



University of North Carolina School of the Arts

The HR Hub

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Forget Oktoberfest – It's Time for the 15th Annual NCFlex Benefest!

NCFlex turns 15 this year! Annual enrollment for NCFlex benefits is **October 5-30**, so take this time to celebrate and learn about your benefit options by attending an **Employee Information Session (EIS)**.

You can only enroll online. See link below

www.ncflexonline.org

**Enroll
10/5 thru
10/30**

North Carolina
State Health Plan
Enrollment

By now you should have your NC Flex booklet. Please call Keyona McNeill, the Benefits Representative 336-770-1451 if you have not received it.

During the annual enrollment period you may enroll in NC Flex Benefits or change your existing benefit elections. The booklet provides detailed information about the 2010 benefits; however, if you have questions or need additional information, please feel free to call me at ext. 1451.

Review your family's needs and determine if you need to change any elections for the 2010 plan year. Remember, if you don't make any changes to your elections, the same coverage you previously elected will rollover to 2010. However, you **MUST re-enroll for Flexible Spending Account (FSA) elections every year.**

NC Flex Benefits: Health Care Flexible Spending Account, Dependent Care Flexible Spending, Dental, Vision, Critical Illness, Cancer, Accidental Death and Dismemberment, and Group Life.

2010 Changes

New Benefit/Vendor	Change and What It Means to You
Cancer/ Allstate	You are eligible to enroll in the Low Option for a one-time special Guaranteed Issue offer (no Evidence of Insurability (EOI) required), regardless of previous eligibility.
Group Term Life/ ING	You can increase your coverage by \$10,000 (up to \$100,000) without submitting Evidence of Insurability (EOI). If you're enrolling for the first time, you can start at a \$20,000 coverage level without submitting Evidence of Insurability (EOI).
Critical Illness/ MetLife	No Evidence of Insurability (EOI) required for new enrollees. Gives you the chance to enroll for coverage—no questions asked.
HCFSA/ Aon	Contribution limit increased to \$5,000. Offers higher pre-tax savings and more money to pay for eligible expenses.
Vision/ Superior Vision	Lock-out periods will be waived for participants enrolling in Plan 3.
Dental/ United Concordia	Rollover from an after-tax dental plan with credit towards waiting periods. NC Flex dental benefits remain the same with a rate increase.

Annual Enrollment is October 5th thru 30th for NC FLEX Benefits!

Important Reminders:

- NCFlex Benefit elections or changes made now will become effective January 1, 2010.
- *You must re-enroll in Flexible Spending Accounts every year!*
- If you do not wish to make any changes to your *other* NCFlex Benefits, you do not need to re-enroll.
- Certain limitations and restrictions apply when enrolling in some benefits for the first time, or when changing from a Low Option to a High Option. READ THE INFORMATION CAREFULLY.

Employee Information Session (EIS)

October 8th 1pm-3pm Finance Conference Room in the Administration Building

October 16th 10am-12pm Facilities Management Conference Room

October 21st 12pm- 2pm Finance Conference Room in the Administration Building

October 28th 1pm- 3pm Finance Conference Room in the Administration Building



Comprehensive Wellness Initiative Overview

In April 2009, Senate Bill 287/Session Law 2009-16 was signed by Governor Beverly E. Perdue. Contained in the Law is a section about the Comprehensive Wellness Initiative (CWI) for members of the State Health Plan for Teachers and State Employees (Plan). This initiative was developed to encourage Plan members to make healthier lifestyle choices. It also provides supports to assist Plan members to quit using tobacco and maintain a healthy weight.

Starting July 1, 2010, members will be enrolled in the 70/30 Basic Plan unless they meet the requirements for enrollment in the 80/20 Standard Plan, based on compliance with the tobacco cessation component. A weight management component will be added to the requirements for the 80/20 Standard Plan beginning July 1, 2011. The CWI applies to active employees, retirees, COBRA participants and dependents whose primary health coverage is provided by the Plan. The CWI does not apply to members with Medicare as their primary coverage.

***“Members who wish to enroll in the 70/30 Basic Plan do not complete an Attestation Form*.
Members who wish to enroll or remain in the 80/20 Standard Plan must complete an Attestation Form each Plan year.”***

If requesting exemption, the member must obtain a completed Physician Certification Form each year to enroll in the 80/20 Standard Plan.

Tobacco Cessation Component Begins July 1, 2010

Members are eligible to enroll in the 80/20 Standard Plan if the subscriber declares on the Attestation Form that they and their covered dependents do not use tobacco products, or that they qualify for exemption due to participation in a tobacco cessation program. Subscribers who enroll in the 80/20 Standard Plan may be randomly selected to participate in a tobacco use verification test. Subscribers who attest to qualifying for exemption must obtain a completed Physician Certification Form confirming their participation in a tobacco cessation program.



Verification of Tobacco Use Status

- Subscribers who attest that they and their covered dependents meet the tobacco use requirements for the 80/20 Standard Plan will also be attesting that they understand they may be chosen for tobacco use testing any time during the Plan year. Testing will be conducted in a private, designated area at the member's worksite. Health Benefits Representatives will notify members who are chosen on the day of the test.
- At the time of testing, members will be asked if they are participating in a tobacco cessation program. If so, they must provide a Physician Certification form as outlined in "Exemptions" below.
- Members who refuse testing or who do not pass the tobacco use test will be notified of the consequences, outlined in the "Consequences and Appeal Rights" on page 7.

