Foryan Benefit

General Audience Edition | May 2024

Public Employees Benefits Board (PEBB) Program

Looking forward to more options for PEBB vision coverage

During open enrollment this fall, you will have a new opportunity to choose your vision plan. The PEBB Program is giving you more choice by providing standalone vision plan options. This means your routine vision coverage will be separate from your medical coverage starting January 1, 2025. Treatment for medical conditions such as infection, eye diseases like glaucoma, and eye injuries will continue to be covered under your PEBB medical plan.

Are you enrolled in Medicare? Vision options for members enrolled in Medicare are not changing.

What vision plan options will I have?

You will be able to choose from three vision plans:

- Davis Vision by MetLife
- EyeMed Vision Care
- MetLife Vision

Each plan will have a network of providers that offers services like routine eye exams, eyeglass frames and lenses, contact lenses, and discounts on treatments like LASIK. All plans will offer private practice optometrists and ophthalmologists in Washington State and nationwide, but each plan's network will include different providers. These plans were chosen to cover as many counties in Washington as possible, but not all plans will have network providers in all areas. In addition to private practice locations, each plan will offer a selection of retail locations, such as Costco Optical, Walmart, Sam's Club, America's Best, Visionworks, LensCrafters, Pearle Vision, and Target Optical.



What should I think about when choosing a vision plan?

- Look at the plan's network coverage to see if there are vision providers available in your area. If you already have a vision provider, be sure to check with the plan (not the provider) to see if the vision provider you want is in the plan's network. You can call the vision plan's customer service number or use their online provider directory.
- **Look at the benefits** and level of coverage each plan provides. Many of the benefits will be similar between plans, so think about what benefits you generally use to see which plan is the best fit for you.

What will it cost?

Like dental coverage, vision coverage is an employer-paid benefit. This means that employee subscribers will not pay a monthly premium for vision coverage, as long as their employer offers the benefit.

PEBB Continuation Coverage subscribers will pay a monthly premium if they choose to enroll in vision coverage. Premiums for 2025 will be available in October.

When can I learn more?

Watch for more information about the options for your PEBB vision coverage as open enrollment comes closer. Plan comparisons and instructions for how to enroll will be posted on HCA's website in October and mailed to you at least a month before open enrollment begins to ensure you have time to make an informed choice. The October *For Your Benefit* newsletter will also provide more information and resources.



Save the date! Open enrollment will start October 28 and end November 25.

We've heard your concerns about the challenges of making open enrollment changes at the end of November and during the Thanksgiving holiday. To make sure you have help and support when making changes, the PEBB Program is moving open enrollment to **October 28 through November 25, 2024**. Make all your changes *before* Thanksgiving!

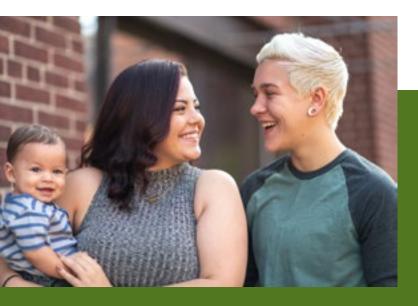
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Benefits 24/7 is here!

Benefits 24/7 launched in January and replaced PEBB My Account. You can use it to access your PEBB benefits anytime. Benefits 24/7 is there when you need it, such as when you have a change in employment or when you experience a life event (for example, getting married or the birth of a child).

We encourage you to use Benefits 24/7. However, it is not required. Paper forms will continue to be available to make changes to your benefits.



Welcoming a new member to your family?

When you welcome a new member to your family, through birth, adoption, or marriage, use Benefits 24/7 to add them to your coverage. This type of life event is called a special open enrollment (SOE).

You have **60 days** to add your dependent and provide verification documents. **If adding them during or around open enrollment, make sure to add them as an SOE change, not as an open enrollment change,** so their coverage is effective as soon as the SOE change allows. Open enrollment changes do not go into effect until January 1 of the following year, which may delay coverage for your dependent. **Note:** Pierce County, WSU, and UW employees can use Benefits 24/7 to enroll in or defer PEBB retiree insurance coverage. For all other changes, continue to use Workday.

