

State Health Benefit Plan

2019 Train-the-Trainer

Open Enrollment Presentation for Plan Year 2020



Presentation to: SHBP Employing Entities

Presented by: SHBP Eligibility & Benefits Administration Unit

Mission:

The mission of the Department of Community Health is to provide access to affordable, quality health care to Georgians through effective planning, purchasing, and oversight.

Purpose

This Presentation is a reference tool for Employers Only. The *Active Member Decision Guide* is the reference tool for Open Enrollment for Active Members and Eligible Employees and is available on the SHBP website at <https://shbp.georgia.gov/>.

- The purpose of this Train-the-Trainer Presentation is to assist Employing Entities with educating their employees eligible to enroll in SHBP coverage on the annual Open Enrollment period and benefits offered in Plan Year 2020.
- The information provided in this presentation is intended only as a snapshot. Please visit the SHBP website for more information: <https://shbp.georgia.gov/>.

Agenda

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 - Making a 2020 Benefit Election
 - Encourage Your Employees to Update Their Passwords Now!
- SHBP Member Services - 800.610.1863 Encourage Your Employees to Enroll at mySHBPga.adp.com!
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SHBP Enrollment Portal – mySHBPga.adp.com

Making a 2020 Benefit Election

- The 2020 Open Enrollment period begins *October 21, 2019* and ends *November 8, 2019*.

- Online Election via Enrollment Portal*/**

- Your employees may make their health election at www.mySHBPga.adp.com.
- Providing your employees' the correct website is critical. Employees who make their elections through a non-SHBP ADP website or other third party website will remain in the same elected Plan Options/Tiers in 2020 that they chose for Plan Year 2019. *Note this situation has previously occurred.*

*Please remind your Employees that they cannot elect coverage with their mobile devices (e.g., smartphones, iPads, etc.).

**The latest version of Adobe Flash must be on each user's computer.



- Your employees' may also visit the SHBP website and select the "Log in or Enroll" icon (or visit the Enrollment tab) that takes them directly to the SHBP Enrollment Portal: <https://shbp.georgia.gov/>.
- Please remind your Employees that they cannot elect coverage with their mobile devices (e.g., smartphones, iPads, etc.).

SHBP Enrollment Portal – mySHBPga.adp.com

Making a 2020 Benefit Election (continued)

- **Online Election via Enrollment Portal**
 - Enrollment Portal opens at 12:00 a.m. ET on October 21, 2019.
 - Enrollment Portal closes at 11:59 p.m. ET on November 8, 2019.
- **Last Confirmed Election is effective for 2020 Plan Year**
 - Your employees may make their election online as many times as they choose within the dates/time periods above. However, the employees' last confirmed election at the time the annual Open Enrollment period closes will be their election for the 2020 Plan Year.
- **Your employees should print and keep a copy of their confirmation page which will contain a confirmation number.**
 - If employees do not receive a confirmation number documenting the new election, for SHBP purposes no election change was made by the employee.

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SHBP Enrollment Portal – mySHBPga.adp.com

Encourage Your Employees to Update Their Passwords Now!

Passwords are Frustration #1 for members!

- My password doesn't work.
- It's the last day of Open Enrollment and I can't reach anyone at the call center to help me change my password.
- It's the last day of Open Enrollment and the call center is closed and I'm locked out of the Enrollment Portal.



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Encourage Your Employees to Update Their Passwords Now! (continued)

Reminder Messaging to Update Passwords went live in the SHBP Member Services IVR on September 20, 2019. Therefore, anyone who contacts SHBP Member Services prior to Open Enrollment will hear the below message.

Your 2020 Open Enrollment and Retiree Option Change Period is right around the corner. This year, the Open Enrollment and Retiree Option Change Period will be October 21st through November 8th. We strongly encourage you to visit the SHBP Enrollment Portal at www.MYSHBPGA.ADP.COM prior to October 21st to ensure your username and password allow you to access the Portal. If you have forgotten your username or password or if you have not logged into the Portal within the last 12 months, please select the Forgot User ID or Forgot Your Password link at www.MYSHBPGA.ADP.COM. Thank you.

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SHBP Enrollment Portal – mySHBPga.adp.com

Encourage Your Employees to Update Their Passwords Now! (continued)

- **Employees passwords expire after 45 days**
 - Therefore, if it has been over 45 days since an employee logged in, he/she will be prompted to create a New Password (which will also expire after 45 days).
- **What can Employers do to help?**
 - Encourage your employees to login now (or anytime before Open Enrollment) to ensure their password is active through the last day of Open Enrollment, i.e., November 8, 2019.



To use this application, your desktop OS must be Microsoft Edge 25/Windows 10; IE 11/Windows 7, Vista; FireFox 18.0/Windows 7; FireFox 17.0/Windows 7, XP SP3; Chrome 33/Windows 7; Safari 6/Mac OSX 10.5. Finally, you must have Adobe Flash Player 13, 14, or 15 installed.

