

Wilkes University

Wilkes University Open Enrollment 2020 Plan Year

Presented by:

BSI Corporate Benefits

DISCLAIMER

This presentation describes the benefit plans available to you as an employee of your current employer and is meant only to cover the major points of each plan. It does not contain all of the details that are included in your Summary of Benefits and Coverage (SBC) and Summary Plan Description (SPD).

If there is a question about one of these plans, or a conflict between this presentation and the formal language of the SBC and SPD, the formal wording in the SBC and SPD will govern. The benefits described in this presentation may be changed at any time and do not represent a contractual obligation on the part of your employer.

AGENDA

- Benefits Overview
- Health Savings Account (HSA)
- Utilization Review
- Flexible Spending Account (FSA)
- Telemedicine
- Dental Benefits
- Vision Benefits
- Life & Disability Benefits
- Cost Savings Tips
- Wellness Participation Incentive Program
- Next Steps

BENEFITS OVERVIEW

WHAT'S STAYING THE SAME?

MEDICAL CARRIER

- Staying with Highmark
- Same Network and Covered Services
- Same Doctors/Hospitals/Pharmacies/ One ID card for Medical/Rx

DENTAL

- Remaining with UCCI

VISION

- Remaining with National Vision Administrators (NVA)

FLEXIBLE SPENDING ACCOUNT (FSA)

- Remaining with AmeriFlex

LIFE AND AD&D (Employer Paid and Voluntary)

- Remaining with Mutual of Omaha

TELEMEDICINE

- Remaining with SwiftMD

WHAT'S CHANGING?

MEDICAL

- Removal of the HMO Plan
- Removal of the PPO \$1000 Plan
- Addition of the High Deductible Health Plan (HDHP) PPO \$2000/\$4000 Plan
- Change in Employer and Employee Contributions
- Wellness Participation Incentive Program
- Addition of SmartShopper

FLEXIBLE SPENDING ACCOUNT (FSA)

- Addition of a Limited Purpose Flexible Spending Account for those in the HDHP PPO Plan

HEALTH SAVINGS ACCOUNT

- Addition of a Health Savings Account for those in the HDHP PPO Plan

VOLUNTARY LIFE AND DISABILITY

- Grandfathered Plans are now being removed. You can only elect standalone life insurance or life with AD&D. If you are electing AD&D insurance, it must match your life insurance amount. For example, if you elect \$100,000 in life insurance, you must elect \$100,000 in AD&D.
- Also, if you wish to elect spouse or dependent life insurance, you **MUST** elect life insurance for yourself.

MEDICAL BENEFITS OVERVIEW

- Carrier - Highmark
 - PPO \$400 Plan
 - HDHP \$2,000 Plan

- Health Savings Account – Highmark/PNC Bank
 - Wilkes University Contribution
 - \$750 Single / \$1,500 All other coverage levels
 - **\$250 additional single with Wellness Activity Participation**
 - **\$500 additional all other coverage levels with Wellness Activity Participation**

- Flexible Spending Account (FSA) - AmeriFlex
 - Health FSA - PPO \$400 enrollees only
 - Limited Purpose FSA - Dental and Vision only for those enrolled in the HDHP \$2,000
 - Dependent Care FSA



MEDICAL PLAN HIGHLIGHTS

In-Network	HDHP PLAN	PPO PLAN
Deductible	\$2,000 Single/\$4,000 All other coverage levels	\$400 Single/\$1,200 All other coverage levels
HSA Funding	\$750 Single / \$1,500 All other coverage levels \$250 additional single/\$500 additional all other coverage levels with Wellness Activity Participation	N/A
Coinsurance	None	None
Office Visit	Covered in full after the Deductible	\$25 copay
Specialist	Covered in full after the Deductible	\$50 copay
ER	Covered in full after the Deductible	\$100 copay (waived if admitted)
Urgent Care	Covered in full after the Deductible	\$50 copay
Retail Rx	\$0/\$15/\$15/\$30/\$50 after Deductible <i>Low Cost Generic/Formulary Generic/Non Formulary Generic/Formulary Brand/Non Formulary Brand</i>	\$100 Drug Deductible \$0/\$15/\$15/\$30/\$50 <i>Low Cost Generic/Formulary Generic/Non Formulary Generic/Formulary Brand/Non Formulary Brand</i>
Mail Rx	\$0/\$30/\$30/\$70/\$150 after the Deductible <i>Low Cost Generic/Formulary Generic/Non Formulary Generic/Formulary Brand/Non Formulary Brand</i>	\$20/\$60/\$100 after the Deductible <i>Preferred Generic/Preferred Brand/NP Generic & Brand</i>
Preventive Care	100% Covered	100% Covered

