

2020

Yeshiva University High Schools Benefits Guide



Your Benefits, Your Choice

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Welcome!

This guide summarizes your benefit plan options and offers helpful tips for getting the most value from the Yeshiva University High School benefits plans.

Please read the guide carefully, but it is not your only resource. Any time you have questions about enrollment, you can contact the YU Benefits Service Center at 855.719.2179 Monday through Friday 8 am - 8 pm. Questions about all benefits can be addressed by Yeshiva's employee advocacy service, Health Advocate, at 866.799.2731. You can also call the YU Benefits Office. located in Belfer Hall on the Wilf Campus at 646.592.4340 or write to benefits@yu.edu. Although this guide contains an overview of benefits, for complete information about the plans available to you, please refer to the benefit summaries and plan information on the YU HR website at yu.edu/hr/benefits.

Benefit Basics

We strive to offer a comprehensive benefits program designed to help you and your family stay healthy and feel secure. It is important that you read the information in this guide carefully and share it with your spouse if he/she is covered under our plan. You will have opportunities to learn about your benefits and how to choose what is right for you. This guide provides highlights of the benefit offerings.

Yeshiva University High Schools Benefits available to you:

- Medical
- Dental
- Employer Paid Basic Life Insurance
- Commuter, Transit and Parking Plans
- Health and Dependent Care Flexible Spending Accounts
- Retirement Plan
- Tuition Remission

Changing Coverage During the Year

You can change your coverage during the year when you experience a qualifying life status change, such as marriage, divorce, birth, adoption, placement for adoption, or loss of coverage. The change must be reported online through the Benefitfocus enrollment platform or by contacting the Benefits Service Center at **855.719.2179** within 30 days of the event. The change must be consistent with the event.

Who is Eligible?

All full-time faculty and full- and part-time non-union employees scheduled to work at least 20 hours per week are eligible to participate in the Yeshiva University High Schools benefits program. Eligible employees may also enroll their legal spouse and dependent children who are under 26 years of age.

Health Advocate

One number, complete support

All questions or concerns can be directed to **Health Advocate**- your benefits advocacy service. With Health Advocate, you have unlimited access to a team of experienced Personal Health Advocates, typically registered nurses, supported by medical directors and benefits and claims specialists. Their Personal Health Advocates are familiar with Yeshiva University High Schools's entire employee benefits package. They can explain your coverage, answer your questions, and when you need to reach a specific benefit, they can connect you right away.

The Personal Health Advocates are also experts at navigating the complicated healthcare and insurance systems. They'll do the paperwork, make the calls and cut through the red tape to resolve a wide range of issues, such as finding providers, making appointments and untangling medical bills. All to save you time, money and worry.

Who is covered?

Health Advocate is available to eligible employees, spouses, dependents, parents and parents-in-law.

Here when you need them the most

Your Health Advocate benefit can be accessed 24/7. Normal business hours are Monday - Friday, from 8 am to 12 am (midnight), Eastern Time. Staff are also available for assistance after hours and on weekends.

There is no cost to use these services

Yeshiva University High Schools offers Health Advocate at no cost to you.

They're not an insurance company

Health Advocate is not affiliated with any insurance or thirdparty provider, and it does not replace health insurance coverage, provide medical care or recommend treatment.

Your privacy is protected

The Health Advocate staff carefully follows protocols and complies with all government privacy standards. Your medical and personal information is kept strictly confidential.

Help is Only a Phone Call Away

Your Personal Health Advocate can help:

- Answer questions about ALL benefits offered by Yeshiva University High Schools.
- Resolve insurance claims and billing issues.
- Connect you to the right benefit at the right time.
- Support medical issues, no matter how complex.
- Answer questions about diagnoses and treatments.
- Research the latest treatment options.
- Coordinate services related to all aspects of your care.
- Find the right in-network doctors and make appointments.
- Coordinate expert second opinions and transfer medical records.
- And much more!

Contact Health Advocate 24/7

866.799.2731

answers@HealthAdvocate.com HealthAdvocate.com/members

How to Enroll

You are eligible to enroll in benefits on the first of the month following your date of hire. If you are hired on the first of the month you are immediately eligible to enroll. In this guide you will find the necessary directions to enroll in the different benefit programs offered at Yeshiva University High Schools.

