



GEORGIA DEPARTMENT
OF COMMUNITY HEALTH

2018 State Health Benefits Plan Annual Open Enrollment (OE)



Presentation to Active Employees

Date: October 2017

Making Your 2018 Benefit Election

- **Website Open & Close Dates**
 - Website opens at 12:00 a.m. October 16, 2017
 - Website closes at 11:59 p.m. November 3, 2017
- **Online Election**
 - Members make their health election at www.myshbpga.adp.com



2018 Open Enrollment (OE)

- Open enrollment is from ***October 16, 2017 thru November 3, 2017***
- You may go online as many times as you like but the last election confirmed at the time OE closes will be your election for the 2018 Plan Year
- **You should print and keep a copy of the confirmation page which will contain a confirmation number** - once OE is closed, you will be able to go online at www.mySHBPga.adp.com and view your 2018 election



SHBP Enrollment Portal – mySHBPga.adp.com

Save Time! Update Your Password Before Open Enrollment

- Your password expires every 45 days. Login to the SHBP Enrollment Portal now to set up your new password.
 - Login using your current password
 - If it's been over 45 days since the last time you logged in, you'll be prompted to create a new password (which will expire every 45 days)
- If you do not know your current User Name or Password:
 - Click the **Forgot User ID?** or **Forgot Password?** from the login page
 - Links are located to the right of the User Name and Password blocks

SHBP
State Health Benefit Plan

MAKING CHOICES
that benefit *you*

powered by ADP

Welcome to the SHBP Enrollment Portal

Don't have a User Name and Password? [Register Here](#)
Use Registration Code: SHBP-GA

User Name: [Forgot User ID?](#)

Password: [Forgot Your Password?](#)

If you are unable to access your account, please contact SHBP Member Services by phone at 800-610-1963

GEORGIA DEPARTMENT OF COMMUNITY HEALTH

A compatible Web Browser and Adobe Flash Player are required to access the SHBP Enrollment Portal. The minimum supported system requirements are Flash 10, Windows 7, Vista, XP (SP2) using either Internet Explorer 7, 8, or 9, Chrome 23 or 24, Firefox 17.0 or 18.0, or AppleMac OS X 10.8 using Safari 6.

Open Enrollment (OE) and Your Responsibilities

- Read and make sure you understand the plan materials posted at www.dch.georgia.gov/shbp and other information provided by your employer and take the required actions
- Confirm that you answered the Tobacco Surcharge question appropriately
- Check your payroll deduction in December 2017 to verify that the correct deduction amount has been made. If you are not being charged the correct amount, immediately contact HR/Payroll.
- To update any changes in your address, visit Employee Self Service and notify HR.
- **Notify SHBP** whenever you have a change in covered dependents (within 31 days of a Qualifying Event)

What Happens If No Action is Taken?

- Members who do not make an election, either through the web portal or by calling the SHBP Member Services Center, will be defaulted to the plan option previously selected for 2017
- If you do not make an election and are currently paying the Tobacco Surcharge, your coverage will default and the Tobacco Surcharge you are currently paying will continue to apply
- If you do not make an election and are currently enrolled in TRICARE Supplement in 2017, you will be enrolled in TRICARE Supplement in 2018



Changes for Plan Year 2018

New Pharmacy Benefit Administrator

Members do NOT have to go to a CVS pharmacy location for their prescriptions



Healthways is now owned by Sharecare

Plan Options 2018

2018 Vendors and Plan Option Offerings

SHBP will continue to offer Blue Cross Blue Shield of Georgia (BCBSGa) and UnitedHealthcare plan options for 2018.

Health Maintenance Organization (HMO)

Statewide, In-Network Only

- BCBSGa
- United Healthcare

High Deductible Health Plan (HDHP)

- United Healthcare

Health Reimbursement Arrangement (HRA)

- BCBSGa

CVS Caremark administers prescription drug pharmacy benefits for members who choose BCBSGa or UnitedHealthcare.

Sharecare provides well-being resources and incentive programs for members who choose BCBSGa or UnitedHealthcare.

