

# 2016 Open Enrollment

# Topics of Discussion

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- Life Insurance
- WRS
- Deferred Compensation
- Beneficiaries
- Employee Assistance Program
- Wellness Program
- Dental Insurance
- Section 125: FSA – Dependent Care
- Health Care Reform
- Health Insurance
  - PPO and Section 125: FSA – Medical Reimbursement
  - HDHP and HSA (Health Savings Account)
- Reminders

# Life Insurance

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- If eligible for Basic Life Insurance, can insure for up to four more times the Basic policy (maximum of 5 units):
  - ✓ Additional Insurance (3 units)
  - ✓ Supplemental Insurance (1 unit)
- Optional Spouse/Dependent coverage
- Additions/Cancellations may be made anytime throughout the year; see HR for details
  - ✓ Must complete Evidence of Insurability form to add coverage
  - ✓ Can reduce/cancel coverage if desired

# Life Insurance...did you know?

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Employees are allowed (without application through Evidence of Insurability) the opportunity to enroll or add a level of life insurance coverage on themselves &/or add a level of spouse/dependent coverage due to a qualifying status change (such as marriage, birth of child, etc.).

# WRS Contributions

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The 2016 Wisconsin Retirement System employee contribution rate is 6.6% for General and Protective Service employee groups.

- This rate is down from 6.8% in 2015
- Contributions are pretax
- General employees, and Police/Fire Union\* employees hired on or after 7-1-11, pay the full employee portion

\*Police/Fire Union employees hired prior to 7-1-11, refer to your collective bargaining agreement.

# Deferred Compensation (457) Plans

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- Choice of three plans
  - ✓ ICMA
    - IRA options (Roth or Traditional)
  - ✓ MetLife
  - ✓ Wisconsin Deferred Compensation (WDC)
- Voluntary savings plan; enroll anytime throughout the year
- Invest earnings on pre-tax basis (increase savings without considerably reducing take-home pay)
- Earnings accumulate tax-deferred
- Increase, decrease, stop, and restart contributions as often as desired

# Are Your Beneficiaries Up to Date?

- Pension
- Life Insurance
- Deferred Compensation

# Employee Assistance Program (EAP)



# Aurora EAP

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- Available Free of Charge to Employees and Family Members Residing in the Household
- 24 Hours/Day; 7 Days/Week
- Participation in Program is Completely Confidential

# When to Use the Aurora EAP

- Adult Stresses
- Marital Conflict
- Parent/Child Problems
- Childhood Stresses
- Alcohol or Drug Abuse
- Divorce
- Financial Pressures
- Caring for Aging Parents
- Balancing Work and Family
- Adoption
- Legal Issues



# Wellness Program

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The Wellness Program was formed to create a culture of health throughout the City by encouraging employees to live healthier lifestyles. Wellness programs and resources are offered to empower employees to live vibrant, healthy and balanced lifestyles.



# Wellness Program Continued...

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- The focus of Health Care Reform is on prevention, NOT treatment. Participation in the Wellness Program's Health Risk Assessment (HRA) is a small step toward preventing larger illnesses down the road.
- The Wellness Coordinator will continue to work towards developing wellness programs to address problem areas, promote health, sustain function, and prevent disease.



WillisTowersWatson 



WELCOME TO DENTAL ASSOCIATES, LTD

# Dental Insurance



# Understanding Your Dental Plan

## ➤ Anthem Dental

- ✓ Freedom to go to any dentist you choose
- ✓ Advantage of negotiated discounts for in-network (Anthem Dental PPO) dentists—reduced costs means extended services
- ✓ Diagnostic and Preventive services (exams, necessary x-rays, cleanings) paid at 100% of usual & customary charges



## ➤ Care-Plus Prepaid Dental (Dental Associates)

- ✓ 100% coverage for all covered dental services to your yearly plan maximum
- ✓ Coverage for all dental specialty services
- ✓ No deductibles or claim forms
- ✓ Various locations



# Dental Plan Review

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- No change in benefit levels; \$1500/person  
(Note: exam/cleaning/x-rays track toward plan year maximum)
- No monthly dental premium share for regular full time employees and their eligible family members; premiums for part-time employees holding a minimum of 0.5 FTE (full-time equivalent) budgeted position are prorated based on FTE.