You need to complete all necessary enrollment material on the Benefitfocus enrollment platform. To access the enrollment platform, please log into your InsideTrack portal and click on the Benefitfocus link located under the Employee tab. Pet Assure, Long-Term Care and Discount Auto & Homeowners are not part of the Benefitfocus online enrollment. If you are interested in these plans, please reach out to the corresponding contact listed in this guide. You need to have your enrollment completed within 30 days of your date of hire.

Online Benefits Enrollment

Enrollment for benefits is done online through Yeshiva's enrollment system, Benefitfocus. Follow the below steps to enroll online.

Step 1: Log in to Benefitfocus

Log in to your InsideTrack portal at insidetrack.yu.edu or from the Inside Track tab at the top of the main page of YU.edu, click the Employee Tab on the left side of the toolbar, locate the section Employee Tools and Systems on the right side of the page and click the link for Benefitfocus.

Need Assistance?

If you need help with enrolling or have any benefit questions please contact the YU Benefit Service Center

- Email:
 - YUBenefits@Benefitfocus.com
- Call: 855.719.2179Mon-Fri, from8:00am to 8:00pm

Step 2: Locate Your Enrollment Link

Once logged in to Benefitfocus, you will see a "Welcome!" page. This page includes a "Welcome" video in the center of the screen, a "Quick Links" section on the left, and a blue toolbar across the top where you can navigate the various sections within the Benefitfocus site.

To enroll during Open Enrollment: Locate the 2020 Open Enrollment section in the center of the page (directly above the "Welcome!" video). You will see a link that says Click HERE to complete your 2020 Open Enrollment. Once you click that link, you can begin your benefits enrollment.

New Hire Enrollment: If you are a new hire enrolling in benefits for the first time, locate the **Welcome New Hires** section that is on the right side of the page, directly beneath the blue toolbar. You will see a link that says **Click Here to Enroll in Benefits**. Once you click that link, you can begin your benefits enrollment.

Medical

Yeshiva University High Schools offers you one medical plan. The coverage is provided by Oxford (UnitedHealthcare). You will find an overview of the plan below. The network for this plan is the Oxford Liberty Network, which gives you access to providers in the NY/NJ area. If you have dependents out of the area, they may use the United Healthcare Choice Plus Network. See page 8 for instructions on finding in-network providers.

Medical Plan Overview

| | Oxford EPO | |
|---|---|--|
| | You Pay | |
| | In-network Only | |
| Annual Deductible | | |
| Individual/Family | \$4,000 / \$8,000 | |
| Annual Out-of-Pocket Maximu | ım (Includes Deductible) | |
| Individual/Family | \$6,750/\$13,500 | |
| Co-pays/Co-insurance | | |
| Primary Care Physician Visits | After meeting deductible, \$25 copay/visit | |
| Specialist Office Visit | After meeting deductible, \$75 copay/visit | |
| Preventive Care | No cost to you | |
| Emergency Room (copays waived if admitted) | 30% after deductible | |
| Inpatient Hospital | | |
| Outpatient Surgery | 30% after deductible | |
| Diagnostic Screenings | | |
| Retail Prescription Drugs (up | to 31-day supply) | |
| Tier 1 — generics | 30% after deductible | |
| Tier 2 — preferred | 30% after deductible | |
| Tier 3 — non-preferred | 30% after deductible | |
| Mail Order Prescription Drugs | (90-day supply) | |
| Tier 1 — generics | 30% after deductible | |
| Tier 2 — preferred | 30% after deductible | |
| Tier 3 — non-preferred | 30% after deductible | |

Employee Premium Costs

The amount you pay depends on the number of dependents you cover. Your medical contributions are made on a pre-tax basis. This means that your contributions are deducted from your pay before payroll taxes are calculated.

| | Oxford EPO | | |
|-----------------------|-------------------------|----------------------|--|
| | Semi-Monthly Payroll | Bi-Weekly Payroll | |
| Employee Only | \$82.11 | \$75.79 | |
| Employee + Spouse | \$164.21 | \$151.58 | |
| Employee + Child(ren) | \$139.58 | \$128.84 | |
| Employee + Family | \$234.00 | \$216.00 | |

Preventive Medication

If you take a preventive medication, it may be covered at 100% not subject to the medical deductible.

