

2015 BENEFITS OPEN ENROLLMENT

SEHBP, Dental, and Flexible Spending Account

Reminder!

October 31, 2014 will be the last day to submit your health, dental and Flexible Spending Account enrollment applications.

All change will be effective on January 1, 2015.

During the Open Enrollment period you will be able to make the following general changes for the 2015 plan year.

- Change to a different SEHBP medical plan and/or dental plan;
- Add eligible dependents – including children up to age 26;
- Optional coverage for dependent children from age 26 to age 31 is available under the provisions of Chapter 375, P.L. 2005;
- To waive health benefits coverage;
- Enroll over age 26 year old dependents with disabilities. Must submit a *Request for Continuance for Dependent with Disability form* for continuation of coverage to the SEHBP by January 31, 2015
- Enroll in the Section 125 Tax Saving Plan Flexible Spending Account.

2015 Health Benefits Information

SUMMARY OF BENEFITS AND COVERAGE FOR PLAN YEAR 2015

To view any *Summary of Benefits and Coverage* selects the plan from the links below.

AETNA PLANS		HORIZON PLANS	
PPO PLAN	HMO PLAN	PPO PLAN	HMO PLAN
<ul style="list-style-type: none">▪ Aetna Freedom10▪ Aetna Freedom15• Aetna Freedom1525• Aetna Freedom2030	<ul style="list-style-type: none">▪ Aetna HMO▪ Aetna HMO 1525• Aetna HMO 2030• Aetna HMO 2035	<ul style="list-style-type: none">▪ NJ DIRECT10▪ NJ DIRECT15▪ NJ DIRECT1525▪ NJ DIRECT2030▪ NJ IRECT2035	<ul style="list-style-type: none">▪ Horizon HMO▪ Horizon HMO 1525▪ Horizon HMO 2030▪ Horizon HMO 2030

<ul style="list-style-type: none"> • Aetna Freedom2035 			
High Deductible Health Plans <ul style="list-style-type: none"> • Aetna Value HD1500 		High Deductible Health Plans <ul style="list-style-type: none"> • NJ DIRECT HD1500 	

View the PPACA [Uniform Glossary of Coverage and Medical Terms](#) Adobe PDF (90K)

- [Local Education Active Employees Medical Plan Designs-Plan Year 2015](#)
- [Health Benefit Premium Rate Plan Year 2015](#)
- [Dependent Required Documentation](#)
- Local Education Employees [PPO and HMO Plans](#) Enrollment Application
Fill-in application now available! Adobe PDF (577K)
- [Application for High Deductible Health Plans](#) *Fill-in application now available! Adobe (54K)*

Part-Time Employees Health –Chapter 172

- [Fact Sheet #66](#), Health Benefits coverage for Part Time Employee
- Application for [PPO and HMO Plans](#) *Fill-in application now available! Adobe PDF*
- [Rates for Local Education Part-time Employee - Chapter 172](#) Adobe PDF

Waive Health Benefits Coverage

In accordance with Chapter 92, P.L. 2007 and Chapter 2, P.L. 2010

Employee is not eligible to waive health and prescription coverage with the School Employees' Health Benefits Program (SEHBP), if employee's other coverage is with the SHBP or SEHBP.

(Note: Employee must submit proof of the other health coverage along with this SEHBP enrollment application form.)

Health Benefits Waiver Stipend Per Year

- Single coverage- \$1,200
- Employee-and spouse \$2,600
- Parent/Child coverage- \$1,700
- Family Coverage- \$2,900

- [Health Benefits Waiver Form](#)
- Application for [PPO and HMO Plans](#) *Fill-in application now available! Adobe PDF*

Chapter 375 Application-Coverage for Children over the Age of 26 to 31

Chapter 375, P.L. 2005, provides for the continuation of health coverage to eligible children from the age of 26 until age 31. A child by blood or law who previously "aged-out" may continue under their parent's plan—even if there has been a gap in coverage—provided he or she meets the requirements for dependent status as follows:

- is under the age of 31;

- is unmarried;
- has no dependent(s) of his or her own;
- is a resident of New Jersey,
- enrolled as a full-time student at an accredited public or private institution of higher education; and
- has no other coverage as a named subscriber, insured, enrollee, or covered person under any other group or individual health benefits plan, church plan, or health benefits plan, or entitle to benefits under Medicare.

