

2020 Open Enrollment

Medical Change Overview

- HSA
 - Individual and Family Deductible Increase
- PPO
 - Deductible Increase
 - Primary Care Physician Co-pay Increase
 - Change in Co-Insurance
 - Specialty Drug Co-pay

PLAN BENEFITS	OPTION 1: HDHP (HSA) \$4,000	OPTION 2: PPO (FSA) \$4,000
Calendar Year Deductible		
Individual	\$4,000	\$4,000
Family	\$8,000	\$8,000
Out-of-Pocket Maximum	\$4,000	\$7,500
Individual	\$8,000	\$15,000
Coinsurance	0%	30%
Age appropriate annual Wellness Exam	No cost to you	No cost to you
Office Visits		
Primary Care Office Visit	0% after deductible	\$50 copay
Specialist Office Visit (consult & evaluation only)	0% after deductible	30% after deductible
Inpatient Hospital Facility	0% after deductible	30% after deductible
Outpatient Hospital Surgical Services	0% after deductible	30% after deductible
Outpatient Hospital Services (non surgical)	0% after deductible	30% after deductible
Emergency Room	0% after deductible	30% after deductible
Prescription Drugs		
Generic		\$20 copayment
Preferred		\$50 copayment
Non-Preferred	0% after deductible	\$70 copayment
Specialty		\$250 copayment
Mail Order		1 x retail copay per 100 days supply



High Deductible Health Plan (HSA)

	2019	2020
Deductible (Individual)	\$2,700	\$4,000
Deductible (Family)	\$5,400	\$8,000

4000 PPO Plan

	2019	2020
Deductible (Individual)	\$ 3,500	\$ 4,000
Out-of-Pocket Max	\$ 6,000	\$ 7,500
Deductible (Family)	\$ 7,000	\$ 8,000
Out-of-Pocket Max	\$12,000	\$15,000
Co-insurance	20%	30%
Co-Pay (PCP)	\$40	\$50

Co-Pay

Fixed amount you pay, usually at the time of a medical service. Copays are separate from, and do not count as part of, your deductible.

However, they do count toward your out-of-pocket maximum, which can help if you have high medical expenses during a calendar year.

Deductible

Amount you pay for healthcare before your health plan begins to make payments. For example, if your deductible is \$1,000, your health plan will begin paying once you've paid \$1,000 toward "allowable" charges, not the billed charges. An "allowable" charge is the amount Arkansas Blue Cross agrees to pay for a particular healthcare service that is in-network. The amount reflected on a healthcare provider's bill may be more, but your deductible is based on the "allowable" charge.

In-Network vs Out-of-Network Costs

- Out of network providers may balance bill for the difference of billed charges and the allowable charges.

Co-Insurance

Percentage of the cost you are responsible to pay for healthcare services, after your deductible has been met.

Deductible Type

H.S.A (Embedded)

- If you or anyone in your family meets the individual deductible, then your health plan will pay a portion of medical expenses for that person for that calendar year; however, when the family deductible is met by any combination of family members, co-insurance will pay on all family members – even in the event no single family member meets the deductible.

PPO (Fulfillment)

- Each family member on the plan has an individual deductible. When 2 family members have met their deductible, then the entire family deductible has been met for that calendar year and the health plan will pay co-insurance.

Out of Pocket Maximum

- If you or a family member reach your out-of-pocket maximum for the calendar year, your insurance will cover you at 100% for the rest of that year. The out-of-pocket limit includes your deductible, coinsurance and copay amounts. The out-of-pocket limit does not include premium payments or charges for services that are not covered.

Employee Compensation Tiers

H.S.A. - Employee Cost		PPO - Employee Cost	
Employee Contribution		Employee Contribution	
0-25	\$0.00	0-25	\$30.00
25 - 50	\$39.00	25 - 50	\$50.00
50 - 75	\$65.00	50 - 75	\$80.00
75-125	\$93.00	75 - 125	\$110.00
125	\$110.00	125	\$127.00
Employee & Spouse Rate:	\$476.00	Employee & Spouse Rate:	\$505.00
Employee & Child Rate:	\$208.00	Employee & Child Rate:	\$221.00
Employee & Family Rate:	\$598.00	Employee & Family Rate:	\$672.00

Example of Insurance Usage:

4000 H.S.A.

- Mary goes to her primary care physician for upper respiratory symptoms and the doctor sends her for a chest x-ray. He gives her a prescription for antibiotics The charges for today's visit are \$486.

