

# Get Ready for Open Enrollment

For OEGB Benefits Administrators

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# OEBB Plan Year

**October 1 – September 30**

What does this mean?

- Medical plan deductibles and out-of-pocket maximums start over.
- Dental and Vision plan benefit maximums start over.

# OEBB Open Enrollment Period

## August 15 – September 15

- This means OE starts at 11:59:59 p.m. on August 14 and ends at 11:59:59 p.m. on September 15
- Some Community Colleges extend OE
  - That date is Friday, September 20 for this year
- BHS will have a September 8 OE end date
- Some entities end OE prior to September 15
  - If you do, it's up to you to communicate this to your staff.
  - All OEBB documentation will state September 15

# MyOEBB Downtime During OE

- Friday, August 2
- Wednesday, August 14
- 8 p.m. Saturday, Aug 31 to approximately noon Sunday, Sept 1 (please note this is Labor Day weekend and many of you cut off OE at this time)

# 2024-25 **Passive** Open Enrollment

This year's Open Enrollment is "**passive**" (or non-mandatory). This means:

- **If employees are satisfied with their current benefit plan selections**, their enrollments will roll over to the next plan year. They'll be re-enrolled automatically! They don't need to do anything. Benefits will stay the same.
- **If your employees want to make benefit changes**, they need to login to MyOEBB and make their selections during Open Enrollment (beginning August 15, 2024).

**Important!** If your entity chooses to have a mandatory enrollment, be sure to clearly communicate this to your employees.

The OEBB communication materials will have passive open enrollment messaging and a reminder for employees to confirm with their employer.

# Passive Open Enrollment

- What will happen in MyOEBS during roll over?
  - We will still roll all plans by terming them 9/30/2024 and reinstating the same plans effective 10/1/2024 (unless the entity has dropped this plan).
  - If your entity kept the same plans and only changed rate structures, we will roll members to the same plan/different rate structure.
  - OEBS does mass enroll members in the Basic and Mandatory plans offered by The Standard and UNUM.
  - We will update Optional Life Plan age brackets (age as of Oct. 1).
  - We will remove the Medicare “NO” answers and leave them blank.
  - We will remove the DEV answers and leave them blank.
  - We will clear out the Surcharge answers from 2023/24.

# Passive Open Enrollment

- What will happen in MyOEBB during roll over?
  - Dental Only Early Retirees/SPERs will be left alone.
  - OEBB doesn't touch any of the "optional" plans offered by The Standard and UNUM (unless you selected a new one or expired a plan).
  - If you didn't select a new "Voluntary" plan and your existing plan is going to be expired, then your members will be without that plan under OEBB.
  - If you did select a new "Voluntary" plan because your existing plan is going to be expired, then your members will need to actively enroll in the new plan during OE.

# OEBB Phone Hours During OE

**Monday – Friday**

**8:00 a.m. – 5:00 p.m.**

**Closed Labor Day, September 2**

**Closed weekends (Sept 14 – 15 is a weekend!)**

**BHS closes OE on September 8**



# Changes for OEGB

## Newborns and Adoptions

**Now have free coverage for the first 31 days after birth/adoption.**

**What does this mean?**

# Newborn Scenarios

1. OEGB Subscriber (female) has baby (or adopts) on May 15.
  - She has free coverage for baby for a full 31 days.
  - **If she wants coverage beyond that, she must add baby effective June 1.**
2. OEGB Subscriber (female) has a spouse/DP use (another female, who is not on our plan), and that spouse/DP has a baby.
  - How does that work? Same for two men in the same situation.
  - How does the medical facility link the newborn back to the subscriber when they aren't having baby and the person having baby isn't on the plan?
  - **The member would need to provide their insurance information to the provider.**

# Newborn Scenarios

3. OEGB Subscriber (male) has baby (his spouse/DP) on May 15. His spouse/DP is not on the plan.
  - Does he have free coverage for baby for a full 31 days?
  - How does the medical facility link the newborn back to the subscriber when they aren't having baby and the person having baby isn't on the plan?
  - **The member would need to provide their insurance information to the provider.**
  
4. OEGB Subscriber's son has baby (by spouse/DP) on May 15. The son is on our plan. His spouse/DP is not on our plan.
  - How does this work?
  - **Remember, if the subscriber's child has a spouse/DP, the subscriber cannot claim the grandchild by affidavit.**
  - **The newborn is not covered for 31 days since grandchildren are not eligible.**

# Newborn Scenarios

5. OEGB Subscriber's daughter has baby (and she has a spouse/DP) on May 15. The daughter is on our plan. Her spouse/DP is not on our plan.