An over age child must enroll in the same medical and/or prescription drug plan in which the covered parent is enrolled. The parent will be billed directly for the cost, which can be paid for by the parent or over age child. In order to enroll for the 2015 plan year, both the child and the parent must complete a Chapter 375 Enrollment Application and return it to the Division of Pensions and Benefits, Health Benefits Bureau, PO Box 299, Trenton, NJ 08625-0299 by October 31, 2014.

- Chapter 375 [Local Education Employees and Retirees Rate](#)
- [Application for Chapter 375 Coverage](#)
- Chapter 375 Cost Comparison — [Chapter 375 vs. COBRA](#)

Dependent Children with Disabilities- Over the Age of 26

Children covered under their parent's health plan who turn 26 in 2014 and who are disabled and still dependent on the parent for support, may remain on their parent's health plan upon approval of their disabled status. To apply for an extension of health benefits coverage for a dependent child with disabilities, write to the Division of Pensions and Benefits, PO Box 299, Trenton, NJ 08625-0299, sends an e-mail to pensions.nj@treas.nj.gov, or call (609) 292-7524. Please provide your name, address, and last four digits of your Social Security number. Ask for the Request for Continuance for Dependent with Disabilities form. The form and proof of the child's condition must be completed and returned to the Division by January 31, 2015.

Health Benefits Premium Sharing Information

Pursuant the Pensions and Health Benefit Reform (Chapter 78, P.L. 2011).

Effective July 1, 2014, MCCC employees began at year two phase-in.

- Year 1 = ¼ of the full percentage rate (7/1/2013-6/30/2014)
- **Year 2 = ½ of the full percentage (7/1/2014-6/30/2015)**
- Year 3 = ¾ of the full percentage (7/1/2015-6/30/2016)
- Year 4 = the full percentage (7/1/2016-6/30/2017))

Employee will pay either 1.5% of his/her annual base salary or the percentage of bi-weekly health and prescription drug premium cost, whichever is greater on a **pre-tax basis**. If an employee **only has prescription drug coverage**, in most case, they will pay 1.5% of their annual salary for the prescription drug plan.

New employees hired after **July 1, 2013** will be required to pay the **year 4** percentage of premium sharing.

- **Phase 4 - Salary Range and % of Contribution.**

SEHBP Premium Contributions Calculation is based on:

- Phase 2 Salary Range and Percentage Contribution Rate

(July 1, 2014 through June 30, 2015);

[Phase 2 Salary Range and % of Contribution](#)

- 2015 health benefits premium rate;
(January 2015 through December 31, 2015)
 - [2015 AETNA - Health and Prescription Premium](#)
 - [2015 Horizon Plan-Health and Prescription Premium](#)
- Frequently Ask Questions, Health Benefits Reform Under Chapter 78,P.L. 2011

SEHBP Premium Contributions Worksheet

Phase 2 Premium Contribution Work Sheet	
7/1/2014 --- 6/30/2015	
Employee Name:	
Annual Salary	\$
Step 1 <ul style="list-style-type: none">Go to Phase 2 Salary Range and % of Contribution to find the % of your premium contribution based on your salary and coverage level (single, employee/spouse, parent/child, and family coverage). Employees hired after July 1, 2013 <ul style="list-style-type: none">Go to Phase 4 - Salary Range and % of Contribution To find the % of your premium contribution based on your salary and coverage level (single, employee/spouse, parent/child, and family coverage).	%
Step 2 <p>Go to either Horizon or Aetna Health Plan Premium Chart to find the 24 pays and 20 pays bi-weekly premium rate.</p> <ul style="list-style-type: none">2015 AETNA - Health and Prescription Premium2015 Horizon Plan Health and Prescription Premium	\$
Premium Contributions Calculation	
Step 3 <p>Enter Your the Horizon or Aetna bi-weekly rate</p> <p>bi-weekly premium \$_____ x _____ % of Salary Range</p>	\$
Step 4 <p>Annual salary \$ _____ x 1.5% /24-pays = bi-weekly contributions</p> <p>Annual salary \$ _____ x 1.5% /20- pays = bi-weekly contributions</p>	\$

Employees pay the higher premium of either Step 3 or Step 4.

