Open Enrollment Overview
Plan Year 2016

Presented by:
Tammy Gill, Sr. HR Representative
Agenda

• Important Dates To Remember

• What’s New for 2016
  – PEIA
  – The Health Plan (HMO)
  – FBMC

• Reminders

• Questions
Important Dates To Remember

• Open Enrollment is April 2, 2015 – May 15, 2015; changes are effective July 1, 2015.


• Benefits Fair is April 8, 2015 from 3-7 p.m. at Holiday Inn in Martinsburg, WV.
  – This is an opportunity to meet one-on-one with all benefit vendors.
Important Dates To Remember

• HR will be conducting information sessions for employees regarding the Open Enrollment changes on the following dates.

• All meetings will be held in the Auditorium of the Center for Legislative Studies, except the 4/8 meeting.
  – April 8, 2015 at 2 p.m. – Hosted for Dining Services Department. **This meeting will be held in the lower level of the dining hall.**
  – April 10, 2015 at 2:30 p.m. – Hosted for Facilities Management Department
  – April 14, 2015 at 10 a.m. – Open to all Departments
  – April 16, 2015 at 3 p.m. – Open to all Departments
Reminder

• Open Enrollment is your opportunity to review all benefit elections to determine what is best for you and your family!

• Please take time to review all available benefit options and information provided.
PEIA - What’s New for 2016

Action Required:

• All PEIA PPB Plan policyholders must designate a Primary Care Physician (PCP) by May 15, 2015, in order to avoid the additional $500 deductible penalty.

• PEIA will NOT take the PCP designation after the May 15th deadline.
Action Required (Cont):

- There are two ways to designate your PCP:
  - Go online to www.wvpeia.com, click on the green “Manage My Benefits” button and follow the Open Enrollment script.
  - Call the PEIA Open Enrollment Helpline at 877-676-5573 and follow the prompts to order a “Pick a PCP” form. One will be mailed to your home address on the next business day.

- Please remember to print your online confirmation page for your records.
Welcome to PEIA's Manage My Benefits website!
It's Open Enrollment time, and all PEIA PPB Plan members must name a Primary Care Provider before May 15.
Register or log in below to get started!

Please Log In

- PEIA Login page
- Click “Need to Register” to set up account for the first time
PEIA - What’s New for 2016

• No PEIA premium changes for 2016
• Annual deductible, out-of-pocket maximum and co-pay increases
• Healthy Tomorrows Initiative
• Following changes apply to in-network services
PEIA - What’s New for 2016

Annual Deductible
• Applies to all PPB Plans
  – Deductible increases by $25 for employee only and $50 for family-type plans.

Out-of-Pocket Maximum:
• Applies to PPB Plans A and D
  – Family-type plans out-of-pocket maximum increases from 1.5x the employee only amount to 2x the employee only amount.
  – No change for PPB Plans B and C out-of-pocket maximums.
PEIA - What’s New for 2016

Co-Pay Changes for PPB Plans A, B & D

• PCP visit co-pay increases from $15 to $20 per visit.

• Specialist visit co-pay increases from $25 to $40 per visit.

• Outpatient surgery co-pay increases from $50 to $100.

• ER co-pay increases from $50 to $100; waived if admitted.

• Add Inpatient Hospital care co-pay of $100 per admission.
  – In addition to existing deductible and 20% coinsurance.
PEIA - What’s New for 2016

Prescription Plan Changes:

• Applies to all PPB Plans

• Generic Drug Co-pays:
  – 30-day supply will increase by $5
  – 90-day supply will increase by $10

• Preferred Brand Drug Co-pays:
  • 30-day supply will increase by $10
  • 90-day supply will increase by $20
  • Plan C co-pay applies only after deductible is met and for medications on the Preventive Drug List.
PEIA - Healthy Tomorrows

• 3 Year Initiative

• Applies to PEIA PPB Plan Policyholders

• Plan Year 2016 (Year 1):
  • Before May 15, 2015, all PEIA PPB Plan policyholders must name a Primary Care Physician (PCP).
  • Nurse Practitioners and Physician’s Assistants can be a PCP
PEIA - Healthy Tomorrows

• Plan Year 2017 (Year 2):
  • Between April 2015 and the end of open enrollment in 2016, policyholder must:
    • Continue to have a PCP named.
    • Have bloodwork done.
      – Test should include blood pressure, blood glucose, cholesterol and waist circumference
  • Report values to PEIA on form in the 2016 Shopper’s Guide.
PEIA - Healthy Tomorrows

• Plan Year 2018 (Year 3):
  • Between April 2017 and the end of open enrollment in 2018, policyholder must:
    - Continue to have a PCP named.
    - Have new bloodwork done (same tests as previously mentioned).
    - Report values to PEIA on form in Shopper’s Guide.
    - Have values in acceptable range or have a physician’s certification, if unable to obtain.

• Each year thereafter, will repeat requirement for Plan Year 2018.
PEIA - Healthy Tomorrows

- In any year the policyholder does not meet the goal, policyholder pays an additional $500 medical deductible.

- Only the policyholder needs to comply with Healthy Tomorrows requirements, not dependents.

