



EMPLOYEE BENEFITS ENROLLMENT GUIDE

2020 Plan Year



Welcome to Open Enrollment for Your 2020 Benefits!

Oswego Health System offers an excellent selection of benefits. This Employee Benefits Enrollment Guide is designed to familiarize you with the benefits that are available. Benefits are a significant part of your total compensation package. It is important to be aware of the benefits and the value they represent to you.

Who is eligible?

If you are an Oswego Health employee, hired to work 60 hours or more per bi-weekly pay period, you are eligible to enroll in most benefits described in this guide. You may also add spouses and children, from birth to age 26, onto your health, dental and vision benefits.

What's new this year?

We are pleased to announce that for the third year in a row, there will be NO increases to the dental and vision premiums for 2020! There will be a slight change to the medical premiums. The **Choice Plan** is now called the **Oswego Health Advantage Plan** and the rates are staying the same. However, the **Choice Plus Plan** is changing to the **Oswego Health Advantage Plus Plan**, the Individual & 2-Person rates are decreasing with a slight increase to family rates. There has been some plan design changes for medical. You will see below that the Preferred Domestic Network has much richer benefits than the In Network & Out of Network benefits. Preventive Services are covered in full within both, the Oswego Health "Domestic" network and within other "In-

Network" providers who are contracted with BlueCross BlueShield. To find a provider within the preferred, Domestic network, please visit: <http://ohportal/home to Human Resources, Domestic Provider>

Oswego Health also provides basic life insurance and disability coverage. You have the option of purchasing additional, supplemental amounts. Employees can also elect to enroll in a Health Care or Dependent Care Flexible Spending Account.

How to Enroll?

It is required that all eligible employees log onto Bswift (www.oswegohealth.bswift.com) and go through the enrollment process for 2020 **even if you are making no changes**. A new medical plan must be elected if you plan on being enrolled. Open enrollment will run from Monday, November 11th through Friday, November 22nd. Enter your user name: First initial of first name, first initial of last name and last four digits of your SSN. All passwords have been reset to the last 4 digits of your SSN. Medical premiums have been set to the non wellness rate and will be updated based on Blue4U results for 1-1-2020. Should you need assistance with open enrollment, please contact Human Resources during the hours of 7:00 AM – 4:00 PM Monday – Friday during this two week period.

Prepared on behalf of Oswego Health System by USI Insurance Services

This brochure summarizes the benefit plans that are available to Client Name eligible employees and their dependents. Official plan documents, policies and certificates of insurance contain the details, conditions, maximum benefit levels and restrictions on benefits. These documents govern your benefits program. If there is any conflict, the official documents prevail. These documents are available upon request through the Human Resources Department. Information provided in this brochure is not a guarantee of benefits.

Medical Benefits – Excellus BlueCross BlueShield

Please note that deductibles **must be satisfied** prior to copays, for all services other than preventive care and prescription drugs when going in network and out of network. In the domestic network, deductible does NOT apply to primary and specialist office visits, urgent care and allergy testing. Each individual only has the responsibility of satisfying the Single deductible even if on a +1 or Family plan. All covered dependents will also have the same responsibility until the +1 or Family deductible has been satisfied in total.