Section 125 Tax Saving Plan Flexible Spending Account

Section 125 Tax Saving Plan – Flexible Spending Account (FSA)

Flexible Spending Accounts are a great way to stretch your benefit dollars. They allow you to use before-tax dollars to reimburse yourself for eligible out-of-pocket medical and dependent care expenses which will save you on taxes and increase your spendable income?

You can elect to have your annual contribution deducted from your paycheck each pay period, in equal installments throughout the year—before federal income, state income (in most cases) and Social Security taxes are taken out—until you reach the yearly maximum you have specified. The amount of your pay that goes into an FSA will not count as taxable income, so you will have immediate tax savings.

FSA consists of three components.

➤ **Medical Spending Account**

Employees may set aside up-to **\$2500** of salary per calendar year on a pre-tax basis to pay for qualified medical expenses. This includes co-payments, dental bills, deductibles for medical and prescription costs; expenses for medical services not covered by health insurance (SEHBP).

➤ **The Dependent Care Spending Account (DCSA)**

Employees may set aside up-to **\$2500 for single parent, and (\$5000 for married couples)** to pay for anticipated expenses related to dependent care as permitted under IRC.

➤ **The Premium Option Plan (POP)**

Under the POP, the premiums for medical and/or dental coverage are deducted from your paycheck **before** federal income and FICA (Social Security and Medicare) taxes are calculated. As a result, money is saved on taxes withheld, which yields a higher "take home" amount in each check.

POP enrollment is automatic each year. You may decline the POP enrollment by submitting a completed Declination of Premium Option Plan form, which may be obtained from Margaret Tsui, Benefits Manager, and Human Resources.

FSA - Advantage

Increases your take home pay by reducing your federal taxes, social security, and Medicare.

FSA - Disadvantage

May reduce (slightly) your Social Security payment when you eventually collect them.

Employees may access their FSA account via the web by visiting www.myfsai.com. The website allows for the filing of claims online and viewing of account balances.

For more information regarding FSA's, click on the following links:

- [MedSave Flexible Spending Account Enrollment Application Form](#)
- [Reimbursement Request Form](#)
- [Eligible Medical Expense](#)
- [Eligible Over-the-Counter Medicine](#)

Flexible Spending Account New ROLLOVER Rule

The US Treasury Department modified its flexible spending account (FSA) “use-it-or-lose-it” provision to allow rollover of FSA unused funds.

Effective in plan year 2014, you are able to roll over up to \$500 of 2014 unused FSA funds into The 2015 plan year. The new FSA Use it or Rollover FSA ruling means that the risk of losing your FSA healthcare contributions at the end of the year are reduced.

Horizon Dental Plans

MCCC offers three Horizon Dental Plans for you to choose.

Horizon Dental Option Plan

Members have the option to receive dental services from either in network or out of network dentists.

In-Network

The Horizon Dental PPO Plan, a Preferred Provider Organization Plan, offers the lowest fees available to employees through the PPO Network of participating dentists. These dentists accept reduced allowances as payment in full, less any applicable deductible and/or coinsurance.

Out-of-Network

With an out-of-network option, employees may go to a nonparticipating dentist and may have to pay the dentist his/her usual fees in advance. Members must then file claims for reimbursement with Horizon. Reimbursement is based on our reduced allowances and members are responsible for any charges in excess of these amounts.