- PEIA covers an annual physical for members at no cost. Bring the Adult Annual Physical form to your doctor.
PEIA – Retiree Benefit Changes

• The following changes affect Medicare retirees in the Humana Plan or Special Medicare Plan, beginning 1/1/16:

• Increase deductible by $75 per person

• Increase Outpatient surgery co-pay by $50

• Increase co-pay for office visits to PCPs and Specialists by $10 and $20 respectively
PEIA – Retiree Benefit Changes

• Medicare retirees in the PEIA Special Medicare Plan will also pay the increased prescription co-pays mentioned earlier.

• Humana members will see no change in prescription co-pays.
PEIA – Out of State Network

• Effective 3/1/15, PEIA’s out of state network changed back to Aetna Signature Administrators (ASA) from HealthSmart.

• You can locate network providers using ASA’s DocFind: [www.aetna.com/asa](http://www.aetna.com/asa) or by calling 888-440-7342.
Surviving Dependent Premium Determination Change

• Beginning 7/1/15, surviving dependents enrolling in the PEIA plan will pay premiums based on the years of service earned by the deceased policyholder.

• Current surviving dependents, and those who are enrolled before 7/1/15, will be grandfathered under the previous benefit and continue to pay premiums based on 25 or more years of service.
The Health Plan – What’s New for 2016

• New plan offered called The Health Plan PPO (replaces HMO Plan C).
• Primary care office visit co-pay is $5 per visit.
• Specialist office visit co-pay is $40 per visit.
• Other cost sharing has also changed, including out-of-pocket maximums.
FBMC - What’s New for 2016

• New Dental tier added called Routine Plan
  – Total of 4 options to choose from – Routine, Dental Assistance, Basic and Enhanced

• Medical Flexible Spending Account (FSA)
  – Maximum FSA contribution allowance has increased by $50 to $2,550
  – No minimum FSA contribution allowance
FBMC - What’s New for 2016

• No administrative fee for Health Savings Account (HSA) – applies to PPB Plan C participants only.

• Maximum HSA contribution for individuals increased by $50 to $3,350.

• Maximum HSA contribution for families increased by $100 to $6,650.
FBMC - What’s New for 2016

• No action required if not making changes to FBMC benefits.

• If making changes, enroll online via Premier Enroll at www.myfbmc.com or via FBMC paper enrollment form.

• Please remember to print the confirmation notice for your records.
MyFBMC.com Registration page

✓ Click link under New Users to set up an account for the first time.
✓ Create password

✓ Click “I accept. Complete my registration button
Once Registered

- Employee will receive email with hyperlink

- The employee clicks on the link to validate their email address

- Employee will login with their email and password to access the Premier Enroll application
Premier Enroll Benefit Election
Premier Enroll Benefit Election Review
Employees should print the confirmation notice for their records.
### Confirmation Notice

**Enrollment Details**
- **Confirmation Number:** 200037
- **Enrollment Date:** 3/8/2014 4:20:38 PM

**Employee Information**
- **Name:** JOE PUBLIC
- **Middle Initial:** F
- **Surname:** PUBLIC
- **Date of Birth:** 02/20/1960
- **Address:** 123 SOMEWHERE LANE
- **City:** ANYWHERE
- **State:** WV
- **Zip:** 20841
- **Email Address:** JANE@PUBLIC.COM
- **Phone:** 555-555-5555
- **Gender:** Male
- **Pay Frequency:** 24
- **Salary:** 40000.00

**Dependents**
- **Name:** JANE PUBLIC
  - **DOB:** 12/31/1955
  - **Relationship:** Spouse
- **Name:** JUDY PUBLIC
  - **DOB:** 01/01/2000
  - **Relationship:** Daughter

**Benefit Elections**

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<th>Benefit Type</th>
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**Total:** $28.36

*If this statement does not accurately reflect your 2013 enrollment elections please contact your benefits administrator. If you have questions about your benefits statement call FBMC Service Center at 1-855-FBMCSVC or (555-555-3235) 7:00 AM to 5:00 PM Monday through Friday.*
Long Term Disability – Things to Consider

• Premiums are based on age and salary of employee.
• Premiums increase as age and salary increases.
• LTD insurance is not a lifetime benefit. Benefits end as of age 70.
• Do you know how much you are paying each month?
TIAA – CREF - Things to Consider

• If you haven’t looked at your retirement investments in the last 5 -10 years, please take the time to do so!
• Life Cycle Funds became available approximately 5 years ago.
• This product uses targeted retirement dates to direct investments in a diversified portfolio.
• Changes can be completed online or by calling TIAA – CREF at 800-842-2273.
Reminder – Beneficiary Designations

• Please remember to keep your beneficiary designation(s) current!

• Life events may affect how you want your benefits paid.

• Two options for updating beneficiary information:
  – Online go to www.wvpeia.com and select “Manage My Benefits”
  – Completion of Basic and/or Optional Life Beneficiary Change paper form

• If you can’t remember, it is always best to complete a new form/go online, as information is likely outdated.
Reminder – Beneficiary Designations

• Designations should be made for Basic and Optional Life Insurance.

• **Primary Beneficiary(ies)** – The person or persons named will receive the proceeds.

• **Contingent (Secondary) Beneficiary(ies)** – At the time of your death, if the primary beneficiary(ies) is no longer living, the benefit is paid to this person or persons.
Reminder – Beneficiary Designations

• Default Beneficiary(ies) – If a beneficiary is not named, proceeds will be paid in the following order:
  – to a spouse, if living, if not;
  – to child(ren), if living, if not;
  – to parent(s), if living, if not;
  – to siblings, if living, if not;
  – to your estate