

Understanding Your Benefits On Your Paycheck And Benefit Summary

What We Will Cover Today

- Only Benefit Deductions
 - HEM
 - Opt Out
 - Surcharges
 - Other Benefits
 - PEBB Benefit Summary
- We will not cover
 - Amounts withheld for benefits
 - PERS
 - Vacation
 - Sick Leave
 - Taxes
 - Pay

Paycheck 101

My Paystubs

Employee Name	Pay Date	Total Net Deposit	Total Net Check	Total Net Deposit + Check
	01/01/2020	4,597.12	.00	4,597.12

STATE OF OREGON Contact your AGENCY PAYROLL OFFICE with questions
503.945.5634

Department of Administrative Services, 155 Cottage St. NE, Salem, OR 97301
Employer ID Number (EIN):

Period Ending	Pay Date	Payment #
12/31/2019	01/01/2020	

Earnings			Deductions		Employee Contributions		Employer	
Description	Hours	Rate	Amount	Vendor	Description	Current	YTD	Current
TOTAL-REG	176.00	8,143.80	8,143.80	LONGTERM DIS	90 DAY/60%	43.98	43.98	
HEM INCENT			17.50	DEF/COMP	PRE TAX	50.00	50.00	
GROSS PAY			8,161.30	FSA/HLTHCARE		60.00	60.00	
FED TAX			699.01	FSA ADM FEE	PRTX ADM FEE			2.95
OTT			7.43	DEP LIFE	5K/DEPNDT	1.29	1.29	
STATE TAX			525.00	DLT PRE DT5%	EMP&FAMILY	7.87		149.56
SOC SEC TAX			493.91	BASIC LIFE5%	PRETAX/5K	.05		.85
MEDICARE TAX			115.51	SHORTERM DIS	60% BENEFIT	56.19	56.19	
WBF TAX			1.69	PRSW 250 5%	EMP&FAMILY	105.50		2,194.53
EMPL DEDNS			1,721.65	EMP LF/35-39	045K PRETAX	3.21		
NET PAY ADJ			.02	EMP LF/35-39	415K POSTTAX	29.91	33.12	
NET DEPOSIT			4,597.12	SP/DP 40-44	POSTAX/20K	1.58	1.58	
NET CHECK			.00	VISION PLUS	EMP&FAMILY	17.29	17.29	
				VSP 5%	EMP&FAMILY	1.15		21.91

Are you looking at the correct paycheck?

Employee Name	Pay Date	Total Net Deposit	Total Net Check
	01/01/2020		.0

STATE OF OREGON Contact your A
Department of Administrative Services, 155 Cottage St. NE, Salem, OR 97301
Employer ID Number (EIN): 93-1070707

Period Ending	Pay Date				
12/31/2019	01/01/2020				
Earnings		Deductions			
Description	Hours	Rate	Amount	Vendor	Description

HEM

- You needed to do Open Enrollment during October
- You needed to select that you wanted to be a HEM Participant
- You needed to say that you completed two Health Actions
- You needed to complete your Health Assessment under your current PEBB medical plan as yourself (not a spouse) between September and October 2019
- If you didn't have a current PEBB medical plan you needed to call during September/October for an Access Code
- If you had a waiver for not completing the Health Assessment, this needed to be filed with PEBB during the month of October
- If your benefits started with an effective date on or after 11/1 you did not qualify for HEM for 2020 (you did receive the lower deductible)

What if I messed up on HEM?

- Not doing your Health Assessment is NOT CORRECTABLE
- Not participating during Open Enrollment is NOT CORRECTABLE
- Not doing Open Enrollment is NOT CORRECTABLE
- Not doing your Health Actions is NOT CORRECTABLE

- Sorry folks, if any of the above was missed you will have a higher deductible and not receive the \$17.50 per month HEM incentive.
- Your next opportunity to participate is next year during Open Enrollment.