To find out of your drug is on the list:

- Go to oxfordhealth.com
- Click on "Members/Prospective Members"
- In the tool bar on the right side of the page, click "Tools and Resources"
- Locate the "Your Pharmacy Coverage" section and select "Prescription Drug List"
- Click the link for "January 2019 Oxford Traditional Access and Enhanced PDL PPACA \$0 Cost-share Preventive Medications".
- This is the latest version of the preventive medications drug list, and is subject to change. Please check the website frequently to ensure you have access to the most current version of this list.

Pharmacy Ancillary Charge Program

Your medical plan includes coverage for prescriptions, including generics and higher-cost brand name drugs. Your out-of-pocket cost for a prescription medication can often vary depending on whether you receive a generic or brand-name medication. The below will help you understand your options for choosing between a generic and a brand-name medication and how your choice affects how much you will contribute toward the price of your medication.

With the **Ancillary Charge Program**, you have two options to choose from when receiving a medication:

- If you choose a lower-cost generic medication

 you will pay only your cost share of 30% after deductible, with no additional charge.
- If you choose a higher-cost brand-name medication when a chemically equivalent prescription drug is available on a lower tier (e.g., generic) - you will pay your cost share, plus the difference in price between the brand name and the generic drug

The ancillary charge is the difference in price between the brand-name medication and the lower-cost generic equivalent medication. It is the non-covered amount that you as the member pay in addition to your cost share.

Your Oxford plan will continue to provide reimbursement for a covered brand drug at the agreed upon rate, if you choose the brand drug. But you will pay the difference in price between the brand and the generic.

FAQs

How can I find out how much a drug costs — and whether the ancillary charge was applied correctly if I received a brandname drug rather than a generic?

To check medication prices, members can log into the Pharmacy Benefit Manager website, OptumRx, by clicking the Online Pharmacy link, under Your Pharmacy Coverage in the Tools & Resources section of the <u>oxfordhealth.com</u> member website.

Use the online medication price check feature of the OptumRx website or call Customer Care for assistance. You can also price check brand versus generic medications at your retail pharmacy by giving the pharmacist the names of the brand and generic medications recommended by your doctor. Keep in mind that drug classifications and pricing are continually changing so you should check these sources each time you fill a prescription for the most current information.

Do all brand-name drugs have generic equivalents?

No. All brand-name drugs do not necessarily come in generic form. Generic versions cannot be produced until after the patent on the brand drug expires and they are tested and approved by the FDA. A brand-name prescription medication without a lower cost generic alternative is not subject to the ancillary charge.

Find a Provider

The provider search feature on oxfordhealth.com is a convenient way to find network medical and behavioral health providers near you — and it may help you avoid unnecessary out-of-pocket costs.

Find a medical provider in vour Oxford network

- 1. Go to oxfordhealth.com and select Browse Our Provider/Facility Resources at the bottom of the page.
- 2. Select **Liberty** from the list of options. Then on the next screen, enter your location.
- 3. Select the health care category you'd like to search. Or, use the search bar if you know the doctor's name or specialty, facility, clinic or medical group name.
- 4. Follow the prompts and a list of options in your ZIP code will appear.

Look for the hearts

The UnitedHealth Premium® designation program can help you choose a doctor who meets standards for quality and cost efficiency.



Premium Care Physician



Quality Care Physician



Not Evaluated For Premium Care Does Not Meet Premium Quality Criteria

Find a behavioral health provider in your Oxford network

- 1. Go to oxfordhealth.com and select Members/Prospective Members.
- 2. Select Find a Mental Health Provider in the Links and Tools box.
- 3. Enter a doctor's name, expertise or condition into the search bar.
- 4. Follow the prompts and a list of options in your ZIP code will appear.

Find a medical provider in the UnitedHealthcare **Choice Plus network**

Follow these steps if you need to access the national UnitedHealthcare Choice Plus network when traveling outside of the tri-state area.

- 1. Go to <u>oxfordhealth.com</u> and select Members/Prospective Members.
- 2. Select "Search Outside the Oxford Service Area" in the Links and Tools box.
- 3. Select the Continue button at the bottom of the page.
- 4. Select the health care category you'd like to search. Or, use the search bar if you know the doctor's name or other specifications.
- 5. Follow the prompts and a list of options in your ZIP code will appear.

