



Insurance & Retirement

For Florida State University
OPS Employees

Welcome to Florida State University. This is an overview of the Insurance and Retirement options available.

Where do I go if I have questions?



People First:

- 1-866-663-4735
 - Available Mon. Fri., 8:00 a.m. to 6:00 p.m. ET

www.peoplefirst.myflorida.com www.mybenefits.myflorida.com

FSU HR Benefits:

(850) 644-4015 or insurance@fsu.edu www.hr.fsu.edu



If you need assistance with enrolling, or making changes to your insurances, log onto the People First website, or contact them at the phone number listed on this slide. Otherwise, you can contact the Human Resources Benefits office.

People First

Administers all FSU insurance benefits:

- Processes enrollment
- Processes Qualifying Status Changes (QSC)
- Verifies dependent eligibility
- Administers COBRA benefits
- Annual Open Enrollment

FSU employees use the People First system to enroll, manage, and make changes to their insurance benefits



People First is the administrator for all insurance benefits offered by FSU. Their responsibilities include determining eligibility, processing enrollments, handling qualifying event changes, verifying dependent eligibility, COBRA and open enrollment. You will use the People First system to enroll into, and make changes to State benefits. You can do this online or by telephone.



Eligibility

Who is eligible:

- Employees hired at 0.75 FTE in original appointment (30 hours per week) or greater
- Employees who increase to 0.75 FTE (30 hours per week)
- Employees who qualify in a "measurement period"

When to enroll:

- Within 60 days of hire date
- Within 60 days of qualifying event
- During Open Enrollment



OPS employees, hired at 0.75 FTE (30 hours per week) or greater in their original appointment with any State of Florida agency or university, will qualify for State insurances. OPS employees may also qualify if they are expected to work 30 hours or more a week or during a measurement period. Measurement Periods will be discussed in more detail in a moment.

When should you enroll? OPS employees can enroll within 60 days of their hire date, qualifying measurement period or during open enrollment.

Measurement Periods

New Hire Measurement Period

 12 month period beginning on the first day of the first month following your hire date with the State of Florida

Open Enrollment Measurement Period

- 12 month period, October 3 - October 2

Stability Period

 Period following a measurement in which enrolled employees are covered while actively employed



There are two measurement periods that determine whether OPS employees are eligible for benefits. The new hire measurement period is the 12 month period following the original OPS hire date with the State. The Open Enrollment measurement period occurs every year to determine eligibility for the following year.

OPS employees who become benefits eligible will maintain benefits during the 12 month stability period while employed by the State of Florida.





- Health Insurance: 1st day of the month following enrollment
- Supplemental plans:
 - Dental, vision, accident, cancer, hospitalization, etc.
 - 1st day of the month following 2 paychecks in the same month

How Long Coverage Lasts:

- Through the stability period (end of calendar year)
- The month following terminating employment with FSU

Premiums: paid the month before coverage is effective



If you are eligible with your original appointment, then your coverage will begin the first day of the month following your enrollment.

Coverage is provided for the 12 months after enrollment and will cover you the month after you terminate employment with the University.

State insurance premiums are paid the month before coverage is effective.

Enrollment



Enroll:

- Online through the People First website, or,
- Over the phone by calling the People First Service Center

Log-in information

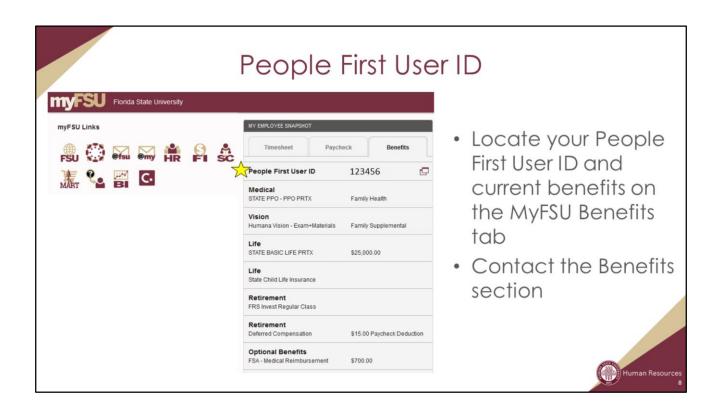
- Mailed within 30 days by People First
- Available by contacting the HR Benefits section

