

2024 EMPLOYEE BENEFITS GUIDE



WELCOME TO YOUR BENEFITS

We appreciate all the invaluable contributions made by our employees. As our employees are one of our greatest assets, we recognize that our success is dependent upon our people. While benefits costs have risen in recent years, we commit to try and provide our employees with a comprehensive and competitive benefits program. We annually review and update our benefits package so that it provides the services you need to enhance the quality of your life.

This guide describes Methodist University’s Employee Benefits package. You have many resources available for questions related to your plans as you enroll and throughout the year. Take advantage of those resources to be sure you receive the full benefits you need and all that is available to you.

The coverage you elect begins with your initial eligibility date and continues through the end of the enrollment year. Methodist University’s health care benefit year begins January 1st and ends December 31st.

IMPORTANT INFORMATION

It is important that you access Benefitfirst during the designated enrollment window if you wish to make any changes to your current benefits. If you do not want to make changes, your current benefit elections will remain the same with the exception of your Flexible Spending Account (FSA). You must re-enroll in your FSA every year. **New Health Indemnity coverage must be selected if you wish to enroll for this benefit.**



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ELIGIBILITY & ENROLLMENT

All full-time Methodist University employees working at least 30 hours per week are eligible for benefits. As a new hire, you are eligible for benefits as follows:

- Long Term Disability: after 24 months
- All other benefits: the first day of the month following 30 days of employment

Additionally, you may enroll during your annual Open Enrollment period for a January 1st effective date.

You may enroll the following eligible dependents in our group benefit plans:

- Your legal spouse
- Your natural, adopted or stepchildren up to age 26
- Unmarried children of any age if disabled and claimed as a dependent on your federal income taxes

MAKING YOUR BENEFIT ELECTIONS

It is important that you make your benefit elections within the time frame allowed during your new hire or Open Enrollment period. Postponing the confirmation of your elections will result in a delay in enrollment processing. In other words, if you wish to see a doctor or fill a prescription soon after your benefits begin, please make your elections in a timely fashion or you may experience a delay. Once you confirm your benefit elections, your next opportunity to change or elect benefits will not be until the next Open Enrollment period, unless you experience a qualifying Life Event.

MAKING CHANGES TO YOUR BENEFITS

Outside of your initial new hire or Open Enrollment period, changes to your benefits can only be made throughout the year within 30 days of a qualifying Life Event. Examples of a qualifying Life Event include:

- Marriage
- Divorce
- Birth or adoption of a child
- Loss of coverage elsewhere

To report a Life Event, contact your Human Resources Department. Documentation must be provided.

YOUR RESPONSIBILITY

- Review this booklet in its entirety.
- Determine which benefits are best for you and your family.
- Log into benefitfirst.com during your enrollment window. Login instructions are provided on page 4 of this guide.
- You must fully confirm your benefit choices on Benefitfirst in order for them to be effective.



HOW TO ENROLL

You may enroll using the Benefitfirst portal or by phone from work or home anytime. The online portal is available 24/7. Follow the steps below to elect your benefits for the 2024 plan year.

ONLINE ENROLLMENT

- Go to benefitfirst.com* and enter the Company ID: 692.
- Create your User ID.
- Your personal password is included in your Personal Benefit Statement letter.
- Click *Login* and follow the instructions.

YOU MAY USE YOUR PRIOR YEAR'S USER ID AND PASSWORD IF AVAILABLE.

- Choose a unique, confidential password and click *Submit*.
- At the company homepage, choose *Enroll Now*.
- If you are a new hire, choose *Enroll in Benefits as a Newly Eligible Employee*.
- If you are an existing employee, choose the appropriate transaction and click *Continue*.
- Check your personal information for accuracy and click *Next*.
- Add any eligible dependents and click *Next*.
- Starting with the medical screen, complete your benefit selections choosing the plan and coverage level you desire.
- You will be asked to review your elections on the last enrollment screen and certify by re-entering your password.
- Click the *Submit* button to confirm your elections.

*If your browser warns that you are entering a secure site, click "Yes" to continue. We recommend turning the pop up blocker off for the Benefitfirst website. Go to the Tools menu in your browser and click on Pop Up Blocker, then Pop Up Blocker settings: Enter benefitfirst.com in the "Address of Website to allow" box and click the "add" button. Alternatively, users can press and hold the "Ctrl" key down when they click on the "Continue" button on the Enrollment Wizard start-up page.

PHONE ENROLLMENT

Monday-Friday, 8:30 a.m.-5 p.m. (EST)

- Call the Benefitfirst Call Center at 888.322.9374 and use the Company ID: 692.
- Have the names, dates of birth and Social Security numbers for any dependents to be covered (does not apply to newborns under six months of age). Federal mandates require Social Security numbers and Medicare disclosure for all covered employees and dependents.



