



January 1, 2020 BENEFITS

Carrier Information: Existing carriers will continue administering all of our benefits in 2020.

- Medical – BCBS
- Dental – Delta Dental
- Vision – VSP
- Life & Disability – The Standard
- Accident, Critical Illness & Hospital Indemnity – MetLife
- The Zero Card
- FSA/HSA – Chard Snyder

Medical Plan Offerings: While remaining with Blue Cross Blue Shield, we will be streamlining our plans from five to four plan designs. We will offer Plan A (new Preferred network for 2020), Plan B, Plan C and Plan F. Plan F is the only one eligible for a Health Savings Account (HSA).

Dental Plan Offerings: We offer three dental plans. High Option, Low Option and Preventative Only Option. Deductibles have changed for the Low and High plans. These provide you with options to fit your dental care needs.

Health Savings Account (HSA): You have access to a Health Savings Account if you elect Plan F. When you have a qualifying High Deductible Plan, you can set aside money in a tax-free account to pay your qualified out-of-pocket costs. Any money left over in your HSA remains **yours**, allowing you to grow your funds over time. Even if you cancel your policy, for any reason, that HSA will remain active, and any money already in it will remain usable.

Flexible Spending Accounts (FSA): You have access to the Flexible Spending Accounts if you enroll in any other benefit beside Plan F. You can set aside money in a tax-free account to pay your qualified out-of-pocket costs. Any money left in your FSA on December 31st will be lost if balance is above \$500. Any balance \$500 and below will roll into the 2021 plan year.

NEW

VOLUNTARY SHORT TERM DISABILITY: We now offer STD through The Standard to bridge the gap with your LTD!!

LIFE, LONG TERM DISABILITY AND VISION = NO CHANGES!

When can I Enroll?

October 25th, 2019 – November 8th, 2019

To enroll, please log on to my.tb360.com/okhee1

Please see reverse side for details on plan designs and contact information. Please note these are highlights only. Refer to your plan documents for full definitions.

MEDICAL PLANS:

| Coverage | PLAN A | PLAN B | PLAN C | Plan F |
|---|--|--|---|---|
| Network: | Blue Preferred | Blue Preferred/Blue Choice | Blue Preferred | Blue Choice |
| Calendar Year Deductible (CYD): | \$750 Individual/\$2,250 Family | \$1,250 Individual/\$3,750 Family | \$1,500 Individual/\$4,000 Family | \$3,000 Individual/\$6,000 Family |
| Calendar Year Out of Pocket Max: (includes deductible & pharmacy/medical copays) | \$3,000 Individual/\$9,000 Family | \$3,500 Individual/\$10,500 Family BP \$4,000 Individual/ \$12,000 Family BC | \$4,000 Individual/ \$12,000 Family | \$6,650 Individual/\$13,300 Family |
| Member Coinsurance: | 20% after CYD | 20% after CYD - BP/ 30% after CYD - BC | 20% after CYD | 20% after CYD |
| Primary Office Visit Copay: | \$20 Copay | \$25 Copay – BP/ \$35 Copay – BC | \$35 Copay | 20% after CYD |
| Specialist Office Visit Copay: | \$40 Copay | \$40 Copay – BP/ \$50 Copay – BC | \$50 Copay | 20% after CYD |
| Diagnostics Lab/X-Ray: | 20% after CYD | 20% after CYD – BP/ 30% after CYD – BC | 20% after CYD | 20% after CYD |
| Emergency Room: | \$100 Copay; then 20% after CYD (waived if admitted) | \$150 Copay; then 20% - BP/ 30% - BC after CYD (waived if admitted) | \$150 Copay; then 20% after CYD (waived if admitted) | 20% after CYD |
| Urgent Care: | \$40 Copay | \$40 Copay - BP/ \$50 Copay - BC | \$50 Copay | |
| Generic Drugs: | Retail: 25% of allowed amount; \$25 Min/\$50 Max Mail Order: 25% of allowed amount; \$75 Min/\$150 Max | | | 20% after CYD |
| Preferred Brand Name Drugs: | Retail: 25% of allowed amount; \$25 Min/\$50 Max Mail Order: 25% of allowed amount; \$75 Min/\$150 Max | | | 20% after CYD |
| Non Preferred Brand Name Drugs: | Retail: 50% of allowed amount; \$50 Min/\$100 Max Mail Order: 50% of allowed amount; \$150 Min/\$300 Max | | | 20% after CYD |
| Specialty Drugs: | 50% of allowed amount; \$50 Min/\$100 Max (Limited to 30 day supply) Specialty Drugs must be ordered through Prime Therapeutics (no mail order available) | | | 20% after CYD |
| | Ep Day Supply Limit Retail. Up to 90 Day Supply of Maintenance Drugs Up to 90 Day Mail Order Supply, In-Network Only | | | |

CONTACT INFORMATION

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| Medical: BCBS | 1-800-672-2567 www.bcbsok.com/okhee1 |
| Dental: Delta Dental | 1-800-522-0788 www.deltadentalok.org |
| Vision: VSP | 1-800-877-7195 www.vsp.com |
| Life & AD&D and Voluntary Life AD&D | The Standard 1-800-628-8600 |
| Disability: Short Term & Long Term | The Standard 1-800-368-2859 (STD) 1-800-368-1135 (LTD) |
| Accident, Critical Illness, & Hospital Indemnity: | MetLife 1-800-438-6388 |
| FSA & HSA | Chard Snyder 800-982-7715 |

REMEMBER! Everyone must log in to make changes or elect to keep the same benefits!

DENTAL PLANS:

| COVERAGE | HIGH OPTION | | | LOW OPTION | | | PREVENTIVE |
|-------------------|--|------------------------|------------------------|----------------------------------|-------------------------|-------------------------|------------------------|
| | PPO NETWORK | PREMIER NETWORK | OUT OF NETWORK | PPO NETWORK | PREMIER NETWORK | OUT OF NETWORK | |
| Annual Deductible | \$50 Ind./\$150 Family | \$50 Ind./\$150 Family | \$50 Ind./\$150 Family | \$100 Ind./\$200 Family | \$100 Ind./\$200 Family | \$100 Ind./\$200 Family | \$50 Ind./\$100 Family |
| Annual Maximum | \$2,000 Per Person/Calendar Year (Orthodontia not part of Annual Max) | | | \$1,000 Per Person/Calendar Year | | | \$750 Per Person |
| Preventative Care | COVERED 100%, NO DEDUCTIBLE | | | COVERED 100%, NO DEDUCTIBLE | | | 100% after deductible |
| Basic Services* | 85% after deductible | 70% after deductible | 70% after deductible | 75% after deductible | 70% after deductible | 70% after deductible | 80% after deductible |
| Major Services | 60% after deductible | 50% after deductible | 50% after deductible | 60% after deductible | 50% after deductible | 50% after deductible | NO COVERAGE |
| Orthodontic Care | Unlimited Per Child (Children under the age of 26) | | | NO COVERAGE | | | NO COVERAGE |

*Note: Endodontics, Periodontics, and oral surgery only covered under the High and Low option plans.