

# Benefits Open Enrollment COTC

November 1 – November 15, 2023

Changes effective January 1, 2024

Open Enrollment is the annual opportunity for you to evaluate your benefit options and make elections. We encourage you to thoroughly review these benefit offerings and make an informed decision that meets your needs.

# What's Changing in 2024

## Medical Benefits

Ohio State is committed to providing you and your family with robust, competitive benefits. Every year we evaluate our benefits and make necessary changes to meet the needs of you and your family and manage rising costs. This year, your medical plan options, deductibles and out-of-pocket maximum are **not** changing. The changes below reflect the effort to keep our benefits sustainable while also supporting employees.

## Name Change for Medical Claims Administrator

Trustmark Health Benefit (Trustmark), our medical plan claims administrator, will change its name to Luminare Health Benefits (Luminare Health) effective January 1, 2024, and you will receive a new medical ID card that reflects this change. This will not impact your health benefits.

## Enhancements to the Dental Plan

We will enhance the Dental Plan in 2024 in two ways:

- Occlusal guards will be covered once every five years instead of once in a lifetime. The cost will be applied to the annual out-of-pocket maximum.
- Porcelain and ceramic material for crowns, onlays and fixed prosthetics will be allowed on posterior teeth.

## Reduce Your Out of Pocket Costs

With rising health care costs, it's important to know that you can help manage what you spend. Participating in YP4H is an easy way to reduce your cost of health care. Eligible individuals who complete a Personal Health and Well-Being Assessment (PHA) and biometric health screening by Dec. 31, 2023, at 11:59 p.m. will receive a PHA premium credit in 2024.

- Enrolled faculty and staff are eligible for a \$300 annual premium credit.
- Enrolled spouses are eligible for a \$180 annual premium credit.

As you complete levels of the incentive program and two qualifying activities for a bonus, you will earn the following:

- Enrolled faculty and staff can earn up to \$500 in HRA credits during 2024.
- Enrolled spouses can earn an additional \$500 in HRA credits during 2024.

# Dependent Eligibility

You are encouraged to review [Dependent Eligibility Requirements](#) for each of the dependents currently on your medical, dental and/or vision coverage, as well as any dependents you intend to add during Open Enrollment. If any currently covered dependents will no longer meet eligibility requirements as of Jan. 1, 2024, you must remove them from your health plans during Open Enrollment.

Ohio State requires employees to verify eligibility **for any dependent enrolled in the medical, dental and vision benefit that has not yet been verified**. Alight Dependent Verification Center conducts dependent eligibility verification on our behalf. A Dependent Eligibility Verification Packet will be mailed to your home address from Alight in January. The packet will include any dependent covered by Ohio State's medical, dental and/or vision benefits whose eligibility must still be verified. When your packet arrives in the mail, follow the steps to submit the required documentation by the deadline stated in the packet. **Failure to provide proof of eligibility for each applicable dependent will result in termination of their coverage.**

Also, to ensure the accuracy of Affordable Care Act (ACA) reporting to the IRS, please verify that the name, date of birth and social security number on file for each covered dependent identically matches IRS records. If you need to correct dependent information, please reach out to your employer to make changes.

## 2024 Dependent Eligibility Requirements

The benefits available to you and your family reflect Ohio State's commitment to offering high-quality, affordable options for your family's health, financial, and educational needs. Use the detailed information below to determine if your spouse and/or children will be eligible for Ohio State's medical, dental, and vision benefits in 2024.

### Spouse:

An individual whose marriage to a covered employee is recognized by the Internal Revenue Service for federal income tax purposes. A legally separated spouse is not eligible.

