



## Open Enrollment:

- ❖ Open enrollment is the time of year that our benefit plans renew. You must enroll in your benefit plans and add or drop dependents.
- ❖ The next time you will be able to make changes will be during next year's open enrollment in late 2019 or if a qualifying event occurs. You must complete a qualifying event change within 31 days of the qualifying event.
- ❖ Qualifying events are marriage, birth, adoption, divorce, legal separation, death or loss of coverage.

Enroll online between Monday, November 5 and  
Monday, November 19, 2018

## What's New:

- ❖ Changing from Humana to Anthem
  - No benefit plan changes, new formulary, large national network, online doc visits, new decision tools and more
- ❖ Enrollment system change to Benefit Focus

## MEDICAL: ANTHEM

Beginning January 1, 2019 your medical benefits will be through Anthem. There are no changes to your plan design. See below for important information on your Anthem coverage.

Benefits	Blue Access PPO	Blue Access PPO HSA
<b>Deductible</b>	\$750 /Single \$1,500/Family	\$3,000/Single \$6,000/Family
<b>Coinsurance</b>	80/20	100/0
<b>Medical Out-of-Pocket Annual Maximum</b>	\$2,000/Single \$4,000/Family	\$3,000/Single \$6,000/Family
<b>Office Visit</b>		
* <b>PCP Sick Visit</b>	\$20 copay	Deductible, then 0%
* <b>Specialist Visit</b>	\$40 copay	Deductible, then 0%
* <b>Wellness @ PCP</b>	Covered in full	Covered in full
* <b>Routine Vision including refraction</b>	Covered in full	Covered in full
<b>Inpatient Hospital</b>	Deductible, then 20%	Deductible, then 0%
<b>Outpatient Hospital</b>	Deductible, then 20%	Deductible, then 0%
<b>Emergency Room</b>	\$150 copay	Deductible, then 0%
* <b>Urgent Care</b>	\$35 copay	Deductible, then 0%
<b>Prescription Out-of-Pocket</b>	\$2,500 / Single \$5,000 / Family	Same as Medical
<b>Prescription Drugs</b>	\$15/\$40/\$60/25% up to \$250	Deductible, then 0%
<b>Mail Order (90 Day Supply)</b>	\$30/\$100/\$150/25% up to \$250	Deductible, then 0%

Employee Contribution	PPO		HSA	
	Standard	Wellness	Standard	Wellness
Per Month				
Single	\$197.04	\$147.04	\$109.50	\$59.50
Employee + Spouse	\$355.10	\$305.10	\$177.86	\$127.86
Employee + Child(ren)	\$330.58	\$280.58	\$161.40	\$111.40
Family	\$530.28	\$480.28	\$247.50	\$197.50

The above benefits are in-network. Non-network benefits are not listed. Please refer to Summary Benefit of Coverage and Certificate of Coverage for benefit details.\* Please note, the non-network out of pocket maximum is not a true out of pocket and providers can balance bill the difference between the retail cost and what the plan reimburses. Please discuss balance billing with your non-network provider. Seeking care from an in-network provider ensures the lowest cost with no balance billing.

## IMPORTANT ANTHEM INFORMATION

### How to Search For An In-Network Provider

Make sure that your current providers are in-network with Anthem by following these steps.

1. Visit [www.anthem.com](http://www.anthem.com) and scroll down and click "Find a Doctor".
2. Click "Search as Guest" and then "Continue."
3. Answer "How do you get insurance?" with "Through my employer."
4. Enter the state you want to search in.
5. Answer "What type of care are you searching for" with "Medical".
6. Select the "National PPO (BlueCard PPO)" Network.

## HEALTH SAVINGS ACCOUNT (HSA)

HSA dollars can be used for qualified medical, dental, and vision expenses. The maximum contribution for 2019 is **\$3,500** for single and **\$7,000** for employee + spouse or child(ren) and family. Employees age 55+ can contribute an additional \$1,000 'catch-up' amount. Fifth Third Bank administers the account. Please note: you may only have this account if you enroll in the HSA medical plan.

## FLEXIBLE SPENDING ACCOUNT (FSA)

FSA's are offered through Chard Snyder.

### Healthcare FSA – NOT HSA Compatible

Maximum contribution is \$2,600

### Limited FSA – HSA compatible

Maximum contribution is \$2,600

### Dependent Day Care – HSA compatible

Maximum contribution is \$5,000

You have 90 days after the plan year ends on December 31st to submit – not incur – claims for reimbursements that occur during the plan year. This is your run out period. Any funds not used by this point will be forfeited.

## SPOUSAL SURCHARGE

Due to medical costs increasing, the spousal surcharge will be increasing this year. On the open enrollment site, please confirm whether or not your spouse is eligible for coverage through his or her employer. If your spouse is eligible for coverage through their employer and is on Xavier's health plan, you will pay a **\$74** per month spousal surcharge.

## WELLNESS RATE

The wellness rate is \$50 a month less than the Standard rate. Qualifying employees completed a biometric screening and health risk assessment by September 14th.

## NEW: NO TOBACCO SURCHARGE THIS YEAR

This year there will be no tobacco surcharge added to your premium. You will no longer need to answer questions on the site about tobacco usage.

### How to Search For A Prescription

Find out how your prescriptions will be covered on your Anthem plan by following these steps. Anthem is waiving the step therapy and prior authorization requirements for the first 90 days of the plan year. Anthem will reach out to you if anything is required after those 90 days.

1. Visit <https://www11.anthem.com/ca/pharmacyinformation>.
2. Under "National Drug Lists" select "National Drug List 4-Tier".
3. Enter the name of your prescription in the search bar and view how the prescription will be covered.