Deadline:

- 60 days from your hire date to enroll

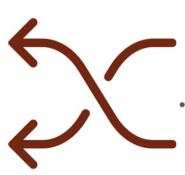


If you are eligible for benefits, People First will mail log-in information to your home address. You can contact the People First Service Center or email the Human Resources Benefits office to receive your log-in information.



You can obtain your People First User ID before receiving your packet in the mail from People First. The 'benefits' tab in the MyFSU portal provides you with your People First user ID, a link to the People First website, and will list any current enrollments that you have. You can also email the HR Benefits section to request your user ID. This will enable you to enroll and secure the earliest effective dates available.

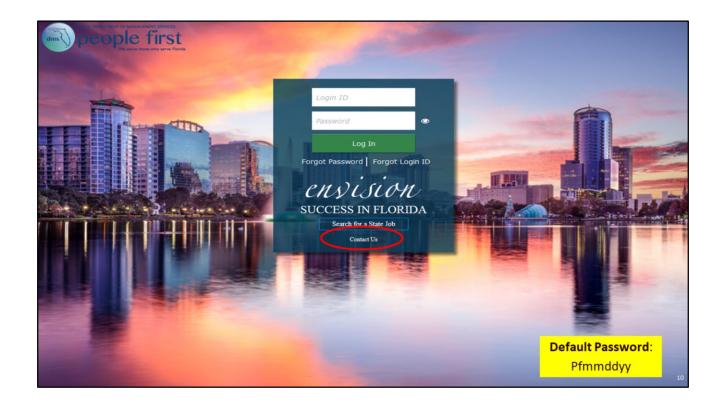
Opportunities to Make Changes



- Qualifying Status Change
 - Participants have 60 calendar days following a qualifying event (marriage, divorce, loss of coverage, death, etc) to make a change to their coverage
- Open Enrollment
 - Occurs every fall
 - Make any changes, additions, or deletions during this time
 - All changes made are effective January 1st of the following year

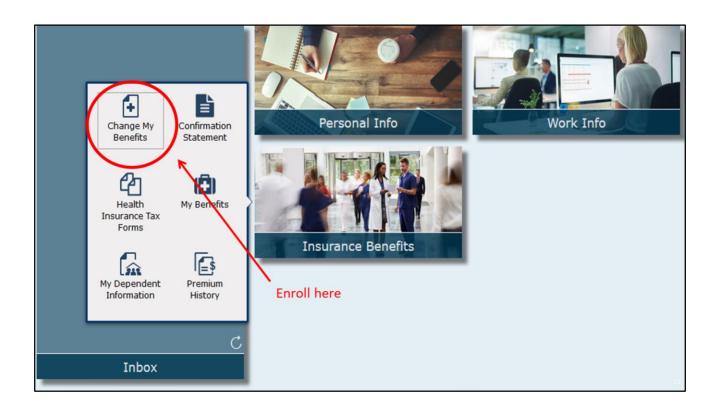
Qualifying status changes are specific life events, which can occur at any time that allow you to make changes to your benefits. You must notify People First within sixty days of the event, or you will have to wait until open enrollment to make changes. People First may also require documentation to verify the qualifying event and process your request.

There is an annual open enrollment period that gives employees an opportunity to review and/or make changes. This period is held during the fall, and all changes go into effect on January 1st of the following year. Prior to Open Enrollment, People First mails information to advise employees of their current benefits, and to provide information about any upcoming changes.



