

## Open Enrollment 2020

Be sure to check the following places for communications and important information.





**MAIL and EMAIL** 

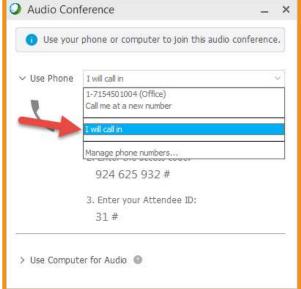


WEEKLY COMMUNICATIONS

### To Join WebEx Audio:

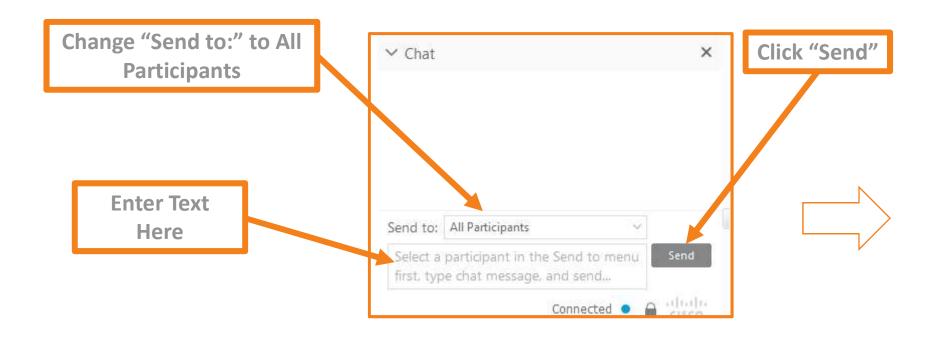








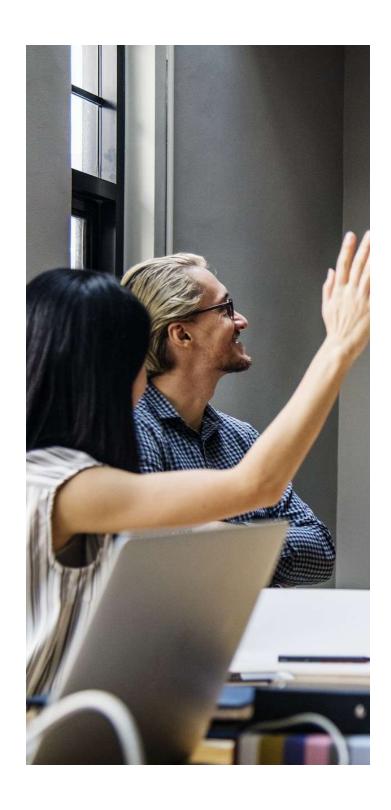
# Chat your questions during the presentation to All Participants





## Meeting Agenda

- ✓ What is the time frame?
- What is changing?
- What is staying the same?
- ✓ Where are resources?
- Who can I contact with further questions?



