

COLGATE UNIVERSITY



# 2021 Benefit Open Enrollment

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# Agenda

- ✓ Open Enrollment Overview
- ✓ Medical & Prescription Drug Coverage
- ✓ Flexible Spending Accounts
- ✓ Dental & Vision
- ✓ Life, Disability and Paid Family Leave
- ✓ AFLAC Cancer
- ✓ Completing Your Enrollment

# Open Enrollment

- Open Enrollment is Monday November 2 – Friday November 13
- Enrollments effective January 1, 2021
- Only time of the year to:
  - ✓ Enroll in or Change Plans
  - ✓ (Re) Enroll in the FSA Plans
  - ✓ Add or Remove Dependents



**Changes during the year are limited to qualifying events and a 30-day window**

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# Medical and Prescription Benefits

## Medical Coverage - Excellus BlueCross BlueShield PPO

- Visit any provider without a referral.
- Primary Care Physician not required.
- In & Out-of-Network Benefits.
- Access to the BlueCard's worldwide network.
- Dependents covered to age 26.
- Preventative Services Covered in Full...
  - ✓ Well-Child Care
  - ✓ Adult Physical (One/Calendar Year)
  - ✓ Screening Mammography, Pap Tests



# Plan Overview



Service	In-Network	Out-of-Network
Deductible & Coinsurance	\$0 Deductible 20% Coinsurance	\$750 / \$2,250 30%
Out-of-Pocket Max	<b>\$1,400 / \$2,800 Medical</b> \$2,000 / \$4,000 Pharmacy	<b>\$1,775/\$5,300 (O-O-N Ded/Coin Only)</b> N/A for Pharmacy
PCP & Specialist	20% Coinsurance	Ded & Coinsurance
Tele-Medicine (MD Live)	\$0 Copay	N/A
Urgent Care & Emer. Rm	20% Coinsurance	Ded & Coin. / 20% Coinsurance
Inpatient & Outpatient	20% Coinsurance	Ded & Coinsurance
Maternity	20% to \$600 cap for Hospital \$0 Physician & Labs/Radiology	Ded & Coinsurance
Durable Medical Equip.	20% Coinsurance	Ded & Coinsurance
Vision	Routine Exam \$40 Copay Annually	Ded & Coinsurance
Prescription Drug	\$10/\$30/\$50 Copay \$0 Generics, Kids <19	No Coverage
Mail Order Drug	\$20/\$60/\$100 Copay	No Coverage

# Prescription Drug Details

**Formulary is the list of medications covered by the plan. Updated twice per year based on latest research & clinical evidence. Copays are determined by the Tier:**

## **Generics**

Safe, effective & have the same active ingredients as a brand name medication, but cost an average of 85% less (brands with expired patents)

## **Preferred**

Lower cost or more clinically effective than non-preferred or excluded

## **Non-Preferred**

Highest cost or medications with clinical alternatives

## **Specialty**

High complexity medications purchased through a specialty pharmacy

## **Excluded**

Medications with clinical alternatives or generics that are not covered by the plan. Members must choose an alternative therapy.

**Members impacted by January 1 changes will received letters directly from OptumRx. Speak with your physician to avoid any interruptions in treatment.**



# Prescription Drug Details

Per the Formulary, medications may require treatment protocols including;

**Quantity Limits** – for safety & cost reasons, the plan limits the amount of drugs they cover over a certain period.

**Prior Authorization** – to be sure that medications are prescribed and used correctly, before the plan will cover a particular drug, your doctor or your prescriber must first show that you have a medically necessary need for that drug and/or have met the requirements for the drug.

**Step Therapy** – you must first try a less expensive drug on the formulary that has been proven effective for most people with your condition before you can move up a “step” to a more expensive drug. However, if you have already tried the more affordable drug and it didn’t work or if your prescriber believes that it is medically necessary for you to be on a more expensive drug, they can contact the plan to request an exception.

