



2022-2023 BENEFITS OVERVIEW



WHEN CAN I SIGN UP FOR BENEFITS?

Benefit enrollment can occur during the year when:

- > You are newly eligible for benefits
- > The annual Open Enrollment period
- > You experience a qualified life event



VOLUNTARY BENEFITS AVAILABLE TO YOU



MEDICAL

Provided through
Anthem

1



DENTAL

Provided through
Anthem

2



VISION

Provided through
VSP

3



HSA/FSA

Provided through
Ameriflex

4



LIFE AND DISABILITY

Provided through
Securian (life) and
UNUM (disability)

5



CRITICAL ILLNESS & ACCIDENT

Provided through
ManhattanLife

6

MEDICAL PLANS

Benefits	PPO – In-Network	HDHP – In-Network
Deductible	Tier 1: \$500 single / \$1,000 family Tier 2: \$1,500 single / \$2,500 family	\$3,000 single / \$6,000 family
Coinsurance	Tier 1: Plan pays: 90% / You pay: 10% Tier 2: Plan pays: 80% / You pay: 20%	Tier 1: Plan pays 90% / You pay: 10% Tier 2: Plan pays 80% / You pay: 20%
Medical Out-of-Pocket Maximum (includes deductible, copays, and coinsurance)	\$3,500 single / \$7,000 family	\$6,000 single / \$12,000 family
Office Visits PCP Sick or Specialist Visits Wellness at PCP	Tier 1: Deductible, then 10% Tier 2: Deductible, then 20% Covered in full	Tier 1: Deductible, then 10% Tier 2: Deductible, then 20% Covered in full
Inpatient and/or Outpatient Hospital	Tier 1: Deductible, the 10% Tier 2: Deductible, then 20%	Tier 1: Deductible, then 10% Tier 2: Deductible, then 20%
Emergency Room	Tier 1 and Tier 2: \$75 copay (waived if admitted)	Tier 1 and Tier 2: Deductible, then \$75 copay (copay waived if admitted)
Urgent Care	Tier 1 and Tier 2: Deductible, then 10%	Tier 1 and Tier 2: Deductible, then 10%

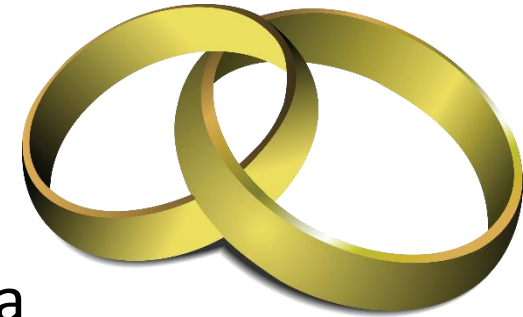
PHARMACY COVERAGE

Prescription Network	PPO	HDHP
Prescription Out-of-Pocket Maximum	\$4,150 single / \$8,800 family	Included in Medical Deductible
Retail: Tier 1 / Tier 2 / Tier 3 / Tier 4	\$10 / \$35 / \$60 / 25% up to \$250	Deductible, then \$10 / \$35 / \$60 / 25% up to \$250
Mail Order: Tier 1 / Tier 2 / Tier 3 / Tier 4	\$20 / \$70 / \$120 / 25% up to \$250	Deductible, then \$20 / \$70 / \$120 / 25% up to \$250

Under the HDHP Plan, there is no cost for many maintenance prescriptions such as those related to asthma, diabetes, blood pressure, and high cholesterol.

