# Welcome to Open Enrollment

Plan Year: 2024





# Pick the best benefits for you and your family.

Hobart and William Smith Colleges strive to provide you and your family with a comprehensive and valuable benefits package. We want to make sure you're getting the most out of our benefits—that's why we've put together this Open Enrollment Guide.

Open enrollment is a short period each year when you can make changes to your benefits. This guide will outline all of the various benefits Hobart and William Smith Colleges offer, so you can identify which coverages are best for you and your family.

Elections you make during open enrollment will become effective on January 1, 2024. If you have questions about any of the benefits mentioned in this guide, please don't hesitate to reach out to Human Resources at hr@hws.edu.

In addition, the College is introducing our new **Employee Benefits Advocate, Consiliarium Group.** 

Consiliarium provides a single point of contact for assistance understanding and navigating Hobart and William Smith Colleges' benefit plans including medical, prescription, dental, and flexible spending plans. Consiliarium will help with locating providers, ordering replacement I.D. cards, estimating out-of-pocket costs and plan coverage, resolving provider billing and insurance claims, and help answer qualifying event questions during open enrollment and year-round support.

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Employee Benefits Advocate info@consiliariumgroup.com 1-844-890-7955





If you meet the eligibility criteria under Hobart and William Smith Colleges' benefits, you are able to enroll in the benefits outlined in this guide, as well as your eligible dependents.

# How to Enroll

Hobart and William Smith Colleges will be utilizing a new benefits portal for open enrollment, **Employee Navigator**. Employees will receive an email from Employee Navigator with new login instructions where you will simply register, login, review, and finalize your 2024 benefit elections. First, verify all your personal information and make any necessary changes.

Once all your information is up to date, it's time to make your benefit elections.

# When to Enroll

Open enrollment begins on November 1, 2023 and runs through November 17, 2023. The benefits you choose during open enrollment will become effective on January 1, 2024.

# How to Make Changes

Unless you experience a life-changing qualifying event, you cannot make changes to your benefits until the next open enrollment period. Qualifying events include things like:

- Marriage, divorce or legal separation
- *Birth or adoption of a child*
- Change in child's dependent status
- Death of a spouse, child or other qualified dependent
- Change in residence
- Change in employment status or a change in coverage under another employer-sponsored plan



# 2024 Benefits at a Glance

# **Health Insurance**

Hobart and William Smith Colleges offer employees the Excellus BlueCross BlueShield BluePPO Medical Plan with prescription drug coverage through OptumRx. Together they form a comprehensive medical plan that provides you and your family with flexibility when you need to make health care decisions.

E	xcellus BluePPO
BENEFIT DESCRIPTION	IN-NETWORK MEMBER'S COST SHOWN BELOW (OUT-OF-NETWORK COVERAGE IS SUBJECT TO ADDITIONAL CHARGES
CALENDAR YEAR DEDUCTIBLE	Individual: \$275, Family: \$825
	(embedded at single/person)
MEDICAL COINSURANCE	Single: 10% to max. \$1,000;
	Family: 10% to max. \$2,000
MEDICAL AND PRESCRIPTION OUT-OF-POCKET	Medical: \$2,500 Individual/\$5,000 Family
MAX.	Pharmacy: \$2,400 Individual/\$4,800 Family
LIFETIME BENEFIT MAX.	Unlimited
PRIMARY PHYSICIAN'S OFFICE VISIT	\$25 copay
SPECIALIST'S OFFICE VISIT	\$40 copay
TELEMEDICINE (MDLIVE)	Acute Illness: \$0 copay
122.12.101.12 (1.12.21.12)	Behavioral Health: \$0 copay
DIAGNOSTIC X-RAYS	\$40 copay
ROUTINE ADULT PHYSICALS & IMMUNIZATIONS	Covered 100%
DIAGNOSTIC TESTS AND LABS	Covered 100%
INPATIENT HOSPITAL	Subject to Deductible and Coinsurance
URGENT CARE VISIT	\$25 COPAY
EMERGENCY ROOM VISIT	\$200 copay
OUTPATIENT SURGERY	Subject to Deductible and Coinsurance
MATERNITY CARE	Subject to Deductible and Coinsurance
WELL-BABY CARE/IMMUNIZATIONS	COVERED 100%
CHIROPRACTIC CARE	\$25 copay
PHYSICAL THERAPY	Covered 100%; Physical, Speech and Occupational Therapies limited to 60 days per year
MENTAL HEALTH TREATMENT - INPATIENT	Subject to Deductible and Coinsurance
MENTAL HEALTH TREATMENT - OUTPATIENT	\$25 copay
SUBSTANCE ABUSE TREATMENT - INPATIENT	Subject to Deductible and Coinsurance
SUBSTANCE ABUSE TREATMENT - OUTPATIENT	\$25 copay
RX PLAN (COVERAGE PROVIDED THROUGH OPTUMRX)	Retail: \$10/\$30/\$50 (per 30 day supply); Mail Order: \$20/\$60/\$100 (per 90 day supply)



# Pharmacy Benefit – OptumRx, serviced through RXBenefits

Optum will continue to be the Pharmacy Benefits Manager for HWS' RX benefits, however we are introducing an enhanced service model integrated with RXBenefits to our employees and your covered dependents.