## Please ask questions if you have them



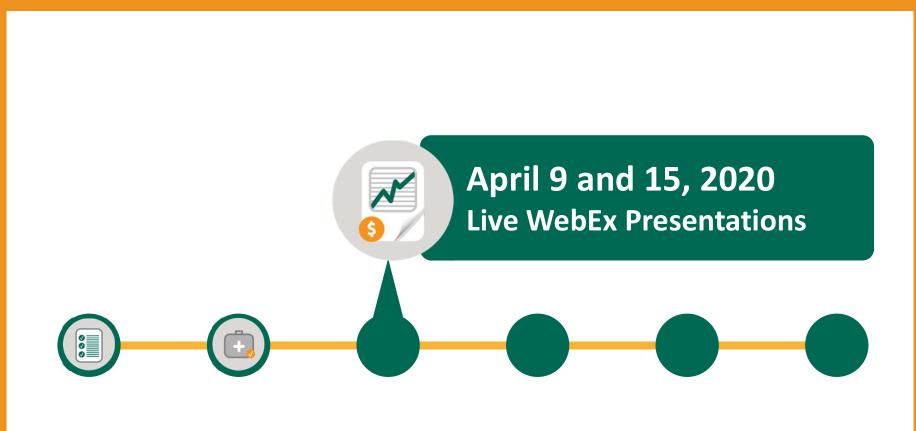
## The Open Enrollment Time Frame







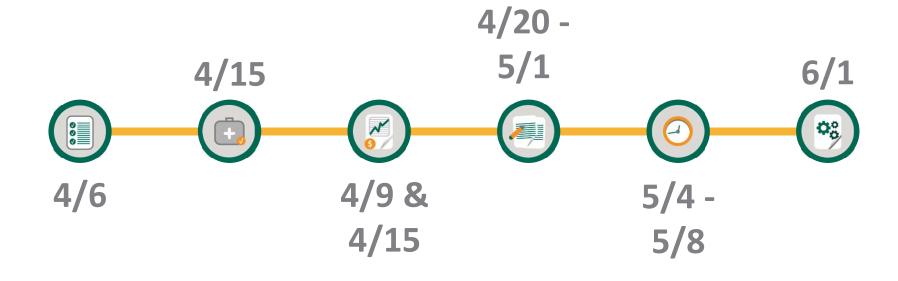














## What Is Changing?

## 2020 Changes

- ✓ Enroll online through UltiPro or call the Enrollment Center. <u>Employees</u> <u>must actively enroll in coverage. Benefits will not carry over.</u>
- ✓ Premium contributions for the medical plan. PPO plan design changes.
- ✓ New medical plan network of providers for Madison area
- ✓ New short-term and long-term disability plan options with Reliance Standard
- ✓ New accident insurance and critical illness insurance plan options with Reliance Standard available to all eligible employees
- ✓ Open enrollment opportunity for voluntary life insurance
- ✓ Kansas and New York employees are now eligible for life and disability insurance



## Enroll Online or Call Center

- Enroll online on UltiPro
  - See your enrollment brochure, open enrollment emails and open enrollment packet, which you will receive in the mail, for the web address and site login information
- Call the Midwest Dental Enrollment Center
  - 1-800-603-6461, 9 am 6 pm Eastern
  - The Enrollment Center allows you to speak with a Benefits Counselor who will explain your options, answer your questions, and enroll online for you.





## PREMIUM CONTRIBUTIONS

	June 1,	2019	- Mav	31.	2020
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#### Bi-Weekly – All employees besides doctors

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Bi-weekly	\$105.23	\$266.77	\$293.08
Semi-	\$114.00	\$289.00	\$317.50

#### June 1, 2020 - May 31, 2021

#### **PPO Plan Employee Contributions**

	Employee Only	Employee Plus One	Family
Bi-weekly	\$110.31	\$280.15	\$307.85
Semi- monthly	\$119.50	\$303.50	\$333.50

## High Deductib

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	Employee	Conti	Semi-Monthly – Doctors		oyee Co	oyee Contributions			
	Employee Only	Emp Plus				ployee Only	Employee Plus One	Family	
Bi-weekly	\$60.00	\$152.77	\$168.00		Bi-weekly	\$63.23	\$160.62	\$176.31	
Semi- monthly	\$65.00	\$165.50	\$182.00		Semi- monthly	\$68.50	\$174.00	\$191.00	





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## Health Insurance Plan Design

	PPO Plan		HDHP w	/HSA
Services	In Network	Out-of-Network	In Network	Out-of-Network
Deductible*	<b>\$1,250 Single/</b> \$3,000 Family	<b>\$2,500 Single/</b> \$6,000 Family	\$3,000 Single/ \$6,000 Family	\$6,000 Single/ \$12,000 Family
Medical Max. Out-of- Pocket*	\$6,000 Single/ \$12,000 Family	\$12,000 Single/ \$24,000 Family	\$5,800 Single/ \$11,600 Family	\$11,600 Single/ \$23,200 Family
Coinsurance	80% After Deductible	60% After Deductible	80% After Deductible	60% After Deductible
Preventative	100%	60% After Deductible	100%	60% After Deductible
Office Visit	80% After Deductible	60% After Deductible	80% After Deductible	60% After Deductible
Urgent Care	80% After Deductible	80% After Deductible	80% After Deductible	80% After Deductible
Emergency Room	80% After Deductible	80% After Deductible	80% After Deductible	80% After Deductible
Prescription Drugs -Generic -Formulary Brand	-\$15 copay -Greater than \$35 or 25%	-\$15 copay -Greater than \$35 or 25%	-80% After Deductible -80% After Deductible	-50% After Deductible -50% After Deductible
	Copay counts toward OPM	Copay counts toward OPM	Coinsurance counts toward OPM	Coinsurance counts toward OPM

