



Benefits Design and Management

Benefits eligibility

Faculty and staff

 Regularly scheduled to work 20 hours or .5 FTE or more per week for at least 90 consecutive days.

Eligible dependents

- Your child under age 26.
- Your disabled child age 26 or older, if eligible.
- Your spouse.

Health insurance terminology

Paycheck deduction

Amount you pay for insurance each pay period.

Deductible Met

Deductible

Expenses you pay outof-pocket before the health plan pays.

- Individual or family.
- Separate in and outof-network amounts.
- Accumulate toward out-of-pocket maximum.

Out-of-Pocket Max Met

Copayment

Fixed dollar amount.

Coinsurance

Percentage of allowed amount.

- You pay at the time of service after the deductible is met.
- Plan pays remaining charges.
- Accumulate toward outof-pocket maximum.

Out-of-Pocket Maximum

The most you will pay in combined deductibles, health care and pharmacy copayments, and coinsurance.

- Plan pays 100% of covered services after out-of-pocket max is met.
- Individual or Family.
- Separate in and outof-network amounts.

Health insurance terminology

- Health Savings Account, HSA: A savings account that allows employees to put aside pretax dollars to pay for out of pocket medical expenses.
- In-network: Providers or health care facilities that are part of a health plan's network. The insurance negotiates a discount with these providers which usually results in lower costs to the member.
- Out-of-network: A provider that is outside of the network of doctors, hospitals or health care providers. Usually results in higher costs to the member.
- Plan year: Period of coverage under a group health plan. ASU's plan year runs from January 1 through December 31.

Medical and pharmacy plans

Benefits guide | Employee healthcare cfo.asu.edu/benefits-guide-health

See plan document for exclusions and limitations.

Overview of medical plans

The networks available for both plans are Blue Cross Blue Shield and United Healthcare.

Triple Choice Plan | TCP

- Copayments for non-preventative services.
- In and out of network providers available.
- This is a single plan with three tiers.

High Deductible Health Plan with HSA

- Allows participants to use in or out of network providers.
- Coinsurance after deductible is met.
- Out of pocket expenses can be paid with funds in the HSA account.

Triple Choice Plan

- Tier 1 –The network of providers will be limited to providers designated as Tier 1 in-network providers.



- Tier 2 Providers will be in-network but not considered Tier 1 providers.
- Tier 3 Out of network providers with higher deductibles. No copays but there will be co-insurance.

Benefits

- In-network and out-of-network provider options.
- Nationwide coverage.
- No pre-existing condition restrictions.
- Mayo Clinic is in-network for UHC and BCBS.

Copays and deductibles

- Copays apply after the plan deductible is met.
- Copays and deductibles apply to out-of-pocket maximum.
- Payments toward Tier 1 deductible apply towards Tier 2 deductible, conversely funds paid toward Tier 2 deductible apply to Tier 1.
- Plan pays 100% after the out-of-pocket maximum is met.
- Prescription drug copays do not count toward the medical deductible.

	Triple Choice Plan		
	Tier 1, in network	Tier 2, in network	Tier 3, out of network
	Blue Cross Blue Shield or Unite	edHealthcare	
Employee only Deductible	\$200	\$1,000	\$5,000
Employee only out-of-pocket maximum	\$7,350 includes deductible	\$7,350 includes deductible	\$8,700 includes deductible
Family deductible	\$400	\$2,000	\$10,000
Family out-of-pocket maximum	\$14,700 includes deductible	\$14,700 includes deductible	\$17,400 Includes deductible

Triple Choice Plan

	Tier 1, in network	Tier 2, in network	Tier 3, out of network
Blue Cross Blue Shield or UnitedHealthcare			Out of Network providers
Preventative Services, Durable medical equipment, lab and x-ray services	\$0	\$0	50%
PCP,OB/GYN, Telehealth	\$20	\$20	50%
Specialist	\$40	\$40	50%
Emergency Room	\$200	\$200	\$200
Inpatient Hospital Admission	\$250	\$250	50%
Outpatient facility, Major radiology services	\$100	\$100	50%
Urgent Care	\$75	\$75	50%

How to use the Triple Choice plan

Choose a provider

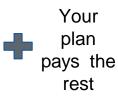
Look for the Tier 1 symbol for the lowest cost.