BENEFITS AT A GLANCE

Benefit	Option
Medical BCBS North Carolina	Employees have the choice between a PPO with HRA plan or a High Deductible Health Plan (HDHP) with HSA.
Health Savings Account	For employees enrolled in the HDH, a \$500 University contribution will be added to your HSA and will coincide with the January payroll cycle. Amount will be pro-rated based on number of months enrolled in the HDHP medical plan for new hires or late enrollees.
Health Reimbursement Arrangement	For employees enrolled in the PPO medical plan, the employee will pay the first \$500 of the in-network deductible charges and then the University will pay the next \$1,500. The employee is then responsible for the remaining \$1,500 of the deductible.
Virtual Visits Teladoc	24/7 access to doctors by phone, web, or app. Available for those enrolled on the group health insurance.
Dental Sun Life	Employees choose between a Low Plan and a High Plan. Contributions are made pre-tax.
Vision Sun Life	Employees may elect a voluntary vision benefit. Contributions are made pre-tax.
Basic Life/AD&D USABLE Life	Methodist University provides each employee with Basic Life and AD&D insurance through USABLE Life and pays for the full cost of coverage. Employees receive 1.5x their annual earnings to a \$250,000 maximum in coverage.
Voluntary Life Insurance USABLE Life	Employees have the option to supplement their life insurance by purchasing additional amounts of coverage. In addition, life insurance may be purchased to cover a spouse and/or child(ren) after electing coverage for yourself.
Disability USABLE Life	Employees have the option to purchase a Short-Term disability benefit which provides for a percentage of your salary if you become disabled and are unable to work due to an accident or illness. Employees are eligible to receive University-paid Long-Term disability benefits after 24 months of employment.
Whole Life/LTC Allstate	Employees have the option to purchase Group Whole Life insurance with a Long-Term Care benefit which builds cash value over time.
Supplemental Benefits NEW Hospital Indemnity Sun Life	Employees may purchase Critical Illness, Accident, Cancer and NEW Hospital Indemnity to supplement their medical coverage. These plans provide a cash benefit to pay for everyday expenses should you or a dependent suffer a covered event.
Group Organ & Tissue Transplant Insurance Tokio Marine HCC	University employees have organ and tissue transplant coverage through Tokio Marine HCC which pays benefits for certain organ and tissue transplants. Employee must be enrolled in the group medical plan to obtain this benefit.
Retirement 403(b) TIAA	The Methodist University Retirement Plan has been adopted to provide you with the opportunity to save for retirement on a tax advantaged basis. This plan is a type of retirement plan known as a 403(b) plan. Please contact the Human Resources Department for additional information.
Additional Benefits	<ul style="list-style-type: none"> • Tuition Remission (see employee handbook or faculty manual for details) • Employee Assistance Program (University paid) • Nimocks Fitness Center • Uniform Expenses (Maintenance, Custodial and Public Safety departments)
Leave Benefits	Please see Employee Handbook for details.

EMPLOYEE CONTRIBUTIONS

Rates are per monthly pay period.

MEDICAL	PPO + HRA	HDHP + HSA	TELADOC*
Employee Only	\$99.88	\$20.00	Per Employee/Month: \$0 Consultation Fee: \$0
Employee + Spouse	\$1,284.45	\$403.68	
Employee + Child(ren)	\$789.93	\$383.72	
Family	\$1,726.09	\$899.49	

*For medical plan participants only.

DENTAL & VISION	DENTAL LOW PLAN	DENTAL HIGH PLAN	VISION PLAN
Employee Only	\$46.40	\$63.31	\$8.85
Employee + Spouse	\$85.04	\$121.22	\$17.71
Employee + Child(ren)	\$87.32	\$122.75	\$17.71 (1 child)
Family	\$129.92	\$183.32	\$24.89

CANCER & ACCIDENT	CANCER				ACCIDENT
	<49	50-59	60-64	65+	
Employee Only	\$28.87	\$35.60	\$56.78	\$76.02	\$19.58
Employee + Spouse	\$49.08	\$60.52	\$96.52	\$129.23	\$26.99
Employee + Child(ren)	\$31.75	\$38.48	\$59.66	\$78.90	\$28.15
Family	\$51.96	\$63.40	\$99.40	\$132.11	\$35.56

HOSPITAL INDEMNITY	LOW PLAN	HIGH PLAN
Employee Only	\$15.50	\$27.00
Employee + Spouse	\$32.10	\$56.00
Employee + Child(ren)	\$25.00	\$43.00
Family	\$41.00	\$75.00

CRITICAL ILLNESS	<30	30-39	40-49	50-59	60-69	70+
Non-Smoker						
Employee (\$10,000)	\$6.65	\$7.95	\$11.75	\$17.95	\$26.15	\$58.85
Spouse (\$5,000)	\$4.40	\$5.05	\$6.95	\$10.05	\$14.15	\$30.50
Child(ren) (\$5,000)	\$1.00	N/A	N/A	N/A	N/A	N/A
Smoker						
Employee (\$10,000)	\$7.75	\$10.65	\$17.95	\$28.85	\$46.65	\$89.15
Spouse (\$5,000)	\$4.95	\$6.40	\$10.05	\$15.50	\$24.40	\$45.65

WHOLE LIFE + LTC	\$10,000	\$20,000	\$30,000	\$50,000	\$70,000	\$100,000
Monthly LTC*	\$400	\$800	\$1,200	\$2,000	\$2,800	\$4,000
18-25	\$6.01	\$12.02	\$18.02	\$30.04	\$42.06	\$60.08
26-30	\$7.52	\$15.03	\$22.55	\$37.59	\$52.62	\$75.17
31-35	\$9.57	\$19.13	\$28.70	\$47.84	\$66.97	\$95.67
36-40	\$12.49	\$24.98	\$37.48	\$62.46	\$87.44	\$124.92
41-45	\$16.38	\$32.77	\$49.15	\$81.92	\$114.68	\$163.83
46-50	\$21.90	\$43.80	\$65.70	\$109.50	\$153.30	\$219.00
51-55	\$30.12	\$60.23	\$90.35	\$150.59	\$210.82	\$301.17
56-60	\$42.63	\$85.27	\$127.90	\$213.17	\$298.43	\$426.33
61-65	\$60.56	\$121.12	\$181.67	\$302.79	\$423.91	\$605.58

The \$10,000 Children's Term Rider cost is \$4.55 monthly (covers all children) and can be added to your policy

*Monthly (LTC) Long-Term Care Benefit pay up to 25 months and does not reduce the life insurance amount.