Must be scheduled and working at least 30 hours per week to qualify.

\*PPO Plan single deductible and OOP changes in bold

## ✓ The Alliance Network

- The network change is for all members within the 13 county Madison, WI area.
- You do not need to change your providers!
- You will receive new ID cards to be used starting June 1.
- To find a provider, you will use the same process as you do today, and will be directed to the Alliance network on the UMR website



## ✓ Voluntary Disability Insurance

#### Short-term Disability

- Short-term disability insurance will be available with Reliance Standard.
   Rates are based on age.
- The benefit is 60% of weekly earnings up to \$1,000 for 26 weeks of a disability
- If you have an individual STD policy with Unum, you will have the option to continue this policy on a direct-bill basis with Unum. Midwest Dental will not payroll deduct for this coverage beginning June 1. You will receive a letter directly from Unum explaining this option.

#### Long-term Disability

- Long-term disability insurance will also be available with Reliance Standard. Rates are based on age.
- The benefit is 50% of monthly earnings up to \$5,000, beginning after 180 days.

## ✓ Voluntary Accident and Critical Illness Insurance

- Accident Insurance
  - Accident insurance will be available with Reliance Standard.
  - The benefit pays a fixed amount for covered accidental injuries.
  - Coverage is available for family members as well.
- Critical Illness Insurance
  - Critical illness insurance will also be available with Reliance Standard.
  - The plan pays a lump sum cash benefit upon diagnosis of a covered illness.
  - Premiums are based on age and tobacco use and coverage is available for family members.

## ✓ Voluntary Life and AD&D Insurance

- Voluntary life and AD&D insurance will be offered through Reliance Standard.
- Employees that have coverage through Unum will be able to keep inforce amounts.
   These coverage amounts will transfer to Reliance Standard. Employees may also increase or decrease their coverage.
- During this enrollment, employees will have the opportunity to elect voluntary life and AD&D coverage up to the guaranteed issue amount of coverage without evidence of insurability.
- You can elect additional life insurance coverage for yourself, spouse, and dependent children. You can elect up to 5x's your salary, but no more than \$500,000. Rates vary by age. Coverage for children is available up to \$10,000.



## What is Staying The Same?



## Vision Plan A

Vision Care Services	In-Network	Out-of-Network Reimbursement	
Vision Exam	\$10 Copay	Up to \$40	
Frames	\$0 copay; \$130 allowance; 20% off balance over \$130	Up to \$91	
Standard Plastic Lenses Cost is per lens	Single vision: \$25 copay Bifocal: \$25 copay Trifocal: \$25 copay	Single vision: Up to \$30 Bifocal: Up to \$50 Trifocal: Up to \$70	
Progressive Lenses Cost is per lens	Standard: \$90 Premium: \$90, 80% of charge less \$120 allowance	Standard: Up to \$50 Premium: Up to \$50	
Conventional Contact Lenses Does not include fitting	\$0 copay; \$130 allowance; 15% off retail price over \$130	Up to \$130	
Disposable Contact Lenses Does not include fitting	\$0 copay; \$130 allowance; plus balance over \$130	Up to \$130	
Laser Vision Correction	15% off the retail price or 5% off promotional price N/A		
Frequency	Examination: Once every 12 months Lenses or Contact Lenses: Once every 12 months Frames: Once every 24 months		

VISION PLAN A – EMPLOYEE CONTRIBUTIONS						
	Employee Only	Employee + Spouse	Employee + Child(ren)	Family		
Bi-Weekly	\$2.75	\$5.23	\$5.51	\$8.10		
Semi-Monthly	\$2.98	\$5.67	\$5.97	\$8.77		

Must be scheduled and working at least 25 hours per week to qualify.



