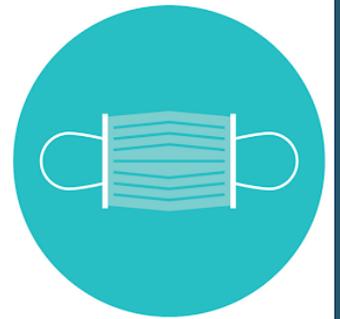
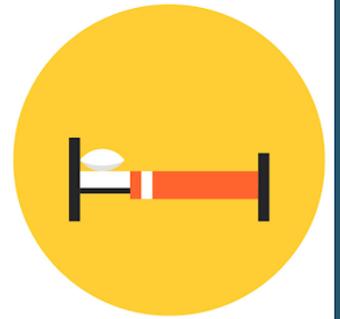
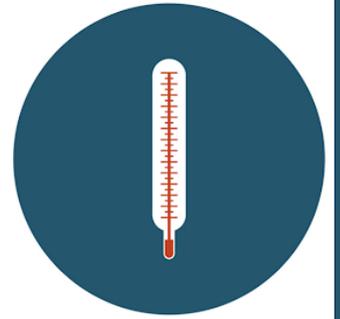


**ACTIVE  
STATE EMPLOYEE  
BENEFITS  
ENROLLMENT GUIDE  
2021**



**ARIZONA**  
DEPARTMENT OF ADMINISTRATION  
HUMAN RESOURCES

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## About This Guide

This guide is a summary of the benefits offered through the State of Arizona Benefit Options program. The actual benefits available to you and the descriptions of these benefits are governed in all cases by 26 U.S. Code § 125, Summary Plan Descriptions, and contracts.

The State of Arizona reserves the right to modify, change, revise, amend, or terminate these benefit plans at any time.

You may view and print the complete Active Benefits Guide and the Summary of Benefits and Coverage on [benefitoptions.az.gov](https://benefitoptions.az.gov) under the Employee tab.

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## New ID Cards



Due to the plan and carrier changes for 2021, you will receive a new medical ID card before January 2021. You can access your ID card in early January via the insurance company's website or app.

If you need assistance before you can retrieve your card information, please contact 602-542-5008, toll-free at 1-800-304-3687 or [benefitsissues@azdoa.gov](mailto:benefitsissues@azdoa.gov).

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## Flu Shots



Flu shots are a preventive care benefit with your medical plan and are at \$0 cost to you and your covered dependents. Flu shots are more important than ever this season to keep you and your family healthy.

### Options for Flu Shots

- Visit [wellness.az.gov/flushot](https://wellness.az.gov/flushot) for worksite or Healthwaves public clinic listings.
- Visit your doctor's office.
- Visit your pharmacy. Bring your medical card and have the pharmacist bill the flu shot under your medical carrier—NOT your pharmacy coverage.

# Benefit Expos Online Only



Join us as we bring our popular Benefit Expo events to our webinar format. Carrier representatives will be online to answer your questions.

### Choose Your Topic - Two Focus Areas

- New medical plan changes in-depth
- Current dental, vision, life, flexible spending, disability & wellness plans

### Register

- Choose a date and time below
- Visit [benefitoptions.az.gov/oewebinars](http://benefitoptions.az.gov/oewebinars) to register
- Can't make a live event? See recordings on [benefitoptions.az.gov/oe2021](http://benefitoptions.az.gov/oe2021)
- AHCCCS, DES and DOC - Watch your email for information on your agency's webinars.

All online events are closed captioned. Reasonable accommodations will be provided to individuals with disabilities. Contact [benefitsissues@azdoa.gov](mailto:benefitsissues@azdoa.gov) or 602-542-5008 prior to the event.

Date	Time	Topic
Monday, October 5	10:00 am- 11:30 am	New Medical Plan
Thursday, October 8	2:00 pm - 3:30 pm	New Medical Plan
Tuesday, October 13	12:00 pm - 1:30 pm	New Medical Plan
Saturday, October 17	10:00 am - 11:30 am	New Medical Plan
Monday, October 19	11:30 am - 1:00 pm	New Medical Plan
Wednesday, October 21	2:00 pm - 3:30 pm	New Medical Plan
Friday, October 23	9:00 am - 10:30 am	New Medical Plan
Friday, October 23	12:00 pm - 1:30 pm	Dental/Vision/Wellness/All Other
Saturday, October 24	9:00 am - 10:30 am	New Medical Plan
Monday, October 26	7:00 am - 8:30 am	New Medical Plan
Friday, October 30	12:00 pm - 1:30 pm	New Medical Plan
Monday, November 2	6:00 pm - 7:30 pm	New Medical Plan
Thursday, November 5	11:30 am - 1:30 pm	New Medical Plan
Thursday, November 5	3:00 pm - 4:30 pm	Dental/Vision/Wellness/All Other
Friday, November 6	12:00 pm - 1:30 pm	New Medical Plan



## Open Enrollment 2021 - You Must Enroll for All Plans October 19 - November 6 at 5 p.m. (AZ Time)

- Medical** - Plans and carriers are changing. You must re-enroll.
- Dental** - You must re-enroll to continue coverage, even if you want the same carrier and coverage.
- Vision** - If you want vision coverage, you must enroll in the vision plan. The Avesis Discount Program is not available for 2021.
- Flexible Spending Accounts (FSA)** - You must re-enroll in these accounts on an annual basis.
- Life** - You must re-enroll in your life insurance coverage. Make sure to update your beneficiaries as well.
- Short-Term Disability** - You must re-enroll in your short-term disability coverage.
- For more information, please see Benefit Changes for 2021 below and the topic pages in this guide.

**Enrollment is Online Only** - Make new elections online at [hrsystems.azdoa.gov](https://hrsystems.azdoa.gov) > Y.E.S Portal, as shown on p. 4.

## Benefit Changes for 2021

### MEDICAL, p.8

- **New Plan** - The Triple Choice Plan (TCP), will replace the Exclusive Provider Organization (EPO) and Preferred Provider Organization (PPO) plans. The High Deductible plan (HDHP) will continue to be offered.
- **Rates** - The TCP has one premium, see p. 11.
- **Carriers** - The TCP and HDHP will be offered by BlueCross BlueShield of Arizona and UnitedHealthcare. Medical coverage will no longer be available from Aetna and Cigna. (Cigna will continue to offer the Dental Care Access (DHMO) plan, see below.)
- **Deductibles - TCP**
  - In-Network Tier 1 - \$200 employee/\$400 family
  - In-Network Tier 2 - \$1,000 employee/\$2,000 family
  - Tier 1 and Tier 2 deductibles cross-apply to each other
  - Out-of-Network Tier 3 - \$5,000 employee/\$10,000 family
- **Out-of-Pocket Maximums - TCP**
  - Tier 1 and Tier 2 combined - \$7,350 employee/\$14,700 family
  - Tier 3 - \$8,700 employee/\$17,400 family
- **Deductibles - HDHP**
  - In-Network - \$1,500 employee/\$3,000 family
  - Out-of-Network - \$5,000 employee/\$10,000 family
- **Out of Pocket Maximums - HDHP**
  - In-Network - \$3,500 employee/\$7,000 family
  - Out-of-Network - \$8,700 employee/\$17,000 family

### PHARMACY, p. 12

- ADOA is concluding negotiations for a pharmacy vendor. The plan structure and copays on p. 12 will remain the same for the 2021 plan year. The carrier information will be available on [benefitoptions.az.gov/oe2021](https://benefitoptions.az.gov/oe2021) on October 1, 2020.

### DENTAL, p. 14

- **New Name:** Cigna Dental Care Access is the new name for the Cigna DHMO.

### VISION, p. 15

- **Rates** - Have been reduced by 4-6%.
- **LASIK** - The LASIK benefit has increased to \$750
- **NEW!** Target Optical Discount - \$25 off frames at Target Optical locations inside Target stores.
- Note: The Avesis Discount Plan is not available for 2021. To have vision coverage, you must enroll in the Avesis Advantage Program.

### SHORT-TERM DISABILITY, p. 17

- **Rates** - Have increased slightly from \$0.310 to \$0.316.

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# How To Enroll Online

To improve efficiency, all benefit enrollment is online at [hrsystems.azdoa.gov](https://hrsystems.azdoa.gov) > **Y.E.S. Portal**. Paper forms are not available.

## STEP 1 - MAKE AN INFORMED CHOICE



- **Guides** - Read through this guide and the medical carrier guides provided in the Open Enrollment mailing.
- **Videos** - Watch the informative videos on [benefitoptions.az.gov/oe2021](https://benefitoptions.az.gov/oe2021)
- **Expo** - Attend an online expo to hear from the carriers and learn more about our plans in-depth. See p. 2

## STEP 2 - UPDATE YOUR WEB BROWSER



- The supported web browsers for Open Enrollment are shown here. Using other web browsers will create enrollment issues.
- If it is necessary to install a browser, search for it online and follow the download instructions.
- Use a computer not a phone or tablet.

