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» Alisa: Hello, everyone. Happy Thursday. I am just going to do another quick audio check. So I asked that if you can hear me, you go ahead and set your status to agree. In order to do that you can select the drop down arrow next to the hand icon at the top of your Adobe Connect window and select the thumbs up or agree status. Thank you to those of you who have done so already. All right. I see quite a few statuses coming in. I do see a couple of people. You might accidentally be raising your hand. It does default to hand raise. Sorry about that. I lost my train of thought. It does default to hand raise. So you will need to click the hand icon once more to turn off the hand raise status. All right. Well, looks like most everyone can hear me so far. I'm going to go ahead and put the music back on and I'll do one final audio check before we get started with today's session.

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Hello, everyone. Happy Thursday. I'm just hopping on to do one final audio check before we get started. So if you can hear me, I ask that you go ahead and set your status to agree. Just in case you need a reminder you can do that by selecting the drop-down arrow next to the hand icon otherwise it defaults to hand raised. Looks like I have a couple of people in the room who have only entered in the room with their first names, [hot mic] please make sure we mute those mics as we're entering. Thank you very much. So as you're entering, please make sure that you are following the name format when you are logging in. It -- your name should be fore formatted as follows, your last name, first name and your RO location. If you have not signed in that way you likely not get credit for attendance. It is -- we do need you to log in that way for attendance purposes. In order to fix that you can sign -- you can close out of the Adobe Connect window. You can clear your cache and re-enter Adobe Connect and it will prompt you to enter your name in once more. That is all I have for you. I'm going to go ahead and pass you over to your instructors.

» Andrea: Good morning or good afternoon to everyone. Thank you for joining this month's HRCOP. We will be discussing the Federal employee's health benefits open season. Your presenter is Maritza Motta and with that, I will go ahead and turn it over to Maritza.

» Maritza: Thank you, Andrea. Welcome, everyone, to our COP on open season for health benefits.

This is a very important topic today. At the end of the presentation, we

will put up a Q and A box and you will be able to post your questions so we can make sure that you get the information you need so you can make sound decisions for your health insurance, dental, vision or flexible spending.

So I'm going to go ahead and jump right in. So today we're going to talk about what is the open season? We're going to go over the differences between open season and qualifying life event and I know a lot of people really don't understand the qualifying life event component too much. So I'm going to try to make it as easy to understand as I can. We're going to talk about the differences between national plans and local plans. We're going to explain where and how to find the plans and the comparison tools that are available to you and then we're going to describe how to make these changes. So we have a lot of information and I hope that we give you some valuable tools to use during this open season.

So what is open season? Well, our open season kicked off on Monday, right? Open season is usually mid-November to mid-December so this year it is November 14th to December 12th. And any changes you make during this time are effective the first full pay period of the new year. So for us, the first full pay period is January 1st, 2023.

During the open season period, you may enroll, change or cancel your employee health benefits, dental, vision or your Federal flexible spending account. Not just when we say "change," there's several changes that you can make during the open season.

This is the time of the year that you need to ensure that you have the right coverage, health, dental, vision for you and your family. It's also a time to consider the money that you could save on out-of-pocket medical and dependent care expenses for the upcoming year. I cannot stress enough, do your homework. You know, it's great that you can go talk to somebody and get -- say, hey, what health insurance do you use or what dental or vision? But I implore you, please do your homework. There's plenty of things online so you can do the research and I know it is tedious. For those of you who have more than 20 years in Federal Government, there was a time when you know you came to your class and you received like 20 books, paper books of all the health insurance plans that are offered nationally or locally in your area. Now everything is online. I know that it can be frustrating and I'm just going to speak for myself. I'm not too tech savvy so going online it was an adjustment period for me because I'm still used to the paper but OPM has made it super, super easy for us to get the information that we need.

During open season, there is no restrictions except meeting the deadline for submission. And again, we know open season runs until December 12th. So you got to meet that deadline because if not, you're going to be out-of-pocket. Homework, homework, I can't stress that enough.

And, yes, please. Get with your peers, hey, what kind of health insurance do you have? Why do you have it? Why did you choose it? Maybe that will assist you in making your decision but go online and do your research.

Now, just to give you a little history of qualifying life event because a lot of people really don't understand what a qualifying life event is. Outside of open season, the only time you can make a change to your benefits is if you have a qualifying life event. And some examples would be a change in family status. You either get divorce, marled married, birth of a child, foster child, adopted child, or you have a change in employment status. You may go from full time to part-time or part-time to full time. Or you move to a different geographical area of coverage or your family member loses coverage with FEHB or any other health insurance

coverage. And I'll give you an example of geographical areas. So I have moved around the nation throughout my 22 year Federal Government career and when I was stationed in New York, I had a local plan. That plan was only in New York. And I moved from New York to Miami. And when I got to Miami, that health plan, that local plan did not exist. So that gave me a qualifying life event because now I'm in They don't have that health insurance in Miami so I'm able to change my health insurance. So where people get confused with the geographical area of coverage is, if you have a national plan that is covered nationwide, you will not be eligible for a qualifying life event if you move to another state. So keep that in mind if you have -- you move to another state that has that insurance you will not have a qualifying event. If you move to another state that does not have that insurance, then you automatically get that qualifying life event. And you can be able to change your health insurance and with changing health insurance, you could change the people that are on your insurance at the same time. So that's an example of geographical area because I get that question all the time. And for those of you who have BlueCross/BlueShield they're all over the nation. If you are moving around the country, you will not have a qualifying life event. An example of you or a family member -- I think we have a hot mic. If you are not speaking please go ahead and make sure that your mics are muted. It gives an echo for everyone else. If you or family member lose coverage -- I give you an example of that, right?

