

10/6/2010

## Questions and Answers from the Open Enrollment Training Seminars

### General OE Questions

Question: When will the Open Enrollment Video's be on the PEBB website?

Answer: The Open Enrollment Video's for both Active Employees and Retirees will be placed on PEBB's website on October 14, 2010. The website is <http://www.pebb.hca.wa.gov/>.

### National Health Care Reform

Question: Can children age 20-25 enroll in PEBB coverage even if they have other employer sponsored coverage?

Answer: Yes, Children age 20-25 can be added regardless of access to other employer sponsored coverage. However, PEBB rules still prohibit dual enrollment in PEBB medical and dental coverage.

Question: Must employees submit a PEBB Declaration of Tax Status form with their enrollment/change form when adding dependents age 20-25?

Answer: Employees will not be required to submit the PEBB *Declaration of Tax Status* form with their enrollment change form unless the dependent does not qualify as a dependent for tax purposes (e.g., a qualified domestic partner and or the domestic partners child).

Question: When can a dependent child age 20-25 be enrolled with an effective date of January 1, 2010?

Answer: Age 20-25 dependents can be enrolled during the Annual Open Enrollment November 1-30<sup>th</sup> 2010 for a January 1<sup>st</sup> effective date or they can apply during a Special Open Enrollment period that will run from January 1<sup>st</sup> to March 1<sup>st</sup>, also with an effective date of January 1<sup>st</sup> 2010.

### Adult Dependents

Question: Will the agencies be contacted about the adult dependents who will be transitioning back to be enrolled on our employee's account? If yes, how will they be notified?

Answer: We are exploring how we can effectively communicate with you on the status of the adult dependent transition.

## Dependent Verification

Question: With the new dependent verification process, if an employee's child needs to see the doctor and the dependent has yet to be verified would they be covered?

Answer: If the child is already enrolled, they will be covered. If the coverage effective date for the child is on or after 1/1/2011, then they would **not** be covered.

Question: If an employee needs eligibility called in and a dependent is still pending verification, will the carriers be told the dependent is eligible?

Answer: If the coverage effective date for the dependent is before 1/1/2011, then yes, the carriers will be told the dependent is eligible.

If the coverage effective date for the dependent is on or after 1/1/2011, then the carrier will **not** be told the dependent is eligible.

Question: How long will it take HCA to verify a dependent?

Answer: If you haven't heard from HCA within 2 weeks, contact us at [PEBBDV@hca.wa.gov](mailto:PEBBDV@hca.wa.gov).

Question: What if a subscriber bypasses our agency and sends the forms directly to HCA. Will HCA key the dependent record and process the dependent verification?

Answer: No. HCA does not key the dependent record ( and many of you wouldn't want us to), but we will notify you of our receipt of verification materials for a dependent you haven't entered.

Question: Do we have to keep copies of all documents sent to HCA in the employee's file?

Answer: We recommend that you keep a copy of verification documents as part of the employee's file since it is now a required piece of the dependent enrollment process. Note that we don't recommend you keep originals – only copies.

Question: Will we be receiving a report or notification of dependents being verified?

Answer: We are exploring how we can effectively communicate with you on the status of dependent verification.

Question: How will this work for newborns? We are supposed to put them on as the date of birth, but if HCA is waiting on docs to verify, usually the employee doesn't get a social security number or birth certificate for several weeks.

Answer: We can accept the birth document the hospital provides at the time of birth if it includes the subscriber's name.

Questions: HRMS does not collect employee premiums correctly when an employee is hired on the 1<sup>st</sup> of the month. To fix this problem payroll must go into HRMS and take an extra premium on the 25<sup>th</sup> of the month. So if a dependent is pending and not approved yet by the 25<sup>th</sup> we would have to go into HRMS and collect the premium correct?

Answer: Yes, for employees hired on the first of the month there is a work around in HRMS to collect employee premiums. If a dependent is not verified and enrolled by the 25<sup>th</sup> when you take the manual deduction for the employee premium you will have to collect the additional amount due once you are notified by HCA of the approval.

Question: Can we redact all private information on the information we send to HCA?

Answer: HCA needs the subscriber's and dependents' names and only the last 4 digits of the subscriber's SSN to process verifications.

Question: How should we send dependent verification documents to HCA?

Answer: Please route electronic submissions to [PEBBDV@hca.wa.gov](mailto:PEBBDV@hca.wa.gov), or fax them to 360 923-2602. Remember, HCA needs only the subscriber's name and last 4 digits of the subscriber's SSN on the documents.

Question: Is the DV e-mail address secure?

Answer: No. Please include only the subscriber's name and last 4 digits of the subscriber's SSN when submitting documents electronically.

Question: Is the fax machine secure?

Answer: Yes.

Question: Is there a second fax line number for when the line is busy?

Answer: No. You should fax the documents to 360 923-2602, or submit documents via email to [PEBBDV@hca.wa.gov](mailto:PEBBDV@hca.wa.gov)

### **Medical/Dental Questions**

Question: Has HCA informed employees about the changes for 2011 yet?

Answer: Yes, HCA sent employees information about the coming changes for 2011 in the "For Your Benefit" newsletter in August and it is repeated in the upcoming October newsletter. HCA has also been updating information on our website and FUZE knowledge base system as information has been made available.

Question: Will Uniform Dental be changing the way that it coordinates with other dental plans as secondary coverage?

Answer: The UDP will not change the way it coordinates with other dental plans for 2011. The UDP currently has a coordination of benefits method known as non-duplication of benefits when it is secondary to another group plan. This means that when the UDP is secondary it will pay no more than the amount it would have paid if it were the primary plan, minus what the primary plan has paid.

Question: Will the UMP non-preferred provider benefit change?

Answer: No. UMP members will continue to pay 40% of the allowed amount for non-network providers.

Question: My Chiropractor said that Regence will not accept him as a preferred doctor – why?

Answer: There are categories of service providers where the Regence network is not open to new providers. Regence and HCA are reviewing these provider categories to ensure the Regence network has sufficient providers to provide reasonable access to covered services based on the standards HCA defined in the Regence contract. That review may lead to additional recruitment of providers or the determination that access is sufficient and no more providers in that category will be added. HCA will not require Regence to add individual providers or provider groups, so not every current UMP provider will be part of the Regence network.

Question: Will employees still be able to login to their medical account and download medical claim information for previous years as Regence takes over the claims administration?

Answer: Current UMP members who remain with the plan in 2011 can access their medical claims information from previous years from the UMP website through the end of 2011. They will also be able to access claims for the 2011 plan year from a link on the UMP website to the [www.myRegence.com](http://www.myRegence.com) site where claims information is stored securely. The key message here is that the UMP website will still be the first place to go to access UMP health plan information and the links to specific information, including medical claims and pharmacy claims.

Question: Will St. Peters emergency room doctors be preferred with Regence?

Answer: Yes

Question: When can members call UMP about the 2011 plan year changes?

Answer: Beginning on October 1, calls about the UMP plan can be directed to the Customer Service number at Regence: 888-849-3591.

### Ongoing Enrollment Questions

Question: If an employee has a child who lost other coverage and the employee wants to enroll the child, what does the proof of loss look like?

Answer: Proof of loss may be a letter from the previous employer or a letter from the insurance company identifying:

- The individual(s) losing coverage including the names of each person to be enrolled in PEBB coverage.
- The termination date of coverage.

### Other

Question: Will HCA be changing the Appeal Process anytime soon? There are 3 forms and less would be better.

Answer: HCA is in the process of updating the Appeal Process forms. It is our goal to have a new 1 page form available in early 2011.