**Google  
Chrome**



**Microsoft Edge  
Chromium**



**Apple  
Safari**



**Mozilla  
Firefox**



## STEP 3 - ENROLL



- Login to [hrsystems.azdoa.gov](https://hrsystems.azdoa.gov) > **Y.E.S. Portal**.
- On the left side, click **BOOKMARKS > OPEN ENROLLMENT**.
- Then follow the steps to enroll.
- After completing each screen, click the blue **CONTINUE** button in the right hand corner.
  - *Hint: Scroll down to find the button.*
- **Problems with accessing the Y.E.S. website?** Contact the HRIS Help Desk at 602-542-4700.
- **Benefit questions?** Contact Benefit Services at 602-542-5008 or toll-free 1-800-304-3687.

## STEP 4 - CONFIRMATION EMAIL



- Immediately after enrolling, a confirmation email titled "Annual Benefits Enrollment Summary" will be sent to your work and personal emails on file.
- Please review this email to ensure your elections are correct.
- Save the email for future reference.

## Return-to-Work Retirees

To make changes during Open Enrollment, your return-to-work status requires you to enroll as follows:

- For your active employee benefits: Make election changes **ONLINE** at [hrsystems.azdoa.gov](https://hrsystems.azdoa.gov) > **Y.E.S. Portal** during Open Enrollment.
- For your retiree benefits: Make election changes **ON THE ENROLLMENT FORM** mailed to you. Submit as instructed on the form.

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## Contact Information Requirement



As you enroll on [hrsystems.azdoa.gov](https://hrsystems.azdoa.gov) > **Y.E.S. Portal**, you are required to validate and update your personal contact information, such as mailing address, email and phone number, so we can communicate efficiently with you about your benefits. To change your contact information at any time, visit [hrsystems.azdoa.gov](https://hrsystems.azdoa.gov) > **Y.E.S. Portal**, call 602-542-5008, or 800-304-3687. ADOA is not responsible for lost or misdirected communications.

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## Beneficiaries



If you elect Supplemental Life insurance for the first time at Open Enrollment, you will be unable to designate a beneficiary at the time of election. You must log in to [hrsystems.azdoa.gov](https://hrsystems.azdoa.gov) > **Y.E.S. Portal** after January 1, 2021, when the plan becomes effective, to designate a beneficiary.

## Eligibility for Benefits

**Employee** - You and your eligible dependents are eligible for the Benefit Options program if you are hired by the State, including a state university and meet the required hours.

- Regularly scheduled employee: paid for at least 20 hours per week for at least 90 days.
- Seasonal, temporary or variable hour employee: paid for an average of 30 hours per week (1,560 per year) using an initial 12-month measurement period which starts on the first of the month after the hire date.
- To maintain eligibility through the annual standard measurement period of October 10<sup>th</sup> each year through October 9<sup>th</sup> of the following year, regularly scheduled employees must be paid for a minimum of 1,040 hours per year; seasonal, temporary or variable hour employees must be paid for a minimum of 1,560 hours per year. Questions? Contact your benefits liaison.

**Dependents** - Defined as your legal spouse; your child(ren) under age 26 defined as: natural, adopted, step, foster, under court-ordered placement pending adoption or guardianship. A disabled child over age 26 who continues to be disabled as defined by §42 U.S.C. 1382c before age 26.

**Supporting Documentation** - For dependents being enrolled for the first time in the following categories: your legal spouse; your child(ren) under age 26 defined as: natural, adopted, step, foster, under court-ordered placement pending adoption or guardianship. Submit the birth/marriage certificate and applicable court order within 14 days to complete processing. Federal law requires a Social Security Number (SSN) for all dependents enrolled in State plans. *Failure to submit documents will result in disenrollment.*

**Qualified Life Events** - After Open Enrollment, benefit changes can only be made for Qualified Life Event (QLE). Events that may be considered a QLE must be submitted in writing to the ADOA Benefit Services Division within 31 days of the event. A QLE event may include but is not limited to:

- Marriage, legal separation, annulment, death.
- Divorce, see next column.
- Birth, adoption, court-ordered placement pending adoption, court-ordered guardianship, age limit, legal custody change.
- Change in employment status or work schedule impacting benefits eligibility for you and/or your dependents. You may only enroll in the coverage that was lost.
- Leave Without Pay (LWOP) status.

**How to Submit QLE Changes** - Visit [benefitoptions.az.gov/QLE](http://benefitoptions.az.gov/QLE) and follow the instructions. All required supporting documents must be submitted. ***Failure to submit within 31 days will result in a loss of enrollment.***

**Benefits Effective Date** - The first pay period AFTER all required forms and supporting documents are submitted and approved.

**Divorce and Ex-Spouse Coverage** - Divorce is a QLE. You are



*required to drop coverage* for an ex-spouse within 31 days of your divorce decree. For court orders to provide insurance for an ex-spouse, obtain it elsewhere.

**Newborn Coverage** - **Your newborn is ONLY covered under your insurance for the first 31 days after birth. By the 31st day, you**



**must ENROLL your newborn as a dependent or the baby will not be covered.** Miss the deadline, and you must wait until the next QLE or Open Enrollment. To enroll your child, submit a Declaration for Change form with a crib card, birth certificate or hospital verification letter.

**Duplicate Enrollment** - Duplicate enrollment in State plans is prohibited and will be terminated with no refunds for the premiums paid. For spouses who are State and/or a state university employees and/or retirees these rules apply:

- You cannot enroll each other as dependents, nor have your children enrolled twice.
- One spouse may elect coverage for the entire family, or each spouse may elect their own coverage.
- Dependent children can be on one spouse's policy, or divided between spouses.
- If your parents are State and/or State University employees, you cannot be enrolled as a single subscriber in a State plan and as a dependent on your parent's policy.

**Benefit Premium Payments - Please Read** - Benefit premiums



are automatically deducted from your paycheck each bi-weekly payroll cycle. Payment is made in arrears, meaning your deductions are taken after the benefit coverage period.

- **Enough Pay** - If you do not receive any pay or enough pay to cover the full employee portion of the benefit premium deduction during a pay period, **YOU ARE RESPONSIBLE FOR PAYING THE FULL EMPLOYEE PORTION OF THE BENEFIT PREMIUM.** If you return to pay status with unpaid premiums, as much as possible will be deducted from your first paycheck and subsequent checks until the full amount is paid. This could be the full amount of your paycheck(s).
- **Enough Hours** - If you do not have at least thirty (30) paid hours within a pay period and are not on FMLA, **YOU ARE RESPONSIBLE FOR BOTH THE FULL EMPLOYEE AND THE FULL EMPLOYER BENEFIT PREMIUMS.**
- Read the policy: [benefitoptions.az.gov/benefitpremium](http://benefitoptions.az.gov/benefitpremium). Questions? Contact your benefits liaison.

# How to Save on Benefits



As healthcare costs continue to rise, there are steps you can take to save money with programs and services offered by Benefit Options. Here are simple ways you can offset the costs of your benefits. Look for the piggy bank symbol at left throughout this guide for ways you can save.



## Choose the Right Medical Plan, p. 7-10

- **Guides** - Read through this guide and the medical carrier guides provided in the Open Enrollment mailing.
- **Videos** - Watch the informative videos on [benefitoptions.gov/oe2021](https://benefitoptions.gov/oe2021)
- **Expo** - Attend an online expo to hear from the carriers and learn more about our plans in-depth. See p. 2.



## Choose the Right Medical Care

- Is the ER the right place to go? Match the service to your need to save.
- Get advice from a registered nurse on the Nurseline for \$0 – find the phone number on the back of your medical card.
- Choose a Primary Care Physician today and establish a relationship.
- For more money saving ideas, visit [benefitoptions.az.gov](https://benefitoptions.az.gov) > **Employees** > **Saving on Benefits**.



## Preventive Care \$0

- Wellness visits, immunizations, screenings, cleanings, mammograms, prostate exams and more are covered on the medical and dental plans to keep you healthy.



## \$200 Wellness Incentive, p. 19

- Earn points toward the incentive with healthy activities, preventive screenings and immunizations already covered as preventive care.
- New portal and program components coming in 2021!



## Flexible Spending Account, p. 16

### Health Savings Account, p. 9

- Pay for medical & dependent expenses, including co-pays, with pre-tax dollars and save up to 25%.
- Have your deductibles budgeted for the year – tax-free!
- The Healthcare Flexible Spending Account is pre-funded January 1, so the money is available right away.
- The Health Savings Account receives contributions from the State and is used with the High Deductible Health Plan (HDHP).

## Additional Services And Discounts

There are many free and discounted services offered to State employees, see the pages listed below for more information.

