

Take action! Open Enrollment ends June 10th



# Agenda – Today you'll learn about:

- Your benefit options
- 2020-2021 Contributions
- How to enroll and make changes









# **Medical – Comparing the Optima plans**

	Your Medical costs:			
	Vantage HMO 10/20	Plus PPO 20/20%*		
Annual deductible CY(single/family)	None	None (In-Network) \$500/\$1,000 (Out-of-Network)		
Annual out-of-pocket maximum CY(single/family)	\$2,000/\$4,000	\$3,000/\$6,000 (In-Network) \$4,500/\$9,000 (Out-of-Network)		
Preventive care	No Charge	No Charge		
PCP's office visits	\$10 Copay	\$20 Copay		
Specialist's office visits	\$20 Copay	\$40 Copay		
Emergency room	\$200 Copay	\$200 Copay then 20% Coinsurance		
Inpatient Hospital	\$300 Copay per admission	\$200 Copay then 20%		

CY = Calendar Year

<sup>\*</sup> Out-of-Network Coinsurance for benefits under the PPO plan is covered at 70% after deductible

# Medical – Prescription drug coverage included

	Your Rx costs:		
	Vantage HMO 10/20	Plus PPO 20/20% In-Network*	
Annual Rx deductible (single/family)	N/A N/A		
Retail prescription drugs (30-day supply)			
Tier 1 Tier 2 Tier 3 Tier 4	\$15 copay \$40 copay \$60 copay 20% coinsurance – max \$250	\$15 copay \$40 copay \$60 copay 20% coinsurance – max \$250	
Mail-order prescri	ption drugs (90-day supply)		
Tier 1 Tier 2 Tier 3 Tier 4	\$37.50 copay \$100 copay \$180 copay Not Covered	\$37.50 copay \$100 copay \$180 copay Not Covered	

<sup>\*</sup> Out-of-Network Retail Rx under the PPO plan, Optima Health will reimburse the member based on their allowable charge

# Medical – Optima plan changes

- Infertility services have been added as a core benefit. See Optima benefit material for listing of covered services.
  - **Excluded treatments** or services related to infertility include:
    - Artificial insemination (AI)
    - In-vitro fertilization (IVF)
    - All other types of artificial or surgical means of conception and drugs used in connection with these procedures
- Benefits for the treatment of Autism Spectrum Disorder will change to remove the current age limit of 2 to 10 from the Virginia Autism coverage mandate.
  - Includes treatment of Applied Behavioral Analysis (ABA) up to \$35,000 annually.

# Medical – Optima plan changes, continued

- Chemotherapy, chemotherapy drugs, and radiation therapy will be a separate benefit from IV infusion therapy and respiratory/inhalation therapy.
- When an Optima Health plan includes step therapy requirements, members and their prescribing physicians will have access to a formal process to request an exception to step therapy requirements.
- The virtual consult benefit will be a separate cost share from the primary care physician (PCP) office visit benefit.
  - For plans with a coinsurance, the virtual consult benefit will remain the same.

# **EAP – Optima Employee Assistance Plan**

Guidance and support for everyday life.

 A wide range of resources are just a click away on OptimaEARcom.

## **Optima EAP**

Supporting employees. Strengthening organizations.



Optima Health

Call 1-800-899-8174
 to schedule an
 appointment with one of
 our licensed counselors.

Optime Health in the trade name of Optime Health Plan. Optime
Health Internoc Concern, and Section Health Plan. Inc.







# **EAP – Optima Employee Assistance Plan**

### **Purpose**

- Provides short-term, solutionfocused counseling services through professional, caring counselors.
- You can confidentially turn to Optima EAP even before an issue or concern severely impacts your home life or work performance.

#### **Benefit**

- EAP services are sponsored by your employer, meaning there is no cost to you or your household members.
- You, or any member in your household, are entitled to 5 free visits (per presenting issue) with a caring, solution-focused counselor.
  - Members can also access this benefit through virtual office visits.

