology provider network that increases access to care, improves outcomes, and reduces cost for people with heart failure and other cardiac conditions.



Hinge Health offers qualified members virtual physical therapy solutions that can reduce joint and muscle aches, pain, and tension at home.

# Lantern Surgery Benefit

The State Health Plan is excited to be partnering with Lantern, a trusted provider that helps connect Plan members to a high-quality, carefully selected surgeon when you need a planned, non-emergency procedure.

There will be NO COST (\$0) for surgery for members who use a Lantern provider—no deductibles or no copays.

Lantern covers more than 1,500 planned, non-emergency surgeries. Lantern surgeons are individually vetted and among the best in their field. A dedicated Lantern Care Advocate will work to match you with an excellent surgeon in the Lantern network as close to your home as possible. When close to home isn't possible, there is a travel benefit members may utilize.

## COMMONLY COVERED PROCEDURE CATEGORIES:

- Spine
- Orthopedic
- Joint
- Ear, Nose, & Throat
- Cardiac
- Gynecology
- General Surgery
- Gastrointestinal
- Spine & Ortho Injections
- Urology
- Bariatrics



Lantern specific webinars  
will be offered to HBRs in  
September!

Members will need to call Lantern to determine if a surgery is covered. Lantern will be sending all eligible\* members an ID card to keep in your wallet as a reminder of this great benefit. When you use a Lantern provider, you will utilize this ID card.

Visit the Benefits Booklet at [www.shpnc.gov](http://www.shpnc.gov) for full benefit details.

*\*Medicare members are not eligible to participate.*



# Medicare Eligible Members

**Medicare-eligible** members **WILL REMAIN** in the plan in which they are currently enrolled **UNLESS** they would like to enroll in a different plan during Open Enrollment.

Subscribers will need to **TAKE ACTION** during Open Enrollment if they would like to enroll in a different plan or if they need to make any changes regarding dependents.



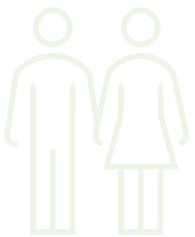
# 2026 Medicare Advantage Changes

The 2026 Final Rate Notice released by CMS finalized a change in the calculation of the Rx normalization factor, resulting in higher payment for Prescription Drug Plans and lower payments for Medicare Advantage Prescription Drug Plans.

THE SAVINGS IS MEANINGFUL, especially to Employer Group Waiver Plans.

As a result, splitting the Medicare Advantage (Medical) and Prescription Drug Plan (Pharmacy) while running them concurrently with a sole carrier, Humana®, is advantageous.

Running them concurrently is largely a back-end functionality.



## THE MEMBER IMPACT INCLUDES:

- 2 ID cards – one for medical, one for pharmacy
- 2 confirmations of enrollment – one for medical, one for pharmacy (these are CMS required, and system generated)
- Some duplicated mandated notices
- Extra communication will need to occur on the pharmacy side of things.

This allows for only one slight change to benefits for BOTH Humana® Medicare Advantage Plans for 2026.

While possible duplicative mailings and two ID cards may cause some confusion, the ability to hold benefits largely steady and create savings for the Plan with little disruption is encouraging.

# 2026 Plan Design *Medicare Advantage Plans*

SERVICES	2025		2026	
	Humana® GROUP MEDICARE Advantage		Humana® Medicare Advantage & Humana® Prescription Drug	
	BASE PLAN	ENHANCED PLAN	BASE PLAN	ENHANCED PLAN
Annual Deductible	\$0		\$0	
Out-of-Pocket Maximum (Medical)	\$4,000	\$3,300	\$4,000	\$3,300
Out-of-Pocket Maximum (Pharmacy)	\$2,000		\$2,100	
In-Patient Hospital / Emergency Room	Days 1-10: \$160/day Days 11+: \$0 / \$65 ER	Days 1-10: \$125/day Days 11+: \$0 / \$65 ER	Days 1-10: \$160/day Days 11+: \$0 / \$65 ER	Days 1-10: \$125/day Days 11+: \$0 / \$65 ER
Out-Patient Surgical Copay	\$250		\$250	
Primary Care Provider Office Visit	\$20	\$10	\$20	\$10
Specialist Visits	\$40	\$35	\$40	\$35
Chiropractic Visits	\$20		\$20	
Rx Tier 1	\$10		\$10	
Rx Tier 2	\$40		\$40	
Rx Tier 4	25% coins up to \$100		25% coins up to \$100	
Rx Tier 5	N/A		N/A	
Actuarial Value	90.2%	91.0%	90.2%	91.0%

Only one benefit adjustment: to OOP per CMS requirement.

# 2026 Plan Design Changes *Medicare 70/30*

SERVICES	2025	2026
	Base PPO (70/30)	70/30 PPO
Annual Deductible	\$1,500 / \$4,500	\$3,000 / \$9,000
Out-of-Pocket Maximum (Combined Medical and Pharmacy)	\$5,900 / \$16,300	\$6,500 / \$16,300
In-Patient Hospital / Emergency Room	\$337 +ded/coins	\$600 +ded/coins
Out-Patient Surgical Copay	ded/coins	\$350 +ded/coins
Primary Care Provider Office Visit	\$45 / \$30 / CPP \$0	\$50 / \$40 / \$15*
Specialist Visits	\$94 / CPP \$47	\$94 / \$50*
Chiropractic Visits	\$72 / CPP \$36	\$62
Rx Tier 1	\$16	\$25
Rx Tier 2	\$47	\$75
Rx Tier 4	\$200	\$200
Rx Tier 5	\$350	\$600
Actuarial Value	90.4%	88.6%

\*Lowest copay for preferred providers.





# Premiums

# Monthly Premiums: Employer Contributions

The State Health Plan Board of Trustees will vote on premiums and the salary bands at the Aug. 15, 2025, meeting. Following that vote, the Plan will communicate to HBRs and post rate sheets to the website.

The monthly employer contributions will be **EFFECTIVE JAN. 1, 2026**, which means they should be reflected in December payroll deductions.



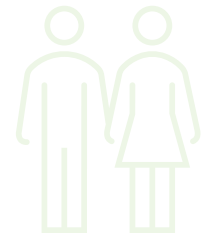
Active Employer Contribution Rate: **TBD**



Retiree Employer Contribution Rate: **TBD**



Non-Permanent Full-time Employer Rate (HDHP): **TBD**

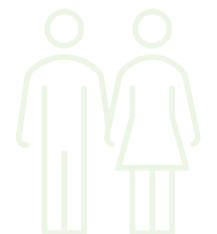


# Monthly Premiums: Employee-Only

The Plan will be introducing **SALARY-BANDED PREMIUMS** for the 2026 benefit year. Implementing salary-based premiums allows for a lower impact on lower salaried employees.

- Salary-based rates will only apply to the employee-only rate and is based on the employee's total base pay.
- The employee's monthly rate will display in eBenefits, when they log in to Benefits to complete their Open Enrollment.
- The employee-only rate, which is based on the member's salary at the time of Open Enrollment will remain the same for 2026 regardless of salary adjustments.
- The new premium amount will be deducted from December paychecks for January coverage.

If retro salary increases are approved with a state budget, it could impact the bands in which people are in as of OE. The Plan will communicate any action necessary when the time comes.