- How does this work?

OR

OEGB Subscriber's daughter has baby (not in relationship with father) on May 15. The daughter is on our plan. Her non-significant other is not on our plan.

- How does this work?
- The birth of the child will be covered but once the birth happens the nursery care of the newborn will not be covered.

# Changes for OEGB

## 12-Month Wait on Dental

- **Effective this Open Enrollment, the 12-month wait on all dental is going away.**

# Updating Salaries?

It's very important to make sure salaries are updated prior to the start of Open Enrollment.

- You can update salaries via Payroll Interface or manually.
- Make sure you select the correct start date of the salaries.

Salaries are important as they help calculate premiums for STD, LTD and certain Basic Life plans. Additionally, they help determine benefit amount if a claim is filed.

# Deductions for STD and LTD

**Reminder!** Withhold VOLUNTARY STD and LTD premiums POST-tax.

If you withhold premiums pre-tax, The Standard must withhold taxes from claims, reducing the disabled member's income further.

They already live on about two-thirds of their previous income. Withholding premiums post-tax helps avoid additional tax burdens on them.

# Mass Lock Outs

Your entity may want to close OE earlier than September 15. Here's what you need to do and know:

- You must lock everyone out; you can't just lock out one employee group (unless you want to do it manually 😞).
- You must communicate the new deadline to your members and OEGB. OEGB will not communicate this deadline to your members but will know how to handle their calls.
- You can lock your entity out of MyOEGB by selecting Security Setup, Mass Lock, the reason "OE Deadline" and the dates you want members locked out of MyOEGB.



# Security

You can reset Passwords for your employees. Just a few simple steps!

- Security Setup-Administrator-Reset Password twice-Save
- Member Management-View/Modify Members-Reset Password twice-Save

OEBB will not give subscriber information to spouses/domestic partners if they call.

OEBB will not do enrollments.

OEBB will not change addresses, subscriber, or dependent information.

# Don't Do Enrollments!

Don't do enrollments for your employees unless you have a completed form or email. The email needs to be very specific about their plan and dependent selections. The forms should be OEGB forms. **Keep this documentation!**

Never sit at a computer and have members sit next to you while you do their enrollments. Enrollments must be done under their login, or you must have a form or email from the member if done under your log in.

*When OEGB processes appeals later in the year we may ask for this documentation.*

# Delta Dental Exclusive PPO and Incentive PPO

- These plans are different than the other Delta Dental Premier Network plans. The network is narrower than the Premier and there is no out-of-network coverage.
- Members that enroll in either of these plans during Open Enrollment will receive letters from Moda around the first week of October explaining the specifics of this plan selection.
- Members need to pay attention to this plan offering and understand the coverage.
- After December 31, all appeals will be denied, and members may be left with bills to pay.

# Kaiser Rules

- Subscriber must be enrolled in Kaiser Medical to enroll in Kaiser Vision.
- Spouses/domestic partners cannot co-mingle Kaiser Medical and Kaiser Vision.
- Subscribers can enroll in Kaiser Dental without Kaiser Medical.

# Reinstatement

Employees that come back to work (same entity) within 6 months:

- The New Hire turns into a Reinstatement QSC automatically in MyOEBB.
- You (as the admin) must complete the QSC in MyOEBB Admin Module; **the employee cannot complete enrollments in the Member Module with the Reinstatement QSC.**
- If the employee made changes during this 6-month period, you may use a Correcting Processing Errors QSC to make changes once the Reinstatement QSC is saved.

# OEBB Timelines

- Late April/early May  
Board sets rates and plan designs
- Early May  
Rates come out
- Mid-May/Mid-June  
EE Plan Management and Insurance Committee Meetings  
✓ Verify and then verify again your plan choices

# OEBB Timelines

- Week of July 4 – OEBB sends the Christmas in July file to the carriers
- After July 4 – Data for “Pre-OE” Mailing
  - ✓ Get New Hires and Terminations done in MyOEBB
  - ✓ Get employees in the right groups
  - ✓ Make sure addresses are correct
  - ✓ Make sure your plans are correct for the upcoming OE
- Week of July 24 – Mail drop for “Heads-Up” postcard
- Week of July 31 – Mail drop for “Pre-OE” mailing plus email sent to members (no OE Guide in hardcopy)