The default password to log on to the People First website the first time is uppercase P, lowercase f, followed by your date of birth, two digit month, two digit day, and two digit year.

Refer to the "Forgot Password" Link on the People First homepage for more information on setting up your password.



Select the 'Change My Benefits' link to enroll or to make changes.

Health Insurance

Standard Plans (HMO & PPO)

	Individual	Family	Spouse Program
Who is covered	Employee Only	Employee + Dependent(s)	Both Spouses work for the State Full Time
Monthly Payment	\$50	\$180	\$15



Standard Health Insurance Plan premiums are the same whether you choose the PPO or HMO option. An employee who has a spouse that works for the university, or another state agency, and is also benefits eligible can enroll into the spouse program and receive health insurance at a reduced premium.

Health Insurance (HMO)

- · Services limited to network
- Requires primary care provider
- · Referrals needed for specialists
- No deductibles

- · No pre-existing condition exclusions
- Only emergency services are paid outside the service area

-HMO must be notified within 48 hours of an emergency

Type of Medical Visit	Co-Payment
Primary Doctor	\$20
Specialist	\$40
Emergency Services	\$100
Hospital Admission	\$250



In general, HMO plans focus on wellness, prevention, early detection, and the treatment of illnesses. These plans do not have pre-existing condition exclusions, claims to file or any deductibles. You may need a referral from your primary care provider if you need to see a specialist for a specific concern.

Services are limited to the HMO network, unless referred. However, you are fully covered world-wide for emergency services.

PPO (Florida Blue) Health Plan

- No restrictions on providers
- Co-payments
- Annual deductibles before provider pays
- Co-Insurance
- Specialist self referrals
- Costs vary based on network and nonnetwork providers
- No pre-existing condition exclusions





The PPO health plan offers the widest range of available physicians, and allows members to "self-refer" to specialists. Services are not covered until annual deductibles are met. Once these deductible amounts have been paid by the member, the plan provider begins paying their percentage of cost for medical and prescription expenses. The deductible varies based on whether the provider is in the network.

PPO (Florida Blue) Health Plan

	Network	Non-Network
Office Visits	\$15 primary care \$25 specialty care	40% of the allowance, plus the difference between the charge and the allowance
Calendar Year Deductible	\$250 individual \$500 family	\$750 individual \$1,500 family
Other	Annual global out-of-pocket maximum: \$7,350 individual \$14,700 family	Employee must file claims



Check to see if your provider is part of the network before you receive services. Otherwise, you may have to pay more than you expect.

High Deductible Health Plan (HDHP) HMO and PPO

- Higher deductible and lower monthly premium

	Individual	Family
Monthly Premium	\$15	\$64.30
Annual Deductible	\$1,350	\$2,700

Health Savings Account

- Accumulates interest on balances that roll over for future use

Yearly Contribution	Individual	Family
Employee	\$3,000	\$6,000
Employer	\$500	\$1,000



FSU offers the option to enroll in an HMO or PPO high deductible health plan, or HDHP. With the HDHP you must meet a higher annual deductible, but your monthly premiums are lower than the standard plan premiums. You must meet the annual deductible amount for **all services** and prescriptions, except certain preventative services, before the plan starts paying toward your expenses.

The HDHP provides the option to open a Health Savings Account. The University will make a contribution towards this account, even if you don't. To make sure you are properly enrolled for the employer contribution, contact People First.

Prescription Drugs

CVS/Caremark: 888-766-5490 or www.caremark.com/sofrxplan

Prescription drug class	30-day supply	90-day supply
Generic	\$7	\$14
Preferred Drugs (contact provider for a list)	\$30	\$60
Non-preferred	\$50	\$100

- Medication Synchronization allowed once per year
- Note: PPO members must use 90-day supply for all maintenance drugs

Prescription Services are provided by CVS/Caremark. You will receive a prescription card in addition to your health insurance card. Members may obtain prescriptions at either a local pharmacy or through the mailorder service. Most pharmacies accept CVS/Caremark, however, Walgreens does not.