# 2016 Dental Premiums

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MONTHLY PREMIUM EFFECTIVE 3-1-16		
Plan Type	Standard Plan	Care Plus
Single (Employee Only)	\$ 37.00	\$ 34.58
Family (Employee plus 1 or more)	\$102.00	\$106.38

Premiums for full time employees are paid fully by the City; premiums for part-time employees holding a minimum of 0.5 FTE (full-time equivalent) budgeted position are prorated based on FTE.

# Section 125: FSA - Dependent Care Reimbursement

Employee  
**Benefits**  
Corporation

# Dependent Care FSA...

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- Allows you to set aside pre-tax dollars for amounts you pay towards work-related dependent care expenses. Allowable contributions of:
  - ✓ \$5,000 for single, head of household
  - ✓ \$5,000 for married, filing joint return
  - ✓ \$2,500 each for spouses filing separate returns
- Eligible expenses include those that would otherwise qualify for the Federal Dependent Care Tax Credit (such as childcare, day care centers, after-school care, adult dependent care).
- Administered by Employee Benefits Corporation (EBC)
- For more information on the FSA Dependent Care Reimbursement Program, refer to the Open Enrollment Guide or contact EBC directly.



# Health Care Reform - 2016

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## ➤ Effective for tax year 2015:

- IRS requires issuance of 1095-C Forms, *Employer-Provided Health Insurance Offer and Coverage Information*
- To be issued in February, 2016
- You may be required to provide this Form when filing 2015 income taxes
- Purpose: provides proof of employer sponsored coverage.
- Questions/Concerns, contact the Finance Department

# Looking Forward on HCR...

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- Cadillac Tax
  - 40% tax on the amount of premiums above a predetermined threshold amount set by the federal government
  - Delayed implementation from 2018 to 2020

# Health Insurance

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# March 1, 2016 Plan Year

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➤ **NEW** Medical Administrator:

➤ 2 Plan Options:



- PPO Plan (in-network benefit levels remain same)
  - Eligibility to participate in FSA medical reimbursement
- High Deductible Health Plan (HDHP)
  - Eligibility to participate in Health Savings Account

# Monthly Premium Share\*

Effective 3-1-16, regular full-time employees will contribute, on a pre-tax basis:

- 10% with HRA participation
- 20% without HRA participation

<i>MONTHLY PREMIUMS AND PREMIUM SHARE EFFECTIVE 3-1-16*</i>						
Plan Type	PPO PLAN			HDHP (High Deductible Health Plan)		
	Monthly Premium	Employee Share		Monthly Premium	Employee Share	
10% w/HRA		20% w/out HRA	10% w/HRA		20% w/out HRA	
Employee Only	\$ 591	\$ 59.10	\$118.20	\$ 761	\$ 76.10	\$152.20
Employee + 1	\$1158	\$115.80	\$231.60	\$1491	\$149.10	\$298.20
Employee + 2+	\$1696	\$169.60	\$339.20	\$2183	\$218.30	\$436.60

\*Police and Fire Union members' monthly premium share contributions pending contract negotiations;  
Part-time employees prorated based on FTE.

# PPO PLAN

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- Utilizes Anthem's *Blue Priority* provider network
- Offers the same in-network benefit levels
  - \$100/\$300 deductible, \$20/\$40 provider copays, \$150 ER copay, etc.
- Out-of-Network benefit levels adjusted (routine care not covered)
  - Medical/prescription drug deductible of \$15,000/person or \$30,000/couple or family plan;
  - 20% coinsurance after deductible;
  - Maximum out-of-pocket coinsurance (includes deductible) of \$30,000/person or \$60,000/couple or family plan.