- **Higher Education Discounts** - For all State universities and several more institutions, see p. 19.
- **Counseling** - The Employee Assistance Program (EAP) offers counseling for you and your household members, see p. 20
- **Legal & Financial** - Create a will, get a financial assessment, free consultation with an attorney, ID theft assistance and more. Services are offered through the life insurance carrier Securian on p. 18 and our Employee Assistance Plan (EAP) provider CompPsych Guidance Resources on p. 20.
- **Travel Assistance** - Lost luggage, medical relocation, repatriation of remains, see p. 18.
- **Shopping Discounts** - Learn more about PerksConnect on p. 19.

# Medical Plans



Benefit Options offers two medical plans – the Triple Choice Plan and the High Deductible Health Plan with Health Savings Account. Both plans are available from two carriers, Blue Cross Blue Shield of Arizona and UnitedHealthcare. Each carrier offers their own broad nationwide provider networks. See the full comparison on p. 11 and view the carrier websites on p. 22.

- **NEW PLAN:** The Triple Choice Plan (TCP) is the new plan for 2021.
- **CARRIER CHANGES:** The TCP medical plan will be offered by BlueCross BlueShield and UnitedHealthcare. Medical coverage will no longer be available from Aetna and Cigna. Information on how to Transition Care can be found on [benefitoptions.az.gov/forms](http://benefitoptions.az.gov/forms).

## Cost-Sharing Definitions

The share of costs covered by your insurance that you pay out of your own pocket. This term generally includes deductibles and copayments, but it does not include premiums, balance billing amounts for non-network providers, or the cost of non-covered services.

<b>Premium</b>	Your premium is the amount you pay each month for your insurance coverage.
<b>Deductible</b>	At the start of each Plan Year, you pay for the cost of your health care before your State of Arizona health plan will pay.
<b>Copayment/ Coinsurance</b>	Once you have met your deductible, you will share in the cost of your health care with the State of Arizona. A copayment is the flat dollar amount that you will pay for health care services. Coinsurance is a percentage of the cost you will pay for health care services.
<b>Out-of-Pocket Maximum</b>	This amount is the most you will pay for health care services (not including premium). Once you have reached your out-of-pocket maximum, your State of Arizona health plan will pay 100% of all your covered services for the remainder of the Plan Year.

## Triple Choice Plan

The Triple Choice Plan is based on three tiers. For a single premium, you have access to all three tiers as shown below. You'll save the most when you choose providers from Tier 1, a network of doctors and facilities that meet strict criteria for both quality and cost of care.

### Features

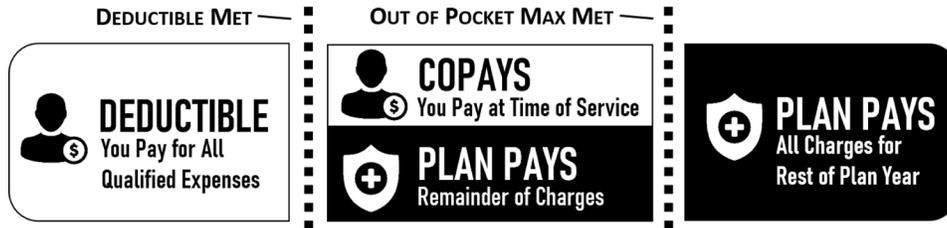
- **Carriers:** Blue Cross Blue Shield of Arizona and UnitedHealthcare.
- **One Plan: The TCP is a single plan, you do not sign up for a specific tier.**
- **One Premium:** You pay a single premium to access the plan.
- **Tier Access:** You can access all three tiers of providers and facilities. You control costs by choosing providers and facilities in the lowest tiers. See p. 10.
- **No Referrals:** You can still see the providers you know and trust—even if they aren't in Tier 1.
- **Preventive Care:** In-Network preventive services are covered at 100%.
- **Deductibles:** The deductible for Tier 1 counts toward Tier 2 and vice versa. Prescription drug copays are not subject to the medical deductibles. These copays do count toward the annual out of pocket maximums. See the deductibles and how they work on p. 8.

Tiers		
<b>Tier 1</b>	<b>In-Network Providers</b>	Choose doctors and facilities from Tier 1 to get the highest level of benefits.
<b>Tier 2</b>	<b>In-Network Providers</b>	You receive in-Network benefits for using participating network care providers. For some services, you'll pay a higher out-of-pocket cost with a Tier 2 provider than you would with a Tier 1 provider.
<b>Tier 3</b>	<b>Out-of-Network Providers</b>	You will pay the highest cost for using out-of-Network providers, and may be responsible for paying the full provider-billed charges.

*Continued on p. 8*

## Triple Choice Plan, cont.

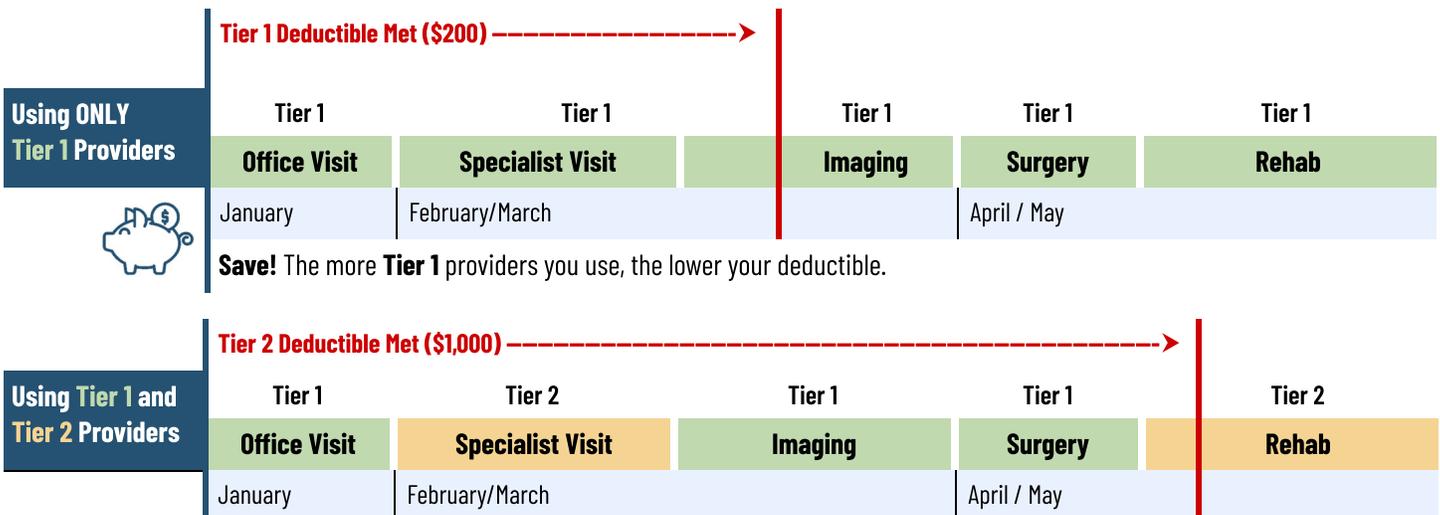
### Deductible Structure



Tier 1 Deductibles (also apply to Tier 2)*			Tier 2 Deductibles (also apply to Tier 1)*		
Individual \$200	Family \$400		Individual \$1,000	Family \$2,000	
Member meets \$200 in expenses member begins paying copays	Any 1 Member meets \$200 in expenses <b>ALONE</b> member begins paying copays	Other Members meet \$200 in expenses <b>COMBINED</b> other members begin paying copays	Member meets \$1,000 in expenses member begins paying copays	Any 1 Member meets \$1,000 in expenses <b>ALONE</b> member begins paying copays	Other Members meet \$1,000 in expenses <b>COMBINED</b> other members begin paying copays

\*Only qualified expenses apply. Visit [irs.gov](https://www.irs.gov) for a complete list of qualified expenses.

### Using The Triple Choice Plan - Individual Coverage Example



### How To Find Doctors and Facilities on The Triple Choice Plan

#### Blue Cross Blue Shield of Arizona - Tier 1

- Visit [azblue.com/stateofaz](https://azblue.com/stateofaz).
- Click the "Find A Doctor" tab.
- Choose the Triple Choice Plan.
- Type in the doctor or facility name.
- Look for results with the Tier 1 ribbon.



#### UnitedHealthcare - Tier 1

- Visit [whyuhc.com/stateofaz](https://whyuhc.com/stateofaz).
- Click the "Search for a Provider" tab.
- Choose the Triple Choice Plan.
- Type in the doctor or facility name.
- Look for results with the Tier 1 dot.



