



# Garrison Forest School

## Medical, Dental and Vision Benefit Guide

2020

# CONTENTS

Topic – Click on Page Number for Link to Page	Page
Benefit Options	<a href="#"><u>3</u></a>
Wellness Program Information	<a href="#"><u>4</u></a>
Medical, Dental & Vision Benefits at a Glance	<a href="#"><u>5-14</u></a>
Links to Benefit Summaries & Plan Documents	<a href="#"><u>15-16</u></a>
Finding a Network Provider	<a href="#"><u>17</u></a>
HSA & FSA Account Information	<a href="#"><u>18-20</u></a>
Eligibility & Enrollment Information	<a href="#"><u>21</u></a>
Required Notices	<a href="#"><u>22</u></a>
Contact Information	<a href="#"><u>23</u></a>
Next Steps	<a href="#"><u>24</u></a>
Important Information	<a href="#"><u>25</u></a>
Additional Resources	<a href="#"><u>26-30</u></a>

# AIMS Benefit Trust Health Plan

## Medical, Dental & Vision Benefit Options

**Garrison Forest School** is pleased to offer a comprehensive benefit program through AIMS Benefit Trust Health Plan. The plan offers flexibility and choice to meet your needs.

Benefits constitute a substantial and ever-increasing part of employee compensation and our school is committed to offering programs which maximize value and provide security for employees and their families

We are pleased to offer benefits through a large group health plan consortium sponsored by the Association of Independent Maryland and DC Schools (AIMS). The plan is administered by Educators Benefit Services (EBS), a wholly owned subsidiary of AIMS.

### Benefit Options Effective: January 1, 2020

#### UnitedHealthcare Medical

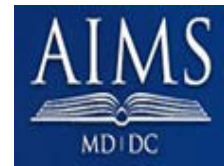
- UHC Choice Plus 80% HSA Plan
- UHC Choice Plus 90% HSA Plan
- UHC Choice Plus 80/60 PPO Plan

#### Dental

- Dominion Access ePPO Plan
- UHC Core PPO 20 Dental Plan
- UHC SuperMax PPO 20 Dental Plan

#### Vision

- VSP Vision Plan



# Simply Engaged Rewards Program

Simply Engaged is a personal health and wellness program which allows you to earn rewards when you complete these health and wellness actions.

## Earn a Reward

- ✓ Participate in a biometric health screening and get a **\$75 reward**.
- ✓ Complete an online health survey through Rally when you log in to myuhc.com® within 90 days of the start of the program and get a **\$25 reward**.
- ✓ Get a **\$20 reward** each month that you visit a participating fitness center at least 12 times per month.
- ✓ Complete a health coaching program and get a **\$75 reward**.
- ✓ Complete at least 3 Missions through the Rally experience and get a **\$50 reward**.
- ✓ Estimate health care costs on myuhc.com and get a **\$25 reward**.

## It's easy to start earning rewards

- ✓ Access the Reward Program Overview through **Rally™** when you log in to <http://www.myuhc.com> for specific details regarding your wellness incentive program.



# Medical Benefits at a Glance

## UHC Choice Plus 80% HSA Plan

Plan:	UHC Choice Plus 80% HSA Plan* Embedded Deductible**	
	In-Network	Out-of-Network
<b>Deductible</b>		
Individual	\$2,800	\$5,200
Family	\$5,600	\$10,400
<b>Coinsurance (plan pays)</b>	Deductible, then 80%	Deductible, then 60%
<b>Annual Out-Of-Pocket Limit</b>		
Individual	\$5,200	\$10,400
Family	\$10,400	\$20,800
<b>Lifetime Maximum</b>	Unlimited	
<b>Office Visits: PCP / Specialist</b>	Deductible, then 80%	Deductible, then 60%
<b>Preventive Services</b>	100% - No Deductible	Deductible, then 80%
<b>X-ray &amp; Diagnostic - Outpatient</b>	Deductible, then 80%	Deductible, then 60%
<b>Laboratory Services</b>	Deductible, then 80%	Deductible, then 60%
<b>Urgent Care</b>	Deductible, then 80%	Deductible, then 60%
<b>In-Patient Hospitalization</b>	Deductible, then 80%	Deductible, then 60%
<b>Out-Patient Surgery</b>	Deductible, then 80%	Deductible, then 60%
<b>Emergency Room</b>	Deductible, then 80%	Deductible, then 60%
<b>Pharmacy</b>	Deductible, then subject to copays until Out-of-Pocket maximum met	
Retail - 30-Day Supply		
Mail Order - 90-Day Supply		
Tier 1		
Tier 2	Retail \$10 / Mail Order \$20	
Tier 3	Retail \$30 / Mail Order \$60	
	Retail \$50 / Mail Order \$100	

\*In-Network and Out-of-Network Deductibles and Out-of-Pocket Maximums do not integrate.

