



The Buzz

Spring Edition 2015

Employee Benefits Division

Wellness Discount for 2016

EBD announces the return of the ARBenefitsWell wellness program discount for active employees for the 2016 plan year. The discount is applied to your premium each month, and guidelines have been established that members will have to meet in order to qualify for the discount.

First, employees will have to go online and take the Health Assessment (HA) provided by GuidanceResources®. If there is a spouse on the policy, the spouse will also have to take the Health Assessment. If you do not have access to a computer, you may request a paper HA by calling GuidanceResources. Please keep in mind that employees and spouses will need to use separate e-mail addresses and separate profiles with Guidance Resources® to take the HA.

Employees and spouses who take the Health Assessment will receive an e-mail from GuidanceResources® if they fall into the moderate and high risk category. The e-mail will also contain an "opt-

out" option for members who do not want to receive any contact about their results.

To take the HA, go to www.guidanceresources.com, and enter your login information, or click on the link that states "I am a first time user." Please use the web/organization ID "ARBEN", and match your name with what is on your ARBenefits ID card when registering. After you log in, click Health Assessment on the left side of your screen and take the HA.

Employees will again have to complete a wellness exam conducted by a physician. Since the plan covers one wellness visit per plan year, employees do not need to wait a full year between visits.

Spouses and dependents are not required to complete a wellness visit for the discount, but are strongly encouraged to take advantage of the wellness visit benefit.

Wellness visits must be completed by **October 31, 2015** in order to qualify for the discount.

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New EBD Call Center Hours

The new hours of operation for the EBD Call Center are:

8 a.m. - 4:30 p.m.

You can reach the call center at 877-815-1017x1 or 501-682-9656

Three Steps to A Wellness Discount

1

Employee and spouse on a policy must complete an online Health Assessment (HA) provided by Guidance Resources®.

2

Employee must complete a wellness exam performed by a physician.

3

The deadline to complete both steps and qualify for the discount is:
October 31, 2015

Wellness Discount

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To avoid paying a higher premium at the beginning of the 2016 plan year, members may want to complete their wellness visit prior to **June 30, 2015**.

While employees who complete a wellness visit after June 30, 2015, but before October 31 will receive the discount, they run the risk of paying a higher premium until the claim is processed.

Physicians have up to six (6) months to file a claim. Once the claim processes, the wellness discount will be applied retroactively and the employee will be refunded any monies owed.

EBD will have a look back period for members that runs from November 1, 2014 through October 31, 2015. Visits completed in that time frame will

count towards the 2016 discount.

The discount amount will be decided later this year when rates for the 2016 plan year are finalized.

Appeals regarding the ARBenefitsWell program discount will only be accepted if an adverse benefit determination has occurred.

For example, an employee should not submit an appeal unless they have received an Explanation of Benefits (EOB) for the date of service of the wellness visit. If the employee has not received an EOB then the claim has not been processed and EBD is unable to verify that the member has met the requirement.

The procedure for filing an appeal can be found in the Summary Plan Description at www.ARBenefits.org.

For any questions or concerns, employees can contact EBD Member Services at 501-682-9656 or toll-free at 1-877-815-1017. You can also send an e-mail to Ask EBD at AskEBD@dfa.arkansas.gov.

A full list of guidelines and information about the ARBenefitsWell program can be found at www.ARBenefits.org in the Health Enhancement section.

Prize Drawing

Employees who complete the Health Assessment by:

June 30, 2015

Will be entered into a raffle for a Fit Kit provided by GuidanceResources®

**10 weeks of drawings starting in April*

Keeping Your Information Current

It is important to keep your contact information current with EBD. That information includes your mailing address, e-mail, and phone number. E-mail is the most frequent way EBD will send out information.

If your information is not current, you may miss out on important and timely information regarding your policy which may affect your coverage. You may also have a delay in receiving insurance cards, COBRA packets and other important mailed items that come back to EBD as returned mail.

A phone number that is out of date can also hamper

American Health Holding's ability to contact members regarding Case Management.

If you need to update your contact information, please contact your agency/school district Health Insurance Representative (HIR). Your HIR will make the change in their system, and it will then update in the ARBenefits system.

For Retirees, if you need to make changes to your contact information, you can fill out the top portion of the retiree enrollment form with the changes, and fax that form back to EBD at 501-682-1200. The retiree enrollment form can be found

online at www.ARBenefits.org.

EBD publishes an electronic newsletter each month that is sent to members who have provided their e-mail address. Members can include their e-mail address on enrollment forms, or they can log in to their account at www.ARBenefits.org. Once logged in, members can enter their e-mail address on the front page to receive the ARBenefits E-Newsletter.