MEDICAL PLAN – SPOUSAL ELIGIBILITY

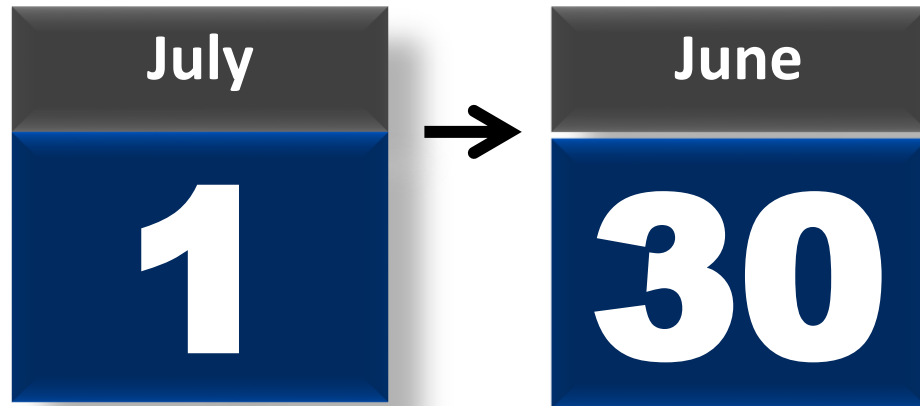
If your spouse is working full-time and eligible for employer-sponsored healthcare with in-network options locally (Ohio, Kentucky, and/or West Virginia), then he/she is not eligible for coverage under Shawnee State University's healthcare plan.



If you do plan on providing coverage for your spouse, a Spousal Healthcare Affidavit must be completed.

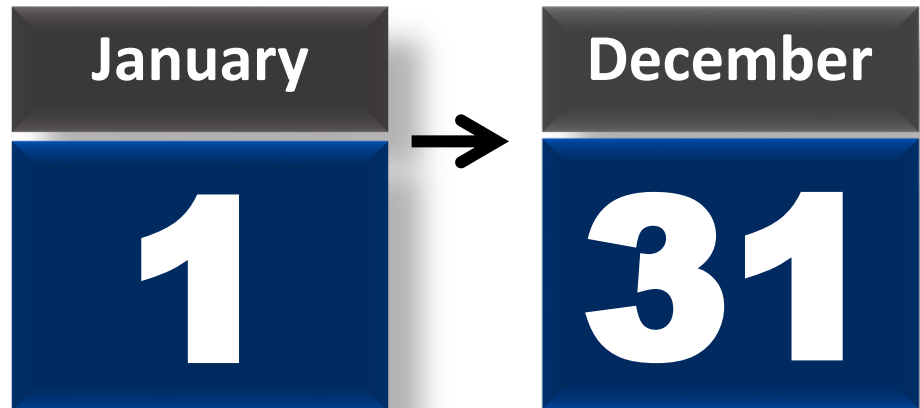
Contact Human Resources for more information.

DEDUCTIBLE



RENEWAL YEAR:

July 1, 2022 – June 30, 2023



DEDUCTIBLE YEAR:

January 1, 2022 – December 31, 2022

PREVENTIVE CARE

Preventive Care typically describes non-diagnostic recommended services based on age and gender. These services may include, but are not limited to



- Child and Adult Examinations, Lab and Radiology
- Colonoscopy
- Routine Pap Smear and Mammograms
- Routine Prostate Screening
- Routine Child Immunizations

Providers must bill Anthem as **Preventive** in order for services to be covered at 100%. If the claim is diagnostic, then the service will be subject to copays or deductible and coinsurance.

SAY HI TO SYDNEY!

Everything you need to know about your Anthem benefits—personalized and all in one place. With Sydney, you'll enjoy a simpler, more connected health experience.

Find care and
check costs

See claims

Use the chatbot and
get answers quickly

View and use
digital ID cards

Check all benefits



Get started with Sydney today!
Download the app today on
Google Play or the Apple Store.



LOOKING FOR A DOCTOR?

With the **Find a Doctor** tool on www.anthem.com or the Sydney app, you can look up:



Doctors, hospitals, labs and other health care providers in your area.



Doctor profiles, their affiliations and patient reviews.



Directions to pharmacies, urgent care centers and other health care facilities.



