

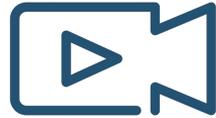
Benefit Options

**Benefit Program for State of Arizona Employees
Offered by the Arizona Department of Administration
Human Resources Division - Benefits**

Virtual Meeting Checklist



Everyone will
be on mute



Meeting is being
recorded



Use the
chat feature



Keep your
personal
information
private

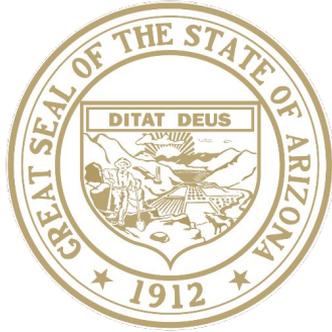
Survey at the end of the presentation



Agenda

- Open Enrollment 2021
- Benefits Overview
- Medical Vendor Presentations
- Operations
- Wellness





Open Enrollment 2021

You Must Enroll Online for All Plans

Open Enrollment 2021

October 19 to November 6 at 5 p.m. (AZ Time)

- ✓ Medical
- ✓ Dental
- ✓ Vision
- ✓ Flexible Spending Accounts
- ✓ Disability
- ✓ Life



Enrollment is Online Only
hrsystems.azdoa.gov > Y.E.S. Portal

Benefit Changes for 2021

Medical

- New Triple Choice Plan
 - Replaces EPO & PPO Plans
- New Premium
- Carrier change
 - BlueCross BlueShield of AZ
 - UnitedHealthcare
- Optum Bank
 - IRS contribution increase for HSA annual limit

Pharmacy

- New Mail Order & Specialty Vendor

Dental

- No plan changes
- New Plan Name for Cigna DHMO:
 - Cigna Dental Care Access

Vision

- Premium Reduction
- Discount Plan will be discontinued

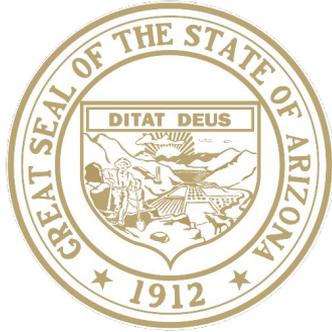
Flexible Spending Account

- IRS contribution increase for Healthcare FSA

Short-Term Disability

- Slight Rate Increase





Medical Plan Options

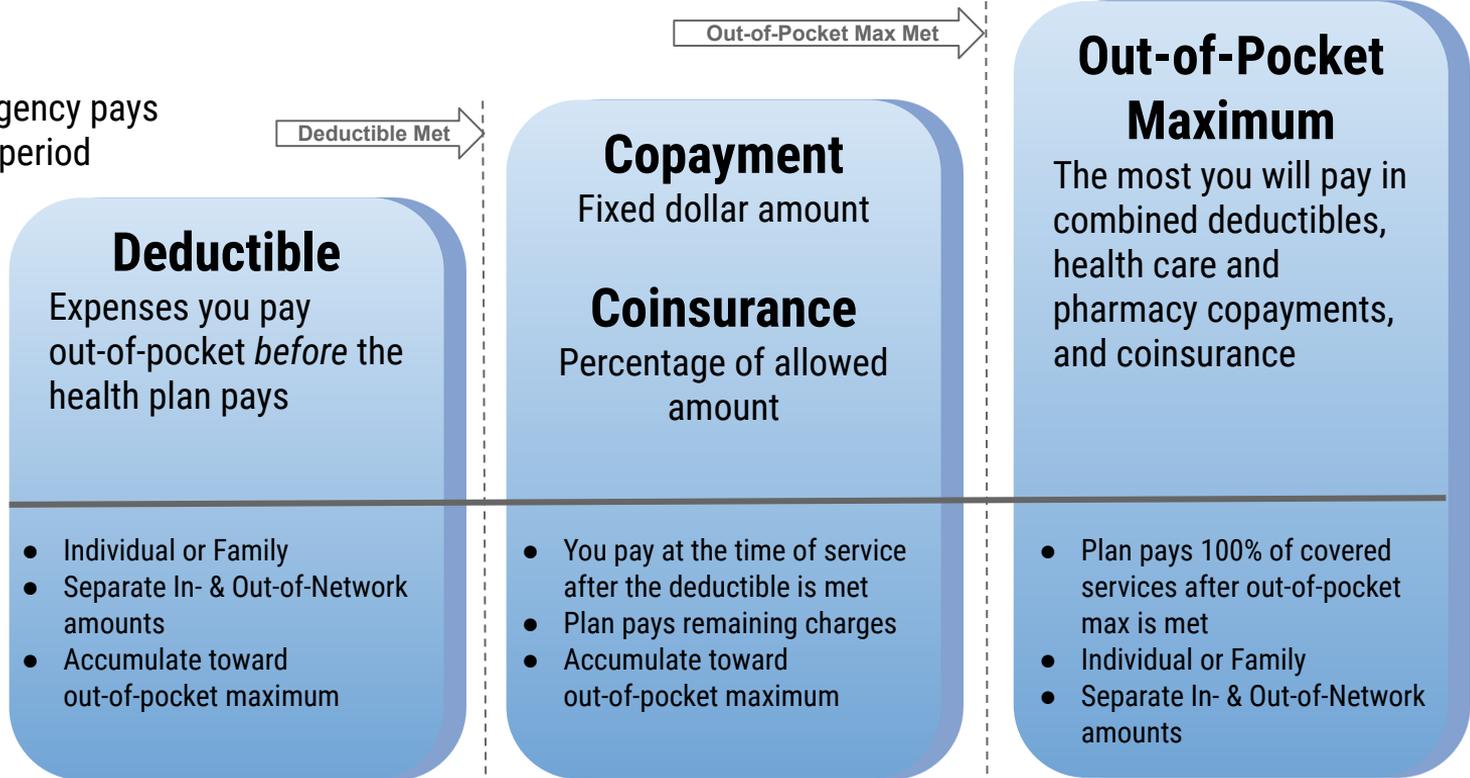
Health Insurance Terms



Did you know the State of Arizona pays 88% of total health plan costs?

