

Learn about Your Benefits Options

Benefits Administration offers webinars to help you learn about your benefits options.

Join an insurance carrier webinar.

The insurance carriers will discuss their products, and you can ask questions about your insurance choices. These webinars will provide details on specific insurance products including medical, dental and vision insurance and your health savings account option.

Sessions will be recorded and posted on the ParTNers for Health YouTube page found here: www.youtube.com/user/partnersforhealthtn

Each webinar is at 3:30 p.m. CT

- Friday, Sept. 16 – Medical Networks
- Friday, Sept. 23 – Vision
- Thursday, Sept. 29 – Health Savings Account
- Friday, Sept. 30 - Dental

Go to **Annual Enrollment** at tn.gov/ParTNersForHealth and click on **About Enrollment** for instructions on how to join.

Here's Help

Find resources on the ParTNers for Health website at

tn.gov/ParTNersForHealth

You'll find:

- Videos about your benefits and to help you enroll – **click the Videos link** at top.
- A blue Questions button to contact our help desk: benefitssupport.tn.gov/hc/en-us
- **Call Benefits Administration** at 800.253.9981, M-F, 8 a.m. to 4:30 p.m. CT.

BEE READY... if You Want to Make Changes!

Each year, Annual Enrollment is your chance to make changes to your ParTNers for Health plan benefits that will be effective the following Jan. 1 through Dec. 31. **Your annual enrollment period for 2023 benefits is Oct. 1-28, 2022.** If you are still eligible and choose to remain enrolled as of Jan. 1, 2023, you can also enroll your eligible dependents.



This newsletter gives you important information about your 2023 benefits choices. These include your health, dental and vision insurance.

- Find full retiree Annual Enrollment details by **going to Annual Enrollment** and clicking on the For Retirement webpage at www.tn.gov/partnersforhealth/ae-for-retirement.html
- Premium charts are found by clicking the Premiums webpage at www.tn.gov/partnersforhealth/insurance-premiums.html
- Insurance comparison charts for health, dental and vision are found by clicking the Publications webpage at www.tn.gov/partnersforhealth/publications/publications.html and **going to Insurance Comparison Charts.**

If you are a Tennessee Consolidated Retirement System or Optional Retirement Plan retiree, you may be eligible for dental and vision insurance. To enroll in vision, you must be enrolled in group health coverage (see page 9).

It's important to note, if you don't want to make changes in your benefit selections, NO ACTION is needed on your part during Annual Enrollment. If you don't make changes, you will be enrolled in the same plan options for medical, dental and vision insurance you are enrolled in now, subject to eligibility. Please note ParTNers for Health has a new vision insurance vendor for 2023. Find details on page 9.

Networks and benefits may change and impact you. Even if you don't make any changes, it's a good idea to review your enrollment selections each year. Annual Enrollment is a good time to do that.

Let's Keep in Touch!

Benefits Administration uses email to send you important insurance information throughout the year. **You can unsubscribe at any time, but if you do unsubscribe, you will no longer receive any insurance-related updates.** Please [log in to Edison](#) and make sure your email address is correct. It's easy! After clicking the home icon in the top right corner, go to "Self Service", "System Profile" and "Change or Set Up Email Address."

Important 2023 Benefits Updates

Benefits Administration works to provide comprehensive, affordable, dependable and sustainable benefits. Some changes to your ParTNers for Health benefits for 2023 are due to the challenges the state plan and all health plans across the country are facing. This is because of many factors, including COVID-19 and inflation. Benefits and premiums for 2023 balance price and value and encourage the right site for care and lower cost medications.

Here's what's changing for your 2023 benefits

Health insurance premiums are changing. Find premiums on pages 4-9.

- The 2023 monthly premium amounts depend on the plan, benefit option and tier you choose.

There are additional health benefit changes. Go to tn.gov/ParTNersForHealth and **click on Publications** to find the insurance comparison chart for details. Health benefit changes for 2023 include:

- Deductibles for Premier and Standard Preferred Provider Organization plans and the Consumer-driven Health Plan for state and higher education retirees will increase.
- Co-insurance for Premier PPO will increase.
- Out-of-pocket maximums for Standard PPO and CDHP for state and higher education retirees will increase.
- Emergency room costs for all PPOs will change from copay to deductible and coinsurance.
- Allergy serum for all PPOs will change to deductible and coinsurance.
- For all PPOs, specialty drug cost sharing will change to two cost tiers and increase.
- The CDHP maintenance medication list is changing to comply with IRS rules. Medications on this list are available at a lower cost when filling a 90-day supply.

Enhancements

- Applied Behavior Analysis for all PPOs will change from copay to deductible and coinsurance. The PPO deductible will be waived for in-network ABA.
- The CDHP deductible will be waived for in-network blood sugar, cholesterol and blood clotting testing, when the tests meet certain criteria.

Other Insurance Updates for 2023

- Vision vendor will change to EyeMed for benefits starting Jan. 1, 2023.
 - The Basic and Expanded vision plans will be offered. There are benefit changes and enhancements to each plan. Premiums will increase in 2023.
 - If you are currently enrolled in vision coverage, you will automatically transfer to EyeMed for 2023 unless you cancel coverage during Annual Enrollment.
 - Go to the Vision newsletter section on page 9 or go to tn.gov/ParTNersForHealth under **Other Benefits** and click on **Vision** for details.
- All health plan members will get new medical insurance ID cards for 2023.

How to Enroll in Your Benefits

If you want to make changes, fill out the **Annual Enrollment application** found at the end of this newsletter. Submit it to Benefits Administration by mail or fax.

- Mailed applications must be postmarked no later than Oct. 28, 2022.
- Submit by fax at 615.741.8196 by Oct. 28, 2022, at 11:59 p.m. CT.

If you want to make changes to your insurance coverage online, you can use **Employee Self Service in Edison** at www.edison.tn.gov.

