

2018 Benefit Open Enrollment

Opens: 8:30 a.m. Wednesday, November 8, 2017 Closes: 5:00 p.m. Monday, November 20, 2017

We hope that you find this booklet useful for your enrollment. Please feel free to contact the Benefits Office with questions through e-mail at benefits@wesleyan.edu. We are happy to answer your questions.

Highlights for 2018

Wesleyan University Benefits is pleased to provide the 2018 Benefits Open Enrollment Guide. This guide is designed to help you enroll for your 2018 benefits and provides information on benefit options, premiums and online enrollment.

All changes made during open enrollment will be effective January 1, 2018.

2018 Premiums – The 2018 premiums are as follows:

- **Medical** for the three medical plan options Open Access Plus In Network (HMO), Open Access Plus (POS) and Open Access High Deductible (HD HSA) will increase by 10%.
- **Delta Dental** insurance will increase by 5%.
- EyeMed Vision Care (for glasses/contacts) will increase by 3%.
- Supplemental life insurance premiums will remain the same as 2017.

2018 Premium Subsidy – The salary breakpoint has increased. Staff members whose <u>annualized</u> full time base salary is less than or equal to \$58,530 as of 12/31/2017, will receive a premium subsidy based upon enrollment and in accordance with your pay period. The *annual* amount of the subsidy is: \$715 for employee only, \$1,540 for employee plus one and \$1,898 for family.

Plan Design Changes - In order to help manage expenses the following changes will be implemented effective 1/1/2018, for the Open Access Plus (POS) and Open Access Plus – In Network Only (HMO) plans:

- The In-Network deductible will increase from \$100 for individuals and \$200 for family coverage to \$200 for individuals and \$400 for family coverage.
- The Out-of-Network deductible will increase from \$250 for individuals and \$500 for family coverage to \$350 for individuals and \$700 for family coverage.
- The In-Network out of pocket maximum for individuals will increase from \$500 to \$750 and the In-Network out of pocket maximum for family coverage will increase from \$1,000 to \$1,500.
- The Out-of-Network out of pocket maximum for individuals will increase from \$1,250 to \$2,500 and the out of pocket maximum for family coverage will increase from \$1,500 to \$3,000.
- There are no changes to the Open Access Plus High Deductible Plan.

CIGNA ID Cards – You will receive new cards only if you are electing or changing coverage.

Accessing Open Enrollment

When: 2017 Benefit Open Enrollment Opens: 8:30 a.m. Wednesday, November 8, 2107

Closes: 5:00 p.m. Monday, November 20, 2017

All elections for your 2018 benefits must be made during the Open Enrollment period.

Please see the note below if you experience life status changes in 2018.

Where: WesPortal

The menu for 2018 Open Enrollment will be under your My Information heading. If you are connecting to the network from an off-campus location, you will need VPN to access your Open Enrollment pages. Please use this link to view details on how to connect via VPN: VPN
VPN
VPN
VPN
VPN

What Steps Do I Take?

1. Find Your Current Benefit Elections for 2017: In WesPortal (under the My Information heading) is a menu item that displays 2017 benefits. Refer to this as you make your selections for 2018.

2.Log into the Open Enrollment site in WesPortal: When you enter the 2017 Open Enrollment page you will see a page titled "Your Benefit Elections and Confirmation for 2018." From this page, you will be able to click each of the four benefit areas to enroll or change your enrollment. To review your submissions, go back to the Elections and Confirmation page.

- Health Benefits: Medical, Dental, Vision
- Life Insurance: Basic & Supplemental Life
- Retirement Savings Plans: SRA & Roth Contributions and, if eligible, 457 contributions
- Flexible Spending Accounts: Medical Expense Reimbursement Account (MERA) and Dependent Care Reimbursement Account

You must click the "SUBMIT" button on each page you are making a change or an election in order for them to be saved and displayed on the summary page.

- 3. Where do I find details about each plan? Under each group you will be able to click a link to see detailed plan descriptions or visit www.wesleyan.edu/hr
- 4. How do I view and change dependent & beneficiary information? Under each group, you will be able to review, update, and add dependents and beneficiaries. There is a requirement that we must furnish social security numbers for all dependents on your health insurance plan. Please review your dependents listed on the Open Enrollment landing page.

If there are any social security numbers missing, please follow the instructions on that page to add the numbers. This is a secure portal so this information cannot be shared.

- 5. If you do not wish to make any changes Your 2017 medical, dental, life insurance, vision, SRA and Roth will automatically be rolled over to 2018, if you do not make a selection online during the open enrollment. Please check waive if you do not want medical insurance.
- **6. Certain benefits do not automatically roll over** Flexible Spending Accounts, HSA elections and 457 Plans cannot be rolled over. A new selection for 2018 must be completed online.

Need Help?

