

**LAI D OFF STATE EMPLOYEE - IN A BARGAINING UNIT
BENEFIT FACT SHEET FOR BARGAINING CONTRACT PERIOD 2015 - 2017**

Health Benefits

For bargaining unit employees: Any laid off full-time bargaining unit state employee who was receiving state-paid health benefits prior to the layoff may be eligible to continue to receive such state paid benefits, as if continuing in active employment**, for a period not to exceed **one month** after the date of termination of state employment. This language is in effect for the duration of the 2015 - 2017 bargaining contract period.

***Please note: the one month of state paid coverage is under a COBRA policy, therefore certain benefits will no longer apply (ie: health club (HMO), fitness equipment (HMO), and health education (HMO and POS) because these are fringe benefits and are considered taxable income).*

In order to qualify for the one month of coverage paid by the State, you must meet the following criteria:

1. you must not be eligible to retire and receive post-retirement medical benefits under the provisions of RSA 21-I:26-36 or RSA 100-A:52-55
2. you must not be eligible for employer-paid medical or health care coverage under the plan of any other employer
3. you must not be eligible for coverage through a spouse's employer
4. you must not be eligible for coverage as the spouse of a state employee

For the one-month period, the state shall pay the full costs of continuing medical and health care coverage. This one-month period shall be included in the calculation of the entitlements required under the Consolidated Omnibus Budget Reconciliation Act of 1986 (COBRA) and any amendments thereto.

Medical (Anthem): Anthem BCBS representatives are available to assist you by calling them toll-free at (800) 933-8415, Monday through Thursday, during the hours of 8:00 AM to 8:00 PM and Friday, during the hours of 8:00 AM to 5:00 PM.

Pharmacy (Express Scripts): Express Scripts representatives are available to assist you by calling them toll-free at (866) 544-1798.

Dental (Delta Dental): Delta Dental representatives are available to assist you by calling them toll-free at (800) 832-5700 (or 603-223-1234), Monday through Friday, during the hours of 8:00 AM to 4:45 PM.

COBRA: Anthem COBRA representatives are available to assist you by calling them toll-free at (866) 599-3059, Monday through Friday, during the hours of 8:00 AM to 8:00 PM EST.

General Information Regarding Your Health Benefits:

Your medical, pharmacy and dental coverage will terminate at the end of the month in which you are laid off. Approximately two weeks after your termination has been processed in the payroll system, you should receive a COBRA packet which reflects the health and dental coverage you had as an active employee. In an effort to avoid access to care issues while the COBRA paperwork is in process, you should complete the *Certificate of Eligibility for Continuation of Health Coverage for Laid Off State Employees* form and return it to Tina Hussey at the Division of Personnel, 28 School Street, Concord, NH 03301. If you meet the criteria for the one month of state-paid coverage, the Division of Personnel will notify the vendors (Anthem, Express Scripts, and Delta Dental) to set up your COBRA policy. If you wish to continue COBRA beyond the one month of state-paid coverage, you will be responsible for making the necessary payments to Anthem COBRA by the deadline specified in the official Anthem COBRA notification. Here is a link to the 2015 COBRA rates: <http://admin.state.nh.us/hr/cobra15.html>.

After the first month of state paid coverage, your health coverage will be extended, as long as you continue to make timely payments and meet COBRA eligibility guidelines, for a maximum of 18 months (which includes the one month of state-paid COBRA coverage). If you become eligible for other insurance during the first month of state-paid coverage, it is your responsibility to notify the Division of Personnel.

Please note: If you complete the Certificate of Eligibility form and return it to the Division of Personnel, you do not need to complete the official Anthem COBRA enrollment form when it arrives at your home. However, please do not discard the official COBRA paperwork when it arrives. You should keep it with your records as it contains important information that you may need to refer to at a later date.

