

December 22, 2021

The following email was sent to agency benefits coordinators today.

Today's Wednesday communication is the end of the week ABC email as state offices are closed on Friday.

Cigna Telehealth Information for Dec. 10-11 Storm Victims

Cigna members impacted by the Dec. 10-11 storms are able to get one free telehealth consult through our carrier-sponsored MDLive program. Please share the information below with your impacted members.

Cigna MDLive Telehealth

MDLIVE has agreed to offer medical consults to employees and families impacted by the tornadoes that hit Tennessee and surrounding areas last week. The following promo code has been generated and is active now. It is good for one free consult per person through the end of January 2022:

CignaTNReliefMed for Medical consults

Materials and Communications Updates

Important Delta Dental ID Cards Information

Delta Dental has advised that the customer service telephone number on the back of the 2022 member ID cards is incorrect. Delta Dental will reissue member ID cards with the correct phone number and will include the **attached** letter explaining the error. The correct number is 800.552.2498.

ABC Guides

The ABC Guides found on the [ABC webpage](#) under **ABC Guides by plan type** (State, Higher Education, Local Education and Local Government) have been updated for 2022. You'll see a PDF version and a digital interactive version of each guide for your use.

BA and Vendor Holiday Hours

State offices and the BA Service Center will be **closed Thursday, Dec. 23, Friday, Dec. 24, Friday, Dec. 31, 2021 and Monday, Jan. 3, 2022**, for the holidays. The holiday hours for our vendors are below.

ActiveHealth Clinical and Engagement Specialists	Friday, Dec. 24 – closed Friday, Dec. 31 – closed
BlueCross BlueShield of Tennessee (medical – Network S and P)	Thursday, Dec. 23 – closed Friday, Dec. 24 – closed Friday, Dec. 31 – closed Monday, Jan. 3 – open, regular business hours
Cigna (medical - LP and OAP)	Customer Service will be available 24/7/365
Cigna Offices	Offices

	Friday, Dec. 24 – closed Friday, Dec. 31 – closed
Cigna DHMO (Prepaid) Cigna Offices	Customer Service will be available 24/7/365 Offices Friday, Dec. 24 – closed Friday, Dec. 31 – closed
CVS Caremark (pharmacy)	Customer Service will be available 24/7/365
Davis Vision	Friday, Dec. 24 – 8 a.m. – 6 p.m. ET Saturday, Dec. 25 – closed Friday, Dec. 31 – 8 a.m. – 8 p.m. ET Saturday, Jan. 1 – closed
Delta Dental (DPPO) Offices	IVR system available 24/7 Friday, Dec. 24 – closed Monday, Dec. 27 – closed Friday, Dec. 31 – closed Monday, Jan. 3 – closed
MetLife Dental (DPPO) (2021)	Friday, Dec. 24 – closed Saturday, Dec. 25 – closed Friday, Dec. 31 – closed Saturday, Jan. 1 – closed
MetLife Disability (state/higher ed)	Friday, Dec. 24 – closed Saturday, Dec. 25 – closed Friday, Dec. 31 – closed Saturday, Jan. 1 – closed
Optum Financial (HSA, FSAs) holiday hours for members	Friday, Dec. 24 – open until 6 p.m. CT Saturday, Dec. 25 – closed Friday, Dec. 31 – open, regular hours Saturday, Jan. 1 – open, regular hours
Optum Financial (HSA, FSAs) Account Services Team	Friday, Dec. 24 – closed Saturday, Dec. 25 – closed Friday, Dec. 31 – closed Saturday, Jan. 1 – closed
Optum Health (EAP/behavioral health)	Call Center open 24 hours a day, 7 days week
UMR	Friday, Dec. 24 – closed Friday, Dec. 31 – closed
Securian Financial (life insurance - state/higher ed)	Friday, Dec. 24 – closed Friday, Dec. 31 – open, regular hours
Unum (former life insurance vendor – state/higher ed)	Friday, Dec. 24 – closed Monday, Jan. 3 – closed

BA does not plan to send out an ABC email next week. We hope you have a very Merry Christmas and Happy New Year!

Attachment: Delta Dental Correction Sample Letter

End of message



Delta Dental of Tennessee
240 Venture Circle
Nashville, TN 37228
Ph: (800) 552-2498



December 22, 2021

Dear Delta Dental of Tennessee Subscriber:

Welcome to your new Delta Dental of Tennessee plan with the State of Tennessee Group Insurance Program. You may have already received an ID card in the mail for your new plan. We have discovered that the customer service phone number was listed incorrectly on that card. Because we want to be sure you have the most accurate information available, we are enclosing a corrected ID card. Please discard the old one.

We apologize for the confusion and look forward to helping you smile. If you have any questions, please contact us at 1-800-552-2498, 7 a.m. to 5 p.m. CT.

Sincerely,

Your Delta Dental of Tennessee Team

SAMPLE



Tennessee.DeltaDental.com/StateofTN

@DeltaDentalTN



December 17, 2021

The following email was sent to agency benefits coordinators today.

December ABC Conference Call Notes

Attached are the combined conference call notes from the Dec. 14 ABC conference calls.

Dec. 11 Storm Victim Benefits Information

Attached is information you can share with any members impacted by the recent Dec. 11-12 storms and tornadoes. Benefits information includes EAP, pharmacy and dental benefits available for members. The Here4TN EAP Natural Disaster flyer is also **attached**.

Materials and Communications Updates

Important Network Update

We have learned that [Lauderdale Community Hospital in Ripley, Tenn.](#), reached an agreement with BlueCross BlueShield and will **remain in BCBST Network S for the remainder of 2021, and the hospital will be in both BCBST Network S and Network P for the 2022 plan year.** *Please share the following information with your impacted members:*

- **Lauderdale Community Hospital Notice for BlueCross BlueShield Network S Members**
[Lauderdale Community Hospital in Ripley, Tenn.](#), will remain in BCBST Network S for the remainder of 2021, and the hospital will be in both BCBST Network S and Network P for the 2022 plan year. You'll find an updated [All Networks Hospital list](#) on the ParTNers website on the Carrier Information webpage. If you have questions, call BCBST at 800.558.6213, M-F, 8 a.m. – 6 p.m. ET.

2022 ID Cards (all plans)

As a reminder, this year, **all members will get new 2022 medical, pharmacy and behavioral health ID cards.** In addition to all Delta Dental members receiving new 2022 dental cards, Cigna informed us that ALL DHMO prepaid dental plan members will receive new cards for 2022. Davis Vision will send new ID cards to new enrollees and to anyone with a name change. Members should receive their new cards prior to Jan. 1, 2022. If members do not receive their new cards, they can call the carrier/insurance company directly to request a new card. The contact information for our carriers is on the [Customer Service webpage](#).

The Tennessee Plan ID Cards (all plans)

New ID cards were mailed to members in **The Tennessee Plan**. The new ID cards have UMR and ParTNers logos on them. "POMCO" is no longer on the ID cards because POMCO is now UMR. The Tennessee Plan benefits have not and will not be changing as result of the acquisition, platform and branding change. The difference in the ID cards is simply the removal of the POMCO logo to accurately reflect the legal name, UMR.

Delta Dental DPPO Materials

The following dental DPPO documents have been posted or updated on the [ParTNers Publications webpage](#):

- Delta Dental DPPO Benefit Summary (2022)
- Delta Dental DPPO Certificate of Coverage (effective 1/1/2022)

BA and Vendor Holiday Hours

State offices and the BA Service Center will be **closed Thursday, Dec. 23, Friday, Dec. 24, Friday, Dec. 31, 2021 and Monday, Jan. 3, 2022**, for the holidays. The holiday hours for our vendors are below.

ActiveHealth Clinical and Engagement Specialists	Friday, Dec. 24 – closed Friday, Dec. 31 – closed
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Cigna (medical - LP and OAP) Cigna Offices	Customer Service will be available 24/7/365 Offices (note correction) Friday, Dec. 24 – closed Friday, Dec. 31 – closed
Cigna DHMO (Prepaid) Cigna Offices	Customer Service will be available 24/7/365 Offices (note correction) Friday, Dec. 24 – closed Friday, Dec. 31 – closed
CVS Caremark (pharmacy)	Customer Service will be available 24/7/365
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UMR	Friday, Dec. 24 – closed Friday, Dec. 31 – closed
Securian Financial (life insurance - state/higher ed)	Friday, Dec. 24 – closed Friday, Dec. 31 – open, regular hours
Unum (former life insurance vendor – state/higher ed)	Friday, Dec. 24 – closed Monday, Jan. 3 – closed

Attachments: Benefits and Resources for Storm Victims
Here4TN EAP Natural Disaster Flyer

End of message



Benefits and Resources for Members Affected by December 10-11 Storms and Tornadoes

Following the recent devastating storms and tornadoes, we want to let you know ParTNers for Health offers resources to help state and higher education employees, and our local education and local government health insurance plan members.

If you have questions, you can reach out to our Service Center, M-F, 8 a.m. to 4:30 p.m. CT, at 800.253.9981 or visit tn.gov/ParTNersForHealth and click the [blue Questions button](#) on the homepage or click the [green "Help" button](#) to chat during business hours.

EAP Services

If you need it, Here4TN is here for you. Through EAP, you can receive five counseling sessions at no cost. We also offer many referral services, such as:

- Financial assistance
- Legal consultation
- Help applying for disaster relief
- Temporary housing assistance
- Recommendations for home repair contractors
- Transportation assistance
- Help understanding how to replace important documents
- And more

Please give us a call anytime, day or night, at 855-Here4TN (855.437.3486) or go to Here4TN.com.

Pharmacy Services

For members in affected areas with prescription needs, Customer Care will approve one-time emergency refills of a 10-day supply of medication. Impacted members within the emergency area taking specialty medications that are filled by the CVS Caremark Specialty Pharmacy will be contacted to discuss alternate delivery arrangements, if needed. The use of courier services will be engaged as necessary. If an override is needed for a specialty medication, specialty operations will contact account management for approval.

Members who have questions about a medication delivery should call Customer Care at the toll-free number on their prescription ID card, 877.522.TNRX (8679).

Telehealth (BCBST PhysicianNow or Cigna MDLive)

- **Cigna members** can use MDLive telehealth (virtual medical services) benefits.
 - Go to MyCigna.com - log in and click the **Connect Now** button, or
 - myCigna app – click the Find Care & Costs button and select **Talk to a Doctor 24/7, or**

- Call 888.726.3171
- **BlueCross BlueShield members** can use PhysicianNow telehealth (virtual medical services) benefits.
 - Log in at bcbst.com/members/tn_state/ and select **Talk With a Doctor Now**, or
 - BCBSTN app – click the **Talk with a Doctor** button, or
 - Call 888.283.6691

MetLife DPPO Dental

MetLife will waive the replacement limit in the event of a natural disaster, whereas a prosthesis is lost for an insured member under the MetLife Dental DPPO plan. This only applies during the remainder of calendar year 2021 as the contract with MetLife expires as of Jan. 1, 2022.

Other Resources

Tennessee Emergency Management Association has created a [recovery resource page](#) for those affected by the severe weather.

Find support when you need it



When a big event affects our lives and our communities, it's understandable to feel unsettled and unsure about the future. It's important to remember that we're all in this together, and resources are available to help with whatever you are experiencing.

Get 24/7 support by phone or online:

855-Here4TN
(855-437-3486)
Here4TN.com

Connect with Here4TN to find tools and resources to help you navigate this difficult time. **Help is available for the following:**

- Finding financial assistance
- Applying for disaster relief
- Understanding how to replace important documents
- Connecting you to a counselor to talk about what you've experienced
- And more

Tips to keep you and your family safe

- Listen to local officials for updates and instructions; evacuate if necessary.
- Check in with family and friends by texting or using social media.
- Return home only when authorities indicate it is safe.
- Watch out for debris and downed power lines.
- Photograph the damage to your property in order to assist in filing an insurance claim.

Things you can do to recover from a traumatic event

Talk to someone. Reach out to friends or family for support. It's one simple way to help process a natural disaster.

Choose when to connect. Disconnecting from media may give you time to focus on important things — like your health or stress management.

Keep things in perspective. Try to find something you've learned from the negative experience. It may be helpful to gain a broader perspective.

Focus on your feelings. Acknowledge your feelings as they occur to you. Self-awareness is an important first step in learning to manage your feelings.

Creating a communication and action plan

Be prepared for the future by putting together a family communication and action plan. This helps you understand how to contact one another and reconnect in case you get separated, or in case the internet or mobile phones are not available.

1. Collect contact information for everyone in your family and other important information, including doctors, medical facilities, schools and service providers.
2. Share a paper copy of this information with everyone in your family and make sure they carry it with them at all times.
3. Review as a family what you would do to meet up in an emergency. Practice your plan.

For sample plans that you can follow, including plan templates that you can download, visit [ready.gov/make-a-plan](https://www.ready.gov/make-a-plan).

Additional national resources

American Red Cross
(emergency assistance and disaster relief):
[redcross.org](https://www.redcross.org)

Centers for Disease Control and Prevention
(CDC emergency preparedness):
[emergency.cdc.gov](https://www.emergency.cdc.gov)

FEMA
(information about federal assistance):
[fema.gov](https://www.fema.gov)



This program should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room. This program is not a substitute for a doctor's or professional's care. Due to the potential for a conflict of interest, legal consultation will not be provided on issues that may involve legal action against Optum or its affiliates, or any entity through which the caller is receiving these services directly or indirectly (e.g., employer or health plan). This program and its components may not be available in all states or for all group sizes and is subject to change. Coverage exclusions and limitations may apply.

December 10, 2021

The following email was sent to agency benefits coordinators today.

December ABC Conference Calls

The December monthly ABC conference calls will be held Tuesday, Dec. 14. Benefits Administration staff will join you remotely via WebEx.

- Higher Ed – Tuesday, Dec. 14 at 8:30 a.m. CT
- Local Ed – Tuesday, Dec. 14 at 10 a.m. CT
- State – Tuesday, Dec. 14 at 12:30 p.m. CT
- Local Government – Tuesday, Dec. 14 at 2 p.m. CT

Use the webinar (WebEx) login link and instructions in the **attached** agenda or below.

Attached is the **2022 ABC conference call schedule**. The schedule is also posted on the [ABC webpage](#) under Conference Call Notes.

Materials and Communications Updates

PPACA Report Instructions

Instructions for running your PPACA report have been updated and posted on the [ABC webpage](#) under Training. As listed in next week's agenda, we will go over PPACA deadlines during ABC calls.

Reminder - Important Optum Financial End of Year 2021 Payroll Contributions/Payroll for Plan Year 2022 (local ed/local gov only)

Below is information for you on how to process end of year HSA payroll contributions and 2022 payroll contributions.

Contributions for 2021 tax year submitted in 2021	Contributions for 2021 tax year submitted in 2022	Contributions for 2022 tax year submitted in 2021
A file must be uploaded and approved prior to Dec. 28, 2021, at 3:30 p.m. ET. Contribution date must indicate a 2021 pay date.	A file must be uploaded and approved on or after Jan. 1 but prior to April 13, 2022, at 3:30 p.m. ET. Contribution date should reflect a 2021 pay date or if a 2022 pay date is used the tax year field must indicate "Prior".	Files submitted prior to Jan. 1, 2022, must contain a contribution date no earlier than Jan. 1, 2022. Files submitted on Jan. 1, 2022, with a Jan. 1, 2022, contribution date will be available on Jan. 4, 2022.

Local Education or Local Government ABCs who have any questions about this may contact the Optum ABC Support Center at 1.800.294.6620 or accountservices@optum.com.

BA and Vendor Holiday Hours

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Cigna (medical - LP and OAP)	Customer Service will be available 24/7/365
Cigna Offices	Offices Monday, Dec. 27 – closed (Christmas Day observed)
Cigna DHMO (Prepaid)	Customer Service will be available 24/7/365
Cigna Offices	Offices Monday, Dec. 27 – closed (Christmas Day observed)
CVS Caremark (pharmacy)	Customer Service will be available 24/7/365
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	Monday, Jan. 3 – closed
MetLife Dental (DPPO) (2021)	Friday, Dec. 24 – closed Saturday, Dec. 25 – closed Friday, Dec. 31 – closed Saturday, Jan. 1 – closed
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Unum (former life insurance vendor – state/higher ed)	Friday, Dec. 24 – closed Monday, Jan. 3 – closed

End of message

December 3, 2021

The following email was sent to agency benefits coordinators today.

Materials and Communications Updates

Network Update (all plans)

You can share the information below directly with your impacted employees.

NorthCrest Medical Center in Springfield, Tenn., **will be in BlueCross BlueShield Network S through Sept. 30, 2022.** This update does not impact the other networks. NorthCrest will remain in-network for BCBST Network P and Cigna Open Access Plus, and is out-of-network for Cigna LocalPlus.

On the ParTNers website, [find an updated All Networks Hospital List for 2022](#) on the **Carrier Information webpage.**

2022 Member Handbooks Coming Soon (all plans)

BlueCross BlueShield and Cigna member handbooks are being finalized, and we expect electronic versions will be available on the ParTNers for Health website under Publications, and on the BCBST and Cigna member websites by the middle of December. The vendors will begin filling requests for printed copies as soon as their printing contractors can produce those.

- There is a nationwide paper shortage which is impacting the printing industry. While BCBST and Cigna have taken steps to ensure adequate materials will be available to meet all requests, supplies are not unlimited.
- Electronic versions of the handbooks are exact copies of the print versions.
- Also, remember that each welcome packet going out to enrolled member households includes a postage paid postcard individuals can use to request a printed handbook and/or directory. BCBST and Cigna will honor any postcard requests by mailing materials directly to the individual homes.

Keeping these things in mind, please limit your requests for printed handbooks and directories to the number you anticipate you will need for employees asking you to provide printed copies. This will help ensure that anyone who wants printed materials can have them. Thanks for your patience and understanding.

Recently Hired Employees Will Get Two Sets of Health Insurance ID Cards (all plans)

As the year comes to a close, we want to remind you that recently hired employees eligible for coverage in 2021 will get two separate sets of health insurance ID cards. These members will receive cards for 2021 and 2022. Mailings may overlap due to the timing of new enrollments and new cards being generated for the 2022 plan year. The carriers cannot guarantee which card

members will get first, and this may cause some confusion. Impacted members should be reminded to pay attention to the different mailings to ensure that they present the 2021 card for services received between now and the end of the year, and they should use the 2022 card for services after January 1. The following tips will help identify the correct card:

- **All 2022 cards will now have deductible and out-of-pocket maximum information listed on the front of the cards.**
- Cigna ID cards will also have an effective date on the card relative to the year, so the 2022 card will be 1/1/2022.
- BCBST ID cards do not have an effective date; however, they do will have (01/22) on the back lower right-hand corner.

As always, members can call BCBST at 800.558.6213 or Cigna at 800.997.1617 for assistance. Members may also the BA Service Center at 800.253.9981 or 615.741.3590.

Reminder - MetLife Disability Statement of Health Form (state/higher ed only)

For employees who applied for short-term or long-term disability during annual enrollment, there was a delay mailing the Statement of Health forms. The deadline to return the forms has been extended to **Dec. 10, 2021**. Forms were mailed at the end of October. If members did not receive their form, they can call MetLife at 855.700.8001.

Reminder - Optum Webinar (state/higher ed only)

Optum, and their partner MSA, will hold a second finance webinar next week. **Attached** is a flyer you can share with your employees. Employees must register for the session. Here is information you can share about the session:

Join your Here4TN provider, Optum and their partner MSA for the webinar, **The Financial Wellness Playbook**, to learn how to improve your financial wellness.

Session will be held:

Wednesday, Dec. 8, from 11:30 a.m. – 12:30 p.m. CT

This class shares the 10 habits most people practice when they have little financial stress in their lives. The MSA coaching team has done more than a million financial consultations, and the most experienced coaches were interviewed to develop this list of 10 habits. You'll learn to take pride in the habits you're practicing well, and to develop an action plan to address those you'd like to improve.

Click the link in the attached flyer or the link below to register:

<https://register.gotowebinar.com/register/4860105694638113550>

Registration required. You'll be able to view a recording of the webinar after it's completed at Here4TN.com. Go to Member Benefits > click the "Financial Webinars" button.

Questions? Email employee.assistance@tn.gov

Reminder - Important Optum Financial End of Year 2021 Payroll Contributions/Payroll for Plan Year 2022 (local ed/local gov only)

Below is information for you on how to process end of year HSA payroll contributions, and 2022 payroll contributions.

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Local Education or Local Government ABCs who have any questions about this may contact the Optum ABC Support Center at 1.800.294.6620 or accountservices@optum.com.

January Preferred Drug List (all plans)

The January PDL is attached to this original email and will be posted by Dec. 15 on our [ParTNers for Health pharmacy webpage](#). As with each quarterly formulary update, CVS Caremark will mail notification letters to members who are affected by tier changes or drugs becoming non-covered. There are approximately 2,800 members receiving letters about a drug tier change.

Shown below are drugs being added to the PDL, changing to tier 3 (nonpreferred) or being removed from the PDL. Please encourage employees to use the state's specific webpage at info.caremark.com/stateoftn to view the most current version of the drug list, and to review their prescription drug benefit information, request mail service orders and research drug information.

THE FOLLOWING CHANGES TO THE PDL (OR FORMULARY) AS OF Jan. 1, 2022:

Drugs being added to the PDL effective Jan. 1, 2022:	
	<u>Drug name</u>
Brand over Generic:	Soolantra
	Uceris tablet
Tier 2 medications:	Auvi-Q
	Avonex
	Brukiska
	Cimzia
	Enspryng
	Imbruvaca
	Kerendia
	Lupron-Depot Ped
	Myfembree
	Natazia
	Novoseven
	Orladeyo
	Promacta
	Qelbree
	Rozlytrek
	Sevenfact
	Tavalisse
	Vitrakvi
	Wakix
	Wegovy
	Xywav
	Zykadia
	Promacta

Tier 3 medication:	Plegridy
Drugs moving from Tier 2 (preferred brand) to Tier 3 (non-preferred brand) that will have a higher copay effective Jan. 1, 2022:	
	<u>Drug name</u>
	Doptelet
	Reyvow
Drugs not covered effective Jan. 1, 2022, unless prior authorization is approved through the CVS Caremark medical exception process:	
	<u>Drug name</u>
	Adrenaline
	Afinitor
	Aimovig
	Aranesp
	Atripla
	Balcoltra
	Botox
	Cinryze
	Eliquis
	Eliquis starter pack
	Feiba INF
	Haegarda
	Iclusig
	Leukine
	Mulpleta
	Nplate
	Symjepi
	Tavaborole

	Truvada
	Xalkori

Attachment: Financial Wellness Playbook Flyer

End of message

The Financial Wellness Playbook

Join Optum® and their EAP partner for financial education, MSA, for an upcoming session to improve your financial wellness.

Wednesday, December 8, 2021

11:30 a.m. to 12:30 p.m. CST

Register now!

Learn from those who have gone before you! This class shares the ten habits most people practice when they have little financial stress in their lives. The MSA coaching staff has conducted over a million financial consultations, and the most experienced coaches were interviewed to develop this list of ten habits. The goal is for attendees to take pride in the habits they are practicing well, and to develop an action plan to address the habits they would like to improve.

View a recording of the webinar, after it is completed, at [Here4TN.com](https://www.here4tn.com).

Go to Member Benefits > click the “Financial Webinars” button.



This program should not be used for emergency or urgent care needs. In an emergency, call 911 if you are in the United States or the local emergency services phone number if you are outside the United States, or go to the nearest accident and emergency department. This program is not a substitute for a doctor's or professional's care. Due to the potential for a conflict of interest, legal consultation will not be provided on issues that may involve legal action against Optum or its affiliates, or any entity through which the caller is receiving these services directly or indirectly (e.g., employer or health plan). This program and all its components, in particular services to family members below the age of 16, may not be available in all locations and is subject to change without prior notice. Experience and/or educational levels of Employee Assistance Program resources may vary based on contract requirements or country regulatory requirements Coverage exclusions and limitations may apply.

November 23, 2021

The following email was sent to agency benefits coordinators today.

Important update for ABCs regarding query options

We have made a change to the TN_BA219_AETP_INS_ELECTIONS query to help you identify changes made during Annual Enrollment. A new column has been added at the end of the query: Medical Change. The information in this column will tell you if the medical record showing on the query was an actual change. If the value is "Change" that means the employee either changed plans or changed their coverage level for 2022, and the employee will need to be updated in your payroll system. If the value is "No Change" this means the only change was from the 2021 benefit plan code to the new 2022 benefit plan code, and you can ignore that record unless you plan on changing the medical codes in your system to match what we have in Edison.

We have also created two new queries for you to identify dependents on the plan under legal guardianship, custody or conservatorship orders:

- **TN_BA103_LEGAL_GUARDIAN_AGE_18** – This query is run with a date range. It will show you legal guardian dependents who are turning 18 within the date range. BA will use this query to send letters to employees to ask them to complete the new attestation form if the dependent is still eligible under the new plan document guidelines.
- **TN_BA103_LEGAL_GUARDIAN_ALL** – This query shows you all legal guardian dependents on coverage.

2022 Eligibility and Enrollment Guides

The 2022 Eligibility and Enrollment Guides have been updated to follow language approved by the Insurance Committees. The updated guides have been posted on the [Publications webpage](#) by plan, under **Eligibility and Enrollment Guides**.

End of message

November 19, 2021

The following email was sent to agency benefits coordinators today.

Materials and Communications Updates

2022 Eligibility and Enrollment Guides (all plans)

The 2022 Eligibility and Enrollment Guides have been posted on the [Publications webpage](#), under **Eligibility and Enrollment Guides**, titled **2022 Eligibility and Enrollment Guide, by plan type** (State and Higher Education or Local Education or Local Government). We anticipate updating these guides within the next few weeks, and we will notify you when the updated versions are posted on the Publications webpage.

Dependent Verification Document Updated (all plans)

A revised **Dependent Eligibility Definitions and Required Documents PDF** has been posted on the [ParTNers website under Publications and Forms](#), then click on **Health, Dental, Vision and Disability**. Information under a child under age 26 placed for guardianship, custody or conservatorship with the head of contract has been updated. You can find the updated version here:

https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/deva_eligible_docs.pdf

2022 New Hire PowerPoint Presentation (all plans)

The **2022 New Hire PowerPoints and PDFs** have been posted on the [ABC webpage](#) under the plan type headers at the bottom of the webpage (state, local education and local government). You can download the PPT and make edits according to what you offer your employees and/or share the PDF version directly with employees.

PPACA Marketplace Notices Updated for 2022 (all plans)

The required federal Marketplace Notices have been revised for 2022 and are posted on the [ABC webpage](#) under PPACA Documents by plan type (state, higher education, local education and local government). These versions now only include the premium information for 2022. The previous version included the 2021 and 2022 premium information. **As noted on the Employee Insurance Checklist, you will need to provide the web address or printed copy to your new hires if requested, so please use this updated version going forward.**

Reminder - MetLife Disability Statement of Health Form (state/higher ed only)

For employees who applied for short-term or long-term disability during annual enrollment, there was a delay mailing the Statement of Health forms. The deadline to return the forms has been extended to **Dec. 10, 2021**. Forms were mailed Oct. 29/Oct. 30, and members should receive the forms within two business weeks. If members do not receive their form, they can call MetLife at 855.700.8001.

Reminder - Optum Webinar (state/higher ed only)

Optum, in partnership with their EAP partner for financial education MSA, will hold a second finance webinar, **The Financial Wellness Playbook**, on **Wednesday, Dec. 8, from 11:30 a.m. to**

12:30 p.m. CT. Attached is a flyer you can share with your employees. Employees must register for the session. Here is information about the session:

This class shares the 10 habits most people practice when they have little financial stress in their lives. The MSA coaching staff has conducted over a million financial consultations, and the most experienced coaches were interviewed to develop this list of 10 habits. The goal is for attendees to take pride in the habits they are practicing well, and to develop an action plan to address the habits they would like to improve.

To view a recording of the webinar, **after it is completed**, go to Here4TN.com. Go to Member Benefits > click the “Financial Webinars” button.

Reminder - BA and Vendor Thanksgiving Holiday Hours

State offices and the BA Service Center will be closed next Thursday, Nov. 25, and Friday, Nov. 26, for the Thanksgiving holiday. The Thanksgiving holiday hours for our vendors are below.

