



# 2024 Open Enrollment Presentation

The Village for Families  
and Children



# Introduction

**Open Enrollment Begins: May 14, 2024**

**Open Enrollment Closes: May 30, 2024**

## Open Enrollment

This is the one time of the year to make changes, unless you have a Qualifying Life Event, such as you get Married, Divorced, have a Baby, Adopt or you lose other coverage. You have 30 days from the date of the event to notify HR to make appropriate changes.

## What do you need to do?

- Please make sure that you review each of the plan summaries
- You must log into the benefits (Bswift) online portal in Paylocity to make changes to benefit selections, elect new coverage or waive coverage [PRIOR TO May 30th](#)

Benefits begin on **July 1, 2024**

End on **June 30, 2025**



# Introducing OnMed

## The Five Ws

- **Who?** Hartford HealthCare is partnering with OnMed® to pilot test new access points for healthcare in Connecticut. Visit Hartford HealthCare's OnMed Care Stations web page to learn more. Hartford HealthCare invited The Village to participate in this project.
- **What?** OnMed® Care Stations offer walk-in (no appointment needed) telehealth services. The innovative virtual care platform that utilizes a broad range of diagnostic and interactive technologies to provide a personalized care experience. Learn more and watch a video here: OnMed – The Anywhere Healthcare Solution.
- **Where?** Hartford HealthCare will be placing OnMed® Stations at three locations in Connecticut. The first, at Stop & Shop in Killingly, opened in early December. The second will be installed at Village South.
- **When?** The Village and Hartford HealthCare are planning a soft launch on March 13, 2024, with an official opening marked by a ribbon-cutting slated for March 18.
- **Why?** The Village leadership is excited to participate in this pilot project because:
  - The project aligns with our strategic goal of building integrated health care partnerships for collaboration and better care.
  - The community we serve faces multiple barriers to healthcare access, which contributes to health disparities.
  - The pandemic accelerated changes in how some people interact with their healthcare providers. In 2021, 47 percent of adults in Greater Hartford reported having a telehealth visit, with 68 percent reporting it was as good or better than an in-person visit.
  - This innovation has the potential to increase access to care as well as the patient experience of care.
  - A pilot allows us to evaluate a new approach that, if successful, could be scaled up for greater impact.



### What concerns can be treated at the OnMed® Station?

OnMed® is designed to meet many urgent and sick care needs. The Care Station serves patients who require medical attention for minor-to-moderate concerns, such as:

- sore throat
- sinus pain
- other common symptoms of illness, including fatigue, cough and nasal congestion
- skin rash
- eye or ear infections
- minor burn
- abdominal pain and other gastrointestinal issues

The OnMed® Station will be located in the office suite inside to the left of the main entrance. The space was previously home to Adult Services and is used as a waiting area during VITA season.

# 2024 Benefit Choices



## Medical & Pharmacy

Cigna



## Dental Benefits

Cigna



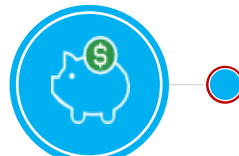
## Vision Benefits

Anthem



## Health Savings Account (HSA)

HSA Bank



## Flexible Spending Account (FSA)

Inspira Financial (formerly PayFlex)



## Life and Disability Insurance

New York Life

# Medical Plan Options

## Coverage Details

### BENEFITS

### HSA Open Access Plus HDHP

#### DEDUCTIBLE

Single / Family (In-Network)

\$2,500 / \$5,000

Single / Family (Out-of-Network)

\$5,000 / \$10,000

The Village –HSA Contribution

\$500 / \$1,000

#### COINSURANCE *(Applies after deductible is met)*

Member Cost Share % (In-Network)

0%

Member Cost Share % (Out-of-Network)

30%

#### MEMBER COST SHARE *(In-Network)*

Preventative Care

No Cost

Primary Care (PCP)

0% after deductible

Specialist

0% after deductible

In-Patient Hospital

0% after deductible

Out-Patient Surgery

0% after deductible

Urgent Care

0% after deductible

Emergency Room

0% after deductible

#### OUT-OF-POCKET MAXIMUM

Single / Family (In-Network)

\$3,500 / \$7,000

Single / Family (Out-of-Network)

\$7,000 / \$14,000

### Medical Plan Terms

#### Deductible

What you pay before coinsurance kicks in to pay more of your costs

#### Coinsurance

The percentage of costs you pay (10%, for example) after you've paid your deductible

#### Copay

What you pay at the time of service

#### Out-Of-Pocket Maximum

The maximum amount you will pay for covered medical expenses during the plan year

### Check out the Cigna Member Portal!

Download the **Cigna app** or visit [mycigna.com](https://mycigna.com) to register and login into your account. Access plan details, ID cards and more!



