



Employee Benefit Plans Frequently Asked Questions

2025 Plan Year

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Section I: General Open Enrollment Information

1. Are there any benefit changes for 2025?

Yes. Effective January 1, 2025, there are several benefit changes and enhancements to the Anchor, Anchor Plus, and Anchor Choice medical plans and the CVS Caremark prescription drug coverage. These changes affect the majority of State of Rhode Island employees, with the exception of RIBCO (correctional officers; nurses; civilians); RITA and non-union State Police; and nonclassified union and non-union education and college employees.

For All State of Rhode Island Employees

The deductible for the Anchor Choice Plan with HSA is increasing, and the State is increasing the amount of its health savings account (HSA) contribution.

The Anchor Choice Plan is an HSA-qualified high-deductible health plan (HDHP), and the Internal Revenue Service (IRS) sets strict rules about certain features of the plan, like deductibles and out-of-pocket maximums. The IRS maintains these rules because of the tax advantages that come with contributing to an HSA.

For 2025 the IRS has changed the minimum allowable annual deductible for HDHPs. For that reason, your deductibles under the plan will increase. The new deductibles are:

- \$1,650 if you elect employee-only coverage (a \$50 increase)
- \$3,300 if you elect family coverage (a \$100 increase)

Because of this change, the State is increasing the amount of its annual HSA contribution to match the new deductibles. For employees enrolled as of January 1, 2025, the full annual deductible under Anchor



Choice will be covered whether you enroll in individual or family coverage. Employees enrolling after this date may receive a lower State contribution.¹

For All Employees *except* RIBCO (correctional officers; nurses; civilians); RITA and non-union State Police; and nonclassified union and non-union education and college employees

- **No PCP Coordination of Care Required**

You do not need to receive a referral from your primary care physician (PCP) to pay less for a specialist visit. Beginning January 1, you will pay the same for a specialist visit with or without a referral. Under the Anchor and Anchor Plus plans, there is a \$25 copay for all in-network specialist visits. If you are enrolled in Anchor Choice, you pay 10% for an in-network visit.

- **Introducing Hinge Health**

If you are enrolled in the Anchor, Anchor Plus, or Anchor Choice medical plans, you are now covered for Blue Cross Blue Shield of Rhode Island's virtual musculoskeletal (MSK) benefit through a partnership with Hinge Health. This comprehensive digital MSK care program combines personalized exercise therapy, wearable technology, health coaching, and education to help reduce chronic pain and improve joint and muscle health. You don't need a referral to use it, and there is no cost to you for this coverage.

- **Greater Wellness Incentives**

If you are enrolled in the Anchor medical plan, your annual maximum incentives under the Rewards for Wellness program are increasing from \$500 to \$700. See Section IV for more information on the Rewards for Wellness program.

- **PrudentRx for Specialty Drugs (through CVS Caremark)**

This new benefit is designed to reduce your out-of-pocket cost for certain specialty drugs. When you or a dependent takes a specialty drug on the PrudentRx program list, you would pay 30% coinsurance when receiving the drug from an in-network pharmacy, after meeting any applicable deductible. Under PrudentRx, you are automatically enrolled in the drug manufacturer's copay assistance plan for that medication. When the manufacturer's assistance is applied, you would receive the drug at \$0 out-of-pocket cost.

If you are enrolled in the Anchor Choice plan with HSA, you must fully satisfy your deductible before you are eligible to obtain your specialty drug at no out-of-pocket cost, unless you have been prescribed a medication that is qualified as "preventive care" by the IRS. You may still choose to use available manufacturer copay assistance to help cover your out-of-pocket cost before you have met your deductible, but you will not be eligible for \$0 out-of-pocket cost under the program until your deductible has been satisfied.

If you choose not to participate in PrudentRx, your specialty fills will be subject to the 30% coinsurance with no additional manufacturer assistance.

Please note: If you are a RIBCO (correctional officers; nurses; civilians); RITA and non-union State Police; or non-classified union and non-union education and college employee, your benefits are not changing, and these changes do not apply to you. However, you are subject to the increased Anchor Choice plan deductibles and HSA contributions from the State.

¹ Contributions are made biannually with half deposited in January and the other half deposited in July. The State's HSA contributions are NOT pro-rated for employees who enroll after January 1 and July 1.



2. When is the deadline to enroll?

The official deadline for completing your enrollment is November 22. However, we want to make sure that all State employees can make informed choices and complete the enrollment process without running out of time. Therefore, please don't wait until the last minute to make your elections. Note that the Office of Employee Benefits will be closing at 4 p.m. on Friday, November 22, and we will not be able to assist with any inquiries after that time. Elections can still be submitted through [Workterra](#) until the end of the day (11:59 p.m. ET) on Friday, November 22.

