

2023 Employee Benefits



Agenda



Key Information



Enrollment Process



Benefit Plan Overview

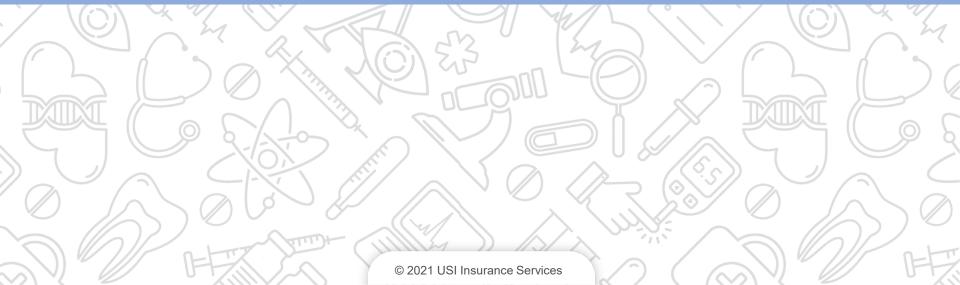


Questions and Answers



Medical/Rx

Highmark Blue Cross Blue Shield of Western New York





Key Information



- NO CARRIER OR PLAN CHANGES FOR 2023
- Medical Plans:
 - POS 298 ASO:
 - PCP & Specialist Visits: \$15 Copay
 - ORX Copays: \$7/\$25/\$40
 - PPO 800 ASO:
 - PCP & Specialist Visits: \$10 Copay
 - RX Copays: \$5/\$15/\$35
 - PPO 8000 ASO:
 - \$5,000/\$10,000 Combined INN & OON Deductible
 - PCP & Specialist Visits: 20% coinsurance after deductible
 - O RX Copays: \$15/50%/50%
 - Mail Order: 2.5 copays per 90-day supply
- The 2023 Benefit Open Enrollment Period is June 1 June 16, 2023
- All benefit elections and changes will take effect 7/1/2023
- The deadline to enroll is June 16, 2023

Medical/Rx – Plan Highlights

	Highmark BCBS POS 298 ASO	Highmark BCBS PPO 800 ASO	Highmark BCBS PPO 8000 ASO*
Annual Deductible*	N/A	N/A	\$5,000 Single / \$10,000 Family True Family
Annual Out-of- Pocket Maximum**	\$6,350 Single / \$12,700 Family	\$6,350 Single / \$12,700 Family	\$6,350 Single / \$12,700 Family
Plan Coinsurance	N/A	N/A	20% after deductible
Office Visit	\$15 PCP / \$15 Specialist	\$10 PCP / \$10 Specialist	20% after deductible
Inpatient Hospital	\$0 copay	\$0 copay	20% after deductible
Emergency Room	\$50 copay	\$50 copay	20% after deductible
Ambulance	\$50 copay	\$100 copay	20% after deductible
Urgent Care	\$50 copay	\$35 copay	20% after deductible
Prescriptions	\$7/\$25/\$40	\$5/\$15/\$35	\$15/50%/50% after deductible

^{*} This plan option is available only for OPCSD employees who are not contractually eligible for District provided insurance.

Medical/RX Preventive Care



Covered at 100% on all medical plan options. Know what services are covered at 100% by Highmark Blue Cross Blue Shield of Western New York prior to your preventive care visit

Routine preventive for Children*

Appropriate screenings based on gender and age

- Newborn visits
- Tuberculosis testing
- Anemia testing
- Lead exposure
- Pelvic exam and pap test

- Development and behavior
- Lipid profile
- Depression
- Obesity and counseling
- Nutrition counseling

