



Vanderbilt University

Postdoctoral Trainee Benefits Program

Open Enrollment Plan Year 2016-2017

September 19th through September 28th

Presented by: Garnett-Powers & Associates, Inc. (GPA)







- The Role of GPA and the Insurance Carriers
- Review of all Benefits, Rates and Plan Designs
- Explanation of the Patient Protection and Affordable Care Act (ACA)
- Explanation of Online Open Enrollment Process
- Q & A

The Role of GPA and the Insurance Carriers



Garnett-Powers & Associates Inc. (GPA)	Insurance Carriers
Broker and benefits administrator	Provider of actual benefits (i.e. Medical, Dental, Vision)
Customer service provider	Access to Providers
Design, market, implement and administer benefit programs for Postdoctoral Scholars at many campuses throughout the U.S.	Pays the claims associated with your care



- Open Enrollment is an annual period of time designated to allow current enrollees the opportunity to make changes to their coverage that are otherwise not allowed throughout the rest of the year, unless you experience a qualifying life event
- Examples of qualifying life events are:
 - Marriage

G P A

- Divorce
- Birth of a child
- Death of a dependent
- Adoption or placement of adoption of a child
- Loss of coverage
- Dependent arrival in the U.S.
- Dependent loss of eligibility due to attainment of age 26

• Open Enrollment also allows those Postdocs who initially waived coverage to now enroll, including dependents



What is Open Enrollment? (cont.)



All Postdocs currently enrolled in the Vanderbilt Postdoctoral Trainee Benefit Program have the option of making the following changes during the Open Enrollment Period from **September 19th – September 28th :**

- Change Medical plan and/or Dental plan
- Enroll in the voluntary vision plan if previously waived
- If you previously waived either yourself and/or your family members, you/they may enroll in the program at this time
- All changes will be effective October 1st, 2016
- If you are not changing your current enrollment, no action is necessary

Benefits Offered Through the Postdoctoral Trainee Benefits Program

Plan Name	Insurance Type	Company
80/60 PPO Base Plan	Medical	aetna™
90/70 PPO Buy-Up Plan	Medical	aetna™
HMO	Dental	<mark>aetna</mark> ™
PPO	Dental	aetna™
PPO	Vision (Voluntary)	ASSURANT
Life and AD&D	Life	TheStandard
LTD	Disability	The Standard





Benefit Plan/Rate Changes for Plan Year 2016/2017

Plan	Monthly Rate
Medical (no change to benefits)	5% increase from previous plan year
Dental (no change to benefits)	5% increase from previous plan year
Vision (no change to benefits)	Same as Plan Year 2015/2016
Disability (no change to benefits)	Same as Plan Year 2015/2016
Life (no change to benefits)	Same as Plan Year 2015/2016

• <u>Action Required</u>:

- No action required if you want to keep the same benefits as the prior Plan year (2015/2016)
- If you want to make changes to your plans, or if you are adding dependents to the plan, you must complete and submit an Open Enrollment Form during the Open Enrollment period





MEDICAL INSURANCE

Provided by



What is a PPO Plan?



- The PPO plan offers more flexibility and choice than the HMO plan due to the In-Network and Out-of-Network selection you make at the time you seek services
- The In-Network benefits (copays/coinsurance) will be covered at a higher level than the Out-of-Network benefits
- At the time of service, you have the ability to seek care from a Specialist, without having to obtain a referral from a PCP
- The contractual agreement between the PPO Plan and the In-Network Provider is on a "discounted fee for service" basis
- You will pay more out-of-pocket when you seek services Out-of-Network because those physicians are not providing the same contracted discounts as the In-Network physicians





- The Open Choice PPO 80/60 plan offers you comprehensive benefit coverage with an In-Network and Out-of-Network benefit as well as prescription drug benefits
- This plan is the base plan, or 'default plan' that the University offers at no cost to the postdoc
- Before enrolling your eligible dependents, please check with your Department Administrator to assure that your dependents are eligible for the plan



