

Open Enrollment



In a Nutshell

November 5 – 18, 2008

Where to enroll

[www.state.mn.us/
employeeselfservice](http://www.state.mn.us/employeeselfservice)

What's open

Health insurance

Long term disability

Managers Income
Protection Plan

Pre-tax expense accounts
(MDEA, DCEA, TEA)

What's new

Personal Health
Assessment -
single vendor

Debit card

\$250 Health
Reimbursement Account

Confirmation statements

Where you can get more information

On our Website at:

www.doer.state.mn.us

From your HR Rep

Open Enrollment Call Center:

651-355-0100 or

1-800-664-3597 or

1-800-627-3529
(MN Relay Service)

Monday through Friday
8 a.m. to 4 p.m.

Oct 22 – Nov 18, 2008

Greetings from Commissioner Tom Hanson

The departments of Finance and Employee Relations recently merged. We are now Minnesota Management & Budget. Except for the name change, you will not notice a difference. The efficient administration of a quality benefit package continues to be a top priority.

We are proud to present several new benefits for 2009. These include a debit card, a \$250 Health Reimbursement Account (HRA) and, in the near future, electronic personal health records.

The debit card is a pre-paid card that will re-

place paper processing for most of your medical-dental expense account reimbursement requests.

We are providing employees enrolled in Advantage on January 1, 2009 with a \$250 HRA. This represents a rebate from the Advantage Health Plan because you made wise health care decisions and costs were held down.

A Web based personal health records system, will soon be available to all state employees. This tool will allow you to electronically store all medical records for you and your family.

These new benefits will help you take control of your health and be more conscious of the cost of health care.

We are moving to one vendor for our personal health assessment. By offering only one vendor, open enrollment will be easier and all employees will experience the same set of benefits.

I look forward to leading this agency's efforts to provide you a comprehensive set of benefits that will help you take control of your health and wellness.

Open Enrollment 2009: November 5 – 18, 2008

Open enrollment is your opportunity to change your benefits elections for 2009. Take a few minutes to review your decisions to ensure they are right for you.

If you find that no changes are needed to your benefit elections, you do not have to re-enroll, with one exception: your pre-tax accounts. You must re-enroll in pre-tax expense accounts each year, even if you are currently participating.

State Employee Group Insurance Plan (SEGIP) provides the following tools to help you make decisions that are right for you.

Our Website:

www.doer.state.mn.us, will lead you to information needed during open enrollment, including:

Employee Self Service

where you will complete your open enrollment and it allows for quick update of your mailing address so that your benefits elections and debit card can be mailed to you.

State Employee Express (SEE) provides customized, personal information and current enrollment elections, and lists your enrolled dependents.

Clinic Directory lists all available Advantage clinics, their cost level and

which health plan provides access to them.

MN Community Measurements provides information about the quality and value of clinics in the Advantage network.

Links to our providers enables you to learn more about them and the services they provide.

Personal Health Assessment is available at www.advantagehealthadvisors.com. (For more information see page 2.)

Please note that costs for benefits will change in 2009.

Personal Health Assessment: New this year - single vendor regardless of your health plan

SEGIP is offering you the opportunity to take a voluntary personal health assessment and participate in programs that help you achieve your personal health goals.

New this year, we are partnering with JourneyWell, an independent leader in health and wellness programs. The on-line health assessment and wellness programs are included in the Advantage Health Plan and are offered to you at no extra cost.

In a single Website, health insur-

ance eligible employees have access to:

- The confidential personal health assessment (PHA)
- A wide variety of phone-based and online programs
- A medical information library
- Access to other health resources specifically for state employees



By taking the PHA and agreeing to a follow-up call from a health coach, you and your covered dependents

qualify for a \$5 co-pay reduction on office visits in your clinic level during 2009. Importantly, you take steps to improve your health.

The PHA will be available beginning on November 5, 2008. You need to complete the assessment during open enrollment to qualify for the reduced co-pay.

In late October, JourneyWell will send you instructions about how to take the PHA and wellness program information.

Health Reimbursement Account: New this year - \$250 reward is yours!

Employees enrolled in the Advantage Health Plan on January 1, 2009 will automatically receive a \$250 Health Reimbursement Account (HRA). This includes non-state employees and retirees who receive an employer contribution.

This HRA is in recognition of the wise health care decisions that Advantage members made, which resulted in lower claims costs. This HRA is your reward!

An HRA works much like the medical-dental expense account (MDEA) currently available to SEGIP members. These dollars are used for

much the same expenses covered by the MDEA and are accessed through your Benny™ debit card or through the regular pre-tax paper reimbursement process.

The main difference is that, unlike the MDEA, the HRA allows dollars to carry over from year-to-year. So if you do not spend these dollars in 2009 they will be there for you in 2010.

The advantage of the MDEA is the employee can contribute up to \$5000 annually in a pre-tax account to cover anticipated uncovered medical/dental expenses. An HRA

allows only for employer contributions.

You can have both an HRA and the MDEA. The debit card will first draw from your MDEA, if you elect one, and then from your HRA balance.

You will be able to access these dollars through the Benny™ card which will be mailed to you by early January 2009. All you have to do is make sure your mailing address is up-to-date in Employee Self Service.

Congratulations to the many wise Advantage members who have earned this reward!