Set up your account

Your PEBB My Account login no longer works. You will need to create a new login for Benefits 24/7 using SecureAccess Washington (SAW). If you already have a SAW account, you don't need to create a new one.

Familiarize yourself with Benefits 24/7 before open enrollment. Visit **benefits247.hca.wa.gov** to get started.

Tips to make changes to your coverage a smooth experience

- Your newborn is automatically covered under your medical plan for the first two weeks after birth. After that, you need to add them as a dependent on your insurance for their coverage to continue.
- Add your dependent to your coverage as early as possible. If you do not add them and provide verification documents within 60 days, you will lose your opportunity to enroll them on your coverage until the next open enrollment.
- Check your mail and email regularly until you receive confirmation that your new family member is enrolled in coverage. More information may be required.
- If you need help, employees should contact their payroll or benefits office and PEBB Continuation Coverage subscribers should contact the PEBB Program.

Visit **hca.wa.gov/erb**, select your member type (Public employees or PEBB Continuation Coverage), and then select *Verify and enroll my dependents* for more information.

You can make a difference. Here's how.

Every Washingtonian has access to it, and anyone might one day be in the position of giving it to save a life. What is *it*? Naloxone, also known by the brand name, Narcan, is a fast-acting medication that can reverse the effects of opioids and stop an overdose. Individuals who use opioids are at risk of overdose. According to the National Institute on Drug Abuse, opioids contributed to more than 100,000 deaths due to overdose in the United States in 2021. You can help by knowing the facts, carrying naloxone, and caring for your community.

Know the facts

Opioids are a type of drug typically used to treat pain. One of the most common and dangerous opioids is fentanyl, which is 100 times stronger than morphine. An amount equal to 10 to 15 grains of table salt can be lethal when ingested. Fentanyl can be given as a prescription by a medical professional, but when fentanyl is made illegally and added to street drugs, it creates a dangerous situation when someone is not aware they are ingesting fentanyl, or how much. The risk for overdose can increase when combined with alcohol or other drugs.

An overdose can occur within minutes. When someone is overdosing, they will lose consciousness and become unresponsive, have labored breathing or stop breathing, and their skin may start to look blue or grey (this will be most noticeable around their lips). Check if someone is responsive by asking them loudly, "Are you ok?" If they do not respond, call 911 and give them naloxone.

If you suspect someone has overdosed, it is always best to give them naloxone. It is safe to use, does not cause negative side effects even if the person has not ingested opioids, and does not interfere with further medical treatment. Naloxone works by blocking opioid receptors and can stabilize the person while you wait for emergency personnel to arrive. Its effects are likely to wear off before the effects of opioids, so it is important to call 911 right away to make sure the person gets the care they need and avoid a second overdose.

Keep naloxone in close reach

There is a standing order that acts like a prescription for naloxone for anyone in Washington State. **You can get naloxone for free**. Visit **StopOverdose.org** to find a location near you, or request naloxone to be mailed to you by the People's Harm Reduction Alliance at **phra.org/naloxone**. Naloxone is also available for purchase from many pharmacies in Washington and may be covered by your insurance, subject to cost-sharing. Once you have naloxone, be sure to keep it close by.

Don't be fooled by these common myths

Myth: I can get in trouble.



Fact: You are protected under Good Samaritan Laws. These laws allow you to volunteer aid to someone in need as you are best able, without risk of blame.

Myth: If someone wakes up from overdosing, they may be violent.



Fact: After waking up, someone may be confused, weak, agitated and possibly angry, and feel unwell (and will possibly experience nausea and vomiting) because of sudden withdrawal.

Myth: Naloxone is only for street drugs.



Fact: Someone who takes medically prescribed opioids should have naloxone on hand just in case there is an overdose in their home.

Care for your community, near and far

Remember to care for yourself. Witnessing an overdose or having a loved one who is at risk of an overdose can be challenging. Visit **hca.wa.gov/bh-pebb** to see the resources available to you through your medical plan.

