

OURERC A LOCAL BUSINESS NEWSLETTER

Powered by Employer's Resources of Colorado

Can you believe that the fourth quarter of 2017 is right around the corner? You know what that means: Open Enrollment! Our Benefits Department is working tirelessly to ensure you have the best insurance options available. Be on the lookout for contribution letters and the opportunity to set up a time for your company's open enrollment meeting.

It is extremely important that employees update their addresses with ERC. November is when Holiday Savings Fund checks are mailed out and then W-2 time is right around the corner. Not having the proper mailing address will hinder the delivery of important documents and can delay receiving holiday checks that many employees depend on during the season. To update an address, please have your employees complete and return the Personal Information Change Form found on the ERC website.

**Just as a reminder,
ERC will be:**

**Closed Monday,
September 4th for
Labor Day**

**Closing at 2 pm on
Friday, September 8th
for Staff Development
Day**

Four Tips for School-Related Leave for Working Parents



School's back in session and employers are already receiving requests for time-off for parents to attend school-related activities. When evaluating parental requests for time-off, employers must remember that several states and an increasing number of localities have passed school-related leave laws which enable parent workers to take time off to attend their children's school-related activities.

States Providing School-Related Leave:

| | |
|--------------------------------|-------------------------|
| California: 40 hours | Massachusetts: 24 hours |
| Colorado: 18 hours | Minnesota: 16 hours |
| District of Columbia: 24 hours | North Carolina: 4 hours |
| Illinois: 16 hours | Rhode Island: 10 hours |
| Louisiana: 16 hours | Vermont: 12 hours |

(Nevada: Employers must not terminate an employee for using leave to attend a child's school-related activities.)

Even if a state/locality does not require school-related leave, all employers should consider the following best practices from the EEOC when managing employees with school related children:

1. Educate all managers about the company's work-life policies and ensure they are supportive of employees who take advantage of available programs
2. Consider allowing employees to work flexible work schedules that allow them to balance work and parental responsibilities
3. Contemplate providing reasonable personal or sick leave to allow employees to attend school-related activities
4. Do not retaliate against employees who take advantage of available programs

From eplaceprotect.com; HR Bullet Point



The ADA, SAD, and FMLA

Seasonal Affective Disorder

The Americans with Disabilities Act (ADA) was established in 1990 to help ensure that individuals with disabilities could participate in all aspects of society – to include transportation, education and employment. As an employer, you are required to provide “reasonable accommodations” to quali-

fied job applicants and employees with disabilities. A reasonable accommodation is defined as the following: any change or adjustment to a job, work environment, or the way things are usually done that would allow an individual with a disability to apply for a job, perform job functions, or enjoy equal access to benefits available to other employees. <https://www.dol.gov/odep/topics/ADA.htm>

With the seasons chang-

ing, it is important as an employer to be cognizant of your employees and their mood cycles. It is natural for people to have a mood shift in the cooler, less sunny months, but some employees may be affected greater and have symptoms that lead to depression. This is called Seasonal Affective Disorder and is a qualifying disorder under the Americans with Disabilities Act. <https://www.quora.com/Is-seasonal-affective-disorder-considered-a-disability-Why-or-why-not>

Since SAD can be considered a form of depression, employees have the right to seek leave under FMLA. If your company does not offer FMLA, the employee may still be entitled to time off under the ADA as a reasonable accommodation under the law.

<http://www.hrhero.com/hl/articles/2014/01/24/fmla-ada-and-employees-with-depression-examining-the-nuts-and-bolts/>

Here are few tips to help combat seasonal mood changes and SAD:

1. Lift the shades! Let as much light in as possible – just be mindful that you may need to invest in anti-glare shades or computer screens
2. Encourage outdoor breaks
3. Install lighting that mimics natural light
4. Decorate your office to signify movement and create energy

<http://blogs.findlaw.com/strategist/2014/08/windowless-offices-bad-for-sleep-how-to-shine-light-on-employees.html>

MEDICARE QUESTIONS?

