December 2021 HBR Update



HBR Survey Reminder

If you haven't taken our HBR survey yet, you can find it here.

Please take a moment and let us know how we can better serve you!

2022 Group Billing Schedule

Premium invoices for health coverage are billed a month in advance. As you are aware, effective January 1, 2022, Blue Cross NC will migrate to a new core operating system and bill dates for your January 2022 invoices have already been agreed to.

If you are interested in changing your bill generation date for your February 2022 invoice (which will run in January 2022) you may begin to submit those requests now.

The process for changing your bill generation date is:

- Request must be sent to <u>StatePPOInvoice@bcbsnc.com</u>
- Request should be received 10 business days prior to the current bill generation date
- Account must be in good standing and paid current

Within 24 to 48 business hours of receiving the request, Blue Cross NC will respond with one of the following:

- Confirming approval and update applied
- Denied with reason why

January 2022 Invoices

Please remember to begin logging into the new Facets eBilling platform beginning in December to access your January 2022 premium invoice. HBRs will now be responsible for managing dual billing systems – Power MHS (Current) eBilling and Facets (New) eBilling.

Paid-through dates will not be advanced, resulting in claims being held, if premiums are not paid by the invoice due date. The Facets bill will run and be available first then the Retro bill in Power MHS will be available the next day in eBilling.

Tobacco Cessation Credit Verifications

The State Health Plan is taking several steps to ensure that the Tobacco Attestation verification has been completed for members that attested to being a tobacco user but were willing to visit a CVS MinuteClinic or a Primary Care Provider for a tobacco cessation counseling visit. The Plan is getting a weekly claims report from Blue Cross NC, and is also verifying uploaded documents in eBenefits.

The verification piece will not be completed until the end of December, therefore additional email updates will not be sent. The final list of subscribers who will have their Tobacco Attestation Credit will be sent in January. Credit removals are scheduled to be processed in eBenefits in time for your February billing cycle.

To ensure members receive credit for their visits, members are encouraged to upload their office visit summary to the "Document Center" located in eBenefits by December 17, 2021. If there's a member on the final list who believes they have satisfied the Tobacco Cessation visit, the HBR can submit an exception.

HBR Login Issues & Concerns Regarding eBilling

New logins for the Facets eBilling platform were only sent to HBRs who were active/enabled in the Power MHS eBilling platform at the time of migration. If you did not receive a Welcome Letter email with your new Facets login credentials

and had an active account in the Power MHS eBilling platform at the time of migration, please check your spam folders to make sure that it is not there.

If you are still unable to locate it, please contact HBR Support at 800-422-5249. The Account Management Team will send a request to have the Welcome Letter email resent. Otherwise, to reactivate disabled accounts, or gain access in either eBilling platform, please send an email to <u>HBRInguiries@nctreasurer.com</u>.

December Reminders! OE Exceptions

Don't forget! All Open Enrollment exceptions must be received by the State Health Plan by January 31, 2022. We appreciate your cooperation.

New ID Cards

Employees will be receiving a new ID card in the mail regardless of the actions they took during Open Enrollment. 2021 ID cards will not work as of January 1, 2022, so it's important employees use their new card.

As a reminder, January 2022 premiums will be deducted from December paychecks.

eBenefits Transfers Functionality Automation

As a reminder, eBenefits Transfers Functionality automation is coming in early 2022. eBenefits will have new functionality enabled to handle employee transfers of benefits when an employee moves from one employing unit to another.

An employee will be identified as a "**transfer**" at the new group using key demographic information. If a match occurs and is within 30 days of the benefit end date and new effective date, the employee's enrollments automatically transfer to the new group.

When an employee transfers the following will be transferred automatically:

- The employee and family's demographic and benefit information including PCP information
- Employee and dependent Medicare benefit information
- Beneficiary and additional information
- Student and Custodian information

• Previous uploaded documentation

The employee will have the opportunity to make changes and HBRs will see "**Transfer**" as the employee indicator.

BEACON group: This functionality will not apply to an employee being transferred from one BEACON group to another BEACON group. There is already employee transfer logic enabled for these groups.

Please note these limitations:

- The transfer functionality will not work if the employee is returning to a group where he/she was previously employed. For example: Employee leaves group A and is hired in group B (enrollment data will transfer). Then employee leaves group B and is rehired at group A (enrollment data will not transfer). Employee and HBR will have to manually update employee information.
- At this time, the functionality will not consider the addition of an adjusted service date as criteria to evaluate a transfer of benefits.
- An employee transfers into any of the non-active groups (Retirement, COBRA).

QLE Training Videos Available at HBR University

The Plan continues to see HBRs struggle with QLE rules and processes. As a reminder, the State Health Plan has created two training videos on Qualifying Life Events, or QLEs.

As an HBR, YOU are responsible for reviewing your employees' QLE tasks in eBenefits. To approve or deny tasks, there are a few things you should know about QLEs.

The first video offers a QLE overview, while the second video focuses on the various types of documentation required in the QLE process.

HBRs can find the videos in the Course Catalog of HBR University.

2022 HBR Monthly Webinars Scheduled

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 begin at 10 a.m. To register for the monthly webinars, see below or visit the Plan's <u>website</u>.

- January 19, 2022, 10-11 a.m.
- February 16, 2022, 10-11 a.m.
- March 16, 2022, 10-11 a.m.
- <u>April 20, 2022, 10-11 a.m.</u>
- May 18, 2022, 10-11 a.m.
- June 15, 2022, 10-11 a.m.
- July 20, 2022, 10-11 a.m.
- August 17, 2022, 10-11 a.m.
- <u>September 21, 2022, 10-11 a.m.</u>
- October 19, 2022, 10-11 a.m.
- November 16, 2022, 10-11 a.m.
- December 14, 2022, 10-11 a.m. (Registration Link Coming Soon)



Next HBR Monthly Webinar December 15, 2021 - 10am

Click to Register! >





- 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.



SIGN UP TODAY



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





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