- Look for the green "Benefits Annual Enrollment" button.
- Log in to Edison using your Access ID. This is not your eight-digit Edison employee ID. To get your Access ID, go to www.edison.tn.gov, click the green "Benefits Annual Enrollment" button, and then click "Retrieve Access ID" button.
- All the insurance plans you are currently enrolled in, or that are available to you, are listed in Edison.
- You can enroll on your computer or mobile device. Use the web browser native to its operating system.
- In Edison, set up an account with a password, if you haven't done so. Find step-by-step login instructions at tn.gov/ParTNersForHealth under **Annual Enrollment** and then **About Enrollment**.

Important! You may have an old employee email address in Edison. If you try to reset your password to enroll, the password reset email may go to this old email account. If you do not receive an email after trying to set up your account, you can enroll by mailing or faxing the application found at the back of this newsletter or call Edison at 866.376.0104 for help with your password reset.

If you don't want to make any changes in your enrollment, NO ACTION is needed on your part.

If you are adding eligible dependents (spouse and/or eligible children) who have not been previously covered (this includes a spouse who has not been covered for six months or more):

- You can add them to medical coverage if you (the retiree) will be covered on the medical plan as of Jan. 1, 2023.
- You may be eligible to add a dependent who is covered on medical to the retiree vision plan. Eligible dependents may also be added to your retiree dental coverage.
- If the dependent is not currently covered on the medical plan, we need documents to prove their relationship to you. Find a list of required documents online at tn.gov/ParTNersforHealth under Forms and then Health, Dental, Vision, Disability. [Click on Dependent Eligibility Verification Documents.](#)
- Upload documents in Edison if enrolling through ESS or mail copies along with your annual enrollment application or fax to 615.741.8196. You must include your Edison employee ID or Social Security number on each document.
- Dependent verification documents **MUST** be submitted by the Annual Enrollment deadline of Oct. 28, 2022.

IN-NETWORK 2023 HEALTH PLAN COMPARISON

Your Costs for Covered Services	Premier PPO	Standard PPO	Limited PPO LE/LG	CDHP/HSA ST/HE	Local CDHP/HSA LE/LG
Annual Deductible					
Ret only	\$750	\$1,300	\$1,800	\$1,700	\$2,000
Ret + Child(ren)	\$1,125	\$1,950	\$2,500	\$3,400	\$4,000
Ret + Spouse	\$1,500	\$2,600	\$2,800	\$3,400	\$4,000
Ret + Spouse + Child(ren)	\$1,875	\$3,250	\$3,600	\$3,400	\$4,000
Maximum Out-of-Pocket					
Ret only	\$3,600	\$4,400	\$6,800	\$2,800	\$5,000
Ret + Child(ren)	\$5,400	\$6,600	\$13,600	\$5,600	\$10,000
Ret + Spouse	\$7,200	\$8,800	\$13,600	\$5,600	\$10,000
Ret + Spouse + Child(ren)	\$9,000	\$11,000	\$13,600	\$5,600	\$10,000
Preventive Care	No charge	No charge	No charge	No charge	No charge
Primary Care/ Convenience Care	\$25 copay	\$30 copay	\$35 copay	20% coinsurance after deductible	30% coinsurance after deductible
Specialist/Urgent Care	\$45 copay	\$50 copay	\$55 copay	20% coinsurance after deductible	30% coinsurance after deductible
Telehealth (approved carrier program only)	\$15 copay	\$15 copay	\$15 copay	20% coinsurance after deductible	30% coinsurance after deductible
Behavioral Health and Substance Use (and virtual visits)	\$25 copay	\$30 copay	\$35 copay	20% coinsurance after deductible	30% coinsurance after deductible
Routine X-Rays, Labs and Diagnostics	15% coinsurance	20% coinsurance	30% coinsurance	20% coinsurance after deductible	30% coinsurance after deductible
Pharmacy (30-day supply)					
generic	\$7 copay	\$14 copay	\$14 copay	20% coinsurance after deductible	30% coinsurance after deductible
preferred brand	\$40 copay	\$50 copay	\$60 copay		
non-preferred brand	\$90 copay	\$100 copay	\$110 copay		
specialty tier 1 (generics)	20% coinsurance min \$100; max \$200	20% coinsurance min \$100; max \$200	20% coinsurance min \$100; max \$200		
specialty tier 2 (all brands)	30% coinsurance min \$200; max \$400	30% coinsurance min \$200; max \$400	30% coinsurance min \$200; max \$400		
Hospital/Facility Services	15% coinsurance after deductible	20% coinsurance after deductible	30% coinsurance after deductible	20% coinsurance after deductible	30% coinsurance after deductible
Maternity	15% coinsurance after deductible	20% coinsurance after deductible	30% coinsurance after deductible	20% coinsurance after deductible	30% coinsurance after deductible
Outpatient Physical, Speech and Occupational Therapy	15% coinsurance	20% coinsurance	30% coinsurance	20% coinsurance after deductible	30% coinsurance after deductible
Emergency Room Visit	15% coinsurance after deductible	20% coinsurance after deductible	30% coinsurance after deductible	30% coinsurance after deductible	30% coinsurance after deductible

Covered services: Covered services are generally the same whether you choose BlueCross BlueShield or Cigna. For some procedures, different medical criteria may apply based on the carrier you select. For detailed information on covered services, exclusions and how the plans work, view the BCBS or Cigna Member Handbook and your Plan Document, available at tn.gov/PartnersForHealth on the **Publications** page. If you have questions about your benefits or medical criteria for a specific service, contact the carriers' member services.

Learn More about Your Health Plan Carrier Networks at
tn.gov/PartnersForHealth

Go to **Health Options** and [click on Carrier Information](#) for network hospital lists and directories.

Find a complete health plan comparison chart, as well as dental and vision comparisons, by [clicking on Publications](#). On this page, go to **Insurance Comparison Charts**.

