



2018 MSU Benefits

Open Enrollment Guide

Monday, October 16—Friday, November 3, 2017



TAKE ACTION DURING OPEN ENROLLMENT IF YOU WANT TO:

- ✓ Change your benefits for 2018
- ✓ Change your covered family members for 2018
- ✓ Make your 2018 wellness pledge
- ✓ Enroll in the Health Care and/or Dependent Care Flexible Spending Accounts for 2018

It's Open Enrollment—October 16 through November 3, 2017

This is your annual opportunity to review your benefits, consider your different options, and choose the coverage that best fits you and your family's needs. Be sure to check out what's new for 2018 on page 3.

Morehead State University (MSU) offers comprehensive benefits to regular full-time employees. Your benefits include health, dental, tax-exempt spending accounts, life insurance, and additional voluntary benefits. Our programs are designed to protect you from the high cost of health care, provide a source of income in the event of disability or death, offer resources that can help you build a financially secure future, and make it easier for you to balance the demands placed on working families.

We hope the information contained in this guide helps you understand the value of the MSU benefit program.

Open enrollment runs from October 16 through November 3, 2017. You need to take action if you want to change your benefits, change your covered family members, make your wellness pledge, and/or enroll in a Flexible Spending Account. You will complete your enrollment online. Refer to page 4 for instructions

[Get More Information ...](#) [Get Help with Enrollment](#)

Come to the Benefits Fair—October 16, 10:00 a.m. – 2:00 p.m., Button Drill Room

Learn More—Open Enrollment Meetings

Date	Time	Location
Wednesday, October 18	3:00 – 4:30p.m.	111 Radar
Thursday, October 19	9:30 – 11:00 a.m.	111 Radar
Tuesday, October 24	9:30 – 11:00 a.m.	111 Radar
Wednesday, October 25	2:00 – 3:30 p.m.	111 Radar

Open Lab—For One-on-One Enrollment

Date	Time	Location
Monday, October 23	9:00 – 10:00 a.m.	300Lloyd Cassity
Wednesday, November 1	3:00 – 4:00 p.m.	300 Lloyd Cassity

Open Enrollment Guide

Bookmark a copy of this open enrollment guide:

<https://moreheadstate.edu/employees/healthinsurance>

Table of Contents

<u>What's New and Changing for 2018</u>	4
<u>Completing Your Enrollment</u>	5
<u>Enrollment Eligibility</u>	7
<u>Your Medical Plan Options</u>	9
<u>The Rewards of Wellness</u>	17
<u>Prescription Medications</u>	22
<u>Your Dental Benefits</u>	24
<u>Flexible Spending Accounts (FSAs)</u>	27
<u>Your Life Insurance Benefits</u>	29
<u>Sick Leave Bank</u>	31
<u>Your Voluntary Benefits</u>	32
<u>Frequently Asked Questions</u>	33
<u>Get the App</u>	34

This benefits guide contains only highlights of the major provisions of the benefits program at Morehead State University. Legal documents describe the plans in complete detail and govern their operation. If there is any disagreement between this guide and any legal document, the terms of the legal document always govern. Morehead State University reserves the right to change, suspend, or end benefits plans at any time.

What's New for 2018

- **Medical plan premiums and the MSU contributions to the Health Savings Account (offered with the Life Long Savings Plan) and Health Reimbursement Arrangement (offered with the Enhanced HRA Value Plan and the PPO Plan) are not changing.** However, there are changes to the tobacco user surcharge and we are adding a new working spouse surcharge for 2018, which may affect your payroll deductions. Refer to page 10 to see the amounts effective January 1, 2018.
- **The tobacco user surcharge for medical plan coverage will increase to \$100.** If you started your coverage in 2017 as a non-tobacco user, you qualify for the non-tobacco user rates in 2018. Those who paid the tobacco surcharge in 2017, but became tobacco-free during the year, need to provide a negative Cotinine test to secure the non-tobacco rates for 2018. See page 10 for more details.
- **MSU will introduce a spousal surcharge for medical plan coverage in 2018.** As the cost for medical coverage and services continues to increase, MSU is adopting a practice that is in place at universities across the United States and at many employers in our local marketplace. We will implement a spousal surcharge that applies for employees' spouses (or adult sponsored dependents) whose own employers or retirement plans offer medical coverage (Medicare is not considered a retirement plan for this purpose).

Page 9 includes a summary of each medical plan, and you'll find a benefit comparison on pages 10 – 11.

If you plan to cover your spouse or adult sponsored dependent under your MSU medical plan in 2018, you will be asked to sign an **Affidavit of Spousal Surcharge Compliance** if he/she has access to medical coverage through his/her employer. If so, and you elect to enroll him/her on your MSU medical plan, a surcharge of \$100 per month will be added to your medical plan payroll deduction. This change will take effect with the January 15, 2018 payroll.

Note: This new plan rule **does not** affect coverage for your eligible dependent children.

- **MSU will increase the financial incentive offered through your participation in the Live Well, Work Well@MSU program.** You receive additional money for your Health Savings Account or Health Reimbursement Arrangement when you achieve specific program Health Outcomes. You can use this extra money to help pay your eligible health expenses. Check out pages 17 – 21 for details about the program.
- **The copayments for certain specialty prescription drugs used to treat hepatitis C, cancer, or hereditary angioedema will increase.** However, MSU will offer employees the opportunity to enroll in a copay assistance program, which helps to offset the higher cost for these medications. Refer to page 21 for more information.
- **The new administrator for HSAs, HRAs, and FSAs is HealthEquity.**
- **MSU is offering a Limited Purpose Flexible Spending Account that can compliment a HSA.** You must make an election for this account via Benefits Enrollment Online during the open enrollment period.

Completing Your Enrollment

You need to take action during open enrollment if you want to:

- Change your current benefits elections (e.g., switch from one medical plan to another)
- Change your covered family members (e.g., dis-enroll your spouse)
- Contribute to the Health Care and/or Dependent Care Flexible Spending Account(s) for 2018 (re-enrollment is required each year)
- Make your wellness pledge and be eligible for wellness incentives in 2018

2018 Benefits Enrollment Calendar

October 16, 2017
Enrollment Begins

November 3, 2017
Enrollment Closes

January 1, 2018
Your Enrollment Elections are Effective

January 15, 2018
Payroll Deductions for Your Benefit Elections Begin

Your benefits enrollment elections are effective from January 1 through December 31, 2018.

What Happens If I Do Not Take Action During Open Enrollment?

The table below summarizes the coverage you will receive in each benefit area if you decide not to take action this year.

Benefit Plan	
Medical	You will be enrolled in your current medical plan with your current coverage level (Single, 2-Person, or Family)
Wellness	You will lose out on \$100 of your 2018 Pledge wellness incentive
Dental	You will be enrolled in your current dental plan election and coverage level
Health Care Flexible Spending Account	You will not be enrolled
Dependent Care Flexible Spending Account	You will not be enrolled
Basic Life and AD&D Insurance	You automatically receive \$50,000 of coverage
Employee Supplemental Life Insurance	You will be enrolled in your current coverage
Dependent Life Insurance	You will be enrolled in your current coverage
Voluntary Benefits	You will be enrolled in your current coverage

Completing Your Enrollment Online

You will enroll through Benefits Enrollment Online (BEO), which is available through <https://my.moreheadstate.edu>. When you login to BEO, you will see benefit enrollment. Then, you will proceed through the process and choose your benefits for the 2018 plan year.

