



Open Enrollment Edition

PEEHIP’s annual Open Enrollment period begins July 1 and ends at midnight on September 10 (for changes submitted online). This is the once-per-year opportunity for PEEHIP members to enroll in or change coverage, as well as add or drop eligible dependents from coverage. Outside of Open Enrollment, changes are only permissible due to a qualifying life event.

It is highly important for PEEHIP members to know that while PEEHIP is dedicated to providing members with many benefit options that promote health and well-being, PEEHIP members have the responsibility to take action to make educated choices during Open Enrollment to select the right plan(s) that are best for them and their covered dependents. So please visit PEEHIP’s Member Online Services (MOS) website today at <https://mso.rsa-al.gov> to view your current coverages and make any needed coverage changes this Open Enrollment to be effective on the new plan year beginning October 1.

Open Enrollment Web Page

PEEHIP’s Open Enrollment informational web page can be found at www.rsa-al.gov/index.php/members/peehip/open-enrollment. You can also navigate to this page from the main RSA web page and clicking the PEEHIP link. This web page will allow you to find the information needed to make educated decisions about your health plan options. Listed on this page are deadlines, the updated PEEHIP Member Handbook with Open Enrollment changes effective October 1, 2018, and other information relating to Open Enrollment.

Helpful Information about Open Enrollment

- ◆ The changes approved by the PEEHIP Board at the May 2018 meeting are shown in the article “Updates from the May 2018 PEEHIP Board Meeting” in this newsletter.

Important Open Enrollment Dates

Open Enrollment begins July 1, 2018, and will end by the following deadlines:

- ◆ **Online: September 10, 2018.** Open Enrollment ends midnight September 10, 2018. After this time, online Open Enrollment changes will not be accepted and the Open Enrollment link will be closed. **Online enrollment is the preferred option because it is the easiest and most efficient method to enroll in or make changes to your coverage. No other enrollment method provides a confirmation page in real time giving you instant assurance PEEHIP has received your enrollment request.**
- ◆ **Paper: August 31, 2018.** Open Enrollment ends August 31, 2018. Any paper forms postmarked after that date will not be accepted, without exception.
- ◆ **Flexible Spending Accounts: September 30, 2018.** Both paper and online Open Enrollment for flex plans end September 30, 2018.

Effective Date of Coverage

All Open Enrollment coverage elections approved by PEEHIP will become effective **October 1, 2018.**

- ◆ Open Enrollment information is published in the PEEHIP Member Handbook. Active and retired members can view and/or download a copy of the handbook from the PEEHIP Open Enrollment web page referenced above. For members without internet access, you can request a printed Member Handbook by calling RSA Member Services at 877.517.0020.
- ◆ **You do not need to do anything during Open Enrollment if you are satisfied with your current coverage*.** If you take no action, you and your covered dependents will remain on your current plan(s).
- ◆ Since the PEEHIP Open Enrollment period has begun, now is the time to verify the coverage(s) you and your dependents(s) are enrolled in. Please log in to your MOS account to view your coverage(s) and covered dependents. If you wish to make any changes, please do so online via MOS and receive your confirmation showing your coverage request was successfully received.
- ◆ Remember, until PEEHIP has received all required dependent eligibility verification documentation, your dependent(s) will not be enrolled in coverage.
- ◆ Always remember to update your contact information anytime you have a change in your address, email address, and/or phone number(s).
- ◆ Visit “My Account” in MOS to verify your preferred method of receiving information from PEEHIP and the RSA, and visit your “Secure Message Center” to view correspondence that has been sent to you by email.

If you want to renew your **Flexible Spending Accounts or Premium Assistance (PAA) Discount**, you must **re-enroll each year** as these programs do not automatically renew. For more information about the Premium Assistance Discount, visit www.rsa-al.gov/index.php/members/peehip/premiums/premium-assistance-program/.

Open Enrollment continued

Online Open Enrollment

PEEHIP's Member Online Services (MOS) website at <https://mso.rsa-al.gov> is the fastest and best way to enroll in new coverage or make changes to your existing coverage. Enrollment is done in real time, and a confirmation is given so that you have instant assurance that PEEHIP has received your enrollment request. Also, MOS will provide a premium calculation for the coverages that you select, saving you the time of having to calculate the premiums yourself. For these reasons, the majority of PEEHIP members opt to make their Open Enrollment changes online through MOS. To use MOS:

1. Go to <https://mso.rsa-al.gov> and enter your self-selected User ID and Password. If you need to register or re-register to create a new User ID and Password, click "Need to register?" You will need your PID number to register. Your PID can be found at the top right of paper correspondence from PEEHIP. If you

do not know your PID, please click "Need a PID? (Request PID Letter)" for steps to have your PID mailed to you at your current mailing address on file with the RSA.