### Dependent Child:

A dependent child of a covered employee who meets all of the following eligibility criteria:

- Has not reached the age limit of 26 (e.g., 26<sup>th</sup> birthday); and
- Fits into one of the following categories:
  - Employee's biological child; or
  - Employee's adopted child or child placed with the employee for adoption; or
  - Employee's step-child; or
  - Child for whom the employee has legal guardianship, or legal custody, and such child is the employee's tax dependent

### Dependent Child Coverage Due to Disability:

A dependent child may be eligible for continued coverage as a dependent child after attaining age 26 if these four criteria are met:

- The child is and continues to be incapable of self-sustaining employment by reason of physical handicap or intellectual disability.
- The child is and continues to be primarily dependent upon the employee for support and maintenance.
- The child was:
  - Covered by a university medical plan when he or she reached the limiting age and the employee makes application for continuation of coverage to the university within 30 days after the child's loss of coverage due to reaching the limiting age, or
  - Covered as a dependent under the medical plan of his or her parent's employer immediately prior to a loss of coverage under such plan (documentation of prior coverage required) and the employee makes application for continuation of coverage to the university within 30 days after such loss of coverage occurs. In each case, the employee must provide satisfactory proof of the child's incapacity and dependence upon the employee.
- The employee provides proof of the continuance of such incapacity and dependence upon request by the university.

### **Ineligible Dependents**

- Dependents who do not meet the eligibility requirements outlined in this section.
- Dependents who are not successfully verified through the dependent eligibility verification process when requested.

### **Annual Response Required for Coordination of Benefits**

If you cover a spouse or dependent child on your medical benefit, you will receive an annual request for information about any other medical coverage they may have. If you registered to receive communications electronically, you will receive an email asking you to log into your account to respond to this request. This information will come from Luminare Health, the new name of Trustmark, our claims administrator.

**Your response is required**, even if your dependent does not have other coverage. In instances where an individual is covered by more than one plan, you will be asked for additional information to determine which plan is responsible for primary coverage to ensure accurate claim payments. Trustmark Health Benefits will send this Request for Additional Coverage Information in February. **Failure to provide the information by the requested due date will result in delays in claim payments.** If you would like to change your communication preferences with Trustmark, please register on the Trustmark portal.

# Medical and Prescription Drug Benefits

The Ohio State University Faculty and Staff Health Plan provides comprehensive medical coverage to nearly 80,000 eligible employees and their eligible dependents.

All medical plan options provide comprehensive coverage and access to quality health care; however, your out-of-pocket costs for each service varies based on the medical plan option you choose. You have the flexibility to decide which medical plan option is best for you and your family. **Your medical plan options, deductibles and out-of-pocket maximum are not changing for 2024.**

Ohio State strives to provide affordable, competitive health care benefits that are sustainable for the university. This year, both your employer and employees will pay more for the cost of coverage.

## Choose your plan carefully

When selecting a medical plan option, consider the following:

1. How do I want to balance my employee contributions with what I pay out-of-pocket for medical care at the time of service?
  - Generally, if you select a plan option with higher employee contributions, your deductible and annual out-of-pocket maximum will be lower.
  - A plan option with lower employee contributions may mean you have a higher deductible and annual out-of-pocket maximum.
2. How frequently do I need medical care?
  - If you see your provider for preventive care and just a visit or two a year when you're ill, you may consider a plan option with lower employee contributions and a higher deductible and annual out-of-pocket maximum.
  - If you need frequent, non-preventive care throughout the year and often meet your deductible and possibly your annual out-of-pocket maximum, consider a plan option with higher employee contributions and a lower deductible and annual out-of-pocket maximum.
3. Do my covered dependents or I need out-of-network coverage?
  - If you see medical providers who are not in Ohio State's network, consider the plan option that provides coverage when you use out-of-network providers.
  - Weigh the option of changing to in-network providers and paying less when you need care.