Routine preventive for Adults

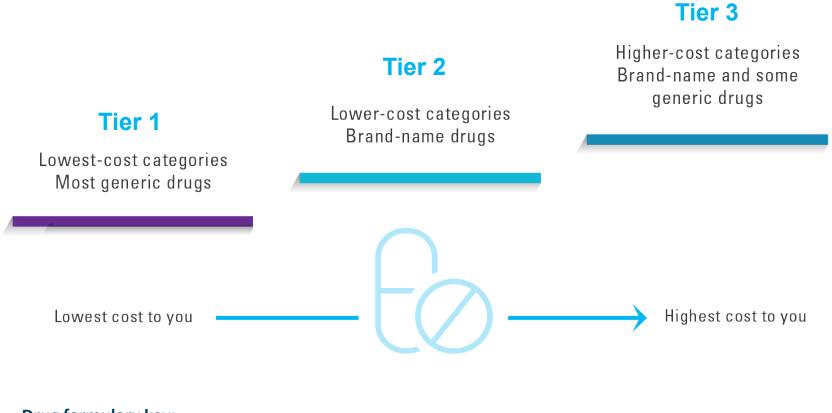
Appropriate screenings based on gender and age

- Lipid profile
- Diabetes
- Pelvic exam and pap testing
- Breast exam and mammogram
- PSA testing
- Bone density testing
- Colonoscopy
- Aortic aneurysm

^{*}Birth to age 18



Your Drug Formulary



Drug formulary key:

O = Home-service delivery

7 = Step edit applies: a preferred medication must be tried first

■ = Specific quantity limits apply







Seamless Experience Regardless of Location

1.3M providers

96% of hospitals are in-network

93%
of doctors
are in-network
nationwide

97% claims paid in-network

190+
countries

OUR BLUECARD® NETWORK OFFERS NATIONAL AND WORLDWIDE ACCESS



How do I Maximize my Benefits?









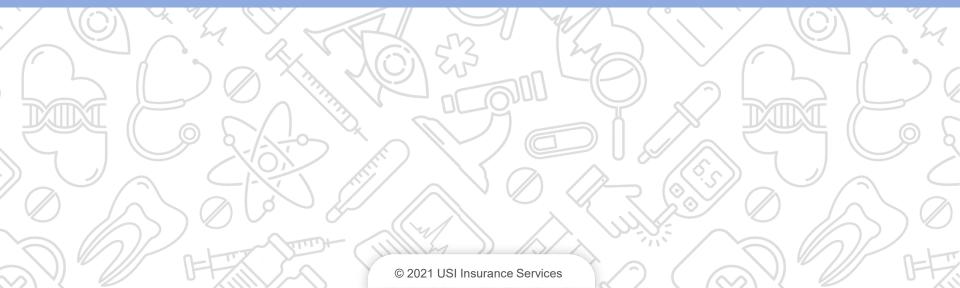


Levels of Care Category	Average Costs*	Average Wait Times	Examples of Health Issues	
24/7 Nurseline Immediate Consultation	None	1 minute	Based upon member's health issue a Nurse will confirm appropriate intent, or redirect to either higher or lower level of care.	
Telemedicine Convenient, low cost care in expanded geographical areas	\$	15 minutes	InfectionsCold and fluMinor injuries or painAsthma	Sports InjuriesSore and strep throatSkin problemsAllergies
Poctor Office Visits Your doctor knows your medical history the best	\$	18 minutes	Fever, colds and fluSore throatMinor burnsStomach ache	Ear or sinus painPhysicalsShotsMinor allergic reactions
Urgent Care Clinic Immediate care for issues that are not life-threatening	\$\$ \$\$	16-24 minutes	Migraines or headachesCuts that need stitchesAbdominal painSprains or strains	 Urinary tract infection Animal bites Back pain
Emergency Room For serious or life- threatening conditions	\$\$\$ \$\$\$	4 hours and 7 minutes	Chest pain, strokeSeizuresHead or neck injuriesSudden or severe pain	Fainting, dizzinessUncontrolled bleedingProblem breathingBroken bone(s)

An ER visit costs 7X more than an Office Visit in 2020



Additional Worksite Benefits



Telemedicine Hosted by Doctor On Demand: Convenient Access to Quality Care





24/7/365 access to 250+ board-certified doctors through your smartphone, tablet, or computer with a front-facing camera



INSTANT ACCESS

Provides members instant access to quality care with an average wait time under five minutes



90% TREATED

Physicians are able to treat 90% of the most common medical issues:

- Allergies
- Back pain
- Bronchitis and pneumonia
 - Cold and flu
 - Sinus infections
 - Mental health



Accessing Telemedicine

Step-by-step process

Make sure you have your insurance information on hand during registration.