# OEBB Timelines

- August 15 – September 15
  - ✓ Open Enrollment
  - ✓ Open Enrollment Webinars
- September 16 – September 30
  - ✓ Entity Admin OE Clean Up
  - ✓ Last Batches of Post OE Mailings
    - No email
    - MIA with no plan/s
  - ✓ Delta Dental PPO Dental Plan Mailing



# OEBB Timelines

- October 1
  - ✓ New Plan Year starts
- October 1 – October 31
  - ✓ Entities can fix OE issues with a QSC
  - ✓ Please fix at your level and don't send to OEBB
- November 1 – December 31
  - ✓ OEBB accepts and usually fixes OE issues via appeal
- January 1 on....
  - ✓ Appeals accepted by OEBB
  - ✓ OEBB is done with OE corrections

# OEBB Timelines

See all OEBB's communications and dates at:  
[OEBBinfo.com](https://oebbinfo.com)

Oregon Educators Benefit Board

The [Affordable Connectivity Program \(ACP\)](#) is a U.S. government program to help low-income households pay for internet service.



### 2024-25 Plan Year Information

[Rate Sheets](#) (full premium cost for each plan)

[Benefit Summary PDF](#) – view the medical/Rx, dental, and vision plan side-by-side. [Español](#)

[Online Plan Comparison Tool](#) – choose only the plans and benefits you want to compare

[Plan Handbooks and SBCs](#)

### Mid-Year Plan Changes

Need to add or remove someone from your insurance plans? Want to change your elections due to a major life event?

[View the QSC Matrix](#) to learn which life events allow mid-year benefit changes. Then contact your employer to make any changes.

-  **Most Popular Pages and Links** +
-  **2024-25 Plan Year For Employers & Insurance Committees** +
-  **2023-24 Plan Year Member Resources** +

# OEBB Timelines

See all OEBB's communications and dates online:

## Administrator Resources

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<b>OEBB Home</b>	<b>I Want To...</b>	<b>Tools</b>
<a href="#">Benefits</a>	<a href="#">View Rates &amp; Plan Designs</a>	<a href="#">MyOEBB Admin Module</a>
<a href="#">Wellness Resources</a>	<a href="#">Review 2024 Insurance Committee Information</a>	<a href="#">Guides &amp; Instructions - Administrator Processes</a>
<a href="#">Member Resources</a>	<a href="#">View OEBB's 2024 Schedule of Open Enrollment Member Communications</a>	<a href="#">Self-Pay Early Retiree Toolkit</a>
<b>Administrator Resources</b>	<a href="#">Log in to the MyOEBB Admin Module</a>	<a href="#">New Hire Enrollment Materials</a>
<a href="#">About OEBB</a>		<a href="#">Wellness Programs</a>
<a href="#">Privacy Statement</a>		<a href="#">QSC Matrix (list of events &amp; allowed changes)</a>

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**Oregon Health Policy & Analytics**

# OEBB Timelines

See all OEBB's communications and dates online:

## 2024-25 Open Enrollment Communications

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**OEBB Home**

Benefits

Wellness Resources

Member Resources

Administrator Resources

About OEBB

Privacy Statement

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**Oregon Health Policy & Analytics**

### 2024-25 Open Enrollment Communications

The list below shows all the communications OEBB plans to send members for 2024-25 Open Enrollment.

Click the Description to view a sample of that communication. The columns to the right explain the details of the communication, the date we pulled the data from the system for that piece, and the date it was sent.

Any future dates reflect our plans, but are subject to change. This page will be updated as new materials become available and dates are finalized.

### Quick Links

[Rates and Plan Designs](#)

[MyOEBB Admin Module](#)

[ACA/Healthcare Reform](#)

[Entity Process Instructions](#)

[More Administrator Resources](#)

Description	Who/What/Why/How	Data Pull Date	Delivery Date
Open Enrollment Preview Email (or "Sneak Peek")	Email alerting all OEBB members to watch for their Open Enrollment packet in the mail, and highlighting important things to know for the upcoming Open Enrollment. Sent to all email addresses in MyOEBB member profiles (both personal and work) for benefits-eligible employees and early retirees.	July 11, 2024 (pulling anyone benefits eligible as of Aug 1)	July 15, 2024
Heads-Up Postcard: <b>Front and Back</b>	Hard copy postcard mailed USPS to all benefits-eligible employees and early retirees. The card instructs them to watch their USPS mailbox for their OE Materials.	July 11, 2024 (~ 8:00 pm)	

