



Putting the pieces together to improve your health



State Employee & Retiree Health & Welfare Benefits Program

Plan Year 2017 Open
Enrollment



Agenda

- Wellness Updates
- ACA
- Plan Updates
- P&A Group
- MSRP
- Open Enrollment
- HIPAA Refresher
- Workday Update
- New ABC Liaison
- EBD Updates/Reminders



Wellness

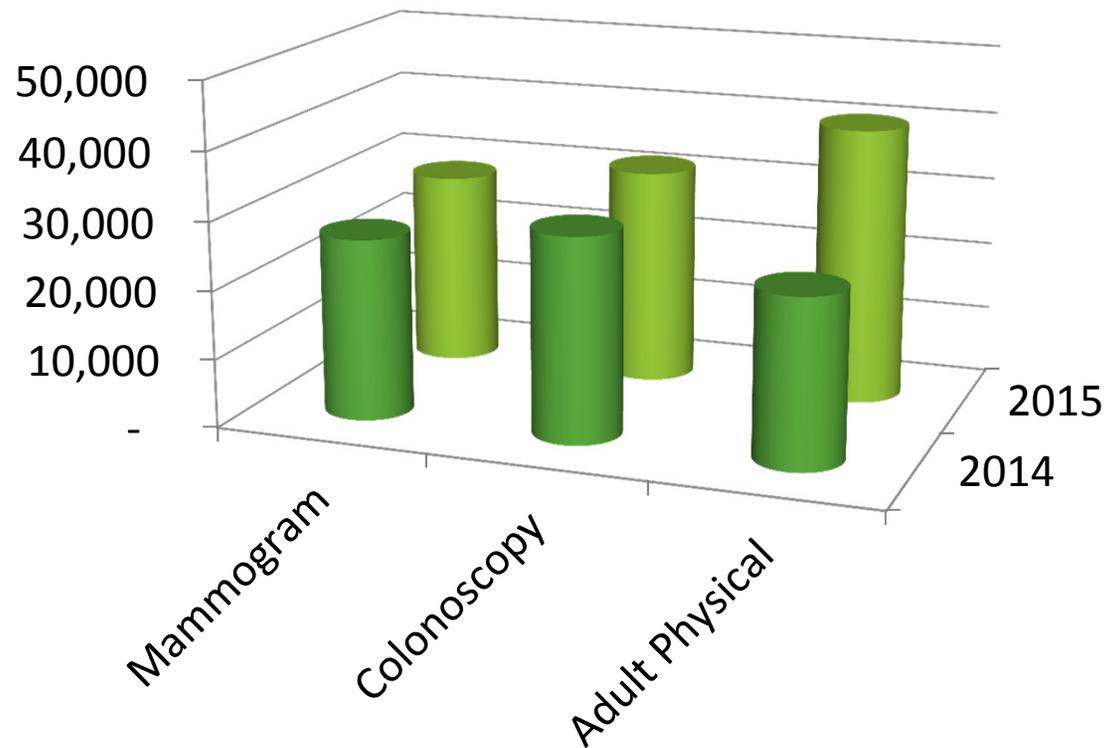


Wellness Plan Participation

	CareFirst	Kaiser	UHC	Total
Selected PCP	63,642	2,762	13,901	80,305
Completed HRA	54,388	2,026	10,102	66,516
Submitted PCP Sign-Off	43,346	N/A	6,061	49,407
Completed All	39,055	467	5,961	45,483

40% of eligible enrollees completed all three steps and earned the copay waiver.