Let's say I have a child -- let's say my spouse. Right? I have a spouse and he was employed by the local Sheriff's Department. And he is no longer employed with the local Sheriff's Department and as a result, he loses his health insurance. He has to elect what they call COBRA, right, but he doesn't have to elect it. He has that option, right, to continue coverage. Because he's a separated employee, he's losing coverage so I can now have a qualifying life event to bring him on my coverage. That may mean that I'm going from a self-, just me, to a self plus one or a self family plan so that would be an example of a family member losing some type of coverage. With a qualifying life event you must meet time lines that are established by OPM and in most circumstances, you must provide documentation. So when you go into your HR office or you contact HR and you're asking them, you know, what do you need to do and they ask you for documentation, please be prepared to provide that documentation.

How do we find what qualifying life events are? Well, first we're going to go to OPM.gov. That is our go to website. And if none of you have ever gone to OPM.gov, there is so much information and they are what govern our HR practices and regulations.

So we go to OPM.gov. We're going to click on the insurance tab. It is going to bring up in this section, we're going to take that little triangle and we're going to click on events. And then that's going to bring up a whole other section. These are the typical life events that come up. Now, just FYI information, especially those who are close to retiring, in order for you to take health insurance into your retirement, you must have Federal health insurance for the preceding five years before you retire. Okay. So again, five years. So example, I'm going to retire in 2027. October 2027. I have to make sure that October 2022 is when I begin my five year threshold, right? You have to have it for five years because if not you will not be eligible to bring it into retirement. I bring that up because the retirement component is here on your qualifying life event and so many people don't know you have to have it for five years and then they get ready to retire and they're like, oh, I'm not eligible but why not? You have to have it for

the five years. Okay. It doesn't mean you, your family or anything like that. The employee must have it for five years. Because when you go into retirement, now instead of you going to your local HR office, your HR people are going to be OPM and OPM has open season just like us. So that open season opportunity you can add family members and do whatever you need to do just like you would if you were an employee going to your local HR office, okay. All right.

So this is an example of what you will see when you go into OPM and you want to see about the qualifying life events. Be careful. So if you look at the changes permitted section, that's important. Because that's going to tell you what you can and what you can't do because of that qualifying life event. So just because you have a qualifying event doesn't mean it is going to be treated like an open season deal where there is no restrictions. There still are some restrictions so you need to go ahead and go into that document, see what the restrictions are and in this case, you got three nos there. So you can't go from not enrolled to enrolled. You can't go from self only to self plus one or self and family. You can't go from one planned option to another. The only thing you could do here is cancel or change the self plus one or self only; or, switch to designated family member. If you notice on the right, there is a time limit. And this is important because when you come to HR and you're telling us that you have a qualifying life event, okay, we're going to ask you for that documentation. Right? What is it? Did you get divorced? That is going to start the clock. Because we need -- we're good stewards of taxpayer's dollars. We need to make sure that you have met the time limit. So for this specific case that's on the screen, it says 60 days after the QLE, qualified life event. Within 60 days that divorce decree is stamped sealed and delivered, you have to get that form to us. If you bring it to us on day 61, you are no longer eligible for the qualifying life event. So you have to be very conscious when you're having these events or you're going to have these events. There is only one qualifying life event that is pretty open nd that is the birth of a child. I'm going to tell you why. You go have birth. You're in the hospital. It is almost impossible that you could do it ahead of time. It is almost impossible that you could do it the week of, the day of. So that one has a little bit more broader time limits. you in the event you do -- you are going to have a child I would suggest getting your paperwork ready. Have everything filled out. Then just wait until the date of the birth and then have someone from your family submit it to HR for you. The actual labor and delivery is usually covered by your self plan if you're just in a self plan. But if you're moving from self to self plus one or self family, you know, it is automatically covered but you still have to go through the process of the 2809 to make sure you get the baby covered for their well visits because usually you have well visits right away. You want to make sure that is in the system. So again in the event that happens fill out the form. Have it ready and then the date of the birth, have somebody in your family, you know, fill out the day of the event and then submit it to personnel on your behalf.

And I know we have a lot of questions in the chat. At the end of the session I'm going to put up the question and answer box and we'll go ahead and go through a lot of these questions just in case because I see it moving pretty quickly.