Please visit this site to see instructions to enable Flash for your browser: <https://helpx.adobe.com/flash-player.html>

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SHBP Enrollment Portal – mySHBPga.adp.com

Encourage Your Employees to Update Their Passwords Now! (continued)

- **For Employees Who Have Not Recently Logged into the SHBP Enrollment Portal:**
 - Employees should log into the SHBP Enrollment Portal to set up their New Password at: www.mySHBPga.adp.com;
 - Once the employee logs in using their current Password, they should be able to access their current benefits;
 - However, if it has been over 45 days since the last time the employee logged in, he/she will be prompted to create a New Password (which will expire every 45 days).
- **For Employees Who Do Not Know Their User ID and/or Password to Log into the SHBP Enrollment Portal:**
 - Employees should visit the SHBP Enrollment Portal at: www.mySHBPga.adp.com;
 - Then employees should select the **Forgot User ID?** or **Forgot Your Password?** from the Login Page and follow the prompts.

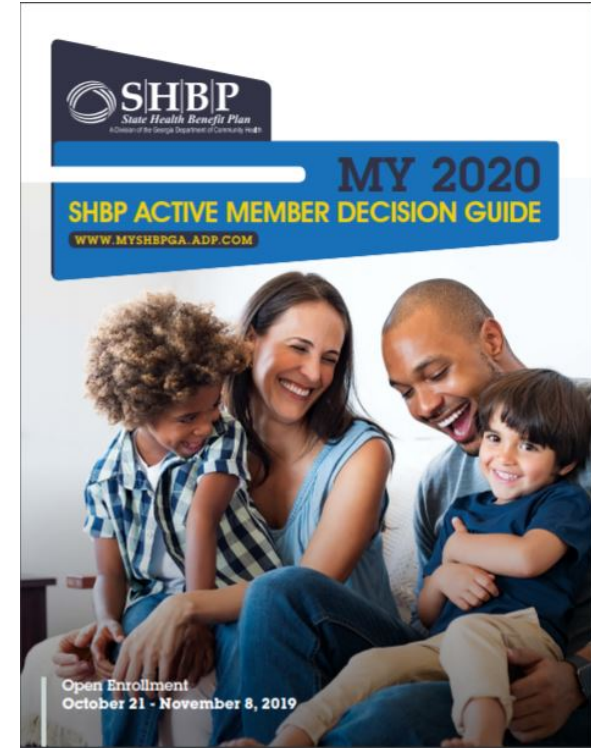
*Please remind your Employees that they cannot elect coverage with their mobile devices (e.g., smartphones, iPads, etc.).

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SHBP Enrollment Portal – mySHBPga.adp.com

Encourage Your Employees to Update Their Passwords Now! (continued)

- For Employees Who Have Never Used the SHBP Enrollment Portal (Registering for the First Time):
 - Employees should review the Active Member Decision Guide, “Making Your Health Benefit Election for 2020” section for detailed registration information at: <https://shbp.georgia.gov/>.
 - Employees may also view enrollment instructions on the SHBP website: <https://shbp.georgia.gov/enrollment-portal>.
 - SHBP’s registration code is: **SHBP-GA**



*Please remind your Employees that they cannot elect coverage with their mobile devices (e.g., smartphones, iPads, etc.).

**The latest version of Adobe Flash must be on each user's computer.

SHBP Member Services – 800.610.1863

Encourage Your Employees to Enroll at mySHBPga.adp.com!

SHBP Member Services has New Extended Hours for Open Enrollment and Saturday Hours*

- Monday thru Friday, 8:30 a.m. to 7:30 p.m. ET during Open Enrollment (normally 8:30 a.m. to 5:00 p.m. ET).
- Saturday hours, 8:00 a.m. to 5:00 p.m. ET (same hours throughout the year).

Why Employees should skip Member Services

- mySHBPga.adp.com is available 24 hours a day, seven days a week.
- Employees can elect coverage at work, home, and anywhere convenient with a computer**.
- Avoid potential wait times.

*Please remind your Employees that they cannot elect coverage with their mobile devices (e.g., smartphones, iPads, etc.).

**The latest version of Adobe Flash must be on each user's computer.

New Service Option for Members Beginning Open Enrollment!

SHBP Member Services Email – SHBPservicecenter@adp.com

Beginning the first day of Open Enrollment (i.e., October 21, 2019), the New SHBP Member Services Email System will be available to members (and eligible employees) who have registered in the SHBP Enrollment Portal.

The Email Service will continue to be available throughout the year.

Hours of Operation

- Monday thru Friday, 8:00 a.m. to 8:00 p.m. ET
- Saturday hours, 8:00 a.m. to 5:00 p.m. ET

New Service Option for Members Beginning Open Enrollment! SHBP Member Services Email – SHBPservicecenter@adp.com (continued)

Things Your Employees Need to Know about SHBP Member Services Email Security Protocol

- All emails sent from SHBP Member Services are sent via secure mail (emails are encrypted). Participants will have to follow instructions to open the email.
- Response emails will only be provided to the email address on file for the member.
- Government identifying information may not be included in emails – this includes social security numbers, drivers license numbers, and Medicare/Plan ID numbers.
- Benefit elections, life events, demographic updates (e.g., name, address, SSN) may not be requested via email as they will not be processed.