MEDICAL PLAN COMPARISON

	OPEN ACCESS PLUS PPO		HDHP + HSA	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Plan Year Deductible	\$3,500 Individual \$7,000 Family	\$7,000 Individual \$14,000 Family	Individual: \$2,500 Family Member: \$5,000 Family Total: \$5,000	Individual: \$5,000 Family Member: \$10,000 Family Total: \$10,000
Out-of-Pocket Maximum	\$5,500 Individual \$11,000 Family	\$11,000 Individual \$22,000 Family	Individual: \$5,000 Family Member: \$6,550 Family Total: \$10,000	Individual: \$10,000 Family Member: \$13,100 Family Total: \$20,000
Preventive Visit	0%, no deductible	State mandates only	0%, no deductible	30% after deductible
Primary Care Visit	\$25 copay	60% after deductible	20% after deductible	50% after deductible
Specialist Visit	\$50 copay	60% after deductible	20% after deductible	50% after deductible
Urgent Care Visit	\$50 copay	\$50 copay	20% after deductible	50% after deductible
Emergency Room	\$300 copay	\$300 copay	20% after deductible	20% after deductible
Inpatient Hospital	30% after deductible	60% after deductible	20% after deductible	50% after deductible
Outpatient Hospital	30% after deductible	60% after deductible	20% after deductible	50% after deductible
Chiropractic	\$50 copay	60% after deductible	20% after deductible	50% after deductible
Routine Eye Exam <i>1x per calendar year</i>	0%, no deductible	Not covered	0%, no deductible	30% after deductible
Lenses & Frames ¹	\$130 reimbursement then plan pays 10%, no deductible		\$130 reimbursement then plan pays 10%, after deductible	
Prescription Drug Coverage ²				
Rx Deductible	None		Medical deductible	
Preventive OTC/ Contraception	0%, no deductible	Additional charges apply	0%, no deductible	Additional charges apply
Retail 30 days • Tier 1 • Tier 2 • Tier 3 • Tier 4 • Tier 5	\$10 copay \$20 copay \$45 copay \$60 copay 25%, \$50-\$100 max		20% after deductible	
			Not covered	

Dependents are covered to age 26.
¹ Does not apply to the out-of-pocket maximum
² Prior plan approval, step therapy and quantity limits may apply

TELADOC

Teladoc virtual care provides access to a U.S. board-certified doctor by phone, web or mobile app 24/7. Get prescriptions when medically necessary, and confirm or adjust diagnosis and treatment for an existing condition. Set up your account today by visiting teladoc.com or download the mobile app.

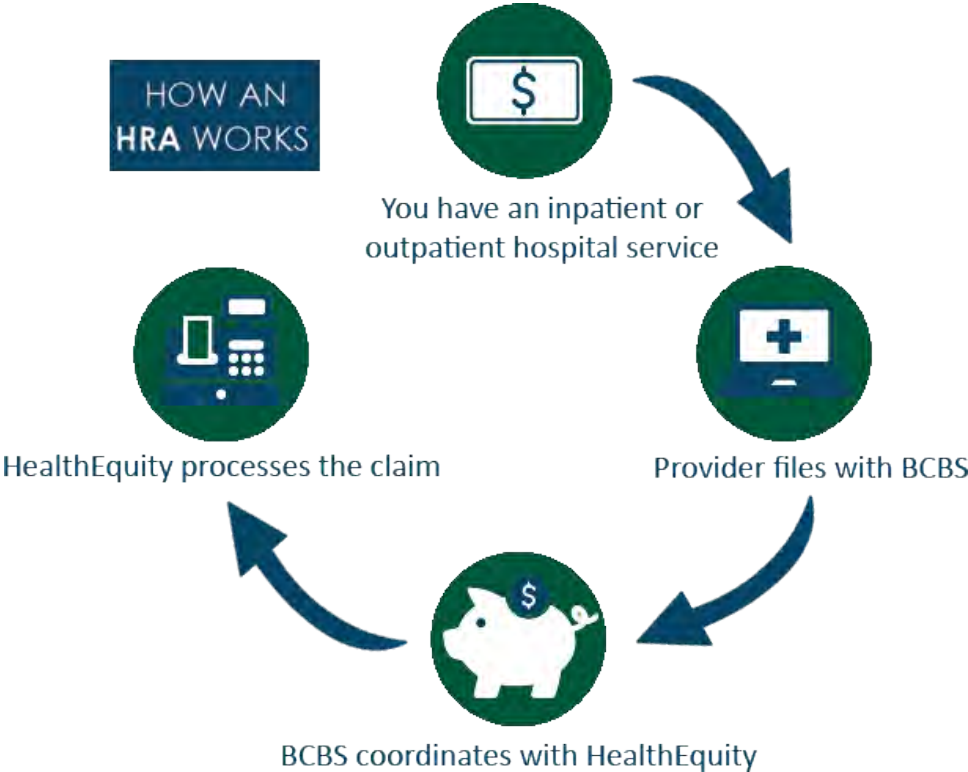
HEALTH REIMBURSEMENT ARRANGEMENT

FOR EMPLOYEES ENROLLED IN THE PPO MEDICAL PLAN ONLY

All employees who elect coverage under the PPO medical plan are automatically enrolled in the Health Reimbursement Arrangement (HRA).

Methodist University contributes \$1,500 annually towards your \$3,500 plan year, in-network deductible. You are responsible for the first \$500 of your deductible then the University reimburses the next \$1,500 through the HRA. You are then responsible for the remaining \$1,500.

The plan reimburses for in-network, employee only eligible deductible expenses. Some providers require the deductible to be paid upfront before the procedure is performed and this would be the employee's responsibility. Any deductible claim(s) eligible for reimbursement will be processed and funds will be sent **directly to the employee**. Sign up for direct deposit on healthequity.com to receive reimbursement quicker. Once the deductible is met, the health plan coinsurance will be applicable for all future medical expenses.