MEDICAL EMPLOYEE CONTRIBUTIONS

		24 Pays	Annual Contribution Savings HSA vs. PPO Plan - based on wellness completion rates
HDHP \$2000 Plan	Single	\$24.77	\$1,657.84
	Employee + Child	\$137.53	\$3,195.12
	Employee + Children	\$172.15	\$3,415.25
	Employee + Spouse	\$211.53	\$3,709.14
	Family	\$247.23	\$3,716.01

PPO \$400 Wellness Completion	24 Pays
Single	\$93.84
Employee + Child	\$270.66
Employee + Children	\$314.45
Employee + Spouse	\$366.08
Family	\$402.06

PPO \$400 Without Wellness Completion	24 Pays
Single	\$104.25
Employee + Child	\$291.49
Employee + Children	\$335.28
Employee + Spouse	\$386.91
Family	\$422.89

HEALTH SAVINGS ACCOUNT (HSA)

HSA OVERVIEW

WHAT IS A HEALTH SAVINGS ACCOUNT (HSA)?

- A tax-advantaged account to help save for medical expenses that high-deductible health plans (HDHP) do not cover
- Contributions are made into an account by an individual and/or employer

BENEFITS

- Contributions are tax deductible
- Earn interest, tax-free
 - Interest earned on an HSA is not considered taxable income
- Your HSA balance can be carried over year after year
 - An HSA is not a use-it-or-lose-it account

HSA OVERVIEW

- Highmark's HSA vendor is PNC Bank
- All enrolled in the HDHP \$2000 PPO Plan will receive a Debit Card with their name on it to use for purchases
- If an employee is enrolled as an individual, the policyholder will receive the debit card
 - If they are enrolled as Employee + Spouse or Employee + Family, they will receive two cards
 - For Employee + Children coverage, just the policy holder receives a card
- There is no additional charge to order more debit cards

HSA Spending Basics



- You and/or your employer can put money into your HSA.
- You can use your HSA money for many health care services and supplies, including dental and vision care.
- You can go on your member website to see what you've spent and how much is left in your HSA.
- Your HSA balance will stay in your account after the end of the year. You can use it next year, and in the future.

HSA Savings Basics



- The money in your HSA is yours. It goes wherever you go, even if you change jobs.
- You can use your HSA money for medical expenses and insurance premiums after retirement.
- Once you reach a \$500 account balance, you can invest your money in mutual funds.
- With an HSA, you can save on taxes:
 - You won't pay taxes on the money you contribute to your account (subject to annual contribution limits)
 - You won't be taxed on interest earned on your account
 - You won't be taxed when you withdraw funds for eligible health-related expenses

2020 HSA RULES AND GUIDELINES

- Employees enrolling in the HDHP Plan cannot enroll in the Health Flexible Spending Account (FSA)
 - You can enroll in the:
 - Dependent Care FSA and
 - Limited Purpose FSA (dental & vision qualified expenses only)
- 2020 Annual HSA Contribution Limits:
 - Single: \$3,550
 - All other coverage levels: \$7,100
 - These limits include funds from Wilkes University and any employee contributions
- 55+ Catch-up Annual Limit:
 - Single: \$1,000
 - All other coverage levels: \$1,000
- **IMPORTANT NOTE:**
 - If you have secondary medical coverage (Medicare included) and your secondary plan is NOT another HDHP, you are ineligible to enroll in the Health Savings Account and receive funding (employer and employee).

HSA PLAN DESIGN

COVERED MEMBER HAS A \$2,000/\$4,000 HDHP PLAN

Medical 100% after deductible except for Rx Copays:

Retail \$0/\$15/\$15/\$30/\$50

Mail \$0/\$30/\$30/\$70/\$150

\$2,000/\$4,000

Covered member is responsible for the total cost of services up to the deductible

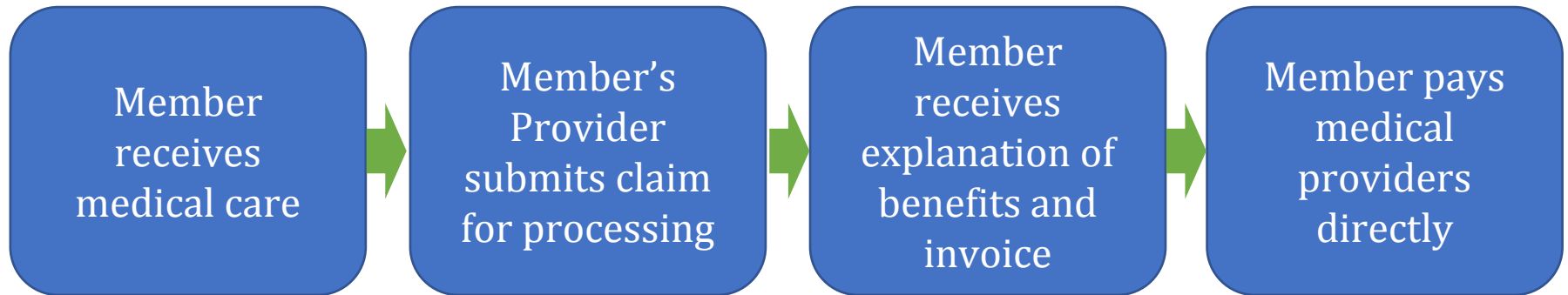
**Member responsibility
\$1,000 Single/\$2,000 All
other coverage levels**