Other Benefits

Life Insurance (Anthem Life): Anthem Life representatives are available to assist you by calling them toll-free at (866) 227-4005, Monday through Friday, during the hours of 8:00 AM to 4:00 PM or email stateofnewhampshire@anthem.com.

You have 31 days from date of termination to complete the forms to continue your life insurance coverage on an individual basis. If you want to continue your Basic Life insurance (Plans 1 – 7), you must complete a Group Life Conversion form. If you want to continue your Supplemental Life insurance (Plan 8), you must complete a Portability** Benefit Request form. Both forms (and rates) can be downloaded by going to http://admin.state.nh.us/hr/life_insurance.html.

*****Please note, Portability of Plan 8 only applies if you are under age 70. If you are 70 or older when you are laid off, then you must complete a Group Life Conversion form to continue your benefits under Plan 8.***

Empower Retirement – Deferred Compensation: Empower Retirement (formerly Great-West) representatives are available to assist you by calling them toll-free at (877) 457-3535, Monday through Friday. Their hours of operation are Monday, Tuesday, Wednesday, and Friday from 8:00AM - 4:00PM and Thursday from 10:00AM - 6:00PM.

Distributions are allowed upon your separation from service.

If you choose to withdraw your funds, you should contact Empower Retirement to start the process. Although, there is no penalty for withdrawing funds at termination, there are tax implications because the amount you withdraw will be added to your income. You may also elect to leave the funds in your Empower Retirement account, but you will not be able to make additional deposits since they do not accept after-tax contributions.

HRA - HAT (Health Assessment Debit Card) and HRW (Health Rewards): ASIFlex representatives are available to assist you by calling them toll-free at 1-800-659-3035, Monday through Friday, 8:00 AM to 8:00 PM and Saturday, 10:00 AM – 2:00 PM.

The HRA is only available to terminated employees who elect COBRA for their medical benefits. *Please note: once you leave employment, your HRA debit card will be inactivated, even if you elect COBRA. You will need to submit manual claims for reimbursement after your termination.*

Flexible Spending Accounts (FSA): ASIFlex representatives are available to assist you by calling them toll-free at 1-800-659-3035, Monday through Friday, 8:00 AM to 8:00 PM and Saturday, 10:00 AM – 2:00 PM.

1. **Medical Flexible Spending Accounts:** COBRA will be offered to terminated employees only if they have funds available at date of termination, otherwise, COBRA is not an option.
 - If there are funds available at date of termination, the COBRA paperwork and payment schedule will be sent automatically. The COBRA payment amount will reflect their previous election amount, plus a 2% administration fee, but it will be invoiced on a monthly basis. Example: If they had elected \$1,200.00 for 2015 but were terminated as of 3/25/15, they would have contributed \$300.00 to their medical flex spending account as of their term date. If they had not incurred any expenses from 1/1/15 to 3/25/15, they may want to elect COBRA so that they can spend down that amount. If they choose to do this, they will be responsible for paying their monthly COBRA premium of \$100.00 plus the 2% admin fee for the remainder of the calendar year (April – December).
 - They will have 60 days to elect COBRA for flex spending. Their first payment will be due 45 days from the election date.

- They may only submit for claims that are incurred during the months that they have flex spending coverage (as an active employee or under COBRA). In the example used above, that means if they do NOT elect COBRA, they may only submit for claims that were incurred from 1/1/15 to 3/31/15 (end of month following termination date). Similarly, if they choose to elect COBRA, but only pay through the month of June, then they may only submit for claims that were incurred from 1/1/15 to 6/30/15 (last day of COBRA coverage).
- They will have until April 30th of the following year to submit claims for reimbursement after their flex spending account has been closed.

Please note: once an employee leaves employment, their flexible spending debit card will be inactivated, even if they elect COBRA. They will need to submit manual claims for reimbursement after their termination.

2. **Dependent Care Flexible Spending Accounts:** COBRA is not an option, but terminated employees may continue to submit claims (after date of termination) for the remainder of the calendar year to spend down any funds that were available at date of termination.