2025 Annual Benefits

Open Enrollment





Topics

- What's changing effective January 1, 2025
- Medical Plans Plan Features Continuing In 2025
- Health Savings Account (HSA)
- Flexible Spending Account (FSA)
- Dental Plan
- Vision Plan
- Supplemental Life Insurance
- Connecticut Paid Leave Benefit
- Wellness Program
- Next Steps!





What's Changing Effective January 1, 2025

- Premiums
 - There will be a 4.5% increase in premiums for medical.
 - The Dental Buy-Up and Vision plan rates are increasing.
 - Medical Premium Subsidy & Salary threshold are increasing.
- HDHP/HSA
 - The High-Deductible Health Plan (HDHP) deductible will increase to \$1,650 for employee-only coverage and \$3,300 for family (covering employee plus one or more dependents), per IRS requirements for an HSA-compatible health plan.
- Prescriptions
 - Employees who will start a new specialty medication will be required to:
 - Enroll in Cigna's Clinical Day Split Fill Program. This initiative is to designed to support individuals prescribed specialty medications for chronic or complex conditions.
 - Fill all specialty medications using Accredo Specialty Pharmacy. There is no longer the ability to fill specialty medications at a different pharmacy the first time you fill the medication.
- Cigna ID Cards are going digital!



Medical Plans



2025 Monthly Medical Employee Premiums

Tier	OAPIN	OAP	HDHP
Employee	\$268.28	\$317.06	\$200.38
Employee + Child(ren)	\$510.95	\$603.30	\$381.42
Employee + Spouse/Domestic Partner	\$647.69	\$764.56	\$483.77
Family Including Spouse/ Domestic Partner	\$805.95	\$951.43	\$601.99

2025 Premium Subsidy Eligibility: Employees whose annualized full-time base salary is less than or equal to \$73,912.08

Part-time employees' salaries are converted to full-time annualized rate to determine subsidy eligibility.

Tier	Monthly Subsidy
Employee	\$74.52
Employee + Child(ren) Employee + Spouse/Domestic Partner	\$160.41
Family Including Spouse/Domestic Partner	\$197.72



Medical Plans

- Wesleyan offers <u>3</u> health plans through Cigna
 - Open Access Plan OAP
 - Open Access In-Network Plan OAPIN
 - High-Deductible Health Plan with an HSA option HDHP
 - Employee choice
 - Tax preferred opportunity to save for future healthcare needs
 - More employee control over health care expenditures
 - Portability
- Telemedicine
 - Behavioral health options continue to be available.
- Dependents are covered up to age 26, coverage terminates at the end of the month following 26th birthday.



Wesleyan Medical Plan Design Review

	OAPIN	ОАР	HDHP
Deductible Format	Individual/Family	Individual/Family	Individual/Family*
In-Network Deductible	\$500 / \$1,000	\$500 / \$1,000	\$1,650 / \$3,300
In-Network Out-Of-Pocket Maximum	\$1,500 / \$3,000	\$1,500 / \$3,000	\$3,000 / \$6,000
Matching HSA Contribution (100% match up to the limits shown)	N/A	N/A	\$500/\$1,000
Coinsurance (In-Network/Out-of-Network)	100%	100% / 70%	100% / 80%
Office/Specialist/Urgent Care Copays	\$25 / \$35 / \$40	\$25 / \$35 / \$40	Deductible
Inpatient	Deductible	Deductible	Deductible
Outpatient	Deductible	Deductible	Deductible
Emergency Room	\$200	\$200	Deductible
Preventive Care	Healthcare Reform Schedule	Healthcare Reform Schedule	Healthcare Reform Schedule

^{*} Please note, if covering more than one person, the full family deductible must be met before the plan starts paying for non-preventive services)



Cigna Easy Choice Tool

If you need help deciding which medical plan is best for you, the Cigna Easy Choice Tool may help you! The tool considers:

- Payroll contributions
- Out-of-pocket costs when you receive services
- Your basic information, for example, whether you will be covering dependents and your zip code.
- Log-in at CignaEasyChoice.com and use access code ADM376MK29Q
 (ACA-eligible only, use code 6DHDY4E3). The Easy Choice decision
 support tool will provide you with plan choices, which you can compare
 and review.



Cigna One Guide

Contact a representative by calling the customer service number on the back of your Cigna digital ID card or by going to myCigna.com.

- Answer coverage questions
- Keep on track with preventive visits
- Find the right health care providers in-network
- Connect to lifestyle management programs, clinical and behavioral health programs
- Get cost estimates and avoid surprise expenses
- Understand Explanation of Benefits (EOB) and medical bills



What are Specialty Drugs?