**HSA Funding
Wilkes University Funded
\$1,000 single/\$2,000 all
other coverage levels
(assumes wellness)**

100% Preventive Care

CLAIMS PROCESS WITH AN HSA

Process of meeting your deductible:

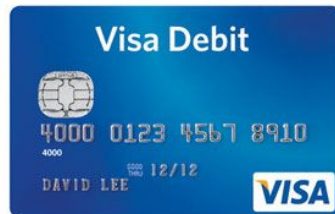


How you pay your medical provider is up to you

HSA Bank Account

OR

Household Bank Account



COVERED HEALTH CARE EXPENSES USING HSA

FOR COMPLETE LIST & GUIDELINES REFER TO [IRS PUBLICATION 502](#)

• Acupuncture	• Guide dog	• Prescriptions
• Alcoholism treatment	• Hearing aids	• Prosthesis
• Ambulance	• Laboratory fees	• Psychiatric care
• Artificial limb	• Lasik surgery	• Psychiatrist
• Artificial teeth	• Life-care fees	• Psychoanalysis
• Birth control pills (prescription)	• Long-term care	• Psychoanalyst
• Breast reconstruction	• Nursing care	• Psychologist
• Chiropractors	• Obstetrician	• Smoking cessation programs
• Contact lenses	• Operating Room Costs	• Splints
• Cosmetic surgery (from disease)	• Organ transplant	• Telephone for hearing impaired
• Crutches	• Orthodonture	• Transportation expenses
• Dental treatment	• Orthopedic shoes	• Vaccines
• Dermatologist	• Orthopedist	• Vitamins (if prescribed)
• Diagnostic devices	• Oxygen and equipment	• Wheelchair
• Disabled dependent care	• Pediatrician	• Weight loss programs
• Drug addiction treatment	• Podiatrist	• Wig (hair loss from disease)
• Eyeglasses	• Post-nasal treatments	• X-rays
• Fertility enhancement	• Prenatal care	

UTILIZATION REVIEW

CLAIMS EXAMPLE

SINGLE LOW UTILIZER

PPO \$400/\$1200 Plan

IN NETWORK Plan Design	IN NETWORK CLAIM COST TO EE
Deductible	\$52.91
Rx Copays 2 Generic Scripts	\$30.00
2 Office Visit Copay	\$50.00
HSA Funding	N/A
Total Out of Pocket Expense	\$132.91

HSA Funds Rolled Over to Next Year	N/A
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Annual Payroll Deduction	\$2,252.24
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Overall Employee Cost	\$2,385.15
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\$2,000/\$4,000 PPO HSA

IN NETWORK Plan Design	IN NETWORK CLAIM COST TO EE
Deductible	\$273.53
2 Rx Generic Scripts	Part of the deductible
2 Office Visits	Part of the deductible
HSA Funding	\$1,000.00
Total Out of Pocket Expense	\$0.00

HSA Funds Rolled Over to Next Year	\$726.47
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Annual Payroll Deduction	\$594.40
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Overall Employee Cost	\$594.40
Starting EE HSA Balance in 2021	\$1,726.47

Payroll contributions and HSA funding assumes the completion of the Wellness Participation Incentive Program

CLAIMS EXAMPLE

SINGLE MID UTILIZER

PPO \$400/\$1200 Plan

IN NETWORK Plan Design	IN NETWORK CLAIM COST TO EE
Deductible	\$272.80
Rx Copays 2 Brand Scripts and 8 Generic	\$180.00
5 Office Visit Copays	\$125.00
4 Specialist Copays	\$200.00
1 Emergency Room Copay	\$100.00
HSA Funding	N/A
Total Out of Pocket Expense	\$877.80

Annual Payroll Deduction	\$2,252.24
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Overall Employee Cost	\$3,130.04
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\$2,000/\$4,000 PPO HSA