Benefit related information/questions:

http://www.wesleyan.edu/hr/staff/benefits/2017%20Open%20Enrollment.html

E-mail: benefits@wesleyan.edu

Open Enrollment Web pages or technical difficulties:

https://wesleyanedu.service-now.com/ess/

Information Sessions and Additional Assistance

Information Sessions

Two information sessions are scheduled to provide an overview of the benefit options and help using the Open Enrollment portal.

In addition to the sessions listed below, you can ask specific questions of the Benefits Office staff through e-mail at: benefits@wesleyan.edu.

WHEN: Friday, November 10, 2017, 3:00 – 4:00 p.m.

WHERE: Exley - SC509A

WHEN: Wednesday, November 15, 2017, 12:00 - 1:00 p.m.

WHERE: Exley - SC509A

Hands-On Assistance with Completing Your Benefits Selections

In-person drop-in assistance will be available to help you complete your benefit selections and answer any questions during the last day of Open Enrollment. You don't need an appointment, but you should bring the information on the options you wish to select.

WHEN: Monday, November 20, 2017, 9:00 a.m. to 5:00 p.m. This is the last day of Open Enrollment

WHERE: Human Resources Office, 212 College Street



2018 Insurance Premiums

Premiums reflect monthly rates

	Employee Contribution	Wesleyan Contribution	Total Contribution	
Open Access Plus High Deductible Health Plan (HSA)				
Single	\$174.09	\$365.28	\$539.36	
Two-Person	\$380.01	\$822.07	\$1,202.08	
Family	\$470.69	\$1,018.22	\$1,488.91	
Open Access Plus – In Network Only (HMO)				
Single	\$237.23	\$513.21	\$750.43	
Two-Person	\$517.83	\$1,120.21	\$1,638.03	
Family	\$641.39	\$1,387.50	\$2,028.88	
Open Access Plus (POS)				
Single	\$281.51	\$608.97	\$890.48	
Two-Person	\$613.80	\$1,327.81	\$1,941.61	
Family	\$760.21	\$1,644.53	\$2,404.74	
Delta Dental of New Jerse	у			
Single	\$20.18	\$40.39	\$60.57	
Two-Person	\$38.05	\$76.17	\$114.22	
Family	\$72.18	\$144.59	\$216.76	
Voluntary Vision Plan - Ey	eMed			
Single	\$4.71	\$0	\$4.71	
Two-Person	\$8.94	\$0	\$8.94	
Family	\$13.13	\$0	\$13.13	

2018 Premium Subsidy					
Eligibility: Employees with annualized base earnings equaling \$58,530 or less					
	Monthly Premium Subsidy	Annual Premium Subsidy			
Employee	\$59.58	\$715.00			
Employee + 1	\$128.33	\$1540.00			
Family	\$158.17	\$1898.00			

^{*}Subsidy Credits are applied to the employee paycheck based on pay frequency.

For further information, please email benefits@wesleyan.edu

Benefit Notes to Ponder

All benefits are "a la carte". You can sign up for all, some or none. Your choice.

Dependents Information for medical coverage

There is a requirement to furnish social security numbers for all dependents on your health insurance plan. Please review your dependents listed on the Open Enrollment landing page and follow the instructions to add the numbers. (WesPortal is a secure venue to add social security numbers)

Adding a Dependent or Beneficiary

Be sure you collect and report the following information:

- Full Name
- Relationship to employee
- Date of Birth
- Social Security Number (WesPortal is a secure venue to add social security numbers)
- Home Address

Life Status Changes

If you experience a life status change in 2018 (the birth, death, adoption, marriage, divorce of an immediate family member or loss of coverage), please contact the Benefits Office within 30 days of the change. You may be eligible to make adjustments in your benefit elections.

Medical

- **Preventive Services** covered at 100%
- **Telehealth Benefits Added** You will be able to phone or video-chat with a doctor rather than go to an urgent care or doctor's office.
- Routine Eye Exams Routine eye exams are covered under the CIGNA medical plan and the coverage remains the same: If the doctor is in-network, the exam will be covered 100%. If the doctor is out-of-network, you will be reimbursed up to \$75, but none of the bill will be applied to the out of pocket maximum.
- Glasses/Contacts The buy up vision plan through EyeMed offers materials only coverage for vision needs (glasses/contacts). Annual eye exams are excluded from this plan as they are covered under the Cigna medical plan. You do not need to be enrolled in the Cigna medical plan to sign up for the EyeMed Vision plan.

Wellness Program

The Wesleyan Incentive Points Program for current employees, spouses and partners is a great way for you to motivate yourself to take positive steps toward a healthier life. You will be rewarded for participating in health improvement programs and completing various milestones. By actively participating, you will be eligible to earn points that can be redeemed for premium savings. Each point earned equals \$1. Each participant is eligible to earn up to \$150/150 points on a semi-annual basis. There are two programs: one for CIGNA participants and one for those not enrolled with Cigna.

