

Ohio Wesleyan University



WELCOME TO OPEN ENROLLMENT 2022 Benefits Guide



CHOOSE THE BEST BENEFITS FOR YOU AND YOUR FAMILY.

Ohio Wesleyan strives to provide you and your family with a comprehensive and valuable benefits package. We want to make sure you’re getting the most out of our benefits—that’s why we’ve put together this Open Enrollment Guide.

Open enrollment is the time of year when you can make changes to your elected benefits. This guide outlines all the different benefit options, so you can identify which ones are best for you and your family.

Elections you make during open enrollment will become effective on July 1, 2022. If you have questions regarding the benefits in this guide, please contact Elizabeth Foos at ekfoos@owu.edu.

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2022 BENEFIT HIGHLIGHTS

Ohio Wesleyan continues to work hard to keep benefits stable and maintain minimal disruption each year. The 2022 benefits plan offering will provide plan enhancements by moving vision care to EyeMed for a better network and lower cost to you and moving to an enhanced Guardian Life insurance plan. New for 2022, we are offering an Identity Theft protection plan as well as a Pet Insurance option!

There are several resources throughout this guide that compliment your core benefits. These tools and resources are free to you and can enhance your benefit experience.

1. Apta Care Coordinators
2. Teladoc
3. Healthcare Bluebook
4. OneRx
5. RetireMEDiQ

BENEFIT	CARRIER	WEBSITE / EMAIL	PHONE
MEDICAL	Apta Health - Care Coordinators (Powered by Quantum) Using Aetna network	www.OhioWesleyan.myaptahealth.com	1-866-274-9478
PHARMACY	Magellan Rx	www.magellanrx.com	1-800-424-6817
DENTAL	Anthem	www.anthem.com	1-888-231-5046
VISION	EyeMed	www.eyemed.com	1-866-939-3633
LIFE & DISABILITY	Guardian	Guardianlife.com	1-888-482-7342
HEALTHCARE BLUEBOOK	Healthcare Pricing Tool	pricefinder@healthcarebluebook.com	1-800-341-0504
TELADOC	Video Doctor Consultation	www.Teladoc.com	1-800-835-2362
ID Theft	Allstate	myaip.com/owu	1-800-789-2720
Pet Insurance	MetLife	www.metlife.com/getpetquote	1-800 GET-MET8

ELIGIBILITY

Who is eligible?

If you're a full-time employee at Ohio Wesleyan University, you're eligible to enroll in the benefits outlined in this guide. In addition, you can enroll your eligible dependents. Eligible dependents include: your spouse and if under the age of 26, your natural child, adopted child, foster child, stepchild, or grandchild (if court-ordered custody); or a disabled dependent.

How to enroll

The first step is to review your current benefits. Verify all your personal information (address, etc.) and make any necessary changes.

If you want to make changes to your 2022-2023 benefit enrollments or participate in FSA Medical or dependent care:

1. Log into ADP/Myself/Benefit/Enrollments
2. Access ADP through OWU's Single Sign On (SSO) process by using this link: <https://www.owu.edu/adp>

OR

Access through ADP Portal Directly with your ADP login credentials:

<https://workforcenow.adp.com/workforcenow/login.html>

If you do not plan on changing any of your benefit enrollments from last year, then you do not have to re-enroll in ADP. However, if you wish to continue your FSA Flex Medical or Dependent Care FSA contributions, then you must submit new FSA elections in ADP.

When to enroll

Open enrollment begins on **May 4th and ends May 25th**. The benefits you choose during open enrollment will become effective on July 1st, 2022.

How to make changes

Unless you experience a life-changing qualifying event, you cannot make changes to your benefits until the next open enrollment period. Qualifying events include:

- Marriage, divorce, or legal separation
- Birth or adoption of a child
- Change in child's dependent status
- Death of a spouse, child or other qualified dependent
- Change in employment status or a change in coverage under another employer-sponsored plan

If you experience a qualifying event, you must contact HR within 30 days of the event.



HEALTH INSURANCE

The medical plans will continue to be offered through Meritain utilizing the Aetna network with support from the Apta Care Coordinators. To find Aetna network providers, see page 18 or connect with your Apta Care Coordination team.