# Monthly Premiums: Employee-only

Salary-Band: UNDER \$XXXXX	Monthly Premium
Subscriber Only	\$
Subscriber + Child(ren)	\$
Subscriber + Spouse	\$
Subscriber + Family	\$

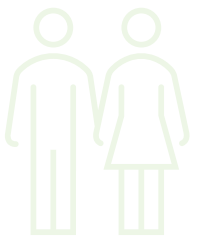
Salary-Band: \$XXXX - \$XXXX	Monthly Premium
Subscriber Only	\$
Subscriber + Child(ren)	\$
Subscriber + Spouse	\$
Subscriber + Family	\$

Salary-Band: \$XXXX - \$XXXX	Monthly Premium
Subscriber Only	\$
Subscriber + Child(ren)	\$
Subscriber + Spouse	\$
Subscriber + Family	\$

Salary-Band: \$XXXX+	Monthly Premium
Subscriber Only	\$
Subscriber + Child(ren)	\$
Subscriber + Spouse	\$
Subscriber + Family	\$

# Monthly Premiums: HDHP Members

HDHP - Monthly Premium	2026 Rates
Subscriber Only	TBD
Subscriber + Child(ren)	TBD
Subscriber + Spouse	TBD
Subscriber + Family	TBD





# SALARY DATA UPLOAD

## Salary Data File Submission

### Website Address:

<https://shpapplicationportal.shpnc.org/SBP-File-Import/>

## State Health Plan - Salary Based Premium - Salary Data Upload

### Salary Data Upload Option

Groups with more than 200 enrolled employees that do NOT currently have payroll integration with Benefitfocus have the option to submit a file to the Plan that will be uploaded into eBenefits to update an employee's salary data.

### Data Fields and Format Requirements

The three fields required are: SSN, Salary, and Earnings Effective Date

- Social Security Numbers must contain dashes, e.g., 001-00-1234
- Salary value must contain 2 decimal places and must not contain the dollar sign, e.g., 35065.75
- Earnings effective date must be MM/DD/YYYY, e.g., 03/15/2025
- File must be in a .csv format and should be named GroupName.csv, e.g., NCStateTreasurer.csv

[Click Here to Download an Example Salary Based Premium Upload File](#)

Please Select Your Group's Name \*

Select ▼

File Submitter Email Address \*

Enter the Email Address for the File Submitter. Confirmation and File Validation notifications will be sent to this email address.

Attach the .CSV File to be Uploaded to the State Health Plan of NC Containing Salary Data for Your Employees \*

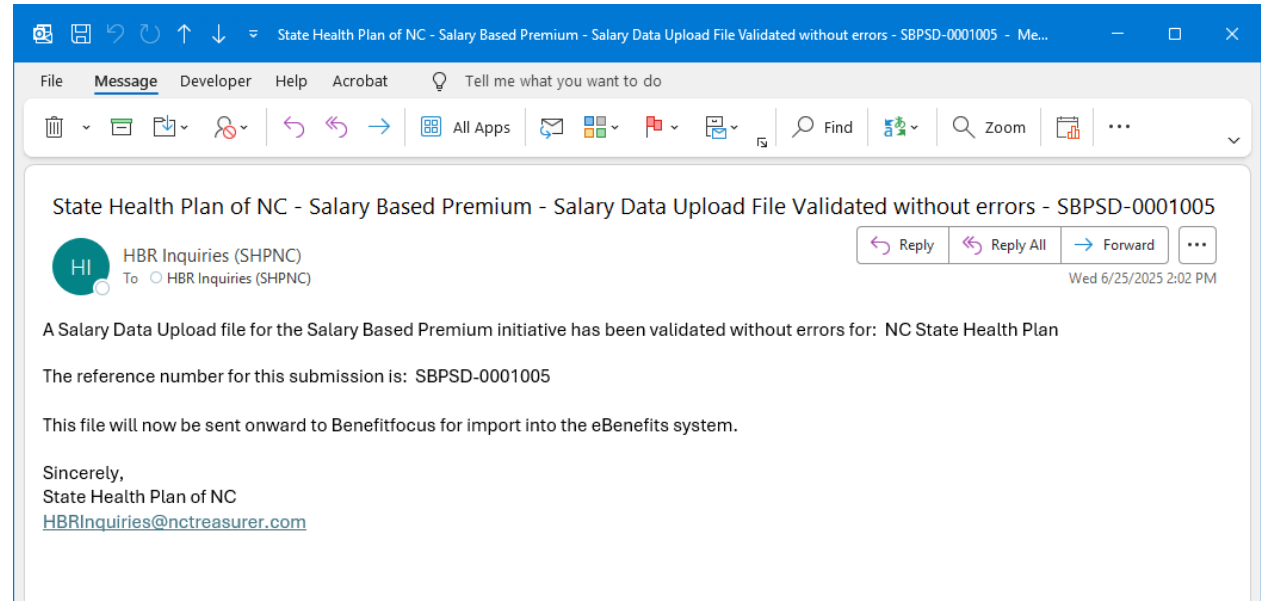
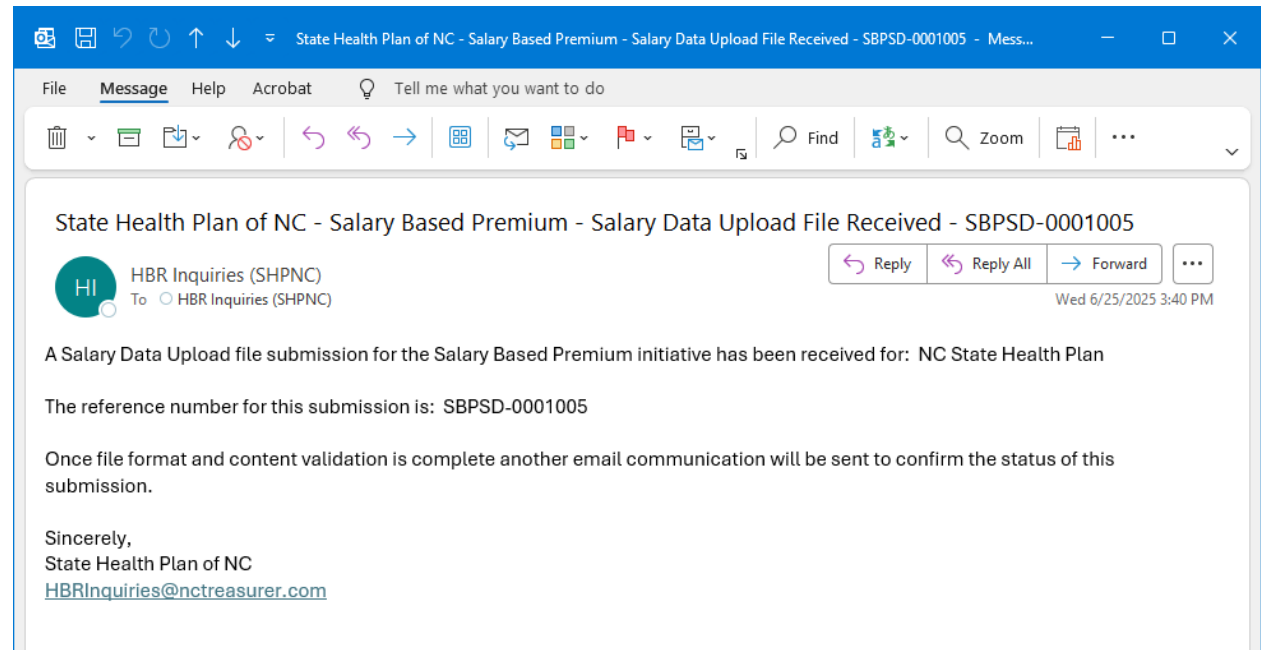
Choose File No file chosen

Submit Salary Based Premium Employee Salary Data

# SALARY DATA UPLOAD

Upon successful submission of a file, a confirmation email will be sent to the 'File Submitter Email Address' from [HBRInquiries@nctreasurer.com](mailto:HBRInquiries@nctreasurer.com) to confirm receipt of the file.