- Specialty drugs are high-cost prescription medications used to treat complex, chronic conditions like cancer, rheumatoid arthritis, and multiple sclerosis. Specialty drugs are often biologic, meaning they're derived from living organisms rather than chemicals.
- Specialty drugs are very expensive. Although most people do not take specialty drugs, they make up the majority of drug spending. And they also make up the majority of new drugs coming on the market. In 1990, there were only ten approved specialty drugs, while today there are more than 400.
- Specialty drugs sometimes require special handling and administration (typically *injection* or *infusion*), and patients using a specialty drug may need careful oversight from a health care provider who can watch for side effects and ensure that the medication is working as intended.
- Specialty drugs might be covered through either medical or prescription drug insurance. How a specialty drug is covered usually depends on where the patient receives the drug. If the patient takes a pill or self-injects the drug at home, it is more likely to be covered through the prescription drug benefit. If the patient receives the drug at a doctor's office or an outpatient clinic, it's more likely to be covered through the medical benefits.



Wesleyan Pharmacy Plan Design Review

	OAPIN	ОАР	HDHP (after deductible has been meet)
 Retail limited to 30-day supply - 90 Now program Home Delivery – up to 90-day supply - 90 Pre-authorization for specialty drugon Clinical Day Split Fill for specialty drugon 	oly including specialty	·	ies who participate in the Cigna 90 Day
Retail 30-day: Generic: Preferred Brand: Non-Preferred Brand:		25% - min. \$	5 5, max. \$50 15, max. \$50 20, max. \$50
Retail & Home Delivery 90-day: Generic: Preferred Brand:		25% - min. \$3	10, max. \$100 30, max. \$100
Non-Preferred Brand:		25% - min. \$4	40, max. \$100



Cigna Programs to Support Emotional Health

BEHAVIORAL HEALTH RESOURCES

MDLIVE for Cigna®	Talk privately with a licensed counselor or psychiatrist via video or phone. Have a prescription sent directly to your local pharmacy, if appropriate.
mycigna.com	Cigna Behavioral Health also provides access to virtual counseling through Cigna's network of providers.
talkspace	Behavioral health resource that provides access to a licensed clinician through private messages or live video sessions.
ginger	Offers confidential mental healthcare through behavioral health coaching via text-based chats, self-guided learning activities and content, and, if needed, video-based therapy and psychiatry.
happify-	Digital self-directed tools designed to help you build resilience and reduce stress.
Prevail	On-demand peer coaching and personalized learning help boost your mood and improve mental health.
❖ nocd	Effective, affordable & convenient OCD therapy with a licensed ERP-trained therapist, 24/7 support to make sure you stay better.
Meru Health	Meru offers a 12 week virtual program for customers with depression, anxiety, or burnout. Meru includes live virtual counseling and texting and an online peer support community.
Brightside	Brightside is a virtual provider offering timely access to the highest quality depression and anxiety care, delivering medication management, therapy, and self-care.
bend	Pediatric mental health care without the wait. From coaching to therapy and psychotherapy, Bend health takes a whole-person, whole-family approach to behavioral care, supporting kids and teens ages 1 to 17.
00110	 Bend offers 4 Types of Care including coaching, coaching & therapy, coaching & therapy & medications, and coaching & medication maintenance.
brightline	Brightline is a national pediatric behavioral health provider that provides extraordinary support for kids, teens, and parents. Brightline also offers skills-based programs led by expert behavioral health coaches to help kids and teens through everyday challenges.
Alma	Find high quality, in-network mental health care. Alma connects you with a diverse national network of therapists and psychiatrists who fit your budget, schedule, and needs.
monument	Online alcohol treatment on your terms. With Monument's holistic online alcohol treatment, drinking will become less important to you. Join Monument to get evidence-based care and community support to change your drinking habits.
Bicycle Health	Bicycle Health provides confidential virtual care for opioid use disorder, including doctor visits, lab tests, prescriptions, instant messaging, and therapy/counseling support — all delivered and managed on your mobile device.

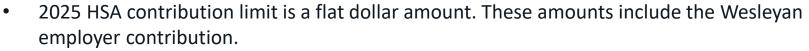
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Health Savings Account (HSA)



Health Savings Account (HSA)

- An HSA is an individually owned bank account that allows you to set aside pre-tax dollars to pay for qualified out of pocket expenses.
- The employer and employee can make tax-free deposits into an HSA.
- Any unused funds roll over year to year.
- You decide how and when to use the money available in the account.
- HSAs can be used to cover:
 - Insurance deductibles, copays and coinsurance
 - Qualified health care expenses (including dental & vision)



- \$4,300 for Individual
- \$8,550 for Family
- Wesleyan HSA contributions for employee plus child(ren), employee plus spouse and family is \$1,000, and \$500 for employee.
- Those age 55 or over can contribute an additional \$1,000 annually.
- Please view our HDHP Medical Plan and HSA presentation for important plan details.