So for open season changes, you have two options. You can use self service using my pay and all you have to do is go in there and click on Federal employee's health benefits and it brings you through the prompts you need to do to make those changes; or, you can fill out the standard 2809 form. Now, I'll tell you this, I love self-serviced service. I love my pay. I encourage you to use this system.

I'm going to tell you why. Paper has a tendency to get lost. When you fill out paper, if there is something wrong, you have to go through the interactive stage with your HR office. So let's say you fill out the 2809 form. You submit it. The HR representative reviews it. Sit Hoyt be some issues you didn't fill out all the way or something is missing or something is not legible. Your HR person is going to get back with you. Then you got to fix it. Then you got to send it back. It is a process. It takes time. And then HR has to submit the form and go through their processes. So it can take a few weeks for everything to be said and done. When you go through my pay, it is live. Usually the next pay period on a qualifying life event you'll see it. If you're doing the open season, you know that you're covered. Your chances are in there. You have a receipt that it was done. So there is really no one to blame and no one to depend on to making sure that it is done right. I mean we're only human. I have been an HR professional for 15 years. And I make mistakes. People make mistakes. When we use paper. So I encourage you to use my It is a great tool. We good have that years ago so I'm so glad that we have that now.

So during open season, what kind of changes can I make? You can add family members. You can remove family members. You can move from single family or plus one. You can cancel. You can change health plans.

Now, one of the things I just -- I have to let you know and this is throughout my experience. So open season is not restricted at all. Especially because you could go on my pay and you can make whatever changes you need to make, right? Nobody is really micro managing that. But one of the things that I have to let you know is court orders. Court orders are -- they supercede everything, all right. And that is for divorce. If you're required to provide health insurance for your former spouse or any dependent children. So I'll give you an idea of what could happen if you try to go against the court order. All right. And nobody wants to be in trouble with health insurance, fraud or anything like that. So if you know you have a court order to provide benefits for your family, don't try to go in open season and remove family members. Because we don't want you in trouble. All right. Yeah, you'll go in. You'll do whatever. You might go from family to single. what is going to happen is, when your former spouse or children try to go to the doctor and they say, you don't have health insurance. They're going to immediately go back to the court. The court, what they're going to do, they're going to throw down a court order to the agency. There is other things that can happen in between. We don't want that. So don't try to finagle I have seen it happen in my career. You know, you cannot -- a court order is a court order it's binding and from the judge. There is nothing you can do about it but go ahead and fight that in court. If by chance the open season change goes through, everything changes when the courts finally get a hear of it and they send the agency a court order saying huh. Put the insurance back on. Wrong. Wrong. All those premiums that you didn't pay, you're going to get a bill for it because they're going to back that court order to the date you removed the family members. So then you're going to have a HUGE bill and you're going to be responsible to pay that bill. And we don't want that. Right? Because nobody wants extra money coming out of your check. If you have any questions about that or maybe you don't know how to read your court orders that come through with divorce, please get with your local HR office and they can help you because we kind of are familiar with the court order process.

So let's talk about our national plans, right? And this is something that comes up a lot between national and local plans. So you have your fee for service

national plans. These plans provide nationwide coverage. Including -- I mean overseas, anywhere you go, right? It is just you get coverage. If you move around the nation it is perfect because you don't have to Chong your insurance or anything like that. You go to their preferred providers. And you're good to go. And now, keep in mind there is some countries that can be a little difficult. So if you're traveling out of the country always call or check on your health insurance website and make sure you have access to what you need wherever you're staying. I'll give you an example. I went to Columbia. Every time I travel I make sure I have a list of hospitals that -- and doctors and urgent care and whatever. When I went to Columbia, there were only two hospitals in that area I was staying in but I identified them. I called them to make sure that in the event I'm on vacation something happens, I'm good to go. Okay. So that is the benefit of the national plan.

Now, when you use the preferred provider, everything is covered. You're good to go. Right? You go on the blue cross website or whatever website for whatever insurance you have. You pull up their list of providers in that area. You print that list. You're good to go. If you use a hospital so the example is, I used my Columbo I can't trip as an example. I go to Columbia. I identified the two hospitals, right? Go to the hospital and the provider, not the hospital, the provider did not take my BlueCross/BlueShield. So guess what? When I got back to state side, I got a bill for the provider's fees. I still got it at a reduced rate, but I had to pay separate to the provider than the hospital. So now what I do and I do that here at home as well when I use a hospital is when I go to the hospital for any services, I let them know. I need to ensure the provider has blue cross -- takes BlueCross/BlueShield so I don't have any additional fees for that service outside of the hospital because you pay your hospital fee but then you also pay your provider fee. Okay. And then you can follow for the provider fee but that is extra red tape you have to go through and you may not get the entire 100% covered. Okay.

Now, state side it is usually very broad. You shouldn't have too many issues with that. But you can always ask the question if you have to go to the hospital. Maybe you're having a surgical procedure. You're going to be admitted for a couple of days. Ask the question when you're going over the billing options, hey, I have BlueCross/BlueShield. Is the provider covered? Now in most cases let's say that you're seeing an orthopedic surgeon at a local office. They take BlueCross/BlueShield and that orthopedic surgeon is recommending the surgery. You go to the hospital. You have a procedure. Going to be there for four or five days. More than likely the orthopedic surgeon is covered. You're good to go. No issue. Keep that in mind with the national plans. Always ask a question.