# **EAP – Optima Employee Assistance Plan**

# 5 THINGS TO KNOW IN 5 MINUTES ABOUT THE OPTIMA EMPLOYEE ASSISTANCEPROGRAM

1

#### Helpful resource

Optima EAP (Employee Assistance Program) is a resource to help you overcome life's challenges, solve personal problems, and address work-related issues. Our services are confidential, short-term, and solution-focused.

2

#### Extends to you and household members

Optima EAP services are available to all members of your household at no cost. The benefit provides up to \_fixe\_(5) counseling sessions per presenting issue.

3

#### Free and convenient

Optima EAP services are paid for by your employer and available at no cost to you or your household members. Call 1-800-899-8174 and our representatives will work to schedule an appointment with a counselor near you.

4

#### Confidential

Confidentiality is an important component of our program. Discussions with our counselors are protected by strict Protected Health Information (PHI) privacy laws. Optima EAP will not share any PHI, either in written or verbal form, unless you give prior consent.



#### Easy to contact us

Our phones are personally staffed and answered 24 hours a day, 365 days a year. You do not need to go through your manager or the Human Resources Department to access EAP services. Additional online resources are available by signing in to optimoeop.com

Username: ODURF

Optima Health &

1-800-899-8174

OptimaEAP.com

Castima Health is the crost-raine of Optima Health Flore, Optima Health insurance Company, and Sentors Health Flore, Inc.

1,81534

# **Dental plan – MetLife**

	Your costs:				
	In-Network	Out-of-Network*			
Annual deductible	\$25/\$75 Does not apply to Diagnostic & Preventive	\$25/\$75 Does not apply to Diagnostic & Preventive			
Annual benefit maximum	\$2,000	\$2,000			
Preventive care	No Charge	No Charge			
Basic care	20% Coinsurance	30% Coinsurance			
Major care	50% Coinsurance	60% Coinsurance			
Orthodontia	50% Coinsurance	60% Coinsurance			
Orthodontia benefit maximum	\$1,500				

<sup>\*</sup>Members may be subject to balance billing when utilizing Out-Of-Network providers.

# Vision plan - VSP

	In-network			
	You pay	Plan pays		
Annual eye exam (once every 12 months)	\$20 copay	100% after copay		
Lenses (once every 12 months)  • Single  • Lined bifocal  • Lined trifocal  • Lined lenticular  • Impact –resistant lens for dependent children	Included in prescription glasses \$20 copay	100% after copay		
<ul><li>Lens options</li><li>Standard progressive</li><li>Premium progressive</li><li>Custom progressive</li></ul>	\$0 copay \$80-\$90 \$130-\$160 *Standard savings of 35-40% on other lens enhancements	Varies based on lens option		
Frames (once every 24 months)	\$0 copay for first \$130 allowance	100% up to \$130; 20% off remaining balance		
Conventional Contact lenses (once every 12 months)	100% up to \$130 Contact lens exam (fitting and evaluation) member pays up to \$60			

<sup>\*</sup>See VSP material for full benefit listing.

# July 2020 - June 2021 Medical contributions

#### **Health Insurance Monthly Rates**

July 1, 2020 - June 30, 2021

OPTIMA VANTAGE 10/20	) HMO	TOTAL COS	ST*	ODURF PAYS*	EMPLOY	EE PAYS
SINGLE		669.56		587.00	82.	56
SINGLE+CHILDREN		970.39		788.73	181	.66
SINGLE+SPOUSE		1377.59		1119.77	257	.82
FAMILY		1949.48		1584.66	364	.82
OPTIMA PLUS 20/20% PI	PO (IN AREA	or OUT of A	REA)			
SINGLE		811.74		570.66	241	.08
SINGLE+CHILDREN		1180.94		766.00	414	.94
SINGLE+SPOUSE		1671.23		1086.29	584	.94
FAMILY		2369.96		1538.04	831	.92