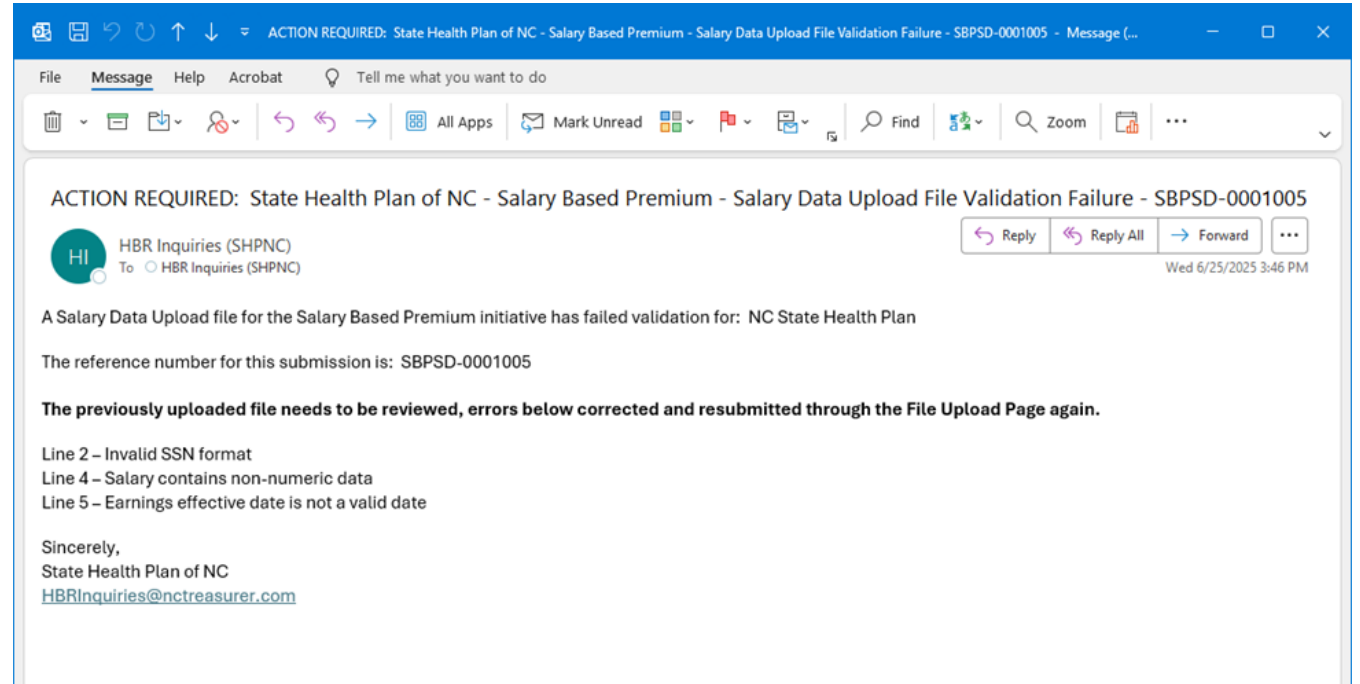
Upon successful validation of the file, another email will be sent to the 'File Submitter Email Address' from [HBRInquiries@nctreasurer.com](mailto:HBRInquiries@nctreasurer.com) to confirm the file has been successfully validated and sent to Benefitfocus for importing to the eBenefits system.



# SALARY DATA UPLOAD – ERROR LISTS


Upon unsuccessful validation of the file, another email will be sent to the 'File Submitter Email Address' from [HBRInquiries@nctreasurer.com](mailto:HBRInquiries@nctreasurer.com) to confirm the file has not been successfully validated. This email will contain a list of errors contained in the file.

When this email is received, the uploaded file needs to be reviewed, errors corrected and resubmitted through the File Upload Page.






# eBenefits Enrollment Workflow


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# 1. MEMBER HOME PAGE


## ‘Your to-dos’ Pop Up


In this example, member changes from Standard to Plus PPO Plan for 2026.

 **Your to-dos** ×

 Review and acknowledge your "Primary Care Provider (PCP)" >

 Review and acknowledge your "Email Address" >


 2025 NCFlex Low Option Cancer is missing a beneficiary >

 You have 121 day(s) to elect your Open Enrollment benefits. >

Close



## 2. HOME PAGE – FULL VIEW



**\*\*ACTION REQUIRED\*\***

All active members and Non-Medicare retirees were moved to the Standard PPO Plan for the 2026 benefit year. If you prefer to enroll in the Plus PPO Plan, **YOU MUST TAKE ACTION** by October 31, 2025.

If you enroll in the Plus PPO Plan or Standard PPO Plan and visit your selected PCP, you can receive a copay reduction. Please make sure a PCP is selected.

Click on the video to view a short step-by-step demonstration of the online enrollment process.

When you are ready to complete the enrollment process you will need to click the "Get started" button. When you have completed your enrollment you **MUST** click **SAVE!** A green congratulations message will appear when you have successfully completed your enrollment selection.

[Show less](#)

[Get started >](#)

Welcome back, **[Name]**

Wednesday, July 2 at 11:14 AM EDT

121  
DAYS LEFT TO  
ELECT BENEFITS  
Begin open  
enrollment

4  
TO DO ITEMS  
View to do list

9  
ACTIVE  
BENEFITS  
View benefits

Begin open  
enrollment

Change your  
current benefits

Print your  
benefits

Update your  
primary care  
provider

View your  
medicare info

**Your benefits**

Viewing Current

Medical  
Base PPO Plan  
(70/30)  
\$216.00/month

NCFlex Acciden...  
2025 NCFlex  
Classic Accide...  
\$18.25/month

NCFlex Cancer  
2025 NCFlex  
Low Option...  
\$10.02/month

NCFlex Critical...  
2025 NCFlex  
Critical illness...  
\$14.00/month

NCFlex Vision  
2025 NCFlex  
Core Wellness...  
\$0.00/month

NCFlex Group...  
2025 NCFlex  
Voluntary Gro...  
\$0.00/month

NCFlex Spouse...  
2025 NCFlex  
Voluntary...  
\$0.00/month

NCFlex Child...  
2025 NCFlex  
Voluntary CHI...  
\$0.00/month

NCFlex Core...  
2025 NCFlex  
Core Accident...  
\$0.00/month

[Show all benefits](#)

[Change current benefits](#)

**Quick Links**

Aetna Member Portal  
Allstate  
CVS Caremark

EyeMed Vision Care  
FSA Spending Accounts  
MetLife Dental

**Primary Care Provider (PCP)** [Needs review](#)

It is important to regularly verify your Primary Care Provider on file is up to date. Please review and Select or Update your Primary Care Provider, if needed.  
[Review and acknowledge](#)


**Email Address** [Needs review](#)

Review and confirm your email address to ensure you receive important communications from the State Health Plan.  
[Review and acknowledge](#)

**My NC 401(k) and NC 457 Retirement Savings**

- Retirement is in your future!
- Invest in your future with the NC 401(k) and/or NC 457 Plans. Available exclusively to public employees in North Carolina...

[Read more](#)




Take your benefits on the go with the Benefitplace app

Get easy access to your coverage details, ID cards, educational content and more - in the palm of your hand.

[Download today! Use company ID: SHP\\_BEACON](#)

Download on the  
App Store

GET IT ON  
Google Play




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# 3. MEMBER HOME PAGE – Begin 2026 Enrollment

SPLIT FOR BETTER REVIEW IN PRESENTATION ONLY

## TOP HALF



**\*\*ACTION REQUIRED\*\***

All active members and Non-Medicare retirees were moved to the Standard PPO Plan for the 2026 benefit year. If you prefer to enroll in the Plus PPO Plan, **YOU MUST TAKE ACTION** by October 31, 2025.

If you enroll in the Plus PPO Plan or Standard PPO Plan and visit your selected PCP, you can receive a copay reduction. Please make sure a PCP is selected.