IN NETWORK Plan Design	IN NETWORK CLAIM COST TO EE
Deductible	\$1,689.53
2 Brand Scripts and 8 Generic	Part of the deductible
5 Office Visits	Part of the deductible
4 Specialist Visits	Part of the deductible
1 Emergency Room Visit	Part of the deductible
HSA Funding	\$1,000.00
Total Out of Pocket Expense	\$689.53

Annual Payroll Deduction	\$594.40
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Overall Employee Cost	\$1,283.93
Starting EE HSA Balance in 2021	\$1,000.00

Payroll contributions and HSA funding assumes the completion of the Wellness Participation Incentive Program

CLAIMS EXAMPLE

SINGLE HIGH UTILIZER

PPO \$400/\$1,200 Plan

IN NETWORK Plan Design	IN NETWORK CLAIM COST TO EE
Deductible	\$400.00
10 Brand Scripts and 10 Generic	\$550.00
10 Office Visit Copay	\$250.00
12 Specialist Copay	\$600.00
3 ER Copay	\$300.00
HSA Funding	N/A
Total Out of Pocket Expense	\$2,100.00

Annual Payroll Deduction	\$2,252.24
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Overall Employee Cost	\$4,352.24
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\$2,000/\$4,000 PPO HSA Deductible

IN NETWORK Plan Design	IN NETWORK CLAIM COST TO EE
Deductible	\$2,000.00
10 Brand Scripts and 10 Generic	\$450.00
10 Office Visits	Part of the deductible
12 Specialist Visits	Part of the deductible
3 ER Visits	Part of the deductible
HSA Funding	\$1,000.00
Total Out of Pocket Expense	\$1,450.00

Annual Payroll Deduction	\$594.40
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Overall Employee Cost	\$2,044.40
Starting EE HSA Balance in 2021	\$1,000.00

CLAIMS EXAMPLE

FAMILY LOW UTILIZER

PPO \$400/\$1200 Plan

IN NETWORK Plan Design	IN NETWORK CLAIM COST TO EE
Deductible	\$224.12
2 Generic Scripts	\$30.00
3 Office Visit Copay	\$75.00
2 Specialist Copay	\$100.00
HSA Funding	N/A
Total Out of Pocket Expense	\$429.12

HSA Funds Rolled Over to Next Year	N/A
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Annual Payroll Deduction	\$9,649.44
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Overall Employee Cost	\$10,078.56
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\$2,000/\$4,000 PPO HSA

IN NETWORK Plan Design	IN NETWORK CLAIM COST TO EE
Deductible	\$681.22
2 Generic Scripts	Part of the deductible
3 Office Visits	Part of the deductible
2 Specialist Visit	Part of the deductible
HSA Funding	\$2,000.00
Total Out of Pocket Expense	\$0.00

HSA Funds Rolled Over to Next Year	\$1,318.78
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Annual Payroll Deduction	\$5,933.52
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Overall Employee Cost	\$5,933.52
Starting EE HSA Balance in 2021	\$3,318.78

CLAIMS EXAMPLE

FAMILY MID UTILIZER

PPO \$400/\$1200 Plan

IN NETWORK Plan Design	IN NETWORK CLAIM COST TO EE
Deductible	\$800.00
Rx Copays 8 Brand Scripts and 8 Generic	\$520.00
6 Office Visit Copays	\$150.00
5 Specialist Copays	\$250.00
3 Urgent Care Copays	\$150.00
HSA Funding	N/A
Total Out of Pocket Expense	\$1,870.00

Annual Payroll Deduction	\$9,649.44
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Overall Employee Cost	\$11,519.44
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\$2,000/\$4,000 PPO HSA

IN NETWORK Plan Design	IN NETWORK CLAIM COST TO EE
Deductible	\$3,102.04
8 Brand Scripts and 8 Generic	Part of the deductible
6 Office Visits	Part of the deductible
5 Specialist Visits	Part of the deductible
3 Urgent Care Visits	Part of the deductible
HSA Funding	\$2,000.00
Total Out of Pocket Expense	\$1,102.04

Annual Payroll Deduction	\$5,933.52
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Overall Employee Cost	\$7,035.56
Starting EE HSA Balance in 2021	\$2,000.00

Payroll contributions and HSA funding assumes the completion of the Wellness Participation Incentive Program

CLAIMS EXAMPLE

FAMILY HIGH UTILIZER

PPO \$400/\$1,200 Plan

IN NETWORK Plan Design	IN NETWORK CLAIM COST TO EE
Deductible	\$1,200.00
15 Brand Scripts and 20 Generic	\$925.00
15 Office Visit Copay	\$375.00
10 Specialist Copay	\$300.00
6 Urgent Care Copays	\$300.00
HSA Funding	N/A
Total Out of Pocket Expense	\$3,100.00

