



UNIVERSITY
of ALASKA
May _____

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We all work together to make University of Alaska a success, and our teamwork

Your health and well-being are important to us, so we

make your and your family's

guide for details on your 2023-2024

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See [page 36](#) for important information concerning Medicare Part D coverage.

U N I V E R S I T Y O F A L A S K A
S E R V I C E S
P E R S O N N E L
(SPD)

ELIGIBILITY

PREPARING FOR ENROLLMENT

Update your personal information.

Make sure that you have social security numbers, dates of birth, and supporting documentation ready to input while you are

electing coverage. Double-check our website for updates.

ENROLLMENT

How to Enroll in Benefits for FY24

1. Review this Enrollment Guide to learn about your medical, dental, and vision coverage options. You

as Supplemental Life and Accidental Death and

- 2.

You can enroll in an HC and DC FSA with any of the

Current Employees

Outside of the annual Open Enrollment period, an employee may change an enrollment election only if there has been a qualifying life event. The most common

change in marital status, acquisition of coverage, and loss of coverage.

Mid-year changes outside of Open Enrollment must be

the event is birth of a child or adoption, then you have 60

For more information about Qualifying Life Events, see page 7 of this guide.

How to Make Changes

1. Complete the Life Event Changes Form, available

2.

must provide supporting documentation at time of enrollment.

– To add dependents, 0047.6u us t provide a b(t)11.1 (i)1 (a)T/C20 1 Tf-0.015 Tw 0 -1.5 Td04>10.2 65>9 004000002

Qualifying Life Events

What are **Qualifying Life Events**?

know that changes in your life may permit you to update your coverage at other points in the year? Qualifying Life Open Enrollment.

Common qualifying life events include:



Some lesser-known qualifying life events are:

Keep in mind your change in coverage must be consistent with your change in status.

TOUCHCARE: YOUR HEALTHCARE CONCIERGE SERVICE

Online Portal

plan documents to the TouchCare online portal via www.touchcare.com.



MEDICAL BENEFITS



Medical Plan Summary

This chart summarizes the medical coverage provided by Premera Blue Cross Blue Shield. All covered services are subject to medical necessity as determined by the plan. Please be aware that all out-of-network services

*After Deductible

For the Premium and Basic Plans, the individual deductible amount must be met by each member enrolled under

OUT-OF-POCKET COSTS

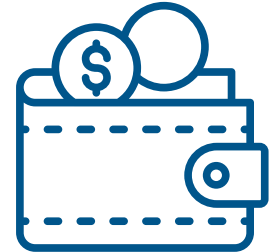
Deductible

The amount you must pay for covered services before your insurance starts paying its portion.

UP TO
DEDUCTIBLE

Copay

services at the time you receive them.



Know before you go:
Paying for services



Coinsurance

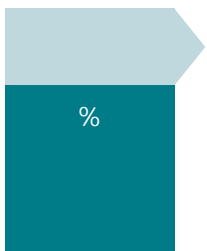
Your percentage of the cost of a covered

visit is \$100 and your coinsurance is 20% (and you've met your deductible but not your out-of-pocket

Out-of-Pocket Maximum

The most you will pay during the plan year before your insurance begins to pay 100% of the allowed amount.

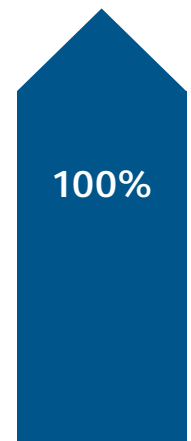
\$20.