When you were on OPM, you can pull up all our national plans. These are the ones that we currently have. It allows -- and you see it says fee for service. Okay. Open to all. You see that you can access the plan brochure. You can download it in PDF. You can go to the provider directory and you can actually go to the plan website to get more information. Now, you want to do your homework, right, we're going back to homework here. It is very important that you go into those plan brochures. It is super important that you go into the provider directory. I want to know if all my doctors take this health insurance. And it is super important for new employees, too, who maybe never worked with the Federal Government, right, so you coming in as a new employee, you already have established doctors in your local area. Find out if they take the coverage. Is that going to mean you have to change but doctors? So this tool is available -- who are who you? Use it. Do your

homework. I'm just going to keep saying homework, homework, homework. The state specific health maintenance organization. Any time they are usually less costly but they provide a network of physicians in your area. Right? Local to the state. Now, some state specific HMOs can be in other states. So BlueCross/BlueShield actually has state specific programs and they're covered in a lot of states. So that means that your coverage really won't be any [audio going out] other state specific insurances that are only for that one state then you're going to find it difficult. And I'm going to tell you a couple of differences. So first of all, We know that it is health maintenance organization. What does that mean? That means that it is an organization. That means that I just can't call a podiatrist and say, hey, I want to have my toe looked at today. That means that I have to go to my primary care physician first, explain what's happening with my toe and, then, my primary care physician will give me a referral to a podiatrist in the network. In the organization. Where national I don't have to do that. I can look on the provider website and say, hey, who is a podiatrist in my area? Are they a preferred provider? Making an appointment. I have a problem with my toe. covered. So with the HMO you have some extra steps. Now, for some people that don't have any like major things happening, it might work for you. But that is where the homework comes in. Homework, homework, homework. Do you want to have to go to your primary to get a referral then you have to pay a co-payment to see your primary to get a referral. Plus you're going to pay a co-payment for the specialist. So all these things are going to be involved in your homework. Right? So pay attention to that.

The other thing with the HMO is when you travel. And I love to travel. I go everywhere. I try to travel as much as I can. And this is what I encounter. So if you have a state specific HMO that is not covered where you're traveling so I'm going to use the example that I live in Des Moines. I'm traveling to New York City. I love in Des Moines. I have health insurance B and health insurance B is only for the Des Moines area. I go to New York. And every time I travel I don't know about you guys, every time I travel somebody in my family gets sick. It is exhausting. So I go to New York. My child gets sick. I got to run them to the emergency room. Well guess what, they don't have plan B in New York. I get on my card and everything but they don't have plan B. Go to the emergency room. Take care of business. Do my -- finish my vacation. I come back to Des Moines. I get a bill in the mail. Whatever. A couple of hundred. Maybe 1000. Who knows. Whatever New York charges for their emergency room visit. Plus whatever the provider charges. take that. I follow the paperwork with my HMO, my Des Moines plan, right, whatever I have with Des Moines, I follow that paperwork from -- to help with this payment, right? I need reimbursement because I have to pay these guys. Nobody wants a medical bill on their credit report because medical is infamous for that. don't send you and next thing it is on your credit report. Des Moines comes back and says well, under your HMO, in the Des Moines area, emergency room only charges \$500 for the emergency room treatment. You were in New York. New York charges \$800. So we will reimburse you 500 out of the 800. You're responsible for the Boom. Now you have a problem. So when you're researching your HMOs and now again, if you don't travel probably wouldn't matter to you. I love to travel. Like I said, every time I travel somebody gets sick in my household. So I got to make sure wherever I go, I have no out-of-pocket expenses in event I have to go to an emergency room or get treatment things happen, right? I mean on vacation, you know, you could hurt yourself. Sprain an ankle or something. So keep that in mind when

you look at the comparison of HMO, state specific to your national plans.

Here is the list and I pulled up Washington, D.C. but when you go into the OPM website, you can pull up this state specific plans in your area and again, pull up the brochure. Download the brochure. Look at the provider directory and go to the plan website. Every state has different plans. I know Aetna covers a couple of states. Not sure about Kaiser or care first. Look at your area. Do the homework.