# Prescription Drug Plan Information

Rx Copays	HSA Open Access Plus HDHP
<i>Rx Deductible</i>	<i>After Medical Deductible</i>
<p><b>TIER 1</b> <i>Generic</i></p>	<p>Retail (30 Day): \$5 copay Mail-Order/Retail (90 Day): \$10 copay</p>
<p><b>TIER 2</b> <i>Preferred Brand-Name</i></p>	<p>Retail (30 Day): \$35 copay Mail-Order/Retail (90 Day): \$70 copay</p>
<p><b>TIER 3</b> <i>Non-preferred Brand-Name</i></p>	<p>Retail (30 Day): \$50 copay Mail-Order/Retail (90 Day): \$100 copay</p>

**Helpful RX Tools & Tips:**

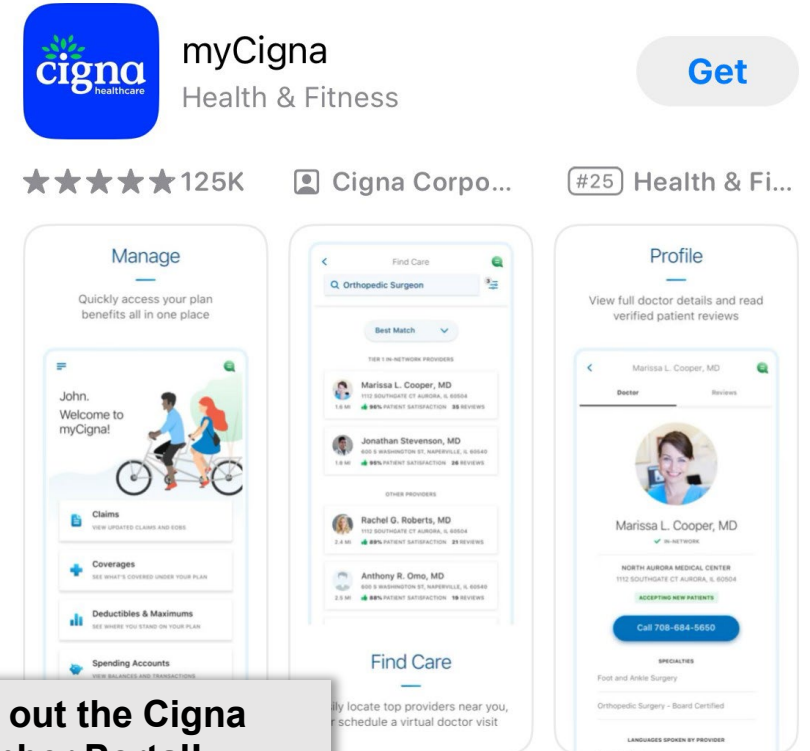
- **Save money with generic drugs** – ask your doctor if its appropriate for you to use a generic drug rather than a brand name drug
- **Mail Order** – many drugs are available in a 90-day supply rather than the 30-day retail supply
- **Look up your prescriptions** – download the [Cigna app](#) or visit [mycigna.com](#) utilize the Price a Medication tool to see the medications your plan covers and specific coverage requirements.

**New this year:**

- Cigna is introducing their **Member Choice Program** to customers. Members have a choice between CVS or Walgreens as the anchor of their pharmacy benefits. The pharmacy that you choose is considered in-network and the pharmacy that you don't choose is considered out-of-network.
- **All other remaining pharmacies are still in-network.** This change only applies to choosing between CVS & Walgreens (and their affiliate pharmacies) specifically.
- Members can make an election by logging onto [mycigna.com](#) or calling Cigna Customer service

