Benefits Update for 2014 Officers

Fall 2013 Information Session
Today’s Discussion

• Benefits Open Enrollment
• What’s New in 2014
• Medical Plan Costs
Benefits Open Enrollment

- Open Enrollment runs from November 4\textsuperscript{th} – November 22\textsuperscript{nd}

- Exchange Notices mailed prior to October 1\textsuperscript{st}

- Postcard mailed home

- Video postcard emailed October 24\textsuperscript{th}

- Open Enrollment Guide posted online; mailed home
  \url{http://hr.columbia.edu/news/oe2014}

- Benefits Highlights posted online

\textbf{New Mobile Contact List}
\url{https://cubenefitsenrollment.ehr.com/Ess/MobileWalletCard/mobile/index.html}
Benefits Open Enrollment

• Benefit Expos & **free** Biometric Screenings
  – CUMC: November 7\textsuperscript{th} and 13\textsuperscript{th}, 11 am to 4 pm
  – Morningside: November 6\textsuperscript{th} and 14\textsuperscript{th}, 10 am to 3 pm
  – LDEO Benefits Forum: November 4\textsuperscript{th}, 10 am to 1 pm

• Open Enrollment Informational Sessions
  – CUMC: October 17\textsuperscript{th}, 9 to 10 am; 24\textsuperscript{th}, 4 to 5 pm
  – Morningside: October 14\textsuperscript{th} 10 to 11 am; 31\textsuperscript{st}, 2 to 3 pm
  – LDEO: November 4\textsuperscript{th}, 10 to 11 am
  – Studebaker: October 21\textsuperscript{st}, 2 to 3 pm
What’s New in 2014?

- Regulatory changes
  - Health Savings Account contribution increases to $3,300 for individuals and $6,550 for families. *Remember*: your account balance rolls over*

- ACA required changes
  - Every medical plan must have an annual out-of-pocket maximum for in-network services
  - Certain *Essential Health Benefits* must be covered without annual or lifetime dollar limits

- * FSA account balances do not roll-over
  - Health Care and Dependent Care claims for 2013 must be submitted by March 31, 2014, otherwise you will forfeit your account balance
What’s New in 2014?

• Other changes
  – Cigna’s provider network is now national (replaces the tri-state network)
  – Vision benefits under Cigna are now administered by Cigna Vision (replaces VSP)
  – The out-of-network reimbursement basis is reduced from 200% to 190% of Medicare MAC
  – The out-of-network reimbursement for outpatient Mental Health/Substance Abuse services is increased from 60% to 70% of the reimbursement basis
  – The Child Care Benefit is increased from $1,000 to $1,500 per year
New in-network OOP Maximum for POS 100

- All medical plans currently include an in-network OOP maximum, except the POS 100 plans.

- The ACA requires an in-network out-of-pocket maximum on all medical plans in 2014, and to which:
  - Medical copays accumulate in 2014
  - Rx copays additionally accumulate in 2015

- The in-network OOP maximum is $3,000 single/$6,000 family for the POS 100 plans (by law it can be as much as $6,350 single/$12,700 family).

- The out-of-network OOP maximum remains at $3,500 single/$7,000 family for the POS 100 plans.
New Infertility and Pediatric Vision Benefits

• Under the ACA certain benefits are Essential Health Benefits, on which annual and lifetime dollar limits cannot apply

• Infertility benefits
  – Basic infertility services are covered without limit
  – Associated prescription drugs are covered without limit
  – Advanced reproductive treatments (IVF, GIFT, ZIFT) are covered up to a lifetime maximum of $30,000

• Pediatric (< age 19) vision benefits vary by health plan/vendor
  – One routine eye exam every 12 months, with coinsurance or copays
  – Eyeglasses, frames or CLs vary, but one pair per year in general
New out-of-network (OON) Reimbursements

• OON Basis
  – Current basis for OON reimbursement is 200% of Medicare MAC
  – New basis for OON reimbursement is 190% of Medicare MAC

• OON Reimbursement for Mental Health/Substance Abuse (MH/SA) services
  – Current OON reimbursement for all services is 60% of 200% of Medicare MAC
  – New OON reimbursement for outpatient MH/SA services is 70% of 190% of Medicare MAC
  – Includes out-patient programs and out-patient counseling
Medical Plan Costs

- Medical plan contributions will increase in 2014 as a result of claims experience and overall health care trend

- Tiered contribution structure unchanged
  - Less than $45,000
  - $45,000 to $78,999
  - $80,000 to $134,999
  - $135,000 to $174,999
  - $175,000 to $224,999
  - $225,000 and above
### Monthly Contributions

Example: Single coverage, salary of $40,000

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<tr>
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<th>2013</th>
<th>2014</th>
<th>Increase</th>
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## Monthly Contributions

Example: Yourself + spouse/SSDP, salary $70,000

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# Monthly Contributions

Example: Family, salary $90,000

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Monthly Contributions

Example: Family, salary $150,000

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Appendix
HSA versus Health Care FSA

• The health care FSA limit is $2,500 annually for 2014
  – Use it or lose-it approach; cannot invest funds
• The HSA is limited to $3,300/$6,550 subject to change by the IRS annually
  – Can roll over funds; account is portable; can invest funds
• Cannot participate in both HSA and FSA
• If enrolled in HDHP, can participate in HSA or FSA
• If enrolled in a POS plan, can only participate in FSA
• If over age 65, and in the HDHP, can only elect the FSA
  – Can use HSA account to pay for qualified medical expenses, but can no longer make contributions to the account