Anthem Networks – Blue Access for Medical/Pharmacy and Dental Blue for Dentists

LiveHealth

ONLINE

- Have a private video appointment with a doctor on your mobile phone, tablet or computer with a webcam.
- Doctors are available 24/7 for advice, treatment and prescriptions, if needed.
- See a licensed therapist or psychiatrist. Appointments are available 7 days a week and usually cost the same as an in-person visit.

Sign up at livehealthonline.com today
or download the free app.



APPROPRIATE PLACE FOR CARE

71% of Emergency Department Visits are unnecessary or could have been avoided.*

Urgent Care Center

Serious Cold, Flu, Fever

Severe Nausea or Vomiting

Sprains, Strains or Bites

Earaches and Allergies

Pink Eye

VS

Emergency Department

Chest Pain

Stroke or Seizure

Broken Bones

Severe Head Injury

Major Trauma



20 Minutes



135 Minutes

If you have a life-threatening illness or injury, go to the ER or call 911 right away.

DETERMINING WHICH TAX ADVANTAGED VEHICLE IS BEST FOR YOU

Health Savings Account (HSA)

Compatible with the HDHP only

Can roll over balances

Portable

Flexible Spending Accounts (FSA)

No eligibility requirements

“Use it or lose it”

Not portable

Health Care FSA

- Compatible with the PPO and Waivers
- Available for those not eligible for HSA.

Limited FSA

- Compatible with the HDHP only
- Funds can only be used for dental and vision expenses

Dependent Care FSA

- Available for all with Dependent Care needs
- Can be used for qualifying Elder Care expenses as well

TAX ADVANTAGED VEHICLES, continued

FSA Eligible Expenses

Health Care FSA: medical, prescriptions, vision and dental expenses

Limited FSA : dental and vision expenses

Dependent Care FSA: Child or elder care expenses

FSA Contribution Limits

Health Care FSA: \$2,850 pre-funded

Limited FSA: \$2,850 limit pre-funded

Dependent Care FSA: \$5,000 if single or married filing jointly. Funds are not available until the funds are in the account.

HSA Eligible Expenses

Qualified medical, dental, and vision expenses, including but not limited to copays, coinsurance, prescriptions, dental work, eyeglasses/contacts, etc.

HSA Contribution Limits

Single Coverage: \$3,650

Family Coverage: \$7,300

Over 55? An additional \$1,000 per year



DENTAL & VISION



DENTAL

Benefits	Dental Blue Network
Deductible	\$50 single / \$150 family
Annual Max	\$1,000
Preventative	Covered in Full
Basic	Deductible, then 20%
Major	Deductible, then 50%
Orthodontia (up to age 26) Benefit Lifetime Maximum	40% \$1,000



VISION

Benefits	VSP Signature Network
Eye Exam	\$10 copay
Standard Lenses	\$25 copay
Frame Allowance	\$120, 20% off balance
Lens Options	20% discount
Contact Lens Allowance	\$120
Frequency	Exam: 12 months Frames: 24 months Lens OR Contacts: 12 months

2022-2023 PAYROLL DEDUCTIONS

	<i>Annually</i>		<i>18 Pays</i>		<i>24 Pays</i>	
	<u>PPO</u>	<u>HDHP</u>	<u>PPO</u>	<u>HDHP</u>	<u>PPO</u>	<u>HDHP</u>
Employee	\$1,580.11	\$767.49	\$87.78	\$42.64	\$65.84	\$31.98
Employee + Child(ren)	\$3,431.14	\$1,822.80	\$190.62	\$101.27	\$142.96	\$75.95
Employee + Spouse	\$4,266.35	\$2,417.57	\$237.02	\$134.31	\$177.76	\$100.73
Family	\$7,900.97	\$5,036.87	\$438.94	\$279.87	\$329.21	\$209.87

Employee contributions listed include medical, Rx, dental and vision coverage

BASIC LIFE & AD&D

Life, Accidental Death and Dismemberment Insurance Offered through Securian

**At No Cost
to You**

Do you know who is listed as your beneficiary?
Open Enrollment is the perfect time to update
your beneficiary records!