**Who is RxBenefits?** As your Pharmacy Benefits Optimizer, RxBenefits brings you greater discounts, better access, and improved member services.

RxBenefits is a team of over 500 pharmacy experts and dedicated clinicians to ensure you and your family are getting the right medications at the best possible price.

Beginning January 1. 2024, if there are any questions regarding prescription coverage, please contact RxBenefits. Plan Members call Member Support: 800.334.8134 or email CustomerCare@rxbenefits.com.

# **Medical Opt-Out Stipend**

If you have coverage under another medical plan (for example, through your spouse's or partner's employer), you may elect to waive coverage through Hobart and William Smith Colleges. If you choose to waive medical coverage, you will have no medical coverage through HWS. If you are currently enrolled in the Colleges' medical plan and you wish to opt out of the medical plan for 2024 then you will need to actively waive medical benefits via the benefit web portal.

If you are not currently enrolled in the Colleges' medical plan and you wish continue without medical coverage through the College then your medical coverage will default to "Waive Coverage" and you do not need to do anything.

HWS provides a Medical Opt-Out stipend for those who waive medical coverage. The 2024 medical opt out stipend is \$1,000 and will be paid out on January 19, 2024. The stipend will be paid out during the normal pay cycle and will be subject to regular tax withholdings.

Remember, if you voluntarily waive medical coverage, you also waive your rights to elect medical coverage under COBRA (Consolidated Omnibus Budget Reconciliation Act) if you terminate your employment.

# **Dental Insurance**

In addition to protecting your smile, dental insurance helps pay for dental care and usually includes regular checkups, cleanings, and X-rays. Several studies suggest that oral diseases, such as periodontitis (gum disease), can affect other areas of your body—including your heart. Receiving regular dental care can protect you and your family from the high cost of dental disease and surgery.

The following chart outlines the 2024 dental benefits Hobart and William Smith Colleges offer.



	Guardian Dental Plan Offer	ring
Benefit	Low Plan	High Plan
Annual Deductible	Individual: \$50 - 2 Per Family	Individual: \$50 - 3 Per Family
<b>Annual Benefit Maximum</b>	\$1,5	500 per person
Preventive Care	Covered 100	0% - Deductible Waived
Basic Care	Covered 50% After Deductible	Covered 80% After Deductible
Major Care	No Coverage	Covered 50% After Deductible
Orthodontia	No Coverage	Covered 50% After Deductible
Lifetime Orthodontia Maximum	No Coverage	\$1,000
Maximum Rollover	Not Applicable	Yes
Dependent Coverage		26

<sup>\*</sup>In-Network ONLY - Out-of-Network coverage is subject to additional charges

# **Vision Insurance**

Driving to work, reading a news article and watching TV are all activities you likely perform every day. Your ability to do all of these activities, though, depends on your vision and eye health. Vision insurance can help you maintain your vision as well as detect various health problems.

Hobart and William Smith Colleges' vision insurance entitles you to specific eye care benefits. Our policy covers routine eye exams and other procedures, and provides specified dollar amounts or discounts for the purchase of eyeglasses and contact lenses.

You have the choice to enroll in either the VSP or Davis Vision Network through Guardian. If you seek the services of a provider listed in Guardian's In-Network Provider directory, your benefits include the following:

Benefit	Guardian VSP	Guardian Davis Vision	
	In-Network Coverage		
Service			
Eye Exam	1 Per C	alendar Year	
<b>Lenses or Contacts</b>	1 Per C	alendar Year	
Frames	1 Per Calendar Year		
Eye Exam	\$1	0 Copay	
<b>Material Copay</b>	\$2	5 Copay	
Frames	Covered to \$13	30 & 20% of balance	
Contact Lenses (elective, & in lieu of frames)	Covered up to \$130	Covered up to \$130 & 15% of balance	
<b>Dependent Coverage</b>		26	

<sup>\*</sup>In-Network ONLY – Out-of-Network coverage is subject to additional charges



# **ENI- Employee Assistance Program (EAP)**

The Colleges provide confidential referral services to benefits eligible administrative hourly and salaried employees and their eligible dependents through NexGen EAP (www.nexgeneap.com) a service provided by ENI.

Service provided by the program: counseling services, child/elder care resources, legal and financial consultations, concierge services among other resources.

Participants' right to privacy is fully protected by law and the College's EAP policy. Employees may contact the EAP at 800-327-2255, or the Office of Human Resources for related literature.

