2021 Annual Enrollment
October 26 – November 6, 2020
Today we’ll talk about…

- Introduction
  - What is Annual Enrollment?

- Insurance options
  - Medical insurance plans
  - Ancillary insurance plans
  - Additional benefits

- HSAs and FSAs

- Conclusion
Introduction

2021 Annual Enrollment
What is Annual Enrollment?

 The period of time during which faculty, staff and other eligible parties are able to make changes to their insurance plan elections*

 Generally, two weeks each fall; this year:
  – October 26 – November 6, 2020
  – for all benefit-eligible faculty, staff and retirees**

* Some changes may be made outside of Annual Enrollment if you have experienced an eligible family status change.

** Retirees are not eligible for some things discussed in this presentation, such as a pre-tax premium and some decision-making tools geared for employees' insurance options. Retirees will receive their own decision-making guides and forms in the mail in October.
Our Challenge – Increasing Health Costs

- Since the health plan costs make up almost half of the benefit costs, it has a direct impact on the benefit rate, impacting school and department costs.
- Premiums are a direct result of how members use the plan:
  - Approximately 90% of premiums pay for care for our members.
  - The remaining 10% pay for our vendors who process claims and manage the administration of our plans.
Possible Levers

- There are limited levers to address rising health plan costs:
  - Increase premiums
  - Increase cost share through deductibles, co-insurance and co-pays
  - Decrease administrative costs
- We first target administrative costs and have reduced them by about 5%, or more than $12M, for 2021
- Remaining reductions were made through benefit design changes
The Approach

- Maintain plan premiums at current levels to the extent possible
- Be competitive with our comparators in the market
- Achieve consistency in the value of the plans offered
- Deliver on organizational goal of a 10% cost reduction for 2021 expected costs
### Benchmarking

**Better Than Market**

**Consistent with Market**

<table>
<thead>
<tr>
<th>Plan</th>
<th>Plan Value</th>
<th>Employee Deductible</th>
<th>Coinsurance</th>
<th>Copays</th>
<th>Out of Pocket Maximum</th>
<th>Emergency Room</th>
<th>Urgent Care</th>
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<tbody>
<tr>
<td>HSP</td>
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<td>CNP</td>
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</table>
Key Benchmark Findings

- UM employee and dependent premiums are lower when compared to all industries and to public/governmental employers.
- Combined employee cost of premiums and out of pocket costs (total employee contribution) are lower by approximately $723 per year on average.
- UM administration fees are 11% below the average employer in the database.
How UM’s Plans Compare to Market for 2021

<table>
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<tr>
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<th>Plan Value</th>
<th>Employee Deductible</th>
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</table>
INSURANCE OPTIONS

2021 Annual Enrollment
We’ll talk about in this section

- Medical insurance plans
  - Healthy Savings Plan
  - Custom Network Plan (Columbia and St. Louis)
  - PPO Plan (for those employed by the UMKC business unit, this includes the tiered feature)

- Ancillary insurance plans
  - Dental
  - Vision
  - Life
  - Long Term Disability
  - Accidental Death and Dismemberment
The Good News!

- Minimal changes to health plan premiums
- No changes to premiums or plan design for
  - Dental
  - Vision
  - Life (including spouse and dependent)
  - Accidental Death and Dismemberment
  - Long Term Disability
## Medical insurance options and premiums