My Paystubs

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	01/01/2020	4,597.12	.00	4,597.12

STATE OF OREGON				Contact your AGENCY PAYROLL OFFICE with questions				
Department of Administrative Services, 155 Cottage St. NE, Salem, OR 97301				503.945.5634				
Employer ID Number ()								
Period Ending		Pay Date		Payment #				
12/31/2019		01/01/2020						
Earnings				Deductions		Employee Contributions		Employer
Description	Hours	Rate	Amount	Vendor	Description	Current	YTD	Current
TOTAL REG	178.00	8,143.80	8,143.80	LONGTERM DIS	90 DAY/60%	43.98	43.98	
HEM INCENT			17.50	DIS/COMP	PRE TAX	50.00	50.00	
GROSS PAY			8,161.30	FSA/HLTHCARE		60.00	60.00	
FED TAX			699.01	FSA ADM FEE	PRTX ADM FEE			2.95
OTT			7.43	DEP LIFE	5K/DEPNDD	1.29	1.29	
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NET CHECK			.00	VISION PLUS	EMP&FAMILY	17.29	17.29	
				VSP 5%	EMP&FAMILY	1.15		21.91

What if I did my Health Assessment and the HEM incentive isn't on my paycheck?

- www.pebbenroll.com
- Look at your PEBB Benefit Summary
- If you see the following PEBB has record of your Health Assessment completion:

Plan	Coverage Tier	Effect. Date	End Date	Ti
Medical Prescience PEBB Statewide Plan	Employee, Spouse & Children	01-01-2020		
Health Engagement Model HEM Participant	Employee Only	01-01-2020		
Vision VSP PLUS Plan (includes VSP Vision Service Plan)	Employee, Spouse & Children	01-01-2020		

- Contact you payroll office and get the incentive added to your paycheck.
- PEBB cannot fix this; only your payroll can fit it

What if I did my Health Assessment and PEBB Benefit Summary doesn't reflect it?

- If you see the following PEBB does not have record of your Health Assessment completion:
- Find a copy of your September/October 2019 Health Assessment and turn this in to PEBB
- PEBB will verify this Health Assessment with your carrier to make sure it is authentic and if appropriate update your HEM

Plan	Coverage Tier	Effect. Date	Et
Medical Kaiser Traditional 100 Plan	Employee, Spouse & Children	01-01-2020	
Health Engagement Model HEM Non-Participant	Employee Only	01-01-2020	
Dental	Employee, Spouse & Children		

Missed OE and I'm an OPT OUT?

- If you missed OE and you're an OPT OUT, here's what happened:
 - Your medical enrollment was changed to “Medical Not Enrolled”
 - You won't get the \$232 incentive on your paycheck
 - You will have to appeal to get this changed to an OPT OUT prospectively
 - You may have tobacco rated optional life plans
 - You will have to attest to other group coverage
 - You will not get OPT OUT dollars back that you missed
 - We left your other plans “as-is”

Opt Out Incentive On Paycheck

Employee Name	Pay Date	Total Net De
	01/01/2020	

STATE OF OREGON				
Department of Administrative Services, 155 Cottage St. NE				
Employer ID Number (EIN): 93-1070707				
Period Ending			Pay Date	
12/31/2019			01/01/2020	
Earnings				
Description	Hours	Rate	Amount	
TOTAL REG	170.00			EMP/D
INS RETURN			232.15	LONG'
GROSS PAY				MED C
FED TAX				BASIC
OTT				SHOR'
STATE TAX				EMP L
SOC SEC TAX				EMP L
MEDICARE TAX				SR/DD

I missed OE and I have a Medical Plan?

- If you missed OE and you had a 2019 medical plan, here's what happened:
 - Your medical enrollment and dependents stayed with the plan you were enrolled in for 2019
 - Your deductible is \$100 higher
 - You forfeit your right to participate in HEM
 - You will have appropriate surcharges added to your paycheck
 - You will have to appeal no later than February 29th to get this changed to another medical plan, change dependents and have surcharges removed prospectively
 - We left your other plans “as-is”

What should I be checking on my PEBB Benefit Summary?

- HEM Participation
- Surcharges
- Healthcare Plan Selections
 - Medical
 - Dental
 - Vision
- Are the correct dependents covered
 - Double check your spouse
 - Ex's are not eligible
 - Do your kids have coverage
- Optional Plan Selections
 - Did you turn in your Medical Evidence by 12/31/19
 - Are your amounts and coverage correct

PEBB Benefit Summary

Dependents have YES?