UP TO THE
OUT-OF-POCKET
MAXIMUM

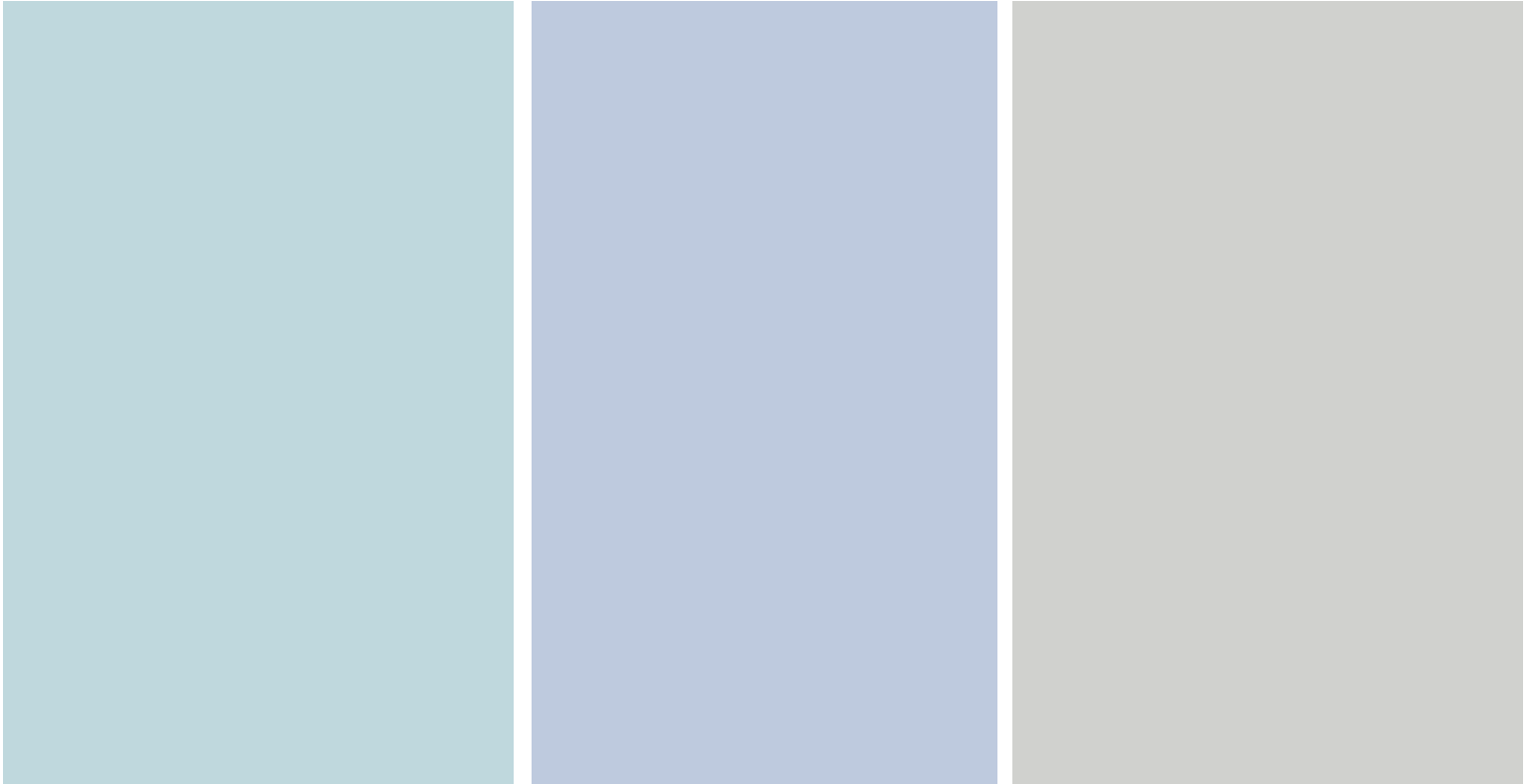
AFTER
DEDUCTIBLE
IS REACHED

AFTER
OUT-OF-POCKET
MAXIMUM IS REACHED



PREVENTIVE CARE

WHERE TO GO FOR CARE



When would I use this?
You need immediate treatment for a serious life-threatening condition. If a situation seems life threatening, call 911 or your local

What type of care would they provide?*

- » Heavy bleeding
- » Chest pain
- » Major burns
- » Spinal injuries
- » Severe head injury
- » Broken bones

**Costs and time information represent averages only and are not tied to a specific condition or treatment.

VIRTUAL MEDICINE



their families through the following options:

- » Doctor On Demand — video-based care from a

PHARMACY BENEFITS

Prescription Drug Coverage for Medical Plans

The Prescription Drug Program is coordinated through Premera Blue Cross Blue Shield of Alaska. Information on your www.premera.com or by calling the Customer Care number on your ID Card. Your cost is determined by the tier assigned to the prescription drug product. Products are assigned as Generic Preventive, Preferred Generic, Preferred Brand Name, Specialty Drugs, and Non-Preferred.

	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
RX OUT-OF-POCKET MAXIMUM					within the medical deductible	
30						
GENERIC PREVENTIVE						
PREFERRED GENERIC**					20%*	20%*
PREFERRED BRAND NAME					20%*	20%*
SPECIALTY DRUGS					20%*	20%*
NON-PREFERRED	30%	30%	30%	30%	20%*	20%*
GENERIC PREVENTIVE						
PREFERRED GENERIC					20%*	
PREFERRED BRAND NAME					20%*	
SPECIALTY DRUGS					20%*	

*After Deductible

Preventive Medications

Most preventive medications are covered at no cost

medications, please refer to the PV Core Plus drug list available through Premera's website (<https://www>.

applies to all three UA Choice Plans.

For more information on alternatives for non-preferred

www.premera.com.