<table>
<thead>
<tr>
<th>Medical plan option</th>
<th>Coverage level</th>
<th>You pay in 2020 (monthly premium)</th>
<th>You will pay in 2021 (monthly premium)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthy Savings Plan</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Lowest premium</td>
<td>Self</td>
<td>$44</td>
<td>$58</td>
</tr>
<tr>
<td>• Combined medical and R deductible</td>
<td>Self and spouse</td>
<td>$154</td>
<td>$160</td>
</tr>
<tr>
<td>• HSA w/ University contribution</td>
<td>Self and children</td>
<td>$129</td>
<td>$133</td>
</tr>
<tr>
<td>• Broad network</td>
<td>Self and family</td>
<td>$254</td>
<td>$258</td>
</tr>
<tr>
<td>Custom Network Plan <em>(Columbia and St. Louis area)</em></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Mid-level premium</td>
<td>Self</td>
<td>$83</td>
<td>$84</td>
</tr>
<tr>
<td>• Medical deductible; separate R deductible</td>
<td>Self and spouse</td>
<td>$231</td>
<td>$232</td>
</tr>
<tr>
<td>• Focused network</td>
<td>Self and children</td>
<td>$200</td>
<td>$203</td>
</tr>
<tr>
<td>• Columbia: MU Health providers</td>
<td>Self and family</td>
<td>$365</td>
<td>$366</td>
</tr>
<tr>
<td>• St. Louis: Mercy health providers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Other providers are considered out-of-network,</td>
<td></td>
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<tr>
<td>even if they accept UHC</td>
<td></td>
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<tr>
<td>PPO Plan <em>(includes Kansas City Tiered Feature)</em></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Highest premium</td>
<td>Self</td>
<td>$171</td>
<td>$176</td>
</tr>
<tr>
<td>• Medical deductible; separate R deductible</td>
<td>Self and spouse</td>
<td>$411</td>
<td>$417</td>
</tr>
<tr>
<td>• Broad network</td>
<td>Self and children</td>
<td>$366</td>
<td>$374</td>
</tr>
<tr>
<td>• Tiered Feature: In-network providers are</td>
<td>Self and family</td>
<td>$629</td>
<td>$632</td>
</tr>
<tr>
<td>divided into categories with different price</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>points.</td>
<td></td>
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</tr>
</tbody>
</table>
## Side-by-side comparison of medical plans

### What you pay for in-network coverage

<table>
<thead>
<tr>
<th></th>
<th>Healthy Savings Plan</th>
<th>Custom Network Plan (Columbia &amp; St. Louis)</th>
<th>PPO Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Medical deductible</strong></td>
<td>$1,750/self  $3,500/family*</td>
<td>$200/self  $600/family*</td>
<td>Kansas City and Rolla: $500/self; $1,500/family*  Columbia and St. Louis: $800/self; $2,400/family*</td>
</tr>
<tr>
<td>(combined med. &amp; Prescription)</td>
<td>(combined med. &amp; Prescription)</td>
<td>(combined med. &amp; Prescription)</td>
<td>(combined med. &amp; Prescription)</td>
</tr>
<tr>
<td><strong>Prescription deductible</strong></td>
<td></td>
<td>Retail: $50/person  Mail-order: $0/person</td>
<td>Retail: $75/person  Mail-order: $0/person</td>
</tr>
<tr>
<td><strong>Medical plan out-of-pocket limit</strong></td>
<td>$3,500/self  $7,000/family*</td>
<td>$3,500/self  $7,000/family*</td>
<td>$3,500/self  $7,000/family*</td>
</tr>
<tr>
<td>(combined med. &amp; Prescription)</td>
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<td>(combined med. &amp; Prescription)</td>
</tr>
<tr>
<td><strong>Prescription drug out-of-pocket limit</strong></td>
<td>$5,050/self  $10,100/family*</td>
<td>$5,050/self  $10,100/family*</td>
<td>$5,050/self  $10,100/family*</td>
</tr>
<tr>
<td><strong>Prescription drug: Retail</strong></td>
<td></td>
<td>Greater of: $7 copay or 20% coinsurance  $15 copay or 25% coinsurance  $30 copay or 50% coinsurance</td>
<td>Greater of: $7 copay or 20% coinsurance  $15 copay or 25% coinsurance  $30 copay or 50% coinsurance</td>
</tr>
<tr>
<td>▪ Formulary generic</td>
<td>▪ Formulary brand</td>
<td>▪ Non-formulary brand</td>
<td>▪ Formulary brand  ▪ Non-formulary brand</td>
</tr>
<tr>
<td>▪ Formulary brand</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Non-formulary brand</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>15% after deductible</strong></td>
<td></td>
<td>Greater of: $15 copay or 20% coinsurance  $30 copay or 25% coinsurance  $60 copay or 50% coinsurance</td>
<td>Greater of: $15 copay or 20% coinsurance  $30 copay or 25% coinsurance  $60 copay or 50% coinsurance</td>
</tr>
<tr>
<td><strong>Prescription drug: Mail</strong>*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Formulary generic</td>
<td>▪ Formulary brand</td>
<td>▪ Non-formulary brand</td>
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<td>▪ Formulary brand</td>
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<td>▪ Non-formulary brand</td>
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<td>▪ Non-formulary brand</td>
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</tr>
</tbody>
</table>

* “Self” and “family” are different for the Healthy Savings Plan than the other plan options.

