

2008 Open Enrollment Training for Insurance Coordinators

Welcome!

Please sign in...



Open Enrollment Information

- Open Enrollment is October 15th – October 26th
- There are no benefit changes for Plan Year 2008
- Same four plans available:
 - Commonwealth Essential, Commonwealth Enhanced, Commonwealth Premier and Commonwealth Select
- Rate increase of only 5.8%
- Passive Enrollment



Who MUST Enroll?

- Employees MUST enroll if they wish to:
 - Make changes to their health insurance elections
 - Waive coverage for the 2008 Plan Year and enroll in an HRA (must enroll every year)
 - Enroll or re-enroll in a Healthcare or Dependent Care FSA (must enroll every year)
 - Add or drop dependents



Benefit Fairs

- There will be 18 Benefit Fairs across the Commonwealth. Find information about enrollment options for 2008 from:
 - Department for Employee Insurance
 - Humana
 - Express Scripts
- Frankfort Benefit/Health Fair
 - The Frankfort Benefit Fair will be a HEALTH FAIR with approximately 30-35 vendors and many health activities including screenings and information
 - Tuesday, October 2nd from 8:00 am to 6:00 pm
 - At the Frankfort Convention Center



New Hires and OE

- Employees hired during or after Open Enrollment must complete two applications, UNLESS they want their “new employee” elections to roll to the 2008 Plan Year
- For questions regarding specific situations, contact the Enrollment Information Branch at 502-564-1205.



ID and HAC Cards

- Employees who make changes during Open Enrollment or who enroll for the first time will receive a new health insurance ID card
- Employees who do not make changes during Open Enrollment will not receive a health insurance ID card
- Employees who had an FSA or an HRA in 2007 and who enroll again for 2008 will not receive a new HumanaAccess card (HAC). Current HACs are valid through December 2009.



Web Enrollment

- ***Your KEHP Online Access*** will be available for fast, accurate and secure enrollment!
- Employees will need EmpID & Password to log in
 - EmpIDs were mailed during the first week of September
 - Passwords will be mailed during the last week of September
- If you, as the insurance coordinator, enroll an employee online, you must have a paper application from the employee.
- Do **not** send the paper application to DEI!



Web Enrollment

- Paper applications will be mailed back to you, except in cases when online enrollment is not possible (i.e. cross-reference planholder switch).
- If you are submitting a paper application for a valid reason and want to avoid receiving the application back, you must write a note across the top indicating the reason for the submission.



Web Enrollment

- Employees who did not receive the EmpID or password or have locked themselves out, may obtain this information from you, their insurance coordinator. The password reset module on the Web Enrollment system, called “Account Reset,” provides all the information you need.



Web Enrollment

- The welcome page will have a brief overview of information you and your employees need to know for Open Enrollment, along with links to *Your KEHP Online Access* directions on the web.
- Stress the importance of reading the instructions on each screen. Many grievances were filed due to the employees not reading instructions thoroughly.

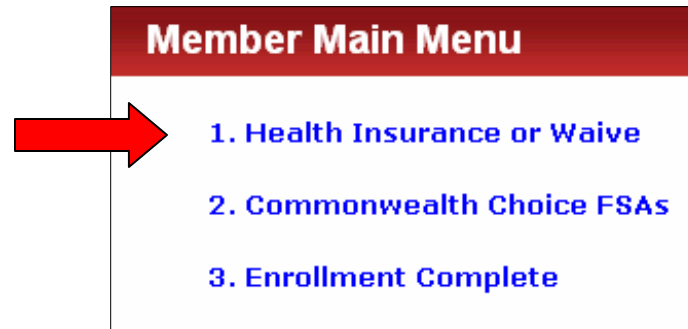


Web Enrollment

- The following steps should be followed by ALL employees who are enrolling online. These steps apply regardless of whether they are enrolling in health insurance, waiving or choosing an FSA:
 - First, read the materials provided, including the 2008 KEHP Handbook, located online at <http://KEHP.ky.gov> and the Summary Plan Description (SPD) that corresponds with the plan you will be selecting.