Wellness Plan Improved Key Preventive Screenings



Compliance Rate Improvement:

Mammogram – 6.3%

Colonoscopy – 4.6%

Adult Physical – 65%

Wellness Plan Improved Treatment Compliance - Diabetes

Compliance Metric	Year	Participants Subject to Screening	Compliant Members	Compliance Rate	Change from Prior Year
Annual screening for diabetic nephropathy	2014	26,469	13,932	52.6%	
Annual screening for diabetic nephropathy	2015	24,096	14,475	60.1%	14.1%
2+ A1C tests in 12 months	2014	26,469	9,741	36.8%	
2+ A1C tests in 12 months	2015	24,096	10,867	45.1%	22.6%
Controlling blood glucose	2014	26,469	6,292	23.8%	
Controlling blood glucose	2015	24,096	11,351	47.1%	98.2%

Wellness Plan Improved Treatment Compliance - Hyperlipidemia

Compliance Metric	Year	Participants Subject to Screening	Compliant Members	Compliance Rate	Change from Prior Year
Annual cholesterol test	2014	88,341	43,894	49.7%	
Annual cholesterol test	2015	86,919	48,404	55.7%	12.1%
Annual serum creatinine	2014	86,863	2,496	2.9%	
Annual serum creatinine	2015	87,890	3,734	4.2%	47.9%



Wellness Plan Highlights



Free wellness coaching for weight management and nutrition, exercise, stress, heart health, diabetes lifestyle, tobacco cessation



CareFirst: Innergy
United Healthcare: RealAppeal
Free weight loss for employees with a BMI of 30 or higher
Kaiser internal program – no cost to member



\$150 per calendar year reimbursement for paid participation in a weight management program



No cost video visits if employee completed wellness activities



Free clinical management with nurses for diseases such as diabetes now available



Wellness Events/Seminar Opportunities

- ✓ Agencies are invited to host a wellness fair in the spring of 2017
- ✓ Agencies can also request various seminars that promote wellness awareness and education. Two forms offered:
 - ✓ Lunch & Learn
 - ✓ Webinar
 - ✓ Both are 45-60 minutes

Contact Brenda Salas - Wellness Coordinator:

Brenda.Salas@maryland.gov or 410.767.2981



ACA



ACA Play or Pay Mandate

Play or Pay mandate under healthcare reform (ACA) requires all individuals to have health insurance and all employers with 50 or more full-time employees to provide healthcare coverage that provides minimum essential coverage that is affordable and provides minimum value.

- Individual penalty for not having health coverage in 2016
 - Greater of \$695 or 2.5% of income; \$347.50 per child under 18, family maximum of \$2,085
 - 2015 was greater of \$325 or 2% of income; \$162.50 per child, family maximum of \$975
 - Fee is paid when filing tax return
- Employer penalties
 - \$2,160 for failure to offer coverage that meets value and minimum essential coverage
 - \$3,240 for failure to meet affordability



ACA Play or Pay Mandate

As the Applicable Large Employer (ALE) under which health coverage to your employees, we are REQUIRED to perform both the tax form filing to the employees and the reporting to the IRS.

- Our EPO, PPO and prescription drug plans are all self-insured
 - We pay an administrative fee monthly plus all of the claims
 - Self-insured ALE is required to provide employee tax forms
- IHM plan is fully insured
 - We pay a set monthly premium, no claims
 - Kaiser is required to provide the tax forms to the employees enrolled in this plan under the Program



Review of CY2015 ACA Filing

- Mailed over 168,000 1095B and 1095C ACA tax forms in March 2016
- Submitted information to IRS in June 2016
- Received over 3,000 Social Security Number or Official Name errors from the IRS affecting employees/retirees and/or dependents
 - Required to correct these errors
- Reports with instructions will be sent to affected agencies to contact employees to obtain corrected information mid to late August
 - Due back at the end of September
- We will resubmit to the IRS as required



CY2016 ACA Reporting Deadlines

- 1095-B/C Forms must be post-marked by January 31, 2017
 - Employees must file with 2016 Federal Taxes
 - DBM EBD must submit file to printer by January 6, 2017
- 1094/1095 Files must be submitted to IRS by February 28, 2017



2016 ACA Reporting - Schedule

TASK	DATE TO AGENCY	BY/DUE DATE TO DBM EBD
January – June 2016 Data	Email from Lisa by Wednesday, August 3, 2016	Email back to Lisa by Tuesday, August 23, 2016
July – September 2016 Data	Email from Lisa by Wednesday, October 26, 2016	Email back to Lisa by Wednesday, November 2, 2016
October 2016 Data	Email from Lisa by Wednesday, November 30, 2016	Email back to Lisa by Friday, December 2, 2016
November 2016 and December 2016 Data	Refer to question #4 of the FAQ for November and December information.	