Medical coverage continued on p. 9

# High Deductible Health Plan with Health Savings Account

The High Deductible Health Plan (HDHP) offers upfront savings on premiums paired with a Health Savings Account (HSA) both you and the State contribute to on a pre-tax basis so you can pay for your deductible and other qualified medical expenses.\*



## Features

- **Carriers:** BlueCross BlueShield of AZ and UnitedHealthcare. Use Total Care or Premium Care providers for the best value and quality care.
- **Premiums:** Are 50% less than the TCP plan, but with a higher deductible. To offset paying the deductible and other qualified medical expenses\*, the State contributes approximately half of the deductible amount to an HSA that you can also contribute to. (See below.)
- **In-Network Services:** Services can be obtained in-Network or out-of-Network but will have higher costs for out-of-Network services.
- **No Referrals:** Choose in-Network providers and facilities for the most savings. In-Network preventive services are covered at 100%.
- **Deductibles:** Before the plan pays, separate in-Network and out-of-Network deductibles must be met (includes prescription drugs).

## Deductible Structure\*

DEDUCTIBLE MET		OUT OF POCKET MAX MET		Individual \$1,500	Family \$3,000
	<b>DEDUCTIBLE</b> You Pay for All Qualified Expenses		<b>COINSURANCE</b> You Pay 10%	Member meets \$1,500 in expenses member begins paying coinsurance	Members meet \$3,000 in expenses <b>COMBINED</b> all members begin paying coinsurance
			<b>PLAN PAYS</b> Remainder of Charges		
			<b>PLAN PAYS</b> All Charges for Rest of Plan Year		

\*Only qualified expenses apply. Visit [irs.gov](https://www.irs.gov) for a complete list of qualified expenses.

## How a Health Savings Account (HSA) Works

- **Contributions:** The State makes biweekly contributions to your HSA to use towards qualified medical expenses. You can contribute on a pre-tax basis and use the funds for qualified expenses, including medical, dental and vision costs. See "HSA Contributions" on p. 10.
- **Triple Tax Advantage:** Contributions are tax free. Withdrawals to pay for expenses are tax free. The account earns interest tax free.
- **Unused Funds Remain:** There is not a "use it or lose it" rule. Any unused funds remain in your account for future use.
- **Money Stays With You:** Funds in the HSA are yours and remain available for future medical expenses, even after you retire.

## Using The HDHP w/HSA - Individual Plan Example

	Deductible Met (\$1,500) →				Coinsurance →		
Using Total Care or Premium Care Providers	Total Care ♥♥				Total Care ♥♥		
	Office Visits	Specialists	Imaging	Surgery	Rehab	Rehab	Office Visit
	January	February	March	April	May	June	July
Your HSA Contribution Per Paycheck (2/mo)							
State HSA Contribution Per Paycheck** (2/mo)							

\*\*\$27.29 Individual, \$55.38 Family, see p. 11

## How To Find Doctors and Facilities On the High Deductible Plan for the Best Value and Quality Care

### Blue Cross Blue Shield of Arizona - Total Care

- Visit [azblue.com/stateofaz](https://azblue.com/stateofaz).
- Click the "Find A Doctor" tab.
- Choose the HDHP w/HSA plan.
- Type in the doctor or facility name.
- Look for results with the Total Care icon.



### UnitedHealthcare - Premium Care

- Visit [whyuhc.com/stateofaz](https://whyuhc.com/stateofaz).
- Click the "Search for a Provider" tab.
- Choose the HDHP w/HSA plan.
- Type in the doctor or facility name.
- Look for results with the double heart icon.



Continued on p.10

## Health Savings Accounts, cont. from p. 9

### HSA Contributions 2021 – Use This Chart To Calculate Your Contributions

Coverage Tier	2021 Employee Contribution Max Limit	2021 State Contribution	2021 IRS Contribution Max Limit
Employee	\$2,880.06 <sup>1</sup>	\$27.69/pay period, Up to \$719.94 annually <sup>1</sup>	\$3,600
Employee + Adult, Employee + Child, Family	\$5,760.12 <sup>1</sup>	\$55.38 per pay period, Up to \$1,439.88 annually <sup>1</sup>	\$7,200
Catch Up Contribution	\$1,000 - for age 55+, in addition to the Employee or Family contribution. Include in your Max Limit if applicable.		

<sup>1</sup> Subject to effective date of enrollment and remaining pay periods.

### Calculate Your HSA Deduction Per Pay Period

#### Step 1: State HSA Contribution for 2021

State Contribution \$\_\_\_\_ per pay period x 26 or \_\_\_\_ remaining pay periods = \$\_\_\_\_ Annual State Contribution

#### Step 2: Your HSA Contribution for 2021: You May Contribute Less Than This Amount, but Not More

IRS Contribution Max Limit \$\_\_\_\_ — State Contribution \$\_\_\_\_ = \$\_\_\_\_ Employee Contribution Maximum Limit<sup>1</sup>

#### Step 3: Your HSA Deduction Per Pay Period

Employee Contribution Amount (from Step 2) \$\_\_\_\_ x 26 or \_\_\_\_ remaining pay periods = \$\_\_\_\_ Per Pay Period Deduction

### HSA Account & Debit Card



- You access your HSA funds with a debit card to pay for qualified expenses as determined by the IRS.
- When you enroll in the HDHP, the State automatically opens your HSA with Optum Bank, our administrator. You will receive an Optum Bank mailing with account activation instructions, so open all mail from them.
- Be sure we have your correct mailing address (no P.O. Boxes allowed), and that your name in our system matches the full legal name on your Social Security card.

- Current HDHP Members** - After Open Enrollment you will receive instructions on how to transfer your account if desired.
- HSA Customer Verification**
  - For your Health Savings Account (HSA) bank account to be activated, you must pass the verification process. For your protection, the federal Patriot Act requires Optum Bank to obtain, verify and record information that identifies each person who opens a new account.
  - To begin this process, open, read, and follow all the instructions in all correspondence from Optum Bank.
  - Until you pass the verification process, all HSA contributions to your account will be held. You will still have health insurance, but you will not have an HSA. If you do not pass the verification within 60 days, your contributions will be refunded to you. The State contributions will not be refunded to you. For more information, please contact your agency's benefit liaison.
- Eligibility** - You are ineligible to participate in an HSA if: You or your spouse have a Health Reimbursement Account (HRA); you are enrolled in Medicare, Medicaid or TriCare; you receive care from the Veterans Administration (VA) - HSA contributions are prohibited for 90 days after care is received.

## Medical Plan Comparisons

The two medical plans offer different advantages depending on how you use healthcare. In addition to this guide, please be sure to check out the following materials:



- Guides** - Read through this guide and the medical carrier guides provided in the Open Enrollment mailing.
- Videos** - Watch the informative videos on [benefitoptions.gov/oe2021](http://benefitoptions.gov/oe2021).
- Scenarios** - Common healthcare scenarios can be found on [benefitoptions.az.gov/oe2021](http://benefitoptions.az.gov/oe2021).
- Expo** - Attend an online expo to hear from the carriers and learn more about our plans in-depth. See p. 2.

# Medical Plan Premiums

The chart below is a comparison in-Network and out-of-Network services. For a complete list of benefits coverage, view the Summary Plan Descriptions on [benefitoptions.az.gov](http://benefitoptions.az.gov). Carrier contact information is on p. 22.

Medical Plan Premiums <sup>1</sup>					
	Triple Choice Plan (TCP)		High Deductible Health Plan + HSA (HDHP)		
	Employee	State	Employee	State	Agency HSA Contribution
Employee Only	\$26.17	\$279.46	\$10.15	\$181.87	\$27.69
Employee + Spouse	\$71.49	\$576.74	\$30.46	\$376.95	\$55.38
Employee + 1 Child	\$57.30	\$376.83	\$25.89	\$246.41	\$55.38
Family	\$121.61	\$638.55	\$56.35	\$419.97	\$55.38



Coverage		Triple Choice Plan			High Deductible Health Plan	
		Tier 1 In-Network	Tier 2 In-Network	Tier 3 Out-of-Network	In-Network	Out-of-Network
Deductible	EE Only	\$200	\$1,000	\$5,000	\$1,500	\$5,000
	EE + Spouse EE + 1 Child Family	\$400	\$2,000	\$10,000	\$3,000	\$10,000
	Out-of-Pocket Maximum <sup>3,4</sup>	\$7,350 - Tier 1 & Tier 2 Combined		\$8,700	\$3,500	\$8,700
	EE + Spouse EE + 1 Child Family	\$14,700 - Tier 1 & Tier 2 Combined		\$17,400	\$7,000	\$17,400
Lifetime Maximum		Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Routine Preventive Services		\$0	\$0	50%	\$0	50%

Copayment / Coinsurance <sup>2,3</sup> After Applicable Deductibles Are Met					
Office Visits (Including Mental & Behavioral Health)					
Primary Care Physician (PCP)	\$20	\$20	50%	10%	50%
Specialist <sup>4</sup>	\$40	\$40	50%	10%	50%
OB/GYN	\$20	\$20	50%	10%	50%
Telemedicine Services	\$20	\$20	50%	10%	50%
Durable Medical Equipment	\$0	\$0	50%	10%	50%
Emergency Services					
Ambulance	\$0	\$0	\$0	10%	50%
Emergency Room	\$200 <sup>5</sup>	\$200 <sup>5</sup>	\$200 <sup>5</sup>	10%	10%
Urgent Care	\$75	\$75	50%	10%	50%
Inpatient Hospital Admission	\$250	\$250	50%	10%	50%
Outpatient Facility	\$100	\$100	50%	10%	50%
Laboratory and X-Ray Services <sup>6</sup>	\$0	\$0	50%	10%	50%
Major Radiology Services <sup>7</sup>	\$100	\$100	50%	10%	50%

1 For the NAU-only BCBS PPO Plan information, visit [nau.edu/human-resources/benefits/benefit-plan-document/](http://nau.edu/human-resources/benefits/benefit-plan-document/)  
 2 Copayments apply after the Plan deductible is met. Copayments and deductibles apply to the Out-of-Pocket Maximum.  
 3 The Plan pays 100% after the out-of-pocket maximum is met.  
 4 Includes Chiropractor and Therapy services.  
 5 Emergency Room copayment waived if admitted, but subject to hospital admission copayment.  
 6 See summary plan document for more information on covered services.  
 7 Includes CAT scans, MRI/MRA, PET scans, etc. See summary plan document for more information.