Plan	Coverage Tier	Effect. Date	End Date	Dependents			
				Tanner	Eandra	Corban	Vernon
Medical Providence PEBB Statewide Plan	Employee, Spouse & Children	01-01-2020		Yes	Yes	Yes	Yes
Health Engagement Model HEM Participant	Employee Only	01-01-2020					
Vision VSP PLUS Plan (includes VSP Vision Service Plan)	Employee, Spouse & Children	01-01-2020		Yes	Yes	Yes	Yes
Dental Delta Dental Premier	Employee, Spouse & Children	01-01-2020		Yes	Yes	Yes	Yes
Basic Life Standard Insurance - Basic Life	Employee Only \$5K	01-01-2020					
Tobacco Tobacco Use Program	Both my spouse and I do not currently use tobacco	01-01-2020					
Other Employer Group Coverage Other-Employer Group Coverage Program	My spouse has PEBB coverage as an eligible employee	01-01-2020					

Got HEM?

Surcharges correct?

Amounts correct?

Coverages correct?

Plan	Coverage Tier	ENR Type	Effect. Date	End Date
Employee Optional Life Standard Insurance - Optional Life	Non-Tobacco-Employee Only, Age 50 to 54, Amount \$300,000	OPEN	01-01-2020	
Spouse/Partner Optional Life Standard Insurance - Optional Life	Non-Tobacco-Spouse Only, Age 50 to 54, Amount \$200,000	OPEN	01-01-2020	
Dependent Life Standard Insurance - Dependent Life	Dependent \$5K	OPEN	01-01-2020	
Accidental Death & Dismemberment Standard Insurance - Accidental Death & Dismemberment	Employee Only - \$200,000	OPEN	01-01-2020	
Long Term Disability Standard Insurance - Long Term Disability	90-Day @ 66 2/3%	OPEN	01-01-2020	
Short Term Disability Standard Insurance - Short Term Disability	60% Benefit	OPEN	01-01-2020	



Payroll Deduction Guide

DAS IT APPLICATIONS ePayroll Home

	Description
8/30/2019	TOTAL-REG
8/1/2019	HEM INCENT
7/1/2019	GROSS PAY
5/31/2019	FED TAX
5/1/2019	OTT
4/1/2019	STATE TAX
3/1/2019	SOC SEC TAX
2/1/2019	MEDICARE TAX
1/15/2019	WBF TAX
1/1/2019	EMPL DEDNS
	NET DEPOSIT
	NET CHECK
	FEDERAL S 00
	STATE S 00

Manual Checks

Gross Pay	Net In

ePayroll Help
Pay Code Guide
Deduction Code Guide
Time & Attendance

Leave Type
PSNL BUS
SICK
VACATION

Surcharge Codes

- Surcharges will appear on your paycheck
- You will also see the surcharge default on your PEBB Benefit Summary
- You can correct these via appeal prospectively
- This could cost you an extra \$100 per month from your pay
- Pay attention so you don't pay!

SPOUSE INS	Surcharge for spouse who opts out of their employer provided medical coverage
TOBACCO SC	Surcharge for tobacco usage

Correction Due Dates

**ALL OPEN ENROLLMENT CORRECTIONS ARE DUE BY
FEBRUARY 29, 2020***

- Plan corrections
- Dependent corrections
 - HEM
- Not doing your HA is not correctable
- Not participating is not correctable
- Not doing OE is not correctable
- Not doing your Health Actions is not correctable
 - Tobacco Surcharge
 - Other Coverage Surcharge

Division 20, Correcting Enrollment Errors and Open Enrollment Errors

<https://secure.sos.state.or.us/oard/viewSingleRule.action?ruleVrs>

[nRsn=249463](https://secure.sos.state.or.us/oard/viewSingleRule.action?ruleVrs)

ASIFlex

- Dependent Care FSA
 - Members can contribute up to \$5000 for 2020
 - This account is for daycare expense; not medical expenses
- Health Care FSA
 - Members can contribute up to \$2700 for 2020
 - This account is for health care related expenses for your eligible dependents
- Fringe Benefit Accounts
 - Commuter benefit monthly max increase to \$265 per month for 2020
 - Don't enroll in a Parking Account if you already have parking deducted from your payroll

ASIFlex Payroll Codes

OTHER PEBB RELATED CODES	
DEDUCTION CODE	DEDUCTION DESCRIPTION
COMM	Flexible Spending Account Commuter Account for Transport
DEP LIFE	\$5000 Dependent Life Insurance
EMP LIFE or SP/DP	Optional Life Insurance for Employee or Spouse/Domestic Pa
EMP or EMP/DEP AD&D	Accidental Death and Dismemberment for employee or emp
FSA	Dependent Care or Healthcare Flexible Spending Accounts

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ASIFlex Campaign

* FSA Corrections

What happened prior to January 1, 2020?

