





Employer Unit eNews | Mississippi's State and School Employees' Life and Health Insurance Plan | September 2023

Open Enrollment

Open Enrollment for 2023 is from October 1, 2023- October 31, 2023. During Open Enrollment, employees may make changes to their health insurance benefits that will take effect January 1, 2024. Employees can change health coverage elections between Base and Select coverage, drop dependents, or cancel coverage. Open Enrollment applies to health insurance only. If you do not make any changes, your current coverage will carry over through next year. For more information regarding Open Enrollment please visit the Plan's website at https://www.dfa.ms.gov/insurance or speak to your human resources representative.

2024 Premium Rate Changes

Effective January 1, 2024, the plan will implement a 5% premium rate increase for all coverage options. This increase will affect active and retiree plans, as well as COBRA and Medicare eligible participants.

2024 Deductible Changes

Effective January 1, 2024, the Base plan family deductible will increase to \$3200.00 to meet the minimum required regulations under Federal Law. The Base plan coverage option qualifies under IRS regulations as a high deductible health plan that can be used with a health savings account.

2024 Deductibles

Select Individual deductible - \$1,800

Select family deductible - \$3,600

• Base Individual deductible - \$1,800

Base family deductible - \$3,200

Choice Plan Discontinued

The Choice coverage option of the health insurance benefit package has been discontinued. Letters have been mailed to all employees who are currently enrolled in the Choice plan advising them to make another plan choice during open enrollment. Any employee who does not choose either the Base or Select plan, will be enrolled in Base coverage by default. There will be no loss or lapse in health coverage for any employee affected by this transition.







Wellness Incentive Program

The wellness incentive program administered by ActiveHealth Management, which provided a reduction in the individual health deductible, has been discontinued. However, ActiveHealth Management will continue to provide participants with beneficial wellness programs at no cost with the primary goal of helping you achieve and maintain those personal health goals. To learn more about these free benefits, contact ActiveHealth at (866) 939-4721 or www.myactivehealth.com/mississippi

Sign-Up For E-Mail Updates

The Office of Insurance communicates with personnel and payroll offices across the state through our e-mail listserv. Any human resources or payroll personnel who wish to be added to the mailing list can send a request to knowyourbenefits@dfa.ms.com. Please sign up today to ensure you do not miss out on any upcoming communications.

Bring your health care tools with you

From home to the office, always have your health care information and providers available to you. A variety of mobile apps are available today from our healthcare partners including:



ActiveHealth Management

https://apps.apple.com/us/app/activehealth/id1196657483 https://play.google.com/store/apps/details?id=com.aetna.ahealth



Blue Cross & Blue Shield of Mississippi

https://apps.apple.com/us/app/myblue/id633327088

https://play.google.com/store/apps/details?id=com.bcbsms.myblue.mobile.android



CVS Caremark

https://apps.apple.com/us/app/cvs-caremark/id382300394 https://play.google.com/store/apps/details?id=com.caremark.caremark



MyChart-UMMC

https://apps.apple.com/us/app/mychart/id382952264 https://play.google.com/store/apps/details?id=epic.mychart.android







STATE AND SCHOOL EMPLOYEES' HEALTH INSURANCE PLAN MONTHLY PREMIUM RATES Effective January 1, 2024

Legacy - Initially hired before 1/1/2006 Horizon - Initially hired on or after 1/1/2006

	LEGACY EMPLOYEES			
	BA3E		8ELECT	
	TOTAL	EMPLOYEE	TOTAL	EMPLOYEE
ACTIVE EMPLOYEE	PREMIUM	PORTION	PREMIUM	PORTION
Employee*	\$459	\$0	\$479	\$20
Employee + Spouse	\$961	\$502	\$1,050	\$591
Employee + Spouse & Child(ren)	\$1,223	\$764	\$1,313	\$854
Employee + Child	\$589	\$130	\$680	\$221
Employee + Children	\$792	\$333	\$881	\$422

HORIZON EMPLOYEES				
BA8E		8ELECT		
TOTAL	EMPLOYEE	TOTAL	EMPLOYEE	
PREMIUM	PORTION	PREMIUM	PORTION	
\$459	\$0	\$507	\$48	
\$961	\$502	\$1,078	\$619	
\$1,223	\$764	\$1,341	\$882	
\$589	\$130	\$708	\$249	
\$792	\$333	\$909	\$450	

^{*}The State pays 100% of the employee's premium for Base Coverage. Active employees enrolling in Select Coverage must pay a portion of the employee premium.

	LEGACY RETIREES		HORIZON F	HORIZON RETIREES	
RETIRED EMPLOYEE - NON-MEDICARE ELIGIBLE	BA8E	8ELECT	BASE	8ELECT	
Retiree	\$527	\$550	\$842	\$872	
Retiree + Spouse (Non-Medicare)	\$1,105	\$1,207	\$1,688	\$1,798	
Retiree + Spouse & Child(ren) (Non-Medicare)	\$1,406	\$1,509	\$1,887	\$1,998	
Retiree + Child	\$677	\$751	\$992	\$1,073	
Retiree + Children	\$909	\$952	\$1,224	\$1,274	
Retiree + Spouse (Medicare)	N/A	\$774	N/A	\$1,096	
Retiree + Spouse & Child(ren) (One or more Medicare)	N/A	\$975	N/A	\$1,297	
RETIRED EMPLOYEE - MEDICARE ELIGIBLE	BA8E	8ELECT	BASE	8ELECT	
Retiree	N/A	\$224	N/A	\$224	
Retiree + Spouse (Non-Medicare)	N/A	\$881	N/A	\$1,150	
Retiree + Spouse & Child(ren) (Non-Medicare)	N/A	\$1,183	N/A	\$1,350	
Retiree + Child	N/A	\$425	N/A	\$425	
Retiree + Children	N/A	\$626	N/A	\$626	
Retiree + Spouse (Medicare)	N/A	\$448	N/A	\$448	
Retiree + Spouse & Child(ren) (One or more Medicare)	N/A	\$649	N/A	\$649	

	LEGACY	
COBRA	BASE SELECT	BASE SELECT
Participant	\$468 \$488	\$468 \$517
Participant + Spouse	\$980 \$1,071	\$980 \$1,099
Participant + Spouse & Child(ren)	\$1,247 \$1,339	\$1,247 \$1,367
Participant + Child	\$600 \$653	\$600 \$722
Participant + Children	\$807 \$898	\$807 \$927
COBRA DISABILITY EXTENSION	BASE SELECT	BASE SELECT
Participant	\$688 \$718	\$688 \$760
Participant + Spouse	\$1,441 \$1,575	\$1,441 \$1,617
Participant + Spouse & Child(ren)	\$1,834 \$1,969	\$1,834 \$2,011
Participant + Child	\$883 \$1,020	\$883 \$1,062
Participant + Children	\$1,188 \$1,321	\$1,188 \$1,363