

Open Enrollment Training

March 2016

Plan Year 2017



Plan year 2017

- **Proposed Plan Year Changes**
- **Affordable Care Act**
- **Divorce Audit**



Plan Year 2017
Open Enrollment Begins
April 2, 2016 and ends
May 15, 2016

- The following slides will change for Plan Year 2017. These are final changes.

Face-2-Face Program

Face-2-Face diabetes program will become a two year program similar to weight management. After two successful years, members will graduate. They will not be allowed to reenter the program.





Healthy Tomorrows

Plan year 2017: PEIA PPB plan members and Non-Medicare retirees must see their PCP.

The PCP must check :

- blood pressure
- blood glucose
- cholesterol
- waist circumference

Healthy Tomorrows

Results must be reported to PEIA on the Healthy Tomorrows Reporting Form.

Please print the form from:

www.peia.wv.gov under Find a Form, Healthy Tomorrows Reporting Form.



Healthy Tomorrows

It may be signed by a representative of the physician.

If the form does not have the required test results or is not signed by a physician, PEIA will return it to the policyholder.


The requirement will not have been completed and the policyholder will have an additional \$500 deductible on July 1.

Healthy Tomorrows

**If this is not completed and returned to PEIA before the end of the plan year 2017 Open Enrollment, the policyholder will have an additional \$500 deductible for the plan year.*



Healthy Tomorrows



Plan year 2018 : PEIA PPB plan members and Non-Medicare retirees must continue to have a PCP named, see the PCP and have blood pressure, blood glucose and cholesterol tests done and they must be within an acceptable range or have a physician's certification that those numbers cannot be met.

**If this is not completed and returned to PEIA before the end of the plan year 2018 Open Enrollment, the policyholder will have an additional \$500 deductible for the plan year.*

Healthy Tomorrows

Plan year 2018 : Blood pressure, blood glucose and cholesterol tests done must be within an acceptable range or have a physician's certification that those numbers cannot be met.

All fields are REQUIRED. Any missing data will cause the form to be rejected.

Blood Pressure: Systolic >140 ≤140

Total Cholesterol: >245 ≤245

Diastolic >90 ≤90

Waist Circumference: Male >40 ≤40 inches

Glucose: >125 ≤125

Female >35 ≤35 inches





Healthy Tomorrows

- Have you informed your employees?
- Are they aware of what needs to be completed before May 16, 2016?
- How can you make it easier for your employees to avoid the additional \$500 deductible?
- When will you be able to tell if your employees have completed what they need to for Plan Year 2017?

Living Will Premium Discount

- The Living Will discount will be discontinued as of July 1, 2016.



Non-State, State, Non-Medicare Retirees, Special Medicare

- Urgent Care copay will increase from \$25 to \$50



Non-State, State, Non-Medicare Retirees, Special Medicare

- Add \$500 emergency room copay for high risk behaviors:
 - Accidents while driving motorcycle or UTV/ATV without a helmet
 - DUI/DWI
 - Drug -related accidents
 - Failure to wear seatbelt(s)





Non-State, State, Non-Medicare Retirees, Special Medicare

For Comprehensive Care
Provider members there will
be a \$40 copay for ANY
non-CCP office visit


Non-State, State, Non-Medicare Retirees, Special Medicare

Eliminate out-of-network out-of-state benefits which Breaks down as:

- OOS In Network with approval = 70/30
- OOS In Network without approval = 60/40
- OOS not in Network = 0/100

***** An Emergency Situation will always be covered**





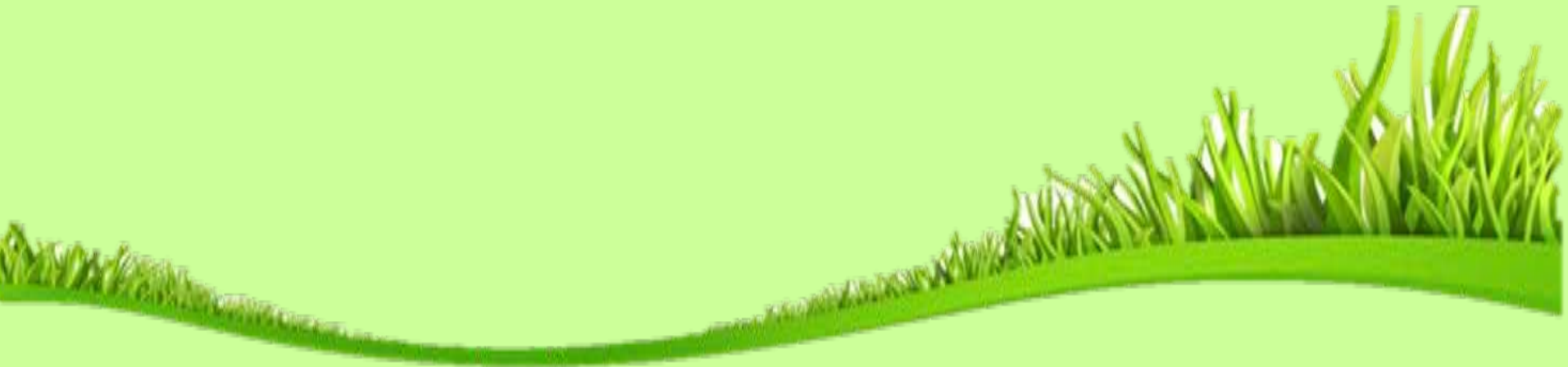
Facility Fee Limits for Select Facility-based Services

For In-State facilities, PEIA has chosen 20 procedures that PEIA PPB plans will pay no more than the amount shown in the Shopper's Guide when these services are performed in a health care facility. Any charge above these amounts would be the responsibility of the member.

