Northwest Missouri State University 2024 Employee Benefits Open Enrollment

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Agenda

- What is Open Enrollment
- Benefit Plan Overview
- Enrollment Process
- Questions & Answers

Key Information

- The 2025 Benefit Open Enrollment Period is October 30th – November 15th
- All benefit elections and changes will take effect January 1, 2025.
- All payroll deductions will begin with December payroll.
- The deadline to enroll is November 15th, 2024.

Open Enrollment

- Opportunity to make changes to your benefit elections and to review which dependents you will cover
- Elections made during this period will remain in effect for a 12-month period, unless you experience an IRS-approved "qualifying event"
- Approved qualifying events include:
 - Marriage or Divorce
 - > Death
 - Birth or adoption of a dependent
 - Change in employment status
 - Change in dependent's eligibility status
 - Loss of or significant change to your current coverage
 - Judgment, decree or court order
- You have 30 days from the date of the event to notify Human Resources

Blue Cross and Blue Shield of Kansas, Inc.

MEDICAL/RX

Medical/Rx – Definitions

Сорау	Flat dollar amount member is responsible for at the time of service. The plan usually pays 100% of the remaining balance.
Deductible	Amount member is responsible for <u>before</u> the plan pays for certain services.
Coinsurance	Percentage of payment shared between the member and the plan for certain services after the deductible has been met.
Out-of-Pocket Maximum	Member total payments for deductible, coinsurance and copays to stated maximum per plan year. Once reached, the plan will pay 100% for eligible expenses for the rest of the plan year.
High Deductible Health Plan (HDHP)	Qualified plan as defined by the IRS. No first dollar benefits, all services are subject to the deductible before the plan will pay. Exception is Routine Preventive Care as defined by the IRS.
HSA — Health Savings Account	Tax Free account that is established by the employee that is covered by a High Deductible Health Plan (HDHP).
Network Provider	Medical and pharmacy providers that have contracted with the plan to provide lower out-of-pocket costs for members.

Medical/Rx – Plan Highlights

*The deductible is calculated on an aggregate basis.

**The out-of-pocket maximum includes the deductible all eligible copays and coinsurance amounts.

	PPO - Base Plan	Blue Saver Plan - HSA Plan
Annual Deductible*	\$2,000 per individual \$4,000 per family	\$3,300 per individual \$6,600 per family
Annual Out-of-Pocket Maximum**	\$6,000 per individual \$12,000 per family	\$3,300 per individual \$6,600 per family
Plan Coinsurance	80% in most cases	100% in most cases
Office Visit	\$35 copay Primary Care/\$70 copay Specialist	100% after deductible
Lab & X-ray	80% after deductible	100% after deductible
Complex Radiology	80% after deductible	100% after deductible
Inpatient Hospital	80% after deductible	100% after deductible
Outpatient Hospital/Surgery	80% after deductible	100% after deductible
Urgent Care	\$70 copay	100% after deductible
Emergency Room	\$150 copay/visit, waived if admitted; deductible & coinsurance after copay	100% after deductible

Medical/Rx – Plan Highlights

PREVENTIVE CARE – Covered at 100% on all medical plan options. Know what services are covered at 100% by Blue Cross and Blue Shield of Kansas, Inc. prior to your preventive care visit

Routine preventive for Children (Birth to age 18)

Appropriate screenings based on gender and age

- Newborn visits
- Tuberculosis testing
- Anemia testing
- Lead exposure
- Pelvic exam and pap test
- Development and behavior
- Lipid profile
- Depression
- Obesity and counseling
- Nutrition counseling

Routine preventive for Adults

Appropriate screenings based on gender and age

- Lipid profile
- Diabetes
- Pelvic exam and pap testing
- Breast exam and mammogram
- Bone density testing
- Colonoscopy
- Aortic aneurysm
- Breastfeeding support, supplies (pumps) and counseling

Note: Services must be coded as preventive and performed in a different calendar year

Medical/Rx – Plan Highlights

	Blue Cross and Blue Shield of Kansas, Preferred-Care Blue PPO (Base Plan)	Blue Cross and Blue Shield of Kansas, Preferred-Care Blue BlueSaver Plan (HSA)
	Retail Prescription Drugs	
Generic	\$15 copay	100% after deductible
Preferred Brand Name	\$40 copay	100% after deductible
Non-Preferred Brand Name	\$65 copay	100% after deductible
Preferred Specialty	P: \$40 copay; NP: \$65 copay; covered at 100% if use RxSelect or Walgreens	100% after deductible
	Mail-Order Prescriptions	
Generic	\$30 copay	100% after medical deductible
Preferred Brand Name	\$80 copay	100% after medical deductible
Non-Preferred Brand Name	\$130 copay	100% after medical deductible
Preferred Specialty	Not Available	Not Available

***Please refer to your benefit guide for contribution details**

Health Savings Account (HSA)

If you elect the Qualified High Deductible plan you are eligible to open a Health Savings Account. A Health Savings Account (HSA) is a tax-saving account. This account helps offset your medical costs by giving you tax advantages, allowing your income to stretch farther by using the dollars that would have otherwise been paid in taxes. These accounts offer triple savings in that, contributions, investment earnings, and medical expenditures are tax-free.

Distributions from an HSA account are tax-free for qualified health care expenses as long as the amounts are not reimbursed by insurance or any other source. An individual can use their HSA to pay for qualified expenses for their self, spouse (as defined by the IRS), and tax dependents.