Annual Payroll Deduction	\$9,649.44
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Overall Employee Cost	\$12,749.44
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\$2,000/\$4,000 PPO HSA

IN NETWORK Plan Design	IN NETWORK CLAIM COST TO EE
Deductible	\$4,000.00
15 Brand Scripts and 20 Generic	\$825.00
15 Office Visits	Part of the deductible
10 Specialists Visits	Part of the deductible
6 Urgent Care Visits	Part of the deductible
HSA Funding	\$2,000.00
Total Out of Pocket Expense	\$2,825.00

Annual Payroll Deduction	\$5,933.52
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Overall Employee Cost	\$8,758.52
Starting EE HSA Balance in 2021	\$2,000.00

FLEXIBLE SPENDING ACCOUNT (FSA)

WHAT IS A FLEXIBLE SPENDING ACCOUNT?

1. Healthcare FSA

- A Healthcare Flexible Spending Account, or "FSA," is a pre-tax benefit account that you can use to pay for eligible medical, dental, and vision care expenses that are not covered by your health insurance plan.

2. Limited Purpose FSA *(for those enrolled in the HDHP)*

- A Limited FSA is a type of FSA that only covers certain expenses that typically include vision, dental, or OTC dental and vision products. A Limited FSA is often designed to be compatible with a Health Savings Account.

3. Dependent Care FSA

- The Dependent Care FSA allows employees to set aside tax-free money toward dependent care costs. These costs could be toward daycare, care for elderly or disabled dependents, or toward before and after school care. Dependents include children up to age 13 or your spouse or qualifying child or relative who is incapable of self-care (mentally or physically).

WHAT IS A FLEXIBLE SPENDING ACCOUNT?

A Flexible Spending Account (FSA) covers common types of expenses:

- | | | |
|-----------|----------------|----------------------|
| • Medical | • Orthodontics | • Prescription drugs |
| • Dental | • Vision | • Day care |

Other Benefits

- Annual FSA maximum is \$2,700 (Health FSA and Limited Purpose FSA)
- Annual Dependent Care FSA maximum is \$5,000
- Offers immediate access to elected FSA funds
- FSA allows you to set aside funds for qualifying healthcare/ dependent care
 - o Funds are pre-taxed
- Expenses **must be incurred** within the plan year (1/1/2020 – 12/31/2020)
- Funds are “use it or lose it”
- Limited Purpose FSA is for Dental and Vision expenses ONLY
- A dependent care flexible spending account provides tax savings on day care
 - o Dependent care funds are available once deposited into account



TELEMEDICINE

SWIFTMD



WHAT IS SWIFTMD?

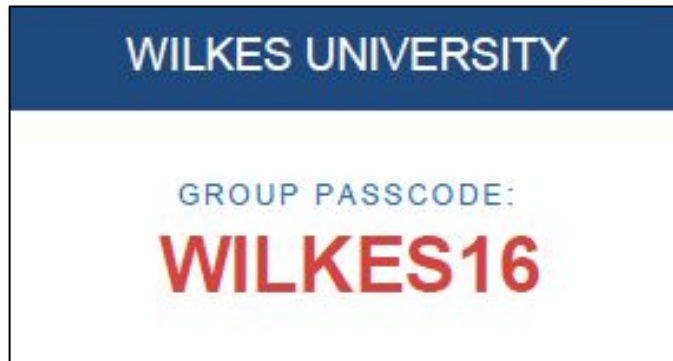
SwiftMD gives medical enrolled employees and family members access 24/7 to US board-certified doctors through the convenience of phone at 833-SWIFTMD or by visiting mySwiftMD.com

HOW MUCH DOES IT COST?

Employees pay \$0 per call - no copays & no deductibles

WHAT ARE THE BENEFITS?

- **FREE** option to employees to avoid the Urgent Care & ER
- SwiftMD will send Rx directly to pharmacy for pick-up
- SwiftMD treats:
 - Allergies and Rashes
 - Back Pain or Injury
 - Earache
 - Sinusitis
 - Sore Throat
 - Headache
 - And much more!



DENTAL BENEFITS

DENTAL BENEFIT OVERVIEW



- Carrier - UCCI
- Basic and Enhanced PPO Plans Offered

In-Network	BASIC PLAN	ENHANCED PLAN
Deductible	No Deductible	\$50 Single/\$150 All other coverage levels
Annual Max	\$1,000 per member	\$1,200 per member
Orthodontia Max	N/A	\$1,000 per member
Preventive	100%	100%
Basic Restorative	100%	100%
Major Restorative	N/A	50%
Orthodontia	N/A	50% (limited to dependent children under the age of 19)

Per Pay Deductions		
	BASIC	ENHANCED
Employee	\$10.77	\$15.78
Employee+1	\$22.72	\$33.29
Family	\$28.90	\$42.25

