



**UNIVERSITY OF THE
INCARNATE WORD®**

2020-2021

Benefits Open Enrollment

Open Enrollment Agenda

- Welcome
- OE General Information
- MetLife
- Catholic Life
- Aflac
- Proficient
- Gilsbar

Insurance Benefits Committee Members

Sr. Walter Maher	VP for Mission & Ministry
Darrell Haydon	CFO & VP Administrative Svcs
Cindy Escamilla	Vice President of Legal Affairs & General Counsel
Dr. Ronda Gottlieb	Director of Clinical Health
Dr. Jeff Copeland	Assistant Dean of Experiential Programs- Pharmacy
Dr. David Vequist	Professor - HEB School of Business and Administration
Dr. Shandra Esparza	Associate Professor - Nursing & Health Professions
Elisa Gonzales	Assistant Comptroller
Scott LeBlanc	Director of Sports & Wellness
Renee Moody	Benefits Manager
Janine Chavez	Secretary/Office Coordinator - Campus Engagement
Annette Thompson	Chief Human Resources Officer
Shannon Root	Director Human Resources

Open Enrollment Period

April 14 – April 30, 2020

- Open Enrollment is the time to enroll in insurance benefits (medical, dental, vision, life, flexible spending)
- **Enroll** or **waive** benefits online through Banner Self-Service via Cardinal Apps
- Benefits will not roll over from the previous year
- Benefit elections are effective June 1, 2020

What's staying the same

- All medical and vision plans premiums and coverages will remain the same
- Medical subsidies will continue for employees earning less than \$48,000
- Proficient flexible spending, AFLAC, and Catholic Life benefits will continue

Benefit Changes

- Flexible spending health reimbursement will increase from \$2,700 to \$2,750
- Dental increase in monthly premium

	Old Premium	New Premium
Employee Only	\$15.96	\$18.36
Employee & Spouse	\$33.80	\$38.88
Employee & Child(ren)	\$35.92	\$41.32
Employee & Family	\$54.14	\$62.26

MetLife

MetLife Vision Plan

Benefits	Frequency	Co-Payment	Network Doctor	Non-Network Doctor
Exam	12 months	\$10	Paid in full after a \$10 co-pay	Up to \$45
Lenses	12 months	\$25 (applies to lenses and/or frames)	Single Vision, Lined Bifocal And Lined Trifocal lenses. Polycarbonate for dependent children	Single - \$45 Bifocal - \$50 Trifocal - \$65
Frame	12 months	\$25 (applies to lenses and/or frames)	\$130 retail allowance 20% off of the retail difference for frames outside of the allowance	Up to \$70
Contact Lenses Elective	In place of lenses and frames	Up to \$60 for the evaluation and fitting	\$130 allowance for contacts*	Up to \$105

Monthly Payroll

Deduction

Employee Only: 4.08

Employee/Family: 9.56

*If prefer contact lenses, the plan provides an allowance for contacts instead of lenses and frames

MetLife Long Term Disability Benefits

100% Employer Paid

- Class Description All regular full-time employees who work a minimum of 40 hours per week or full-time faculty who teach a course load of at least 75%
- Eligibility Waiting Period After 180 days of employment
- Benefit Percentage 60%

CATHOLIC^tLIFE INSURANCE

Catholic Life Basic Life and AD&D Benefits

- Face Amount (Basic Life & AD&D) 1X basic annual salary rounded to next \$1000 (maximum of \$250,000)
- **100% Paid by Employer**
- Age Reduction Schedule 35% at age 65
60% at age 70
75% at age 75
- Waiver of Premium Included
- Accelerated Death Benefit 6 months; 75% up to \$250,000

Catholic Life Voluntary Supplemental Life and AD&D Benefits

Employee Minimum Benefit	\$10,000
Employee Additional Benefit	\$10,000 increments Lesser of 5X salary or \$500,000
Spouse Minimum Benefit	\$5,000
Spouse Additional Benefit	\$5,000 increments; 50% of employee amount to max of \$150,000)
Dependent Child Benefit	\$500 live birth–14 days \$10,000 for age 15 days–19 years or age 25 if full-time student Increments of \$2,000
Guarantee Issue to age 65 (excluding Late Entrants)	Employee–3X salary or \$130,000 Spouse–\$50,000 Child–\$10,000