Medicare Part D Information: Information regarding the Medicare prescription drug coverage (Medicare Part D) can be found at the end of this booklet rather. This is a required annual notification by Medicare that is intended primarily for active employees and their dependents who are eligible for Medicare or who will soon be eligible for Medicare. This information references prescription coverage during 2017. If you are an active employee of the University 65 years or older, you do not need to enroll in Medicare D at this time. If you are a retiree of the University, you may not need to enroll in Medicare D at this time, as well. Your medical insurance through the University will remain prime to Medicare.

Life Insurance Benefits

Your current basic life and supplemental life insurance options and beneficiaries will automatically continue unless you have reached age 65 or 70 in 2017. The amount of life insurance will decrease by 65% at age 65 and again at age 70. For all others, the life insurance options and age-based premiums will not change for 2018. Rates will increase on January 1st after the employee's or spouses age increases to the next bracket. Full rate details are available on the Open Enrollment Web page.

Beneficiary Changes: The Open Enrollment Web pages will display your current beneficiaries and give you an opportunity to change those beneficiaries.

Increase Supplemental Life Coverage: Eligibility for increases in Supplemental Life or Spouse/Domestic Partner Life are available to those under age 65 and require the completion of the Evidence of Insurability form. Please contact benefits@wesleyan.edu for the form. Life insurance changes can be made anytime within the plan year.

Decrease Supplemental Life Coverage: Supplemental or Spouse/Domestic Partner Life can be decreased at this time. Life insurance changes can be made anytime within the plan year.

Retirement Savings Plans

Your 2017 SRA or Roth contribution percentage will automatically be rolled over to 2018, if you do not make any changes during open enrollment.

You can change your SRA or Roth contribution percentage at any time during the year including Open Enrollment. Percentage changes made during Open Enrollment are effective January 1, 2018. SRA and Roth deductions will automatically stop once you have reached your limit allowed by the IRS.

2018 SRA Limits: The maximum annual contribution to an SRA or Roth for 2018 has increased from \$18,000 to \$18,500. If you are age 50 and above, the annual catch up contribution amount has remained the same at \$6,000. Employees with over 15 years of service may be eligible for an additional amount of contribution.

457(b) Plan: For those eligible, contributions to the 457(b) plan are still based on a dollar amount per year, not a percentage. Continuation of voluntary contributions to your 457(b) plan requires a new enrollment request and must be completed during open enrollment. The maximum contribution to a 457(b) Plan in 2018 has increased to from \$18,000 to \$18,500.

Flexible Spending Accounts

Medical Expense Reimbursement Account (MERA): A MERA allows you to have your salary reduced before taxes and set aside to pay for allowable medical expenses. The IRS determines eligible medical expenses. The annual MERA maximum contribution is \$2,650. Annual contributions must be between \$120 and \$2,650.

Dependent Care Reimbursement Account: This plan, which allows up to \$5,000 before taxes to be set aside, is available for 2018.

Incurring and submitting claims for 2017: Remember 2017 deductions can be used to reimburse medical, dental, vision (MERA) and dependent care expenses incurred through March 15, 2018. Requests for reimbursement must be submitted by April 15, 2018.

Flexible spending accounts (MERA and/or Dependent Care) are administered by Benefit Strategies LLC.

Health Care Savings Account (HSA)

A Health Care Savings Account allows you to have your salary reduced before taxes and set aside to pay for allowable medical expenses. *You must be enrolled in the Cigna Open Access Plus High Deductible plan to be eligible to participate.* The IRS determines eligible medical expenses. **The 2018 annual HSA maximum contribution for individuals is \$3,450 and the maximum contribution for families is \$6,900.**

Vacation Purchase Plan

Professional Librarians, Administrative Staff and secretarial/clerical union members may opt to purchase additional vacation time during open enrollment. There will be plan details on the Open Enrollment page.

Changing or Correcting Information on a Current Dependent or Beneficiary: If a name, date of birth, or relationship (including changing a partner to a spouse) needs to be changed on an existing dependent or beneficiary, send an e-mail to benefits@wesleyan.edu. Include both the incorrect information and the correct information. The change will be made within 2 business days and will be reflected on the Open Enrollment page. Please do not include social security numbers in any emails.

Important Notice from Wesleyan about Prescription Drug Coverage and Medicare

This notice is intended primarily for active employees and dependents who are eligible for Medicare or who will soon be eligible for Medicare. Please read this notice carefully and keep it where you can find it.

On January 1, 2006, Medicare prescription drug coverage ("Medicare Part D") became available to everyone with Medicare. This notice contains information about (1) your current prescription drug coverage with Wesleyan, and (2) prescription drug coverage for people with Medicare. It also tells you where to find more information if you need to make decisions about your prescription drug coverage.

