



2018 Benefits Presentation

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What is New for 2018



- Health plan names are changing
 - The EPO Plan is now the CPHP (Co-Pay Health Plan)
 - The PPO Plan is now the AHDHP (Aggregate High Deductible Health Plan)
 - The HDHP is now the EHDHP (Embedded High Deductible Health Plan)
- NEW Pharmacy Benefit Manager (PBM)
 - Navitus
- New Health Plan ID cards for all 2018 health plan enrollees
- Teledoc
- Out of Pocket Maximum Changes (CPHP and AHDHP only)
- Myjob Self Service Annual Enrollment Portal
 - Added “Waive” option for health plan choices to give employees a clear view of ALL options

2018: ALEX is Back!

- ALEX guides you through important benefits, health care, and wellness decisions
- Access ALEX 24/7; whenever is convenient for you
- ALEX keeps you actively engaged
- ALEX will walk through all your benefits decisions and provides advice that fits your individual needs
- <http://shortvideodemo.myalex.com/v10.html>



2018: Plan Highlights

CPHP

(Co-Pay Health Plan)
(formerly EPO)

- No Deductible change:
2018: \$300 Single / \$600 Family
- Out of Pocket (OOP) max change:
2017: \$3,000 Single / \$6,000 Family
2018: \$3,250 Single / \$6,500 Family
- Co-pays for many services
 - \$25 Office Visit (PCP)
 - \$50 Office Visit (Specialist)
 - \$75 Urgent care
 - \$150 Emergency Room
 - \$250 / Day (Up to 4 Days)
Hospital Inpatient
- HRA incentive for 2018
MU contributes to FSA Health
 - Single: \$125 | EE+1/Family: \$250

AHDHP

(Aggregate High Deductible Health Plan)
(formerly PPO)

- No Deductible change:
2018: \$1,500 Single / \$3,000 Family
- Out of Pocket (OOP) max change:
2017: \$3,575 Single / \$7,150 Family
2018: \$3,675 Single / \$7,350 Family
(Aggregate OOP – see next slide)
- No Co-pays: deductible / coinsurance applies to all services
- HRA incentive for 2018
MU contributes to HSA
 - Single: \$250 | EE+1/Family: \$500

**employees who average 30 hours over a defined measurement period pay the same premiums as full time employees.*

EHDHP

(Embedded High Deductible Health Plan)
(formerly HDHP)

- NO CHANGE to deductible or out of pocket maximum
- MU HSA contribution for enrolling: \$250 Single or \$500 EE+1/Family
- No Co-pays: deductible / coinsurance applies to all services
- HRA incentive for 2018
MU contributes to HSA
 - Single: \$250 | EE+1/Family: \$500

Embedded v. Aggregate Out of Pocket Maximum

CPHP and EHDHP (formerly EPO and HDHP)

An **embedded out of pocket (oop) maximum** means that a single member of a family doesn't have to meet the full family oop. Under employee +1 or family coverage, an individual family member would be responsible for up to the SINGLE oop maximum only.

AHDHP (formerly PPO)

With an **aggregate family out of pocket (oop) maximum** there is essentially no separate single oop “embedded” within the family plan. Under employee +1 or family coverage, the family deductible/ooop maximum applies even if only one family member incurs claims.

HSA vs FSA Health

HSA (Health Savings Account)

- Allows you to contribute and withdraw money on a tax-free basis for eligible health expenses.
- Can only withdraw what is currently in the account
- There is NO “use it or lose it.” You own the HSA; it stays with you year to year, and even beyond termination of employment.
- You can use your HSA to pay for qualified health expenses that are incurred at any time after establishing the HSA. You can use your EBC issued debit card to pay for eligible expenses.
- Keep all receipts for a minimum of one year.
- Can change contribution amount on a monthly basis, as long as it does not exceed annual IRS limits
- Can be paired with a limited purpose FSA (dental and vision expenses only)
- Maximum annual HSA contribution amount for 2018
 - \$3,450 for single AHDHP / EHDHP coverage
 - \$6,900 for family coverage.
 - Catch-up Contributions: If you are at least age 55 by the end of the year, then you can contribute an extra amount. The extra amount is \$1,000 each year

FSA (Flexible Spending Account)

- Allows you to contribute and withdraw money on a tax-free basis for eligible health expenses.
- Can withdraw total election amount at any time
- Must re-enroll every year during annual enrollment
- Use it or lose it. FSA is owned by your employer
- Carried over for 2.5 months, “grace period”
- For reimbursement, you may download a reimbursement form on the Benefit web site and submit the form and receipts to EBC or use a FSA debit card which is provided by EBC.
- Keep all receipts for a minimum of one year.
- Can only change contribution amount during open enrollment and certain qualifying events
- Maximum annual FSA contribution amount for 2018
 - HC FSA: \$2,650 per employee
 - DC FSA: \$5,000 per household (independent of medical plan election)