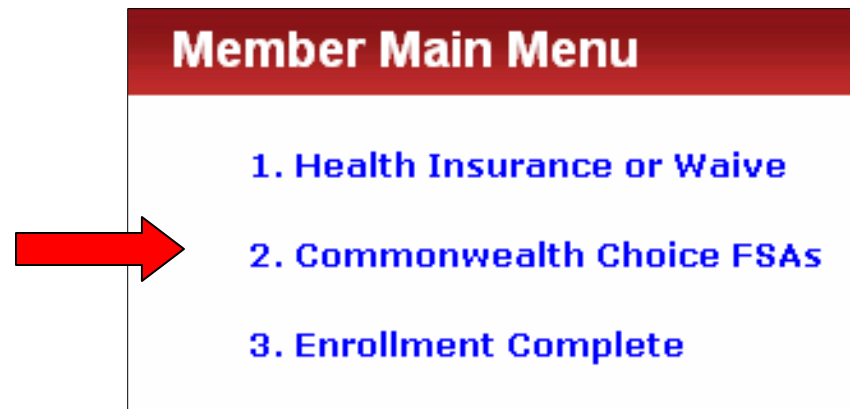
Web Enrollment



- Next, log into the system and elect to waive or take a health insurance plan.
 - If you elect to waive and are eligible for the HRA, the HRA will be automatically assigned to you.
 - If you elect an insurance plan, please be sure to review all choices carefully, paying close attention to plan cost, new information about retirees who have returned to work, and the eligibility of the dependents you are enrolling.

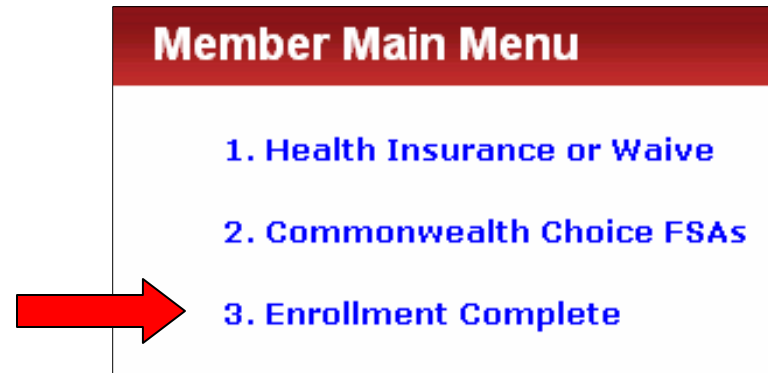
Web Enrollment

- Then, when you return to the Member Main Menu, be sure to evaluate whether you will need to enroll in a Flexible Spending Account (FSA).
 - The Healthcare FSA covers a variety of medical expenses
 - The Dependent Care FSA covers daycare and babysitting expenses



Web Enrollment

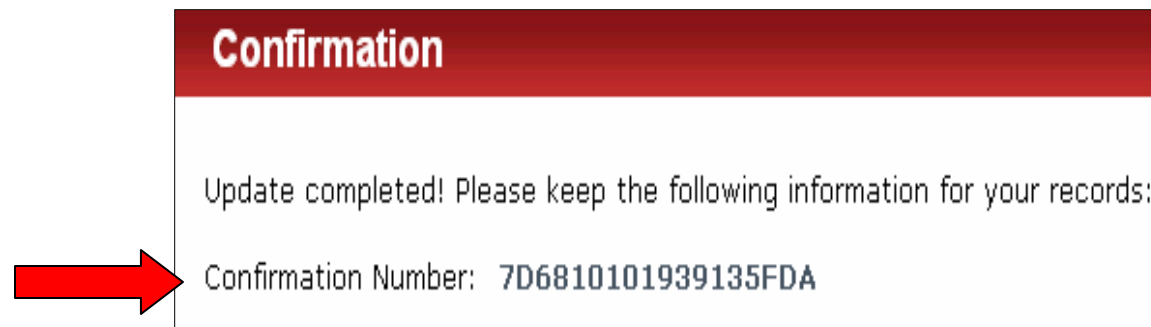
- Lastly, and most importantly, click on “**Enrollment Complete**”



- Review your elections
- SCROLL DOWN AND HIT THE **ACCEPT** BUTTON

Web Enrollment

- Print the confirmation screen or write the confirmation number and keep it for your records.



