



2019

Open Enrollment Forum

This is a summary presentation only. If there are any differences between the information in this presentation and the information in Santa Clara University's plan documentation and/or insurance certificates, the plan documentation and/or insurance certificates will govern



AGENDA

- Introduction
- Open Enrollment Overview
- What's New
- Medical Coverage
- *Intermission*
- Review of other Benefit Plans
- How to Enroll
- Questions & Answers





Considerations in Determining Health Care Plans and Providers

- Provide high quality health care options.
- Competitive pricing.
- Provide as much choice of plans, prices and providers as possible.
- Remain competitive with regional and national employers for acquiring and retaining talent.



2019 Changes to Healthcare Benefits Plans

- Kaiser Silver is eliminated.
- Anthem Blue Cross is replaced with Blue Shield.
 - Blue Shield Trio HMO – Lowest premium rates, same benefits as Anthem Gold, fewer provider options.
 - Blue Shield Access+ HMO - Largest provider network, same benefits and same price as Anthem Gold.
- University is contributing \$50/month for Blue Shield PPO members to fund their Health Savings Account.
- No changes on benefit or price for Delta Dental or Blue View Vision.



Options to Replace Kaiser Silver HMO

2018 Kaiser Silver HMO

	2018 Kaiser Silver HMO	2019 Kaiser HMO	2019 Blue Shield Trio HMO
Employee Only	\$26.24	\$51.32	\$11.12
Employee + One	\$212.84	\$301.63	\$152.20
EE+ Family	\$381.48	\$455.80	\$290.94

Keep Kaiser Doctors

2019 Kaiser (Previous Kaiser Gold)

Richer Benefit than '18 Kaiser Silver
Slightly Higher Cost

Lowest Cost

2019 Blue Shield Trio HMO

Richer Benefit than '18 Kaiser Silver



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Options to Replace Anthem Blue Cross Silver HMO

2018 Anthem Blue Cross Silver HMO

	2018 Anthem Blue Cross Silver HMO	2019 Blue Shield Trio HMO	2019 Kaiser HMO	2019 Blue Shield Access + HMO
Employee Only	\$26.24	\$11.12	\$51.32	\$77.81
Employee + One	\$212.84	\$152.20	\$301.63	\$351.93
Employee + Family	\$381.48	\$290.94	\$455.80	\$536.13

Lowest Cost
2019 Blue Shield Trio
 Richer Benefits than Anthem Silver
 Less Choice with Smaller Network

Richer Benefits than Anthem Silver
2019 Kaiser HMO
 Higher Cost but less than Blue Shield Access + HMO

Similar Choice of Providers
2019 Blue Shield Access +
 Richer Benefits than Anthem Silver
 Lower Cost Than BCA Gold



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Options to Replace Anthem Blue Cross Gold HMO

2018 Anthem Blue Cross Gold HMO

	2018 Anthem Blue Cross Gold HMO	2019 Blue Shield Trio HMO	2019 Blue Shield Access+ HMO
Employee Only	\$91.54	\$11.12	\$77.81
Employee + One	\$414.04	\$152.20	\$351.93
Employee + Family	\$630.74	\$290.94	\$536.13

Lowest Cost
2019 Blue Shield Trio HMO
Same Benefit As BCA Gold
Less Physician Group Choice

Similar Physician Group Choice
2019 Blue Shield Access+ HMO
Same Benefit as Anthem Gold
Lower Price than Last Year



WHAT IS OPEN ENROLLMENT

Open Enrollment is all eligible employees' annual opportunity to make the following changes:

- Enroll, change or waive coverage
- Add, change or drop eligible dependents

All benefit changes become effective **January 1st, 2019**



ELIGIBILITY

Eligible Employees

- Regular, full-time employees (a minimum of 20 hours per week)
- New Hires are eligible first of the month coinciding with or following date of hire

Eligible Dependents

- Spouse
- State Registered Domestic Partner
- Dependent Children:
 - to age 26
 - Children of any age who are incapable of self-support due to a physical or mental disability



MID YEAR CHANGES

Your elections remain in force from January 1, 2019 through December 31, 2019 unless you have a Qualified Family Status Change.

Qualified Family Status Change Examples Include:

- Marriage, legal separation or divorce
- Birth or adoption
- Loss or gain of benefits due to a change in Spouse / Domestic Partner employment status
- Change in your residence or employment status affecting access or eligibility

You must request changes within 30 days of the event.

Please contact HR if you have a family status change.



WHAT'S NEW FOR JANUARY 2019?