\*\*Embedded deductible means that a single member of a family doesn't have to meet the full family deductible for after-deductible benefits to kick in. Instead, the person's after-deductible benefits will kick in as soon as he or she has met the individual deductible, even if the coverage is through a family plan

[RETURN TO CONTENTS](#)

# Medical Benefits at a Glance

## UHC Choice Plus 90% HSA Plan

Plan:	UHC Choice Plus 90% HSA Plan*	
	In-Network	Out-of-Network
Deductible		
Individual	\$1,500	\$2,500
Family	\$3,000	\$5,000
Coinsurance (plan pays)	Deductible, then 90%	Deductible, then 70%
Annual Out-Of-Pocket Limit		
Individual	\$3,000	\$4,000
Family	\$6,000	\$7,000
Lifetime Maximum	Unlimited	
Office Visits: PCP / Specialist	Deductible, then 90%	Deductible, then 70%
Preventive Services	100% - No Deductible	Deductible, then 80%
X-ray & Diagnostic - Outpatient	Deductible, then 90%	Deductible, then 70%
Laboratory Services	Deductible, then 90%	Deductible, then 70%
Urgent Care	Deductible, then 90%	Deductible, then 70%
In-Patient Hospitalization	Deductible, then 90%	Deductible, then 70%
Out-Patient Surgery	Deductible, then 90%	Deductible, then 70%
Emergency Room	Deductible, then 90%	Deductible, then 90%
Pharmacy	Deductible, then subject to copays until Out-of-Pocket maximum met	Deductible, then subject to copays until Out-of-Pocket maximum met
Retail - 30-Day Supply		
Mail Order - 90-Day Supply		
Tier 1	Retail \$10 / Mail Order \$20	
Tier 2	Retail \$30 / Mail Order \$60	
Tier 3	Retail \$50 / Mail Order \$100	
*Deductible based on level of coverage.		
*In-Network and Out-of-Network Deductibles and Out-of-Pocket Maximums do not integrate.		

# Medical Benefits at a Glance

## UHC Choice Plus 80/60 PPO Plan

Plan:	UHC Choice Plus 80/60 PPO Plan*	
	In-Network	Out-of-Network
Deductible		
Individual	\$350	\$700
Family	\$700	\$1,400
Coinsurance (plan pays)	Deductible, then 80%	Deductible, then 60%
Annual Out-Of-Pocket Limit		
Individual	\$3,000	\$3,000
Family	\$6,000	\$6,000
Lifetime Maximum	Unlimited	
Office Visits: PCP / Specialist	\$20 Copay / \$20 Copay	Deductible, then 80%
Preventive Services	\$0	Deductible, then 80%
X-ray & Diagnostic	Deductible, then 80%	Deductible, then 60%
Laboratory Services	Deductible, then 80%	Deductible, then 60%
Urgent Care	80% - No Deductible	Deductible, then 60%
In-Patient Hospitalization	Deductible, then 80%	Deductible, then 60%
Out-Patient Surgery	Deductible, then 80%	Deductible, then 60%
Emergency Room	80% - No Deductible	
Pharmacy	No Deductible	
Retail - 30-Day Supply		
Retail - 90-Day Supply		
Tier 1	Retail \$10 Copay / Mail Order \$20 Copay	
Tier 2	Retail \$30 Copay / Mail Order \$60 Copay	
Tier 3	Retail \$50 Copay / Mail Order \$100 Copay	
*In-Network and Out-of-Network Deductibles and Out-of-Pocket Maximums are calculated separately. They do not cross-apply.		

# Pharmacy



## Welcome to OptumRx

OptumRx® is your plan's pharmacy care services manager.

### Who is OptumRx?

Our pharmacy care experts are committed to providing easy and cost-effective ways to help you get the medication you need.

### Before your coverage begins

- 1 Let your doctor know OptumRx manages your pharmacy benefit.
- 2 Check if you have refills remaining on your prescriptions.
- 3 If currently using home delivery, have at least a one-month supply on hand during the transition.

### After your coverage begins

- 1 Set up your online account at **myuhc.com** or download the UnitedHealthcare® Health4Me® app
- 2 Review your prescription drug list (PDL):
  - Find out if you need to take action before filling your first prescription.
  - Check for lower-cost options.
- 3 Fill your prescriptions:
  - Select a network pharmacy and present your member ID card at the pharmacy counter.
  - Sign in at **myuhc.com** or use Health4Me to set up home delivery for maintenance medication, refill reminders and more.

Once your coverage begins, fill prescriptions two ways:



#### OptumRx home delivery.

Order up to a three-month supply of the medication you take regularly for less at **myuhc.com**.

If you choose to call, please have the following items ready:

- Your doctor's contact information
- Names and strength of current medications
- Payment information



#### Network retail pharmacies.

Show your member ID card at any UnitedHealthcare® network retail pharmacy.