Get Help with Your Enrollment

Find step-by-step enrollment login instructions at tn.gov/ParTNersForHealth under **Annual Enrollment** and [click on Enrollment Materials](#).

For password reset help, call Edison at 866.376.0104.

Watch videos on how to log in, set up your Edison password and more! Go to tn.gov/ParTNersForHealth under **Annual Enrollment** and [click on About Enrollment](#).

If you revise or cancel enrollment:

If you decline enrollment on the retiree group health plan for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, subject to retiree group health eligibility criteria, you may be able to enroll in this plan if eligibility for that other coverage is lost (or if employer contribution toward the other coverage ends). However, you must request enrollment within 60 days after the other coverage ends (or after the employer stops contributing toward the other coverage).

In addition, if you have a new dependent as a result of marriage, birth, adoption or placement for adoption, you may be able to enroll. However, you must request enrollment within 30 days after the marriage, birth, adoption or placement for adoption.

To request special enrollment or obtain more information, contact Benefits Administration. Please note that any future enrollment request will be subject to plan provisions in effect at the time of the request.

Health Plan Options

You have a choice of health plans from ParTNers for Health. Eligible preventive care is free with all plans if you use an in-network provider. Go to **Health Options** and [click on Health](#) for plan option details at www.tn.gov/PartnersForHealth.

Member copays are staying the same in 2023, but there are out-of-pocket cost changes for deductibles, coinsurance, emergency room visits, cost-sharing for specialty drugs and other costs. See details in the comparison chart at tn.gov/ParTNersForHealth, and [click on the Enrollment Materials webpage](#).

STATE AND HIGHER EDUCATION 2023 RETIREES MONTHLY HEALTH PREMIUMS ALL REGIONS

	AT LEAST 30 YEARS OF SERVICE		20-29 YEARS OF SERVICE		LESS THAN 20 YEARS OF SERVICE	
	BCBST NETWORK S & CIGNA LOCALPLUS	BCBST NETWORK P & CIGNA OPEN ACCESS	BCBST NETWORK S & CIGNA LOCALPLUS	BCBST NETWORK P & CIGNA OPEN ACCESS	BCBST NETWORK S & CIGNA LOCALPLUS	BCBST NETWORK P & CIGNA OPEN ACCESS
PREMIER PPO						
Retiree Only	\$173.60	\$238.60	\$260.40	\$325.40	\$347.20	\$412.20
Retiree + Child(ren)	\$260.20	\$325.20	\$390.30	\$455.30	\$520.40	\$585.40
Retiree + Spouse	\$381.80	\$511.80	\$572.70	\$702.70	\$763.60	\$893.60
Retiree + Spouse + Child(ren)	\$451.00	\$581.00	\$676.50	\$806.50	\$902.00	\$1,032.00
Spouse Only	\$208.20	\$273.20	\$312.30	\$377.30	\$416.40	\$481.40
Child(ren) Only	\$86.80	\$151.80	\$130.20	\$195.20	\$173.60	\$238.60
Spouse + Child(ren)	\$277.40	\$342.40	\$416.10	\$481.10	\$554.80	\$619.80
STANDARD PPO						
Retiree Only	\$161.20	\$226.20	\$241.80	\$306.80	\$322.40	\$387.40
Retiree + Child(ren)	\$241.80	\$306.80	\$362.70	\$427.70	\$483.60	\$548.60
Retiree + Spouse	\$354.60	\$484.60	\$531.90	\$661.90	\$709.20	\$839.20
Retiree + Spouse + Child(ren)	\$419.00	\$549.00	\$628.50	\$758.50	\$838.00	\$968.00
Spouse Only	\$193.40	\$258.40	\$290.10	\$355.10	\$386.80	\$451.80
Child(ren) Only	\$80.60	\$145.60	\$120.90	\$185.90	\$161.20	\$226.20
Spouse + Child(ren)	\$257.80	\$322.80	\$386.70	\$451.70	\$515.60	\$580.60
CDHP/HSA						
Retiree Only	\$153.00	\$218.00	\$229.50	\$294.50	\$306.00	\$371.00
Retiree + Child(ren)	\$229.40	\$294.40	\$344.10	\$409.10	\$458.80	\$523.80
Retiree + Spouse	\$336.40	\$466.40	\$504.60	\$634.60	\$672.80	\$802.80
Retiree + Spouse + Child(ren)	\$397.60	\$527.60	\$596.40	\$726.40	\$795.20	\$925.20
Spouse Only	\$183.60	\$248.60	\$275.40	\$340.40	\$367.20	\$432.20
Child(ren) Only	\$76.40	\$141.40	\$114.60	\$179.60	\$152.80	\$217.80
Spouse + Child(ren)	\$244.60	\$309.60	\$366.90	\$431.90	\$489.20	\$554.20

Here is a comparison of the plans:

- **Premier Preferred Provider Organization:** Higher monthly premium, lower out-of-pocket costs (deductible, copays and coinsurance).
- **Standard Preferred Provider Organization:** Lower monthly premium than Premier PPO, higher out-of-pocket costs.
- **Limited Preferred Provider Organization** (local education/local government retirees only): Lower monthly premiums than the other PPOs, higher out-of-pocket costs compared to the other PPOs.
- **CDHP/HSA (state/higher education retirees only) and Local CDHP/HSA (local education/local government retirees only):** Lowest monthly premium. In-network preventive care has no member cost. For most other services, you pay your deductible first before the plan pays anything. Then you pay coinsurance, not copays.

How to Enroll

If you want to change your health insurance option, carrier and network, submit the paper form found at the end of this newsletter or enroll in Edison at www.edison.tn.gov

Learn More about Health Savings Accounts

HSA IRS maximum contributions are increasing in 2023

There are limits on how much money you can put in your HSA each year:

- \$3,850 for retiree-only coverage in 2023;
- \$7,750 for all other family tiers in 2023; and
- Members 55+ can add \$1,000 more each year.