# **Basic Life Insurance**

Life insurance can help provide for your loved ones if something were to happen to you. Hobart and William Smith Colleges provide benefit eligible employees with 1x's base annual earnings to a maximum of \$200,000 in group life and accidental death and dismemberment (AD&D) insurance (age reduction schedule applies).

Hobart and William Smith Colleges pay for the full cost of this benefit—meaning you are not responsible for paying any monthly premiums. You can update your beneficiary information in the Employee Navigator benefits portal.

# **Voluntary Life Insurance**

While Hobart and William Smith Colleges offer basic life insurance, some employees may want to purchase additional coverage. Think about your personal circumstances. Are you the sole provider for your household? What other expenses do you expect in the future (for example, college tuition for your child)? Depending on your needs, you may want to consider buying supplemental coverage.

With voluntary life insurance, you are responsible for paying the full cost of coverage through biweekly payroll deductions.

# Life Insurance Overview:

Benefits Plan	2024 Highlight
Employer-paid Basic Life Insurance & Accidental Death and Dismemberment	No Change. Remains Employer-paid benefit 1x's salary to \$200,000 benefit
<u>Voluntary</u> Life Insurance Self, Spouse, Children	No Change to overall rate Premium subject to change based on age bracket for 2024

# **During open enrollment:**

- Employee: May elect 1-4x annual salary to a max of \$400k EOI required for amounts over \$200,000
- Spouse: Option 1 \$10,000 or \$25,000 flat amount / Option 2 50% of employee's life coverage to a maximum of \$100k; EOI required for amounts over \$25,000
- Dependent Child: Birth to 14 days: \$500/14 Days to age 26: \$4,000



# **Flexible Spending Accounts**

# 2024 FSA Administrator Update:

Lifetime Benefit Solutions (LBS). Beginning January 1, 2024, Hobart and William Smith Colleges will transition our Flexible Spending Account administration to Lifetime Benefit Solutions (LBS). Participants in the FSA for 2024 will receive new FSA cards with LBS.

For those currently enrolled in FSA today, Alera will continue to process the 2023 FSA funds including the grace period. This means if you have a remaining balance in your 2023 FSA, you have until March 15, 2024 to incur claims and June 15, 2024 to submit claims for reimbursement with Alera. Beginning January 1, 2024, LBS will administer 2024 FSA claims for reimbursement.

# What Is a Health Care FSA?

Paying for health care can be stressful. That's why Hobart and William Smith Colleges offer an employer-sponsored flexible spending account (FSA). A health care FSA lets you use pre-tax dollars for certain IRS-approved medical care expenses not covered by your insurance plan. For example, cash that you now spend on deductibles, copayments or other out-of-pocket medical expenses can instead be placed in the health care FSA on a pre-tax basis.

For 2023, the FSA maximum contribution limit is \$3,050. For 2024, the FSA limit is \$3,200.

# What Are the Benefits of a Health Care FSA?

There are a variety of different benefits of using a health care FSA, including the following:

**It saves you money.** Allows you put aside money tax-free that can be used for qualified medical expenses.

**It is flexible.** You can use your FSA funds at any time, even if it's the beginning of the year.

# What Is a Dependent Care FSA?

Similar to health FSAs, dependent care FSAs allow you to contribute pre-tax dollars to qualified dependent care. The maximum amount you may contribute each year is \$5,000 (or \$2,500 if married and filing separately).

For the 2024 plan year, the grace period applies to Dependent Care FSA.

# How Do I Enroll?

2023 FSA elections will NOT carryover to 2024 – you must re-enroll through our benefits portal, Employee Navigator, during open enrollment.

# FSA Case Study

FSAs provide you with an important tax advantage that can help you pay for certain expenses on a pretax basis. Due to the personal tax savings you incur, your spendable income will increase. The example that follows focuses on how a health FSA can save you money.



Bob and Jane's live in Texas and have a combined annual gross income of \$45,000. They are married and file their income taxes jointly. Since Bob and Jane expect to spend \$3,000 in eligible medical expenses in the next plan year, they decide to direct a total of \$2,850 into their FSAs. The table demonstrates their savings.

	Without health	
	FSA	With health FSA
Gross income	\$45,000	\$45,000
FSA contributions	\$0	(-\$3,050)
Gross income	\$45,000	\$41,950
Estimated taxes	(-\$5,400)*	(-\$5,034)*
After-tax earnings	\$39,600	\$36,916
Eligible out-of-pocket expenses	(-\$3,000)	(-\$150)
Remaining spendable income	\$36,600	\$36,766
Spendable income increase		\$166

<sup>\*</sup>Assumes 12% income tax. This example is provided for illustrative purposes only. Each situation varies and it is recommended that you consult a tax advisor for all matters related to taxes.