VISION BENEFITS

DENTAL BENEFIT OVERVIEW



- Carrier - National Vision Administrators (NVA)
- Same plan design and payroll deductions

In-Network	NVA PLAN
Deductible	No Deductible
Examination	Once Every Plan Year - Covered 100%
Lenses	Once Every Plan Year - Covered 100%
Frames	Once Every Plan Year - Up to \$110 (20% discount off balance)
Contact Lenses	Once Every Plan Year - Covered at 100% if medically necessary Elective Contact Lenses - Up to \$110 Retail

Per Pay Deductions	
	NVA
Employee	\$2.70
Employee+1	\$5.13
Family	\$7.02

LIFE & DISABILITY BENEFITS

THE NEED FOR LIFE AND DISABILITY INSURANCE

- Things to consider if a life/disability event occurs?
 - How long can you pay bills without a paycheck?
 - Do you have replacement income for your family?
 - Do you have funds for funeral expenses?
 - Do you have funds saved for future expenses (tuition, weddings, etc?)
- Life and disability insurance is portable - can go with you if you change jobs
- If you try to get life and disability insurance as an individual, the cost is significantly more and there is a greater possibility of denial

EMPLOYER PAID COVERAGE

LIFE AND AD&D COVERAGE

- Eligible - All Full-Time Active Employees working at least 30 hours per week
- Life Benefit - 1x salary to \$400,000
- AD&D Benefit - \$50,000

LONG-TERM DISABILITY COVERAGE

- Eligible - All Full-Time Active Employees working at least 30 hours per week after 1 year of service
- Benefit
 - o 60% of monthly income
 - o 180 day waiting period
 - o Maximum of \$12,000 per month



Mutual of Omaha

VOLUNTARY BENEFITS

VOLUNTARY LIFE AND AD&D

EMPLOYEE BENEFIT

- o Increments of \$10,000 up to \$500,000

SPOUSAL BENEFIT

- o Increments of \$10,000 up to \$100,000 (may NOT exceed employee life amount)

CHILDREN BENEFIT

- o Increments of \$2,500 to a maximum of \$10,000

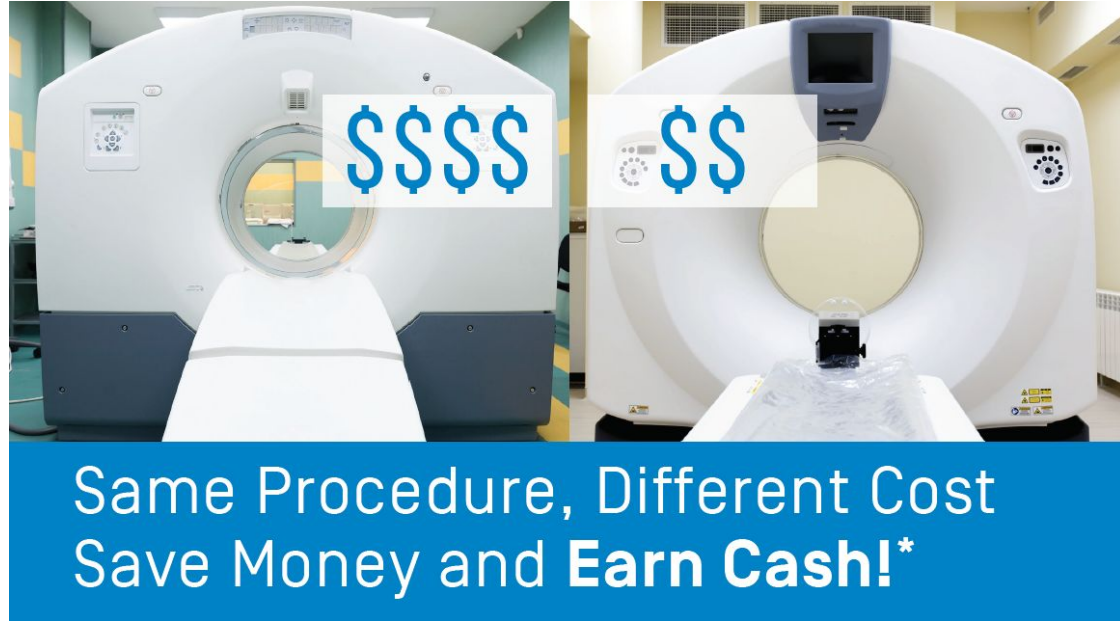
IMPORTANT NOTE:

If you did not elect life insurance during the last open enrollment and choose to elect at this time, you will have to complete an Evidence of Insurability Form to be approved for ANY amount you elect for the 2020 plan year.