Mark your calendar for these critical due dates!

2016 ACA Reporting – Sending & Receiving Excel Templates

- Excel file contains PHI & must remain password protected
- **Do not** change filename
- Password: V@!d@te
- DBM EBD Now Uses Virtru Email Encryption Tool
 - Adds an Extra Layer of Protection
 - Files Will be Sent Via Virtru
 - Return Files as a ***REPLY*** to the Same Virtru Email
 - You will need to download the Virtru free plug-in
 - If unable to reply via Virtru, ensure password protected



Special Limited Open Enrollment Period

- Open Enrollment for those who should be offered subsidized coverage based on the measurement period
 - Measurement period is October 15, 2015 to October 14, 2016
- November 7, 2016 to December 6, 2016
- Forms due to EBD by December 9, 2016



Plan Updates



2017 Wellness Activities

- ✓ Stay Tuned!
- ✓ Will be a separate wellness insert in the open enrollment packets
- ✓ Will be on the wellness tab of our website



Long-Term Care Contract Ending

- ➔ The Prudential Long-Term Care group plan expires December 31, 2016
- ➔ Prudential will direct bill those who are currently enrolled through the Program beginning January 1, 2017
- ➔ EBD will send targeted communications to affected employees/retirees in September & November 2016 to remind them of this change



NEW - Flexible Spending Account Vendor

- P&A Group new Flexible Spending Account vendor effective January 1, 2017
 - Will issue new debit cards in late December for employees who elect the healthcare FSA during Open Enrollment
- ConnectYourCare (CYC) will handle the grace period claims through March 15, 2017 for anyone who has 2016 funds remaining at the end of the 2016 plan year
 - April 15 is deadline to submit claims from 2016 plan (services received through grace period end date of 3/15/17)



P&A Group



Welcome!

Introducing P&A Group, your new Flexible Spending Account vendor for Jan 1, 2017!

New Contact Information

- Website: www.MD.padmin.com
- Customer Service: (844)638-1900 (Mon- Fri 8AM-10PM EST)
- Fax Claims: (844)638-1901



Important FSA Plan Dates

- P&A Group will begin processing FSA claims as of 1/1/17
- All claims incurred in 2016 will be processed by CYC
- 2016 grace period healthcare FSA claims (1/1/17 – 3/15/17) will be processed by CYC
- **REMINDER:** Last day to submit 2016 claims is April 15, 2017
- New P&A debit card will arrive by 1/1/17

About FSAs...

A smart way to...

- Increase your take-home pay, and decrease your taxable income!
- Save on State, Federal & FICA taxes and save 25% - 42% !



Healthcare FSA

Tax Savings Example

Out-of-pocket health expenses	\$ 800
Contact lenses, solutions, eye glasses	\$ 200
Dental	\$ 300
Co-pays & other expenses	<u>\$ 100</u>
Total	\$1,400
30% Tax Rate	X .3
Tax Savings	\$ 420

Healthcare FSA

- \$2,550 account maximum per employee (\$120 minimum)
- Expenses can be for you, your spouse, your dependent children (as defined by the IRS)
- Annual election available immediately
- Plan carefully — FSA Calculator is available when making election to help calculate for predictable expenses (visit www.MD.padmin.com to access)
- Need prescription to use Healthcare FSA for Over-the-Counter (OTC) medications
- Please retain all receipts

Healthcare FSA

- Eligible Expense Examples

- Medical — deductibles, coinsurance, copayments
- Vision — co-payments, non-covered items, additional services, and LASIK surgery
- Dental — deductible, coinsurance, orthodontics
- Drugs — prescription copayments, over-the-counter medicines (with a prescription)

- Ineligible Expense Examples

- Insurance premiums, elective cosmetic procedures, etc.

