

State Health Plan Member Wellness Initiative

The State Health Plan for Teachers and State Employees has a comprehensive member wellness initiative supporting healthy lifestyles and striving to keep members' premiums and out-of-pocket expenses from increasing.

Statistics show that the two leading causes of preventable deaths in North Carolina are tobacco use and unhealthy diet/physical inactivity which may lead to the development of chronic diseases such as diabetes and heart disease.

The Plan estimates that claims for tobacco related issues may accumulate to over \$137 million per year, while claims for chronic diseases related to obesity may be as high as \$107.8 million per year.

Given the significant impact on health status and cost, the Plan proposes an initial focus on tobacco cessation and weight management which calls upon members to take responsibility for their lifestyle choices.

The Plan asks members to self-report tobacco use and height/weight for the calculation of Body Mass Index (BMI). Those members who do not use tobacco, or have a BMI less than 40, would be able to choose the PPO Standard 80/20 plan or the PPO Basic 70/30 plan. Tobacco users and members with a BMI 40 or higher would automatically be placed on the PPO Basic 70/30 plan.

The member wellness initiative includes all covered dependents. (The initiative does not apply to Medicare-primary members.) The tobacco cessation component will begin on July 1, 2010. The weight management program will begin on July 1, 2011. A member education program will outline all components well in advance of implementation.

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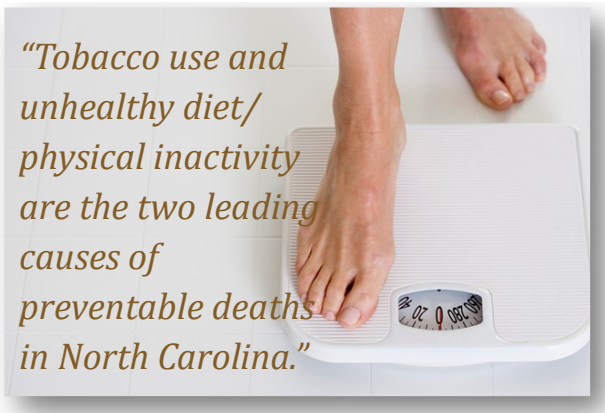
State Health Plan Member Wellness Initiative *cont...*

1. Why has the State Health Plan focused on tobacco use and weight management, when there are many other health conditions that are also serious and costly?

The Plan's NC Health *Smart* programs currently provide services and support that will allow members to take appropriate action to improve their health. Health Coaches are available now to assist eligible members with managing chronic diseases and healthy lifestyle support. You may call a Health Coach at 1-800-817-7044,



24 hours a day, 7 days a week. In addition, the NC Quitline is available for tobacco cessation assistance. Pharmacy benefits offer tobacco cessation and weight management medications. Speak to your doctor for counseling and information regarding medication options.



"Tobacco use and unhealthy diet/physical inactivity are the two leading causes of preventable deaths in North Carolina."

2. Has the State Health Plan explored some ways to offer incentives to members who engage in healthy lifestyles?

The Plan is looking at cost-effective incentive options to support healthy lifestyle behaviors. Tools and resources have been developed by the Plan and other partners to highlight the benefits of healthy lifestyles, including healthy eating, physical activity, tobacco use cessation, and stress management.

3. How will the Plan implement these programs?

The legislation includes a provision for the Plan to ask members to self-report tobacco use and weight status during annual enrollment. The Plan is currently assessing procedures and rules around the tobacco and weight management programs, and will make these available for public comment prior to program implementation. Privacy and respect will be important values in all aspects of the member wellness initiatives.

*The legislation requires the Plan to inform members about the specifics of the initiatives no later than **October 1, 2009.***

4. Who's eligible for the member wellness initiatives?

Members eligible for program participation include active employees, retirees who are not on Medicare, and dependents. Members on COBRA are also eligible for these programs.

Ask HR**QUESTION 1**

Q: I hear a lot of the staff around campus talking. Many, including me, are wondering why there was money in May for a Student Recognition Ceremony (preceded by sno-cones, cotton candy and popcorn in Daniels' Plaza) and for a Faculty Recognition Ceremony (with a dessert-and-champagne reception), but there was no money for a Staff Recognition Ceremony (with a continental breakfast, or light lunch/hors d'oeuvres, or Espresso Ambulance and KK Donuts, or Ice Cream Social or a dessert reception)?

I know there are plans to present the Outstanding Staff Award and Service Recognition in the Fall, but employee morale is down now because of all the anticipated budget cuts and layoff rumors, and the loss of Employee Appreciation Week festivities.

Is anything being planned, or can something be planned, for staff in June?

A: *The Student Recognition Ceremony, which is where students are awarded their scholarships, included (complimentary) music provided by the Jazz Band and popcorn graciously provided by Student Life which had already been paid for as part of the annual Beaux Arts celebration. While originally this was to have included snow cones and cotton candy, funding wasn't available for these additional items.*

The Faculty Recognition Ceremony was funded from an Institutional Trust Fund that was "earmarked" specifically for this event. The champagne was "recycled" from a celebration held earlier in the year.