HEALTH SAVINGS ACCOUNTS

FOR EMPLOYEES ENROLLED IN THE HDHP ONLY

When you elect to enroll in the High Deductible Health Plan (HDHP), you are eligible to open a Health Savings Account (HSA). You are the owner of this bank account, and unlike a traditional Flexible Spending Account, your funds can roll over from year-to-year and build over time. You have the opportunity to have pre-tax dollars deducted from your paycheck and deposited into this account. In addition, Methodist University will contribute \$500* annually to coincide with January payroll.

You must also meet the following criteria to participate in an HSA:

- You must not be covered by any other health plan other than another HDHP (with limited exceptions)
- You must not be eligible to be claimed as a dependent on another person's tax return
- You are not enrolled in Medicare

WHAT ARE THE ADVANTAGES OF PARTICIPATING?

- Unused funds carry over from year to year and can build over time.
- HSAs are portable; if you leave Methodist University you can take the account and all funds in it with you.
- Pre-tax savings – never pay federal government taxes on your HSA funds as long as you spend the money on eligible IRS 213(d) health care expenses (medical, dental, vision).
- You have complete control over how and when funds are used.
- Balances over a certain amount may have investment opportunities.
- Funds remaining in your account after you reach the age of 65 can be used for non-medical expenses with ordinary taxes paid, similar to a 401(k).

The 2024 IRS annual maximum contribution into your account between you and Methodist University:

- Single coverage : \$4,150
- Family coverage: \$8,300

Persons ages 55 to 64 may set aside an additional \$1,000 in catch-up contributions each year.

**Amount will be pro-rated for new hires and late enrollees based on the number of months enrolled in the HDHP medical plan.*



FLEXIBLE SPENDING ACCOUNTS

With a Flexible Spending Account (FSA), you can set aside pre-tax dollars to pay for out-of-pocket expenses incurred for either health care or dependent day care expenses. Because the amount you elect is taken on a pre-tax basis, you have the opportunity to save up to an estimated 25% of your out-of-pocket expenses.

HEALTH CARE FSA

Based on your estimated amount of medical out-of-pocket expenses, the annual amount you elect is evenly deducted out of each paycheck throughout the year. Once you have elected your FSA amount, you may not change it without a qualifying Life Event. You may rollover up to **\$640** in unused funds into the next year.

NOTE: Employees enrolled in an HDHP + HSA may participate in a Limited-purpose FSA which allows you to use FSA funds for dental and vision expenses only.

The Health Care FSA annual contribution limit is \$3,200 per household.

DEPENDENT CARE FSA

A Dependent Care FSA is available to employees who have a dependent child or parent for which they pay expenses such as day care, preschool, or after school care. Funds in the Dependent Care FSA are not to be used for medical care. Unused dependent care funds will be forfeited. It is advised that you seek advice from your tax preparer.

The Dependent Care FSA annual contribution limit is \$5,000 (\$2,500 if married filing separately).

FSA REMINDERS

- **You must re-enroll each year if you wish to continue funding the account(s).**
- “Use it or lose it” - unused health care amounts over **\$640** or any unused dependent care funds will be forfeited, so estimate wisely.
- You cannot mix funds from one account to another. You may only use Health Care FSA money for health care expenses and Dependent Care FSA for funds for dependent care (day care) expenses.
- Save your receipts. No matter how you access your FSA funds, be sure to keep your receipts to validate your reimbursements.
- You can incur expenses only during the plan year you are enrolled.
- Your entire Health Care FSA balance – even money you have not yet contributed – is available as of January 1. Dependent care funds are only available as you contribute to them through payroll deductions.
- Employees enrolled in an HDHP + HSA may use FSA funds for dental and vision expenses only.

MEDICAL BENEFITS

University employees have the choice between two plans offered through Blue Cross Blue Shield of North Carolina: a PPO plan with a Health Reimbursement Arrangement (HRA) and a High Deductible Health Plan (HDHP) with a Health Savings Account (HSA). With the PPO plan, you pay a copay for office visits and other covered services are paid by the plan coinsurance once you have reached your deductible. Through the Health Reimbursement Arrangement (HRA), you pay the first \$500 of your deductible then the University pays the next \$1,500 of the employee's in-network deductible. Employee is responsible for the remaining \$1,500.

With the HDHP, you are able to add pre-tax dollars to an HSA to pay for your deductible and other out-of-pocket healthcare costs in addition to an annual \$500* University contribution. Once you satisfy your deductible, the plan pays a percentage for in-network office visits and other covered services.

Each plan offers preventive care at 100%, an out-of-pocket maximum to protect you should a catastrophic event occur, and out-of-network coverage when needed. Although out-of-network coverage is available, using network providers will save you money. Find network providers at blueconnectnc.com.

**if you enroll at a date later than January 1st your contribution amount will be pro-rated*

PRESCRIPTION DRUG BENEFITS

To help control drug costs Methodist University has chosen the NetResults performance formulary for your prescription drug coverage administered through Prime Therapeutics® (Prime). NetResults helps manage rising drug costs by replacing high-cost drugs with their low-cost alternatives. The NetResults drug list includes nearly all of the most-used generic drugs and 90% of the most-used brand-name drugs.*

NetResults benefits are tiered meaning the amount you pay may vary. Tier 1 drugs are typically the lowest cost option. If you have a medicine in a higher tier, or not on the list, talk with your doctor to see if there is an alternative. For added savings, the NetResults formulary is paired with the Broad Plus (RX E3) network of pharmacies. Refer to your member ID card or confirm your network with your Benefits Administrator.

Are my drugs and pharmacy covered?