Pay a copayment

You pay a flat fee



Providers:

- Hospitals
- Physicians
- Radiology and Laboratory
- Rehabilitation centers
- Surgical centers
- Urgent care facilities

Meet the deductible

Pay out of pocket or enroll in the Healthcare FSA.

Pay up to out-of-pocket max

Your plan pays 100% of services for remainder of the year.

High Deductible Health Plan

High Deductible Health Plan | HDHP

Benefits

- In-network and out-of-network provider options.
- Nationwide coverage.
- No pre-existing condition restrictions.
- Works in conjunction with a health savings account.
- Mayo Clinic is in-network for both UHC and BCBS.

Coinsurance and deductibles

- Coinsurance applies after the plan deductible is met.
- Coinsurance and deductibles apply to out-of-pocket maximum.
- In-network and out-of-network deductibles must be met separately.
- Plan pays 100% after the out-of-pocket maximum is met.
- Prescription drug copays do not count toward the medical deductible.

2023 High deductible health plan | HDHP

HDHP

	In-network	Out-of-network
Blue Cross Blue Shield or UnitedHealthcare		Out of Network providers
Employee only deductible	\$1,500	\$5,000
Employee Only out of pocket maximum	\$3,500 includes deductible	\$8,700 includes deductible
Family deductible	\$3,000	\$10,000
Family out of pocket maximum	\$7,000 includes deductible	\$17,400 includes deductible

2024 High deductible health plan | HDHP

HDHP

	In-network	Out-of-network
Blue Cross Blue Shield or UnitedHealthcare		Out of Network providers
Employee only deductible	\$1,600	\$5,000
Employee Only out of pocket maximum	\$3,500 includes deductible	\$8,700 includes deductible
Family deductible	\$3,200	\$10,000
Family out of pocket maximum	\$7,000 includes deductible	\$17,400 includes deductible

High deductible health plan | HDHP

Coverage after deductible is met

	In-network	Out-of-network
Blue Cross Blue Shield or UnitedHealthcare		Out of Network providers
Preventative Services	\$0	50%
PCP, OB/GYN, Telehealth	10%	50%
Specialist	10%	50%
Emergency Room	10%	10%
Inpatient Hospital Admission	10%	50%
Outpatient facility, Major radiology services	10%	50%
Urgent Care	10%	50%

Health Savings Account

Health Savings Account | HSA

- University makes a biweekly contribution to the health savings account of each employee enrolled in the HDHP regardless of the employee's contribution.
- Can only use the available funds in the account.
- Funds can be used for eligible medical, dental and vision expenses.
- HSA administrator is Optum.
- HDHP enrollees are ineligible for the HSA if enrolled in any parts of Medicare or Tricare.
- Invest a portion of your funds after balance reaches \$1,000.



Employer contribution

Automatic

Employee contribution
Voluntary

2023 HSA contribution limits

Coverage level	2023 voluntary employee before-tax contribution	2023 automatic university contribution	2023 combined contribution limit
Single coverage	Up to \$3,130	\$720 \$27.70 per pay period	\$3,850
Other than single coverage	Up to \$6,310	\$1,440 \$55.39 per pay period	\$7,750
	Age 55 and older may contribute an additional \$1,000.		Age 55 and older may contribute an additional \$1,000.

Participants are responsible for managing contributions in accordance with federal guidelines and limits. **2023 automatic university contribution is based on 26 pay periods.**

2024 HSA contribution limits

Coverage level	2024 voluntary employee before-tax contribution	2024 automatic university contribution	2024 combined contribution limit
Single coverage	Up to \$3,430	\$720 \$27.70 per pay period	\$4,150 (\$300 increase)
Other than single coverage	Up to \$6,860	\$1,440 \$55.39 per pay period	\$7,750
	Age 55 and older may contribute an additional \$1,000.		Age 55 and older may contribute an additional \$1,000.

