November 2020 HBR Update



Updated COVID-19 Benefits for Testing and Treatment

The State Health Plan has announced the following extensions for COVID-19 testing and treatment for members on the 70/30 Plan, 80/20 Plan and High Deductible Health Plan (HDHP):

- COVID-19 diagnostic testing and clinical screening visit will be covered at 100% until the <u>federal CARES Act</u> is lifted.
- Cost associated with the treatment (medical only) of COVID-19 has been extended until March 31, 2021. Any medications prescribed to treat COVID-19 will be subject to the copay/coinsurance.
- Prior authorizations for COVID-19 acute inpatient medical and certain services have been extended to March 31, 2021.
- As a reminder, many providers continue to offer tele-health or virtual visits. These types of visits continue to be covered under your Plan benefits and this will remain in effect until June 30, 2021. The applicable copay for a Primary Care Provider office visit will apply.

The N.C. Department of Health and Human Services has recently provided <u>guidance</u> for those planning to travel or attend family gatherings over the holidays. This guidance includes having a screening COVID-19 test prior to travel or attending family gatherings. Through December 31, 2020, the Plan will cover COVID-19 tests without a provider's order and as previously mentioned, there will be no charge for the test.

Tobacco Cessation and Credit Removals

Please don't forget to remind employees who, during Open Enrollment, selected that they were tobacco users but willing to visit a CVS MinuteClinic

or a Primary Care Provider (PCP) for tobacco cessation counseling that they have until November 30, 2020, to complete at least one tobacco cessation counseling, or risk losing their premium credit.

The subscriber must present their State Health Plan ID card in order for the visit to be covered at 100 percent by the Plan. It's also important for employees to visit the Plan's <u>website</u> and print off instructions for their provider to ensure their tobacco attestation counseling session is FREE and is billed correctly. (If a member combines the tobacco cessation visit with another service, there may be a copay.) This document is not required for the visit, it's simply a suggestion to ensure the visit is billed correctly.

As a reminder, since members can visit a PCP for their session, waivers will not be given to members who live more than 25 miles away from a CVS MinuteClinic. If an enrollment exception is submitted with a mile radius reason included, it will be denied.

In addition, CVS MinuteClinic is now able to conduct virtual tobacco attestation counseling sessions in North Carolina! Subscribers interested in this service should <u>click here</u> to request a virtual session.

New employees who enroll after Open Enrollment must complete the tobacco attestation for both 2020 and 2021. Any employee who selected that they were tobacco users but willing to visit a CVS MinuteClinic or a Primary Care Provider for tobacco cessation counseling should complete at least one tobacco cessation counseling session within 90 days of their initial enrollment, or risk losing their premium credit. New members enrolling in November or December for January 1, 2021, coverage will not be able to complete their tobacco cessation visit until January 1, 2021.

Dependent Verification Reminder!

Since Open Enrollment has ended, please be mindful of reviewing all added dependents for the appropriate documentation. It is the HBR's responsibility to approve all dependent documents for new dependents. As in previous years, OE elections are automatically approved by Benefitfocus before all documentation is received. Please remember that enrollments approved before documentation is received still require documentation to be submitted and verified by the HBR.

As a part of the ongoing audit, the State Health Plan will also review dependents added during Open Enrollment to ensure proper documentation has been provided. The Plan has seen great improvement in the accuracy and consistency of both task and dependent approvals over the past few years, and we look forward to seeing these results continue.

Below are a few reminders about acceptable documentation:

- Only 2019 1040s can be accepted, unless the subscriber provides a previous year 1040 with a 2019 extension.
- Verification of Facts are only acceptable as documentation for newborns within six months of birth. After six months, a birth certificate or current 1040 showing the child as a dependent must be provided as verification for any dependent child.
- When birth certificates are provided as verification for a dependent child, we must receive the official birth certificate.
- Marriage certificates can be used to solely verify spouses within one year of the date on the marriage certificate.

The full list of appropriate documentation and examples can be found on the State Health Plan's <u>website</u>.

New and Improved RIF Process!

In an effort to simplify the Reduction in Force (RIF) process, Benefitfocus and the State Health Plan have made improvements to the workflow. Once you have canceled coverage using the Reduction in Force life event detailed in these <u>step-by-step instructions</u>, you will open a case via OnePlace 365.

The group/HBR will be responsible for terming the shells of RIF members at the end of the 12-month period, or before, when appropriate.

The Benefitfocus account management team will complete the change:

- 1. Benefitfocus Account Management updates the Benefit Effective Date in the current year using "correction"
- 2. Account Management then adds the Planned Expiration Date to the future year (for groups that have been mapped)
- 3. Account Management then updates the employment status category to Direct Bill: Reduction in Force
- 4. Account Management checks off the "non-working" indicator

Last HBR Monthly Webinar Trainings for 2020!

This year's last two HBR monthly webinars are set for November 18 (this week!) and December 9. November's HBR webinar will focus on retirement in addition to other important announcements.

December's webinar topic will focus on Qualifying Life Events (QLEs), as well as a post-Open Enrollment update and, as always, other important announcements! If you haven't already registered for either webinar, please visit the Plan's <u>website</u>.

Remind Your Employees: New Program Waives Deductibles for Orthopedic Surgery

Help spread the word! The State Health Plan and select high-quality orthopedic specialists are offering a new program for eligible employees in need of knee, hip or shoulder partial and full replacement surgery. The program simplifies the entire process with one simple payment, from presurgery consults and testing to post-surgery follow-up and physical therapy.

If eligible employees choose one of the participating providers, they may be eligible to have their plan deductible waived for their surgery! Please encourage your employees who may be considering a joint replacement to contact one of these providers.

Visit the Plan <u>website</u> for a list of providers and full details. <u>Click here</u> for a flier promoting the program to post in your worksites.

Did You Know...

November is National Diabetes Month

Diabetes is the seventh-leading cause of death in the United States and impacts millions of people, according to the Centers for Disease Control and Prevention (CDC). National Diabetes Month in November is the perfect time to learn more about – and how to prevent – diabetes. HBRs are encouraged to share this information with their employees.



Over the past 20 years, the number of adults diagnosed with diabetes has more than doubled as the American population has aged and become more overweight or obese. Childhood obesity rates have also risen along with the rates of type 2 diabetes in youth. Often poor health habits increase the risk of this disease. Making healthy changes together increases the odds that good health habits will stick. Learn how to make positive changes with these <u>healthy tips</u>.

<u>Prediabetes</u> is a serious health condition where blood sugar levels are higher than normal, but not high enough yet to be diagnosed as type 2 diabetes. Prediabetes increases the risk of developing type 2 diabetes which can lead to <u>heart disease</u> and stroke. If you have prediabetes, you can make lifestyle changes to prevent or delay this disease and other serious health problems.

Take the <u>prediabetes risk test</u> to find out if you are at risk of having prediabetes. If your score is high, talk with your health care provider and commit to making changes that lower your risk.

And here's some great news for State Health Plan members who have diabetes! The Plan recently <u>announced</u> that beginning January 1, 2021, Plan members who take insulin will have a \$0 cost for preferred or non-preferred prescription insulin.

Members can also learn more about diabetes by visiting the Plan's <u>Diabetes</u> <u>Resource Center</u>.