* Additional Options: TRICARE Supplement, PeachCare for Kids®



Plan Options 2018, continued

Enhanced Benefits

Telemedicine/Virtual Visits

- SHBP will continue to provide access to physicians through telemedicine/virtual visits in 2018
- Face-to-face consultations with physicians will be available 24/7, 365 days a year
- Services will be available from home, office or on the go from a computer, tablet or smartphone that has a web camera
- There is a Co-Pay for the BCBSGa and UnitedHealthcare HMO Plan Options, Co-Insurance for the HRA-Gold, Silver and Bronze Plan Options, Co-Insurance subject to Deductible for the UnitedHealthcare HDHP.

Wellness Incentive Credits Rollover Expansion

- Wellness incentive credits will continue to roll over to both the vendor and Plan Option you select during Open Enrollment for 2018
- These credits will be available in April 2018; this allows for processing of any claims submitted at the end of 2017 to apply credits
- If you do NOT change your Medical Claims Administrator or Plan option, your credits will be available January 1, 2018.

Children's Hearing Aids Benefit Change

- The benefit allowance for hearing aids for children (up to age 19) has changed from \$6,000 every five (5) years to \$3,000 per hearing impaired ear every four (4) years.

Plan Options 2018, continued

Enhanced Benefits continued

Applied Behavior Analysis (ABA) for Autism

- SHBP provides limited coverage for medically necessary ABA for the treatment of Autism Spectrum Disorder (ASD)
- Maximum benefit of \$35,000 per year per approved member (through age 10)
- Applicable co-pays, deductibles and/or co-insurance may apply to all covered services

Pharmacy Transition

- CVS Caremark will administer pharmacy benefits for members and their covered dependents enrolled in BCBSGa and UnitedHealthcare Plan Options for 2018
- Effective January 1, 2018, Express scripts will no longer administer the pharmacy benefits
- This does NOT mean Members will have to go to a CVS pharmacy location
- Continue to use local retail and/or chain pharmacies to obtain their prescription medications

Understanding Your Plan Options for 2018

How the Health Reimbursement Arrangement (HRA) Works

- *The HRA is funded by SHBP and provides first-dollar coverage for eligible medical and pharmacy expenses.*
- *When going to the doctor, you will not pay a co-payment; instead, you pay the applicable deductible and co-insurance.*
- *If you have remaining wellness credits in your current HRA account, those credits will roll over to the plan option and/or vendor you select for the 2018 Plan Year.*

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

Understanding Your Plan Options for 2018, continued

	BCBSGa Gold HRA Option		BCBSGa Silver HRA Option		BCBSGa Bronze HRA Option	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Covered Services	You Pay		You Pay		You Pay	
Deductible						
• You	\$1,500	\$3,000	\$2,000	\$4,000	\$2,500	\$5,000
• You + Spouse	\$2,250	\$4,500	\$3,000	\$6,000	\$3,750	\$7,500
• You + Child(ren)	\$2,250	\$4,500	\$3,000	\$6,000	\$3,750	\$7,500
• You + Family	\$3,000	\$6,000	\$4,000	\$8,000	\$5,000	\$10,000
	HRA credits will reduce 'You Pay' amounts					
Out-of-Pocket Maximum						
• You	\$4,000	\$8,000	\$5,000	\$10,000	\$6,000	\$12,000
• You + Spouse	\$6,000	\$12,000	\$7,500	\$15,000	\$9,000	\$18,000
• You + Child(ren)	\$6,000	\$12,000	\$7,500	\$15,000	\$9,000	\$18,000
• You + Family	\$8,000	\$16,000	\$10,000	\$20,000	\$12,000	\$24,000
	HRA credits will reduce 'You Pay' amounts					
HRA	The Plan Pays		The Plan Pays		The Plan Pays	
• You	\$400		\$200		\$100	
• You + Spouse	\$600		\$300		\$150	
• You + Child(ren)	\$600		\$300		\$150	
• You + Family	\$800		\$400		\$200	

Understanding Your Plan Options for 2018, continued

How the High Deductible Health Plan (HDHP) Works

- *The HDHP offers in-network and out-of-network benefits, with the lowest monthly premium.*
- *You must satisfy a high deductible that applies to all covered medical and pharmacy expenses.*
- *Preventive Care expenses are covered at 100%, not subject to the deductible. (Services must be properly coded as “preventive care.”)*
- *If you have dependents, the entire family deductible **does not** have to be met before benefits are payable for any family member.*
- *You may qualify for a Health Savings Account (HSA) through an external banking institution to set aside tax-free dollars to pay for eligible health care expenses.*
- *If you have remaining well-being incentive credits in your 2017 HIA wellness account, those credits will roll over to the plan option and/or vendor you select for the 2018 plan year.*

