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CHRISTIAN SCHOOLS

2021 Benefits Open Enrollment

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Agenda

- What is Open Enrollment
- Changes for 2021
- Benefit Plan Overview
- Enrollment Process
- 403b - Invesco
- Questions & Answers



What is Open Enrollment?

- Open enrollment is the annual opportunity to make changes to your benefit coverage and plans, as well as dependents covered on those plans, for the benefit plan year October 1, 2021 through September 31, 2022
- Coverage elections remain in effect for the 12 month period
- If you have a “Qualifying Life Event”, you may make changes to your coverage.
 - **Qualifying events include:**
 - Marriage or Divorce
 - Death
 - Birth or adoption of a dependent
 - Change in employment status
 - Change in dependent’s eligibility status
 - Loss of or significant change to your current coverage
 - Judgment, decree or court order
- You have 30-60 days from the date of the event to notify Human Resources



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What is Open Enrollment?

Key Information

- The 2021 Benefit Open Enrollment Period is [8/25/2021 – 09/13/2021](#)
- Log in to the GIS site to enroll
- The deadline to enroll is [09/13/2021](#)
- All benefit elections and changes will take effect [10/1/2021](#)



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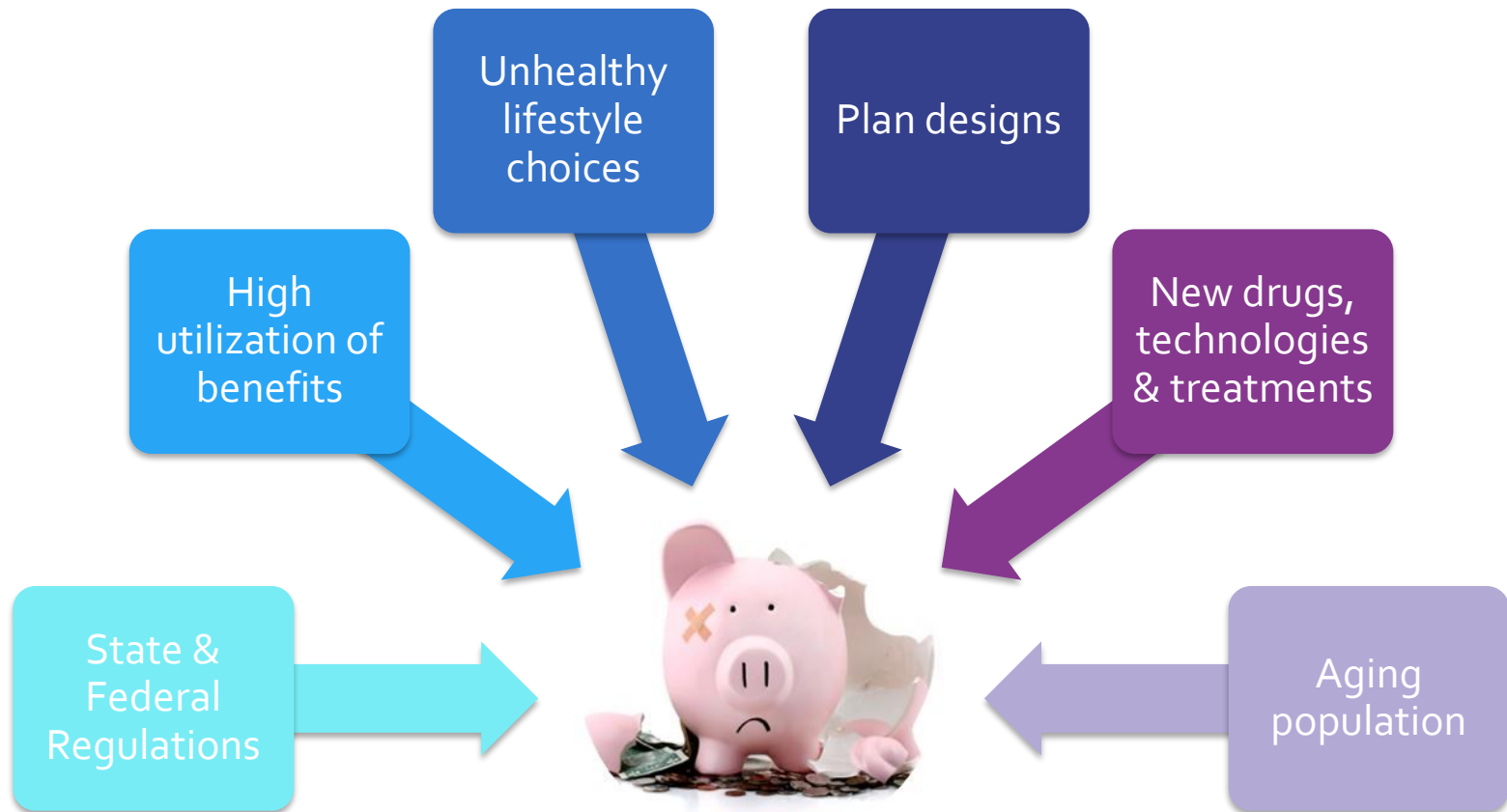
What is Open Enrollment?