3. Is there an open enrollment grace period?

No. Open enrollment closes at the end of the day (11:59 p.m. ET) on Friday, November 22. We encourage you to enroll early.

4. When do open enrollment changes become effective?

With the exception of some life insurance coverage elections, any changes you make during the open enrollment period—for example, changing medical plans or electing a flexible spending account (FSA) or legal coverage—will take effect at the beginning of the new plan year on January 1, 2025. If your life insurance election is subject to The Hartford's evidence of insurability requirements, your new life insurance coverage will become effective only after you complete the required medical questionnaire provided to you by The Hartford and receive an approval from The Hartford. Payroll deductions for your 2025 benefits, including new elections and new premium (co-share) amounts, begin on January 3, 2025.

5. Am I locked into my elections until the next open enrollment?

Yes. The benefit elections you make during this open enrollment period will stay in effect for all of 2025. The only exception is if you have a qualified status change, for example, gaining or losing a dependent. In that case, you can make a change consistent with the status change, including adding or removing dependents and adding or canceling coverage, but you cannot change plans.

However, this rule does not apply to HSA contributions. You can change or stop your HSA contribution at any time during the year. Visit [Workterra](#) to update your HSA contribution amount.

6. If I take no action during open enrollment, will all my benefits elections carry over to next year?

Yes. If you take no action during open enrollment, your current medical, dental, vision, life insurance, and legal coverage elections (including waivers) will carry over to the new plan year. However, if you want an FSA or a dependent care spending account (DCSA) in 2025, you must elect it during open enrollment. FSA and DCSA elections do not carry over from year to year and must be elected each year during open enrollment.

If you wish to make an FSA or DCSA election for 2025, you must use [Workterra](#), the State's online enrollment system. You must also use Workterra for medical (including waiving coverage and electing the opt-out payment), dental, vision, life, and legal coverage elections. You can find detailed Workterra guidance on the [Benefits Enrollment page](#) of the Office of Employee Benefits website.

If you have a balance remaining in your 2025 health care FSA after the end of the plan year, it will carry over to 2026 at the end of the 90-day claims run-out period, subject to the carryover limit of \$660.



Any amount left in a DCSA at the end of the 90-day claims run-out period after a plan year ends is forfeited.

7. Where can I find more information about benefits and enrollment?

You can find everything you need for your enrollment online at the Office of Employee Benefits website (www.employeebenefits.ri.gov) and the virtual benefits fair (www.exploreemployeebenefits.ri.gov). The enrollment brochure contains information about how to access these and other enrollment resources. A copy of that brochure is posted to the Office of Employee Benefits website.

Section II: In-Person Open Enrollment Fairs and the Virtual Benefits Fair

1. Will the State hold an in-person open enrollment fair at or near my work location?

No. Instead, you are encouraged to make use of the many online resources you will find on the [Office of Employee Benefits website](#) and the [virtual benefits fair](#).

2. What is a virtual benefits fair?

It's an online event that replicates many of the features of a live, in-person benefits fair. When you [visit the website](#), you can:

- Access virtual booths from most of your benefit providers.
- View pre-recorded presentations by many of your benefit plan vendors.
- Download information to help you learn more about your benefits and make informed choices.
- Find information about choosing or updating your beneficiary elections.
- Link to valuable resources, including the State's Office of Employee Benefits website, benefit provider websites, and ALEX, the interactive online decision tool.

3. Do I need a password to access the virtual benefits fair? Do I need to use a computer at a State office location?

No. During the open enrollment period, November 4 to November 22, you and your family can access the virtual benefits fair by visiting www.exploreemployeebenefits.ri.gov from your smartphone, tablet, or computer. You do not need any login information, like an ID or password.



4. I usually meet with representatives from our benefit providers at the benefits fair. Will I still have that opportunity?

You are always able to speak with your benefit providers throughout the year—just refer to the [contact page of the Office of Employee Benefits website](#). More information is available on the [Office of Employee Benefits](#) and [virtual benefits fair](#) websites. See Section III.

Section III: Making Your Benefit Elections

1. Are there any tools I can use to help me choose among the Anchor plan options?

Absolutely. The following tools are available to you right now.