Tax Savings Options

- **FSA Dependent:** Covers qualified **dependent care** expenses incurred for the **care** (e.g. day care) of one or more qualifying individuals. Independent of Medical Plan Election.
- **HSA Health:** Actual bank account under employee's name that allows employee to save and pay for qualified health expenses (medical, Rx, dental and vision). AHDHP or EHDHP enrollment only
- **FSA Health:** A flexible spending account that you may be use to pay for eligible out-of-pocket health expenses (medical, Rx, dental and vision). CPHP only
- **FSA Limited:** A flexible spending account that you may be use to pay for eligible out-of-pocket dental and vision expenses only. AHDHP or EHDHP enrollment only

FSA

Enter the amount PER PAYCHECK you would like deducted for the Health and/or Dependent Care Flexible Spending Accounts. Please be aware that Dependent amounts are for eligible Child Care expenses only. NOTE: There are minimum and maximum amounts per each flexible spending account. For monthly employees, the minimum is \$20.00 per paycheck and for bi-weekly employees the minimum is \$10.00 per paycheck. The maximum amount for all enrollees; \$5,000 per year for eligible Dependent Care per spending account and \$2550 per year for eligible Health Care expenses. If you work less than a 12 month schedule, please contact Employee Benefits at 8-7305 for the annual amount. Also, if you wish to participate in either the Health and/or Dependent Care Flexible Spending Accounts, you MUST re-enroll on an annual basis. Please indicate your 2016 elections accordingly.

Plan	Option	Select	Pre Tax Cost Per Paycheck
FSA	Dependent	<input type="checkbox"/>	0.00 i
	Health	<input type="checkbox"/>	0.00 i
HSA	Health	<input type="checkbox"/>	0.00 i
FSA Limited	Health	<input type="checkbox"/>	0.00 i

2017 FSA Health Participants

- If you are thinking about switching to the AHDHP (PPO) or EHDHP (HDHP) for 2018 you cannot contribute to a HSA if you still have monies in your 2017 FSA Health account as of December 31, 2017.
- If you are thinking about switching to the AHDHP (PPO) or EHDHP (HDHP) for 2018 and are going to enroll in an HSA you have options:
 - Spend all of your 2017 FSA Health funds and have your claims processed and paid out to \$0 by 12/31/17 so that you can open an HSA account effective 1/1/18. **Note it could take up to 5 business days for FSA claims to be processed by EBC.**
 - Utilize the 2017 FSA Health through the grace period which goes through 3/15/18 and then open a HSA on 4/1/18.

Pairing Your Medical Plan with Your Tax Savings Options

Plan Name	CPHP (Co-Pay Health Plan) (formerly EPO)		AHDHP (Aggregate High Deductible Health Plan) (formerly PPO)			EHDHP (Embedded High Deductible Health Plan) (formerly HDHP)		
Savings Options <i>Can choose any combination of options listed under plan</i>	FSA Health Traditional Account eligible for Medical, Rx, Dental & Vision	FSA Dependent Eligible Child Care Expenses	HSA HEALTH Medical, Rx, Dental, Vision	FSA LIMITED Dental & Vision Only	FSA Dependent Eligible Child Care Expenses	HSA HEALTH Medical, Rx, Dental, Vision	FSA LIMITED Dental & Vision Only	FSA Dependent Eligible Child Care Expenses
Maximum Employee Contributions	\$2650 per employee (Marquette contribution does not count toward the yearly maximum)	\$5000 per household	SINGLE: \$3450 E+1 & FAMILY: \$6900	\$2650 per employee	\$5000 per household	SINGLE: \$3400 E+1 & FAMILY: \$6900	\$2650 per employee	\$5000 per household
Marquette Contribution - Just for Enrolling in the Plan						SINGLE: \$250 E+1 & FAMILY: \$500		
Marquette Contribution - Health Risk Assessment Incentive	SINGLE: \$125 E+1 & FAMILY: \$250		SINGLE: \$250 E+1 & FAMILY: \$500			SINGLE: \$250 E+1 & FAMILY: \$500		

1. No HRA incentive will be given if you are not enrolled in one of Marquette’s medical options
2. If you are covered under a qualified plan which is not through Marquette, you can still enroll in FSA Dependent. You may also have an HSA through an outside source but Marquette will not facilitate it.
3. If your coverage is outside of Marquette and is not a qualified plan, you can enroll in Marquette’s FSA Health and FSA Dependent.