Important! With the HSA, your total contribution is not available up-front. If you enroll in a CDHP/HSA, you can contribute after-tax funds to your HSA by check or by linking your bank account to your HSA. You may only spend the money that is available in your HSA at the time of service or care.

Debit card: Newly enrolled CDHP/HSA members get a debit card from Optum Financial to use for qualified expenses. Current CDHP/HSA members who stay enrolled will use their same debit card.

HSA and FSA restrictions: There are certain restrictions about who can enroll in a plan with an HSA. If you enroll in the CDHP/HSA, you CANNOT enroll in another medical plan, including any government plan, among other restrictions. If you enroll in the CDHP/HSA, you and your spouse CANNOT have a medical flexible spending account or health reimbursement account. Instead you can enroll in a limited purpose FSA for dental and vision costs.

If you enroll in Social Security at age 65, you'll automatically be enrolled in Medicare Part A. If enrolled in a CDHP, this may have tax consequences and affect your HSA contribution. **Consult your tax advisor for advice.**

Go to tn.gov/ParTNersForHealth, under Health Options and click on CDHP/HSA Insurance Options for Certain Restrictions, 2023 maximum contribution amounts, debit card details and more.

LOCAL EDUCATION 2023 SUPPORT STAFF RETIREES MONTHLY HEALTH PREMIUMS ALL REGIONS

	BCBST NETWORK S & CIGNA LOCALPLUS	BCBST NETWORK P & CIGNA OPEN ACCESS
PREMIER PPO		
Retiree Only	\$683.00	\$748.00
Retiree + Child(ren)	\$1,126.00	\$1,191.00
Retiree + Spouse	\$1,469.00	\$1,599.00
Retiree + Spouse + Child(ren)	\$1,775.00	\$1,905.00
Spouse Only	\$786.00	\$851.00
Child(ren) Only	\$443.00	\$508.00
Spouse + Child(ren)	\$1,092.00	\$1,157.00
STANDARD PPO		
Retiree Only	\$635.00	\$700.00
Retiree + Child(ren)	\$1,046.00	\$1,111.00
Retiree + Spouse	\$1,364.00	\$1,494.00
Retiree + Spouse + Child(ren)	\$1,649.00	\$1,779.00
Spouse Only	\$730.00	\$795.00
Child(ren) Only	\$411.00	\$476.00
Spouse + Child(ren)	\$1,015.00	\$1,080.00
LOCAL CDHP/HSA		
Retiree Only	\$523.00	\$588.00
Retiree + Child(ren)	\$863.00	\$928.00
Retiree + Spouse	\$1,125.00	\$1,255.00
Retiree + Spouse + Child(ren)	\$1,360.00	\$1,490.00
Spouse Only	\$602.00	\$667.00
Child(ren) Only	\$339.00	\$404.00
Spouse + Child(ren)	\$837.00	\$902.00
LIMITED PPO		
Retiree Only	\$600.00	\$665.00
Retiree + Child(ren)	\$990.00	\$1,055.00
Retiree + Spouse	\$1,291.00	\$1,421.00
Retiree + Spouse + Child(ren)	\$1,561.00	\$1,691.00
Spouse Only	\$691.00	\$756.00
Child(ren) Only	\$389.00	\$454.00
Spouse + Child(ren)	\$960.00	\$1,025.00

CONTACT OUR CARRIERS

Contact BlueCross or Cigna if you have questions about a provider or hospital in a network:

BlueCross, 800.558.6213, M-F 7 a.m. - 5 p.m. CT,
bcbst.com/members/tn_state/

Cigna, 800.997.1617, 24/7, cigna.com/stateoftn

Health Plan Carrier Networks

You can choose from the following four carrier networks for your medical care:

Narrow Networks (same as 2022) include many providers, hospitals and facilities throughout Tennessee and across the country. Not all providers and hospitals are in narrow networks which helps keep premiums and claims costs low.

No premium surcharge is applied to the narrow networks. Here are the narrow networks:

- **BlueCross BlueShield Network S**
- **Cigna LocalPlus**

Broad Networks (same as 2022) cost an additional \$65 per month for the retiree only and retiree + child(ren) tiers and an additional \$130 per month for the retiree + spouse and retiree + spouse +