[RETURN TO CONTENTS](#)



# Pharmacy

## Helpful tips



### Know your plan

Your plan may require one or more of the following before you can fill your prescription:

**Prior authorization** — Plan approval to get coverage for a medication.

**Step therapy** — Trying one or more lower-cost medications before another.

**Supply/Quantity limits** — Getting a certain amount of each covered prescription.



### Talk to your doctor

When you talk with your doctor, use the Health4Me app to confirm coverage and costs. You can also talk about what you need to do to get your medication.



### Save money on medication

Your PDL is a list of medications. The list is broken into sections called tiers (or cost level you pay).

- Choosing medications in lower tiers may save you money.

Your Cost	Drug Tier*	What's Covered	Helpful Hints
\$ Lowest	1	Medications that provide the highest overall value. Mostly generic drugs. Some brand drugs may also be included.	Use Tier 1 drugs for the lowest out-of-pocket costs.
\$\$ Mid-range	2	Medications that provide good overall value. A mix of brand-name and generic drugs.	Use Tier 2 drugs, instead of Tier 3 to help reduce your out-of-pocket costs.
\$\$\$ Higher	3	Medications that provide the lowest overall value. Mostly brand drugs, as well as some generics.	Ask your doctor if a Tier 1 or Tier 2 option could work for you.

\*Some pharmacy benefits may have more than three tiers

## Questions?

Once your coverage begins:



Log in to **myuhc.com**.



Open the Health4Me app.



Or call customer service at the number on your member ID card.

# Telemedicine

## Virtual Visits

Get access to care online.  
Any where. Any time.



When you don't feel well, or your child is sick, the last thing you want to do is leave the comfort of home to sit in a waiting room. Now, you don't have to.

A virtual visit lets you see and talk to a doctor from your mobile device or computer without an appointment. Most visits take about 10-15 minutes and doctors can write a prescription\*, if needed, that you can pick up at your local pharmacy. And, it's part of your health benefits.

### Conditions commonly treated through a virtual visit

Doctors can diagnose and treat a wide range of non-emergency medical conditions, including:

- Bladder infection/  
Urinary tract infection
- Diarrhea
- Rash
- Bronchitis
- Fever
- Sinus problems
- Cold/flu
- Migraine/headaches
- Sore throat
- Pink eye
- Stomach ache

### Access virtual visits

Log in to **myuhc.com**® and choose from provider sites where you can register for a virtual visit. After registering and requesting a visit you will pay your portion of the service costs according to your medical plan, and then you will enter a virtual waiting room. During your visit you will be able to talk to a doctor about your health concerns, symptoms and treatment options.

### Use virtual visits when:

- Your doctor is not available
- You become ill while traveling
- You are considering visiting a hospital emergency room for a non-emergency health condition

### Not good for:

- Anything requiring an exam or test
- Complex or chronic conditions
- Injuries requiring bandaging or sprains/ broken bones



To learn more, login to **myuhc.com**

[RETURN TO CONTENTS](#)

# Dental Benefits at a Glance

## Dominion Access ePPO Plan

Plan:	Dominion Access ePPO Plan
	Benefits available for In-Network Providers Only
<b>Deductible:</b>	
Single	\$25
Family	\$75
<b>Preventive Services</b>	<b>100%</b>
	Routine Cleanings (every 6 months)
	X-Rays
	Topical Fluoride Treatment
	Oral Examinations
<b>Basic Services</b>	<b>See Fee Schedule</b>
	Fillings
	Simple Extractions
	Denture Repairs
	Bridge Repair
<b>Major Services</b>	<b>See Fee Schedule</b>
	Endodontics
	Periodontics
	Crowns
	Oral Surgery
	Dentures
<b>Annual Maximum</b>	<b>\$2,000</b>
<b>Annual Rollover</b>	<b>Up to \$1,500</b>
Orthodontia	Individual Ortho Plan Available
Orthodontia Maximum	Patient Pays Discounted Fee
<p><b>For Current Listing of Participating Providers, visit</b>  <a href="http://www.Dominiondental.com">http://www.Dominiondental.com</a></p>	

# Dental Benefits at a Glance

## UnitedHealthcare Core PPO 20 Dental Plan

Plan:	UHC Core PPO 20 Dental Plan	
	In-Network	Out-of-Network
<b>Deductible:</b>		
Single	\$0	\$0
Family	\$0	\$0
	<b>Plan Pays</b>	
<b>Preventive Services</b>	<b>100%</b>	<b>100% of allowed benefit amount</b>
	Routine Cleanings	
	X-Rays	
	Topical Fluoride Treatment	
	Oral Examinations	
Preventive Services Applied to Annual Maximum	No	
<b>Basic Services</b>	<b>80%</b>	<b>80% of allowed benefit amount</b>
	Fillings	
	Simple Extractions	
	Endodontics	
	Periodontal Scaling & Root Planing	
	Oral Surgery	
<b>Major Services</b>	<b>50%</b>	<b>50% of allowed benefit amount</b>
	Bridges	
	Crowns	
	Dentures	
	Inlays, Onlays	
	Implants	
<b>Annual Maximum</b>	<b>\$2,000</b>	
Rollover of Unused Annual Maximum to Next Plan Year	Yes, see plan for details	
Benefits Calculated	Based on Discounted Fee	
<b>Orthodontia</b>	<b>50%</b>	<b>50% of allowed benefit amount</b>
<b>Lifetime Maximum</b>	<b>\$1,500</b>	