Click on the video to view a short step-by-step demonstration of the online enrollment process.

When you are ready to complete the enrollment process you will need to click the "Get Started" button. When you have completed your enrollment you **MUST** click **SAVE!** A green congratulations message will appear when you have successfully completed your enrollment selection.

[Show less](#)

[Get started >](#)


**Welcome back,** [REDACTED]


Wednesday, July 2 at 12:51 PM EDT


121<sup>+</sup>  
DAYS LEFT TO  
ELECT BENEFITS  
Begin open  
enrollment


4<sup>+</sup>  
TO DO ITEMS  
View to do list


9  
ACTIVE  
BENEFITS  
View benefits

 [Begin open enrollment](#)

 [Change your current benefits](#)


 [Print your benefits](#)

 [Update your primary care provider](#)


 [View your medicare info](#)

**Your benefits**


Viewing: **Current** ▼




Medical  
Base PPO Plan  
(70/30)  
\$218.00/month




NCFlex Acciden..  
2025 NCFlex  
Classic Accide..  
\$18.20/month




NCFlex Cancer  
2025 NCFlex  
Low Option...  
\$10.02/month




NCFlex Critical..  
2025 NCFlex  
Critical Illness..  
\$14.00/month




NCFlex Vision  
2025 NCFlex  
Core Wellness..  
\$0.00/month




NCFlex Group...  
2025 NCFlex  
Voluntary Gro...



NCFlex Spouse..  
2025 NCFlex  
Voluntary...



NCFlex Child...  
2025 NCFlex  
Voluntary Chil...



NCFlex Core...  
2025 NCFlex  
Core Accident...

[Show all benefits](#) ▼

[Change current benefits](#)

## BOTTOM HALF

[Change current benefits](#)

**Quick Links**

[Aetna Member Portal](#)  
[Allstate](#)  
[CVS Caremark](#)

[EyeMed Vision Care](#)  
[P&A Spending Accounts](#)  
[MetLife Dental](#)

**Primary Care Provider (PCP)** [Needs review](#)

It is important to regularly verify your Primary Care Provider on file is up to date. Please review and [Select or Update your Primary Care Provider](#), if needed.

[Review and acknowledge](#)

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Review and confirm your email address to ensure you receive important communications from the State Health Plan.

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**Take your benefits on the go with the Benefitplace app**

Get easy access to your coverage details, ID cards, educational content and more - in the palm of your hand.

[Download today! Use company ID: SHP\\_BEACON](#)

  
Download on the  
App Store

  
GET IT ON  
Google Play



[www.shpnc.gov](http://www.shpnc.gov)

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# 4. ADD DEPENDENTS PAGE –

No additional dependents will be added to coverage by creating a dependent profile.

● PROFILE – ○ BENEFITS – ○ CHECKOUT

## Before you enroll in benefits

Do you need to add any dependents to your profile?

Note: You'll also be able to add dependents and select who you want to cover when you enroll in or edit your benefits.

To add a dependent, click 'Create dependent profile'

Name	Relationship	Date of Birth	Gender	Actions
██████████	Child	██████	Male	<a href="#">Edit</a>
██████████████████	Spouse	██████	Female	<a href="#">Edit</a>
██████████	Child	██████	Male	<a href="#">Edit</a>

Create dependent profile

Next

Previous

# 5. CHOOSE YOUR MEDICAL COVERAGE

## Begin Enrollment Page


















Current Benefits | Open Enrollment Benefits

### Open Enrollment Benefits

All active and nonactive employees are invited to the 2025 Open Enrollment for the 2025 benefit year. If you want to enroll in the Plan FSA Plan, YOU MUST TAKE ACTION by October 31, 2024. NON-EMPLOYEES: If you are the plan sponsor, you will see the "Congratulations" message. If you are the plan sponsor, you will see the "Congratulations" message. This is not applicable to 100% of the plan.

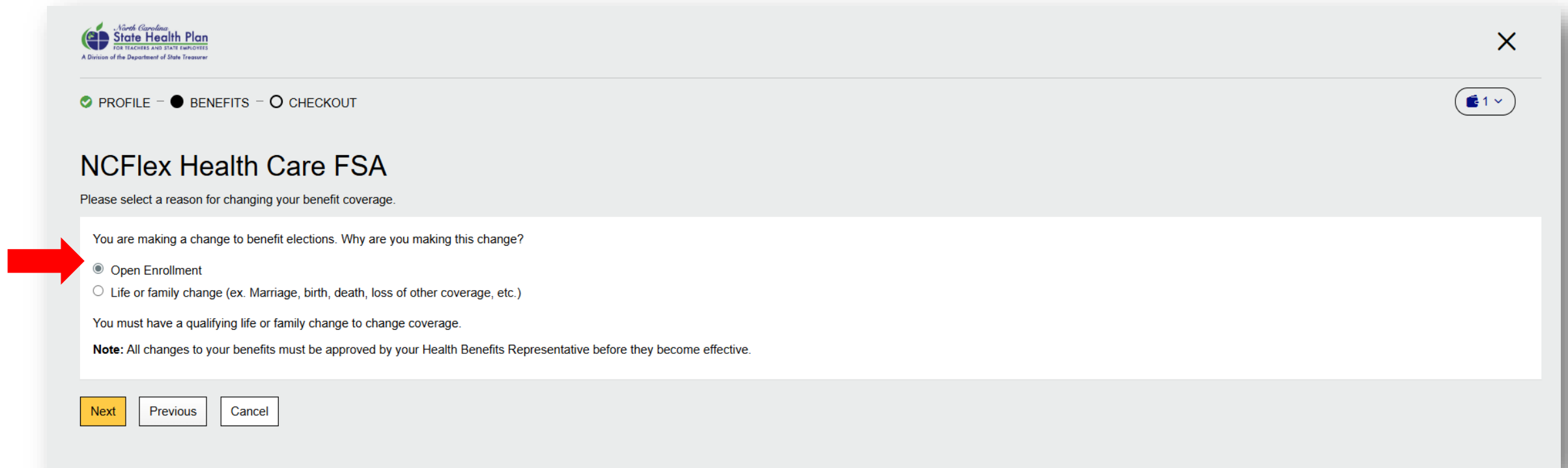
#### Your benefits


 <b>Your Medical coverage</b> Plus PPO Effective Date: 01/01/2025 Person Covered: [Name] [Select coverage] [Show Plan Details]	<b>\$355.00</b> per month
 <b>Your NCFlex Health Care FSA coverage</b> 2025 NCFlex Health Care Flexible Spending Account Spendable Amount: \$1,000.00 Per Plan Year \$5.00 per month Effective Date: 01/01/2025 Person Covered: [Name] [Select coverage] [FSA coverage] [Show Plan Details]	<b>\$83.33</b> per month
 <b>Your NCFlex Dependent Day Care FSA coverage</b> You have declined this benefit. [Select coverage]	
 <b>Your NCFlex Accident Plan coverage</b> You have declined this benefit. [Select coverage]	
 <b>Your NCFlex Cancer coverage</b> You have declined this benefit. [Select coverage]	
 <b>Your NCFlex Critical Illness coverage</b> You have declined this benefit. [Select coverage]	
 <b>Your NCFlex Dental coverage</b> 2025 NCFlex Classic Option Dental Effective Date: 01/01/2025 Person Covered: [Name] [Select coverage] [Show Plan Details]	<b>\$79.74</b> per month
 <b>Your NCFlex Vision coverage</b> 2025 NCFlex Core Wellness Exam Effective Date: 01/01/2025 Person Covered: [Name] [Select coverage] [Show Plan Details]	<b>\$0.00</b> per month
 <b>Your NCFlex Group Term Life coverage</b> Cancelled as of 11/01/2024 [Select coverage]	
 <b>Your NCFlex Spouse Group Term Life coverage</b> Not Eligible	
 <b>Your NCFlex Child Group Term Life coverage</b> Not Eligible	
 <b>Your NCFlex Core AD&amp;D coverage</b> You have declined this benefit. [Select coverage]	
 <b>Your NCFlex Voluntary AD&amp;D coverage</b> You have declined this benefit. [Select coverage]	
 <b>Your Voluntary Disability coverage</b> You have declined this benefit. [Select coverage]	
 <b>Your NCFlex Tricare Supplement coverage</b> You have declined this benefit. [Select coverage] [Show Plan Details]	

[Save changes](#) [Return home](#)

You Pay (Monthly Total): \$215.07

## 6. OPEN ENROLLMENT / QLE CHOICE – Member chooses OE



 **North Carolina State Health Plan**  
FOR TEACHERS AND STATE EMPLOYEES  
A Division of the Department of State Treasurer

✓ PROFILE – ● BENEFITS – ○ CHECKOUT 1

### NC Flex Health Care FSA

Please select a reason for changing your benefit coverage.