Your plan and formulary type are printed on the front of your member ID card. Look for the Rx symbol and a letter/number combination on the bottom right. This will indicate the NetResults formulary with either the Broad Plus or Limited National network. Here's how to see if your drug and pharmacy are available:

Step 1: Visit BlueCrossNC.com/find-a-drug-or-pharmacy and select *Employer & Employee Plans*.

Step 2: From the *Choose a Plan* menu, select the *NetResults* option that corresponds to the Rx letter code on your member ID card.

Step 3: Select *See Drug Coverage* to be directed to Prime's webpage where you can search for your drug. To search for your pharmacy, select *Find a Pharmacy* and enter your address.

If you do not have an ID card, contact your Benefits Administrator to get your Rx letter code. There are few exceptions where brand-name drugs are covered and even preferred due to negotiated pricing.

**Estimate was derived from a 2016 Internal Blue Cross and Blue Shield of North Carolina (BlueCross NC) pharmacy department analysis.*

MEDICAL PLAN TOOLS & SERVICES

BLUECONNECT

Access *BlueConnect* from any mobile device at blueconnectnc.com or download the mobile app for tools and information about your health plan.

HEALTHLINE BLUE

Get phone support from BCBS nurses 24/7 at 877.477.2424.

BLUE365

Find exclusive member discounts from top retailers with *Blue365*. Visit blue365deals.com.

HEALTHY OUTCOMES WELLNESS

Access health and wellness resources that address a wide range of health needs. Log into blueconnectnc.com and click on *Wellness*.

FIND A DOCTOR TOOL

Find the right doctor or health care facility, read patient reviews and get cost estimates for care. Log in at blueconnectnc.com, click “Find Care” then “Find a Doctor or Facility”.

BLUE DISTINCTION CENTERS

Log in at blueconnectnc.com, click “Doctors & Facilities” or call the customer Service number On the back of your member ID card.

BLUE CARD PROGRAM

Log in at bluecrossnc.com, then click on “Find Care” or call 1.800.BLUE (2583).

NURSE SUPPORT

Our registered nurses can help you understand benefits and recommend programs to meet your specific needs. Visit BlueCrossNC.com/NurseAdvocate. If you need support for a complex condition, call 800.218.5295, press # and extension 55547.





Meet your new favorite health benefit SmartShopper

SmartShopper helps you find and compare in-network facilities so you can get the same high-quality care for less. Yes, it's included in your plan!

Save on out-of-pocket costs and earn cash rewards.

Believe it or not, the cost of medical care depends on where you go. When you use SmartShopper to shop for your next procedure, everyone saves - and you get rewarded!

Here's how it works



Compare prices and rewards by shopping online or calling the Personal Assistant Team at 1-877-702-6661.



Schedule your appointment or let the Personal Assistant Team do it for you.



Earn your cash reward by having your appointment within the year.



Visit BlueCrossNC.com/SmartShopper or call the SmartShopper Personal Assistant Team at 1-877-702-6661. The Personal Assistant Team is available to help you shop, find a location, compare costs, confirm rewards and even schedule your appointment. Call today! **Go Green by going paperless! Contact us or scan this code to register your email today.**

The Personal Assistant Team is available Monday through Thursday from 8 a.m. to 8 p.m. and Friday from 8 a.m. to 6 p.m. ET.



**BlueCross BlueShield
of North Carolina**

SmartShopper®

The SmartShopper program is offered by Sapphire Digital, an independent company. Incentives available for select procedures only. Payments are a taxable form of income. Rewards may be delivered by check or an alternative form of payment. Members with primary coverage under Medicaid or Medicare are not eligible to receive incentive rewards under the SmartShopper program.

Blue Cross and Blue Shield of North Carolina (Blue Cross NC) provides free aid to service people with disabilities as well as free language services for people whose primary language is not English. Please contact the Customer Service number on the back of your ID card for assistance.

Blue Cross and Blue Shield of North Carolina (Blue Cross NC) proporciona asistencia gratuita a las personas con discapacidades, así como servicios lingüísticos gratuitos para las personas cuyo idioma principal no es el inglés. Comuníquese con el número para servicio al cliente que aparece en el reverso de su tarjeta del seguro para obtener ayuda.



A NEW WAY to save on medicine

Blue Cross and Blue Shield of North Carolina (Blue Cross NC) is now offering access to Amazon Pharmacy,* which lets you easily order and quickly get non-specialty medicines¹ delivered at home.

Plus, you'll get access to MedsYourWay prescription drug discount card pricing. The prescription discount card² gives you up to 80% savings³ on brand and generic medicines and is seamlessly built-in to the Amazon Pharmacy experience. You can get the lowest cost available on your prescription, all while saving time and money. Using the MedsYourWay discount card is not insurance; however, using it for covered medicines⁴ will count toward your Blue Cross NC out-of-pocket maximum.

SHOP – Easy to use

Amazon Pharmacy is just like shopping on *Amazon.com*:

- Easy sign up, which includes the option to have your account auto-populate with your prescription history
- Option for 90+ day fills
- Pharmacist on call 24/7
- Ability to manage your medicine and order history

SAVE – Built-in drug discount card

Some drugs may be available at lower prices with a discount card. MedsYourWay discount pricing is built right into the Amazon Pharmacy experience.

- At checkout, you'll see the lowest cost available for your prescription. That's the price you'll pay.
- MedsYourWay discount card pricing is not insurance; however, all prescribed and covered purchases, whether paying a copay or using the discount card pricing, will automatically count toward your annual out-of-pocket maximum.

SHIP – Free home delivery

Skip the pharmacy line with home delivery.

- Free, fast delivery: Amazon Prime members get two-day free shipping on most orders; standard free shipping for non-Amazon Prime members is five days but can be expedited to two-day delivery for \$5.99
- Real-time package tracking from order to delivery

Start saving today

Sign up and learn more at www.amazon.com/bluecrossNC. Then click on the "Get Started" link.