- ◆ Forgot User ID and/or Password: Click "Forgot user ID or Password?" and follow the steps to reset your account.
2. Click "Enroll in or Change PEEHIP Coverages" on the Home page or from the "PEEHIP Services" drop down menu at the top of the page.
 3. Click the "Open Enrollment" option and then follow the on-screen prompts until you receive your **confirmation page**. If you do not have internet access but would like to make Open Enrollment changes, you can request a New Enrollment and Status Change form from RSA Member Services by calling 877.517.0020. ●

Flexible Spending Accounts

Save money on medical, dental, vision, or daycare expenses by enrolling in a PEEHIP Flexible Spending Accounts plan (FSA). PEEHIP offers two plans: a **Health Care FSA** and a **Dependent Day Care FSA**. You decide how much you would like to put aside into each account annually. The amount is divided into 12 separate monthly deductions. Your payroll coordinator will deduct the pre-tax amount from your monthly paycheck to place into your

FSA. When you have a qualifying expense, your payment or copay amount is reimbursed to you from your FSA. **Most members save \$15 to \$35 for every \$100 they spend on qualifying expenses depending on their tax bracket!**

NEW this year! Effective October 1, 2018, the Flex debit card will be an allowable reimbursement method for eligible medical, dental, and vision expenses in addition to eligible pharmacy expenses. For more information, see the

article "Updates from the May 2018 PEEHIP Board Meeting" in this newsletter.

Open Enrollment for FSA is July 1 through September 30. The new plan year (and your new savings) starts October 1, 2018. Enrollment in an FSA does not automatically renew each year, so you must re-enroll to continue participation. You can find more information about the PEEHIP FSA plans serviced by HealthEquity, at www.healthequity.com/peehip. ●

Avoid the \$50 Monthly Wellness Premium! Complete by August 31

Members and spouses covered on PEEHIP's Blue Cross Blue Shield (Group 14000) Hospital Medical Plan: **Your required activities for the PEEHIP Team Up for Health Wellness Program must be completed by August 31, 2018, to earn a waiver of the \$50 monthly wellness premium effective October 2018.** This premium applies separately to incomplete members and spouses, meaning both must complete all required activities. To check your status, visit www.MyActiveHealth.com/PEEHIP and click on "My Required Activities". You can also verify your Wellness Premium Waiver has been earned by visiting PEEHIP's Member Online Services (MOS) at <https://mso-al.gov> and clicking on Wellness Completion Status on the home page after logging in. ●

Summary of Benefits and Coverage Availability of Summary Health Information

The Patient Protection and Affordable Care Act (PPACA) of 2010 created a federal requirement for group health plans to provide the Summary of Benefits and Coverage (SBC) form to health plan members during Open Enrollment. Health benefits represent a significant component of every employee's compensation package. The benefits also provide important protection for employees and their family in the case of illness or injury. PEEHIP offers health coverage options. Choosing a health coverage option

is an important decision. To help you make an informed choice, PEEHIP makes available a Summary of Benefits and Coverage (SBC), which summarizes important information about health coverage options in a standard format to help you compare across coverage options available to you in both the individual market and group health insurance coverage markets.

The SBC is available on the PEEHIP web page at www.rsa-al.gov/index.php/members/peehip/benefits-policies. A paper copy is also available, free of charge, by calling Member

Services toll-free at 877.517.0020. The SBC is meant as a summary only and the coverage examples in the SBC are for illustration purposes only and may not be representative of the actual charges for copayments or out-of-pocket expenses for the PEEHIP plan. For more detailed benefit information, see the PEEHIP Summary Plan Description (SPD) at www.rsa-al.gov/index.php/members/peehip/peehip-publications. ●

Updates from the May 2018 PEEHIP Board Meeting

Healthcare cost escalation is no longer a new issue facing our nation, and this rising cost puts pressure both on plans and on members. To address rising costs, plans must either increase funding or decrease costs. However, decreasing costs without simultaneously decreasing benefits is a very difficult path forward. Through leadership of the PEEHIP Board, the PEEHIP plan continues to lead the industry with a premier level of benefits at the lowest possible cost.

Many successful programs have been put in place over the past several years to maintain the quality and affordability of the PEEHIP plan. The success of these programs was demonstrated again during the May 17, 2018, PEEHIP Board meeting, which did not result in any new premium, copay, or deductible increases for PEEHIP members. Furthermore, a benefit enhancement was passed in the form of a copay reduction for Applied Behavioral Analysis (ABA) Therapy. Note: COBRA, leave of absence, surviving spouse/dependent, and retiree sliding scale rates fluctuate each year based upon the cost of the insurance program and the Alabama Sliding Scale Law. Please see the section below dedicated to these rates for more information.