New Service Option for Members Beginning Open Enrollment! SHBP Member Services Email – SHBPservicecenter@adp.com (continued)

A Few Common Inquiries that can be Handled via SHBP Member Services Email:

- When is Open Enrollment?
- Why don't I have a New Hire/Newly Eligible Employee window in SHBP Enrollment Portal?
- How can I change my benefit elections?
- How do I order new ID cards?
- Have you received the dependent verification documentation I submitted?
- When will I receive COBRA information?
- How can I provide my dependent's SSN or other Tax Identification Number?

More common inquiries can be found in the Appendix of this Presentation.

Your Employees' Responsibilities

- **Employees should read and make sure they understand the information in the Active Employee Decision Guide and Plan Documents posted on the SHBP website**
<https://shbp.georgia.gov/>.
- **Employees should review the 2020 Rates and Plan Options posted on the SHBP website**
<https://shbp.georgia.gov/>.
- **Employees should confirm that they answered the Tobacco Surcharge question appropriately.** If no election changes are made and the Employee previously answered yes, the Tobacco Surcharge will carry over to the 2020 Plan Year.
- **Employees should check their payroll deduction** to verify that the correct deduction amount has been made. If an employee is not being charged for their health deductions or are being charged the incorrect amount for their health deductions, please advise them to contact the appropriate person in your HR Department.
- **Employees should update any changes in their contact information** by notifying their HR Department.

Your Employees' Responsibilities (continued)

- **Employees should know if they: 1) make an election effective in Plan Year 2019 as a New Hire (New Hire event) or 2) declare a Qualifying Event resulting in a new election effective in Plan Year 2019 during the Open Enrollment window, the New Hire or Qualifying Event election will override the Open Enrollment election for Plan Year 2020, unless:**
 - On the confirmation page after making the New Hire or Qualifying Event election, the employee follows the automated prompt in the SHBP Enrollment Portal and makes a subsequent change to their Open Enrollment election for Plan Year 2020 (even if they previously made their Open Enrollment election prior to the New Hire or Qualifying event).

Note: if an employee's hire date occurs after November 1, 2019, they will only receive an Open Enrollment Window. A New Hire Window will not appear.
- **Employees should submit their Dependent Verification documentation for newly added Dependents** upon receipt of their Dependent Verification notification letter and no later than 45 days after enrolling their Dependent in SHBP coverage. If an employee does not receive a letter, he/she should contact their HR Department to ensure SHBP has the correct address on file.

Your Retiring Employees' Responsibilities

- **Employees retiring on January 1, 2020 who are not currently enrolled in the SHBP cannot carry coverage as a SHBP retiree (i.e., Employees must enroll during Open Enrollment the year prior to their retirement).**
- **Employees who make a change during Open Enrollment but retire before the change can become effective on January 1, will remain in their current elections/tier prior to Open Enrollment, including Plan Option/Tier and covered dependents or waiver of coverage status, as applicable.**
- **Employees planning to retire must update their email address in the SHBP Enrollment Portal from their work email address to a personal or other email address so they can receive SHBP email notifications.**
- **Employees planning to retire must update their physical address and phone number so they can receive SHBP notifications.**
- **Employees planning to retire should review the SHBP Retirement Presentation on our website at <https://shbp.georgia.gov/>.**

Your Retiring Employees' Responsibilities (continued)

- Employees planning to retire should review the SHBP Retiree Decision Guide on our website at <https://shbp.georgia.gov/>.
- Employees planning to retire should attend a Pre-Retirement Meeting at the Employees' Retirement System of Georgia (ERS) or Teachers Retirement System of Georgia (TRS).
- Employees planning to retire should visit the SHBP website prior to Retirement to determine which subsidy policy they are subject to, i.e., the Annuitant Basic Subsidy Policy or Annuitant Years of Service Subsidy Policy. The subsidy policy determines the costs of their Retiree premiums.
- Resources for Retiring Employees:
 - Retiree Option Change Period: <https://shbp.georgia.gov/retiree-option-change-period>.
 - Retiree Rates (including Subsidy information): <https://shbp.georgia.gov/retiree-rates>.
 - Medicare Advantage: <https://shbp.georgia.gov/medicare-advantage>.

What Happens If Your Employees' Do Nothing?

- **Employees Currently Enrolled in SHBP**
 - Employees who do not make an election, either through the web portal or by calling the SHBP Member Services Center, will be defaulted to the same plan option previously selected for 2019. If an employee covered by the Kaiser Regional HMO Plan Option either no longer lives or works in the 27-county Metro Service Area on or after January 1, 2020, that employee's coverage will default to the Anthem HRA Bronze Plan Option.
 - Employees who do not make an election and are currently paying the Tobacco Surcharge will be defaulted to the same plan option previously selected for 2019 and the Tobacco Surcharge they are paying in 2019 will continue to apply in 2020.
 - Employees who do not make an election and are currently enrolled in the TRICARE Supplement in 2019, will be enrolled in the TRICARE Supplement in 2020.
- **Employees Not Currently Enrolled in SHBP**
 - Employees not currently enrolled in SHBP in 2019 will be defaulted to no coverage in 2020.

Dependent Verification Process Overview

In the Fall of 2018, SHBP took steps to change the Dependent Verification Process to be inline with the State Rules and Regulations governing the SHBP and to provide more accurate billing to our Employers.