Basic Life and Accidental Death & Dismemberment (AD&D) Insurance Benefit	
Faculty Benefit	\$50,000 lump sum
Administrative, Support Staff, DPS Officers	2.5x your annual salary to a maximum of \$400,000



VOLUNTARY LIFE INSURANCE

Voluntary Life is a product you buy not only for yourself but also to help take care of those who depend on your income. This affordable coverage can help to relieve the financial burden at a time of loss.



DID YOU KNOW? During the Open Enrollment period, you can increase your existing coverage by up to \$50,000 (up to a maximum coverage of \$150,000) without providing EOI. Increases in additional coverage over \$150,000 as well as increases to spousal coverage will require EOI.

Benefit	Employee	Spouse	Children
Incremental Amount	\$1,000 (minimum of \$20,000 initially)	\$10,000 (minimum of \$20,000)	Flat Options: \$5,000, \$10,000, \$15,000, or \$20,000
Maximum Benefit	\$500,000	\$250,000	\$20,000
Guarantee Issue*	\$150,000 (under age 65)	\$30,000	EOI is not required with any of the options.

**Guarantee issue amount is for newly eligible employees or dependents only and does not require answering medical questions. After your initial enrollment and/or you wish to increase your coverage, you may be subject to providing Evidence of Insurability (EOI).*

VOLUNTARY LONG-TERM DISABILITY

Voluntary Long-Term Disability (LTD) insurance helps protect your paycheck by replacing a portion of your income when you are unable to work due to illness or injury.

Long-Term Disability Summary	
Monthly Benefit	60% of pre-disability pay
Maximum Benefit/Month	\$6,000
Elimination Period	Plan A & C: 90 days Plan B & D: 180 days
Benefit Duration	Plan A & B: Social Security Normal Retirement Age Plan C & D: Up to 5 years
Pre-Existing Conditions	If you are disabled within the first 24 months of coverage, your disability may be excluded if it is related to a pre-existing condition from 6 months prior to enrollment

NOTE:

- Cost is based on your age, income and the plan that you select.
- Waiting periods and benefit durations vary based on the plan options selected.



VOLUNTARY ACCIDENT & CRITICAL ILLNESS COVERAGE



Voluntary Accident Coverage:

Pays a lump sum payment for off-the-job accidents you, your spouse, and/or your child(ren) experience.

Examples: bone fracture, dislocation, hospital confinement, and ambulance expenses

Voluntary Critical Illness Coverage:

Pays a lump sum if you receive certain diagnoses.

Examples: stroke, heart attack, transplant, coma, and cancer



Voluntary Accident and Critical Illness coverage pay the benefit directly to you and you can use the money as you wish.



ACTIONS YOU NEED TO TAKE

Here are the steps you need to complete your benefits enrollment:

- 1) Review the benefits offered by Shawnee State University.
- 2) Log into BearTrax to review and submit your benefit elections. Click here to get to [BearTrax](#).
- 3) Review your current elections before making new elections, if you are currently enrolled. This would include the chosen plans, dependents and their coverage, and selected amounts.
- 4) Add or update beneficiaries for the life insurance coverage in BearTrax.
- 5) Complete your benefit elections by the published due date(s).

NEED MORE INFORMATION ABOUT YOUR BENEFITS?



SHAWNEE STATE TEAM

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For more detailed plan information,
please visit the

[Shawnee State Human Resources
Employee Benefits](#)
website

HORAN ENGAGEMENT TEAM

For questions about Claims, Billing,
or General Benefits

Engagement@horanassoc.com

844.694.6726



PODCAST

www.horanassoc.com/tunein
or search for “Benefits, What
Like it’s Hard?” on your
favorite listening app.





THANK YOU

Let's chat if you have any
questions about your benefits.

www.horanassoc.com
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