COST SAVINGS TIPS

SMARTSHOPPER

- Did you know, prices for the same medical services can differ by *thousands* of dollars within the same neighborhood?
- Instead of spending that money, you can save it, and earn cash!
- Introducing Vitals SmartShopper, a new program that lets you shop for lower-cost health care and choose from several possibilities.



Medical Procedure ¹	Cost Variance	Provider A Cost	Provider B Cost	Provider C Cost
MRI of the Knee	\$682 to \$3,849	\$682	\$2,723	\$3,849
Colonoscopy	\$1,182 to \$4,749	\$1,182	\$2,932	\$4,749

¹Examples shown are for specific locations and time periods and are not intended to represent costs for procedures in your area.

NEW Benefit Starting 1/1/20!

SMARTSHOPPER

Vitals SmartShopper will go into place effective 1/1/20 for all employees and their dependents enrolled in the HDHP PPO \$2,000 Plan and the PPO \$400 Plan

Vitals SmartShopper is a program offered by Highmark that can help you:

- Compare costs and quality for common medical procedures
- Use the information provided to help estimate out of pocket costs
- Earn cash while shopping for care
- Save money and make the most efficient use of your health care benefits



Incentive and engagement
PROGRAM
to guide members to
high-quality, lower-cost options
with the goal of achieving potential
measurable savings for members,
plans and employers

SMARTSHOPPER

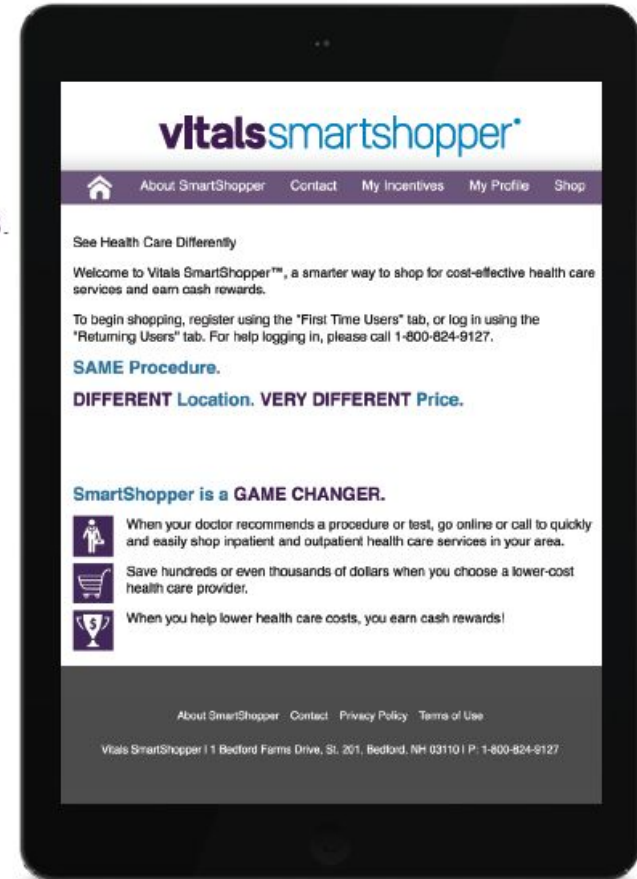
What Is Vitals SmartShopper?

Vitals SmartShopper is a new program offered by your health plan that can help you:

- Compare costs for numerous common medical procedures.
- Use the information provided to help you estimate out-of-pocket costs.
- Earn cash* while shopping for care.
- Save money and make the most efficient use of your health care benefits.

How Does It Work?

1. Your doctor recommends a medical service or procedure.
2. Call the SmartShopper Personal Assistance Team or shop online for lower-cost options in your area.
3. Have your procedure at the location of your choice.
4. If you select and use the lower cost services at an eligible location, you'll receive a check within 4 - 6 weeks*.



By using SmartShopper, you can qualify for a \$25-\$500 incentive reward! For those who are eligible for a reward, a check will be sent to your home.

SMARTSHOPPER

Save on these Health Care Services	Incentive Amount (Most Cost Effective)	Incentive Amount (2nd Most Cost Effective)	Incentive Amount (3rd Most Cost Effective)
Bariatric Surgery - Laparoscopic Gastric Bypass	\$500	\$150	N/A
Bariatric Surgery (Lap Band)	\$500	\$150	N/A
Bladder Repair for Incontinence (Sling)	\$250	\$75	\$50
Bladder Scope with Lithotripsy (Kidney Stone Fragmentation) or Stent	\$250	\$75	\$50
Bone and Joint Scan of Whole Body	\$150	\$25	N/A
Bone Density Study of Spine or Pelvis	\$50	\$25	N/A
Breast Biopsy Percutaneous with Imaging	\$150	\$75	\$50
Breast Lumpectomy	\$150	\$75	\$50
Bronchoscopy	\$150	\$75	\$50