Dependent and beneficiary information is required—including their Social Security number, birthday, address, and relationship to you. Be sure to have this information handy when you go online to enroll.

Using Benefits Enrollment Online (BEO)—*Follow these instructions*

1. Go to <https://my.moreheadstate.edu>
2. Login with your Eagle ID and Eagle Password
3. Click on Self-Service Menu (WebAdvisor)
4. Click on “Employee Profile” from the menu options list
5. Click on “Benefits Enrollment”
6. Review your current benefit elections
7. Click on “Enroll or Change Benefits” and then click “Continue”
8. Select the benefits you want for 2018, then click “Continue”
9. **For EACH selected benefit, choose either**
“Elect” or,
“Opt Out”
10. Then either “Save” or “Do Not Save Changes” and click on “Continue”
11. If you select a benefit plan and want to enroll dependents, you **MUST** add the dependents you wish to cover by clicking on the “Add or Manage Dependents” button. You are required to include all requested information about the dependent, including Social Security number, date of birth, and his/her relationship to you; failure to provide this information may result in non-coverage
12. When you are presented with the confirmation screen, you may choose to do the following:
 - “Save Changes and Complete Later” (allows you to make changes and electronically sign and submit later)
 - “Save” then go back to make other selections
 - Manage dependents and beneficiaries (if the ones listed are incorrect)
13. Once everything looks correct, click on the “Ready to Sign” button and then click “Electronic Signature”

Note: If you want to make changes after you electronically sign your enrollment, click “Remove my signature and allow changes to my elections.” (You will see this at the bottom of the first page.) Please remember that your benefit elections are not final until you re-sign your electronic enrollment.

When Changes Are Allowed

Changes to your benefits (medical, dental, life insurance, and flexible spending accounts) during the plan year are permitted only if you have a life event change that affects your benefits coverage. Following examples of life event changes:

- You get married, separated, or divorced
- You have a baby or adopt a child
- You or your spouse starts or ends employment
- A dependent starts or stops being eligible
- Your spouse’s health care coverage through his or her employer changes

You must sign a change form and submit it to the Office of Human Resources and Payroll within 31 days of your change in status. You will need to provide proof of your qualifying event, such as a copy of a marriage license, divorce decree, birth/adoption certificate, or a letter from your spouse’s employer.

Enrollment Eligibility

Regular full-time employees are eligible to enroll themselves and their eligible family members in MSU's benefits. Eligible family members include your:

- Spouse
- Children up to age 26 (see our plan document for more information about dependent eligibility)
- "Sponsored dependents" as defined below

When you enroll eligible family members, **you must provide their Social Security number, birthdate, address, and relationship to you. *This information is required***; they will not be covered unless you provide it to MSU.

Also note when you elect a medical or dental plan, you can choose which eligible family members you want to cover under each plan. The family members you cover under each plan do not have to be the same. For example, you can cover yourself and your dependents for medical, but choose to cover yourself only under the dental plan.

Covering a "Sponsored Dependent"

Employees may enroll a "sponsored dependent" and his/her eligible children in MSU coverage, provided they meet the following criteria:

A sponsored dependent is defined as an adult that shares primary residence with a covered employee. The sponsored dependent must:

- Have lived with the MSU employee for at least 12 months prior to the effective date of coverage;
- Be at least the age of majority;
- Not be a relative (see definition of relative below); and
- Not be employed by MSU.

A sponsored dependent's children are defined as those who:

- Share primary residence with the covered MSU employee;
- Are under age 26;
- Are the natural born or adopted child of the sponsored dependent; and
- Are not relatives of the covered MSU employee. (Relatives include parents, children, husbands, wives, brothers, sisters, brothers- and sisters-in law, mothers- and fathers-in law, uncles, aunts, cousins, nieces, great nieces, nephews, great nephews, grandmothers, grandfathers, great grandmothers, great grandfathers, sons- and daughters-in law and half- or step-relatives of the same relationships. Note: Children for whom the employee has legal guardianship are eligible as the employee's dependents.)

To add a sponsored dependent and his/her children to your coverage, an **Affidavit of Sponsored Dependent Relationship** must be signed by both adult parties and notarized. Additionally, proof of common residency for a 12-month period must be provided. This could include a driver's license with the same address issued for 12 months, rental agreement or mortgage, utility bills in names with a common address that are more than one-year old.

The employee must also complete an **Anthem Affidavit**.

Health Insurance Premiums and IRS Tax Regulations Related to Sponsored Dependents

In accordance with IRS regulations:

- The portion of insurance premiums for the sponsored dependent and his/her dependent children must be paid on a post-tax basis.
- Medical expenses incurred by the sponsored dependent and his/her dependent children are not allowed for reimbursement under the employee's flexible health care spending account (IRC Section 125) or Health Reimbursement Arrangement (HRA).
- The sponsored dependent is not eligible for wellness incentives.

The portion of insurance premiums paid by the employee for the sponsored dependent and his/her sponsored dependent children is not subsidized by the University. The employee will receive a **single MSU contribution** only. In addition, MSU's contribution to the Health Savings Account or Health Reimbursement Arrangement will be at the **single level**.

Refer to page 10 for the 2018 medical plan payroll deductions.

Your Medical Plan Options

MSU offers you a choice of three medical plans:

- The Life Long Savings Plan
- The Enhanced HRA Value Plan
- The PPO Plan

Each plan covers in-network preventive care at no cost to you. The plans use the same network of Anthem providers. Each plan requires you to meet an annual deductible. The following table highlights key features in the plans.

Plan Feature	Life Long Savings Plan	Enhanced HRA Value Plan	PPO Plan
MSU Contribution to Annual Account	Includes a Health Savings Account (HSA), and offers the highest MSU contribution	Higher MSU Contributions to Health Reimbursement Arrangement (HRA) than with PPO Plan	Includes a Health Reimbursement Arrangement (HRA) and offers the lowest MSU contribution
Payroll Deductions	Lowest Payroll Deductions	Lower Payroll Deductions than PPO	Highest Payroll Deductions
Individual Deductible	\$2,700	\$1,500	\$1,650
Cost Sharing	After deductible, you pay 10% coinsurance for in-network services and prescription drugs There are no copays under this plan	After deductible, you pay 15% coinsurance for in-network services and prescription drugs There are no copays under this plan	After deductible, you pay 20% coinsurance for in-network services subject to coinsurance. You pay set copays for some in-network services and prescription drugs
Individual Out-of-pocket Max (in-network)	\$4,600	\$4,000	\$3,500

Reminder: Key Plan Terms

- **Deductible:** This is the amount of your own money that you pay for health care services and prescription drugs, before the plan pays its share of the costs. Remember, you can use your MSU-provided HSA or HRA dollars to meet your deductible.
- **Coinsurance:** Once you meet the deductible, you and MSU share the costs for services until you reach the out-of-pocket maximum.
- **Copays:** Some services under the PPO Plan require copayments. This is a set amount you pay for health care services and prescription drugs at the time you receive your care. Services that require a copay are not subject to the PPO deductible, nor do your copays count toward meeting the deductible.
- **Out-of-pocket Maximum:** Consider this your “safety net.” This is the most you pay out of your own wallet for health care services in a calendar year.