Dependent Daycare FSA

- \$5,000 account maximum (per household)
- Both you and your spouse must work to participate (or be enrolled as a full-time student)
- Eligible Expense Examples
 - Child daycare for dependents under age 13
 - Before/after-school care for dependents under age 13
 - Dependent adult care for “qualifying relative”
- Ineligible Expense Examples
 - Tuition
 - Overnight camps



Dependent Daycare FSA

- Reimbursement is limited to your available account balance
- Itemized proof of service documentation is required for reimbursement
- Special rules for separated/divorced employees
- Check with your tax professional about tax issues related to Dependent Daycare FSA
- The debit card is not available for this account

FSA Debit Card

- One debit card will be issued to employees
 - Spouse and/or dependent cards can be ordered online at no additional cost
 - Cards are valid for 3 plan years
- No out-of-pocket expenses
 - No reimbursement delays
 - Use like a credit card — no PIN required
- Debit card can only be used for eligible healthcare expenses
- Report a lost or stolen card immediately to P&A Group



Account Access

- Online account access at www.MD.padmin.com
 - First time users must create their account when logging in
 - Access to account balance, elections, deposits, claims, etc.
- Smartphone account access (responsive design)
 - Access to account balance, elections, deposits, claims, etc.
 - Texting features
 - QuikClaim
- Integrated Voice Response
 - Access to account balance, elections, deposits, claims, etc.

Reimbursements

- Claims can be mailed, faxed or uploaded
- Daily Claim Reimbursement
 - Direct Deposit
- Claims Tracking

Fax claims to: (844)638-1901

Mail Claims to: 17 Court St. Suite 500
Buffalo, NY 14202

QUESTIONS?

MSRP



Open Enrollment



Open Enrollment

- October 13, 2016 to November 15, 2016
- Postcard mailing August 24, 2016
- Summary Statement information as of August 26, 2016
- Packets mailed/delivered around September 23, 2016
- **Final day for ABCs to deliver forms to EBD is November 18, 2016**
 - Send to EBD as you receive, review, and approve/sign them
 - **Enrollment.EBD@maryland.gov**
 - Must use encryption tool and/or password protection of the file
 - **Send password in separate email**



IVR Improvements

- Input Social Security numbers and birthdates using the phone keypad
- No more speaking the information to be transcribed!



Marketing Material Order Form

- Medical and FSA carriers sending supplies to all agencies
- ABC can order yearly supplies for other carriers
- Supplies for health fairs ordered by EBD



**OPEN ENROLLMENT FOR CY2017
MARKETING MATERIAL ORDER FORM**

Please use the information below to order marketing materials from the health plans for your yearly supplies. All medical vendors and the new flexible spending vendor will be automatically sending a supply to each agency.

Express Scripts Larry Hedgecorth Email: LWHedgecorth@express-scripts.com	Delta Dental Kristi Mullins Email: kmullins@Delta.org Fax 717-766-8719
United Concordia Dental Kelly Chiz Email: Kelly.chiz@ucci.com	Securian www.lifebenefits.com/mdorder

For plans without online ordering options: complete below and email or fax as indicated above.