# Blue Priority Network for PPO Plan

**MERITER**

 **Aurora Health Care®**

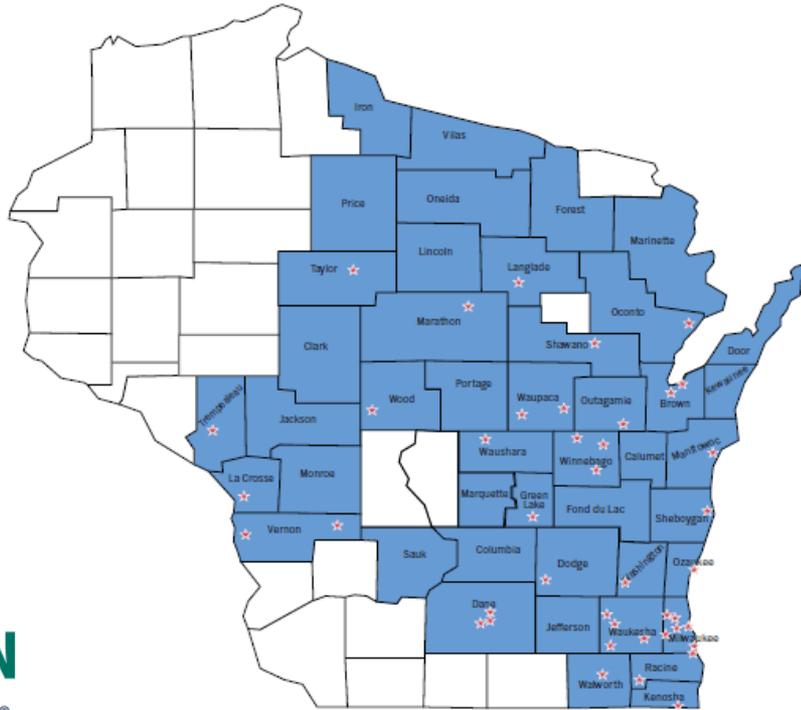
**belinhealth**

**UWHealth**

 **Children's  
Hospital of Wisconsin**

Kids deserve the best.

**UWHealth Partners**  
Watertown Regional  
Medical Center



**THEDA CARE**

 **CHN**  
Community Health Network

 **ASPIRUS™**  
Passion for excellence. Compassion for people.

**BAY AREA  
MEDICAL CENTER**

**GUNDERSEN  
HEALTH SYSTEM®**  
Where Caring Meets Excellence

**Anthem**    
BlueCross BlueShield

 **PROHEALTH CARE**

 **Wild Rose**  
Community Memorial Hospital, Inc.

# PPO PLAN Continued...

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- Optional participation in a medical reimbursement program through the Section 125 FSA
  - Administered by Employee Benefits Corporation 
  - Allows employees to pay for eligible medical, dental, and vision expenses not covered by insurance with pre-tax dollars through payroll deduction;
  - Contributions may only be adjusted upon a qualified change in status;
  - Maximum annual election is \$2550/employee; monies left unspent at the end of the coverage period are forfeited;
  - Elections must be utilized with dates of service 3/1/16 to 5/15/17 (includes 2½ month grace period)

This account is not available to employees who elect participation in a High Deductible Health Plan (HDHP).

# EBC Online Account Access

- Submit claims online
- Check available balance
- Set up Direct Deposit for reimbursement
- Confirm eligible expenses

For more information on the FSA Medical Reimbursement Program, refer to the Open Enrollment Guide or contact EBC directly.

[www.ebcflex.com](http://www.ebcflex.com)



# High Deductible Health Plan (HDHP)

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## What Is A High Deductible Health Plan?

A High Deductible Health Plan (HDHP) is a plan with a minimum annual deductible and a maximum out-of-pocket limit as listed below. These minimums and maximums are determined annually by the Internal Revenue Service (IRS) and are subject to change.