**Specialty Prescriptions** - Fill through OptumRx Specialty only



# OptumRx Prescription Coverage

## Helpful Hints

- Flu Vaccines in the Pharmacy – No Member Copay – Use your OptumRx card
- Traveling Overseas – Plan ahead with script & prior authorization
- Diabetics – free meters available through OptumRx Diabetes Management program  
**Effective January 1, 2021 OptumRx has partnered with Contour brand for diabetic supplies**

## Home Delivery

- Savings of 33%, 2 Copays for a 90 day supply
- Convenience of Auto Refill & Auto Renewal

New home delivery service requires a minimum 90 day script from your doctor

Provide home delivery pharmacy with...

- ✓ Scripts (or have your doctor send them directly)
- ✓ Payment Method (may use the flex spending card)
- ✓ Mailing Address





# Telemedicine Program

Another alternative to receive care. Visit the doctor right from your home, office or on the go for non-emergency medical conditions.

Physicians diagnose your symptoms, prescribe medications (when appropriate) & send the prescription to your nearest pharmacy

Helpful hints when to use telemedicine (24/7/365):

- Primary care doctor is not available
- Instead of going to the ER or urgent care (for a non-emergency)
- If traveling and in need of medical care

*A list of common conditions treated;*

Allergies	Ear Infections	Joint Aches
Asthma	Fever	Rashes
Bronchitis	Headache	Sinus Infections
Cold & Flu	Infections	Skin Infections
Diarrhea	Insect Bites	Sore Throat

**\$0  
Copay**

**[ExcellusBCBS.com/Telemedicine](https://ExcellusBCBS.com/Telemedicine)**

**1-866-692-5045**



# Telemedicine – Behavioral Health

Excellus BCBS expanded the MDLIVE program to offer behavioral health telemedicine.

Behavioral health telemedicine helps to remove common barriers and makes it easy to connect with the care you may need:

1. Convenient, confidential therapy sessions from your home, office or on the go
2. Wait times are 3-4x shorter than traditional in-person appointments
3. Therapists are available on your schedule, including nights and weekends
4. Option to schedule recurring appointments with one provider
5. Consultations can be done through phone only or video through MDLIVE's HIPAA compliant and secure portal



# Register for Telemedicine



Affordable



On-Demand



Virtual Health Care

**Don't wait until you need it. Here are some easy ways activate telemedicine today.**

**WEB:** Register/Log in at [ExcellusBCBS.com/Member](https://ExcellusBCBS.com/Member)

**APP:** Download the MDLIVE app

**TEXT:** Text EXCELLUS to 635483

**VOICE:** Call 1-866-692-5045

## Sample Deduction Changes...

- Contributions for dependent coverages are based on the employee's salary
- Dependent subsidy paid by Colgate University increased for 2021
- Workbook provided to enter salary & enrollment tier to see the actual cost for 2021

Medical Salary & Tier	2020	2021	Change
<b>\$40,000</b>			
EE Only	\$31.48	\$32.28	\$0.80
EE + Spouse	\$385.43	\$395.25	\$9.82
EE + Child(ren)	\$243.35	\$249.56	\$6.21
EE + Family	\$534.34	\$547.96	\$13.62
<b>\$60,000</b>			
EE Only	\$31.48	\$32.28	\$0.80
EE + Spouse	\$474.30	\$486.39	\$12.09
EE + Child(ren)	\$296.55	\$304.11	\$7.56
EE + Family	\$660.60	\$677.44	\$16.84
<b>\$80,000</b>			
EE Only	\$31.48	\$32.28	\$0.80
EE + Spouse	\$563.17	\$577.53	\$14.36
EE + Child(ren)	\$349.75	\$358.67	\$8.92
EE + Family	\$786.86	\$806.92	\$20.06
<b>\$100,000</b>			
EE Only	\$31.48	\$32.28	\$0.80
EE + Spouse	\$652.04	\$668.66	\$16.62
EE + Child(ren)	\$402.95	\$413.22	\$10.27
EE + Family	\$913.12	\$936.40	\$23.28

# Delta Dental



<b>Deductibles</b> \$25 Annual Individual Deductible \$50 Annual Family Deductible			<b>\$1,500 Per Person Per Calendar Year Maximum</b>
<b>Preventive (Type 1)</b> 100%*	<b>Basic (Type 2)</b> 80%*	<b>Major (Type 3)</b> 50%*	
<i>Diagnostic &amp; Preventative</i> Initial & Periodic Oral Examinations Prophylaxis (cleaning) Fluoride Applications X-rays	Restorations (fillings) Extractions Oral Surgery Endodontics / Root Canals Periodontics	Inlays & Onlays Gold Restorations Crowns Prosthetic Services Dentures and Bridges Prosthodontics	

Use any dentist! Delta PPO & Premier Providers accept max plan allowances.  
 Out-of-network providers may balance bill charges above MPA.