You are making a change to benefit elections. Why are you making this change?

☒ Open Enrollment

☐ Life or family change (ex. Marriage, birth, death, loss of other coverage, etc.)

You must have a qualifying life or family change to change coverage.

**Note:** All changes to your benefits must be approved by your Health Benefits Representative before they become effective.

[Next](#) [Previous](#) [Cancel](#)



## 7. 2026 SHP MEDICAL SUMMARY – Click on Edit Coverage to Change

**State Health Plan**  
FOR TEACHERS AND STATE EMPLOYEES  
A Division of the Department of State Treasurer

PROFILE — ● BENEFITS — ○ CHECKOUT

2026 SHP Medical Summary

You have entered a life or family change.

**Medical**  
Standard PPO

Offered By: Aetna  
Effective Date: 01/01/2026  
You Pay: \$268.00 per month  
Persons Covered:

**Medicare**  
No policy on record  
No medicare policy information on record

**Primary Care Provider** Edit  
Show details

Edit coverage

Edit plan

Plan details

**Cost Summary**  
This is a summary of your OE benefit elections.

Hide all

**Benefit Elections (1 items)**

Monthly Medical	\$268.00
-----------------	----------

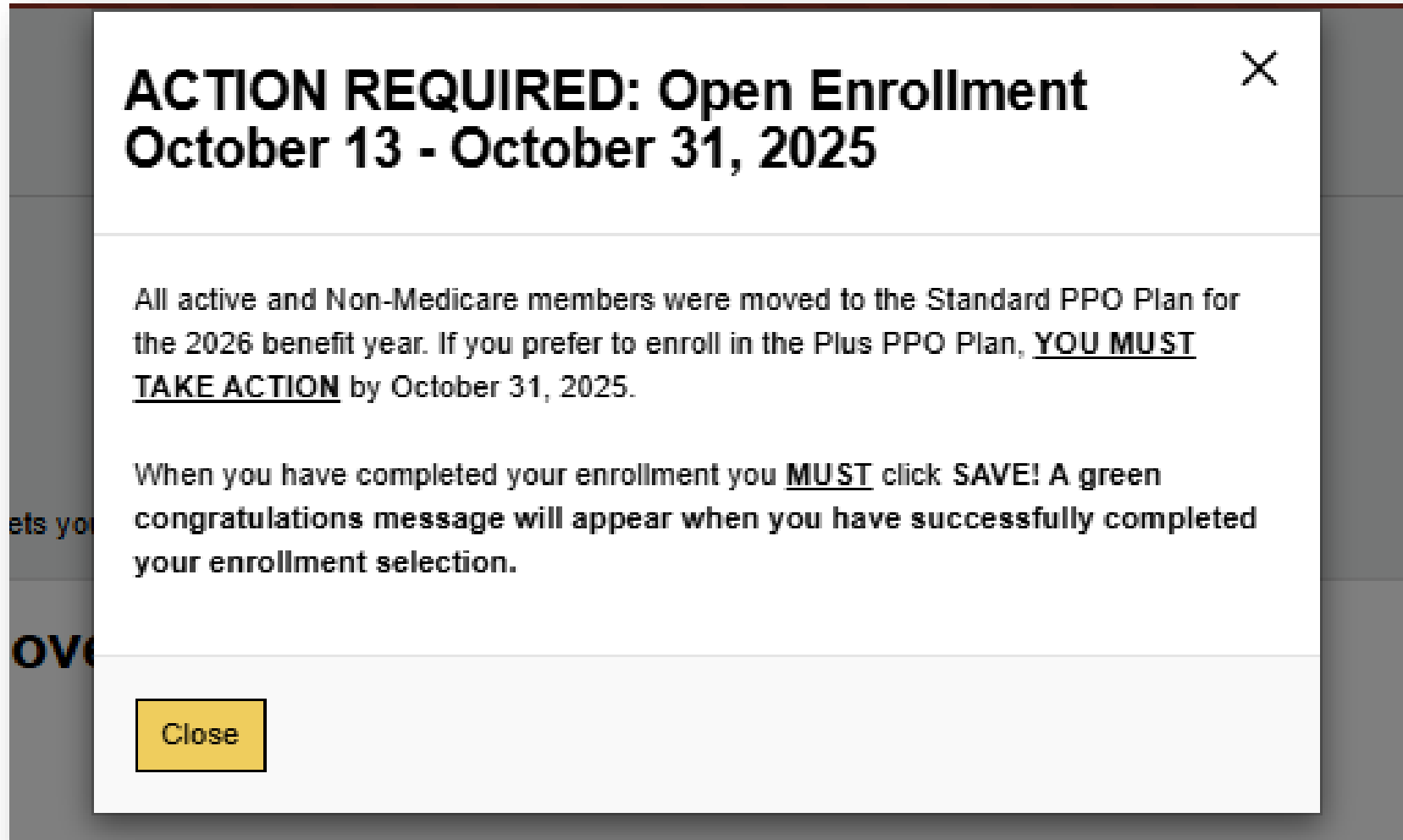
**You Pay**

Monthly Total	\$268.00
---------------	----------


Save

Cancel

## 8. OE ACTION REQUIRED POP UP



# 9. CHOOSE YOUR MEDICAL PLAN PAGE



North Carolina  
State Health Plan  
and Services and more information  
A Division of the Department of State Treasurer


×

✓ PROFILE — ● BENEFITS — ○ CHECKOUT

1

Choose your Medical plan.

Please review your options and choose the plan that best meets your needs.

 Who do you want to cover on this plan?

Add Dependent

✓

✓

ⓘ ACTION REQUIRED: Open Enrollment October 13 - October 31, 2025

PPO

FSA

✓ Currently Selected

Plan details

Standard PPO

\$268.00  
Monthly Cost

Benefit Year Deductible

\$1,500 Individual/\$4,500 Family

Office Visit Copay

\$0 Copay for CPP Provider selected as PCP/\$30 Copay for Non CPP Provider/\$45 for any other PCP visit

Preventive Services

\$0 Copay

Specialist Visit Copay

\$47 Copay for CPP Specialist Provider/\$94 for any other Specialist visit

Emergency Room Copay

\$337 Copay, then 30% after deductible

Inpatient Hospital Copay

\$337 Copay, then 30% after deductible

PPO

FSA

Select plan

Plan details

Plus PPO

\$355.00  
Monthly Cost

Benefit Year Deductible

\$1,250 Individual/\$3,750 Family

Office Visit Copay

\$0 Copay for CPP Provider selected as PCP/\$10 Copay for Non CPP Provider/\$25 for any other PCP visit

Preventive Services

\$0 Copay

Specialist Visit Copay

\$40 Copay for CPP Specialist Provider/\$80 for any other Specialist visit

Emergency Room Copay

\$300 Copay, then 20% after deductible

Inpatient Hospital Copay

\$300 Copay, then 20% after deductible

Decline coverage

I would like to decline Medical coverage.