# QSCs

- OEBB Website Link
  - [OEBBinfo.com](http://OEBBinfo.com)
- OEBB QSC Matrix Link
  - <https://www.oregon.gov/oha/OEBB/Policies/QSCMatrix.pdf>
- Division 40 (Enrollment) OAR – QSC Rules
  - <https://secure.sos.state.or.us/oard/viewSingleRule.action?ruleVrsnRsn=236134>

# QSCs

**My employee is experiencing a QSC during OE.  
Do I really need to do anything?**

## **YES, YES and YES!**

- It's important to give employees the appropriate QSC anytime during the year. During OE, this ensures members get the appropriate GI on optional plans.
- If members have a newborn during this time, PLEASE get the child entered in the system within 60 days of birth with a relationship type of Newborn and enroll the newborn in plans using a Gains Child by Birth QSC.

# QSCs

The below QSCs must be completed by you as the admin. If they are left unsaved, the member cannot complete Open Enrollment.

- Change of Employment QSC (this includes active to retiree)
- Correcting Processing Error

Why is it important to complete these?

# QSCs

## What about QSCs from September 16 – 30 and October 1 – 31?

### September 16 – 30

- If it's just an OE correction you don't have to do a QSC.
- Make it effective October 1.

### October 1 – 31

- Use the “Correcting Processing Errors” QSC if it's an OE correction.
- Make sure to make it effective October 1.

All OE corrections are effective October 1. Please retain documentation of these changes. If it's an actual QSC event, please use the appropriate QSC.



# QSCs

## What happens after October 31<sup>st</sup>?

- Members shouldn't be switching, adding, or removing plans without a QSC that allows this action.
- Also, members shouldn't be adding or dropping dependents without a QSC that allows this action.
- Members should inform you within 31 days of an event for you to process their QSC. 60 days for gain of a child.
- Please use a Mid-Year Change Form or save an email thread when processing QSCs for member.

**Please retain these documents!**

# MyOEBB Home Page

- **Familiarize yourself with the Home Page. Home Page will show any Pending actions Items, How to Guides, Popular Destinations, OEBB Resources.**
- Check your unsaved QSCs. Any unsaved QSC will not travel over on the weekly file to the carriers and your employees will not have any benefit coverage.
- On your Home Page Alerts under Pending Action Items, you will see the unsaved QSCs.

## Pending Action Items

- There are 86 Invalid Login Attempts in past 3 days.
- You have 552 files to download.
- There are 8 persons whose affidavits are pending.
- There are 98 persons having unsaved enrollments from Admin Module.
- There are 160 persons having unsaved QSC.
- There are 47 persons having unsaved enrollments from Member Module.
- There are 17621 persons who have opted out of medical coverage.
- There are 22 persons who have pending Termination Approvals.
- There are 117 Pending Coverage requests.
- There are 416 Payroll Interface Rejections.

# MyOEBB Home Page

- **Unsaved QSC from the Admin Module** – would be any QSC that you have started. This is usually if you enroll in the mandatory plans and leave the remainder for the employee to complete through the Member Module. This would also include any “Change of Employment QSC” that is not completed. Change of Employment QSC must be completed by entity admins as the employee cannot complete through the Member Module.
- **Unsaved QSC** – This will show all unsaved QSCs. You can filter by New Hire only. This will show you the coverage effective date and when the QSC will expire. Remember, the employee only has 31 days to complete a New Hire QSC through the Member Module. After that the Entity Admin will have to complete. Any other QSC must be completed by entity admin. This includes change of employment, active to retiree, marriage, birth, etc.

# MyOEBS Home Page

- **Unsaved QSC from the Member Module** – This will show employees that did not complete the final save in the Member Module.
- **Pending Termination Approval** – Please approve terminations so that the record can be sent over to BenefitHelp Solutions to send out COBRA notices.
- **Payroll Interface Rejections** – This will list the errors that did not process when submitting a PERM File or a Salary/Address Perm File. Remember to check each time a file is submitted.
- **Pending Affidavits** – This will show who has enrolled a Domestic Partner and will need to submit the affidavit to Entity Admins.

# MyOEBB How To Guides

- **How to Guides for MyOEBB** - Each guide will show you screen-by-screen how to complete a Qualified Status Change (QSC).

## How to Guides for MyOEBB

- How to Add a Dependent
- How to Add a New Hire
- How to Change Active Employment to Retiree
- How to Change Domestic Partner to Spouse
- How to Change Salary
- How to Change to Self Pay/OEBB Administration Retiree
- How to Enter a Mass Lock Out
- How to Process a Change in Employment
- How to Remove a Dependent
- How to Save an Invoice as an Excel File
- How to Terminate a Subscriber with Benefits
- How to Update an Address
- PERM FILE - Educational Entities
- PERM FILE - Local Governments
- PERM FILE - Salary/Address Update

# Popular Destinations

- **Popular Destinations** – The below are links to the carrier's dedicated website for OEGB.