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Flexible Savings Account (FSA)



Claims run out grace period - 2025 claims incurred through 3/15/26 must be submitted to Flores & Associates for reimbursement by 4/15/26. If you have a 2024 balance, you must submit claims incurred through 3/15/25 to Flores & Associates by 04/15/25.

Flexible Spending Accounts

Flores & Associates - Plan Administrator

Medical Expense Reimbursement Account (MERA)

This plan allows you to pay for eligible out-of-pocket expenses with pre-tax dollars. Eligible expenses include plan deductibles, copays, coinsurance, and other non-covered medical, dental and vision healthcare expenses for you and your dependents.

The 2025 maximum annual MERA limit is projected to be \$3,300 (subject to final IRS announcement).

Dependent Care Account

This plan allows you to pay for eligible out-of-pocket dependent care expenses with pretax dollars. Eligible expenses may include daycare center, pre-school, in-home childcare, and before or after-school care for your dependent children under age 13 (other individuals may qualify if they are incapable of self-care and are considered your taxable dependents).

The 2025 maximum annual Dependent Care limit is \$5,000 (\$2,500 if married and filing separately).

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Dental Plan



2025 Monthly Dental Employee Premiums

Tier	Delta Dental Core Plan	Delta Dental Buy-Up Plan
Employee	\$15.32	\$23.13
Employee + Child(ren)	\$29.10	\$43.93
Employee + Spouse/Domestic Partner	\$36.75	\$55.49
Family Including Spouse/Domestic Partner	\$45.98	\$69.43



Delta Dental Plan

Plan Features	Delta Dental PPO Plus Premier "Core Plan"	Delta Dental PPO Plus Premier "Buy-Up Plan"
Annual Deductible	Individual \$50 Family \$150	Individual \$50 Family \$150
Preventive Care	100% (No deductible & not included in annual allowance)	100% (No deductible & not included in annual allowance)
Basic Services	80%	80%
Major Services	50%	60%
Annual Maximum Benefit	\$1,200	\$2,000
Orthodontia	50%	50%
Orthodontia Lifetime Maximum	\$1,500 (Adults & Dependent Children)	\$2,000 (Adults & Dependent Children)
Dependent Coverage	Dependents will be covered up to age 26 (coverage will terminate at the end of the month following 26 th birthday)	



Delta Dental

Carryover Maximum – Allows you to carryover 25% of unused benefits into subsequent plan years! Preventive care does not count towards maximum.

Requirements:

- You must enroll for the entire plan year.
- Use no more than 50% of the standard annual maximum during the benefit year.
- See a dentist during the benefit year for an exam or cleaning. (claim must be submitted). If preventive care is not received, <u>ALL</u> accumulated carryover maximum benefit is lost.



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Delta Dental

Delta Dental plans include an enhanced benefit for covered members (children and adults) with a qualifying special health care need.

What is included?

- Additional dental examinations and/or consultations that can be beneficial prior to treatment to help patients learn what to expect and what is needed for a successful dental appointment.
- Up to four total dental cleanings in a benefit year.
- Treatment delivery modifications (including anesthesia) necessary for dental staff to provide oral health care for patients with sensory sensitivities, behavioral challenges, severe anxiety, or other barriers to treatment.

How do I/my spouse/my dependent use this benefit?

- Members with a qualifying special health care need should let their dentist know that their group Delta
 Dental plan includes the Special Health Care Needs Benefit and that they have a qualifying special
 health care need.
- There is no cost to you for this additional benefit.

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Vision Plan



2025 Monthly Vision Employee Premiums

Tier	EyeMed
Employee	\$6.40
Employee + Children	\$12.80
Employee + Spouse	\$12.16
Family	\$18.81



EyeMed Plan

Plan Features	EyeMed In-Network Member Cost
Frames	\$0 copay, \$200 allowance: 20% off balance over \$200
Standard Corrective Lenses Single Vision Bifocal Trifocal	\$20 copay \$20 copay \$20 copay
Premium Lenses • Standard Progressive • Premium Progressive	\$85 copay 80% of retail price less \$35 allowance
Contact Lenses • Medically Necessary • Elective	\$0 copay Conventional 85% of balance over \$200 allowance Disposable 100% of balance over \$200 allowance
FrequencyFramesStandard Plastic Lenses or Contacts	Once every 24 months Once every 12 months



Supplemental Life Insurance



Unum Life Insurance Plans

Unum administers our life insurance plans

- Basic life insurance paid by Wesleyan 1 X salary up to \$50,000 max
- Supplemental Employee Life: Can be purchased up to 5 times annual salary not to exceed \$750,000.
- Supplemental Spouse Life: Can be purchased up to \$100,000.
- Supplemental Child Life: \$5,000
- Evidence of Insurability (EOI) application is required and must be approved by Unum.