LOCAL EDUCATION 2023 TEACHER RETIREES MONTHLY HEALTH PREMIUMS ALL REGIONS

	AT LEAST 30 YEARS OF SERVICE		20-29 YEARS OF SERVICE		LESS THAN 20 YEARS OF SERVICE	
	BCBST NETWORK S & CIGNA LOCALPLUS	BCBST NETWORK P & CIGNA OPEN ACCESS	BCBST NETWORK S & CIGNA LOCALPLUS	BCBST NETWORK P & CIGNA OPEN ACCESS	BCBST NETWORK S & CIGNA LOCALPLUS	BCBST NETWORK P & CIGNA OPEN ACCESS
PREMIER PPO						
Retiree Only	\$375.65	\$440.65	\$443.95	\$508.95	\$512.25	\$577.25
Retiree + Child(ren)	\$619.30	\$684.30	\$731.90	\$796.90	\$844.50	\$909.50
Retiree + Spouse	\$807.95	\$937.95	\$954.85	\$1,084.85	\$1,101.75	\$1,231.75
Retiree + Spouse + Child(ren)	\$976.25	\$1,106.25	\$1,153.75	\$1,283.75	\$1,331.25	\$1,461.25
Spouse Only	\$432.30	\$497.30	\$510.90	\$575.90	\$589.50	\$654.50
Child(ren) Only	\$243.65	\$308.65	\$287.95	\$352.95	\$332.25	\$397.25
Spouse + Child(ren)	\$600.60	\$665.60	\$709.80	\$774.80	\$819.00	\$884.00
STANDARD PPO						
Retiree Only	\$349.25	\$414.25	\$412.75	\$477.75	\$476.25	\$541.25
Retiree + Child(ren)	\$575.30	\$640.30	\$679.90	\$744.90	\$784.50	\$849.50
Retiree + Spouse	\$750.20	\$880.20	\$886.60	\$1,016.60	\$1,023.00	\$1,153.00
Retiree + Spouse + Child(ren)	\$906.95	\$1,036.95	\$1,071.85	\$1,201.85	\$1,236.75	\$1,366.75
Spouse Only	\$401.50	\$466.50	\$474.50	\$539.50	\$547.50	\$612.50
Child(ren) Only	\$226.05	\$291.05	\$267.15	\$332.15	\$308.25	\$373.25
Spouse + Child(ren)	\$558.25	\$623.25	\$659.75	\$724.75	\$761.25	\$826.25
LOCAL CDHP/HSA						
Retiree Only	\$287.65	\$352.65	\$339.95	\$404.95	\$392.25	\$457.25
Retiree + Child(ren)	\$474.65	\$539.65	\$560.95	\$625.95	\$647.25	\$712.25
Retiree + Spouse	\$618.75	\$748.75	\$731.25	\$861.25	\$843.75	\$973.75
Retiree + Spouse + Child(ren)	\$748.00	\$878.00	\$884.00	\$1,014.00	\$1,020.00	\$1,150.00
Spouse Only	\$331.10	\$396.10	\$391.30	\$456.30	\$451.50	\$516.50
Child(ren) Only	\$186.45	\$251.45	\$220.35	\$285.35	\$254.25	\$319.25
Spouse + Child(ren)	\$460.35	\$525.35	\$544.05	\$609.05	\$627.75	\$692.75
LIMITED PPO						
Retiree Only	\$330.00	\$395.00	\$390.00	\$455.00	\$450.00	\$515.00
Retiree + Child(ren)	\$544.50	\$609.50	\$643.50	\$708.50	\$742.50	\$807.50
Retiree + Spouse	\$710.05	\$840.05	\$839.15	\$969.15	\$968.25	\$1,098.25
Retiree + Spouse + Child(ren)	\$858.55	\$988.55	\$1,014.65	\$1,144.65	\$1,170.75	\$1,300.75
Spouse Only	\$380.05	\$445.05	\$449.15	\$514.15	\$518.25	\$583.25
Child(ren) Only	\$213.95	\$278.95	\$252.85	\$317.85	\$291.75	\$356.75
Spouse + Child(ren)	\$528.00	\$593.00	\$624.00	\$689.00	\$720.00	\$785.00

child(ren) tiers. This cost is added to your monthly premium. In a broad network, you may also pay more per claim because the costs for services in these networks are generally higher than the narrow networks. Here are the broad networks:

- **BlueCross BlueShield Network P**
- **Cigna Open Access Plus**

It's important to check the networks carefully. The network choice you make during Annual Enrollment is for the entire 2023 calendar

year (Jan. 1 until Dec. 31). You may be able to make changes allowed by the plan if you have a qualifying event.

Network providers and facilities can and do change. Benefits Administration cannot guarantee all providers and hospitals in a network at the beginning of the year will stay in that network for the entire year. **A provider or hospital leaving a network is not a qualifying event and does not allow you to make changes to your insurance choices.**

LOCAL GOVERNMENT 2023 RETIREES MONTHLY HEALTH PREMIUMS ALL REGIONS

	LEVEL 1		LEVEL 2		LEVEL 3	
	BCBST NETWORK S & CIGNA LOCALPLUS	BCBST NETWORK P & CIGNA OPEN ACCESS	BCBST NETWORK S & CIGNA LOCALPLUS	BCBST NETWORK P & CIGNA OPEN ACCESS	BCBST NETWORK S & CIGNA LOCALPLUS	BCBST NETWORK P & CIGNA OPEN ACCESS
PREMIER PPO						
Retiree Only	\$787.00	\$852.00	\$827.00	\$892.00	\$866.00	\$931.00
Retiree + Child(ren)	\$1,221.00	\$1,286.00	\$1,282.00	\$1,347.00	\$1,344.00	\$1,409.00
Retiree + Spouse	\$1,771.00	\$1,901.00	\$1,860.00	\$1,990.00	\$1,948.00	\$2,078.00
Retiree + Spouse + Child(ren)	\$2,127.00	\$2,257.00	\$2,233.00	\$2,363.00	\$2,339.00	\$2,469.00
Spouse Only	\$984.00	\$1,049.00	\$1,033.00	\$1,098.00	\$1,082.00	\$1,147.00
Child(ren) Only	\$434.00	\$499.00	\$456.00	\$521.00	\$478.00	\$543.00
Spouse + Child(ren)	\$1,339.00	\$1,404.00	\$1,406.00	\$1,471.00	\$1,473.00	\$1,538.00
STANDARD PPO						
Retiree Only	\$724.00	\$789.00	\$760.00	\$825.00	\$796.00	\$861.00
Retiree + Child(ren)	\$1,123.00	\$1,188.00	\$1,179.00	\$1,244.00	\$1,235.00	\$1,300.00
Retiree + Spouse	\$1,628.00	\$1,758.00	\$1,710.00	\$1,840.00	\$1,791.00	\$1,921.00
Retiree + Spouse + Child(ren)	\$1,955.00	\$2,085.00	\$2,053.00	\$2,183.00	\$2,150.00	\$2,280.00
Spouse Only	\$905.00	\$970.00	\$950.00	\$1,015.00	\$995.00	\$1,060.00
Child(ren) Only	\$399.00	\$464.00	\$419.00	\$484.00	\$439.00	\$504.00
Spouse + Child(ren)	\$1,231.00	\$1,296.00	\$1,293.00	\$1,358.00	\$1,354.00	\$1,419.00
LOCAL CDHP/HSA						
Retiree Only	\$543.00	\$608.00	\$570.00	\$635.00	\$597.00	\$662.00
Retiree + Child(ren)	\$842.00	\$907.00	\$884.00	\$949.00	\$926.00	\$991.00
Retiree + Spouse	\$1,221.00	\$1,351.00	\$1,282.00	\$1,412.00	\$1,343.00	\$1,473.00
Retiree + Spouse + Child(ren)	\$1,466.00	\$1,596.00	\$1,539.00	\$1,669.00	\$1,612.00	\$1,742.00
Spouse Only	\$678.00	\$743.00	\$712.00	\$777.00	\$746.00	\$811.00
Child(ren) Only	\$299.00	\$364.00	\$314.00	\$379.00	\$329.00	\$394.00
Spouse + Child(ren)	\$923.00	\$988.00	\$969.00	\$1,034.00	\$1,015.00	\$1,080.00
LIMITED PPO						
Retiree Only	\$588.00	\$653.00	\$617.00	\$682.00	\$647.00	\$712.00
Retiree + Child(ren)	\$912.00	\$977.00	\$958.00	\$1,023.00	\$1,003.00	\$1,068.00
Retiree + Spouse	\$1,323.00	\$1,453.00	\$1,389.00	\$1,519.00	\$1,455.00	\$1,585.00
Retiree + Spouse + Child(ren)	\$1,588.00	\$1,718.00	\$1,668.00	\$1,798.00	\$1,747.00	\$1,877.00
Spouse Only	\$735.00	\$800.00	\$772.00	\$837.00	\$808.00	\$873.00
Child(ren) Only	\$324.00	\$389.00	\$340.00	\$405.00	\$357.00	\$422.00
Spouse + Child(ren)	\$1,000.00	\$1,065.00	\$1,050.00	\$1,115.00	\$1,100.00	\$1,165.00

