2016 Annual Benefits Enrollment

October 1 - October 16, 2015

Due to Banner HR implementation, the 2016 Annual Benefits Enrollment dates will be from October 1 through October 16, 2015, 6pm. During this time, you can use Web for Employees, http://webemp.okstate.edu, to review your benefits and make changes for calendar year 2016, including dependent coverage, if applicable. Changes will be effective January 1, 2016.

Employees can only make changes to benefits during Annual Enrollment or when they have a Qualifying Event, as defined by the Internal Revenue Service. All employees should log in to Web for Employees during Annual Benefits Enrollment and review 2016 benefits carefully due to system and regulatory changes.

Regulatory Changes Impacting the High Deductible Health Plan

Earlier this year, the Department of Health and Human Services finalized regulations on deductibles and out-of-pocket limits for high deductible health plans for calendar year 2016.

As a reminder, a deductible is the amount you have to pay out-of-pocket before your health insurance coverage pays for covered benefits.

While deductibles and out-of-pocket maximums are increasing, OSU will be adding Health Savings Account contributions to those with dependent coverage.

<table>
<thead>
<tr>
<th>Coverage</th>
<th>2016 Deductible</th>
<th>2016 Out-of-Pocket Maximum</th>
<th>Health Savings Account (HSA) Employer Contributions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Only</td>
<td>$2,500</td>
<td>$6,650</td>
<td>$1,000</td>
</tr>
<tr>
<td>Family</td>
<td>$5,200</td>
<td>$13,100</td>
<td>$1,500</td>
</tr>
</tbody>
</table>

Waiving Health is a Two-Part Process

Employees who have other group coverage, or are a member of a recognized religious sect that has religious objections to health insurance, may waive OSU employee health coverage. Employees who waive health insurance in 2015 and wish to waive health insurance for 2016, will need to select “waived/none” as a change during the 2016 Annual Benefits Enrollment period and also complete a Waive Health Insurance Form 2016 online using Web for Employees, http://webemp.okstate.edu. Employees will need to provide a copy of insurance verification.

Employees who waive employee health insurance in 2016 will receive $500 per year ($41.67/month) (OSU paid) toward a health flexible spending account. Please remember you must complete this two-part process or coverage will default to BlueOptions PPO for 2016.

Employees eligible for Medicare or Medicaid cannot receive the $500 toward a health Flexible Spending Account.

2016 Annual Benefits Enrollment Key Points

For more detailed explanation, please refer to related articles

HEALTHCARE

• OSU will continue to offer two health care plans:
  • BlueOptions PPO (base plan); and
  • BlueEdge (high deductible plan).
  • OSU will contribute $1,000 to a Health Savings Account (HSA) for employee-only coverage.
  • NEW! OSU will contribute $1,500 to an HSA for any employee plus dependent coverage.

• Two Employee Incentives are Possible:
  • The $20/month / $240/year tobacco-free premium reduction will continue to be available when employees re-certify they are tobacco-free. E-Cigarettes and vapors are included on the Affidavit.
  • NEW! Employees who participate in biometric screenings will receive a $20/month / $240/year premium credit.

• Employees who waive OSU health insurance will receive $500 per year in a health care Flexible Spending Account (FSA).

• NEW! Bariatric Services using BlueCross BlueShield Blue Distinction Centers will be covered.

DENTAL AND VISION

• Employees can choose from two dental providers:
  • Delta Dental; or
  • HealthChoice Dental.

• Vision Service Plan (VSP) will be the vision provider.

FLEXIBLE SPENDING ACCOUNTS

• Employees can carry over up to $500 of health care FSA balances remaining at the end of plan year 2015.

LIFE INSURANCE

• During Annual Enrollment, you may increase supplemental life coverage by up to $5,000 on yourself or your spouse (maximums apply) without evidence of insurability.

LONG-TERM DISABILITY

• There will be no increase in premiums or changes in coverage.

$20 Tobacco-Free Premium Reduction Continues in 2016

Employees will receive a $20/month tobacco premium reduction when they affirm a) they are not tobacco/vapor users; b) they have not used tobacco/vapor products within the last 90 days; or c) they have completed a tobacco-cessation program. This incentive will be shown as a $20 monthly credit toward employee-paid monthly premiums.

Electronic cigarettes and vapor devices were added to the Tobacco Use and Smoking Preparation Use in or on University Property Policy and Procedure Letter, 1-0530, December 2013. Employees will be asked to re-certify tobacco, vapors and e-cigarettes use/non-use in Web for Employees during the online 2016 Annual Benefits Enrollment period, October 1 - October 16, 2015.

Annual Benefits Enrollment Info Sessions

Attend an annual benefits enrollment information session and learn more about 2016 benefits. Reservations are not required.

Tuesday, September 15, 9 – 10 am, 416 Student Union
Tuesday, September 22, 3 – 4 pm, 416 Student Union
Wednesday, September 30, 3 – 4 pm, 270 Student Union
Tuesday, October 6, 8:30 – 9:30 am, 270 Student Union
Monday, October 12, 10 – 11 am, 408 Student Union
OSU Flexible Benefit Plans

A Flexible Spending Account allows you to contribute pre-tax dollars to pay for eligible medical and dependent care expenses. Your annual election is divided among the number of paychecks you have in the plan year. You can expect a tax savings on your paycheck by participating in a Flexible Spending Account (FSA) or Dependent Care Account (DCA).