For more information click [Horizon Dental Option Plan](#)

Horizon Dental Choice

Horizon Dental Choice is an HMO-type of coverage that features a strictly credentialed network of participating dentist, which offers the following advantages:

- No annual benefit maximums
- copayments for most eligible routine services
- copayments for eligible major specialty services

Horizon TotalCare Dental

Under this plan, employees will have no out-of-pocket costs when they select and receive dental care at one of Horizon TotalCare Dental's offices. Horizon TotalCare Dental covers 100 percent of all eligible basic, major, and specialty services with no copayment, maximum, deductibles, or paperwork, and no waiting for reimbursement. Eligible services include: periodontal, crowns, dentures, child orthodontia, routine checkups, x rays, routine cleanings, and fillings. Horizon

Following are important Dental forms:

- [Horizon Dental Enrollment Form](#)

For a comparison of Dental Plans and a list of **providers**, see following links:

- [Search for provider](#)

Dependents over age 19 must submit the college registration records as a full time college student every semester.



NJWELL is to cultivate healthy lifestyle choices for active SEHBP members to lower health risk factors, improve well-being, and ensure that New Jersey's SEHBP members are healthy and productive for years to come. NJWELL will help the SEHBP contain future costs.

NJ WELL Plan Year 2015

You and your covered spouse or partner will still have additional opportunities to earn points and receive increased financial incentives during 2015. These incentives will come when you reach goals associated with the biometric screening, such as lowering cholesterol, blood sugar, blood pressure and BMI, or quitting smoking. You will also be able to earn points for receiving preventive screenings, working with a health coach, and /or completing online activities.

In 2015, employees and their covered spouses or partners can receive a gift card worth up to \$200 for earning anywhere from 300 to 500 or more points.

For more information about NJWELL, visit our Web site at: www.nj.gov/njwell

The focus of year two is on taking action and engaging employees to participate in healthy activities.

➤ Activities

- ☐ Health Assessment – 150 points
- ☐ Biometric Screenings – 100 points
- ☐ Age/gender appropriate screenings – 25 points each for physical exam, mammogram, Pap test screening, colon cancer screening, and prostate screening (If recommended by your doctor)
- ☐ Flu Shots – 75 points
- ☐ Online Coaching – 50 points
- ☐ Online Activities – 25 points each
- ☐ Telephonic Wellness/Disease Management Coaching¹ – 100 points

Maximum of 150 points total for last three items,

➤ Employee / Spouse Incentive

- ☐ 300 – 375 points: \$100 incentive
- ☐ 400 – 475 points: \$150 incentive
- ☐ 500 or more points: \$200 incentive
- ☐ Per Employee and Per Spouse

- In 2015, participants will have additional opportunities to earn points in **NJWELL** by getting age appropriate, doctor recommended screenings, and by utilizing services available on their health plan's online portal.

- Points for “Online Activities” are earned when participants utilize tools on their health plan’s online portal including (but not limited to) exercise logs and food journals.
- The number of points necessary to earn a financial reward increases.
- The potential value of the financial reward also increases.
- If both an employee and their covered spouse or partner earns 500 points, they each receive a \$200 Visa Gift card, for financial rewards totaling \$400.

SEHBP Members and their covered spouses and partners learn what their critical health measurement by completing a **Biometric Screening and a Health Assessment**.

Biometric Screening —

This screening will analyze and measure:

- Total Cholesterol: HDL (“good” cholesterol), LDL (“bad” cholesterol), HDL to Total Cholesterol Ratio, Triglycerides;
- Glucose (sugar);
- Body Mass Index (BMI); and
- Pulse and blood pressure.

Have your doctor complete the [Physician Biometric Health Screening Form Adobe PDF](#) (88K) —and follow the instructions to get credit **(100 points)** for your biometric screening.

Please fax completed form to Summit Health at (248) 864-4409 and retain a copy for your records along with the fax confirmation.

Health Assessment —

This is a private and secure online questionnaire about your medical history and lifestyle habits. Visit your **health plan’s online** portal and complete your health assessment (150 points):

- [Horizon members click here](#)
- [Aetna members click here](#)

For more information, please click the links below

- [Frequently Asked Questions regarding NJWELL](#)
- NJ WELL News **SEHBP**