## Popular Destinations

- BenefitHelp Solutions
- Kaiser Permanente
- MODA/Delta Dental
- MyOEGB Member Module
- Oregon Educators Benefit Board
- Standard Insurance Company
- Standard Medical History
- UNUM
- Uprise Health EAP
- VSP
- Willamette Dental

# OEGB Resources

## OEGB Resources

- MyOEGB Helpdesk-1 (888)4MY-OEGB or 1 (888)469-6322
- MyOEGB QSC Detailed Matrix Guide
- MyOEGB Security Access and Termination Form
- OEGB Administrative Rules
- OEGB Forms
- OEGB Plan Rates and Domestic Partner Imputed Values
- PERM File Excel Template
- Salary/Address Update File Format Template
- Salary/Address Update File Template with Tips - delete Row 2

# How Do OEBB Appeals Work?

- Division 80 OAR

[https://secure.sos.state.or.us/oard/viewSingleRule.action;JSESSIONID\\_OARD=nyw9hM3mIBO8BatCI2G-84yl7IAC5GjH6wAOjvaptscdOqS74pMb!568786841?ruleVrsnRsn=236159](https://secure.sos.state.or.us/oard/viewSingleRule.action;JSESSIONID_OARD=nyw9hM3mIBO8BatCI2G-84yl7IAC5GjH6wAOjvaptscdOqS74pMb!568786841?ruleVrsnRsn=236159)

- OEBB has three levels of appeals.

- First

- Decided in-house with feedback from entity, member, and carriers.

- Second

- Decided in-house with feedback from entity, member, and carriers.

- Third

- Decided by the Administrative Review Committee (ARC).

- The ARC is made up of three OEBB Board members.

- They make sure OEBB followed their rules and policies.

- OEBB appeals are mainly for eligibility issues.



# How Do OEBB Appeals Work?

Here are some rules for OEBB appeals:

- Members need to provide as much information as possible.
- OEBB will decide upon the appeal within 30 days.
- Members have 30 days from the date of the determination to file a second or third level appeal.
- Members need to submit new additional information with each level of appeal.
- Please do not have member file an appeal with OEBB during the end of September and October due to missing Open Enrollment. Please handle this internally.
- Please communicate timely with OEBB when we are reviewing an appeal and need your help.

# How Do Carrier Appeals Work?

- Carriers have a two-level internal appeal process:
  - 1) Members have 180 days from the date of an adverse benefit determination to submit an initial written appeal.
  - 2) Members have 60 days after the initial appeal determination to file a second level appeal.
- Members may ask for an external review process.
- Carrier appeals are mainly for benefit determination.

# Eligible Dependents

## Division 10 OAR

[https://secure.sos.state.or.us/oard/viewSingleRule.action;JSESSIONID\\_OARD=nyw9hM3mIBO8BattCI2G-84yl7IAC5GjH6wAOjvaptS74pMb!568786841?ruleVrsnRsn=1774](https://secure.sos.state.or.us/oard/viewSingleRule.action;JSESSIONID_OARD=nyw9hM3mIBO8BattCI2G-84yl7IAC5GjH6wAOjvaptS74pMb!568786841?ruleVrsnRsn=1774)

- Child
- Spouse
- Domestic Partner
- Child of Partner
- Disabled Dependent Child – Rules expanded 2022

# Disabled Dependent Child

Effective Jan. 1, 2022, dependents qualify if:

- A medical provider confirms the disability before age 26, **AND**
- The dependent has not had a break in coverage, **AND**
- One of the following is true:
  - Member claims the dependent on their federal tax return, **OR**
  - Member has court-ordered legal guardianship\*, **OR**
  - The disabled dependent files their own tax return. In this case their adjusted gross income cannot exceed 150% of the federal poverty level (FPL)\*.