# Pharmacy Plan



The pharmacy plan is the same for all medical plans and is included in your medical plan premium. All prescriptions must be filled at in-Network pharmacies by showing your medical card.

## Pharmacy Vendor Update

- ADOA is concluding negotiations for a pharmacy vendor.
- The plan structure and copays shown below will remain the same for the 2021 plan year.
- The carrier information will be available on [benefitoptions.az.gov/oe2021](https://benefitoptions.az.gov/oe2021) on October 1, 2020.

## Formulary

The formulary is the list of prescription drugs chosen by a committee of doctors and pharmacists to help you maximize the value of your prescription benefit. These generic and brand name medications are available at a lower cost. The use of non-preferred medications will result in a higher copay. Changes to the formulary can occur during the Plan Year. Medications that no longer offer the best therapeutic value for the Plan are removed from the formulary. Ask your pharmacist to verify the current copay amount at the time your prescription is filled.

The pharmacy benefit has a three-tier formulary. The copay chart below is for medication bought via retail and mail order. Choosing a brand name over a generic may cost more. To see the formulary visit [benefitoptions.az.gov](https://benefitoptions.az.gov). Share the formulary with your doctor to ensure you are getting the best value, which saves money for you and the State of Arizona.

Copays	Generic	Preferred Brand Name	Non-Preferred Brand Name
Retail 31 Days	\$15	\$40	\$60
Retail 90 Days	\$37.50	\$100	\$150
Mail Order 90 Days	\$30	\$80	\$120

## Prior Authorization

Prescriptions for certain medications may require clinical approval before they can be filled, even with a valid prescription. These prescriptions may be limited to quantity, frequency, dosage or may have age restrictions. You, your local pharmacy, or your physician can contact the pharmacy vendor to initiate the authorization process.

## Non-Covered Drugs

Certain medications are not covered as part of the Benefit Options Plan. If you find such a drug has been prescribed for you, discuss an alternative treatment with your doctor.

## Coordination of Pharmacy Benefits

Benefit Options does not coordinate pharmacy benefits.

## Specialty Pharmacy Program

This program assists with monitoring your medication needs for specific injection drugs and other therapies requiring complex administration methods and special storage, handling, and delivery. Specialty medications are limited to a 31-day supply.

## Out-of-Network & International

The cost of prescriptions filled out-of-Network will not be reimbursed. No international pharmacy services are covered. Fill prescriptions before your trip and take your prescriptions with you. No coverage for medication that is lost, stolen, or damaged.

## Pharmacy Savings Programs

Take advantage of these easy ways to save.



### • 90-Day Supply

Members requiring medications for an on-going health condition can obtain a 90-day supply of medication at a local retail pharmacy for two and a half copays.

### • Mail Order Service

A convenient and less-expensive service for members who require medications for on-going health conditions or who will be in an area with no participating retail pharmacies for an extended period.

### • Discount Program

The Discount Program may be able to provide a discount on certain brand and generic medications that are not covered by your Benefit Options pharmacy drug plan. Present your medical ID card and prescription at any participating pharmacy. Savings are applied automatically when the item prescribed qualifies for a discount.

# Telehealth



All Benefit Options plans include coverage for telehealth visits. You may use your medical carrier's app or our Doctor on Demand app which works with both carriers. Learn more on [benefitoptions.az.gov/telemed](http://benefitoptions.az.gov/telemed). Carrier contact information is on p. 22.

## What is telehealth?

- Why wait for an appointment, drive to the doctor's office, and sit in a crowded waiting room? You can now connect with a doctor on your mobile device. At home or when you're traveling the United States.
- Services are available 24/7 so you and your family can get care quickly...often within minutes.
- Through live video, doctors review symptoms and medications, perform an exam and may recommend treatment, including prescriptions and lab work, if needed.
- All doctors are board-certified and extensively trained in telehealth.

## Conditions treated

- Colds, flu, fever, sore throat, vomiting, diarrhea, rash, allergies, heartburn, indigestion, respiratory issues, migraines, pink eye, eczema, acne, and other non-emergency conditions.
- If you are experiencing an emergency, please call 911.
- Mental health services are also available so you can speak to a counselor in privacy and at your convenience.

## Cost

- Medical Visit
  - Before Deductible is Met
    - TCP & HDHP: \$49
  - After Deductible is Met
    - TCP: \$20 copay. The copay is the same as for an office visit.
    - HDHP: 10% coinsurance. The coinsurance is the same as for an office visit.
- Mental Health Visit
  - Before Deductible is Met
    - TCP & HDHP
      - Psychology and Psychiatry visits can range from \$80-\$300. Negotiated rates differ among carriers.
  - After Deductible is Met
    - TCP: \$20 copay. The copay is the same as for an office visit.
    - HDHP: 10% coinsurance. The coinsurance is the same as for an office visit.

## How To Use Telehealth Services

Download From Your App Store		Register	Connect
<p style="text-align: center;"><b>Doctor on Demand</b></p> <div style="text-align: center;">  </div> <p style="text-align: center;">Works with both carriers <i>For employer, use State of Arizona</i></p>	<p style="text-align: center;"><b>BlueCross BlueShield AZ</b></p> <div style="text-align: center;">  </div> <p style="text-align: center;">BlueCare Anywhere app</p>	<p style="text-align: center;"><b>UnitedHealthcare</b></p> <div style="text-align: center;">  </div> <p style="text-align: center;">UnitedHealthcare app</p>	<p>Get your insurance card to register you and your covered dependents on the app in a few taps. <i>Consider setting up your account before you need it so you can get care quickly.</i></p> <p>Follow the instructions in the app to connect with a doctor in minutes from wherever you are, home or away from home.</p>

# Dental Plans



Benefit Options offers two dental plan options with Cigna and Delta Dental. The chart below is a comparison of in-Network services only which are subject to all provisions, terms and conditions of the Plan Description or Patient Charge Schedule. For a complete list of benefits coverage and out-of-Network services, view the Summary Plan Descriptions on [benefitoptions.az.gov](http://benefitoptions.az.gov). Carrier contact information and policy numbers are on p. 22.

## Cigna Dental Care Access



A Dental Health Maintenance Organization Plan (DHMO) with no deductibles or dollar limits. Services must be obtained from your assigned in-Network general provider. Out-of-Network services are only covered in emergency situations. Plan not available in AK, ID, ME, MT, NH, NM, ND, PR, SD, VT, USVI, WV, and WY.

## Delta Dental PPO Plus Premier



A Dental Preferred Provider Organization Plan. Services can be obtained in-Network or out-of-Network but will have higher costs for out-of-Network services. Additionally, there are in-Network and out-of-Network deductibles that must be met.

### Dental Plan Premiums Per Paycheck

Plan Type	Cigna Dental Care Access <sup>1</sup>	Delta Ppo Plus Premier
Employee Only	\$1.64	\$14.30
Employee + Adult	\$3.29	\$30.33
Employee + Child	\$3.08	\$23.34
Employee + Family	\$5.46	\$48.26
Employee Cost For Care		
Plan Year Deductibles	None	\$50/\$150
Annual Combined Basic & Major Services	No Dollar Limit	\$2,000 per person
Orthodontia Lifetime	No Dollar Limit	\$1,500 per person
Preventive Care Class I	Oral Exam	\$0
	Emergency Exam	\$0, pain treatment \$55, after hours office visit
	Prophylaxis/Cleaning	\$0
	Fluoride Treatment	\$0
	X-Rays	\$0
Sealants	\$12 per tooth	20% (to age 19)
Fillings	Amalgam: \$0   Resin: \$0	20%
Extractions	Simple: \$12 Surgical \$53	20%
Periodontal Gingivectomy	\$91, 1 to 3 teeth   \$180, 4 or more teeth	20%
Oral Surgery	\$12 - \$850	20%
Crowns	\$150 - \$500	50%
Dentures	\$680 upper & lower	50%
Fixed Bridgework	\$135 per unit	50%
Crown/Bridge Repair	\$490	50%
Implant Body	\$1,025	50% <sup>3</sup>
Orthodontia	24-mo. treatment fee, see charge schedule	50% <sup>4</sup>
Other Services	TMJ Exam/Services	\$330 Occlusal Orthotic Device
	External Bleaching	\$165
		Not covered
		Not covered

<sup>1</sup> Plan not available in AK, ID, ME, MT, NH, NM, ND, PR, SD, VT, USVI, WV, and WY.