***** An Emergency Situation will always be covered**

Proposed Plan Year 2017

Until PEIA has confirmation from the Legislature, this information is tentative.





Proposed Premium Increases

- State Agencies will see a 12% premium increase in premiums
- Non-State Agencies will have a 4% increase in premiums.
- Non-Medicare Retirees will see a 12% increase in premiums.
- Medicare Retirees will see a 12% increase in premiums

Affordable Care Act

Non-state

PEIA has sent 1095-B and 1094-B Forms to:

- Non-state PHs
- BOE PHs
- Non-Medicare Retirees
- Cobra PHs
- WVU/Marshall PHs
- Parkways PHs

Policyholders that have contacted PEIA with errors will be sent a replacement by March 31, 2016.

These agencies will be responsible for completing all of the 1094-C and Parts 1 and II of the 1095-C and leave part III blank.

- Non-state
- BOE
- Non-Medicare Retirees
- Cobra
- WVU/Marshall
- Parkways

Affordable Care Act

State

PEIA will electronically file Part III of 1094-C, 1095-C and all of the 1095-B with the IRS for all policyholders with PEIA.

The State of WV department of Administration will send out form 1094C and 1095C part I and II for all state agencies.



Affordable Care Act

Form Reporting Chart				
Employer Type	Form	Recipient	Due Date	Responsible Party
State Agency/Colleges	1095 C	Employee	3/31/16	State Contractor Tango Health
State Agency/Colleges	1095 C	IRS	6/30/16	State Contractor Tango Health
State Agency/Colleges	1094 C	IRS	6/30/16	State Contractor Tango Health
State Agency/Colleges	1095 B	N/A	N/A	N/A will be handled on 1095 C Part III
Non State, BOE, WVU, MU	1095 C	Employee	3/31/16	Employer (except Part III, leave blank)
Non State, BOE, WVU, MU	1095 C	IRS	6/30/16	Employer (except Part III, leave blank)
Non State, BOE, WVU, MU	1094 C	IRS	6/30/16	Employer
Non State, BOE, WVU, MU	1094/5 B	Employee	3/31/16	PEIA
Non State, BOE, WVU, MU	1094/5 B	IRS	6/30/16	PEIA
Policyholder Type	Form	Recipient	Due Date	Responsible Party
Non Medicare Retiree	1094/5 B	Retiree	3/31/16	PEIA
Medicare Retiree	1094/5 B	Retiree	3/31/16	CMS
COBRA	1094/5 B	COBRA mbr	3/31/16	PEIA

PEIA Access

- **Do not Share Access Credentials!**
 - Violator's access(es) can be suspended and/or terminated.
 - It could be a violation of 18 U.S.C. § 1030 – the “*Computer Fraud and Abuse Act*”. Such conduct cannot and will not be tolerated.
 - When you signed up as a Benefit Coordinator, you signed a Benefit Coordinator Designation Form stating:

By signing this form you are agreeing to use a digital mark in lieu of a written signature. To use this digital mark you must agree:

1. That you will not share with any other person the password, code or other security key required for use of the mark;
2. That the use of the mark represents confirmation of a record;
3. To notify the agency immediately once you become aware that the security key is compromised; and
4. That you understand that the provisions of W. Va. Code §61-3C-10 prescribe the penalties for the unauthorized disclosure of a password, identifying code, personal identification number or other confidential security information.

Divorce Audit

- Divorces must be reported “IMMEDIATELY” – not in the month plus two (2) as with other qualifying eligibility events.
 - a. Carrying ineligible dependents can result in:
 - i. the Participating Agency paying increased premium(s) – typically between \$300 - \$400 a month
 - ii. the member having to pay back any and/or all claims paid for the ineligible dependent(s)
 - iii. the Agency(ies) having to undergo a full eligibility audit

Divorce Audit

- PEIA will not refund premium(s) by the Agency(ies) for their employee's failure to report their divorce(s) – any reimbursement will have to come from the employee who failed to report.
- Just because a Family Court Order says that one spouse has to provide insurance(s) on the other, that insurance cannot come through PEIA
 - PEIA is/was not/and will never be a party in a divorce and therefore cannot be obligated to provide anything post-divorce. PEIA's eligibility rule(s) prevail.
 - A person cannot “cost shift” their responsibility(ies) to the State, e.g. most State employees participate in an 80/20 Plan where the State pays 80% of the premium(s) – see 3[c]ii