Plan:

2. Your Information

Benefits Coordinator/Requestor's Name:

Phone:

Email address:

Agency:

Shipping Address:

3. Material Requested:
 Please indicate the amount of marketing materials to be used throughout the year.

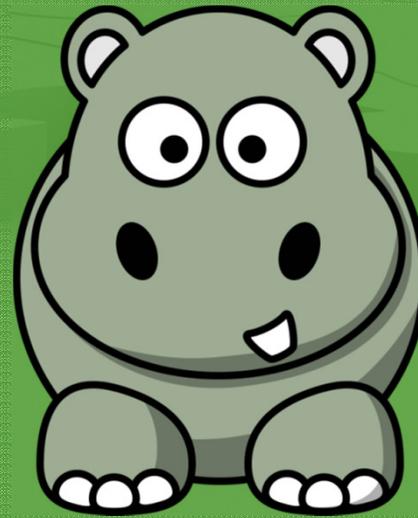
NOTE: If you are hosting a benefit fair, you do not need to order supplies for the fair. EBD will take care of ordering supplies for your agency based on estimated attendance.



Let's Take a Break!



HIPAA Refresher



H EALTH
I NFORMATION
P AIN
A ND
A GONY

HIPAA - Health Insurance Portability and Accountability Act of 1996

Designed to protect the privacy and security of health information and provide standards for the electronic exchange of health information.

Every State and Satellite agency employee who touches any form of PHI or PII MUST protect the privacy and security of sensitive information.



HIPAA Key Provisions

- **Portability** of insurance coverage from one job to the next job, reducing pre-existing condition exclusions (Certificate of Creditable Coverage)
- Protect **privacy** of health-related information (April 2003)
- **Standardize** electronic transmission of health-related data (October 2003)
- **Security** of electronically held health-related information (April 2005)
- Health Information Technology For Economic and Clinical Health (**HITECH**) Act (2009)



HITECH ACT

- Enacted as a part of the American Recovery and Reinvestment Act of 2009
- Designed to encourage health care providers to adopt health information technology in a standardized manner and to protect private health information.
- Specifically addresses
 - Breaches
 - Electronic health records (EHR)
 - Personal health records (PHR)



Covered Entities

Groups that must comply with HIPAA and protect the confidentiality of protected health information:

- **Health Plans**
Includes health insurance companies, HMO plans, PPO plans, EPO plans, POS plans, company health plans and government programs such as Medicare and Medicaid.
- **Healthcare Providers**
Conduct certain business electronically such as billing of health insurance claims - including most doctors, dentists, clinics, psychologists, hospitals, nursing homes, assisted living, adult day care, and pharmacies.
- **Business Associates (of Covered Entities)**
Performs the following services for a Covered Entity and receives PHI: legal, actuarial, accounting, consulting, data aggregation, management, etc.



Protected Health Information (PHI)

- All individually identifiable health information (oral, paper, electronic)
 - Name
 - DOB
 - SSN
 - Address
 - Health plan enrollment
 - Premium information
 - EAP referral



Permissible Disclosure of PHI Without Authorization

A covered entity is permitted to use or disclose PHI **without** written authorization for the following purposes or situations:

- Individual requests his/her own PHI
- Limited data set (i.e., information is de-identified)
- For healthcare and health plan administration activities (such as mandatory reporting, assistance with member claims and fraud/abuse investigations)



PHI Disclosure Requiring Written Authorization

- Any use or disclosure that is not for plan administration purposes
- Any use or disclosure which is not specifically authorized in the law
- Any PHI to be disclosed to a Third Party (such as the individual's personal representative or family members)

ACA Appeals Process: Ensure a HIPAA authorization form is completed when disclosing certain information.



HIPAA Safeguards

- Physical
 - Facility Access and Control
 - Limited only to authorized personnel
 - Locked entry, doors and walls
 - HIPAA cover sheets on inboxes
 - Workstation and Device Security
 - Lock computers when unattended
 - Use privacy screens to limit accidental disclosure
- Minimum Necessary Principle
 - “Need to know” basis
 - Provide only the necessary information



Your Responsibilities

You are required to:

- Disclose PHI – limit the information you share with a person to what he or she needs to know (“minimum necessary”)
- Use PHI according to HIPAA-approved guidelines for access, accounting, amendment, and restriction of PHI
 - Use encrypted email when sending PHI to EBD or any other sources
- Only access the PHI necessary to complete your job duties
- Maintain confidentiality & security of member information at all times



Steps To Follow When Asked For PHI

- Verify the identity of the person or entity requesting PHI.
 - Is this someone who should have access to this information?
- Determine what PHI information is being requested.
 - Is this the minimum amount of information that is necessary?
- Determine if PHI can be provided with or without written authorization.