Postdoctoral Trainee Benefits Program



Aetna 80/60 Base Medical Plan

Core Benefits	In-Network	Out-of-Network
Deductible	\$500 / Individual \$1,000 / Family	\$1,000 / Individual \$2,000 / Family
Annual Maximum Out-of-Pocket	\$3,000 / Individual \$6,000 / Family	\$7,500 / Individual \$15,000/ Family
Lifetime Maximum	Unlimited	Unlimited
Physician Office Visit	\$25 Copay	40%
Specialist Visit	\$40 Copay	40%
Walk-in Clinics *	\$25 Copay	40%
Hospitalization	<i>Inpatient:</i> 20% + \$150 Copay AD <i>Outpatient:</i> 20% AD <i>Pregnancy:</i> 20% + \$150 Copay AD	<i>Inpatient:</i> \$300 Copay + 40% AD <i>Outpatient:</i> 40% AD <i>Pregnancy:</i> \$300 Copay + 40% AD
Prescription Drugs	Generic:\$10 CopayBrand:\$20 CopayNon Brand:\$35 Copay	Generic:\$10 + 50%Brand:\$20 + 50%Non Brand:\$35 + 50%



Postdoctoral Trainee Benefits Program (Continued)



Aetna 80/60 Base Medical Plan

Core Benefits	In-Network	Out-of-Network
Emergency Room Visits	\$100 Copay + 20%	\$100 Copay + 20%
Urgent Care	\$35 Copay	\$35 Copay
Routine Physical Exam	\$0	40% AD
Routine Gynecological Exam	\$0	40% AD
Routine Mammograms	\$0	40% AD
Mental Health	<i>Inpatient:</i> 20% + \$150 Copay AD <i>Outpatient:</i> \$40 Copay	<i>Inpatient:</i> 40% + \$300 Copay AD <i>Outpatient:</i> 40% AD

• *Walk-in clinics are network, free-standing health care facilities typically found within preferred pharmacies like Walgreens and CVS. The are an alternative to a physician's office visit for treatment or unscheduled, non-emergency illnesses and injuries and the administration of certain immunizations. It is not an alternative for emergency room services or the ongoing care provided by a physician. Neither an emergency room, nor the outpatient department of a hospital, shall be considered a Walk-in clinic.

For more detailed plan design information go to: <u>www.garnett-powers.com/vanderbilt</u>





Aetna 90/70 Buy-Up Plan

- The Aetna Open Choice PPO 90/70 Buy-Up Option Plan offers you comprehensive benefit coverage with an In-Network and Out-of-Network benefit as well as prescription drug benefits
- If you wish to be enrolled in this plan, you will be responsible for a monthly contribution depending on your enrollment tier
- Before enrolling your eligible dependents, please check with your Department Administrator to assure that your dependents are eligible for the plan



Postdoctoral Trainee Benefits Program



Aetna 90/70 Buy-Up Medical Plan

Core Benefits	In-Network	Out-of-Network
Deductible	\$250 / Individual \$500 / Family	\$500 / Individual \$1,000 / Family
Annual Maximum Out-of-Pocket	\$1,000 / Individual \$2,000 / Family	\$2,000 / Individual \$4,000 / Family
Lifetime Maximum	Unlimited	Unlimited
Physician Office Visit	\$20 Copay	30% AD
Specialist Visit	\$40 Copay	30% AD
Walk-in Clinics *	\$20 Copay	30% AD
Hospitalization	<i>Inpatient:</i> \$150 + 10% AD <i>Outpatient:</i> 10% AD <i>Pregnancy:</i> 10% + \$150 Copay AD	<i>Inpatient:</i> \$250 Copay + 30% AD <i>Outpatient:</i> 30% AD <i>Pregnancy:</i> \$250 Copay + 30% AD
Prescription Drugs	Generic:\$15 CopayBrand:\$35 CopayNon Brand:\$50 Copay	Generic:Not CoveredBrand:Not CoveredNon Brand:Not Covered



Postdoctoral Trainee Benefits Program (Continued)



Aetna 90/70 Buy-Up Medical Plan

Core Benefits	In-Network	Out-of-Network
Emergency Room Visits	\$150 Copay + 10%	\$150 Copay + 10%
Urgent Care	\$50 Copay + 10%	30% AD
Routine Physical Exam	\$0	30% AD
Routine Gynecological Exam	\$0	30% AD
Routine Mammograms	\$0	30% AD
Mental Health	<i>Inpatient:</i> \$150 Copay + 10% AD <i>Outpatient:</i> \$40 Copay	<i>Inpatient:</i> \$250 Copay + 30% AD <i>Outpatient:</i> 30% AD

* Walk-in clinics are network, free-standing health care facilities typically found within preferred pharmacies like Walgreens and CVS. The are an alternative to a physician's office visit for treatment or unscheduled, non-emergency illnesses and injuries and the administration of certain immunizations. It is not an alternative for emergency room services or the ongoing care provided by a physician. Neither an emergency room, nor the outpatient department of a hospital, shall be considered a Walk-in clinic.