Let's talk about the 2809 form. Okay. We're going back to our site, OPM.gov. Because everything is on there. If you have not been on there, please, please take the time to surf it. We're going to click on forms. Right? Now, these are the forms that you're going to see in this section. These are the forms that you could look at and look on the 2809 form is the SF form which stands for standard That is standard government wide. All right. And there is other forms So when you see a form that says RI, then you know it is retirement and insurance form. Because it is giving you the imreefiation. SF standard form. OF optional form. So in this case we're going to go to standard forms. Then you're going to have your list of forms. You're going to go ahead and click on your 2809 form. That is the paper form that you're going to submit to your local HR office. How do you find your plans? Again, OPM.gov. We're going to click on that insurance tab. We're going to go to the section area again. We're going to go to the triangle. For healthcare. And we're going to go to the triangle for plan information. Then we're going to click on plans. then the map comes up. Then you're going to click on your state. Wherever you're at and need the coverage. I'm in Florida so I would click on Florida. Those who were in Detroit would with click on that area, right? Illinois. This is what the form looks like. I'm sure many of you have filled it out when you first came aboard or, you know, if it has been a long time, we'll refresh your memory. Everything highlighted in yellow you must provide. Okay. If you're going to do the paper form, please make sure that you have all of the pertinent information and it is legible. If it is not legible, you're going to delay some time. Right? We're going to make sure our name is correct. We're going to make sure our social is correct. Our date of birth. Our Are you married? Our address. Our e-mail address. E-mail address is important because you don't know if your provider is going to be sending you notifications on changes or things that are happening or more services that are being provided. And then of course your telephone number. If I find there is an error on your form, I need to know where to contact you. How can I call you? And say, hey, you missed a spot. Family members. All the information has to be in there for your family member. The name, social, date up birth, sex. And your relationship code. And when you go into this 2809 form in OPM, the first page will give you the relationship codes. Zero one is usually your spouse. It is your spouse. And then 19 is your dependent children. The form itself has all the instructions and it has all the tables of permissible events and all the information you need. You have to take the time to read it. Okay. So that's page 1 of the form.

Then you have page two. So if you look at please make sure you fill out the top. Enrollee name, did it of birth. That is you. The employee. And then depending what you're doing, right, so if you're enrolled. So for this example I'm enroad.DoRillito is enrolled in blue cross Blue Shield and he doesn't want it any more. Hematomas mail handlers and during open seen he wants to drop that BlueCross/BlueShield and go into mail handlers so it is very clear what it says here. Part B. FEHB plan you are currently enrolled in. Part C, FEHB plan you are

enrolling in if new or changing to. The open season code is B the event code is 1 B open season. The date of the event is 11/14/2022 because that is when open season opened. OPM.gov. And then of course if you want to not enroll if you're a knew employee do part E, if you want to circle, you would do part F. And if you want to suspend it you will do part G but that is only for annuitants and former spouses and then part H, super, super important. Sign it and date it. And make sure that you get it in on time. Again, I encourage you to use my pay because it is live. You get a receipt. When you use paper, we're human. Things happen. It may delay the process.

- » Audience: Hello, I have a question. I don't see on the OPM.gov where you can locate what insurance is available by state. Then how do we know --
- » Maritza: When you first click on your state, if you scroll down a little bit the state specific will come up.
- » Audience: I'm on the --
- » Maritza: I was going to show you national first.
- » Add canvass: I'm in OPM.gov. It says life events. Changes in health coverage, healthcare. I don't see anything -- where am I supposed to go?
- » Maritza: At the end of the class I'll go over this slide again, okay. Just hold off until the end of the presentation and I'll show it to everyone again because we did have it on the slides.
- » Audience: I know that. I'm trying to follow the slides.
- » Maritza: I'll show everyone -- here, let's go back now. Here, hold on. So you went -- go to OPM.gov. If anyone else wants to follow through go ahead. Click on insurance. Let me know when you are good.
- » Audience: Yes, I clicked on insurance.
- » Maritza: On the left side of the screen you'll see in this section. Do you see it?
- » Audience: Yep.
- » Maritza: Click on healthcare. The little triangle. See it?
- » Audience: Yep.
- » Maritza: Click on plan information. The little triangle.
- » Audience: Okay.
- » Maritza: Click on plans.

» Audience: Okay.

» Maritza: Is everyone else following along? I hope so. And that is why I did this slide with the arrows so you guys can get an easy depicts because I know again I'll tell you guys I'm technically challenged. And I need everything on, you know, I need baby steps for me. That is just me.

Now, did the map come up?

- » Audience: Yes, it did come up. Thank you.
- » Maritza: Okay. So now click on your state. You should see the national plans first and then your state specific plans. All on one screen.

» Audience: Yep.

» Maritza: Got it. You're good?

» Audience: I believe so, yes. Huh.

» Maritza: Okay, great. We're going to continue forward. Anyone else have any issues with that at the end of the class we can cover it again for anybody else who needs some extra help. It is no problem. We're here for you. We want to make sure that you get the right information. All right. So we went over the 2809. Dental and vision. So this one is a fairly new for me it is because I have been in the government over 22 years. So we didn't have this when I first came in. This one, there's no more. This has to be completed through benefits. You have to go and this -- we'll put the link in the chat benefits.gov. You have to do it through them. You can't come in to personnel and fill out a form. I'm sorry. I wish I could. Because, you know, sometimes it is easier to throw out the -- give someone the form especially when you don't know how to navigate but benefits.gov and we'll throw it in the chat. Andrew if you could throw it in the chat for me that would be great. Go in there and you can look at all the dental and vision supplemental insurance. I'm very happy that we have this in government. A lot of privatized agencies and stuff they don't have this available so when I first came in I had to get it through the union. So it is a great thing to have. Every time I go to the dentist they always tell me what great dental insurance I have. If you need it, take advantage of it.