Generic Drugs

Looking to save money on medication costs? You've most likely heard that generic prescription drugs are a

drugs are versions of brand-name drugs with the

administration, risks, safety and strength. Because they

as brand-name drugs and undergo the same rigid FDA standards. But on average, **a generic version costs 80% to 85% less than the brand-name equivalent.**

out if there is a generic equivalent for your brand-name drug, visit www.fda.gov.

Maintenance Medications

If you take a drug on a regular basis to control or treat an ongoing or chronic condition, you will be able to get

don't use the mail order pharmacy for your maintenance drugs, the regular retail copay will be doubled for the

of Maintenance Medications and view the Maintenance

Maintenance Medications:

forms/pharmacy/maintenance-medication-list.pdf

Specialty Medications

Premera's Specialty Pharmacy Program provides a full complement of specialized drugs and services by partnering with specialty pharmacies to help educate, provide clinical support for dosing and potential side

assess delivery options.

enroll and ask an Accredo representative to call your provider if a new prescription is needed. Your provider may also call Accredo directly once you are enrolled

through the Premium and Basic Plans have a \$100 copay

Group. Specialty Drugs through the HDHP require 20% coinsurance after your deductible has been met. For more information on the Premera Specialty Pharmacy Program, Accredo Health Group and a list of Specialty Drugs, please visit <http://www.premera.com/wa/provider/pharmacy/pharmacy-services/specialty-pharmacy/>.

SaveonSP Specialty Coupon Program

Scripts' program, **SaveonSP**, to help you save money on certain specialty medications. Contact SaveonSP directly



VISION BENEFITS



Don't wear glasses? You should still get an annual eye exam to catch both eye and overall
University of Alaska



Thoughts & Tips: Your FSA
money can cover the cost of going to a
chiropractor or acupuncturist, if your
insurance doesn't already cover it.

FSA VS HSA



SURVIVOR BENEFITS

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UA Paid Basic Life Insurance

University of Alaska provides employees with Basic Life Insurance through Securian Life Insurance Co. This guarantees that loved ones, such as a spouse or other

If you are a full-time employee, you automatically receive Basic Life Insurance even if you elect to waive other coverage. Monthly premiums are 100% paid by the employer. There

of \$50,000 must be included in income, using the IRS

Naming a Beneficiary

Insurance, Voluntary Accident Death & Dismemberment

by the University of Alaska.

If you need assistance, contact _____ or your own legal counsel.

Supplemental Term Life Insurance

Employees may purchase Supplemental Term Life Insurance to enhance the UA Paid Basic Life Insurance. Employee

COVERAGE AMOUNT	

FY24 Supplemental Life Insurance Rates

VOLUNTARY EMPLOYEE LIFE INSURANCE

	UNDER 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
\$50,000									
\$100,000									
\$150,000									
\$200,000									
\$250,000									

Short Term Disability (STD) Insurance

no cost.



EMPLOYEE ASSISTANCE PROGRAM



University of Alaska cares about you and wants you to succeed in all aspects of life, so we

Employee Assistance Program

The University of Alaska's Employee Assistance Program is through Vivacity/ComPsych. Through their integrated GuidanceResources continuum, ComPsych EAPs deliver a comprehensive, global approach to addressing employee problems so that organizations stay ahead of workforce

contain costs. They ensure that employees receive the right help at the right time, which results in better focus at work, greater productivity, less absenteeism, and reduced medical costs.

eight visits per issue

with a licensed professional. All services provided are

University

of Alaska.

educational materials and more either by phone at 800-697-0353 or online at guidanceresources.com.

Use App - GuidanceNowSM / Koa Foundations and Web ID - UofAK to login.

Additional Services Available:

- » LegalConnect
consult, 25% reduction in fees for additional time



GLOSSARY

Balance Billing -

Network – A group of physicians, hospitals and other healthcare providers that have agreed to provide medical services to a health insurance plan's members at discounted costs.

- » Providers that contract with your insurance company to provide healthcare services at the negotiated carrier discounted rates.
- » Providers that are not contracted with your insurance company. If you choose an out-of-network provider, services will not be covered at the in-network negotiated carrier discounted rates.
- » Providers that have declined entering into a contract with your insurance provider. They may not accept any insurance and you could pay for all costs out of pocket.

Open Enrollment – The period set by the employer during which employees and dependents may enroll for coverage, make changes or decline coverage. For the

Out-of-Pocket Maximum – The most you pay during health insurance begins to pay 100% of the allowed amount. This does not include your premium, charges beyond the Reasonable & Customary, or healthcare your

Over-the-Counter (OTC) Medications – Medications available without a prescription.

Prescription Medications – Medications prescribed by a doctor. Cost of these medications is determined by their assigned tier: generic, preferred, non-preferred or specialty.