<sup>\*</sup>In addition ODU RF pays .72 per month for enhanced Employee Assistance Benefits

Please note there are no changes to all other benefit cost, please refer to Employee guide

# Financial security – MetLife Life and AD&D

#### Employee basic life/AD&D

- 2x annual base pay
- Max of \$300,000
- Rounded to the next higher \$1,000
- Employer paid

## Employee supplemental life\*

- Multiples of \$10,000
- Purchase up to 5x your annual base pay
- Up to a maximum of \$500,000
- Employee paid

### Spouse supplemental life\*

- You must first elect Employee Supplemental life
- Purchase in increments of \$5,000 to a maximum of \$250,000
- Coverage cannot exceed 100% of the amount of your employee supplemental life
- Employee paid

### Dependent supplemental life

- You must first elect Employee Supplemental life
- \$1,000 (for ages 15 days to 6 months)
- \$10,000 (for ages 6 months and older)
- No medical information is required
- Employee paid

\*Certain coverage levels requires evidence of insurability (EOI): You will be notified if this applies to you

# Financial security – MetLife Long-term disability

Long-term disability			
Eligibility	All active full-time employees working 30 or more hours/week		
Benefit	60% of monthly pre-disability earnings (as defined in the plan)		
Elimination Period	90 calendar days		
Maximum Weekly Benefit	Class 1: \$7,500 Class 2: \$5,000		
Maximum Benefit Duration	Age 65 OR Reducing Benefit Duration based on age at the time of disability. Please refer to the Certificate of Insurance for full details.		

# Retirement savings plan

- Retirement savings plan options:
  - -403(b)
- Invest in your future through easy payroll deductions.
- Choose from a diverse lineup of investment options.
- Visit <a href="http://www.principal.com/">http://www.principal.com/</a> for access.









# **Dependent Care Spending Account\***

- Dependent Care FSA
  - Contribute up to \$5,000 in 2020-2021.
  - Use for child and elder day care and related expenses.

\*You must actively make a contribution election each year.

Note: Keep in mind, this is a "use-it-or-lose-it" account.



## Additional benefits\*

#### **Pet insurance**

Nationwide helps cover the costs of veterinary care and surgeries.



# Critical illness insurance



Allstate provides financial support to help cover out-of-pocket expenses for critical illnesses, such as a heart attack or cancer.

#### MetLife additional services

- Will Preparation
- Estate Resolution Services
- Funeral Planning Services
- MetLife Infinity®



### **Hearing discounts**

VSP® Vision members & dependents can save up to 60% hearing aids with TruHearing. Optima Health also provides discounts through EPIC Hearing for Optima members.

<sup>\*</sup> See your benefits site for all coverages and features available

# Enrolling in your benefits – How to enroll



# Open Enrollment ends: June 10<sup>th</sup>



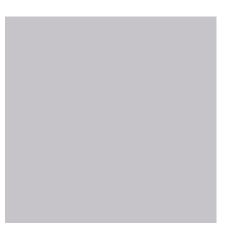
- Enroll in your benefits or make changes now through June 10
  - Review plan information posted on the ODURF benefits portal <a href="http://www.researchfoundation.odu.edu/hr/humanresc.html">http://www.researchfoundation.odu.edu/hr/humanresc.html</a>
  - Complete enrollment forms for any new coverages you would like to enroll in for the upcoming plan year
  - If you wish to make any changes to current enrollment elections you may also need to complete a form for any such change

#### If you don't enroll by the deadline

- Your current coverage will continue, with the exception of DCFSA contributions.
- Your next chance to change your benefits will be the next Open Enrollment unless you experience a
  qualifying life event.

## **Questions & answers**









This document highlights some of the provisions of the ODURF benefits program as of July 1, 2020. Complete details may be found by contacting Human Resources and in the official plan documents. In case of a conflict between the information contained in this document and the plan documents, the plan documents always prevail. In addition, ODURF reserves the right to amend or end these plans at any time for any reason.