Compare the Medical Plans

Maximum MSU Annual Account Contributions—Use these MSU-provided funds to pay your share of covered health care expenses

Coverage Level	Life Long Savings Plan			Enhanced HRA Value Plan			PPO Plan		
	HSA	Wellness Incentive	Total	HRA	Wellness Incentive	Total	HRA	Wellness Incentive	Total
Single	\$400	\$675	\$1,075	\$200	\$675	\$875	\$100	\$675	\$775
2-Person	\$800	\$1,350	\$2,150	\$400	\$1,350	\$1,750	\$200	\$1,350	\$1,550
Family	\$1,200	\$1,350	\$2,550	\$600	\$1,350	\$1,950	\$300	\$1,350	\$1,650

Monthly Payroll Deductions—Cost is based on the plan and coverage level you select, and whether you are tobacco-free

Coverage Level	Life Long Savings Plan	Enhanced HRA Value Plan	PPO Plan		
	Monthly Premium	Monthly Premium	Monthly Premium	Tobacco User Surcharge ADD	Spousal Surcharge ADD
Single	\$50	\$80	\$120	\$100	\$100
2-Person	\$200	\$230	\$280	\$100	\$100
Family	\$285	\$320	\$400	\$100	\$100
2-Person (MSU Spouses)	\$0	\$0	\$0	\$100	\$100
Family (MSU Spouses)	\$133	\$179	249	\$100	\$100
Sponsored Dependent – 2 Person	\$343	\$378	\$431	\$100	\$100
Sponsored Dependent – Family	\$635	\$677	\$743	\$100	\$100

About the Non-tobacco vs. Tobacco User Rates

- If you started your coverage in 2017 as a non-tobacco user, you qualify for the non-tobacco user rates in 2018.
- Those who paid the tobacco surcharge in 2017, but became tobacco-free during the year, need to provide a negative Cotinine test to secure the non-tobacco rates. You and/or your spouse (if applicable) need to provide your results by November 30, 2017. You can schedule an appointment for your saliva test by calling 783-2055.

NEW for 2018: Spousal Surcharge

Is your spouse or adult sponsored dependent is covered under your MSU medical plan? During this year's open enrollment, you will be asked to confirm if he/she has access to medical coverage through his/her own employer or through a retirement plan by signing an **Affidavit of Spousal Surcharge Compliance**. If you spouse does have access to other coverage, and you elect to enroll him/her on your MSU medical plan, a surcharge of \$100 per month will be added to your medical plan payroll deduction. This change will take effect with the January 15, 2018 payroll.

If, at any point, your spouse ceases to be eligible for his/her medical coverage, he/she may be enrolled in your MSU medical plan. You will have 30 days from the loss of eligibility to enroll your spouse in MSU's plan.

An open enrollment under another employer's benefit plan is considered a mid-year change in status (qualifying) event under Section 125. If your spouse's open enrollment occurred earlier in the year and your spouse chose not to enroll in coverage for which he/she was eligible for, he/she should contact his/her employer and request to enroll in their employer's benefit plan.

This surcharge does not apply toward dependent children. You are still able to enroll your dependent children in the MSU medical plan regardless of your spouse's status under this restriction.

This surcharge does not apply to a spouse when both spouses are employed at MSU and covered under a MSU Spouse plan.

Please complete this affidavit and return it to Human Resources by November 3:

- **301 Howell McDowell**
- **Fax: 3-5028**
- **Email: benefits@moreheadstate.edu**

If you do not return the Affidavit and you are enrolling a spouse in a MSU medical plan, your spouse will not be eligible for coverage. You may not make any changes to your election until the following annualbenefitenrollmentperiodunlessyouexperienceaqualifyingevent.

Cost Sharing Provisions

	Life Long Savings Plan		Enhanced HRA Value Plan		PPO Plan	
	In-Network	Non-Network	In-Network	Non-Network	In-Network	Non-Network
Deductible						
Individual	\$2,700	\$5,400	\$1,500	\$3,000	\$1,650	\$3,500
Family	\$5,400	\$10,800	\$3,000	\$6,000	\$3,300	\$7,000
Employee Coinsurance	You pay 10%	You pay 50%	You pay 15%	You pay 50%	You pay 20%	You pay 50%
Copays	Do not apply		Do not apply		Apply for some services	
Out-of-pocket Max						
Individual	\$4,600	\$9,200	\$4,000	\$8,000	\$3,500	\$8,500
Family	\$9,200	\$18,400	\$8,000	\$16,000	\$7,000	\$17,000

How Cost Sharing Applies When You Need Care

	Life Long Savings Plan		Enhanced HRA Value Plan		PPO Plan		
	In-Network	Non-Network	In-Network	Non-Network	In-Network	Non-Network	
Preventive Care	Free	Coinsurance applies after deductible	Free	Coinsurance applies after deductible	Free	Coinsurance applies after deductible	
Physician Office Services	Coinsurance applies after deductible	Coinsurance applies after deductible	Coinsurance applies after deductible	Coinsurance applies after deductible	\$35 copay		
Telemedicine					\$35 copay		
Minute Clinic					\$35 copay		
Specialist Office Services					\$50 copay		
Urgent Care Services					\$70 copay		
Emergency Room Services					\$150 copay plus 20% coinsurance after deductible		
Inpatient Hospital					Coinsurance applies after deductible		
Outpatient Services					Coinsurance applies after deductible		
Prescription Drugs	Coverage combined with medical	Coverage combined with medical	Coverage combined with medical	Coverage combined with medical	Rx deductible (applies for Tier 1, 2 and 3 drugs): \$50 Single; \$100 2-Person and Family Tier 1 copay: \$10 retail; \$25 mail order Tier 2 copay: \$30 retail; \$75 mail order Tier 3 copay: \$60 retail; \$150 mail order Tier 4: You pay 25% coinsurance		

You pay less of your own money when you visit network providers. Find an in-network provider at www.anthem.com. Look for Anthem's Blue Distinction providers!

About the Health Savings Account (HSA)

A Health Savings Account, or HSA, is a special bank account owned by you to pay for current and future health care expenses. An HSA comes with the Life Long Savings Plan option, and when you choose this plan, the university will establish an HSA for you with HealthEquity, our HSA plan custodian.

How Your HSA is Funded

MSU gets you started with a **pre-tax “auto-contribution”** to your HSA. The contribution amount is based on the coverage level you choose:

MSU Automatic HSA Contribution	
Life Long Saver Plan	
Single	\$400
2-Person	\$800
Family	\$1,200

MSU’s contribution is made in two installments: half on January 1, 2018 and half on July 1, 2018. You can use the university’s contributions as soon as they are credited to your account.