➤ MEDICAL PLAN CHANGES!

❖ Kaiser:

- Silver HMO plan is being eliminated
- The Kaiser HMO offered for 2019 will match the current Gold HMO Plan design

❖ Anthem is now Blue Shield:

- The new Blue Shield HMOs (Trio HMO and Access+ HMO) will both mirror the current Gold HMO plan design
- The new Blue Shield PPO HSA plan will closely match the current PPO HSA plan design

- ### ➤ SCU will contribute \$600 annually (\$50 per month) to the HSA account of employees enrolled in the PPO HSA plan





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MEDICAL OPTIONS - HMO

PLAN HIGHLIGHTS	KAISER HMO Norther CA Only	BLUE SHIELD TRIO HMO	BLUE SHIELD ACCESS+ HMO
Annual Deductible	None	None	None
Annual Out-of-Pocket Maximum			
Individual/Family	\$1,500/\$3,000	\$2,000/\$4,000	\$2,000/\$4,000
Doctor Office Visits	\$20 copay	\$20 copay	\$20 copay
Specialist Office Visits	\$20 copay	\$20 copay	\$20 copay (\$40 copay self-referral)
Teladoc Talk or video chat with a doctor anytime	No copay	\$5 copay	\$5 copay
Preventive Care	No copay	No copay	No copay
Urgent Care Center Save time and money by going to Urgent Care	\$20 copay	\$20 copay	\$20 copay
Hospital Room & Board	\$250 copay per Admission	\$250 copay per Admission	\$250 copay per Admission
Prescription Drugs			
Tier 1	\$10 copay	\$10 copay	\$10 copay
Tier 2	\$25 copay	\$25 copay	\$25 copay
Tier 3	\$25 copay	\$50 copay	\$50 copay
Specialty Drugs	\$25 copay	20% coinsurance up to \$200 per fill	20% coinsurance up to \$200 per fill
Chiropractic	\$15 copay to 30 visit per year	\$15 copay up to 20 visits per year	\$15 copay up to 20 visits per year
Hearing Aid	\$2,500 allowance per aid, 2 aids every 3 years	\$2,000 allowance every 24 months	\$2,000 allowance every 24 months
Optical Dispensing	\$175 Eyewear allowance every 2 years	Not covered- you may enroll in Blue View Vision	Not covered – you may enroll in Blue View Vision



AWAY FROM HOME CARE (AFHC) FOR HMO MEMBERS

If you are a current Blue Shield HMO member or covered dependent, you qualify for AFHC if you meet one of the following conditions:

- a dependent goes to out-of-state schools with the principal residence of subscriber's permanent residence.
- travel outside the HMO service area in another state for a minimum of 90 consecutive days, but no more than 180 days, and returning to your permanent residence.
- Dependents, by court order to provide medical coverage, live out of state. There is no time limit on this condition.

AFHC is available in 31 states. Contact AFHC coordinators at (800) 622-9402 to arrange for out of state benefits prior to your extended out of state stay.



BLUE SHIELD TRIO HMO

Coordinated care, affordability, and personalized support

- **Choose your own doctor**, specialists and pharmacies
- **Self-refer to specialists** (within the same medical group as your primary care doctor)
- **Access to Teladoc doctors** for phone or video appointments, 24/7/365 with \$5 copay
- **360° service from Shield Concierge** dedicated support team to help you make care decisions and navigate the healthcare system
- **Engaging, digitally enabled wellness programs** and free Fitbit activity tracker
- **Urgent and emergency care coverage** anywhere in the world



MEDICAL OPTIONS - BLUE SHIELD PPO HSA

PLAN HIGHLIGHTS	BLUE SHIELD HIGH DEDUCTIBLE PPO – HSA
Annual Deductible Single Single with Dependent(s) Family	<u>In Network / Out of Network</u> \$2,000 / \$4,000 \$2,700 per member / \$5,200 per member \$4,000 / \$8,000
Annual Out-of-Pocket Maximum Individual Family	\$3,425 / \$12,000 \$6,850 / \$24,000
Doctor Office Visits	10% / 30%
Teladoc	\$5 per consult / Not Covered
Preventive Care	No charge / 30%
Hospital Room & Board	10% / 30%
Prescription Drugs (30 day supply) Tier 1 Tier 2 Tier 3	After deductible is met \$10 copay / 25% + \$10 copay \$40 copay / 25% + \$40 copay \$60 copay / 25% + \$60 copay
Specialty Drugs	30% to \$200 per fill
Hearing Aid	20% / 20%



HEALTH SAVINGS ACCOUNT (HSA)

What is an HSA?