Search "Doctor On Demand" on the app store and download



Add your insurance coverage by searching "Highmark Blue Cross Blue Shield of Western New York"



Scan the QR code to download the app





Accessing Telemedicine

3 Enter your Member and Group IDs

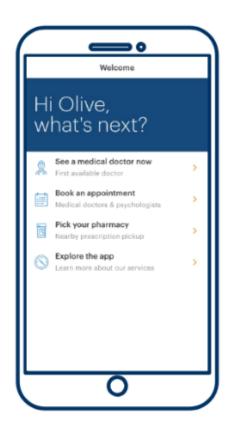
For your Member ID, please type:

- 1. the three letters
- 2. the nine-digit number
- 3. the two numbers that appear just before your name

Example: YJP9999999901



See a Medical Doctor Now or Book an Appointment







if video does not play

Click here for more information on Highmark Telemedicine



Your Wellness Card

The wellness card helps you live a healthier lifestyle with a \$250 annual allowance for a variety of products and services.

Gym memberships
Personal training sessions
Fitness classes
Health food stores
(GNC, Feel Rite, Vitamin World)
Nutritional supplements
Health products
Online fitness subscriptions
(Beach Body, Peloton)



Acupuncture treatments
Massage therapy
Chiropractic visits
Meal systems
(Weight Watchers, Noom)
Races and fun walks
Sports programs
Camps and club services
Personal gym equipment

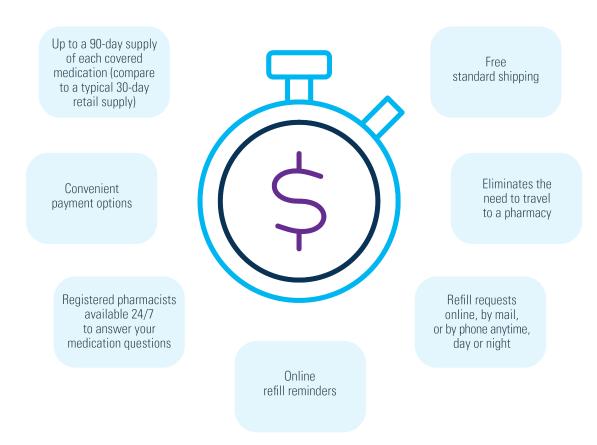
- Don't throw away your card!
- Funds will be reloaded to the card if you are eligible the next plan year
- Search for participating vendors online by name or zip code





Express Scripts Mail-Order Program

Save time and money with home delivery pharmacy services from Express Scripts®







Quick and Easy Ways to Sign up for Mail Order

- ePrescribe
 Ask your doctor to send your prescription electronically
- Call 1-800-698-3757
 Talk with a prescription plan specialist
 (7:30 a.m. 5 p.m. EST, Monday through Friday)



• Sign in to our secure member portal at **Highmark.com/bcbswny** and click *Manage My Prescriptions*. Here you can sign up for mail order and add your payment information. You can even obtain a 90-day supply up front and spread payments across three months.



Benefits Mobile App

The USI MyBenefits2Go Mobile app provides on-the-go access to your benefit plan details, HR contact information and more!

The USI MyBenefits2Go app is a quick and simple way for you and your enrolled dependents to access benefit summaries and other important information about our group plans. Store photos of ID cards in the app and easily locate carrier and HR contact information—all in one place. The app is free and available for iPhone and Android.