For more detailed plan design information go to: <u>www.garnett-powers.com/vanderbilt</u>







2016/2017 Monthly Postdoc Contributions

Coverage Tier	Monthly Contribution	Monthly Increase
Postdoc	\$31.85	+ \$1.52
Postdoc + Spouse	\$73.93	+ \$3.53
Postdoc + Child(ren)	\$65.32	+ \$3.12
Postdoc + Spouse/Partner + Child(ren)	\$105.79	+ \$5.06

Summaries of Benefits and Coverage



- The Patient Protection and Affordable Care Act (PPACA) requires that you be notified that the Summaries of Benefits and Coverage for your medical plans are currently available on our website
- The Summaries of Benefits and Coverage follow the recommended guidelines of PPACA in a standardized format to make them easier to read and comprehend to better serve you in making your plan selections
- You may request a paper copy at no charge by calling the toll-free number on your new ID card
- You may also print a copy directly off of the GPA website

Prescriptions – Mail Order Pharmacy



- You can order maintenance medications through Aetna's Rx Home Delivery for chronic conditions as asthma, arthritis, diabetes, high cholesterol and heart conditions
- The costs on the 80/60 PPO Base Plan up to a 31-90 day supply are:
 - **Generic** = \$20

G P A

- Formulary Brand Name = \$40
- Non-formulary brand name = \$70

•The costs on the 90/70 PPO Buy-Up Plan up to a 31-90 day supply are:

- **Generic** = \$30
- Formulary Brand Name = \$70
- Non-formulary brand name = \$100

• Please visit <u>www.garnett-powers.com/vanderbilt/aetna.htm</u> for mail order information



Wellness Programs

- Aetna Navigator This is a simple and secure online member portal that allows you to view your medical visits and claims status, print temporary ID cards and gain access to more important information to manage your healthcare
- Once you have your member ID, you may register for access to this site. There will be instructions on the website to assist you

- **Beginning Right Maternity Program** Provides a pregnancy risk survey and a wealth of information to assist you when either you or your spouse become pregnant
- Fitness Discount Program You'll receive lower rates on gym membership in the large GlobalFit[™] network, plus receive discounts on health coaching and fitness equipment
- Informed Health Line By calling a toll-free number, you can get answers to questions from a registered nurse 24/7, 365 days a year regarding health conditions, medical tests or procedures, as well as listen to the Audio Health Library
- Mobile App Now you can use your cell phone with web access to view your Aetna health plan information whenever you want, wherever you are







- The hospital emergency room is to be used only if the situation is life threatening
- The Urgent Care Center should be used as often as possible to avoid additional charges
- The Urgent Care Center is open 24 hours and is available to treat most non-life threatening emergencies, as broken bones (not multiple fractures), wounds not bleeding profusely, fevers and flu symptoms
- Difference in Copay is substantial as shown on the table below:

Cost Analysis: Urgent Care vs. Emergency Room			
Medical PlanUrgent CareEmergency Room			
80/60 PPO Plan	\$35 Copay	\$150 Copay + 20%	
90/70 PPO Plan	\$50 Copay + 10%	\$150 Copay + 10%	

- There are 8 Urgent Care Centers within 10 miles of the immediate Nashville area
- Vanderbilt also offers a Faculty/Staff Express Care Clinic in the Medical Arts Building in Suite 112

• There is no charge for the office visit, unless labs, x-rays, prescriptions or other medical services are needed







- The Walk-In Clinic is an in-network, free-standing health care facility that is an alternative to a physician's office for treatment of unscheduled, non-emergency illnesses and injuries and administration of certain immunizations
- It is not an alternative for the emergency room or the outpatient department of a hospital
- It is generally found in a retail location as CVS or Walgreens
- If you use a Walk-In Clinic on the 80/60 Medical PPO, you will pay \$25 In-Network
- If you use a Walk-In Clinic on the 90/70 Medical PPO, you will pay \$20 In-Network
- There are 5 Walk-In Clinics within 5 miles of campus