Premium

Amount you and your agency pays for insurance each pay period



Medical Plan Features

	Triple Choice Plan	High Deductible Health Plan (HDHP)
Premium	\$\$	\$
Deductible	\$	\$\$
Health Savings Account (State contribution each pay period)	x	✓
Nationwide network of providers	Tier 1 & Tier 2	✓
Out-of-Network Coverage (higher cost)	Tier 3	✓
Primary Care Physician (PCP) not required	✓	✓
No referrals required to see a specialist	✓	✓
Preventive care in-network	Free	Free

Preventive Care Services



Regular Visits

Well-baby, Well-child,
Well-man, Well-woman



Tests

Blood Pressure, Diabetes,
Cholesterol

Intervention



Smoking Cessation,
Depression Screening,
Unhealthy Alcohol &
Drug Use Screening,
Weight Loss Counseling



Immunizations

Flu, Pneumonia,
Varicella, Shingles



Cancer Screenings

Mammogram, Colonoscopy,
Cervical, Prostate

Preventive care services are free only when using an in-network provider



- We all need to enroll in benefits to maintain coverage
- Who are the two Medical Vendors in 2021?



Medical Plan Cost

HDP Members!
Use your HSA contributions
to pay deductible and
coinsurance expenses



Triple Choice Plan



BlueCross
BlueShield
of Arizona



United
Healthcare

High Deductible Health Plan

Copayment / Coinsurance Apply After Deductibles Are Met

Tier 1	Tier 2	Tier 3		In-Network	Out-of-Network
\$0	\$0	50%	Routine Preventive Services	\$0	50%
\$20	\$20	50%	Primary Care Physician (PCP)	10%	50%
\$40	\$40	50%	Specialist	10%	50%
\$20	\$20	50%	Telehealth Services (Virtual Visit)	10%	50%
\$200	\$200	\$200	Emergency Room	10%	10%
\$75	\$75	50%	Urgent Care	10%	50%
\$250	\$250	50%	Inpatient Hospital Admission	10%	50%
\$0	\$0	50%	Laboratory and X-Ray Services	10%	50%
\$100	\$100	50%	Major Radiology Services	10%	50%

How to Use the Triple Choice Plan

1 Choose a network doctor

Look for the Tier 1 symbol for the lowest cost



2 Pay a deductible

Enroll in the Healthcare FSA or pay out of pocket

3 Pay a copayment

You pay a flat fee **+** Your plan pays the rest

4 Pay up to out-of-pocket max

Your plan pays 100% of services for remainder of the year

- Physicians
- Radiology and Laboratory
- Hospitals
- Urgent care facilities
- Surgical centers
- Rehabilitation centers

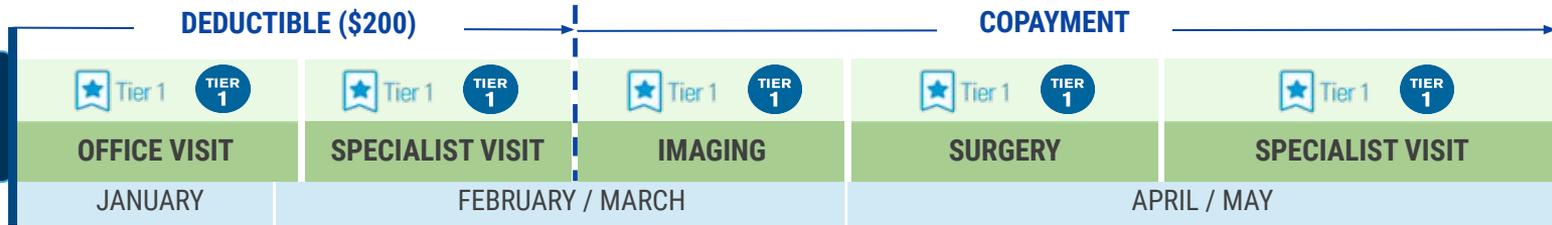


How to Use the Triple Choice Plan

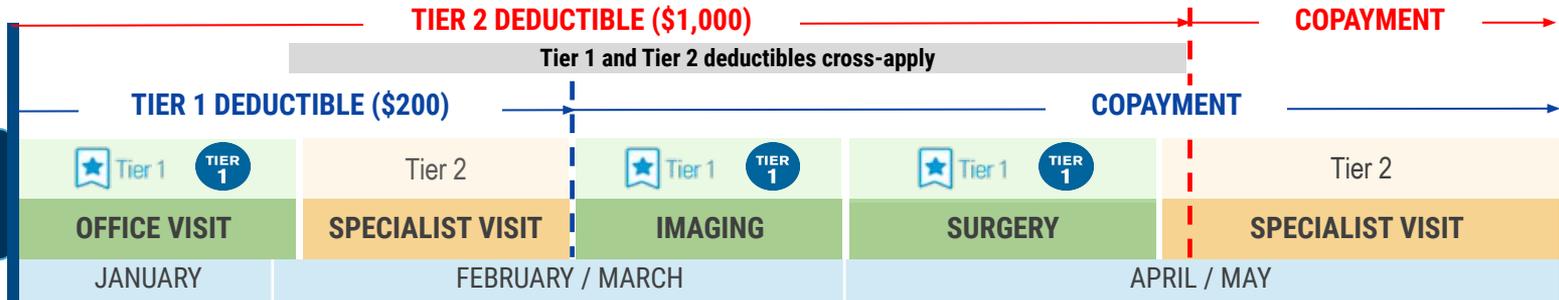
Tier 1 doctors and facilities
Provide higher quality
and efficient care