ActiveHealth Clinical and Engagement Specialists	Thursday, 11/25 – Closed Friday, 11/26 – Closed
BlueCross BlueShield of Tennessee (medical – Network S and P)	Thursday, 11/25 – Closed Friday, 11/26 – Closed
Cigna (medical - LP and OAP) Cigna Offices	Customer Service will be available 24/7/365 Offices: Thursday, 11/25 – Closed Offices: Friday, 11/26 – Closed
Cigna DHMO (Prepaid) Cigna Offices	Customer Service will be available 24/7/365 Offices: Thursday, 11/25 – Closed Offices: Friday, 11/26 – Closed
CVS Caremark (pharmacy)	Customer Service will be available 24/7/365
Davis Vision	Thursday, 11/25 – Closed Friday, 11/26 – 8 a.m. – 6 p.m. ET
Delta Dental (DPPO)	Thursday, 11/25 - Closed Friday, 11/26 – Closed IVR system available 24/7
MetLife Dental (DPPO) (2021)	Wednesday, 11/24 – 7 a.m. – 5 p.m. CT Thursday, 11/25 – Closed Friday, 11/26 - 7 a.m. – 5 p.m. CT
MetLife Disability (state/higher ed)	Wednesday, 11/24 – 7 a.m. – 5 p.m. CT Thursday, 11/25 – Closed Friday, 11/26 – 7 a.m. – 5 p.m. CT
Optum Financial (HSA, FSAs)	Thursday, 11/25 – Customer Care will be closed Friday, 11/26 – Customer Care will be closed
Optum Health (EAP/behavioral health)	Call Center open 24 hours a day, 7 days week
UMR	Wednesday, 11/26 – Normal business hours Thursday, 11/25 – Closed

	Friday, 11/26 – Closed
Securian Financial (life insurance - state/higher ed)	Thursday, 11/25 – Closed
Unum (former life insurance vendor – state/higher ed)	Thursday, 11/25 – Closed Friday, 11/26 – Closed

Edison Down for Maintenance

Edison will be down **Sunday, Nov. 21, 2021, from 6 a.m. - 3:30 p.m. CT** for regular monthly maintenance.

BA will not send an ABC email next week. We hope you have a very Happy Thanksgiving!

Attachment: Financial Wellness Playbook Flyer

End of message

The Financial Wellness Playbook

Join Optum® and their EAP partner for financial education, MSA, for an upcoming session to improve your financial wellness.

Wednesday, December 8, 2021

11:30 a.m. to 12:30 p.m. CST

Register now!

Learn from those who have gone before you! This class shares the ten habits most people practice when they have little financial stress in their lives. The MSA coaching staff has conducted over a million financial consultations, and the most experienced coaches were interviewed to develop this list of ten habits. The goal is for attendees to take pride in the habits they are practicing well, and to develop an action plan to address the habits they would like to improve.

View a recording of the webinar, after it is completed, at [Here4TN.com](https://www.here4tn.com).

Go to Member Benefits > click the “Financial Webinars” button.



This program should not be used for emergency or urgent care needs. In an emergency, call 911 if you are in the United States or the local emergency services phone number if you are outside the United States, or go to the nearest accident and emergency department. This program is not a substitute for a doctor's or professional's care. Due to the potential for a conflict of interest, legal consultation will not be provided on issues that may involve legal action against Optum or its affiliates, or any entity through which the caller is receiving these services directly or indirectly (e.g., employer or health plan). This program and all its components, in particular services to family members below the age of 16, may not be available in all locations and is subject to change without prior notice. Experience and/or educational levels of Employee Assistance Program resources may vary based on contract requirements or country regulatory requirements Coverage exclusions and limitations may apply.

November 12, 2021

The following email was sent to agency benefits coordinators today.

ABC Call Conference Call Notes

Attached are the combined conference call notes from the Nov. 9 ABC conference calls.

We've also **attached** the dependent eligibility Plan Document changes PowerPoint slides for your reference.

Materials and Communications Updates

PPACA Information Sheet (state only)

The information sheet found on the [ABC webpage](#) that gives you measurement period information has been updated. You can find it under **PPACA Documents, Information Sheet (state only)**.

MetLife Disability Statement of Health Form (state/higher ed only)

For employees who applied for short-term or long-term disability during annual enrollment, there was a delay mailing the Statement of Health forms. The deadline to return the forms has been extended to Dec. 10, 2021. Forms were mailed Oct. 29/Oct. 30, and members should receive the forms within two business weeks. If members do not receive their form, they can call MetLife at 855.700.8001.

Optum Finance Webinar (state/higher ed only)

Optum, in partnership with their EAP partner for financial education MSA, will hold a second finance webinar, **The Financial Wellness Playbook**, on **Wednesday, Dec. 8, from 11:30 a.m. to 12:30 p.m. CT**. **Attached** is a flyer you can share with your employees. Employees must register for the session.

Here is information about the session:

This class shares the 10 habits most people practice when they have little financial stress in their lives. The MSA coaching staff has conducted over a million financial consultations, and the most experienced coaches were interviewed to develop this list of ten habits. The goal is for attendees to take pride in the habits they are practicing well, and to develop an action plan to address the habits they would like to improve.

To view a recording of the webinar, **after it is completed**, go to [Here4TN.com](#).

Go to Member Benefits > click the "Financial Webinars" button.

Optum Financial Recorded Webinar (all plans)

Optum, in partnership with their EAP partner for financial education MSA, has posted a recording from the recent webinar, **A Holiday Planning Guide**, on the [HERE4TN.com website](#). Employees can view the webinar at their convenience. Here is information you can share about the webinar and how to find the recording:

"A Holiday Planning Guide" Recorded Webinar

View a recording of the webinar at <https://www.here4tn.com/>
 Go to Member Benefits > click the “Financial Webinars” button.

Is the holiday season bringing you stress and debt? In this presentation, we will share best practices for planning, saving and spending. Technology has become a bigger part of our holiday shopping and planning experience, so we will discuss online ideas and sites, as well as important dates to remember, to help you this time of year!

BA and Vendor Thanksgiving Holiday Hours

State offices and the BA Service Center will be closed Thursday, Nov. 25, and Friday, Nov. 26, for the Thanksgiving holiday. The Thanksgiving holiday hours for our vendors are below.

ActiveHealth Clinical and Engagement Specialists	Thursday, 11/25 – Closed Friday, 11/26 – Closed
BlueCross BlueShield of Tennessee (medical – Network S and P)	Thursday, 11/25 – Closed Friday, 11/26 – Closed
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CVS Caremark (pharmacy)	Customer Service will be available 24/7/365
Davis Vision	Thursday, 11/25 – Closed Friday, 11/26 – 8 a.m. – 6 p.m. ET
Delta Dental (DPPO)	Thursday, 11/25 - Closed Friday, 11/26 – Closed IVR system available 24/7
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Securian Financial (life insurance - state/higher ed)	Thursday, 11/25 – Closed
Unum (former life insurance vendor – state/higher ed)	Thursday, 11/25 – Closed Friday, 11/26 – Closed

Attachments: Dependent Eligibility Plan Document Changes Slides
Financial Wellness Playbook Flyer

End of message

Dependent Eligibility Plan Document Changes

- Changes were approved in the October Insurance Committee meeting
- More clearly defined eligibility requirements for dependents other than spouses and children
- Changes go into effect January 1, 2022
- **Stepchild:** updated to remove criteria of “providing care and support”
- **Foster children:** updated to outline that these are children specifically in the care, custody, or guardianship of the TN Department of Children’s Services or equivalent placement agency who are placed with the head of contract for temporary or long-term foster care, but not including a person who is placed with the head of contract for purposes of adoption

Dependent Eligibility Plan Document Changes

Court orders:

- Change to language about dependents under age 26 who are placed with the head of contract by a valid order of guardianship
- Language expanded to include dependents under age 26 who are placed with the head of contract by a valid order of custody or conservatorship, in addition to guardianship
- Language added to require a certification upon enrollment and upon request
- Certification for dependents under age 18 requires employees to certify that the placement order is still in effect and has not expired or been terminated and that the employee will notify BA immediately when the placement order terminates or expires

Dependent Eligibility Plan Document Changes

Additional criteria for certification of dependents age 18-25:

- The employee and the person must have a specific type of relationship, including **one** of the following:
 - The dependent must be a descendant of a son/daughter, stepson/stepdaughter of the employee, **or**
 - The dependent must be a brother/sister, half-brother/half-sister, stepbrother/stepsister, son/daughter-in-law, brother/sister-in-law, or niece/nephew of the employee, **or**
 - The dependent must live in the same house as the employee, **and**
- The employee must provide over ½ of the dependent's financial support for the calendar year, **and**
- The dependent must be a U.S. citizen, a U.S. national, or a resident of the U.S., Mexico, or Canada

Dependent Eligibility Plan Document Changes

Actions needed:

- We communicated the new requirements to the employees who have dependents between 18 and 25 that fall into one of these court-ordered categories
 - Mailed a letter and a copy of the certification/attestation to return.
 - Must be filled out and returned with a copy of the most recent court order by **December 1**.
 - If the documentation is not provided, then the dependents will be removed from coverage effective **March 31, 2022**
- Employees may have dependents that are now eligible for coverage under these new guidelines that were not previously eligible
- Custody orders were not an eligible category prior to this plan document change
- Documents shared with you on Monday, November 1 asking you to share the information with all your employees
- If you haven't shared this information yet, **please do so as soon as possible**
- Employees have until **December 1** to submit an enrollment change application with a copy of the court order and the appropriate certification
- If not received by December 1, the employee will have to wait until Annual Enrollment next fall to add the dependent, unless they experience a special qualifying event during the year

Dependent Eligibility Plan Document Changes

Upcoming notifications:

- We will also be reviewing all the dependents on the plan under legal guardianship who are under age 18 next year
- We are developing a process to identify and contact the employees who will have dependents turning 18
- We will reach out to them to request this new documentation so that the dependents can stay on the plan if they are still eligible under the new requirements

Dependent Eligibility Plan Document Changes

Other important things to note:

- Employees do not have to submit this documentation for children or stepchildren
- Employees do not need to provide proof that the dependent is on their tax return
- If the order terminates or expires, and the employee fails to notify BA, then the certifications state that if claims were paid on behalf of the dependent the employee will be responsible for reimbursing the state for all amounts paid
- The placement order must be signed by a judge
- Pending adoption papers from an adoption agency are not acceptable documentation
- Employees can't add anyone on the plan that just meets the relationship requirements; must also have a court order
- Even if an expiration date isn't specified in the order, the order is still considered expired once they turn 18 and they must turn in the certification for post-18 dependents
- We do not need the certification for children enrolled due to a Medical Support Order

The Financial Wellness Playbook

Join Optum® and their EAP partner for financial education, MSA, for an upcoming session to improve your financial wellness.

Wednesday, December 8, 2021

11:30 a.m. to 12:30 p.m. CST

[Register now!](#)

Learn from those who have gone before you! This class shares the ten habits most people practice when they have little financial stress in their lives. The MSA coaching staff has conducted over a million financial consultations, and the most experienced coaches were interviewed to develop this list of ten habits. The goal is for attendees to take pride in the habits they are practicing well, and to develop an action plan to address the habits they would like to improve.

View a recording of the webinar, after it is completed, at [Here4TN.com](#).

Go to Member Benefits > click the “Financial Webinars” button.



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November 5, 2021

The following email was sent to agency benefits coordinators today.

ABC November Monthly Conference Call

The November monthly ABC conference calls will be held Tuesday, Nov. 9. Benefits Administration staff will join you remotely via WebEx.

- Higher Ed – Tuesday, Nov. 9, at 8:30 a.m. CT
- Local Ed – Tuesday, Nov. 9, at 10 a.m. CT
- State – Tuesday, Nov. 9, at 12:30 p.m. CT
- Local Government – Tuesday, Nov. 9, at 2 p.m. CT

Use the webinar (WebEx) login link and instructions in the **attached** agenda or below.

ABC Call Conference Call Notes (local ed/local gov)

Attached are the combined conference call notes from the Nov. 2 ABC conference calls.

Important Optum Financial End of Year 2021 Payroll Contributions/Payroll for Plan Year 2022 (local ed/local gov only)

Below is information for you on how to process end of year HSA payroll contributions, and 2022 payroll contributions.

Contributions for 2021 tax year submitted in 2021	Contributions for 2021 tax year submitted in 2022	Contributions for 2022 tax year submitted in 2021
A file must be uploaded and approved prior to Dec. 28, 2021, at 3:30 p.m. ET. Contribution date must indicate a 2021 pay date.	A file must be uploaded and approved on or after Jan. 1 but prior to April 13, 2022, at 3:30 p.m. ET. Contribution date should reflect a 2021 pay date or if a 2022 pay date is used the tax year field must indicate "Prior".	Files submitted prior to Jan. 1, 2022, must contain a contribution date no earlier than Jan. 1, 2022. Files submitted on Jan. 1, 2022, with a Jan. 1, 2022, contribution date will be available on Jan. 4, 2022.

Local Education or Local Government ABCs who have any questions about this may contact the Optum ABC Support Center at 1-800-294-6620 or accountservices@optum.com.

Closed Thursday, Nov. 11 for Veterans Day

State offices and the Benefits Administration Service Center will be closed Thursday, Nov. 11, for the Veterans Day holiday.

Edison Down for Maintenance

Edison will be down **Sunday, Nov. 7, from 5 a.m. to 12 p.m. CT** for regular monthly maintenance.

End of message

November 1, 2021

The following email was sent to all ABCs today.

ABCs,

This is an important email about amendments to the 2022 Plan Document and information about an enrollment opportunity you MUST share with all employees about dependent eligibility.

Amendments were made to the 2022 Plan Documents, section 1.11, relating to the eligibility of dependents. The purpose of this amendment is to clearly define eligibility for dependents other than spouses and children of employees. The amended Plan Document definition of "dependent" was approved by the committees on October 21 and goes into effect on January 1, 2022.

Specifically, the 2022 Plan Document includes changes around court orders for dependents who are younger than age 18 and those who are 18 and older. This information is included in the attached Dependent Eligibility Notice about dependents who will be eligible in 2022:

1.11 Dependent

A Dependent is:

.....

(C) An employee/retiree or spouse's stepchild under the age of 26;

(D) A person under age 26 who is placed with the Head of Contract by a valid order of guardianship, custody, or conservatorship (or legally equivalent order) by a court of competent jurisdiction ("placement order").

(1) The HOC must provide certification upon enrollment and upon request that: (a) the placement order is in effect and has not expired by subsequent court order or by operation of law, and (b) the HOC shall immediately notify Benefits Administration when the placement order terminates or expires.

(2) If a placement order terminates or expires due to the person attaining the legal age of majority, the person may remain an eligible dependent until age 26 if the HOC certifies that the following requirements in (a), (b) and (c) are met:

a. The HOC and the person have a relationship as set forth in 26 U.S.C. §125(d)(2), which includes the following relationships:

i. The person is a descendant of a son/daughter, stepson/stepdaughter of the HOC;

ii. The person is a brother/sister, half-brother/half-sister, stepbrother/stepdaughter, son/daughter-in-law, brother/sister-in-law, or niece/nephew of the HOC; or

iii. The person has the same principal place of abode as the HOC and is a member of the HOC's household; and

- b. The HOC provides over one-half of the person's financial support for the calendar year in which the HOC's taxable year begins; and
 - c. The person is a U.S. citizen, a U.S. national, or a resident of the U.S., Mexico, or Canada.
- (3) Additional documents and certifications may be requested to establish that the person is an eligible dependent.

What you need to do:

- **You MUST share the attached copy of the Dependent Eligibility Notice with ALL of your employees. You can send it by email, print it or post in a centralized location.**

Employees may have pre-age 18 dependents or post-age 18 dependents who will be eligible for coverage on Jan. 1, 2022.

- For employees with **pre-18 eligible dependents** they wish to enroll in coverage, they must complete/sign the **attached** Certification of Eligibility form for dependents under age 18 (pre-18 form), the [2022 Enrollment Change Application](#) and provide a copy of the court order **by Dec. 1, 2021**. Employees can send the information to you to submit to BA through Zendesk, or they can submit the required documents directly to BA by emailing benefits.adminstration@tn.gov.
- For employees with **post-18 eligible dependents** they wish to enroll, they must complete/sign the **attached** Certification of Eligibility form for dependents over age 18 (post-18 form), the [2022 Enrollment Change Application](#) and provide a copy of the court order **by Dec. 1, 2021**. Employees can send the information to you to send to BA through Zendesk, or they can submit the required documents directly to BA by emailing benefits.adminstration@tn.gov.

Should you or your employees have questions, call BA at 800.253.9981 or 615.741.3590, M-F 8 a.m. – 4:30 p.m. CT.

Attachments: ABC Dependent Eligibility Notice
Pre-18 Certification of Eligibility for Dependents by Valid Placement Order
Post-18 Certification of Eligibility for Dependents with Expired Placement Order

End of Message

Benefits Administration is sending you this communication to let you know about amendments to the 2022 Plan Document relating to the eligibility of dependents, which changed Section 1.11 of the Plan Document. The purpose of this amendment is to clearly define eligibility for dependents other than spouses and children of employees. The amended Plan Document definition of dependent was approved by the committees on October 21 and goes into effect on January 1, 2022. The amendments only change paragraphs (C), (D) and (F) of that section, and will read as follows:

1.11 Dependent

A Dependent is:

.....

(C) An employee/retiree or spouse's stepchild under the age of 26;

(D) A person under age 26 who is placed with the Head of Contract by a valid order of guardianship, custody, or conservatorship (or legally equivalent order) by a court of competent jurisdiction ("placement order").

(1) The HOC must provide certification upon enrollment and upon request that: (a) the placement order is in effect and has not expired by subsequent court order or by operation of law, and (b) the HOC shall immediately notify Benefits Administration when the placement order terminates or expires.

(2) If a placement order terminates or expires due to the person attaining the legal age of majority, the person may remain an eligible dependent until age 26 if the HOC certifies that the following requirements in (a), (b) and (c) are met:

a. The HOC and the person have a relationship as set forth in 26 U.S.C. §125(d)(2), which includes the following relationships:

i. The person is a descendant of a son/daughter, stepson/stepdaughter of the HOC;

ii. The person is a brother/sister, half-brother/half-sister, stepbrother/stepsister, son/daughter-in-law, brother/sister-in-law, or niece/nephew of the HOC; or

iii. The person has the same principal place of abode as the HOC and is a member of the HOC's household; and

b. The HOC provides over one-half of the person's financial support for the calendar year in which the HOC's taxable year begins; and

c. The person is a U.S. citizen, a U.S. national, or a resident of the U.S., Mexico, or Canada.

(3) Additional documents and certifications may be requested to establish that the person is an eligible dependent.

.....

(F) Dependents not eligible for coverage include:

(1) Children in the care, custody, or guardianship of the Tennessee Department of Children's Services or equivalent placement agency, who are placed with the HOC for temporary or long-term foster care, but not including a person who is placed with the HOC for the purpose of adoption.

- (2) Dependents not listed in the above definitions;
- (3) Parents of the employee or spouse;
- (4) Ex-spouse; and
- (5) Live in companions who are not legally married to the employee.

Plan members whose dependents will now be eligible for coverage because of this Plan Document change should fill out and submit an enrollment request and the required certification to Benefits Administration **on or before December 1, 2021** for each eligible dependent. A copy of the Eligibility Certification is enclosed. If you have already made your elections for 2022, you have additional time to submit the required certification and must do so **on or before December 1, 2021** in order to add coverage for any dependent other than your spouse, children or stepchildren.

BA will continue to audit dependent participation and may take action to remove ineligible dependents from the plan. Plan members with questions should contact Benefits Administration at 800-253-9981 or Benefits.Administration@tn.gov.

PARTNERS
FOR HEALTH

Dependent Eligibility Certification for Dependent with Expired Placement Order

Please review and sign the following certificate of eligibility and submit a complete copy of each signed and dated placement order that you are relying on to support this certification. The expired placement order(s) must be submitted for eligibility.

1. I hereby certify that the person(s) listed below was/were placed with me by a valid order of guardianship, custody or conservatorship (or legally equivalent order) by a court of competent jurisdiction ("placement order") and that the placement order terminated or expired because the person reached the legal age of majority;

2. I hereby certify that the placement order relied upon is not a placement for foster care by the Tennessee Department of Children's Services or equivalent placement agency;

3. I hereby certify that I have the following relationship with the person:

_____ The person is a child or grandchild of my son/daughter, stepson/stepdaughter;

_____ The person is my brother/sister, half-brother/half-sister, stepbrother/sister, son/daughter-in-law, brother/sister-in-law, or niece/nephew; or

_____ The person shares the same principal place of abode with me and is a member of my household;

4. I hereby certify that I provide over one-half of the person's financial support for the taxable year;

5. I hereby certify that the person is a U.S. citizen, a U.S. national or a resident of the U.S., Mexico or Canada;

6. I hereby certify that I will immediately notify Benefits Administration if one of the statements in number 3, 4 or 5 above is no longer accurate; and

7. I hereby certify that if I fail to immediately notify Benefits Administration that one of the statements in number 3, 4 or 5 above is no longer accurate, and medical claims are paid to or on behalf of an ineligible dependent, I will be personally responsible to reimburse the State of Tennessee for all amounts paid.

Name of Dependent(s)

Dependent(s) Date of Birth

Head of Contract Name

Head of Contract Edison Employee ID

Head of Contract Signature and Date



Certification of Eligibility for Dependents Placed with Head of Contract by Valid Placement Order – Pre-18 (Currently Active Placement)

Please review and sign the following certificate of eligibility and submit a complete copy of each signed and dated placement order that you are relying on to support this certification. The placement order(s) must be submitted for eligibility.

1. I hereby certify that the person(s) listed below is/are currently placed with me by a valid order of guardianship, custody or conservatorship (or legally equivalent order) by a court of competent jurisdiction ("placement order") and that the placement order is currently in effect and has not expired by subsequent court order or by operation of law;
2. I hereby certify that the placement order relied upon is not a placement for foster care by the Tennessee Department of Children's Services or equivalent placement agency;
3. I hereby certify that I will immediately notify Benefits Administration when the placement order terminates or expires; and
4. I hereby certify that if I fail to immediately notify Benefits Administration when the placement order terminates or expires and medical claims are paid to or on behalf on an ineligible dependent, I will be personally responsible to reimburse the State of Tennessee for all amounts paid.

Name of Dependent(s)

Dependent(s) Date of Birth

Head of Contract

Head of Contract Signature and Date

Head of Contract Edison Employee ID



October 29, 2021

The following email was sent to agency benefits coordinators today.

Annual Enrollment Dates (local ed/local gov only)

- **Local Education/Local Government/Retirees: Annual Enrollment ends today, Oct. 29 at 4:30 p.m. CT.**

ABC Weekly Conference Calls Continue (local gov/local ed only)

Weekly ABC annual enrollment conference calls continue next Tuesday, Nov. 2. Benefits Administration staff will join you remotely via WebEx. **Call should last no longer than ½ hour.**

- **Local Ed – Tuesday, Nov. 2 at 10 a.m. CT**
- **Local Government – Tuesday, Nov. 2 at 2 p.m. CT**

Use the webinar (WebEx) login link and instructions in the **attached** agenda or below.

ABC Call Conference Call Notes (local ed/local gov)

Attached are the combined conference call notes from the Oct. 26 ABC conference calls.

Important Legal Guardian Notice Update (all plans)

Attached is a third letter sent to approximately 300 eligible heads of contracts, letting them know that dependent eligibility requirements about placement orders in the Plan Document will change for the 2022 plan year. These members were sent the letter and the **attached** sample Certification of Eligibility form for any dependents over age 18. The HOCs must complete/sign the form and submit it to BA along with the placement order **by Dec. 1, 2021.**

Watch for an email about Dependent Eligibility that will be emailed to you next Monday, Nov. 1. This email will include information you MUST share with all your employees. We will also include this as an agenda item during the Nov. 9 ABC calls and will be available to answer your questions.

Important Pharmacy Benefits Message

Benefits Administration heard from a state employee today who received a phone call Oct. 28 from a man who identified himself as “James Woods,” a representative of a pharmacy called “Group Plan.” He claimed at different times that “Group Plan” had contracted with the state health insurance plan or our prescription drug plan, and asked this employee a series of questions and determined that he would begin to mail her probiotics and other supplements and bill it to her insurance company. He advised this employee that her insurance company had given him her information (name and address. The phone number that he called from was a spoof number that did not accept return calls. According to our member, this caller was very pushy and deceptive. Neither the state nor BA have contracted with such an organization and his claim is false.

Please advise your employees not to accept such calls from pharmacies or other companies with whom they do not already do business, and to never give out any of the codes or numbers on their pharmacy ID card.

Materials Update (state/higher ed only)

Optum Finance Webinars

In partnership with Optum, we will hold two upcoming finance webinars in November and December for employees. **Attached** is a flyer about the **webinar, A Holiday Planning Guide to be held Wednesday, Nov. 3**. Employees must register for the session. This information was also included in an all member Optum newsletter sent out Thursday, Oct. 28. **Please share the flyer with your employees.**

ABC Webpage Annual Enrollment Message Board (local ed/local gov only)

BA continues to post **Annual Enrollment Weekly Announcements** at the top of the [ABC webpage](#). These messages include important information about how to process appeals. **Please be sure to check this message board.**

Attachments: Legal Guardian Dep Letter 3
Post-18 Dependent Eligibility Certification
A Holiday Planning Guide Flyer

End of message



STATE OF TENNESSEE
DEPARTMENT OF FINANCE AND ADMINISTRATION
BENEFITS ADMINISTRATION

312 Rosa L. Parks Avenue
Suite 1900 William R. Snodgrass Tennessee Tower
Nashville, Tennessee 37243-1102

Butch Eley
COMMISSIONER

Phone: (615) 741-3590 or (800) 253-9981
Fax: (615) 253-8556 Email: benefits.administration@tn.gov

Laurie Lee
EXECUTIVE DIRECTOR

[HOC First Name] [HOC Last Name]
[ADDRESS 1]
[CITY], [STATE] [Postal]

IMPORTANT ELIGIBILITY INFORMATION

[DATE]

Dear [HOC First Name] [HOC Last Name]:

On September 3, 2021, you were mailed a notification that your dependent aged 18 or older would be removed from insurance coverage effective January 1, 2022 unless you supplied proof of eligibility such as adoption or a conservatorship applicable to persons over 18.

On September 27, 2021, you were mailed a second letter notifying you that Benefits Administration would present proposed dependent eligibility changes to the Insurance Committees at the October 2021 meeting, and that your dependent would not be removed from the plan until the committee made a decision about the proposed plan document changes.

The Insurance Committees met on October 21, 2021 and voted to approve the proposed amendments to the dependent eligibility requirements in the plan document for the 2022 plan year.

WHAT DOES THE PLAN DOCUMENT NOW REQUIRE FOR ELIGIBILITY?

The Plan Document definition of dependents (section 1.11) now includes as eligible dependents:

1. A person under age 26 who is placed with the Head of Contract (HOC) by a valid order of guardianship, custody, or conservatorship (or legally equivalent order) by a court of competent jurisdiction ("placement order"). The dependent loses eligibility under this definition of "dependent" if the order expires or is terminated by subsequent court order or operation of law. Most court orders for custody and legal guardianship expire when the dependent reaches the age of majority (age 18). If your dependent has an expired or terminated court order, he/she may still be eligible to remain on the plan under the alternative definition in paragraph 2. Please see below. Children placed by the Department of Children's Services or a placement agency for temporary or long-term foster care that is not for the purpose of adoption are not eligible dependents.

-OR-

2. If a child was placed with you under a valid placement order which has expired because the person attained the legal age of majority, the person may remain an eligible dependent until age 26 if ALL of the following requirements are met:

- a. The HOC and the dependent have one of the following relationships:
 - i. The person is a descendant of a son/daughter, stepson/stepdaughter of the HOC;
 - ii. The person is a brother/sister, half-brother/half-sister, stepbrother/stepmother, son/daughter-in-law, brother/sister-in-law, or niece/nephew of the HOC; or
 - iii. The person has the same principal place of abode as the HOC and is a member of the HOC's household; and
- b. The HOC provides over one-half of the person's financial support for the calendar year in which the HOC's taxable year begins; and
- c. The person is a U.S. citizen, a U.S. national, or a resident of the U.S., Mexico, or Canada.

In order for you to enroll your dependent in coverage, you must satisfy either 1 or 2 above and submit the applicable certification form to BA on or before December 1, 2021. BA may request additional documentation to establish that the person is an eligible dependent.

The exact language of the Plan Document as amended can be found online at <https://www.tn.gov/partnersforhealth/publications/publications.html> under the Medical Plan Documents section. Direct links are:

- [State/Higher Education] - <https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/spd2022.pdf>
- [Local Education] - <https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/lepd2022.pdf>
- [Local Government] - <https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/lgpd2022.pdf>

WHAT DO YOU NEED TO DO TO KEEP YOUR OVER AGE 18 DEPENDENT(S) ON THE PLAN?

A Certification of Eligibility form for dependents over age 18 with expired placement orders is enclosed. You must complete and sign the form and submit it to BA along with the placement order you rely upon. The form and order must be submitted to BA on or before December 1, 2021. If additional documentation is needed, BA will notify you.

WHAT WILL HAPPEN IF A VALID CERTIFICATION IS NOT PROVIDED IN TIME?

If the signed Certification of Eligibility form and placement order are not received by BA on or before December 1, 2021, or if they do not meet the eligibility requirements of the plan document, the ineligible dependent(s) will be removed from coverage March 31, 2022.

If you have any questions about this, please contact Benefits Administration at 800-253-9981 or benefits.administration@tn.gov.

Dependent Eligibility Certification for Dependent with Expired Placement Order

Please review and sign the following certificate of eligibility and submit a complete copy of each signed and dated placement order that you are relying on to support this certification. The expired placement order(s) must be submitted for eligibility.