Catholic Life Voluntary Supplemental Life and AD&D Benefits

Voluntary Supplemental Life

<u>Age Band</u>	Unisex rate per \$1,000
• <30	\$0.06
• 30–34	\$0.08
• 35–39	\$0.09
• 40–44	\$0.12
• 45–49	\$0.23
• 50–54	\$0.33
• 55–59	\$0.64
• 60–64	\$0.90
• 65–69	\$1.74
• 70-74	\$4.76
• 75	Coverage expires
• Each Child	\$0.08

Voluntary AD&D Unisex Rate per \$1,000

- Employee \$0.03
- Spouse: \$0.03
- Child: N/A
- Note: AD&D coverage cannot exceed Basic Life amount

Aflac™

Plans available

This information is for illustrative purposes only. Policy provisions will prevail.

Short Term Disability	If you have an off the job accident or illness and can't come to work, how will you keep paying your bills? Aflac's short term disability policy will pay benefits directly to you.
Cancer	Did you know 66% of cancer expenses are not medical expenses? Aflac's cancer plan can help when you need to focus on getting better, not what it costs
Hospital	Deductibles and out of pocket expenses can be scary at a time when you need to focus on care. Aflac's hospital plan has a lump sum benefit for inpatient services, a short stay benefit and an emergency room benefit.
Accident	Accident's happen! The accident plan pays benefits directly to you if you have an accident – on or off the job!
Plus Rider	Pays a \$5000 benefit upon diagnosis of heart attack, stroke, type 1 Diabetes, traumatic brain injury, Alzheimer's disease, Parkinson's disease, ALS or Lou Gehrig's Disease, MS and a number of other major medical events.

Aflac

For any AFLAC changes or enrollment please contact

- Andrea Rendon
- Phone 210-842-2713
- Fax 210-495-5895
- andrea_rendon@us.aflac.com
- www.aflac.com

AFLAC Video and information on UIW HR Website

University of the Incarnate Word

Section 125 – Cafeteria Plan

2020

Administered by:



Third Party Administration
Section 125 * HRA * HSA* COBRA

8502 Huebner, #300
San Antonio, TX 78240

www.proficientbenefits.com

Flexible Spending

The FSA allows the participant to open up to two types of special “Spending” accounts.

- Health Reimbursement Account
 - Allows employee to pay for their families unreimbursed, qualified health (medical, dental, vision, Rx) related expenses using money set aside from their paycheck on a pre-tax dollars
 - No requirement that the employee has coverage under any other UIW benefit plan
 - Expenses for employee, spouse and children (children must be 26 or under; no tax dependency required)
 - The maximum annual election amount is \$2,750
- Dependent Daycare Account
 - Allows the employee to pay for dependent daycare expenses
 - The maximum annual election amount is \$5,000 if single or married filing joint tax returns; \$2,500 if married filing individual tax returns

How Does The FSA Work?

- Estimate your families unreimbursed health/daycare expenses for the upcoming plan year
- Enroll in the FSA, either one or both
- Use your debit card to pay for eligible expenses as they are incurred; file manual claims for daycare reimbursement. A recurring day care claim form can be used
- Eligible Expenses
 - Co-Payments, Deductibles, Coinsurance
 - Dental Expenses (Fillings, Root Canals, Crowns, Bridges, Extractions, Orthodontia)
 - Glasses, Contact Lenses, Contact Lens Solution
 - Prescription Medications
 - OTC – Allergy Meds, Cough Syrup, Band-Aids, Rubbing Alcohol, Sunscreen, First Aid kits
 - **IMPORTANT NOTE: OTC drugs purchased January 1, 2020 going forward no longer need a prescription for eligibility. It will take some time before all merchants have updated their credit card terminals.**

Important Rules

- Receipts – Be sure to keep copies of all receipts; including those for services paid for with the Benefit MasterCard.
- Use or Lose Rule – any amount that is left in the account at the end of the runout period that is unclaimed is forfeited. Plan carefully and be conservative in your estimates. Grace Period through 8/15/2021.
- Timely Filing Deadline – the deadline for filing all health claims is 90 days after the end of the grace period, (11/15/2021) or 90 days from your termination date; the deadline for daycare claims is 8/31/2021 – Grace Period does not apply
- Flex Card Transactions – some transactions will require that you send a copy of your receipt after your purchase. Proficient Benefit Solutions will notify you when it's time to send a copy.
- Sign up for Proficient Connect either through the online portal or through a mobile app
- Direct deposit is free! Set this up through Proficient Connect

University of the Incarnate Word



Presented by: **Gilsbar, LLC**

Presented on: **April 14, 2020**

Why Do I Need Insurance?