MSU contributes **additional pre-tax money to your HAS** when you participate in the Live Well, Work Well@MSU program. When you complete all of the required activities, you receive up to:

Live Well, Work Well @MSU HSA Contribution	
Life Long Saver Plan	
Single	\$675
2-Person	\$1,350
Family	\$1,350

These HSA contributions are made credited to your account as follows:

- On January 1, 2018 (for your “pledge,” your commitment to completing your biometrics or physical exam, and completing the online Personal Health Assessment).
- In July and December 2018, based on the Outcomes you meet and WellPoints you accumulate through the year.

If I switch to the Life Long Savings Plan for 2018, what happens with my HRA balance?

Funds remaining in your HRA account on January 1, 2018, may be used to pay for eligible dental and vision expenses until you run out your HRA balance. You cannot use HRA funds to pay for expenses related to the Life Long Saver Plan (i.e., your deductible and coinsurance for doctor’s visits, prescription drugs, and other services covered in the medical plan). You can to use your current HRA card to pay for dental and vision expenses.

Finally, **you can contribute your own money, tax-free, to your HSA**. The IRS allows a total annual contribution (MSU's plus your own) of:

- \$3,450 if you have Single coverage
- \$6,900 if you have 2-Person or Family coverage
- An additional “catch-up” contribution of \$1,000 during 2018

For example, if you are age 35 with Single coverage, assuming you get the maximum wellness incentive, you can contribute up to \$2,375 in 2018: (\$3,450 - \$400 - \$675 = \$2,375).

You will decide how much of your own money (up to IRS limits) to contribute during open enrollment. However, you can adjust your contribution amount at any time during the year. Your contributions will be made each pay period through semimonthly payroll deductions.

PLAN YOUR HSA CONTRIBUTIONS CAREFULLY

If you over-contribute to your account in a given year, you will be required to take a distribution and pay taxes on the amount over the annual limit. Penalties may also apply. So, be sure to plan your own contribution in coordination with MSU's automatic contribution and the amounts you think you will earn through the Live Well, Work Well @ MSU program.

It's Your Money

You can use your HSA account balance on hand to pay your share of health care costs when incurred, or save your money for future expenses. As long as you use your HSA account to pay for eligible expenses (as defined by IRS code), you don't pay taxes on the money coming out of your account. In addition, the HSA is yours. Your balance rolls over from year to year, and you can keep your account if you leave MSU or when you retire.

It's Easy to Use Your HSA

After you enroll in the Life Long Savings Plan, you will receive a new debit card from HealthEquity (our HSA plan custodian). You can use your card to pay a provider directly. Or, you can pay for care with your own money then reimburse yourself through your account.

You will need to file form 8889 with your Federal income tax return for each year you contribute to or withdraw from your HSA. Be sure to save your receipts—sometimes the IRS requires you to provide a back-up when you submit your taxes.

Use your HSA to pay your deductible and your share of costs for qualified health expenses. Visit www.irs.gov/pub/irs-pdf/p502.pdf to see the full list of qualified expenses.

Interest, Investment Earnings, and Expenses

Your HSA earns interest each month. You also will have the opportunity to invest the money you save through your account.

MSU will pay the administration/bank fees for employees who are enrolled in the Life Long Savings Plan. If you leave MSU, or decide to enroll in a different MSU-sponsored medical plan in subsequent years, you will be responsible for any applicable administrative fees.

Certain Eligibility Requirements Apply

To be eligible to receive the university's HSA contributions, you must enroll in the Life Long Savings Plan option. And, there are additional eligibility requirements that apply. You are eligible to enroll in an HSA if:

- You have not received Veterans Affairs (VA) benefits within the past three months.
- You are not covered by any other non-high deductible health plan, such as your spouse's plan.
- You are not eligible for or enrolled in Medicare.
- You do not receive benefits under TRICARE.
- You are not claimed as a dependent on someone else's tax return.

KEEP IN MIND...

You are not allowed to enroll in the MSU's Health Care Spending Account if you select the Life Long Savings Plan. If you are currently contributing to the Health Care Spending Account, you need to use your balance as soon as possible; MSU cannot establish your HSA until you've exhausted your current FSA funds.

Employees who cover adult children up to age 26 on a High Deductible Health Plan (HDHP) may not be able to use HSA funds to obtain tax-free reimbursements for medical expenses incurred by the adult children. Please consult your tax advisor for additional information.

About the Health Reimbursement Arrangement (HRA)

If you choose the Enhanced Value HRA Plan or the PPO Plan, the university provides you with a Health Reimbursement Arrangement (HRA), which you can use to pay for any service or item prescribed by a physician, whether medical, dental or vision.

This account is funded by the university—you are not allowed to contribute your own money. You do not have to sign up for a HRA; you will be automatically enrolled if you choose one of the plans noted above. HealthEquity will serve as MSU’s HRA custodian for 2018.

TAKE NOTE...

If you leave MSU, you forfeit your HRA balance. You are not allowed to take it with you.

MSU’s HRA contribution amount is based on the plan and coverage level you select:

MSU Automatic HRA Contribution		
	Enhanced HRA Value Plan	PPO Plan
Single	\$200	\$100
2-Person	\$400	\$200
Family	\$600	\$300

The HRA contribution will be added to your account in two increments: half of the annual contribution is credited to your account on January 1, 2018, and the second half is credited to your account on July 1, 2018.

MSU also contributes **additional money to your HRA** when you participate in the Live Well, Work Well @ MSU program. When you complete all of the required activities, you receive up to:

Live Well, Work Well@MSU HRA Contribution		
	Enhanced HRA Value Plan	PPO Plan
Single	\$675	\$675
2-Person	\$1,350	\$1,350
Family	\$1,350	\$1,350

These HRA contributions are made as follows:

- On January 1, 2018 (for your “pledge,” your commitment to completing your biometrics or physical exam, and completing the online Personal Health Assessment).
- In July and December, based on the Outcomes you achieve and WellPoints you accumulate through the year.

Your HRA balance can roll over from year to year, however, it cannot exceed \$6,000. If your HRA account balance is \$6,000 or more on January 1, 2018, you will not be eligible for a new HRA contribution. If your account falls below \$6,000 by July 1, 2018, you will receive half of the university’s annual contribution—or the portion of that amount that increases your balance to \$6,000.

The Rewards of Wellness

MSU rewards your efforts toward living healthfully—with extra money for your Health Savings Account (HSA) or Health Reimbursement Arrangement (HRA).

*It starts with making the **Live Well Pledge**...*

*...And achieving specific **Health Outcomes**...*

*...And, doing additional **Healthy Activities**.*

Making My Live Well, Work Well@MSU Pledge—get \$100 for your HSA or HRA

Make the **Live Well, Work Well@MSU Pledge** through MSU's [wellness portal](#) (livewell.mycernerwellness.com) by November 18, 2017, and you will receive \$100 in your HSA or HRA on January 1, 2018.

By May 31, 2018, you pledge to:

1. Complete the Personal Health Assessment on the wellness portal (10WellPoints)

AND

2. Complete ONE (1) of the following:
 - Biometric Screening on campus (10 WellPoints)
 - Preventive Care Exam by Personal Health Care Provider (10 WellPoints)

Biometric data from your preventive care exam **MUST** be provided to MSU's Health Coach/RN for upload to your wellness portal to satisfy the pledge requirements. **This data can be from a preventive exam between the dates of June 1, 2017 – May 31, 2018.**

MSU expects employees and their spouses to stand by their Live Well, Work Well@MSU Pledge; therefore, if you break your pledge, and do not complete the required activities by May 31, 2018, you will be expected to pay back the \$100 HSA/HRA contribution. **This will be deducted equally from your June 15 and June 30, 2018 pay releases.** Don't miss out on these good health and financial awards; make the pledge and follow through.

