



# Focus on Benefits 2024

## **WELCOME TO YOUR BENEFITS**

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HealthcareBluebook

Prescrip on Benefit for MaintenanceMedica onsat \$0 Cost

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FlexibleSpendingAccount

EmployeeAssistanceProgram(EAP)

Re rement Plan

**NEW Voluntary Short Term Disability** 

BasidLifeandLongTermDisability

RequiredNo ces

# **BENEFITS OVERVIEW**

BeneÞt	Your op Yons	Coverage levels	Cost sharing
Medical	ChoicePlusPPO	Employeændeligiblede- pendents	Shared
	CorePPONetwork	Employeændeligiblede- pendence	Shared
	HighDeduc ble HealthPlan	Employeændeligiblede- pendents	Shared
Dental	DeltaDentalHMO	Employeændeligiblede- pendents	Employeepaid
	DeltaDentalPPO	Employeændeligiblede- pendents	Employeepaid
Vision	VSPChoice	Employeænd eligiblede- pendents	Employeepaid
HSA	Up to \$3,650individualor \$7,300 family per year (total) \$1,000Catch-upcontribu on (age 55 or older)	Employeændeligiblede- pendents	Employercontri- bu on

Lake Forest College is pleased to o +er three medical plans	
Choice Plus. Thistradi onal PPOplanhasa copayfor o	cevisits,a deduc ble for other types of (

## **HEALTH PLAN PREMIUMS**

#### **Choice Plus PPO Plan**

#### Exempt Employees—Per monthly pay period premiums

SALARY	RANGE	EMPLOYEE	SPOUSE	CHILDREN	FAMILY
At or Belov	w \$39,400	\$103.30	\$331.35	\$227.10	\$443.95
Above	\$39,400	\$137.70	\$467.72	\$287.66	\$626.77
Above	\$59,020	\$172.10	\$623.61	\$378.50	\$835.67
Above	\$90,230	\$206.59	\$740.62	\$484.48	\$992.35
Above	\$175,100	\$327.04	\$1,071.87	\$681.31	\$1436.29

#### Non-Exempt Employees—Per biweekly pay period premiums

SALARY RANGE	<b>EMPLOYEE</b>	SPOUSE	CHILDREN	FAMILY
At or Below \$39,400	\$47.68	\$152.93	\$104.82	\$204.90
Above \$39,400	\$63.55	\$215.87	\$132.77	

# High Deduc Yble Health Plan

#### **Exempt Employees—Per monthly pay period premiums**

SALAR	Y RANGE	EMPLOYEE	SPOUSE	CHILDREN	FAMILY
At or Belo	w \$39,400	\$95.03	\$304.85	\$208.93	\$408.43
Above	\$39,400	\$126.68	\$430.30	\$264.65	\$576.64
Above	\$59,020	\$158.33	\$573.73	\$348.22	\$768.82
Above	\$90,230	\$190.07	\$681.37	\$445.72	\$912.96
Above	\$175,100	\$300.88	\$986.13	\$626.80	\$1,321.39

Non-Exempt Employees—Per biweekly pay period premiums

# **HEALTH PLAN PREMIUMS**

## **Network PPO Core**

#### **Exempt Employees—Per monthly pay period premiums**

SALAR	Y RANGE	EMPLOYEE	SPOUSE	CHILDREN	FAMILY
At or Belo	w \$39,400	\$96.99	\$311.13	\$213.24	\$416.85
Above	\$39,400	\$129.30	\$439.17	\$270.11	\$588.52
Above	\$59,020	\$161.60	\$585.55	\$355.40	\$784.67
Above	\$90,230	\$193.98	\$695.42	\$454.91	\$931.78
Above	\$175,100	\$307.08	\$1006.45	\$639.72	\$1,348.63

## Non-Exempt Employees—Per biweekly pay period premiums

SALARY I	RANGE	EMPLOYEE	SPOUSE	CHILDREN	FAMILY
At or Below	\$39,400	\$44.77	\$143.60	\$98.42	\$192.39
Above	\$39,400	\$59.67	\$202.69	\$124.66	\$271.63
Above	\$59,020	\$74.58	\$270.26	\$164.03	\$362.15

## Is a health savings account right for me?

 $Like any health care op \ on, an HSA has advantage \verb+sand disadvantage \verb+sAsyouweighyour op \ ons, think about your budget and what health care you are likely to need in the next$ 

Delta Dental PPO Plus Premier plan includes the following feature:

Enhanced benebt program o ersaddi

## DENTAL PLANIBSMED FEATURES

#### **Delta Dental HMO**

Similarto a medicalHMOplan, Delta DentalHMOplan is a dental managed careplan (DHMO) with its own network of den sts. Underthis plan only one panel one

## **VISION PLAN BENEFITS AND FEATURES**

BeneÞt	Descrip Yon	Copay	Frequency
Well/Vision Exam	Focusses n your eyesand overall wellness	\$10	Every12 months
Prescrip Yon Glasses			
Frame	\$150allowancefor a wide selec on of frames \$170allowancefor featuredframe brands 20%savingson the amount over your allowance \$80Allowanceat Costco	Includedin Prescrip on Glasses	Every12 months
Lenses	Singlevision, lined bifocal, and lined trifocal lenses Polycarbonateenses for dependent children	Includedin Prescrip on Glasses	Every12 months
Lens Enhancements	Scratch-resistantoa ng Standardprogressiveenses Premiumprogressiveenses Customprogressiveenses Averagesavingsof 20-50%on other lensenhancements	\$0 \$55 \$95-\$105 \$150-\$175	Every12 months
Contacts (instead of glasses)	\$130allowance for contacts; copaydoes not apply Contact lense exam(fi ng and evalua on)	Upto \$60	Every12 months
Extra Savings	Glasses and Sunglasses Extra\$20to spendon featured frame brands. 20%savingson addi onal glasses		

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#### RESOURCES FOR MEDICAL PLAN PARTICIPANTS

Register on www.myuhc.com with your UHC member ID (or SSN) and College's group plan (#705611) for on-line access to your health plan bene to.

Through myUHC.com, you can:

Locatenetwork providers anywherein the United States.

Orderaddi onal ID cardsand/or print a temporary ID card.

Reviewandmanageyour claims.

Usethe treatment costes mator to es mate or compareprovider fees for medical services in your area.

Setup and managea personal health record for you and your family members.

myHealthcare Cost Es Ymator: Throughthis online tool you can learn more about a procedure and compare treatment op ons, selecta quality provider for a procedure, quickly es mate out-of-pocket costs for specific procedures and locate providers based on geographics earch criteria.

Health4Me Mobile App: Downloadthe free Health4MeMobile App to accessyour benefits and claims and locatenetwork providers while you are on the go.

Health Pregnancy Program: If you are star ngor addingto your family, enroll in the HealthyPregnancy Programfor 24/7 accesso nurses, and a phone call from a care coordinator during your pregnancy about four weeksa er your baby is born to see how things are going and answerques on syou may have.

#### EMPLOYEE ASSISTANCE PROGRAM

#### Help When You Need It

The Employee Assistance Program (EAP)s a free, confiden all program to assist faculty, sta and family members in successfully dealing with the challenges and demands of daily living.

This valuable benefit is available to all faculty and sta and their family members. Call/textPerspecves EAP at

# **REGULATORY BENEFITS NOTICES**

 $Lake Forest College is \ required to \ provide you with \ important \ informa \ on \ regarding eligibility \ and$