# Dental Benefits at a Glance

## UnitedHealthcare SuperMax PPO 20 Dental Plan

Plan:	UHC SuperMax PPO 20 Dental Plan	
	In-Network	Out-of-Network
<b>Deductible:</b>		
Single	\$0	\$0
Family	\$0	\$0
	<b>Plan Pays</b>	
<b>Preventive Services</b>	<b>100%</b>	<b>100% of allowed benefit amount</b>
	Routine Cleanings	
	X-Rays	
	Topical Fluoride Treatment	
	Oral Examinations	
Preventive Services Applied to Annual Maximum	No	
<b>Basic Services</b>	<b>90%</b>	<b>90% of allowed benefit amount</b>
	Fillings	
	Simple Extractions	
	Endodontics	
	Periodontal Scaling & Root Planing	
	Oral Surgery	
<b>Major Services</b>	<b>60%</b>	<b>60% of allowed benefit amount</b>
	Bridges	
	Crowns	
	Dentures	
	Inlays, Onlays	
	Implants <b>*only covered at 50%*</b>	
<b>Annual Maximum</b>	<b>\$5,000</b>	
Rollover of Unused Annual Maximum to Next Plan Year	Yes, see plan for details	
Benefits Calculated	Based on Discounted Fee	
<b>Orthodontia</b>	<b>50%</b>	<b>50% of allowed benefit amount</b>
<b>Lifetime Maximum</b>	<b>\$1,500</b>	

[RETURN TO CONTENTS](#)

# Vision Benefits at a Glance

Plan:	VSP Vision	
WellVision Exam	In-Network	Out-of-Network
<b>Wellvision Exam</b>	<b>\$0</b>	<b>Cover Up to \$45</b>
Prescription Glasses		
Standard Frames	\$150 allowance	Cover Up to \$70
Featured Frames	\$200 allowance	
<b>Costco Frames</b>	<b>\$80</b>	
<b>Lenses</b>		
Single Vision, Lined Bifocal, and Lined Trifocal Polycarbonate lenses for dependent children	Included in Prescription Glasses	Cover Up to \$30, \$50, or \$65
Standard Progressive Lenses	Covered	Cover up to \$50
Premium Progressive Lenses	\$95-\$105 allowance	Cover up to \$50
Custom Progressive Lenses	\$150-\$175 allowance	Cover up to \$50
<b>Contacts (instead of glasses)</b>		
Contact Lenses	\$130 allowance	Covered up to \$105
Contact lens exam (fitting and evaluation)	Up to \$60 allowance	
<b>Diabetic Eyecare Plus Program-</b> Services related to diabetic eye disease, glaucoma, and age-related macular degeneration. Limitations and coordination with medical coverage may apply. Ask your VSP doctor for details.	\$20 copay	
<b>Extra Savings</b>	<b>Glasses and Sunglasses</b>	
	<ul style="list-style-type: none"> <li>- Extra \$20 to spend on featured frame brands.</li> <li>- 20% savings on additional glasses and sunglasses from VSP provider in 12 months</li> </ul>	
	<b>Retinal Screening</b>	
	<ul style="list-style-type: none"> <li>- No more than a \$39 co pay on routine retinal screening as an enhancement to a WellVision exam</li> </ul>	
	<b>Laser Vision Correction</b>	
	<ul style="list-style-type: none"> <li>- Average 15% off the regular price or 5% off promotional price. Only from contracted facility.</li> </ul>	

# Medical Plan Options



Medical Insurance coverage is of primary importance to you and your family. We recommend you carefully consider the coverage details of each of the following options before making your election.

The following options are now available to all eligible employees. Please click on the links provided for more information regarding each of the plans:

## PPO

- UnitedHealthcare Choice Plus 80/60 Plan

## HSA

- UnitedHealthcare 80% HSA Plan
- UnitedHealthcare 90% HSA Plan

## LINKS

- [Summary of Benefits and Coverage](#)
- [Benefit Summary](#)
- [Plan Document](#)
- [AIMS Wrap](#)

**PLEASE NOTE:** Benefit Summaries and Plan information for all plans offered by EBS will be included in the links above. **Refer only to those options listed above for the selections offered by our school.**

The benefits outlined in the Summary of Benefits are brief descriptions of each plan. Please refer to the plan document links or visit the [EBS website](#) for more information. If there is a discrepancy between this summary and the plan document, the plan document will always govern.