Prior Process for Active Members and New Hires/Newly Eligible Employees who declared a Qualifying Event:

- Dependents were initially added to coverage as of the applicable effective date without any verification of their eligibility.
- Employers were billed based on that effective date, even though SHBP had not verified eligibility.
- If Dependent later failed the Dependent Verification Process, Employers' bills were credited on the next Premium Billing Report (BRP) after the Dependent was dropped from coverage, making reconciliation harder.

Dependent Verification Process Overview (continued)

New Process for Active Members and New Hires/Newly Eligible Employees:

- Dependents are Not Added to coverage until the Member provides verification of their Dependent's eligibility.
- Dependents awaiting approval are placed in a PENDING status.
- SHBP Does Not bill Employers for Dependents until the verification documentation has been received and approved. Therefore, Employers should not bill Active Members for a Plan Option and/or Tier change until it is adjusted on their Premium Billing Report (BRP). Dependents will appear on the next Premium Billing Report (BRP) after their effective date.
- If Dependent's verification documentation is approved, they will be added to Member's coverage in the SHBP Enrollment Portal and Third-Party Administrators* system as of the effective date, in accordance with SHBP Rules and Regulations.
- If Dependent fails the verification process, the Employer's bill is not impacted.

*Note: Files are transmitted to TPAs twice a week.

Dependent Verification Process Overview (continued)

Pended Events

Below is a list of all Events that Pend in the SHBP Enrollment Portal until documentation is provided by the Active Member or eligible employee that meets SHBP's list of approved verification documents. This means the Plan Option and/or Tier will not change in the SHBP Enrollment Portal and the change will not be transmitted via file to SHBP TPAs.

1. Marriage
2. Divorce
3. Gain Guardianship
4. Lose Guardianship
5. Gain Coverage Elsewhere Due to Dependent's Employment or Employer's Open Enrollment
6. Lose Group Coverage Elsewhere
7. Dependent(s) Gain Medicaid
8. Dependent(s) Loses PeachCare or Medicaid
9. Change My Tobacco User Status
10. Open Enrollment / Retiree Option Change Period

Dependent Verification Process Overview (continued)

Non-Pended Events

Below is a list of all Events that Do Not Pend in the SHBP Enrollment Portal, meaning coverage is added immediately prior to the Active Member or eligible employee providing verification documentation. This means the Plan Option and/or Tier will change in the SHBP Enrollment Portal and the change will be transmitted via file to SHBP TPAs.

- Birth
- Adoption
- Death of Dependent

If the Member fails to subsequently provide the required verification documentation, a retroactive change to the Plan Option and/or Tier, if applicable, will appear on the:

- Employer's Proof Bill next business day, and
- Employer's Premium Billing Report (BRP) in 1 to 2 billing cycles.

Pending Dependent Report

The Pending Dependent Report's name is a *misnomer* but is very helpful in determining the status of your Employees' recently declared Qualifying Events.

- **Report Includes:** 1) SHBP Members and eligible employees requesting to enroll or disenroll from Coverage, and 2) SHBP Members with pending dependent(s) to be added or removed from Coverage due to a Qualifying Event.
- **Naming Convention:** Reports will be named SHBP_(Payroll Location Number)_(YYYY)_Pending_Dependents_(MMDDYYYY)_(Seq#).csv
- **Data Cutoff:** This report is produced weekly and posted to Employers' Payroll Location(s) in the State Health Repository Tool (SHRT) each Monday. The report contains data up to the end of the day on Sunday.

Pending Dependent Report (continued)

- **Employee Data will fall off of the report when one of the following occurs prior to the cutoff:**
 - The employee has successfully provided the correct verification documentation for their dependent(s); has been approved by the DVS unit; **and** coverage has been updated in the SHBP Enrollment Portal.
 - The employee has failed to provide the correct verification documentation for their dependent(s) within the time period allowed.
 - The employee's dependent(s) failed the audit.
- **Employee Data will remain on subsequent reports if one of the following is applicable prior to the cutoff:**
 - The employee has successfully provided the correct verification documentation for their dependent(s); has been approved by the DVS unit, **but** their coverage has not yet been updated in the SHBP Enrollment Portal. This can take 2-3 business days after an Audit is complete.
 - The employee has taken no action on the DVS Audit and it is still open.

Pending Dependent Report (continued)

- **Reconciliation:** Employers should review the report each week and reach out to their affected employees to encourage them to take action on the open DVS Audit.
 - *Employers should especially monitor the Pending Dependent Report during Open Enrollment through mid December to ensure pending Dependents receive ID cards by January 1. After this time, Dependents will not receive ID cards until after January 1.*
 - If you do not have a report in your SHRT folder it means that you do not have any employees with outstanding pending dependents.
 - SHBP will not bill Employers for Pending Dependents until they are added to coverage.
 - Pending Dependents are not discrepancies so please do not submit them on your Discrepancy Report as no action will be taken.

