Wright State University
Healthcare Modification Meetings for AAUP – Effective April 1, 2019
Healthcare Modification Schedule


• All benefit-eligible AAUP faculty MUST elect or waive coverage.
• Submit paper election form to Human Resources.
• $50 Late Enrollment Fee if election occurs after Feb 25.
Modification Overview

Benefits are unbundled: you will need to elect or waive each of the three benefits: medical, dental and vision.

• Anthem **Medical** plan – choice of PPO 80/20 or HDHP
• Delta **Dental** Plan
• VSP **Vision** Plan

New Coverage Levels
• Employee
• Employee + Child(ren)
• Employee + Spouse
• Employee + Family

Pharmacy formulary will transition to Anthem’s “Essential Drug List.”
• Anthem will be mailing a disruption communication to those impacted
Modification Overview - Continued

Health Saving Account provided by Fifth Third Bank will be available for eligible employees enrolled in the HDHP.

Flexible Spending Accounts, Healthcare and Dependent Care, administrated by Business Plans cannot be changed during this Modification Election.

- Current enrollments will be maintained.

Short-Term Disability and Supplemental Life Insurance will be maintained.

Spousal Added Fee

- Applicable to anyone covering a spouse on their medical plan

Elimination of Domestic Partner Benefits

- COBRA will be offered to Domestic Partners and if applicable, Domestic Partner Children

Elimination of Older Adult Child Benefits – ages 27 and 28

- COBRA will be offered to any current Older Adult Child
Medical Plan Design Components

PPO 80/20
- Copays
  - Primary Care Physicians
  - Specialist
  - LiveHealth online
  - Urgent Care
  - Emergency Room
  - Pharmacy
- Deductibles
  - Hospitalization
  - Labs
- Coinsurance
  - Hospitalization
  - Labs
- Out-of-pocket Maximums

HDHP
- Deductibles
  - Primary Care Physicians
  - Specialist
  - LiveHealth online
  - Urgent Care
  - Emergency Room
  - Pharmacy
  - Hospitalization
  - Labs
- Coinsurance
  - Primary Care Physicians
  - Specialist
  - LiveHealth online
  - Urgent Care
  - Emergency Room
  - Pharmacy
  - Hospitalization
  - Labs
- Out-of-pocket Maximums
  - Employer
  - HSA Contribution
PPO 80/20 Plan – How it Works

Copays
Flat dollar amount paid for services:
- Primary Care Physician
- Specialist
- Emergency Room
- Urgent Care
- Pharmacy

Deductible
First dollar amount on co-insurance services
- Inpatient/Outpatient/Labs

Co-insurance
Percentage (20%) paid for services:
- Inpatient/Outpatient/Labs

Out-of-Pocket Maximum
Total Single / Family expenses for covered services per calendar year
- Single: $800
  - Family: $1,600
- Single: $4,000
  - Family: $8,000

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### Plan Design – PPO 80/20

**Effective April 1, 2019**

<table>
<thead>
<tr>
<th><strong>In-Network</strong></th>
<th><strong>Deductible</strong>*</th>
<th><strong>Out-of-Pocket Max</strong>*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single: $800</td>
<td>Family: $1,600</td>
<td>Family: $8,000</td>
</tr>
<tr>
<td>Primary Care Physician</td>
<td>$20 Copay</td>
<td></td>
</tr>
<tr>
<td>LiveHealth Online</td>
<td>$20 Copay</td>
<td></td>
</tr>
<tr>
<td>Specialty Care Visit</td>
<td>$40 Copay</td>
<td></td>
</tr>
<tr>
<td>Urgent Care</td>
<td>$50 Copay</td>
<td></td>
</tr>
<tr>
<td>Emergency Room (waived if admitted)</td>
<td>$300 Copay</td>
<td></td>
</tr>
<tr>
<td>Co-insurance</td>
<td>20%</td>
<td></td>
</tr>
</tbody>
</table>

*The Single deductible & Out-of-Pocket Max applies to EE only.

*The Family deductible & Out-of-Pocket Max applies to EE + Child(ren), EE + Spouse, and EE + Family.

- For 2019, the Affordable Care Act (ACA) annual out-of-pocket maximum for any individual on a qualified health plan is $7,900.
# Pharmacy Design – PPO 80/20

<table>
<thead>
<tr>
<th>Retail – Max 30 Day Supply</th>
<th>PPO 80/20 Copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 1 (Generic)</td>
<td>$10</td>
</tr>
<tr>
<td>Tier 2 (Brand Formulary)</td>
<td>20%, $50 Max</td>
</tr>
<tr>
<td>Tier 3 (Non Formulary)</td>
<td>40%, $80 Max</td>
</tr>
<tr>
<td>Tier 4 (Specialty)</td>
<td>25%, $200 Max</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mail Order – Max 90 Day Supply</th>
<th>PPO 80/20 Copay</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 1 (Generic)</td>
<td>$25</td>
</tr>
<tr>
<td>Tier 2 (Brand Formulary)</td>
<td>20%, $125 Max</td>
</tr>
<tr>
<td>Tier 3 (Non Formulary)</td>
<td>40%, $200 Max</td>
</tr>
<tr>
<td>Tier 4 (Specialty)</td>
<td>Mail order is not available</td>
</tr>
</tbody>
</table>