[RETURN TO CONTENTS](#)

# Dental & Vision Plan Options



The following options are now available to all eligible employees. Please click on the links provided for more information regarding each of the plans:



## Dental

- Dominion ePPO Plan
- \$2000 Annual Maximum
- Limited Network

## Dental

- UHC Core PPO 20 Plan
- \$2000 Annual Maximum

## Dental

- UHC SuperMax PPO 20 Plan
- \$5000 Annual Maximum

## Vision

- VSP Vision Plan

## Links

- [Benefit Summary](#)
- [Plan Document](#)

**PLEASE NOTE:** Benefit Summaries and Plan information for all plans offered by EBS will be included in the links above. Refer only to those options listed above for the selections offered by our school.

The benefits outlined in the Summary of Benefits are brief descriptions of each plan. Please refer to the plan document links or visit the [EBS website](#) for more information. If there is a discrepancy between this summary and the plan document, the plan document will always govern.



# Finding a Network Provider

- Benefits payable under the PPO plans are greater if you use an In-Network Provider.



Use the links below to find a participating provider:

## UHC Choice Plus Plans

- UHC Choice Plus 80% HSA Plan
- UHC Choice Plus 90% HSA Plan
- UHC Choice Plus 80/60 PPO Plan
- [Click Here for Instructions](#)

## Dominion

- Access ePPO Plan
- [Click Here for Instructions](#)

## UHC Dental Plans

- Core PPO 20 Plan
- SuperMax PPO 20 Plan
- [Click Here for Instructions](#)

## VSP Vision

- VSP Vision Plan
- [Click Here for Instructions](#)

[The UnitedHealth Premium Program](#) evaluates doctors for quality and cost efficiency to help you [choose a doctor with confidence.](#)

[RETURN TO CONTENTS](#)



# Understanding Health Savings Accounts (HSA)

An HSA plan has two components:

- A qualified high deductible health insurance plan (HDHP)
- An Individual Tax-Exempt Trust (savings/investments)
  - The trust account is designed to pay for routine medical expenses/and or provide savings for the future. Money put into the account can be used either during the year or accumulated in the account.
  - Allowable medical expenses are defined by the IRS, and are much broader than most insurance carriers (i.e. includes dental, vision). Individuals can deduct dollars contributed to the HSA account from their gross income, resulting in tax-free medical dollars. The account is similar to an IRA account, however it is for qualified medical expenses.

*"Balances roll from year to year, so you don't need a crystal ball to forecast medical expenses in the next year"*



## Benefits of an HSA

- **Control** - You can use the HSA to pay for any qualified medical expense, as defined by the IRS. There's no need for preauthorization of services, unless explicitly stated by the plan.
- **Savings and Investments**—Unlike premiums, unused HSA dollars remain in the HSA until you use them later.
- **Flexibility** – "Health Care" dollars can pay for items identified by the health insurance plan, but also a much broader definition as defined by the IRS which includes dental, vision, orthodontia, over the counter medicine and others (not all of these are applied to deductible) These may be expenses individuals are currently routinely paying for using post-tax dollars.
- **Portability** - If you leave your current employer, you can take your HSA (the account) with you.
- **Tax savings** - Your contributions to the HSA are made with pre-tax dollars, lowering your taxable income.
- **No Use-it-or-lose-it Requirement** - Balances roll from year to year, so you don't need a crystal ball to forecast medical expenses in the next year

## 2020 Health Saving Account Contribution Limits

Individual Coverage	\$3550
Family Coverage	\$7100
Catch-up contribution Age 55+	\$1000

## HSA Eligibility

An individual needs to be covered by a QUALIFIED high-deductible health plan to set up a Health Savings Account.

In addition, individuals cannot be:

- Covered by a health plan that is not a qualified high-deductible plan, (including a general purpose FSA set up by the individual or their spouse)
- Claimed as a dependent on someone else's tax return.
- Entitled to Medicare benefits (age 65 or older)

# Flexible Spending Accounts (FSA)

## Health FSAs

- Health FSAs can be used for reimbursement of qualified medical expenses that are not covered by another health plan.

## Dependent Care FSAs

- FSAs can also be set up to pay for qualifying expenses from taking care of a dependent. These expenses typically cover children, such as for day care, but can also apply to elderly care.

*Your Flexible Spending Account can be used for reimbursement of eligible medical, or dependent care expenses.*

## Benefits of an FSA

- An employee may enjoy several benefits from having an FSA:
  - Contributions made by the employer can be excluded from the employee's gross income.
  - No employment or federal income taxes are deducted from the contributions.
  - Withdrawals may be tax free if the employee pays for qualified medical expenses.