- HSA allows you to set aside tax-free dollars to pay for health care expenses
- Your account balance rolls over year-to-year and earns interest tax-free
- Contributions and earnings grow tax-free for federal tax purposes and state tax purposes except in CA, AL, NJ, NH & TN
- You own your HSA – it moves with you if you change jobs, health plans or retire

How Much Can You Contribute?

- Up to the IRS 2019 Contribution Limits:
 - \$3,500 = Employee only
 - \$7,000 = Family
 - Catch-up Contributions (Age 55 or older) = \$1,000
- SCU contribution will count toward IRS Contribution Limits.



HSA ELIGIBILITY

For you (the employee) to be eligible to open an HSA, you must:

- Be enrolled in a qualified high deductible health plan (HDHP)
- **NOT** be enrolled in a non-HDHP including a spouse's plan, Medicare, Tricare or prescription drug only plan
- **NOT** be claimed as a dependent on another individual's tax return, other than your spouse's
- **NOT** have received any health benefits from the Veterans Administration or one of their facilities, including prescription drugs, in the last three months
- **NOT** be enrolled in a General Purpose Flexible Spending Account (FSA). You can, however, enroll in the Limited Purpose FSA

Your qualified dependents may also use the HSA funds, even if they are not covered under a HDHP



USING HSA FUNDS

Your HSA funds can be used for qualified Health Care Expenses

- Examples:
 - Unreimbursed qualified medical, dental and vision expenses
 - LASIK
 - Orthodontia
 - Prescriptions
 - Medical premiums for COBRA, or health coverage while receiving unemployment compensation, Medicare Parts B & D
 - Certain Long Term Care premiums
 - Medical Supplies

Blue Shield partner with HealthEquity to make it easy for you to manage your HSA. You can save on potential administration fees from your prior custodian by consolidating your HSA with HealthEquity.

- The HSA must be established and an initial deposit must be made before you can be reimbursed for eligible expenses or use funds
- Because you own the HSA, funds can be used towards eligible expenses even after you are no longer covered by an HSA-qualified plan
- If you use an HSA for non-IRS approved medical expenses, you will be subject to pay earned income taxes on the misused funds as well as a 20% excise tax



Locate a Blue Shield Doctor, Specialist or Facility

Follow the steps below to find a Participating Provider:

- Go online to www.blueshieldca.com
 - Click on **Find a Doctor**
 - Select a **Provider Type**
 - Under Plan Type, **choose Trio ACO HMO, Access+ HMO or PPO Network**
 - If you are enrolling in an HMO, select **Primary Care** and be sure to write down the Primary Care Physician's ID (**PCP**) number as you will need this when enrolling
- If your current PCP Doctor is in the new network, be sure to indicate you are already a current patient when enrolling



Transitioning Prescriptions to Blue Shield

Fill your prescriptions one more time

- To ensure you have enough of your medication, you should refill your prescriptions one last time in December using your current Anthem benefits. This will allow you time in January to obtain any potential data needed by Blue Shield before your next refill(s) are due.

New Rx Plan:

- In order to assist with a smooth transition into your new pharmacy benefit, prior authorizations and step therapy restrictions will be removed for the first 90-days of your plan, for select maintenance prescriptions.
- The Blue Shield Drug Formulary is available online at www.blueshieldca.com under Pharmacy, Drug Database & Formulary



MONTHLY EMPLOYEE CONTRIBUTION

MEDICAL PLANS	Kaiser HMO	Blue Shield Trio HMO	Blue Shield Access+ HMO	Blue Shield PPO HSA
Employee Only	\$51.32	\$11.12	\$77.81	\$113.92
Employee + 1	\$301.63	\$152.20	\$351.93	\$421.64
Employee + Family	\$455.80	\$290.94	\$536.13	\$677.60



NEXT STEPS & REMINDERS

Action

Dates

Open Enrollment Forums taking place	Friday, October 19 Wednesday, October 24 Monday, November 12 Tuesday, November 20
Enrollment information available at the Health & Wellness Expo	Thursday, November 8
Online Enrollment System, eCampus, opens for elections	Monday, November 5
Online Enrollment System closes at 11:59pm (Pacific Time) and all elections must be finalized to system close	Monday, November 26
Benefits become effective	Tuesday, January 1, 2019

Reminders:



- SCU will contribute \$50 per month to the HSA for those enrolled in the PPO
- To waive medical coverage you need to complete a form and provide proof of coverage



Health Advocate

Need help understanding your benefits?