# Cigna – Digital ID Cards

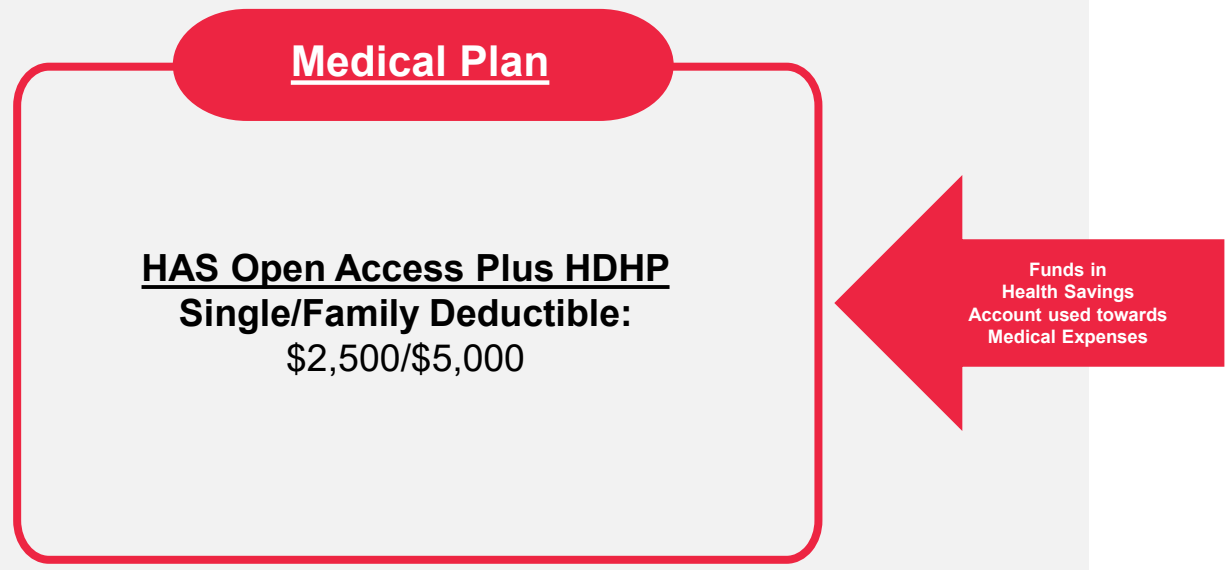
- Cigna has Digital ID Cards through myCigna.com or myCigna.App for plan participants:
  - Log into myCigna.com or myCigna.app
  - Click or tap “ID Cards”
  - View cards
  - Save Cards to your mobile device
- Physical ID Cards – you will still have access to physical medical ID cards through myCigna.com where you can request a physical card to be mailed to you at the address on file. You can expect to receive the physical ID card within two weeks of your request.
- Current ID card experience is not changing ... Digital ID Cards are available for Medical with separate Digital ID cards for Dental.
- Real-time changes via digital cards



## Check out the Cigna Member Portal!

Download the **Cigna app** or visit [mycigna.com](https://mycigna.com) to register and login into your account. Access plan details, ID cards and more!

# Health Savings Account (HSA)



## Health Savings Account (HSA)

- Employee Pre-tax Contributions
- Tax Free Growth
- Tax Free Distributions for medical, dental and vision expenses
- Unused Funds Rollover

### The Village Employer Contribution 2024

**Single:** \$500  
**Family:** \$1,000

### IRS Maximum Contributions 2024

**Single:** \$4,150  
**Family:** \$8,300  
**Age 55+:** \$1,000 Catch-up Contribution

#### **Note:**

- Cannot have HSA account if you are enrolled in Medicare, Tricare, or any other insurance coverage
- Cannot be claimed as a dependent on someone else's tax return
- Cannot be covered by a general-purpose health reimbursement account (HRA)



# HSA Eligible Expenses

## What can your HSA be used for?

HSA funds can be used for qualified medical expenses that your insurance didn't cover, and you paid out-of-pocket for.

## Over The Counter (OTC) Expense Eligibility Change

HSA dollars can be used towards certain OTC drugs and medications without a doctor's prescription.

- Menstrual Care Products, Fertility & Pregnancy Devices and Breast Pumps & Supplies
- Diagnostic and Orthotic Devices, Medicine, and Pain Management Drugs



## Example Qualified Expenses

- Services rendered by physicians, surgeons, dentists and other medical practitioners
- Transportation to get medical care
- Imaging like MRIs
- Medical equipment and supplies
- Acupuncture
- Birth Control Pills
- Chiropractic Care
- Coinsurance, Copay & Deductibles
- COBRA & Medicare Premiums
- Dental Expenses
- Eye Exams, Eyeglasses & Contacts
- Fertility Treatments
- Flu Shots
- Hearing Aids & Devices
- Hospital Services
- Immunization
- Insulin
- LASIK Eye Surgery
- Medical & Prescription Expenses
- Obstetrical Expenses
- Physical Therapy
- Psychiatric Care
- Surgery
- Specialty Drugs
- Vision Expenses
- Weight Loss Programs
- Wheelchairs & More\*