## Covered Expenses

- Qualified medical expenses are those specified in the plan that would generally qualify for the medical and dental expenses deduction.
- Non-prescription medicines (other than insulin) purchased in tax years beginning after December 31, 2010, are not considered qualified medical expenses.
- Dependent care expenses for daycare and other services while you are working.

## Limited Purpose Flexible Spending Accounts

- These accounts are available to those individuals who are also contributing to an HSA account.
- Eligible expenses are limited to Dental and Vision care.

## Non-Covered Expenses

An FSA cannot make distributions for the following expenses:

- Amounts paid for health insurance premiums.
- Amounts paid for long-term care coverage or expenses.
- Amounts that are covered under another health plan.

## 2020 Annual FSA Contribution Limits

Health	<b>\$2,750</b>
Dependent Care	<b>\$5,000</b>



## Use-It-or-Lose-It

Contributed amounts that are not spent by the end of the plan year are generally forfeited. Thus, employees and their employers should base annual contributions to an FSA based on an estimate of the qualifying expenses the employee will have during the year.

# FSA and HSA Eligible Medical Expenses

- Acupuncture
- Alcoholism treatment
- Ambulance
- Artificial limb
- Artificial teeth
- Breast reconstruction surgery (mastectomy-related)
- Chiropractor
- Contact lenses and solutions
- Cosmetic surgery (if due to trauma or disease)
- Dental treatment (X-rays, fillings, braces, extractions, etc.)
- Diagnostic devices (such as blood sugar test kits for diabetics)
- Doctor's office (including physicians, surgeons, specialists or other medical practitioners) visits and procedures
- Drug addiction treatment
- Drugs, prescription
- Eyeglasses and exams (for medical reasons)
- Eye surgery (such as laser eye surgery or radial keratotomy)
- Fertility enhancements

***"Dental expenses and Eyeglasses are eligible HSA expenses"***

For more information on eligible expenses:

- [Publication 503, Child and Dependent Care Expenses](#)
- [Publication 502, Medical and Dental Expenses](#)



- Hearing aids (and batteries for use)
- Hospital services
- Laboratory fees
- Long-term care (for medical expenses and premiums)
- Nursing home
- Nursing services
- Operations/surgery (excluding unnecessary cosmetic surgery)
- Osteopath
- Physical Therapy
- Psychiatric care
- Psychologist
- Special education (for learning disabilities)
- Speech Therapy
- Stop-smoking programs (including nicotine gum or patches)
- Vasectomy
- Weight-loss program (to treat a specific disease diagnosed by a physician)
- Wheelchair

[RETURN TO CONTENTS](#)

# BENEFIT ELIGIBILITY AND ENROLLMENT INFORMATION

- Regular Full-time employees working 30 hours or more per week are eligible to participate in the medical, dental and vision benefits offered by the school.
- Regular Part-time employees working 20 hours or more per week are eligible to participate in the medical, dental and vision benefits offered by the school.
- Benefits are effective the 1<sup>st</sup> of the month coincident with or following date of hire.

Note: Variable Hour, Part-time and Seasonal Employees hours will be measured in accordance with the guidelines established by the Affordable Care Act (ACA). Eligibility and Effective dates will be established based on hours worked during the applicable measurement period. Please contact Human Resources with any questions you might have.

## NOTICE OF SPECIAL ENROLLMENT RIGHTS

**Benefit selections can not be changed until the next open enrollment period, unless you experience any of the following:**

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents:

- lose eligibility for that other coverage , or
- if the employer stops contributing towards your or your dependents' other coverage.

However, **you must request enrollment within 30 days** after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

In addition, if you have a new dependent as a result of

- marriage,
- birth,
- adoption, or placement for adoption,

you may be able to enroll yourself and your dependents. However, **you must request enrollment within 30 days after** the marriage, birth, adoption, or placement for adoption.

Two additional special enrollment events are available to you and your eligible dependents. They are:

- **Becoming ineligible for Medicaid or the Children's Health Insurance Program (CHIP).** If you or your dependents become ineligible for Medicaid or CHIP, you may be able to enroll yourself and your dependents in the Medical Plan. You must request enrollment within 60 days.
- **Becoming eligible for Premium Assistance through CHIP.** If you or your dependents become eligible for premium assistance through CHIP, you may be able to enroll yourself and your dependents in the Medical Plan. **You must request enrollment within 60 days.**
- If your dependents become eligible for CHIP, you will NOT be able to drop coverage for those dependents until Open Enrollment, unless eligibility is due to another special enrollment event such as loss of employment.

For more details about these special enrollment opportunities, please consult your plan document.

To request a special enrollment, contact the Business Office.