**Dependents to Age 26**

**No 2021 Deduction Changes**

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Tier	Monthly (12/Year)	Biweekly (24/Year)
Single	\$0.00	\$0.00
You & Spouse/Partner	\$44.06	\$22.03
You & Child(ren)	\$40.12	\$20.06
You & Family	\$63.58	\$31.79
Colgate Couple & Child(ren)	\$23.50	\$11.75

# Guardian Vision

Network of Providers through VSP

Find providers at [www.vsp.com](http://www.vsp.com)

Under the Providers Tab: Choose “Find a Vision Provider”

- ✓ Select Your Vision Plan: VSP
- ✓ Search by Location or Name
- ✓ Enter Your Location or Provider Name and Preferred Geographic Distance
- ✓ Select Your Vision Network: VSP Choice Network

Dependents to age 26.



# Guardian Vision

Benefits	Frequency	In-Network	Out-of-Network
Eye Exam	Calendar Year	\$10 Copay	Max \$39, after \$10 Copay
Materials		\$25 Copay	\$25 Copay
<b>Glasses</b>			
Frames	Every 2 years	\$130 allowance	Max \$46
Lenses—Single			Max \$23
Bifocal	Calendar Year	Material Copay, Covered in Full	Max \$37
Trifocal/Lenticular			Max \$49/\$64
~OR~			
<b>Contacts</b>	Calendar Year		
Elective		\$130 Max (no copay)	Max \$100
Med. Necessary		Covered After Copay	Max \$210

**No 2021 Deduction Changes**



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Tier	Monthly	Biweekly
Single	\$ 8.89	\$ 4.35
You & Spouse/DP	\$14.63	\$ 7.32
You & Child(ren)	\$14.92	\$ 7.46
You & Family	\$23.61	\$11.81

# Flexible Spending Accounts (FSA)

Set aside **pre-tax dollars** to pay for health or dependent care expenses. The benefit must be (re)elected every year!

## Healthcare Spending Account

- **\$2,750** Annual Maximum; Account is “Use It or Lose It”!
- Grace Period allows you to use funds for an extra 2 ½ months  
Election for '21 pays expenses incurred in '21 or in the initial 2-1/2 months of '22
- Covers medical, Rx, dental & vision expenses for employee, spouse & tax dependent children  
**NEW! Over-the-Counter products eligible**



## Childcare Reimbursement Account

- Up to \$5,000 annually (requires Tax ID # of provider)
- Check income/expense chart for your best option

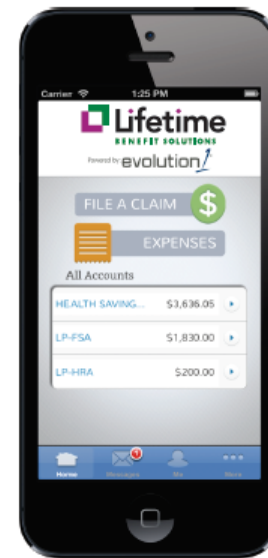
**If you wish to (re)elect a personal FSA, you MUST complete the Online Enrollment by 11/13**



## Consumer Portal and Mobile App

With your FSA, you'll receive access to a secure, easy-to-use web portal and mobile app where you can:

- Check your current FSA and Dependent Care balances
- View account activity and receive alerts via text message
- File new claims – easy as taking a picture of a receipt
- Provide supporting documentation to substantiate claims
- Review expense information and enter a new expense
- Available at iTunes and Google Play
- Create an account once your debit cards arrive



# Customer Service

## Claims Processing:

Members have multiple options for submitting claims:

- Debit Card
- Online
- Mobile App
- Paper – Fax or Mail

## Customer Service:

- Hours: Mon.-Thurs. 8am-5pm  
Friday – 9am-5pm
- Toll Free: 1-800-327-7130
- Email: [LBS.CustomerService@LifetimeBenefitSolutions.com](mailto:LBS.CustomerService@LifetimeBenefitSolutions.com)



**2020-2021 WELLNESS PROGRAM**

**WHO CAN PARTICIPATE**  
Beginning 12/1/20, all benefit-eligible employees are invited to sign in to [join.virginpulse.com/CUWellProgram](http://join.virginpulse.com/CUWellProgram).