Applied Behavioral Analysis (ABA) Therapy Copay Reduction

As detailed in the April 2018 *PEEHIP Advisor* newsletter, PEEHIP covers ABA therapy effective January 1, 2018, for children ages 0 through 18. Due to the high frequency at which some children may need this new benefit, reducing the copay from \$30 visit to \$15 per visit will be financially advantageous to our members and may help reduce a potential barrier from seeking treatment. Therefore, as an enhancement to this benefit, the copay for ABA therapy has been reduced to \$15 per visit retroactively effective to January 1, 2018.

To find an ABA provider in BCBSAL's ABA network, visit www.bcbsal.org/web/provider-finder. Enter a zip code and click "Search", then narrow your search to find an in-network ABA provider near you by using the "Refine Results" feature on the left side of the page. To do this, first select Behavioral Health Providers, then select "Behavior Analysts". The providers near you will display on the right side of the page. To find a provider by phone, call 877.563.9347.

Annual Adjustments to COBRA, Leave of Absence (LOA), Surviving Spouse/Dependent, and Retiree Sliding Scale Rates

As mandated by federal COBRA Law and state law (Section 16-25A-8(e)), related to Surviving Spouses paying the cost of their coverage, each plan year there may be either some increases or some decreases to these rates as shown below. Also, members who retired on or after October 1, 2005, may experience rate adjustments because their premiums are subject to the sliding scale law (Section 16-25A-8.1) and are based on years of service and the cost of the insurance program.

An age and subsidy component may also apply for members retiring on or after January 1, 2012. The PEEHIP retiree premium calculators at www.rsa-al.gov/index.php/members/peehip/calculators/ will be updated prior to October 1, 2018.

VIVA Health Plan Benefit Changes

Effective October 1, 2018, members covered under the PEEHIP VIVA Health Plan will have some changes to their benefits. The changes are mainly applicable to the medical benefit, and neither the prescription benefit nor the embedded dental benefit will have changes for the upcoming year.

PEEHIP members covered in the VIVA plan have access to teleconsultation through Teladoc just like members covered under the PEEHIP Hospital Medical Blue Cross Blue Shield Group #14000 Plan. The copay for VIVA members is increasing from \$40 to \$45 per consult effective October 1.

The combined medical and prescription drug in-network maximum annual out-of-pocket amounts will increase from \$7,150 for individual coverage and \$14,300 for family coverage to \$7,350 (not to exceed \$7,350 per any individual) and \$14,700, respectively. Maximum out-of-pocket amounts are a benefit to members because they limit the total amount members will pay out-of-pocket for their in-network healthcare expenses.

VIVA will also begin covering ABA therapy effective October 1 for those meeting criteria for this treatment which includes those with a diagnosis of autism, autism spectrum disorder, or pervasive developmental delay. Also, effective October 1, VIVA will cover physical, speech, and occupational rehabilitative therapy with no visit limits for a diagnosis of pervasive developmental delay. Coverage for ABA and rehabilitative therapy will be at 80% of the allowed amount after members meet the deductible. The calendar year deductible remains unchanged for FY2019 at \$500 for individual and \$1,500 per family contract.

Lastly, VIVA benefits have always included Diabetic Self-Management Education (DSME) with no limit. However, previously this benefit was billed by a hospital as an outpatient claim causing the applicable member cost-sharing and deductible. DSME will now be a new benefit category which is a benefit enhancement because the deductible no longer applies.

Flexible Spending Account (FSA) Plan Changes

Due to the ease of use and convenience of a debit card, and due to the enhanced controls offered by a debit card to allow Flex account fund use only for eligible expenses, the PEEHIP Flex debit card will be available for eligible medical, dental, and vision expenses in addition to eligible pharmacy expenses effective October 1, 2018.

This expanded available usage of the Flex debit card is a more convenient reimbursement option than the automatic bump method which previously required PEEHIP members to pay out-of-pocket

for eligible expenses and wait for reimbursement. The debit card accesses funds directly out of the member's Flex reimbursement account, meaning they do not pay out-of-pocket nor wait to be reimbursed. Because the debit card will better serve PEEHIP Flex members, the automatic bump method will no longer be an available reimbursement method effective October 1, 2018.

Existing Flex members, who already have a Flex debit card, can continue to use their existing card now at the additional locations beyond the pharmacy. Existing members will not need to receive a new card for use at their doctor, eye doctor, dentist, or pharmacy beginning October 1, 2018.

For members who choose not to utilize the debit card, the Health Equity member portal offers the functionality for members to pay their provider directly or have their eligible out-of-pocket expenses reimbursed. Additionally, the manual reimbursement method of submitting a request for reimbursement form with proper documentation will remain an available option.