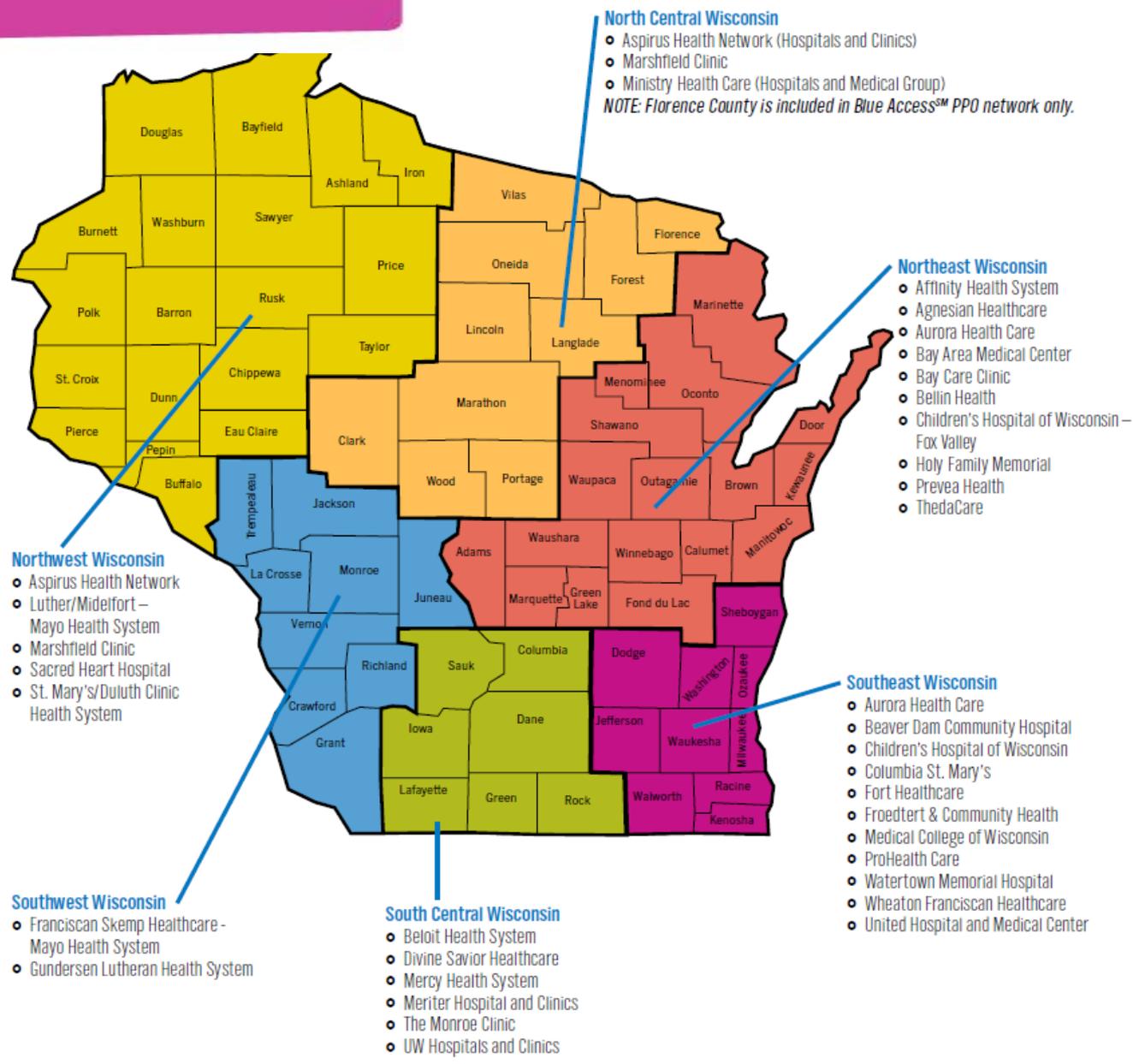
HDHP	Individual	Family
Minimum Annual Deductible	\$1,300	\$2,600
Maximum Annual Out of Pocket	\$6,550	\$13,100

# HDHP Continued...

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- The City's HDHP will utilize Anthem's *Blue Preferred* provider network
- In-network benefit levels
  - Medical/Prescription Drug Deductible of \$1500 for a single plan participant or \$3000 for a couple or family plan participant (preventative services covered at 100%, not subject to deductible);
  - 20% coinsurance after deductible;
  - Maximum out-of-pocket coinsurance of \$3,000 for a single plan participant or \$6,000 for a couple or family plan participant.
- Out-of-network benefit levels (routine services not covered)
  - Medical/Prescription Drug Deductible of \$15,000 for a single plan participant or \$30,000 for a couple or family plan participant;
  - 40% coinsurance after deductible;
  - Maximum out-of-pocket coinsurance (includes deductible) of \$30,000 for a single plan participant or \$60,000 for a couple or family plan participant.
- Optional participation in a medical reimbursement program through a Health Savings Account (HSA)

# Blue Preferred POS for HDHP Plan



# Health Savings Account (HSA)?

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An HSA combines health insurance with a tax-favored savings account.

This savings account can be funded with your pre-tax payroll dollars, by your employer, or both, to help pay for eligible medical expenses not covered by your insurance plan such as deductibles and coinsurance.