Submit Claims

If you use a UnitedHealthcare Choice Plus provider, claims submitted on your behalf should be sent directly to the Oxford Claims Department for payment. Claims sent to UnitedHealthcare will not be processed for reimbursement.

Oxford Claims Department P.O. Box 29130 Hot Springs, AR 71903

Oxford On-Call

Health Care Guidance, 24 hours a day

Questions about your health can come up at any time. Maybe when you can't reach your regular doctor. Maybe when your child has a fever in the middle of the night or a twisted ankle on vacation. It could even be when you have a cold that doesn't seem important enough for a doctor's appointment. No matter the issue, you can turn to Oxford On-Call® 24 hours a day, seven days a week for health care information.

Overview

Oxford On-Call lets you talk with a registered nurse who can offer you suggestions and help guide you to the care that is right for you. You can also listen to recorded messages on over 1,100 health topics, or even go online to chat with a nurse about your general health questions.

Oxford On-Call can assist you with many health matters, including the following:

- General health information
- Deciding where to go for care
- Information on how to best care for yourself
- Talking with your healthcare provider on your behalf prior to an appointment with your provider
- Providing support and addressing questions when you or a family member is diagnosed with a serious medical condition

Information Library

With Oxford On-Call, you can also access Oxford's Health Information Library, which contains 1,100 recorded messages on a variety of health topics.

Live Web Chat

There is also a Live Web chat feature, which allows you to chat online with nurses about many health topics, and confidentially receive guidance to online resources.

Simply click on the "24 Hour Nurse Call Line" link on oxfordhealth.com's Member portal home page under "Links and Tools."

Ready to give Oxford On-Call a try?

Call Oxford toll-free at 1-800-201-4911.



Health4Me

Your go-to health care resource when you're on the go.

The UnitedHealthcare Health4Me smartphone app puts your Oxford plan in your hands — 24 hours a day, seven days a week.

Three ways Health4Me can work for you:

Estimate costs.

With the myHealthcare Cost Estimator tool, you can estimate out-of-pocket costs before you go to the doctor. Just enter a procedure or condition and see how different costs can be depending on where you go for care.

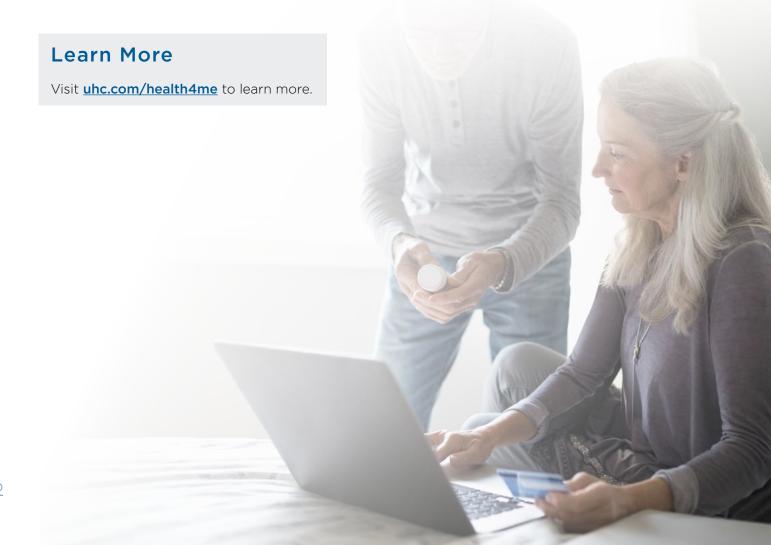
Access important information, immediately.

View and share important information, email your family's health plan ID cards, review claims, and check account balances and benefit amounts.

Get real, personal care.

The Health4Me app can also connect you with helpful professionals when you need them.

The Easy Connect feature asks you what kind of help you need, then has a Health Advisor contact you to answer your questions.



Sweat Equity Program

Get rewarded for getting in shape!

The Oxford Sweat Equity Program is a gym reimbursement program developed with your lifestyle in mind. If you are enrolled in the Oxford medical plan, you can get reimbursed up to \$200 if you complete 50 workouts in a six-month period. All you have to do is complete your qualifying workouts and submit a reimbursement form.