[RETURN TO CONTENTS](#)

# Required Notices



The following notices are provided in compliance with State and Federal regulations related to Employee Benefit Plans. **They contain important information about the benefits provided by your plan.**

Click on the links below to access each notice or document:

## For All Employees Eligible for the Health Plan

- [Coverage Options Notice](#) (formerly known as the Exchange Notice)
- [Employer CHIP Notice](#)
- Medicare Part D Creditable Coverage Notice
  - Will be provided under separate cover to Medicare eligible employees.
- [Notice of Special Enrollment Rights](#)
- [Summary of Benefits and Coverage \(SBC\)](#)

## For All Employees Enrolled in the Health Plan

- [Summary of Benefits and Coverage](#)
- [Employer CHIP Notice](#)
- Medicare Part D Creditable Coverage Notice
  - Will be provided under separate cover to Medicare eligible employees.
- [Summary Plan Description \(SPD\), and Summaries of Material Modification \(SMMs\)](#)
- [Newborns and Mothers Health Protection Act\\*](#)
- [Patient Protections Notice\\*](#)
- [Women's Health and Cancer Rights Act\\*](#)
- [Maryland Physician Compensation Disclosure](#)

*\*Copies of these Notices can also be found in your plan SPD.*

You have the right to request and obtain a paper version of these documents. Please contact your HR Department to make your request.



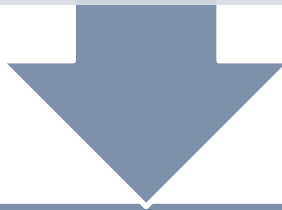
# Contact Information

Coverage	Contact	Phone	Website
Medical	UnitedHealthcare PPO Plans	866-633-2446	<a href="http://www.myuhc.com">www.myuhc.com</a>
Medical	UnitedHealthcare HSA Plans	866-314-0335	<a href="http://www.myuhc.com">www.myuhc.com</a>
Dental	Dominion	888-518-5338	<a href="http://www.dominionnational.com/">www.dominionnational.com/</a>
Dental	UnitedHealthcare PPO 20	877-816-3596	<a href="http://www.myuhc.com">www.myuhc.com</a>
Vision	VSP Vision	800-877-7195	<a href="https://www.vsp.com/">https://www.vsp.com/</a>
UHC Health Savings Accounts	Optum Bank	800-791-9361	<a href="http://www.optumbank.com">www.optumbank.com</a>
All	EBS Member Advocate Service	410-590-6590	<a href="http://ebsonline.net">ebsonline.net</a>

# Next Steps:

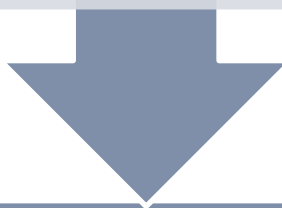
## Review Benefit Options

Review Benefit Summaries and Plan Document information  
at [www.ebsonline.net](http://www.ebsonline.net)



## Complete Enrollment

Please contact your HR or Business office for  
**Employee Enrollment Forms**



## Return Enrollment Form

**To your HR office as soon as possible**

to ensure timely enrollment and receipt of ID Cards





# Important Information

## Medical ID Cards

Medical ID Cards will be mailed to your home address within ten business days after your enrollment is processed.

You may obtain a temporary ID card online from UHC before your card arrives in the mail.

Click here for instructions: [UnitedHealthCare](#). Please allow 48 hours after enrollment for your benefit information to be updated on myuhc.com.



## Dental ID Cards

**UnitedHealthcare**  
Dental ID Cards will be mailed to your home address within ten business days after your enrollment is processed.

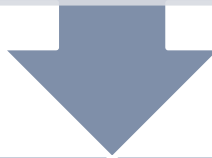
[Click here](#) for instructions on how to print a UnitedHealthcare ID Card online. Please allow 48 hours after enrollment for your benefit information to be updated on myuhc.com.

**Dominion**  
2 ID Cards in the subscribers name will be mailed to your home address. The cards may be used by anyone covered under your plan



## HSA Debit Cards

HSA Debit Cards will be delivered to your home address in a nondescript envelope within 10 days after you open your HSA account at Optum Bank.



## No Vision Cards



# Additional Resources

Our carriers provide a number of tools and resources to help you manage your health care and costs. The following is a sample of some of the options you have. Please visit the carrier's website for all of the options available to you.

## UnitedHealthcare (UHC)

- Participant Website: [www.myuhc.com](http://www.myuhc.com)
- [How to register on myuhc.com](#)
- [How Can I get Drug Pricing Online?](#)
- [Optum Rx Pharmacy Benefits](#)
- [myHealthcare Cost Estimator](#)
- [Preventive Care](#)
- [Wellness Tools](#)
- [Simply Engaged Wellness Program](#)
- [Claim Form](#)

## Dominion

- [www.Dominionnational.com/](http://www.Dominionnational.com/)
- [MyDominion Mobile App](#)
- [Ortho-Select Discount Program](#)
- [Benefit Rollover Program](#)

## VSP

- [www.vsp.com](http://www.vsp.com)