How to find your plans. Here we go again right? We got to find our dental and vision plans. We're going back to our OPM.gov. That is our place. That is where we're going to get all of our information. We're going to see that in this section. Again on the left-hand side of the screen. We're going to click on dental and vision. A little triangle there. Then we're going to pick. Vision or dental. Which ones do we want to see? Then when we pick that, we'll see our plans. This is just a snippet of what is available. There is more. I just wanted to show you what the screen would look like when you pull up the plan. The same as when you pull up your health insurance and your -- the dental and vision is the same deal. Pull up the plan brochure. Download it. Go to the plan's website. Look for your providers. You may have had the same dentist for 20 years and maybe they're going out of business and now you got to find another dentist. You got to go to that provider search. See who takes the insurance. Maybe somebody recommended an eye

doctor to you and you're like oh, yeah, I do recommendations because I do recommendations all the time. Okay. Let me see if they take the insurance. So do your homework. I'm more than welcome to answer any questions that anybody has. But it takes everyone, right, everyone got to do their part. You have got to do your homework.

» Audience: Does it show the cost in there? Does it show the cost of the plans in there?

» Maritza: In the -- in the same OPM tools but I'm going to go over comparisons right now. If you -- we'll get to it. Okay. So with the comparison calculator and a lot of people don't know that we have an OPM comparison calculator. For those of you it is not just health insurance. We have calculator for FEBLE (sp) in there, too. That is why I encourage you to search the site. This comparison calculator can assist you with finding that most beneficial plan for you and your family. going to tell you, you know, going back to dental and vision, a lot of people don't need dental and vision. Right? If you have the best eyes in the world, your vision might actually be covered, your basic exams might be covered by your health insurance. So why would you need additional supplemental insurance? These are things that you have to think about when you're doing your homework, right? Do I need vision? Do I need dental? Now I make you chuckle. Let me make you chuckle for a minute. I never wore glasses in my life until recently. And when I figured out the price of glasses I said oh, yeah. I got to do something about this. only me, my two children wear glasses and my husband wears glasses. So how much money am I saving by having the vision plan? People say well, I don't know how to kind of figure that out. I'll give you an idea of what you can do. Now you can do it. You don't do it. Whatever. This is how I did it. I took the cost of the bi-weekly premium of the vision plan. Plus I guesstimated how much I was spending on glasses. At that time when my kids started getting glasses they were young so guess what, they were breaking glasses. So I was going back to get new glasses. Right? So I said okay, I spend x amount of dollars on glasses last year. The premium for this plan is x amount of dollars times 26 pay periods which was less than what I was 1 spending on the glasses. To me that was a no-brainer. Right? I'm spending less. And then add it when you pay your premiums for health insurance, dental/vision it is pre-tax dollars. That is important. For those of you that don't know what pre-tax dollars are we're going to talk about it a little bit later. I know we're getting a little short on time. I am going to try to get you all the info. Anyway, think about that. Same with dental if you're not that person constantly in the dentist office, you may not need dental insurance. I, I'll be honest, I got Jacked up teeth. I know I needed the dental insurance. If you have to go for a root canal several times, you probably need the dental insurance because you're going to save a lot of money there. But again, do your homework. How much did I spend last year on root candles versus how much the premium bi-weekly amounts That is where your homework comes in.

You're going to go back to your OPM in this section, right you're going to click on healthcare. You're going to get that triangle plan information and you're going to go ahead and click on compare plans. Now, I cautious you, it will only let you do three at a time. So what I do is I go does, I do three. Then I take the top of the three. And I add two. Then I take the top of that three and I add two more until I find the one that meets my needs.

When you pull it up, this is the screen you're going to see. You're going to enter your five digit zip code. Your going to click on enrollee type. We're Federal employees. We're going to put in what we get paid, pay frequency, bi-weekly. If you have a plan you fill out your current plan. If you don't we leave it blank. Then we're going to hit that little search button and guess what, you're going to get a comparison. Now, someone asked earlier about the bi-weekly premium. Here it is. Right? So if you notice on top I got BlueCross/BlueShield the basic plan I got mail handlers benefits, standard in value and I got Humana. blue cross is national. Mail handlers is national and hue Humana is for my state. You have your links brochure, website, provided directory, you see your bi-weekly premium. If you notice by the premium 1 has one head. That is for self only. One has two little bodies. That is for self plus one. One has three. That is family. A family plan. So you can see clearly here when you compare blue cross to mail handlers and Humana, blue cross is more expense ever. But then you have to worry about the deductibles. If you look below you can see blue cross is more expensive but it doesn't have any deductibles. So that is where your homework is. Right? Homework, homework, homework. The do you want to pay a deductible? Because I know I don't. I don't want to pay nothing. Just my little co-payment. That's it. this is what you will see. Of course use the little heads. One head. Self-only. Two heads. Self-plus one. Three heads your family plan. Here is another idea of what you'll see with the comparison. What are your co-payments? So blue cross I'm going to pay \$30 to see my primary care physician. If I go to the podiatrist which is BlueCross I can go on my own. I don't need a referral. I'm going to pay \$40 for a specialist. If I go to the emergency room with blues cross I pay \$250 co payment. If I go to urgent care instead of an emergency room I'm going to pay \$35. So these are important things for you to take in account when you're doing your homework, right? Because nobody wants to pay more than they need to. So keep that in your pocket when you're doing your homework.