** 90-day fill/refill for mail orders; includes MUHC pharmacies.
## Side-by-side comparison of medical plans

### What you pay for in-network coverage

<table>
<thead>
<tr>
<th>Service</th>
<th>Healthy Savings Plan</th>
<th>Custom Network Plan (Columbia &amp; St. Louis)</th>
<th>PPO Plan</th>
<th>PPO Plan with tiered feature (UMKC business unit only)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventive services</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Co-insurance</td>
<td>10%</td>
<td>10% after deductible; Columbia &amp; St. Louis: 20% after deductible</td>
<td>Designated Network: 10% coinsurance Network: 20% after deductible</td>
<td></td>
</tr>
<tr>
<td>Primary care visit</td>
<td>$15 copay/visit (incl. Mizzou Quick Care)</td>
<td>$20 copay/visit</td>
<td>Tier 1 (♥♥): $15 copay/visit Tier 2 (♥): $25 copay/visit</td>
<td></td>
</tr>
<tr>
<td>Specialist office visit</td>
<td>$40 copay/visit</td>
<td>$40 copay/visit</td>
<td>Tier 1 (♥♥): $35 copay/visit Tier 2 (♥): $40 copay/visit</td>
<td></td>
</tr>
<tr>
<td>Urgent care</td>
<td>$55 copay/visit</td>
<td>$50 copay/visit</td>
<td>$50 copay/visit</td>
<td></td>
</tr>
<tr>
<td>Lab and x-ray</td>
<td>15% after deductible</td>
<td>Applicable co-insurance after deductible</td>
<td>Designated Network: 10% coinsurance Network: 20% after deductible</td>
<td></td>
</tr>
<tr>
<td>Outpatient visit</td>
<td>10% co-insurance after deductible</td>
<td>Applicable co-insurance after deductible</td>
<td>Designated Network: 10% coinsurance Network: 20% after deductible</td>
<td></td>
</tr>
<tr>
<td>Inpatient visit</td>
<td>10% co-insurance after deductible</td>
<td>Applicable co-insurance after deductible</td>
<td>Designated Network: 10% coinsurance Network: 20% after deductible</td>
<td></td>
</tr>
<tr>
<td>Emergency room</td>
<td>$250 copay/visit after deductible</td>
<td>$250 copay/visit after deductible</td>
<td>$250 copay/visit after deductible</td>
<td></td>
</tr>
<tr>
<td>Ambulance</td>
<td>$200 copay/occurrence after deductible</td>
<td>$200 copay/occurrence after deductible</td>
<td>$200 copay/occurrence after deductible</td>
<td></td>
</tr>
</tbody>
</table>
Virtual visits

- Lower cost than urgent care or emergency room
  - Talk to a doctor from your mobile device or computer without an appointment, any time
  - Great option when your doctor is not available or if you get sick while traveling with a non-emergency health situation

- Accessing virtual visits
  - Columbia CNP can access through MUHC’s video visits portal
  - All other plans can access through myuhc.com or the United Healthcare App

- Conditions commonly treated:
  - Cold, flu, bronchitis, pink eye, rash, sinus problems, sore throat, etc.

- Learn more at umur1.us/virtualvis
Prescription options

- Retail Pharmacies
  - Physical pharmacy you walk-in to.
  - Supply limited to 31 days

- Mail-Order Pharmacy
  - Send prescriptions directly to your home. Up to 90-day supply
  - Ideal for maintenance medications or long-term therapies
  - Receive a 90-day supply for the same cost as 60-day supply

- Mizzou Pharmacy
  - Treated as mail-order, meaning they are able to offer prescriptions at the same reduced, mail-order costs

- Specialty Pharmacy Services
  - Supplied by Accredo for all plans
  - PPO, Columbia CNP and HSP members may also use Mizzou Pharmacy
Other Benefits

- **Tuition Assistance***
  - **Active employees:** 75% of tuition/supplemental fees.
  - **Spouse/dependents****: 50% tuition waived for UM System college-level credit courses up to the allotted limit.
  - **Retirees:** 100%
    - Deadlines for requests are due mid-semester; learn more at umurl.us/tuition.

- **Employee Assistance Program**
  - Confidential, professional service provided to all faculty/staff, their families, retirees and organizational work units. Visit umurl.us/EAP for more.

- **Shared Leave Program**
  - Eligible employees can donate accrued vacation leave benefits to a pool for employees who have experienced certain catastrophic events and have exhausted other sources of paid leave. Visit umurl.us/shrdlv for more.