# Health4Me helps you find your way

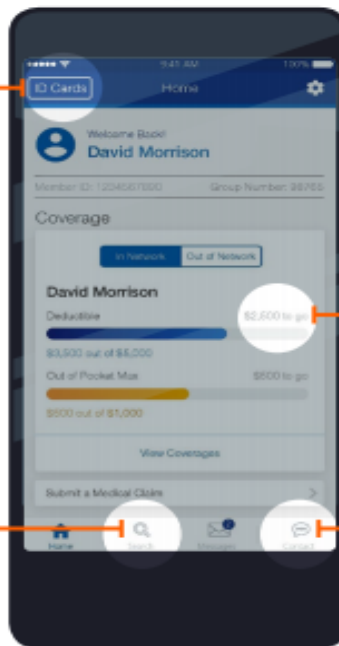
For on-the-go access  
to your health plan,  
put the UnitedHealthcare  
**Health4Me® mobile app**  
in your pocket.



Access  
your  
health plan  
ID card.



Find  
nearby  
care and  
compare  
costs.



View  
claims and  
account  
balances.



Talk with  
a doctor  
or nurse.



**Put your health plan at your  
fingertips.** Download the Health4Me  
app today at [uhc.com/health4me](https://uhc.com/health4me).

[RETURN TO CONTENTS](#)

# NurseLine<sup>SM</sup>

For the right care at the right place.



When you have a health concern, it can be difficult and time-consuming to find the information you need to get the right care. With telephone and online access to experienced registered nurses, you'll get the help you need to make more informed health care decisions.



## Your health advocate.

One toll-free number connects you with a registered nurse who will take the time to understand what is going on with your health and provide you with personalized information. As part of your health plan benefits, nurses are available 24 hours a day, seven days a week, at no additional cost to you.



## Your one-stop source.

Whether it's midnight and your baby has a 102-degree temperature, you need help managing your diabetes or you're not sure if you need a doctor, urgent care clinic or simply advice, NurseLine can help guide you to the care and services you need.



## Here for you 24/7.

To talk with a NurseLine nurse, call the member number on your health plan ID card.

## NurseLine is here to help you:

- Chat with a nurse live on [myuhc.com](https://myuhc.com)®.
- Understand your symptoms.
- Decide where to go for care.
- Learn more about a diagnosis.
- Explore treatment options.
- Understand medications.
- Find a doctor, hospital or specialist and see if a doctor is in your network and accepting new patients.

**With quicker  
access to behavioral  
health care, you  
get help when and  
where you need it.**



### **Telemental Health offers private appointments from the comfort of home.**

Some people who need behavioral health care may not receive it because it can be difficult to find a provider or get a timely appointment.

Telemental Health may be a good solution — and it's already part of your health care benefits. This service uses video-calling technology to provide real-time access to a behavioral health professional — with no travel and less wait time for appointments.

#### **The value of Telemental Health.**

- Included as part of your company's behavioral health benefits through UnitedHealthcare.
- Helps give you convenient access to care.
- Features the largest nationwide proprietary network<sup>1</sup> of over 3,000 Telemental Health providers in all 50 states.

Secure technology meets or exceeds American Telemedicine Association (ATA) and Health Insurance Portability and Accountability Act (HIPAA) security standards.

**People who access care  
more quickly may be  
more likely to engage in  
their treatment and have  
better outcomes.**



**4.38 out of 5**  
are satisfied with provider.<sup>2</sup>



**4.35 out of 5**  
overall patient experience.<sup>2</sup>



**To learn more or schedule a Telemental Health visit, open [myuhc.com](https://myuhc.com)<sup>®</sup>  
and click on Mental Health to go to [LiveandWorkWell.com](https://LiveandWorkWell.com).**





## Get support for your precious delivery.

If you're thinking about having a baby or have one on the way, the **Maternity Support Program** is here to provide information and support — throughout your pregnancy and after giving birth.

When you enroll in the program, you'll be able to work with a maternity nurse who is available to answer your questions and help you with things like:

- Choosing a doctor or nurse midwife, and help you with finding a pediatrician or other specialist
- Information to help you take care of yourself and the health of your baby — even if your pregnancy is considered high-risk
- Support to help you manage your health — physically and emotionally — before and after your baby is born

**Whatever your journey, we're here to help.**

**Get started today.**



**1-877-201-5328**

[myuhc.phs.com/maternitysupport](https://myuhc.phs.com/maternitysupport)

Monday-Thursday, 8:00 a.m.–8:00 p.m. and Friday,  
8:00 a.m.–5:00 p.m. Central Time

This service is available at no extra cost as part of  
your benefit plan. (TTY: 711)



**Download now: the UnitedHealthcare Healthy Pregnancy<sup>SM</sup> app.**

- Track milestones.
- Set reminders.
- Get daily tips.
- Find resources.



Available from the App Store® or Google Play™.