- Insurance is for the unforeseen illnesses in your life.
- Insurance is to help keep these things from happening by providing you with preventive care at no cost.
- Insurance is to help offset any cost that might happen if you have an unforeseen illness.
- COVID-19 Coverage



2020 What is Changing?

- Medical – no plan changes
- Dental – premium increase with no plan changes
- FairOS will replace PayerCompass/CareValent



2020 Medical Benefit Options



UIW Bronze

UIW Silver

CIGNA

In-Network

Out of Network

	UIW Bronze	UIW Silver	In-Network	Out of Network
Plan Pays	70% after deductible	100% after deductible	100% after deductible	70% after deductible
Annual Health Fund (Per calendar year)	N/A	\$500 Employee per calendar year, per member	\$500 Employee per calendar year, per member	N/A
Deductibles (Per Calendar Year)	\$1,500 Individual \$3,000 Family	\$1,000 Individual \$2,000 Family	\$1,000 Individual \$2,000 Family	\$3,000 Individual \$6,000 Family
Out-of-Pocket Maximums (Per Calendar Year)	\$4,000 Individual \$12,000 Family	\$1,000 Individual \$2,000 Family	\$1,000 Individual \$2,000 Family	\$4,500 Individual \$9,000 Family
Lifetime Maximum	Unlimited	Unlimited	Unlimited	Unlimited
Hospital Services				
Inpatient	100% after \$250 co-pay/first 5 days	100% after deductible	100% after deductible	70% after deductible
Outpatient	70% after deductible	100% after deductible	100% after deductible	70% after deductible
Physician Services				
Office Visit -PCP	\$25 co-pay per visit	100% after deductible	100% after deductible	70% after deductible
Specialist	\$45 co-pay per visit	100% after deductible	100% after deductible	70% after deductible
Preventative Services	100% deductible & co-pay waived	100% deductible waived	100% deductible waived	70% after deductible
Emergency Room	100% after \$150 co-pay per visit	100% after deductible	100% after deductible	100% after deductible
Urgent Care	100% after \$50 co-pay	100% after deductible	100% after deductible	70% after deductible
MDLive	100% deductible waived	100% deductible waived	100% deductible waived	N/A
Prescription Drug Benefit	\$10/\$25/\$50	\$10/\$25/\$50	\$10/\$25/\$50	30% after copay
Mail Order (90 day supply)	1.5X	1.5X	1.5X	1.5X

2020 Networks

CIGNA Network

- Access to a well-known national network, with claims paid by a TPA
- Better in-network benefits
- Benefits owned by the University
- Out-of-network benefits available



Reference-Based Pricing BRONZE & SILVER

- Claims are paid based on Medicare pricing
- No network & wider provider access
- Lower premiums & out-of-network costs



Fairos

Fairos FAQ

IS THERE A SPECIFIC NETWORK OR PROVIDER LIST I SHOULD USE?

Yes, there is a list of providers that can be accessed by contacting Gilsbar at 877-301-2988. Fairos is also an open network and members can use the doctor or hospital of their choice as part of this plan.

WHAT IF MY DOCTOR OR HOSPITAL HAS QUESTIONS ABOUT MY PLAN?

Your doctor or hospital should contact Gilsbar at 877-301-2988 regarding questions about your plan.

The provider performing your medical procedure may request money from you upfront, however, you as the patient are only responsible for your deductible and coinsurance. Please contact Gilsbar to confirm your responsibility.

HOW DO I DETERMINE WHAT MY OUT OF POCKET RESPONSIBILITY IS?

A provider submits a balance bill when they are trying to collect more than is allowed by the plan for the services rendered as indicated on the member's Explanation of Benefits (EOB).