For questions, call Amazon Pharmacy Customer Care at **855-963-4546**, Monday through Friday, 8 a.m. – 10 p.m. ET, and Saturday and Sunday, 10 a.m. – 8 p.m. ET.

- Open/tap the camera (app) on your smartphone.
- Point your camera over the QR code so it's clearly visible within your camera screen.
- A link will show up on your camera screen. Click on the link, and the Amazon Pharmacy Customer Care site will open.



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Blue Cross and Blue Shield of North Carolina (Blue Cross NC) proporciona asistencia gratuita a las personas con discapacidades, así como servicios lingüísticos gratuitos para las personas cuyo idioma principal no es el inglés. Comuníquese con el número para servicio al cliente que aparece en el reverso de su tarjeta del seguro para obtener ayuda.

* If your plan has a mandatory mail program, you must use that program for your mail-order prescriptions and you would not be eligible to use Amazon Pharmacy.

1. Amazon Pharmacy does not dispense Schedule 2 controlled substance drugs.

2. MedsYourWay prescription drug discount card, administered by Inside Rx[®] LLC, is not insurance. You are responsible for the cost of prescription(s) when using the card. Limitations apply.

3. Patients can save up to 80% on brand and generic medications with an average of 50% savings on brand-name diabetes medicines. Actual savings will vary. Source: insiderx.com/data (Accessed February 2022)

4. If your medicine has an unfulfilled requirement, the cost may not count towards your (accumulator) out-of-pocket maximum. Typical requirements include prior authorization (PA) needed, quantity limit exceeded or step therapy needed.

Amazon Pharmacy is an independent company that is solely responsible for the services it provides and does not offer Blue Cross or Blue Shield products or services. MedsYourWay is a prescription drug discount card, administered by Inside Rx LLC. Inside Rx LLC is an independent company that is solely responsible for the services it provides and does not offer Blue Cross or Blue Shield products or services. MedsYourWay discount card pricing is built into the Amazon Pharmacy shopping experience. You are responsible for the cost of prescription(s) when using the MedsYourWay card. Limitations apply.

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BlueCrossNC.com



**BlueCross BlueShield
of North Carolina**

DENTAL BENEFITS

Methodist University offers voluntary dental coverage through Sun Life. Regular dental cleanings and check-ups are extremely important to your overall health and you are encouraged to take advantage of your preventive dental benefits.

The Sun Life plans offer a variety of benefits for those enrolled and features the freedom to choose any dentist; however, choosing an in-network provider will lower your out-of-pocket costs. You may find in-network Sun Life dentists online at [sunlife.com](https://www.sunlife.com), or by calling 800.733.7879.



	LOW PLAN		HIGH PLAN	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Plan Year Deductible	Individual: \$0 Family: \$0	Individual: \$50 Family: \$150	Individual: \$0 Family: \$0	Individual: \$0 Family: \$150
Annual Maximum	\$1,000		\$2,000	
Preventive Services	0%, no deductible	0%, no deductible	0%, no deductible	0%, no deductible
Preventive Services include Oral evaluations & Cleanings, Bitewing X-rays (1 per calendar year), Fluoride (children under 19 years)				
Basic Services	0%, no deductible	20% after deductible	0% after deductible	20% after deductible
Basic Services includes New fillings, Simple Extractions, Surgical Extractions, Periodontal Maintenance (2 per calendar year), Root Canal				
Major Services	Not covered	Not covered	40% after deductible	50% after deductible
Major Services include Dentures and Bridges, Inlays, Onlays, Crowns, Implants (subject to 10 yr replacement Limit)				
Orthodontics	Not covered	Not covered	50% of charges to max allowed	50% of charges to max allowed
Waiting Periods				
Major Services	N/A		None	
Orthodontia	N/A		N/A	
Percentile of UCR	Negotiated fee	90th UCR	Negotiated fee	90th UCR

Dependents are covered to age 26. Refer to Booklet for specific time frames for each benefit.

VISION BENEFITS

Vision coverage is offered through Sun Life. Your routine vision exams, eyeglasses or contact lenses are available through the Sun Life national network of vision care providers. In addition to the benefits outlined below, you have access to discounts on lens options and laser vision correction. To find an in-network provider, go to vsp.com or call 800.877.7195.

	IN-NETWORK	OUT-OF-NETWORK
Copays <ul style="list-style-type: none"> WellVision exam Routine retinal screen Contact lens fitting 	\$10 copay Up to \$39 \$60 copay	Up to \$45 N/A N/A
Lenses <ul style="list-style-type: none"> Single lined Bifocal lined Trifocal Lenticular Necessary contacts 	\$25 (lenses and frame)	Up to \$30 Up to \$50 Up to \$60 Up to \$100 Up to \$210
Eyeglass Frames	Up to \$130 + 20% off amount over allowance (\$70 at Costco /Walmart)	Up to \$70
Elective Contact Lenses	Up to \$130*	Up to \$105
Frequency <ul style="list-style-type: none"> Exams Lenses Contacts Frames 	Every 12 months	

Dependents covered to age 26. SunLife vision benefits are available upon your effective date. Future year benefits are based on date of service and are available 12 months from last date of service. \$130 benefit per calendar year is for either frames OR contact lenses, but not both.



Using your vision plan

- Review your plan information
- Choose a VSP® doctor online 24 hours a day, or call us at our toll-free number
- Make an appointment and let the office know you are a VSP® member

That's it! Your doctor will take care of the rest.

