

Annual NUFLEX BENEFITS ENROLLMENT

Retiree Newsletter



UNIVERSITY OF
Nebraska®

Medical, Prescription Drug and Dental Insurance

The University of Nebraska annual benefits enrollment period is currently underway. We would like to take this opportunity to share some information about your health plans for 2017. Please take time to read all of the information in this newsletter carefully since it may impact your insurance coverage.

Between now and Nov. 18, you have the opportunity to request a different Blue Cross Blue Shield medical option or cancel your medical and/or dental insurance coverage. If you would like to make any changes to your coverage for 2017, please complete the enclosed Retiree Insurance Change Form and return it to your Campus Benefits Office by Friday, Nov. 18, 2016. All changes will take effect Jan. 1, 2017. **Please note that if you cancel your coverage, you will not be allowed to re-enroll for coverage in the future.**

Additional benefits information is available on the University of Nebraska benefits webpage at www.nebraska.edu/benefits. If you have any questions or need assistance, please contact your Campus Benefits Office.

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BENEFITS ENROLLMENT

How to Change Coverage

How to Make Changes in Coverage

If you would like to change or cancel your medical and/or dental insurance coverage, please complete the enclosed Retiree Insurance Change Form and return it to your Campus Benefits Office no later than Nov. 18, 2016.

If any changes are made for 2017 the medical and dental insurance premiums (see enclosed document) will be automatically changed for the January 2017 electronic withdrawal. As a result, you do not need to contact your bank.

We would like to remind you that if you elect to cancel your retiree medical and/or dental coverage with the university at any other time during the year, you must notify your Campus Benefits Office in writing by the 15th of the month prior to the effective month of cancellation (i.e. if cancellation notice is received Dec. 10, cancellation will be effective Jan. 1).

Notice of cancellation received after the 15th of the month will not be effective until the 2nd month after notification (i.e. if cancellation notice is received Dec. 21, cancellation will be effective Feb. 1). No premium refunds will be made when medical insurance coverage is cancelled. This policy also applies to any change to an electronic banking arrangement (ACH), i.e. change in banks, accounts, etc.

Remember to Update your Records

Please remember to keep your contact information, including your home address, telephone number and email address, up-to-date should the university need to contact you.

Please contact your Campus Benefits Office to update your personal contact information.

**Remember to
make changes
to coverage by
November 18.**

Wellstream Health Risk Assessment

The University of Nebraska is committed to helping you take control of your health. To help you manage your health and medical care costs, we are giving you the opportunity to complete the Wellstream Health Risk Assessment (HRA) again this year. This assessment will help you evaluate and monitor your health and you will receive the enhanced wellness and preventive services benefit for completing it.

You can complete the Wellstream Health Risk Assessment any time between Monday, Oct. 31 and Friday, Nov. 18 at 5 p.m. CST. The assessment is available online at <http://bcbsne.wellstreamonline.com>. Please watch for an email with information about how to log in and complete the HRA. An email will be sent to the email address you previously provided. You must be enrolled in our medical plan and have an email on file with the university to receive the enhanced benefits.

After you complete the HRA, you will receive a Personal Health Report. **You must print or save the report to receive credit for completing the HRA.** As always, your personal health information will remain confidential – the university will not have access to your individual survey data.

Complete the HRA by November 18

Enhanced Wellness and Preventive Services

If you complete the HRA and are enrolled in the university's medical plan, you will receive the following enhanced wellness and preventive services benefit for you and your covered family members in 2017:

\$300
allowance

Annual preventive care allowance of \$300 (for insureds age 2 and over).

\$600
allowance

Dependent child (under age 2) preventive care allowance of \$600.

\$0
copay

\$0 copay for generic prescription drugs through the CVS Caremark mail service program with no annual deductible.

100%
coverage

100% coverage for a routine preventive colonoscopy once every 10 years beginning at age 50 (services must be provided by a PPO provider; out-of-network charges may apply if colonoscopy lab services are provided out-of-network or outside the state of where the colonoscopy is performed).

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Medical Coverage

No Premium Rate Increases for 2017

There will be no increase in the medical insurance premiums in 2017. Enclosed is a document showing the retiree medical insurance premiums for all options and coverage categories. There will be no changes to deductibles, coinsurance, stop-loss limits, and prescription drug copays. **We would like to remind you that the medical plan is closed to new enrollments, including the addition of new dependents.**

Schedule of Benefits

If you are enrolled in the Blue Cross Blue Shield medical plan, you will receive a Schedule of Benefits confirming your medical insurance coverage in January 2017. The 2017 Blue Cross Blue Shield of Nebraska Medical Certificate of Coverage (plan booklet) will be available on the university's benefits webpage at www.nebraska.edu/benefits in January 2017.

Summary of Benefits and Coverage

The Summary of Benefits and Coverage (SBC) is a document that summarizes important information about your health benefits. The SBC is designed to help you make informed decisions about which medical plan to choose. As part of the federal health care reform legislation, we have made the SBCs available to you at www.nebraska.edu/benefits.

Choosing the Right Medical Plan

You have three medical plan options through Blue Cross Blue Shield – low, basic and high. All options include prescription drug coverage through CVS Caremark. The plans differ in the premium, deductible, coinsurance and stop-loss amounts. Please see the enclosed document for retiree medical insurance premiums for all options and coverage categories. Take time to compare the three options and find the right plan for you and your lifestyle.