Health Care Reform

- The Patient Protection and Affordable Care Act (ACA) was signed into law on March 23, 2010
- The ACA requires that most people that are either citizens or legal residents to have health insurance coverage, or to pay a tax beginning in 2014 if they do not
- The intent of the ACA is to make health care coverage available to the millions that are uninsured in the U.S.
- All states are required to offer a Health Care Exchange, either through the federal government, on their own or through a partnership between the state and the federal government
- Tennessee's Exchange is provided by the Federal Government
- U.S. citizens and most legal residents are eligible for plans on the exchange



Health Care Reform (Cont.)



- There are differing levels of coverage and cost, as well as several insurance carriers offering the plans
- In order to be eligible for the Premium Tax Credit, also known as a *subsidy*, a person must meet certain eligibility requirements:
 - The employer offers coverage where the plan design does not meet the coverage requirements of the ACA
 - Certain poverty-level income conditions are met
 - The cost of employee-only coverage exceeds 9.5% of an employee's W-2 wages



Health Care Reform (Cont.)



Important ACA Information Specifically for Enrollees in the Vanderbilt PTBP:

- The Aetna PPO plans meet or exceed the legal plan requirements of the ACA
- To the best of our knowledge, the cost of **single** coverage for the PPO does not exceed 9.5% of an eligible postdoc's wages/stipend
- It is highly unlikely that anyone enrolled in the Vanderbilt PTBP medical coverage will be eligible for a subsidy through the exchange
- For more information, please visit the Federal Health Insurance Exchange at <u>www.healthcare.gov</u>





DENTAL INSURANCE

Provided by





Postdoctoral Trainee Benefits Program



Aetna Dental HMO

Core Benefits	In-Network
Annual Deductible	None
Annual Benefit Maximum	Unlimited
Preventive/Diagnostic Care Routine Exams Teeth Cleanings (Prophylaxis) X-rays	No Charge No Charge No Charge
Basic Procedures Fillings Endodontics Periodontics Oral Surgery	\$10 - \$90 Copay \$4 - \$380 Copay \$10 - \$300 Copay \$4 - \$117 Copay
Major Procedures Crowns Bridgework Dentures	\$255 Copay \$275 Copay \$10 - \$330 Copay
<u>Orthodontia</u> Adolescent Adult	\$1,945 Copay \$1,945 Copay

For more detailed plan design information go to: www.garnett-powers.com/vanderbilt



Postdoctoral Trainee Benefits Program

Aetna Dental PPO - \$1500 Annual Max Benefit

Core Benefits	In-Network	Out-of-Network (MAX Plan)
Annual Deductible	\$0 per individual \$0 per family	\$50 per individual \$150 per family
Preventive/Diagnostic Care Routine Exams Teeth Cleanings (Prophylaxis) X-rays	0% 0% 0%	30% 30% 30%
Basic Procedures Fillings Endodontics Periodontics Oral Surgery	20% 20% 20% 20%	40% 40% 40% 40%
<u>Major Procedures</u> Crowns Bridgework Dentures	50% 50% 50%	50% 50% 50%
Orthodontia (child only) Adolescent (to age 20) Adult	50% Not Covered	50% Not Covered

For more detailed plan design information go to: <u>www.garnett-powers.com/vanderbilt</u>

Accessing the Out-of-Network Tier



An example of how seeking Out-of-Network services can impact your out-of-pocket costs:

- Porcelain Crown on a molar We will estimate that the usual, customary and reasonable charge that Aetna allows is \$800
- Per the out-of-network benefit structure, you will pay 50% (your coinsurance) toward that crown, which would be \$400
- In addition, if the out-of-network dentist performing your crown services charges more than what is considered usual, customary and reasonable, you will pay the \$400 **plus** any additional amount that the dentist wishes to charge. So, if the dentist charged \$900 for the crown in total, you would pay a total of \$500 for the crown, which includes the extra \$100 that the dentist charged above what is considered usual, customary and reasonable
- Using the out-of-network tier costs you more because the dentists do not discount their services per a provider contract, whereas those contracts do reduce your out-of-pocket costs in the In-Network PPO tier
- When you access care out-of-network, you and the insurance carrier incur more costs, consequently affecting the overall pricing of the plan