Pending Dependent Report (continued)

Pending Dependent Report Sample

	A	B	C	D	E	F	G	H	I	J	K	L	M
1	employee_id	employee	employee	email	pargroup	payroll_lo	event	pend_dep	pend_dep	pend_dep	relation		
2	B000W1234	Smith	Jane	Jane@gm	Active	12345	New Enrollment	Smith	Jason	1	Spouse		
3	B000W1234	Smith	Jane	Jane@gm	Active	12345	New Enrollment	Smith	Mason	2	Child		
4	B000W1234	Smith	Jane	Jane@gm	Active	12345	New Enrollment	Smith	Jordan	3	Child		
5	B000W1234	Smith	Jane	Jane@gm	Active	12345	New Enrollment	Smith	Jennifer	4	Step Child		
6	B039W1111	Craft	Donna	Donna@y	Active	12345	New Enrollment	Craft	Don	1	Spouse		
7	A222W3333	Howard	Melanie	Melanie@	Active	12345	Loses Group Cove	Howard	Marvin	1	Spouse		
8	A888W8080	Doe	Judy	Judy@yah	Active	12345	Gains Coverage El	Doe	Ethan	2	Child		
9	A888W8080	Doe	Judy	Judy@yah	Active	12345	Gains Coverage El	Doe	Elliot	3	Child		
10													
11													
12													
13													
14													

Open Enrollment File Process

- **October 22, 2019:** ADP will produce a report each day beginning October 22, 2019 titled 'OE NO ACTION'. This report will identify your location's employees who have not made an open enrollment election. Please use this report to follow-up with your employees to remind them to make their election by the last day of Open Enrollment, November 8, 2019.
- **Through November 14, 2019:** ADP will produce Daily Proof Bills (if applicable) & Deduction files that will reflect 2019 new hire and benefit status changes
 - No 2019 Proof Bills produced after 11/14
 - No 2019 Deduction Files produced after 11/14
- **November 15, 2019:** Employers will receive a FULL 2020 Deduction file that will reflect all deductions for your Employees for 2020 (even when \$0)
 - Boards of Education and Non-SAO Employers: Full Deduction file(s) will be posted to SHRT.
 - State Agencies and Other Employing Entities Participating in SAO: Full Deduction file will be transmitted to SAO for processing.

Open Enrollment File Process (continued)

- **December 1, 2019 - February 28, 2020:** Employers will receive
 - CUMULATIVE Proof Bill Report: ALL 2019 Plan Year transactions processed after November 14, 2019. Since this is a cumulative report a new report will be posted each day - even if there weren't any additional 2019 Plan Year transactions processed the prior day. In addition, once a 2019 Plan Year transaction appears on the report, it will continue to appear daily until February 28, 2020.
 - DAILY Proof Bill Report: ALL 2020 Plan Year transactions processed after November 14, 2019. This will only contain daily transactions and will be posted each day, unless no transaction processed the prior day. Therefore, the Daily Report is not cumulative.
 - Deduction Files: includes 2020 Plan Year Deduction File updates.
- **No Later than January 9, 2020:** the January Premium Billing Reports and Vouchers will be posted to SHRT. Note this is later than the typical posting date that occurs on the 28th of the prior month. **Please do not transfer funds or pay via check until the January 2020 Premium Billing Reports and Vouchers have been posted.**

Open Enrollment File Process (continued)

Boards of Education and Non-SAO Employers Full Deduction File Sample

Deduction files have 655 characters on each Employee Data Line. The employee deduction amount can be found in Positions 412 - 417 of the file.

If you are unable to locate the deduction amount, please contact your IT department or IT vendor for assistance.

Y00000000000002019081520190901	B694025090	000000	000000	0000000000
Y0000000000002019081520190901	B696046389	000000	000000	0000000000
Y0000000000002019081520190901	B210011089	000000	000000	0000000000
Y0000000000002019081520190901	B690034863	000000	000000	0000000000
Y0000000000002019081520190901	B140024873	000000	000000	0000000000
Y0000000000002019081520190901	B694025090	000000	000000	0000000000
Y0000000000002019081520190901	B310007245	000000	000000	0000000000
Y0000000000002019081520190901	K194026259	000000	000000	0000000000
Y0000000000002019081520190901	H197064722	000000	000000	0000000000
Y0000000000002019081520190901	B640021565	000000	000000	0000000000
Y0000000000002019081520190901	B310007245	000000	000000	0000000000
Y0000000000002019081520190901	B696046389	000000	000000	0000000000
Y0000000000002019081520190901	B310007245	000000	000000	0000000000
Y0000000000002019081520190901	B696046389	000000	000000	0000000000
Y0000000000002019081520190901	K194026259	000000	000000	0000000000
Y0000000000002019081520190901	B210011089	000000	000000	0000000000
Y0000000000002019081520190901	K194026259	000000	000000	0000000000
Y0000000000002019081520190901	B396028692	000000	000000	0000000000
Y0000000000002019081520190901	B640021565	000000	000000	0000000000
Y0000000000002019081520190901	B210011089	000000	000000	0000000000
Y0000000000002019081520190901	K190036249	000000	000000	0000000000
Y0000000000002019081520190901	B310007245	000000	000000	0000000000
Y0000000000002019081520190901	B196055650	000000	000000	0000000000
Y0000000000002019081520190901	B690034863	000000	000000	0000000000
Y0000000000002019081520190901	B396028692	000000	000000	0000000000
Y0000000000002019081520190901	B110016873	000000	000000	0000000000
Y0000000000002019081520190901	B696046389	000000	000000	0000000000
Y0000000000002019081520190901	B610013565	000000	000000	0000000000
Y0000000000002019081520190901	B696046389	000000	000000	0000000000

Member Identification (ID) Cards

Anthem and UnitedHealthcare

- All SHBP Members enrolled in Anthem and UnitedHealthcare plan options will receive new Member ID cards before January 1st.
- Newly added Dependents pending Dependent Verification review and approval after December 15, 2019 will not receive new Member ID cards until after January 1, 2020.