WHAT IS A BALANCE BILL?

WHAT SHOULD I DO IF A PROVIDER SENDS ME A BALANCE BILL?

Contact Gilsbar immediately and Gilsbar will review the bill with you to determine if there is additional patient responsibility. Once Gilsbar confirms the balance bill, you will be transferred to a Member Advocate at Fairos.

SHOULD I PAY MY RESPONSIBILITY IF THE PROVIDER BILLS FOR MORE THAN THE EOB SAYS IS MY RESPONSIBILITY?

You should pay your patient responsibility as defined by your benefit plan and explanation of benefits (EOB) as soon as possible. Paying your patient responsibility does not mean you are assuming responsibility for the entire bill.



MDLive

What is MD Live?

- 24/7/365 on-demand access to affordable, quality healthcare. Anytime, Anywhere.
- With MDLIVE, you can visit with a doctor 24/7 from your home, office or on the go. Our network of Board Certified doctors is available by phone or secure video to assist with non-emergency medical conditions.

When should I use MDLIVE?

- Instead of going to the ER or an urgent care center for a non-emergency issue
- During or after normal business hours, night, weekends and even holidays
- If your primary care doctor is not available
- If traveling and in need of medical care

How much does it cost?

- This service is free of charge for members on the medical plan and their household. Please note, a parent or guardian must be present during any interactions involving minors.




MD Download the App

Doctor visits are easier and more convenient with the MDLIVE App. Be prepared. Download today.



New ID Card

- Look for a new card in the mail around 6/1.
- All medical and pharmacy claims on one ID card.
- Present card to every provider/pharmacy.
- Primary Members name on ID card. Each family will receive 2 copies. You can order as many as you like on mygilsbar.com.
- Claims & Benefit information is listed on the back of ID card.
- Electronic copies of ID card can be pulled up online or on any mobile device.

Gilsbar  **UNIVERSITY OF THE INCARNATE WORD**

Member

UNIVERSITY OF THE INCARNATE WORD

Group #: S2855

Member: JOHN SAMPLE

Member ID: 2855000000

Medical Plan

Effective:

UIW Silver Plan

This Plan accesses no network. All claims paid at the Maximum Allowable Amount, generally 120% of Medicare. See the applicable Plan Document for details.

Other Plans

Dental:

Effective:

Pharmacy Plan

RxBIN: 005377
RxPCN: 10000019
RxGroup: S2855

MAXORplus
PHARMACY BENEFIT MANAGEMENT SERVICES
www.maxorplus.com
Help Line: 800-687-0707

How to Contact Gilsbar

- Should you have questions or need guidance during your open enrollment, call **Gilsbar's Care Advocacy: 877-301-2988.**
- Our friendly and knowledgeable Care Advocates are available to you Monday through Friday from 7 am – 7 pm CST.



Phone:
877-301-2988

Email: customerservice@gilsbar.com

Member Online Experience

The screenshot shows the myGilsbar member portal interface. At the top, there are navigation tabs for FSA's or HRAs, Enrolled Benefits, Claims Detail, Wellness, and Forms. The main content area is divided into several sections:

- Last 5 Claims:** A table listing recent miscellaneous payments for John Black, including service dates, current statuses, and total charges.
- Last 5 Prescriptions:** A table listing recent prescriptions from GB Pharmacy, including service dates and total charges.
- ACCOUNT SUMMARY:** A section for John Black showing deductibles for In-Network and Out-of-Network services. Each category has a Family Deductible and a Family Out-of-Pocket Max, both currently at 0%.
- Left Sidebar:** A navigation menu with 'MY' branding and links for Benefits, Claims Summary, Provider Search, Rx Details, and Resource. It also includes a 'NEED HELP? CONTACT US' button.
- Right Sidebar:** A vertical menu of service tiles including 'QUESTIONS? CONTACT US', 'VIEW OR REQUEST ID CARD', 'FIND A PROVIDER', 'WELLNESS CENTER', 'UPLOAD WELLNESS VERIFICATION', 'LIVEWELL RESOURCES', and 'FORMS'.



