

Benefits Design and Management

Medical Plans



Agenda



- Overview of medical plans
- Triple Choice Plan
- High Deductible Health Plan
- Health Savings Account
- Per pay period costs
- Decision support tool
- Finding a provider

Benefits eligibility

Faculty and staff

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

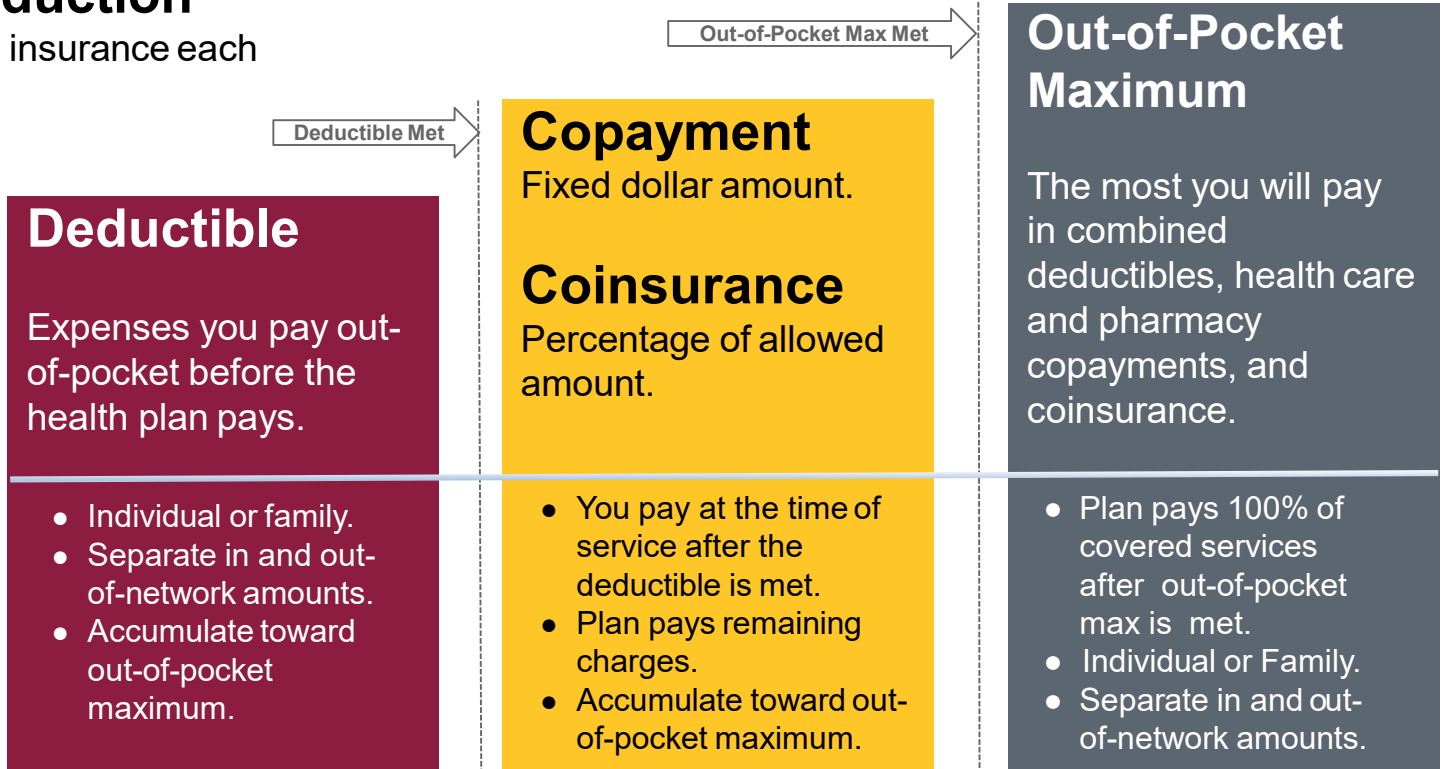
Eligible dependents

- 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.



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.

Overview of medical and pharmacy plans

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

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-preventive 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

Triple Choice Plan | TCP

- **Tier 1** – The network of providers will be limited to providers designated as **Tier 1** in-network providers.
 - Tier 1 providers will have the following designations:  Tier 1 
- **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.

Triple Choice Plan | TCP

Triple Choice Plan			
	Tier 1, in network	Tier 2, in network	Tier 3, out of network
Blue Cross Blue Shield or UnitedHealthcare			
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 | TCP

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%

Triple Choice Plan | TCP

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.


How to use the Triple Choice plan

1 Choose a provider

Look for the Tier 1 symbol for the lowest cost.



3 Pay a copayment

You pay a flat fee  Your plan pays the rest

Providers:

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

2 Meet the deductible

Pay out of pocket or enroll the Healthcare FSA.

4 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

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

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
Preventive 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%

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.

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.
- If on a leave without pay, employer funds will not be received until you return and applicable contributions are paid for the period of leave without pay.
- Invest a portion of your funds after balance reaches \$1,000.



HSA contribution limits

Coverage level	2022 voluntary employee before-tax contribution	2022 automatic university contribution	2022 combined contribution limit
Single coverage	Up to \$2,930	\$720 \$27.70 per pay period	\$3,650
Other than single coverage	Up to \$5,860	\$1,440 \$55.39 per pay period	\$7,300
	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.
2022 automatic university contribution is based on 26 pay periods.

How to use the HDHP with HSA

1 Fund your Health Savings Account

Automatic payroll contributions by you and the University.

2 Choose a provider

Select an in-network provider for lower cost.

3 Meet the deductible

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

4 Pay coinsurance

You pay 10% **+** Your plan pays 90%

5 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.



HSA funds can help you pay for your expenses

Determine amount you want in your account

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University contribution

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26 pay periods

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Your contribution per paycheck

Pharmacy benefits

Pharmacy benefit for all medical plans

MedImpact

- Large national network of providers.
- Prescription drugs are covered in-network only; formulary changes can occur impacting the tier in which a drug falls within.
- 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 non-preventive prescriptions.

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

Paycheck deduction

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

New Decision Support Tool for 2022

<https://ADOA.picwell.com>

Provides confidential estimates on choosing a plan.

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 in-network 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 out-of-network providers.
- Understand how deductibles and copays work for your budget.

Finding a Provider

<https://cfo.asu.edu/medical-plans>

Thank you

Employee services

855-278-5081

Monday–Friday

**8 a.m. to 5 p.m. Arizona
time**

HRESC@asu.edu

2022 Open Enrollment Website

<https://cfo.asu.edu/benefits>

Faculty services

480-727-9900

Monday–Friday

**8 a.m. to 5 p.m. Arizona
time**