Kaiser Permanente (KP)

- *New* Kaiser Permanente Members will receive new Member ID cards before January 1st.
- Newly added Dependents pending Dependent Verification review and approval after December 15, 2019 will not receive new Member ID cards until after January 1, 2020.

Due to mailing restrictions, Members may receive cards at different times.

2020 SHBP Plan Designs and Options

Vendors and Plan Options will remain the same:

- Anthem: HMO, HRA, MA
- Kaiser Permanente: Regional HMO
- United HealthCare: HMO, HDHP, MA

Plan designs will remain the same:

- No changes to copays, co-insurance, deductibles

For more information, refer your employees to the Active Member Decision Guide:

- Includes complete details on Plan Designs and Options
- Available on the SHBP website: <https://shbp.georgia.gov/>

2020 SHBP Plan Designs and Options: HRA Overview

How the Health Reimbursement Arrangement (HRA) Works

The HRA provides dollars toward coverage for eligible medical and pharmacy expenses first (i.e., prior to employees paying out-of-pocket costs) and is funded by SHBP. When going to the doctor, employees will not pay a co-pay. Instead, employees pay the applicable deductible and co-insurance. If employees have remaining credits in their current HRA account, those credits will roll over to the Plan Option and/or vendor the employees select during Open Enrollment.

Plan Features

- Plan pays 100% of covered services provided by in-network providers that are properly coded as “preventive care.”
- You must meet separate in-network and out-of-network deductibles and out-of-pocket maximums.
- You are not required to select a Primary Care Physician (PCP) or obtain referrals to a Specialist (SPC).
- The credits in your HRA account are used to help meet your deductibles and out-of-pocket maximums.
- The medical and pharmacy out-of-pocket maximums are combined.
- Certain drug costs are waived if SHBP is primary and you actively participate in one of the Disease Management Programs for diabetes, asthma and/or coronary artery disease.

2020 SHBP Plan Designs and Options: HDHP Overview

How the High Deductible Health Plan (HDHP) Works

- The HDHP offers in-network and out-of-network benefits and has a low monthly premium. However, employees must satisfy a high deductible that applies to all covered medical and pharmacy expenses (except preventive care).
- If the employee has dependents, the entire family deductible **does not** have to be met before benefits are payable for any family member. The “You” coverage tier (single) deductible and out-of-pocket maximum will apply to each individual family member regardless of whether you cover more than one dependent or have family coverage. Additionally, once the out-of-pocket maximum has been satisfied for *that individual family member*, all covered medical and pharmacy expenses will be paid at 100% for *that family member*.
- Employees may qualify for a Health Savings Account (HSA) to set aside tax-free dollars to pay for eligible health care expenses and should contact UnitedHealthcare directly for information, as the HSA is not administered by SHBP. If employees have remaining well-being incentive credits in their current Health Incentive Account (HIA), those credits will roll over to the Plan Option and/or vendor the employees select during Open Enrollment.

Plan Features

- Plan pays 100% of covered services provided by in-network providers that are properly coded as “preventive care”
- Before employees can use well-being incentive credits, members must meet a threshold (\$1,400 individual; \$2,800 other tiers)
- Employees must meet separate in-network and out-of-network deductibles and out-of-pocket maximums
- Employees pay co-insurance after meeting the entire deductible for covered medical and pharmacy expenses
- Select generics, listed on the Federal Preventative Drug List, can be obtained for a co-insurance without having to meet the deductible first.
- The medical and pharmacy out-of-pocket maximums are combined
- There are no co-pays
- The HSA cannot be combined with a Flexible Spending Account (FSA)

2020 SHBP Plan Designs and Options

HMO Overview

How the Statewide Health Maintenance Organization (HMO) Works

The HMO allows your employees to receive covered medical services from in-network providers only (except for emergency care). It is important for employees to verify their current provider is in-network when selecting an HMO Plan Option. Both the Anthem and UnitedHealthcare HMO Plan Options are the same plan design. If employees have remaining well-being incentive credits in their current Anthem MyIncentive Account (MIA) or UnitedHealthcare Health Incentive Account (HIA), those credits will roll over to the Plan Option and/or vendor the employees select during Open Enrollment.

Plan Features

- Plan pays 100% of covered services provided by in-network providers that are properly coded as “preventive care.”
- Certain services are subject to a deductible and co-insurance.
- Employees are not required to obtain referrals to see a Specialist (SPC), but are encouraged to select a Primary Care Physician (PCP) to help coordinate their care.
- The medical and pharmacy out-of-pocket maximums are combined.
- Co-pays count toward employee’s out-of-pocket maximum.
- Certain drug costs are waived if SHBP is primary and employees actively participate in one of the Disease Management Programs for diabetes, asthma and/or coronary artery disease.