- PEBB/Agencies adjusted any 2020 FSA/Fringe Benefit account effective January 1, 2020 only if requested by December 31, 2019
- No enrollment in an FSA/Fringe Benefits if the member didn't do OE during October

The goal was to make sure members understood their selections, amounts and possible penalties if they failed to correct issues prior to January 1, 2020

ASIFlex Campaign

* FSA Corrections

PEBB Mailings to verify ASIFlex Enrollments

- ASIFlex members received one USPS mailing and one email per month (November & December) per FSA/Fringe Benefit enrollment
 - Health Care = Blue
 - Dependent Care = Pink
 - Parking = Orange
 - Transportation = Green

ASIFlex Campaign

* FSA Corrections

What did these mailings do?

- Clarify what plan the member selected during OE
- Explain what the plan actually covers or can do & maybe what it can't do
- How much per month member is contributing
- How many months per year member is contributing
- How/when member can correct selection if not correct
- What happens if member doesn't make corrections timely

ASIFlex Campaign

* FSA Corrections

What happens after January 1st?

- All ASIFlex issues come to PEBB as an appeal
- PEBB will **NOT ALLOW** any cancellation of a HCFSA or DCFSA after 12/31 unless a QSC
- **NO** retro enrollment/corrections to an FSA account (this means the member could lose money)
- **NO** enrollments if the member did or didn't do OE during October unless a QSC
- PEBB will **NOT** allow prospective increases/decreases in all FSAs unless a QSC
- PEBB will fix the number of months prospectively

Providence Choice Medical Homes

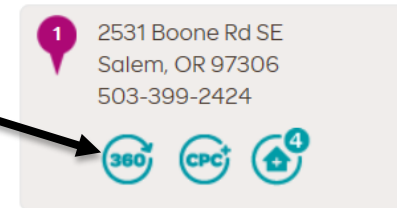
- Not New but Important!
 - Members need to select a Medical Home for Providence Choice PRIOR to services to avoid Out-of-Network charges
 - **Providence Choice network is different than Providence PEBB Statewide**
 - **Providence Choice does not include OHSU**
 - **Referrals are needed with Providence Choice**

If members already selected a Medical Home for themselves and/or dependents in the 2019 plan year under Providence they don't have to reselect unless they want to change Medical Homes.

Moda Synergy

- Moda is now combining Moda Synergy and Moda Summit into one plan called Moda Synergy
- It is still available statewide

Burgin, Heather J. Internal Medicine



- **VERY IMPORTANT!**
- **Members must now select a PCP 360 prior to services to be in-network with Moda.**
 - **Members can do this by calling Moda or setting this up in their MyModa account once Moda has received the PEBB open enrollment files (around Thanksgiving)**

Even if you have selected a Medical Home with Moda in previous years you still need to select a PCP 360 prior to services in 2020.

Delta Dental

Don't forget about the 12-month wait if members do not enroll themselves and/or their dependents when initially eligible.

Also, 24 month wait on orthodontics.

Customer Service Info

- PEBB Office Hours
 - 8 AM to 5 PM
- Call PEBB: (503) 373-1102
- Fax PEBB: (503) 373-1654
- Email PEBB: inquiries.pebb@dhsoha.state.or.us
- PEBB Forms:
<https://www.oregon.gov/OHA/PEBB/Pages/forms.aspx>
- Plan Info: www.pebbinfo.com
- Log in to PEBB: www.pebbenroll.com

Thank You!

**For More Information Please Contact
Linda Freeze, Benefits Manager
500 Summer Street NE, E-88
Salem, OR 97301-1063
(503) 378-3329
linda.freeze@state.or.us**