There might come a time when you can help a family member, a neighbor, or perhaps a community member you have never met before by giving a life-saving dose of naloxone. While naloxone is something you hope to never need to use, taking the time to learn how to use it and keeping some nearby in your bag, car, or medicine cabinet could make all the difference.

For more information about how to give a dose of naloxone, or to learn about the risks of fentanyl, visit Friends for Life at **wafriendsforlife.com**.

Preparing for retirement

Preparing for retirement can be overwhelming. Before deciding when you want to retire, you should understand how several factors affect your health care benefits.

Am I eligible?

Generally, retiring or separating employees of state agencies, higher-education institutions, and PEBB-participating employer groups are eligible. Additionally, surviving dependents or spouses and full-time elected or appointed officials may be eligible.

If you are eligible for PEBB retiree insurance coverage but you have other qualifying coverage, you may defer (postpone) your enrollment. Deferring keeps your right to enroll later. To learn more about how to defer coverage, visit hca.wa.gov/defer-coverage.

Limited time to act!

You must request to enroll in or defer enrollment **no later than 60 days** after your employer-paid, COBRA, or continuation coverage ends, or you will lose your right to enroll later.

How can I prepare?

The process of retiring should begin about six months before you plan to stop working, if not earlier.

Six months before retirement

If you have a Department of Retirement Systems (DRS) retirement plan, contact DRS to request an estimate of your benefit. If you don't have a DRS retirement plan, contact your employer to determine if you have a retirement plan and, if so, when you will be eligible to retire from the plan.

Three months before turning 65

You or any covered dependents who will soon turn 65 must enroll in both Medicare Part A and Part B to stay enrolled in a PEBB retiree health plan. Note, if you are still working and on employee coverage, you can defer your Part B enrollment with Social Security. You're encouraged to apply for Medicare three months before turning 65. To enroll, call the Social Security Administration at 1-800-772-1213 or TTY: 1-800-325-0778, or visit **medicare.gov**.

What if I retire before or after age 65?

If you retire **before** age 65, you can enroll in a PEBB retiree non-Medicare medical plan until you are eligible to enroll in Medicare Part A and Part B.

If you retire **after** age 65, you should already have Medicare Part A. You will need to enroll in Medicare Part B to enroll in a PEBB Medicare plan.

Submit proof of Medicare

Once you or your dependent enroll in Medicare Part A **and** Part B, you must send us proof of the enrollment by sending either:

- A copy of the Medicare card or entitlement letter showing the effective date of Medicare Part A and Part B, or;
- A copy of the Medicare denial letter from the Social Security Administration

You will have a special open enrollment for turning 65 or upon retirement and you will be able to enroll in a PEBB Medicare plan. There are many plans to choose from to fit your and your family's needs.

60 days before retirement

Submit your retirement application to DRS. You should apply for PEBB retiree insurance coverage using Benefits 24/7 at **benefits247.hca.wa.gov** (or the *PEBB Retiree Election Form*, form A) and submit supporting documents, including proof of Medicare.

What PEBB benefits are available?

Choosing your retiree coverage is an important decision. This is especially true if you have ongoing care, like prescriptions or treatment of a chronic condition. As a retiree, your PEBB benefits include medical (including vision) and dental coverage. You may also be eligible for term life insurance. You must enroll in medical coverage to enroll in dental. You cannot enroll in dental or vision coverage only.

When selecting PEBB medical or dental plans, your options are based on eligibility and where you live. You should consider which plans are available in your area and whether you or any eligible dependents you wish to enroll are already enrolled in Medicare Part A and Part B. If you cover eligible dependents, everyone must enroll in the same medical and dental plans (with some exceptions, based on eligibility for Medicare Part A and Part B).

Retirement resources

Preparing for retirement webpage: hca.wa.gov/prepare-to-retire

Retiree webpages: hca.wa.gov/pebb-retirees

Retiree webinars: hca.wa.gov/retiree-webinars

Request an enrollment guide or ask enrollment and eligibility questions: Send us a message using HCA Support at **support.hca.wa.gov** or call us at 1-800-200-1004 (TRS: 711).