SMARTSHOPPER

Carpal Tunnel with or without Scope	\$150	\$75	\$50
Cataract Removal	\$150	\$75	\$50
Colonoscopy	\$150	\$75	\$50
CT Angiography with or without Contrast	\$100	\$75	\$50
CT Scan with or without Contrast	\$100	\$75	\$50
Gall Bladder Removal (Laparoscopic)	\$250	\$75	\$50
Hammertoe Correction	\$150	\$75	\$50
Hernia Inguinal Repair (Age 5+, Non-Laparoscopic)	\$150	\$75	\$50
Hip Replacement	\$500	\$250	N/A
Hysterectomy	\$150	\$75	\$50
Hysteroscopy	\$150	\$75	\$50

MAIL ORDER VS. RETAIL

Mail order may be for you if:

- You like saving time and money
- You forget to order or pick up refills
- You require long-term maintenance medications

Benefits:

- Free shipping
- Can order a 90-day supply
- Cheaper than retail
- Improved medical adherence



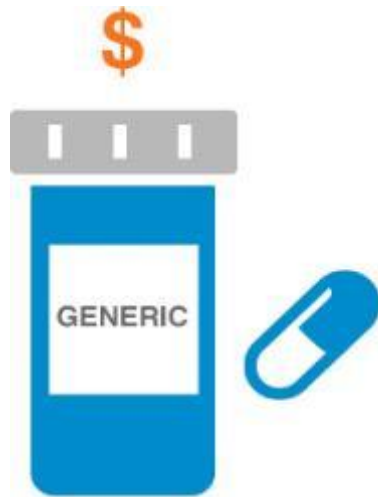
Retail pharmacy may be for you if:

- You need medication right away
- You take a compound medication
- You like the “personal” touch

Benefits:

- Same day pick-up
- Many have a drive thru window
- Improved medical adherence

GENERIC VS. BRAND MEDICATION



VS



- 80% – 85% cheaper
- Same:
 - ✓ Active Ingredient
 - ✓ Strength
 - ✓ Dosage Form
 - ✓ Route of Administration
- Bioequivalent to brand-name

- Lack of policies to keep price down
- Consumers paying for:
 - Development costs
 - Marketing
 - Profit

URGENT CARE VS. EMERGENCY ROOM



Minor Emergencies

- ✓ Sprains & Broken Bones
- ✓ Flu & Colds
- ✓ Other Common Illnesses
- ✓ Ear, Eye & Other Infections
- ✓ Sore Throat
- ✓ Fevers
- ✓ Minor Stitches

PPO COPAY - \$50

HDHP COST - \$150-\$300

Life/Limb Threatening Conditions

- ✓ Signs of Heart Attack
- ✓ Signs of Stroke
- ✓ Severe Shortness of Breath
- ✓ Poisoning
- ✓ Coughing up or Vomiting Blood
- ✓ Uncontrollable Bleeding
- ✓ Loss of Consciousness

PPO COPAY - \$100

HDHP COST - \$1,000 MIN

SWIFTMD COST - \$0

WELLNESS PARTICIPATION INCENTIVE PROGRAM

WELLNESS PARTICIPATION INCENTIVE PROGRAM

- During 2019, Wilkes University implemented a Wellness Participation Incentive Program.
- All employees enrolled in the medical plans for the 2020 plan year who completed one of the following activities by the end of 2019, will receive additional funds into their HSA or avoid a premium increase to their PPO contributions.
 - **\$250 single/\$500 all other coverage levels**

Date	Time	Event	Location
10/8	10am to 12pm	Biometric Screenings	Wilkes Ballroom
11/7, 11/14 and 11/21	Noon	Cardio/Strength Training	YMCA Group Exercise Room
11/8	Noon	Healthy Eating Strategies	Marts Hall of Fame Room
11/15 and 11/22	Noon	Dance/Cardio Workout	Darte Center Lower Level Studio
11/18	11:30 AM	Mindfulness/Self Care Workshop	Ballroom, Henry Student Center

NEXT STEPS

NEXT STEPS

- Fill out your benefit elections via the Maxwell Health portal between November 4 and November 22
- **This is an ACTIVE enrollment which means all employees must log into the Maxwell Health portal to make benefit elections. Last years elections will NOT carryover.**
- Elections made are for the full plan year and cannot be changed mid-year unless a life event occurs.
- An email with instructions on how to enter the portal for Open Enrollment will go out to all employees.

**ALL ENROLLMENTS MUST BE
COMPLETED BY END OF DAY
NOVEMBER 22, 2019**

QUESTIONS