The Qualifying Workouts

With the Sweat Equity Program, you can complete a wide variety of qualifying exercises. Plus, you have the option to combine your fitness facility visits with your physical fitness classes to more easily reach the required 50 workouts.

The Reimbursement

Your reimbursement period begins on the date of your first fitness facility visit or class and ends after you have completed 50 visits, classes, or a mix of visits and classes that add up to 50. The reimbursement period ends 6 months from your first visit. You can start a new reimbursement period one day after your other reimbursement period ends.

Questions?

If you have questions, please call Oxford at the toll-free phone number ("For Members") on the back of your health plan ID card.

After you've completed your 50 workouts in the sixmonth period, send Oxford the following:

- Your completed Oxford Sweat Equity
 Program Reimbursement Form. Find
 the form at <u>oxfordhealth.com</u> >
 Members > Tools & Resources > Forms
 & Materials > Download Forms.
- 2. Proof of your payment (e.g., receipt, automatic bank withdrawal statement) for the gym fee, as well as any money you paid for fitness classes, during the six-month period.
- 3. Copy of the brochure or flier that describes the cardio (aerobic) machines at the gym you used or the cardio benefits of the class you took.
- Mail these documents to:
 Oxford Sweat Equity Program
 P.O. Box 29130
 Hot Springs, AR 71903

To get started, choose a gym or sign up for fitness classes

Decide on a cardio (aerobic) workout that you'll enjoy and find a facility with the equipment or classes that promote cardiovascular wellness. To get reimbursed, the facility and classes you choose must be open to the general public. Remember to check with your doctor before you start exercising or increasing your activity level.

If you are unable to meet the reimbursement requirements of this program, you might be able to earn the same reward in a different way. Call us at the toll-free phone number ("For Members") on the back of your health plan ID card and we will work with you and, if necessary, your doctor, to find another way for you to earn the same reward.

Dental Insurance

Yeshiva University High Schools offers a dental insurance plan through UnitedHealthcare. The plan is a PPO plan, which means you can use in-network or out-of-network dentists - of course, you'll pay less out of your pocket if you use an in-network dentist. The chart below is a brief outline of the plan. Please refer to the summary plan description for complete plan details.

The UHC dental network for this plan is the Options PPO 20 Network. You can find in-network providers online by logging into myuhc.com and using the "Find a Dentist" tool. This will allow you to search for providers by name, facility or location.

Dental Benefits Overview

| | UnitedHealthcare Dental PPO | | |
|---|-----------------------------|-----------------------|--|
| | In-network | Out-of-network | |
| Calendar Year Deductible | | | |
| Employee only | \$50 | \$50 | |
| Family coverage | \$150 | \$150 | |
| Dental Services | Plan paid after deductible | | |
| Type I Services - Diagnostic & Preventive | 100% no deductible | 100% no deductible | |
| Type II Services - Basic Services | 80% | 80% | |
| Type III Services - Major Services | 50% | 50% | |
| Calendar Year Maximum | | | |
| Per Person | \$1,500 | \$1,500 | |
| Orthodontics (children only up to age 19) | Plan paid a | after deductible | |
| Coinsurance | 50% | 50% | |
| Lifetime Maximum | \$1,500 | \$1,500 | |

Estimate Your Costs Online

When you log on to myuhc.com, you can use the dental cost calculator to calculate your out-of-pocket costs ahead of time.

- 1. Select Coverage & Benefits
- 2. Select **Dental**
- 3. Select **Dental Cost Calculator**

Employee Premium Costs

| | UnitedHealthcare Dental PPO | | |
|-----------------------|-----------------------------|-------------------|--|
| | Semi-Monthly Payroll | Bi-Weekly Payroll | |
| Employee | \$15.76 | \$14.55 | |
| Employee + Spouse | \$31.52 | \$29.09 | |
| Employee + Child(ren) | \$38.55 | \$35.58 | |
| Employee + Family | \$57.35 | \$52.93 | |



Life Insurance

Life Insurance coverage provides important financial protection for your family in the event of your death. Yeshiva University High Schools provides eligible employees with a Basic Life Insurance benefit at no cost to you. The benefit amounts available are listed below:

■ Under age 65: \$25,000

Age 65-69: \$16,250

■ Age 70 or older: \$12,500

Current employees who previously had voluntary life coverage with SunLife will have the option to convert your coverage currently in place with SunLife to a self-pay arrangement. In late December 2019, YU will provide you a conversion notice with instructions on how to contact Sun Life directly.