Connecticut Paid Leave Program (CT PL)



Connecticut Paid Leave

As a covered employee in the State of Connecticut, the Connecticut Paid Leave (CT PL) program allows you to take time off to care for yourself and your family's health needs without worrying about loss of income while you are away from work.

Eligibility:

 Must be an active employee, have either earned wages of at least \$2,325 over the qualifying period or have been employed within the last twelve months.

Benefit:

- Twelve weeks (12) if you or a family member have experienced a serious health condition, are welcoming a new child into your family, are impacted by family violence, need to care of a family member injured while on active duty in the military or to take leave to prepare for a family member entering the active military overseas.
- Two (2) additional weeks are available if you experience a serious health condition during pregnancy.
- Coordinates with Wesleyan's Short-Term Disability and parental leave programs.
- Contact Human Resources at 860-685-2100 or <u>benefits@wesleyan.edu</u> to begin the leave process.



Wellness Incentive Points Program



Wellness Incentive Points Program

Wesleyan's Wellness Incentive Points Program rewards individuals dedicated to improving their health and well-being. You can earn points by actively participating in health improvement programs and activities that can then be redeemed for cash payments. Benefit eligible faculty, staff, spouses and partners are eligible to participate and earn points (up to \$150/each on a semi-annual basis).

Wellness points are entered through the Wellness Points Tool which is available under "My Information" in WesPortal.



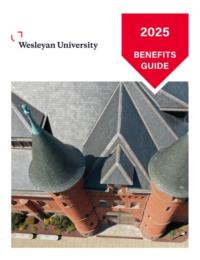
<u>Note</u>: To add or change a spouse/domestic partner, please click the Spouse/Partner link at the top of the screen.

Cardinal Fit Program & Lunch-N-Learns



Next Steps!

See the 2025 Benefits Guide for more details and instructions on how to access all programs.



myCigna.com and Cigna customer service group at 800-Cigna24 are also great resources!



Open Enrollment for Coverage Effective January 1, 2025

Be Informed...

View your benefit options through Workday. Sign into Workday and use the Open Enrollment task in your inbox. You will be able to click each of the benefit areas to enroll or change your enrollments.

Important Note:

If you do not elect to make benefit changes, your 2024 elections will roll over to 2025. However, you must re-enroll in the FSA (MERA & Dependent Care) and HSA plans.

Take Action...

The Open Enrollment period will begin on Friday, November 1, 2025, and end on Friday, November 15, 2025, at midnight.



Questions?

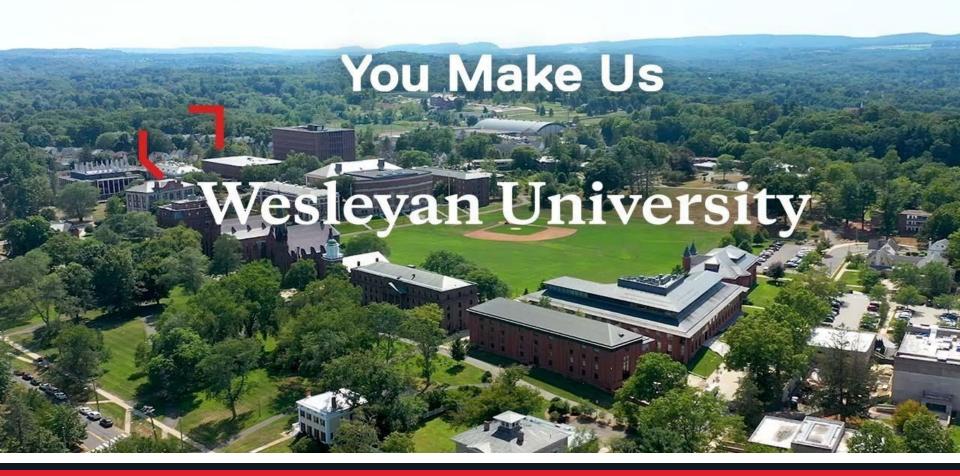
Questions on your 2025 benefits or the enrollment process?

- View the Open Enrollment materials Human Resources Webpage at 2025 Open Enrollment.
- Virtual HSA Presentation November 6, 2024, 2:00 pm
- View Open Enrollment Presentation Human Resources Webpage at 2025 Open Enrollment.
- Virtual Benefits Fair November 6th and November 7th, from 10:00 am -3:30 pm
 - Presentations and Q&As
 - See your open enrollment e-mail for times and Zoom Links.

Questions?

Questions on your 2025 benefits or the enrollment process?

- Send an email to <u>benefits@wesleyan.edu</u>.
- Schedule a 30-minute virtual appointment with a Benefits Team
 Member. Registration is required at Bookings A Microsoft Teams link
 will be sent when you book your appointment.
 - O November 5th, 2024
 - O November 8th, 2024
 - o November 13, 2024
 - November 15th, 2024



Thank you!

We appreciate your time.