**WHAT IS MY REWARD**

- Employees who reach 300 points can earn \$300 in flexible spending funds
- Employees hired 9/1 – 10/31 who reach 150 points can earn \$150 in flexible spending funds.
- Ways to earn points are listed on the next page under Earning Incentives

**HOW TO REGISTER**

- New members: visit [join.virginpulse.com/CUWellProgram](http://join.virginpulse.com/CUWellProgram)
- Existing members: sign in at [member.virginpulse.com](http://member.virginpulse.com)
- Accept the terms and conditions
- Download the Virgin Pulse mobile app by searching "Virgin Pulse" in the App Store or Google Play

**REQUIRED ACTION ITEMS**

- Complete the Health Check Survey
- Complete the Biometric Screening
- Preventive Care Screening

**GETTING STARTED**  
You're registered and signed in—now what? Begin by completing program activities and building healthier habits one day at a time. Here are a few options to help you get started.

**Health Check Survey**  
The Health Check Survey asks questions about your current health status and wellbeing habits. Once completed, your responses will be analyzed to generate a health score, show your health risks, and provide practical tips to help you improve. Complete your Health Check Survey by visiting **Programs**.

**Biometric Screening**  
Biometric Screenings provide vital information about your overall health, including cholesterol (total, LDL, and HDL), triglycerides, cardiac risk, glucose, blood pressure, height, weight, Body Mass Index (BMI) and waist measurement. You may complete your screening at an upcoming onsite event, by visiting your physician or a LabCorp facility.

**Notes:** Depending on your method of testing or location of screening, not all metrics may be included.

**Pillars and Topics**  
Looking to reduce stress, increase your energy throughout the day or find the motivation to continue progress toward your wellbeing goals? The Pillars and Topics section can point you in the right direction, providing quick access to many helpful tools and resources.

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# CU Well 2021

## Cash Incentive

Earn 300 Points – Receive \$300 in a employer funded flexible spending account

- ✓ Biometric Screening & Member Health Assessment – 50 Points Each (Required)
- ✓ Preventive Care – 50 Points (Required)
- ✓ Other Programs & Activities

Virgin Pulse: (888) 671-9395  
[member.virginpulse.com](http://member.virginpulse.com)

# Life Insurance

## **Core Benefit – Paid by Colgate University:**

Benefits eligible employees covered by Term Life Insurance of Two Times (2x) basic annual earnings to a maximum of \$300,000.

## **Optional Employee Coverage:**

- Additional term life coverage – 1x/2x salary up to \$200,000.
- Rates based on age and coverage level.

## **Optional Dependent Coverage:**

- \$5,000 for Spouse & \$2,000/Child \$1.79/Month
- \$10,000 for Spouse & \$4,000/Child \$3.58/Month
- Spouse coverage cannot exceed employee coverage.
- Birth to six months, child coverage is \$500.

## **Enroll Online in the Portal**

# Disability Coverage

## Long Term Disability

- Benefits begin after 180 days of disability
- 60% of base monthly earnings to a max of \$12,500 per month
- Pension benefit included in disability payment
- Payable to normal social security retirement age

# AFLAC Cancer Insurance

## Benefits...

- 1<sup>st</sup> Occurrence Benefit
- Hospitalization & Outpatient Surgical
- Radiation & Chemotherapy
- Lodging & Transportation for treatment >50 miles from home
- Experimental Treatment
- **Wellness Benefit: \$75/year per participant**



<b>Tier</b>	<b>Monthly</b>	<b>Biweekly</b>
Individual	\$38.74	\$17.88
One Parent Family	\$39.65	\$18.30
Insured & Spouse	\$69.29	\$31.98
Family	\$70.20	\$32.40