Who Is Eligible?

- All current, full time employees working 30 or more hours per week
- New full time employees working 30 or more hours per week
- Your legally married spouse
- Your child(ren) up to age 26

Medical/Rx

What Impacts Medical Costs?





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Changes for 2021 - Medical

Plan Highlights

Kaiser Permanente Insurance Company

	Core HMO with HSA	Virtual Plus HMO	Summit PPO
Calendar Year Deductible	\$1,500 per individual \$3,000 per family	\$500 per individual \$1,000 per family	\$500 per individual \$1,000 per family
Calendar Year Out-of-Pocket Maximum**	\$3,500 per individual \$7,000 per family	\$3,000 per individual \$6,000 per family	\$3,000 per individual \$6,000 per family
Plan Coinsurance	80% *	80% *	90% / 70% / 50%
Office Visit	80%	\$20 copay (DW)	\$10 copay (DW)
Lab & X-ray	80%	80%	90% (DW)
Complex Radiology	80%	80%	90%
Inpatient Hospital	80%	80%	90%
Emergency Room	80%	\$200 copay (waived if admitted) then covered at 80% after deductible	\$100 copay (waived if admitted) then covered at 90% after deductible

*Durable medical goods may pay at a different co-insurance amount, refer to your plan booklet.

**The out-of-pocket maximum includes the deductible all eligible copays and coinsurance amounts.

Difference Between Plans

Core HMO with HSA **	Virtual Plus HMO **	Summit PPO **
<ul style="list-style-type: none"> • IRS defined, Qualifying High Deductible Health Plan (QHDHP) • Health Savings Account (HSA) allows you to set aside tax-free dollars for qualifying medical expenses. Rainier Christian Enterprise contributes \$720 towards individual HSA • Set aside, GROW and spend tax advantaged money on qualified healthcare expenses. • Does not provide out of network benefits* • Referral required before you see a specialist • As a member, you can find the right provider for you from numerous hospitals and 16,000 practitioners in the Core network, in addition to the clinicians at our own medical facilities. 	<ul style="list-style-type: none"> • For most of your care, including care from a specialist, you'll start with a virtual visit • At the virtual visit, a Kaiser Permanente doctor or clinician will give you the care and prescriptions you need or refer you for in-person care • Referral required before you see a specialist • Does not provide out of network benefits* 	<ul style="list-style-type: none"> • Allows you to see any Participating Provider without a physician referral • Gives you access to other major medical groups in Washington state, and renowned specialists and hospitals across the country • Access to Pacific Northwest First Choice Health network available in Oregon, Idaho, Montana, and Alaska. www.fchn.com • All other states First Health Network www.myfirsthealth.com • You can get medical care from any licensed provider in the U.S. However, if the provider is not included in the networks described above, coverage will be at your out-of-network benefit level and balance billing may apply.

*Except if you need emergency services.

**You must notify Kaiser Permanente within 24 hours if admitted to an Out-of-network Emergency provider. Limited to the initial emergency only.



What is a Health Savings Account (HSA)?

- A health savings account (HSA) is an account that you can use to pay medical expenses.