2020 SHBP Plan Designs and Options

Regional HMO Overview

How the Regional Health Maintenance Organization (HMO) by Kaiser Permanente (KP) Works

The KP Regional HMO in-network only Plan Option is available to employees who **live or work** in one of the 27 counties within the defined Metro Atlanta Service Area.* If employees have remaining credits in their current Kaiser Permanente Rollover Account (KPRA), those credits will roll over to the Plan Option and/or vendor employees select during Open Enrollment.

Plan Features

- KP administers the benefits for medical, pharmacy and wellness.
- Plan pays 100% of covered services provided by in-network providers that are properly coded as “preventive care.”
- Co-pay only option.
- No deductibles.
- The medical and pharmacy out-of-pocket maximums are combined.

*Barrow, Bartow, Butts, Carroll, Cherokee, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Haralson, Heard, Henry, Lamar, Meriwether, Newton, Paulding, Pickens, Pike, Rockdale, Spalding, Walton

2020 Pharmacy Benefits: Anthem and UnitedHealthcare

Anthem and UnitedHealthcare

- CVS Caremark administers the pharmacy benefit management services for SHBP Members and their Covered Dependent(s) enrolled in Anthem and UnitedHealthcare Non-Medicare Advantage Plan Options for 2020.
- CVS Caremark administers benefits for retail prescription drug products, mail order, home delivery and specialty pharmacy services.
- Get up to a 90-day supply of your maintenance medication either through CVS Caremark home delivery pharmacy services or at a participating 90-day retail pharmacy.
- SHBP Members **do not** have to go to a CVS pharmacy location for their prescriptions. Members and their covered dependent(s) can continue to use local retail and/or chain pharmacies to obtain their prescription medications.

2020 Pharmacy Benefits: Kaiser Permanente

Kaiser Permanente

- Kaiser Permanente administers the pharmacy benefits for SHBP Members and their Covered Dependent(s) enrolled in the Kaiser Regional HMO Plan Option.
- SHBP Members **do not** have to go to a Kaiser Permanente pharmacy location for their prescriptions, however, they will pay the full costs for the prescriptions when using a non-Kaiser Permanente pharmacy location.

2020 Wellness Incentives: Anthem and UnitedHealthcare

Anthem and UnitedHealthcare

Sharecare provides members who elect Anthem and UnitedHealthcare (non-MA) with well-being resources and incentive programs.

- Health actions must be completed, and all documentation received by Sharecare between January 1, 2020 and November 30, 2020 in order to earn the well-being incentive points.
- Employees who elect Anthem and UnitedHealthcare will have access to a variety of Sharecare tools, activities and services such as the RealAge Test, Wellness Incentives, Well-Being Coaching, Biometric Screenings, and Onsite Activities.
- Members and their Covered Spouse can each earn 480 well-being Incentive Points and choose to redeem in the Sharecare Redemption Center for either: 1) a \$150 Visa Reward Card (when redeeming all 480 well-being incentive points earned in 2020) **OR** 2) 480 well-being incentive credits (to apply toward eligible medical or pharmacy expenses) **OR** 3) a \$225 Walmart Gift Card (when redeeming all 480 well-being incentive points earned in 2020) to be used in Walmart stores for pharmacy prescriptions and vision items (restrictions apply).

2020 Well-Being Incentives for Anthem and UnitedHealthcare Commercial Plan Options*

Members and their Covered Spouses can each earn 480 well-being Incentive Points and choose to redeem them in the Sharecare Redemption Center** for either: 1) a \$150 Visa Reward Card (when redeeming all 480 well-being incentive points earned in 2020) OR 2) 480 well-being incentive credits (to apply toward eligible medical or pharmacy expenses)***OR 3) A \$225 Walmart Gift Card (when redeeming all 480 well-being incentive points earned in 2020) to be used in Walmart stores for pharmacy prescriptions and vision items (restrictions apply).

For details or questions, go to www.BeWellSHBP.com or call 888-616-6411

If You Complete...	You Will Earn...
<p>The RealAge Test Take a confidential, online questionnaire that will take about 10-15 minutes to complete. It is recommended that you complete the RealAge test early in 2020 to allow for completion of action items below.</p>	<p>120 Well-Being Incentive points****</p>
<p>A Biometric Screening You have three options to complete your Biometric Screening: through your physician or at an SHBP-sponsored screening event or at a Quest Diagnostic Patient Service Center (PSC).</p>	<p>120 Well-Being Incentive points****</p>
<p>The Coaching Pathway, Online pathway, or a Combination of Both</p>	<p>Up to 240 well-being incentive points in the following increments****:</p>
<p>Telephonic Coaching Pathway Actively engage in telephonic coaching with a Sharecare wellness coach.</p>	<p>Telephonic Coaching Pathway</p> <ul style="list-style-type: none"> • Earn 60 well-being incentive points for each completed coaching call per calendar month, up to 4 times. • Maximum of one call in a calendar month qualifies you for the 60 well-being incentive points. • Maximum of 240 well-being incentive points
<p>Online Pathway or Challenges Within the Sharecare app or on the online platform join and complete either challenge:</p> <ul style="list-style-type: none"> • Complete 5,000 Steps per day within the challenge period; or • Update your Stress per day within the challenge period; or • Log your 8 Green Day trackers per day within the challenge period, which include daily trackers such as steps, sleep, stress, blood pressure, weight, and smoking. 	<p>Online Pathway or Challenges Earn 120 well-being incentive points up to 2 times, for a maximum of 240 well-being incentive points by completing two of the following challenges within the challenge period, as listed below:</p> <ul style="list-style-type: none"> • 5,000 Steps Challenge (Complete and track 21 of 30 days in January, April, July or October). • Stress Challenge (Complete and track 21 of 30 days in February, May, August or November). • Green Day Challenge (Complete and track 21 of 30 days in March, June or September).