# New Hire/New Enrollments HSA Contribution Schedule

First Month of Coverage	Month ER Contribution Made	Amount of Contribution	
		Single	Family
January	February	250	500
February	March	200	400
March	April	150	300
April	May	100	200
May	June	50	100
June	July	250	500
July	August	250	500
August	September	200	400
September	October	150	300
October	November	100	200
November	December	50	100
December	January	250	500

# Dental Insurance

PLAN FEATURES	In-Network	Out-of-Network
<b>Benefit Period</b>	Calendar Year	
<b>DEDUCTIBLE</b>		
Single	\$50	
Family	\$150 max	
<b>When does it apply?</b>	When receiving Basic services (Does not apply for Preventive services)	
<b>COVERED SERVICES</b>		
<b>CLASS I: Preventive Services</b>	Covered at 100%	Covered at 100%
<b>CLASS II: Basic Services</b>	Covered 100%	Covered at 80%
<b>CLASS III: Major Services</b>	Covered at 60%	Covered at 50%
<b>CLASS IIII: Orthodontia</b>	50% coinsurance to \$1,500 lifetime maximum per child (through age 18 – Child must have been banded prior to their 19 <sup>th</sup> birthday in order to receive coverage)	
<b>ANNUAL MAXIMUM</b>		
<b>Maximum Benefit</b> <i>Allowed per Benefit Period</i>	\$1,500 per covered individual	

**In-Network vs. Out-of-Network**  
 In-Network providers have negotiated prices with Cigna, optimizing the value of the dental plan. Out-of-Network providers may have higher costs for the same services and may result in a balance billable expense.

**Need to locate a participating In-Network provider?**  
 Visit the [Cigna app](#) or [mycigna.com](#)  
 Search by location, dentist name, or office name.



# Vision Insurance



PLAN FEATURES	IN-NETWORK	OUT-OF-NETWORK
<b>Vision Exam</b> <i>Once Every 12 months</i>	\$10 Copay	Reimbursed up to \$30
<b>COVERED SERVICES</b>		
<b>Single/Bifocal/Trifocal Lenses</b> <i>Once Every 12 months</i>	\$10 Copay	Reimbursed up to: \$36/Single \$54/Bifocal \$69/Trifocal
<b>Frames</b> <i>Once Every 24 months</i>	\$130 allowance, 20% off balance	Reimbursed up to \$64
<b>Contact Lenses</b> <i>Once Every 12 months</i>	\$130 allowance (15% off any remaining balance for conventional lenses)	Reimbursed up to \$105

Need to locate a participating In-Network provider? Visit the [Anthem app](#) or [anthem.com](https://www.anthem.com)

# Employee Benefit Plan Contributions – Per Pay Period (26 pay)

Medical Plan	Bi-Weekly Employee Contributions			
	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
Full-Time (40 hours)	\$74.43	\$160.03	\$154.81	\$212.88
Part-Time 2 (30 - 39 hours)	\$84.54	\$281.64	\$272.48	\$374.65
Part-Time 1 (20 - 29 hours)	\$178.63	\$384.07	\$371.56	\$510.96

Dental Plan	Bi-Weekly Employee Contributions			
	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
	\$8.44	\$16.03	\$18.90	\$27.51

Vision Plan	Bi-Weekly Employee Contributions			
	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
	\$2.65	\$5.04	\$5.31	\$7.80

# Flexible Spending Accounts

## Health Care FSA \$3,200 Max. Contribution

- Use to cover your out-of-pocket costs for qualified medical, dental and vision expenses for yourself, spouse and dependent child(ren)
- **Employees who are participating in the Gold Plan are ineligible to participate**
- Full amount elected is available **Day 1**
- Rollover amount \$640
- Claims incurred between 7/1/24 and 6/30/25, can be submitted up until 9/30/25

## Dependent Care FSA \$5,000 Max. Contribution (\$2,500 if married & filing separately)

- Use to cover day-care expenses for qualified dependents such as pre-school programs, Latch Key programs through age 13, Daycare Centers for Adults
- **Available to benefit eligible employees with qualifying dependents**
- Only have access to the account balance
- Use it or Lose it benefit