This account helps offset your medical costs by giving you tax advantages, allowing your income to stretch farther by using the dollars that would have otherwise been paid in taxes.

- BUT there are still a few rules:

You have to be eligible to have a HSA

You have to spend the dollars on qualified medical expenses and keep itemized receipts.



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Benefit Overview

CORE HMO W/HSA

- Rainier Christian contributes \$60 each month on your behalf
- How Much Can I Contribute?
 - Individual Enrollment: \$3,600
 - Family Enrollment: \$7,200
- Health Equity administers the Core HMO/HSA plan

Please remember:

These maximums should include any employer contributions.

Those 55 years and older and not enrolled in Medicare can contribute an additional \$1,000 “catch-up” each year.



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Prescription Plan - Highlights

Preferred Network	Core HMO with HSA	Virtual Plus HMO	Summit PPO In-Network / Preferred In-network
Rx Deductible	Medical deductible applies	Deductible waived all tiers	Deductible waived all tiers
Retail Prescription Drugs			
Generic	80%	\$15 copay	\$5 copay / \$15 copay
Preferred Brand Name	80%	\$35 copay	\$30 copay / \$50 copay
Non-Preferred Brand Name	Not covered	Not covered	\$65 copay / \$95 copay
Preferred Specialty	Refer to Formulary	Refer to Formulary	Refer to Formulary
Mail-Order Prescriptions			
Mandatory for Maintenance Rx?	No	Mandatory for maintenance drugs after 1st fill	No
Generic	80%	\$10 copay	2x retail
Preferred Brand Name	80%	\$70 copay	2x retail
Non-Preferred Brand Name	Not covered	Not covered	2x retail
Preferred Specialty	Refer to Formulary	Refer to Formulary	Refer to Formulary



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Employee Contributions

Medical

	Core HMO with HSA	Virtual Plus HMO	Summit PPO
Payroll deductions are on a Monthly basis			
Employee	\$0.00	\$0.00	\$127.00
Employee & Spouse	\$544.10	\$644.27	\$909.01
Employee & Child(ren)	\$390.28	\$462.13	\$687.93
Employee & Spouse & Child(ren) (Family)	\$934.38	\$1,106.39	\$1,469.93

- **RCSD pays for your employee only coverage on both the Core HMO w/HSA and Virtual Plus HMO**

*All deductions are done on a pre-tax basis unless requested otherwise.

Spending Accounts



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FSA - Flexible Spending Accounts

- Flexible Spending Accounts (FSA) are a great way for you to **SAVE MONEY** on pre-planned health and day care expenses!
 - Participation is 100% voluntary
 - Savings are **TAX FREE**, not Tax Deferred
 - Supported by Section 125 (Flexible Spending Account) and 129 (Dependent Care) of the IRS Code
- Various Account Options
 - Health Care Spending Account (Section 125)
 - Dependent or “Day Care” Spending Account (Section 129)



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FSA - Flexible Spending Accounts

- Plan Year is 10/1/2021 to 9/30/2022
- Amount elected cannot be changed for the entire plan year!
 - Be conservative
 - Adjustments can be made if a “permitted election change events” (marriage, divorce, death, birth, adoption) occurs
 - Watch out for the “Use it or Lose it” rule

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FSA – Health Care

The Health Care Spending Account allows you to reimburse yourself for out-of-pocket healthcare expenses **not** covered by our benefit plans.

- Annual pledge is available immediately! No waiting for the dollars to be withheld each check.
- The whole family** can use the fund! Even if they have other healthcare coverage!
- Set aside up to \$2,750 per plan year.
 - Take advantage of the 2 ½ month grace period if you were not able to spend your full allocation within the 12-month plan year.

**Refer to IRS Publication 969 for a list of individuals that you can use your FSA on. If you elect the FSA and your spouse is enrolled in a QHDHP, they will be ineligible to contribute to an HSA.



FSA – Health Care

Please remember it is important to keep good records! Below are some examples of eligible and ineligible expenses.