WE HAVE ANSWERS

MEDICARE MEETINGS: Are you or any of your employees interested in attending a meeting to discuss Medicare Benefits? We are here to help you understand your Medicare choices, find out about recent Medicare changes and learn about important enrollment deadlines. We hope you can join us at one of the following meetings (*please note that some dates and times have changed since letters were mailed out*):

- ◆ **Wednesday, October 4th—7:00pm—726 South Tejon Street, Colorado Springs, CO 80903**
- ◆ **Tuesday, October 10th—7:00pm—726 South Tejon Street, Colorado Springs, CO 80903**
- ◆ **Wednesday, October 25th—7:00pm—5600 South Quebec, Suite 103A, Greenwood Village, CO 80111**
- ◆ **Wednesday, November 8th—7:00pm—726 South Tejon Street, Colorado Springs, CO 80903**

If you are interested in attending one of our educational meetings, please RSVP to our Benefits Department at 719-448-9009 or email Kelly Felix at kfelix@erccolorado.com. You are welcome to bring a guest or relative who would also benefit from Medicare information. We look forward to seeing you there.

Deductibles, Co-Insurance, & Annual Out-Of-Pocket Maximums – OH MY!

Unless you're an insurance guru, it is easy to get all of the insurance jargon confused. Three of the most common questions are about deductibles, co-insurance, and annual out-of-pocket maximums – how they are different and what do each of them mean. Let's break it down:

A **deductible** is the amount that you owe for health care services before health insurance will kick

in. For example, if your deductible is \$2000 your healthcare plan won't pay anything until you've spent that total amount on covered health expenses.

Co-insurance is what comes after you've met your deductible. Once you've spent the \$2000 on covered health expenses then the insurance company will cover a portion and you will cover a portion. For example, once you

reach your deductible you might have a procedure costing another \$1000. If your co-insurance is split 80/20, then the insurance will pick up 80% of the bill and you will be liable for 20% of the bill – so you would only be paying \$200 and the insurance carrier will pay the other \$800.

The **annual out-of-pocket maximum** is the maximum amount you will be liable for in a calendar year. If

your annual out-of-pocket is \$4000, then once you reach that with the combined deductible and your portion of the co-insurance then the insurance company will take care of all further covered health expenses for the year.

**Please note that all numbers used are for example purposes only.*

Colorado Department of Labor Offers Employer Help

Even in the best of economic times your business or organization can struggle and even force you to consider laying off team members that make the business special. What you may not know is that your local workforce center may be a source of advice and support available to help businesses facing challenges. It starts with assessing worker skills and employer needs. The workforce system may be able to support training to upgrade current worker skills so they can better support a company's mission.

For example, the Work-

Share Program gives you an alternative to laying off your employees. It allows you to let your employees keep working, but with fewer hours. While employees work fewer hours, they can receive part of their regular unemployment benefits. The employer figures out how many hours they can continue to pay and employees share those hours as part of the work-share plan.

The goal is to save jobs and keep businesses working, but if layoffs



COLORADO
Department of
Labor and Employment

seem unavoidable, the workforce system can offer support through "Rapid Response" services. These services can help those who have lost employment find new jobs and help employers minimize turbulence in the organization. In the case of workforce reductions, your Workforce Center can direct employees to valuable resources and help them manage the stress of change.

Many businesses recog-

nize the fact that being proactive about changing circumstances can result in positive outcomes for their employees as well as themselves. For more information on rapid response and other employer services please contact a Business Service Representative at your regional workforce center or visit the Rapid Response page at the Colorado Department of Labor and employment website, Colorado.gov/cdle

LiveHealth Gives Employees Quick, Easy Access to a Doctor 24/7

Starting the week of August 28th, Anthem members will get a series of communications about LiveHealth Online. It will include members in plans that cover online visits as well as those who do not have this benefit.

Members who sign up for LiveHealth during the campaign will be entered to win a \$500 Amazon gift card; ten runners-up will win a \$25 Amazon gift card.

If your employees ask you about these communica-

tions, tell them that they are simply being informed about the value of online visits using LiveHealth Online can give and encourage them to sign up.

What is LiveHealth

Online? Using LiveHealth Online, members can have

a video visit with a board-certified doctor or licensed therapist on their smartphone, tablet, or computer. It's quick and easy to use — they just need to sign up to create a LiveHealth Online account.

LiveHealth[®]

O N L I N E

How does LiveHealth Online work?

Getting started is easy. Members just go to livehealthonline.com or download the [Android](#) or [iOS](#) app to sign up and set up a profile. After they create an account, members can use LiveHealth Online to have a video visit with a doctor or therapist of their choice. To see a doctor, they select LiveHealth Online Medical to view the doctors they can visit with. After they select a doctor, they'll need to give a reason for their visit and a summary of their health history. Then they'll need to choose a pharmacy to use,

if a prescription is needed. Next they'll be asked to enter their health plan and credit card information, if there is a cost for the visit. Then they'll be placed in a virtual waiting room until the doctor is ready to meet with them - the average wait time is about 10 minutes or less.