Doctor's name: _____

Office number: _____

Visit vsp.com
Answers anytime, anywhere

- Choose a VSP® doctor
- View your personal eyecare coverage
- Find the latest eye health information
- Try out Eyewear Advisor to find lenses that are right for you
- Learn about special discounts and promotions

www.vsp.com
or 800-877-7195



Insurance products are underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) under Policy Form Series 15-GP-01. In New York, insurance products are underwritten by Sun Life and Health Insurance Company (U.S.) (Lansing, MI) under Policy Form Series 15-GP-01.
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GVSPC-6195b



LIFE/AD&D AND DISABILITY

EMPLOYER-PAID BASIC LIFE AND AD&D

The University provides each employee with Basic Life and AD&D insurance through USAbLe Life, and pays for the full cost of coverage. Employees receive 1.5x their salary to a maximum of \$250,000 in coverage.

VOLUNTARY LIFE INSURANCE

Methodist University employees have the option to supplement their life insurance by purchasing additional amounts of coverage through USAbLe Life. In addition, life insurance may be purchased to cover a spouse and/or child(ren) after electing coverage for yourself.

	EMPLOYEE	SPOUSE	CHILD(REN)
Increments	\$10,000	\$5,000	Birth-6 mos: \$1,000 6 mos.+ : \$5,000 or \$10,000
Guarantee Issue	\$150,000	\$35,000	\$10,000
Maximum Benefit	5x annual salary to \$250,000 max	Not to exceed 100% of employee amount to \$50,000	\$10,000
Reduction Schedule	Benefits reduce to 65% at your age 70, to 45% at your age 75, to 30% at your age 80, to 20% at your age 85 and to 15% at your age 90. Terminates at employee's retirement. Spousal insurance reduces according to employee's age.		

The Guaranteed issue amount is the highest amount of coverage that you or your dependents may elect without completing an Evidence of Insurability (EOI) form. If you elect an amount of coverage above the guaranteed issue limit, or elect to increase your benefit amount at a future date, the benefit amount over the Guaranteed Issue level will not go into effect until your EOI has been reviewed and approved and payroll deductions have begun. This is meant to be a brief summary only. For full plan details refer to SPD.

VOLUNTARY SHORT-TERM DISABILITY

Whether you are totally disabled and unable to work due to an accident or illness, Methodist University provides the option to purchase Short-Term disability benefits through USAbLe Life. Disability benefits will provide for a percentage of your salary once you satisfy the waiting period. You may set up premiums to be deducted either pre- or post-tax.

EMPLOYER-PAID LONG-TERM DISABILITY

Methodist University provides eligible employees with Long-Term Disability through USAbLe Life after 24 months of full-time employment. Monthly amount has been increased to **\$10,000**.

	SHORT TERM	LONG TERM
Elimination Period	Accident/Illness: 14 days	180 days
Benefit Amount	60% of pre-tax weekly earnings	60% of pre-tax monthly earnings
Benefit Duration	Up to 24 weeks	Social Security Normal Retirement Age
Maximum Benefit	Up to \$1,750/week	Up to \$10,000/month

See Full plan description for pre-existing conditions, limitations and exclusions.

SUPPLEMENTAL INSURANCE



Group Whole Life with Long-Term Care

Allstate Group Whole Life combines permanent life insurance with living benefits that can help with the high cost of long-term care services. Living benefits can help pay for home healthcare, assisted living, nursing home and adult day care services. This plan also accumulates a cash value over time which can be accessed in the future to cover annual premiums, take a policy loan or withdraw.

Hospital Indemnity Insurance

A SunLife Hospital Indemnity insurance plan can help offset the costs incurred from a hospital stay. Hospital Indemnity insurance plans cover inpatient hospital, intensive care unit (ICU) and critical care unit (CCU) admissions and stays. It also helps protect your finances, covers related expenses and pays cash benefits directly to you at a predetermined amount depending upon the plan you select. Plan also includes a **\$50 Wellness screening** benefit per insured member per year.



Cancer Insurance

SunLife Cancer coverage pays you a cash benefit to help with the costs associated with treatments, to pay for daily living expenses—and more importantly—to empower you to seek the care you need. Our Cancer Insurance pays cash benefits for a variety of ways your cancer is treated. Benefits are paid directly to you unless otherwise assigned. With the cash benefits you can receive from this coverage, you may not need to use the funds from your Health Savings Account (HSA) or Flexible Spending Account (FSA) for cancer or specified disease treatments and expenses. Benefit includes **\$75 Cancer Screening** once per benefit year.



Accident Insurance

Most major medical insurance plans only pay a portion of the bills. SunLife can help pick up where other insurance leaves off and provide cash to help cover the expenses. SunLife pays you cash benefits that correspond with hospital and intensive care confinement. Your plan may also include coverage for a variety of occurrences, such as: dismemberment; dislocation or fracture; ambulance services; physical therapy and more. The cash benefits can be used to help pay for deductibles, treatment, rent and more. Benefit includes **\$100 Wellness Screening** once per benefit year.



Critical Illness Insurance

Your medical coverage may only cover some of the costs associated with treatment. You're still responsible for deductibles and coinsurance. SunLife Critical Illness Coverage helps provide financial support if you are diagnosed with a covered critical illness. You choose benefits to protect yourself and any family members if diagnosed with a critical illness. Then, if diagnosed with a covered critical illness, you will receive a cash benefit based on the percentage payable for the condition. Benefit includes **\$75 Wellness Screening** once per benefit year for those enrolled



SCAN THE QR CODES TO LEARN MORE ABOUT EACH BENEFIT

WHERE TO GO FOR CARE

The cost for care and time you wait can vary greatly depending on where you go. Below is a simple guide to choosing the right place to go for health care. In addition to clinical settings, you have access to virtual visits through Teladoc.