Using **ONLY**
Tier 1 providers



Using **Tier 1** and
Tier 2 providers



Note: Examples are using the Employee Only Plan

How to Use the HDHP + HSA

1 Fund your Health Savings Account

Automatic payroll contributions by you and the State

4 Pay coinsurance

You pay 10%  Your plan pays 90%

2 Choose an in-network doctor

Look for the symbol for greater savings

Total Care 

5 Pay up to out-of-pocket max

Your plan pays 100% of services for remainder of the year

3 Pay a deductible

Use available HSA funds or pay out of pocket for services and some prescriptions

6 Invest with Tax Advantages

Your funds will continue to grow and roll over year-to-year



HSA funds can help you pay for your expenses

The amount you want in your account

—

State contribution

÷

26 pay periods

=

Your contribution per paycheck

How to Use the HDHP + HSA

Use Total Care or Premium Designated Providers



Using In-Network Providers	DEDUCTIBLE MET (\$1,500)					COINSURANCE →
	OFFICE VISITS	SPECIALIST VISITS	IMAGING	SURGERY	RECOVERY SERVICES	
	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
State HSA Contributions						
Your HSA Contributions						

State HSA Contribution Per Pay Period
 \$27.69 Individual
 \$55.38 Family

Note: Examples are using the Employee Only Plan

Health Savings Account



What is an HSA?

- Only use with high deductible health plan
- Savings account to pay for qualified health care expenses
- Pay deductibles and coinsurance
- Your contribution reduces your taxable income

State Contributions

- Funded by the State every pay period
- Individual:
\$27.69 each pay period
- Family:
\$55.38 each pay period

Your Contributions

- Calculate an amount up to the IRS maximum
- Age 55+ can contribute an additional \$1,000

Individual:

\$3,600.00 IRS Maximum
-\$ 719.94 State Contribution
\$2,880.06 ÷ 26 pay periods
\$110.77 each pay period

Family:

\$7,200.00 IRS Maximum
-\$1,439.88 State Contribution
\$5,760.12 ÷ 26 pay periods
\$221.54 each pay period

Using the Funds

- Receive Mastercard® debit card to pay at point-of-service
- Funds roll over yearly
- You own the account and the funds, even if you change jobs or retire
- Investment options for funds over \$1,000

optumbank.com/arizona

HSA Contributions can be updated anytime through the Y.E.S. website

Health Savings Account



How Your HSA Is Established

- State automatically opens in employee's name after enrolled in high deductible health plan
- Optum will verify your identification
- Optum will email or send a letter if there are issues with establishing your account

Common Reasons for Delays

- Incorrect Address
- P.O.Box (no card delivery allowed)
- Legal name inconsistent
- Use Social Security card name, under IRS rules - names must match

Not Eligible To Contribute

- Employee is enrolled in Medicare or Medicaid
- Employee or spouse has Health Reimbursement account (HRA)
- Employee is enrolled in TriCare
- Care is received from Veterans' Administration (VA)

Flexible Spending Accounts



Health Care FSA

Use with Triple Choice Plan
For medical, dental, vision, prescriptions,
& over-the-counter medication

Limited Purpose FSA

Use with HDHP w/HSA Plan
Use for dental & vision only

Pay eligible medical expenses with pre-tax dollars

- Reduces taxable wages which decreases taxes
- Use to pay your deductible, copays, over-the-counter items

Maximum Contribution \$2,750

- Determine your annual election based on health expenses
- Your annual election will be divided by 26 for a per paycheck contribution

TASC Mastercard®

- Pre-loaded with your annual election amount
- Pay at point of service
- May have to submit paperwork to prove claim
- **Keep all bills with services listed** - not just card machine receipts

USE IT OR LOSE IT EACH YEAR

- Claims Jan 1-Dec 31
- Reimbursement claims submitted by Mar 31



Check account & upload claim docs anytime

What to Consider When Choosing a Plan

Benefits

- The same benefit structure for each plan
- Value added benefits vary among carriers
 - Health and wellness services

Networks

- All plans have nationwide networks
- Provider networks vary among carriers
- Make sure your providers are on the plan
- Look for the symbols



Total
Care



Cost

- Understand how premiums & deductibles work for your budget
- Out-of-Network costs are higher