# Early Retirees

## Division 50 OAR

[https://secure.sos.state.or.us/oard/viewSingleRule.action;JSESSIONID\\_OARD=nyw9hM3mIBO8BatCI2G-84yI7IAC5GjH6wAOjvaptscdOqS74pMb!568786841?ruleVrsnRsn=236136](https://secure.sos.state.or.us/oard/viewSingleRule.action;JSESSIONID_OARD=nyw9hM3mIBO8BatCI2G-84yI7IAC5GjH6wAOjvaptscdOqS74pMb!568786841?ruleVrsnRsn=236136)

- Early Retirees cannot add plans/dependents after they retire. They should plan their enrollments while they are ACTIVE.
- Early Retirees will receive COBRA paperwork when they retire. Why?
- Once an Early Retiree drops a plan type/dependent they can't add it back during OE, only with a QSC.
- Once an Early Retiree leaves OE, they cannot come back.
- OE terms Early Retirees once they turn age 65.
- Early Retirees and any of their dependents that are Medicare eligible due to age or disability are not eligible for OE plans.
  - They might be eligible for dental.

# Self-Pay Early Retirees (SPERs)

## Division 50 OAR

[https://secure.sos.state.or.us/oard/viewSingleRule.action;JSESSIONID\\_OARD=nyw9hM3mIBO8BatCl2G-84yI7IAC5GjH6wAOjvapsCdOqS74pMb!568786841?ruleVrsnRsn=236136](https://secure.sos.state.or.us/oard/viewSingleRule.action;JSESSIONID_OARD=nyw9hM3mIBO8BatCl2G-84yI7IAC5GjH6wAOjvapsCdOqS74pMb!568786841?ruleVrsnRsn=236136)

- Still follow the same rules as Early Retirees.
- The entity transfers these Early Retirees to OEGB at least two months prior to their SPER enrollment.
- OEGB manages this group.
- SPERs pay OEGB directly.
- They must be **COMPLETELY** self pay.
  - No contributions from the employer.

# COBRA

- Division 50 OAR

[https://secure.sos.state.or.us/oard/viewSingleRule.action;JSESSIONID\\_OAR\\_D=nyw9hM3mlBO8\\_BatCI2G-84yI7IAC5GjH6wAOjvapsCdOqS74pMb!568786841?ruleVrsnRsn=236136](https://secure.sos.state.or.us/oard/viewSingleRule.action;JSESSIONID_OAR_D=nyw9hM3mlBO8_BatCI2G-84yI7IAC5GjH6wAOjvapsCdOqS74pMb!568786841?ruleVrsnRsn=236136)

- Employers need to make sure they term employees and/or their dependents timely.
- Spouses termed after age 55 get more COBRA time.
- Becoming Medicare eligible during COBRA...what happens?
- What do I do with employees out on extended leave?
- What happens to dependents dropped during OE?
- COBRA rates are around 2% higher than regular rates.
- BenefitHelp Solutions (BHS) manages COBRA for OE/BB.

# Dependent Eligibility Verification (DEV)

Division 80 OAR

<https://secure.sos.state.or.us/oard/viewSingleRule.action?ruleVrsnRsn=236297>

OEBB will conduct a Dependent Eligibility Verification for your entity.

- OEBB has a schedule available for DEV.
- American Fidelity has conducted many of these reviews.
- Ineligible dependents come off at the end of the review.
- OEBB locks these dependents so members can't add them back without providing documentation.
- Members have 60 days to appeal a DEV dropped dependent to recover coverage without a lapse.



# Reconciliation & Invoicing

## Division 80 OAR

<https://secure.sos.state.or.us/oard/viewSingleRule.action?ruleVrsnRsn=236158>

- Please reconcile your invoice monthly.
- OEBC will give grace back as far as 45 days but not usually beyond that period.
- Overpayments and underpayments are added to the next monthly invoice.

# OEBB Financial Services

## Contact Information

Rosie Ivanov  
503-378-6597

[OEBB.FinancialServices@odhsoha.oregon.gov](mailto:OEBB.FinancialServices@odhsoha.oregon.gov)

# Sensitive Data

Division 60 OAR

<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=84>

OEBB collects SSNs but these are encrypted in MyOEBB. We can't even see them.

- If a member has a wrong SSN, we need to get this corrected for many reasons.
  - Traveling to carrier for IRS purposes.
  - The member can't log on with the wrong SSN.
- Please don't send sensitive data via email.
- Use MyOEBB Document Management to transmit this data.

# Complete List of OEBB OARs

- <https://secure.sos.state.or.us/oard/displayChapterRules.action?selectedChapter=186>

# Thank You!

For more information, please contact:

**Linda Freeze, Benefits Manager**

500 Summer Street NE, E-88

Salem, OR 97301-1063

(503) 378-3329

[linda.freeze@oha.oregon.gov](mailto:linda.freeze@oha.oregon.gov)