# **Additional Benefit Offerings**

You are also eligible to enroll or participate in the following voluntary programs through MetLife:

- Critical Illness Provides coverage for a variety of critical illnesses including cancer, Alzheimer's, coronary artery disease, heart attack, kidney failure, major organ transplants and stroke. Employees can choose coverage amounts for themselves, spouses, and dependent children to age 26
- Accident Insurance Provides coverage for accidents occurring on or off the job. Benefits paid include hospitalization, lacerations, fractures, dislocations, burns, x-rays, and follow-up treatments. Elect coverage for yourself, spouse and dependent children to age 26



# **VENDOR INFORMATION**

# **Insurance Enrollment**

Consiliarium Group

www.employeenavigator.com/benefits/account/login

Customer Service: 1-844-890-7955 Email: info@consiliariumgroup.com

# **Health Insurance**

Excellus Blue Cross Blue Shield www.excellusbcbs.com/hws

Customer Service: 1-800-499-1275

# **Pharmacy**

OptumRx, serviced by RXBenefits

www.optumrx.com

Rx Customer Service: 1-800-334-8134 Email: customercare@rxbenefits.com

# **Employee Assistance Program (EAP)**

**ENI/My Balance Works** 

www.nexgeneap.com/loginv2

Phone: 1-800-327-2255 Company ID: 8956

# Flexible Spending Account (FSA)

Lifetime Benefit Solutions

www.lifetimebenefitsolutions.com/members/login

Customer Service: 1-800-327-7130 Email: info@consiliariumgroup.com

### Retirement

TIAA

www.tiaa.org

Customer Service: 1-800-842-2252

Transamerica

www.trsretire.com/

Customer Service: 1-800-755-5801



# Questions & Answers

# What Changes Are Effective Jan. 1, 2024?

- Enrollment or termination of individual and/or dependent coverage in a health, dental, vision plans
- Enrollment in our FSA plan
- Changes to the Voluntary Life plan
- If you do not make changes to your current medical, dental, or vision elections, those elections will remain the same for the plan year Jan. 1 to Dec. 31, 2024.

# Where Do I Make Open Enrollment Updates?

- Login to our Benefits Portal, Employee Navigator
- Review your personal information, benefits, make any changes, & confirm your elections for 2024 by November 17

# Other Reminders:

- **UPDATED: PHARMACY** Hobart and William Smith Colleges will continue with Optum as our Pharmacy Benefit Manager (PBM), however we are introducing an enhanced service model integrated with RXBenefits to our employees and your covered dependents.
- **NEW: SINGLE MEDICAL/PHARMACY ID CARD** For those enrolled in our Excellus health plan, you will be receiving new ID cards for 1/1/2024. On the back of the card will also include the pharmacy details with Optum/RXBenefits. Please be sure to provide updated ID card information to your providers and pharmacy for proper processing of claims.
- UPDATED: NEW FLEXIBLE SPENDING ACCOUNT (FSA) ADMINISTRATOR: Beginning January 1, 2024, Hobart and William Smith Colleges will transition our Flexible Spending Account administration to Lifetime Benefit Solutions (LBS). Participants in the FSA for 2024 will receive new FSA cards with LBS.

# Are There Educational Opportunities Available?

Yes. To learn more about 's benefits offerings for the next plan year, please attend an open enrollment meeting.

	Open Enrollment	Meetings
	Time	Location
Monday, November 6th	10AM	Scandling Center, Vandervort Room
Thursday, November 9 <sup>th</sup>	10AM & 4PM	Albright Auditorium
Friday, November 10 <sup>th</sup>	9:30AM	Virtual
Tuesday, November 14 <sup>th</sup>	6PM	Virtual





If your doctor isn't available, telemedicine may be an option for you. Telemedicine gives you fast access to medical and behavioral health care 24/7/365, from the comfort of your home, desk, or hotel room. All you need to do is activate it through your online member account and download the MDLIVE app.

Rest assured, our health care professionals deliver the same quality of care you receive from your own doctor, via your phone, tablet, or computer.

# When do you use telemedicine?

- Instead of going to urgent care or the emergency room for minor and non-life-threatening conditions
- Whenever your primary care doctor is not available
- If you live in a rural area and don't have access to nearby care
- · When you're traveling for work or on vacation

### Here are some of the common medical conditions treated with telemedicine:

### Adults

- Allergies
- Cold and Flu
- Ear Infections
- Fever
- Headache
- · Joint Aches and Pains
- Nausea and Vomiting
- Pink Eye
- Rashes
- · Sinus Infections
- Sunburn
- Urinary Tract Infections\*

### Children

- · Cold and Flu
- Constipation
- Earache\*
- Fever\*
- Nausea and Vomiting
- · Pink Eve



<sup>\*</sup>MOLIVE does not provide support for urinary tract infections in makes; does not provide support for earache conditions for children under 12 years old; does not provide support for fever-related conditions for children under 3 years old.

Excellus BlueCross BlueShield is a nonprofit independent licensee of the Blue Cross Blue Shield Association.