<sup>2</sup> Routine visits, exams, cleanings and fluoride treatments are covered two times per Plan Year at 100%.

Emergency exams are covered once per Plan Year at 100%. X-rays (Bitewing, Periapicals) are covered once per Plan Year at 100%.

<sup>3</sup> Subject to both the benefit year allowance and the lifetime maximum limit of \$1,000 per tooth. Subject to all provisions, terms, and conditions of the Plan Description.

<sup>4</sup> Limited to a lifetime maximum of \$1,500 per member.

# Vision Plan



Benefit Options offers the Avesis vision plan. Benefits are subject to all provisions, terms and conditions of the Plan Description. For more information, visit [benefitoptions.az.gov](http://benefitoptions.az.gov).

## Avesis Advantage Program



This program is voluntary insurance – you pay the entire premium annually. It provides yearly coverage for a routine eye exam, glasses or contact lenses with extensive provider access throughout the state. Discounts on additional optical purchases are unlimited. Avesis contact information is on p. 22.

### NEW for 2021!

- Rates are reduced 4-6%.
- LASIK coverage increased from \$600 to \$750.
- Target Optical Discount of \$25 on frames.
- *Note: The Avesis Discount Plan is not available for 2021. To have vision coverage, you must enroll in the Avesis Advantage Program.*

## Plan Services and Premiums

The chart below lists in-Network services only. For a complete list of other benefits coverage, view the Plan Policy on [benefitoptions.az.gov](http://benefitoptions.az.gov).

Vision Plan Premiums Per Paycheck		Advantage Program
<b>Employee Only</b>		<b>\$1.72</b>
<b>Employee + Spouse</b>		<b>\$5.70</b>
<b>Employee + 1 Child</b>		<b>\$5.65</b>
<b>Employee + Family</b>		<b>\$7.11</b>
<b>Employee Cost For Care</b>		
<b>Routine Eye Examination Copay (One per Plan Year)</b>		\$10
<b>Optical Materials Copay (Lenses &amp; Frame Combined)</b>		\$0
<b>Standard Spectacle Lenses (One per Plan Year)</b>	<b>Single Vision Lenses</b>	Covered in-full
	<b>Bifocal Lenses</b>	Covered in-full
	<b>Trifocal Lenses</b>	Covered in-full
	<b>Lenticular Lenses</b>	Covered in-full
	<b>Progressive Lenses</b>	Uniform discounted fee schedule
	<b>Select Lens Tints/Coatings</b>	Uniform discounted fee schedule
<b>Frame (One per Plan Year)</b>		Up to \$150 retail value (\$50 wholesale cost allowance)
<b>Contact Lenses in lieu of frame/spectacle lenses</b> Includes fitting, follow-up and materials	<b>Elective</b>	10-20% discount & \$150 allowance
	<b>Medically Necessary</b>	Covered-in-full
<b>LASIK/PRK</b>		Up to \$750
<b>Target Optical Frame Discount (locations inside Target Stores)</b>		\$25

# Flexible Spending Accounts



Flexible Spending Accounts (FSAs) allow you to set aside pretax dollars to pay healthcare expenses or out-of-pocket dependent care expenses. TASC - Total Administrative Services Corporation (TASC) is our FSA vendor. Learn more on [benefitoptions.az.gov](http://benefitoptions.az.gov). TASC contact information on p. 22.

## FSA Types

- **Healthcare FSA** - Use with the TCP only to pay for qualified medical, dental, and vision expenses, including insurance copays and deductibles. Qualified over-the-counter medications and supplies can also be purchased with an FSA, visit [tasconline.com](http://tasconline.com) for a product list.
- **Limited Purpose FSA** - For HSA participants only, this account is used to pay for dental and vision expenses only.
- **Dependent Care FSA** - Pays for the daycare expenses of a dependent child under age 13 or a disabled adult so that you can work. Not for insurance copays or deductibles.

## FSA Advantages & Rules

- **Less Tax** - Increase your take-home pay by reducing your taxable income. Each \$1 you contribute to an FSA reduces your taxable income by \$1. You can save up to 30%, depending on your tax rate.
- **All Funds Available January 1**
  - **Healthcare FSA and Limited Purpose FSA** - Are pre-funded with the total amount you decide to contribute for the year. You have access to the full amount on January 1, 2021 and your payroll contributions pay back the amount during the year.
  - **Dependent Care FSAs** - Only the funds contributed to date are available to use.
- **Offset Deductibles** - You can use the funds to pay for all or part of a deductible, up to the \$2,700 annual contribution limit. You'll have your deductible budgeted for the year – at a tax-free rate.
- **Convenient Payment With Debit Card** - Your funds are accessible with a MasterCard debit card you can swipe at your healthcare provider's office. Available for both Healthcare and Dependent Care FSAs. *Note:* You will be sent a new debit card automatically and may request additional cards for your dependents. The card will arrive in a plain white envelope for security reasons, so be sure to watch for it in your mailbox.
- **Website** - Visit [tasconline.com](http://tasconline.com) to manage your accounts, set email alerts and pay providers.
- **App** - See account balances, upload receipts, check on expense eligibility, set alerts and more. Search for TASC in your device's app store and look for the green icon.



## FSA Annual Contributions

	Minimum	Maximum
<b>Health Care and Limited Purpose</b>	\$130	\$2,700
<b>Dependent Care<sup>1</sup></b>	\$260	\$5,000 (\$2,500 married filing separately)

<sup>1</sup> IRS non-discrimination testing may require ADOA to reduce your contribution. The Dependent Care FSA contribution for Highly Compensated Employees is limited to \$1,600 in 2021. (IRS definition Highly-Compensated Employee for 2021: earned \$130,000 or more in 2020.)

## Calculate Your Annual & Per Pay Period Contribution

- Choose** - The total annual amount to contribute for 2021 and divide by the total number of pay periods left in the year to determine your per paycheck contribution. You must re-enroll each year. Minimum and maximum contributions apply as per the FSA Annual Contributions chart above\*.
- Calculate - Pay Period Amount \$\_\_\_ x 26 = \$\_\_\_ Annual Contribution Amount for 2021**
- Tip:** Estimate your costs on the conservative side, since you cannot rollover the funds. See "Use It or Lose It" below.

## Use It or Lose It



FSAs are calendar-year based. Funds can be set aside and used *only* during that year for the expenses incurred *only* in that year. If you do not use all the funds in your account between Jan. 1 and Dec. 31, 2021, funds will be forfeited as per federal regulations. For 2021 expenses, you have until Mar. 31, 2022, to file reimbursement claims before the funds are forfeited.

## Short-Term Disability



MetLife is the carrier for short-term disability insurance. Benefits are subject to all provisions, terms, and conditions of the policy. Learn more on [benefitoptions.az.gov](http://benefitoptions.az.gov). MetLife contact information is on p. 22.

### Short-Term Disability Insurance

Short-Term Disability (STD) Insurance is voluntary insurance and you pay the entire premium. The STD benefit pays up to 66⅔% of your weekly pre-disability earnings if you are unable to work due to:

- Non-work-related injury (as determined by MetLife), you may receive a weekly benefit for up to 26 weeks.
- Sickness or pregnancy, after your benefit waiting period, you may receive a weekly benefit for up to 18 or 22 weeks.
- Note: You must meet the actively-at-work provision.



### Benefit Waiting Period

- There is no waiting period if you have a non-work-related injury, benefits start on the first day of your disability. Your benefits will start on the 31st day if you become disabled due to illness or pregnancy.
- If you elect STD coverage after your initial eligibility enrollment period at new hire and become disabled during the first 12 months of being covered under the Plan, your benefits will start on the 61st day of disability due to sickness or pregnancy.

**Payment Reduction** - Paid benefits are reduced by 100% of any sick and/or annual leave paid on your paycheck after the waiting period.