Benefit Fairs for 2017

4/12/16	Martinsburg	Holiday Inn 3-7 pm
4/13/16	Morgantown	Ramada Inn 3-7 pm
4/14/16	Wheeling	WV Northern Community College, B&O Bldg., Auditorium 3-7 pm
4/19/16	Charleston	Holiday Inn Express Civic Center Drive 3-6 pm
4/20/16	Huntington	Big Sandy Arena 3-7 pm
4/21/16	Beckley	Tamarack 3-7pm
4/26/16	Parkersburg	Comfort Suites, Mineral Wells 3-7 pm



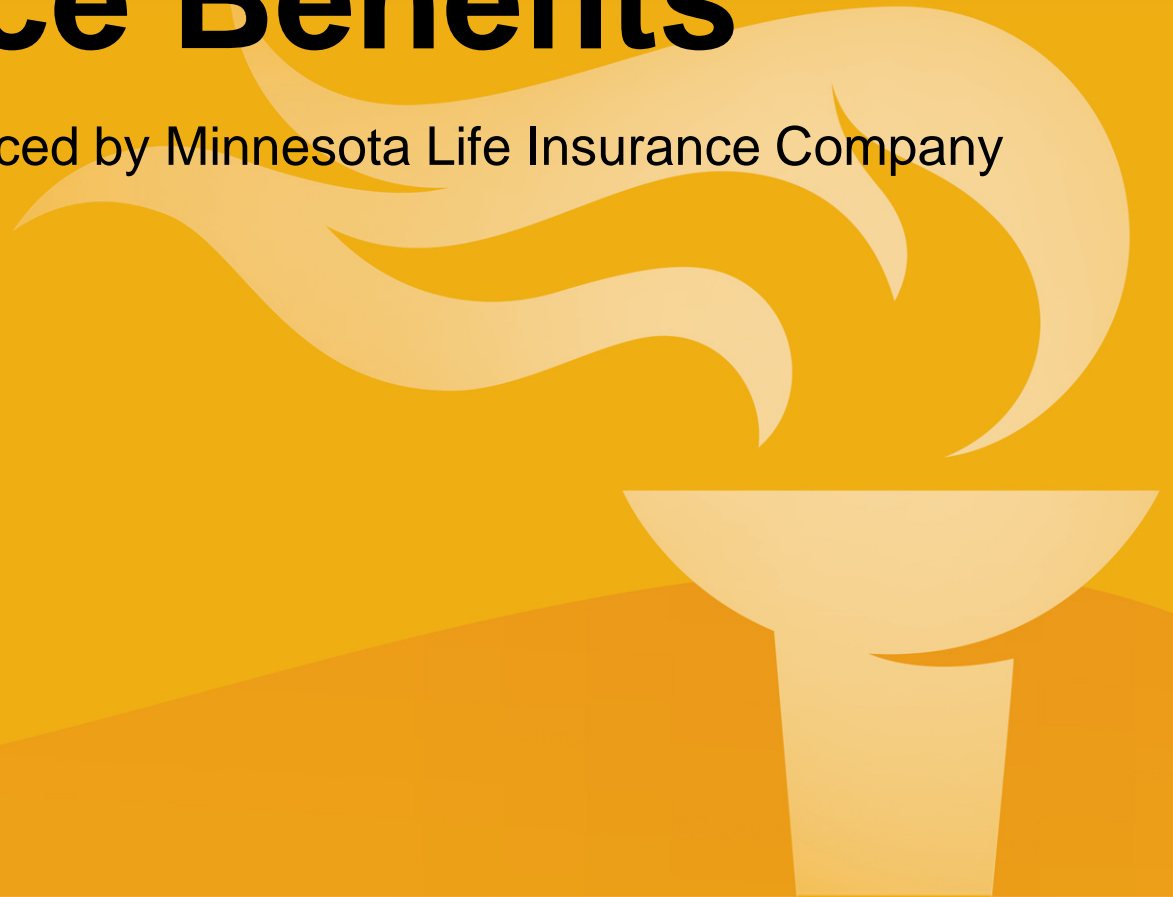
Public Employees
Insurance Agency

Financial security
for the long run®



Basic & Optional Life Insurance Benefits

Underwritten and Serviced by Minnesota Life Insurance Company



Securian

**Our brand has changed.
YOUR BENEFITS HAVEN'T.**

You can continue to count on Securian for the same benefits and exceptional service we've always provided.