**View the Anthem booklet on the BenefitFocus site to view the Anthem programs that are available to you!**

## DENTAL: DENTAL CARE PLUS

Xavier University offers a Basic plan that covers preventive and basic services only.

Below is a brief summary of your benefits. Please see your Dental Care Plus detailed benefit summary or certificate for more information.\*

Buy-Up Plan	
Benefits	In Network
Deductible	\$50/\$150
Annual Maximum	\$1,000 per person
Preventive Services	Covered in full
Basic Services	Deductible, then 40%
Major Services	Deductible, then 60%
Orthodontia (to age 19)	50% to \$500

Employee Contribution (per month)	Dental
Single	\$29.62
Employee + One	\$57.00
Family	\$100.42

Base Plan	
Benefits	In Network
Deductible	\$50/\$150
Annual Maximum	\$750 per person
Preventive Services	Covered in full
Basic Services	Deductible, then 50%
Major Services	NOT COVERED
Orthodontia (to age 19)	NOT COVERED

Employee Contribution (per month)	Dental
Single	\$23.10
Employee + One	\$44.46
Family	\$78.32

## VOLUNTARY VISION: HUMANA

Below is a brief summary of your benefits. Please see your Humana detailed benefit summary or certificate for more information.\*

Benefits	In Network
Exam (1 every 12 months)	\$20 copay
Lenses (1 every 12 months)	
Single	\$20 copay
Bifocal	\$20 copay
Trifocal	\$20 copay
Frames (1 every 24 months)	\$130 retail allowance
Contacts (1 every 12 months)	\$150 allowance

In a 12 month period, you may receive either lenses or contacts, not both.

Employee Contribution (per month)	Vision
Single	\$5.96
Employee + One	\$10.88
Family	\$16.56

## CRITICAL ILLNESS & ACCIDENT: CIGNA

The out-of-pocket costs you may have if you are in an accident or face a serious illness can be concerning. CIGNA critical illness and accident plans can help. Benefits are paid directly to you, so you can use them however you want – to pay everyday bills, medical copays or deductibles. **For this open enrollment period, coverage is being offered at guaranteed issue (GI). You can increase or newly elect coverage up to \$20,000 for Critical Illness and any amount for Accident. You will have to answer medical questions if your election exceeds the GI amount. Employees/dependents will be approved for amounts up to GI but could be declined for amounts over GI.**

If you enroll in Critical Illness coverage and receive a covered preventive service, you will receive a \$100 wellness benefit.

## VOLUNTARY LIFE INSURANCE: CIGNA

Voluntary term life insurance is a product you buy not only for yourself, but to help take care of those who depend on your income. This affordable coverage can help relieve the financial burden at a time of loss.

**Voluntary Life will be offered at guaranteed issue this year. You can increase or newly elect coverage up to \$200,000. You will have to answer medical questions if your election exceeds the GI amount. Employees/dependents will be approved for amounts up to GI but could be declined for amounts over GI.** Premium rates are based on age and election amounts will appear when selecting your open enrollment benefits online. **Make sure your beneficiary information is up to date!**

## Important Information

- **Will I receive a new identification card?** Yes, you will receive a new ID card with your new member information with Anthem. Please share with provider and pharmacy after 1/1/19.
- **How do I enroll in my benefits?** Annually all employees must elect or decline benefits online. Access the site at [www.xavier.edu/hr/benefits.com](http://www.xavier.edu/hr/benefits.com). You must have your Banner ID to access the site. The enrollment site is available from November 5<sup>th</sup> to November 19<sup>th</sup>.
- **Are my dependents covered until age 26?** Yes, your dependents will be covered until the end of the birth month that they obtain age 26.

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## Anthem Resources

**Anthem Engage** – find a provider, search RX/pharmacy costs, transparency pricing tool for medical services, review EOB's, deductible and out of pocket maximum, care-based resources and outreach  
Go to app store on smart device and search **Engage Wellbeing** or anthem.com on computer

**LiveHealth Online** - Anthem Virtual Doctor Visit, PCP copay PPO, \$49 HDHP

LiveHealth Online offers the perfect solution for the busy member – online doctor visits through live video chat. Common uses for the program include diagnosis of common cold, flu, sinus infections, ear infections, and more! Medications can be prescribed in most states. If the doctor is unable to treat you, you aren't charged for the visit. Also includes mental health visits with different types of providers. **Register** at [www.livehealthonline.com](http://www.livehealthonline.com). Or through Engage app. Include your Anthem information upon registration.

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## Important Contact Information

**Medical Carrier:** Anthem

**Website:** [www.Anthem.com](http://www.Anthem.com)

**Phone Number:** 800.552.9159

Please refer to your Anthem ID card for your policy number

**Dental Carrier:** Dental Care Plus

**Website:** [www.dentalcareplus.com](http://www.dentalcareplus.com)

**Phone Number:** 800.367.9466

Please refer to your DCP ID card for your policy number

**Vision Carrier:** Humana

**Website:** [www.humanavisioncare.com](http://www.humanavisioncare.com)

**Phone Number:** 866.537.0229

Please refer to your Humana ID card for your policy number

**Critical Illness, Accident, Voluntary Life Carrier:** CIGNA

**Website:** [www.cigna.com](http://www.cigna.com)

**Phone Number:** 800.997.1654

### **HORAN's Engagement Team**

In the event you have a question or concern that has not been handled correctly or to your satisfaction by the insurance carrier, please call or email our Engagement Team:

Email: [Engagement@horanassoc.com](mailto:Engagement@horanassoc.com)

Phone: 844.694.6726

### **BenefitFocus – Technical Issues**

If you have technical issues with the enrollment site please use the following contact information for a resolution:

Phone: 1.877.336.8082