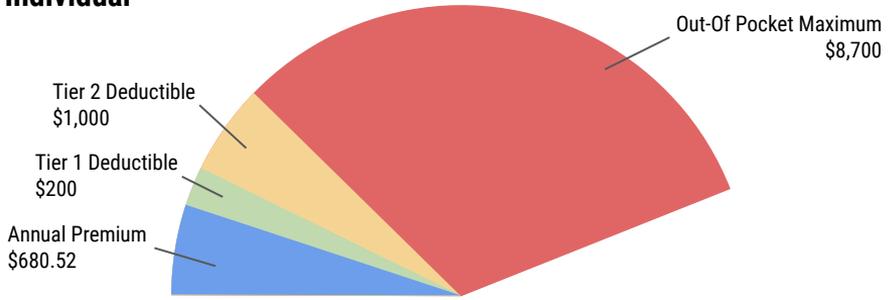
What to Consider When Choosing a Plan



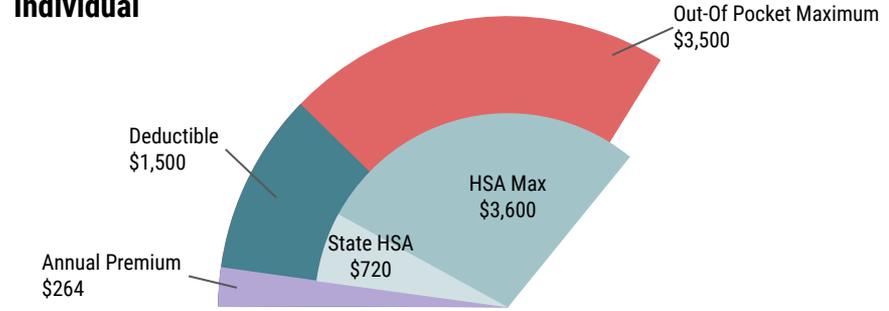
Triple Choice Plan

High Deductible Health Plan + HSA

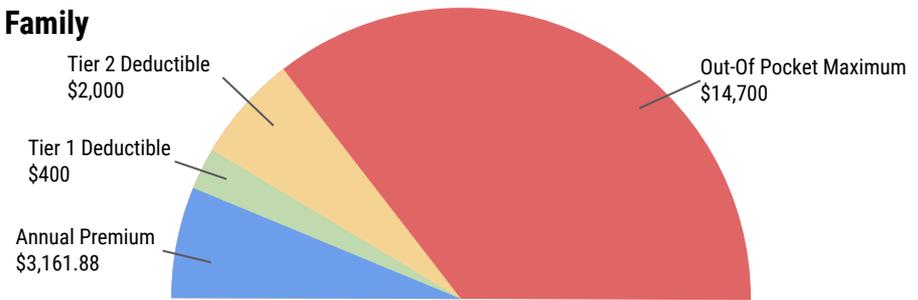
Individual



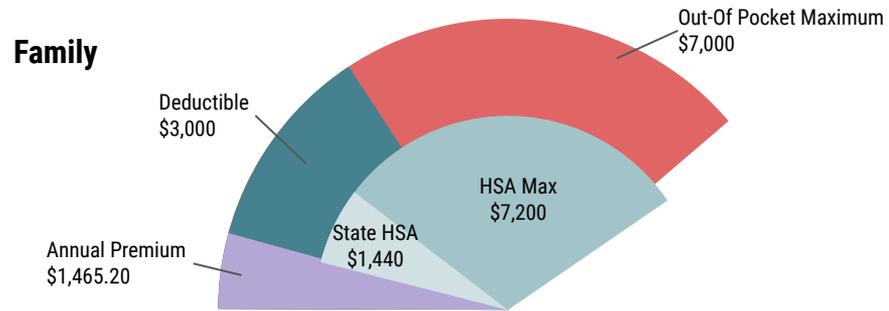
Individual

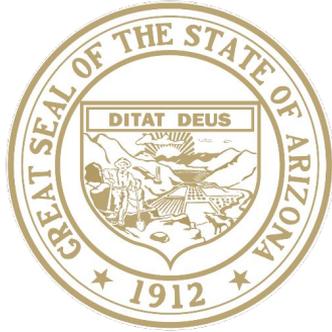


Family

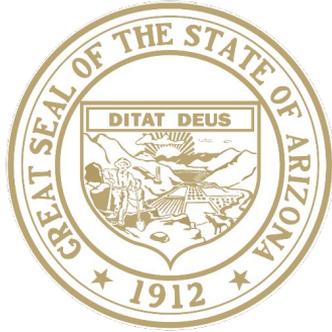


Family





Chat Review



Claim Scenarios

Claim Scenarios

Name: Jessica

Age: 34

Status: Single

Medical Services in 2021:

- Preventive Exam
- Ambulance
- Emergency Room Visit
 - Durable Medical Equipment
 - Specialist
 - Radiology
 - Other Facility Services
 - Physical Therapy (4 visits)

Services	Cost of Service	Triple Choice Plan				High Deductible Health Plan	
		Tier 1		Mix Tier 1 & Tier 2		Deductible \$1,500	Coinsurance
		Deductible \$200	Copay	Deductible \$1,000	Copay		
Preventive Care Office Visit	\$150	\$0	\$0	\$0	\$0	\$0	
Ambulance*	\$600	\$200	\$0	--	--	\$600	
ER Visit	\$700	--	\$200	\$700	--	\$700	
Durable Medical Equipment	\$200	--	\$0	\$100	\$0	\$200	
Specialist Visit	\$600	--	\$40	\$100	\$40	--	
Radiology	\$30	--	\$0	--	\$0	--	
Physical Therapy	\$215	--	\$80	--	\$80	--	
Total	\$2,495	\$520		\$1,120		\$865	

*Ambulance services are always Tier 1

The State contributes \$720 on an annual basis to the individual HSA account

Claim Scenarios

Name: Richard

Age: 38

Status: Single

Medical Services in 2021:

- Preventive Exam
- Diabetic Services
 - Primary Care Provider
 - Laboratory Services
 - Medical Supplies
 - Specialist
 - Prescription Drugs

Services	Cost of Service	Triple Choice Plan				High Deductible Health Plan	
		Tier 1		Mix Tier 1 & Tier 2		Deductible \$1,500	Coinsurance
		Deductible \$200	Copay	Deductible \$1,000	Copay		
Preventive Exam	\$150	\$0	\$0	\$0	\$0	\$0	
Primary Care Visit	\$100	\$100	--	\$100	--	\$100	
Lab Services	\$75	\$75	--	\$75	--	\$75	
Specialist Visit (x2)	\$275	\$25	\$80	\$275	--	\$275	
Medical Supplies (Annual)	\$1,725	--	\$440	\$550	\$285	\$1,050	
Pharmacy Month/Annual (2 Generic)	\$25/\$300	--	\$25/\$300	--	\$25/\$300	--	
Pharmacy Month/Annual (Brand)	\$275/\$3,300	--	\$40/\$480	--	\$40/\$480	--	
Total	\$7,452	\$1,500		\$2,065		\$1,630	