Overview

- Charleston Branch Office
- Plan Design
- Plan Highlights
- Beneficiaries
- How to File a Death Claim
- Plan Summary

Securian Financial Group, Inc. (Securian)

- Securian has been in business since 1880
- Service that exceeds your expectations
- We are committed to providing World Class Service
- We understand the importance of timely claim payments, clear communication, and professional and knowledgeable associates
- Procedures are developed to be clear and easy
- Information is handled in a confidential manner

Charleston Branch Office

Services Provided:

- Processing claims within 7 calendar days
- Evidence of Insurability (EOI) Application Processing
- Provide enrollment materials
- Training for new and existing Benefit Coordinators and PEIA employees
- Attend benefit fairs or provide onsite workshops to educate and promote the life insurance plan

Charleston Branch Office

- LifeBenefitsExtra(LBE), a secure website for Benefit Coordinators
- Customer Service
- Automated service for claim status
 - Monday – Friday, 8am – 8pm EST
 - Saturday 9am – 6pm EST

Plan Design: Key facts to know

- Decreasing Term Life Insurance
- Protection for you and your family
- Retiree coverage
- Conversions
- Matching Accidental Death & Dismemberment(AD&D)
- Accelerated Death Benefit

Plan Design: Basic & Optional Coverage

	ACTIVE	RETIREE																
Basic Coverage	\$10,000 under age 65	\$5,000 under age 67																
Basic Coverage Age Reductions	<table border="0"> <tr> <td><u>Age of insured</u></td> <td><u>Amount of insurance</u></td> </tr> <tr> <td>Under age 67</td> <td>none</td> </tr> <tr> <td>Age 65 – 69</td> <td>65%</td> </tr> <tr> <td>Age 70 or over</td> <td>50%</td> </tr> </table>	<u>Age of insured</u>	<u>Amount of insurance</u>	Under age 67	none	Age 65 – 69	65%	Age 70 or over	50%	<table border="0"> <tr> <td><u>Age of insured</u></td> <td><u>Amount of insurance</u></td> </tr> <tr> <td>Under age 67</td> <td>None</td> </tr> <tr> <td>Age 67 or over</td> <td>50%</td> </tr> </table>	<u>Age of insured</u>	<u>Amount of insurance</u>	Under age 67	None	Age 67 or over	50%		
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Optional Life Coverage	18 plans, ranging from: \$5,000 - \$500,000	10 plans, ranging from: \$5,000 - \$150,000																
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Age 65 – 69	65%																	
Age 70 or over	50%																	
Employer Paid?	Basic is paid by employer Optional is contributory	All coverage is contributory																

Plan Design: Dependent Coverage

	Who is covered	Coverage amount	
Dependent Plan 1	Spouse Child	\$5,000 \$2,000	
Dependent Plan 2	Spouse Child	\$10,000 \$4,000	
Dependent Plan 3	Spouse Child	\$15,000 \$7,500	
Dependent Plan 4	Spouse Child	\$20,000 \$10,000	
Dependent Plan 5*	Spouse Child	\$40,000 \$15,000	*Always requires EOI

Plan Design: Accidental Death & Dismemberment (AD&D)

Accidental Death

- Active employees and their dependents
- Double indemnity
- Terminates the first day of the month following date of retirement
- Not available for Retiree Basic, Optional Life or Dependent coverage
- Exclusions apply

Plan Design: Accidental Death & Dismemberment (AD&D)

Accidental Dismemberment

- Active employees and their dependents
- Full amount of insurance or 25%
- Payable to the covered employee
- Not available for Retiree Basic, Optional Life or Dependent coverage
- Exclusions apply

Plan Design: Accelerated Death Benefit

- Available to active and retired employees and their dependents
- Life expectancy of 12 months or less
- Up to 100% of Optional/Dependent Life Insurance in force
- Basic coverage cannot be accelerated
- Benefit payable to the covered employee
- Death Benefit = Full Insurance Amount – Accelerated Amount of Insurance

Plan Design: Waiver of Premium

- If a covered employee becomes totally and permanently disabled as defined under the plan while under the age of 60, the Basic insurance will be continued in force without payment of premiums during the period of disability

*Basic
coverage
only*

9-month
elimination
period

Plan Design: Active Employees Eligibility

- Must have Basic coverage to elect Optional Life coverage
- New Hires can elect:
 - Basic coverage
 - Optional Life coverage (up to \$100,000) without EOI during their enrollment period*
- Optional Life coverage can increase 1 level up to \$100,000 with a family status change**
- Enroll dependents in plans 1 – 4 during the enrollment period without an EOI
- Must be enrolled individually and in the same plan

* Month of hire and following two calendar months

** Marriage or birth of a child is a qualifying family status change

When is Evidence of Insurability (EOI) Required?

- Optional Life amounts over \$100,000
- Basic coverage elected outside enrollment period and not enrolling in health coverage
- Increasing Optional Life coverage outside of the enrollment period or qualifying family status change
- Increase or change Dependent coverage outside of the enrollment period
- Electing Dependent Plan 5

Automation of Evidence of Insurability (EOI)

- Submit the application to PEIA
 - After application is received by PEIA, Securian will mail an EOI packet directly to employee (if required)
 - EOI packet provides a user id and password to access Securian's website to complete an EOI on-line
 - If applicant does not have access to the internet a paper EOI will be included with a postage paid envelope returning the EOI directly to Securian
- Automated process keeps the employee's medical information private and increases accuracy

Automation of Decisions

Securian provides a weekly file to PEIA that updates their system with underwriting decisions.