Next

Previous

Cancel

www.shpnc.gov

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# 10. 2026 SHP MEDICAL SUMMARY

PROFILE

BENEFITS

CHECKOUT

Your 2026 SHP Medical benefit summary is shown below. To make changes, click Edit. Please note that your benefits have not been saved. You must click Save to complete the section.



Medical

Plus PPO

Offered By: Aetna

Effective Date: 01/01/2026

You Pay: \$355.00 per month

Persons Covered:

Medicare

No policy on record

No medicare policy information on record

Primary Care Provider

Edit

Show details

Edit coverage

Edit plan

Plan details

Cost Summary

This is a summary of your OE benefit elections.

Hide all

Benefit Elections (1 items)

Monthly Medical\$355.00

You Pay

Monthly Total\$355.00

Save

Cancel

# 11. NCFlex Health Care FSA Coverage Enrollment

PROFILE — BENEFITS — CHECKOUT

Current Benefits Open Enrollment Benefits

## Open Enrollment Benefits

All active and Non-Medicare members were moved to the Standard PPO Plan for the 2026 benefit year. If you want to enroll in the Plus PPO Plan, **YOU MUST TAKE ACTION** by October 31, 2025. **REMEMBER** to **CLICK SAVE!** After you see the green "Congratulations" message **PRINT** your Confirmation Statement.\***This is Not Applicable to HDHP Members\***

### Your benefits

✓ You have successfully updated your plan.

**1. Your Medical coverage**  
Plus PPO

Offered By: Aetna

Effective Date: 01/01/2026

Persons Covered:

Edit coverage

Show Plan Details ▾

**\$355.00**  
per month

Decline

**2. Choose your NCFlex Health Care FSA coverage**

Begin enrollment

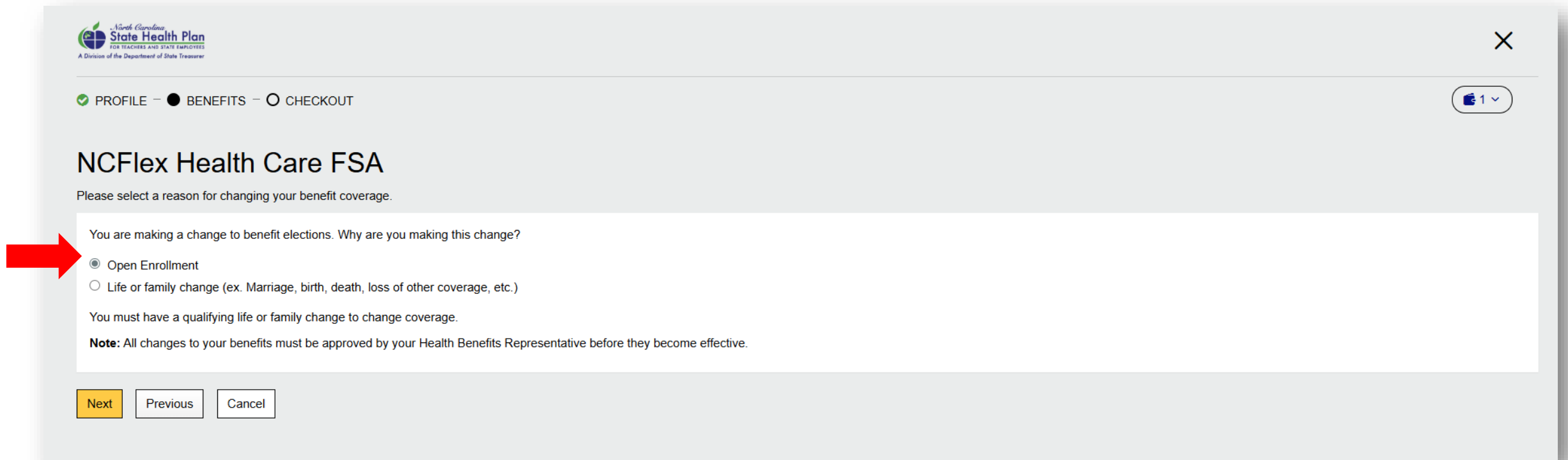
Decline coverage


**3. Choose your NCFlex Dependent Day Care FSA coverage**

**4. Choose your NCFlex Accident Plan coverage**



# 12. OPEN ENROLLMENT / QLE CHOICE – Member chooses OE



 **North Carolina State Health Plan**  
FOR TEACHERS AND STATE EMPLOYEES  
A Division of the Department of State Treasurer

✓ PROFILE – ● BENEFITS – ○ CHECKOUT 1

## NCFlex Health Care FSA

Please select a reason for changing your benefit coverage.

You are making a change to benefit elections. Why are you making this change?

☒ Open Enrollment

☐ Life or family change (ex. Marriage, birth, death, loss of other coverage, etc.)

You must have a qualifying life or family change to change coverage.

**Note:** All changes to your benefits must be approved by your Health Benefits Representative before they become effective.

[Next](#) [Previous](#) [Cancel](#)

# 17. BENEFIT SUMMARY

## New Check Box –

Required to review information before 2026 OE enrollment can be completed

☐ I have reviewed the information above

Complete Enrollment

Return home

Current Benefits | Open Enrollment Benefits

**Open Enrollment Benefits**  
All active and Non-Medicaid members were moved to the Standard PPO Plan for the 2026 benefit year. If you want to enroll in the Plus PPO Plan, YOU MUST TAKE ACTION by October 31, 2025. REMEMBER to CLICK SAVE! After you see the green "Congratulations" message PRINT your Confirmation Statement. \*THIS IS NOT APPLICABLE TO NCFLP MEMBERS\*


Your benefits

<b>1. Your Medical coverage</b> Plus PPO Offered By: Aetna Effective Date: 01/01/2026 Persons Covered: [button: Edit coverage] [button: Show Plan Details] Decline	<b>\$355.00</b> per month
<b>2. Your NCFlex Health Care FSA coverage</b> 2026 NCFlex Health Care Flexible Spending Account Contribution Amount: \$1,000.00 Per Plan Year \$83.33 per month Effective Date: 01/01/2026 Persons Covered: [button: Edit contribution] [button: Edit coverage] [button: Show Plan Details] Decline	<b>\$83.33</b> per month
<b>3. Your NCFlex Dependent Day Care FSA coverage</b> You have declined this benefit. [button: Edit coverage]	
<b>4. Your NCFlex Accident Plan coverage</b> You have declined this benefit. [button: Edit coverage]	
<b>5. Your NCFlex Cancer coverage</b> You have declined this benefit. [button: Edit coverage]	
<b>6. Your NCFlex Critical Illness coverage</b> You have declined this benefit. [button: Edit coverage]	
<b>7. Your NCFlex Dental coverage</b> 2026 NCFlex Classic Option Dental Effective Date: 01/01/2026 Persons Covered: [button: Edit coverage] [button: Show Plan Details] Decline	<b>\$79.74</b> per month
<b>8. Your NCFlex Vision coverage</b> 2026 NCFlex Core Wellness Exam Effective Date: 01/01/2026 Persons Covered: [button: Edit coverage] [button: Show Plan Details] Decline	<b>\$0.00</b> per month
<b>9. Your NCFlex Group Term Life coverage</b> Cancelled as of 01/01/2026 [button: Edit coverage]	
<b>10. Your NCFlex Spouse Group Term Life coverage</b> Not Eligible	
<b>11. Your NCFlex Child Group Term Life coverage</b> Not Eligible	
<b>12. Your NCFlex Core AD&amp;D coverage</b> You have declined this benefit. [button: Edit coverage]	
<b>13. Your NCFlex Voluntary AD&amp;D coverage</b> You have declined this benefit. [button: Edit coverage]	
<b>14. Your Voluntary Disability coverage</b> You have declined this benefit. [button: Edit coverage]	
<b>15. Your NCFlex Tricare Supplement coverage</b> You have declined this benefit. [button: Edit coverage]	

☐ I have reviewed the information above  
[button: Complete Enrollment] [button: Return home]

# 18. ENROLLMENT COMPLETED

✓ **Congratulations,** [REDACTED] **You have successfully completed your enrollment process.**  
Please review and print your Confirmation Statement for your records.