# Telemedicine is good for the mind as well as the body.

In addition to whenever, wherever access to medical doctors, you can also consult with a psychiatrist or choose from a variety of licensed therapists from the privacy of your own home. You can even schedule recurring appointments to establish an ongoing relationship with one therapist.

Here are some conditions people rely on behavioral health telemedicine for:

- Addiction
- · Eating Disorders
- · Panic Disorders

- Bipolar Disorders
- · Grief and Loss
- Stress

- Depression
- LGBTQ Support
- Trauma and PTSD

# Telemedicine visits with MDLIVE may be covered in the following ways:

Plan Type	Telemedicine Cost Share
Copay	Covered in full
Hybrid/Deductible Non-HSA	If your doctor's visits are subject to deductible, a telemedicine visit will be covered in full after deductible
nybna/ beaactible Noil-113A	If your doctor's visits are a copay with no deductible, a telemedicine visit will be covered in full
Deductible HSA	Covered in full after deductible
Note: This is not a contract. It is	intended to highlight the coverage for

most plan options. Please refer to your contract for your plan's benefits.

# Don't wait until you need it. There are four easy ways to activate telemedicine today.

WEB - Register/Log in at ExcellusBCBS.com/Member

APP - Download the MDLIVE app

TEXT - EXCELLUS to 635483 (Message and data rates may apply.)

VOICE - Call 1-866-692-5045

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MDLIVE does not replace the primary care physician. MDLIVE is not an insurance product. MDLIVE operates subject to state regulation and may not be available in certain states. MDLIVE does not guarantee that a prescription will be written. MDLIVE does not prescribe DEA controlled substances, non-therapeutic drugs and certain other drugs which may be harmful because of their potential for abuse. MDLIVE physicians reserve the right to deny care for potential misuse of services. MDLIVE phone consultations are available during the hours of 7 am to 9 pm ET7 days a week or by scheduled availability. MDLIVE and the MDLIVE logo are registered trademarks of MDLIVE, Inc. and may not be used without written permission. For complete terms of use and privacy policy, please visit www.mdlive.com/terms-of-use and www.mdlive.com/privacy-policy. MDLIVE is an independent company, offering telehealth services in the Excellus BlueCross BlueShield service area.

Our Health Plan complies with federal civil rights laws. We do not discriminate on the basis of race, color, origin, age, disability, or sex.

Attención: Si hable español, contamos con ayuda gratuita de idiomas disponible para usted. Consulte el documento adjunto para ver las formas
en que puede comunicarse con nosotros.

注意 :如果您说中文 ,我们可为您提供免费的语言协助 。请参见随时的文件以获取我们的联系方式。

B-6675 / 17633-23M REV 04/23

# **DID YOU KNOW?**



of doctor's office visits could be handled over the phone.1



days is the average wait time between scheduling an appointment and seeing a primary care doctor.<sup>2</sup>



of emergency room visits can potentially be prevented with telemedicine.<sup>3</sup>



<sup>\*</sup>If you haven't met your deductible, you will pay the allowable charge of \$50. The allowable charge does not apply to Behavioral Health services. The allowable costs for the Behavioral Health services vary but do not exceed \$180. This means a member who has not met their deductible will not pay more than \$180.

<sup>1 &</sup>quot;New medical cost savings program: Telemedicine means great discounts." R. Schultz, January 9, 2010.

<sup>&</sup>lt;sup>2</sup> Based on MDLIVE data, 2016.

<sup>&</sup>lt;sup>3</sup> Based on New York State Department of Health data, 2016.





# Oral Health Rewards Program

Regular visits to the dentist can help prevent and detect the early signs of serious diseases.

That's why Guardian's Maximum Rollover Oral Health Rewards Program encourages and rewards members who visit the dentist, by rolling over part of your unused annual maximum into a Maximum Rollover Account (MRA). This can be used in future years if your plan's annual maximum is reached.



# **Automatic rollover**

Submit a claim (without exceeding the paid claims threshold of a benefit year), and Guardian will roll over a portion of your unused annual dental maximum.

# How maximum rollover works\*

Depending on a plan's annual maximum, if claims made for a certain year don't reach a specified threshold, then the set maximum rollover amount can be rolled over.

Plan annual maximum**	Threshold	Maximum rollover amount	In-network only rollover amount	Maximum rollover account limit
\$1,500	\$700	\$350	\$500	\$1,250
Maximum claims	Claims amount that	Additional dollars	Additional dollars	The limit that cannot
reimburesment	determines rollover eligibility	added to a plan's annual maximum for future years	added if only in-network providers were used during the benefit year	be exceeded within the maximum rollover account

Guardian's Dental Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. Information provided in this communication is for informational purposes only. Dental Policy Form No. GP-1-DEN-16. GUARDIAN® is a registered service mark of The Guardian Life Insurance Company of America® ©Copyright 2023 The Guardian Life Insurance Company of America.