E-newsletters and the Buzz are also available at www.ARBenefits.org in the Communication Center in the Newsletters drop down list.

Signing Up for Medicare Part B

When retirees or spouses on the plan become eligible for Medicare, they need to be sure to pick up Medicare Parts A & B.

Active employees who are Medicare eligible will still be covered under the active plan with ARBenefits as the primary insurance, and do not need to sign up for Part B when they obtain Part A. However, they will need to make sure they sign up for Part B upon leaving active employment.

When a retiree on the plan becomes eligible for Medicare, the plan will start to pay for that member as though they have signed up for Medicare Part B. That means Medicare will be the primary insurance provider with the ARBenefits plan as the

secondary provider.

If you do not sign up for Part B, the ARBenefits plan still pays secondary, and you could be left needing to pay 80 percent of your Part B expense.

Medicare Part A covers:

- Hospital care
- Skilled nursing facility care
- Nursing home care (as long as custodial care is not the only care you need)
- Hospice
- Home health services

Medicare Part B covers:

- Medically necessary services
- Preventive services
- Physician services

Once you sign up for Medicare and receive your ID card, you will need to provide EBD a copy of that card through mail or by fax to 501-682-1200.

To sign up for Medicare, visit Medicare.gov or call 1-800-Medicare (1-800-633-4227) for assistance.

You can find the schedule of benefits for Medicare Primary members in the Summary Plan Description, or it can be found at www.ARBenefits.org in the Forms & Publications section.

Becoming Medicare eligible is a qualifying event if members and or spouses wish to leave the plan. However, retirees and spouses who drop the plan will not be able to come back on.

Qualifying Event Documentation

When trying to add a spouse and/or dependent to your policy for a qualifying event please be aware that supporting documentation is required in addition to the ARBenefits Change Form.

For qualifying events, active members have sixty (60) days from the qualifying event to enroll/drop a spouse and/or dependents to the plan. Please note, retirees have only thirty (30) days.

Members trying to add a spouse must provide: proof the spouse has involuntarily lost employer coverage, a spousal affidavit stating the spouse is not offered employer sponsored coverage, and a copy of the marriage license.

When adding dependents,

Required Documentation for Qualifying Event Changes		
Adding a spouse	Adding Dependents	Dropping a spouse and/or dependents
Change Form	Change Form	Change Form
Proof that the spouse involuntarily lost employer coverage	Birth Certificate, or Birth Announcement for a newborn	Proof that the spouse/dependent has gained employer coverage (letter of credible coverage, letter from HR manager, etc.)
Spousal Affidavit	Social Security Number *once obtained within six months of birth	
Copy of Marriage License	<i>forms available at www.ARBenefits.org *Employees have 60 days from the qualifying event date to submit all documentation to EBD, retirees have 30 days.</i>	

members must provide birth certificates, or a birth announcement for newborns. Also, members need to provide the social security number for

each child. Newborns can be added without a social security number, but members must provide EBD the number once it is

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We welcome your benefit questions and comments. Call Employee Benefits Division (EBD) during business hours at 501-682-9656 or toll-free at 1-877-815-1017. You may visit our website at www.arbenefits.org or send an e-mail to AskEBD@dfa.arkansas.gov



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issued for the newborn.

As a note, once a dependent turns 26, they will automatically be dropped from your policy at the end of the month in which they turn 26. No forms need to be filled out for the dependent to be dropped.

When trying to drop a spouse or dependent as a qualifying event for gain of coverage through their employer; the member will need to submit proof that the spouse or

dependant has gained employer sponsored health coverage.

If a member sends in a change or enrollment form without the supporting documents, EBD will send the form back to the member with instructions on how to complete the enrollment process. This can cause a delay in getting a spouse and/or dependents added or dropped.

The ARBenefits Active Change and Enrollment Forms

are available at www.ARBenefits.org in the Forms and Publications section for both State and Public School Employees under the Forms drop down list in the 2015 section. Retirees, please use the Retiree Election Packet in the Retiree Section.

For more information on qualifying events, members can access the ARBenefits Summary Plan Description at www.ARBenefits.org under Plan Documents.

The Buzz is an official publication of the Arkansas Department of Finance & Administration - Employee Benefits Division, for the members of the ARBenefits Plan. It shall stand as a Summary of Material Modification (SMM) to the Summary Plan Description (SPD) governing the Arkansas State and Public School Health Plan (ARBenefits).