Remember: An individual who requests his/her own PHI is not limited to the minimum amount of PHI necessary.

Plan Members' HIPAA Rights

All plan participants have the right to:

- Obtain a copy of PHI held by DBM or a plan within DBM's Program.
- Amend their PHI if wrong or incomplete.
- Ask for a listing of anyone receiving their PHI from DBM.
- Request DBM communicate with them in a different manner if using the address on file creates a danger to the security of his/her PHI
- Request DBM limit how his/her PHI is given out or used.
- Request paper copy of DBM HIPAA notice.



Penalties and Enforcement



- Civil
 - Penalties range from \$100 to \$50,000 per violation, with an overall penalty limit of \$1,500,000 for identical violations during a calendar year.
- Criminal
 - Criminal penalties range from a \$50,000 fine and up to one year imprisonment for simple violations to a \$250,000 fine and up to 10 years imprisonment for offenses committed with the intent to use PHI for commercial advantage, gain or malicious harm.

EBD Updates/Reminders



Benefits Transition Update



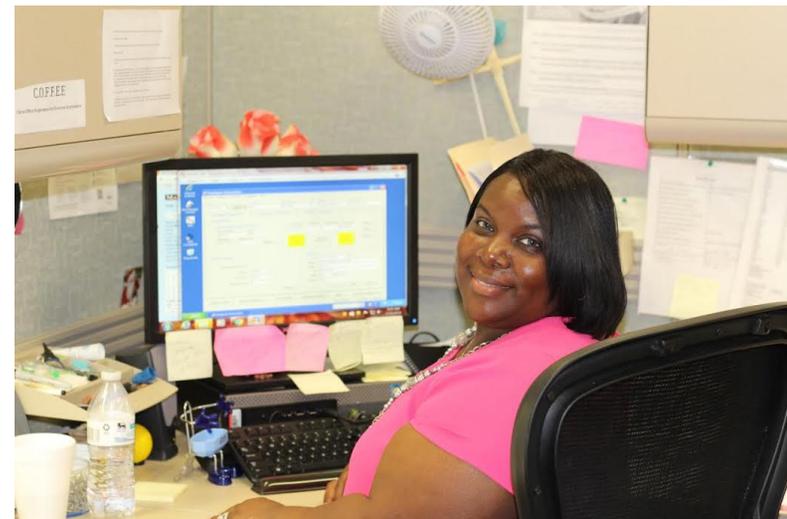
- Scheduled to (re)begin winter 2016
 - “Shell record” agencies will be contacted soon
- Go-Live anticipated summer of 2017
- Workday has made several major enhancements
- Web enrollment for fall of 2017!



New ABC Liaison

We are excited to introduce your ABC Liaison!

Felicia
Montague



New ABC Liaison

- ABC Point of Contact for:
 - Direct assistance with questions/problems
 - Connect ABCs with training opportunities
- Contact Information:
 - Felicia.Montague@maryland.gov
 - 410.767.4733
 - Email is preferred method of communication



Agency Benefits Coordinator Training

- Held on a monthly basis at DBM-EBD office
- Excellent for new ABC or as a refresher for seasoned ABC
- Includes an overview of enrollment processing procedures, customer service, wellness program, etc.
- HIPAA training (mandatory for all new ABCs)



New No Pay Process

- Rolled out with the July 13th paycheck
- ABCs now receive a report via email of employees in a “no pay” status for a particular pay period
- No more paper copies of employees’ no-pay notices



New No Pay Process

Start Dt	End Dt	Org Qualifying Event	Qualifying Event Dt	Qualifying Event	Reply Dt	Initial Due Dt	Reas
07/16/2016						07/28/2016	