- **Visit the virtual benefits fair.** The virtual benefits fair is a special website (www.exploreemployeebenefits.ri.gov) that is dedicated to giving you the experience of attending an in-person benefits fair.
- **Talk to ALEX[®].** [ALEX—a personalized online decision support tool](#)—can help you understand the plans and choose what’s best for you and your family.
- **Get help choosing a medical plan.** [Schedule a virtual one-on-one session](#) with a BCBSRI representative to review your options. Sessions are available Monday–Friday, November 4–22 from 10 a.m. to 12 p.m. and 1 p.m. to 2:30 p.m.
- **[Watch benefit videos](#)** on topics including:
 - How does a health savings account (HSA) work?
 - How do RI State Employee Anchor plans work?
 - What are dental and vision buy-up plans, and how do they compare?

2. Can I get guidance on making a medical plan decision?

Yes. You can start by [talking to ALEX, the personalized online decision support tool](#). ALEX can help you understand your options and make the best choice for you and your family. If you need additional assistance, you can set up a one-on-one consultation with a member of the BCBSRI State of Rhode Island Employee CARE Center. (See question 3 in this section.)

3. What is the BCBSRI State of Rhode Island Employee CARE Center?

BCBSRI, the State’s medical provider, created the State of Rhode Island Employee CARE Center to support people covered under the RI State Employee Anchor plans. It is an all-in-one support center that connects State employees and their families with a local BCBSRI customer service and clinical team that is dedicated to their health needs.

You can call the BCBSRI State of Rhode Island Employee CARE Center at **401-429-2104** or **866-987-3705** with questions about your medical coverage. CARE Center hours are Monday–Friday, 8 a.m. to 8 p.m. and Saturday, 8 a.m. to 12 p.m.



The State of Rhode Island Employee CARE Center is exclusively dedicated to questions about **medical** coverage under the Anchor medical plans. If you have questions about **prescription drug** coverage, visit [CVS Caremark online](#), or call **800-307-5432** to speak with a representative 24 hours a day, seven days a week. If you're looking to get in touch with the State's non-medical benefit providers, visit the [Office of Employee Benefits website](#) or see individual provider pages at the [virtual benefits fair](#).

4. How do I change my assigned PCP (or that of a dependent)?

If you want to change your or a dependent's current PCP assignment, just call the BCBSRI State of Rhode Island Employee CARE Center at **401-429-2104** or **866-987-3705**. CARE Center hours are Monday–Friday, 8 a.m. to 8 p.m. and Saturday, 8 a.m. to 12 p.m.

If you are adding coverage for yourself or a dependent for the first time, you will need to wait until you receive your BCBSRI ID card. Your ID card should arrive by mail to your home address toward the middle or end of December.

Please note that PCP coordination of care is no longer required for most State of Rhode Island employees (see Section I, question 1 for more information).

5. How much should I contribute to my HSA?

If you're electing the Anchor Choice medical plan and need help deciding how much to contribute to your HSA, [talk to ALEX](#), the State's personalized online decision support tool.

6. Can I get guidance on making an FSA election?

If you need help deciding how much to contribute to your FSA, first [talk to ALEX](#), the State's personalized online decision support tool. You should also visit the [ASIFlex tax savings calculator](#) to see how much an election could save you in taxes.

7. Can I make my elections in any other way, or do I have to use Workterra?

The State of Rhode Island open enrollment is conducted entirely online, so all employees are expected to use [Workterra](#). The Workterra interface is intuitive and user friendly, so you should find it easy to make your elections using the system. However, if you need support, please review the [Workterra User Guide](#), and/or seek navigation assistance from the BCBSRI CARE Center. You can call the CARE Center for help with things like finding a provider or resetting your Workterra password. Additionally, if there is a legitimate reason why you cannot use Workterra, for example, an access issue, contact the Office of Employee Benefits for assistance.

8. What if I have difficulty accessing the open enrollment information on the website or have questions that aren't answered online?

If you need help accessing information or want to ask a question, contact the Office of Employee Benefits by phone at **401-574-8530**, by [email](#), or [through our website](#). Let us know if you have any questions during the open enrollment period. Because of increased call volume during the open enrollment period, **the best way to contact us** is through email at doa.oeb@doa.ri.gov or through our website's [feedback tool](#). If you prefer to call us and you have to leave a voicemail, we greatly appreciate your patience as we strive to return all calls within one business day.



9. What happens if I am on a leave without pay during open enrollment?

If you are on a leave without pay during the open enrollment period, you can still access [Workterra](#) to make your elections. However, if you elect an FSA or DCSA, you won't be able to use it for eligible expenses until you return to work and begin making payroll contributions.

10. Are all benefits restricted to changes during the open enrollment period?

No. You can make HSA contribution changes and enroll in or make changes to your deferred compensation plan, short-term disability plan, and other products sold through Aflac and Colonial Life at any time during the year.