• Doctor Visit	\$75
• X-ray	\$326
• Prescription	\$85

Mary's responsibility \$486

4000 PPO

- Mary goes to her primary care physician for upper respiratory symptoms and the doctor sends her for a chest x-ray. He gives her a prescription for antibiotics The charges for today's visit are \$486.

• Doctor Visit	\$50 copay
• X-ray	\$326
• Prescription	\$50 copay

Mary's responsibility \$ 426

Example of Insurance Usage:

4000 H.S.A.

- Rebecca has a rash that won't go away. It's looking like it might be a tick bite. She goes to see her Primary Care physician. He sends her to the lab to draw blood to rule out the tick bite. Prior to this visit, she has satisfied \$3,894 of her \$4,000 deductible.
 - Charges for this visit - \$768
 - Doctors Charges \$84
 - Lab Panel \$684 \$106 to ded
- Rebecca's responsibility \$106

\$106 went to meet her deductible. The remainder was paid at 100%.

4000 PPO

- Rebecca has a rash that won't go away. It's looking like it might be a tick bite. She goes to see her Primary Care physician. He sends her to the lab to draw blood to rule out the tick bite. Prior to this visit, she has satisfied \$3,894 of her \$4,000 deductible.
 - Charges for this visit - \$768
 - Doctors Charge \$50
 - Lab Panel \$684 \$106 to ded
\$173 to OOP
- Rebecca's responsibility \$329

Any additional cost for Rebecca during the year would be applied to her \$7,500 Out-of-Pocket Max

Example of Insurance Usage:

4000 H.S.A.

- John has been hospitalized for a serious health condition. He spends 5 days in the hospital. At discharge he was given 3 prescriptions for treatment.

Cost for his services - \$7,879

- Hospital Charges \$6,051
- Doctors Charges \$1,139
- Prescription \$689

John's responsibility \$4,000

4000 PPO

- John has been hospitalized for a serious health condition. He spends 5 days in the hospital. At discharge he was given 3 prescriptions for treatment.

Cost for his services - \$7,879

- Hospital Charges \$6,051 \$4,000 to ded
\$615 to OOP
- Doctor Charges \$1,139 \$342 to OOP
- Prescription \$150 copay

John's responsibility \$5,107

Pre-Tax HSA/FSA Deductions

Using an FSA/HSA is a great way to stretch your benefit dollars with pre-tax dollars. You decide how much you want to contribute to your accounts up to the IRS limit. That amount is deducted from your paycheck each pay period in equal installments, on a pre-tax basis throughout the year until you reach your maximum. The amount of your pay that goes into the HSA/FSA funds will not count as taxable income. The amount of the FSA elections you make will be added to your FSA/HSA benefit card making it easy to pay for eligible services such as deductible's copays and co-insurance.

Reasons to consider contributing to a HSA or FSA account

- Standard medical services such as office visits:
Copayments, coinsurance and deductibles
- Prescriptions, over-the-counter products and health care products
- Preventive and restorative dental care as well as orthodontia for children and adults
- Eyeglasses, contact lenses and solutions, and laser eye surgery

HSA vs. FSA

Health Savings Account (HSA)

- Can enroll if participating in the HDHP Medical (HSA) Plan
- 2020 Contribution Limits:
 - Individual Limit: \$3,550
 - Family Limit: \$7,100
- Your unused HSA account will roll over into the next plan year. There is no limit on the amount you can roll over.

Flexible Spending Account (FSA)

- Can enroll if you are participating in PPO Plan
- 2020 Contribution Limit: \$2,700
- You can only rollover \$500 of unused funds into next plan year. Additional unused funds are forfeited.

Dental

- No changes to plan or rates in 2020

Deductible	\$50 individual (does not apply to preventative care)
Co-insurance:	100% Preventative Services
	80% Basic Services
	50% Major Services
	50% Orthodontic Services

	Employee Premium	Tech Portion of Premium
Employee Only	\$0	\$27.08
Employee & Spouse	\$25.86	\$28.76
Employee & Children	\$22.36	\$28.54
Employee & Family	\$57.89	\$30.85

Vision

- No changes to plans or rates in 2020

Co-pays	\$10 Exam/ \$15 Materials
Exam	Once every 12 months
Lenses or Contact Lenses	Once every 12 months
Frames	Once every 24 months