Allowed	Not Allowed
Acupuncture	Books
Birthing Classes	Club Memberships
Frames & Contact Lenses	Liposuction
Orthodontia	Marriage Counseling
Prescriptions	Teeth Bleaching
Physical Therapy	Face Lifts

A complete listing (including over-the-counter expenses and expenses requiring a prescription) is provided in Code Section 213(d) of the IRS Ruling for Flexible Spending Accounts.



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FSA – Dependent Care

Dependent care FSA annual maximum is \$5,000. Features of this plan include:

- This program lets you pay for certain IRS-approved dependent daycare expenses with pre-tax dollars.
- Rollover provision does not apply. Use it or lose it rule applies.
- Eligible for care while parents are at work or school.
- ONLY amount payroll deducted to date is available for distribution.
- Some examples include:
 - Daycare/Preschool for dependent children to age 13
 - Adult daycare
 - Before and after school programs
 - Camps

Willamette Dental Insurance, Inc.
Ameritas Group

Voluntary Dental



Voluntary Dental - Benefit Highlights

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	Willamette Dental of WA, Inc. EPO	Ameritas Group Dental PPO
Annual Deductible	\$0	\$50 per individual \$150 per family
Benefit Maximum	N/A*	\$1,500
Deductible Waived for Preventive Care	N/A	Yes
Preventive Care	\$20 copay general and orthodontic	100%
Basic Services*	Various copays apply	80%
Major Services*	Various copays apply	50%
Orthodontia Services	\$2,800.00 comprehensive copay	N/A

* Benefits for temporomandibular joint (TMJ), implant surgery, and orthognathic surgery have a benefit maximum, if covered.



Employee Contributions

Voluntary Dental

	Willamette Dental of WA, Inc. EPO	Ameritas Group Dental PPO
Payroll deductions are on a Monthly basis		
Employee	\$43.55	\$51.80
Employee & Spouse	\$87.65	\$104.32
Employee & Child(ren)	\$101.95	\$111.10
Employee & Spouse & Child(ren) (Family)	\$153.05	\$170.70

*All deductions are done on a pre-tax basis unless requested otherwise.

Ameritas Life Insurance Corp

Voluntary Vision





Voluntary Vision – Benefit Highlights

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	Ameritas Life Insurance Corp EyeMed and VSP In-Network
Exam	\$10 copay
Materials	\$25 copay
Benefits & Frequency	
Exam	Covered every 12 months
Lenses	Benefit varies by lens options Covered every 12 months
Frames	100% up to \$130 plus 20% off out-of-pocket costs every 24 months
Contact Lenses (in lieu of frames)	100% up to \$130 after copay of up to \$55 (fitting and evaluation) Covered every 12 months



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VSP and EyeMed Differences

VSP Network	EyeMed Network
<ul style="list-style-type: none">• 4,500 retail chain affiliates such as: Costco Wholesale, Pearle Vision, Visionworks, Cohen's Fashion Optical, and more• Provides access to the largest network of independent doctors, VSP members receive services at rates well below walk-in prices at more than 36,000 doctors nationwide. Find a provider at https://www.vsp.com• Laser Vision Surgery Your vision plan provides an average discount of 15% on LASIK and PRK. Your maximum out-of-pocket per eye is \$1,800 for LASIK, \$2,300 for custom LASIK using Wavefront technology, and \$1,500 for PRK. In order to receive the benefit, a VSP Provide must coordinate the procedure. Getting started is simple; just follow the steps at https://www.vsp.com/lasik.html• Out-of-network benefits can be used at Walmart and Sam's Club	<ul style="list-style-type: none">• 5 out of the Top 6 national retail chains accept EyeMed: Lens Crafters, Pearle Vision, Sears Optical, Target Optical, JC Penny Optical.• Over 94,000 access point nationwide, made up of 66% independent doctors and 34% retail locations.• 20% of locations are open after 6pm on Saturdays and on average, each EyeMed network provider is open 10 evening and 12 weekend hours per week.



Employee Contributions

Voluntary Vision

	Ameritas EyeMed Network	Ameritas VSP Network
Payroll deductions are on a Monthly basis		
Employee	\$7.84	\$7.84
Employee & Spouse	\$15.72	\$15.72
Employee & Child(ren)	\$13.72	\$13.72
Employee & Spouse & Child(ren) (Family)	\$21.56	\$21.56

*All deductions are done on a pre-tax basis unless requested otherwise

SUPPLEMENTAL Coverages



Voluntary Short-Term Disability

Principal Life

The following highlights details regarding our short-term disability plan.