	Low	Basic	High
What do you prefer?	Low: You would rather pay less each month and pay more when you receive medical care. You don't expect to have many medical expenses, but you have enough money on hand to pay the full deductible if you do need care.	Basic: You prefer a balance between the amount you pay each month and the amount you pay out-of-pocket when you receive medical care. Many people find that the basic option is the best choice, from a purely economic perspective.	High: You prefer to pay more each month so you can pay less when you receive medical care. Please note that the premiums for the high option are significantly higher than the premiums for the low and basic options. If you are currently enrolled in the high option, you may want to consider changing to the low or basic option.
Annual Deductible (the amount you pay out-of-pocket for health care before the plan begins to pay. You are responsible for the deductible when you receive care.)			
- PPO	\$1,550	\$450	\$300
- Non-PPO	\$1,950	\$650	\$450
Coinsurance (the percentage of an insurance claim that you are responsible for paying)			
- PPO	You pay 30%	You pay 30%	You pay 20%
- Non-PPO	You pay 45%	You pay 45%	You pay 35%
Stop-loss (the maximum amount you will have to pay per year – not including your deductible)			
- PPO	\$2,500	\$1,600	\$1,400
- Non-PPO	\$2,900	\$2,000	\$1,700

We encourage you to discuss your unique needs, financial status and health coverage concerns with your Campus Benefits Office to make sure you find the right plan for you and your family. More information is also available at www.nebraska.edu/benefits.

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Prescription Drug Coverage

Prescription drug coverage through CVS Caremark is included in your medical coverage – you do not have to pay an additional premium to participate. You can fill your prescriptions in person at a participating CVS Caremark retail network pharmacy or by mail order.

New for 2017

Prescription drug deductible and copay amounts will not increase in 2017.

Each covered person is required to establish an annual \$57 prescription drug deductible for brand-name drugs. Once you meet the deductible, you will pay the applicable prescription drug copay listed below.

Day Supply	Up to 30
Generic	\$9 copay
Brand (on Formulary/Primary Drug List)	\$31 copay
Brand (not on Formulary/Primary Drug List)	\$52 copay

*An annual \$57 deductible is also required for brand-name drugs for each covered person.

\$0

**Generic copay
through CVS mail
service if you
complete the HRA**

If you complete the Wellstream Health Risk Assessment and are enrolled in the university's medical plan, you can obtain generic drugs through the CVS Caremark mail service program for \$0 copay. The \$0 copay is not applicable at any CVS Caremark retail network pharmacy.

To order prescriptions through the mail service program, complete the mail service order form and send it to CVS Caremark with the original prescription(s) (not a photocopy) and the appropriate copay for each prescription, if applicable. The form is available online at

www.nebraska.edu/benefits. You will receive your prescription within 10 to 14 days after CVS Caremark receives the order. You can also order by phone at (866) 239-4704, or online at www.caremark.com/faststart.

Dental Coverage

Dental coverage is offered through Blue Cross Blue Shield. Coverage includes a Preferred Provider option, which lowers your out-of-pocket expenses. If you are currently enrolled for dental insurance, you may want to review your need for coverage by comparing your actual dental expenses versus the annual cost of premiums. **We would like to remind you that the dental plan is closed to new enrollments, including the addition of new dependents.**

Dental plan premiums will not increase in 2017. Enclosed is a document showing dental premiums for all coverage categories.

You will receive a Schedule of Benefits confirming dental insurance coverage in January 2017. The 2017 Blue Cross Blue Shield of Nebraska Dental Certificate of Coverage (plan booklet) will be available on the university's benefits webpage at www.nebraska.edu/benefits in January 2017.

BENEFITS ENROLLMENT

Contact Information

If you have any questions regarding 2017 benefits enrollment, please contact your Campus Benefits Office.

UNL Campus Benefits Office Call: (402) 472-2600 E-mail: benefits@unl.edu Send forms to: 32 Canfield Administration Lincoln, NE 68588-0409	UNO Campus Benefits Office Call: (402) 554-3660 E-mail: benefits@unomaha.edu Send forms to: 205 Eppley Administration Building Omaha, NE 68182	UNCA Campus Benefits Office Call: (402) 472-5258 E-mail: benefits@nebraska.edu Send forms to: 217 Varner Hall Lincoln, NE 68583-0742
UNMC Campus Benefits Office Call: (402) 559-4340 E-mail: benefits@unmc.edu Send forms to: 985470 Nebraska Medical Center Omaha, NE 68198-5470	UNK Campus Benefits Office Call: (308) 865-8516 E-mail: benefitsunk@unk.edu Send forms to: 1200 Founders Hall Kearney, NE 68849	



The University of Nebraska believes its medical plan is a "grandfathered health plan" under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your plan may not include certain consumer protections of the Affordable Care Act that apply to other plans (e.g. the requirement for the provision of preventive health services without any cost sharing). However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act (e.g. the elimination of lifetime limits on benefits).

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to your Campus Benefits Office. You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans.

The University of Nebraska does not discriminate based on race, color, ethnicity, national origin, sex, pregnancy, sexual orientation, gender identity, religion, disability, age, genetic information, veteran status, marital status, and/or political affiliation in its programs, activities, or employment. For nondiscrimination inquiries, contact the Title IX Coordinator or the Section 504/ADA Coordinator at 3835 Holdrege Street, Lincoln, NE 68583, (402) 472-2111.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al TTY: 1-888-592-8963.
注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 TTY:1-888-592-8963。