Plan Features

- Before you can use well-being incentive credits, members must meet a threshold (\$1,300 individual; \$2,600 other tiers).
- You must meet separate in-network and out-of-network deductibles and out-of-pocket maximums
- There are no co-payments; you pay co-insurance after meeting the entire deductible for covered medical and pharmacy expenses.
- Medical and pharmacy out-of-pocket maximums are combined.
- The HSA cannot be combined with a Flexible Spending Account (FSA).



Understanding Your Plan Options for 2018, continued

How the Statewide Health Maintenance Organization (HMO) Works

- *An HMO allows you to receive covered medical services from in-network providers only (except for emergency care).*
- *It is important to verify your current provider is in-network when selecting an HMO Plan Option.*
- *If you have remaining well-being incentive credits in your account, those credits will roll over to the plan option and/or vendor you select for 2018.*
- *Co-pays: \$35 Primary Care, Urgent Care/\$45 Specialist/\$150 Emergency Room*

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
- You are not required to obtain referrals to see a Specialist (SPC), but are encouraged to select a Primary Care Physician (PCP) to help coordinate your care
- Medical and pharmacy out-of-pocket maximums are combined
- Co-payments count toward your out-of-pocket maximum
- 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



2018 Premium Rates

	YOU	YOU+ CHILD(REN)	YOU + SPOUSE	YOU+ FAMILY
BCBS GOLD	\$168.73 (↑was \$164.36)	\$307.13 (↑was \$298.72)	\$418.09 (↑was \$405.84)	\$556.50 (↑was \$540.20)
BCBS SILVER	\$110.89 (↑was \$108.49)	\$208.80 (↑was \$203.74)	\$296.62 (↑was \$288.51)	\$394.54 (↑was \$383.76)
BCBS BRONZE	\$72.45 (↑was \$68.96)	\$143.46 (↑was \$136.54)	\$215.91 (↑was \$205.50)	\$286.92 (↑was \$273.08)
BCBS HMO	\$135.65 (↑was \$130.96)	\$250.90 (↑was \$241.94)	\$348.63 (↑was \$335.69)	\$463.89 (↑was \$446.67)
UHC HMO	\$172.56 (↑was \$166.23)	\$313.65 (↑was \$301.91)	\$426.14 (↑was \$409.78)	\$567.22 (↑was \$545.45)
UHC HDHP	\$58.03 (↑was \$51.01)	\$118.94 (↑was \$106.02)	\$185.62 (↑was \$167.80)	\$246.54 (↑was \$222.82)

*\$80.00 Additional surcharge applies to monthly premium for tobacco users

2018 Pharmacy Benefits

For Blue Cross Blue Shield of Georgia (BCBSGa) and UnitedHealthcare Elections

- **CVS Caremark** has been selected to administer the pharmacy benefits for members who choose BCBSGa and UnitedHealthcare. CVS Caremark has a broad pharmacy network for retail prescription drug products, mail order, home delivery and specialty pharmacy services. Effective January 1, 2018, Express Scripts will no longer administer the pharmacy benefits.
- CVS Caremark offers a variety of ways to manage your prescriptions:
 - Get up to a 90-day supply of your maintenance medication through CVS Caremark home delivery pharmacy services or at a participating 90-day retail pharmacy
 - Mobile app for easy refills, track expenses, cost comparison, refill reminders, and more.
 - Co-Pay/Co-Insurance Waiver for members enrolled in Disease Management programs for asthma, diabetes or coronary artery disease. You may be eligible to receive management prescription products at no cost.



