December 2023 HBR Update



ID Card Reminder for 2024

As a reminder, employees enrolled in the Base PPO Plan (70/30), Enhanced PPO Plan (80/20) and the High Deductible Health Plan will not receive a new ID card for 2024 unless employees made a change to their coverage during Open Enrollment. **Employees will continue to use their 2023 ID card**.

Members enrolled in one of the Humana Medicare Advantage Plans who didn't make a change, will also not receive a new ID card for 2024.

A Division of the Department of Treasurer Dale R. F			Subscriber II	D.	
Provider Type	CPP	Non CPP	YPY10000001		
Selected PCP*	\$0	\$30	GROUP NAME Effective Date Group No:		
Phy/Occu/Spch Therapy/Chir	o \$36	\$72			
Specialist	\$47	\$94	01/01/24		14170742
Behavioral Health	\$0	\$45			
Urgent Care	\$100		RXBIN:	RXPCN:	RXGRP:
ER S	\$337 + Ded & 30%		004336	ADV	RX0274
Other Info	INN	OON			
Ind Deductible	\$1,500	\$3,000	Primary Care Provider (PCP) PROVIDER NAME PROVIDER PRACTICE		
Ind OOP Max	\$5,900	\$11,800			
Family Deductible	\$4,500	\$9,000	919-555-5555		
Family OOP Max	\$16,300	\$32,600			
"If PCP not selected, in-network copa	sy \$45		NC SHP Netw	ork Base	PPO Plan (70/30)

Annual HBR Re-Certification

Each year, the State Health Plan (Plan) requires that HBRs take a brief training to ensure that HBRs fully understand the rules and processes associated with the Plan and how to assist employees with qualifying life events and enrollment needs associated with the Plan.

The annual re-certification for HBRs will begin on Monday, Jan. 8, 2024, and continue through Feb. 16, 2024. This allows six weeks for HBRs to complete the training. The training is available in <u>HBR University</u>. HBRs must review the training for a minimum of 20 minutes to receive credit for completing the training.

In past years, the Plan has used this opportunity to have HBRs update their contact information. The Plan has been working diligently with groups to obtain correct contact information, so this step will not be necessary this year.

We appreciate in advance the due diligence in completing this training. Your role as an HBR and the work you do related to the State Health Plan is critical and we provide training opportunities such as this to make sure you're fully prepared to assist your employees with matters related to the Plan and their benefits.

HBRs are required to complete this re-certification by Feb. 16 or risk losing access to eBenefits.

HBR Roundtable Invite and Survey

The State Health Plan is preparing for the transition of third-party administrator (TPA) services from Blue Cross NC to Aetna effective January 1, 2025. As the Plan prepares for the year ahead, it will host an HBR Roundtable January 10, 2024, to gather feedback from HBRs on how to make this transition as seamless as possible. This roundtable will be held via webinar.

If you have not already registered, please register via the link below.

Register for HBR Roundtable January 10, 2024 at 10am \rightarrow

To address as many questions or comments as possible during the webinar, please complete the brief survey below. This will help staff gauge your needs regarding transition planning, information and promotion.

Your input does make a difference in how we prepare for the year ahead. If you have not already completed the survey, please do so below.

<u>Complete HBR Survey →</u>

Dependent Eligibility

As a reminder, dependents eligible for non-contributory State Health Plan coverage as an employee or retiree, are not eligible to be covered as a dependent:

§ 135-48.41. Additional eligibility provisions. (c) No person shall be eligible for coverage as a dependent if eligible as an employee or retired employee, except when a spouse is eligible on a fully contributory basis or when the person is a disabled dependent child. In addition, no person shall be eligible for coverage as a dependent of more than one employee or retired employee at the same time.

Unfortunately, it appears we have quite a few ineligible dependents covered by their parents. As a follow-up to the dependent verification audit recently completed by the Plan, **the Plan will begin terminating ineligible dependents and enrolling them as an employee effective January 1,** 2024.

The impacted dependents will be enrolled in the same coverage as an employee that they had been as a dependent, and given the tobacco attestation credit. The Plan will notify the HBR for both the dependent and employee after the transactions are completed. If the newly enrolled employee does not want coverage or wants a different plan, the HBR can communicate that to the Plan, and it will be updated. Any changes must be requested by January 30, 2024 (the end of the 30-day enrollment window). After that, an exception would be required to consider a change.

Process

- 1. Identify ineligible dependent
- 2. Cancel the dependent's dependent coverage
- 3. Enroll employee into the same coverage he/she had as a dependent
- 4. Notify HBR for both the dependent and employee group

New Employee Materials Updated for 2024

To better serve you and your new employees, the State Health Plan has updated the <u>New Employee Resources Page</u> on the Plan's website for 2024.

This page helps HBRs provide new employees with the information they need to make the best health benefit choices for themselves and their families.

The New Employee Resources include:

- Self-paced narrated PowerPoint presentation
- New Employee Guide (printable)
- Step-by-step enrollment instructions

HBRs are encouraged to use these materials to assist the Plan in providing consistency in onboarding materials for new employees.



TEXT "JOIN" TO 76971

- 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.

SIGN UP TODAY



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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