The State contributes \$720 on an annual basis to the individual HSA account

Claim Scenarios

Name: Richard & Jessica

Age: 38 & 34

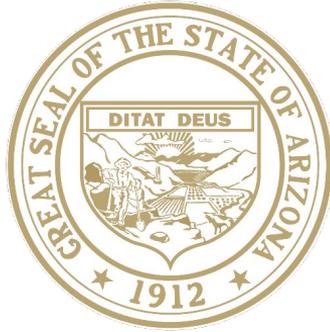
Status: Married

Medical Services in 2021:

- Preventive Exam
- Diabetic Services
 - Primary Care Provider
 - Laboratory Services
 - Medical Supplies
 - Specialist
 - Prescription Drugs
- Maternity Services
 - Primary Care Provider
 - Obstetric Care
 - Radiology Services
 - Laboratory Services
 - Prescription Drugs
 - Inpatient Hospital Care

Services	Cost of Service	Triple Choice Plan				High Deductible Health Plan	
		Tier 1		Mix Tier 1 & Tier 2		Deductible \$3,000	Coinsurance
		Deductible \$400	Copay	Deductible \$2,000	Copay		
Preventive Exam (x2)	\$550	\$0	\$0	\$0	\$0	\$0	\$0
Primary Care Visits	\$1,000	\$285	\$80	\$400	\$80	\$400	\$40
Lab Services	\$1,000	\$80	--	\$250	--	\$250	--
Specialist Visit (x2)	\$275	\$35	\$40	\$140	--	\$275	--
Obstetric	\$2,390	--	\$20	\$1,210	\$20	\$2,075	\$20
Radiology	\$160	--	\$0	--	\$0	--	\$0
Medical Supplies (Annual)	\$1,725	--	\$440	--	\$440	--	\$440
Pharmacy Month/Annual (Generic)	\$25/\$700	--	\$25/\$365	--	\$25/\$365	--	\$25/\$365
Pharmacy Month/Annual (Brand)	\$275/\$3,300	--	\$40/\$480	--	\$40/\$480	--	\$40/\$480
Total	\$11,100	\$1,825		\$3,385		\$2,905	

The State contributes \$1,440 on an annual basis to the family HSA account



Pharmacy Benefits

Same Pharmacy for ALL Carriers

- Pharmacy Benefit Administrator
- Maintains the formulary, pharmacy network, and drug costs



Pharmacy Information

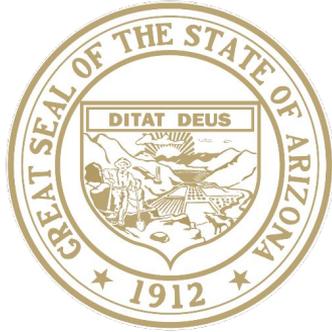
- **On your medical card**
- Prescription drugs are covered In-Network only
- Medical carrier **is not** the pharmacy administrator
- Pharmacy website: [medimpact.com](https://www.medimpact.com)
- Find a pharmacy near you with the best price
- View prescription drug information and prescription history
- View your accumulators & YTD drug spend

Prescription Drug Copays

- Copays apply toward your out-of-pocket maximum
- For HDHP plan, member must pay 100% until the deductible has been satisfied. Then the applicable fixed dollar copay applies
- Refer to Summary Plan Document for more about Prescription Drugs

	Retail (30-Day Supply)	Retail (90-Day Supply)	Mail Order (90-Day Supply)
Generic	\$15	\$37.50	\$30
Preferred Brand	\$40	\$100	\$80
Non-Preferred Brand	\$60	\$150	\$120





Voluntary Benefits

Dental Plans

	PPO Plan  DELTA DENTAL®	Dental HMO  Cigna®
Network	Delta PPO Plus Premier Dentist	Cigna Dental Care Access
Type of Plan	<ul style="list-style-type: none"> ○ Provider charges negotiated rates ○ You pay a coinsurance ○ Nationwide coverage 	<ul style="list-style-type: none"> ○ Provider accepts set fees from Cigna ○ You pay set fees for dental work ○ Not available in all states
Preventive Services	Covered 100%	No Copay
Deductibles	Employee-\$50, Employee+Spouse-\$100 Employee+1 Child-\$100, Family-\$150	None
Maximum Benefit	\$2,000 per person per year	None
Orthodontia	\$1,500 per person lifetime max	24-month treatment fees

When choosing a plan, consider your dental history, level of care needed, costs and budget

Vision Plan

Avesis Advantage Program	
Premiums per pay period	
Employee Only	\$1.72
Employee + Spouse	\$5.70
Employee + 1 Child	\$5.65
Family	\$7.11
Employee Cost for Care	
Routine Eye Exam	\$10
Standard Spectacle Lenses:	
○ Single Vision, Bifocal, Trifocal, Lenticular	Covered in full
○ Progressive	Discounted
Frame	Up to \$150 retail value (\$50 wholesale cost allowance)
Contact Lenses (in lieu of frame/spectacle lenses):	
Elective	10-20% discount & \$150 allowance
Medically Necessary	Covered in full
LASIK/PRK	Up to \$750

Target Optical Discount!