* Eligibility requirements apply; visit umurl/us/tuition for information on eligibility and other deadlines.
**Eligible employee must have one year of continuous full-time service in a fully benefit-eligible position before spouse/dependents are eligible.
Health savings account (HSA)

About the account

- University contributes
  - Employee: $400
  - Employee & Spouse: $800
  - Employee & Children: $800
  - Employee & Family: $1,200
- Use it for medical, prescription, dental and vision expenses
- Unused funds roll over from year to year
- Funds must be available prior to use
- If you’re switching from a Health FSA to an HSA in 2021, your FSA must have a zero balance by 12/31/20, or it will delay contributions to your HSA until 4/1/21.

About eligibility

- Eligibility requirements
  - Must be in a high-deductible plan (the Healthy Savings Plan is the University’s IRS-designated high-deductible plan)
  - Cannot be claimed as a dependent on some else’s taxes
  - Other coverage may disqualify you
- IRS contribution limits for 2021:
  - $3,600 per individual
    ($1,000 additional catch-up for 55 or older)
  - $7,200 per family
    ($1,000 additional catch-up for 55 or older)
- If you leave, you take funds with you
Flexible spending account (Health Care FSA)

About the account
- University does not contribute
- Use it for medical, prescription, dental and vision expenses
- Cannot roll over funds
  - 2.5 month grace period allows extra time to incur expenses through March 15 of following year
- ASI FlexCard option
- Enrollment does not automatically roll over from one plan year to the next.
  - If you wish to contribute funds in 2021, you must re-enroll during Annual Enrollment.

About eligibility
- Cannot be enrolled in the Healthy Savings Plan
- IRS contribution limits for 2021:
  - $2,750 for individual
- If you leave the University, you will no longer be eligible to participate in the FSA
  - Any remaining funds can only be used for expenses incurred prior to coverage end date

* If you have an FSA in 2020 and are changing to the Healthy Savings Plan with an HSA, your 2020 FSA must have a zero balance by December 31. A balance of any other amount will prevent you and the university from contributing to your HSA until April 1.
Flexible spending account (Dependent Care FSA)

About the account

- Use it for out-of-pocket childcare and/or elder care dependent expenses
- Funds must be available prior to use.
- Enrollment does not automatically roll over from one plan year to the next.
  - If you wish to contribute funds in 2021, you must re-enroll during Annual Enrollment.

About eligibility

- Any benefit eligible employee may enroll in a Dependent Care FSA, even those enrolled in the Healthy Savings Plan
- IRS contribution limits for 2021:
  - $5,000 for family
CONCLUSION

2021 Annual Enrollment
Confirmation Statement Changes

- When elections are submitted through myHR an email will be sent to your University account letting you know your enrollment has been submitted.
  - If you don’t receive an email, you have not completed your enrollment.

- Confirmation Statements will be available through myHR in mid-December.
  - An email will be sent to your University account once your confirmation statement is ready to be viewed and printed through myHR.
Life & LTD Evidence of Insurability

- Evidence of Insurability will be required for any increases to coverage during the Annual Enrollment Period.

- If coverage is elected that requires evidence of insurability:
  - Unum will email your University of Missouri account with a link to your personalized Evidence of Insurability application in early December 2020.
    - The Email will come from TheUnumClientServiceCenter@unum.com and the subject line will read: 'Your Recent Insurance Election - Action requested'.
  - If approved, coverage will become effective January 1, 2021, or upon approval by Unum if after January 1.
Proof of Relationship Requirement

- Proof of Relationship must be provided for any new dependents enrolled.
- Faculty & Staff will have 31 days from the closing of Annual Enrollment to provide the documentation.
- Accepted documentation can be found at: [http://umurl.us/proof](http://umurl.us/proof)
- If documentation is not submitted to the UM System Office of HR by December 7, 2020 dependent(s) will be removed from coverage.
There’s help!

- The *2021 Benefits Guide* has many of the answers you’re looking for
- Regularly check the Annual Enrollment webpage at: [umurl.us/enrollment](umurl.us/enrollment)
  - Updates will always appear there
  - Schedule one-on-one meetings with your campus HR Generalist
- Contact your local HR Generalist or call the HR Service Center at (573) 882-2146 or (800) 488-5288
- UnitedHealthcare has tools available to help
  - Visit the Annual Enrollment webpage for a list

*Remember to review and make changes between October 26 and November 6!*
University of Missouri System
COLUMBIA | KANSAS CITY | ROLLA | ST.LOUIS

Visit umurl.us/benefits for more

HR Service Center
umurl.us/hrsc
(573) 882-2146
hrservicecenter@umsystem.edu