What is a Health Care Flexible Spending Account (FSA)?

You may elect to set aside up to $2,550, per year, per employee, to pay for qualified out-of-pocket medical expenses. Contributions made to your FSA are pre-funded, which means your annual goal amount is available to you the first day of your eligibility. You will receive a debit card with your annual election loaded on the card. Your expenses will be deducted from your annual election. You may use your debit card at your medical, pharmacy, dental, or vision provider if they accept debit cards. You can also request payments be made from your account directly to your healthcare provider. Traditional reimbursement is also available from your account either by submitting an online claim or by using a paper claim form.

OSU employees can carryover up to $500 of the remaining balance from the 2015 health care flexible spending account (FSA) to the 2016 plan year. However, the IRS “use-it-or-lose-it” rule still applies. After the end of the 2015 plan year, you lose any money left in your health care FSA that is more than the maximum $500 carryover limit.

In 2016, you can still choose to contribute as much as $2,550, even if you carry over $500 from the previous plan year.

What is a Dependent Care Account (DCA)?

You may elect to set aside up to $5,000, per household, to pay for dependent care expenses. Some of the expenses covered include child day care, babysitting and before and after school programs. DCA contributions are not pre-funded. If your claim amount is more than what you have in your dependent care account, you will be reimbursed up to the amount that is available in your account and spend the rest of your claim until your account is funded. You cannot use your health care debit card to pay for eligible DCA expenses. You may request reimbursement from your account either by submitting an online claim or by using a paper claim form. You can also request payments to be made directly to your dependent care provider.

The dependent care FSA does not include a carryover.

Benefits Fair
Wednesday, October 7, 2015
10:30am - 1:30pm
Engineering South Lawn

Visit with benefits vendors! Win prizes!

Ask questions about health and other benefit plans!

New! Biometric Screenings Premium Credit

Employees who complete a biometric screening will receive $20/month / $240/year premium credit, which will be applied to 2016 health premiums.

Employees who participated in a Catapult Health Screening after July 1, 2015, will receive the premium credit effective January 2016. For Catapult health screenings taken after December 31, 2015, the premium credit will begin the month after the screening. Credits are not retroactive.

Employees who have biometric screenings with a personal physician can request the results be faxed from the physician’s office directly to Catapult; however employees should be aware the physician’s office could charge a paperwork processing fee.

Catapult will be conducting free confidential health screenings on all OSU campuses. The screening will consist of a diagnostic blood test, measured biometrics, a printed personal health report, flu and/or TDAP shot (if requested), and a consultation with a Nurse Practitioner.

Health Screenings are for benefits-eligible employees and their covered spouses that are enrolled in one of the OSU health plans. (For best results, it is recommended you fast prior to your appointment). To schedule an appointment, go to www.timeconfirm.com/okstate or call 877-803-2447. Branch campuses will send out information about Catapult screenings dates and locations on each of the campuses.

Dependent Eligibility Verification

During Annual Benefits Enrollment, employees can add eligible dependents to insurance. Documentation must be provided if you wish to add a dependent (spouse, child). Documentation provided can include birth certificates, tax returns, custody/adoptive papers, marriage license.

Employees can cover eligible adult children to age 26 in health, dental and vision plans.

Social Security Numbers Required for All Covered Employees and Dependents

The Affordable Care Act (ACA) requires employers to report all employee and dependent Social Security Numbers (SSN) of persons who are enrolled and covered under the OSU health plan.

If you have not submitted a SSN for any of your covered dependents, you need to do so by contacting the OSU Benefits department, 106J Whitehurst, at (405) 744-5449. OSU Benefits will be reaching out to employees who have not submitted a SSN for any covered dependents before the end of the year.

New in 2016! Bariatric Services

Bariatric Services will be added to the OSU health plan in 2016. Bariatric surgery is the treatment option today that may effectively treat morbid obesity in people for whom more conservative measures such as diet, exercise and medication have failed.

Requirements:

- Enrolled in the OSU health plan for two consecutive years.
- Use in-network Blue Distinction Centers (Norman Regional Health System, Norman, OK; Bailey Medical Center, Owasso, OK.)
- BMI 40+
- BMI >35 plus one obesity-related uncontrolled disease or complication.
- Psychological counseling.
- Nutritional counseling.
- Education and understanding of behavior modification, exercise and support for ongoing lifestyle changes.

Employees can learn more about Bariatric Services by contacting BlueCross BlueShield of Oklahoma, 1-877-258-6781.

OSU Human Resources developed this information for the convenience of OSU employees. It is a brief interpretation of more detailed and complex materials. If further clarification is needed, the actual law, policy and contract should be consulted as the authoritative source. OSU continually monitors benefits, policy and procedures and reserves the right to change, modify, amend, or terminate benefit programs at any time.