Included Health Benefits

Along with your medical coverage, your health plan provides the following benefits: **pharmacy, behavioral health and Employee Assistance Program services** and a **wellness program**. Learn about benefits such as **telehealth**, the **Diabetes Prevention Program** and more by going to the **Included Benefits Extras** webpage: www.tn.gov/partnersforhealth/health-options/included-benefits-extras.html

Pharmacy

Managed by CVS Caremark

All health plans include full prescription drug benefits.

- Your health plan determines your out-of-pocket prescription costs.
- How much you pay depends on three things:
 - the drug tier – if you choose a generic, preferred brand, nonpreferred brand or specialty drug (two different cost tiers);
 - the day supply you receive – 30-day (or <30) or a 90-day (>31) supply; and
 - where you fill your prescription – at a retail, Retail-90 or mail order pharmacy.

Learn more about prescription drug benefits, vaccines and how to save money at tn.gov/ParTNersForHealth under **Health Options** and [click on Pharmacy](#).

Contact: **CVS Caremark**, 877.522.8679, 24/7, info.caremark.com/stateoftn

Behavioral Health

Managed by Optum

All health plans include access to outpatient and facility-based behavioral health and substance use disorder services.

Options **include in-person** and **virtual visits, Talkspace** online therapy and lower-cost substance use services (for PPO plans, no coinsurance after deductible for CDHP plans). Learn more at tn.gov/ParTNersForHealth under **Health Options, Behavioral Health**.

For all programs and services and help finding a provider, contact **Optum** at 855-HERE4TN (855.437.3486), 24/7 or visit HERE4TN.com.

Employee Assistance Program

Managed by Optum

EAP services are available to all retirees enrolled in health insurance and their benefits-eligible dependents, even if they are not enrolled in a health plan.

Specialists with Optum are available 24/7 through in-person and virtual visits to help with stress, legal, financial, mediation and work/life issues. Get up to five counseling visits, per problem, per year, per individual at no cost to you. Your benefits also include **Sanvello**, an on-demand mobile app to help with stress, anxiety and depression, and for those EAP-eligible and working, the **Take Charge at Work** coaching program.

Learn more at tn.gov/ParTNersForHealth under **Other Benefits** and [click on EAP](#).

For all EAP programs and services and help finding a provider, contact **Optum** 24/7 at 855-HERE4TN (855.437.3486) or HERE4TN.com

Wellness Program

Managed by ActiveHealth

All health plan members have access to the ActiveHealth online resources including a health assessment, health education and digital coaching. The Disease Management program is also available to enrolled health plan members and their adult dependents who qualify.

Learn more at tn.gov/ParTNersForHealth under **Other Benefits** and [click on Wellness](#).

Contact: **ActiveHealth**, 888.741.3390, M-F, 8 a.m. - 8 p.m. CT, go.activehealth.com/wellnesstn

Dental and Vision

Along with health insurance, ParTNers for Health offers dental and vision benefits, subject to eligibility. These benefits provide additional coverage for you and your eligible dependents.

Dental Insurance

Offered through Cigna and Delta Dental

ParTNers for Health offers two different dental plans to eligible retirees.* You pay the full monthly premium.

Find 2023 dental premiums at tn.gov/ParTNersForHealth, click on [Premiums](#) and go to **Other Insurance Coverages – Dental**.

Cigna: Dental Health Maintenance Organization – Prepaid Provider

- Premiums will stay the same in 2023.
- You are required to select and use a Cigna network general dentist. You must notify Cigna of your choice. See the list of dentists at cigna.com/stateoftn.
- Members pay copays. Review the Patient Charge Schedule at tn.gov/ParTNersForHealth under Publications and Dental HMO – Prepaid Provider before having procedures performed. Lab fees may apply for some procedures.
- Completion of crowns, bridges, dentures, implants, root canals or orthodontic treatment already in progress on a new member's effective date will not be covered.
- To learn about all DHMO benefits, find the Cigna DHMO handbook at tn.gov/ParTNersForHealth under Publications and Dental HMO – Prepaid Provider.