## Vision Plan B

Vision Care Services	In-Network	Out-of-Network Reimbursement	
Frames	\$0 copay; \$130 allowance; 20% off balance over \$130	Up to \$91	
Standard Plastic Lenses Cost is per lens	Single vision: \$25 copay Bifocal: \$25 copay Trifocal: \$25 copay	Single vision: Up to \$30 Bifocal: Up to \$50 Trifocal: Up to \$70	
Progressive Lenses Cost is per lens	Standard: \$90 Premium: \$90, 80% of charge less \$120 allowance	Standard: Up to \$50 Premium: Up to \$50	
Conventional Contact Lenses Does not include fitting	\$0 copay; \$130 allowance; 15% off retail price over \$130	Up to \$130	
Disposable Contact Lenses Does not include fitting	\$0 copay; \$130 allowance; plus balance over \$130	Up to \$130	
Laser Vision Correction	15% off the retail price or 5% off promotional price	N/A	
equency Lenses or Contact Lenses: 0 Frames: Once ever			

VISION PLAN B – EMPLOYEE CONTRIBUTIONS						
	Employee Only	Employee + Spouse	Employee + Child(ren)	Family		
Bi-Weekly	\$1.97	\$3.74	\$3.94	\$5.79		
Semi-Monthly	\$2.13	\$4.05	\$4.27	\$6.27		

Must be scheduled and working at least 25 hours per week to qualify.



## Where Are My Resources?



# Resources about benefits can be found in the following locations:

- Midwest Dental Enrollment Center
- Email and mailed communications
- Webinar Presentations
- Employee Webpage
- HR Solutions
- Benefits Specialist





"If I don't need to make any changes to my benefits, do I need to complete the enrollment?"

**Answer:** Yes. All benefits eligible employees (full and part-time) are required to complete the enrollment online or by calling the Enrollment Center and speaking with a Benefits Counselor between April 20 and May 1.



"How many hours does an employee have to work to be eligible for health insurance?"

**Answer:** Employees must be scheduled and working a minimum of 30 hours per week to be eligible for health insurance.



## $\sqrt{\phantom{a}}$

## Frequently Asked Questions

"How many hours does an employee have to work to be eligible for vision, voluntary life, short and longterm disability, critical illness and accident insurance?"

**Answer:** Employees must be scheduled and working a minimum of 25 hours per week to be eligible for health insurance.



"With my health plan, can I enroll in FSA or HSA?\*"

Answer: Employees enrolled in the HDHP are eligible to participate in a HSA at any time (no need to wait for open enrollment). Employees enrolled in the HDHP plan are eligible to participate in HSA and/or FSA (limited); however, new enrollment for FSA can only be done at open enrollment for a January 1 effective date. Employees enrolled in the Plan 1000 are eligible for FSA only.

<sup>\*</sup>NY and KS employees are not eligible

"What happens if I change plans at Open Enrollment?"

**Answer:** The plan year runs from June 1 to May 31, including premiums and coverage. Your deductible runs on a calendar year, from January 1 to December 31.



"Who are considered dependents?"

**Answer:** Legal spouses and dependent children (including step-children) up to age 26 are considered dependents. At the end of the month of a dependent child's 26th birthday, the dependent child will no longer be eligible to participate in the company sponsored health insurance plan and will be offered COBRA.





## Who/How Do I Ask Questions?



## Please Reach Out To

The Enrollment Center at 1-800-603-6461

With Further Questions



# Thank you for your time!





Sue McIntosh – Benefits Specialist – smcintosh@midwest-dental.com Jodi Morris – Benefits/Payroll Manager – jmorris@midwest-dental.com

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