OPTUM Financial™

Plan Design Document

State of Arkansas

October 19, 2022

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Contents

Document Purpose

The purpose of this document is to serve as a roadmap to the successful implementation of State of Arkansas account-based health plans. This document will be used going forward to outline the scope of services delivered by identifying the State of Arkansas team and plan specific information. It will be used as a reference point for all design questions and audits thereafter. It will be updated at every renewal with plan design changes or confirmation of continuation of the original place design.

Revision History

Date Last Revised	**October 19, 2022**

Client Team

Employer	Name	Title	Phone	Email	Role
State of Arkansas	Laura Thompson	Operations	501-682-5501	laura.thompson @arkansas.gov	Client Contact
State of Arkansas	Eric Hafer	Benefits Analyst	501-682-5581	eric.hafer @arkansas.gov	Client Contact
State of Arkansas	China Daulton	Controller	501-682-5510	china.daulton @arkansas.gov	Client Contact

General Plan Design

Client Overview

Plan Year	**January 1, 2023 - December 31, 2023**
Open Enrollment Period	**October 1, 2022 - October 31, 2022**
Benefit Eligible Employees	**44071**
Billing Address	**501 Woodlane, Suite 500 Little Rock, AR 72201**

Employee Touchpoints

Member URL	**www.connectyourcare.com/arbenefits**
Single Sign On	**Yes**
Portal Branding	**Client Logo – White Theme**
Customer Service Number	**(833) 229-4431**
Welcome Email	**Yes**
DCAP Welcome Letter	**No**

Eligibility

Account Cancellation Rule	**via File.**

Payment Cards

Payment Card Design	**White Logo Cobranded Card**
Card Stacking Order	**FSA First; HSA Second**
Number of cards per participant	**1**

Finance

Billing Groups	**AASIS, Non-AASIS and School Districts**
Billing Invoice Funding Method	**EFR Push; CFR Push; Admin Push; RMF Push**
Notional Account Required Min Funding	**4% Notional**
Employer Funding Request Day of the Week	**Weekly on Monday**
Emails to CC on Funding Notification	**laura.thompson @arkansas.gov, eric.hafer@arkansas.gov, china.daulton@arkansas.gov, skochu.fields@arkansas.gov**
Payroll Frequency	**biweekly**
Ad Hoc Contributions	**Yes**

Claims Processing

Member Reimbursement Frequency	**Daily**
Email Address for Appeals	**EBD Task System**
Substantiation Follow Up Rules	**90,90,90,15**

Claims Ally

Copay Amounts	**Medical: 25, 50, 100, 250** **Dental:** **Vision: 10, 15, 25, 35, 40, 45, 60, 100, 150** **Rx: 15, 40, 80, 100**
Claims Offsetting	**Yes**
Card Suspension Threshold	**150**
End of Year Clean Slate	**Yes**
Ineligible Claims W2 reporting	**Yes**

Account Specific Plan Design

Health Savings Account

Plan Name	**HSA**
Estimated Accounts for plan year	**3500**
Account Cancellation Rule	**via File**
Payment Method	**Card; Manual Claims**
Employee Funding Amounts	**$26.00 Minimum** **Maximum $3850 Individual; $7750 Family**
Employee Funding Required for Employer Funding	**No**
Employer Funding	**$25.00 Single** **$50.00 Family**
Employer Funding Frequency	**Per Pay**
Minimum Account Balance to Invest	**$1000.00**
Transfer of Assets Type	N/A
On-Demand	**No**

Healthcare Flexible Spending Account

Plan Name	**Medical FSA**
Estimated Accounts	**3250**
Account Cancellation Rule	**via File**
Plan Type	**General Purpose;Limited Purpose**
Payment Method	**Card; Manual Claims**
Claims Run-Out Date	**March 31, 2024**
Employee Cancellation Run-Out Days	**90**
Employee Funding Amounts	**$26.00 Minimum** **$3050.00 Maximum**
Employer Funding	**$0.00 Single** **$0.00 Family**
Ability to Switch LPFSA to General FSA	**No**
Met Deductible Notification Type	N/A
Grace Period	**No**
Rollover	**Yes**
Rollover Amounts	**$0.00 Minimum** **$610.00 Maximum**
Rollover Auto Creation	**Yes**
Balance Transfer	N/A

Dependent Care Flexible Spending Account

Plan Name	**Dependent Care FSA**
Estimated Accounts	**175**
Account Cancellation Rule	**via File**
Employee Funding Amounts	**$26.00 Minimum** **$5000.00 Maximum**
Claims Run-Out Date	**March 31, 2024**
Grace Period	**No**
Spend Down	**No**
Employee Cancellation Run-Out Days	**90**

Data Interface Files

Vendor Name	File Type	Frequency	Delivery Method	File Purpose
State of Arkansas	• Contribution	Semi-monthly	SFTP	
State of Arkansas	• Census • Enrollment	Daily	SFTP	
Humana, Inc.	• Vision		SFTP	Substantiation
Delta Dental	• Dental		SFTP	Substantiation
Health Advantage	• Medical		SFTP	Substantiation

OPTUM Financial™

By: State of Arkansas

Name: Laura Thompson

Title: Chief Oper. Officer

Date: 10/20/2022

By: Optum Financial

Name: Earl W. McKnight

Title: Client Services Manager

Date: October 20, 2022