Check medical plan accumulators & print ID cards



Review your claim EOBs and prescriptions history



Search the provider directory & view your benefits



Questions? Call 877-301-2988 or email customerservice@gilsbar.com

Explanation of Benefits (EOB)

Gilsbar
 GILSBAR, L.L.C.
 P.O. Box 2947
 COVINGTON LA 70434-2947

20140720003
 1067 4024

J1DA [7,235] 14 of 47

Explanation of Benefits



[DR-DR]

**RETAIN FOR TAX PURPOSES
 THIS IS NOT A BILL**

Forwarding Service Requested

MISCELLANEOUS PAYMENT
 PO BOX 998
 COVINGTON LA 70434

7,235

Customer Service

For Customer Contact Center Call
 New Orleans: 504-529-3505 Local: 985-892-3520
 Provider: 888-215-9841 Member: 888-472-4352

**For claims and benefit information,
 visit www.myGilsbar.com!**

Group: DEMO GROUP

Group#: Z8811 - 0000000000 - 00002
 Check#: N/A
 Paid Date: 7/15/2014

Claim#: 141961008-I

Member ID: 8811000000

Member: CHARLES BLACK

Patient: MARY BLACK

Patient#:

Line No.	Provider	Dates of Service	Procedure Code	Total Charges	Excluded Charges	Co-pay Amount	Deductible Amount	Covered Expense	Paid At	Payment Amount	
01	MISCELLANEOUS PAYMENT	03/07-03/07/2014	99284	\$595.00	\$119.00	\$150.00	\$0.00	\$326.00	80%	\$260.80	
02	MISCELLANEOUS PAYMENT	03/07-03/07/2014	99053	\$100.00	\$20.00	\$0.00	\$0.00	\$80.00	80%	\$64.00	
Column Totals				\$695.00	\$139.00	\$150.00	\$0.00	\$406.00		\$324.80	
Patient's Responsibility: \$231.20											
										Payment Amount	\$324.80
										Total Payments	\$324.80

Payment Details

Paid To	Amount
BLACK CHARLES	\$324.80

Claim Reason

1,2 (Line 1-\$119.00)(Line 2-\$20.00)PPO discounted services which you are not obligated to pay.
 141961008-I 1 If your plan has a major medical deductible, the co-payment does not apply to it.

Appeal Language

Appeals must be received within 180 days of claim notification and should be directed to Gilsbar L.L.C., Attn: Appeals, P. O. Box 998, Covington, Louisiana, 70434.

Gilsbar, L.L.C. A member of the Gilsbar Group of Companies dba
 Gilsbar Administrators & Insurance Services in California



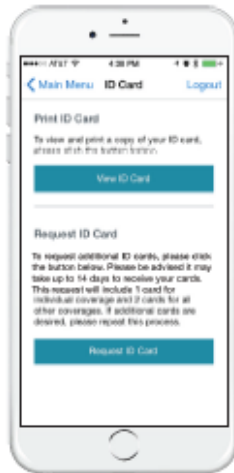
Manage Your Account

- After June 1st, activate your account online or log in: visit www.myGilsbar.com.
- Register as a “First Time User” as a participant if you have never registered before.
- Complete the registration form, you will need:
 - Your group number: **S2855**
 - A valid, personal email address
 - The last four digits of your social security number
- You will receive an email confirmation, click the link within it to confirm your registration.

Member Mobile Experience

Manage your account through the mobile app!

- Search **myGilsbar** in Google Play or Apple App Store
- Download the app and log in using your normal username & password



Check medical plan accumulators & print ID cards



Review your claim EOBs and prescriptions history



Search the provider directory & view your benefits



Questions, contact Gilsbar at 877-301-2988 or customerservice@gilsbar.com

FINAL REMINDERS

- Open enrollment 4/14/2020 – 4/30/20
- Resources at UIW HR Webpage:
 - Online Benefit Book
 - Videos
 - Enrollment Instructions
- One-on-one meetings: Use the link for Sign Up Genius
<https://www.signupgenius.com/go/9040b4eacab2ea4fe3-open>
- All benefit eligible employees must enroll or waive online through Self-Service
- Enroll or re-enroll in flexible spending annually
- UIW Human Resources
210-829-6019 or e-mail uiwhr@uiwtx.edu