VOLUNTARY VISION INSURANCE

Provided by:





Assurant Voluntary Vision Plan



- This plan is a voluntary plan, which means you are responsible for the monthly costs for you and your enrolling dependents
- To enroll in the voluntary vision plan, you must go through a different website located at:

www.garnett-powers.com/vanderbilt/graduate/vision.htm

- To make this selection during open enrollment, you must complete the enrollment form and submit the monthly premium by September 28th
- The enrollment instructions and rates can be found on the website
- No ID cards are issued with the plan. You will use your SSN and name to make an appointment with a provider





Postdoctoral Trainee Benefits Program

Voluntary PPO Vision Plan		
Core Benefits	In-Network	Out-of-Network
Eye Exam (every 12 months)	\$25 Copay	Up to \$52 allowance
Frames (every 24 months)	\$130 allowance (20% off remaining)	Up to \$57 allowance
Lenses Single Bifocal Trifocal	\$25 Copay \$25 Copay \$25 Copay	Up to \$55 allowance Up to \$75 allowance Up to \$95 allowance
Contact Lenses (every 12 months)	\$130 allowance	Up to \$105 allowance

For more detailed plan design information go to: <u>www.garnett-powers.com/vanderbilt</u>





LIFE/AD&D and LONG-TERM DISABILITY INSURANCE

Provided by





Postdoctoral Trainee Benefits Program Life and Accidental Death & Dismemberment Insurance



- The plan pays \$40,000 in the event of a death
- An additional benefit of \$40,000 is paid for AD&D if the death is due to an accident
- Postdoctoral Trainees holding J-1 Visa status and their dependents holding J-2 Visa status, will have the required coverage listed below:
 - **Medical Evacuation** = \$50,000
 - **Repatriation** = \$25,000
- Premiums are paid by Vanderbilt University





• The benefit waiting period is 180 days of disability

- The plan will pay 60% of the first \$10,000 of your monthly predisability earnings for an eligible disability
- The maximum monthly benefit is \$6,000. This benefit is reduced by deductible income such as worker's compensation
- Once approved, benefits are payable each month while you are disabled up to age 65
- Premiums are paid by Vanderbilt University





The Open Enrollment Process

- Go to the Garnett-Powers & Associates website at <u>www.garnett-powers.com/Vanderbilt/</u> and click on *"Open Enrollment"*
- Next, click on the "*Open Enrollment Form Instructions*" link and print them out for assistance with completing the open enrollment form properly
- Once the instructions are in hand, go directly to the "*Open Enrollment Form Login*" link. This will take you to a login page where you will choose '*Enrollment Form Login*'. You will be a '*Returning User*' if you've visited the form before and you will provide your email address and your previously created unique password
- Once complete, you will click "*Submit*" which will send you to the Postdoc Dashboard where you will be able to view your current enrollment and also complete your Open Enrollment Form with any desired benefit changes





- Please check the plan bundle in which you wish to be enrolled for Plan Year 2016 2017. Once complete, please click *'Submit and Create Printable Enrollment Form'* which will send your form to our secure database and also allow you to print a copy of your enrollment form for your records
- An e-mail will be sent no later than **September 30, 2016** confirming your new enrollment status
- ID cards for any new coverage will be mailed to your home directly from the Insurance Carriers (Aetna Medical Only)





Family Member Eligibility

Family member eligibility requirements are the same as the family member eligibility requirements for the Vanderbilt University faculty/staff plans.

The Major Family Member Categories Are:

- Spouse
- Natural or adopted children to age 26 regardless of student status
- Stepchildren may be included if they live with the Postdoc and are supported at more than 50% and claimed as a tax dependent
- Same-sex domestic partner.: You must meet certain conditions in order to enroll your same sex domestic partner. To complete your certification and enrollment, you will contact:

Dr. Mistie Germek BRET Psychological Services Phone: 615-343-0714 Office Location: 306F Light Hall





Information Sources

For general inquiries and customer service regarding enrollment, benefit questions and ID cards, please contact:

Garnett-Powers & Associates, Inc.

Via:	GPA contact Information
Website	www.garnett-powers.com/vanderbilt
Toll Free Phone	1-888-441-3719
Fax Number	(949) 583-2929
Email Address	vservices@garnett-powers.com





Thank you for joining us today! Any Questions?