Save an additional \$25 when you purchase your frame from Target Optical



Flexible Spending Accounts



Dependent Care Flexible Spending Account (FSA)

- Pay expenses for dependent care (not for healthcare expenses)
 - Daycare, summer day camp, preschool fees for children under 13 for whom you have custody
 - Spouse or other tax Dependent physically or mentally incapable of caring for him/herself

Pay eligible dependent care expenses with pre-tax dollars

- Reduces taxable wages which decreases taxes

Maximum Contribution \$5,000 (Married File Separately: \$2,500)

- Determine your annual election based on care expenses
- Your annual election will be divided by 26 for a per paycheck contribution

TASC Mastercard®

- Can only use what you have in the account
- Pay at point of service
- **Keep all bills with services listed** - not just card machine receipts

USE IT OR LOSE IT EACH YEAR

- Claims Jan 1-Dec 31
- Reimbursement claims submitted by Mar 31

Short-Term Disability - STD



Definition	Wait Period	Benefit Payments	Maximum Duration
<ul style="list-style-type: none"> ● Voluntary benefit coverage if you are unable to work due to: <ul style="list-style-type: none"> ● Non-work related injury or illness ● Pregnancy & maternity 	<ul style="list-style-type: none"> ● Based on enrollment ● If enrolled in 2020, 30-day wait period ● Not enrolled in 2020 60-day wait period during first year ● No Wait Period if Injured 	<ul style="list-style-type: none"> ● Weekly paid benefits: Up to 66²/₃% of pre-disability earnings ● Payments offset by 100% of any annual & sick leave paid after the wait period is exhausted ● Payable benefits: Minimum \$67.31 Maximum \$897.43 	<ul style="list-style-type: none"> ● Injury: Up to 26 weeks ● Illness: (Based on enrollment) <ul style="list-style-type: none"> ● At Hire - 22 wks ● After Hire -18 wks
<p>Premium: \$0.316 per \$100 of your annual base pay</p>		<p>Employees can start a disability claim online mybenefits.metlife.com/stateofarizona</p>	

Long-Term Disability - LTD

- Protects from loss of income in the event that you are unable to work for a long time due to non-work related injury, illness, or accident
- Your retirement plan determines your LTD benefit

	Broadspire	MetLife
Arizona State Retirement System (ASRS)	●	
Public Safety Retirement System (PSPRS)		●
Correctional Officers' Retirement Plan (CORP)		●
Optional Retirement Plan (ORP)		●

Life Insurance

Basic Life and AD&D

- \$15,000 policy
- State pays the premium
- **Automatically** signed up



Life Insurance Calculator

Benefit Scout is an online
decision support tool

LifeBenefits.com/Arizona

Supplemental Life and AD&D

- You pay the premium
- \$5,000 increments above the \$15,000 Basic Life provided by State
- Increase up to \$20,000 annually during open enrollment only
- Premiums for first \$35,000 are pre-tax
- Keep your beneficiaries updated

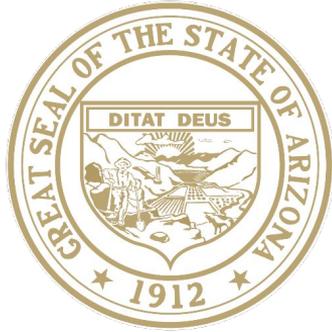
Life Insurance

Dependent Life and AD&D

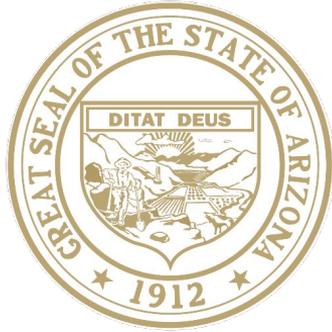
- You pay - one premium covers whole family, pays out for each individual person
 - Spouses, children under age 26 & disabled dependent children
- Employee is the beneficiary

- \$2,000
- \$4,000
- \$6,000
- \$10,000
- \$12,000
- \$15,000
- \$50,000*

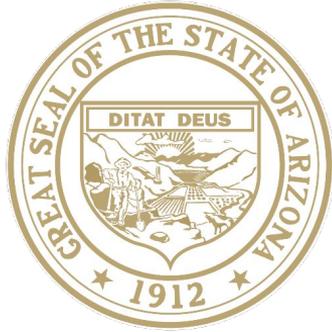
*For \$50,000, you must elect at least \$50,000 in combined basic & supplemental coverage for yourself



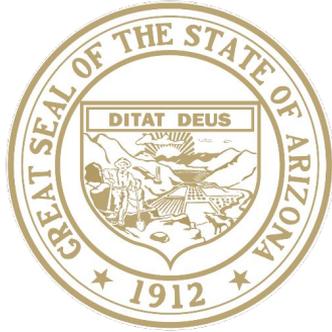
BlueCross BlueShield of AZ



UnitedHealthcare



Chat Review



Operations

Operations Agenda

- HRIS Upgrade; Password Reset Process / Supported Browsers
- Y.E.S. Open Enrollment for active employees
- Newly Added Dependent process
- Y.E.S. New Hire Enrollment
- Data warehouse Report
- Benefit Eligibility for 2021 Plan Year

HRIS / Y.E.S.

Password Reset Process

- The HRIS Service Desk can no longer reset your password on an employee behalf, please follow the instructions available at HR Systems:
 - Step 1: Click <https://hr.az.gov/HRSystemsEmployeeResources>
 - Step 2: Under **Y.E.S. Resources for Employees**, click **Read More** then **Y.E.S. Getting Started User Guide**

Supported Browsers

- Please ensure employees have one of the following browsers available during Open Enrollment
 - Internet Explorer is no longer supported
 - iPhones and iPads are not supported; only can use Macbook

**Google
Chrome**



**Microsoft
Edge Chromium**



**Apple
Safari**



**Mozilla
Firefox**



**No Microsoft Edge or
Internet Explorer**



HRIS / Y.E.S.

Dual Coverage

- Duplicate enrollment in State plans is prohibited and will be terminated with no refunds for the premiums paid. For spouses / dependents who are State and/or a state university employees and/or retirees specific rules apply. Please refer to guide for specific details.

Dependent Social Security Numbers (SSN)

- Correct SSN's for dependents are required
- When submitting a Q.L.E. for a newborn be sure to provide copy of SSN once available. Crib cards are sufficient until proper documentation is received.

