

ARBenefits News Monthly

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Open Enrollment for 2017 Plan Year



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EBD has established the 2016 health insurance Open Enrollment period for State Employees (ASE) and Public School Employees (PSE) for the 2017 plan-year. State Employee Open Enrollment will run September 1-15 while the Public School Employee period will be October 1-15.

2016 Open Enrollment

State Employees:

September 1-15, 2016

Public School Employees:

October 1-15, 2016

Employees will be able make changes to their health insurance policies without a qualifying event during Open Enrollment including: enrolling onto the plan, adding/dropping dependent coverage, changing plan levels and dropping coverage completely. Employees can also choose to not make any changes and keep their coverage as is.

Non-Medicare retirees can change their plan level between Premium, Classic and Basic during their Open Enrollment period.

EBD strongly encourages employees to make changes to their policy during Open Enrollment online by

logging into their account at www.ARBenefits.org.

Members who use the online system will receive instant confirmation that their changes have been received by EBD. Also, forms can be faxed or mailed. Be sure to keep a copy of your fax confirmation sheet when sending forms to EBD.

Supporting documentation may be required when sending forms to EBD or using the online system. Supporting documentation can include: copy of a marriage license, spousal affidavit and birth certificates if adding children.

Letter Requesting Email Addresses

Recently EBD has begun sending letters to members requesting an email address, or displaying the email address that we have on file for that member.

The letter gives members an opportunity to provide their email address to EBD, or to update their current email address on file.

Providing an email address is voluntary however, benefits of providing an email address include allowing you to receive news regarding the ARBenefits plan, and receiving confirmation when any changes you submit for your policy are processed.

It is the member's responsibility to acquire the knowledge needed to

make a decision regarding their health plan and this will offer an additional form of communication to update you.

Remember, you can always provide a preferred email address to EBD by logging into your account at www.ARBenefits.org.

The EBD Office will be closed on

Monday, July 4, 2016

Independence Day



Do's and Don'ts of Spending Your FSA Balance

Your WageWorks debit card makes using your Flexible Spending Account (FSA) convenient. However, there are some things to remember when using your card to make sure your purchases are substantiated.

What happens if you don't substantiate your claims? Your card could be shut down, you will have to pay for items and services out of pocket and file a paper claim for reimbursement. If you don't substantiate your claims by the run-out period of March 31, 2017, you could see a deduction on your paycheck to pay back claims that are unsubstantiated.

Keep track of your Flexible Spending Account or Health Savings account throughout the year by logging into your account at WageWorks.com.

The online portal allows participants to:

- * Update account preferences and personal information
- * Schedule payments to health care providers
- * View transaction and account history
- * Access a database with eligible expenses
- * Order additional health care cards for you and your family at no extra charge

Employees with smart phones can also download the EZ Receipts® mobile app to access to their account on-the-go.

Do's

- **Keep your receipts for EVERYTHING you purchase with your FSA debit card**
Why? The charge may need to be substantiated to prove that the charge was for an eligible FSA approved expense.
- **Register your account on the WageWorks website (www.wageworks.com) and check your account frequently**
Why? If you have a debit card charge that needs documentation for substantiation, WageWorks will request this documentation from you. You will be able to see what charges need to be documented.
- **Make sure your documentation has everything to substantiate your claim. Documentation must include the following to substantiate your claim:** (1) Patient's name, (2) Provider's name, (3) Date of Service (not date of payment), (4) Type of service received or goods purchased, and (5) Amount of the service or goods purchased.

Don'ts

- **Don't throw away your receipts!**
Why? See the first bullet point in the Do section.
- **Don't send in receipts that only show a payment was made.**
Why? See the last bullet point in the Do section
- **Don't assume that the charge is approved because the debit card worked**
Why? Some charges may not be eligible FSA expenditures. For example, you may have used your debit card at the dentist, but part of the payment was for teeth whitening. Teeth whitening is NOT an approved FSA expenditure. That is why WageWorks needs to see substantiation documentation to make sure ALL charges are for FSA eligible expenses. IRS regulations for cafeteria plans REQUIRE substantiation of charges.
- **Don't ignore the letter from WageWorks that may arrive at your address in March 2017.**
Why? In March 2017, WageWorks will send letters to all members who have unsubstantiated expenditures from the 2016 plan year. This is the final request for documentation before the run period ends on March 31 to substantiate expenditures. If you do ignore the requests for documentation, you could lose part of your paycheck.