# Who is eligible for an HSA?

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- Those enrolled in a qualified high-deductible health plan (HDHP)
- Is not enrolled in Medicare
- Is not claimed as a dependent on another's tax return
- Is not covered under another medical plan that is not an HDHP
  - Includes MEDICAL flexible spending account or spouse's MEDICAL flexible spending account (FSA) unless it is a "limited purpose" FSA.
- Your FSA balance must be at ZERO by the end of the plan year (2/29/2016) or you must wait until end of the Grace Period to open your Health Savings Account (6/1/2016)

# HSA Features

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- Money deposited is **tax-free**.
- HSA earnings are **tax-free**.
- If used for qualified medical expenses, HSA funds are **tax-free**.
- HSA balances carry over from year to year  
**(it's *your* money!)**
- HSA assets are portable – if you leave employment you can take them with you!

# Qualified HSA Expenses

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- Distribution is tax-free if taken for “qualified medical expenses”.
  - Including qualified dental and vision expenses
- Cannot be used to pay for other health insurance except:
  - COBRA coverage
  - Qualified long-term care insurance
  - Health coverage while receiving unemployment
  - Portions of Medicare coverage (excluding supplement plans)

**Please note: If money is withdrawn from Health Savings Account for other than “qualified medical expenses” you will be subject to taxes and penalties.**

- Non-medical distribution prior to age 65 subject to Ordinary Tax + 20% penalty
- Non-medical distribution after age 65 subject to Ordinary Tax

# How much can I contribute?

2016 IRS Guidelines	Maximum Annual Contribution
Individual	\$3,350*
Couple/Family	\$6,750*

- Persons over age 55 are entitled to an additional annual catch up contribution of \$1,000
- City of West Allis will contribute up to **\$500.00** for Individual coverage, and **\$1,000** for Couple or Family coverage.
- City of West Allis offers payroll deduction to allow for pre-tax contributions into your HSA

\* Amounts include any company contribution.



# How does an HSA work?

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1. Enroll in the HDHP plan
2. Choose your HSA pre-tax contribution  
(factor in any City contribution to ensure you do not exceed IRS limits)
3. Medical services are paid by the HDHP, subject to the deductible and coinsurance.
4. Employee may seek reimbursement from your HSA for amounts paid toward deductible and coinsurance.
  - HSA debit card or checks
5. Unused funds remain in your account and roll from year to year
6. Employees are responsible for documenting eligible expenses and maintaining records for IRS tax purposes

# Opening your HSA

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## Health Savings Account

For City of West Allis Employees

### Benefits

- No Account Opening Fee
- First Box of Checks Free
- Free Debit Card with No Inactivity Period
- Free Online Banking to Review Your Account Activity
- Unlimited Debit Card Transactions
- 10 Checks Per Month
  - \$1 Per Check Written Over 10



# Opening your HSA

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## Tiered Interest Rates

- \$0 - \$9,999
- \$10,000 - \$24,999
- \$25,000+

*\*Ask us for our current rates*

## Minimum Balance Requirements

Fee is waived for 2016

Fee is waived permanently for Retirees

After 2016, fee is waved with any of the following:

- \$1,000 minimum balance
- Monthly automatic payroll contributions
- A minimum balance of \$2,500 in related TCNB accounts

After 2016, there will be a \$4 fee per month if none of these are applicable



# Pharmacy Benefits



# Pharmacy & Tools

Place mail order requests online, check your benefits online, find a pharmacy, check your claims, & check drug lists

## Pharmacy



Anthem Blue Cross Blue Shield works with Express Scripts to administer some parts of your prescription drug plan. Some of the links below will redirect you to pages on the Express Scripts website.

### Pharmacy Self Service

- Place an Order
- Order a Refill
- Renew a Prescription
- Start a New Prescription
- Switch to Mail Delivery

- Check Status
- Check Order Status

### Pharmacy Benefits

- Benefit Highlights
- Price a Medication
- Locate a Pharmacy
- Claims & Balances
- Additional Pharmacy Services

### Other Pharmacy Resources

- Printable Drug Lists
- Request Prior Authorization
- Drugs Requiring Authorization
- Drug Alerts
- Drug Interaction Information

- Specialty Drugs
- Specialty Drug List
- Specialty Pharmacy Resources



## Price your drugs & find generic equivalents

- > My Prescriptions
- > My Prescription Plan
  - Price a Drug
  - Coverage & Copayments
  - Find a Pharmacy
  - Request Prior Authorization for Coverage
  - For Your Doctor Visit
- > Drug & Health Guide
- > My Profile & Settings
- My Notifications (0)

S Save on My Prescriptions

Rx Price a Drug Compare and save.