Medication Synchronization is available for you to use one time each year. This enables your pharmacist to synchronize all of your medication refills so that you can pick them up on the same day.

PPO Plan members must fill maintenance medications through mail order or at a participating retail pharmacy. A list of maintenance medications can be obtained from the provider.

HMO plan members may use the 90 day mail order option to reduce prescription costs.

Questions about your prescription drug costs, available generic alternatives, specialty medications, mail order, or locating a network pharmacy can be directed to CVS/Caremark.

Flexible Spending Accounts (FSA)

FSA Account Type	Minimum Election	Maximum Election	Expenses	Other
Health Care	\$60	\$2,700	For tax deductible medical expenses	\$500 roll over to next calendar year
Limited Purpose	\$60	\$2,700	Available if enrolled in an HDHP plan with an HSA	\$500 roll over to next calendar year
Dependent Care	\$60	\$5,000	For expenses incurred for care of dependents	Grace period. Funds are use-it-or-lose-it

- Pre-tax dollars to cover expenses
- · Renews automatically



Flexible spending accounts allow employees to set aside pre-tax dollars to cover medical and dependent care expenses. Your elected amount will be deducted from the remaining paychecks for the year and renews automatically for the next year unless you change it during open enrollment.

The Healthcare and Limited Purpose accounts allow you to roll over up to \$500 to the next calendar year to use. The Dependent care account funds are use-it or lose-it.

Please note: If you are enrolled in a High Deductible Health Plan with a Health Savings Account, you are only eligible to enroll in the Limited Purpose FSA.

3 Ways to Save

- 1. **Healthcare Bluebook** online transparency portal. Allows members to shop for health services based on cost and quality, and earn financial rewards.
- 2. **SurgeryPlus** bundled surgical services. Allows members to shop surgical services and earn financial rewards.
- 3. **Chard Snyder** health reimbursement account . A new account members can choose to receive any reward payments they've earned using Healthcare Bluebook or SurgeryPlus.





There are three ways to save with benefit options that allow you to shop for health care services, earn tax-free financial rewards, and reduce out-of-pocket health care costs. These benefits are designed to save the state money and allow you to share in these savings through Healthcare Bluebook, Surgery Plus, and Chard Snyder.

Healthcare Bluebook offers an online transparency website for employees to shop for health care services, facilities, and providers. This voluntary benefit rates providers and facilities based on cost and quality. Using this service can earn you a financial reward.

SurgeryPlus is a voluntary benefit that provides non-emergency surgical services. SurgeryPlus is separate from your health plan and is able to bundle services together to reduce costs and provide you with a financial reward.

Chard Snyder is the administrator for the Health Reimbursement Account, or, HRA. This pretax account can be used when rewards are earned to reimburse you, or pay for, eligible medical, dental, and vision expenses.

Life Insurance

Basic Life Insurance:

- \$25,000

Child Life Insurance:

- \$10,000 coverage

Spouse Life Insurance:

- \$15,000 coverage, or,
- \$20,000 coverage

- · All coverage is Term Life
- Employee pays full premium cost





The State offers life insurance plans for employee, child, and spouse. The employee pays full premium costs.

Dental Insurance

Prepaid

- HMO structure where services are limited to a network
- You pay a specific dollar amount, per service you receive
- Orthodontia benefits (adults & children)

PPO

- Receive care from any dentist (cost is lower innetwork)
- Annual deductible & co-insurance
- Orthodontia benefits (adults & children)
 - excluding Preventative PPO plans





Prepaid dental plans maintain affordable premiums and low out-of-pocket expenses through a network of participating general dentists and specialists. If you use a dentist that is not part of the network, you will have to pay the entire amount for services received. You cannot change dental plans based on provider preference, except during open enrollment.