Who is HCA?

The Health Care Authority (HCA) is the state agency that obtains health care for public employees, school employees, and retirees. We also support free or low-cost health care, including Apple Health (Medicaid), and behavioral health and recovery. We're honored to be the state's largest health care purchaser and to facilitate health care for a third of Washington's residents. We strive to provide equitable, high-quality health care and behavioral health prevention, crisis, and recovery supports through innovative health policies and purchasing strategies to support a healthier Washington.

What is PEBB?

The Public Employees Benefits Board (PEBB) Program provides access to benefits such as medical, vision, dental, and life insurance for employees of state agencies, higher education, and participating employer groups (like many hospital districts, counties, etc.). We also provide health care benefits to continuation coverage subscribers to help them temporarily continue their coverage when they are no longer employed, and coverage for former employees in retirement. The program is governed by a board that guides decision making and policies, including those that affect eligibility and the types of benefits we provide. The members of the board are appointed by the Governor.

Where does Regence or Kaiser Permanente fit in?

While the PEBB Program works to make sure there are plan choices available for coverage, insurance carriers like Regence BlueShield or Kaiser Permanente administer the benefits. They are responsible for the day-to-day activities like issuing ID cards, processing claims, and preauthorizing services. This makes them the best resource for questions about your PEBB plan coverage or when you need to check if a provider is in network.



When a provider leaves a plan's network

PEBB health plans have insurance carriers that administer the medical plans, such as Regence BlueShield, Premera Blue Cross, Kaiser Permanente, or UnitedHealthcare. Part of administering the plans includes managing the provider networks, including hospitals, physicians, and pharmacies who are contracted with the plan to provide services. All plan carriers in Washington State are required to maintain their provider networks so there are enough providers to ensure members have reasonable access to covered services without undue delay.

How will I know if my provider may leave my plan's network?

The plan carriers and the providers, like other businesses, have contracts with expiration dates. That means they routinely have to negotiate new contract terms. Sometimes these negotiations take more time and can come very close to the contract expiration date. The contract negotiations are between the plan carrier and the provider and do not include HCA.

The Office of the Insurance Commissioner (OIC) requires the plan carriers to notify affected members 30 days

before the contract ends. The notice tells members that the provider may be leaving the network and provides resources for finding a new in-network provider. If an agreement is reached, the carriers send a follow-up notice to the affected members.

What if I have concerns about the network change?

If you have been notified of a potential network change and have concerns, you should contact your plan to voice your concerns and seek assistance if needed. Contact information should be provided in the notice you get from the plan carrier. You can also find plan contact information at hca.wa.gov/erb. Select your member type (public employees or PEBB Continuation Coverage), and then select *Contact the plans* under *Get help*.

Although HCA monitors network negotiations and will sometimes provide additional information when the network change could affect members, we cannot influence the outcome of potential network changes.

Outsmart your smartphone

Your cell phone dings and you check who texted or what news is latest to be announced. You pop into your favorite social platforms to see what your friends are up to and notice how many likes your latest post received. You have a question and immediately reach for the device that connects you to a world of information. The bright colors are enticing and the results, instant. It's understandable that so many of us have a habit of keeping our smartphones in our hands throughout the day.

How smartphones affect us

You're not imagining it; you get a boost to your mood every time you reach for your phone. Our bodies release dopamine, a "feel good" hormone, which is part of our body's reward system. This effect is so strong that it leads the average

adult in the United States to spend two to four hours per day engaging with their phone rather than with the people or environment around them. However, this dopamine release has short-lived effects, leaving you reaching for your phone a short while later.

Smartphones not only have been linked to our bodies producing dopamine, but the stress hormone cortisol. This can lead to a sense of anxiety when we cannot use our phone (has your phone battery ever been close to zero and you are away from a charger?). Or we can feel stressed by the content on our phones; after all, no one wants to read every news story or actively engage in conversation from sunrise to sunset, day after day.

At some point, you just need a break.



There are ways to make your phone less appealing to use, and to set limits on the amount of time you spend on your phone. Here are some useful strategies to help you get some of your time back.