**Claims** - Contact MetLife to open a claim. Contact information is on p. 22.

STD Premiums	STD Payable Benefit <sup>2</sup>	
	Weekly Minimum	Weekly Maximum
<p><b>Employee Cost Per Pay Period<sup>1</sup></b></p> <p>Monthly premiums are \$0.316 for every \$100 of your annual base pay, up to the first \$70,000, if applicable. You pay premiums each bi-weekly pay period.</p> <p><b>Calculate Per Pay Period Premium:</b></p> <ul style="list-style-type: none"> <li>• Step 1: (Annual Salary ÷ 100) x \$0.316 = Annual Premium</li> <li>• Step 2: Annual Premium ÷ 26 Pay Periods = Pay Period Premium<sup>1</sup></li> </ul> <p><b>Example:</b></p> <ul style="list-style-type: none"> <li>• Step 1: (\$45,000 ÷ 100) = 450 x \$0.316 = \$142.20</li> <li>• Step 2: \$142.20 ÷ 26 = \$5.47 Pay Period Premium<sup>1</sup></li> </ul>	\$67.32	\$897.43

<sup>1</sup>The total calculated premium may vary due to payroll rounding.

<sup>2</sup>Payable Benefit is reduced by 100% of any sick and annual leave paid on your paycheck after the benefit waiting period.

## Long-Term Disability

As a benefits-eligible employee, you are automatically enrolled in one of the State's two Long-Term Disability (LTD) programs. The retirement system to which you contribute determines your LTD program.

**Arizona State Retirement System Participants** - Broadspire Services, Inc. is the administrator for the Arizona State Retirement System (ASRS) participants LTD Program. Your LTD benefit will pay up to 66⅔% of your pre-disability earnings during your disability as determined by Broadspire and based on supporting medical documentation. ASRS contact information is on p. 22.

**Non-ASRS Participants** - MetLife is the Benefit Options carrier for non-ASRS participants. Your LTD benefit may pay up to 66⅔% of your monthly pre-disability earnings with a maximum benefit of \$10,000 per month during your disability as determined by MetLife and based on supporting medical documentation. MetLife contact information is on p. 22.

## Retirement Savings | AZ Smart Save | Deferred Compensation



**Nationwide<sup>®</sup>  
Financial**

In addition to the mandatory Arizona State Retirement System (ASRS) pension plan, State employees may voluntarily enroll in the AZ Smart Save Plans (Deferred Compensation) with Nationwide Financial Advisors. Plans include: 457(b) Deferred Compensation, 401(k), 403(b), 401(a) and a Roth 457 Plan. Nationwide contact information is on p. 22.

# Life Insurance



Securian is the Benefit Options carrier for Life and Accidental Death and Dismemberment (AD&D) insurance. Benefits are subject to all provisions, terms, and conditions of the policy. Learn more on [benefitoptions.az.gov](http://benefitoptions.az.gov). Securian contact information is on p. 22.



## Basic Life Insurance - Paid by the State

You are automatically covered at no cost to you by the State of Arizona for the following amounts:

- \$15,000 Basic Life Insurance and \$15,000 AD&D Insurance

## Supplemental Life And AD&D Insurance

- Purchase additional insurance for yourself to supplement the Basic Life paid by the State.
- You pay for the additional coverage.
- \$5,000 increments above the \$15,000 Basic Life policy.
- On **new hire only**, may purchase in multiples of \$5,000, not to exceed the lesser of three times your annual salary, to a maximum of \$500,000.
- AFTER the initial election period, you may add up to \$20,000 annually during future Open Enrollments only.
- Premiums for the first \$35,000 are pre-tax.
- Premiums based on your age as of Jan. 1, the first day of the Plan Year.
- Be sure to keep your beneficiaries updated on [hrportal.az.gov](http://hrportal.az.gov).

## Premiums Per Pay Period<sup>1</sup>

Your Age	Cost per \$5,000
29 and under	\$0.14
30-34	\$0.16
35-39	\$0.17
40-44	\$0.28
45-49	\$0.36
50-54	\$0.57
55-59	\$0.82
60-64	\$1.44
65-69	\$1.44
70+	\$2.26

<sup>1</sup>The total calculated premium may vary due to payroll rounding.

## Dependent Life And AD&D Insurance

- You can purchase life insurance and AD&D coverage for your dependents.
- Pay one premium to cover your spouse, children under age 26, and disabled dependent children.
- The policy pays out for each individual person.
- For \$50,000 dependent coverage, you must elect at least \$50,000 in combined basic and supplemental coverage for yourself.
- The employee is the beneficiary.

## Premiums Per Pay Period<sup>1</sup>

Coverage Amount	Cost Per Pay Period
\$2,000	\$0.43
\$4,000	\$0.87
\$6,000	\$1.30
\$10,000	\$2.17
\$12,000	\$2.60
\$15,000	\$3.25
\$50,000 <sup>2</sup>	\$10.85

<sup>1</sup>The total calculated premium may vary due to payroll rounding.

<sup>2</sup>You must have combined basic & supplemental coverage of at least \$50,000; supplemental life elections must be at least \$35,000.

**Claims** - You may open a claim with Securian directly - contact information is on p. 22.

## Additional Free Services

There is no additional fee or enrollment for these resources. Just access them as you need them. You and your benefits-eligible dependents may access them, even if they are not insured with Securian. Learn more on [lifebenefits.com/plandesign/Arizona](http://lifebenefits.com/plandesign/Arizona) > Forms & Documents Tab

- Travel - Lost luggage, ID theft support, medical relocation, repatriation of mortal remains, and more.
- Legal & Financial - Create a will, get a financial assessment, free consult with an attorney, and more.
- Grief - Unlimited telephone consultation with grief professionals, and more.
- Legacy Planning - End-of-life planning, funeral arrangements, and more.

**Portability and Conversion** - If you leave State employment, you and/or your dependents may have the option to convert your coverage to an individual policy or port it to another group term life policy. Securian's contact information is on p. 22.

## Wellness



The Wellness program is open to all benefits-eligible employees and offers free or low-cost services such as educational seminars and webinars, mini-health screenings, flu shots, and health challenges. Learn more on [wellness.az.gov](http://wellness.az.gov).

- **Wellness Incentive Program** - The State of Arizona is launching a new wellness incentive program for 2021 - stay tuned for more information this fall! For 2020 the HIP program is still continuing, so be sure to log your points for the \$200 incentive.
- **Preventive Mini-Health Screenings** - The mini-health screening comes to your worksite for your convenience. For the most accurate results, the blood tests require you to fast for 8 hours and include the full lipid panel and blood glucose measures for prevention and early detection of heart disease and diabetes. Our vendor also offers optional screens for osteoporosis (bone density), Prostate Specific Antigen (PSA), Hemoglobin A1C, and more.
- **Onsite Mammography Screening** - To fight breast cancer through early detection, we offer free mammograms at worksites statewide. For your convenience, appointments only last 15 minutes and results are sent directly to your physician.
- **Onsite Prostate Screening** - Early detection is the best defense against prostate cancer. We offer free, convenient prostate cancer screenings at worksites with a mobile medical unit. Participants receive a PSA blood test, a digital rectal exam (DRE), a testicular exam, and a physician consultation.

### Weight & Diabetes Management Programs

Get the support and tools necessary for you to improve your health, experience positive outcomes, and achieve your personal health goals. Programs available to benefits-eligible employees, spouses, and dependents age 18 and over, visit [wellness.az.gov/weight-management](http://wellness.az.gov/weight-management).

Weight Management		Diabetes Prevention & Management	
<i>Paid by the State, must be enrolled in a State medical plan</i>	<i>Paid by employee</i>	<i>\$0 for eligible participants</i>	<i>Paid by employee</i>
 			

## Higher Education Discounts



ADOA has partnered with multiple local and national higher education institutions to bring you an exciting benefit to advance your education. This benefit provides you several accessible, attainable, and affordable degree programs. Interested in getting your Bachelor's or Master's degree? Dreamed about getting an MBA? Start your journey today and learn more about the educational discounts we offer. Find the best program that suits your needs and life. Available to active employees, their spouses and dependents only.

- **Discounts** - Our negotiated discounts range from 5% to 25% and in some instances, your spouse and dependents may also be eligible.
- **Tuition Reimbursement** - Policies are set by the agency where you work. Please contact your supervisor for details.
- **Partner Institutions** - Arizona Christian University, Arizona State University, Ashford University, Benedictine University, DeVry University, Grand Canyon University, Northcentral University, Northern Arizona University, Ottawa University, the University of Arizona and the University of Phoenix.

## Shopping Discounts



PerksConnect is an exciting platform that allows its members to access everyday deals from merchants in their neighborhood and across the country. With no up-front costs to join and no pre-paid saving certificates to buy, you'll enjoy saving every time you visit PerksConnect participating merchants. Visit [azbenefits.perksconnect.com](http://azbenefits.perksconnect.com).

**App** - Sign up on the web, then download the app from your app store. Simply present your mobile phone or printed online offer to participating businesses to receive an immediate discount. Questions? Contact PerksConnect: 877.253.7100 or [info@perksconnect.com](mailto:info@perksconnect.com)

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# Employee Assistance Program

The Employee Assistance Program (EAP) is administered by ComPsych Guidance Resources. The EAP is for all benefits-eligible employees, spouses, and dependents living in their household. The program offers someone to talk to and resources to consult whenever you need them for solutions to life's challenges.