# New York State Paid Family Leave

Benefit began January 2018 & is REQUIRED by New York State

FACULTY are exempt and should consult the handbook for leave benefits

Provides Job & Health Plan Protection

3 Reasons for Leave...

- ❑ CARE for a family member with a serious health condition (**may also include COVID-19 orders of quarantine or isolation**) including a child, parent, parent-in-law, grandparent, grandchild, spouse or domestic partner
- ❑ BOND (maternity & paternity) with a newborn or newly placed adoptive or foster child during the first 12 months following birth or placement
- ❑ ASSIST family experiencing Active Duty Deployment. Address any qualifying exigency relating to a spouse, domestic partner, child or parent who is serving on active military duty

[www.ny.gov/programs/new-york-state-paid-family-leave](http://www.ny.gov/programs/new-york-state-paid-family-leave)

# New York State Paid Family Leave

Eligible Employees will receive benefits of:

Effective Date	Benefit Amount % of AWW	Maximum Benefit % of SAWW	Duration of Benefits
January 1, 2018	50% of AWW	50% of SAWW (\$1,305.92) or \$652.96	Up to 8 Weeks
January 1, 2019	55% of AWW	55% of SAWW (\$1,357.11) or \$746.41	Up to 10 Weeks
January 1, 2020	60% of AWW	60% of SAWW (\$1,401.17) or \$840.70	Up to 10 Weeks
<b>January 1, 2021</b>	<b>67% of AWW</b>	<b>67% of SAWW</b> <b>(\$1,450.17) or \$971.61</b>	<b>Up to 12 Weeks</b>
AWW – Average Weekly Wage SAWW – Statewide Average Weekly Wage Currently \$1,450.17, amount is determined each March 31 <sup>st</sup> by NYS DOL			



# New York State Paid Family Leave

## Cost for Family Leave Benefit

2019 .153% of salary    2020 .270% of salary    2021 .511% of salary

Annual Salary ( <i>examples</i> )	Estimated Weekly Wages	PFL Benefit 67% (in 2021)	PFL Cost Per Year	Per Pay (26 Pays) .511%
\$ 20,000	\$ 384.62	\$ 257.70	\$102.20	\$ 3.94
\$ 25,000	\$ 480.77	\$ 322.12	\$127.75	\$ 4.91
\$ 30,000	\$ 576.92	\$ 386.54	\$153.30	\$ 5.90
\$ 40,000	\$ 769.23	\$ 515.38	\$204.40	\$ 7.86
\$ 50,000	\$ 961.54	\$ 644.23	\$255.50	\$ 9.87
\$ 60,000	\$1,153.85	\$ 773.07	\$306.60	\$ 11.79
\$ 70,000	\$1,346.15	\$ 901.92	\$357.70	\$ 13.76
>\$ 75,408	\$1,450.17	\$ 971.61	\$385.34	\$ 14.82

# New York Paid Family Leave

## Frequent Questions..

You must provide 30-Days Notice for foreseeable leaves & as soon as reasonably feasible for sudden events

Caregiving is for serious illness only and may include COVID quarantine orders or isolation – must be under the care of a physician

Additional health records may be required

To receive benefits, the claim form is submitted to insurance carrier for review, along with recent payroll information

Receive payment directly from insurance carrier & it is taxable income

# Employee Assistance

## **EAP - Provided through Family Services Associates**

- Short-term, solution-focused counseling (usually 4-6 sessions)
- Off-campus, confidential location
- Call Family Services Associates directly, (315) 451-3886

## **Relph Benefit Advisors (Alera Group)**

- Assist with claims, billing issues, benefits, grievances, paperwork, etc.
- Assistance navigating & maximizing your benefits
- Monday-Friday 8:00 am – 4:30 pm
- (800) 836-0026 ext. 7268 or [cuservice@relph.net](mailto:cuservice@relph.net)



# Completing Enrollment

<https://portal.colgate.edu/>

1. Make your annual election for Flexible Spending
2. Make any changes to add/delete dependents on your health insurance or dental plans
3. Verify your life insurance beneficiary information is up-to-date
4. Verify your personal information is accurate and notify HR of any changes in your address, telephone #, marital status, etc.
5. Submit by the Deadline – Nov. 13

Thank  
You!