Principal Life Insurance Company Voluntary Short-Term Disability (S-TD)	
Elimination Period	
• Accident	14 days
• Sickness	14 days
Benefit Percentage	60%
Weekly Benefit Maximum	\$1,000
Maximum Benefit Period	11 weeks
Pre-Existing Condition Limitations	12 months for conditions treated within the 3 months prior to effective date of coverage



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Voluntary Life Insurance

Principal Life

- Voluntary Life Insurance Options
 - Employee: Increments of \$10,000 up to \$300,000
 - Spouses: Increments of \$5,000 up to \$100,000
 - Eligible Children:
 - Children Live Birth to 14 days of age: Flat \$1,000
 - 14+ days of age: \$2,500, \$5,000, \$10,000 maximum
- Purchase coverage for the first time or increase your coverage – with no health questions asked*.
- Costs are listed in your Enrollment Guide
- Employee must be enrolled in order to elect coverage for spouse and/or child(ren)

* Options available will vary by benefit design, and your policy may be different.

Principal Life Insurance Company

Additional Benefits

Employee Assistance Plan (EAP)

An EAP is short-term counseling and referral service for you and your family members at no additional cost.

- 100% CONFIDENTIAL
- 24 / 7 Toll-Free Hot Line
- 3 face-to-face visits per issue



Available Services

- Family & Personal relationships
- Stress & Work Issues
- 24/7 phone consultation with licensed mental health professionals and referrals to supportive resources*
- Parenting / School Issues

- Online assistance with childcare
- Online assistance with eldercare
- Financial advice
- Legal advice



800-450-1327

International: 800-662-4504

TTY: 800-456-4006



MagellanAscend.com

When you create an account,

use **Principal Core** for the company name.

* You're responsible for any fees resulting from referrals outside the EAP, including those associated with medical benefits.



Qualifying Life Events

- You are **only** able to add or drop coverage during the plan year if you have a federal qualified event such as:
 - Change in marital status
 - Change in number of dependents
 - Change in employment status
 - Change in eligibility status
- Any changes made must be consistent and correspond with the change in status.
- Documentation is required for any mid-year status changes.
- If you are making a mid-year plan change you must notify HR within 30 - 60 days of the qualifying event, depending on the life event.



USI Benefit Resource Center

Questions & Resources



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Benefit Resource Center

Contact the USI Benefit Resource Center (BRC) for free, confidential help!

- Benefit coverage levels
- Carrier information
- Claims assistance
- Billing issues

866-468-7272

BRCWest@usi.com

Monday through Friday 8:00am to 5:00pm Pacific Time



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Benefits Mobile App

The USleb app gives on-the-go access to all of your benefit and insurance policy details, HR contact information and more!

Our mobile benefits app provides a quick and simple way for you and your benefit plan participants to access benefit summaries and other important information about your group plans. The app also offers the ability to take photos of ID cards to store on the phone, as well as a way to easily locate carrier and HR contact information—all in one place—24/7 and on the go. Our app is free, available for iPhone and Android and the benefits include:

- **Staying Organized**
The app gives employees access to all of their benefit plan information and ID cards—all in one place.
- **Lightening Wallets**
The app allows you to take and access images of your ID cards. Images are stored on the phone itself; no personal health information is transmitted or saved.
- **Getting In Touch**
The app provides you with a single location to find contact information for your Human Resources team and the **Benefit Resource Center** as well as insurance carriers.



Rainier Christian Schools Access Code: **909702**



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How to Elect Benefits/Enroll

- We use the GIS/Benefits Connect system to enroll:
www.benefitsconnect.net/rainierchristian
- Username is the first *six letters of your last name, first initial, last four of your social
Example: millers0123
- Temporary password: last four of your social

**or your full last name if less than six letters*



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Thank you!!

for your participation in this year's open enrollment presentation.

All election changes are due by: **September 13, 2021**