Flexible spending. Now, I just started this two years ago and had I known about it like more in-depth I would have started a long time ago.

This is a method for you to pay for other healthcare costs for you, your spouse and your dependents. It is determined by the IRS which expenses can be reimbursed but I claim my co-payments on this thing. Okay. You can claim prescriptions. Co-payments. Most over-the-counter medications. I mean, I did my brace with this whatever my cost for my braces were. Some people I know have used it for Lasik and now here is the benefit to the flexible spending account. It is a bi-weekly payroll deduction. I think the maximum for 2023 is \$3050. I said it before I'm going to tell you what pre-tax means. A lot of people don't understand this. Anything that is deducted out of your check that is pre-tax dollars reduces the amount of your annual income. Right? So if they are taking it out pre-tax, guess what, your tax bracket is a little bit lower. Not much. But a little bit u helps you out for your tax dollars. Anything taxed is income. Same thing with your health insurance. Pre-tax dollars. Anything that is pre-tax I want it. Because guess what, when I go to the doctor and I pay my co -payment, I just request reimbursement for that co payment. I get it back from my pot. It is a pot, right? So the big pot I set mine up for the max which is 3050 I believe for this year. 2023. Every time I go to the doctor it comes out of that pot. I don't have to pay it a year before I can pull from the pot. You're paying bi-weekly. It is coming out of your check. The only caveat is if you separate from employment you still owe them that money up until the end of the year. Whatever the

bi-weekly deductions are. So keep that in mind. But again, pre-tax dollars. If you need a big pay like let's use the root canal, right, I'm going to get a root canal. Root canal let's say when all set and done after your dentalled dental insurance mew might pay out-of-pocket 300 maybe less. Where is that \$300 going to come from? Well, I can use my FSA for that. I pay out-of-pocket. Go home get on the Internet and get reimbursement and I get the \$300 back because I have been putting it in every two weeks for that pot. Once you reach the maximum, done deal. All right.

We're getting close to time. Let's go ahead and open our Q and A box. I'm going to -- you guys go ahead and tour in your questions. I'm going to go ahead and let you know what the question is and get you the answers we need. If I don't have an answer readily available, trust me we'll get the answers for you. Go ahead and type in your questions. I know Andrea and Christina have been answering some throughout the chat. Again, you guys do your homework. It's so important. I know that some health insurance are better on medication especially if you need long-term medications. I recently found out my son is on a long-term medication that is going to cost me about \$1200 a year. Now I'm looking at health insurance to see how I can possibly minimize that cost. My out of expense; if not, FSA is there. Right? Because I got that -- I don't see any -- okay. Here is a question. If we do not want to change anything, do we need to do anything? No. Absolutely not. No changes do nothing. Life is just -- just goes on. Everything stays the same.

- » Andrea: Maritza, you had another question. Someone said I just had a son. I want to keep BlueCross/BlueShield to add him on I can simply change the code in my pay or do I still need to fill out his information somewhere.
- » Maritza: Okay. If you are doing it for open season change, you can go to my pay. Okay. If it is not open season you would have to do the 2809 because we need the hospital documentation and stuff like that.
- » Andrea: Keep in mind also, Josh, that if you -- if you do it through my pay and it goes through open season, your son won't be covered until the beginning of the new year.
- » Maritza: Thank you for adding that Andrea. That is open. Open season remember we said January 1st is when everything is affective so, yeah. I would definitely get that 2809 over to our local HR office. Any other questions?
- » Andrea: There were several. A lot of them are on -- well, a lot of them were on retirement. I don't know if that is something that we want to discuss since retirement is a little different. But there were some questions in the chat. We got a lot of them answered. It would really help if everyone put their questions in the Q and A pod. That way we can see them with the chat box moving as fast as we can. We have a new one from Eugene Scott. If my wife has our child on her plan and I add hum to my plan, will the additional coverage cover any amount not covered by her plan?
- » Maritza: You know that is a good question because I think only with military can you double dip. That's a good question. That one I definitely have to get back to you. I don't think you can double dip unless you do tri care or Medicare.

» Andrea: If your wife has a current Federal plan you can't cover the same people. Either your wife would have to be on your plan or you on hers or you would both have to have self only. If it's outside the Federal Government, there's no -- I mean we can't control what you do outside.