To schedule a biometric screening, call Counseling and Health Services at 3-2055 or schedule an appointment online at <http://www.moreheadstate.edu/Student-Services/Counseling-Health-Services>.

If you choose to use biometric data from an exam with your personal health care provider, send the data to Charla Burchett, Health Coach by:

Fax: 606-783-9106 **Email:** cdburchett@moreheadstate.edu **Address:** 112 Allie Young

MAKE YOUR PLEDGE AND KEEP IT

You sign your Pledge electronically through the wellness portal (livewell.mycernerwellness.com) during Open Enrollment in 2017. Complete Pledge activities by May 31, 2018.

Achieve Health Outcomes—Get up to \$250 for your HSA or HRA

With this second part of the Live Well, Work Well@MSU program, you need to achieve biometric targets or goals between January 1 through November 30, 2018. When you do, you earn WellPoints, which accumulate toward an additional contribution for your HSA or HRA.

As you achieve specified biometric targets in the categories of weight, cholesterol, blood pressure and glucose, you become eligible to receive a deposit in your HSA or HRA on July 1 or December 15, depending on when you meet the target range or goal.

PARTICIPATING IN LIVE WELL, WORK WELL @ MSU PAYS

Earn up to \$675 for your HSA or HRA. Your covered spouse can earn up to \$675, too. *Don't miss out on this extra money for your health expenses.*

We encourage you to work with an MSU Health Coach/RN to set the appropriate goals. Biometric screenings—which tell you your numbers—are available to employees and covered spouses at no cost.

Weight	\$50 and 10 WellPoints for meeting the target range or goal
Cholesterol	\$50 and 10 WellPoints for meeting the target range or goal
Blood Pressure	\$50 and 10 WellPoints for meeting the target range or goal
Glucose	\$50 and 10 WellPoints for meeting the target range or goal

Achieve targets or goals in all four categories and receive an EXTRA \$75 for a total of \$275 for achieving healthy outcomes!

Do Healthy Activities—get up to \$300 for your HSA or HRA

For 2018, you will accumulate WellPoints for doing healthy activities in two phases:

- We will look at your WellPoint balance on May 31, 2018; you have the opportunity to receive up to \$150 for your HSA or HRA on July 1, 2018

	WellPoints Earned	HSA/HRA Contribution Amount
Gold Level	500 WellPoints	\$150 Contribution
Silver Level	425 WellPoints	\$100 Contribution
Bronze Level	215 WellPoints	\$25 Contribution

- We will look at your WellPoint balance again on November 30, 2018. If you have earned additional WellPoints, you will receive another HSA or HRA contribution on December 15, 2018.

	Additional WellPoints Earned	HSA/HRA Contribution Amount
Gold Level	500 WellPoints	\$150 Contribution
Silver Level	425 WellPoints	\$100 Contribution
Bronze Level	215 WellPoints	\$25 Contribution

There are many activities that will earn you WellPoints in 2018. Following are a few examples; go to the wellness portal at livewell.mycernerwellness.com to see the full list.

Healthy Activity	Activity Description	Activity Points	Maximum Points
My Personal Health Mission Statement	Enter your personal health mission statement on your portal dashboard.	10	10
Health Coaching	On-site Health Coaching by a Certified Health Coach/RN in the Office of Counseling and Health Services is available to employees and their spouses by appointment.	10	60
Weight Watchers	Complete a Weight Watchers Series. The Weight Watchers At Work Program is offered at MSU year round with 3 Series. Each series is worth 50 WellPoints MSU pays half the membership fee for employees. Attend 75% of meetings in a Series to qualify for WellPoints.	50	200
Weight: Log on Wellness Portal Monthly	Weight is self-reported on weight log on the wellness portal. Enter your weight each month and receive 5 WellPoints.	5	60
Tobacco Cessation Program	Complete an Evidence-Based Tobacco Cessation Program. MSU offers the Cooper Clayton program each semester to employees and spouses at no cost.	50	100
Physical Activity	Physical activity is self-reported on the cardio log on the wellness portal. Receive 2 WellPoints for each 30 minutes of activity up to 60 minutes (4 WellPoints) per day.	2	600
Steps: Log on Wellness Portal or Fitbit sync	Steps are self-reported in the Steps Log or via a Fitbit sync. Receive 2 WellPoints for each entry of 5,000 steps up to 10,000 steps per day.	2	400
On Campus Wellness Workshops	A variety of workshops are offered on campus as part of our partnership with St. Claire Regional Medical Center and other health professionals and organizations.	5	30
On Site Events	Special events are held throughout the year, i.e., Wellness Week, Breast Cancer Awareness Week, Group Walks, Scavenger Hunts, etc. These events are worth 10WellPoints unless stated otherwise.	10	60

Your health plan is committed to helping you achieve your best health. Rewards for participating in a wellness program are available to all employees. If you think you might be unable to meet a standard for a reward under this wellness program, you might qualify for an opportunity to earn the same reward by different means. Contact MSU's Human Resources and we will work with you (and, if you wish, with your doctor) to find a wellness program with the same reward that is right for you in light of your health status.

Notice Regarding the Live Well, Work Well@MSU Wellness Program

Live Well, Work Well @MSU is a voluntary wellness program available to benefit-eligible employees. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others. If you choose to participate in the wellness program you will be asked to complete a voluntary health risk assessment that asks a series of questions about your health-related activities and behaviors and whether you have or had certain medical conditions (e.g., cancer, diabetes, or heart disease). You will also be asked to complete a biometric screening, which will include a blood test for measuring blood glucose, cholesterol and lipids.

You are not required to complete the health risk assessment or to participate in the blood test or other medical examinations. However, employees who choose to participate in the wellness program will receive an incentive of up to \$400 for meeting the qualification requirements (the pledge, the Personal Health Assessment, biometric screening or preventive physical exam, and WellPoints for various activities and health outcomes standards). Although you are not required to complete the health risk assessment or participate in the biometric screening, only employees who do so will receive the incentive of up to \$400.

Additional incentives of up to \$275 may be available for employees who achieve certain health outcomes related to weight, cholesterol, blood pressure, blood glucose. If you are unable to participate in any of the health-related activities or achieve any of the health outcomes required to earn an incentive, you may be entitled to a reasonable accommodation or an alternative standard. You may request a reasonable accommodation or an alternative standard by contacting Charla Burchett, Health Coach/RN in the Office of Counseling and Health Services at 3-2055.

The information from your HRA and the results from your biometric screening will be used to provide you with information to help you understand your current health and potential risks, and may also be used to offer you services through the wellness program, such as health coaching programs and other activities. You also are encouraged to share your results or concerns with your own doctor.