## Free and Confidential Service

- The toll-free number gives you direct, 24/7 access to a Guidance Consultant, who will answer your questions and, if needed, refer you to a counselor or other resources.
- **Call: 877-327-2362 | TTY: 800-697-0353 | [guidance resources.com](https://www.guidanceresources.com) | App: GuidanceResources Now | Company Code: HN8876C**

## Get the App

- Download the Guidance Resources Now app to have the help you need right at your fingertips—on the Apple App Store and Google Play.



### Confidential Emotional Support

Our highly trained clinicians will listen to your concerns and help with any issues, including:

- Anxiety, depression, stress
- Grief, loss and life adjustments
- Relationship/marital conflicts
- 12 free, confidential counseling sessions per issue per year  
(for long-term counseling, please see your medical plan or our telemedicine service)



### Work-Life Solutions

Our specialists provide qualified referrals and resources for just about anything on your to-do list, such as:

- Finding child and elder care
- Hiring movers or home repair contractors
- Planning events, locating pet care



### Legal Guidance

Talk to our attorneys for practical assistance with your most pressing legal issues, including:

- Divorce, adoption, family law, wills, trusts
- Estate planning, bankruptcy
- ID Theft
- Need representation? Get a free 30-minute consultation and a 25% reduction in fees



### Financial Resources

Our financial experts can assist with a wide range of issues. Talk to us about:

- Retirement planning, taxes
- Relocation, mortgages, insurance
- Budgeting, credit, debt, and more



### Online Support

GuidanceResources® Online is your 24/7 link to vital information, tools and support. Log on for:

- Articles, podcasts, videos, slideshows
- On-demand trainings
- "Ask the Expert" personal responses to your questions

## Plan Documents and Legal Notices

If you participate or enroll in any of the Benefit Options Plans, you are entitled to the following plan documents and legal notices as summarized below. Detailed information is available to you electronically on [benefitoptions.az.gov](http://benefitoptions.az.gov) under the Resources tab.

Documents	Summary Description
<b>Health Insurance Marketplace Coverage</b>	Key parts of the healthcare law allow you a way to buy health insurance through the Health Insurance Marketplace. To assist you as you evaluate options for you and your family, a notice that provides some basic information about the new Marketplace and the Benefit Options health coverage is available.
<b>Summary of Benefits and Coverage and Uniform Glossary</b>	As part of the Affordable Care Act, the federal government announced new rules regarding the disclosure of the Summary of Benefits and Coverage (SBC) and Uniform Glossary. These regulations require group health plans and health insurance issuers that offer coverage for groups and individuals to provide access to the SBC and Uniform Glossary.
<b>Summary Plan Description (SPD)</b>	The SPD, or Plan Document, is a summary of important benefit features of your Plan. The SPD may be revised at any time for Plan clarification purposes.
<b>Insurance Certificates and Policies</b>	Provides information on specific benefit coverage and limitations.
Legal Notices	Summary Description
<b>Health Insurance Portability &amp; Accountability Act (HIPAA)</b>	This notice protects the privacy of individually identifiable health information and establishes who can use the personal health information and how it can be used.
<b>Medicare Notice of Creditable Coverage</b>	This notice has information about the prescription drug coverage through the Benefit Options program for participants with Medicare. It explains the options you have under Medicare prescription drug coverage (Medicare Part D) and can help you decide whether you want to enroll.
<b>Consolidated Omnibus Budget Reconciliation Act (COBRA) Coverage Notice</b>	Notice of the Arizona Benefit Options Program COBRA Coverage. This notice has important information about your right to COBRA continuation coverage, which is a temporary extension of coverage under the Plan.
<b>Patient Protection &amp; Affordable Care Act (PPACA)</b>	Notices of the Arizona Benefit Options Program about PPACA.
<b>HIPAA Special Enrollment Rights Notice</b>	This notice provides information regarding special enrollment. You may be able to enroll in the Benefit Options health plan without waiting for the next open enrollment period if you request a QLE change within 31 days of an event for loss of other coverage or birth, adoption or placement for adoption. Also, you may enroll if you become eligible for a state premium assistance program under Medicaid or CHIP. You must request enrollment within 60 days after you gain eligibility for medical plan coverage.
<b>Women's Health and Cancer Rights Act (WHCRA)</b>	This notice describes mandated benefits for mastectomy-related services and informs individuals that services are available for such treatment and services, including reconstructive surgery, prosthesis, and lymphedema treatment, and explains how to obtain a detailed description of the mastectomy-related benefits under the Plan.
<b>Newborns' and Mothers' Health Protection Act of 1996</b>	This notice provides that health plans and issuers may not, under federal law, restrict benefits for any hospital length of stay in connection with childbirth for the mother or newborn child for prescribing a length of stay not more than 48 hours (or 96 hours). The plan may not require that a provider obtain authorization from the Plan for prescribing the minimum length of stay.
<b>Wellness Program</b>	This notice requires employers that offer wellness programs that collect health information to inform members what information will be collected, how it will be used, who will receive it, and what will be done to keep it confidential.

# Contact Information

Plan Type	Vendor Name	Phone	Website   Email   Policy Number
<b>Benefit Options</b>	ADOA HR Division - Benefits 100 N. 15th Ave., Ste. 260 Phoenix, AZ 85007	602-542-5008 800-304-3687	Info: benefitoptions.az.gov Enroll: hrsystems.azdoa.gov > Y.E.S. Portal Email: benefitsissues@azdoa.gov
<b>Dental</b>	Cigna	800-968-7366	New members: cigna.com/sites/stateofaz Members: mycigna.com   Group: 2500541
	Delta Dental of Arizona	602-588-3620 866-978-2839	deltadentalaz.com/adoa   Group: 77777-0000
<b>Employee Assistance Plan-EAP</b>	ComPsych	877-327-2362	guidanceresources.com   Code: HN8876C
<b>Flexible Spending Accounts-FSA</b>	TASC	833-433-4301	tasconline.com
<b>Health Savings Account-HSA</b>	Optum Bank (Accounts on 1/1/2021 and after)	866-610-4839	optumbank.com/arizona
	Payflex (Accounts prior to 1/1/2021)	844-729-3539	payflex.com
<b>Life Insurance</b>	Securian	833-745-5517	lifebenefits.com/plandesign/Arizona Group: 34681
<b>Short-Term Disability-STD</b>	MetLife	866-264-5144	Info: metlife.com/stateofarizona/ Claims: mybenefits.metlife.com/stateofarizona
<b>Long-Term Disability-LTD</b>	Broadspire Services, Inc.   ASRS	877-232-0596	azasrs.gov/content/long-term-disability
	MetLife   PSPRS, EORP, CORP & ORP	866-232-0596	Info: metlife.com/stateofarizona/ Claims: mybenefits.metlife.com/stateofarizona
<b>Medical</b>	Blue Cross Blue Shield Arizona	866-287-1980	New members: azblue.com/stateofaz Members: azblue.com   Group: 30855
	UnitedHealthcare	800-896-1067	New members: whyuhc.com/stateofaz Members: myuhc.com   Group: 705963
<b>Retirement-AZ Smart Save (Deferred Compensation)</b>	Nationwide Financial 457(b), 401(k), 403(b), 401(a)	800-796-9753	azsmartsave.com
<b>Retirement Systems</b>	Arizona State Retirement System	602-240-2000 800-621-3778	azasrs.gov
	Public Safety Personnel Retirement System (PSPRS), Elected Officials Retirement Plan (EORP), Corrections Officer Retirement Plan (CORP)	602-255-5575 877-925-5575	psprs.com
<b>University Employees</b>	Arizona State University	Employees: 855-278-5081 Faculty: 480-727-9900	cfo.asu.edu/benefits hresc@asu.edu
	Northern Arizona University	928-523-2223	nau.edu/human-resources
	University of Arizona	520-621-3660	hrsolutions@email.arizona.edu
<b>Vision Plan</b>	Avesis, Inc.	888-759-9772	avesis.com/arizona   Policy: 11001-2178
<b>Wellness &amp; Flu Shots</b>	ADOA HR Division - Benefits	602-771-9355	wellness.az.gov   wellness@azdoa.gov



**ARIZONA DEPARTMENT OF ADMINISTRATION - ADOA**  
**HUMAN RESOURCES DIVISION - BENEFITS**  
**100 N. 15TH AVE, SUITE 260**  
**PHOENIX, AZ 85007**

**PHONE: 602-542-5008 | TOLL-FREE: 1-800-304-3687 | FAX: 602-542-4744**  
**BENEFITISSUES@AZDOA.GOV | BENEFITOPTIONS.AZ.GOV**