Plan Design: Retired employees

Eligibility

- Basic and Optional Life coverage
 - Must have Basic to elect Optional Life
- Continue Optional Life insurance equal to the amount in force immediately prior to retirement up to the max of \$150,000
- All elections must be made during enrollment period
 - Retirees cannot increase coverage outside of enrollment

Plan Design: Retired Employees

Evidence of Insurability (EOI)

- Increases in coverage elected during enrollment period require EOI
- EOI not required for elections equal or less than amount in force immediately prior to retirement
- No guaranteed issue coverage for retirees; all retirees who elect coverage will require EOI if not covered immediately prior to retirement

Additional Plan Features - Conversion

Conversion Option

- Leaving employment
- Must take place within 31 days of employees last day
- Covered dependents can convert their coverage
- Conversion is at the employees cost, but without EOI
- Individual rates are higher than group rates

LifeSuite Services

To meet YOUR LIFE NEEDS

Life happens. When it does – turn to your LifeSuite services. These services are designed to help you in times of need and are only a click or a call away.



Legal, Financial and Grief

Access one or all to meet your needs:

- Unlimited telephonic guidance and consultation with professionals in each area
- Comprehensive web and mobile resources
- Thirty-minute face-to-face consultation with an attorney for each unique legal issue



LifeWorks.com
(user name: *lfg*
password: *resources*)

1-877-849-6034

Travel Assistance

Available 24/7/365 for personal or business travel when 100+ miles from home:

- Medical professional locator services
- Assistance replacing lost or stolen luggage, medication, or other critical items
- Medical or security evacuation
- Medically necessary repatriation
- Repatriation of mortal remains



LifeBenefits.com/travel

U.S./Canada

1-855-516-5433

all other locations

+1 415-484-4677

Legacy Planning

Access to a variety of information and resources to work through end-of-life issues:

- End-of-life planning
- Final arrangements
- Important directives
- Express Assignment™ for expedited funeral home assignments



LegacyPlanningResources.com

Beneficiary Financial Counseling

Helping beneficiaries make sound financial decisions at a difficult time:

- Beneficiary reference guide
- Access to a financial counseling website for 12 months
- Financial Fitness assessment
- Step-by-step assistance in completing a personalized financial plan



**Beneficiary Financial Counseling
provided by
PricewaterhouseCoopers LLP**

Beneficiary Designations

Keep your Beneficiary Current

Life events may effect how you want your benefit paid!

- Marriage, Divorce, Birth or Adoption of a child, or Death

Two options for updating beneficiary information:

- On-line go to www.WVPEIA.com and select *Manage My Benefits*
- Completion of the *Basic and/or Optional Life insurance Change of Beneficiary Form*

Beneficiary Designations

“What if the employee doesn’t remember who they designated as their beneficiary?”

- Tell employee not to worry
- Ask employee to go on-line or complete a Beneficiary Form and designate a beneficiary
 - Current contact information
 - Minimize outdated information that can create delays when issuing benefits.

Beneficiary Designations

- **Primary Beneficiary(ies):** The person or persons named will receive the proceeds
- **Contingent (Secondary) Beneficiary(ies):** At the time of your death, if the primary beneficiary(ies) is no longer living, the benefit is paid to this person or persons
- **Default Beneficiary(ies):** If a beneficiary(ies) is not named, proceeds will be paid in the order outlined in the policy:
 - to a spouse, if living, if not;
 - to child(ren), if living, if not;
 - to parent(s), if living, if not;
 - to siblings, if living, if not;
 - to their estate

How to File a Death Claim

Anyone can provide Notice of Death

- Notice of death can be submitted in the following ways:
 - Call CBO **1.800.203.9515**, or
 - Submit an e-Claim (LifeBenefitsExtra), or
 - Complete Notice of Death form and mail to CBO

LifeBenefitsExtra(LBE)

- **Application Status**

- View current information about employees who have applied for new insurance that required underwriting

- **Reports**

- View and run your own reports regarding underwritten applications

- **E-Claims**

- Electronically submit claims

- **Emails**

- Send secure e-mails to Securian

LifeBenefitsExtra(LBE)

Forms

View and print the following forms online (.pdfs):

- Notice of Claim for Living Benefit, Notice of Death,
- Notice of Accidental Dismemberment and Loss of Sight
- Waiver Claim Packet, Beneficiary Statement
- Preference Beneficiary's Statement, Group Life

Online Resources

Find out more about life insurance basics including how much insurance employees should consider and helpful information about electing beneficiaries

Charleston Branch Office Contacts

Manager

Jennifer Styles Brown

Office Manager

Jane Wills

Customer Service/Claim Examiners

Judy Farmer

Amanda Fitzwater

Leslie Pauley

Marilyn Stone

Charleston Branch Office Contact Information

One Bridge Place

10 Hale Street, 5th Floor

Charleston, WV 25301

304.344.1222 - 800.203.9515 (toll-free) - 304.344.1221 (fax)

MLCharleston@securian.com

Supply Requests:

<https://web1.lifebenefits.com/lbwcm/pd/peia>

Thank you!