Northwest Missouri State University will contribute funds into your HSA account on your behalf. The funds will be deposited twice per year.

You can also contribute to your HSA account

2023 HSA Contribution Limits		
Self-Only	\$4,300	
Family	\$8,550	
Catch-up contribution (individuals 55 or older)	Additional \$1,000	

Flexible Spending Accounts (FSA)

Traditional FSA

• Allows you to set aside money for out-of-pocket expenses, such as copays, coinsurance, deductible, dental/vision expenses and prescriptions for you, your spouse and any of your tax dependents.

Limited Scope Dental/Vision FSA

• Allows you to set aside money for only out-of-pocket dental/vision expenses if you are enrolled in the Qualified High Deductible (HSA) plan. You can not participate in the Traditional FSA if you are enrolled in the HSA plan.

Dependent Daycare

• Allows you to set aside money pre-tax to reimburse expenses related to care for eligible dependents.

This plan has strict use it or lose it rules.

Must re-enroll each year. The deadline to enroll is Dec. 1st.

Maximum Annual Election	
Health Care FSA \$3,200	
Dependent Care FSA	\$5,000 (single) \$2,500 (married filing separate)

Delta Dental of Missouri



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Dental - Benefit Highlights

Delta Dental of Missouri Dental PPO All Employees	PPO Network	Premier Network	Out of Network Benefits
Annual Deductible	\$50 per individual \$150 per family	\$50 per individual \$150 per family	\$50 per individual \$150 per family
Benefit Maximum	\$1,000	\$1,000	\$1,000
Deductible Waived for Preventive Care	Yes	Yes	Yes
Preventive Care	100%	100%	100%
Basic Services*	80%	80%	70%
Major Services*	50%	50%	50%
Orthodontia Services (adult & dependent children)	\$1,000	\$1,000	\$1,000
Orthodontia	50%	50%	50%

*Please refer to your benefit guide for contribution details

EyeMed VISION

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Vision – Benefit Highlights

EyeMed	In Network Benefits	Out of Network Benefits
Exam Copay	\$10 copay	Up to \$40 reimbursement
Materials Copay	\$0 copay	Up to \$91 reimbursement
	Lens	
 Single Bifocal Trifocal Lenticular 	\$25 copay	Up to \$30 Up to \$50 Up to \$70 Up to \$70 Up to \$50
Progressive – Standard	\$80 copay	Up to \$50
	Contacts and Frames	
ElectiveMedically NecessaryFrames	\$0 copay, \$130 allowance \$0 copay, paid in full \$0 copay, \$130 allowance	Up to \$91 reimbursed Up to \$300 reimbursed Up to \$91 reimbursed
	Frequency	
Exam Frames Lenses Contacts	Once every plan year Once every plan year Once every plan year Once every plan year	Once every plan year Once every plan year Once every plan year Once every plan year

***Please refer to your benefit guide for contribution details**

Hartford Life and Accident Insurance Co ANCILLARY COVERAGES

Basic Life/AD&D

Northwest Missouri State University is pleased to provide an employer paid Life and AD&D benefit to all eligible employees:

Employee Benefit

➢ 1 X salary Life Insurance

Please be sure to review and update your beneficiary information as needed; this can be done at any time.

Voluntary Life Insurance

- Voluntary Life Insurance Options
 - Employee: Increments of \$10,000
 - Benefit Maximum of 5x salary up to \$450,000
 - Guarantee Issue \$300,000
- Options for your dependents:
 - \$5,000 Child benefit / \$10,000 Spouse benefit
 - \$10,000 Child benefit / \$20,000 Spouse benefit
- EOI (Evidence of Insurability) form is required if:
 - requesting an amount in excess of the Guarantee Issue maximum
- Costs are listed in your Enrollment Guide
- 100% paid for by the employee

***Please refer to your benefit guide for cost structure**

Long Term Disability

The following highlights details regarding our Long-Term Disability plan.

	Hartford Life and Accident Insurance Co Long Term Disability (LTD) All Active Full Time Employees
Elimination Period	180 days
LTD Benefit	60% up to a monthly maximum of \$10,000
Maximum Disability Period	Social Security normal retirement age

2025 Enrollment Process

- If you want to continue the FSA or enroll in the FSA you will need to make your election by December 1st.
- If you do not want to make any changes to your coverage or your dependents' coverage, except for FSA, you do not have to do anything.
- ONLY IF YOU MAKE CHANGES Medical and applicable Dental ID Cards will be sent to your home address.
- Please see The Office of Human Resources for an Open Enrollment Form or go on the Open Enrollment webpage at
- <u>https://www.nwmissouri.edu/hr/bulletin/events/2025enrollment.htm</u>
- No benefit enrollments or changes accepted after the open enrollment period unless due to a family status change (qualifying event)

USI Benefit Resource Center

QUESTIONS & RESOURCES

Benefit Resource Center

Contact the USI Benefit Resource Center (BRC) for free, confidential help!

- Benefit coverage levels
- Carrier information
- Claims assistance
- Billing issues

855-874-0829

BRCMidwest@usi.com

Monday through Friday 8:00am to 5:00pm Eastern & Central Standard Time

Thank you for your participation in this year's open enrollment presentation.

All election changes are due by: November 15, 2024.