Wesleyan has determined that its prescription drug coverage provided during the 2017 Plan Year through CIGNA is, on average for all plan participants, expected to pay out as much as the standard Medicare prescription drug coverage will pay. In other words, the "actuarial value" of the Plan's drug coverage is at least as good as (if not better than) the "actuarial value" of the standard prescription drug coverage under Medicare Part D. Thus, the Plan's prescription drug coverage is considered "creditable" coverage.

This is important because it means that you do not have to enroll in Medicare Part D at this time just to avoid paying a late enrollment penalty. You will not have to pay a late enrollment penalty as long as you join a Medicare prescription drug plan within 63 days after your "creditable" coverage ends.

If Your Coverage with Wesleyan Ends

Individuals can enroll in a Medicare prescription drug plan when they first become eligible for Medicare and each year from **October 15 through December 7**. In addition, beneficiaries leaving employer coverage may be eligible for a special enrollment period to sign up for a Medicare prescription drug plan.

If your coverage with Wesleyan ends and you do not enroll in Medicare prescription drug coverage during your initial Medicare enrollment period or during any special enrollment period, you may pay more to enroll in Medicare prescription drug coverage later. After your initial Medicare enrollment period, if you wait 63 days or more to enroll in Medicare Part D, your monthly Part D premium will go up at least 1% per month for every month that you delay enrollment. For example, if you go nineteen months without enrolling in Part D, your premium will always be 19% higher than the standard rate. You will have to pay this higher premium as long as you have the Medicare drug coverage. In addition, you may have to wait until the next November to enroll (during Medicare's annual enrollment period).

Your Options

1. You can keep your current medical and prescription drug coverage with Wesleyan, and you do not have to enroll in a Medicare prescription drug plan. You may enroll in a Medicare

prescription drug plan in the future, during Medicare's annual enrollment period (October 15 through December 7 of each year). You may also be eligible to enroll during a special enrollment period when your coverage under this Plan ends.

2. You can keep your current medical and prescription drug coverage with Wesleyan and you may also enroll in a Medicare prescription drug plan. If you do this, Wesleyan will pay primary to Medicare for active employees and their spouses and children.

Information about the Medicare Prescription Drug Program

Medicare prescription drug coverage is available to everyone with Medicare and is provided through private Medicare prescription drug plans and Medicare Advantage plans that offer prescription drug coverage. All Medicare prescription drug plans will provide at least a standard level of coverage set by Medicare. Some plans might also offer more coverage for a higher monthly premium.

You pay the premium to the Medicare prescription drug plan that you choose. The amount would depend on the type of coverage that you choose. For people with limited income and resources, extra help paying for a Medicare prescription drug plan is available from Medicare.

Each Medicare prescription drug plan will cover different brand name drugs at different costs to you. Your drugs may not be covered under every plan. For instance, one plan might cover your current brand name medication, and another might not.

Each Medicare prescription drug plan may have a different deductible, copayments, and other costs that you will be responsible for paying, as well as a different network of retail and mail order pharmacies. For people with limited income and resources, extra help paying for these out-of-pocket costs is available from Medicare.

For More Information about your Medicare Prescription Drug Coverage Options

More detailed information about Medicare prescription drug coverage is included in the "Medicare & You" handbook, which explains in detail what prescription drug coverage means to you and which plans are available in your area. You may also be contacted directly by Medicare prescription drug plans. In addition, you can get more information about Medicare prescription drug plans from these places:

- Visit http://www.medicare.gov.
- Call your State Health Insurance Assistance Program (see the "Medicare & You" handbook for the telephone number).
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

For people with limited income and resources, extra help paying for a Medicare prescription drug plan is available. Information about this extra help is available from the Social Security Administration (SSA). For more information about this extra help, visit SSA online at http://www.socialsecurity.gov, or call them at 1-800-772-1213 (TTY 1-800-325-0778).

If you enroll in Medicare prescription drug coverage, you may need to provide a copy of this notice to the prescription drug plan when you join to show that you are not required to pay a higher premium amount.

NOTE: This document is intended to serve as your Notice of Creditable Coverage as required by law. You may receive this notice at other times in the future (such as before the next period you can enroll in Medicare prescription drug coverage, and if this coverage changes). You also may request a copy.

If you have any questions about this notice or your current prescription drug coverage, please contact Wesleyan (see the contact information below).

For more information about this notice or your current prescription drug coverage email benefits@wesleyan.edu. You may receive this notice at other times in the future such as before the next period you can enroll in Medicare prescription drug coverage, and if this coverage changes.

As in all cases, Wesleyan reserves the right to modify benefits at any time, in accordance with applicable law.