**Note:** Fourth Tier added for Specialty Drugs.
HDHP – How it Works

Deductible
$2,000

Co-insurance
10% after Deductible

Out-of-Pocket Maximum
$3,000

Deductible
$4,000

Co-insurance
10% after Deductible

Out-of-Pocket Maximum
$6,000
HDHP Plan

<table>
<thead>
<tr>
<th>Effective April 1, 2019</th>
<th>In-network</th>
</tr>
</thead>
</table>
| Deductible*             | Single: $2,000  
                          | Family: $4,000  |
| Coinsurance             | 10%        |
| Out-of-Pocket Max*      | Single: $3,000  
                          | Family: $6,000  |
| LiveHealth Online       | $49        |

* The Single Deductible & Out-of-Pocket Max applies to Employee coverage.
The Family Deductible & Out-of-Pocket Max applies to EE + Child(ren), EE + Spouse and EE + Family.
Health Savings Account (HSA)

- IRS Guidelines apply to HSAs as administered by 5/3rd Bank

**Employer Contributions**
- Deposited into your HSA

**Employee Contributions**
- Deducted from your paycheck on a pre-tax basis

**2019 IRS Maximum Contributions**

<table>
<thead>
<tr>
<th></th>
<th>Calendar Year 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>$3,500</td>
</tr>
<tr>
<td>Family</td>
<td>$7,000</td>
</tr>
<tr>
<td>Catch-Up (age 55+)</td>
<td>$1,000</td>
</tr>
</tbody>
</table>
Health Savings Account (HSA)

2019 Remaining Employer Contributions to HSA will be as follows:

<table>
<thead>
<tr>
<th>Current HDHP Participant</th>
<th>Employee</th>
<th>Employee + Child(ren)</th>
<th>Employee + Spouse</th>
<th>Employee + Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paid in January</td>
<td>$250</td>
<td>$500</td>
<td></td>
<td></td>
</tr>
<tr>
<td>July</td>
<td>$250</td>
<td>$500</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>New HDHP Participant</th>
<th>Employee</th>
<th>Employee + Child(ren)</th>
<th>Employee + Spouse</th>
<th>Employee + Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>April (prorated)</td>
<td>$125</td>
<td>$250</td>
<td></td>
<td></td>
</tr>
<tr>
<td>July</td>
<td>$250</td>
<td>$500</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
HDHP can be selected by any employee. However, IRS regulates who can participate in the HSA.

The following will make you ineligible for the HSA:

- Employee who is enrolled in Medicare
- Employee who is currently receiving VA/TriCare benefits
- Employee who is claimed as a dependent on another person’s tax return
- Employee (or employee’s spouse) who is currently enrolled in a Healthcare Flexible Spending Account.
Pharmacy Plan – Effective April 1, 2019

Both Medical Plans: PPO 80/20 and HDHP

Transitioning from Anthem’s National Drug List to their Essential Drug List.

Pharmacy continues to increase, everyone seeking ways to influence.

Goal is to offer an list of drugs approved by FDA, reviewed by physicians, and deemed acceptable to be offered by several employers.

What will occur. Specific drugs might:

- Move to over the counter
- Change tiers
- May no longer be available, if an alternative is available
- Might require pre-certification

Expected disruption 10%
SEE A DOCTOR 24/7 ON YOUR COMPUTER OR MOBILE DEVICE.
Life won’t wait for you to feel better.
See a doctor at LiveHealth Online – and keep on going.

https://youtu.be/ZtjKpZJHinc
Anthem launched a new comprehensive digital health platform for members nationwide. The platform, called ENGAGE, comes out of the company's partnership with Castlight.

If you were enrolled in Castlight, you were automatically moved to ENGAGE as of January 1, 2019.
Engage

What’s the difference between these X-rays?

One costs $85. The other costs $35.

It’s the same X-ray but different price.

See for yourself on Castlight www.mycastlight.com

Easy-to-use App

Easily find in-network care, costs, and quality ratings

1. James Allen MD
   1500 Owens St, Suite 170
   Orthopedic Surgery
   Patient Rating: ★★★★☆ (15)
   Clinical Quality: Above Average
   (415) 123-2808
   You Pay: $96 - $547
   Estimate

2. Michael Ross MD
   1500 Owens St, Suite 170
   Orthopedic Surgery
   You Pay: $111
   Estimate

- All benefit-eligible BUFMs **MUST** elect or waive coverage.
- Paper election to be submitted to Human Resources.
- $50 Late Enrollment Fee if election occurs after **Feb 25**.

One-on-One Consultation (by appointment)

<table>
<thead>
<tr>
<th>Date &amp; Time</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feb 12, 14, 20 &amp; 25 10am-4pm</td>
<td>Wellness Office</td>
</tr>
<tr>
<td>Feb 8 9am-3pm</td>
<td>LAKE CAMPUS</td>
</tr>
</tbody>
</table>

To schedule an appointment, please email HR-Benefits@wright.edu.
- Please recommend three appointment times.
Also a reminder, in accordance with Internal Revenue Service (IRS) regulations, your benefit elections are in effect for the full calendar year.

CHANGES THROUGHOUT THE YEAR are only permitted if you experience a qualifying life event. Should a life event occur, and you wish to initiate a change, you have **31 days** to provide Human Resources with the required documents. The following are some examples:

- Birth or adoption of a child
- Marriage or divorce
- Loss or gain coverage
- Loss of dependent status
- Death
What if I have questions?

HORAN’s Engagement Team

1-844-694-6726

engagement@horanassoc.com

Questions:
• Healthcare Modification
• Benefit/Coverage Claims
  ▪ Calls to insurance carrier or physician will require:
    ✔ Date of birth
    ✔ Social Security Number or Insurance ID
    ✔ Date of Service
    ✔ HIPAA release form