Account Summary for Enrollment Year 2016 (01/01/2016 to 12/31/2016)

Coupon No.	Period	Due Date	Balance	Description
00704789	01/01/2016 - 01/15/2016	02/17/2016	375.04	Invoice - NO PAY
00705913	01/16/2016 - 01/31/2016	03/02/2016	375.04	Invoice - NO PAY
00714035	02/01/2016 - 02/15/2016	03/16/2016	375.04	Invoice - NO PAY
00715823	02/16/2016 - 02/29/2016	03/30/2016	375.04	Invoice - NO PAY
00717790	03/01/2016 - 03/15/2016	04/13/2016	375.04	Invoice - NO PAY
00719222	03/16/2016 - 03/31/2016	04/27/2016	375.04	Invoice - NO PAY
00722155	04/01/2016 - 04/15/2016	05/25/2016	375.04	Invoice - NO PAY
00724714	04/16/2016 - 04/30/2016	06/08/2016	375.04	Invoice - NO PAY

Buttons: Create/Re-calc Invoice, Make Payment, Pmt History, Account Detail, Manual Invoice, Preview Note, Reprint, Reprint Cobra, Search Based on..., Print Screen, Deduction History, Print, Go back to Main Menu

Memo in your training packet explaining the new process in more detail.



Enrollment Procedure Changes

- **Declination Form**

- Separate Form
- Required for everyone offered coverage regardless of subsidy eligibility
- Complete thoroughly

TO BE COMPLETED BY AGENCY BENEFITS COORDINATOR

Active Full-Time Employee

Entry on Duty Date: _____

Active Part-Time Employee

Entry on Duty Date: _____

Satellite Employee

Entry on Duty Date: _____

Contractual/Variable Hour Employee State Subsidy Eligible

Contract Period From: _____ To: _____

Contractual/Variable Hour Employee NO State Subsidy

Contract Period From: _____ To: _____

LAW - Personal

Effective Date: _____ End Date: _____

LAW - Military

Effective Date: _____ End Date: _____

LAW - OJI

Effective Date: _____ End Date: _____

Pay Center: Central Payroll University Satellite

Agency Code: _____ Check Dist. Code: _____
(if applicable)

DECLINE ALL COVERAGE



Enrollment Procedure Changes

- **Social Security Cards**
 - Obtain copy of Social Security cards for employees and/or enrolling dependents
 - Ensure using official name on all enrollment forms



Handy Reminders

- **Enrollment Forms**
 - Need a form for all new hires – even if declining benefits
- **Affidavit for Dependent Verification**
 - Language is on enrollment forms
 - Not needed if submitting supporting documentation with an enrollment form
 - Required for the Dependent Verification Audit



Handy Reminders

- **Dependent Verification Audit**
 - Report will be sent in late January 2017
 - Gather your documentation early and hold until report arrives
 - Read DVA instructions carefully - includes deadlines
- **Benefit Guides**
 - Must give a hard copy of the benefit guide to all new hires
 - Increased number of guides shipped to each agency
 - Latest version is always available on EBD website for printing



Handy Reminders

- **EBD Important Email Addresses**
 - EBD.mail@maryland.gov - receives all customer service and general questions
 - Enrollment.ebd@maryland.gov - receives all enrollment forms, supporting documentation, FMLA or Military leave notifications, contract renewal forms, etc.



Handy Reminders

- **Secure/Encrypted emails**
 - DBM-EBD uses Virtru to send all secure emails
 - **DO NOT** include PHI in subject line (this includes names!)
 - **DO NOT** send full PHI information in email unless sent in a secure manner
 - Attachment may be password protected, but remember to send password in a **separate** email



Handy Reminders

- **EBD and Carrier Contact Information**

- Provided in your training packet
- **For YOUR use only!**
 - Do not distribute this information to employees; provide customer service contact information to employees



Questions?