	CONDITIONS TREATED	YOUR COST & TIME
EMERGENCY ROOM		
For the immediate treatment of critical injuries or illness. If a situation seems life-threatening, call 911 or go to the nearest emergency room. Open 24/7.	<ul style="list-style-type: none">• Sudden numbness, weakness• Uncontrolled bleeding• Seizure or loss of consciousness• Shortness of breath• Chest pain• Head injury/major trauma• Blurry or loss of vision• Severe cuts or burns• Overdose	<ul style="list-style-type: none">• Costs are highest• No appointment needed• Wait times may be long, averaging over 4 hours
URGENT CARE CENTER		
For conditions that are not life threatening. Staffed by nurses and doctors and usually have extended hours.	<ul style="list-style-type: none">• Minor cuts, sprains, burns, rashes• Fever and flu symptoms• Headaches• Chronic lower back pain• Joint pain• Minor respiratory symptoms• Urinary tract infections	<ul style="list-style-type: none">• Costs are lower than an ER visit• No appointment needed• Wait times vary
DOCTOR'S OFFICE		
The best place to receive routine or preventive care, track medications, or get a referral to see a specialist.	<ul style="list-style-type: none">• General health issues• Preventive services• Routine checkups• Immunizations and screenings	<ul style="list-style-type: none">• May include coinsurance and/or deductible• Appointment usually needed• May have little wait time
CONVENIENCE CARE CLINIC		
Staffed by nurse practitioners and physician assistants. Treat minor medical concerns that are not life threatening. Located in retail stores and pharmacies, they're often open nights and weekends.	<ul style="list-style-type: none">• Common cold/flu• Rashes or skin conditions• Sore throat, earache, sinus pain• Minor cuts or burns• Pregnancy testing• Vaccinations	<ul style="list-style-type: none">• Costs are same or lower than office visit• No appointment needed• Wait times typically 15 minutes or less
VIRTUAL MEDICINE		
Virtual visits with a doctor anytime 24/7/365 via computer with webcam capability or smartphone mobile app.	<ul style="list-style-type: none">• Cold and flu symptoms such as a cough, fever and headaches• Allergies• Sinus infections• Family health questions	<ul style="list-style-type: none">• Cost is lower than office visit• No appointment needed• Immediate, private, and secure visits

GREATER

COST &
TIME

LESSER

TERMS TO KNOW

Deductible - Amount an employee pays out of pocket prior to the insurance company paying a percentage of the provider charges.

Coinsurance - The amount of payment split between the employee and the insurance company. Example: Insurance company pays 80% and employee pays 20% of the charges after the deductible is met.

Out-of-Pocket Maximum - The maximum an employee is responsible for paying out of pocket in any one calendar year prior to the insurance company paying the entire eligible amount for the remaining of the calendar year.

Network Providers - Doctors, Hospitals and other healthcare providers who have an agreement/contract with insurance companies agreeing to charge a discounted amount for services they render.

Pre-Authorization - Certain procedures or hospitalizations may require that the provider receive authorization. The provider is typically the one to go through this process with the insurance company and obtain pre-authorization.

Pre-Determination - If you are having a major procedure done, your doctor or dentist can submit a pre-determination to the insurance company so you can know in advance of treatment how much of the bill you will be responsible for.

Explanation of Benefits (EOB) - The EOB is mailed to the employee after a claim is received and processed by the insurance company. The EOB will describe how the claim was processed and outline what portion of the charges are applied to the deductible, what portion the employee is responsible for, and explain if there is a denial or error processing the claim.

Appeal - If your health insurance company doesn't pay for a specific health care provider or service, you have the right to appeal the decision and have it reviewed by an independent third party.

Guaranteed Issue - The maximum amount of voluntary life insurance you can choose when making your initial election that does not require the answering of medical questions.

Evidence of Insurability (EOI) - The form containing medical questions that are required to be answered if you decide to elect voluntary life insurance after you have previously declined coverage, or if you decide to increase your current coverage. This may also be needed if you decide to add disability coverage after you have previously declined.

NOTES

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CONTACTS

	CONTACT	WEB/EMAIL	PHONE
Medical	Blue Cross Blue Shield of NC <i>Group #14164377</i>	bcbsnc.com	877.258.3334
Virtual Visits	Teladoc	teladoc.com	800-835-2362
Dental	Sun Life <i>Group #933733</i>	sunlife.com/onlineadvantage	800.733.7879 Claims: 800.442.7742
Vision	Sun Life <i>Group #933733</i>	vsp.com	800.877.7195
Life/AD&D and Disability	USABLE Life <i>Group #50024117</i>	usablelife.com	800.370.5856
Flexible Spending Accounts	HealthEquity	healthequity.com memberservices@healthequity.com	877.694.3938
Supplemental Benefits	Sun Life <i>Group #933733</i>	sunlife.com/onlineadvantage	800.733.7879 Claims: 877.820.5306
Whole Life/LTC	Allstate <i>Group #58167</i>	allstatebenefits.com	800.521.3535
Organ & Tissue Transplant Insurance	Tokio Marine HCC	zone.hccmis.com/clientzone/	888.449.2377
Retirement 403(b) Plan	TIAA	tiaa.org	800.842.2252
Employee Assistance Program	Cape Fear Valley Health/ CareLink	capefearvalley.com/carelink/ index.html	910.615.5465
Social Security Administration	N/A	secure.ssa.gov/RIL/SiView.action	800.772.1213
Human Resources	Debbie Yeatts, Chief Human Resources Officer	dyeatts@methodist.edu	910.630.7385
	Moniek Phinisee HR Generalist	lphinisee@methodist.edu	910.630.7613
McGriff Benefits Team	Jimbo Hardison, Employee Benefits Consultant	jhardisonv@mcgriff.com	336.733.0472
	Kathy Allan, Senior Account Manager	Kathy.allan@mcgriff.com	910.435.8821
	Sandy Radford, Medicare Advisor, Truist	sradford@truist.com	800.474.1471



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