You must actively reenroll every year in each of these benefits

# Life Insurance

## Basic Life & AD&D – Employer Paid Benefit

- 100% Paid By The Village
- Benefit amount is 1x your annual earnings up to a max of \$200,000
- Benefits reduce by 35% at age 65 and by an additional 15% at age 70

## Additional Life Insurance for you and your family

- **Employee:** Units of \$10,000 to a max of 5x salary or \$300,000, whichever is less. Guaranteed issue for newly eligible is \$150,000.
- **Spouse:** Units of \$5,000 to a max of \$100,000 not to exceed 50% of employee election. Guaranteed issue for newly eligible is \$35,000.
- **Children:** Flat \$10,000
- Paid via employee payroll deduction
- Benefits reduce by 35% at age 65 and by an additional 15% at age 70
- Subject to Evidence of Insurability (EOI) when previously waived

**Remember to Update Your Beneficiary!**



# Disability Insurance

## Short Term Disability – Employee Paid Benefit

- Voluntary, payroll deducted benefit
- Benefit is 60% of salary up to a weekly max benefit of \$1,000
- Benefits begin on the 15th calendar day for a covered illness and the 1<sup>st</sup> day for a covered accident and continue up to a maximum of 24 weeks
- This plan will pay second to CT Paid Family Leave
- May be subject to Evidence of Insurability if previously waived

## Long Term Disability – Employer Paid Benefit

- 100% Paid by The Village
- Benefit is 60% of salary to \$5,000/month
- Benefits begin after you have satisfied a 180-day waiting period
- Benefits are payable as long as you qualify as disabled, up to Social Security Retirement Age





# Employee Assistance Program (EAP)

The Village provides employees with an Employee Assistance Program, which provides confidential support services to employees and their family members. The EAP can help with:

- Relationship & family issues
- Depression, stress or anxiety
- Grief or loss of a loved one
- Eating disorders or substance abuse
- Workplace difficulties



**EAP Company: ESI**

**Phone: (800) 252-4555**

**Website: [www.theEAP.com](http://www.theEAP.com)**

- **Counseling Benefits** – access to telephonically speak with a counselor 24 hours a day. Every counselor has a Master’s or Ph.D. degree. Counselors can help make referrals to local counselors and provide work-life or wellness resources. Includes access to short-term, in-person counseling
- **Work/Life Benefits** – assistance for financial, legal, and child & elder care
- **Online wellness resource center & One-on-One Wellness Coaching** - with reliable articles, videos and self-assessments for dealing with stress, diet, fitness and smoking
- **Peak Performance Coaching** - via one-on-one telephonic sessions with a Certified coach combined with structured, online trainings
- **Training & Personal Development Benefits** – over 10,000 free online personal and professional development trainings
- **Self-Help Resources** – access to a collection of thousands of tools, videos, financial calculators and informative articles covering every issue you might face, including adoption, relationships, legal, financial, cancer and more
- **Lifestyle Savings Benefit** – includes thousands of discounts, rewards and perks in a variety of categories.
- **Personal Assistant** – help for everyday issues, including finding a local medical and dental provider, summer camp options and more.

**100% Paid for by The Village!**



# What's Next?

- You must log into the benefits (Bswift) online portal in Paylocity to make changes to coverage, elect new coverage or waive coverage **NO LATER THAN MAY 30<sup>th</sup>**
- If participating in medical, dental or vision, register online at [mycigna.com](https://mycigna.com) or download the Cigna app. Plan ID cards can be downloaded or printed – ***Cigna is no longer automatically mailing ID cards***
- If participating in medical and would like to use CVS or Walgreens (or one of their affiliates) as your primary pharmacy, you must select on the [mycigna.com](https://mycigna.com) portal or call Cigna
- If you are increasing or decreasing your HSA contribution, make sure to change the amount while in the online portal
- If you are opting to enroll in FSA, make sure to elect an amount while in the online portal. FSA enrollment is required each year

## REMINDER

Open Enrollment Begins: May 14, 2024  
Open Enrollment Closes: May 30, 2024

Benefits begin on **July 1, 2024**  
End on **June 30, 2025**

### Questions? Contact NFP at:

Dawn DeMatteo, Sr. Account Executive: 860.507.8884; [dawn.dematteo@nfp.com](mailto:dawn.dematteo@nfp.com)  
Jennifer Alfano, Account Manager; 860.507.8904; [jennifer.alfano@nfp.com](mailto:jennifer.alfano@nfp.com)



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