1. I hereby certify that the person(s) listed below was/were placed with me by a valid order of guardianship, custody or conservatorship (or legally equivalent order) by a court of competent jurisdiction ("placement order") and that the placement order terminated or expired because the person reached the legal age of majority;

2. I hereby certify that the placement order relied upon is not a placement for foster care by the Tennessee Department of Children's Services or equivalent placement agency;

3. I hereby certify that I have the following relationship with the person:

_____ The person is a child or grandchild of my son/daughter, stepson/stepdaughter;

_____ The person is my brother/sister, half-brother/half-sister, stepbrother/sister, son/daughter-in-law, brother/sister-in-law, or niece/nephew; or

_____ The person shares the same principal place of abode with me and is a member of my household;

4. I hereby certify that I provide over one-half of the person's financial support for the taxable year;

5. I hereby certify that the person is a U.S. citizen, a U.S. national or a resident of the U.S., Mexico or Canada;

6. I hereby certify that I will immediately notify Benefits Administration if one of the statements in number 3, 4 or 5 above is no longer accurate; and

7. I hereby certify that if I fail to immediately notify Benefits Administration that one of the statements in number 3, 4 or 5 above is no longer accurate, and medical claims are paid to or on behalf of an ineligible dependent, I will be personally responsible to reimburse the State of Tennessee for all amounts paid.

Name of Dependent(s)

Dependent(s) Date of Birth

Head of Contract Name

Head of Contract Edison Employee ID

Head of Contract Signature and Date



A Holiday Planning Guide

Join Optum® and their EAP partner for financial education, MSA, for an upcoming session on managing finances during the holidays.

Wednesday, November 3, 2021

11:30 a.m. to 12:30 p.m. CST

Register now!

Is the holiday season bringing you stress and debt? In this presentation, we will share best practices for planning, saving and spending. Technology has become a bigger part of our holiday shopping and planning experience, so we will discuss online ideas and sites, as well as important dates to remember, to help you this time of year!

View a recording of the webinar, after it is completed, at [Here4TN.com](https://www.here4tn.com).

Go to Member Benefits > click the “Financial Webinars” button.



This program should not be used for emergency or urgent care needs. In an emergency, call 911 if you are in the United States or the local emergency services phone number if you are outside the United States, or go to the nearest accident and emergency department. This program is not a substitute for a doctor's or professional's care. Due to the potential for a conflict of interest, legal consultation will not be provided on issues that may involve legal action against Optum or its affiliates, or any entity through which the caller is receiving these services directly or indirectly (e.g., employer or health plan). This program and all its components, in particular services to family members below the age of 16, may not be available in all locations and is subject to change without prior notice. Experience and/or educational levels of Employee Assistance Program resources may vary based on contract requirements or country regulatory requirements Coverage exclusions and limitations may apply.

October 22, 2021

The following email was sent to agency benefits coordinators today.

Annual Enrollment Dates (local ed/local gov only)

Annual Enrollment ends next Friday!

- **Local Education/Local Government/Retirees:** Enroll now through Friday, Oct. 29

ABC Weekly Conference Calls Continue (local gov/local ed only)

Weekly ABC annual enrollment conference calls continue next Tuesday, Oct. 26. Benefits Administration staff will join you remotely via WebEx.

- **Local Ed – Tuesday, Oct. 26 at 10 a.m. CT**
- **Local Government – Tuesday, Oct. 26 at 2 p.m. CT**

Use the webinar (WebEx) login link and instructions in the **attached** agenda or below.

ABC Call Conference Call Notes (all plans)

Attached are the combined conference call notes from the Oct. 19 ABC conference calls.

Beware of Marketing Emails about Retirement Planning (state only)

Several state employees have reported receiving email messages that promote a retirement planning review service. The messages came from a sender with “govresource” and reference the Tennessee Consolidated Retirement System. However, **these emails did not come from BA or the Tennessee Department of Treasury, and the sender is not affiliated with Tennessee State Government.**

Retirement planning and counseling services are offered at no charge to all members of the state’s retirement plan. Members of RetireReadyTN, including TCRS and the State 401(k)/457(b) plans can meet with a RetireReadyTN Plan Advisor for help with retirement planning or to discuss other financial planning needs. All Tennessee State Government employees also have access to financial planning services through [your Here4TN benefits](#).

You can schedule a free Retirement Readiness Review or a Retirement Counseling session at <https://treasury.tn.gov/Retirement/Information-and-Resources/Meet-with-an-Advisor>.

Materials Update

Coronavirus Benefits and Vaccine Document (all plans)

The COVID-19 National Public Health Emergency has been extended through Jan. 15, 2022, and the benefits document has been updated to reflect this extension. You can find the updated document by clicking the yellow banner at the top of the [ParTNers website](#). Here is a link to the updated version:

https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/coronavirus_public_info.pdf

Flexible Benefits Form for 2022 (state/higher ed only)

The flexible benefits enrollment form for 2022 medical, limited purpose and dependent care FSAs has been updated. You'll find the link on the Partners website under [Forms](#), Flexible Benefits Enrollment. If you need a copy of the 2021 form, contact Peggy Birthrong at peggy.x.birthrong@tn.gov.

[ABC Webpage Annual Enrollment Message Board \(local ed/local gov\)](#)

BA continues to post **Annual Enrollment Weekly Announcements** at the top of the [ABC webpage](#). These messages include a daily tracker with number of documents being reviewed, tips to assist you with password resets, queries and other important reminders. **Please be sure to check this message board each week during Annual Enrollment.**

[Annual Enrollment Employee Benefits Webinar Information \(local ed/local gov\)](#)

During the last week of Annual Enrollment, employees continue to have access to a recorded version of the employee benefits webinar and a copy of the presentation with live links. You can find these materials on the ParTNers [Enrollment Materials webpage](#).

[Annual Enrollment Insurance Carrier Webinar Recorded Sessions \(local ed/local gov\)](#)

The Insurance Carrier webinar recorded sessions are posted on the ParTNers YouTube page under the **2021 Employee Benefits Webinar playlist** found here:

<https://www.youtube.com/c/partnersforhealthtn/playlists>

End of message

October 15, 2021

The following email was sent to agency benefits coordinators today.

Annual Enrollment Dates

Here are the enrollment dates:

- **State/Higher Education:** Ends today, Friday, Oct. 15!
- **Local Education/Local Government/Retirees:** Now through Friday, Oct. 29

Local Ed/Local Gov ABCs: As today is the last day of enrollment for state/higher education, we expect a high call volume into the BA Service Center. If possible, we would appreciate if you could hold your questions/requests until Monday. Thank you!

ABC Weekly Conference Calls Continue

Weekly ABC annual enrollment conference calls continue next Tuesday, Oct. 19. Benefits Administration staff will join you remotely via WebEx.

- **Higher Ed – Tuesday, Oct. 19 at 8:30 a.m. CT**
- **Local Ed – Tuesday, Oct. 19 at 10 a.m. CT**
- **Central State – Tuesday, Oct. 19 at 12:30 p.m. CT**
- **Local Government – Tuesday, Oct. 19 at 2 p.m. CT**

Use the webinar (WebEx) login link and instructions in the **attached** agenda or below.

ABC Call Conference Call Notes

Attached are the combined conference call notes from the Oct. 12 ABC conference calls.

ABC Webpage Annual Enrollment Message Board

BA continues to post **Annual Enrollment Weekly Announcements** at the top of the [ABC webpage](#). These messages include a daily tracker with number of documents being reviewed, tips to assist you with password resets, queries and other important reminders. **Please be sure to check this message board each week during Annual Enrollment.**

Annual Enrollment Employee Benefits Webinar (local ed/local gov only)

Attached is a flyer about the employee benefits webinars that continue through October.

Employees must register as directed. A link to webinar instructions is included in the flyer. Feel free to share the information below with the flyer:

- **Join an employee informational webinar** where 2022 benefits and changes are presented. You can ask questions about any of the benefits presented. You would only need to attend one session as the same information is presented during the webinar. Just click the link in the flyer to register. Instructions are included.

Insurance Carrier Webinar Recorded Sessions (local ed/local gov only)

The Insurance Carrier webinar recorded sessions are posted on the ParTNers YouTube page under the **2021 Employee Benefits Webinar playlist** found here:

<https://www.youtube.com/c/partnersforhealthtn/playlists>

Attachment: AE Employee Webinars Flyer

End of message



**PARTNERS
FOR HEALTH**

**ANNUAL ENROLLMENT
FOR 2022 BENEFITS**

Join our benefits webinar!

Don't miss this opportunity to learn about your 2022 benefits options. Get information about health, dental, vision, pharmacy and more. Our team of experts will be available to answer your questions. See below for registration details.

STATE & HIGHER EDUCATION

CLICK YOUR PREFERRED DATE TO REGISTER. ALL TIMES ARE CT.

[Monday, Sept. 27, 10-11 a.m.](#)

[Friday, Oct. 1, 2-3 p.m.](#)

[Wednesday, Oct. 6, 1-2 p.m.](#)

[Monday, Oct. 11, 2-3 p.m.](#)

[Thursday, Oct. 14, 3-4 p.m.](#)

LOCAL GOVERNMENT, LOCAL EDUCATION & RETIREES

CLICK YOUR PREFERRED DATE TO REGISTER. ALL TIMES ARE CT.

[Monday, Sept. 27, 1-2 p.m.](#)

[Thursday, Sept. 30, 10-11 a.m.](#)

[Monday, Oct. 4, 1-2 p.m.](#)

[Friday, Oct. 15, 2-3 p.m.](#)

[Wednesday, Oct. 20, 1-2 p.m.](#)

[Friday, Oct. 22, 2-3 p.m.](#)

HERE'S HOW TO REGISTER FOR & JOIN A WEBINAR

Each presentation is the same, so find a date and time above that work for you and click on it. You will be asked to enter your name and email address to register. You will then receive an email with a reminder you can add to your calendar. It's that easy!

On the day of the webinar, click the link in the calendar invite. Then, click JOIN MEETING.

[You can find detailed instructions to join the webinar here.](#)

October 8, 2021

The following email was sent to agency benefits coordinators today.

Annual Enrollment Continues

Here are the enrollment dates:

- **State/Higher Education:** Now Through Friday, Oct. 15
- **Local Education/Local Government/Retirees:** Now through Friday, Oct. 29

ABC Weekly Conference Calls Continue

Weekly ABC annual enrollment conference calls continue next Tuesday, Oct. 12. Benefits Administration staff will join you remotely via WebEx.

- **Higher Ed – Tuesday, Oct. 12 at 8:30 a.m. CT**
- **Local Ed – Tuesday, Oct. 12 at 10 a.m. CT**
- **Central State – Tuesday, Oct. 12 at 12:30 p.m. CT**
- **Local Government – Tuesday, Oct. 12 at 2 p.m. CT**

Use the webinar (WebEx) login link and instructions in the **attached** agenda or below.

Note: During next week's call, we'll walk you through the new **ABC Annual Enrollment resource tool link** posted on the [ABC webpage](#) under **ABC Training** on the ABC message board. This is a new resource designed for quick and easy access to relevant annual enrollment information and reminders. There are separate links by plan:

- [State and Higher Education](#)
- [Local Education Agencies](#)
- [Local Government Agencies](#)

ABC Call Conference Call Notes

Attached are the combined conference call notes from the Oct. 5 ABC conference calls.

ABC Webpage Annual Enrollment Message Board

BA continues to post **Annual Enrollment Weekly Announcements** at the top of the [ABC webpage](#). These messages include a daily tracker with number of documents being reviewed, tips to assist you with password resets, queries and other important reminders. **Please be sure to check this message board each week during Annual Enrollment**

Materials Updates

Delta Dental Handbook: Delta Dental mailed the attached Delta Dental Member Handbook at the end of September to active employees currently enrolled in the DPPO plan, active employees not currently enrolled in the DPPO plan and retirees currently enrolled in the DPPO or DHMO plan. If you would like to receive a supply of member handbooks for your employees and new hires, please contact David Pemberton at 615.742.6902 or email your request to stateoftn@deltadentaltn.com.

Marketplace Notices

The marketplace notices on the ABC webpage under **PPACA Documents and then by plan, Required Federal Marketplace Notice** have been updated for the fall 2021. Please use these versions going forward.

State: Notice is a PDF that you can download or share directly with your new hires.

Higher education, local education and local government: Notice is a Word document that your agency is able to edit as instructed.

Note: In late November, we will post revised marketplace notices for you to use in 2022.

UMR Internet Explorer Announcement

UMR, the vendor that administers The Tennessee Plan, is no longer able to support Internet Explorer on their website. UMR is recommending users change to Microsoft Edge, Google Chrome or some other more modern browser, instead of Internet Explorer, when accessing umr.com/thetennesseeplaninfo or www.TheTennesseePlan.com

Annual Enrollment Employee Benefits Webinar

Attached is a flyer about the employee benefits webinars that continue through October. Employees must register as directed. A link to webinar instructions is included in the flyer. Feel free to share the information below with the flyer:

- **Join an employee informational webinar** where 2022 benefits and changes are presented. You can ask questions about any of the benefits presented. You would only need to attend one session as the same information is presented during the webinar. Just click the link in the flyer to register. Instructions are included.

Insurance Carrier Webinar Recorded Sessions

The Insurance Carrier webinar recorded sessions are posted on the ParTNers YouTube page under the **2021 Employee Benefits Webinar playlist** found here:

<https://www.youtube.com/c/partnersforhealthtn/playlists>

Attachments: Delta Dental Handbook 2022
AE Employee Webinars Flyer

End of message

Delta Dental of Tennessee
240 Venture Circle • Nashville, TN 37228-1699

DELTA DENTAL

DELTA DENTAL

**PARTNERS
FOR HEALTH**

State of Tennessee Dental Preferred Provider Organization (DPPO) Handbook



Welcome to Delta Dental!

Delta Dental of Tennessee makes taking care of your smile easy. This plan provides broad coverage and benefits with access to the Delta Dental PPO™ network. You will also enjoy Delta Dental's great service and value.

Tennessee.DeltaDental.com/StateOfTN

Customer Service: 1-800-552-2498
Monday-Friday 7 a.m. to 5 p.m. CT

Delta Dental is proud to administer the Dental Preferred Provider Program for the State of Tennessee.

The DPPO program is available to those eligible for the State of Tennessee Group Insurance Program benefits. This includes active employees with state agencies and affiliated agencies offering the state's dental insurance program, plus retirees drawing a TCRS pension or who participated in a higher education optional retirement plan. This plan is open to you, your spouse and eligible dependents under age 26.

An agency must be participating in the State of Tennessee Group Insurance Program in order to qualify for participation in the State of Tennessee voluntary dental program. Employee, retiree and/or dependent participation in the State Group Insurance Program is not required to participate in the state dental program. Employee or retiree participation in the Delta Dental DPPO is required for participation of eligible dependents. Participation by those enrolled in the Delta Dental DPPO is on a calendar year basis. Enrollment may only be dropped by the members during the annual enrollment period for the beginning of the next calendar year or due to a special qualifying event.

We want to help you make the most of your dental plan.

A brighter smile. A healthy mouth. Insurance against the unexpected. These are all good reasons to sign up for the DPPO plan from Delta Dental. Your dental plan should be easy to use and understand. This handbook highlights the benefits in the state's DPPO plan. If you have questions, we're here to help. There's a special web page just for you. Visit Tennessee.DeltaDental.com/StateOfTN. You can also call us at (800) 552-2498, 7 a.m. to 5 p.m. CT.

How to sign up for Delta Dental

Select the DPPO plan during your annual enrollment or when you become eligible for benefits and you will be enrolled for Delta Dental. Benefits are in effect for the calendar year. They cannot be changed unless you have a qualifying event, like getting married or having a child. If you do not sign up during the enrollment period, you will need to wait until the next enrollment period or qualifying event. For questions about enrollment, visit the PartNers for Health website at www.tn.gov/PartnersForHealth.

Your Delta Dental benefits at your fingertips 24/7!

Download the Delta Dental Mobile App for Apple iOS or Android to:



- ▶ Find a dentist
- ▶ Check benefits, eligibility & claims
- ▶ Mobile ID card
- ▶ Toothbrush Timer

Scan the QR code above to go to http://delivr.com/2c9vx_qr to link to the App Store or Google Play Store. Register at www.DeltaDental.com. You will need a QR code reader to scan the QR code.

You can access plan details online with our Member Portal. With Member Portal, you can:

- ▶ Check benefits, eligibility & claims
- ▶ Print an ID card
- ▶ Find your benefit information
- ▶ Review your claims
- ▶ And more!

Go to Tennessee.DeltaDental.com/StateOfTN and click on Member Portal. Click New User to sign up for the first time.

How to find a dentist



Choosing a dentist from the Delta Dental PPO network will help you save money and get the most from your benefits. You also have the choice to visit any licensed dentist, but your benefits will be less. Go to www.Tennessee.DeltaDental.com/StateOfTN and click on Find a Dentist.

Scan this code to search from your smart phone or other device.

Monthly premiums

The following monthly premiums are effective Jan. 1, 2022 through Dec. 31, 2022. Your premiums may be paid through convenient payroll or retirement system deduction. Employee or retiree participation in the Delta Dental DPPO is required for eligible dependents to join the plan.

Active employee

Employee only	\$19.82
Employee + Spouse	\$38.98
Employee + Child(ren)	\$52.70
Employee + Spouse + Child(ren)	\$80.72

Retiree

Retiree only	\$26.60
Retiree + Spouse	\$52.44
Retiree + Child(ren)	\$60.09
Retiree + Spouse + Child(ren)	\$94.95

Keep it simple. Choose a Delta Dental PPO dentist.

- ▶ **No paperwork!** Your dentist files the claim for you.
- ▶ **No extra charges!** You're only responsible for your deductible and/or co-insurance charges.
- ▶ **No balance billing!** You won't have to pay more than our maximum allowed fees for services.
- ▶ **No waiting for reimbursement!** You'll never have to pay full fees at the time of a dental visit.

Save more when you see a network dentist

Your plan saves you the most money when visiting a **Delta Dental PPO dentist**. This network offers an average savings of 30% on submitted fees. More than 74% of dentists in Tennessee are in this network. Your dentist will file the claim and will not balance bill.

You can also save money with Delta Dental Premier® dentists. The Premier network's average savings are 18%. Nine out of 10 dentists in our state belong to this network. Premier dentists will also file claims for you. The amount you may be balance billed is limited. Premier dentists are allowed to charge more than a Delta Dental PPO dentist but cannot bill you for any charges over the Delta Dental Premier maximum plan allowance. This may be an added savings for you and your family members.

Save MOST when you see a Delta Dental PPO dentist

NETWORK	ESTIMATED CHARGE	APPROVED AMOUNT	MAXIMUM ALLOWED FEES	AMOUNT DELTA DENTAL PAYS	AMOUNT YOU PAY
Delta Dental PPO™	\$120	\$84	\$84 x 30% = \$67.20	\$67.20	\$16.80
Delta Dental Premier®	\$120	\$113	\$84 x 60% = \$50.40	\$50.40	\$62.60
Out-of-Network Dentist	\$120	\$120	\$84 x 60% = \$50.40	\$50.40	\$69.60

*This example is an estimate. Fees and reimbursements can vary by state.

Set by Delta Dental

Best Deal!

40% + \$36 balance billing*

No surprises!

Want to know what a procedure may cost? Want to make sure a service is covered? Ask for a **pretreatment estimate**. Your dentist can send a request to us. We'll let him or her know if a service is covered, how much it may cost, and what you may have to pay. These amounts may not be exact, but they will give you a good idea of what to expect.

Dental Preferred Provider Organization (DPPO) Dental Benefit Summary for State of Tennessee #8060 Coverage effective January 1, 2022

	Delta Dental PPO Dentist	Delta Dental Premier Dentist	Non-Participating Dentist
Diagnostic and Preventive			
Diagnostic and Preventive Services - exams, cleanings, fluoride, and space maintainers	Plan Pays 100%	Plan Pays 80%	Plan Pays 80%
Sealants - to prevent decay of permanent teeth			
Brush Biopsy - to detect oral cancer			
Radiographs - X-rays			
Basic Services			
Emergency Palliative Treatment - to temporarily relieve pain			
Periodontal Maintenance - cleanings following periodontal therapy			
Minor Restorative Services - fillings	Plan Pays 80%	Plan Pays 60%	Plan Pays 60%
Endodontic Services - root canals			
Periodontic Services - to treat gum disease			
Simple Extractions - non-surgical removal of teeth			
Other Basic Services - misc. services			
Major Services			
Crown Repair - to individual crowns			
Oral Surgery Services - surgical extractions and dental surgery			
General Anesthesia or IV Sedation - when necessary, in connection with covered oral surgery, extractions or other covered services			
Major Restorative Services - crowns			
Occlusal Adjustment - occlusal equilibration	Plan Pays 50%	Plan Pays 50%	Plan Pays 50%
Adjustments and Repairs - to bridges, implants and dentures			
Prosthetic Services - bridges, implants, and dentures			
<ul style="list-style-type: none"> • 6-month waiting period applies to inlay/onlay restorations, dentures, crowns and implants; • 12-month waiting period applies to initial placement of bridge or denture to replace one or more natural teeth. 			
Orthodontic Services			
Orthodontic Services - braces	Plan Pays 50%	Plan Pays 50%	Plan Pays 50%
• 12-month waiting period; Orthodontic age limit: to the end of the month of age 19			

Important Information:

Maximum Payment - \$1,500 per person total per benefit year on all services, except cephalometric film, photos, diagnostic casts, and orthodontics. \$1,250 per person total per lifetime on cephalometric films, photos, and orthodontic services.

Deductible -

Delta Dental PPO Dentist - \$25 Deductible per person total per benefit year, limited to a maximum deductible of \$75 per family per benefit year. The deductible does not apply to oral exams, preventive, X-rays, sealants, full mouth debridement, cephalometric films, photos, and orthodontics.

Delta Dental Premier or Nonparticipating Dentist - \$100 Deductible per person total per Benefit Year limited to a maximum Deductible of \$300 per family per Benefit Year. The Deductible does not apply to oral exams, preventive, X-rays, sealants, full mouth debridement, cephalometric films, photos, and orthodontics.

Note - This document is only intended to provide a brief description of your benefits. Please refer to your Certificate of Coverage for a complete description of benefits, exclusions, and limitations.

When you receive services from a Delta Dental Premier or Non-participating Dentist, the percentages in those columns indicate the portion of Delta Dental's PPO Dentist Schedule that will be paid for those services. This amount may be less than what the dentist charges or Delta Dental approves. You are responsible for that difference.

Frequently Asked Questions

What does my plan cover or not cover?

See the benefit summary in this handbook. This gives you a snapshot of the plan. You can see all details in the Certificate of Coverage. A copy is available online at www.Tennessee.DeltaDental.com/StateOfTN.

Will there be waiting periods?

If you are new to the DPPO plan, waiting periods may apply for some services. See the benefit summary enclosed. If you are already enrolled in the DPPO plan, you may have already satisfied the waiting period.

Can I see any dentist?

To receive the highest level of benefits, you must visit a Delta Dental PPO provider. You are free to choose any dentist you would like. However, your out-of-pocket expenses will be less if you choose a Delta Dental PPO dentist. If you visit a non-participating dentist, you will receive the out-of-network benefits described in the benefit summary. You should always ask your dentist if he or she is a Delta Dental PPO dentist before your visit. For a list of Delta Dental PPO dentists, visit www.Tennessee.DeltaDental.com/StateOfTN.

Can my dentist join the network?

Yes. The Delta Dental PPO Network is open to new dentists. You can ask your dentist to visit tennessee.deltadental.com/dentists for information. They can also sign up online.

Do I need an ID card?

You do not need an ID card. You just need to tell your dentist you're a Delta Dental of Tennessee member and give them your member ID. Your dentist can confirm eligibility any time with our Dental Office Toolkit or by calling (800) 552-2498.

Do I have to submit claims?

If you choose a dentist in our networks, he or she will file the claim for you. If you visit an out-of-network dentist, you may need to submit your claim to: Delta Dental of Tennessee, 240 Venture Circle, Nashville, TN 37228

What is balance billing?

The dentists in the Delta Dental PPO network have agreed to accept our fee for covered services. This is called the maximum plan allowance, or MPA. PPO network dentists agree to accept the MPA as full payment. They will not bill you for fees above the MPA. You will only have to pay your deductible and/or co-insurance.

Dentists outside the PPO network have not agreed to the maximum fees. You may have to pay the difference between what the dentist charges and what Delta Dental will pay. This is balance billing. You will also have to pay your deductible and/or co-insurance.

You will save the most money by visiting a dentist in the Delta Dental PPO network. As a Delta Dental member, you also have the choice to see a Delta Dental Premier® dentist. Premier dentists have also agreed to an MPA. This may be higher than the MPA for PPO dentists. You will only have to pay your deductible and/or co-insurance. You will not be balance billed.

Do you coordinate benefits with other dental carriers?

Yes. If you are covered by two dental plans, your coverage will be coordinated. This may happen if you and your spouse both have dental plans at work. Your benefits will be handled by your primary carrier, or the one that lists your name as the primary member. Benefits will also be coordinated for your dependents covered under two plans.

For children covered by both parents' or guardians' dental plans, the primary carrier is decided by the "birthday rule." The plan that covers the parent or guardian whose birthday comes first in the calendar year will be the primary carrier. The goal of coordinating benefits is to make sure the cost of the dental procedure is covered within the scope of both plans. It will not exceed the amount of the bill.

What is an Explanation of Benefits, or EOB?

After you visit the dentist, you should receive an EOB. This isn't a bill. The EOB will show:

- Benefits received at your last visit
- What procedures were or were not covered
- If your plan is coordinating benefits with another plan
- How much of your annual maximum has been used
- How much you owe the dentist

If your service is covered at 100%, like an annual exam, you may not receive an EOB.

You can see all EOBs online in the Member Portal. You can also sign up to receive EOBs electronically. Go to www.Tennessee.DeltaDental.com/StateOfTN and click on Member Portal to sign up.

What if I am in the middle of a treatment plan when this plan takes effect?

Don't worry. We have you covered. If you are currently enrolled in the state's DPPO plan, Delta Dental will work with your dentist to ensure you continue to receive the benefits that are covered. For ortho claims, ask your orthodontist or dental office to submit a claim with the total fee, initial banding date and total number of months of treatment. This detail will allow us to calculate what we can pay.

Can my dependent child continue on this plan past the age of 26?

There are circumstances that allow coverage to continue past age 26. An example may be if the child or dependent is not able to work due to mental or physical handicap as defined by applicable law. Proof of the condition must be sent to Benefits Administration prior to the 26th birthday. Annual proof may be needed.

Looking for more answers?

Go to www.Tennessee.DeltaDental.com/StateOfTN or call us at (800) 552-2498, M-F, 7 a.m. to 5 p.m. CT.

This handbook shows you some of the features of the DPPO plan. This is not a Certificate of Coverage. You can see the COC online at www.Tennessee.DeltaDental.com/StateOfTN.

Exclusions

The DPPO plan does not cover the following:

- Cosmetic surgery or procedures for purely cosmetic reasons unless specifically listed as a BENEFIT.
- Replacement of a lost or stolen retainer, denture or other piece.
- Oral hygiene and dietary instructions, treatment for desensitizing teeth, prescribed drugs or other medication, experimental procedures, conscious sedation and extra oral grafts (grafting of tissues from outside the mouth to oral tissues).
- Treatment to restore tooth structure lost from wear or attrition.
- Services by a dentist beyond the scope of his or her license.
- The part of dental services charges where the costs exceed the charge collected if no coverage existed.
- Dental services for which the patient incurs no charge.
- Services received without cost from any federal, state or local agency. This exclusion will not apply if prohibited by law.
- Services considered medical services.
- Charges by a hospital or other surgical or treatment facility and any other fees charged by the dentist for treatment in any such facility.
- Treatment of injury or illness covered by Workers' Compensation or Employer's Liability laws.
- Services for hereditary or developmental malformations. Such malformations include, but are not limited to, cleft palate or upper and lower jaw malformations. This doesn't exclude those services provided under orthodontic benefits, if covered.

Learn More About Keeping Your Smile Power®

An ounce of prevention

Did you know there is a connection between a healthy mouth and a healthy body? Dentists can find 120 signs of diseases by looking in your mouth.¹ Signs of cancer, diabetes and heart disease can appear in the mouth and may be spotted by your dentist.

Visiting the dentist twice a year and taking care of your teeth can help you manage some of these same diseases. Your dental plan covers two cleanings and exams each year. These are covered at 100% if you go to a Delta Dental PPO dentist. Good health starts with a healthy smile!

Online resources to help you smile



We have articles online to help you learn more about oral health. Visit Tennessee.DeltaDental.com/StateOfTN for links to our Smile Power Blog and the quarterly *grin!* magazine. Both feature news, lifestyle stories, recipes and more. There is also an activity book, *grin! For Kids*, you can download.



**PARTNERS
FOR HEALTH**

**ANNUAL ENROLLMENT
FOR 2022 BENEFITS**

Join our benefits webinar!

Don't miss this opportunity to learn about your 2022 benefits options. Get information about health, dental, vision, pharmacy and more. Our team of experts will be available to answer your questions. See below for registration details.

STATE & HIGHER EDUCATION

CLICK YOUR PREFERRED DATE TO REGISTER. ALL TIMES ARE CT.