This presentation represents a summary of plan provisions related to the insurance policy issued by Minnesota Life to West Virginia PEIA. In the event of a conflict between this presentation and the policy and/or certificate, the policy and/or certificate shall dictate the insurance provisions, exclusions, all limitations, and terms of coverage. Products offered under policy form series number 06-30858.

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Insurance products are underwritten by Minnesota Life Insurance Company, an affiliate of Securian Financial Group, Inc.

Securian Financial Group, Inc.

www.securian.com

DOFU 2-2016

39121

**2017
Open
Enrollment
Benefit
Coordinator
Training**

Public Employees Insurance Agency

**2017 Mountaineer
Flexible
Benefits Plan**

A stylized graphic of a mountain range in shades of brown and tan, with a large circular sun or moon behind the peaks.

Employee Reference Guide

Mountaineer Flexible Benefits

- ✓ Dental
- ✓ Vision
- ✓ Short-Term Disability
- ✓ Long-Term Disability
- ✓ Hearing Plan
- ✓ Legal Plan
- ✓ Flexible Spending Accounts
- ✓ Health Savings Account (HSA)
- ✓ Limited-Use Medical Expense FSA (Must be enrolled in HSA)

What's New for PY 2017

- ✓ Mountaineer Flexible Benefits will maintain its Flexible Spending Account grace period, in lieu of a \$500 rollover
- ✓ Your Dental, Long-Term Disability, Short-Term Disability & Legal rates are decreasing
- ✓ Enrollment forms are no longer carbon copy
- ✓ Pay period designations for state agencies may convert from 24-pay to 26-pay during the plan year
- ✓ You may now download the WageWorks® EZ Receipts® mobile app for use with your flexible spending accounts

Open Enrollment

- ✓ Open Enrollment Dates – April 2, 2016 – May 15, 2016
- ✓ Changes Only Enrollment
- ✓ Enroll online via Premier Enroll at MyFBMC.com or via FBMC paper enrollment form
- ✓ Benefit effective date July 1, 2016

Benefit Coordinator Open Enrollment Checklist

- ✓ Board of Educations and Non-State agencies need to provide salary information to Marilyn Padgett for employees that have had a salary change within the last 12 months
- ✓ Complete Benefit Coordinator section of enrollment form in its entirety for ALL enrollment forms
- ✓ Provide Enrollment Forms to FBMC twice a week. Mark the last shipment of forms as 'Final Batch". All enrollment forms must be postmarked by May 20th
- ✓ Non-State agencies will receive enrollment packets and be responsible for distributing enrollment materials to their employees

Premier Enroll Application

Employees must register as a
new user to access the online
Premier Enroll enrollment
application

