

# 2024 ANNUAL ENROLLMENT FAQs FOR 2025 BENEFITS

## What is Annual Enrollment?

Annual Enrollment is the time each fall when you can choose and/or change your benefit selections for the following calendar year. During Annual Enrollment, subject to eligibility, you can:

- Choose your health insurance option
- Choose or change your health insurance carrier and network
- If eligible, enroll in or cancel health insurance for yourself or your eligible dependents
- Enroll in, cancel or transfer between dental options (if offered by your agency)
- Enroll in, cancel or transfer between vision options (if offered by your agency)
- Enroll in or cancel voluntary accidental death and dismemberment coverage (state and higher education only)
- Apply for, cancel, increase or decrease voluntary term life coverage amounts (state and higher education only)
- Enroll in short term disability. State and higher education employees are automatically enrolled in long term disability insurance
- Enroll in flexible benefits (state and higher education employees only)

## When is Annual Enrollment for 2025 benefits?

Oct. 1–Oct. 18, 2024, for state and higher education employees

Oct. 1–Oct. 31, 2024, for local education and local government employees and all retirees

## Do I have to make changes during Annual Enrollment?

No. If you don't want to make changes to your benefits, you don't have to do anything during Annual Enrollment. If you don't make changes, you will be enrolled in the same plan options for 2025 that you're enrolled in now. State/higher education employees: most flexible spending accounts require you to enroll each year, so you must act if you wish to participate.

Partners for Health recommends you review your benefits during Annual Enrollment each year, even if you don't think you want to make changes.

## What are the health plan options for 2025?

- Premier Preferred Provider Organization
- Standard PPO
- Consumer-driven health plan with a health savings account, state and higher education only
- Limited PPO, local education and local government only
- Local CDHP/HSA, local education and local government only

## What are the default benefits for 2025?

If you don't make changes, you will be enrolled in the same plan options you are enrolled in now. State and higher education employees are automatically enrolled in long-term disability insurance option 3 at no cost.

## How do I enroll for 2025 benefits during Annual Enrollment?

You'll use Employee Self Service in Edison at [edison.tn.gov](https://edison.tn.gov) to add, remove or make changes to your insurance coverage. Higher education employees may be able to access Edison through their employer's human resources system.

## When do the benefits I choose during Annual Enrollment begin?

The benefits you choose during 2024 Annual Enrollment begin on Jan. 1, 2025, and remain through Dec. 31, 2025.

## If I change my mind, can I change my benefits later?

No. You cannot change your benefits after the Annual Enrollment period has closed unless you experience a qualifying event, such as getting married or having a baby.

## Where can I find the Annual Enrollment guide and other materials?

Annual Enrollment guides can be found on the Partners for Health website under [Annual Enrollment](#) and Enrollment Materials.

## Are premiums increasing for 2025?

- The State Insurance Committee approved an average health insurance premium increase of 5.5% for state and higher education employees and state plan retirees.
- The Local Education Insurance Committee approved an average health insurance premium increase of 5.9% for local education employees and retirees.
- The Local Government Insurance Committee approved an average health insurance premium increase of 1.6% for local government employees and retirees.
- Vision premiums are not increasing.
- Dental premiums are increasing.
  - a. Dental Health Maintenance Organization – 3.5% increase
  - b. Dental Preferred Provider Organization – 1.5% increase.
    - i. Central state and state higher education employees note that the state pays one-half of your dental insurance premium.

## Are there any vendor or benefits changes for 2025?

There are no vendor changes for 2025. There are two benefits changes:

1. First, your pharmacy benefits with CVS Caremark currently have two cost-sharing tiers for specialty medications — generics and brands. Partners for Health is adding a third non-preferred brand specialty tier in 2025.
2. Talkspace lets members communicate with a therapist by audio or video 24/7 from a smartphone or desktop. Currently, Talkspace visits under a preferred provider organization, or PPO, plan cost the same as an in-network primary care office visit, with copays ranging from \$25 to \$35. For 2025, the copay will be lowered to \$15 for all PPO options only.

## How can I talk to someone if I need help with Annual Enrollment?

At [tn.gov/partnersforhealth](https://tn.gov/partnersforhealth), you'll find a red Questions button to contact our help desk at [benefitssupport.tn.gov/hc/en-us](https://benefitssupport.tn.gov/hc/en-us). You'll also find a green Help button to chat during business hours. You can call Benefits Administration at 615.741.3590 or 800.253.9981, M-F, 8 a.m. to 4:30 p.m. CT.

## What do I do if I miss the Annual Enrollment deadline?

Once the designated Annual Enrollment period has closed, employees have one opportunity to revise their Annual Enrollment elections, provided they submit the request to Benefits Administration no later than 4:30 p.m. CT on Dec. 1 of the current plan year. Timely submitted revisions will become effective on Jan. 1 of the upcoming plan year.

## When will I get my ID cards?

Newly enrolled members or members who change their medical, dental or vision coverage will receive new ID cards. If you do not make a change to your medical, dental or vision coverage, you will not get a new ID card.

All health plan members will get new pharmacy ID cards for 2025 coverage.

All newly enrolled Consumer-driven Health Plan or Local CDHP, medical FSA and limited purpose FSA members will receive a new debit card from Optum Financial to use starting Jan. 1, 2025. If you have both an HSA and an FSA, you will use the same card for both accounts. Current members who stay enrolled will use the same debit card.

**BlueCross BlueShield:** ID cards will be mailed by Dec. 12, 2024.

**Cigna** (both medical and dental): ID cards will be mailed between Dec. 9-16, 2024.

**CVS Caremark:** ID cards will be mailed between Dec. 11-15, 2024.

**Delta Dental:** ID cards will be mailed by Dec. 10, 2024.

**EyeMed:** ID cards will be mailed by Dec. 17, 2024.

**Optum Behavioral Health:** ID cards will be mailed by Dec. 16, 2024.

**Optum Financial:** HSA/FSA debit cards will be mailed between Dec. 9-13, 2024.

**Members can request additional cards by contacting their vendor(s) or by using a vendor's mobile app.**