		Oswego Health Advantage Plan			Oswego Health Advantage Plus Plan		
		Domestic Network	In Network	Out of Network	Domestic Network	In Network	Out of Network
Deductible	Individual	\$500	\$1,000	\$2,000	\$250	\$500	\$1,000
	2-Person	\$1,000	\$2,000	\$4,000	\$500	\$1,000	\$2,000
	Family	\$1,500	\$3,000	\$6,000	\$750	\$1,500	\$3,000
Coinsurance		15%	35%	45%	10%	30%	40%
Out-of-Pocket Maximum		\$8,150 Individual / \$16,300 Family			\$5,300 Individual / \$10,600 Family		
Physician Office Visit		\$15 copay	\$45 copay, subject to deductible	45% subject to deductible	\$10 copay	\$30 copay, subject to deductible	40% subject to deductible
Specialists Office Visits		\$25 copay	\$50 copay, subject to deductible	45% subject to deductible	\$20 copay	\$40 copay, subject to deductible	40% subject to deductible
Preventive Care		Covered in full		45% subject to deductible	Covered in full		40% subject to deductible
Inpatient Hospitalization		\$250 copay, subject to deductible	\$1,500 copay, subject to deductible	45% subject to deductible	Covered in Full	\$1,000 copay, subject to deductible	40% subject to deductible
Emergency Room		\$150 copay, subject to deductible	\$250 copay, subject to deductible		\$100 copay, subject to deductible	\$175 copay, subject to deductible	
Urgent Care Services		\$30 copay	\$100 copay, subject to deductible	45% subject to deductible	\$30 copay	\$75 copay, subject to deductible	40% subject to deductible
Outpatient Surgery		\$250 copay, subject to deductible	\$1,250 copay, subject to deductible	45% subject to deductible	\$100 copay, subject to deductible	\$1,000 copay, subject to deductible	40% subject to deductible
Laboratory and Diagnostic Imaging		Covered in Full	35%, subject to deductible	45%, subject to deductible	Covered in Full	30%; subject to deductible	40%, subject to deductible
Rx Copay Retail		\$5 Generic, \$30 Brand Preferred, \$50 Brand Non-Preferred	\$10 Generic, \$40 Brand Preferred, \$60 Brand Non-Preferred, 20% to max of \$100 Specialty	Not covered	\$5 Generic, \$30 Brand Preferred, \$50 Brand Non-Preferred	\$10 Generic, \$40 Brand Preferred, \$60 Brand Non-Preferred, 20% to max of \$100 Specialty	Not covered
Rx Copay Mail		2x Copay 90 Day Supply		Not covered	2x Copay 90 Day Supply		Not covered
Rx Out of Pocket Max		\$1,300 Individual \$2,600 Family		Not covered	\$1,300 Individual \$2,600 Family		Not covered

Medical Plan Rates	Oswego Health Advantage Plan			Oswego Health Advantage Plus Plan		
	Individual	2-Person	Family	Individual	2-Person	Family
Employee Bi-weekly Cost	\$36.74	\$93.80	\$153.86	\$69.17	\$143.62	\$266.88
Employee Bi-weekly without Wellness	\$61.74	\$118.80	\$178.86	\$94.17	\$168.62	\$291.88

Medical Benefits Continued

Blue4U Wellness Program Reminder

Any employee participating in the wellness program must have met 3 out of the 5 target measures in their biometric screening in order to receive the wellness premium rate in 2020, a reduction of \$25 per pay. If you did not meet the necessary target measures, you have the opportunity to complete 1 health coaching session in order to earn the discounted premium.

Excellus Examples of Coverage

Below are examples to help illustrate how coverage works. It is important to us that our employees feel comfortable that they understand their coverage. Please review the information below and always feel free to reach out to the Human Resources Department with any questions.

Claim Cost Scenarios: Current Benefits vs. 2020 plans

Choice Plan vs. Oswego Health Advantage:

Service		Current	2020*
Procedure	Cost	Choice	Oswego Health Advantage
PCP Office Visit	\$100	Domestic: \$25 copay In-Network: \$30 copay after \$500 deductible satisfied	Domestic: \$15 copay In-Network: \$45 copay after \$1,000 deductible satisfied
Specialist Office Visit	\$120	Domestic: \$35 copay In-Network: \$40 copay after \$500 deductible satisfied	Domestic: \$25 copay In-Network: \$50 copay after \$1,000 deductible satisfied
ER Visit	\$750	Domestic: \$200 copay after \$500 deductible satisfied In-Network: \$200 copay after \$500 deductible satisfied	Domestic: \$150 copay after \$500 deductible satisfied In-Network: \$250 copay after \$1,000 deductible satisfied
MRI	\$1,000	Domestic: 20% after \$500 deductible satisfied In-Network: 20% after \$500 deductible satisfied	Domestic: Covered in Full In-Network: 35% after \$1,000 deductible satisfied
OP Surgery	\$3,000	Domestic: 20% after \$500 deductible satisfied In-Network: 20% after \$500 deductible satisfied	Domestic: \$250 copay after \$500 deductible satisfied In-Network: \$1,250 after \$1,000 deductible satisfied
IP Surgery	\$12,000	Domestic: First \$5,000 CIF (\$500 Deductible then 20%) In-Network: 20% after \$500 deductible satisfied	Domestic: \$250 Copay after \$500 deductible satisfied In-Network: \$1,500 after \$1,000 deductible satisfied

Choice Plus Plan vs. Oswego Health Advantage Plus:

Service		Current	2020*
Procedure	Cost	Choice Plus	Oswego Health Advantage Plus
PCP Office Visit	\$100	Domestic: \$15 copay In-Network: \$20 copay after \$250 deductible satisfied	Domestic: \$10 copay In-Network: \$30 copay after \$500 deductible satisfied
Specialist Office Visit	\$120	Domestic: \$25 copay In-Network: \$30 copay after \$250 deductible satisfied	Domestic: \$20 copay In-Network: \$40 copay after \$500 deductible satisfied
ER Visit	\$750	Domestic: \$150 copay after \$250 deductible satisfied In-Network: \$150 copay after \$250 deductible satisfied	Domestic: \$100 copay after \$250 deductible satisfied In-Network: \$175 copay after \$500 deductible satisfied
MRI	\$1,000	Domestic: Covered in Full In-Network: \$30 copay after \$250 deductible satisfied	Domestic: Covered in Full In-Network: 30% after \$500 deductible satisfied
OP Surgery	\$3,000	Domestic: \$500 copay after \$250 deductible satisfied In-Network: \$750 after \$250 deductible satisfied	Domestic: \$100 copay after \$250 deductible satisfied In-Network: \$1,000 copay after \$500 deductible satisfied
IP Surgery	\$12,000	Domestic: First \$5,000 CIF (\$250 Deductible then \$500) In-Network: \$750 after \$250 deductible satisfied	Domestic: Covered in Full In-Network: \$1,000 copay after \$500 deductible satisfied

*The employee discount has been factored into your new copay design. For those not on our insurance, please follow policy to obtain. Benefits illustrated at Domestic and In-Network levels only. Additional deductible and coinsurance amounts will apply if services performed outside of the Oswego Health or BlueCross BlueShield networks.

Dental Benefits – Delta Dental

There are no plan design changes for 2020! See EOC for each plan in Bswift as some exclusions may apply.

	Preventive Plan	Comprehensive Plan
Annual Deductible – Individual	None	\$50
Annual Deductible – Family	None	\$150
Preventive Services	100%	100%
Basic Services	80%	80%
Major Services	0%	50%
Annual Benefit Maximum	\$750	\$1,200
Orthodontic Services	Not Covered	50%
Orthodontic Deductible	Not Covered	None
Orthodontic Lifetime Maximum	Not Covered	\$1,500
Dependents to age	26	26

	Preventive Plan			Comprehensive Plan		
	Individual	2-Person	Family	Individual	2-Person	Family
Employee Bi-weekly Cost	\$8.70	\$18.69	\$29.12	\$15.80	\$29.00	\$43.92

Vision Benefits – VSP Choice Plan

Oswego Health System has designed a vision plan that includes coverage for both an annual vision exam as well as vision hardware benefits.

There are no plan design or rate changes for 2020!