## Medical Plan Options

- **Prime Care Advantage** provides coverage for most medical services when you receive care from the **statewide network of providers**. Providers in both the Premier and Standard networks are available; however, your out-of-pocket costs will be lower if you see a Premier Network provider. Services received by **out-of-network providers are not covered** unless they are for emergency care.
- **Prime Care Choice** provides in-network and out-of-network coverage for medical services. Providers in both the Premier and Standard networks are available; however, your out-of-pocket costs will be lower if you see a provider in the Premier Network.
- **Out-of-Area** is available to employees and their dependents who:
  - Live in areas without adequate network access or
  - Are enrolled in a Prime Care benefit option but will be outside Ohio for at least 30 consecutive days. You must meet certain criteria to enroll temporarily in this benefit, as detailed on the Out-of-Area Benefit Election Form. You can submit this form at [hrconnection.osu.edu](https://hrconnection.osu.edu). [link to form]
  - Use the [zip code eligibility tool](#) to see if this benefit option is available to you.

Working together, we can bring down total costs. Actions you can take include using providers or specialists in the OSU Health Plan's Premier Network, completing preventive screenings and annual checkups, taking advantage of programs that support specific conditions and engaging in Ohio State's employee wellness program, Your Plan for Health (YP4H).

## Medical Claims Administrator Name Change and Resources

Trustmark, our medical plan claims administrator, will change its name to Luminare Health effective January 1, 2024, and you will receive a new medical ID card that reflects this change. This will not impact your health benefits.

You can manage your claims and communication preferences using Trustmark's website and mobile app. Prior to using these tools, you need to register at [mytrustmarkbenefits.com](https://mytrustmarkbenefits.com).

Future communications following Trustmark's name change will provide updated links as needed.

The website and mobile app offer the following:

- View balances, such as accrued deductibles and out-of-pocket costs
- Review medical claims
- Access Explanation of Benefits (EOB) for submitting reimbursement for Flexible Spending Accounts and Health Reimbursement Accounts.
- Access an electronic version of your medical ID card.

- Search for a [participating network provider](#).

Download the app for free from [Apple's App Store](#) or [Google Play](#).

## Summaries of Benefits and Coverage (SBCs) and Glossary

Under the Affordable Care Act, group health plans and insurance companies must provide participants with a Summary of Benefits and Coverage (SBC) for each benefit option and a glossary of terms commonly used in health insurance coverage. All group health plans and insurance companies use the same standard format for their SBCs and glossary. Our SBCs and glossary are available below and paper copies are available free of charge by contacting [hrconnection@osu.edu](mailto:hrconnection@osu.edu), 614-247-myHR (6947) or (800) 678-6010.

## Prescription Drug Coverage

The Ohio State University Faculty and Staff Health Plan includes prescription drug benefits administered by Express Scripts. There is no need to enroll in a separate prescription drug benefit.

- Prescription medications are available via home delivery mail-order service and nationwide retail pharmacy locations. You choose the option that is most convenient for you and your family.
- You may request a 90-day prescription for maintenance medications through Express Scripts Home Delivery or at an eligible retail preferred pharmacy through [Retail90](#).

The Express Advantage Network offers members more savings at a preferred retail network pharmacy. You may use retail pharmacies that are not preferred pharmacies, but your out-of-pocket costs will be higher. Pharmacies in the preferred retail network are subject to change. Examples currently include but are not limited to:

- Costco\*
- CVS
- Discount Drug Mart\*
- Giant Eagle\*
- Marc's
- Meijer\*
- OSU Outpatient Pharmacy\*
- Rite Aid\*
- Wal-Mart\*

*\*Retail90 available*

## Prescription Drug ID Card

- Express Scripts (ESI) does not provide a hard copy ID card. Access to an electronic ID card is available on the ESI mobile app.
- Before you use the mobile app, you need to register for an online account at [express-scripts.com](https://www.express-scripts.com).
- When you download the Express Scripts mobile app in Apple iTunes or Google Play, you can use the same username and password as your online account. The mobile app allows you to access your ID card, check the status of your prescriptions, order refills and find your nearest preferred pharmacy.
- Members have the option to print a card from the website if they prefer.

## Value-Based Prescription Drug Benefit (VBD)

The Ohio State University Faculty and Staff Health Plan members who are actively participating in the [Care Coordination Program](#) for management of asthma, chronic obstructive pulmonary disease (COPD), diabetes and/or heart disease (coronary artery disease or congestive heart failure) are eligible for the Value-Based Prescription Drug Benefit (VBD).

