### COLUMBUS STATE

COMMUNITY COLLEGE

## Open Enrollment

Benefit Year: July 1, 2018 - June 30, 2019

Created by your Columbus State Community College Benefits Team

#### What is Open Enrollment?

- Open Enrollment is Your Once a Year Opportunity:
- To enroll for benefits
- Make changes (add or remove a dependent, change plans)
- Enroll in a new line of coverage

All Changes Effective July 1, 2018



Dependents	Eligibility Definition	Required Documentation
SPOUSE/DOMESTIC PARTNER	A person to whom you are legally married.  A domestic partner is a member of the same or opposite sex that meets the criteria as outlined in the affidavit	<ul> <li>A copy of the top half of the front page of the employee's most recently filed federal tax return that includes your spouse. You may black out all the financial information and ALL BUT the last 4 digits of your social security number; or</li> <li>Photocopy of marriage certificate if marriage has occurred within one year of eligibility.</li> <li>For the domestic partner, at least three of the documents described in the Affidavit.</li> </ul>
CHILDREN Eligible dependent children include:  Natural Children Step children Legally Adopted Children Children placed for adoption Children for whom legal guardianship has been awarded to employee or his/her spouse/partner	Medical only: Dependent children up to the age of 26 – According to the Health Reform Definition.  Dental, Vision, and Life: Unmarried children residing in the U.S. who are under the age of 19, or 25 if there is evidence the children are:  • Full time students at accredited schools, not regularly employed on a full time basis and who are primarily dependent upon the employee for support and maintenance;  • Ordered to be covered by a Qualified Medical Child Support Order or other court or administrative order.  Please see additional eligibility for Qualifying Disabled Children	<ul> <li>Natural Children: Photocopy of birth certificates showing employee's name.</li> <li>Step Children: Photocopy of birth certificates showing employee's spouse's name and a copy of marriage certificate/federal tax return showing the employee and parent's name.</li> <li>Adoptions/Legal Guardianships: Photocopy of Affidavits of Dependency, Final Court Order with presiding judge's signature and seal or Adoption Final Decree with presiding judge's signature or seal.</li> <li>Children of the domestic partner: Photocopy of birth certificates showing the partner's name.</li> <li>If applicable: A copy of the top half of the front page of the employee's most recently filed federal tax return that includes your child/ren. You may black out all the financial information and ALL BUT the last 4 digits of your social security number.</li> </ul>



#### What's new?

- Core/PPO Plan (Staff, Admin, CSEA and ACF)
  - Eliminate Walgreen's pharmacy
  - \$250 Copay plus 20% coinsurance
- Tiered PPO Plan (All groups)
  - Eliminate Walgreen's pharmacy
- HDHP (All groups)
  - Embed the deductible and OOP which means that one person under a family plan would be subject to an individual deductible and OOP rather than the entire family deductible
  - Eliminate Walgreen's pharmacy
- Vision
  - No change to the benefit levels
- Dental
  - No change to the benefit levels
  - Additional Buy up option



#### What's new cont'd

- HSA vendor change
  - From TASC to UHC



# Per Pay Employee Contributions-24 pays

80%/20	CORE/PPO	Teamster	
% Per		No Change	
Pay		to ER	
Single	\$67.40	\$70.78	
Family	\$177.22	\$186.08	

80%/20%	HDHP/HSA	College
Per Pay		Contributes
Single	\$56.60	\$1000
Family	\$148.84	\$2000

80%/20% Per Pay	Tiered PPO	
EE	\$61.62	
EE + Spouse	\$147.86	
EE + 1 or 2 Child(ren)	\$110.90	
EE+ Family	\$162.04	



# Per Pay Employee Contributions-24 pays

50%/50% Per Pay	Vision
Single	\$1.64
Family	\$4.50

80%/20% Per Pay	Dental
Single	\$3.42
Family	\$10.18



## Buy-Up Plan Dental

	Basic Plan Option	Buy-Up Plan Option
Deductible	\$50 per person max \$150	\$75 per person max \$225
Annual Max	\$1500	\$2500
Ortho Max	\$1000	\$1500
	Children up to 19 No adult benefit ortho	Children up to 26 Employee benefit ortho



## Buy-Up Plan Dental Employee Contributions- 24 pays

	Basic Plan Option	Buy-Up Plan Option
Employee Only	\$3.42	\$4.62
Employee and Spouse	\$10.18	\$10.18
Employee plus 1-2 children	\$10.18	\$11.86
Employee plus Family	\$10.18	\$18.44



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## Additional Employee Discounts









### Discounts for Employees in Education

- Tickets at Work
- CSCC bookstore
- Phone carriers
- Movie theaters
- Craft stores



#### Additional Benefit Services

**real** appeal

- Cancer Bridge
- Real Appeal
- Virtual Visits
- Will preparation services by MetLife (with Supplemental Life enrollment)
- Grief counseling







FSA Types (as offered by your employer)

- Healthcare FSA
- \$2650 maximum 2018
- Dependent Care FSA
- \$5000 maximum 2018
- Transportation Reimbursement Account
- \$3120 maximum 2018





## MetLife term-life and AD&D insurance



• To make changes complete an enrollment/update form and submit documents before the May 31, 2018 deadline.

#### Examples of changes:

- Beneficiary update
- Coverage amount (a health questionnaire is required to increase coverage amount)
- Adding or removing coverage (a health questionnaire is required to add coverage)



#### **Health Rewards Info**





- Health Rewards tracking period for all Employees is from July 1 through June 30.
- Employees and spouses/partners are included and must each earn 8 points.
- Complete all activities by June 30 to maintain the 80/20 premium cost share.
- If activities are not completed, your premium cost share will change to 70/30 effective January 1.
- Sessions dedicated to the Health Reward's program are held throughout the year. The sessions are announced in the Update.



#### What do I need to do?

- During open enrollment, you need to:
- If a spouse or partner is enrolled on the CSCC plan, you are <u>required</u> to submit a spousal/partner affidavit. If the form is not received by HR, the <u>surcharge will apply</u> until verification is submitted to remove the surcharge. <u>No retro adjustment</u> for failure to submit the affidavit.
- FSA <u>requires</u> an enrollment form annually
- Determine which benefits you would like to be enrolled in for the new year
- Your election period is July 1<sup>st</sup> June 30<sup>th</sup>
- If you are not making any medical, dental, vision, or life changes, no benefit form is required.



#### **Questions and Contact Information**



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