	VSP Network	Non-VSP Network
Eye Exam (every 12 months)	Covered in full after \$10 copay	Up to \$45
Lenses (every 12 months)	Cover in full after \$25 copay	\$30 - \$100, depending on lenses
Frames (every 24 months)	Covered up to plan allowance	Up to \$70
Dependents to age	26	26

Vision Plan Rates			
	Individual	2-Person	Family
Bi-weekly Cost	\$2.76	\$4.00	\$7.17

Health Care and Dependent Care Flexible Spending Accounts

Oswego Health is pleased to again offer you the convenience and savings of a Flexible Spending Account (FSA). Your FSA lets you save a portion of your income each year without paying tax on it (that's the same as earning an extra 30% on that money!) to pay for qualified medical and other expenses. **You must re-enroll each year to receive this benefit.** There are three types of accounts and here is how they work:

Healthcare Reimbursement Account

Eligible expenses are those that are not fully paid by your medical, dental or prescription drug plan including deductibles, copays, prescriptions, glasses, etc. You may set aside up to **\$2,750** pre-tax dollars per year for both you and your eligible dependents for these out of pocket expenses. **Dependents must be enrolled with Lifetime Benefit Solutions in the Health Reimbursement Account to be eligible.** You and your dependents do not need to be enrolled in the health insurance to participate in the FSA.

Healthcare Reimbursement Account (FSA) Savings Example		
Pre-Tax Income	\$38,000	\$38,000
FSA Contribution	\$0	-\$500
Taxable Income	\$38,000	\$37,500
Federal, State & FICA Taxes (26.65%)	-\$10,127	-\$9,994
Out of Pocket Medical Expenses	-\$500	\$0
Take-Home Income	\$27,373	\$27,506
*Illustration is just an example. Incomes, contributions and taxes will vary by individual and state.		

Another plus of the Oswego Health FSA is the availability of a debit card that may be used to access your account funds, making it convenient to fill prescriptions and pay copays at physician offices. In addition, the debit card is "front loaded", which means that you choose the amount you will save each year and that total amount is available to you at the start of the year.

Dependent Care Reimbursement Account

Eligible expenses include dependent care expenses for any dependent children (as defined by the IRS) less than 13 years of age, or an adult dependent who is disabled, or unable to care for themselves and spends at least 8 hours per day in your home. You may set aside up to **\$5,000** pre-tax dollars per year for any eligible child or adult care expenses.

Transportation Reimbursement

Eligible expenses include parking and mass transit expenses such as a bus pass, tokens or any similar item you may use to commute to work. Employees may set aside up to \$255 per month or **\$3,060** pre-tax dollars per year for parking or \$130 per month or **\$1,560** per year for transportation expenses listed above.

Contributions to your FSA come out of your paycheck before any taxes are taken out. This means that you don't pay federal income tax, Social Security taxes, and state and local income taxes on the portion of your paycheck you contribute to your FSA. You should contribute the amount of money you expect to pay out of pocket for eligible expenses for the plan period.

Keep in mind, these plans are governed by the IRS, so the government imposes a few restrictions on the plan. First, unless you have a qualifying change in family status, the elections you make under the plan are irrevocable for that year. Second, the "use it or lose it" rule means you must use the qualifying expense during the plan year or you lose any funds left in the account. A grace period is in place that allows employees to use funds from the previous year up until March 15 of following year. Any and all expenses from the previous year, including those incurred during the grace period must be submitted by April 30th.

Disability Income Benefits

Oswego Health provides employees with short-term disability income benefits. In the event you become disabled from a non-work-related injury or sickness, disability income benefits are provided as a source of income. You are not eligible to receive short-term disability benefits if you are receiving workers' compensation benefits.

Employer Paid	Short-Term Disability
Benefits Begin	After a 7 day elimination period
Benefits Payable	For 26 Weeks
Percentage of Income Replaced	50%
Maximum Benefit	\$170 Per Week

Basic Term Life Coverage

Oswego Health provides full-time and exempt employees with basic group life and accidental death and dismemberment (AD&D) insurance, and pays the full cost of this benefit. The amount you are provided is as follows:

- **Exempt employees:** 200% of your basic earnings to a maximum of \$250,000
- **Full-time employees:** 100% of your basic earnings to a maximum of \$200,000
- **Spousal benefit:** \$2,000
- **Child(ren) benefit:** Up to \$1,000

Beneficiary information can be updated at any time through your Bswift account.