Beneficiary

- Please ensure employees update beneficiaries for life insurance after 1/1/2021
 - Basic Life - All benefit eligible State employees
 - Supplemental Life - elected benefit

HRIS / Y.E.S.

Open Enrollment

- Active employees must enroll through Y.E.S.
 - hrsystems.azdoa.gov > Y.E.S. Portal > Open Enrollment.
- Paper forms will not be accepted.

Newly Added Dependent Process

- Temporary suspend HRIS automated process to identify newly added dependents for the following:
 - legal spouse with different last name and child(ren) under age 26 defined as, adopted, step, foster, court-ordered placement.
- Notifications will be sent via email and mail to employees and a copy to benefit liaison requesting they submit supporting documentation.
- Normal HRIS automated process will resume on 1/1/2021.

Demographic Information

- Members will still be required to provide and/or update their demographic information such as personal email / phone numbers. **Personal email will now be shared with health insurance vendors.**

HRIS / Y.E.S.

New Hire / Rehire Enrollment (10/19/2020 – 12/31/2020) ***New process

Step One: Must complete new hire / re-hire enrollment through Y.E.S.

Step Two: Wait one business day, then complete open enrollment through Y.E.S.

- Open Enrollment link will remain available through 12/31/2020 for new hires (more instructions will follow at the end of open enrollment).

**Return to Work Retirees that are retired from ASRS / PSPRS and are enrolled into ADOA Dental plan - (e.g. enrolled in Delta Dental as a retiree) must submit retiree paper election form to ADOA BSD. Retiree forms are provided to employee in the Open Enrollment packet.*

Data Warehouse

- New report will be available in Data Warehouse for agencies to run during Open Enrollment to help identify employees who have not completed the enrollment process.
- Report Name:
 - Benefit Eligible **but not** Enrolled.
- Please run this report frequently during Open Enrollment so you can determine who has not completed the enrollment process in Y.E.S.
- Report is currently under development. More instructions will follow once available.

Benefit Eligibility ~ Affordable Care Act

2020 Standard Measurement Period (SMP) = 10/10/2019 to 10/09/2020.

Initial Eligibility

- **Regular appointed 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 for at least 90 days.

Maintain Eligibility

- **Regular appointed employee:** paid for 1,040 hours per year through the SMP.
- **Seasonal, temporary or variable hour employee:** paid for 1,560 hours per year through SMP.

Benefits Operations will summarize hours paid to determine who is benefit eligible for 2021 plan year. Employees will fall into one of four categories defined on next two slides.

Benefit Eligibility ~ Affordable Care Act

Category 1: Employee was eligible for benefits in 2020 and is still eligible for benefits in 2021.

- No action required as employee is in correct EE status code and will be allowed to enroll during 2021 Open Enrollment.

Category 2: Employee was not eligible for benefits in 2020 and is eligible for benefits in 2021.

- Benefit Liaison will receive notification that EE was deemed eligible for 2021.
- EE will receive notification that they are eligible for benefits for 2021 plan year.
- EE will not be eligible to complete enrollment through Y.E.S. – they **MUST** submit a paper application.
- EE must remain in a non-benefit eligible status until 12/31/2020 which at that time they need to be changed to a benefit eligible status code.

Benefit Eligibility ~ Affordable Care Act

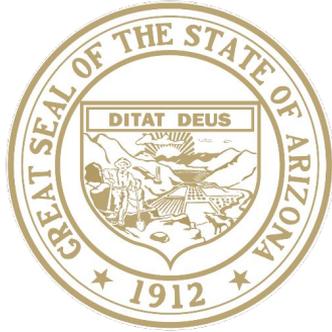
Category 3: Employee was not eligible for benefits in 2020 and is still not eligible for benefits in 2021.

- No action required as employee is in correct EE status code and will not be allowed to enroll during Open Enrollment.
- No action is required by ADOA or Agency.

Category 4: Employee was eligible for benefits in 2020 but not eligible in 2021.

- Benefit Liaison will receive notification that your employee was deemed ineligible for 2021.
- EE must remain in benefit eligible status until 12/31/2020 which at that time the status code must be changed to a benefit ineligible code (e.g. change from D1 to D2).
- EE will be allowed to enroll during Open Enrollment but will later also receive notification explaining benefits will expire as of 12/31/2020.
- EE will be offered COBRA immediately.





Wellness Benefits

Wellness Benefits



Wellness



**Weight & Diabetes
Management**



Tobacco Cessation



Flu Shots



**Employee
Assistance Program**

Health Impact Program - \$200



What is HIP?

- Award-winning program to help you achieve your physical, financial, personal and professional well-being goals
- Earn points for healthy activities, including preventive screenings, immunizations and classes/coaching
- Earn 500 points for an annual incentive payment of up to \$200.



Who is Eligible?

- All active, benefits-eligible employees should participate, ***whether or not you are enrolled in an ADOA medical plan.***

Health Impact Program



1) Enroll Online

- Enroll on totalwellbeing.az.gov
- Or get the app, search “My Health By Telligen”
- Find challenges & track points



2) Get Physical or Mini-Health Screening

- Get a snapshot of your current health
- Visit your doc or schedule mini-health screening on wellness.az.gov
- Completely confidential



3) Take Health Assessment

- Use results from physical or mini-health screening - completely confidential
- See focus areas to improve your health