POS Plan		
	Network	Non-Network
Deductible	\$1,000 Ind / \$2,000 Fam	\$2,000 Ind / \$4,000 Fam
Deductible Type*	Embedded	Embedded
Co-insurance	10%	30%
Out-of-pocket w/ Deductible	\$3,500 Ind / \$7,000 Fam	\$7,000 Ind / \$14,000 Fam
Office Visits	Primary Care \$20 Co-pay Specialist w/ Referral \$40 Co-pay Specialist w/out Referral \$80 Co-pay	Deductible then 30% Co-Insurance
Preventive Care	Covered in Full	Deductible then 30% Co-Insurance
Telehealth Services	0%, deductible waived	0%, deductible waived
Professional Services	Deductible then 10% Co-Insurance	Deductible then 30% Co-Insurance
Mental Health Services	Deductible then 10% Co-Insurance	Deductible then 30% Co-Insurance
Inpatient Hospital	Deductible then 10% Co-Insurance	Deductible then 30% Co-Insurance
Outpatient Facility	Deductible then 10% Co-Insurance	Deductible then 30% Co-Insurance
Emergency Room	\$250 Co-pay then 10% Co-Insurance	\$250 Co-pay then 10% Co-Insurance
Urgent Care	\$75 Co-pay	Deductible then 30% Co-Insurance
Prescription Drugs Tier 1: Generic Tier 2: Preferred Brand Tier 3: Non-preferred Brand Tier 4: Specialty	Tier 1: \$10 Tier 2: \$35 Tier 3: \$70 Tier 4: 25% up to \$250 max.	Not covered
Mail Order (90 Day Mail Order) Tier 1: Generic Tier 2: Preferred Brand Tier 3: Non-preferred Brand Tier 4: Specialty	Tier 1: \$10 Tier 2: \$70 Tier 3: \$140 Tier 4: Not covered	Not covered
Benefit Period	Calendar Year	Calendar Year

HEALTH INSURANCE

HSA Plan		
	Network	Non-Network
Deductible	\$3,000 Ind / \$6,000 Fam	\$6,000 Ind / \$12,000 Fam
Deductible Type*	Embedded	Non-Embedded
Co-insurance	20%	40%
Out-of-pocket w/ Deductible	\$4,000 Ind / \$8,000 Fam	\$8,000 Ind / \$16,000 Fam
Office Visits	Deductible then 20% Co-Insurance	Deductible then 40% Co-Insurance
Preventive Care	Covered in Full	Deductible then 40% Co-Insurance
Telehealth Services	Deductible then 20% Co-Insurance	Deductible then 40% Co-Insurance
Professional Services	Deductible then 20% Co-Insurance	Deductible then 40% Co-Insurance
Mental Health Services	Deductible then 20% Co-Insurance	Deductible then 40% Co-Insurance
Inpatient Hospital	Deductible then 20% Co-Insurance	Deductible then 40% Co-Insurance
Outpatient Facility	Deductible then 20% Co-Insurance	Deductible then 40% Co-Insurance
Emergency Room	Deductible then 20% Co-Insurance	Deductible then 20% Co-Insurance
Urgent Care	Deductible then 20% Co-Insurance	Deductible then 40% Co-Insurance
Prescription Drugs Tier 1: Generic Tier 2: Preferred Brand Tier 3: Non-preferred Brand Tier 4: Specialty	Tier 1: \$10 after deductible Tier 2: \$35 after deductible Tier 3: \$70 after deductible Tier 4: 25% up to \$250 max. after deductible	Not covered
Mail Order (90 Day Mail Order) Tier 1: Generic Tier 2: Preferred Brand Tier 3: Non-preferred Brand Tier 4: Specialty	Deductible then 20% Co-Insurance	Not covered
Benefit Period	Calendar Year	Calendar Year

***Embedded deductible:** No one family member may contribute more than the individual deductible amount to the family deductible. Once the single deductible has been satisfied, benefits for that member are payable subject to co-insurance up to the individual out-of-pocket max. Once the family deductible has been satisfied, benefits for the family are payable subject to co-insurance and family out-of-pocket max.

COMPARE MEDICAL PLAN COST

Choice of plan for those Employees who accepted employment offer prior to 7/1/2020.

Monthly Rates effective July 1, 2022		
Tier	POS Plan	HSA Plan
Under \$35,999		
Employee Only	\$96.42	\$47.98
Emp + Spouse	\$336.82	\$169.18
Emp + Child(ren)	\$296.99	\$149.21
Family	\$472.21	\$237.06
\$36,000- \$59,999		
Employee Only	\$143.90	\$70.34
Emp + Spouse	\$435.07	\$215.58
Emp + Child(ren)	\$383.62	\$190.14
Family	\$609.96	\$302.08
\$60,000- \$89,999		
Employee Only	\$189.15	\$90.80
Emp + Spouse	\$532.96	\$254.42
Emp + Child(ren)	\$469.94	\$224.40
Family	\$747.21	\$356.50
\$90,000+		
Employee Only	\$235.52	\$112.71
Emp + Spouse	\$631.39	\$300.97
Emp + Child(ren)	\$556.73	\$265.45
Family	\$885.21	\$421.73

DENTAL INSURANCE

In addition to protecting your smile, dental insurance helps pay for dental care and usually includes regular checkups, cleanings, and X-rays. Several studies suggest that oral diseases, such as periodontitis (gum disease), can affect other areas of your body—including your heart. Receiving regular dental care can protect you and your family from the high cost of dental disease and surgery.