	Employee Premium
Employee Only	\$ 9
Employee & Spouse	\$16.67
Employee & Children	\$18.02
Employee & Family	\$25.67

Group Term Life

- In 2020, Arkansas Tech offers Basic Life Insurance at 2 times your annual salary at a maximum of \$75,000 of coverage. This insurance includes both a group term life policy and an additional accidental death & dismemberment policy.
- In addition, participating employees will be eligible to participate in the Employee Assistance Program

Group Term Life – Employee Assistance Program

- If you enroll in the Group Term Life/AD&D plan, you will have access to the EAP offered by New Directions at no additional cost to you. All EAP services are 100% confidential. ATU will not know that you reached out.
- 3 Face to Face visits per issue every 12 months
- Includes Assistance with
 - Counseling
 - Consultation on Finances and legal needs
 - Crisis support
 - Coaching
 - Adult and Child resources
- Mobile App, Web Resources and Phone Support



Voluntary Life

- In addition to the basic life insurance, if you are age 69 or younger you can elect voluntary life insurance in increments of \$10,000.
- During this enrollment period you can elect up to \$200,000 in life insurance without being subject to evidence of insurability through USAble.
- Coverage over \$200,000 up to \$300,000 will be subject to evidence of insurability.
- The guarantee issue for spouse life coverage remains at \$30,000. Any additional elected amounts will be subject to evidence of insurability.

Disability

- Disability (Short Term Disability or Long Term Disability) assists in replacing up to 60% of your earnings in the event that injury, illness or pregnancy prevents you from working.
 - **Short Term Disability (STD)** pays a benefit up to 60% of your basic weekly earnings to a maximum of \$1,250, per week, less offsets for other income.
 - **Long Term Disability (LTD)** pays a benefit up to 60% of your basic monthly earnings up to a maximum of \$7,500 per month, less offsets of other income.

Ancillary Plans

- **Accident Recovery** - provides comprehensive coverage for accidental injuries including hospitalization, rehab and physical therapy.
- **Hospital Recovery**—provides a lump sum hospital admission benefit that will immediately meet deductible or cover out of pocket costs.
- **Critical Care with Cancer** -Benefits are paid directly to you upon the qualified diagnosis of a covered critical illness or first diagnosis of cancer.
- If you are newly enrolling in Hospital Recovery or Critical Care with Cancer or if you choose to increase your coverage amount, you will be subject to evidence of insurability.

Supplemental Retirement Accounts

- Keep in mind that if you have a supplemental account with TIAA, you have an ability to make changes throughout the year. You do not have to wait for Open Enrollment to make changes to your withholdings.
- If you do not currently have a supplemental TIAA account, but would like to start contributing additional funds into your retirement then you'll need to follow two steps:
 - Complete an electronic enrollment with TIAA to setup your account.
 - Complete an deduction authorization form with HR.
- A supplemental account with TIAA has a maximum annual limit of **\$19,000** (*unless you are over 55 and then your maximum annual limit is \$25,000*). These limits are set by the IRS each year.

Additional Resources via Blue Cross

- My BluePrint
 - Look at Personal Health Statements
 - Find Providers
 - Cost estimations
 - Temporary ID Cards
 - Pharmacy (Prescription) Formulary
- Virtual Health
 - New with Blue Cross for Medical Insurance

Next Steps

- Open Enrollment is scheduled from November 4 to 15th
- HSA/FSA require active enrollments each year
- You can complete the election online using the BenefitFocus Portal similarly to 2019 Enrollments.
 - Updating dependents will require social security number & date of birth

Need Assistance?

Monday**	November 4, 2019	Young Ballroom	8:30am – 4:30pm
Tuesday**	November 5, 2019	Young Ballroom	8:30am – 4:30pm
Wednesday	November 6, 2019	Young Ballroom	8:30am – 4:30pm
Thursday**	November 7, 2019	Ozark	9:00am – 4:00pm
Friday	November 8, 2019	Young Ballroom	8:30am – 4:30pm
Monday	November 11, 2019	Young Ballroom	8:30am – 4:30pm
Tuesday	November 12, 2019	Young Ballroom	8:30am – 4:30pm
Wednesday**	November 13, 2019	Young Ballroom	8:30am – 4:30pm
Thursday	November 14, 2019	Facilities Management	9:00am – 4:00pm
Friday	November 15, 2019	Young Ballroom	8:30am – 4:30pm

****Vendors will be onsite during these days if you have questions regarding the benefits offered**