11. I'm locked out of Workterra. How do I get a password reset?

If you incorrectly enter your [Workterra](#) login information too many times, the system will automatically lock you out. If this happens, call the BCBSRI State of Rhode Island Employee CARE Center at **401-429-2104** or **866-987-3705**. CARE Center hours are Monday–Friday, 8 a.m. to 8 p.m. and Saturday, 8 a.m. to 12 p.m.

12. Can someone help me make my elections?

Online open enrollment through [Workterra](#) is intuitive and user friendly, so you should find it easy to make elections on your own. If you have trouble, the BCBSRI State of Rhode Island Employee CARE Center can walk you through and help you navigate Workterra. However, representatives are not able to make changes to your record, so you must complete your own enrollment.

13. How do I know my enrollment was successful? How do I know my dependents have the correct benefits?

You'll see an on-screen confirmation statement at the end of your enrollment process, and it is available on your dashboard in Workterra. Just confirm that the confirmation statement reflects your choices and the correct elections for you and your dependents.

14. How do I enroll a new dependent who is not reflected on Workterra?

If your dependent is not listed in [Workterra](#), you need to first add that person as a dependent in your Workterra account. Then, you can add the person to the desired coverage plans by checking the box next to that person's name. Remember to upload supporting documentation to Workterra, for example, a birth or marriage certificate, or that person's coverage will be canceled.

15. What happens if I don't upload supporting documentation for a dependent?

If you have added a dependent in [Workterra](#) but don't upload supporting documentation, for example, a birth or marriage certificate, that dependent's coverage will be canceled.



16. Are there any special computer requirements for enrolling through Workterra?

No. There are no special computer requirements for completing your open enrollment in [Workterra](#). The site is designed to work with most browsers and devices, including desktop and laptop computers, tablets, and smartphones. However, pop-ups must be enabled to use the site. If pop-ups are disabled in your browser, the site will ask you to enable that functionality.

Section IV: Other Questions

1. Why are there no resources or information about the 2025 wellness program?

The Rewards for Wellness program enters its 18th year in 2025. It offers up to \$500 per employee in credits that are automatically applied to your biweekly medical plan premium (co-share) for completing certain wellness activities.² All activities must be completed during the 2025 calendar year, and incentives will be delivered in 10 consecutive pay days in the first half of 2026. Look for the Employee Wellness Program brochure, which will be mailed to your home at the end of December.

In 2025, you can earn up to \$700 in incentives if you are enrolled in the Anchor plan³ and up to \$500 in incentives if you are enrolled in the Anchor Plus or Anchor Choice plans. These will be applied to your medical plan premiums in 2026.

As in previous years, if you receive a preventive care exam in 2025, you will earn a \$250 credit toward your medical premiums (co-shares). If you're married and your spouse also receives a preventive care exam, you will earn an additional \$250 credit toward your premiums (co-shares).⁴ This credit is in addition to any wellness credits you may receive for completing wellness activities in the Rewards for Wellness program. Credits will be delivered in five consecutive pay days in the second half of 2026.

2. How can I contact a benefit provider directly?

To find contact information for your benefit providers, visit the [Office of Employee Benefits website](#) or see individual provider pages at the [virtual benefits fair](#).

3. Do all of the State's benefit plan providers offer mobile apps?

Visit each of your benefit providers at the virtual benefits fair to find information about mobile apps and other online services.

² Only active State of Rhode Island employees who are paying State medical premium payments at the time of the incentive delivery are eligible to receive premium credits.

³ Up to \$500 if you are a RIBCO (correctional officers; nurses; civilians); RITA and non-union State police; or non-classified union and non-union education and college employee.

⁴ You and/or your spouse must obtain at least one of the following qualifying preventive exams to earn the \$250 credit(s): annual physical exam, annual gynecological exam, or prenatal obstetric exam. To receive \$250 in credits for a spouse's annual preventive exam, the spouse must have been covered as a dependent on the employee's family plan both when they received a qualifying annual preventive exam and when the incentives are paid out.



4. Will I get new ID cards for this year?

After your enrollment is complete, you will receive a new ID card from BCBSRI for 2025.⁵ Your new ID card will not list a PCP and will show the new \$25 copay for a specialist visit without a referral. Your Anchor Choice ID card will also reflect your updated annual deductible. You will also be receiving a new CVS Caremark ID card. Please note that your ID number will have the prefix of "R2I". Please present your new card(s) to providers when utilizing services in 2025.

⁵ *If you are a RIBCO (correctional officers; nurses; civilians); RITA and non-union State police; or non-classified union and non-union education and college employee, you will receive a new ID card for 2025 **only** if you are changing coverage or a PCP election or are enrolled in the Anchor Choice medical plan. Your ID number will remain with the prefix "RIS".*