Ohio Wesleyan is happy to say that there is a decrease of cost to your dental benefits for 2022. The following chart outlines the dental benefits offered.

TYPE OF SERVICE	Dental Plan	
	Low Plan	High Plan
Network		
Preventive Services	Exams, cleanings, X-rays—Plan pays 100%	Exams, cleanings, X-rays—Plan pays 100%
Deductible	Applies to basic and major services only— \$50 Ind / \$150 Fam	Applies to basic and major services only— \$50 Ind / \$150 Fam
Basic Services	Fillings, simple extractions—Plan pays 80%	Fillings, simple extractions, oral surgery— Plan pays 90%
Major Services	Endodontics, periodontics, crowns, oral surgery—Plan pay 50%	Endodontics, periodontics, crowns—Plan pay 60%
Annual Maximum	\$1,000	\$1,500
Orthodontic Services *up to age 19	Not covered	Plan pay 50%
Orthodontic Lifetime Maximum	Not covered	\$1,000
Monthly Payroll Deductions	Low Plan Employee only—\$25.95 Employee & 1—\$50.89 Family—\$83.13	High Plan Employee only—\$36.27 Employee & 1—\$71.86 Family—\$116.84

VISION INSURANCE

Driving to work, reading a news article, and watching TV are all activities you likely perform every day. Your ability to do all these activities depends on your vision and eye health. Vision insurance can help you maintain your vision as well as detect various health problems.

Ohio Wesleyan's vision insurance entitles you to specific eye care benefits. Coverage will be offered through EyeMed with a larger network and decreased rates! The policy covers routine eye exams and other procedures, and provides specified dollar amounts or discounts for the purchase of eyeglasses and contact lenses.

If you seek the services of an **in-network provider** listed in the Insight Network (Page 11), your benefits for the Core Plan include:

- Routine vision exams for a \$20 copay
- Exam every 12 months and frames or lenses every 24 months
- \$130 allowance on contact lenses and frames and \$180 allowance for PLUS providers (with 20% off any balance for frames)
- Laser correction surgery will be offered with a discount (please consult with your doctor)

Your benefits for the Buy-Up include:

- Routine vision exams for a \$10 copay
- Exam every 12 months and frames or lenses every 12 months
- \$140 allowance on contact lenses and frames and \$190 allowance for PLUS providers (with 20% off any balance for frames)
- Laser correction surgery will be offered with a discount (please consult with your doctor)

Core Plan:

