



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



Dale R. Folwell, CPA
STATE TREASURER OF NORTH CAROLINA
DALE R. FOLWELL, CPA



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Agenda

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Clear Pricing Project Update

- The State Health Plan's Clear Pricing Project has concluded its provider sign-up period, with thousands of new providers partnering with the Plan for transparent and affordable health care.
- The Plan realizes that its members need more hospitals and providers to meet the needs in accessing statewide quality health care.
- Here is what members need to know:
 - ✓ For 2020, members will have access to the **SAME** broad, statewide network that they do today, which is the Blue Options network administered by Blue Cross NC.
 - ✓ Because of the success of the Clear Pricing Project, this network will now include even more providers that are supportive of transparent and lower pricing.
 - ✓ **As a reminder, this does not affect members on the UnitedHealthcare Medicare Advantage plans.**

2020 Open Enrollment Delayed

- The Open Enrollment period for State Health Plan and NC Flex benefits for the 2020 benefit year will be delayed and will not begin on Oct. 1, 2019.
- **Dates have not yet been finalized.**
- Please keep this in mind as you plan any voluntary benefits for your group that are outside of the eBenefits platform.
- HBRs will be notified as soon as possible once Open Enrollment dates are finalized.
- OE Trainings will be re-scheduled for times as soon as OE dates are finalized.
 - These trainings will be webinars held at various times to accommodate your busy schedule.
 - The Plan will also be partnering with NC Flex on most of their statewide trainings.

LOA Processing Access Coming in 2020

- Beginning with the 2020 plan year, all groups will have access to use the “LOA-Partially Paid” and “LOA-Fully Paid” employment statuses.
- Using these employment statuses will eliminate the need for groups to individually invoice members and manage delinquency in accordance with the State Health Plan’s arrears policy.
- All members with this employment status will be invoiced directly from iTedium.
- When you begin to use these new statuses, you will need to notify your LOA employees to discontinue sending payments directly to you.
- Payroll connect groups must reach out to Benefitfocus to ensure the appropriate attributes are assigned to these members.
- Please take the LOA training in [HBR University](#) to ensure your understanding on how the statuses should be used.

Updated QLE for New Medicare Members

- The State Health Plan was recently made aware that the “reaching age 65” qualifying life event (QLE) was not calculating the appropriate Medicare effective date when the member’s birthday was on the first of the month.
- Benefitfocus was unable to fix this QLE reason code but has offered another QLE option for Medicare.
- Effective immediately, “Newly eligible for Medicare” will replace the “Spouse reaches age 65” and “Employee reaches age 65” options.
- Employees will enter their true Medicare eligibility date when using this life event.
- Members will use this for all Medicare entitlements (i.e., age, disability and ESRD).

Rehiring Employees

- There are 4 potential scenarios that may apply for an employee who was terminated and needs to be rehired:
 - Employee is identified as an invalid termination within 30 calendar days of the termination/separation effective date.
 - Employee is identified outside of 30 calendar days of the termination/separation date, but within 30 days of the benefit end date.
 - Employee is identified as an invalid termination outside of 30 calendar days from the termination/separation effective date and more than 30 days outside the benefit end date.
 - Employee is returning to your group after working years elsewhere.
- Please review the [Retroactive Rehire Rules and Processing of Rehire](#) guide on the Training and Development page of the State Health Plan website for more details.

SB 399 Impact on Rehired Retirees

- Earlier this summer, [Senate Bill 399](#) was ratified allowing retired teachers to return to work in high-need schools without adversely impacting the retired teachers' benefits.
- Similar to other retirees who may be rehired on a non-permanent basis, retirees returning to work in a high-need school must cancel their retiree health benefit and enroll in health benefits through their employer.
- Retirees returning to work in high-need schools are eligible to enroll in the same health benefits for which other full-time employees are eligible.
- Once the retiree has completed their employment with the high-need school, their coverage should be terminated as an employment termination, not a “retirement” termination.
- Once that termination is complete, the retiree can re-enroll in retiree benefits using the “loss of other coverage” qualifying life event located in eBenefits.
- **Retirement Health Benefit Termination Process**
 - Prior to the hire date, the HBR should notify the Plan of the need to terminate retiree health benefits by completing an [Exception Form](#). [Click here for Step-by-Step instructions](#).
 - Upon approval of the exception to terminate the retiree health benefit, the HBR should establish the active benefit enrollment shell in eBenefits that will enable the retiree to enroll in coverage. As a reminder, the retiree will not be able to enroll until the retiree health benefit has been canceled.

Help Your Employees Fight the Flu!

- Maxim Health Systems, in cooperation with Blue Cross and Blue Shield of North Carolina, will again work with agencies this fall to host onsite flu immunization clinics.
- The flu clinics will last from mid-September through December.
- Maxim is accepting requests now for agencies that would like to schedule their clinics this fall
- Maxim will start onsite clinics beginning September 16, 2019. The process will be the same as the 2018 program. The Quadrivalent flu vaccine will be offered again.
- Please visit our [Flu Shot Information for HBRs](#) page to see more information and to schedule a clinic.



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. To ensure the accuracy of, and to prevent the undue reliance on, this information, we advise that the content of this material, in its entirety, or any portion thereof, should not be reproduced or broadcast without the express written permission of the State Health Plan.



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