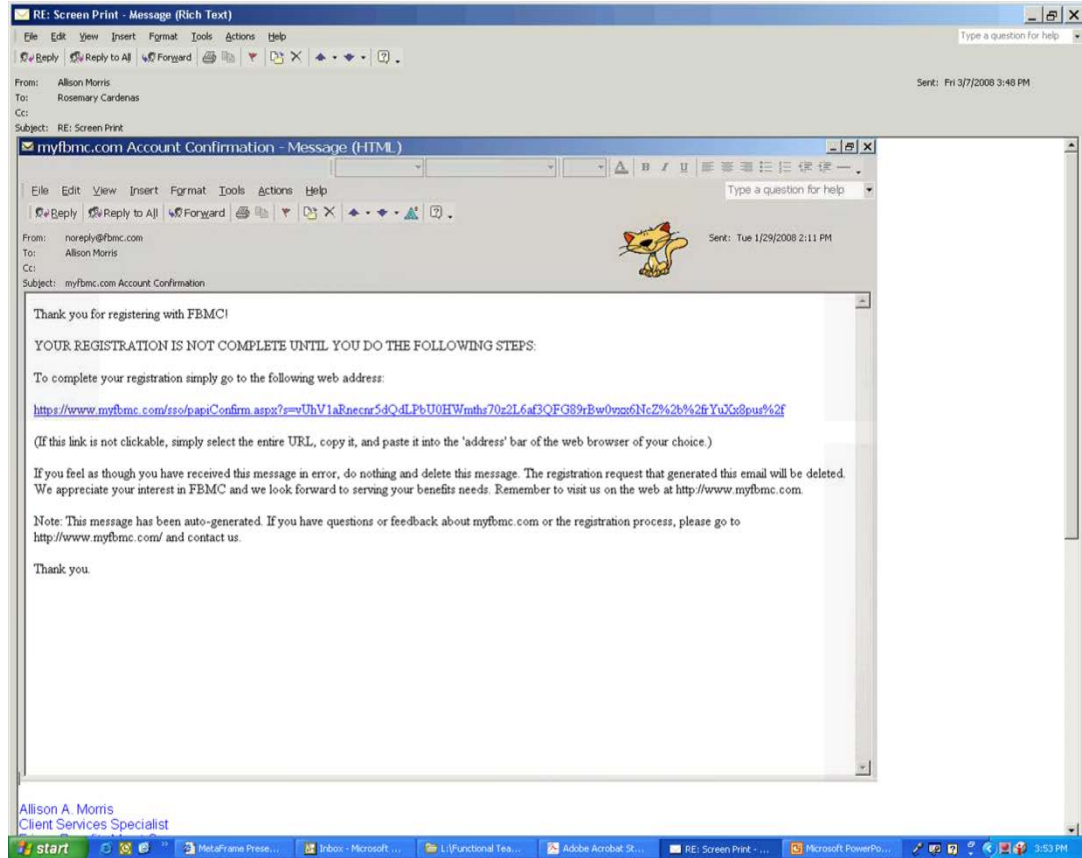


MyFBMC.com Registration

- ✓ Employees that have not previously enrolled on Premier Enroll will need to register as a new user
- ✓ Employees should use their SSN for the first registration
- ✓ An email will be sent to participants to validate registration

Once Registered

- ✓ Employee will receive email with hyperlink
- ✓ The employee clicks on the link to validate their email address
- ✓ Employee will login with their email and password to access the Premier Enroll application



Premier Enroll Benefit Election

Mountaineer Flexible Benefits Plan

Need Help? LogOut

Home

Dental

Vision

Long Term Disability

Short Term Disability

Health Savings Account

Medical FSA

Limited-Use Medical FSA

Dependent Care FSA

Legal

EPIC Hearing Service Plan

View My Current Benefits
(11/12 Plan Year)

Your Per Pay Amounts

Benefits	Pre Tax	Post Tax
Dental	\$49.52	\$0.00
Vision	\$1.92	\$0.00
Long Term Disability	\$32.97	\$0.00
Medical FSA	\$59.16	\$0.00
Legal	\$0.00	\$8.25
EPIC Hearing Service Plan	\$0.88	\$0.00
SubTotals	\$144.45	\$8.25
Totals	\$144.45	\$8.25

JOE E PUBLIC

To return to the demographics page, click... [Edit](#)

Dependents

Name	Relationship
JANE PUBLIC	Spouse
JUDY PUBLIC	Daughter

1

Benefit Selection

EPIC Hearing Service Plan	Coverage	Per Pay	Tax Status
<input checked="" type="radio"/> EPIC Hearing Service Plan	Employee Only	0.88	<input checked="" type="radio"/> Pre <input type="radio"/> Post
<input type="radio"/> Waive Coverage			

Previous Step Next Step Save & Finish Later

Look for this icon! It will indicate that there is more information available.

Mountaineer Flexible Benefits Plan

Need Help? [LogOut](#)

[Home](#)

- Dental
- Vision
- Long Term Disability
- Short Term Disability
- Health Savings Account
- Medical FSA
- Limited-Use Medical FSA
- Dependent Care FSA
- Legal
- EPIC Hearing Service Plan

[View My Current Benefits \(11/12 Plan Year\)](#)

Your Per Pay Amounts

Benefits	Pre Tax	Post Tax
Dental	\$49.52	\$0.00
Vision	\$1.92	\$0.00
Long Term Disability	\$32.97	\$0.00
Medical FSA	\$59.16	\$0.00
Legal	\$0.00	\$8.25
EPIC Hearing Service Plan	\$0.88	\$0.00
SubTotals	\$144.45	\$8.25
Totals	\$144.45	\$8.25

JOE E PUBLIC

To return to the demographics page, click...

[Edit](#)

Dependents

Name	Relationship
JANE PUBLIC	Spouse
JUDY PUBLIC	Daughter

1

Benefit Selection

Benefit Selected	Benefit Provider	Coverage Selected
Dental	Enhanced	Employee & Family (S)
Vision	Vision-Exam Plus Plan	Employee and Family
Long Term Disability	Long Term Disability Plan 2 - 70%	Employee Only
Short Term Disability	Waive Coverage	
Health Savings Account	Waive Coverage	
Medical FSA	Long Term Disability Plan 2 - 70%	1420.00
Limited-Use Medical FSA		
Dependent Care FSA	Waive Coverage	
Legal	Legal	Employee plus all eligible dependents
EPIC Hearing Service Plan	EPIC Hearing Service Plan	Employee Only

* I Agree to the terms and conditions [Terms and Conditions](#)

You must agree to the Terms and Conditions to confirm and submit your benefit elections.

To Confirm and Submit your benefit elections, please electronically sign your application by completing both steps below:

Step 1: Please enter your First and Last Name:

Your calculated pre-tax deduction amount for this application is \$ **144.45**

Step 2: Please enter the pre-tax deduction amount listed in red above: \$

Before confirming your benefit elections, please ensure pop-up blockers are disabled so that your printable confirmation notice will appear.