In addition to the expanded available usage of the debit card, the annual maximum Health FSA contribution limit increased to \$2,650 beginning October 1, 2018. This is a benefit enhancement. The Dependent Care Reimbursement Account (DCRA) annual maximum limit remained unchanged at \$5,000 (\$2,500 each if married filing separately). For more information about PEEHIP's Flex plans, visit <http://www.rsa-al.gov/index.php/members/peehip/flex-account/>.

Annual Indexing Per the Affordable Care Act

The following amounts are set by the federal Affordable Care Act (ACA) and are indexed annually. PEEHIP implements the full ACA indexed amounts each year under established Board policy.

- ◆ **Maximum Annual Out-of-Pocket Amounts:** The combined medical and prescription drug in-network maximum annual out-of-pocket amounts will increase to \$7,900 per individual and \$15,800 per family per calendar year effective January 1, 2019. This is an enhanced benefit for our members enrolled in PEEHIP's Group #14000 Hospital Medical coverage as you will pay no more than these annual out-of-pocket amounts for calendar year 2019.
- ◆ **Supplemental Hospital Medical Maximums:** The annual maximum amount of claims paid under Group #61000 will increase to \$7,900 per individual and \$15,800 per family effective January 1, 2018. This is a benefit enhancement.
- ◆ **Health Flexible Spending Accounts (FSA):** The annual maximum Health FSA contribution amount is increased to \$2,650 beginning fiscal year October 1, 2018. This is a benefit enhancement. Note: the Dependent Care Reimbursement Account (DCRA) annual maximum contribution remains unchanged at \$5,000 (\$2,500 each if married filing separately). ●

Medicare-Eligible PEEHIP Members

The information on this page pertains to PEEHIP members covered under the UnitedHealthcare® Group Medicare Advantage (PPO) plan or prospective members who are considering enrolling in this PEEHIP plan. For more information, visit www.UHCRetiree.com/peehip.

UnitedHealthcare Benefit Expo Events

Learn how to get the most from your PEEHIP UnitedHealthcare Benefits by attending a Benefit Expo event hosted by UnitedHealthcare. UnitedHealthcare will be holding 10 regional education sessions throughout Alabama for Medicare-eligible PEEHIP members and their Medicare-eligible dependents, to be held in July and August. Learn about important health plan programs and benefits such as HouseCalls, NurseLine, SilverSneakers®, Solutions for Caregivers, and more. For those retirees who are not able to attend a session in person, two teleconferences will be held for retirees to call in to hear a presentation and ask questions. Invitations with additional meeting details have been sent by UnitedHealthcare so watch for yours in the mail.

If there is a location near you, we hope you can join us. Presentations will begin at 9:30 a.m., except where noted.

If you are unable to attend in person, you can call in to listen to the presentation in the comfort of your home.

| Attend in Person | |
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| TUESDAY, JULY 10 9 A.M. – 12 P.M. | Auburn Marriott Opelika Hotel & Conference Center at Grand National 3700 Robert Trent Jones Trail Opelika, AL 36801 |
| THURSDAY, JULY 12 9 A.M. – 12 P.M. | Clarion Inn & Suites 2195 Ross Clark Circle Dothan, AL 36301 |
| FRIDAY, JULY 20 9 A.M. – 12 P.M. | Mobile Marriott 3101 Airport Boulevard Mobile, AL 36606 |
| MONDAY, JULY 23 9 A.M. – 12 P.M. | Marriott Shoals Hotel & Spa 10 Hightower Place Florence, AL 35630 Meeting room located in The Conference Center |
| THURSDAY, JULY 26 9 A.M. – 12 P.M. | Holiday Inn Huntsville — Research Park 5903 University Dr Huntsville, AL 35806 |
| FRIDAY, JULY 27 9 A.M. – 12 P.M. | Gadsden Country Club 1884 Rainbow Dr Gadsden, AL 35901 |
| THURSDAY, AUGUST 2 10 A.M. – 1 P.M. | Pelham Civic Complex & Ice Arena 500 Amphitheater Road Pelham, AL 35124 Meeting room located in The Banquet Hall Presentation will begin at 10:30 A.M. |
| FRIDAY, AUGUST 3 9 A.M. – 12 P.M. | Hotel Capstone 320 Paul W Bryant Dr Tuscaloosa, AL 35401 |
| TUESDAY, AUGUST 7 10 A.M. – 1 P.M. | Birmingham Marriott 3590 Grandview Parkway Birmingham, AL 35243 Presentation will begin at 10:30 A.M. |
| WEDNESDAY, AUGUST 8* 9 A.M. – 12 P.M. | Renaissance Montgomery Hotel & Spa at the Convention Center 201 Tallapoosa Street Montgomery, AL 36104 |
| Attend by Phone | |
| TUESDAY, JULY 17 10 A.M. CT | Dial: 800.260.0702 Code: 447107 |
| WEDNESDAY, AUGUST 15 3 P.M. CT | Dial: 800.260.0702 Code: 447108 |