- » Drugs approved by the U.S. Food and Drug Administration (FDA) that are identical to corresponding preferred or non-preferred version of any medication.
- » Brand-name drugs on your insurance plan's list of approved drugs.
- » Brand-name drugs not on your provider's list of approved drugs. These drugs are typically newer and have higher copayments.
- » Prescription medications used to treat chronic conditions. Because of the high cost, many insurers require that you use a generic or preferred brand medication.
- » A requirement that your physician obtain approval from your health plan before prescribing a non-preferred brand medication to you.
- » The goal of a Step Therapy Program is to steer employee to a generic or preferred brand medication before "stepping up" to a non-preferred brand.

Reasonable and Customary Allowance (R&C) – Also

known as the "usual, customary, and reasonable" amount. The amount paid for a medical service in a geographic area based on what providers in the area usually charge for the same or similar medical service. The R&C amount is sometimes used to determine the allowed amount.

Mandated by healthcare reform, your insurance carrier provides you

Summary Plan Description (SPD) - A document that outline the rights, obligations, and material

PREMERA ADDITIONAL BENEFITS



Livongo Diabetes & Hypertension Management

Livongo means "Living the healthier life I want."

Alaska employees and covered dependents who are enrolled in a UA Choice Health Plan and meet the criteria required by Livongo. The program provides support and medical supplies for diabetes, diabetes prevention, and hypertension.

Through the Livongo mobile app on an iPhone or Android smartphone you can receive care and support from

- Cellular meter provides real-time feedback for glucose reading. Food and activity

monitoring.

Personalized Health Action Plans – Livongoem}2.0407 Twpv5 (n).7ie11.7 (l)1 Tf221.5 Td(r) -2.04Td(-)36 (r)50.5 (ia) 5

Prenatal Care

Pregnancy, childbirth, and related conditions are covered on the same basis as any other condition for all female members. Covered services include:

- » Screening and diagnostic procedures during pregnancy
- » Related genetic counseling when medically necessary
- » Medically necessary services and supplies related to home births
- » vaginal birth and 96 hours after a cesarean birth.

Helpful information about pregnancy and proper prenatal

TalkSpace

» Hd7 (s.o)5B>612 1 Tf-0. Tf0 T-6.7 (a)3 9ican8-6.4 (-3 9i) sk-2.55.5vaiai9-6.8. 2 parr0.3o)6.6 (4>108

VOLUNTARY ADDITIONAL BENEFITS

Accident

Accident coverage, available through The Hartford,

RATES

Medical, Dental & Vision Premiums

level of coverage determines your bi-weekly premium

~~100% COVERAGE~~

~~90% COVERAGE~~

~~80% COVERAGE~~

~~70% COVERAGE~~

~~60% COVERAGE~~

~~50% COVERAGE~~

IMPORTANT CONTACTS

Required Notices

Important Notice from University of Alaska About Your Prescription Drug Coverage and Medicare Under the Premera Blue Cross Blue Shield Plan(s)

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with University of Alaska and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
2. University of Alaska has determined that the prescription drug coverage offered by the Premera Blue Cross Blue Shield plan(s) is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

When Can You Join A Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from October 15th to December 7th.

However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

What Happen To Your Current Coverage If You Decide to Join A Medicare Drug Plan?

If you decide to join a Medicare drug plan, your current University of Alaska coverage may not be affected. For most persons covered under the Plan, the Plan will pay prescription drug benefits first, and Medicare will determine its payments second. For more information about this issue of what program pays first and what program pays second, see the Plan's summary plan description or contact Medicare at the telephone number or web address listed herein.

If you do decide to join a Medicare drug plan and drop your current coverage, be aware that you and your dependents may not be able to get this coverage back.

When Will You Pay A Higher Premium (Penalty) To Join A Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with University of Alaska and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following October to join.

For More Information about This Notice or Your Current Prescription Drug Coverage...

Contact the person listed at the end of these notices for further information.

NOTE: You'll get this notice each year. You will also get it before the next period you can join a Medicare drug plan, and if this coverage through University of Alaska changes. You also may request a copy of this notice at any time.

For More Information about Your Options Under Medicare Prescription Drug Coverage

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare prescription drug coverage:

- » Visit www.medicare.gov
- » Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help
- » Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at www.socialsecurity.gov, or call them at 1-800-772-1213 (TTY 1-800-325-0778).

Remember: Keep this Medicare Part D notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, therefore, whether or not you are required to pay a higher premium (a penalty).

Date:	July 1, 2023
Name of Entity/Sender:	University of Alaska
Contact—Position/Office:	Benefits Team
Address:	PO Box 755140

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