Protections from Disclosure of Medical Information

MSU is required by law to maintain the privacy and security of your personally identifiable health information. Although the wellness program and MSU may use aggregate information collected to design a program based on identified health risks in the workplace, Live Well, Work Well@MSU will never disclose any of your personal information either publicly or to MSU, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. The only individual(s) who will receive your personally identifiable health information is MSU's Health Coach/RN, in order to provide you with services under the wellness program.

In addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program will be used in making any employment decision.

Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately. You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact the Office of Human Resources at 783-2097.

Your enrolled spouse will also be asked to authorize the collection of his or her medical information before he or she provides it.

Prescription Medications

Know Your Rx Coalition

Morehead State University joined the [Know Your Rx Coalition](#) in 2017. Know Your Rx is a purchasing coalition that was established to help reduce costs. Through the coalition, we join other state and regional universities who are interested in reducing costs while increasing the level of service to employees.

Members enrolled in Morehead State University's medical plans are automatically covered under the prescription drug plan and will have access to the services provided by Know Your Rx, which include:

- Free counseling service via live pharmacists
- Identification of lower cost prescription alternatives
- Contacting physician to facilitate seeking authorization for lower cost alternative therapies
- Liaison for patients/physicians for issues with Rx benefit including prior authorization, step therapy, and other programs
- Educational resources – adverse effects, drug interactions and general medication information

The prescription drug program features:

- Convenient mail order program to help you save money on maintenance prescriptions
- Easy-to-use retail pharmacy program with a broad network of Express Script pharmacies including major pharmacy chains and independent stores

Regardless of which medical plan you are enrolled in, you will have the opportunity to use a home delivery pharmacy service. This program provides a 90-day supply of your maintenance medication shipped to your home. Not only will you have the convenience of skipping the drug store, you will receive three months of your medication.

Know Your Rx Coalition

855-218-5979

www.kyrx.org

MONDAY-FRIDAY 8AM –6 PM E.T.

KYRx@uky.edu

Copayment Assistance for Certain Specialty Drugs

The copayments for certain specialty prescription drugs used to treat hepatitis C, cancer, or hereditary angioedema will increase. However, MSU will offer employees the opportunity to enroll in a copay assistance program—offered in partnership with the drugs’ manufacturers—called the “Variable Copay Program.” This program pays the significant share of the cost for these specialty drugs.

If you are taking specialty drugs for the conditions noted above, you will receive a letter from Accredo (ExpressScripts specialty pharmacy) alerting you to your new copayment and providing you with instructions for enrolling in copay assistance for your drug. It only takes a few minutes to enroll.

When you enroll in this program, only the amount you pay out of your own pocket will count toward your annual deductible and out-of-pocket maximum. The assistance you receive through the program will not be applied.

If you’re taking specialty medications for hepatitis C, cancer, or hereditary angioedema, we encourage you to attend an open enrollment meeting. The Variable Copay Program is on the agenda.

You can also contact the Office of Human Resources at 783-2097 to ask questions about your personal situation.

Your Dental Benefits

MSU offers employees two dental plan options:

- Delta Dental PPO
- Delta Dental Premier

You can enroll yourself and your eligible family members in dental coverage. Your monthly premium is based on the plan and coverage you select.

2018 Monthly Dental Premiums

	Delta Dental Premier	Delta Dental PPO
Single	\$13	\$0
2-Person	\$38	\$16
Family	\$67	\$40
MSU Spouses 2-Person	\$16	\$0
MSU Spouses Family	\$45	\$15

SAVE MONEY WHEN YOU VISIT A DELTA DENTAL NETWORK DENTIST

Delta Dental network providers agree to charge contracted rates for their services. This saves you money and time because you won't have to file claims for reimbursement after you see a Delta provider.

Find a Delta network provider at www.DeltaDentalKY.com.

With Delta Dental of Kentucky, you have access to a large network of providers who agree to negotiated rates with Delta Dental. Therefore, when you use a network dentist, you will pay much less of your own money for dental care. In addition, Delta's dentists will file your claims. You pay your applicable deductible and coinsurance for the services you receive. You can also access your benefits information online—search for a Delta network dentist, check your benefits, select paperless notices, review claims and amounts used toward maximums, print ID cards, and more—all at your own convenience.

If you have questions, please call Delta Dental at 800-955-2030 or go to www.DeltaDentalKY.com.

Dental Plan Comparison

Delta Dental PPO <i>Coverage Effective January 1, 2018</i>	Plan Pays			
	Delta PPO	Non-Participating Dentist*	Delta Premier	Non-Participating Dentist*
Diagnostic & Preventive				
Diagnostic and Preventive Services: exams, cleanings, fluoride, and space maintainers	100%	75%	100%	100%
Emergency Palliative Treatment: to temporarily relieve pain	100%	75%	100%	100%
Sealants: to prevent decay of permanent teeth	100%	75%	100%	100%
Brush Biopsy: to detect oral cancer	100%	75%	100%	100%
Radiographs: X-rays	100%	75%	100%	100%
Basic Services				
Minor Restorative Services: fillings and crown repair	80%	60%	80%	80%
Endodontic Services: root canals	80%	60%	80%	80%
Occlusal Guards/Adjustments : bite guards and occlusal adjustments	80%	60%	80%	80%
Oral Surgery Services: extractions and dental surgery	80%	60%	80%	80%
Major Restorative Services: crowns	80%	60%	80%	80%
Other Basic Services: miscellaneous services	80%	60%	80%	80%
Denture Repair: repairs to complete or partial dentures	80%	60%	80%	80%
Major Services				
Periodontics Services: to treat gum disease	50%	40%	50%	50%
Fixed Prosthodontic Repair: to bridges	50%	40%	50%	50%
Implant Repair: implant maintenance, repair, and removal	50%	40%	50%	50%
Relines and Rebase: to dentures	50%	40%	50%	50%
Adjustments to Dentures: adjustments to complete or partial dentures	50%	40%	50%	50%
Prosthodontic Services: bridges, implants, and dentures	50%	40%	50%	50%
Orthodontic Services				
Orthodontic Services: Braces	50%	50%	0%	0%
Orthodontic Age Limit	Dependent children to the end of the month of age 19			

* When you receive services from a Nonparticipating Dentist, the percentages in this column indicate the portion of Delta Dental's Nonparticipating Dentist Fee that will be paid for those services. The Nonparticipating Dentist Fee may be less than what the dentist charges and you are responsible for that difference.

Oral exams (including evaluations by a specialist) are payable twice per calendar year. Limited oral evaluations for a specific problem or complaint are also payable twice in the same calendar year.

Prophylaxes (cleanings) are payable twice per calendar year. Two additional periodontal maintenance procedures are payable per calendar year for individuals with a documented history of periodontal disease. Full mouth debridement is payable once in a lifetime.

People with specific at-risk health conditions may be eligible for additional prophylaxes (cleanings) or fluoride treatment. The patient should talk with his or her dentist about treatment.