- The confirmation screen or confirmation number is crucial to support any grievance a member may later have.

Web Enrollment Deadlines

- Employees **MUST** enroll online OR sign a paper application and give it to their insurance coordinator between October 15th and October 26th ONLY!
- Insurance Coordinators may enter Open Enrollment elections for employees during the Open Enrollment period plus an additional two weeks (October 15 – November 9)
 - Insurance Coordinators who are entering elections online must have a paper application fully completed by the employee, signed and dated within the Open Enrollment period.



Pre-65 Retirees Who Return to Work

- Must complete a paper Enrollment Application with their retirement system and with their active employer.
- Enrollment choices for **KRS Retirees**:
 - Enroll in an insurance plan with KRS, and a waiver with no HRA with the active employer
 - Enroll in a waiver with no HRA with KRS, and an insurance plan with the active employer
 - Enroll in a waiver with no HRA with KRS, and a waiver with HRA with the active employer



Pre-65 Retirees Who Return to Work

- Enrollment choices for **KTRS Retirees**:
 - Enroll in a waiver with no HRA with KTRS, and an insurance plan with the active employer
 - Enroll in a waiver with no HRA with KTRS, and a waiver with HRA with the active employer



65 & Older Retirees Who Return to Work

- Must complete a paper Enrollment Application with their active employer. Note the following information regarding funding and eligibility:
 - If receiving KRS funds toward a Medicare Supplemental plan, they are NOT eligible to receive state funding through the active employer for either a stand-alone HRA or an insurance plan
 - If not receiving KRS funds toward a Medicare Supplemental plan, they are eligible to enroll for coverage and receive state funding through the active employer
 - Retirees receiving KTRS funds toward a Medicare Supplemental plan should contact KTRS at 800-618-1687 for information



Not Eligible to Enroll Online

The following members will NOT receive an EmpID or password and therefore, will not be eligible to enroll online:

- Retirees
- Retirees who have returned to work
- Active employees who are cross-referenced with a retiree
- Employees whose company is not using our web enrollment system
- Employees wanting to switch policy holders on a cross-reference plan
- New employees who have not yet enrolled for 2007



Qualifying Events Occurring
After
Open Enrollment



Qualifying Events After OE

- When a Qualifying Event occurs after Open Enrollment and prior to the new Plan Year, the latest-dated form received will determine the election choice for the following year, unless the QE form is marked to **not** override the Open Enrollment election
 - *Example 1:* Betty is enrolled in a Single plan in 2007 and makes no changes during Open Enrollment. She has a child on Nov 1st and completes an Add Form electing Parent Plus effective Nov 1st. The Parent Plus plan will continue in 2008.



Qualifying Events After OE

- *Example 2:* John enrolls in a Single plan during Open Enrollment. John gets married on Nov 12th. He completes a form to add his spouse and have a Couple plan effective Dec 1st. The Couple plan will continue in 2008.

John also has the option to enroll his spouse only for the month of December. In order to do that, he will need to notify his insurance coordinator and mark on the Add Form that his Open Enrollment election (Single plan) should be effective for the new year.



**The Department for Employee
Insurance
and
HIPAA
(Privacy and Security)**

Kentucky
UNBRIDLED SPIRIT™

The logo features a stylized white horse head silhouette with a red and blue mane, positioned to the right of the word "Kentucky". Below the word "Kentucky" is the phrase "UNBRIDLED SPIRIT" in a smaller, white, sans-serif font. A small "TM" trademark symbol is located to the right of "UNBRIDLED SPIRIT". The background of the slide is a dark blue gradient with a large, faint, light blue silhouette of a horse head, matching the logo's theme.

When was HIPAA Enacted?