Wellness 2018

For Blue Cross Blue Shield of Georgia (BCBSGa) and UnitedHealthcare Elections

- SHBP will partner with Sharecare (formerly known as Healthways®), to provide members who elect BCBSGa and UnitedHealthcare with well-being resources and incentive programs
- Sharecare will administer the 2018 action-based health incentives that allow SHBP members and their covered spouses to earn additional well-being incentive credits.
- Members can earn up to 480 well-being incentive credits toward medical expenses, plus an additional 480 for a covered spouse (total of 960 per household)
- Health actions must be completed between January 1, 2018 and November 30, 2018 in order to earn the 2018 well-being incentive credits.
- Current members have until December 15, 2017 to earn incentive credits in the 2017 Plan Year. Remember – credits will roll into 2018!
- Members who elect BCBSGa and UnitedHealthcare will have access to a variety of Sharecare's tools, activities and services such as the Sharecare RealAge assessment, personalized profile, personalized content to help improve your health habits, earn green days with daily tracking, wellness resources, well-being coaching, biometric screening, tobacco cessation and more!



How Well-Being Incentive Credits Work

Plan Option	BCBSGA HMO	BCBSGA HRA	UnitedHealthcare HMO	UnitedHealthcare HDHP
Credits deposited by SHBP monthly into your...	MyIncentive Account (MIA)	Health Reimbursement Arrangement (HRA)	Health Incentive Account (HIA) Bonus: UnitedHealthcare matches up to the first 240 well-being incentive credits earned (by employees only) and will automatically add these funds to your HIA.	
How your well-being incentive credits work to offset your out-of-pocket eligible medical and pharmacy out-of-pocket expenses.	When you use your benefits, you pay the provider/pharmacy co-pay upfront as you normally would. Once the claim has been paid, information is sent to the MIA program. If you have MIA credits to cover all, or a portion of the co-pay, co-insurance or deductible, BCBSGA will mail you a reimbursement check (up to the amount of MIA credits available) along with a MIA summary.	When you use your benefits, any funds that are owed to providers/ pharmacies will be automatically paid by BCBSGA out of your HRA first. You will not pay anything until all of your available HRA credits have been used.	When you use your benefits, you pay the provider/pharmacy co-payment upfront. If you have HIA credits to cover all, or a portion of the expense, UnitedHealthcare will automatically send you a reimbursement check (up to the amount of HIA credits available). For any co-insurance or deductible funds owed to providers, if you have enough credits in your HIA to cover all, or a portion of the eligible expense, UnitedHealthcare will automatically mail you a reimbursement check (up to the amount of HIA credits available).	You first pay a portion* of your deductible to activate your ability to use your HIA credits. Once that portion of your deductible has been met, when you use your benefits, any funds owed to providers will be automatically paid by UnitedHealthcare out of your HIA (up to the amount of HIA credits available). For pharmacy, you will pay upfront. If you have enough credits in your HIA to cover all, or a portion of the expense, UnitedHealthcare will automatically mail you a reimbursement check (up to the amount of HIA credits available). *Portion Breakout: You - \$1,300 You + Child(ren) - \$2,600 You + Spouse - \$2,600 You + Family - \$2,600



Wellness 2018, continued

2018 WELLNESS INCENTIVES AT-A-GLANCE

Plan Option	BCBSGa HMO MyIncentive Account (MIA)	BCBSGa Health Reimbursement Arrangement (HRA)	Kaiser Permanente (KP)	UnitedHealthcare HMO Health Incentive Account (HIA)	UnitedHealthcare HDHP Health Incentive Account (HIA)
Who's Eligible	Up to	Up to		Up to	Up to
Member	480 credits	480 credits	\$500*	480 credits	480 credits
Spouse	480 credits	480 credits	\$500*	480 credits	480 credits
Bonus credits for member**	N/A	N/A	N/A	240 credits**	240 credits**
Potential Total credits/dollars	960 credits	960 credits	\$1,000*	1,200 credits	1,200 credits