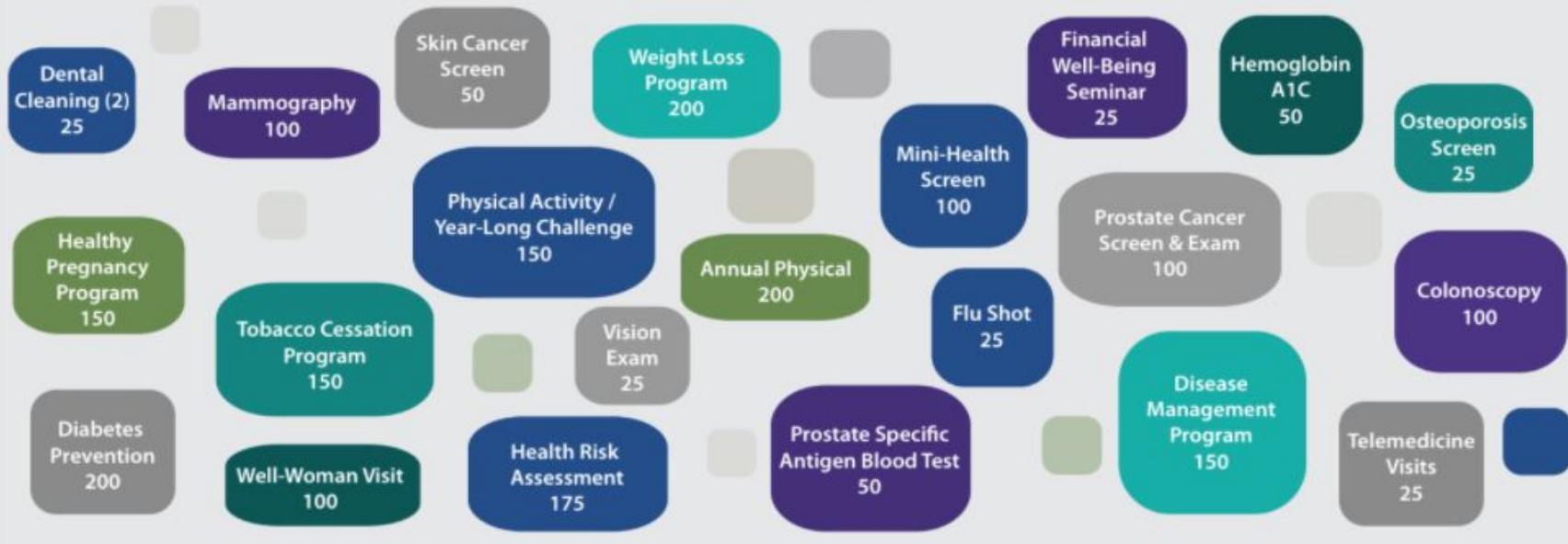
4) Get \$200 for 500 Points

- Earn points from qualified wellness activities, screenings programs, classes or coaching
- Annual cycle - Jan-Dec

Still Time to Log Points

Don't Forget to Log Your Points!

Track your health screenings, activities and programs on the HIP site by December 31, 2020.



Logging Points

How to Log Your Points

Visit
totalwellbeing.az.gov
to get started!

Earn points
when you
complete
health
screenings,
activities and
programs!

Go to **Unaccepted Tab**
Click "Accept" on the screening
you have completed

1

Go to **Well-Being Tab**
on the left-hand side of the page
to answer the question for the
screening you have completed. Hit
"Yes" and click "Save Activity"

2

Points Awarded
Points are awarded immediately
after answering "Yes" to the question

3

View Points
To view points, log out and log back in.
After logging in, click the "Completed" tab

4

We will be performing our routine program validation after the first of the year.

The screenings, activities, and programs you log on the site will be compared to our health vendor files. If you do not match the vendor files, you will be contacted by Telligen stateofarizona@telligen.com, to provide adequate documentation for your screening in a timely manner to receive your incentive.

Weight and Diabetes Management Programs

- Programs offered at work and online
- Employees, spouses and dependents over 18 are eligible
- No cost and low cost options
- HIP Points - Earn 150 to 200 points upon completion

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>
 			 <p>Eat Mindfully, Live Vibrantly</p>

Tobacco Cessation

- The Arizona Smokers' Helpline (ASHLine) is offered through UArizona.
- Free to all state employees, spouses and dependents over 18.
- English or Spanish services
- Personalized quit plans, medication assistance, quit coaches, interactive web programs, phone counseling, and self-help materials.
- Earn 150 HIP points for completing the plan.
- ashline.org | 1-800-55-66-222



Flu Shots

Roll Up Your Sleeve - It's Time to Get Your Flu Shot!

Get a Flu shots every year to have a level of protection from the flu
Preventive care at \$0 cost to you & covered dependents on our medical plans.



- Attend a Healthwaves Clinic*
 - See a full schedule of worksite clinics and public locations on wellness.az.gov/flushot.
- 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 the MedImpact pharmacy coverage**

* All Healthwaves staff will wear masks and follow CDC guidelines at our sites. Please wear a mask and follow social distancing guidelines.

Earn HIP points, too! Visit wellness.az.gov/hip

Employee Assistance Program - EAP

Short-Term Counseling

12 Sessions
Per Person/Per Issue
You & Members of
Your Household

Free &
Confidential
24/7

Resources/Info

Work/Life Balance
Parenting & Eldercare
Family Relationships
Legal Advice/Wills
Financial Guidance

COMPSYCH®
— The GuidanceResources Company® —

Call: 877-327-2362
TDD: 800.697.0353
GuidanceResources.com
Web ID: HN8876C

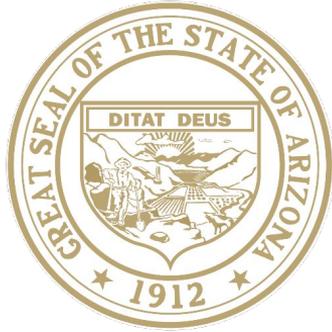


Click to
Chat with
Consultant

New for 2021

Look for more information about an enhanced program and portal later this year!





Questions?

Take our Survey