Benny™ Debit Card: New this year - Quick and easy access to your money

SEGIP is rolling out a convenient new tool for state employees in 2009: a pre-tax medical-dental debit card known as the Benny™ card.

This debit card allows you to pay for eligible products and services from the available balance in your employer sponsored medical-dental expense account (MDEA) or a health reimbursement account (HRA)—including the \$250 HRA.



Pairing your MDEA or HRA with a debit card will make accessing your

money faster and easier. You'll be issued a debit card if you have either an MDEA or an HRA.

The Benny™ card allows real time reimbursement for the same qualified medical-dental expenses that you are now reimbursed through a paper reimbursement process. By using a debit card, you won't have to wait to get a check in the mail.

The card can be used at participating discount and grocery stores, pharmacies, hospitals, and vision

centers, as well as at doctors' and dentists' offices.

You can check account balances or details anytime online or with a quick phone call.

There is no need to apply. A card will be sent to your mailing address by early January 2009.

Pre-tax advantage

Pre-tax accounts are an important part of your benefit package. They allow you to pay for qualified medical-dental expenses with pre-tax dollars.

Is your dependent your dependent? Take a minute to review

It is important to know who your eligible dependent is for insurance purposes. You might be surprised to learn that your dependent is not your dependent.



What makes a dependent a dependent, for insurance purposes,

is your union contract or compensation plan, and not your family tree.

Covering ineligible dependents can have severe consequences. Employees with ineligible dependents could be subject to discipline and may

have to pay back insurance claims paid on behalf of the ineligible dependent.

Take a few minutes during Open Enrollment to ensure that you have enrolled only eligible dependents. This chart explains who is an eligible dependent.

Dependent	Eligibility Terms
Biological Children	<ul style="list-style-type: none"> to age 19 unmarried
Adopted children	<ul style="list-style-type: none"> adopted or placed with you for adoption to age 19 unmarried
Step Children	<ul style="list-style-type: none"> to age 19 and unmarried lives with you is dependent upon you for his/her principal support and maintenance you must be married to the child's parent
Foster Children (or ward)	<ul style="list-style-type: none"> to age 19 and unmarried lives with you is dependent upon you for his/her principal support and maintenance ineligible for a government sponsored health plan you must complete a Foster Child Certification
Grandchildren	<ul style="list-style-type: none"> placed in your legal custody, or legally adopted, or the dependent child of your dependent child and to age 19 and unmarried lives with you dependent upon you for her/her principal support and maintenance
Student	<ul style="list-style-type: none"> any child as defined above, to age 25 if a full-time student at an accredited school 60% of full-time due to illness, injury, or physical or developmental disability documented by physician
Disabled Children	<ul style="list-style-type: none"> any age or marital status is incapable of self-sustaining employment by reason of development disability, mental illness, or physical disability, and is dependent upon you for his/her principal support and maintenance
QMCSO	<ul style="list-style-type: none"> your children who are required to be covered by reason of a Qualified Medical Child Support Order
Spouse	<ul style="list-style-type: none"> you must be legally married may not be legally separated limited eligibility for working spouses

Change in status: You must notify SEGIP within 60 days of your divorce or legal separation from a covered spouse or if a covered dependent loses eligibility under the terms of your labor contract or compensation plan. An eligible dependent must be added within 30 days of a life event.

It is your responsibility to notify SEGIP of any changes in a dependent's status.

STATE EMPLOYEE GROUP INSURANCE PROGRAM

Minnesota Management & Budget
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Open Enrollment
November 5 – 18, 2008

We're on the Web at:
www.doer.state.mn.us

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U.S. POSTAGE
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ST PAUL MN

Creditable coverage

People who enroll in Medicare Part D after age 65 may find themselves paying higher premiums than those who enrolled before age 65. To avoid higher premiums you must be able to prove that you had continuous creditable coverage since age 65.

The MN Advantage Health Plan offers creditable coverage. Creditable coverage means that the amount the Advantage Plan expects to pay for prescription drugs is as much, or more than, what the standard Medicare prescription drug coverage will pay.

Late enrollees will need to show proof of continuous coverage to avoid paying higher premiums. The Advantage Plan's notice, or proof, of creditable coverage is available to you on the Minnesota Management & Budget Website.

Confirmation statements: New this year

SEGIP offers a secure and seamless open enrollment process. This year it will include a printed confirmation statement of your 2009 insurance benefits that will be sent to your mailing address.

Access the Employee Self Service home page to verify your mailing address. It will take just a moment for you to make sure your information is up-to-date or to make corrections.

During Open Enrollment, make your elections carefully. Be sure to submit your elections transaction when prompted. We recommend that you print a copy of the screen and the elections for your record.

Following Open Enrollment, a "Confirmation of Insurance Enrollment Statement" will be mailed to you. You will receive a statement even if you chose to make no

changes to your elections during Open Enrollment.



Report enrollment inaccuracies by December 15, 2008

Once you receive your confirmation statement, immediately review it for accuracy. You must notify SEGIP in writing of any enrollment inaccuracies by December 15, 2008. Additional information about how to report enrollment inaccuracies will be included on your confirmation statement.

Your confirmation statement is a valuable acknowledgment of your insurance benefits for 2009.

Prepared by:
The Employee Insurance Division
of Minnesota
Management & Budget

FIND MORE INFORMATION AT: WWW.DOER.STATE.MN.US