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This example has been created for illustrative purposes only.

<sup>\*\*</sup> If a plan has a different annual maximum for PPO benefits vs. non-PPO benefits, (\$1500 PPO/\$1000 non-PPO for example) the non-PPO maximum determines the Maximum Rollover plan. May not be available in all states.



# Enroll in an FSA today.

An FSA is a special account you can use to put money aside pre-tax for certain out-of-pocket health care or dependent care costs. It's a smart and simple way to prepare for unexpected expenses and increase your spendable income.

An FSA saves you even more money by reducing your taxable income. With an FSA, your contributions are taken out before taxes, then taxes are calculated on the lower amount that remains.

# Types of FSAs



### Medical

As health care costs continue to rise, you can stay ahead by using this account to pay for qualified medical expenses not reimbursed by insurance. This includes everyday out-of-pocket expenses such as copays, coinsurance, prescription drugs, orthodontics, vision expenses, hearing aids, dental services, eligible over-the-counter (OTC) items and more.



### Dependent Care (\$5,000 maximum)

Have kids in day care or other family members who depend on you? Plan ahead for ongoing expenses for dependent children and adults.



### **Limited Purpose**

This FSA type focuses on helping you cover dental and vision expenses for you and your family. It can be used together with a Health Savings Account – another type of tax-advantaged benefit plan.

# Plan ahead for your FSA!

Planning ahead is important when signing up for your company's FSA plans. Understanding the benefits offered is critical.

# Estimate your expenses

You can maximize your FSA account using this helpful planning tool. You may also use the FSA calculator on our website at <a href="lifetimebenefitsolutions.com/fsa-calculator">lifetimebenefitsolutions.com/fsa-calculator</a>. Some common items to consider are listed in the chart below:

Medical FSA Account	Annual Expense
Deductibles	s
Copays	\$
Dental Expenses Not Covered by Insurance	\$
Orthodontia	\$
Vision Expenses (Exams, Glasses, Lenses)	\$
Hearing Expenses (Exams, Hearing Aids)	\$
Prescription Drugs	\$
Eligible Over-the-Counter Items	\$
Diabetic Supplies	\$
Therapy (Physical Therapy, Speech, Chiro)	\$
Medical Mileage	\$
Other	\$
Total Estimated Health Care Expenses	s
Dependent Care Account	Annual Expense
Payment to Dependent Care Facility	\$
Payment to Dependent Care Individual	\$
Payment to Adult Care Provider	s
Total Estimated Dependent Care Expenses	\$
Total Health Care PLUS Dependent Care	\$

Read your Summary Plan Description (SPD) carefully to understand the specific terms of your plan. The plan document and SPD govern your rights and benefits under each plan and are available through your employer.





# The Spending Card

The Spending Card is a convenient payment method. You simply swipe the card without incurring an out-of-pocket expense! Behind the scenes, the provider is paid and the amount is deducted from your account balance. You don't have to file a claim form for reimbursement – the payment function is fully automated.

# Cashless but not paperless

Each time you use your Spending Card, you must be able to prove you used it to pay for a plan-eligible item or service. Fortunately, technology behind the Spending Card can verify the majority of your transactions automatically when you use the card. You may receive a letter asking you to send in copies of your receipt and necessary documentation for those transactions that can't be verified automatically.

# Paying for services with the card

Paying a doctor's office copay is an example of paying for services with the card. However, in some cases, services provided at a medical, dental or vision office cannot be auto-substantiated. In these cases, you will receive an RFI letter asking for copies of your receipt and necessary documentation.

# Important Spending Card tips:

- Keep all receipts associated with your Spending Card in a central location, and promptly reply when asked for a copy.
- The IRS states that services are eligible for reimbursement after the services have been rendered.
   Prepaying for a service is not allowed.
- The Spending Card will be mailed directly to your home address. Read all information enclosed with the card and sign the card to agree to the terms.
- If a merchant will not accept the card, just pay out of pocket and submit for reimbursement.



Remember – the Spending Card is cashless, but not always paperless! Be prepared to submit copies of your receipts and other documentation when requested.



# Claims processing and Customer Service

# Filing a claim

Submit your claims online to receive the fastest reimbursement for an eligible out-of-pocket expense. Supporting receipts and documentation can be scanned and attached to your online claim, or you can email, fax or mail the required paperwork. Another option is to download a paper reimbursement request form. Complete the form by itemizing your expenses and following the instructions found directly on the form. Reimbursement request forms and required documentation can either be mailed or faxed for processing.

Claims deadlines apply. Be sure to carefully read your Summary Plan Description to understand the terms and deadlines associated with your plan.

