

NCFlex Cancer & Specified Disease Q&A

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Allstate Contact info:

Website: www.allstatebenefits.com/mybenefits

Phone: 866-232-1517

Learn more about the NCFlex Cancer & Specified Disease plan and how to file claims:

Visit www.ncflex.org, click the tile for Cancer & Specified Disease, then click “Plan Information, Claim Forms, Certificates, and More”.

Please note: If you have questions or need assistance filing a claim, reach out to us at ncflex@nc.gov.

Cancer & Specified Disease general information:

Q Who is eligible for the plan?

- A** You: If you work for a state agency, university, select community college, or select charter school for 20 hours or more per week in a permanent, probationary, or time-limited position.
- A** Your Dependents: **1)** Your legally married spouse, **2)** Your children (including natural children, stepchildren, foster children or adopted children) up to age 26, **3)** Your children can continue on the plan if unable to make a living because of a mental or physical handicap as long as the handicap developed before your child’s 26th birthday and your child was covered by the NCFlex plan for which you want to continue coverage prior to turning 26.
- A** You must be enrolled in a plan for your eligible dependent(s) to participate.
- A** You may not be covered as both an employee and a dependent and children may not be dually enrolled.
- A** You should consult with a tax advisor if you have questions as to whether someone qualifies as your income tax dependent.
- A** Dependents do not have to be enrolled on your health plan in order to be enrolled on your NCFlex plan(s).

Q When can I enroll in the plan?

- A** New Hire or Newly Benefits Eligible Employee: You have 30 days from your date of hire or eligibility date to enroll in benefits.
- A** Annual Enrollment: Typically, in October of each year. Effective Jan. 1st of the following year.
- A** Qualifying Life Event: QLEs include things such as: Marriage, Birth, and Loss of Other Coverage. You have 30 days from the date of your event to make a change.

- Q** What type of diseases are covered under the plan?
- A** The Cancer & Specified Disease plan pays cash benefits for cancer and 29 other specified diseases to help with costs associated with treatments and expenses related to the diagnosis. For a list of the 29 specified diseases, visit www.ncflex.org and click the tile for Cancer & Specified Disease, then click “Plan Information, Claim Forms, Certificates, and More”.
- Q** I’ve been diagnosed with Cancer or a Specified Disease, how do I know if I should file a claim?
- A** In order to receive accurate information for your situation, please contact Allstate to discuss your scenario. They can be reached at 866-232-1517.
- Q** Does the plan have a cancer prevention and screening benefit?
- A** Yes, the wellness benefit provides a \$25 benefit for the Low Plan and a \$100 benefit for both the High and Premium Plans; that is paid directly to you.
- A** Each covered person is eligible for this benefit one time per calendar year.
- A** A list of eligible screenings/tests can be located at www.ncflex.org, click the tile for Cancer & Specified Disease, then click “Plan Information, Claim Forms, Certificates, and More”.
- Q** Am I eligible to enroll in the plan if I have already been diagnosed with cancer or a specified disease?
- A** Yes, you can still enroll in the plan.
- A** Benefits are not payable for a pre-existing condition during the 12-month period beginning on the date coverage starts.
- A** Any covered loss after the 12-month period is payable.
- A** A pre-existing condition is a disease or physical condition for which medical advice or treatment was received by the covered person during the 12-month period prior to the effective date of coverage.
- Q** I have a pre-existing condition and have 12-month waiting period, can I still file a Cancer Wellness and Screening Benefit?
- A** Yes, the Cancer Wellness and Screening benefit is still payable during the first 12 months.
- Q** Can I continue the plan if I become disabled due to my diagnosed Cancer or Specified Disease?
- A** Yes, waiver of premium is available after 90 days of disability due to the diagnosis for as long as your disability lasts. This benefit is for employee only premium.
- Q** I am retiring or separating employment, can I continue the plan?
- A** Yes, the Cancer & Specified Disease plan can be continued (through portability) if you leave the State due to retirement or any other reason.
- A** Allstate Benefits will send you a portability letter.
- A** The premium continues at the same rate you pay as an employee and payments are made directly to Allstate.
- A** If you don’t receive a letter from Allstate after leaving, contact them at 866-232-1517 if you are interested in continued the benefit.

Filing Claims:

Q How do I file a Wellness claim?

A You can file one claim once a year per covered person, even if multiple screenings/tests were done.

A Claims can be filed online at www.allstatebenefits.com/mybenefits or by submitting a paper claim, <https://oshr.nc.gov/documents/files/cancer-wellness-claim-form/open>.

A There is no time limit to file a claim.

Q How do I file a Cancer or Specified Disease claim?

A You can submit all claims and any supporting documentation by fax, mail or online; www.allstatebenefits.com/mybenefits. The fax number and mailing address are printed at the top of the cancer claim form; <https://oshr.nc.gov/documents/files/ncflex-cancer-claim-form-april-2020/open>

A The following link has additional information regarding claim filing: <https://oshr.nc.gov/documents/files/ncflex-claims-filing-faq-cancer/open>

A There is no time limit to file a claim.

Q What is considered supporting documentation?

A You will need to provide some sort of paperwork showing you had a covered procedure/service. The documentation must include the patient's name, date of service, provider's name, and procedure/service. You can use an Explanation of Benefit from your medical plan or get a statement from the doctor's office with the required information.

Q I filed a claim and I do not think I was paid all entitled benefits. What should I do?

A Please contact Allstate at 866-232-1517.

Q I filed a claim, and it was denied. How long do I have to file an appeal?

A You have 60 days to file an appeal on a denied claim.

Q I filed a Cancer or Specified Disease claim and received a payment, do I have to pay taxes on the received benefit?

A No, you will not receive a 1099 tax form if you are paid a benefit.