While funding is not currently available to proceed with festivities in June, we do plan to announce the Outstanding Staff Award and have the Employee Appreciation festivities in the fall.

QUESTION 2

Q: Any idea yet how faculty hours are going to be worked into the furlough thing?

A: *Faculty are encouraged to take their furlough hours when instructional or classroom time won't be affected or impacted. We have received no further direction.*

Instructions for Completing an I-9

Instructions for Completing Section 1: Employee Information and Verification

Section 1 of the I-9, as required by law, must be completed **by the employee** at the time of hire, when employment begins. However, you may complete the form earlier, as long as the person has been offered and has accepted the job. You may not use Form I-9 process to screen job applicants. Please note that UNCSA participates in the E-Verify process as it relates to #3 below.

Section 1. Employee Information and Verification (To be completed and signed by employee at the time employment begins.)			
Print Name: Last 1 Doe	First John	Middle Initial A	Maiden Name 1
Address (Street Name and Number) 2 123 Main Street		Apt. # 1	Date of Birth (month/day/year) 01/01/1952 2
City 3 Washington	State DC	Zip Code 20011	Social Security # 000-00-0000 3
4 I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.		I attest, under penalty of perjury, that I am (check one of the following): <input type="checkbox"/> A citizen of the United States <input type="checkbox"/> A noncitizen national of the United States (see instructions) 4 <input type="checkbox"/> A lawful permanent resident (Alien #) <input checked="" type="checkbox"/> An alien authorized to work (Alien # or Admission #) 0000000000 until (expiration date, if applicable - month/day/year) 02/28/2011	
5 Employee's Signature <i>Jane Doe</i>		Date (month/day/year) 02/20/2009	
Preparer and/or Translator Certification (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.			
6 Preparer's/Translator's Signature <i>Jane Doe</i>		Print Name Jane Doe 6	
Address (Street Name and Number, City, State, Zip Code) 123 Main Street, Apt. 2, Washington, DC 20011		Date (month/day/year) 02/20/2009	

Figure 1: Instructions for Completing Section 1: Employee Information and Verification

- 1** Employee enters full name and maiden name, if applicable.
- 2** Employee enters current address and date of birth.
- 3** Employee enters his or her city, state, ZIP Code, and Social Security number. Entering the Social Security number is optional unless the employer verifies employment authorization through the USCIS E-Verify Program.
- 4** Employee reads warning and attests to his or her citizenship or immigration status.
- 5** Employee signs and dates the form.
- 6** If the employee uses a preparer or translator to fill out the form, that person must certify that he or she assisted the employee by completing this signature block.

Instructions for Completing an I-9

Figure 2: Section 2: Employer Review and Verification

The employee must present to you an original document or documents that establish identity and employment authorization within 3 business days of the date employment begins. Some documents establish both identity and employment authorization (List A). Other documents establish identity only (List B) or employment authorization only (List C). The employee can choose which document(s) he or she wants to present from the Lists of Acceptable Documents, on page 4 of Form I-9. **NOTE:** *If you participate in the E-Verify Program, which UNCSA does, you may only accept List B documents that bear a photograph.*

Examine the original document or documents the employee presents and then fully complete Section 2 of Form I-9. You must examine one document from List A, or one from List B **and** one from List C. Record the title, issuing authority, number, and expiration date (if any) of the document(s); fill in the date of hire and correct information in the certification block; and sign and date Form I-9. You must accept any document(s) from the Lists of Acceptable Documents presented by the individual that reasonably appear on their face to be genuine and to relate to the person presenting them. You may not specify which document(s) an employee must present.

Section 2. Employer Review and Verification *(To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number, and expiration date, if any, of the document(s).)*

List A	OR	List B	AND	List C
Document title: <u>EAD</u>		_____	_____	_____
Issuing authority: <u>DHS/USCIS</u>		_____	_____	_____
Document #: <u>LIN1234567891</u>		_____	_____	_____
Expiration Date (if any): <u>02/28/2011</u>		_____	_____	_____
Document #: _____		_____	_____	_____
Expiration Date (if any): _____		_____	_____	_____

CERTIFICATION: I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) 02/20/2009 and that to the best of my knowledge the employee is authorized to work in the United States. (State employment agencies may omit the date the employee began employment.)

Signature of Employer or Authorized Representative <u>John Smith</u>	Print Name <u>John Smith</u>	Title <u>Manager</u>
Business or Organization Name and Address (Street Name and Number, City, State, Zip Code) <u>Burger Corp., 123 S. Main Street, Washington, DC 20011</u>		Date (month/day/year) <u>02/23/2009</u>

Figure 2: Section 2: Employer Review and Verification

- 1 Employer records document title(s), issuing authority, document number, and the expiration date from original documents supplied by employee. See Part Eight for the Lists of Acceptable Documents.

NOTE: You may use abbreviations for commonly used documents, e.g., DL for driver’s license and SS for Social Security.

- 2 Employer enters date employment began.
- 3 Employer attests to examining the documents provided by filling out the signature block.