The Health Advocacy program offered through Health Advocate is a benefit that can help you, your spouse, dependent children, parents and parents-in-law.

The service is provided to you at no cost.

- Health Advocate can help with:
 - Resolve claims and billing issues
 - Answer questions about test results, treatments and medications
 - Clarify Medicare, Medicare Supplement Plans and Medicaid
 - Find the right doctors, specialists, dentists and other providers (except for Kaiser providers)
 - Clarify tests and treatments
 - Facilitate second opinions; transfer X-rays and medical records
 - Find options for non-covered services
- Call 866-695-8622 or email answers@HealthAdvocate.com for 24/7 support



DENTAL PLAN

PLAN HIGHLIGHTS	DELTA DENTAL PPO	
	IN-NETWORK	OUT-OF-NETWORK
Annual Deductible	Waived for Preventive Services	
Individual	\$25	\$25
Family	\$75	\$75
Annual Maximum Benefit	\$2,500	\$2,500
Preventive Services X-rays; Cleanings (4 cleanings per year); Examinations	Covered at 100%	Covered at 100%
Routine Basic Services Amalgam Fillings; Extractions; Root Canals	Covered at 100%	Covered at 80%
Major Services Bridges, Dentures, Crowns, Implants	Covered at 60%	Covered at 50%
Orthodontia Services Employees & Children to age 26	Covered at 50% to a Lifetime Maximum of \$3,000	



VISION PLAN

PLAN HIGHLIGHTS	ANTHEM BLUE VIEW VISION	
	IN-NETWORK	OUT-OF-NETWORK
Examination Copay	\$20	Covered to a Maximum of \$45
Vision Examination	Once Every 12 Months	
	Covered at 100%	Covered to a Maximum of \$45
Frames	Once Every 12 Months	
	Covered at 100% up to \$120, then 20% off any remaining balance	Covered to a Maximum of \$47
Lenses	Once Every 12 Months	
	Single	Covered at 100% up to \$45
	Bifocal	Covered at 100% up to \$65
	Trifocal	Covered at 100% up to \$85
Contact Lenses	Medically Necessary	Covered to a Maximum of \$210
	Cosmetic	Covered to a Maximum of \$105 in Lieu of Frames and Lenses



BASIC LIFE and ACCIDENTAL DEATH & DISMEMBERMENT (AD&D)

Life Insurance

- \$70,000 per employee
- Insured by Anthem, Paid 100% by Santa Clara University
- Update your beneficiaries

AD&D

- \$70,000 per employee in the event of an accidental death
- Insured by Anthem, Paid 100% by Santa Clara University



EMPLOYEE ASSISTANCE PROGRAM (EAP)

CONCERN EAP provides confidential counseling for you and your dependents at no cost to you.

- 8 face to face consultations per incident per year
- Telephonic Consultations
- Available 24 hours/day, 7 days/week

Work & Life Services for assistance with:

- Depression, stress or anxiety
- Marital, relationship, parenting and family issues
- Childcare & eldercare assistance
- Financial and legal services
- Identity theft recovery services

Contact CONCERN at (800)344-4222 or

Visit www.concern-eap.com; company code: scueap



FLEXIBLE SPENDING ACCOUNTS (FSA)

FSA allows you to pay certain qualifying expenses with pre-tax dollars. Must re-enroll every year.

Health Care Reimbursement Account

- \$2,650 maximum
- \$300 minimum
- If you enrolled in the HDHP/HSA plan, you have the option of enrolling in a **limited purpose FSA** for dental and vision expenses

Dependent Care Reimbursement Account

- \$5,000 maximum per plan year per family
- \$2,500 if married, filing separately

USE IT or LOSE IT!!



COST SHARING & WAIVING COVERAGE

Log on to <http://www.scu.edu/ecampus> for your contribution toward the cost of the plans

To waive medical insurance coverage, you need to

- Complete Health Insurance Waiver Form, and
- Provide proof of other coverage

\$150 per month to employee who waives medical insurance coverage



HOW TO ENROLL

- eCampus is open now! Open enrollment access will end on 11/26/18.
- Complete benefit elections or waivers for the 2019 plan year on <https://scu.edu/ecampus>
- To make any changes or to enroll in the Flexible Spending Account for 2019, you must complete your enrollment by 11/26/18.
- After this annual enrollment period, the only time you can change your benefit choices in 2019 is when you have a qualified family status change.