PPO dental plans allows you to receive care from the dentist of your choice. You will pay less by staying within the PPO network. The annual deductible must be met before the plan starts paying benefits.

Dental Insurance

Indemnity w/PPO

- Receive care from any dentist (cost is lower in-network)
- Annual deductible & co-insurance
- More out-of-pocket expenses
- Orthodontia: varies by company



Indemnity

- Receive care from any dentist (cost is lower in-network)
- Annual deductible & co-insurance
- Orthodontia benefits (adults & children)



The Indemnity with PPO plans allow you to visit a dentist of your choice. The PPO covers a percentage of cost based on the service received for both in network and non-network providers.

The Indemnity plan allows you to select the dentist of your choice. The plan pays a set amount for covered services and you pay the remaining balance. Be sure to inquire about the charges before receiving services.

Premiums and dental companies are available on the People First website when you make your elections, or through the plan provider benefit brochures located on the State MyBenefits website.

Vision Insurance

Elective contact lenses: \$150 allowance

Benefit	Frequency of Benefit	
Eye Exam	Once every 12 months	
Frames	Once every 24 months	
Eyeglass Lenses or Contact Lenses	Once every 12 months	



You can receive an eye exam with your health insurance coverage.

Vision insurance is separate from health insurance and offers coverage for eye exams and materials. You are eligible to receive an eye exam once every 12 months. Within a calendar year, you may only have the material benefit towards either contact lenses or eyeglass lenses.

Supplemental Insurance: Hospital, Cancer, Short Term Disability, and Accident Insurance

- Plans vary by company (AFLAC, Cigna, Colonial, New Era)
- Additional income for out-of-pocket expenses
- · Paid directly to you or the hospital
- · Independent of health insurance coverage
- · Contact company for rate quote and plan details
- Enroll through People First



There are several companies that offer supplemental hospital, cancer, short term disability, and accident insurance. This coverage is independent of health insurance. Contact the individual provider company for more details. Enroll with People First and complete any separate applications of insurability before the coverage begins.

Reminders

- Employees MUST enroll within 60 days of their hire date or within 60 days of becoming eligible
- Insurance premiums are paid the month before coverage becomes effective
- Changes to benefits may occur:
 - During Open Enrollment
 - With a Qualifying Status Change event

Human Resources 25

Just a few reminders – you have 60 calendar days from your hire date, or eligibility date, to enroll or make changes to your benefits. Premiums are paid the month before coverage begins. Changes can only be made with People First during Open Enrollment or with a qualifying status change.

FICA/Bencor

- Most OPS employees are mandatory participants in the Bencor 401(a) FICA Alternative Retirement Plan.
- 7.5% contribution to Bencor instead of paying FICA (Social Security) tax.
 - No Social Security credits are earned while in Bencor.
- Participants can invest contributions within the plan.
- Account withdrawals/transfers are permitted only if terminated from OPS employment.



Most OPS employees are mandatory participants in the Bencor 401(a) FICA Alternative Retirement Plan. Employees contribute 7.5% from each bi-weekly paycheck. Participants do not earn social security credits while enrolled.

Fund transfers and withdrawals are only permitted after the employee has terminated their OPS employment with the University.

FICA/Bencor

- Bencor online account access (view current account balance, history, maintain investments, etc.) www.bencorplans.com
- Choose "Participant Login"
- Bencor Administrative Services: 888-258-3422
- Bencor Plan Information: <u>www.hr.fsu.edu/Bencor</u>
- · Questions?
 - Benefits Office (850) 644-4017 or retirement@fsu.edu



Participants in the Bencor plan can view their account balances by logging in to the Bencor website.

For additional information about the plan, you can view our Human Resources website or contact our office by phone or email.