### **Customer Service**

Most of your questions can be answered by visiting the website. You can also call 1-800-327-7130 and utilize our automated interactive voice response system to check your balance, the status of a claim or contributions

when it's most convenient for you. Or, if you prefer to speak with a customer service representative, you can call that same number Monday – Thursday from 8 a.m. to 5 p.m. ET and Friday from 9 a.m. to 5 p.m. ET. You can also email our Customer Service department at lbs.customerservice@lifetimebenefitsolutions.com.



Receive your reimbursement quicker and avoid the \$30 check minimum and a trip to the bank by completing a direct deposit form online.

Provide or update your email address online and help us go green. You'll receive only plan-related information such as account statements, claimrelated information and Request for Information (RFI) letters (for card participants).

# Digital access

View your account online 24/7 via the mobile app or on a mobile device at LifetimeBenefitSolutions.com. While online, you can:

- Submit claims for reimbursement
- · View claims history
- · Check your available balance
- Access forms such as direct deposit, certification of medical necessity, release of information and various reimbursement request forms
- Enter your email address to receive important planrelated materials
- Use our online services, such as our online calculator to estimate your out-of-pocket expenses and our online eligible expense listing

### To access your account online:



Visit LifetimeBenefitSolutions.com and click on the Login button in the upper right hand corner of your screen, and select Members.



You can choose the Spending Accounts Login, which will bring you to the correct portal.



Your initial username will be the first letter of your first name, your last name, followed by the last four digits of your Social Security number. Your password will be the first letter of your first name (lowercase) followed by your five-digit zip code.







# Qualifying health care expenses

Acupuncture
Alcoholism treatment
Ambulance
Artificial limbs
Artificial teeth
Asthma treatments
Body scans
Braille books and magazines
Breast reconstruction surgery
following mastectomy

Coinsurance amounts Copays Deductibles Dental sealants Dental treatment

Chiropractors

Diagnostic items/services
Drug addiction treatment
Drug overdose, treatment of
Guide dog; other service animal
Hospital services
Immunizations
Laboratory fees
Lodging at a hospital or
similar institution
Mastectomy-related
special bras
Medical alert bracelet or
necklace
Medical supplies

Operations
Optometrist
Organ donors
Orthodontia
Osteopath fees
Oxygen
Physical exams
Physical therapy
Preventive care screenings
Prosthesis
Psychiatric care
Screening tests
Seeing eye dog
Sleep deprivation treatment
Smoking cessation programs

Speech therapy
Surgery
Television for hearingimpaired persons
Therapy
Transplants
Transportation expenses
for medical care
Vaccines
Vision care (including
eyeglasses, contact
lenses, LASIK surgery)
Wheelchair
X-ray fees

# Potentially qualifying health care expenses

### A Certification of Medical Necessity Form must be completed by your physician.

Obstetrical expenses

Occlusal guards

Fitness programs

Gambling problem,

AA meetings, transportation to and from Alternative healers Birthing classes Blood storage Books, health related Childbirth classes Counseling Dyslexia treatment

treatment for
Health club fees
Home improvements (such
as exit ramps, widening
doorways, elevator, etc.)
Hypnosis
Lactation consultant

Lamaze classes
Language training
Lead-based paint removal
Lodging of a companion
Long-term care services
Massage therapy
Mineral supplements
Nursing services

Nutritionist's expenses
Occupational therapy
Personal trainer fees
Psychoanalysis
Psychologist
Varicose veins, treatment of
Veterinary fees (service animals)
Weight loss programs

### Ineligible health care expenses

Appearance improvements Car seats Controlled substances in violation of federal law Cosmetic procedures Ear piercing Electrolysis or hair removal Funeral expenses Hair removal and transplants Household help Illegal operations and treatments Late fees (e.g., for late payment of bills for medical services) Maternity clothes Mattresses Missed appointment fees Recliner chairs Tanning salons and equipment Teeth whitening Veneers

# Qualifying Personal Protective Equipment (PPE)

PPE for the primary purpose of preventing the spread of COVID-19 are eligible expenses.

Masks Hand sanitizer Sanitizing wipes

Continued



# Qualifying over-the-counter (OTC) items

Acne treatment Contact lenses, materials First aid kits Pain relievers Allergy medicine and equipment First aid spray Petroleum jelly Cough suppressants Antacids Gauze pads Pregnancy test kits Antibiotic ointments Crutches Hearing aids Reading glasses Decongestants Hemorrhoid treatments Sinus medications Anti-itch creams Dentures, denture adhesives Arthritis gloves Insect bite creams and Support braces

Diabetic supplies ointments Aspirin Sunburn creams and ointments (including insulin) Bandages Laxatives Sunscreen Diaper rash ointments Medical monitoring and Blood pressure Thermometers and creams testing devices monitoring devices Throat lozenges Diarrhea medicine Calamine lotion Menstrual pain relievers Toothache and teething

Cold medicine First aid cream Orthopedic shoe inserts Wart remover treatment
Yeast infection medications