[Monday, Sept. 27, 10-11 a.m.](#)

[Friday, Oct. 1, 2-3 p.m.](#)

[Wednesday, Oct. 6, 1-2 p.m.](#)

[Monday, Oct. 11, 2-3 p.m.](#)

[Thursday, Oct. 14, 3-4 p.m.](#)

LOCAL GOVERNMENT, LOCAL EDUCATION & RETIREES

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[Thursday, Sept. 30, 10-11 a.m.](#)

[Monday, Oct. 4, 1-2 p.m.](#)

[Friday, Oct. 15, 2-3 p.m.](#)

[Wednesday, Oct. 20, 1-2 p.m.](#)

[Friday, Oct. 22, 2-3 p.m.](#)

HERE'S HOW TO REGISTER FOR & JOIN A WEBINAR

Each presentation is the same, so find a date and time above that work for you and click on it. You will be asked to enter your name and email address to register. You will then receive an email with a reminder you can add to your calendar. It's that easy!

On the day of the webinar, click the link in the calendar invite. Then, click JOIN MEETING.

[You can find detailed instructions to join the webinar here.](#)

October 1, 2021

The following email was sent to agency benefits coordinators today.

Annual Enrollment Started Today, Oct. 1!

Here are the enrollment dates:

- **State/Higher Education:** Now Through Friday, Oct. 15
- **Local Education/Local Government/Retirees:** Now through Friday, Oct. 29

ABC Weekly Conference Calls Continue

Weekly ABC annual enrollment conference calls continue next Tuesday, Oct. 5. Benefits Administration staff will join you remotely via WebEx.

- **Higher Ed – Tuesday, Oct. 5 at 8:30 a.m. CT**
- **Local Ed – Tuesday, Oct. 5 at 10 a.m. CT**
- **Central State – Tuesday, Oct. 5 at 12:30 p.m. CT**
- **Local Government – Tuesday, Oct. 5 at 2 p.m. CT**

Use the webinar (WebEx) login link and instructions in the **attached** agenda or below.

ABC Call Conference Call Notes

Attached are the combined conference call notes from the Sept. 28 ABC conference calls. PDFs of the Sept. 28 vendor presentations have been posted to the [ABC webpage](#) under Conference Call Notes.

Attached is a new resource mentioned during the Optum Health vendor presentation, a behavioral health/employee assistance program and services chart, to help guide you on the benefits and services available through these benefits for eligible employees and members.

NEW! ABC Webpage Annual Enrollment Message Board

Starting today Oct. 1, BA will post **Annual Enrollment Weekly Announcements** at the top of the [ABC webpage](#). These messages will include tips to assist you with password resets, queries and other important reminders. **Please be sure to check this message board each week during Annual Enrollment**

Important Legal Guardian Notice Update

A few weeks ago, approximately 300 members with dependents on the plan under guardianship court orders received a letter notifying them that coverage for those dependents will be terminated because they are over 18. BA is now reviewing the terms of the plan document and may recommend dependent eligibility requirement changes to the insurance plan. Because of this review we will not remove these dependents from coverage at the end of this year. If changes are recommended and approved by the Insurance Committees, these changes may permit these dependent to continue coverage. A new letter was sent to these members this week letting them know of the potential changes.

Materials Updates

The Plan Documents have been updated and are posted on the [Publications webpage](#) under the title Medical Plan Documents and are posted by plan. These documents are also posted on the [ABC webpage](#) at the bottom of the page by plan (State, Local Education and Local Government). **BA will go over recent Plan Document updates during next week's ABC conference calls.**

Annual Enrollment Employee Benefits Webinar

Attached is a flyer about the employee benefits webinars that continue through October. Employees must register as directed. A link to webinar instructions is included in the flyer. Feel free to share the information below with the flyer:

- **Join an employee informational webinar** where 2022 benefits and changes are presented. You can ask questions about any of the benefits presented. You would only need to attend one session as the same information is presented during the webinar. Just click the link in the flyer to register. Instructions are included.

Insurance Carrier Webinar Recorded Sessions

We continue to post recordings of the past sessions on the ParTNers YouTube page under the 2021 Employee Benefits Webinars found here: <https://www.youtube.com/playlist?list=PLH-QH4kFKvt-8l26k8zez7h-m4-HG4dVu>

This week's vision and dental webinar videos will be posted by EOD Monday, Oct. 4.

Attachments: Optum Health Chart
AE Employee Webinars Flyer

End of message

Connect with support for balancing work and life

Here4TN offers resources and services to help you or your family feel, live and work better. We're here to support you — from your emotional health to your financial well-being and beyond — so you can live life to the fullest. Connect with assistance, anytime.

EAP + BEHAVIORAL SERVICES	
Counseling	Here4TN offers telephone, in-person and virtual in-network counseling options, including up to five no-cost short-term counseling visits per issue, per year. You may also have access to additional support with long-term counseling through your behavioral health benefits, as needed.
1st Call provider search	To help you quickly and efficiently find an available provider, the dedicated Here4TN team can conduct a provider search on your behalf. Based on your specific preferences, concerns and availability, specialists will work to identify an appropriate provider with appointment availability.
Talkspace online therapy	Connect virtually with a licensed, network therapist, with unlimited text messaging and real-time audio/video appointments. Talkspace is subject to the same copays, coinsurance and deductibles as in-person visits.
Sanvello app	Sanvello offers clinical techniques to help dial down the symptoms of stress, anxiety and depression, anytime. Connect with powerful tools that are there for you right as symptoms come up.
Virtual visits	Meet with a psychiatrist or therapist online through private and secure video conferencing. Connect with behavioral health providers who can evaluate and treat general mental health conditions, such as depression and anxiety. Virtual visits are subject to the same copays, coinsurance and deductibles as in-person visits.
Online support & self-help tools	Explore thousands of articles, videos, interactive self-help programs, financial calculators and other tools on Here4TN.com. Search for a network provider for counseling, if needed.

EAP SERVICES	
WorkLife Services	Find WorkLife support services for parenting, eldercare, life learning, dealing with chronic conditions and convenience services. Request a consultation online or call. WorkLife specialists are on-hand 24/7 to offer no-cost referrals to verified resources and deliver educational materials.
Take Charge at Work	Take Charge at Work is a confidential program designed to help working adults recognize and manage symptoms of stress and depression at work. Work together with a coach to develop a long-term plan at a pace that works for you — so you can get your work-life balance back and start enjoying your life again.
Financial Services	Find financial services support to help you increase your savings, lower debts and improve credit so you can dial down financial stress. Get an online financial stress assessment; self-directed online learning; 25% discount for preparation of all personal income tax documents; plus two calls with a money coach – 100% confidential.

EAP SERVICES (continued)

Critical Incident Response Services	When something sudden or traumatic happens in the workplace, it's important to take steps to ensure your workplace's safety and employees' mental health. The professional crisis services of a Critical Incident Response Service help employees manage their feelings and can have a very positive impact on morale and productivity.
Training & Webinars	Here4TN offers access to training programs designed to enhance workplace and management skills and help address workplace concerns. Webinars and recorded trainings are offered to view on your own schedule.
Legal & Mediation Services	Connect with legal assistance services and mediation services that give you free and discounted confidential access to local attorneys and professional mediators. Get one 60-minute phone or in-person consultation with an attorney per issue per year at no cost. Plus, ongoing representation by an attorney at a 25% discounted rate. You can also get one 30-minute phone or in-person mediation consultation per issue per year at no cost and receive ongoing representation by a mediator at a 25% discounted rate.

BEHAVIORAL HEALTH SERVICES

Substance use services	With Here4TN, you have confidential substance use support available 24/7. We can help you find community resources, get an initial assessment and connect you with additional in-network behavioral health resources, as needed. Call 855-Here4TN to find a provider for immediate access to an in-network licensed clinician.
Family Support Program	The Family Support Program provides the ease and accessibility of a single point of contact for caregivers of children with behavioral health concerns including autism, anxiety, depression and other issues. The program is designed to help families navigate the often-confusing tangle of resources and stakeholders that can include schools, providers, public agencies and more.
Autism/Applied Behavioral Analysis (ABA) Care Advocacy	ABA uses behavioral principles to teach children with autism numerous life skills and behaviors they may otherwise not learn on their own. Your health plan has an expanded ABA benefit. With Autism Spectrum Diagnosis, it's never too soon to learn about services that can help you, your child and whole family live happier and healthier lives.

- **Confidential.** Your health information will remain confidential in accordance with the law.
- **Family support.** Here4TN is available for you and all your covered family members, too.
- **24/7 availability.** Connect with tools, resources, support and much more — around the clock.

Connect with Here4TN 24/7

855-Here4TN (855-437-3486)
Live chat M - F 8:30 am - 3:00 pm (CT)

Here4TN.com



Optum® is a registered trademark of Optum, Inc. in the U.S. and other jurisdictions. All other brand or product names are the property of their respective owners. Because we are continuously improving our products and services, Optum reserves the right to change specifications without prior notice. Optum is an equal opportunity employer.

This program should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room. This program is not a substitute for a doctor's or professional's care. Due to the potential for a conflict of interest, legal consultation will not be provided on issues that may involve legal action against Optum or its affiliates, or any entity through which the caller is receiving these services directly or indirectly (e.g., employer or health plan). This program and its components may not be available in all states or for all group sizes and is subject to change. Coverage exclusions and limitations may apply.



PARTNERS
FOR HEALTH

ANNUAL ENROLLMENT **FOR 2022 BENEFITS**

Join our benefits webinar!

Don't miss this opportunity to learn about your 2022 benefits options. Get information about health, dental, vision, pharmacy and more. Our team of experts will be available to answer your questions. See below for registration details.

STATE & HIGHER EDUCATION

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HERE'S HOW TO REGISTER FOR & JOIN A WEBINAR

Each presentation is the same, so find a date and time above that work for you and click on it. You will be asked to enter your name and email address to register. You will then receive an email with a reminder you can add to your calendar. It's that easy!

On the day of the webinar, click the link in the calendar invite. Then, click JOIN MEETING.

[You can find detailed instructions to join the webinar here.](#)

September 24, 2021

The following email was sent to agency benefits coordinators today.

Annual Enrollment Starts Next Friday, Oct. 1!

Here are the enrollment dates:

- **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
- **Local Education/Local Government/Retirees:** Friday, Oct. 1-Friday, Oct. 29

ABC Weekly Conference Calls Continue

Weekly ABC annual enrollment conference calls continue with calls next Tuesday, Sept. 28.

Benefits Administration staff will join you remotely via WebEx.

- **Higher Ed – Tuesday, Sept. 28 at 8:30 a.m. CT**
- **Local Ed – Tuesday, Sept. 28 at 10 a.m. CT**
- **Central State – Tuesday, Sept. 28 at 12:30 p.m. CT**
- **Local Government – Tuesday, Sept. 28 at 2 p.m. CT**

Use the webinar (WebEx) login link and instructions in the **attached** agenda or below.

Vendors continue to present in September, and you'll have the opportunity to ask questions.

Here are the remaining presenters:

September 28

- Cigna Medical Networks
- Cigna DHMO Dental
- Optum EAP/Behavioral Health
- Securian Financial Life Insurance (**state/higher ed only**)

ABC Call Conference Call Notes

Attached are the combined conference call notes from the Sept. 21 ABC conference calls. PDFs of the Sept. 21 vendor presentations have been posted to the [ABC webpage](#) under Conference Call Notes.

Materials Updates

New Network Hospital List!

A new network hospital list PDF has been posted on the [Carrier Information webpage](#) for your use and for members. This searchable list provides hospitals by county and shows which network they are in, so members can easily see which hospitals are in the narrow and broad networks. Again, the list is searchable and directions are included at the top of the document.

The list will get updated as needed, but here is a direct link:

https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/directory_hospitals_2022.pdf

2022 Summaries of Benefits and Coverage

The 2022 SBCs will be posted on the ParTNers for Health website by Sept. 30. You'll be able to find the 2022 versions by going to the bottom of the ParTNers homepage and clicking on **Summary of Benefits.**

Updated Medicare Part D Notice Posted

An updated Medicare Part D notice has been posted to the ParTNers website under Publications, The Tennessee Plan (for retirees with Medicare), Part D Pharmacy Information. All plan options offered by the State Group Insurance Program are deemed creditable coverage. We include information about this notice in the Annual Enrollment newsletters, and you can find it here: https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/medicare_part_d_notice.pdf

Annual Enrollment Insurance Carrier Webinars Continue Next Week!

Attached is a flyer you can share about the remaining **vision and dental** AE employee insurance carrier webinars. Employees must register as directed. A link to webinar instructions is included in the flyer. We are also posting recordings of the past sessions on the ParTNers YouTube page under the 2021 Employee Benefits Webinars found here:

<https://www.youtube.com/playlist?list=PLH-QH4kFKvt-8I26k8zez7h-m4-HG4dVu>

Feel free to share the webinar information below with the flyer:

- **Join an employee insurance Carrier webinar** where you can hear directly about products offered and ask questions. All webinars take place at 3:30 p.m. CT. Just click the link in the flyer to register. Instructions are included.

Annual Enrollment Employee Benefits Webinar

Attached is a flyer you can share about upcoming employee benefits webinars that start next Monday, Sept. 27. Employees must register as directed. A link to webinar instructions is included in the flyer. Feel free to share the information below with the flyer:

- **Join an employee informational webinar** where 2022 benefits and changes are presented. You can ask questions about any of the benefits presented. You would only need to attend one session as the same information is presented during the webinar. Just click the link in the flyer to register. Instructions are included.

October Preferred Drug List

Attached is the October PDL, which is posted on the CVS Caremark splash page, and a link is also posted on our [ParTNers for Health pharmacy webpage](#). As with each quarterly formulary update, CVS Caremark will mail notification letters to members who are affected by tier changes or drugs becoming non-covered. There are 92 members receiving letters about a drug tier change, and 83 members/prescriber letters being mailed for products being removed from the formulary.

Shown below are drugs being added to the PDL, changing to tier 3 (nonpreferred) or being removed from the PDL. Please encourage employees to use the state's specific webpage at info.caremark.com/stateoftn to view the most current version of the drug list, and to review

their prescription drug benefit information, request mail service orders and research drug information.

THE FOLLOWING CHANGES TO THE PDL (OR FORMULARY) AS OF OCTOBER 1, 2021:

Drugs being added to the PDL effective October 1, 2021:	
	<u>Drug name</u>
Tier 2 medications:	Tagrisso tablet
Drugs moving from Tier 2 (preferred brand) to Tier 3 (non-preferred brand) that will have a higher copay effective October 1, 2021:	
	<u>Drug name</u>
	Azopt suspension
	Dymista spray
	Truvada tablet
Drugs not covered effective October 1, 2021, unless prior authorization is approved through the CVS Caremark medical exception process:	
	<u>Drug name</u>
	Betamethasone Phosphate/Betamethasone Acetate injection - select NDCs
	Calcipotriene aerosol
	Cordran cream
	Codran lotion
	Cordran tape
	Doxycycline Hyclate 100 mg DR tablet
	Halog cream
	Halog ointment
	Halog solution
	Heparin injection
	Meloxicam capsule
	Paroxetine ER 37.5 mg tablet - select NDCs
	Ultravate lotion

Attachments: AE Employee Webinar Flyer
 AE Insurance Carrier Webinar Flyer

End of message



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FOR HEALTH**

**ANNUAL ENROLLMENT
FOR 2022 BENEFITS**

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Each presentation is the same, so find a date and time above that work for you and click on it. You will be asked to enter your name and email address to register. You will then receive an email with a reminder you can add to your calendar. It's that easy!

On the day of the webinar, click the link in the calendar invite. Then, click JOIN MEETING.

[You can find detailed instructions to join the webinar here.](#)

ANNUAL ENROLLMENT

Informational Insurance Carrier Webinars

Join these webinars where our insurance carriers will present their product options and you can ask questions about your insurance choices. A recording of each session will be posted on the Partners for Health YouTube page.



Register for...



Health savings account (all members) and flexible spending account options (state/higher education only – excludes offline agencies)

Wednesday, Sept. 15 – 3:30 p.m. CT



Disability plan options

(state/higher education only)

Thursday, Sept. 16 – 3:30 p.m. CT



Life insurance options

(state/higher education only)

Wednesday, Sept. 22 – 3:30 p.m. CT



Medical network options

(BlueCross BlueShield or Cigna)

Thursday, Sept. 23 – 3:30 p.m. CT



Vision options

Wednesday, Sept. 29 – 3:30 p.m. CT



Dental options

(Cigna DHMO or Delta Dental DPPO)

Thursday, Sept. 30 – 3:30 p.m. CT



HOW TO REGISTER FOR & JOIN A WEBINAR

Enter your name and email address to register. You will get an email with a reminder you can add to your calendar. (Please check your spam folder.)

On the webinar date/time, click the link in the calendar invite, then click JOIN MEETING.

Find detailed instructions to join the webinar [here](#).

Disability, FSA (excludes offline agencies) and life insurance benefits offered to all benefits-eligible state and higher education employees only.

September 17, 2021

The following email was sent to agency benefits coordinators today.

ABC Weekly Conference Calls Continue

Weekly ABC annual enrollment conference calls continue with calls next Tuesday, Sept. 21.

Benefits Administration staff will join you remotely via WebEx.

- **Higher Ed – Tuesday, Sept. 21 at 8:30 a.m. CT**
- **Local Ed – Tuesday, Sept. 21 at 10 a.m. CT**
- **Central State – Tuesday, Sept. 21 at 12:30 p.m. CT**
- **Local Government – Tuesday, Sept. 21 at 2 p.m. CT**

Use the webinar (WebEx) login link and instructions in the **attached** agenda or below.

Vendors will present during our September calls, and you'll have the opportunity to ask questions. Here is the vendor presentation schedule:

September 21

- Davis Vision
- CVS Caremark Pharmacy
- Delta Dental DPPO
- MetLife Disability (**state/higher ed only**)

September 28

- Cigna Networks
- Cigna DHMO Dental
- Optum EAP/BH
- Securian Financial (**state/higher ed only**)

ABC Call Conference Call Notes

Attached are the combined conference call notes from the Sept. 14 ABC conference calls. PDFs of the Sept. 14 vendor presentations have been posted to the [ABC webpage](#) under Conference Call Notes.

New Annual Enrollment Video!

A new annual enrollment video has been posted to the [Annual Enrollment webpage](#) and the [Partners YouTube page](#).

Here is a direct link to this video you can share with employees:

<https://youtu.be/E847uoDPqCE>

Annual Enrollment PowerPoint Presentations

The annual enrollment PowerPoint presentations are posted on the [ABC webpage](#) by plan. You can download a copy of the presentation and tailor for your use; however, **please do not change the premium or important benefit information/benefit changes**. We've also posted a PDF version that you can share directly with your employees.

Annual Enrollment Insurance Carrier Webinars Continue Next Week!

Attached is a flyer you can share about upcoming AE employee insurance carrier webinars. Employees must register as directed. A link to webinar instructions is included in the flyer. Feel free to share the information below with the flyer:

- **Join an employee insurance Carrier webinar** where you can hear directly about products offered and ask questions. All webinars take place at 3:30 p.m. CT. Just click the link in the flyer to register. Instructions are included.

Annual Enrollment Employee Benefits Webinar

Attached is a flyer you can share about upcoming employee benefits webinars that start at the end of September. Employees must register as directed. A link to webinar instructions is included in the flyer. Feel free to share the information below with the flyer:

- **Join an employee informational webinar** where 2022 benefits and changes are presented. You can ask questions about any of the benefits presented. You would only need to attend one session as the same information is presented during the webinar. Just click the link in the flyer to register. Instructions are included.

Annual Enrollment Dates for 2022 Benefits

- **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
- **Local Education/Local Government/Retirees:** Friday, Oct. 1-Friday, Oct. 29

Attachments: AE Insurance Carrier Webinar Flyer
AE Webinars Flyer

End of message

ANNUAL ENROLLMENT

Informational Insurance Carrier Webinars

Join these webinars where our insurance carriers will present their product options and you can ask questions about your insurance choices. A recording of each session will be posted on the Partners for Health YouTube page.



Register for...



Health savings account (all members) and flexible spending account options (state/higher education only – excludes offline agencies)

Wednesday, Sept. 15 – 3:30 p.m. CT



Disability plan options

(state/higher education only)

Thursday, Sept. 16 – 3:30 p.m. CT



Life insurance options

(state/higher education only)

Wednesday, Sept. 22 – 3:30 p.m. CT



Medical network options

(BlueCross BlueShield or Cigna)

Thursday, Sept. 23 – 3:30 p.m. CT



Vision options

Wednesday, Sept. 29 – 3:30 p.m. CT



Dental options

(Cigna DHMO or Delta Dental DPPO)

Thursday, Sept. 30 – 3:30 p.m. CT



HOW TO REGISTER FOR & JOIN A WEBINAR

Enter your name and email address to register. You will get an email with a reminder you can add to your calendar. (Please check your spam folder.)

On the webinar date/time, click the link in the calendar invite, then click JOIN MEETING.

Find detailed instructions to join the webinar [here](#).

Disability, FSA (excludes offline agencies) and life insurance benefits offered to all benefits-eligible state and higher education employees only.



PARTNERS
FOR HEALTH

ANNUAL ENROLLMENT
FOR 2022 BENEFITS

Join our benefits webinar!

Don't miss this opportunity to learn about your 2022 benefits options. Get information about health, dental, vision, pharmacy and more. Our team of experts will be available to answer your questions. See below for registration details.

STATE & HIGHER EDUCATION

CLICK YOUR PREFERRED DATE TO REGISTER. ALL TIMES ARE CT.

[Monday, Sept. 27, 10-11 a.m.](#)

[Friday, Oct. 1, 2-3 p.m.](#)

[Wednesday, Oct. 6, 1-2 p.m.](#)

[Monday, Oct. 11, 2-3 p.m.](#)

[Thursday, Oct. 14, 3-4 p.m.](#)

LOCAL GOVERNMENT, LOCAL EDUCATION & RETIREES

CLICK YOUR PREFERRED DATE TO REGISTER. ALL TIMES ARE CT.

[Monday, Sept. 27, 1-2 p.m.](#)

[Thursday, Sept. 30, 10-11 a.m.](#)

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[Friday, Oct. 22, 2-3 p.m.](#)

HERE'S HOW TO REGISTER FOR & JOIN A WEBINAR

Each presentation is the same, so find a date and time above that work for you and click on it. You will be asked to enter your name and email address to register. You will then receive an email with a reminder you can add to your calendar. It's that easy!

On the day of the webinar, click the link in the calendar invite. Then, click JOIN MEETING.

[You can find detailed instructions to join the webinar here.](#)

September 10, 2021

The following email was sent to agency benefits coordinators today.

ABC Weekly Conference Calls Start Next Week!

As a reminder, **weekly ABC annual enrollment conference calls** start Sept. 14. Benefits Administration staff will join you remotely via WebEx.

- **Higher Ed – Tuesday, Sept. 14 at 8:30 a.m. CT**
- **Local Ed – Tuesday, Sept. 14 at 10 a.m. CT**
- **Central State – Tuesday, Sept. 14 at 12:30 p.m. CT**
- **Local Government – Tuesday, Sept. 14 at 2 p.m. CT**

Use the webinar (WebEx) login link and instructions in the **attached** agenda or below.

Vendors will present during all weekly calls in September, and you'll have the opportunity to ask questions. Here is the vendor presentation schedule:

Sept. 14

- BlueCross BlueShield Networks
- ActiveHealth
- Optum HSA
- Optum FSA (**state/higher ed only**)

Sept. 21

- Davis Vision
- CVS Caremark Pharmacy
- Delta Dental DPPO
- MetLife Disability (**state/higher ed only**)

Sept. 28

- Cigna Networks
- Cigna DHMO Dental
- Optum EAP/Behavioral Health
- Securian Financial (**state/higher ed only**)

Important! CHI Memorial and BlueCross Reach Agreement (all plans)

BlueCross BlueShield and CHI Memorial have reached an agreement. All CHI Memorial facilities and providers, including Chattanooga Heart Institute at Memorial will remain in Network S.

Members receiving services from a CHI Memorial facility or provider will continue to receive in-network benefits. **Attached** is a sample letter all impacted members will receive.

You can share the following message with impacted members:

Good news! All CHI Memorial facilities and providers, including Chattanooga Heart Institute at Memorial, will remain in BlueCross Network S. This means you and your family can keep going to CHI Memorial providers and facilities and will receive in-network benefits. Questions? Call BlueCross at 800.558.6213, M – F, 8 a.m. to 6 p.m. ET.

Annual Enrollment Insurance Carrier Webinars Start Next Week!

Attached is a flyer you can share about upcoming AE employee insurance carrier webinars. Employees must register as directed. A link to webinar instructions is included. **Please share the information below with the flyer:**

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Annual Enrollment Employee Benefits Webinar

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- **Join an employee informational webinar** where 2022 benefits and changes are presented. You can ask questions about any of the benefits presented. You would only need to attend one session as the same information is presented during the webinar. Just click the link in the flyer to register. Instructions are included.

4Mind4Body Webinar – Next Thursday, Sept. 16 (state only)

The next 4Mind4Body webinar will be held next week. We sent an email to all state employees about the webinar, and **you are welcome to share the information below:**

In partnership with Optum, the next **4Mind4Body webinar, Suicide Prevention**, will be held **Thursday, Sept. 16 from 11:30 a.m. – 12:30 p.m. CT.**

As suicide is the 10th leading cause of death in the United States, suicide prevention must be taken seriously. This training program uses lecture and group discussion to raise awareness of the risk factors of suicide and how to intervene if you believe someone is at risk.

Participants will:

- Raise awareness of suicide warning signs
- Identify resources for yourselves and others
- Identify facts and dispel myths about suicide
- Increase awareness of how suicide impacts Lesbian, Gay, Bisexual, Transgender (LGBT) people
- Discuss how depression, anxiety as well as substance and alcohol misuse impact the risk of suicide
- Discuss how to use QPR model (Question, Persuade, Refer) to intervene with someone at risk for suicide

Click this link below to register:

<https://tn.webex.com/tn/onstage/g.php?MTID=e42029626a867191e1b2fbbc9fdb5de2>

*Registration is required. Session will **not** be recorded. If Internet Explorer does not work for you to register, you may need to try a different browser.*

Find information about upcoming 4Mind4Body sessions at tn.gov/PartnersForHealth under Other Benefits, then EAP here: <https://www.tn.gov/partnersforhealth/other-benefits/eap.html>
Questions? Email partners.wellness@tn.gov

Reminder - Optum Financial HSA Webinar (all plans)

Optum Financial will host an upcoming informational webinar for members who want to learn more about the health savings account. No registration is required, and the webinar is open to all interested employees. **You can share the information below with your employees:**

Why to consider enrolling in an HSA will be held on Friday, Sept. 17, starting at 11 a.m. CT. The webinar will explain what a health savings account is, cost-saving benefits and investment opportunities. Save the date on your calendar and click the following link when it's time to join: <https://tn.webex.com/meet/brady.delander>.

Annual Enrollment Dates for 2022 Benefits

- **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
- **Local Education/Local Government/Retirees:** Friday, Oct. 1-Friday, Oct. 29

Attachments: CHI Memorial Back in Network State Letter
AE Employee Webinars Flyer
AE Insurance Carrier Webinars Flyer

End of message



1 Cameron Hill Circle
Chattanooga, TN 37402
bcbst.com

<Date>

<First Name> <Last Name>
<Address 1>
<Address 2>
<City>, <State> <Zip>

Dear <First Name>,

We're writing you today with some good news about your BlueCross provider network. **All CHI Memorial facilities and providers – including the Chattanooga Heart Institute at Memorial – will remain in Network S.**

What's Next?

This news means you can keep going to CHI Memorial providers and facilities and still receive in-network benefits and pay in-network rates.

We're Here to Help

Thank you for your patience as we've worked with Memorial to help you get the care you need at a price you can afford. If you have any questions about this letter, just give us a call at 1-800-558-6213. We're available Monday through Friday, 8 a.m. to 6 p.m. ET.

Thanks for allowing us to be your health care partner.

Best of Health,

A handwritten signature in black ink that reads "G. Henry Smith". The signature is written in a cursive style with a large initial "G".

G. Henry Smith
Senior Vice President, Operations and Chief Marketing Officer

BlueCross BlueShield of Tennessee (BlueCross) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. BlueCross does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

BlueCross:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as: (1) qualified interpreters and (2) written information in other formats, such as large print, audio and accessible electronic formats.
- Provides free language services to people whose primary language is not English, such as: (1) qualified interpreters and (2) written information in other languages.

If you need these services, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711).

If you believe that BlueCross has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance ("Nondiscrimination Grievance"). For help with preparing and submitting your Nondiscrimination Grievance, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711). They can provide you with the appropriate form to use in submitting a Nondiscrimination Grievance. You can file a Nondiscrimination Grievance in person or by mail, fax or email. Address your Nondiscrimination Grievance to: Nondiscrimination Compliance Coordinator; c/o Manager, Operations, Member Benefits Administration; 1 Cameron Hill Circle, Suite 0019, Chattanooga, TN 37402-0019; (423) 591-9208 (fax); Nondiscrimination_OfficeGM@bcbst.com (email).

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

BlueCross BlueShield of Tennessee, Inc., an Independent Licensee of the BlueCross BlueShield Association.

BlueCross BlueShield of Tennessee is a Qualified Health Plan Issuer in the Health Insurance Marketplace.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Si usted es miembro, llame al número de Servicio de atención a miembros que figura al reverso de su tarjeta de identificación de Miembro o al 1-800-565-9140 (TTY: 1-800-848-0298).