The VBD copay for certain eligible generic drugs taken for these chronic condition(s) will be waived, and you will pay only half the cost for certain eligible formulary brand-name drugs taken for the chronic condition(s). Only eligible members who choose to actively participate in the Care Coordination Program are eligible for the VBD. Eligible VBD medications obtained at a non-preferred pharmacy will **not** receive the VBD discounts, and you will need to pay the regular amount.

## Specialty Medications

Specialty medications are high-cost prescriptions that are biotechnological and available only through specialty pharmacies. The Ohio State Wexner Medical Center Outpatient Pharmacy and Accredo specialty pharmacy through Express Scripts are the only pharmacies in the exclusive specialty network. If you do not have your specialty medication filled at one of these two pharmacies, it will not be covered.

For more details about the prescription drug benefit, refer to the 2024 Faculty and Staff Health Plan Specific Plan Details (SPD) Document. If the information in this summary differs from the Specific Plan Details document, the Specific Plan Details document will govern.



# Dental and Vision Plans

## Dental

The Ohio State University Faculty and Staff Dental Plan provides both in-network and out-of-network benefit coverage for dental services. Delta Dental, the plan administrator, provides network coverage through two networks: Delta Dental PPO and Delta Dental Premier. Your out-of-pocket costs are less when you use a provider who participates in the Delta Dental PPO network.

You have two coverage options: Dental Plus and Dental Basic. The Dental Plus benefit has higher employee contributions and provides a greater level of benefit coverage. The enhanced coverage includes a lower deductible, higher annual benefit maximum and a higher lifetime orthodontia maximum with no age limit.

Two 2024 enhancements to the Dental Plan are:

- Occlusal guards (sometimes referred to as a nightguard or bite guard) will be payable once every five years instead of once in a lifetime. The cost will be applied to the annual out-of-pocket maximum.
- Porcelain and ceramic material for crowns, onlays and fixed prosthetics will be allowed on posterior teeth.

See the [Faculty and Staff Dental Plan Specific Plan Details](#) Document for details

## Delta Dental Website and Mobile App

The Delta Dental website and Mobile App help you get the most out of your dental benefits. Use the dentist search or toothbrush timer without a login. If you enter your username and password, you can securely access your personal benefit information or estimate your dental care costs. To download the app on your device, visit the App Store (Apple) or Google Play (Android) and search for Delta Dental. [Delta Dental Mobile App information](#)

## Vision

The Ohio State University Faculty and Staff Vision Plan provides you and your covered dependents with benefit coverage for vision care services, such as eye exams, eyeglasses and contact lenses. You can choose between the Vision Basic and Vision Plus benefit options, both of which use the Vision Service Plan (VSP) Choice network. These two benefit options have different employee contributions and offer different levels of benefit coverage. For more information on the differences between these two benefit options, refer to the Vision Plan Benefit Summary.

An annual eye exam can help detect early signs of serious health conditions such as diabetes and hypertension. What may sometimes seem like a vision-related problem might actually be an indication of a broader health issue.

The VSP website and mobile app, VSP Vision Care, provide access to your vision coverage, claim history, member ID card and more. To download the app on your device, visit the App Store (Apple) or Google Play (Android) and search for VSP Vision Care App.

# Your Plan for Health

Your Plan for Health (YP4H), Ohio State's employee wellness program, provides you with resources to help you thrive in your personal life, as well as in the workplace. The YP4H program is powered by Virgin Pulse and includes:

- Habit-based tracking and ways to personalize your program in your choice of focus areas, including physical activity, nutrition, sleep, stress management, finances, relationships and resiliency.
- A variety of opportunities to earn points and rewards, which can be redeemed as outlined below.
- Healthy living programs.
- Individual and university-wide challenges.
- Helpful wellness tips to motivate and encourage you to learn more about making healthy choices.
- Compatibility with a variety of fitness devices for automated tracking.