Tax Sheltered Annuities – 403(b)

- Voluntary retirement savings plan
 - Contributions can be changed at any time.
- Reduces taxable income
- Bi-weekly pre-tax contributions (minimum \$10)
- Subject to yearly contribution limits:
 - √ \$19,000, if under age 50
 - √ \$25,000, if age 50+
- See company representatives for tax law/limit information



The University allows ALL employees to participate in its 403(b) Tax-sheltered annuity program. A 403(b) is a type of retirement account that is similar to a standard 401(k) account that you might find at a private employer. In this plan, you can contribute a specific dollar amount to be deducted from your bi-weekly paycheck, to be deposited into the retirement account. Contributions in this account can be invested in several types of funds, including money markets, bonds and stock funds. The minimum amount that can be invested bi-weekly is \$10.

All contributions made to a 403(b) account are pre-tax. Taxes will be paid at the time the funds are withdrawn from the account, presumably at retirement.

All contributions to the FSU 403(b) plan are voluntary – and the amount contributed may be started, stopped or changed at any time. The contributions and earnings are fully accessible to the participant once employment has been terminated, or at age 59½.

Tax Sheltered Annuities – 403(b)

- Choose from eight participating investment companies:
 - AXA www.us.axa.com/home.html
 - Voya, Lincoln Investment, Reliastar www.gaboragency.com
 - Lincoln Financial www.lfg.com
 - Brighthouse/MetLife www.metlife.com
 - TIAA www.tiaa.org/fsu
 - VALIC www.valic.com



To enroll in the FSU 403(b) Tax Sheltered Annuity Program, please contact one or more of the Investment Providers listed on this slide.

You are required to complete an annuity contract to initially set up your 403(b) account. The investment company representative will ensure that your contribution request is submitted to FSU for processing.

Deferred Compensation - 457

- Administered by the State of Florida
- For a list of companies, or to enroll, contact:
 - Bureau of Deferred Compensation
 (850) 413-3162 or www.myfloridadeferredcomp.com
- Subject to yearly contribution limits:
 - √ \$19,000, if under age 50
 - √\$25,000, if age 50+
 - ✓ Separate limit from 403(b)
- See company representatives for tax law/limit information



The State of Florida 457 Deferred Compensation Program is another way FSU employees can save for retirement on a pre-tax basis. There are several companies available within this plan. For more information, and to enroll, please visit the Bureau of Deferred Compensation website.

There is a limited amount that employees can contribute to a 457 account in a calendar year. The IRS limitations for the current year are listed on this slide.

The 403(b) Tax Sheltered Annuity and the 457 Deferred Compensation have separate limits, so an employee is eligible to put the maximum contributions toward both accounts at the same time.

After Tax - Roth 403(b)

- Choose from five participating investment companies:
 - AXA www.us.axa.com/home.html
 - Voya www.gaboragency.com
 - TIAA www.tiaa.org/fsu
 - VALIC www.valic.com
 - Lincoln Investment www.gaboragency.com
- Voluntary employee contributions made on an aftertax basis
- Roth 403(b) contributions are subject to the same yearly contribution limits as traditional (pre-tax) 403(b) accounts

FSU employees also have the option to contribute to a after-tax Roth 403(b) retirement account. Unlike Traditional 403(b)s and 457s, Roth contributions are subject to federal income tax at the time the contributions are made. Since these taxes are paid in advance, the contributions plus any earnings may be withdrawn tax-free at a later date – ideally at retirement.

All contributions to the FSU Roth 403(b) plan are voluntary – and the amount contributed may be started, stopped or changed at any time. The contributions and earnings are fully accessible to the participant if employment has been terminated, or at age 59½.

Human Resources – Benefits University Center A, Suite 6200 (850) 644-4015

Insurance: insurance@fsu.edu Retirement: retirement@fsu.edu

www.hr.fsu.edu





Please contact our office if have any questions or if you need assistance.

Thank you.

Thank you to these artists for the use of their icons:
Freepik
Linh Pham
Swifticon
Smashicons
Gregor Cresnar
Becris
Smartline
Vignesh Ovivan
Elias Bikbulatov