Wellness 2018, continued

	What to Do	What You will Earn*
1.	<p>Assess your Health - Complete the RealAge test. A confidential, online questionnaire that will take about 20 minutes to complete.</p>	<p>Earn 240 well-being incentive credits</p> <p><i>Note: Incentive credits cannot be awarded until completion of the RealAge test. Biometrics, Telephonic Coaching and Online Pathways taken before completion of the RealAge Test can only be applied to incentive credits upon RealAge Test completion.</i></p>
2.	<p>Know Your Numbers – Complete a Biometric Screening (Credits to be awarded after the RealAge Test is completed)</p> <p>You have two options: through your physician using the 2018 Physician Screening Form or at an SHBP-sponsored biometric screening event.</p>	
3.	<p>Take Action (Credits to be earned after the RealAge Test is completed)</p> <p>Complete the coaching pathway, online pathway, or a combination of both</p> <p>Telephonic Coaching Pathway</p> <ul style="list-style-type: none"> Actively engage in telephonic coaching. Earn 60 well-being incentive credits for one completed coaching call per calendar month. You can earn 60 well-being incentive credits up to 4 times, for a maximum of 240 well-being incentive credits <p>Online Pathway</p> <ul style="list-style-type: none"> Actively track and make progress. Earn 120 well-being incentive credits when you record 60 Green Days within a 90 day period. You can earn 120 well-being incentive credits up to 2 times, for a maximum of 240 well-being incentive credits <p>NOTE: Well-being incentive credits can be earned by logging 8 of 12 Green Day trackers daily within the Sharecare app or on the online platform.</p>	<p>Earn up to 240 well-being incentive credits</p> <p><i>NOTE: You may complete as many coaching calls as you like in a month; however, a maximum of one call in a calendar month qualifies you for the 60 well-being incentive credits.</i></p> <p><i>NOTE: Incentive credits cannot be awarded until completion of the RealAge test. Telephone calls completed or green days earned before completion of the RealAge Test can only be applied to incentive credits upon RealAge Test completion.</i></p>



Tricare Supplement

- The Tricare supplement is available for families who are covered under Tricare military insurance coverage.
- To be eligible, the STC employee and dependents must be:
 - Under age 65
 - Ineligible for Medicare
 - Registered in DEERS (Defense Enrollment Eligibility Reporting System)
- How it works:
 - Tricare remains your primary insurance coverage - The supplement is considered secondary coverage.
 - Members have flexibility in selecting civilian physicians, specialists, hospitals and pharmacies.
 - Covers unmarried dependent children under 21, or under 23 if enrolled as a full time student.
 - No tobacco/spousal surcharges.
 - No COBRA rights, but a portability feature is offered.



PeachCare for Kids – Now Available!



Don't forget, State of Georgia employees are eligible for PeachCare Coverage!

- Program is income based.
- Visit www.peachcare.org for income requirements and income calculator tool.
- Monthly premiums are incremental based on income.
 - \$11-\$36 for one child; \$72 household max for two or more children.
- Most services require based upon medical services received.
- No co-payments for:
 - Emergency services
 - Preventive Care Services
 - Immunizations
 - Routine preventive and diagnostic dental services

Eligibility Questions?

Contact PeachCare: 877.427.3224

If you think you might be eligible for PeachCare...

- Start the enrollment process now!
- DO NOT drop your children's health coverage under State Health.
- PeachCare will notify you if you are accepted into the program.
 - Upon being accepted into the program, you may drop your children's State Health insurance coverage.
 - You must notify State Health of your acceptance into PeachCare within 60 days of acceptance.



If you are accepted into PeachCare, but lose the coverage in the future, you have 60 days to notify State Health of the loss and add your children to your current health plan.

Questions or Additional Information

Resource	Member Services	Website
BlueCross and Blue Shield of Georgia (BCBSGa)		
Member Services: Monday thru Friday, 8:00 am to 8:00 pm ET	855-641-4862 (TTY 711)	www.bcbsga.com/shbp
United Healthcare		
Member Services: Monday thru Friday, 8:00 am to 8:00 pm ET	888-364-6352 (TTY 711)	www.welcometouhc.com/shbp
Sharecare (formerly known as Healthways)		
Member Services: Monday thru Friday, 8:00 am to 8:00 pm ET	888-616-6411 (TTY 711)	www.BeWellSHBP.com
CVS Caremark		
Member Services: 24 hours a day/7 days per week	844-345-3241	http://info.caremark.com/shbp
SHBP		
Member Services: Monday thru Friday, 8:30 am to 7:30 pm ET, Saturday 8 am-5 pm during Open Enrollment	800-610-1863	www.mySHBPga.adp.com
PeachCare for Kids	877-427-3224	https://gateway.ga.gov/
Tricare Supplement	866-637-9911	www.selmantricareresource.com/ga_shbp

Important Notice

- The information provided in this presentation is a summary of changes for the 2017 Plan Year. It is intended only to highlight principal benefits.
- Please refer to the Active Member Decision Guide for more details.
- Premium rates, decision guides and other information will be available at www.dch.georgia.gov/shbp

THANK YOU!