2020 Well-Being Incentives for Kaiser Permanente

Earn up to \$1,000 and feel the benefits of taking care of your health!

Simply sign-up for the KP Wellness Program at my.kp.org/shbp and make sure you are up-to-date on all five of the activities listed below. Each member and their covered spouse who satisfies the KP Wellness Program requirements will receive a \$500 reward card (\$1,000 per household)! Use your wellness incentive to further embrace your Total Health.

Getting your reward is easy. Just sign on to my.kp.org/shbp to accept your Wellness Program agreement (required for reward eligibility) then complete the four additional wellness activities which do not have to be completed in any specific order. For details or questions go to my.kp.org/shbp or call 866-300-9867.

NOTE: All actions must be completed between January 1, 2020 and November 30, 2020.

	What to Do	What You will Earn
1.	Accept your Wellness Program Agreement: Sign on to kp.org/engage to accept your Wellness Program Agreement - check “yes,” then click submit. If you check “no” or if you don’t complete this step, you will not earn credit for your Kaiser Permanente Wellness Program activities.	<i>How will YOU use your \$500 Wellness Incentive reward? Complete all five activities and earn a reward card worth \$500.</i> <ul style="list-style-type: none">• Pay for co-pays and prescription medications for the entire year• Relieve stress with quarterly massages• Take a nice weekend hiking trip in the mountains• Splurge on new work-out clothes or walking shoes• Stock up on healthy foods at the grocery store <i>Both members and their covered spouses are eligible to earn the incentive for a total of \$1000 per household.</i>
2.	Take Your Total Health Assessment: Complete your KP on-line Total Health Assessment (THA). The questionnaire is confidential and only takes about 20 minutes.	
3.	Know Your Numbers: Complete a Biometric Screening at a Kaiser Permanente Medical Office, or by a KP clinician at an SHBP-sponsored biometric screening event. NOTE: ONLY those screenings performed by KP are eligible for the reward.	
4.	Get Yourself Screened: Complete all age and gender appropriate preventive screenings for breast, cervical or colorectal cancer.	
5.	Take an Online Course: Complete one online Healthy Lifestyle Program (HLP)	

Employer Questions

- For immediate assistance, please contact your dedicated Employer Services Specialists at 800.610.1863 and when prompted, select Option 1, Monday through Friday, 8:30 am to 5:00 pm ET.
- For escalated matters, please reference the SHBP Employer (X)change Escalation Process posted on the Employer Services section of the SHBP website:

<https://shbp.georgia.gov/xchange-escalation-process>

Q&A

Appendix: SHBP Member Services Email Common Inquiries

- The New SHBP Member Services Email System SHBPservicecenter@adp.com will be available to Members beginning the first day of Open Enrollment (i.e., October 21, 2019) and continue throughout the year.
- Hours of Operation
 - Monday thru Friday, 8:00 a.m. to 8:00 p.m. ET
 - Saturday hours, 8:00 a.m. to 5:00 p.m. ET.

A Few Common Inquiries that can be Handled via SHBP Member Services Email:

- I received a letter asking for my Medicare Information, but I am still actively employed. What do I need to do?
- When can I expect my Medicare Advantage Plan ID Cards once I enroll in a Medicare Advantage Plan Option?

Appendix: SHBP Member Services Email Common Inquiries (continued)

A Few Common Inquiries that can be Handled via SHBP Member Services Email (continued):

- What happens if I decide to discontinue my coverage as a Retiree?
- What are the requirements to enroll in a Medicare Advantage Plan?
- I have retired due to Disability, I have Medicare Part B. Can I enroll in the Medicare Advantage Plan?
- How do I have the Tobacco Surcharge removed?
- What is State Extended Coverage and how does it work?
- Which dependents are eligible?
- How can I have my Disabled Dependent covered under my plan after they turn 26 years old?
- How do I file an Appeal or check Appeal Status ?
- I am an Active Member. How do I update my address?

Appendix: SHBP Member Services Email Common Inquiries (continued)

A Few Common Inquiries that can be Handled via SHBP Member Services Email (continued):

- How do I submit Dependent Verification documentation?
- How do I declare a Qualifying Event?
- I am a New Hire. How long do I have to enroll in coverage?
- What is the Retirement Process?
- What is my monthly premium?
- How does the Wellness Program work?

Purpose:

Shaping the future of A Healthy Georgia by improving access and ensuring quality to strengthen the communities we serve.