**\*\*ACTION REQUIRED\*\***

All active members and Non-Medicare retirees were moved to the Standard PPO Plan for the 2026 benefit year. If you prefer to enroll in the Plus PPO Plan, **YOU MUST TAKE ACTION** by October 31, 2025.

If you enroll in the Plus PPO Plan or Standard PPO Plan and visit your selected PCP, you can receive a copay reduction. Please make sure a PCP is selected.

Click on the video to view a short step-by-step demonstration of the online enrollment process.

When you are ready to complete the enrollment process you will need to click the "Get Started" button. When you have completed your enrollment you **MUST** click **SAVE!** A green congratulations message will appear when you have successfully completed your enrollment selection.

[Show less](#)


[Get Started >](#)


**Welcome back,** [REDACTED]  
Wednesday, July 2 at 3:00 PM EDT


**121**  
DAY'S LEFT TO  
ELECT BENEFITS  
[View your benefits](#)


**2**  
TO DO ITEMS  
[View to do list](#)


**6**  
ACTIVE  
BENEFITS  
[View benefits](#)

 [View your benefits](#)

 [Change your current benefits](#)


 [Print your benefits](#)


 [Update your primary care provider](#)


 [View your medicare info](#)

**Your benefits**

**Your accounts**

  
Medical  
Plus PPO  
\$355.00/month

  
NCFlex Dental  
2026 NCFlex  
Classic Option..  
\$19.74/month

  
NCFlex Vision  
2026 NCFlex  
Core Wellness..  
\$0.00/month

Viewing

**Future** ▼

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# IMPORTANT POINTS TO REINFORCE for Members

- Members need to **SAVE** their choices at the end of the enrollment process.
- Many members overlook this vital, final step and therefore fail to complete enrollment!
- All enrollment choices will be displayed for confirmation – but the member isn't finished yet!
- Members then need to scroll down and click **SAVE** to record their enrollment choices. Otherwise, it will be as if they never enrolled.
- Printing out their confirmation statement is also recommended!
- Members that call into the call center to complete their enrollment will receive a mailed confirmation statement.



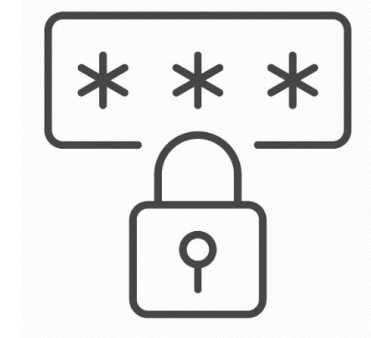
**The choices you pick  
Will NOT stick  
Unless you **SAVE** them  
With a **CLICK!****

# NO GLOBAL PASSWORD RESETS for Members

There **WILL NOT BE** any global password resets for your employees!

Passwords must be reset individually following the steps below:

- Pull up individual employee in eBenefits
- Under “Manage Employee” select “Update Login Information”
- Create new password under “Change Member Password” and confirm that the “Allow this member to log in” box is checked. This enables the member’s account.
- Click “Save Login ID and Password”
- Once the employee logs into eBenefits with their temporary password they will be prompted to set their own password.





 *North Carolina*  
**State Health Plan**  
FOR TEACHERS AND STATE EMPLOYEES  
A Division of the Department of State Treasurer

# Communicating OE to Employees



# Communicating Open Enrollment to Employees

## RESOURCES on the Plan's website include:

- Videos
- Decision Guides
- Rate Sheets
- Comparison Charts
- Benefit Booklets
- Summary of Coverage Documents
- In-person Events for Medicare-eligible Members
- Multiple Webinars
- Telephone Town Halls

## OUTREACH EVENTS include:

### Active Members

- 16 Webinars
- 2 Telephone Town Halls

### Non-Medicare Retirees

- 16 Webinars
- 2 Telephone Town Halls



### Medicare Retirees

- 15 in-person events
- 10 Webinars
- 2 Telephone Town Halls

REMINDER: Process terminations timely for members turning 65 and retiring, so they receive the appropriate mailers.

# Stay Connected with State Health Plan News

It's important to **STAY ENGAGED** so you can be in the know on what you need to do prior to and during Open Enrollment!

- **SUBSCRIBE** to the Plan's monthly e-newsletter **HBR UPDATE** by visiting [www.shpnc.gov](http://www.shpnc.gov).
- **FOLLOW** the State Health Plan on  **@SHPNC** and  **@nchealthplan**.
- **LOOK FOR** your Open Enrollment Decision Guide, which will arrive in mailboxes prior to Open Enrollment.
- **ENCOURAGE** employees to verify that their mailing address, email, and phone number are correct in eBenefits, the Plan's enrollment system.
- **REMIND** Retirees to make sure ORBIT also has their current information.

Please communicate with employees on LOA, or any other kind of leave during Open Enrollment.

# Plan Update

## WE'VE MOVED TO A .GOV WEBSITE

The State Health Plan's website  
has moved from [www.shpnc.org](http://www.shpnc.org) to

[www.shpnc.gov](http://www.shpnc.gov)

**REMINDER:** Update your bookmarks!



# Extended Call Center Hours

Encourage your employees **NOT TO WAIT** until the last minute!

Call **WAIT TIMES** are always longer the first two days and last two days of OE.

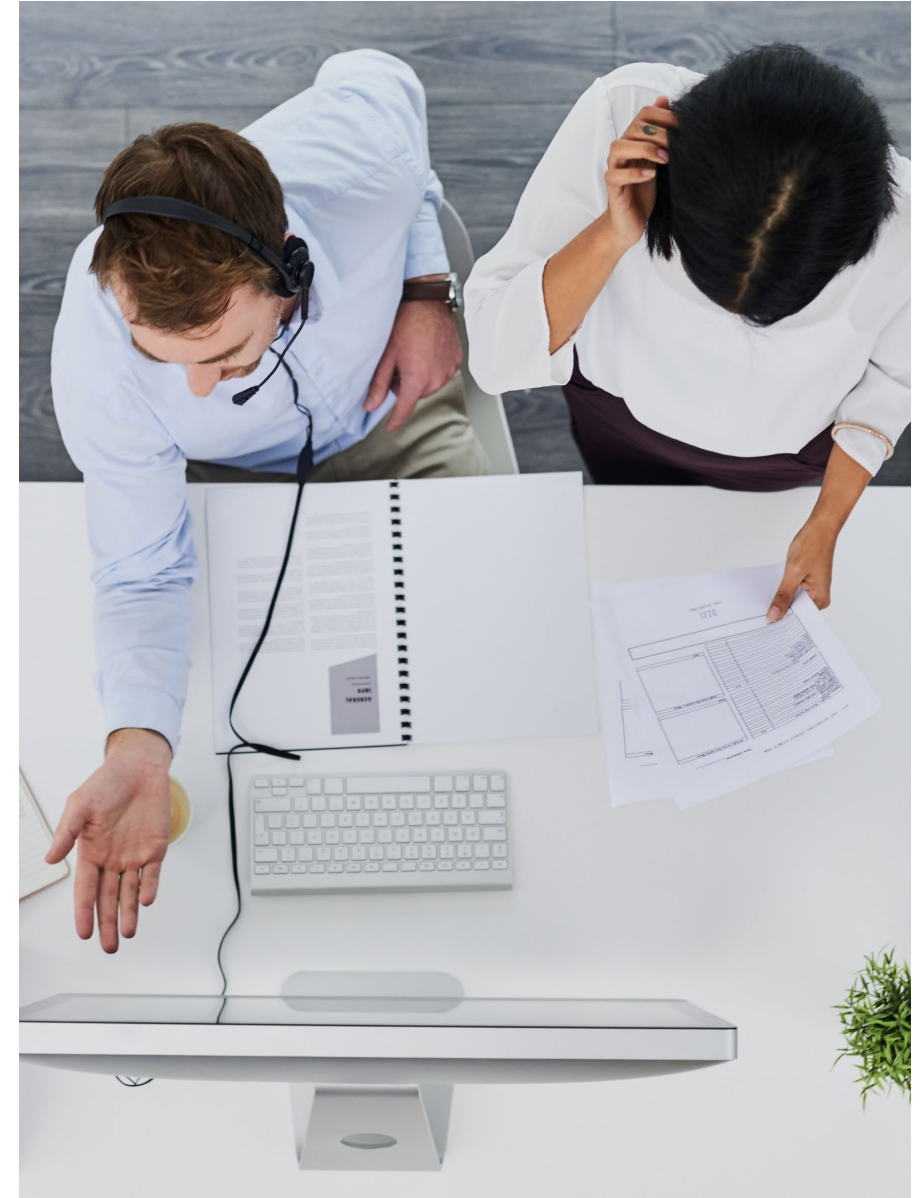
There will continue to be a **VIRTUAL HOLD OPTION** for members calling in who would rather not hold and receive a call back when a representative is available.