## Premium Credit

YP4H provides an opportunity for you to receive important information about your health and save on costs. A medical premium credit is available to enrolled individuals who complete a [Personal Health and Well-Being Assessment \(PHA\)](#) and a verified [biometric health screening](#). In 2024, the available premium credit is \$25/month for enrolled faculty and staff, or \$40/month when their enrolled spouse also completes these requirements. **To receive the full credit amount for 2024, complete your PHA and a biometric screening by Dec. 31, 2023.**

## Quarterly Rewards

Tracking your participation in healthy activities through the YP4H Incentive Program earns you rewards, including Health Reimbursement Account (HRA) credits for members enrolled in the Faculty and Staff Health Plan.

Enrolled employees and spouses participating in the quarterly YP4H program can each earn up to \$500 in HRA credits for the whole year, for a total of \$1,000. The points you earn on a quarterly basis reset each Jan. 1, April 1, July 1 and Oct. 1.

HRA funds earned through participation in YP4H can generally be rolled over from year to year if not used. However, the maximum allowable amount of accumulated contributions in your HRA will be \$3,900. Annual rollover funds are available after the grace period ends for the previous calendar year's reimbursement requests, usually by the end of April. You must be enrolled in The Ohio State University Faculty and Staff Health Plan on the rollover date for your HRA funds earned in the prior calendar year to carry over. Learn more about [HRA credits](#).

## Quarterly Rewards Chart

Activity	Incentive	Amounts for Enrolled Faculty/Staff & Spouse	Amounts for Faculty/Staff Not Enrolled*
Complete PHA and Biometric Health Screening	Premium Credit	Employee: \$25/month Spouse: \$15/month	N/A
Achieve Level 1 (2,500 points)	Quarterly Reward	\$10 HRA	\$5 PulseCash
Achieve Level 2 (5,000 points)	Quarterly Reward	\$25 HRA	\$5 PulseCash
Achieve Level 3 (10,000 points)	Quarterly Reward	\$40	\$5 PulseCash
Achieve Level 4 (25,000 points)	Quarterly Reward	\$50 HRA	\$10 PulseCash
Complete 2 qualifying activities	Bonus	\$100 HRA	\$20 PulseCash

\*Must be eligible for medical benefits.

**Please Note:** The rewards you earn are dependent upon your medical benefit enrollment status reflected in the YP4H portal at the time you reach each incentive level.

# Life Insurance

A variety of life insurance options are available to eligible employees. Once enrolled, your life insurance coverage is underwritten by Minnesota Life Insurance Company, a Securian Financial Group affiliate. Securian Financial is the parent company to Minnesota Life and both represent the same company that provides coverage for Ohio State's life insurance options.

Open Enrollment for VGTLI employee/spouse coverage is not offered annually, but only during designated years. Enrollment outside of this special opportunity may require evidence of insurability (EOI) and must be approved by Minnesota Life Insurance Company, a Securian Financial Group affiliate.

## **Voluntary Group Term Life Insurance (VGTLI)**

### **VGTLI Spouse**

There is no opportunity during this Open Enrollment to purchase additional VGTLI coverage for your spouse without evidence of insurability (EOI). If you wish to elect or increase this coverage you can review the VGTLI coverage options for your spouse. An EOI request will be mailed to your home address following Open Enrollment. The effective date of VGTLI coverage will be determined following EOI approval.

### **VGTLI Child**

During Open Enrollment, you have an opportunity to enroll in or increase VGTLI coverage for eligible dependent children up to age 26, with no EOI required. The only other time you may enroll in or increase this coverage is with a qualified status change.

The maximum amount of coverage available for each eligible child is \$20,000.

# Required Notices

You have the right to request a paper copy of any of these notices, at any time and free of charge, by contacting HR Connection at [hrconnection@osu.edu](mailto:hrconnection@osu.edu) or 614-247-myHR (6947).

[Health and Welfare Benefits Required Notices](#)