ملحوظة: إذا كنت تتحدث انكر اللغة، فإن خدمات المساعدة اللغوية تتوفر لك بلاإمجان. إذا كنت عضواً، فتصل برقم خدمة الأعضاء الموجود على ظهر بطاقة هوية العضو أو بالرقم 1-800-565-9140 (الهاتف النصي: 1-800-848-0298).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。若您是會員，請撥打會員 ID 卡背面的會員服務部號碼或 1-800-565-9140 (聽障專線 (TTY) : 1-800-848-0298)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Nếu quý vị là hội viên, hãy gọi đến số Dịch vụ Hội viên ở mặt sau thẻ ID Hội viên của quý vị hoặc 1-800-565-9140 (TTY: 1-800-848-0298).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 가입자의 경우, 가입자 ID 카드 뒷면의 가입자 서비스 전화번호 또는 1-800-565-9140(TTY: 1-800-848-0298) 번으로 전화하시기 바랍니다.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Si vous êtes adhérent, appelez le numéro du Service adhérents indiqué au dos de votre carte d'assuré adhérent ou appelez le 1-800-565-9140 (TTY/ATS : 1-800-848-0298).

ໄປດຳລາຍ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ,ການບໍລິການຊ່ວຍເຫຼືອດັ່ງ ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີເໝາະໃຫ້ທ່ານ. ຖ້າທ່ານເປັນສະມາຊິກ, ໃຫ້ໃຫ້ທ່ານເບິ່ງຂອງລ່າຍບໍລິການສະມາຊິກທີ່ມີຢູ່ດ້ານຫຼັງບັດ ID ສະມາຊິກຂອງທ່ານ ຫຼື 1-800-565-9140 (TTY: 1-800-848-0298).

ማሳሰቻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም አርዳታ ድርጅቶች፣ በነጻ ሊያገለግሉት ተከታይተዋል። አገልግሎት ለአገልግሎት መታወቂያ ጀርባ ላይ በሚገኘው የአገልግሎት አገልግሎት ቁጥር ወይም በ 1-800-565-9140 (መስማት ለተሳናቸው፣ TTY: 1-800-848-0298) ይደውሉ።

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Falls Sie ein Mitglied sind, rufen Sie die Nummer des Mitgliederdienstes auf der Rückseite Ihrer Mitglieds-ID-Karte oder 1-800-565-9140 (TTY: 1-800-848-0298) an.

સુચના: જો તમે ગુજરાતી બોલતા છો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. જો તમે સભ્ય છો, તો તમારા સભ્ય આઈડી કાર્ડની પાછળના ભાગે સર્વિસ નંબર ઉપર અથવા 1-800-565-9140 (TTY: 1-800-848-0298) પર કોલ કરો.

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。会員のお客様は、会員IDカードの裏面に記載の会員サービス番号あるいは1-800-565-9140 (TTY: 1-800-848-0298)まで、お電話にてご連絡ください。

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad.

Kung ikaw ay isang miyembro, tawagan ang numero ng Serbisyo sa Miyembro na nasa likod ng iyong Kard ng ID ng Miyembro o sa 1-800-565-9140 (TTY: 1-800-848-0298).

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। अगर आप सदस्य हैं तो अपने सदस्य आईडी कार्ड के पीछे दिए गए नंबर या 1-800-565-9140 (TTY: 1-800-848-0298) पर सदस्य सेवा नंबर पर फोन करें।

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Если Вы являетесь участником, позвоните в отдел обслуживания участников по номеру, указанному на обратной стороне Вашей идентификационной карты участника, или по номеру 1-800-565-9140 (TTY: 1-800-848-0298).

توجّه: اگر به زبان فارسی گفتگو می کنید، تمهيلات زبانی بصورت رایگان برای شما فراهم می باشد. در صورتیکه عضو هستید، با شماره خدمات اعضا در پشت کارت شناسایی عضو خود یا 1-800-565-9140 (TTY: 1-800-848-0298) تماس بگیرید.

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Si ou se yon manm, rele nimewo Sèvis Manm ki sou do kat ID Manm ou an oswa 1-800-565-9140 (TTY: 1-800-848-0298).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Członkowie mogą dzwonić pod numer działu Member Service podany na odwrocie karty identyfikacyjnej członka lub numer 1-800-565-9140 (TTY: 1-800-848-0298).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Caso seja membro, ligue para o telefone do serviço de Atendimento ao Membro informado no verso de seu cartão de identificação de membro ou para 1-800-565-9140 (TTY: 1-800-848-0298).

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Se è un membro, chiami il numero del Servizio per i membri riportato sul retro della Sua scheda identificativa del membro oppure il numero 1-800-565-9140 (TTY: 1-800-848-0298).

Díí baa akó nínízin: Díí saad bee yánilti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éí ná hólq. Naaltsóos bee ná ha'dít'éego, Naaltsóos Bá Hada'dít'éhígíí ninaaltsóos nit'ízi bee nééhozinígíí bine'déé' Naaltsóos Bá Hada'dít'éhígíí Bee Áka'anída'awo'í bibéesh bee hane'í biká'ígíí bee hodílnih doodago 1-800-565-9140 (Doo Adinits'agóógo q TTY: 1-800-848-0298) bee hodílnih.



**PARTNERS
FOR HEALTH**

ANNUAL ENROLLMENT FOR 2022 BENEFITS

Join our benefits webinar!

Don't miss this opportunity to learn about your 2022 benefits options. Get information about health, dental, vision, pharmacy and more. Our team of experts will be available to answer your questions. See below for registration details.

STATE & HIGHER EDUCATION

CLICK YOUR PREFERRED DATE TO REGISTER. ALL TIMES ARE CT.

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[Friday, Oct. 1, 2-3 p.m.](#)

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[Thursday, Oct. 14, 3-4 p.m.](#)

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[You can find detailed instructions to join the webinar here.](#)

ANNUAL ENROLLMENT

Informational Insurance Carrier Webinars

Join these webinars where our insurance carriers will present their product options and you can ask questions about your insurance choices. A recording of each session will be posted on the Partners for Health YouTube page.



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[CLICK HERE TO REGISTER](#)

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(state/higher education only)

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(BlueCross BlueShield or Cigna)

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(Cigna DHMO or Delta Dental DPPO)

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FOR HEALTH**

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Disability, FSA (excludes offline agencies) and life insurance benefits offered to all benefits-eligible state and higher education employees only.

September 9, 2021

The following email was sent to agency benefits coordinators today

Legal Guardian Letters

Last week, approximately 300 of the **attached** sample letters were mailed to employees who have children 18 or older who are on the plan under a legal guardianship order. The letter lets employees know that the dependent will be removed from coverage effective Jan. 1, 2022 unless Benefits Administration receives documentation that they have been adopted or meets one of BA's other categories.

Please contact BA or submit a Zendesk ticket if you have any questions.

Attachment: Legal Guardian Letter

End of message



STATE OF TENNESSEE
DEPARTMENT OF FINANCE AND ADMINISTRATION
BENEFITS ADMINISTRATION

312 Rosa L. Parks Avenue
Suite 1900 William R. Snodgrass Tennessee Tower
Nashville, Tennessee 37243-1102

Butch Eley
COMMISSIONER

Phone: (615) 741-3590 or (800) 253-9981
Fax: (615) 253-8556 Email: benefits.administration@tn.gov

Laurie Lee
EXECUTIVE DIRECTOR

[HOC First Name] [HOC Last Name]
[ADDRESS 1]
[CITY], [STATE] [Postal]

IMPORTANT ELIGIBILITY INFORMATION

[DATE]

Dear [HOC First Name] [HOC Last Name]:

Benefits Administration is conducting a review of the eligibility of dependents on the State Insurance Plans who are age 18 and older. Under Tennessee state law, legal guardianships and custodial arrangements for minors expire at age 18. This means we will be removing all legal guardian and custodial dependents from insurance coverage by our plans if the dependent:

- is already age 18 or older, or
- will be age 18 before January 1, 2022.

We are writing to let you know that we believe [Dep First Name] [Dep Last Name] meets one of the above categories and **will not be eligible for insurance coverage as your dependent after December 31, 2021.**

The above-named dependent(s) are eligible to remain on the plan after age 18 **only** if they qualify for coverage under another basis for eligibility, such as an order of adoption or a court order of conservatorship applying to adults (usually related to disability), or if this dependent is your child or stepchild. A natural, adopted, or step-child remains eligible for coverage on a parent's plan until age 26. Following termination of your dependent's insurance coverage, BA will send a separate letter explaining COBRA continuation options. In addition to COBRA continuation, your dependent may also be eligible for coverage through the Health Insurance Marketplace®. To learn more about Marketplace coverage, visit www.HealthCare.gov or call 1-800-318-2596 (TTY: 1-855-889-4325).

What You Can Do

- If you think you have received this letter in error, please contact your agency benefits coordinator or BA immediately.
- If you think your dependent is eligible as a natural child, adopted child, or under a conservatorship, please send the applicable birth certificate or court order, or other documentation to BA by **October 29th** along with a copy of this letter. BA will update your dependent's status and your dependent can remain on your coverage if other eligibility can be established through documentation.
- Tax returns will only be considered in relation to proof of financial responsibility for a step-child and are not considered in connection with other bases for eligibility.

If you take no action before October 29th, the above-named dependent will be removed from your coverage effective January 1, 2022.

Please contact your ABC or BA if you need additional assistance.

September 3, 2021

The following email was sent to agency benefits coordinators today.

Save the Date – Annual Enrollment Starts Oct. 1!

Here are the **Annual Enrollment dates for 2022 benefits:**

- **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
- **Local Education/Local Government/Retirees:** Friday, Oct. 1-Friday, Oct. 29

Annual enrollment newsletters started to drop in the mail today, Friday, Sept. 3, so members will get them within the next few weeks! The [ParTNers website](#) has been updated with information for annual enrollment. You can find digital newsletters on the Enrollment Materials webpage, updated premium charts and much more! Visit these important annual enrollment webpages for details:

[Annual Enrollment header](#) – includes AE dates/links to the other AE webpages

[About Enrollment webpage](#) – includes important updates and enrollment/webinar information for active employees

[Enrollment Materials webpage](#) – includes newsletter links and comparison charts

[For Retirement](#) – AE information for all retirees

Attached are two flyers you can share about upcoming AE employee webinars. Employees must register for the webinars as directed. A link to instructions is included.

- The first flyer is about the **Insurance Carrier webinars** where members can hear directly about products offered and ask questions.
- The second flyer is about the **Employee Informational Benefits webinars** where 2022 benefits and changes are presented. Employees can ask questions about any of the benefits presented. Employees would only need to attend one session as the same information is presented during the webinar.

As a reminder, **weekly ABC conference calls** start Sept. 14. Vendors will present on this date and presentations will continue through Sept. Details will be sent soon!

Network Change – HCA Purchased NorthCrest Health in Springfield (all plans)

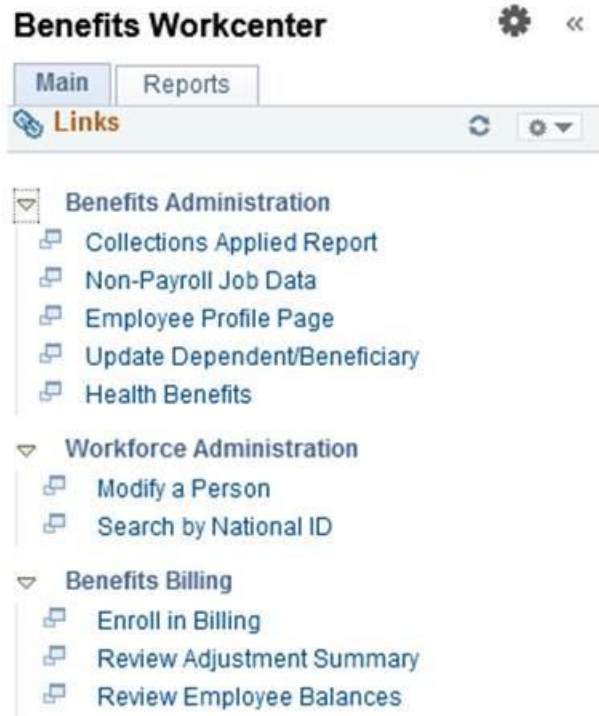
HCA has acquired NorthCrest Health in Springfield, Tenn., and the hospital will be renamed TriStar NorthCrest Medical Center. Both BlueCross and Cigna have confirmed that NorthCrest will continue to be in-network for members enrolled in BCBST Network S and Cigna LocalPlus through Dec. 31, 2021. We do not yet know the Network S or LocalPlus status of Tristar NorthCrest for plan year 2022 but it will be in Network P and OAP. We will share more information with ABCs and members as soon as it is available.

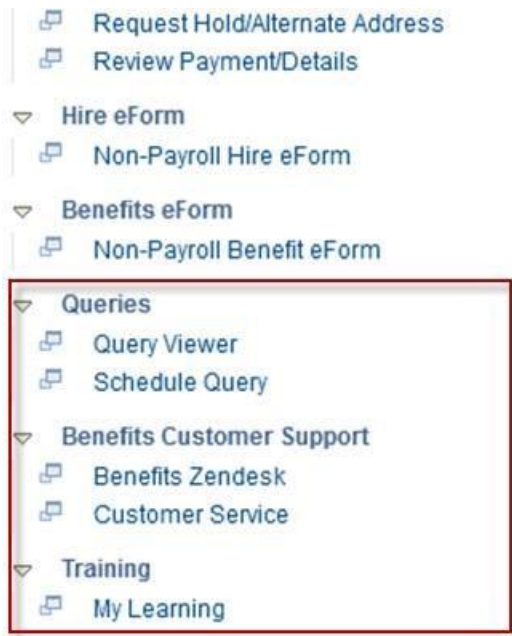
Benefits Workcenter Changes (all plans)

We have made some changes to the Benefits Workcenter in Edison based on feedback from this year's ABC survey. We have added three new sections to the Workcenter (see graphic and red box below):

- **Queries** – Here you can find links to **Query Viewer** and **Schedule Query**.
- **Benefits Customer Support** – This section includes links to Zendesk and the customer support page on the Partners for Health website.
- **Training** – You can use this link to access **My Learning** to find and take training classes, such as the New ABC and HIPAA training classes.

We hope you find these new links useful! We always appreciate the feedback you provide.





Optum Financial HSA Webinar (all plans)

Optum Financial will host an upcoming informational webinar for members who want to learn more about the health savings account. No registration is required, and the webinar is open to all interested employees. BA sent an email to all members this week.

Why to consider enrolling in an HSA will be held on Friday, Sept. 17, starting at 11 a.m. CT. The webinar will explain what a health savings account is, cost-saving benefits and investment opportunities. Save the date on your calendar and click the following link when it's time to join: <https://tn.webex.com/meet/brady.delander>.

Updated Vendor Contact List (all plans)

Attached is an updated vendor contact list with information for Delta Dental, the DPPO preferred provider for 2022 coverage. Please use this version for benefits fairs and materials.

This document is for ABC use only and is not to be shared with our members. Find the updated version on the [ABC webpage](#) under Conference Call Notes.

Virtual Road Show Recordings and Presentations (all plans)

PDFs of the Virtual Road Show presentations are posted on the [ABC webpage](#) under **2021 Virtual Trainings** by plan. Session recordings for those who were not able to attend are posted on the Partners YouTube page under [2021 Virtual RoadShow Training for ABCs playlist](#).

State Offices and Benefits Administration Closed for Labor Day

State offices and the BA service center will be closed Monday, September 6 for the Labor Day holiday.

We hope you have a great weekend!

-Benefits Administration

Attachments: AE Employee Webinars Flyer
AE Insurance Carrier Webinar Flyer
2021 Vendor Contact List

End of message



**PARTNERS
FOR HEALTH**

ANNUAL ENROLLMENT FOR 2022 BENEFITS

Join our benefits webinar!

Don't miss this opportunity to learn about your 2022 benefits options. Get information about health, dental, vision, pharmacy and more. Our team of experts will be available to answer your questions. See below for registration details.

STATE & HIGHER EDUCATION

CLICK YOUR PREFERRED DATE TO REGISTER. ALL TIMES ARE CT.

[Monday, Sept. 27, 10-11 a.m.](#)

[Friday, Oct. 1, 2-3 p.m.](#)

[Wednesday, Oct. 6, 1-2 p.m.](#)

[Monday, Oct. 11, 2-3 p.m.](#)

[Thursday, Oct. 14, 3-4 p.m.](#)

LOCAL GOVERNMENT, LOCAL EDUCATION & RETIREES

CLICK YOUR PREFERRED DATE TO REGISTER. ALL TIMES ARE CT.

[Monday, Sept. 27, 1-2 p.m.](#)

[Thursday, Sept. 30, 10-11 a.m.](#)

[Monday, Oct. 4, 1-2 p.m.](#)

[Friday, Oct. 15, 2-3 p.m.](#)

[Wednesday, Oct. 20, 1-2 p.m.](#)

[Friday, Oct. 22, 2-3 p.m.](#)

HERE'S HOW TO REGISTER FOR & JOIN A WEBINAR

Each presentation is the same, so find a date and time above that work for you and click on it. You will be asked to enter your name and email address to register. You will then receive an email with a reminder you can add to your calendar. It's that easy!

On the day of the webinar, click the link in the calendar invite. Then, click JOIN MEETING.

[You can find detailed instructions to join the webinar here.](#)

ANNUAL ENROLLMENT

Informational Insurance Carrier Webinars

Join these webinars where our insurance carriers will present their product options and you can ask questions about your insurance choices. A recording of each session will be posted on the Partners for Health YouTube page.



Register for...



[CLICK HERE TO REGISTER](#)

Health savings account (all members) and flexible spending account options (state/higher education only – excludes offline agencies)

Wednesday, Sept. 15 – 3:30 p.m. CT



[CLICK HERE TO REGISTER](#)

Disability plan options

(state/higher education only)

Thursday, Sept. 16 – 3:30 p.m. CT



[CLICK HERE TO REGISTER](#)

Life insurance options

(state/higher education only)

Wednesday, Sept. 22 – 3:30 p.m. CT



[CLICK HERE TO REGISTER](#)

Medical network options

(BlueCross BlueShield or Cigna)

Thursday, Sept. 23 – 3:30 p.m. CT



[CLICK HERE TO REGISTER](#)

Vision options

Wednesday, Sept. 29 – 3:30 p.m. CT



[CLICK HERE TO REGISTER](#)

Dental options

(Cigna DHMO or Delta Dental DPPO)

Thursday, Sept. 30 – 3:30 p.m. CT



HOW TO REGISTER FOR & JOIN A WEBINAR

Enter your name and email address to register. You will get an email with a reminder you can add to your calendar. (Please check your spam folder.)

On the webinar date/time, click the link in the calendar invite, then click JOIN MEETING.

Find detailed instructions to join the webinar [here](#).

Disability, FSA (excludes offline agencies) and life insurance benefits offered to all benefits-eligible state and higher education employees only.

Vendor Contact List for ABCs – Benefits Fairs/Materials

Health		
BlueCross BlueShield of Tennessee		
Amy Jordan	(423) 535-5788	Amy_Jordan@bcbst.com
Cigna		
Deb Williams – East TN	(860) 902-2815	Deborah.Williams@Cigna.com
Cindy Sexton – Middle TN	(615) 595-3389	Cynthia.Sexton@Cigna.com
Cato Johnson – West TN	(901) 748-4130	Cato.Johnson@Cigna.com
Celeste Sims – packets/materials	(615) 595-3134	Celeste.sims@cigna.com
Health Savings Account (HSA) and FSAs (FSAs are state and higher education only)		
Optum Financial		
Linnie Stelk (benefits fairs/materials)	(952) 687-4260	Linnie.stelk@optum.com
ABC HSA questions/FSA questions(ST/HE only)	(800) 294-6620 (M-F, 7-6 CT)	accountservices@optum.com Email address is only for ABCs, not members
Dental		
Cigna		
Deb Williams – East TN	(860) 902-2815	Deborah.Williams@Cigna.com
Cindy Sexton – Middle TN	(615) 595-3389	Cynthia.Sexton@Cigna.com
Cato Johnson – West TN	(901) 748-4130	Cato.Johnson@Cigna.com
Celeste Sims – packets and materials	(615) 595-3134	Celeste.sims@Cigna.com
Delta Dental (2022 coverage)		
David Pemberton	(615) 742-6902	stateoftn@deltadentaltn.com
Wellness Program		
ActiveHealth Management		
Matt Berte	(212) 479-0483	MBerte@activehealth.com
Employee Assistance Program (EAP)/Behavioral Health		
Optum		
Vanessa Clark	(763) 321-2530	Vanessa.clark@optum.com
Matt Cramer	(763) 797-2743	matthew.cramer@optum.com
Group Term Life Insurance		
Securian Financial (Minnesota Life)		
Michael Kretman (benefits fairs/materials)	(651) 665-3935 (651) 665-4128	benefitfairs@securian.com
Vision		
Davis Vision		
Larry Sheehan (benefits fairs/materials)	(508) 813-4211	lsheehan@davisvision.com
Corinne Campbell (benefits fairs/materials)	(516) 965-8582	Corinne.campbell@davisvision.com
Disability (state and higher education)		
MetLife		
Joe Carroll		StateofTennessee@metlife.com
Pharmacy		
CVS Caremark		
Danielle McKie	(615) 981-2123	Danielle.Mckie@cvshealth.com

August 27, 2021

The following email was sent to agency benefits coordinators today.

Benefits Information for Storm Victims

Our thoughts are with those recently impacted by the devastating floods in middle Tennessee. BA and our vendors pulled together resource information for impacted members, ABCs and agencies for your use and reference. Please feel free to share this information as needed.

Pharmacy Benefits

CVS Caremark, our prescription benefits manager, cares about the safety of our plan members and the delivery of their medications. They are prepared to help members in the following Tennessee counties affected by the recent flooding: Dickson, Hickman, Houston and Humphreys. Customer care will approve one-time emergency refills of a 10-day supply of medication for affected members in these areas.

Members who have questions about a medication delivery should call CVS Caremark at the toll-free number on their prescription ID card: 877.522.8679.

Members who may need a new pharmacy ID card may also call 877.522.8679, or you may log on to www.caremark.com to print a new one or view your member ID card on the CVS Caremark app.

Optum EAP/CIRS Information

EAP Services: Master's level specialists are available around the clock to assist our members. Preauthorization is required to utilize your Employee Assistance Program. Call 855-437-3486 to get help finding an appointment or to obtain your preauthorization.

Critical Incident Response Service: When something traumatic happens, it's important to take steps to ensure your workplace's safety and the employees' mental health. The professional crisis services of a Critical Incident Response Service help employees manage their feelings. CIRS is led by trained Here4TN EAP counselors with quality experience in helping traumatized people who may need intervention services, such as Group Critical Incident Response sessions. Counselors can provide assistance to managers and employees. To learn more about CIRS, example situations and determine if you may need a CIRS, call 855-Here4TN (855.437.3486).

Attached are two Here4TN flyers: a Here4TN overview flyer you can share with employees, and a manager resources flyer for your use.

Cigna ID Cards and Benefits

Attached is a flyer for any customer who needs a replacement ID card or information on how to pull up a digital copy using the myCigna app. You can also call 800.997.1617 and a customer service representative can help you get a new card.

Sometimes people need help when a disaster happens. Cigna has set up a disaster relief resource page that can be accessed by anyone. These resources can help you and your loved ones prepare for the unexpected, as well as cope during and after a disaster or tragedy. The link below can be used by anyone, including non-Cigna individuals.

[Disaster Resource Center | Cigna](#)

Cigna has also set up a phone line for non-Cigna individuals who may need help.

Non-Cigna clients, customers and communities in need: For individuals who do not have health benefits or employee assistance program benefits through Cigna but could benefit from talking with a qualified representative, the toll-free number 866.912.1687 will be open 24 hours a day, seven days a week, for as long as necessary. The service is open to anyone and free of charge to help people manage their stress and anxiety during this difficult time.

BlueCross BlueShield ID Card and Benefits

Access to care matters for BlueCross members, especially in times of crisis. BlueCross is here to help. You can call 800.558.6213 for support or log in to bcbst.com/tn_state to use the live chat service.

If you need non-emergency care, telehealth services are available through many of our in-network providers or through PhysicianNow (see **attached** flyer) by logging in to bcbst.com/tn_state. If you need a new member ID card, you can reach out by phone or chat. You can also print temporary ID cards and request replacement cards at bcbst.com/log-in/member or get a digital ID card through the [mobile app, my BlueTN](#) by following the instructions in the **attached** flyer.

Lauderdale Community Hospital–BlueCross Network S Change

Lauderdale Community Hospital in Ripley, Tenn., will no longer be in BCBST Network S effective Nov. 1, 2021. There are 74 affected BCBST health plan members who will receive the **attached** letter from BCBST regarding this change, including information on in-network options and frequently asked questions. Member FAQs are also **attached** for your reference.

If a member needs assistance with finding a new in-network provider or to learn more about Continuity of Care eligibility, call BCBST at 800.558.6213, Monday through Friday, 8 a.m. to 6 p.m. ET.

Supplemental Policy Review Reminder (local ed/local gov only)

As we prepare for the 2022 benefits year, Benefits Administration is reviewing insurance materials and policies for supplemental insurance products offered by our participating agencies, pursuant to Section IA, paragraph 10 of the Memorandum of Understanding between your agency and Benefits Administration. We need you to determine whether your agency's supplemental policies are subject to review by BA. **If you determine your agency's supplemental policies are subject to review by BA, please email policy information to benefits.privacy@tn.gov by Sept. 30, 2021.**

Please see the following considerations from BA to help you determine whether to have us review your policies:

1. Many of the following traditional insurance policies may not need to be submitted to BA for review unless they have provisions for payment of copays, deductible amounts or reimbursement of amounts covered by the state plan health insurance policy. BA does not require review of the following traditional policies:
 - traditional vision-only plans
 - traditional dental-only plans
 - long-term care policies
 - disability policies
 - life insurance policies
 - workers' compensation policies
 - accident, death & dismemberment insurance policies
2. If you submitted policies for review in 2018 and those policies have not changed, you do not need to send them again for review. For these policies, we do ask you to let us know which you are offering now and whether your agency will pay any portion of the premium.
3. All other policies your agency offers should be provided to BA for review regardless of whether the agency is paying all or part of the premium. For these policies, please provide a copy of the sample policy, enrollment material and promotional literature. If your agency is paying a portion of the premium, indicate that fact and state the percentage of the agency contribution.

PLEASE NOTE THESE ARE GUIDELINES ONLY. IF AN AGENCY MAKES AVAILABLE ADDITIONAL POLICIES TO ITS EMPLOYEES, THE AGENCY MUST MAKE ITS OWN DETERMINATION AS TO WHETHER THESE POLICIES SHOULD OBTAIN APPROVAL FROM BENEFITS ADMINISTRATION TO COMPLY WITH THE MOU.

If you need additional information about this supplemental policy review, please contact Chanda Rainey at Chanda.rainey@tn.gov.

Optum Financial HSA and FSA Webinars (state/higher ed only)

Optum Financial will host two upcoming informational webinars for members who want to learn more about the health savings account and/or flexible spending account. No registration is required, and both webinars are open to all interested employees. BA will send an email to all members next week.

Why to consider enrolling in an FSA will be held on Friday, Sept. 3, starting at 11 a.m. CT. The webinar will explain what a flexible spending account is, the different types of available accounts and the benefits. Save the date on your calendar and click the following link when it's time to join: <https://tn.webex.com/meet/brady.delander>.

Why to consider enrolling in an HSA will be held on Friday, Sept. 17, starting at 11 a.m. CT. The webinar will explain what a health savings account is, cost-saving benefits and investment opportunities. Save the date on your calendar and click the following link when it's time to join: <https://tn.webex.com/meet/brady.delander>.

Session Three - Virtual Road Show Information and Webinar Link (all plans)

The final session of the August virtual road show trainings will be held next week. A virtual ABC training session will be conducted on Tuesday and repeated on Thursday. You can choose the day and time that best suits your schedule.

You do not have to register. Just click the following link and log in to WebEx: <https://tn.webex.com/meet/zachary.colona>

PDFs of the session presentations are posted on the [ABC webpage](#) under **2021 Virtual Trainings** prior to the session by plan. You can download/print the PDFs to follow along and take notes. After the training session, BA will post recordings for those who are not able to attend on the Partners YouTube page under [2021 Virtual RoadShow Training for ABCs playlist](#).

2021 Annual Enrollment Dates

Here are the **Annual Enrollment dates for 2022 benefits:**

- **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
- **Local Education/Local Government/Retirees:** Friday, Oct. 1-Friday, Oct. 29

Attachments: BCBS BlueAccess ID Card Member Flyer
BCBS Physician Now Flyer
Cigna How to Access ID Card
Here4TN Manager Cheat Sheet
Here4TN Overview
Lauderdale Community Hospital Letter
Lauderdale Member FAQs

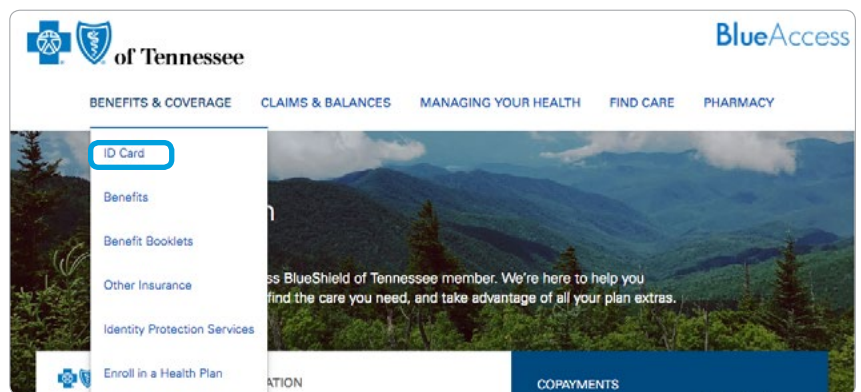
End of message

Need a New ID Card? Find it in BlueAccessSM.