For a therapy visit, they select LiveHealth Online Psychology to choose the licensed therapist or psychologist they want to meet with. Then they schedule an appointment by calling 1-888-LIVEHEALTH between 7 a.m. and 11 p.m. Or they can schedule online by

selecting the appointment tab. In most cases, they can make an appointment and see a therapist in four days or less.

Is LiveHealth Online a covered benefit?

For members in participating health plans, online visits using LiveHealth Online are a covered benefit. Doctors using LiveHealth Online typically charge \$49 or less per visit, depending on the health plan. And online therapy visits usually cost the same as an in-person therapy office visit.

Can non-members use LiveHealth Online?

Yes, LiveHealth Online is

available to anyone. So your employees, family and friends who aren't members can use it, too, by paying the full cost of the visit.

When can members see a doctor or therapist using LiveHealth Online?

Doctors are available 24 hours a day, 365 days a year. Therapists are available by appointment seven days a week, and members can schedule appointments online or by calling 1-844-784-8409 between 7 a.m. and 11 p.m.

From Anthem Blue Cross Blue Shield. LiveHealth Online is the trade name of Health Management Corporation, a separate company, providing telehealth services on behalf of Anthem.

Workers' Compensation and Medical Marijuana

Legalized marijuana, whether medical or recreational, is finding its roots nationwide. In those states that have legalized medical and/or recreational marijuana, stakeholders across the workers' compensation spectrum are keeping a close watch on how these new laws will impact their organizations and constituencies.

Not the least among those affected are workers' compensation insurers. Questions abound at both the state and federal levels as to how the changing legal landscape surrounding marijuana will translate into the workers' compensation system.

How does the federal Schedule I drug status of marijuana impact workers' compensation?

To date, medical marijuana is legal in 29 states, as well as Washington, DC. It's also legal for recrea-

tional use in eight states—Alaska, California, Colorado, Maine, Massachusetts, Nevada, Oregon, and Washington—and Washington, DC. As many as 15 additional states are expected to consider marijuana proposals in the coming year.

State legalization notwithstanding, marijuana is still illegal at the federal level and is classified as a Schedule I drug under the federal Controlled Substances Act—the same category as heroin and cocaine. In recent years, federal practice has been not to enforce existing federal law in states that have legalized marijuana.

While marijuana remains illegal at the federal level, insurers are increasingly receiving requests to reimburse medical marijuana for workers' compensation treatment. Given the friction between state and federal law, states and state courts are increasingly faced with the challenge of whether to approve medical marijuana as a permissible workers' compensation treatment. Furthermore, as marijuana-related business continues to ex-

pand, the demand for insurance coverage is likewise growing. Insurers, in turn, are left wondering what issues they may face as a result of providing insurance for marijuana businesses or being required to reimburse for drug treatment that is illegal under federal law.

For example, Hawaii Employers' Mutual Insurance Co. (HEMIC) recently decided to cancel workers' compensation policies for medical marijuana dispensaries in Hawaii based on, according to news reports, legal opinions about potential exposure under federal law. Moreover, the Centers for Medicare & Medicaid Services (CMS) requires CMS healthcare providers to operate in compliance with federal law. So, what are the implications for workers' compensation insurers when providing reimbursement for medical marijuana? In addition, marijuana cannot be assigned a National Drug Code due to its Schedule I status; therefore, there is no standardized reimbursement rate for the drug.

Do states require workers' compensation insurers to reimburse/pay for medical marijuana?

To date, at least five states—Connecticut, Maine, Minnesota, New Jersey, and New Mexico—have found that medical marijuana is a permissible workers' compensation treatment that requires insurer reimbursement.

On the legislative side, numerous state laws explicitly preclude health insurance providers from reimbursing for costs associated with the medical use of marijuana. But only a handful of states have laws explicitly stating that an employer or workers' compensation insurer is not required to pay for medical marijuana.

Will required reimbursement for marijuana as a workers' compensation treatment be an ongoing trend for state legislatures and courts? Workers' compensation insurers will remain keenly interested as these developments unfold.

The Marijuana Conversation:
https://www.ncci.com/Articles/Pages/II_Marijuana-Conversation-Insurer.aspx