### Price a Drug

**Price Results**

[Print this page](#)

Your overall cost for a 30-day supply of LIPITOR 20 MG TABLET is \$192.30, deducted from your Health Reimbursement Arrangement (HRA).

	My Retail Pharmacy	Home Delivery
	30-Day Supply	90-Day Supply
	You Pay	
LIPITOR 20 MG TABLET, brand	\$192.30	\$502.01
Other Drugs that May Cost Less <a href="#">Explain This</a>		
ATORVASTATIN 20 MG TABLET, generic equivalent	\$21.95	\$55.22

[Start Home Delivery Now](#)

**Talk With Your Doctor About Other Drugs that May Cost Less**

- Print this page and bring it to your doctor, or
- Take the printout to your pharmacy and ask your pharmacist to contact your doctor.

If your doctor thinks an alternative drug would work well for you, he or she should write you a new prescription. You can then fill the prescription at a retail pharmacy. If the prescription is for a maintenance medication, you can fill it through Home Delivery. To print a Home Delivery order form, use our [Fill a New Prescription](#) feature.

# Home Delivery

**To get started call the Home Delivery Pharmacy at 877-536-4320**

**Enjoy convenience.** With home delivery, medicines are sent to your home — using free, standard shipping — within two weeks from the time the pharmacy receives your order. And you can get up to a 90-day supply of medicine, which means fewer refills and trips to the pharmacy!



**Have this information handy: your prescription, doctor's name, phone number, drug names and strengths, and credit card.**

**Choose from a variety of payment options.** The pharmacy accepts many payment methods. Use the one that's best for you. You can pay with a check, eCheck, money order, FSA or HSA card, major credit card, or debit card.<sup>3</sup> You can also use the extended payment plan. This option lets you spread your payment over three installments.



# Anthem Tools and Resources



## Tools to help you choose



### Anthem.com

It's easy, convenient! Manage your health care simply online

### Find a Doctor

Search for information about doctors in your area

### Interactive Videos

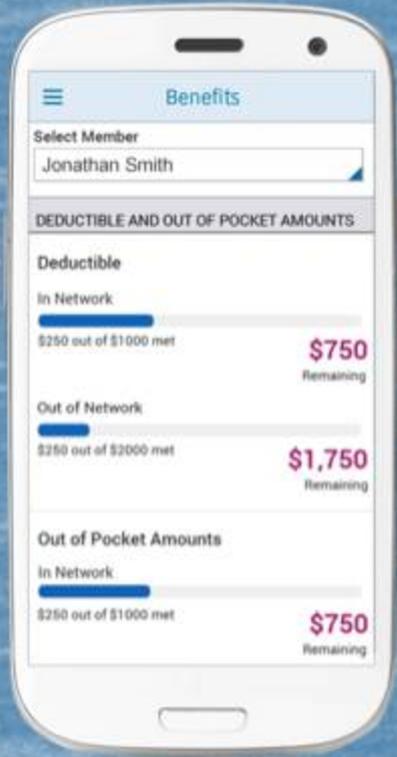
Learn more about your health plan and how to effectively use it

# Health care you can carry in your pocket

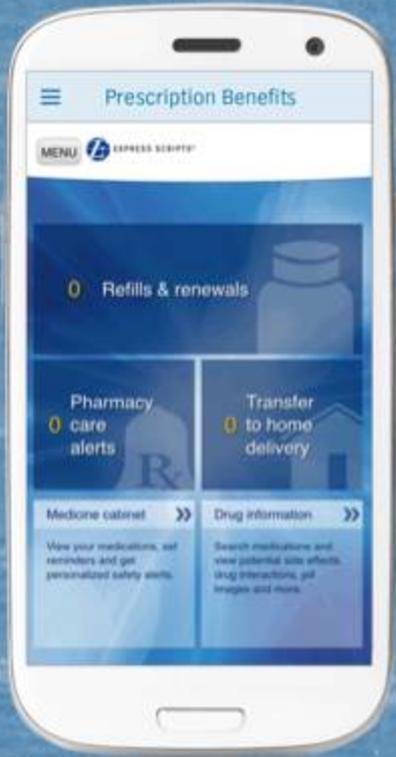
## Manage your coverage, right from your smartphone.