Customer Service Toll-Free Number: 800-955-2030 www.DeltaDentalKY.com 2013-004-DD Rev 3/14 October 6, 2017

- Fluoride treatments are payable once per calendar year for people up to age 19.
- Space maintainers are payable once per area per lifetime with no age limit.
- Bitewing X-rays are payable twice per calendar year. Full mouth X-rays (which include bitewing X-rays) are payable once in any three-year period.
- Sealants are payable once per tooth per two-year period for the occlusal surface of first and second permanent molars up to age 16. The surface must be free from decay and restorations.
- Composite resin (white) restorations are Covered Services on posterior teeth.
- Porcelain and resin facings on bridges are Covered Services on posterior teeth.
- Implants and implant related services are payable once per tooth in any five-year period.
- Deductible – \$25 Deductible per person total per Benefit Year limited to a maximum Deductible of \$75 per family per Benefit Year. The Deductible does not apply to diagnostic and preventive services, emergency palliative treatment, brush biopsy, X-rays, and sealants.
- Maximum Payment – \$2,000 per person total per Benefit Year on all services.
- Dependent Age Limit – Dependents are covered up to age 26.
- Eligible People – The subscriber (you) is eligible for dental benefits when your employer or organization notifies Delta Dental.

Also eligible at your option are your legal spouse and your children who meet the age requirements noted above. You and your eligible dependents must enroll for a minimum of 12 months. If coverage is terminated after 12 months, you may not re-enroll prior to the open enrollment that occurs at least 12 months from the date of termination. Your dependents may only enroll if you are enrolled (except under COBRA) and must be enrolled in the same plan as you. Plan changes are only allowed during open enrollment periods, except that an election may be revoked or changed at any time if the change is the result of a qualifying event as defined under Internal Revenue Code Section 125.

If you and your spouse are both eligible under this Contract, you may be enrolled as both a Subscriber on your own application and as a dependent on your spouse's application. Your dependent children may be enrolled on both applications as well. Delta Dental will coordinate benefits.

Benefits will cease on the last day of the month in which the employee is terminated.

Flexible Spending Accounts (FSAs)

HealthEquity will be MSU's administrator in 2018!

A flexible spending account, or FSA, is an important part of MSU's overall benefit package. Through the FSAs, you can set aside a portion of your earnings, tax-free, for everyday expenses you may have with:

- Dependent day care expenses
- Out-of-pocket medical expenses including health, dental, vision, and prescription drug expenses

When you choose to participate in an FSA, it does not change your insurance benefits, it merely affects the way you pay your dependent day care and out-of-pocket medical expenses. You work hard for your money. Take advantage of the powerful benefits this plan has to offer. By participating in this plan, you can increase your spendable income.

Here's how the FSAs work.

- These are separate accounts. You decide how much you want to contribute to either or both accounts for 2018, and make an election during open enrollment.
- The Dependent Care Spending Account annual contribution limit is \$5,000 (\$2,500 if married and filing separately).
- The Health Care Spending Account annual limit is \$2,600. (Note: If both spouses work at MSU, they can each claim the \$2,600 for a total household limit of \$5,200.)
- Your contributions will be deducted from your paycheck each pay period before taxes are withheld.
- You can incur claims for a period of 14½ months: January 1, 2018 through March 15, 2019. Claims can be filed through June 13, 2019.
- If your employment is terminated mid-year, you have three months from the coverage end date to submit claims for services incurred by the end of your employment separation date. You are eligible for COBRA for your Health Care FSA if you have a positive balance remaining in your Health Care FSA account at the coverage end date.

TAKE NOTE...

If you choose the Life Long Savings Plan for medical coverage, you cannot enroll in the Health Care Spending Account. However, you are allowed to participate in the Dependent Care Account.

LIMITED-PURPOSE FSA (LPFSA)

Used in conjunction with a health savings account (HSA), an LPFSA allows you to contribute additional pre-tax dollars to use for dental and/or vision expenses. This allows you to maximize your pre-tax HSA contributions and contribute additional pre-tax dollars to an LPFSA.

Powerful Partner for Your HSA

A limited-purpose health FSA is much like a general-purpose health FSA. The main difference is that the limited-purpose account is set up to reimburse only eligible FSA dental and vision expenses, such as:

- Vision exams, LASIK surgery, contact lenses, and eyeglasses
- Dental cleanings, X-rays, fillings, crowns, and orthodontia

A Limited-purpose FSA and an HSA

IRS rules state that you cannot have both an HSA and general-purpose health FSA since both apply funds toward your medical expenses. A limited-purpose FSA allows you to continue to contribute to an HSA. You maximize your savings and tax benefits by restricting your FSA reimbursement to only vision and dental expenses.

LPFSA Funds are Available on Day 1

Your annual limited-purpose FSA contribution is available on the first day of the FSA plan year, which is January 1, 2018. But your total LPFSA election amount is deducted from your paycheck in equal amounts throughout the year. The annual limits for a LPFSA is the same as a general FSA: \$2,600 Single, \$5,200 Family.

Enrolling Is Easy

A key first step is estimating your future dental and vision expenses. Think about expenses for your spouse and your qualifying dependents. Then make your annual dollar election via Benefits Enrollment Online during open enrollment, October 16 through November 3.

About the Benefits Debit Card

The benefits debit card can simplify the process of paying for eligible expenses. You can use the card at qualifying providers and merchant locations, from physician and dentist offices to pharmacies and vision service locations. The provider simply swipes your card and expenses are taken from your account.

For those who are newly enrolled, two cards will automatically be mailed to each member at the address on file.

Additional cards can be obtained for a fee.

New Account Registration

You will receive a welcome kit from our new HSA/HRA/FSA administrator, HealthEquity, once your account is activated. This welcome kit will include many details about your account including how to register your personal account with HealthEquity.

Your Life Insurance Benefits

Life insurance provides financial protection for you and your family in the event the unexpected happens.

[Here's how your coverage works.](#)

Basic Life

The university provides you with Basic life insurance coverage of \$50,000. In addition, you have \$50,000 of Accidental Death & Dismemberment coverage in the event of a severe accident. This coverage is provided at no cost to you.

Employee Supplemental Life Insurance

During open enrollment, you have the option to purchase supplemental life insurance in the following increments: 1 times, 1.5 times, 2 times, or 3 times your earnings, rounded to the next higher \$1,000 if not an even multiple thereof. You can purchase a maximum of \$300,000 of coverage.

Guaranteed Issue Amount

The “guaranteed issue amount” is the amount of insurance that you may elect without providing evidence of good health. If you would like to enroll in the supplemental life plan, you can elect up one level (i.e., from “Basic” to one time your annual salary) without having to provide evidence of good health. If you are increasing your coverage by more than one level (i.e., “Basic” to three times your annual salary), you are required to provide evidence of good health by completing a Personal Health Application.

Dependent Life Insurance Coverage

You may elect life insurance coverage for your spouse and/or dependent children. To qualify, children must be unmarried and less than 19 years (or 25 years if a full-time student). Unmarried children over the age of 19 who are disabled may be eligible if certain conditions are met. A Personal Health Application will be required for spousal coverage but not for dependent children.

If your spouse or dependent child is confined in a hospital or elsewhere because of disability on the date his or her insurance would normally have become effective, coverage (or an increase in coverage) will be deferred until that dependent is no longer confined and has performed all the normal activities of a healthy person of the same age for at least 15 consecutive days.

You can choose from the following options:

Dependent Plan I

- **Spouse Benefit Amount:** \$10,000 (not to exceed 50 percent of your employee supplemental life amount). You may not elect coverage for your spouse if your spouse is covered as an employee under this policy.
- **Child Benefit Amount:** \$5,000 per child (Note: Children ages live birth to 6 months are limited to a reduced benefit of \$500).