- 1996 – The effective date of the HIPAA Portability Rule.
- April 2001 - The effective date of the HIPAA Privacy Rule.
- April 2003 - Every entity was required to be compliant with the HIPAA **Privacy Rule**.
- April 2005 - Every entity was required to be compliant with the HIPAA **Security Rule**.

What Information is PHI?

PHI stands for Personal Health Information. The following is considered PHI:

- Names;
- All geographic subdivision smaller than a state - including street address, city, county, precinct, ZIP code;
- All elements of dates - (except year) for dates directly related to an individual including birth date, admission date, discharge date, date of death; etc



What Information is PHI?

- Telephone numbers;
- Fax numbers;
- E-mail addresses;
- Social Security numbers; etc

Who is Required to Comply with HIPAA?

- Health Plans*
- Health Care Clearinghouses
- Health Care Providers
- Endorsed Sponsors of the Medicare Prescription Drug Discount Card

* DEI operates as a health plan. Therefore, we are subject to HIPAA privacy and security requirements. As business associates of the DEI, ICs must comply with HIPAA.



Penalties & Sanctions

- Civil Penalties
 - \$100 per violation and up to \$25,000 per person per year for each requirement violated
- Federal Penalties
 - Up to \$50,000 and one year in prison;
 - Under “False Pretenses”-up to \$100,000 and up to five years in prison;
 - Intent to sell, transfer or use -up to \$25,000 and up to ten years in prison



What is the HIPAA Privacy Rule?

- Federal law that establishes standards for protecting the privacy of personal health records
- This law affects how you perform your job:
 - The health insurance database contains Personal Health Information (PHI)
 - You have access to this information for your employees
 - If you fail to maintain the privacy of that PHI, you may be subject to criminal and civil penalties



Privacy Requirements

Use and Disclosure

- Use is the sharing, employment, application, utilization, examination or analysis of individually identifiable health information by any person working for or within DEI or by a Business Associate of the Plan.
- Disclosure is the releasing, transferring, provision of access to, or divulging in any manner, individually identifiable health information to persons not employed by or working within DEI.



Privacy Requirements

- Uses and disclosures are only allowed for:
 - Treatment
 - Payment
 - Health Care Operations
- Mandatory disclosures
 - To the individual
 - To Health Human Services (HHS) for purposes of enforcing HIPAA

Privacy Requirements

- “Minimum-Necessary” Standard
 - When PHI is used or disclosed, it must be limited to the “minimum-necessary” to accomplish the purpose of the use or disclosure.
 - Does not apply to uses and disclosures made:
 - to the individual;
 - pursuant to a valid authorization;
 - to Health and Human Services (HHS);
 - as required by law; and
 - as required to comply with HIPAA



Privacy Requirements

Individual Rights & Privacy Notice

- Individual Rights
 - HIPAA gives participants the right to access and obtain copies of their PHI that the Plan (or its Business Associates) maintains in designated record sets.
 - HIPAA also provides that participants may request to have their PHI amended. Request must be made in writing.



Privacy Requirements

- Privacy Notice
 - Informs participants that the Plan will have access to PHI in connection with its plan administrative functions.
 - Describes the individual's rights.
 - Describes the Plan's legal duties with respect to the PHI.
 - The KEHP's Notice of Privacy Practices is included in the Summary Plan Description (SPD)
 - A summary can be found in the KEHP Handbook



Privacy Requirements

Administrative Safeguards

- Name a Privacy Official
- Develop and implement policies & procedures relating to privacy (Privacy Policies, Notice of Privacy Practices, Business Associate Agreements, Privacy Training, etc.)
- For the DEI, the Privacy Officer serves as the contact person for questions, concerns, or complaints about the privacy of the PHI.