**VIEW YOUR ID CARDS**



**BENEFITS**

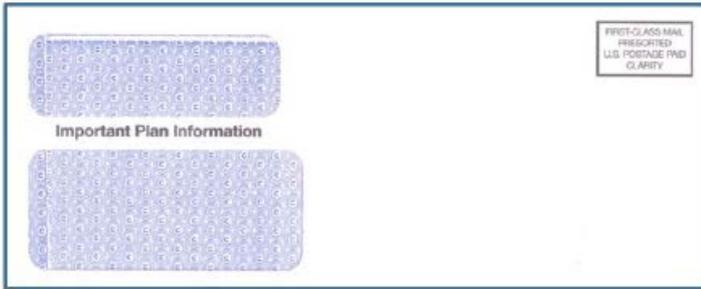


**PRESCRIPTION BENEFITS**



**CLAIMS**

# ID Cards



**ID Cards will arrive in your mail in an unmarked envelope; please watch for these!**

Access your online services by registering at  
**[anthem.com/register](https://www.anthem.com/register)**  
 anytime after your coverage begins.

J10000001

CARD STOCK DETERMINED  
BY STATE OF RESIDENCE

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**John Q.**  
**Member**  
 Identification Number  
**HXEAN0123456**

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Group:	004009922	Office Visit	\$25
Plan Codes:	834/332	Specialist	\$50
BIN#:	003858	Emergency Room	\$200
PCN:	A4	Urgent Care	\$75
RxGroup:	WL6A		

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Issue Date:

CARD STOCK DETERMINED  
BY STATE OF RESIDENCE

**anthem.com**

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Member Services	1-844-409-7512
24/7 NurseLine	1-866-647-6120
Pre Certification	1-866-643-7087
Pharmacist Questions	1-800-824-0898
Coverage While Traveling	1-800-810-2583

Providers: If Medicare is primary, pre certification is not required.

Please file medical claims with the Blue Cross and Blue Shield plan in the state where the services are rendered. If Medicare is primary, file claims to Medicare.

View provider listings, benefits, claims, and health and wellness information 24 hours a day 7 days a week by visiting [anthem.com](https://www.anthem.com).

Possession of this card does not guarantee eligibility for benefits.

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Benefits administered by Blue Cross Blue Shield of Wisconsin (BCBSWI). An independent licensee of the Blue Cross Blue Shield Association. BCBSWI provides administrative claims payment services only and does not assume any financial risk or obligation with respect to claims.

**Additional ID Cards can be ordered on Anthem.com or requested through customer service once you receive your initial card. You may also print a temporary card online or access a 'virtual card' with Anthem's Mobile App.**

# Anthem Enhanced Benefits



With LiveHealth Online, there's always a doctor in the house. Or anywhere you need care.

- Interactions via video, chat or phone
- Accessibility anytime, anywhere
- No appointments or waiting rooms
- Providers can write prescriptions online
- A smart way to avoid costly ER or urgent care center visits for non-serious conditions
- Maximizes time, productivity for everyone
- It's a covered benefit, paid "in-network."



## 24/7 NurseLine

- Receive instant health care information
- Consult with registered nurses
- Available by phone 24 hours a day, toll-free



Live life to the fullest —  
without paying full price



## Save money with discounts at [anthem.com](https://www.anthem.com)

Saving money is good. Saving money on things that are good for you — that's even better. With SpecialOffers, you can access over 50 discounts on products and services that help promote better health and well-being. It's just one of the perks of being a member. Check out how much you can save:

1-800-Contacts, Glasses.com, Lasik, Hearing, Fitness & Health, Family & Home, Medicine, and More!

# Reminders

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- All employees are required to enroll in Health/Dental/Section 125 FSA (medical or dependent care)/HSA in order to have coverage in effect 3/1/16
  - Health/Dental Insurance application forms are to be submitted to HR;
  - Payroll election forms for Section 125 FSA (medical and/or dependent care) and HSA are to be submitted to the Finance Department.
  - Individual sessions scheduled for week of February 1<sup>st</sup>.



- **Deadline for submittal: 5 pm, Wednesday February 10**

# Questions?