2023 MONTHLY DENTAL PREMIUMS FOR ALL PLANS

	CIGNA PREPAID PLAN	DELTA DENTAL DPPO PLAN
Retiree Only	\$15.23	\$26.60
Retiree + Child(ren)	\$31.63	\$60.09
Retiree + Spouse	\$27.01	\$52.44
Retiree + Spouse + Child(ren)	\$37.10	\$94.95

Delta Dental: Dental Preferred Provider Organization

- Premiums will stay the same in 2023.
- Use any dentist but save money staying in network. Review Delta Dental's DPPO network by going to tennessee.deltadental.com/stateoftn/
- Discuss any estimated expenses with your dentist or specialist. Charges for dental procedures are subject to change. Members pay deductibles and co-insurance.
- Waiting periods apply to select procedures.
- To learn about all DPPO benefits, find the Delta Dental DPPO handbook at tn.gov/ParTNersForHealth under Publications and Dental PPO.

Find a comparison of the two plans at tn.gov/ParTNersForHealth, under **Other Benefits** and [click on Dental](#).

Contact: Cigna, 800.997.1617, 24/7, cigna.com/stateoftn

Contact: Delta Dental, 800.552.2498, M-F, 7 a.m.-5 p.m. CT, DeltaDentalTN.com/StateofTN

** If you are a Tennessee Consolidated Retirement System or Optional Retirement Plan retiree, you may be eligible for dental insurance.*

Vision Insurance

Offered through EyeMed - NEW vendor for 2023

Vision benefits are offered through EyeMed to eligible retirees.** You pay the full monthly premium. Subject to eligibility, if you are currently enrolled in a vision plan, you'll remain enrolled in your current plan unless you cancel coverage during Annual Enrollment. The vendor will automatically change to EyeMed effective Jan. 1, 2023.

Premiums will increase in 2023, and there are benefit changes and enhancements. You'll save money when using in-network providers.

Find 2023 vision premiums at tn.gov/ParTNersForHealth under **Premiums** and go to **Other Insurance Coverages – Vision**. Find the EyeMed handbook under [Publications](#) and **Vision Insurance**.

Choose from two vision options, the **Basic Plan** or **Expanded Plan**.

All members in both vision plans get:

- Routine eye exam every calendar year
- Choice of eyeglass lenses or contact lenses once every calendar year
- Low vision evaluation and aids available once every two calendar years

Basic Plan: Pays for your eye exam after you pay a \$10 copay and provides various allowances (dollar amounts) for materials such as eyeglass frames and contact lenses

- NEW! In-network retail frames allowance will increase.

Expanded Plan: Free routine eye exam annually. Includes greater allowances versus the Basic Plan.

- NEW! Frames now available once every calendar year.

In both plans, you pay copays or when the cost exceeds the allowed dollar amount, you pay the cost of materials. **Some allowances and copays are changing in both plans.** Discounts may be available for select materials.

Find a comparison of both plans at tn.gov/ParTNersForHealth under **Other Benefits** and [Vision](#).

Contact: **EyeMed**, 855.779.5046, Mon-Sat., 7 a.m. – 10 p.m. CT, Sun. 10 a.m. – 7 p.m. CT, eyemed.com/stateoftn

*** If you are a Tennessee Consolidated Retirement System or Optional Retirement Plan retiree, you may be eligible for vision insurance. To enroll in vision, you must be enrolled in group health coverage. Dependents enrolled in spouse only, spouse + child(ren) or child(ren) only group health coverage are eligible to enroll in dependent only vision coverage if the retiree is no longer enrolled in the group health plan.*

2023 MONTHLY VISION PREMIUMS FOR ALL PLANS

	BASIC PLAN	EXPANDED PLAN
Retiree Only	\$3.18	\$6.30
Retiree + Child(ren)	\$6.35	\$12.60
Retiree + Spouse	\$6.03	\$11.98
Retiree + Spouse + Child(ren)	\$9.33	\$18.54
Spouse Only	\$3.18	\$6.30
One Child Only	\$3.18	\$6.30
Two or More Children Only	\$6.35	\$12.60
Spouse + Children Only	\$6.35	\$12.60

Legal Notices

Anti-Discrimination and Civil Rights Compliance

Benefits Administration does not support any practice that excludes participation in programs or denies the benefits of such programs on the basis of race, color, national origin, sex, age or disability in its health programs and activities. If you have a complaint regarding discrimination, please call 615- 532-9617.

If you think you have been treated in a different way for these reasons, please mail this information to the Civil Rights Coordinator for the Department of Finance and Administration:

- Your name, address and phone number. You must sign your name. (If you write for someone else, include your name, address, phone number and how you are related to that person, for instance wife, lawyer or friend.)
- The name and address of the program you think treated you in a different way.
- How, why and when you think you were treated in a different way.
- Any other key details.

Mail to: State of Tennessee, Civil Rights Coordinator, Department of Finance and Administration, Office of General Counsel, 20th Floor, 312 Rosa L. Parks Avenue, William R. Snodgrass Tennessee Tower, Nashville, TN 37243.

Need free language help? Have a disability and need free help or an auxiliary aid or service, for instance Braille or large print? Please call 615-532-9617.

You may also contact the: U.S. Department of Health & Human Services – Region IV Office for Civil Rights, Sam Nunn Atlanta Federal Center, Suite 16T70, 61 Forsyth Street, SW, Atlanta, Georgia 30303-8909 or 1-800-368-1019 or TTY/TDD at 1-800-537-7697 **OR** U. S. Office for Civil Rights, Office of Justice

Programs, U. S. Department of Justice, 810 7th Street, NW, Washington, DC

20531 **OR** Tennessee Human Rights Commission, 312 Rosa Parks Avenue, 23rd Floor, William R. Snodgrass Tennessee Tower, Nashville, TN 37243.

If you speak a language other than English, help in your language is available for free.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-576-0029 (TTY: 1-800-848-0298).

المساعدة اللغوية وتتوافر لك بالمجان. اتصل برقم 1-800-848-0298 هاتف الصم والبكم. رقم 866 1-576-0029 ملحوظة: إذا كنت تتحدث انكليز اللغة، فإن خدمات

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-866-576-0029 (TTY:1-800-848-0298)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-866-576-0029 (TTY:1-800-848-0298).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-866-576-0029 (TTY: 1-800-848-0298) 번으로 전화해 주십시오.