BlueAccess is our secure member portal and can help you keep track of your health care plan. You can also print out or order important coverage documents like your Member ID card.

Getting Started

Logging in to BlueAccess is easy. Just go to **bcbst.com/member** and choose **Log in or Register**. Create a username and password, then log in. Select **Benefits & Coverage**, then **ID Card**. You'll be prompted to choose between printing a temporary ID card or ordering a permanent ID card.

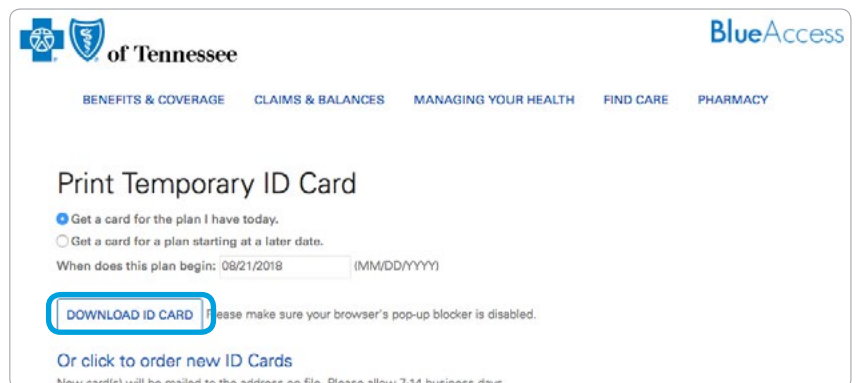


To print a temporary ID Card:

- Select the date for your plan.
- Choose **Download ID Card**.
- Once the card has downloaded, you can print it and use it as proof of coverage.

To order a new ID Card:

- Select **Order New ID Cards**.
- Choose how many cards you need.
- After you've done that, select **Place Order**. Your cards will arrive in the mail in a week to 10 days.



On BlueAccess you can also:

- Find a doctor.
- View claims and coverage.
- Take a Personal Health Assessment.
- Check Hospital & Physician Quality.
- Find exclusive Blue365[®] member discounts.

BlueCross BlueShield of Tennessee (BlueCross) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. BlueCross does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

BlueCross:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as: (1) qualified interpreters and (2) written information in other formats, such as large print, audio and accessible electronic formats.
- Provides free language services to people whose primary language is not English, such as: (1) qualified interpreters and (2) written information in other languages.

If you need these services, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711).

If you believe that BlueCross has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance (“Nondiscrimination Grievance”). For help with preparing and submitting your Nondiscrimination Grievance, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711). They can provide you with the appropriate form to use in submitting a Nondiscrimination Grievance. You can file a Nondiscrimination Grievance in person or by mail, fax or email. Address your Nondiscrimination Grievance to: Nondiscrimination Compliance Coordinator; c/o Manager, Operations, Member Benefits Administration; 1 Cameron Hill Circle, Suite 0019, Chattanooga, TN 37402-0019; (423) 591-9208 (fax); Nondiscrimination_OfficeGM@bcbst.com (email).

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

BlueCross BlueShield of Tennessee, Inc., an Independent Licensee of the BlueCross BlueShield Association.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-565-9140 (TTY: 1-800-848-0298).

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 800-565-9140 (رقم هاتف الصم والبكم: 1-800-848-0298).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-565-9140 (TTY:1-800-848-0298)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-565-9140 (TTY:1-800-848-0298).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-565-9140 (TTY: 1-800-848-0298) 번으로 전화해 주십시오.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-565-9140 (ATS : 1-800-848-0298).

ໂປດຊາບ: ຖ້າວ່າທ່ານເວົ້າພາສາລາວ, ການບໍລິການລູ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ຄ່າ ຈຳນວນ ພ້ອມທັງ ທ່ານ. ໂທສ 1-800-565-9140 (TTY: 1-800-848-0298).

ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም አርዳታ ድርጅቶች: በነጻ ሊያገዝዎት ተዘጋጅተዋል። ወደ ሚከተለው ቁጥር ይደውሉ 1-800-565-9140 (መስማት ለተሳናቸው: 1-800-848-0298).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-565-9140 (TTY: 1-800-848-0298).

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-800-565-9140 (TTY:1-800-848-0298)

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-800-565-9140 (TTY:1-800-848-0298) まで、お電話にてご連絡ください。

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-565-9140 (TTY:1-800-848-0298).

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توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با تماس بگیرد. 1-800-565-9140 (TTY:1-800-848-0298)

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UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-800-565-9140 (TTY: 1-800-848-0298).

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ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-565-9140 (TTY: 1-800-848-0298).

Díí baa akó nínízin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éí ná hólı́, kojí' hódíilnih 1-800-565-9140 (TTY: 1-800-848-0298).



Talk to Doctors Anytime You Need Them



Use PhysicianNow® Powered by MDLive when it's not an emergency, and you can't get to a doctor's office. **And you'll typically pay less than you would for a visit to the office or urgent care clinic.**

Use PhysicianNow for things like:

- › Allergies, cold, fever and flu
- › Sinus or respiratory issues
- › Skin conditions (rashes or insect bites)
- › Certain pediatric conditions
- › Urinary tract infections
- › Constipation or diarrhea
- › Earaches
- › Nausea and vomiting
- › Pink eye



Have your BlueCross Member ID card with you — your doctor will need information from it.

How do I use PhysicianNow?

You can talk with a doctor using your phone, online video chat, or the mobile app.

It's easy to get started.

Register for PhysicianNow by logging in to your BlueAccessSM account at [BCBST.com/members/TN_state](https://www.bcbst.com/members/TN_state) and clicking **Talk With a Doctor Now**. Or call **1-888-283-6691**.

Once you register, you can use it anytime. You can also download the app from the App Store® or Google Play®. Search for PhysicianNow, one word.



BlueCross BlueShield of Tennessee (BlueCross) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. BlueCross does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

BlueCross:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as: (1) qualified interpreters and (2) written information in other formats, such as large print, audio and accessible electronic formats.
- Provides free language services to people whose primary language is not English, such as: (1) qualified interpreters and (2) written information in other languages.

If you need these services, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711).

If you believe that BlueCross has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance ("Nondiscrimination Grievance"). For help with preparing and submitting your Nondiscrimination Grievance, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711). They can provide you with the appropriate form to use in submitting a Nondiscrimination Grievance. You can file a Nondiscrimination Grievance in person or by mail, fax or email. Address your Nondiscrimination Grievance to: Nondiscrimination Compliance Coordinator; c/o Manager, Operations, Member Benefits Administration; 1 Cameron Hill Circle, Suite 0019, Chattanooga, TN 37402-0019; (423) 591-9208 (fax); Nondiscrimination_OfficeGM@bcbst.com (email).

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

BlueCross BlueShield of Tennessee, Inc., an Independent Licensee of the BlueCross BlueShield Association.

The PhysicianNow program operates subject to state regulation and may not be available in certain states. PhysicianNow phone consultations are available 24/7 while video consultations are available during the hours of 7 a.m. to 9 p.m. seven days a week or by scheduled availability. MDLive is an independent internet-based service that allows consumers to select and interact with independent physicians and other health care providers. For complete terms of use, visit www.mdlive.com/terms-of-use.

The App Store is a registered trademark of Apple, Inc. Android is a trademark of Google, Inc.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-565-9140 (TTY: 1-800-848-0298).

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 800-565-9140-1 (رقم هاتف الصم والبكم: 1-800-848-0298).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-565-9140 (TTY:1-800-848-0298)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-565-9140 (TTY:1-800-848-0298).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-565-9140 (TTY: 1-800-848-0298) 번으로 전화해 주십시오.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-565-9140 (ATS : 1-800-848-0298).

ໂປດຊາບ: ຖ້າ ວ່າ ທ່ານ ແຈ້ງ ວ່າ ທ່ານ ທຳຮ້າງ ການ ນຳ ນຳ ທ່ານ ລູກ ວ່າ ທ່ານ ບໍ່ ຈຳ ຈັດ ທ່ານ ທຳຮ້າງ, ໂດຍ ບໍ່ ຈຳ ຈັດ, ທ່ານ ບໍ່ ຈຳ ຈັດ ທ່ານ ທຳຮ້າງ ທ່ານ. ໂທ 1-800-565-9140 (TTY: 1-800-848-0298).

ማሳሰቢያ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም አርዳታ ድርጅቶች፣ በነጻ ሊያግዝዎት ተዘጋጅተዋል። ወደ ሚክተለው ቁጥር ይደውሉ 1-800-565-9140 (መስማት ለተሳናቸው: 1-800-848-0298)።

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-565-9140 (TTY: 1-800-848-0298).

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-800-565-9140 (TTY: 1-800-848-0298)

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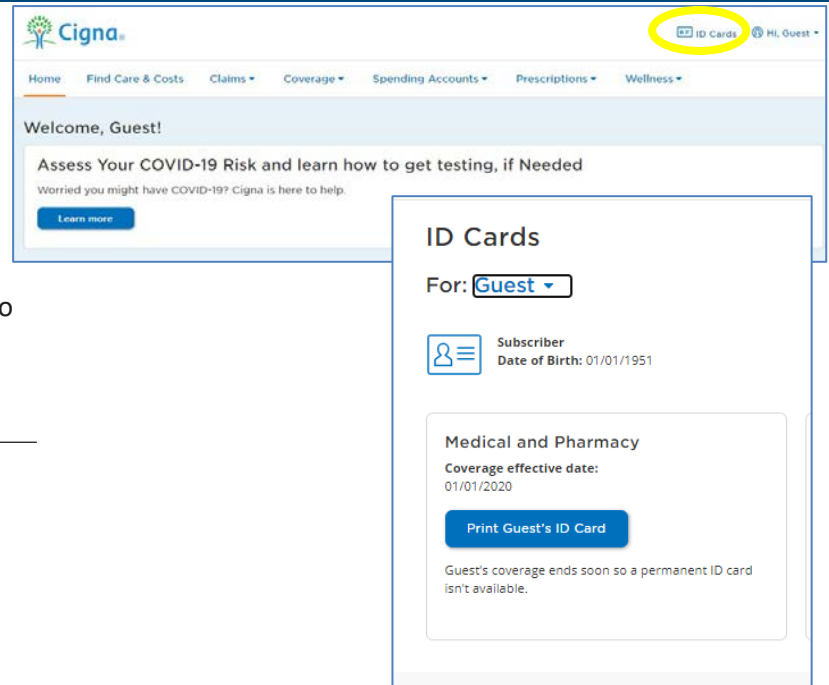
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Díí baa akó nínizin: Díí saad bee yánílti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éí ná hóló, kojí' hódíílnih 1-800-565-9140 (TTY: 1-800-848-0298).

HOW TO ACCESS ID CARD INFORMATION

Online via myCigna.com

- Visit www.mycigna.com
- Login to myCigna
- At the top Click "ID Cards"
- Choose member name from the drop down box, to print a temporary ID Card, click "Print ID Card"



The screenshot shows the myCigna website interface. At the top right, the "ID Cards" link is circled in yellow. Below the navigation bar, there is a "Welcome, Guest!" message and a COVID-19 risk assessment prompt. On the right side, a panel titled "ID Cards" is displayed, showing a dropdown menu for "For: Guest", a subscriber profile with a date of birth of 01/01/1951, and a "Print Guest's ID Card" button. Below this, it states "Medical and Pharmacy Coverage effective date: 01/01/2020" and "Guest's coverage ends soon so a permanent ID card isn't available."

You can also access ID card information on the myCigna mobile app.

- Download the mobile app
- Login to the mobile app
- Click ID cards from the home screen
- Email or fax your ID card information straight from your phone

Already have an ID but haven't visited myCigna in a while?

That's okay! If you don't remember your ID and password, just click "forgot user ID" or "forgot password" on the registration page and we'll help you out!



QUICK TIP:

Your dental plan does not require permanent ID cards.

You can print temporary ID cards or download ID card information from the mobile app if you would like.

Together, all the way.®



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Here4TN Management Resources | 855-Here4TN | www.here4TN.com

Management Consultations

Licensed clinicians and Certified Employee Assistance Professionals can help managers with workplace issues and provide resources to:

- Identify and manage troubled employees
- Learn to give clear and constructive feedback
- Make referrals to Here4TN for counseling services
- Deal with non-work issues that impact the workplace
- Build a positive and productive work environment

Critical Incident Response Service (CIRS)

When something sudden or traumatic happens in the workplace, it's important to take steps to ensure your workplace's safety and the employees' mental health. The professional crisis services of a Critical Incident Response Service (CIRS) help employees manage their feelings and can have a very positive impact on morale and productivity.

CIRs are led by trained Here4TN EAP counselors with quality experience in helping traumatized persons who may need intervention services, such as Group Critical Incident Response sessions. Counselors can provide assistance to managers and employees.

To learn more about CIRS, example situations and determine if you may need a CIRS, call **855-Here4TN**.

Trainings

Here4TN offers interactive and professionally delivered training programs on a variety of topics related to workplace issues and work-life balance. Delivered by Optum's Training Department, these training sessions include:

- Professional development programs
- Consultation services (to learn which training programs are most appropriate)
- Onsite Trainings
- Webinars

Supervisor Manual

A manager's work can be challenging. Get practical tips and strategies for managing a variety of situations that will help you maintain a positive, productive work environment.

The Here4TN supervisor manual is filled with practical tips and strategies for managing workplace performance, maintaining a positive environment and handling critical incidents. It also shows you how the resources available from Here4TN can help you achieve these goals.

Get answers to your questions — **big and small**



Juggling everything on your to-do list while taking care of your own health — mental and physical — can be challenging. With additional stressors like relationship challenges, home repairs, childcare and eldercare, many people are feeling overwhelmed these days. **Here4TN** can help.

WorkLife Services

WorkLife Services help make life a little less stressful by connecting you with:

- ▶ Child, family and parenting support services
- ▶ Education resources for kindergarten through adult
- ▶ Adult care and eldercare support services
- ▶ Chronic illness and condition support services
- ▶ Discounted legal services
- ▶ Personal services such as finding a plumber or concert tickets

Employee Assistance Program

The EAP connects you with specialists 24/7 and offers five confidential counseling sessions per issue, per year at no additional cost* to you. **Here4TN** can help with topics including:

- ▶ Depression, anxiety and stress
- ▶ Living with chronic conditions
- ▶ Sleep disorders
- ▶ Substance use issues
- ▶ Relationship and family concerns

Call to speak confidentially** with a specialist or to get referrals or prior approval for services, including virtual visits.



Child, family and parenting support services



Education resources



Adult care and eldercare support services



Chronic illness and condition support services



Personal services



Talk with a specialist who cares, 24/7:

855-Here4TN
(855-437-3486)

Or visit:

Here4TN.com

Take Charge at Work

Trouble concentrating? Feeling sluggish? This may be a sign of something more. **Take Charge at Work** can help you recognize and manage stress and depression at your workplace. Start with an assessment, and then work with a coach to create a personal plan.

"The person I spoke to had the kindest voice. They were **professional and compassionate.**"

Behavioral Health Services

Optum is your behavioral health and substance use benefits administrator, and **Here4TN** can help you learn about your benefits, search for in-network providers and connect for a virtual visit. To get details about what's covered and to view your member handbook and plan documents, visit tn.gov/partnersforhealth.



Substance Use

If you or someone in your family has substance use concerns, connect with a highly trained and licensed advocate at **Here4TN**. Your advocate will talk with you about your unique situation, answer questions, help create a personalized treatment plan and help with family support. The service is completely confidential.

To connect with any of these resources, contact **Here4TN**.

855-Here4TN

(855-437-3486)

Or visit:

Here4TN.com

Talkspace

Regularly communicate with a therapist safely and securely from your phone or desktop with **Talkspace**. You can start therapy within hours of choosing your therapist, and it's secure and confidential.

Sanvello

Get the **Sanvello app** for tools to help you manage stress. Sanvello can also support you if you're dealing with ongoing concerns like depression and anxiety.



***Here4TN** Employee Assistance Program (EAP) services are available to you and your family at no extra cost as part of your benefits. The five EAP visits per year, per issue are per individual. Members are ineligible for EAP visits while they are currently receiving Behavioral Health Services.

State and Higher Education: EAP services are available to all benefits-eligible employees and their eligible family members, even if they are not enrolled in medical insurance.

Local Education and Local Government: EAP services are available to employees who are enrolled in medical insurance. Dependents are eligible even if they are not enrolled in medical insurance.

All members (employees and dependents) enrolled in medical insurance are also eligible for behavioral health benefits.

**This program is confidential in accordance with the law.

Please note: While **WorkLife Services** and all referrals are included as part of your benefits, you will have to pay for any **WorkLife Services** you decide to use. Our specialists cannot book or purchase services on your behalf. This is an educational referral-based service only. Certain services may not be available in some benefit plans. Consult your benefit plan to know what is available.

This program should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room. This program is not a substitute for a doctor's or professional's care. Due to the potential for a conflict of interest, legal consultation will not be provided on issues that may involve legal action against Optum or its affiliates, or any entity through which the caller is receiving these services directly or indirectly (e.g., employer or health plan). This program and its components may not be available in all states or for all group sizes and are subject to change. Coverage exclusions and limitations may apply.

Benefits Administration does not support any practice that excludes participation in programs or denies the benefits of such programs on the basis of race, color, national origin, sex, age or disability in its health programs and activities. If you have a complaint regarding discrimination, please call 866-576-0029 or 615-741-4517.

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1 Cameron Hill Circle
Chattanooga, TN 37402
bcbst.com

<Date>

<First Name> <Last Name>
<Address 1>
<Address 2>
<City>, <State> <Zip>

Dear <First Name>,

We work to provide you and your family access to high-quality, affordable care. We deliver on this promise by negotiating with health care providers to give you discounted rates that save you money. While we prefer not to make changes to our networks, sometimes it becomes necessary.

What's Changing?

Lauderdale Community Hospital, in Ripley, Tenn., will no longer be in Blue Network SSM beginning Nov. 1, 2021. We don't want you to pay more for your care, so we've included a list of other nearby hospitals in Network S.

Alternate Network Facility

West Tennessee Healthcare
Baptist Memorial Hospital
Baptist Memorial Hospital for Women
Baptist Memorial Hospital
Spence and Becky Wilson Baptist Children's Hospital
Regional One Health Medical Center
St. Francis Hospital Memphis
St. Francis Hospital Bartlett
Jackson-Madison County General Hospital

Location

Dyersburg, Tenn.
Tipton, Tenn.
Memphis, Tenn.
Collierville, Tenn.
Memphis, Tenn.
Memphis, Tenn.
Memphis, Tenn.
Bartlett, Tenn.
Jackson, Tenn.

What's Next?

If you get care at Lauderdale Community Hospital through Oct. 31, 2021, we'll pay for your care at in-network rates, and you'll get in-network benefits.

On and after Nov. 1, 2021:

- If you get non-emergency care from this facility or one of its providers, you'll have to pay more out of your own pocket. **This is the case even if you or your doctor got prior authorization for your care.** Your out-of-network copay, deductible, and coinsurance amounts will be more than the copay, deductible, and coinsurance you pay when you visit in-network hospitals and providers. You'll also pay for any charges above the allowed amount (the most the plan will pay for a covered service) if the hospital or provider sends you a bill for those charges.
- In an emergency, you should go to the closest emergency room. If you receive emergency care from Lauderdale Community Hospital, your emergency care services will still be covered at the in-network level under your plan's emergency room coverage

- Before scheduling services, please confirm who will provide these services and make sure they're in your network.

We're Here to Help

If you're getting ongoing care from Lauderdale Community Hospital, you can ask us to keep covering this treatment. To do that, or for help finding a new hospital in your network, just give us a call at 1-800-558-6213. We're available Monday through Friday, 7 a.m. to 5 p.m. (CT). You can also find more network hospitals, facilities and providers at bcbst.com/members/TN_state.

Thanks for allowing us to be your health care partner.

Best of Health,



G. Henry Smith
Senior Vice President, Operations and Chief Marketing Officer

SAMPLE

Frequently Asked Questions

What if I am admitted before Nov. 1, 2021, but my stay continues past this date?

Approvals usually cover specific days. As long as BlueCross BlueShield has approved your stay, the medically necessary services you receive on approved days will be covered at the in-network benefit level, even if you stay after Oct. 31, 2021.

What if I am receiving ongoing treatment on Nov. 1, 2021?

You may be eligible for Continuity of Care. See the Continuity of Care page included in this mailing for more information.

I've been approved for services that start after Nov. 1, 2021. What should I do?

Please call BlueCross BlueShield at the toll-free number on your BlueCross BlueShield ID card, 1-800-558-6213. A Customer Service Representative will help you get approval for treatment at another hospital in your network. They can also work with you to determine if you're eligible for Continuity of Care.

What if my primary care or specialist provider admits patients only to Lauderdale Community Hospital?

You'll need to choose an in-network primary care provider (PCP) and/or specialist to continue receiving in-network benefits for services. BlueCross BlueShield can help you find a new PCP or specialist. Please call us at the toll-free number on your BlueCross BlueShield ID card, 800-558-6213. You can also visit bcbst.com/members/TN_state to find a list of PCPs and specialists in your network.

What if I receive emergency care at Lauderdale Community Hospital?

Your emergency care services will be covered at the in-network level under your plan's emergency room coverage. If you're admitted to the hospital from the emergency room, and BlueCross BlueShield has approved your stay, medically necessary services for the approved days will be covered at the in-network level. If BlueCross BlueShield decides you're stable and can transfer to an in-network hospital, but you continue to stay at the out-of-network hospital, further covered services will be subject to out-of-network benefits. This means you must pay for any charges above the plan's out-of-network payment for the rest of your stay.

After Oct. 31, 2021, if I continue to go to my primary care provider or specialist who is now out-of-network, will I pay out-of-network rates?

You will pay your out-of-network copays, deductible, and coinsurance amounts which are more than the copays, deductible, and coinsurance you pay when you visit in-network providers. You will also pay for any charges above the allowed amount (the most the plan will pay for a covered service) if the provider sends you a bill for those charges. You may be eligible for Continuity of Care for a period of time. See the Continuity of Care page included in this mailing for more information.

Continuity of Care

What is the Continuity of Care program and what do I have to do to see if I qualify for Continuity of Care?

The Continuity of Care program lets you to continue to get in-network coverage for certain medical treatment from your provider or at a hospital for a specific period of time—even after the provider or hospital leaves your plan’s BlueCross BlueShield network. This means that the plan will pay the provider or hospital as if they were still in-network, and you will pay your in-network deductible and coinsurance amounts. You will have to pay more than usual, however, if the hospital decides to bill you for more than the maximum allowable charge. There are two ways to find out more:

1. Call the number on your BlueCross BlueShield ID card, 1-800-558-6213. Let the Customer Service Representative know you’re in the middle of treatment. They’ll work with you to determine your eligibility for Continuity of Care. They can also help you complete the request form.
2. Use bcbst.com/members/TN_state
 - a. Go to bcbst.com/members/tn_state/resources/
 - b. Scroll to the middle of the page and click on **Forms**.
 - c. Download **Medical Transition Care Form**.
 - d. Print it and fill it out, or request that your provider fill it out.
 - e. The form will have the mailing address you must send it to.

Once you submit the request form, BlueCross BlueShield will send you a letter with our decision. If you have any questions, we’re happy to help. Please call us at the number on your BlueCross BlueShield ID card, 1-800-558-6213.

Is There a Deadline for Requesting Continuity of Care?

Yes. You must apply **within 30 days** of your health care provider’s termination date of Oct. 31, 2021. This is the date that your provider is leaving your plan’s network.

How long will Continuity of Care services be covered at the in-network rate?

If Continuity of Care is approved before Nov. 1, 2021, you may be able to receive in-network coverage for care from the hospital and/or your provider for up to ninety (90) days. The Continuity of Care period begins when your provider leaves the network. If you’re pregnant and in your second trimester on the date of your provider’s network termination, you may be able to continue to receive care from the hospital and/or your provider at the in-network rate for the remainder of your pregnancy, as well as during your post-partum care.

Will care from my provider be covered at in-network benefits under approved Continuity of Care?

If your provider agrees to provide Continuity of Care, he or she is agreeing to continue coverage of your care at the in-network rate. He or she must also:

- continue to accept reimbursement from BlueCross BlueShield at the rates we agreed to before the transitional period as payment in full;
- follow BlueCross BlueShield quality assurance requirements and provide BlueCross BlueShield with necessary medical information related to your care; and
- follow BlueCross BlueShield policies and procedures, including but not limited to, referrals, pre-authorizations and treatment plans approved by BlueCross BlueShield.

BlueCross BlueShield of Tennessee (BlueCross) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. BlueCross does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

BlueCross:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as: (1) qualified interpreters and (2) written information in other formats, such as large print, audio and accessible electronic formats.
- Provides free language services to people whose primary language is not English, such as: (1) qualified interpreters and (2) written information in other languages.

If you need these services, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-558-6213 (TTY: 1-800-848-0298 or 711).

If you believe that BlueCross has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance ("Nondiscrimination Grievance"). For help with preparing and submitting your Nondiscrimination Grievance, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-558-6213 (TTY: 1-800-848-0298 or 711). They can provide you with the appropriate form to use in submitting a Nondiscrimination Grievance. You can file a Nondiscrimination Grievance in person or by mail, fax or email. Address your Nondiscrimination Grievance to: Nondiscrimination Compliance Coordinator; c/o Manager, Operations, Member Benefits Administration; 1 Cameron Hill Circle, Suite 0019, Chattanooga, TN 37402-0019; (423) 591-9208 (fax); Nondiscrimination_OfficeGM@bcbst.com (email).

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

BlueCross BlueShield of Tennessee, Inc., an Independent Licensee of the BlueCross BlueShield Association.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-558-6213 (TTY: 1-800-848-0298).

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 800-558-6213 (رقم هاتف الصم والبكم: 1-800-848-0298).

注意: 如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-558-6213 (TTY:1-800-848-0298)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-558-6213 (TTY:1-800-848-0298).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-558-6213 (TTY: 1-800-848-0298) 번으로 전화해 주십시오.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-558-6213 (ATS : 1-800-848-0298).

បំណង: ភ្នំ ខ្មែរ ។ ប្រសិនបើ អ្នក ប្រើ ភាសា ខ្មែរ ជា ភាសា ដើម របស់ អ្នក ទាក់ ទង ជា មួយ យើង យើង មាន ប្រព័ន្ធ ប្រតិបត្តិ ឥត គិត ថ្លៃ ដើម្បី ជួយ អ្នក ទាក់ ទង ជា មួយ យើង យើង បាន លេខ ទូរស័ព្ទ 1-800-558-6213 (TTY: 1-800-848-0298) ។

ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም አርዳታ ድርጅቶች፣ በነጻ ሊያገዝዎት ተዘጋጅተዋል። ወደ ሚከተለው ቁጥር ይደውሉ 1-800-558-6213 (መስማት ለተሳናቸው: 1-800-848-0298)።

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-558-6213 (TTY: 1-800-848-0298).

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-800-558-6213 (TTY:1-800-848-0298)

注意事項: 日本語を話される場合、無料の言語支援をご利用いただけます。1-800-558-6213 (TTY:1-800-848-0298) まで、お電話にてご連絡ください。

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-558-6213 (TTY:1-800-848-0298).

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-800-558-6213 (TTY:1-800-848-0298) पर कॉल करें।

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-558-6213 (телатайн: 1-800-848-0298).

توجه: اگر یہ زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با تماس بگیرید 1-800-558-6213 (TTY:1-800-848-0298) .

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-800-558-6213 (TTY: 1-800-848-0298).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-800-558-6213 (TTY: 1-800-848-0298).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-800-558-6213 (TTY: 1-800-848-0298).

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-558-6213 (TTY: 1-800-848-0298).

Díí baa akó nínízin: Díí saad bee yánílti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éí ná hóló, kojí' hódíílníh 1-800-558-6213 (TTY: 1-800-848-0298).



Lauderdale Community Hospital Leaves BlueCross BlueShield Network S Frequently Asked Questions

1. Which hospital will no longer be in BlueCross Network S?

Lauderdale Community Hospital in Ripley, Tenn., will no longer be in Blue Network SSM.

2. When does this change take effect?

Nov. 1, 2021

3. Why won't Lauderdale Community Hospital be in the BCBST Network S?

Due to undisclosed concerns, BCBST made a decision to terminate their contract with Lauderdale Community Hospital.

4. Why can't Benefits Administration make Lauderdale Community Hospital stay in the network?

Benefits Administration does not contract directly with hospitals or providers. Our contracts with BCBST and Cigna include using the carriers' networks.