The Internal Revenue Service (IRS) has established the contribution maximums for Health Savings Accounts (HSA) for 2017. For individual HSAs, the contribution maximum increases \$50 to \$3,400. The contribution maximum for a family HSA stays the same as in 2016 at \$6,750.

***The IRS has yet to publish any 2017 contribution changes for Flexible Spending Accounts (FSA).**

Health Assessment FAQ

Below are answers to frequently asked questions regarding the online Health Assessment from GuidanceResources®. A full Health Assessment guide, and ARBenefitsWell program guidelines can be found at www.ARBenefits.org.

Remember, to receive the wellness discount for the 2017 plan year, active employees and covered spouses on the ARBenefits plan must complete the following by Oct. 31, 2016:

- 1. Both employee and covered spouse must complete the online Health Assessment at GuidanceResources.com.**
- 2. Both employee and covered spouse must have a wellness visit conducted by a physician in an office setting.**

Q: Why should I complete the Health Assessment?

The Health Assessment is a comprehensive tool designed to help you understand factors that influence your overall health. The HA is the first step toward making changes to improve your health and prevent chronic conditions. Also, you and your covered spouse may want to complete the Health Assessment as part of the requirements for incentives.

Q: How long does it take to complete the Health Assessment?

It takes about 15 minutes.

Q: Should my spouse complete the Health Assessment as well?

Yes. All the adults in the household should be encouraged to complete it. Also, spouses may need to complete the Health Assessment to meet the requirement for incentives.

Q: How many times during a year can I complete the Health Assessment?

To qualify for the 2017 discount, you only need to complete your Health Assessment once between 11/1/2015 and 10/31/2016. You may complete the Health Assessment again if you wish to track the improvements in your health, but this is not required.

Q: I am getting stuck after I click the Health Assessment link on the profile page. It says I'm not eligible. What can I do?

This may be due to incorrect information on the profile page. Please check that your first name, last name, date of birth and home ZIP code are entered accurately. This information

must match the records in your Human Resources department. Avoid using nicknames and check for misspellings. If you have recently changed your name or your residence and have not yet informed your HR department, please enter the older information.

Q: What if I don't have a computer?

Although it is recommended that you complete the Health Assessment online for the most accurate and immediate reporting, you may complete it on paper. If you don't have access to a work computer, you may complete the Health Assessment using your home computer, smart phone, tablet or any other public computer. If you don't have access to any of the above, please call the toll free number to order a paper Health Assessment. The process to complete the paper Health Assessment is longer, so please allow 4-6 weeks to complete.

Q: I recently moved, should I complete another Health Assessment?

To qualify for incentives, you only need to complete your Health Assessment once during the year. You may complete the Health Assessment again if you wish to track the improvements in your health, but this is not required.

Q: How would I know that I have completed the requirement for my incentives?

Please contact your HIR to confirm that you have met all the requirements for the incentives beginning in June 2016.

Q: I've completed the Health Assessment,

now what?

Congratulations! You have taken the first step in the right direction. Please use your Health Assessment report to understand your health risks and schedule an appointment to discuss the results with a Health Coach. You can also enroll in any of the online wellness workshops to start making improvements.

Q: According to my HA, I have certain health risks, but my condition is due to some other constraints. I don't agree with this assessment.

Please note that the Health Assessment is designed to make you aware of health risks. It is not a diagnostic tool. The final report is generated based on the information you enter in the Health Assessment. If you think that your Health Assessment report is recommending steps that are not advisable for you due to your health condition, please consult with your physician before taking any other actions.

Q: What does it mean when my report says that I am at a "High Risk"?

Based on the answers that you provided, the Health Assessment evaluates your current health. Please review the report to understand what it means to be at a "high risk" for a particular health area. You will also be invited by HealthyGuidance® to participate in telephonic or online coaching. Please take the next steps to make improvements in your overall health

Need Assistance with the Health Assessment? contact [GuidanceResources®](http://GuidanceResources.com) at 1-877-247-4621.