[Previous Step](#)

[Confirm & Submit](#)

[Save & Finish Later](#)

Premier Enroll Benefit Election Review

Premier Enroll Benefit Election Review

Enrollment Details

Confirmation Details


Your Confirmation No: 1042
Enrollment Date: 3/8/2012 3:39:04 PM ET

Employee & Dependent Information

Employee

First Name: JOE
Middle Initial: E
Last Name: PUBLIC
Suffix:
Date of Birth: 03/30/1956
Date of Hire: 09/18/1988
Employee ID: 123456789
SSN: 123-45-678
Pay Frequency: 24
Salary: 43000.00

Message from webpage [X]

 Your Benefit elections have been submitted.
Your confirmation number is 1042.

Please print this page for your records.
(The print dialog will automatically open a few seconds after you click OK.)

OK

Dependents

Name	Date of Birth	Relationship
JANE PUBLIC	12/12/1953	Spouse
JUDY PUBLIC	01/01/2000	Daughter

Current Elections

Benefit Type	Provider	Plan Selected	Coverage	Effective Date	Per Pay PreTax	Per Pay PostTax
Dental	Delta Dental	Enhanced	Employee & Family (S)	07/01/2012	\$49.52	\$0.00

Dependent

Name	Relationship

Premier Enroll Confirmation Notice

- ✓ Employees should print this confirmation page for their records

Enrollment Details

Confirmation Number: 200937
 Enrollment Date: 3/8/2014 4:29:38 PM

Employee Information

First Name:	JOE	Address1:	123 SOMEWHERE LANE
Middle Initial:	E	Address2:	
Last Name:	PUBLIC	City:	ANYWHERE
Suffix:		State:	WV
Date of Birth:	03/30/1956	Zip:	23541
Date of Hire:	09/18/1988	Email Address:	
Employee ID:	123456789	Phone:	555-555-5555
SSN:	[Masked]	Gender:	Male
Pay Frequency:	24		
Salary:	43000.00		

Dependents

Name	DOB	Relationship
JANE PUBLIC	12/12/1953	Spouse
JUDY PUBLIC	01/01/2000	Daughter

Benefit Elections

Benefit Type	Provider	Plan Selected	Coverage	Effective Date	Per Pay PreTax	Per Pay PostTax
Dental	Delta Dental	Dental Assistance	Employee Only	07/01/2014	\$5.23	\$0.00
Vision	MetLife	Vision-Full Service Plan	Employee Only	07/01/2014	\$3.64	\$0.00
Long Term Disability	Standard Insurance Company	Benefit Waived	None		\$ 0.00	\$ 0.00
Short Term Disability	Standard Insurance Company	Short Term Disability	Employee Only	07/01/2014	\$18.61	\$0.00
Health Savings Account	Synovus	Benefit Waived	None		\$ 0.00	\$ 0.00
Medical FSA	Fringe Benefits Management Company	Benefit Waived	None		\$ 0.00	\$ 0.00
Limited-Use Medical FSA	Fringe Benefits Management Company	Benefit Waived	None		\$ 0.00	\$ 0.00
Dependent Care FSA	Fringe Benefits Management Company	Benefit Waived	None		\$ 0.00	\$ 0.00
Legal	Hyatt Legal	Benefit Waived	None		\$ 0.00	\$ 0.00
EPIC Hearing Service Plan	FSL	EPIC Hearing Service Plan	Employee Only	07/01/2014	\$0.88	\$0.00
Total					\$28.36	\$0.00

- If this statement does not accurately reflect your 2013 enrollment elections please contact your benefits administrator. If you have questions about your benefits statement call FBMC Service Center at 1-855-5MYFBMC (855-569-3262) 7:00 AM to 8:00 PM Monday through Friday.

FAQs

- ✓ Dependent Care FSA (Coverage extends to age 13, unless disabled)
- ✓ Open Enrollment Confirmation Notices
- ✓ Demographic change form
- ✓ FBMC has incorrect demographics
- ✓ Active employee terms or retirees
- ✓ Personal Pay process

Important Fax Information

- ✓ **Active Employees** (new hires, transfers and open enrollment)
 - Fax # 850-514-5803 ATTN: Enrollment Processing

- ✓ **Change in Status**
 - Fax # 850-514-5803 ATTN: Change in Status

- ✓ **Appeals**
 - Fax # 850-425-6220 ATTN: Appeals

- ✓ **Retirees**
 - Fax # 866-836-9943 ATTN: Direct Bill

Items for Reference

- ✓ Mountaineer Flexible Benefits Reference Guide
- ✓ Benefit Coordinator Reference Manual
- ✓ Email blasts from PEIA and/or FBMC
- ✓ PEIA and FBMC Websites

Contact Information

- ✓ FBMC Service Center @ 1-844-559-8248
- ✓ Kayla Horton, FBMC Client Liaison
khorton@fbmc.com
304-558-7850 Ext. 52627
- ✓ Emily Hoffman, FBMC Account Manager
ehoffman@fbmc.com
304-558-7850 Ext. 52652

**Thank you for your
time, attention and
participation.**