Set a realistic goal. Many of us likely cannot avoid our phone all day. We may have loved ones who need to reach us. or we might need to check our email. Any effort to reduce phone usage is an important step toward reclaiming vour time.



Change your phone to **gray tones**. You can set your

phone's display to grayscale. Less color might make it less appealing to spend time on your phone. Many smartphone users have found this strateqy to be especially helpful.



you allow.

time together?

Let your phone help you. Download an app or adjust your phone's settings to limit how much time you spend on apps per day.

Disable notifications

Reduce temptations to

look at your phone by being

Be mindful and notice how

you spend your day. Did you

suddenly have more time to

selective about which notifications



Make a pact. Sometimes, it is easier to face a challenging task when we face it together. Ask a friend, partner, or family member

to join your effort.



Begin and end your day phone free. When you first wake up, avoid the temptation to immedi-

ately check your phone and instead enjoy a peaceful and healthy breakfast. Also, avoid letting your phone be the last thing on your mind before bed. You just might find you enjoy the time you get back in your day when your phone spends less time in your hands.

Earn 50 SmartHealth points for completing the activity, "Outsmart your smartphone." Visit **smarthealth.hca.wa.gov**.

read a book or write in your journal? Did

you and your family enjoy more present



Know your options if you're unable to work due to illness or injury

If you're unable to work for an extended period of time, you may have a benefit that will pay a portion of your salary. This benefit is called long-term disability (LTD) insurance and is administered by Standard Insurance Company. The PEBB Program offers employer-paid and employee-paid LTD insurance. If your employer offers this benefit, employer-paid LTD coverage is included at no cost to you and covers a maximum of \$240 per month. You will also be automatically enrolled in employee-paid LTD coverage, which covers 60 percent of your predisability earnings. At any time, you can reduce your coverage level or decline employee-paid coverage. If you decide to reenroll after declining LTD coverage, you will have to provide evidence of insurability (EOI).

If you work for a city, county, port, tribal government, water district, hospital, etc., contact your payroll or benefits office to see if LTD coverage is part of your benefits package.

How do I know if I am enrolled in employee-paid LTD coverage?

Visit Benefits 24/7 at **benefits247.hca.wa.gov**. Once you have logged in, select *Supplemental coverage* from the dashboard and scroll down to see if you are enrolled and at what level of coverage. This will also show your monthly premiums and monthly benefit should you need to take advantage of this benefit.

Need help logging in to Benefits 24/7? See "Benefits 24/7 is here!" for more information about our new online enrollment system.

What do I need to do to file a claim?

If you have LTD coverage and need to file a claim or have questions about the benefit, visit Standard's website at **standard.com/mybenefits/wash-state-hca-pebb** or call 1-800-368-2860.

To learn more about LTD eligibility and enrollment, visit the HCA website at **hca.wa.gov/pebb-ltd**.

HCA complies with all applicable federal and Washington State civil rights laws and is committed to providing equal access to our services. If you need an accommodation or require documents in another format, please call 1-800-200-1004 (TRS: 711) or visit hca.wa.gov/about-hca/nondiscrimination-statement.

La HCA cumple con todas las leyes vigentes federales y del Estado de Washington sobre derechos civiles y tiene el compromiso de ofrecer un acceso equitativo a nuestros servicios. Si necesita alguna facilidad, o si requiere documentos en otro formato o idioma, llame al 1-800-200-1004 (TRS: 711) o visite **hca.wa.gov/about-hca/nondiscrimination-statement**.

Управление здравоохранения (HCA) соблюдает все применимые федеральные законы и законы штата Вашингтон в отношении гражданских прав и обязуется обеспечивать равный доступ к своим услугам. Если вам потребуются специальные услуги или документы в другом формате или на другом языке, позвоните по телефону 1-800-200-1004 (TRS: 711) или посетите сайт hca.wa.gov/about-hca/nondiscrimination-statement.



PO Box 42684 Olympia, WA 98504-2684

Here's your **FOLYOUTBENEfit** newsletter

Save the date!

Open enrollment is moving to October 28 through November 25.