Weight Management Component Begins July 1, 2011

Members will continue to follow the tobacco cessation guidelines and as of July 2011, will also enroll based on the weight management guidelines. Subscribers will be eligible to enroll in the 80/20 Standard Plan if they declare on the Attestation Form that the subscriber and their covered dependent(s) do not use tobacco products, **AND**

the subscriber and their covered dependent(s) have a Body Mass Index (BMI) less than 40 kg/m²;

OR

the subscriber and their covered dependent(s) qualify for exemption due to participation in a weight management and/or tobacco cessation program, or have a physician-certified medical condition that prevents the attainment of the required BMI.

Verification of Weight Management Status

- Subscribers who attest that they and their covered dependents meet the weight and tobacco use requirements for the 80/20 Standard Plan will also be attesting that they understand they may be randomly selected to participate in a tobacco use/weight management verification test at their worksite. Height and weight measurements will be collected to determine BMI status. Members must have a BMI less than 40 kg/m² to pass the test.
- The Physician Certification Form will permit members to claim an exemption for member participation in a weight management program and/or for a medical condition that prevents members from attaining the required BMI, in addition to the tobacco cessation program exemption. If applicable, both the weight management related exemptions and the tobacco cessation exemption information must be included for enrollment in the 80/20 Standard Plan.
- Beginning on July 1, 2012, members must have a BMI of less than 35 kg/m² to enroll in the 80/20 Standard Plan. All other program requirements and processes will remain the same.

Exemptions

Subscribers who attest to qualifying for exemption at enrollment must obtain a Physician Certification Form. The completed form must include a dated physician, nurse practitioner or physician assistant's signature, as well as the tobacco cessation and/or weight management program start date(s). **Members should keep the original, completed certification form for their records, as the Plan may request it at any time.** Upon the Plan's request, the member will have fifteen (15) business days to submit the completed form to maintain their eligibility for enrollment in the 80/20 Standard Plan. If the form is not submitted within 15 business days, members will be notified of the consequences outlined in the "Consequences and Appeal Rights" section below.

Consequences and Appeal Rights

Members, who refuse testing, do not submit a completed Physician Certification Form within fifteen (15) business days of request, or fail the tobacco use or BMI tests will be moved to the 70/30 Basic Plan for the rest of the Plan year. The move to the 70/30 Basic Plan will include all covered family members. Those members will forfeit any coinsurance and deductible(s) already paid under the 80/20 Standard Plan and will only be eligible to enroll in the 70/30 Basic Plan for the following Plan year. **Members may not appeal the stated consequences if they refuse testing or do not submit a Physician Certification Form within fifteen (15) business days of the Plan's request. Members may appeal the stated consequences based on test results.** Instructions on the appeal process will be provided to the member at the time of testing.

Comprehensive Wellness Initiative Plan Enrollment Process

The steps below apply to members who enroll electronically or are using paper applications. Electronic enrollees will “sign” forms by checking a box.

- The Plan will include the attestation form, instructions on how to complete the form and information on NC HealthSmart wellness resources and supporting benefits in the Plan enrollment materials.
- Subscribers who want to remain in the 70/30 Basic Plan, either by choice or due to tobacco use status or BMI status, do not have to complete an attestation form during initial or annual enrollment. They will remain in the 70/30 Basic Plan unless they complete an attestation form at future enrollment attesting that they and their dependent(s) meet the criteria for eligibility in the 80/20 Standard Plan.
- At initial and each annual enrollment, subscribers who want to enroll in the 80/20 Standard Plan must complete the attestation form indicating that they and/or their dependents do not use tobacco, have a BMI within the required range, or are eligible for an exemption. The Comprehensive Wellness Initiative does not apply to members whose primary coverage is Medicare, but it does apply to Medicare subscribers' dependents whose primary coverage is through the Plan. Medicare subscribers must attest that his dependent(s) who are covered by the Plan meet the criteria for eligibility in the 80/20 Standard Plan. If the Plan covered dependent does not meet the criteria, then the Medicare subscriber and his covered dependent(s) will be eligible to enroll only in the 70/30 Basic Plan.
- Subscribers will submit their attestation forms through the enrollment process (i.e. electronic or paper format) used by their employer. They are encouraged to retain a copy of the attestation form for their records.
- Enrollment inaccuracies as a result of vendor or HBR processing errors shall be corrected by the HBR as soon as they are identified but no later than thirty (30) days from benefit plan selection. Once an error is corrected, the Plan may reprocess any affected claims retroactive to the first day of the current benefit year or new employee Plan enrollment effective date.
- During a benefit year, a subscriber may not change PPO plans based upon a change in tobacco use status, BMI status or eligibility for an exemption. A member will have the opportunity to change plans at the next annual enrollment period. A member must meet the eligibility criteria to enroll in the 80/20 Standard Plan.

Comprehensive Wellness Policy

<http://www.shpnc.org/cwi-policy-index.html>

**Comprehensive Wellness Initiative -- Frequently Asked Questions
(FAQs)**

<http://www.shpnc.org/cwi-faqs.html>

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