Privacy Requirements

- Privacy Tips:
 - When printing to a printer located away from your work area, gather the printed documents promptly
 - Do not discuss issues containing PHI openly where others may hear
 - When sending emails to resolve a member issue, do not include PHI in the text of the message, unless you use encryption software. Only include the “minimum and necessary” information!
 - Shred all documents containing PHI
 - If your work area is open and easily accessible, place documents containing PHI in locked cabinets/drawers



Security Requirements

- The security rule applies to protected health information (PHI) in any **electronic** form
- The security rule requires covered entities to implement basic safeguards to protect electronic PHI from unauthorized access, alteration, deletion, and transmission

Security Requirements

- Administrative Safeguards
 - Security Management Process
 - Assigned Security Responsibility
 - Workforce Security
 - Information Access Management
 - Contingency Plan
 - Evaluation
 - Business Associate Contracts
 - **Security Awareness and Training**
 - **Security Incident Procedures**



Security Requirements

- Quarterly assessments of information system activity are completed by third party vendors.
- User access is revoked upon termination.
- Utilize McAfee Virus Scan to protect against malicious software
- Log-in attempts and password rule compliance are monitored.
- DEI maintains a data backup plan, disaster recovery plan, emergency mode operation plan, and testing of contingency plans.

Security Requirements

- Security Awareness and Training
 - HIPAA Security Policies and Procedures apply to you any time you are storing or transmitting PHI, even when you work from home.
 - DEI employees and other associates receive HIPAA training



Security Requirements

- Security Incident Procedures
 - Policy for handling security incidents
 - Every security incident should be reported immediately
 - Policy for preventing and reporting malicious code, such as viruses
 - Take measures to prevent malicious code. Example: do not open suspicious emails or attachments
 - Report security violations to your immediate supervisor
 - How often software protection is updated
 - DEI uses McAfee as virus protection and it is updated every weekday



Security Requirements

- Physical Safeguards
 - Facility access control
 - Device and Media Controls
 - **Workstation Use**
 - **Workstation Security**

Security Requirements

- Restore lost data in the event of a disaster or emergency
- Maintain records on all workstation repairs
- Configure each workstation to automatically lock-out after 10 minutes of non-use
- Ensure that all hard drives are “wiped” clean of data before disposal

Security Requirements

- Workstation Use
 - Generally, PH should not be stored on a diskette or CD. If you must use a diskette or CD, overwrite or destroy as soon as it is no longer needed
 - CDs and diskettes must be kept in a secure location to prevent accidental loss or theft

Security Requirements

- Workstation Security
 - Policies for creating, changing, safeguarding passwords
 - Such as length, upper and lower case combinations, numbers, symbols, etc.
 - Must be changed at regular intervals
 - Never share your password with others!
 - Lock your computer every time you leave your workstation! This is especially important if your agency does not have an automatic screen lockout



Security Requirements

- Technical Safeguards
 - Access Control
 - Audit Control
 - Integrity
 - **Transmission Security**

Security Requirements

- Each user is assigned a unique User ID for system wide access
- User IDs and passwords authenticate user log-ins
- Implementation of encryption software – such as Entrust

Security Requirements

- Transmission Security
 - We use Entrust whenever possible
 - If sending an electronic file to someone without Entrust:
 - Zip the file and send it as a password-protected attachment. Send the password in a separate email
 - If unable to zip the file, send it as a password-protected attachment. Send the password in a separate email



Security Requirements

- If sending electronic information to someone without Entrust:
 - In the subject line of the email, type: CONFIDENTIAL [Member's Last Name]”
 - Example: CONFIDENTIAL Jones
 - In the body of the email use the member's first initial and the member's last name followed by the last four digits of the member's Social Security Number
 - Example: JJones 1234
 - If you receive an email from someone else that does not adhere to these policies, make sure that your response DOES adhere to these guidelines



Contacts and Questions

- Privacy Officer
 - Reina Díaz-Dempsey (564-0358)
 - Reina.Díaz-Dempsey@ky.gov
- Security Officer
 - Eric Poston (564-0358)
 - Eric.Poston@ky.gov
- Compliance Officer
 - Betsy Johnson (564-0358)
 - ElizabethA.Johnson@ky.gov



To Find More Information

- <http://kehpn.ky.gov>
- www.cms.gov
- www.hhs.gov
- www.wedi.org/ship



Thank You!

A very sincere and much deserved “*Thank you*” to each of you for your continued support, hard work and cooperation!

The DEI Staff