Instructions for Completing an I9 *cont...*

Re-verifying Employment Authorization for Current Employees

When an employee's employment authorization expires, you must re-verify his or her employment authorization. You may use Section 3 of Form I-9, or, if Section 3 has already been used for a previous re-verification or update, use a new Form I-9. If you use a new form, write the employee's name in Section 1, complete Section 3, and retain the new form with the original. The employee must present a document that shows either an extension of his or her initial employment authorization or new employment authorization. If the employee cannot provide you with proof of current employment authorization (e.g., any document from List A or List C, including an unrestricted Social Security card), you cannot continue to employ that person.

To reverify, you must:

1. Record the date of rehire;
2. Record the document title, number and expiration date (if any) of the document(s) the employee presents;
3. Sign and date Section 3; and
4. If you are re-verifying on a new Form I-9, write the employee's name in Section 1.

2. Sign and date Section 3; and

3. If you are updating on a new Form I-9, write the employee's name in Section 1.

You may complete Sections 1 and 2 on a new Form I-9 instead of completing Section 3 when rehiring employees.

NOTE: You must complete a new Form I-9 if the version of the form you used for the previous verification has since been replaced by a newer version.

To update, you must:

1. Record the date of rehire and the employee's new name, if applicable;

Section 3. Updating and Reverification (To be completed and signed by employer.)	
1 A. New Name (if applicable)	B. Date of Rehire (month/day/year) (if applicable)
2 If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment authorization.	
Document Title: EAD	Document #: LIN1234567892 Expiration Date (if any): 02/28/2013
I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.	
3 Signature of Employer or Authorized Representative <i>Jane Smith</i>	Date (month/day/year) 02/28/2011

Figure 5: Reverification of Employment Authorization for Current Employees and Rehires

- 1 Record the employee's new name, if applicable, and date of rehire, if applicable.
- 2 Record the document title, number, and expiration date (if any) of document(s) presented.
- 3 Sign and date.

NOTE: You may also fill out a new Form I-9 in lieu of filling out this section.

Instructions for Completing an I-9 *cont...*

Frequently Asked Question:

Q. May I specify which documents I will accept for verification?

- A. No. The employee may choose which document(s) he or she wants to present from the lists of acceptable documents. You must accept any document (from List A) or combination of documents (one from List B and one from List C) listed on Form I-9 and found in Part Eight of this Handbook that reasonably appear on their face to be genuine and to relate to the person presenting them. To do otherwise could be an unfair immigration-related employment practice in violation of the anti-discrimination provision in the INA. Individuals who look and/or sound foreign must not be treated differently in the recruiting, hiring, or verification process. For more information relating to discrimination during Form I-9 process, contact OSC at 1-800-255-8155 (employers) or 1-800-237-2515 (TDD) or visit OSC's Web site at www.usdoj.gov/crt/osc.

Common Paperwork Mistakes

- ⚠ Not signing and dating in the proper places (Dating errors can never be corrected once they go past the 3 days from hire date. They can only be documented as errors and shown that a correction has been completed but would still be subject to penalties due to being late)
- ⚠ Employee listing a PO Box number instead of a physical address
- ⚠ Not putting in the actual hire date (in section 2)
- ⚠ The employee not completing all parts of section 1
- ⚠ Not documenting information on the page of copied documents describing differences in names listed on the documents presented for verification and/or the name used in section 1 differs from the document(s)
- ⚠ Section 1 not being completed correctly by the employee (especially the date of birth, signing, dating and checking the proper citizenship box with proper documentation being listed)
- ⚠ Using white out instead of marking through mistakes to include initials & date
- ⚠ Not completing all the document-related items in section 2 (such as expiration dates, etc...)



Paperwork Violations

If you fail to properly complete, retain and/or make available for inspections Forms I-9 as required by law, you may face civil money penalties in an amount of not less than \$110 and not more than \$1,110 for each violation.

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HR Hub 2009

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Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1	2	3	4	5 SPA Performance Evaluation Deadline Permanent Timesheets Due	6
	<i>"The Office of Human Resources is committed to functioning as a strategic partner in the development and retention of a highly qualified, diverse workforce."</i>					
7	8	9	10	11	12 HR Staff Meeting (2 - 4pm)	13
14  FLAG DAY	15 MID MONTH PAY DAY	16	17	18 Staff Council (11am) Eisenberg Mid-Month Timesheets Due	19	20
21 FATHERS DAY	22	23	24	25	26 HR Staff Meeting (2 - 4pm)	27
28	29	30 EPA-NT Performance Evaluation Deadline MONTHLY PAY DAY	HR Staff Meetings: Our office will be closed during these times.			

Just Ask!

How can we help you? Do you have questions you'd like answered but perhaps don't have enough time to stop by HR and ask? Chances are, if you have a question, someone else does, too! If there's a topic you'd like addressed or explained, please let us know by emailing The Office of Human Resources at AskHR@uncsa.edu.

Names of those making the inquiries will remain confidential.