Participants are responsible for managing contributions in accordance with federal guidelines and limits. **2023 automatic university contribution is based on 26 pay periods.**

How to use the HDHP with HSA

Fund your Health Savings Account

Automatic payroll contributions by you and the University.

Choose a provider

Select an in-network provider for lower cost.

Meet the deductible

Use available HSA funds or pay out of pocket for services and some prescriptions.

HSA funds can help you pay for your expenses

Determine amount you want in your account

_

University contribution

-

26 pay periods

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Your contribution per paycheck

Pay coinsurance

You pay 10%

+

Your plan pays 90%

Pay up to out-of-pocket max

Your plan pays 100% of services for remainder of the year.

6 Build your HSA balance

Your funds will continue to grow and roll over.

What to consider when choosing a plan

Benefits

- All plans cover the same services.
- Consider you and your family's needs.
- No preexisting condition exclusions.
- Preventive services are covered at 100% for innetwork providers.

Networks

- All plans have nationwide networks.
- Provider networks vary among carriers.
- Make sure your providers are on the plan.
- Look for the symbols.





Cost

- Consider paycheck deductions.
- Costs are higher for outof-network providers.
- Understand how deductibles and copays work for your budget.

Pharmacy benefits

Pharmacy benefit for all medical plans

MedImpact

- Large national network of providers.
- Prescription drugs are covered in-network only.
- Prescription drugs cannot be shipped outside of the United States.

MedImpact Direct mail order pharmacy

- Mail order through MedImpact Direct Mail Service only.
- Specialty prescription services.

Pharmacy benefit for all medical plans

	Generic	Preferred brand name	Nonpreferred brand name
Retail 30-day supply	\$15	\$40	\$60
Retail 90-day supply	\$37.50	\$100	\$150
Mail order 90-day supply	\$30	\$80	\$120

For HDHP participants: Subject to plan deductible before copay applies for nonpreventative prescriptions.

For all plans: Pharmacy costs apply to out-of-pocket maximum.



Medical and pharmacy rates per pay period

Coverage level	Triple Choice Plan	HDHP
Employee only	\$26.17	\$10.15 + HSA
Employee plus spouse	\$71.49	\$30.46 + HSA
Employee plus one child	\$57.30	\$25.89 + HSA
Family	\$121.61	\$56.35 + HSA

Health care accounts comparison

Health care FSA

- \$3,050 annual before-tax employee contribution limit.
- TCP or no medical coverage.
- Medical, dental, and vision expenses.
- Minimum annual election of \$100.
- Requires enrollment each calendar year.
- Use it or lose it with \$610 carryover provision.

Limited health care FSA

- \$3,050 annual before-tax employee contribution limit.
- Available only to HDHP participants.
- Dental and vision expenses only.
- Minimum annual election of \$100.
- Requires enrollment each calendar year.
- Use it or lose it with \$610 carryover provision.

Online tools – Benefits Guides

Enrollment & Administration

- Affordable Care Act benefits.
- Glossary.
- HIPAA notice.
- Plan contacts.
- Qualified life events.

Employee Healthcare

- Dental plans.
- Healthcare accounts.
- Medical plans.
- Pharmacy plans.
- Vision program details.

Financial Security

- Disability insurance program.
- Life insurance program.
- Child and adult day care FSA.
- Voluntary benefits plan.

Retirement Resources

- Mandatory retirement programs
- Voluntary retirement programs: 403(b) and 457.
- Retirement advisor.

Family Resource Guide

- Employee discounts.
- Working Parent Network.
- Summer camp programs
- Mirabella ASU

Questions?

Employee services

855-278-5081

Monday – Friday

8 a.m. to 5 p.m.

Arizona time

Faculty services

480-727-9900

Monday – Friday

8 a.m. to 5 p.m.

Arizona time

Email: HRESC@asu.edu

