ENROLLMENT INSTRUCTIONS DURING OPEN ENROLLMENT

Open Enrollment Period: April 17, 2012 – May 1, 2012
Correction Period: May 9, 2012 - May 16, 2012
For Plan Year: July 1, 2012 - June 30, 2013

During Open Enrollment you must use the Interactive Voice Response (IVR) system if you want to:

- Enroll in a new plan or make changes to your current benefit selections;
- Enroll in a Flexible Spending Account (FSA) (for Active/Satellite employees only) – for the first time or to re-enroll. **NOTE: You MUST re-enroll each year to continue to participate;** or
- Add or delete dependents.

To help you prepare for Open Enrollment, enclosed you will find a personalized Open Enrollment benefit statement with information about your current benefit enrollment **as of February 17, 2012**.

- If you have never enrolled in any State health benefit plans, contact your Agency Benefits Coordinator for an enrollment packet. Retirees, please contact the Employee Benefits Division to obtain an enrollment packet.
- If you did not receive a personalized open enrollment benefit statement, please contact your Agency Benefits Coordinator. Retirees, please contact the Employee Benefits Division.
- If you are retiring on or before July 1, 2012, see your Agency Benefits Coordinator for a Retiree Enrollment Form.

Before You Call the IVR System…

- Review this benefits guide carefully and have your personalized open enrollment benefit statement handy when calling.
- Decide what changes and/or selections you want to make and note them on your personalized open enrollment benefit statement.
- If you are an Active employee, decide if you want to contribute to an FSA and if so, how much to take from each pay check. **This benefit <u>does not</u> carry over and requires you to re-enroll each year.**
    - Decide on the total amount you want deducted for the 2012-2013 plan year: ____________
    - Calculate your per pay deduction by dividing the total amount by your number of pay periods during the year: ________________

NOTE: Central Payroll employees will have 24 deductions. University employees who are 21-pay employees and Satellite employees should contact their Agency Benefits Coordinator to determine their number of deductions.

- Have the following information ready if you are adding a dependent or making changes to your dependent's information:
    - Dependent's full legal name
    - Dependent's Social Security Number
    - Dependent's gender
    - Dependent's relationship to you
    - Dependent's date of birth

USING THE IVR

For a complete IVR script detailing enrollment instructions, go to **www.dbm.maryland.gov/benefits**, click on "How to Enroll".

STEP 1: MAKE THE CALL

Call the IVR system 24 hours a day, 7 days a week at the number below between April 17 and May 1:

- Baltimore area: 410-669-3893
- Outside Baltimore area: 1-888-578-6434
- People who are deaf, hard of hearing or have a speech disability, please use Relay or 711
- When prompted, enter your ID and Personal Identification Number.

Your ID is _______________ (Social Security Number), Your PIN is ________________(4 digit number - month and day of your birthdate: mmdd)

Enroll early! There is a large volume of calls made during the last few days of the Open Enrollment period. The best time to call is during the non-peak hours of late evening and early morning.

If you are enrolling in benefits for the first time or have cancelled benefits and are now re-enrolling, you must call one of the numbers shown above during regular office hours to have a benefit packet created. To do this, press Option 8 when prompted and you will be connected to a Benefits staff member. Hours of operation are 8:30 am to 4:30 pm, Monday through Friday, Eastern Time, except for State holidays and emergency closures. Once a benefit packet has been created, you will be able to enroll using the IVR system.

STEP 2: MAKE YOUR SELECTIONS

The IVR system will guide you through the steps for making selections and changes for:

- Medical
- Prescription Drug
- Dental
- Flexible Spending Accounts
- Term Life Insurance
- Accidental Death and Dismemberment
- Adding/deleting dependents

After you make each selection, the IVR system will confirm your selection. **Note: After each dependent is added, you must indicate in which plan(s) you are enrolling the dependent.**

If you are an Active employee and need assistance using the IVR system, contact your Agency Benefits Coordinator. If you are a retiree, contact the Employee Benefits Division during business hours.

NOTE: The Prudential Insurance Company administers the Long Term Care (LTC) plan. If you want to enroll in this plan, follow the instructions in the LTC section of the enclosed benefit guide.

STEP 3: MAKE SURE IT'S RIGHT

To review your enrollment, call the IVR system again and select the appropriate option to listen to the changes you just made. This option will not repeat information about plans in which you did not make a change. Information for dependents added through "speak and spell" is not available through this option. You will receive an updated benefits summary statement of benefits within 10 days after your call.

- If you are an Active employee, you will receive your benefits summary statement from your Agency Benefits Coordinator.
- If you are a retiree, your statement will be mailed to the address we have on file.

NOTE: You may make changes and corrections at any time during Open Enrollment. However, there will be a special correction period at the end of Open Enrollment for any last minute changes, corrections or enrollment selections. You are encouraged to enroll early and review your benefits summary statement carefully.

If your selections are not correct, call the IVR system again to make the correct selections, or contact:

- Your Agency Benefits Coordinator, if you are an Active employee; or
- The Employee Benefits Division, if you are a retiree.

You cannot change your elections after Open Enrollment, except in limited circumstances. See the Qualifying Status Changes section of your benefit guide for details.

If You Do Not Call the IVR

Your current benefit elections will roll over for the new plan year, except Flexible Spending Accounts (FSA).

SPECIAL INSTRUCTIONS:

IF YOU ARE ADDING OR DELETING DEPENDENTS

- You will need to "speak and spell" each dependent's information clearly so it can be accurately entered into the system.
- You may need to change the coverage level (i.e., Employee & Spouse or Employee & Family, etc.) of your plans if you add or delete a dependent. The system will not automatically change your coverage level.
- Following the close of Open Enrollment, you will be advised of the documentation required to cover your newly enrolled dependents. Failure to provide this documentation by the deadline indicated will result in the removal of the dependent. Any claims submitted for such dependents on or after the termination date will be your responsibility to pay. See pages 17-18 of your benefits guide for dependent documentation requirements.
- If you add an ineligible dependent or fail to remove an ineligible dependent from your coverage, you will be required to pay the employee or retiree premium and full State subsidy for the ineligible dependent for each month that he or she remains enrolled.

Employee Benefits Division
301 West Preston Street – Room 510
Baltimore, MD 21201
(410) 767.4775 or (800) 307-8283
www.dbm.maryland.gov/benefits