Your Basic Life Insurance benefit is administered by Lincoln Financial. To file a life insurance claim, call **888.787.2129** or log on to **LFG.com**.



Flexible Spending Accounts

Yeshiva University High Schools's Flexible Spending Account (FSA) program allows for the dollars you spend on certain expenses incurred throughout the year to be exempt from taxes. The program is comprised of two separate benefits: Health Care FSA and Dependent Care FSA.

Health Care FSA

The Health Care FSA allows the member to use pre-tax earnings to pay for medical, dental, and vision expenses allowed by the IRS but not reimbursed by insurance. Insurance premiums are not reimbursable expenses under an FSA. The current annual maximum contribution is \$2,700. This is subject to change based on the IRS.

Dependent Care FSA

This option allows the member to use pre-tax earnings to pay for eligible work-related child care or adult care expenses. (Eligible children must be under the age of 13 for child care expenses.) The current annual maximum contribution is \$5,000 per household. This is subject to change based on the IRS.

Note: The deadline to file your 2020 Health Care FSA and Dependent Care FSA expenses is March 31st, 2021. The IRS permits you to roll over up to \$500 of unused Health Care FSA funds into the following year.





Commuter, Transit and Parking Plans

Yeshiva University High Schools offers both a commuter and transit plan as well as a parking plan that allows you to set aside pre-tax dollars to pay for your qualified commuter and parking expenses. These plans are offered through WageWorks.

Commuter and Transit Plan

You can currently contribute up to \$265 pre-tax per month into your transit plan. This is subject to change based on the IRS. You can use these funds to pay for qualified bus, subway, train, ferry or commercial vanpool expenses.

Parking Plan

You can currently contribute up to \$265 pre-tax per month into your parking plan. You can use these funds to pay for qualified parking expenses for work.

For both plans, you can also make an additional posttax contribution election so that you can have the full amount you need in your account to cover your commuter expenses. If you enroll in the Commuter plan you will receive a debit card from WageWorks. **Note:** The Commuter Parking Account is not the same as the on-site campus parking that is managed by the Yeshiva Security Office.

Other Benefits

Retirement Plan

Yeshiva University High Schools offer a 403b retirement plan through Fidelity Investments. You are eligible as of your date of hire. YU will provide a 3% employer match for those who contribute at least 3% to the plan.

You can learn more about this program and your investment options by contacting your Fidelity Consultant Marsha Alexis at **845.519.3546** or by email at **Marsha.Alexis@fmr.com**. To enroll in the retirement plan, contact the Benefits office at **646.592.4340**.

Tuition Remission Program

Yeshiva University High Schools provides education opportunities for you and your family to pursue a degree at one of the many Yeshiva University undergraduate and graduate programs or at any affiliated school.

Full-Time Faculty, Full-Time Exempt Staff and Full-Time Non-Exempt Staff, their legal spouses and qualified dependents are eligible for Tuition Remission benefits after one year of service.

To learn more about the program, please review the Tuition Remission policy. For more information, please visit <u>yu.edu/hr/benefits</u> or call the YU Benefits Office at **646.592.4340**.



Contacts

YU Benefits Service Center

Benefitfocus

Member services: **855.719.2179** M-F 8am-8pm Email: **YUBenefits@Benefitfocus.com**

Medical plan

Oxford (UnitedHealthcare)

Member services: **800.444.6222**Website: **oxfordhealth.com**

Pharmacy

Optum (through Oxford)

Member services: **800.444.6222** Website: <u>oxfordhealth.com</u>

Dental

UnitedHealthcare

Customer service: 877.816.3596

Website: myuhc.com

Flexible Spending Accounts

WageWorks

Customer service: **800.950.0105** Website: **myflexonline.com**

Life Insurance

Lincoln Financial

Member services: 888.787.2129

Website: LFG.com

YU Employee Benefits Advocacy Services

Health Advocate

Customer service: **866.799.2731**Email: **answers@HealthAdvocate.com**Website: **HealthAdvocate.com/members**

YU Benefits Office

Customer service: **646.592.4340**

Email: benefits@yu.edu





Your Benefits, Your Choice