# Potentially qualifying OTC expenses

### Items in this category require a Certification of Medical Necessity form completed by your physician.

Air conditioner Dietary supplements Humidifier Rogaine® Air purifier Fiber supplements Incontinence supplies Special foods Glucosamine Sunglasses Allergy treatment products; Nutritional supplements household improvements to Herbs Probiotics rehydration Treadmill treat allergies Holistic or natural healers, solution Vitamins Chondroitin dietary substitutes, and Retin-A Wigs Compression hose drugs and medicines

# Ineligible OTC expenses

 Dental floss
 Hair colorants
 Safety glasses
 Toiletries

 Deodorant
 Mouthwash
 Shampoos
 Toothbrushes

 Diet foods
 Perfume, cologne
 Shaving cream or lotion
 Toothpaste

Face creams Permanent waves Skin moisturizers, hand lotion

# Eligible menstrual product expenses

Cups Pads Tampons

Liner Sponges Other similar products used by individuals with respect to menstruation

Eligibility rules for OTC items may change. The ability to pay for eligible items with the Spending Card may vary by merchant and is dependent on the merchant's IIAS system.

This is not a comprehensive list and is subject to change at any time and without notice. Items listed in each category may be reclassified into another category depending on future IRS guidance.

Reimbursement for any items contained on this list are also subject to the terms and conditions of your employer plan.

# Eligible dependent care expenses

- Care in your home, someone else's home, or in a day care center for child care and/or elder care. Licensing requirements may apply.
- Registration fees for a day care.
- · Before- and after-school care for children under age 13.
- Education expenses for a child not yet in kindergarten, such as nursery school expenses.
- Expenses paid to a relative are eligible; however, the relative cannot be under age 19, your spouse, child or a tax dependent.
- Day camp (not overnight) expenses if the camp qualifies as a day care center.







# YOUR TOTAL WELLBEING & MENTAL HEALTH BENEFIT

You and your eligible family members can trust the NexGen EAP services to address your total well-being by providing barrier-free access to mental health and virtual life services.

# CONFIDENTIAL ASSISTANCE

We ensure that your information and identity is kept completely confidential - even from your employer. Exceptions occur only when members are at risk of harming themselves or others or when the welfare of a child is in question.

# Download THE APP



COMPANY ID: 8956
COMPANY ID IS NEEDED TO CREATE AN
ONLINE ACCOUNT



### Coaching & Counseling Services

NexGen EAP provides barrier-free access to mental health professionals and life coaches via phone, video, web, text, and chat. Connect with one of our Life Service Navigators for assistance or effortlessly schedule an appointment on your own through the NexGen EAP mobile app. Get support for a range of wellness needs, stress, anxiety, meditation, career development, relationship management, and much more.

# Legal and Financial Consultations

Half-hour legal consultations can be used for issues including divorce, custody disputes, and wills. Discounted legal fees are also available if a longer consultation is required.

90-minute financial consultations can provide assistance with topics such as debt management, credit issues, and budgeting. ID Theft resources are also available.

### Child/Elder Care Resources

NexGen EAP can assist you in finding a pediatrician, babysitter/nanny, camps, sports lessons, music lessons, college applications, and financial aid. Eldercare resources include help with housing options, assisted living facilities, Medicare, finding doctors, financial planning, and transportation.

### Health Advocacy

Our Health Advocates are available to provide benefits information and assistance navigating your health plan. They can also assist with healthcare claims and appeals management, billing assistance, prescription information and costs, and healthcare provider research.

### Individualized Wellness Resources

Your comprehensive, personalized Wellness Program encompasses all areas of well-being from nutrition and fitness to relaxation and restoration. Submit a wellness request, schedule a call with a Wellness Coach, or receive individualized wellness tools and resources.

### Virtual Concierge

The Virtual Concierge Service features dedicated Personal Assistants available to provide you with research, referrals, or information on just about any topic including travel information, event planning, relocation, dining, entertainment, and more.

# Mindfulness Training In partnership with Self by Design

To support you in building mental resilience, cognitive skills, and emotional management tools to navigate today's challenging world, our Mindfulness Training includes masterclasses on mental wellness/mindfulness, guided meditations, and a video content library full of educational videos and exercises for the mind.

### **Barrier-Free Accessibility**

Access your Total Wellbeing Program via the NexGen EAP app or the online web portal. Effortlessly schedule an appointment with a counselor or coach, and get connected to the full suite of your Virtual Life Services right from your computer or phone. You can also submit requests directly to your Personal Assistant, access exclusive entertainment discounts, live chat, and start a financial or legal request.

# e-Learning

Your NexGen EAP benefit offers online access to over 300 professional interactive training courses and self-help tools, along with other work/life resources to promote personal and professional development.

e-Learning programs include topics like wellness, conflict resolution, public speaking, effective communication, maintaining a positive attitude, time management, and much more.



WWW.NEXGENEAP.COM 1.800.327.2255 MOBILE APP: NEXGEN EAP