- Stay Organized
 - The app stores your benefit plan information and ID cards in one easy-to-find place.
- Store a photo of your ID card for each plan in the app so you always have it when you need it.
- Get In Touch
 Find the contact information for carriers and HR all in one spot.

Have you downloaded the **MyBenefits2Go** mobile app? Access key coverage details and contact information from anywhere.

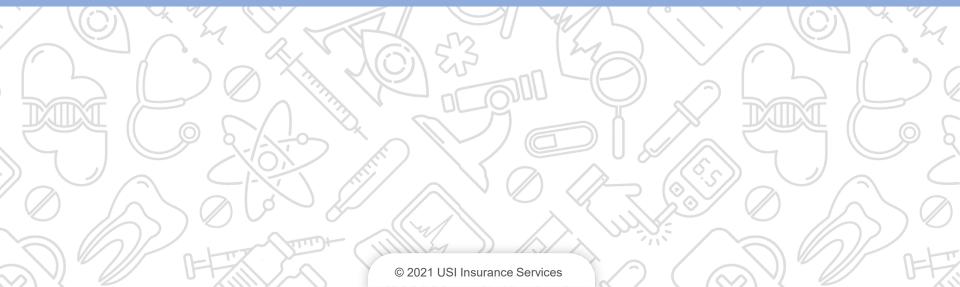
Search **MyBenefits2Go** and when prompted, enter code:







Enrollment Process





2023 Enrollment Process

- This year's Open Enrollment is passive. This means that if you do not make changes, your benefits will roll over into the new plan year.
- First time enrollees or those making changes
 - Highmark of WNY application
- No benefit enrollments or changes accepted after the open enrollment period unless due to a family status change (qualifying event)
- Questions?

Mid-Year Plan Changes







You are **only** able to add or drop coverage during the plan year if you have a federal qualified event such as:

- Change in marital status
- Change in number of dependents
- Change in employment status
- Change in eligibility status

Any changes made must be consistent and correspond with the change in status.

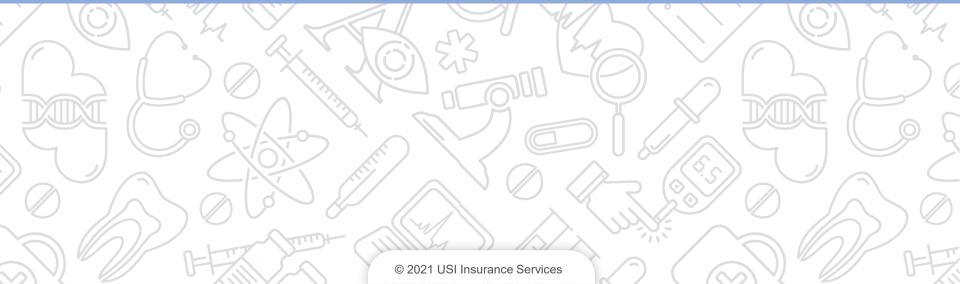
<u>Documentation</u> is required for any mid-year status changes.

If you are making a mid-year plan change you must notify HR within 30 days of the qualifying event.



Questions & Resources

USI Benefit Resource Center



Why won't they pay my claim?
Services denied?!

How can my claim still be "in process"? It's been two months!

I called my insurance carrier, but now I'm just more confused.

Do I have mail-order prescription benefits?



Call the Benefit Resource Center ("BRC"), We're Here To Help!

We speak insurance. Our Benefits Specialists can help you with:

- Deciding which plan is the best for you
- Benefit plan & policy questions
- Eligibility & claim problems with carriers
- Information about claim appeals & process
- Allowable family status election changes
- Transition of care when changing carriers
- Claim escalation, appeal & resolution

- Medicare basics with your employer plan
- Coordination of benefits
- Finding in-network providers
- Access to care issues
- Obtaining case management services
- Group disability claims
- Filing claims for out-of-network services



Benefit Resource Center

BRCEast@usi.com | Toll Free: 855-874-6699 Monday through Friday 8:00am to 5:00pm Eastern & Central Standard Time Thank you for attending!