5. If Lauderdale Community Hospital will be out as of Nov. 1, 2021, what hospitals will be in Network S? Where can I find the list?

The closest in-network hospitals are West Tennessee Healthcare in Dyersburg, Tenn. and Baptist Memorial Hospital in Tipton, Tenn. Network information can be found on the ParTNers for Health website under [Carrier Information](#). You may also call BCBST at 800-558-6213, Monday through Friday, 8 a.m. to 6 p.m. ET, or you can use the [BCBST online provider search tool](#) which has been updated with an alert to reflect the Lauderdale Community Hospital termination.

6. Is Lauderdale Community Hospital in the other carrier networks offered by the state?

Lauderdale Community Hospital is in the Cigna LocalPlus and Cigna Open Access Plus networks. During Annual Enrollment held in October, eligible members can change networks for the upcoming year (Jan 1 – Dec 31). We encourage all members to review the networks carefully at this time as their selection is for the entire calendar year. After Annual Enrollment ends, members won't be able to change plans or network for 2022. See also Q&A #12 below.

7. What is Continuity of Care?

With Continuity of Care, you/the member can receive services at in-network coverage levels for specified medical conditions (i.e., pregnancy, cancer, trauma, transplant, recent surgeries, other complex conditions as medically necessary, etc.) when your/the member's health care provider leaves the plan's network and the immediate transfer of your/the member's care to another health care provider would be inappropriate and/or unsafe. This

care is for a specified period of time (usually 90 days). You/the member must apply for Continuity of Care within 30 days of your/the member's health care provider's termination date. This is the date that he or she is leaving the plan's network. If you feel a change may be inappropriate and/or unsafe you/the member and your/the member's provider should complete the Continuity of Care form found here:

<https://www.bcbst.com/docs/members/group/unique-care-request-form.pdf>. Please check with your providers. If they choose to bill for any charges above the maximum allowable charge, you will be responsible for those charges.

8. If I want to continue to use Lauderdale Community Hospital, what options do I have going forward?

You may use your out-of-network benefits, but you will pay more. Your member cost share is higher, and providers and hospitals may bill you for amounts above the maximum allowable charge. A Continuity of Care exception may be available for a specified period of time. See Continuity of Care Q&A #7 above.

9. What if I am in the middle of treatment for say, cancer? I can't leave my doctors or treatment program...what are my options?

A Continuity of Care exception may be available if you are undergoing medical treatment for acute medical conditions such as cancer. If you feel a change may be inappropriate and/or unsafe you should [complete the Continuity of Care form](#). Please check with your providers. If they choose to bill for any charges above the maximum allowable charge, you will be responsible for those charges. Call BCBST at 800-558-6213 to see if you qualify.

10. What if I am pregnant and I am set to deliver at Lauderdale Community Hospital?

A Continuity of Care exception may be available if you are undergoing treatment for acute medical conditions such as pregnancy. If you feel a change may be inappropriate and/or unsafe you should [complete the Continuity of Care form](#). Please check with your providers. If they choose to bill for any charges above the maximum allowable charge, you will be responsible for those charges. Call BCBST at 800-558-6213 to see if you qualify.

11. Who can help me find new doctors who are in-network?

BCBST is available to help you find a new in-network doctor. Call BCBST at 800-558-6213, Monday through Friday, 8 a.m. to 6 p.m. ET for assistance.

12. Can I change my enrollment from BCBST Network S to Cigna LocalPlus or Open Access Plus?

No. As a general rule, the State Insurance Plans are restricted from allowing the members to make mid-year benefit election changes because the plans are considered Cafeteria Plans under Federal tax law (specifically, Section 125 of the Internal Revenue Code). Compliance with these restrictions is required if the plan members are to receive their insurance premium contributions as a tax-free benefit, and the employer is to provide the benefit without having to treat it as taxable compensation. One of the primary federal requirements for Cafeteria Plans is that the employees sign up for the plan for the entire year (plan period) and are prohibited from changing the benefit plan during the plan period

except in very specific circumstances permitted in the plan document. The State Insurance Plans do not allow change due to a loss of a hospital or provider group.

August 20, 2021

The following email was sent to agency benefits coordinators today.

Session Two - Virtual Road Show Information and Webinar Link (all plans)

The August virtual road show trainings continue next week and run through Sept. 2. We will conduct a virtual ABC training session on Tuesday and repeat it on Thursday, so you can choose the day and time that best suits your schedule for each of the remaining sessions.

Attached is the flyer with information about sessions two and three. **You do not have to register.** On the date and time of the session, just click the following link and log in to WebEx: <https://tn.webex.com/meet/zachary.colona>

PDFs of the session presentations will be posted on the [ABC webpage](#) under **2021 Virtual Trainings** prior to the session for the week. You can download/print the PDFs to follow along and take notes. After the sessions each week, BA will post recordings for those who are not able to attend the trainings.

Edison Down for Maintenance

Edison will be down Sunday, Aug. 22, from 6 a.m. to 10 p.m. CT for regular monthly maintenance. During this time, you will not be able to log in. This information is posted on the Edison portal.

2021 Annual Enrollment Dates

Here are the **Annual Enrollment dates for 2022 benefits:**

- **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
- **Local Education/Local Government/Retirees:** Friday, Oct. 1-Friday, Oct. 29

Attachments: Virtual Summer Training LE & LG
Virtual Summer Training State & HE

End of message

2021 Virtual Summer Training

Local Education/Local Government

Session	Date of Meeting/Link
<p style="text-align: center;"><u>Session 1</u></p> <ul style="list-style-type: none"> • Welcome • Getting to Know Your Resources • Zendesk • Retirement Resources 	<p>Tuesday, Aug. 17, 2021 1 - 2:30 p.m. (CT) Thursday, Aug. 19, 2021 9 - 10:30 a.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>
<p style="text-align: center;"><u>Session 2</u></p> <ul style="list-style-type: none"> • Medical Support Orders • Leave/Billing/Late Terminations • Special Qualifying Events • Eligibility/Effective-Termination Dates/New Dependent Information 	<p>Tuesday, Aug. 24, 2021 1 - 2:30 p.m. (CT) Thursday, Aug. 26, 2021 9 - 10:30 a.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>
<p style="text-align: center;"><u>Session 3</u></p> <ul style="list-style-type: none"> • OPEB • Annual Enrollment-Benefits Changes • Annual Enrollment Changes • Annual Enrollment Do's and Don'ts • Questions and Answers 	<p>Tuesday, Aug. 31, 2021 1 - 2:30 p.m. (CT) Thursday, Sept. 2, 2021 9 - 10:30 a.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>

2021 Virtual Summer Training

State/Higher Education

Session	Date of Meeting/Link
<p style="text-align: center;"><u>Session 1</u></p> <ul style="list-style-type: none"> • Welcome • Getting to Know Your Resources • Zendesk • Retirement Resources 	<p>Tuesday, Aug. 17, 2021 9 - 10:30 a.m. (CT) Thursday, Aug. 19, 2021 1 - 2:30 p.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>
<p style="text-align: center;"><u>Session 2</u></p> <ul style="list-style-type: none"> • Medical Support Orders • Termination/Rehire • Leave/Billing/Late Terminations • Special Qualifying Events • Eligibility/Effective-Termination Dates/New Dependent Information 	<p>Tuesday, Aug. 24, 2021 9 - 10:30 a.m. (CT) Thursday, Aug. 26, 2021 1 - 2:30 p.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>
<p style="text-align: center;"><u>Session 3</u></p> <ul style="list-style-type: none"> • Annual Enrollment-Benefits Changes • Annual Enrollment Changes • Annual Enrollment Do's and Don'ts • Questions and Answers Session 	<p>Tuesday, Aug. 31, 2021 9 - 10:30 a.m. (CT) Thursday, Sept. 2, 2021 1 - 2:30 p.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>

August 16, 2021

The following email was sent to agency benefits coordinators today.

DPPPO Preferred Provider Announcement for 2022

The dental DPPPO preferred provider procurement contract award process has concluded and **Delta Dental of Tennessee** will be the new vendor for 2022. We are working on implementation details with Delta Dental as well as finalizing our annual enrollment materials. We plan to share the 2022 annual enrollment newsletters, voluntary products premium grids and health plan comparison charts with you early next week. Please watch your email!

Reminder - Virtual Road Show Information and Webinar Link (all plans)

The August virtual road show trainings start next week on Aug. 17 and run through Sept. 2. We will conduct a virtual ABC training session every Tuesday and repeat it on Thursday, so you can choose the day and time that best suits your schedule for each of three training sessions.

Attached is a flyer with information about the sessions. **You do not have to register for the trainings.** On the date and time of the session you want to attend, just click on the link with the session topics for that date, and log into WebEx.

PDFs for session 1 presentations will be posted on the [ABC webpage](#) under 2021 Virtual Trainings by plan on Tuesday morning, Aug. 17. If you would like, you can download/print the PDFs to follow along and take notes. After the sessions each week, BA will post recordings for those who are not able to attend the live trainings.

We will send reminders about these virtual trainings prior to each session. Mark your calendars now – we look forward to talking to you soon!

2021 Annual Enrollment Dates

Here are the **Annual Enrollment dates for 2022 benefits:**

- **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
- **Local Education/Local Government/Retirees:** Friday, Oct. 1-Friday, Oct. 29

Attachments: Virtual Summer Training LE & LG
Virtual Summer Training State & HE

End of message

2021 Virtual Summer Training

Local Education/Local Government

Session	Date of Meeting/Link
<p style="text-align: center;"><u>Session 1</u></p> <ul style="list-style-type: none"> • Welcome • Getting to Know Your Resources • Zendesk • Retirement Resources 	<p>Tuesday, Aug. 17, 2021 1 - 2:30 p.m. (CT) Thursday, Aug. 19, 2021 9 - 10:30 a.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>
<p style="text-align: center;"><u>Session 2</u></p> <ul style="list-style-type: none"> • Medical Support Orders • Leave/Billing/Late Terminations • Special Qualifying Events • Eligibility/Effective-Termination Dates/New Dependent Information 	<p>Tuesday, Aug. 24, 2021 1 - 2:30 p.m. (CT) Thursday, Aug. 26, 2021 9 - 10:30 a.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>
<p style="text-align: center;"><u>Session 3</u></p> <ul style="list-style-type: none"> • OPEB • Annual Enrollment-Benefits Changes • Annual Enrollment Changes • Annual Enrollment Do's and Don'ts • Questions and Answers 	<p>Tuesday, Aug. 31, 2021 1 - 2:30 p.m. (CT) Thursday, Sept. 2, 2021 9 - 10:30 a.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>

2021 Virtual Summer Training

State/Higher Education

Session	Date of Meeting/Link
<p style="text-align: center;"><u>Session 1</u></p> <ul style="list-style-type: none"> • Welcome • Getting to Know Your Resources • Zendesk • Retirement Resources 	<p>Tuesday, Aug. 17, 2021 9 - 10:30 a.m. (CT) Thursday, Aug. 19, 2021 1 - 2:30 p.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>
<p style="text-align: center;"><u>Session 2</u></p> <ul style="list-style-type: none"> • Medical Support Orders • Termination/Rehire • Leave/Billing/Late Terminations • Special Qualifying Events • Eligibility/Effective-Termination Dates/New Dependent Information 	<p>Tuesday, Aug. 24, 2021 9 - 10:30 a.m. (CT) Thursday, Aug. 26, 2021 1 - 2:30 p.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>
<p style="text-align: center;"><u>Session 3</u></p> <ul style="list-style-type: none"> • Annual Enrollment-Benefits Changes • Annual Enrollment Changes • Annual Enrollment Do's and Don'ts • Questions and Answers Session 	<p>Tuesday, Aug. 31, 2021 9 - 10:30 a.m. (CT) Thursday, Sept. 2, 2021 1 - 2:30 p.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>

August 6, 2021

The following email was sent to agency benefits coordinators today.

CHI Memorial Heart Institute at Memorial Leaving Network S (all plans)

On July 23, we informed you that CHI Memorial facilities and affiliated providers in the Chattanooga and surrounding area will be leaving the BlueCross BlueShield of Tennessee Network S effective Sept. 8, 2021. **It has been announced that Chattanooga Heart Institute at Memorial will also be leaving the network at this same time.**

On Aug. 6, BlueCross mailed the **attached** sample letter to 628 unique members who have utilized the Heart Institute. The attached letter explains the situation, in-network options and includes FAQs about eligibility for continued medical treatment at the in-network benefit level for up to 90 days by applying for a Continuity of Care exception. It is possible that some of these members also received the prior CHI Memorial letter previously sent to you as a reference.

Members can find an updated list of BCBST Network S facilities on the ParTNers website, under [Carrier Information](#), under **participating network hospitals** found here:

https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/directory_bc_hospitals_2021.pdf

We've posted information, the sample letters sent to members, member FAQs and lists of providers going out of network on the [Carrier Information](#) webpage. Here is a link to the member FAQs found on our website for your reference:

https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/chi_faqs.pdf

If you or a member needs further assistance, please call BCBST at 800.558.6213, M-F 8 a.m. – 6 p.m. ET.

Virtual Road Show Information and Webinar Link (all plans)

The August virtual road show trainings start on Aug. 17 and run through Sept. 2. We will conduct a virtual ABC training session every Tuesday and repeat it on Thursday, so you can choose the day and time that best suits your schedule for each of three training sessions.

Attached is a flyer with information about the sessions. **You do not have to register for the trainings.** On the date and time of the session you want to attend, just click on the link with the session topics for that date, and log into WebEx.

PDFs of the session presentations will be posted on the [ABC webpage](#) under 2021 Virtual Trainings by plan prior to the session for the week. If you would like, you can download/print the PDFs to follow along and take notes. After the sessions each week, BA will post recordings for those who are not able to attend the live trainings.

We will send reminders about these virtual trainings prior to each session. Mark your calendars now – we look forward to talking to you soon!

Email Address Correction Request (local gov only)

Next week, please watch your email for a request to update/correct email addresses for your employees in Edison. The email will include a spreadsheet to provide the new email addresses and return them to Benefits Administration by uploading the document into Zendesk. Deadline will be Aug. 20. Any questions may be sent to benefits.adminsitration@tn.gov.

2021 Annual Enrollment Dates

Here are the **Annual Enrollment dates for 2022 benefits:**

- **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
- **Local Education/Local Government/Retirees:** Friday, Oct. 1-Friday, Oct. 29

Attachments: CHI Memorial Heart Institute Term Letter
2021 Virtual Summer Training LE LG
2021 Virtual Summer Training State HE

End of message



1 Cameron Hill Circle
Chattanooga, TN 37402
bcbst.com

<Date>

<First Name> <Last Name>
<Address 1>
<Address 2>
<City>, <State> <Zip>

Dear <First Name>,

We work to provide you and your family access to high-quality, affordable care. We deliver on this promise by negotiating with health care providers to give you discounted rates that save you money. While we prefer not to make changes to our networks, sometimes it becomes necessary.

What's Changing?

CHI Memorial has decided to remove the **Chattanooga Heart Institute at Memorial** and its affiliated providers from your provider network, Blue Network SSM. As you may know, CHI Memorial previously announced all its providers and facilities are coming out of network. **This means all CHI Memorial providers and facilities will be out of your network effective Sept. 8, 2021.** We're still negotiating with CHI Memorial and hope we'll be able to keep them in Blue Network S. But we're sending you this letter so you know where to get care if we can't reach an agreement.

Alternate Network Facility

Location

Erlanger Medical Center	Chattanooga, Tenn.
Erlanger East	Chattanooga, Tenn.
Erlanger North	Chattanooga, Tenn.
Tennova Healthcare Cleveland	Cleveland, Tenn.
Southern Tennessee Medical Center	Sewanee, Tenn.
Rhea Medical Center	Dayton, Tenn.

What's Next?

If you get care from the Chattanooga Heart Institute or one of its providers through Sept. 7, 2021, we'll pay for your care at in-network rates, and you'll get in-network benefits. On and after Sept. 8, 2021:

- If you get non-emergency care from Chattanooga Heart Institute or any CHI Memorial provider or hospital, you'll have to pay more out of your own pocket. **This is the case even if you or your doctor got prior authorization for your care.** Your out-of-network copay, deductible, and coinsurance amounts will be more than the copay, deductible, and coinsurance you pay when you visit in-network hospitals and providers. You'll also pay for any charges above the allowed amount (the most the plan will pay for a covered service) if the hospital or provider sends you a bill for those charges.
- In an emergency, you should go to the closest emergency room. If you receive emergency care from a CHI Memorial hospital, your emergency care services will still be covered at the in-network level under your plan's emergency room coverage.

- Before scheduling services, please confirm who will provide these services and make sure they're in your network.

We're Here to Help

If you're getting ongoing treatment from the Chattanooga Heart Institute, you can ask us to keep covering this treatment. To do that, or for help finding a new heart center or cardiologist in your network, just give us a call at 1-800-558-6213. We're available Monday through Friday, 8 a.m. to 6 p.m. ET. You can also find more network hospitals, facilities and providers at bcbst.com/FindCare. Get updates and learn more at bcbstinfo.com.

Thanks for allowing us to be your health care partner.

Best of Health,



G. Henry Smith
Senior Vice President, Operations and Chief Marketing Officer

SAMPLE

Frequently Asked Questions

What if I am admitted before September 8, 2021, but my stay continues past this date?

Approvals usually cover specific days. As long as BlueCross BlueShield has approved your stay, the medically necessary services you receive on approved days will be covered at the in-network benefit level, even if you stay after September 8, 2021.

What if I am receiving ongoing treatment on September 8, 2021?

You may be eligible for Continuity of Care. See the Continuity of Care page included in this mailing for more information.

I've been approved for services that start after September 8, 2021. What should I do?

Please call BlueCross BlueShield at the toll-free number on your BlueCross BlueShield ID card, 800-558-6213. A Customer Service Representative will help you get approval for treatment at another hospital in your network. They can also work with you to determine if you're eligible for Continuity of Care.

What if my primary care or specialist provider admits patients only to CHI Memorial?

You'll need to choose an in-network primary care provider (PCP) and/or specialist to continue receiving in-network benefits for services. BlueCross BlueShield can help you find a new PCP or specialist. Please call us at the toll-free number on your BlueCross BlueShield ID card, 800-558-6213. You can also visit bcbst.com/members/TN_state to find a list of PCPs and specialists in your network.

What if I receive emergency care at CHI Memorial?

Your emergency care services will be covered at the in-network level under your plan's emergency room coverage. If you're admitted to the hospital from the emergency room, and BlueCross BlueShield has approved your stay, medically necessary services for the approved days will be covered at the in-network level. If BlueCross BlueShield decides you're stable and can transfer to an in-network hospital, but you continue to stay at the out-of-network hospital, further covered services will be subject to out-of-network benefits. This means you must pay for any charges above the plan's out-of-network payment for the rest of your stay.

After September 8, 2021, if I continue to go to my primary care provider or specialist who is now out-of-network, will I pay out-of-network rates?

You will pay your out-of-network copays, deductible, and coinsurance amounts which are more than the copays, deductible, and coinsurance you pay when you visit in-network providers. You will also pay for any charges above the allowed amount (the most the plan will pay for a covered service) if the provider sends you a bill for those charges. You may be eligible for Continuity of Care for a period of time. See the Continuity of Care page included in this mailing for more information.

Continuity of Care

What is the Continuity of Care program and what do I have to do to see if I qualify for Continuity of Care?

The Continuity of Care program lets you to continue to get in-network coverage for certain medical treatment from your provider or at a hospital for a specific period of time—even after the provider or hospital leaves your plan’s BlueCross BlueShield network. This means that the plan will pay the provider or hospital as if they were still in-network, and you will pay your in-network deductible and coinsurance amounts. You will have to pay more than usual, however, if the hospital decides to bill you for more than the maximum allowable charge. There are two ways to find out more:

1. Call the number on your BlueCross BlueShield ID card, 1-800-558-6213. Let the Customer Service Representative know you’re in the middle of treatment. They’ll work with you to determine your eligibility for Continuity of Care. They can also help you complete the request form.
2. Use bcbst.com/members/TN_state
 - a. Go to bcbst.com/members/tn_state/resources/
 - b. Scroll to the middle of the page and click on **Forms**.
 - c. Download **Medical Transition Care Form**.
 - d. Print it and fill it out, or request that your provider fill it out.
 - e. The form will have the mailing address you must send it to.

Once you submit the request form, BlueCross BlueShield will send you a letter with our decision. If you have any questions, we’re happy to help. Please call us at the number on your BlueCross BlueShield ID card, 1-800-558-6213.

Is There a Deadline for Requesting Continuity of Care?

Yes. You must apply **within 30 days** of your health care provider’s termination date of September 8, 2021. This is the date that your provider is leaving your plan’s network.

How long will Continuity of Care services be covered at the in-network rate?

If Continuity of Care is approved before September 8, 2021, you may be able to receive in-network coverage for care from the hospital and/or your provider for up to ninety (90) days. The Continuity of Care period begins when your provider leaves the network. If you’re pregnant and in your second trimester on the date of your provider’s network termination, you may be able to continue to receive care from the hospital and/or your provider at the in-network rate for the remainder of your pregnancy, as well as during your post-partum care.

Will care from my provider be covered at in-network benefits under approved Continuity of Care?

If your provider agrees to provide Continuity of Care, he or she is agreeing to continue coverage of your care at the in-network rate. He or she must also:

- continue to accept reimbursement from BlueCross BlueShield at the rates we agreed to before the transitional period as payment in full;
- follow BlueCross BlueShield quality assurance requirements and provide BlueCross BlueShield with necessary medical information related to your care; and
- follow BlueCross BlueShield policies and procedures, including but not limited to, referrals, pre-authorizations and treatment plans approved by BlueCross BlueShield.

BlueCross BlueShield of Tennessee (BlueCross) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. BlueCross does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

BlueCross:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as: (1) qualified interpreters and (2) written information in other formats, such as large print, audio and accessible electronic formats.
- Provides free language services to people whose primary language is not English, such as: (1) qualified interpreters and (2) written information in other languages.

If you need these services, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711).

If you believe that BlueCross has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance ("Nondiscrimination Grievance"). For help with preparing and submitting your Nondiscrimination Grievance, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711). They can provide you with the appropriate form to use in submitting a Nondiscrimination Grievance. You can file a Nondiscrimination Grievance in person or by mail, fax or email. Address your Nondiscrimination Grievance to: Nondiscrimination Compliance Coordinator; c/o Manager, Operations, Member Benefits Administration; 1 Cameron Hill Circle, Suite 0019, Chattanooga, TN 37402-0019; (423) 591-9208 (fax); Nondiscrimination_OfficeGM@bcbst.com (email).

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

BlueCross BlueShield of Tennessee, Inc., an Independent Licensee of the BlueCross BlueShield Association.

BlueCross BlueShield of Tennessee is a Qualified Health Plan Issuer in the Health Insurance Marketplace.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Si usted es miembro, llame al número de Servicio de atención a miembros que figura al reverso de su tarjeta de identificación de Miembro o al 1-800-565-9140 (TTY: 1-800-848-0298).

ملحوظة: إذا كنت تتحدث انكر اللغة، فإن خدمات المساعدة اللغوية تتوفر لك بلاإمجان.

إذا كنت عضواً، فاتصل برقم خدمة الأعضاء الموجود على ظهر بطاقة هوية العضو أو بالرقم 1-800-565-9140 (الهاتف النصي: 1-800-848-0298).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。若您是會員，請撥打會員 ID 卡背面的會員服務部號碼或 1-800-565-9140 (聽障專線 (TTY) : 1-800-848-0298)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Nếu quý vị là hội viên, hãy gọi đến số Dịch vụ Hội viên ở mặt sau thẻ ID Hội viên của quý vị hoặc 1-800-565-9140 (TTY: 1-800-848-0298).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 가입자의 경우, 가입자 ID 카드 뒷면의 가입자 서비스 전화번호 또는 1-800-565-9140(TTY: 1-800-848-0298) 번으로 전화하시기 바랍니다.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Si vous êtes adhérent, appelez le numéro du Service adhérents indiqué au dos de votre carte d'assuré adhérent ou appelez le 1-800-565-9140 (TTY/ATS : 1-800-848-0298).

ໄປດຳລາຍ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ,ການບໍລິການຊ່ວຍເຫຼືອດັ່ງ ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີເໝືອນໃຫ້ທ່ານ. ຖ້າທ່ານເປັນສະມາຊິກ, ໃຫ້ໃຫ້ທ່ານເບິ່ງຂອງລ່າຍບໍລິການສະມາຊິກທີ່ມີຢູ່ດ້ານຫຼັງອັດ ID ສະມາຊິກຂອງທ່ານ ຫຼື 1-800-565-9140 (TTY: 1-800-848-0298).

ማሳሰቢያ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም አርዳታ ደርጅቶች በነጻ ሊያገለግሉት ተከታይተዋል። አገልግሎት በአገልግሎት መታወቂያ ጀርባ ላይ በሚገኘው የአገልግሎት አገልግሎት ቁጥር ወይም በ 1-800-565-9140 (መስማት ለተገናኙቸው፡ TTY: 1-800-848-0298) ይደውሉ።

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Falls Sie ein Mitglied sind, rufen Sie die Nummer des Mitgliederdienstes auf der Rückseite Ihrer Mitglieds-ID-Karte oder 1-800-565-9140 (TTY: 1-800-848-0298) an.

સુચના: જો તમે ગુજરાતી બોલતા છો, તો વિશુદ્ધ ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. જો તમે સભ્ય છો, તો તમારા સભ્ય આઈડી કાર્ડની પાછળના સભ્ય સર્વિસ નંબર ઉપર અથવા 1-800-565-9140 (TTY: 1-800-848-0298) પર કોલ કરો.

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。会員のお客様は、会員IDカードの裏面に記載の会員サービス番号あるいは1-800-565-9140 (TTY: 1-800-848-0298)まで、お電話にてご連絡ください。

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Kung ikaw ay isang miyembro, tawagan ang numero ng Serbisyo sa Miyembro na nasa likod ng iyong Kard ng ID ng Miyembro o sa 1-800-565-9140 (TTY: 1-800-848-0298).

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। अगर आप सदस्य हैं तो अपने सदस्य आईडी कार्ड के पीछे दिए गए नंबर या 1-800-565-9140 (TTY: 1-800-848-0298) पर सदस्य सेवा नंबर पर फोन करें।

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Если Вы являетесь участником, позвоните в отдел обслуживания участников по номеру, указанному на обратной стороне Вашей идентификационной карты участника, или по номеру 1-800-565-9140 (TTY: 1-800-848-0298).

توجہ: اگر بہ زبان فارسی گفتگو می کنید، تمهيلات زبانی بصورت رایگان برای شما فراهم می باشد. در صورتیکه عضو هستید، با شماره خدمات اعضا در پشت کارت شناسایی عضو خود یا 1-800-565-9140 (TTY: 1-800-848-0298) تماس بگیرید.

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Si ou se yon manm, rele nimewo Sèvis Manm ki sou do kat ID Manm ou an oswa 1-800-565-9140 (TTY: 1-800-848-0298).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Członkowie mogą dzwonić pod numer działu Member Service podany na odwrocie karty identyfikacyjnej członka lub numer 1-800-565-9140 (TTY: 1-800-848-0298).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Caso seja membro, ligue para o telefone do serviço de Atendimento ao Membro informado no verso de seu cartão de identificação de membro ou para 1-800-565-9140 (TTY: 1-800-848-0298).

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Se è un membro, chiami il numero del Servizio per i membri riportato sul retro della Sua scheda identificativa del membro oppure il numero 1-800-565-9140 (TTY: 1-800-848-0298).

Díí baa akó nínízin: Díí saad bee yáníłtí'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiiik'eh, éí ná hóló. Naaltsóos bee ná ha'dít'éego, Naaltsóos Bá Hada'dít'éhígíí ninaaltsóos nit'ízi bee nééhozinígíí bine'déé' Naaltsóos Bá Hada'dít'éhígíí Bee Áka'anída'awo'í bibéesh bee hane'í biká'ígíí bee hodíłniih doodago 1-800-565-9140 (Doo Adinits'agóógo q TTY: 1-800-848-0298) bee hodíłniih.