Dependent Plan II

Plan II is available only when you elect supplemental coverage for yourself.

- **Spouse Benefit Amount:** \$20,000 (not to exceed 50% of your employee supplemental life amount). You may not elect coverage for your spouse if your spouse is covered as an employee under this policy.
- **Child Benefit Amount:** \$10,000 per child (Note: Children ages live birth to 6 months are limited to a reduced benefit of \$500).

Life Insurance Premiums

Monthly premiums for supplemental life and dependent life insurance coverage are noted below. The cost is based on your age and the amount of coverage you purchase.

Monthly Life Insurance Premiums	
Age as of 1/1/17	Rate per \$1,000 of Coverage per Month
Under 25	\$0.07
25 – 29	\$0.08
30 – 34	\$0.10
35 – 39	\$0.11
40 – 44	\$0.12
45 – 49	\$0.17
50 – 54	\$0.25
55 – 59	\$0.42
60 – 64	\$0.68
65 – 69	\$1.29
70 – 74	\$2.08
75 and older	Call HR for a quote
Dependent Life Coverage	
Plan I	\$3.60 per month
Plan II	\$5.50 per month

If you are increasing your supplemental life insurance by more than one level or if you are electing dependent life insurance for the 2018 plan year, you must visit www.moreheadstate.edu/hr and complete a Personal Health Application and submit to the Office of Human Resources and Payroll.

Sick Leave Bank

University Administrative Regulation (UAR) 304.02

The purpose of the Morehead State University Voluntary Sick Leave Bank (Bank) is to provide additional paid leave for employees who have exhausted their accrued sick and vacation leave benefits as the result of a serious health condition. The Bank serves as a depository into which participating employees may voluntarily contribute accrued sick leave for allocation to other participating employees. The purpose of the Bank is not intended to provide unlimited paid sick leave for any medical reason but to alleviate the hardship caused when employees lose compensation as the result of a serious health condition. This regulation follows the FMLA definition of serious health condition and includes time required to care for an immediate family member.

New Sick Leave Bank Participation:

- Must have a balance of 6 sick leave days (45 hrs) on December 31
- Must complete a **Sick Leave Bank Enrollment Form** during Open Enrollment

Current Sick Leave Bank Participants:

- No action necessary if you want to continue
- If you want to cancel send email to benefits@moreheadstate.edu

Your Voluntary Benefits

MSU offers several AFLAC voluntary benefits. These programs are designed to provide you with income replacement or a financial benefit in the event you become seriously ill, have some time in the hospital, or become disabled. Most of the plans have a guaranteed issue amount if you enroll during open enrollment. Go to www.aflac.com/moreheadstate or call AFLAC at 606-783-7463 for details and to learn more about how AFLAC's plans can benefit you and your family.

Here's what is offered to MSU employees; you pay the cost for this coverage.

- Group critical illness insurance coverage combines simplified underwriting with benefits for such events as internal cancer, heart attack and stroke, among others.
- Group accident insurance coverage will help pay cash benefits to employees when unexpected medical and everyday expenses add up after a covered accident.
- Group hospital insurance coverage provides cash benefits when injury or sickness happens. Expenses can add up quickly and supplemental hospital indemnity insurance helps cover these expenses.
- Cancer Care insurance coverage is designed to provide you with cash benefits during covered cancer treatments.
- Disability insurance coverage pays you benefits (i.e., a monthly amount that is a percentage of your gross income) for a period of time while you are disabled.

You can also enroll in the following benefits at any time—election is not limited to the open enrollment period, and you can make changes at any time.

- 403b annuities offered through TIAA, Voya and VALIC
- 457b annuities offered through TIAA, Voya, VALIC and KY Deferred Compensation Authority
- 401k offered through KY Deferred Compensation Authority
- 529 Educational Savings Accounts through KESPT

For more information or to enroll, contact the providers as noted below:

- TIAA.org:800-842-2992
- Valic.com:800-892-5558
- Voya.com:855-ONE-VOYA
- KY Deferred Comp:800-542-2667

Frequently Asked Questions

Human Resource cannot advise you on what benefit coverage to elect. Human Resource representatives can provide you with information and resources to assist you in making decisions regarding your benefit coverage's and providers.

What is open enrollment?

Open enrollment is a period each year when you can make changes to your health insurance, dental insurance, life insurance and flexible spending account for the following calendar year. This is the only opportunity you will have to make changes unless you experience a qualifying life event.

When is open enrollment?

Open enrollment begins on Monday, October 16, and ends on Friday, November 3, 2017 at midnight.

When do plan changes go into effect?

The benefits you select during open enrollment are effective from January 1 through December 31, 2018.

If I don't want to make any changes do I need to do anything?

It depends. If you want to contribute to a Flexible Spending Account or a Limited Purpose Flexible Spending Account, you must re-enroll each year. Also, you need to make your wellness "pledge" in order to receive the \$100 incentive for completing this Live Well, Work Well @ MSU program activity.

Do I need to sign up for the Health Reimbursement Arrangement (HRA)?

No. If you enroll in the Enhanced HRA Value Plan or the PPO Plan, you will automatically be enrolled in the HRA.

Do I need to enroll in a HSA if I choose the Life Long Savings Plan?

No. MSU will set up an HSA account for you with HealthEquity, the HSA plan custodian. However, note that if you are currently participating in the Health Care Flexible Spending Account, you must use that balance as soon as possible or roll it into a Limited Purpose Flexible Spending Account. MSU is not allowed to establish your HSA until you exhaust the FSA funds or roll them into a Limited Purpose FSA.

What if I do not want MSU health care?

You must opt out of MSU's health insurance by completing Benefits Enrollment Online.

If I opted out of MSU health care during 2017, do I still need to complete the online enrollment to continue to opt out of coverage for 2018?

No. Your current election will carry forward.

Do I have to complete the Cotinine Test to receive the non-tobacco rate?

If you received the non-tobacco rate for medical coverage in 2017, you are not required to complete a Cotinine test for 2018. However, if you paid the tobacco-user rate and became tobacco-free in 2017, you do need to provide a negative Cotinine test result. Refer to page 10 for more information

Get the App

MSU's many health and wellness providers offer apps. Download them to your phone—no cost to you—and use them to manage your health and well-being. It's easy and fun. Click the "Get for IOS" (iPhone) or "Get for Android" (Android).



Anthem Anywhere

- Find doctors and providers
- Estimate costs
- Get an ID card
- Manage prescriptions
- Access your records
- View claims

Get for IOS 

Get for Android 



Healthy Now (companion to the Live Well, Work Well @ MSU program)

- Access activity logs and trackers
- Manage medications
- Join group health challenges
- Track your incentives

Get for IOS 

Get for Android 

Delta Dental



- Find a dentist
- Estimate costs
- Get an ID card
- View claims

Get for IOS 

Get for Android 

HealthEquity (for HSA, HRA, FSA and LPFSA accounts)



- View your transaction history
- Submit claims using your mobile phone's camera
- View claims status
- Send payments and reimbursements

Get for IOS 

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