» Maritza: Okay. We have another question. If I have been on my plan for five years but my spouse has not, can I add my spouse to my health plan when I retire? Yes. Please add your spouse. The requirement is for the employee to maintain that five year coverage. So once you've that you're golden. You will follow the rules of open season like everybody else. When you retire, she moves with you. question. Where do you find the plan POCs to ask your specific plan question? So again, when I showed you how to look up the plans if you go to the plan website, they usually have an e-mail address and you can e-mail them. Probably not by phone. Because you know we're in this virtual environment but they usually have like a customer service e-mail and you can ask them specific questions on that plan. As soon as there is change in marital status we must submit paperwork directly to your our local HR. If the change is going to affect you so remember, I talked about court orders. It depends. So of course you update your forms saying married and not married. Your qualifying event is going to be dictated by what your divorce If course if you're getting married you change it and add your spouse. I hope it answered that. But remember, court orders, we have to be a little bit more conscious about what is happening with court orders. Is the OPM comparison -here is another question. Is the OPM comparison tool only available for healthcare or is it available for dent and vision? It is available for both. Where do you find the enrollment code? There is a couple of ways to find the enrollment code. The easiest way when you go into the plan information, it has the enrollment codes. Okay. Now, when I showed you guys how to look up the plans in the Powerpoint and listen we're going to have the Powerpoint on our share point site. We're going to have this recorded session on our share point site. So give us like 24 to 48 hours and it will be available. I'm going to drop the link in the chat box. But when I showed you guys how to look at the national -- at the plans and we pulled up that list, I think that was like slide 12. If you notice next to the plans it had a little number. You just add a number one to the number. That is your enrollment The easiest way is to go into the plan itself and usually has the enrollment code at the last page. Are HSA any good, what type of person is good fit for HSA, keeping in mind that HSA -- you know, everyone that I have heard that has an HSA loversit. I don't have the HSA. I have the FSA. Again, it is depending on your needs how much medical expenses you're going to have and if you are going to have an and if you don't plan to have that then you can't get it. That is based on personal preference. What you need for your family u everyone that I know that has it has nothing but good things to say about it. So again, homework, homework, homework. If my daughter's Mom has the same coverage is it beneficial for both of us to have our daughter on the coverage? It depends. This is tricky. I heard this question before. So let's say that you both have family plans. Maybe you know you separated it. You have multiple children. You both have to have family plans. Well, you're going to pay the price anyway. You want to pay for family plan. So it is what it is. But if you don't have to have a family plan, then you're going to save some costs because if the plan is exactly the same and it is the same coverage, you got to do that comparison. Can this one go self only? Right? Can your daughter's Mom

go self only save some money there and you keep the family? Or visa versa. Right? Where can you save the money? But if you both have to have family plans, then you're not going to save any money anyway, right? Okay. I'm only assuming because maybe they're not Federal. I had that come up recently. I had Federal employee that he was getting ready to retire and he wanted to reduce his coverage. He said that his ex-wife can provide the coverage for his son. He wanted to go to self only. And I said okay. Is your son going to have the same coverage with the wife? Good with the coverage that he's going to get? Is he going to be visiting you? Does your ex-wife have a national plan? These are the questions, right? Are you going to be good because going to be living in two different states and he didn't even think about that. Oh, wait, I think she only has HMO. So is that HMO going to cover him when you're in Florida. Okay. So do you really want to go to self only? What is happening here? This is your homework. Part of your homework. Any other questions? Please put it in the QA box.

» Andrea: We can capture all the questions and put them in a Q and A. Because we are running out of time. We're actually over time now. So we can put them as part of the training that we did today the recorded session. The Powerpoint slides and then we can also put together a Q and A with all the questions that were captured both in the chat and on the Q and A pod.

» Maritza: Yes. The last question and then we're going to wrap it up, okay. So to clarify during -- you're welcome for the presentation. I hope I've helped you guys. If you have any questions please feel free to reach out to us. Again it is on the share point. To clarify during open season, I can go to my pay and on my own I can cancel my self plus one coverage and I can also go to benefits and pick my dental and vision which is separate from the healthcare plan. I have healthcare coverage through the VA and she's now a teacher. That is a yes, yes and yes, Brian. You can do all of that online. So yes, yes, yes. You're welcome. Again, I hope I have provided you guy with some tools. I try to make it as simple because you know I'm not a tech savvy person so I get it. Simple to understand. Please do your homework. Get with your local HR office if you have any questions. With that, I'm going to put the share point site in the chat and I'm going to let Andrea close us out.

» Andrea: Well, thank you, Maritza, that is a lot of really good information and I know it was a short period of time to provide a lot of information. There was some really good questions and we appreciate your participation. Like I mentioned and Maritza mentioned as well the slides, recording and we'll put together a Q and A sheet will be up on our share point site. Pleads give us a few days adds we need to compile all the information as far as the questions and then we can get them to the share point site. And also we want to thank you for your time. We hope that this was beneficial for you. If you have any questions or want to look at any of our other trainings that we've done either for COP, for calibration or even our newest program roundtable please visit the share point site that Maritza put in to the chat box to answer this last question Scott from Denver. Your first question retirement question should be directed to your local HR and possibly even down to the retirement center. So thank you again and enjoy the rest of your afternoon. And we look forward to seeing you next month for our next COP.

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