**The Eligibility and Enrollment Support Center..... 855-859-0966**

will have **EXTENDED HOURS** during Open Enrollment:

- Monday-Friday, 8 a.m. – 10 p.m.
- Saturdays, 8 a.m. – 5 p.m.





 *North Carolina*  
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FOR TEACHERS AND STATE EMPLOYEES  
A Division of the Department of State Treasurer

# HBR Resources



# HBR Training Resources Online

The State Health Plan recognizes the value in providing Health Benefit Representatives with training opportunities to assist in carrying out duties as they relate to the Plan. To better serve HBRs, we have posted the following training modules on the Plan's website at [www.shpnc.gov/HBRs/Training-and-Development](http://www.shpnc.gov/HBRs/Training-and-Development)

## RESOURCE GUIDES:

- [HBR Quick Reference Guide](#)
- [High-Deductible Health Plan \(HDHP Reference Guide\)](#)

## PRESENTATIONS:

- [HBR Overview](#)
- [eBenefits Navigation](#)
- [Employment Status](#)
- [Exception Process](#)
- [Policies and Processes](#)
- [HIPAA Overview](#)





# Important Phone Numbers

**HBR Support Line ..... 800-422-5249**

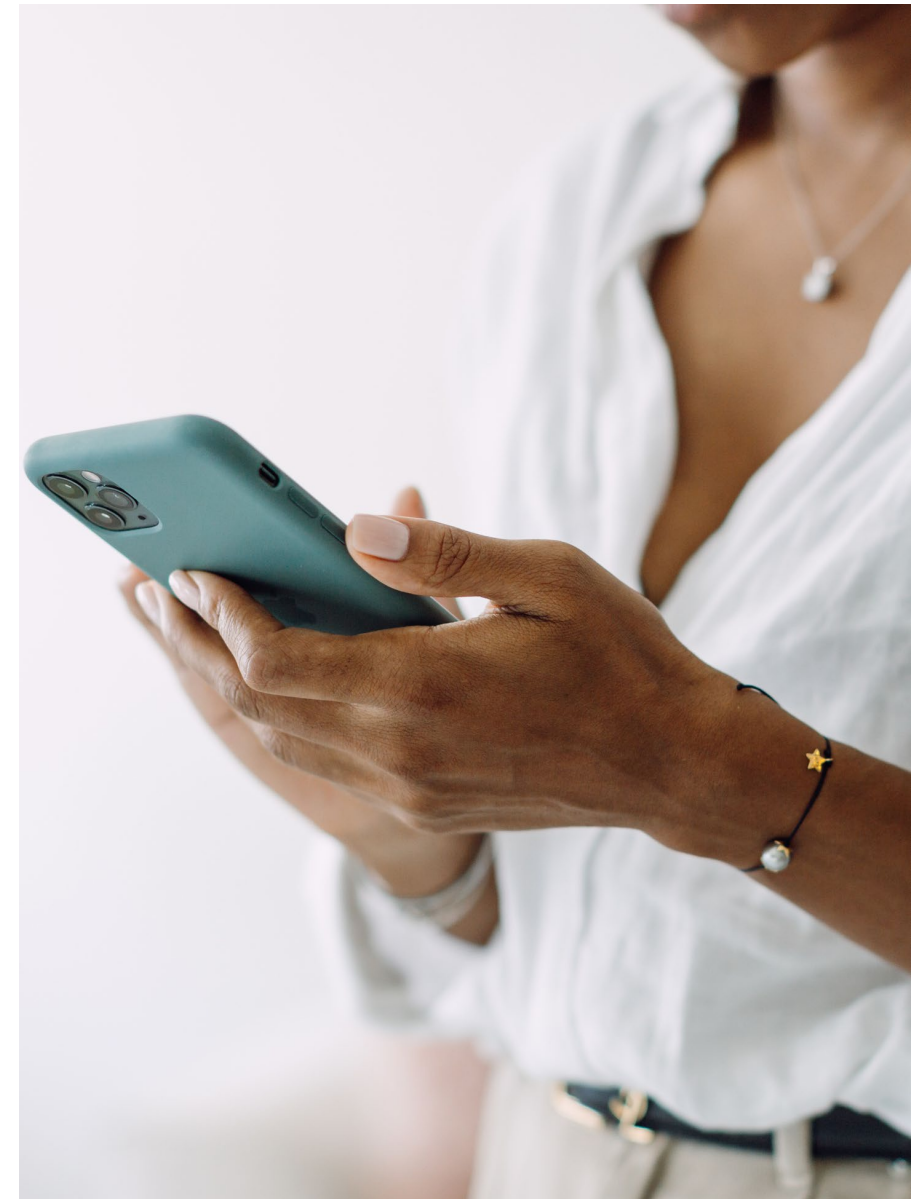
- *Fiori HBRs can call HBR Support line for general questions*
- *Reach out to BEST Shared Services for member-specific issues and billing*
  - *919-707-0707 (in Raleigh) or 866-622-3784*
  - *Submit a ticket to SVC\_OSC.best <best@osc.nc.gov>*

**Eligibility and Enrollment Support Center ..... 855-859-0966**

**Aetna Concierge Service (Benefits and HDHP) ..... 833-690-1037**

**CVS Caremark (Pharmacy Benefits) ..... 888-321-3124**

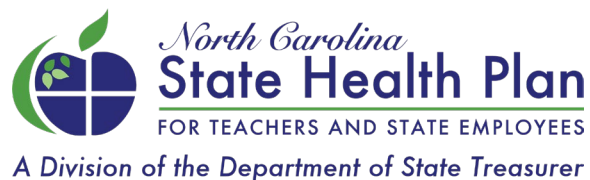
**iTedium (RIF, LOA, Direct Bill/COBRA/Group Billing for HBRs) .. 855-552-6272**





Thank You.

# Questions?



This presentation is for general information purposes only. If it conflicts with federal or state law, State Health Plan policy or your benefits booklet, those sources will control. Please be advised that while we make every effort to ensure that the information we provide is up to date, it may not be updated in time to reflect a recent change in law or policy.

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