2021 Virtual Summer Training

Local Education/Local Government

Session	Date of Meeting/Link
<p style="text-align: center;"><u>Session 1</u></p> <ul style="list-style-type: none"> • Welcome • Getting to Know Your Resources • Zendesk • Retirement Resources 	<p>Tuesday, Aug. 17, 2021 1 - 2:30 p.m. (CT) Thursday, Aug. 19, 2021 9 - 10:30 a.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>
<p style="text-align: center;"><u>Session 2</u></p> <ul style="list-style-type: none"> • Medical Support Orders • Leave/Billing/Late Terminations • Special Qualifying Events • Eligibility/Effective-Termination Dates/New Dependent Information 	<p>Tuesday, Aug. 24, 2021 1 - 2:30 p.m. (CT) Thursday, Aug. 26, 2021 9 - 10:30 a.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>
<p style="text-align: center;"><u>Session 3</u></p> <ul style="list-style-type: none"> • OPEB • Annual Enrollment-Benefits Changes • Annual Enrollment Changes • Annual Enrollment Do's and Don'ts • Questions and Answers 	<p>Tuesday, Aug. 31, 2021 1 - 2:30 p.m. (CT) Thursday, Sept. 2, 2021 9 - 10:30 a.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>

2021 Virtual Summer Training

State/Higher Education

Session	Date of Meeting/Link
<p style="text-align: center;"><u>Session 1</u></p> <ul style="list-style-type: none"> • Welcome • Getting to Know Your Resources • Zendesk • Retirement Resources 	<p>Tuesday, Aug. 17, 2021 9 - 10:30 a.m. (CT) Thursday, Aug. 19, 2021 1 - 2:30 p.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>
<p style="text-align: center;"><u>Session 2</u></p> <ul style="list-style-type: none"> • Medical Support Orders • Termination/Rehire • Leave/Billing/Late Terminations • Special Qualifying Events • Eligibility/Effective-Termination Dates/New Dependent Information 	<p>Tuesday, Aug. 24, 2021 9 - 10:30 a.m. (CT) Thursday, Aug. 26, 2021 1 - 2:30 p.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>
<p style="text-align: center;"><u>Session 3</u></p> <ul style="list-style-type: none"> • Annual Enrollment-Benefits Changes • Annual Enrollment Changes • Annual Enrollment Do's and Don'ts • Questions and Answers Session 	<p>Tuesday, Aug. 31, 2021 9 - 10:30 a.m. (CT) Thursday, Sept. 2, 2021 1 - 2:30 p.m. (CT)</p> <p>Link: https://tn.webex.com/meet/zachary.colona</p>

July 30, 2021

The following email was sent to agency benefits coordinators today.

Reminder - Discount Program Available for Members (local ed, local gov and higher ed)

During the July ABC call, information was relayed about the discount program available to state members that you are now able to offer your health plan members. So far, we have had hundreds of members sign up for this program! Thank you for sharing the information with your health plan members.

We've again **attached** a flyer about the program, along with the information below you can share directly with your members. Should you have any questions, you can contact Prachi Patel at Prachi.N.Patel@tn.gov.

****Please share the following information and flyer with health plan members****

As a member of Partners for Health, you qualify to take advantage of exclusive discounts from more than 900 merchants. We hope you enjoy the cost-saving and special benefit offerings that merchants have made available, just for you!

Here's how it works:

- Click on this link: [ParTNers for Health Member Discount](#)
- Choose your plan (higher ed/local ed/local gov)
- Choose your agency
- Input your work email address
- The Employee Discount Program portal will be sent to your email with instructions for how to create your PerkSpot account **(if you do not receive an email right away, please check your spam/junk folder – please allow 24 hours to receive this email)**

Once logged into PerkSpot, you can browse all discount offerings!

Reminder - Discount Program for Members (state)

During the July ABC call, we reminded ABCs about the discount program that is available to state employees. So far, we've had hundreds of state employees sign up for the program! Thank you for sharing the information with your employees.

We've again **attached** a flyer about the program, along with the information below you can directly share with your employees. Should you have any questions, you can contact Prachi Patel at Prachi.N.Patel@tn.gov.

****Please share the following information and flyer with employees****

As a state employee, you qualify to take advantage of exclusive discounts from more than 900 merchants. We hope you enjoy the cost-saving and special benefit offerings that merchants have made available, just for you!

Here's how it works:

- Click on this link: [ParTNers for Health Member Discount](#)
- Choose your plan (state)
- Choose your agency
- Input your work email address
- The Employee Discount Program portal will be sent to your email with instructions for how to create your PerkSpot account **(if you do not receive an email, check your Junk folder or your Daily Digest email – please allow 24 hours to receive this email)**

Once logged into PerkSpot, you can browse all discount offerings!

Edison Down for Maintenance

Edison will be down Sunday, Aug. 1 from 6 a.m. – 10 p.m. CT for regular monthly maintenance. During this time, you will not be able to log in. This maintenance information is posted on the Edison Portal.

2021 Annual Enrollment Dates

Here are the **Annual Enrollment dates for 2022 benefits:**

- **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
- **Local Education/Local Government/Retirees:** Friday, Oct. 1-Friday, Oct. 29

Attachment: Discount Program Website Tips

End of message



Tennessee Employee Discount Program



My Orders

Located in the upper right corner, this allows you to keep track of your past purchases made directly on the PerkSpot site.



Suggest a Business

Located in the upper right corner near account settings. This feature allows employees to suggest their favorite brands and local merchants to be added to your PerkSpot site.



My Interests


Choosing your top interests will generate perks you enjoy most front and center on your home page.




Local Merchants


Located in Quick Links, this allows you to use your location to see local offers for you. You can filter these by category and distance.

Customer Service:

 **Hours:** Monday - Friday, 9 a.m.- 6 p.m.

 **Phone Number:** 866-606-6057

 **Email:** cs@perkspot.com

 **Chat:** Submit a request to support.perkspot.com. The bilingual customer service team can answer any questions in both English and Spanish.

For any questions about PerkSpot's privacy policy, please go to ps.perkspot.com/privacy.

For any questions about the Tennessee Employee Discount Program, please contact prachi.n.patel@tn.gov

July 23, 2021

The following email was sent to agency benefits coordinators today.

CHI Memorial Facilities and Affiliated Providers Leaving Network S (all plans)

The following CHI Memorial facilities and affiliated providers in the Chattanooga and surrounding area will be leaving the BlueCross BlueShield of Tennessee Network S effective Sept. 8, 2021.

- CHI Memorial Hospital Chattanooga
- CHI Memorial Hospital Hixon
- CHI Memorial Hospital Georgia
- CHI Memorial Medical Group
- Chattanooga Heart Institute at Memorial (**remains in-network at this time**)

On July 21, BlueCross mailed the **attached** sample letter to 2,759 HOCs (total of 3,451 impacted members) who received services from an impacted facility on or after Jan. 1, 2021. This letter explains the situation, in-network options and includes FAQs about eligibility for continued medical treatment at the in-network benefit level for up to 90 days by applying for a Continuity of Care exception.

Members can find an updated list of BCBST Network S facilities on the ParTNers website, under [Carrier Information](#), under **participating network hospitals** found here:

https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/directory_bc_hospitals_2021.pdf

We've also posted information, the sample letter and member FAQs on the [Carrier Information](#) webpage.

If you or a member needs further assistance, please call BCBST at 800.558.6213, M-F 8 a.m. – 6 p.m. ET.

July 13 ABC Call Notes Correction (local gov only)

A correction has been made to the July 13 ABC call notes to reflect that local government agencies cannot opt-in or opt-out of pre-65 retiree coverage for the current fiscal year (July 1, 2021 through June 30, 2022) as the deadline was March 31, 2021. Any changes were effective July 1, 2021. Below is the revised question/answer:

Local Gov: So if an agency opted out, the agency would not receive a survey or need to participate in the survey?

Answer: There will not be a pre-65 portion of the survey if your agency has designated to opt-out, however, every agency that participates with the Tennessee Consolidated Retirement System and has not passed Resolution 31 will receive a post-65 survey. If you are not sure if your agency has opted in or completed the opt-in or opt-out form, we can check on that for you. **It is, however, too late to submit the opt-out/opt-in paperwork for this fiscal year (July 1, 2021 – June 30, 2022), as the deadline was March 31, 2021.**

The revised notes are posted on the [ABC webpage](#).

Email Address Correction Request (higher ed only)

Next week, please watch your email for a request to update/correct email addresses for your employees in Edison. The email will include a spreadsheet to provide the new email addresses and return them to Benefits Administration by uploading the document into Zendesk. Deadline will be Aug. 6. Any questions may be sent to benefits.adminsitration@tn.gov.

COVID-19 Benefits and Vaccine Information Document (all plans)

We have made updates to the [Coronavirus Benefits and Vaccine Information from Partners for Health](#) document found by clicking the yellow bar at the top of the [Partners for Health website](#). For your reference, the current version is dated July 23, 2021. The National Public Health Emergency has been extended through Oct. 17, 2021, and that is noted in the updated version. **Please continue to share the link and/or document with members.**

2021 Annual Enrollment Dates

Here are the **Annual Enrollment dates for 2022 benefits:**

- **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
- **Local Education/Local Government/Retirees:** Friday, Oct. 1-Friday, Oct. 29

Attachment: BCBST CHI Memorial Net S Letter

End of message



1 Cameron Hill Circle
Chattanooga, TN 37402
bcbst.com

<Date>

<First Name> <Last Name>

<Address 1>

<Address 2>

<City>, <State> <Zip>

Dear <First Name>,

We work to provide you and your family access to high-quality, affordable care. We deliver on this promise by negotiating with health care providers to give you discounted rates that save you money. While we prefer not to make changes to our networks, sometimes it becomes necessary.

What's Changing?

CHI Memorial has decided to remove CHI Memorial Hospital Chattanooga, CHI Memorial Hospital Hixson, CHI Memorial Hospital Georgia and their affiliated providers from your provider network (Blue Network SSM) effective Sept. 8, 2021. As of the date on this letter, this doesn't include Chattanooga Heart Institute at Memorial. We're sending you this letter so you know where to get in-network care if you need health care services on or after Sept. 8:

Network S Hospitals

Erlanger Medical Center

Erlanger East

Erlanger North

Tennova Healthcare Cleveland

Southern Tennessee Medical Center

Rhea Medical Center

Location

Chattanooga, Tenn.

Chattanooga, Tenn.

Chattanooga, Tenn.

Cleveland, Tenn.

Sewanee, Tenn.

Dayton, Tenn.

What's Next?

If you get care from a CHI Memorial provider or hospital through Sept. 7, 2021, we'll pay for your care at in-network rates, and you'll get in-network benefits. On and after Sept. 8, 2021:

- In an emergency, you should go to the closest emergency room. If you receive emergency care from a CHI Memorial hospital, your emergency care services will still be covered at the in-network level under your plan's emergency room coverage.
- If you get non-emergency care from a CHI Memorial provider or hospital, you'll have to pay more out of your own pocket. This is the case even if you or your doctor got prior authorization for your care. **Your out-of-network copay, deductible, and coinsurance amounts will be more than the copay, deductible, and coinsurance you pay when you visit in-network hospitals and providers. You will also pay for any charges above the allowed amount (the most the plan will pay for a covered service) if the hospital or provider sends you a bill for those charges.**
- Before scheduling services, please confirm who will provide these services and make sure they're in your network.

We're Here to Help

If you're getting ongoing treatment from a CHI Memorial provider, you can ask us to keep covering this treatment. To do that, or for help finding a new provider in your network, just give us a call at 1-800-558-6213. We're available Monday through Friday, 8 a.m. to 6 p.m. ET. You can also find more network hospitals, facilities and providers at [bcbst.com/FindCare](https://www.bcbst.com/FindCare). Get updates and learn more at [bcbstinfo.com](https://www.bcbstinfo.com).

Thanks for allowing us to be your health care partner.

Best of Health,

G. Henry Smith
Senior Vice President, Operations and Chief Marketing Officer

SAMPLE

Frequently Asked Questions

What if I am admitted before September 8, 2021, but my stay continues past this date?

Approvals usually cover specific days. As long as BlueCross BlueShield has approved your stay, the medically necessary services you receive on approved days will be covered at the in-network benefit level, even if you stay after September 8, 2021.

What if I am receiving ongoing treatment on September 8, 2021?

You may be eligible for Continuity of Care. See the Continuity of Care page included in this mailing for more information.

I've been approved for services that start after September 8, 2021. What should I do?

Please call BlueCross BlueShield at the toll-free number on your BlueCross BlueShield ID card, 800-558-6213. A Customer Service Representative will help you get approval for treatment at another hospital in your network. They can also work with you to determine if you're eligible for Continuity of Care.

What if my primary care or specialist provider admits patients only to CHI Memorial.?

You'll need to choose an in-network primary care provider (PCP) and/or specialist to continue receiving in-network benefits for services. BlueCross BlueShield can help you find a new PCP or specialist. Please call us at the toll-free number on your BlueCross BlueShield ID card, 800-558-6213. You can also visit bcbst.com/members/TN_state to find a list of PCPs and specialists in your network.

What if I receive emergency care at CHI Memorial.?

Your emergency care services will be covered at the in-network level under your plan's emergency room coverage. If you're admitted to the hospital from the emergency room, and BlueCross BlueShield has approved your stay, medically necessary services for the approved days will be covered at the in-network level. If BlueCross BlueShield decides you're stable and can transfer to an in-network hospital, but you continue to stay at the out-of-network hospital, further covered services will be subject to out-of-network benefits. This means you must pay for any charges above the plan's out-of-network payment for the rest of your stay.

After September 8, 2021, if I continue to go to my primary care provider or specialist who is now out-of-network, will I pay out-of-network rates?

You will pay your out-of-network copays, deductible, and coinsurance amounts which are more than the copays, deductible, and coinsurance you pay when you visit in-network providers. You will also pay for any charges above the allowed amount (the most the plan will pay for a covered service) if the provider sends you a bill for those charges. You may be eligible for Continuity of Care for a period of time. See the Continuity of Care page included in this mailing for more information.

Continuity of Care

What is the Continuity of Care program and what do I have to do to see if I qualify for Continuity of Care?

The Continuity of Care program lets you to continue to get in-network coverage for certain medical treatment from your provider or at a hospital for a specific period of time—even after the provider or hospital leaves your plan’s BlueCross BlueShield network. This means that the plan will pay the provider or hospital as if they were still in-network, and you will pay your in-network deductible and coinsurance amounts. You will have to pay more than usual, however, if the hospital decides to bill you for more than the maximum allowable charge. There are two ways to find out more:

1. Call the number on your BlueCross BlueShield ID card, 1-800-558-6213. Let the Customer Service Representative know you’re in the middle of treatment. They’ll work with you to determine your eligibility for Continuity of Care. They can also help you complete the request form.
2. Use bcbst.com/members/TN_state
 - a. Go to bcbst.com/members/tn_state/resources/
 - b. Scroll to the middle of the page and click on **Forms**.
 - c. Download **Medical Transition Care Form**.
 - d. Print it and fill it out, or request that your provider fill it out.
 - e. The form will have the mailing address you must send it to.

Once you submit the request form, BlueCross BlueShield will send you a letter with our decision. If you have any questions, we’re happy to help. Please call us at the number on your BlueCross BlueShield ID card, 1-800-558-6213.

Is There a Deadline for Requesting Continuity of Care?

Yes. You must apply **within 30 days** of your health care provider’s termination date of September 8, 2021. This is the date that your provider is leaving your plan’s network.

How long will Continuity of Care services be covered at the in-network rate?

If Continuity of Care is approved before September 8, 2021, you may be able to receive in-network coverage for care from the hospital and/or your provider for up to ninety (90) days. The Continuity of Care period begins when your provider leaves the network. If you’re pregnant and in your second trimester on the date of your provider’s network termination, you may be able to continue to receive care from the hospital and/or your provider at the in-network rate for the remainder of your pregnancy, as well as during your post-partum care.

Will care from my provider be covered at in-network benefits under approved Continuity of Care?

If your provider agrees to provide Continuity of Care, he or she is agreeing to continue coverage of your care at the in-network rate. He or she must also:

- continue to accept reimbursement from BlueCross BlueShield at the rates we agreed to before the transitional period as payment in full;
- follow BlueCross BlueShield quality assurance requirements and provide BlueCross BlueShield with necessary medical information related to your care; and
- follow BlueCross BlueShield policies and procedures, including but not limited to, referrals, pre-authorizations and treatment plans approved by BlueCross BlueShield.

BlueCross BlueShield of Tennessee (BlueCross) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. BlueCross does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

BlueCross:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as: (1) qualified interpreters and (2) written information in other formats, such as large print, audio and accessible electronic formats.
- Provides free language services to people whose primary language is not English, such as: (1) qualified interpreters and (2) written information in other languages.

If you need these services, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711).

If you believe that BlueCross has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance ("Nondiscrimination Grievance"). For help with preparing and submitting your Nondiscrimination Grievance, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711). They can provide you with the appropriate form to use in submitting a Nondiscrimination Grievance. You can file a Nondiscrimination Grievance in person or by mail, fax or email. Address your Nondiscrimination Grievance to: Nondiscrimination Compliance Coordinator; c/o Manager, Operations, Member Benefits Administration; 1 Cameron Hill Circle, Suite 0019, Chattanooga, TN 37402-0019; (423) 591-9208 (fax); Nondiscrimination_OfficeGM@bcbst.com (email).

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

BlueCross BlueShield of Tennessee, Inc., an Independent Licensee of the BlueCross BlueShield Association.

BlueCross BlueShield of Tennessee is a Qualified Health Plan Issuer in the Health Insurance Marketplace.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Si usted es miembro, llame al número de Servicio de atención a miembros que figura al reverso de su tarjeta de identificación de Miembro o al 1-800-565-9140 (TTY: 1-800-848-0298).

ملحوظة: إذا كنت تتحدث انكر اللغة، فإن خدمات المساعدة اللغوية تتوفر لك بلاإمجان. إذا كنت عضواً، فاتصل برقم خدمة الأعضاء الموجود على ظهر بطاقة هوية العضو أو بالرقم 1-800-565-9140 (الهاتف النصي: 1-800-848-0298).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。若您是會員，請撥打會員 ID 卡背面的會員服務部號碼或 1-800-565-9140 (聽障專線 (TTY) : 1-800-848-0298)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Nếu quý vị là hội viên, hãy gọi đến số Dịch vụ Hội viên ở mặt sau thẻ ID Hội viên của quý vị hoặc 1-800-565-9140 (TTY: 1-800-848-0298).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 가입자의 경우, 가입자 ID 카드 뒷면의 가입자 서비스 전화번호 또는 1-800-565-9140(TTY: 1-800-848-0298) 번으로 전화하시기 바랍니다.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Si vous êtes adhérent, appelez le numéro du Service adhérents indiqué au dos de votre carte d'assuré adhérent ou appelez le 1-800-565-9140 (TTY/ATS : 1-800-848-0298).

ໄປດຳລາຍ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ,ການບໍລິການຊ່ວຍເຫຼືອດັ່ງ ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີເໝືອນໃຫ້ທ່ານ. ຖ້າທ່ານເປັນສະມາຊິກ, ໃຫ້ໃຫ້ທ່ານເບິ່ງຂອງລ່າຍບໍລິການສະມາຊິກທີ່ມີຢູ່ດ້ານຫຼັງອັດ ID ສະມາຊິກຂອງທ່ານ ຫຼື 1-800-565-9140 (TTY: 1-800-848-0298).

ማሳሰቢያ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም አርዳታ ደርጅቶች በነጻ ሊያገለግሉት ተከታይተዋል። አገልግሎት ለአገልግሎት መታወቂያ ጀርባ ላይ በሚገኘው የአገልግሎት አገልግሎት ቁጥር ወይም በ 1-800-565-9140 (መስማት ለተገናኙቸው፡ TTY: 1-800-848-0298) ይደውሉ።

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Falls Sie ein Mitglied sind, rufen Sie die Nummer des Mitgliederdienstes auf der Rückseite Ihrer Mitglieds-ID-Karte oder 1-800-565-9140 (TTY: 1-800-848-0298) an.

සුඛවා: ඔබ් තම වූලැවැති භවතා වූ, ඔබ් බිංදු භාෂා සවෘභ් සේවාවූ තමාට මව් ඉපවූ වූ. ඔබ් තම සවෘ වූ, ඔබ් තමාට සවෘ වූ ආර්ථික වූ ආර්ථික සවෘ වූ නවර ඉපව් අභ්ව 1-800-565-9140 (TTY: 1-800-848-0298) වූ වූ වූ.

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。会員のお客様は、会員IDカードの裏面に記載の会員サービス番号あるいは1-800-565-9140 (TTY: 1-800-848-0298)まで、お電話にてご連絡ください。

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad.

Kung ikaw ay isang miyembro, tawagan ang numero ng Serbisyo sa Miyembro na nasa likod ng iyong Kard ng ID ng Miyembro o sa 1-800-565-9140 (TTY: 1-800-848-0298).

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। अगर आप सदस्य हैं तो अपने सदस्य आईडी कार्ड के पीछे दिए गए नंबर या 1-800-565-9140 (TTY: 1-800-848-0298) पर सदस्य सेवा नंबर पर फोन करें।

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Если Вы являетесь участником, позвоните в отдел обслуживания участников по номеру, указанному на обратной стороне Вашей идентификационной карты участника, или по номеру 1-800-565-9140 (TTY: 1-800-848-0298).

توجہ: اگر بہ زبان فارسی گفتگو می کنید، تمهيلات زبانی بصورت رایگان برای شما فراهم می باشد. در صورتیکه عضو هستید، با شماره خدمات اعضا در پشت کارت شناسایی عضو خود یا 1-800-565-9140 (TTY: 1-800-848-0298) تماس بگیرید.

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Si ou se yon manm, rele nimewo Sèvis Manm ki sou do kat ID Manm ou an oswa 1-800-565-9140 (TTY: 1-800-848-0298).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Członkowie mogą dzwonić pod numer działu Member Service podany na odwrocie karty identyfikacyjnej członka lub numer 1-800-565-9140 (TTY: 1-800-848-0298).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Caso seja membro, ligue para o telefone do serviço de Atendimento ao Membro informado no verso de seu cartão de identificação de membro ou para 1-800-565-9140 (TTY: 1-800-848-0298).

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Se è un membro, chiami il numero del Servizio per i membri riportato sul retro della Sua scheda identificativa del membro oppure il numero 1-800-565-9140 (TTY: 1-800-848-0298).

Díí baa akó nínízin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiiik'eh, éí ná hólǫ́.

Naaltsóos bee ná ha'dít'éego, Naaltsóos Bá Hada'dít'éhígíí ninaaltsóos nit'ízi bee nééhozinígíí bine'déé' Naaltsóos Bá Hada'dít'éhígíí Bee Áka'anída'awo'í bibéesh bee hane'í biká'ígíí bee hodíłniň doodago 1-800-565-9140 (Doo Adinits'agóógo q TTY: 1-800-848-0298) bee hodíłniň.

July 16, 2021

The following email was sent to agency benefits coordinators today.

ABC Conference Call Notes

The combined July 13 ABC conference call notes are **attached**. You will also find them posted on the [ABC webpage](#) under **Conference Call Notes**.

Discount Program Available for Members (local ed, local gov and higher ed)

During calls this week, information was relayed about the discount program that has been available to state members that you are now able to offer your health plan members. We've **attached** a flyer about the program you can share with members along with the following information. Should you have any questions, you can contact Prachi Patel at Prachi.N.Patel@tn.gov.

****Please share the following information and flyer with health plan members****

As a member of Partners for Health, you qualify to take advantage of exclusive discounts from more than 900 merchants. We hope you enjoy the cost-saving and special benefit offerings that merchants have made available, just for you!

Here's how it works:

- Click on this link: [ParTNers for Health Member Discount](#)
- Choose your plan (higher ed/local ed/local gov)
- Choose your agency
- Input your work email address
- The Employee Discount Program portal will be sent to your email with instructions for how to create your PerkSpot account

Once logged into PerkSpot, you can browse all discount offerings!

Discount Program for Members (state)

During calls this week, we reminded ABCs about the discount program that is available to state employees. We've **attached** a flyer about the program you can share with employees along with the following information. Should you have any questions, you can contact Prachi Patel at Prachi.N.Patel@tn.gov.

****Please share the following information and flyer with employees****

As a state employee, you qualify to take advantage of exclusive discounts from more than 900 merchants. We hope you enjoy the cost-saving and special benefit offerings that merchants have made available, just for you!

Here's how it works:

- Click on this link: [ParTNers for Health Member Discount](#)
- Choose your plan (state)
- Choose your agency
- Input your work email address

- The Employee Discount Program portal will be sent to your email with instructions for how to create your PerkSpot account

Once logged into PerkSpot, you can browse all discount offerings!

Materials Update (state/higher ed only)

The following life insurance flyers have been updated and are posted on the ParTNers website under [Publications](#), Life Insurance. These are not new services but additional resources Securian offers our members.

- Securian Financial Lifestyle Benefits – Beneficiary Financial Coaching
- Securian Financial Lifestyle Benefits – Legacy Planning Resources
- Securian Financial Lifestyle Benefits – Travel Assistance

2021 Annual Enrollment Dates

Here are the **Annual Enrollment dates for 2022 benefits:**

- **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
- **Local Education/Local Government/Retirees:** Friday, Oct. 1-Friday, Oct. 29

Attachment: Discount Program Tips

End of message



Tennessee Employee Discount Program



My Orders

Located in the upper right corner, this allows you to keep track of your past purchases made directly on the PerkSpot site.



Suggest a Business

Located in the upper right corner near account settings. This feature allows employees to suggest their favorite brands and local merchants to be added to your PerkSpot site.



My Interests

Choosing your top interests will generate perks you enjoy most front and center on your home page.



Local Merchants

Located in Quick Links, this allows you to use your location to see local offers for you. You can filter these by category and distance.

Customer Service:

Hours: Monday - Friday, 9 a.m.- 6 p.m.

Phone Number: 866-606-6057

Email: cs@perkspot.com

Chat: Submit a request to support.perkspot.com. The bilingual customer service team can answer any questions in both English and Spanish.

For any questions about PerkSpot's privacy policy, please go to ps.perkspot.com/privacy.

For any questions about the Tennessee Employee Discount Program, please contact prachi.n.patel@tn.gov

July 9, 2021

The following email was sent to agency benefits coordinators today.

ABC July Conference Calls

The next monthly ABC conference calls will be held July 13. Benefits Administration staff will join you remotely via WebEx.

- **Higher Ed** – Tuesday, July 13 at 8:30 a.m. CT
- **Local Ed** – Tuesday, July 13 at 10 a.m. CT
- **Central State** – Tuesday, July 13 at 12:30 p.m. CT
- **Local Government** – Tuesday, July 13 at 2 p.m. CT

Use the webinar (WebEx) login link and instructions in the **attached** agenda or below.

To join the ABC Conference Call - **Click on this link:**

<https://tn.webex.com/meet/joan.williams>

If you are only calling in to listen and not using a computer, please use the following phone number and access code:

+1-415-655-0001 US TOLL

Access code: 160 068 7633

OPEB PowerPoint (local ed/local gov only)

A reminder that last week, a PowerPoint presentation about OPEB was sent to all primary ABCs and agency fiscal officers. **Please be sure to read this PowerPoint.** A Benefits Administration representative will join the July ABC conference call to answer your questions.

2021 Annual Enrollment Dates

Here are the **Annual Enrollment dates for 2022 benefits:**

- **State/Higher Education:** Friday, Oct. 1-Friday, Oct. 15
- **Local Education/Local Government/Retirees:** Friday, Oct. 1-Friday, Oct. 29

End of message

July 2, 2021

The following email was sent to agency benefits coordinators today.

OPEB PowerPoint (local ed/local gov only)

This week, a PowerPoint presentation about OPEB was sent to all primary ABCs and agency fiscal officers. **Please be sure to read this PowerPoint.** A Benefits Administration representative will join the July ABC conference calls to answer your questions.

Materials Update

Attached is the updated flu flyer found on the ParTners website, on the Pharmacy webpage under **Flu and pneumococcal vaccine coverage**. The flyer gives health plan members information on how to get these vaccines by using either their pharmacy or medical ID cards.

Please share this updated version with your members. A link to this flyer is below:

<https://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/flu.pdf>

2021 Annual Enrollment Dates

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State Offices and Benefits Administration Closed Monday, July 5

State offices and the BA service center will be closed Monday, July 5 for the Independence Day holiday.

We hope you have a safe and enjoyable holiday weekend!

-Benefits Administration

Attachment: Flu Flyer_June 2021

End of message

Free Vaccines



FLU & PNEUMOCOCCAL COVERAGE

You may get a free flu shot and/or pneumococcal vaccine by using:

- your Caremark card at a participating network pharmacy, or
- your health insurance card (BlueCross BlueShield or Cigna) at your in-network doctor's office.

The following vaccinations are free to members of the State Group Insurance Program:

- Injectable Seasonal Influenza Vaccine
- Intranasal Seasonal Influenza Vaccine (FluMist®), Intradermal Flu Vaccine (short needle) and Flublok
- Injectable Seasonal Influenza High Dose Vaccine
- Adult Pneumococcal Vaccine
- Pediatric Pneumococcal Vaccine

If you choose to use your pharmacy card,

To get the vaccine above at no charge, you must use a participating retail pharmacy. The current list of participating retail pharmacies is available at info.caremark.com/stateoftn.

If you choose to use your medical card,

Simply contact your in-network doctor's office and ask if they have the vaccines. You may get the vaccination at your doctor's office without a copay. (Note: if you are at your doctor's office for another reason or illness when you get your shot, the doctor may charge an office visit copay.) To find an immunizing pharmacy or retail convenient care clinic follow the instructions below.

BLUECROSS BLUESHIELD MEMBERS – Go to bcbst.com and click on Find Care

1. Log in to autofill your information, or choose **BlueCross BlueShield Network S** for Tennessee providers or **BlueCard PPO (outside Tennessee)** for out-of-state providers.
2. Enter your location if you need to, then type either **Immunizing Pharmacist** or **Retail Convenient Care Clinic** in the search bar and select it from the dropdown.

CIGNA MEMBERS – Go to cigna.com/sites/stateoftn

1. In the left-side navigation, click **Resources and Forms**.
 2. Click **Medical Vaccine Program**.
- You can also ask your local pharmacy if they can bill Cigna. If so, simply present your Cigna card.