Voluntary Additional Life Insurance Coverage

Oswego Health offers you the opportunity to purchase additional term life insurance for yourself, your spouse and your children.

- **Full-time Exempt Employee:** Additional Life Insurance coverage is available up to \$450,000* (not to exceed 5 times your current salary).
- **Full-time Non-exempt Employee:** Additional Life Insurance coverage is available up to \$400,000* (not to exceed 5 times your current salary).
- **Spousal coverage:** If an employee has basic term life coverage, spousal coverage is available up to \$50,000 (not to exceed 50% of the employee elected amount).
- **Child coverage:** If an employee has basic term life coverage, child coverage is available as well. If elected, all eligible children will be covered. The schedule of this coverage is as follows:
 - Live birth to 14 days - \$0
 - Age 14 days to 6 months - \$1,000
 - 6 months to 19 years (or 25 if full time student) - \$4,000

*Total amount is an aggregate amount of basic term life insurance and the voluntary additional life coverage

Other Additional Benefits

You work hard for your paycheck. But it can be hard to budget for life's unexpected emergencies. That's why Oswego Health is giving you the option to purchase the Sun Life coverage shown below. These benefits can help protect your finances from the uncertainty of the future and give you peace of mind. These plans are payroll deducted on a post-tax basis which means benefits are paid out **tax free**.

Long term disability insurance: (offered to all active full-time, non-exempt and part time benefit eligible employees working 20 or more hours/week)

Long term disability insurance protects up to 60% of your income up to \$5,000/month. It can pay you a monthly benefit if you can't work - for an extended period of time - due to a covered injury or illness. Long term disability insurance can pay a benefit as long as you are considered disabled according to your policy. The amount of benefit you receive from the plan may be reduced or offset by income from other sources - such as Social Security Disability Insurance. The length of time you can receive benefits is based on your age when you become disabled.

Individual short term disability insurance: (offered to all active employees working 20 or more hours/week)

Individual short term disability insurance can help replace up to 60% of your monthly income if you are unable to work due to a covered injury or illness. This means you can have some income protection during a time of need. Common reasons people use this coverage include pregnancy, injuries and digestive problems - such as gall bladder surgery. Benefits are offset by the statutory plan. Your benefit duration is up to 24 weeks and you can choose which elimination period you would like (7 or 14 days). This is the number of days prior to when you would be eligible for benefits.

Group specified disease insurance: (offered to all active employees working 20 or more hours/week)

What's a specified disease? Some common examples are heart attack, stroke and cancer. But this plan also includes coverage for coronary artery disease, non life-threatening cancer, and major organ transplant for example. The medical treatment for these conditions can be very expensive. Specified disease insurance can help by paying a lump sum payment directly to you at the first diagnosis of a covered condition. You decide how to spend it. You can use this coverage more than once for different conditions. You can also purchase coverage for your spouse and dependent children. Additionally, the plan includes a \$50 wellness benefit for both you and your spouse, if covered under the plan.

Employee Assistance Program (EAP)



Information Resources: *One of your most important EAP Benefits*

Today's healthcare workers face new, more daunting challenges than ever before: Budget crises, government mandates, difficult patient and family issues, rapidly changing technology and the impact of social media are just a few of the emerging issues impacting the healthcare landscape. HealthCare EAP offers extensive links, tools, and resources to help healthcare workers deal with these and other professional challenges:

- Patient and Family Challenges
- Workplace Safety and Violence
- Social Media for Healthcare
- Money Saving Tools and Tips for Healthcare Workers
- Cultural Competency, Health Literacy, and Communication Challenges



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