

CITY OF BOSTON

2015 ANNUAL ENROLLMENT

COMMUNICATIONS STRATEGY DRAFT as of 2.18.15

Summary of Key Messages

- **Deliver simple, clear messages in plain English**
- **Medical plan lineup changes**
 - There will be three medical plan options available to employees, Medicare ineligible retirees, and their dependents:
 - BCBSMA PPO Plan
 - HPHC Standard HMO
 - NHP Value HMO
 - Some current plan options will be discontinued, as agreed in the most recent collective bargaining agreement. If participants are in a discontinued plan, they will automatically be enrolled in the following plans:
 - HPHC POS Plan will be enrolled in HPHC Standard HMO
 - BCBSMA POS Plan (Blue Choice) will be enrolled in BCBSMA PPO Plan
 - There will be only one plan with Out-of-Network coverage. If participants wish to have Out-of-Network coverage but are currently in (or defaulted into) an HMO, they must actively enroll in the PPO plan.
 - Streamlining the City’s medical plan options will make it easier for the City to address escalating health care costs and continue to offer a comprehensive, competitive benefit program for years to come. The new lineup also makes it easier for employees to compare choices.
 - Current provider networks will remain in place.
 - Current plan designs will remain essentially the same with minor collectively bargained changes, including office visit copays.
 - Medicare ineligible retirees and their dependents have the same medical plan options as Active employees. Medicare-eligible retirees’ options stay the same.
 - The City will hold Employee Informational Sessions to explain the changes to employees and their dependents, who will have the opportunity to ask questions. The City will encourage employees and their dependents to attend the sessions so they are well informed during the Annual Enrollment period.
- **How to enroll**
 - 2015 Annual Enrollment is “passive,” which means participants do not need to take any action. Participants will be enrolled automatically in the medical plan that most closely resembles their current medical plan.
 - If participants want to change their medical plan election, they must complete and submit a new enrollment form by the end of Annual Enrollment.
 - During Annual Enrollment, employees may opt out of City-sponsored medical coverage and receive a waiver credit if they have health insurance elsewhere. They should refer to their collective bargaining agreement for waiver credit amounts.
- **Dependent verification**
 - Employees will be notified by their medical plan carriers to verify their dependent information. Verifying dependent information helps ensure that all dependents receive their medical benefits and ensures that the City is able to meet all ACA reporting requirements. Carriers may ask employees to provide documentation such as Social Security numbers.

Potential Communications Elements (DRAFT as of 2.18.15)

Element	Delivery	Key Messages	When
Letter(s) to Leadership <ul style="list-style-type: none"> • PEC • Managers/Supervisors • Personnel Officers • Union leaders 	Email/Print	<ul style="list-style-type: none"> • Announce upcoming annual enrollment period • Provide brief overview of changes and timeline • Provide rationale for changes • Enlist leaders’ vocal and visible support • Assure leaders that resources will be available 	March 16
Talking Points for Meetings with Key Influencers	In-person meetings/ Webinar	<ul style="list-style-type: none"> • Repurpose messages from letter(s) to leadership • Answer questions 	Week of March 23
Enrollment Announcement	Postcard/Email	<ul style="list-style-type: none"> • Announce upcoming enrollment period • If participants don’t want to change plans, they don’t have to take any action • Actions to take if participants do want to change plans • Announce more information coming soon 	Week of March 30
PowerPoint Template for Employee Meetings	PowerPoint	<ul style="list-style-type: none"> • Customizable presentation for employee meetings • Cover benefit changes and actions to take 	Week of March 30
Enrollment Kit <ul style="list-style-type: none"> • Cover Letter/Letter to Retirees • Benefit Planner • Newsletter (including FAQ page) • Dependent Certification Reminder • Envelope 	Email/Print	<ul style="list-style-type: none"> • Who’s eligible • Overview of medical plan options (including opt-out option) • Benefit changes • Actions to take if participants do want to change plans • Side-by-side comparison chart of plan benefits • Be on the lookout for dependent verification messaging from medical plan carriers 	Week of April 6
Enrollment Meeting(s) <ul style="list-style-type: none"> • Active employees • Dependents • [Retirees] 	In-person meeting/ Webinar	<ul style="list-style-type: none"> • Detail benefit changes and provide rationale for changes • Describe actions to take if participants want to change plans • Answer questions 	Weeks of April 6, 13, 20
Leveraged Content	City kiosks, “pay advice” flyers, flat screens, The Hub intranet, union newsletters and websites, etc.	<ul style="list-style-type: none"> • Repurpose messages from enrollment kit materials • Remind employees of enrollment deadlines • Remind employees of dependent certification and documentation requirements 	Weeks of April 6, 13, 20, 27
TENTATIVE ANNUAL ENROLLMENT PERIOD: APRIL 13 – MAY 1			
Enrollment Reminder	Postcard/Email	<ul style="list-style-type: none"> • Reminder that enrollment ends May 1 • Reminder of what happens if you take no action • Reminder of dependent certification and documentation requirements 	April 22