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-866-576-0029 (ATS : 1-800-848-0298).

Ni songen mwohmw ohte, komw pahn sohte anahne kawehwe mesen nting me koatoantoal kan ahpw wasa me ntingie [Lokaiahn Pohnpei] komw kalan- gan oh ntingidieng ni lokaiahn Pohnpei. Call 1-866-576-0029 (TTY: 1-800-848- 0298).

ማስታወሻ: የጥናትና ቋንቋ አገልግሎት ለሆነ የትርጉም አርዳታ ድርጅቶች፣ በነጻ ሊያገዝዎት ተዘጋጅተዋል። ወደ ሚክሳተሎቱር ይደውሉ 1-866-576-0029 (ማስማት ለተሰናኙው: 1-800-848-0298)።

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-866-576-0029 (TTY: 1-800-848-0298).

सुचना: જો તમે ગુજરાતી બોલતા છો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-866-576-0029 (TTY:1-800-848-0298)

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。866-576-0029 (TTY:1-800-848-0298) まで、お電話にてご連絡ください。

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-866-576-0029 (TTY: 1-800-848-0298).

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-866-576-0029 (TTY: 1-800-848-0298) पर कल करें। ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-866-576-0029 (телетайп: 1-800-848- 0298).

با تمام توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان بگسرید برای شما. (TTY: 866-576-0029) (1-800-848-0298) فراهم می باشد.

The Notice of Privacy Practice

Your health record contains personal information about you and your health. This information that may identify you and relates to your past, present or future physical or mental health or condition and related health care services is referred to as Protected Health Information (PHI). The Notice of Privacy Practices describes how we may use and disclose your PHI in accordance with applicable law, including the Health Insurance Portability and Accountability Act (HIPAA), including Privacy and Security Rules. The notice also describes your rights regarding how you may gain access to and control your PHI.

We are required by law to maintain the privacy of PHI and to provide you with notice of our legal duties and privacy practices with respect to PHI. We are required to abide by the terms of the Notice of Privacy Practices. The Notice of Privacy Practice is located on the Benefits Administration website at www.tn.gov/content/dam/tn/finance/fa-benefits/documents/hipaa.pdf. You may also request the notice in writing by emailing benefits.privacy@tn.gov.

Prescription Drug Coverage and Medicare

Medicare prescription drug coverage is available to everyone with Medicare. However, as a member of the State Group Insurance Program (SGIP) you have options for your drug coverage. For information about your current prescription drug coverage with the SGIP and your options under Medicare's prescription drug coverage, review this notice on the Benefits Administration website: [www.tn.gov/content/dam/tn/finance/fa-benefits/documents/medicare part d notice.pdf](http://www.tn.gov/content/dam/tn/finance/fa-benefits/documents/medicare_part_d_notice.pdf).

Summary of Benefits and Coverage

As required by law, a Summary of Benefits and Coverage is available which describes your 2023 health coverage options. The SBC is found at www.tn.gov/PartNersForHealth/summary-of-benefits-and-coverage on or after Sept. 1. The digital newsletter contains much of the same information. To get a SBC paper copy, free of charge, call 855.809.0071. Please include your name, complete mailing address and name of the SBCs you want: State and Higher Education Plan; Local Education Plan; or Local Government Plan.

Plan Document

The information contained in this newsletter provides a detailed overview of the benefits available to you through the State of Tennessee. More information is contained within the formal plan documents. If there is any discrepancy between the information in this newsletter and the formal plan documents, the plan documents will govern in all cases. You can find a copy on the Benefits Administration website at www.tn.gov/PartnersForHealth/publications/publications.html.

Other Publications

In addition to the documents mentioned above, the Benefits Administration website contains many other important publications, including, but not limited to, brochures and handbooks for medical, pharmacy, dental and vision and the brochure and handbook for the Supplemental Medical Insurance to Retirees with Medicare.

Notice Regarding Wellness Program

The ParTNers for Health Wellness Program is a voluntary wellness program. Local education, local government and retirees enrolled in health coverage have access to certain programs like disease management and the web portal. The program is administered according to federal rules permitting employer sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008 and the Health Insurance Portability and Accountability Act, as applicable, among others. If you choose to participate in the wellness program, you will be asked to complete a voluntary health questionnaire (assessment) that asks a series of questions about your health-related activities and behaviors and whether you have or had certain medical conditions (e.g., cancer, diabetes or heart disease). You are not required to complete the assessment or other medical examinations.

The information from your health questionnaire will be used to provide you with information to help you understand your current health and potential risks. It may also be used to offer you services through the wellness program such as Diabetes Prevention Program and other programs. You also are encouraged to share your results or concerns with your own doctor.

Protections from Disclosure of Medical Information

We are required by law to maintain the privacy and security of your personally identifiable health information (PHI). Although the wellness program and the State of Tennessee may use aggregate information it collects to design a program based on identified health risks in the workplace, the ParTNers for Health Wellness Program will never disclose any of your personal information either publicly or to your employer, except as necessary to respond to a request from you for a reasonable accommodation needed for you to participate in the wellness program, or as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your supervisors or managers and will never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. The only individual(s) who will receive your personally identifiable health information are the wellness vendor (nutritionists, nurses, nurse practitioners, registered dietitians, health coaches and other healthcare professionals) and their vendor partners (case managers with the medical and behavioral health vendors) in order to provide you with services under the wellness program.

In addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, information stored electronically will be encrypted and no information you provide as part of the wellness program will be used in making any employment decisions. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, you will be notified promptly.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact ParTNers for Health at partners.wellness@tn.gov. Here is the link to the wellness page:

www.tn.gov/content/tn/partnersforhealth/other-benefits/wellness-program.html