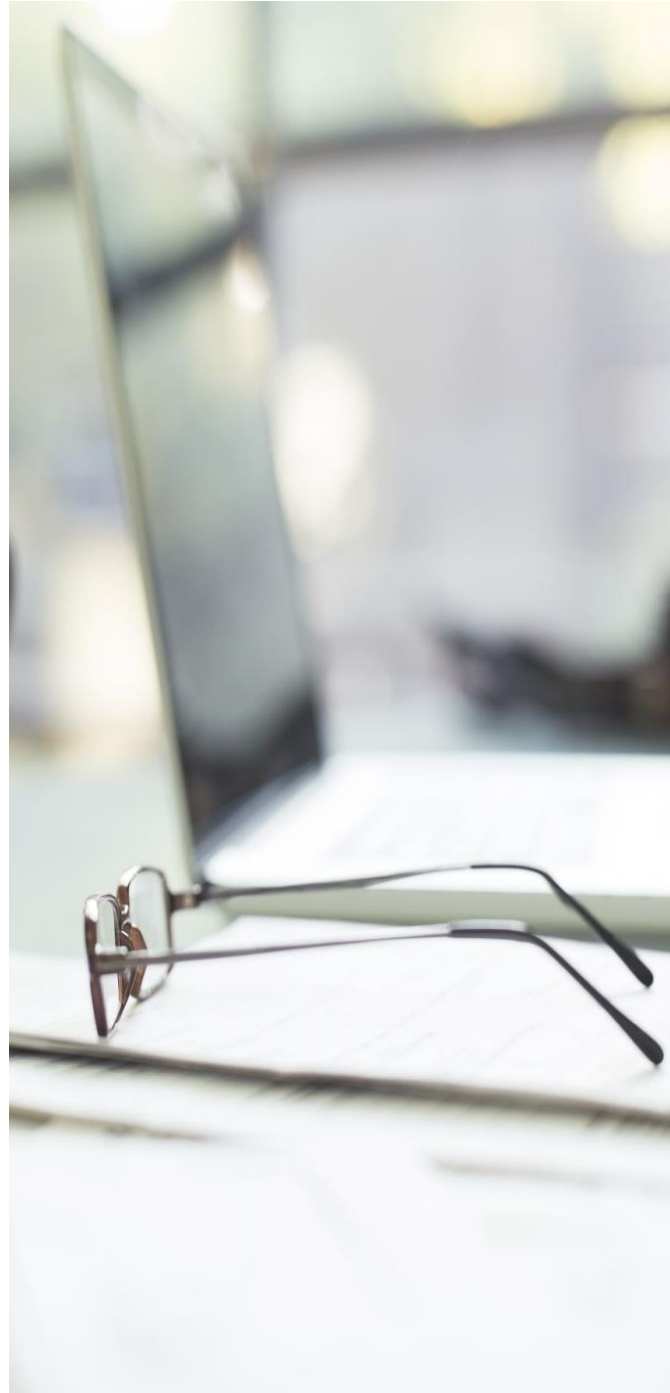
Employee Only: \$4.32

Employee & Dependents: \$12.21

Buy-Up Plan:

Employee Only: \$5.74

Employee & Dependents: \$16.22



EXPERIENCE MORE: EVERYDAY ACCESS

HOW TO: see an easy road ahead

USING YOUR EYEMED BENEFITS

It's official – you received your EyeMed Welcome Kit. Time to get the eyewear you love! But how does it work? Even if you're a vision benefits rookie, the process is a snap. Tailor-made for paperwork-phobes and freedom fans.



1. KNOW THE BENEFITS

Your Welcome Packet spells out all the great stuff that's covered. All the savings opportunities. All the choices you have. It's a pretty fun read.



2. CHOOSE A DOC

You're probably surrounded by in-network doctors: thousands of independent providers, popular retail stores and even online options. Find your ideal fit on eyemed.com or on the EyeMed Members App.



3. SET A DATE

Just call your eye doctor for an appointment. Even better, some let you schedule online with our Provider Locator. If you need weekend or evening hours, you'll find plenty of those, too.



4. COME ON IN

As an EyeMed member, it's easy to get your eye exam and get on with your day. No claim to file. No hassles. We take it from here.



5. FIND YOUR PERFECTION

Have fun picking out your favorite frames or contacts. Browse loads of designer brands; you decide which price point works best for you. With EyeMed, there's more in the store to adore.

* At select in-network providers

SEE THE GOOD STUFF

Register on eyemed.com or grab the member app (App Store or Google Play) now



LENSCRAFTERS

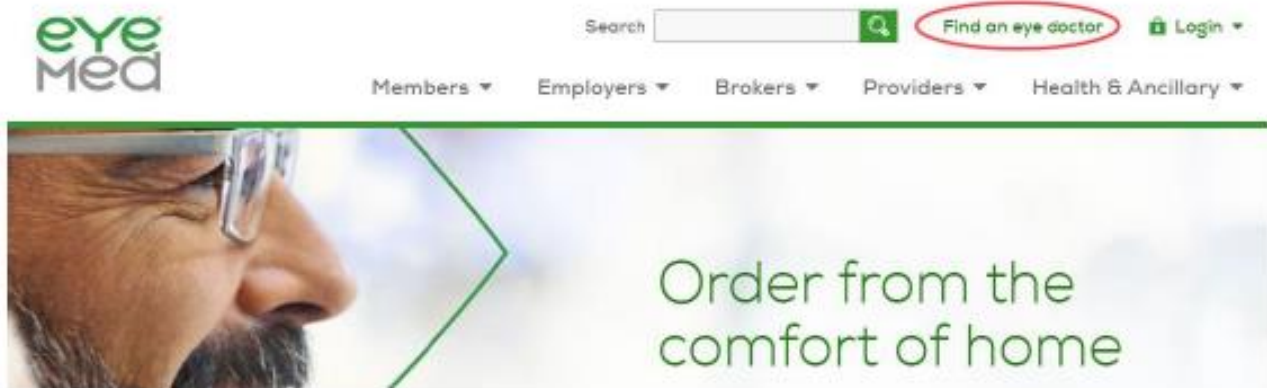


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HOW TO LOCATE AN EYEMED PROVIDER & LOCATE PLUS PROVIDERS

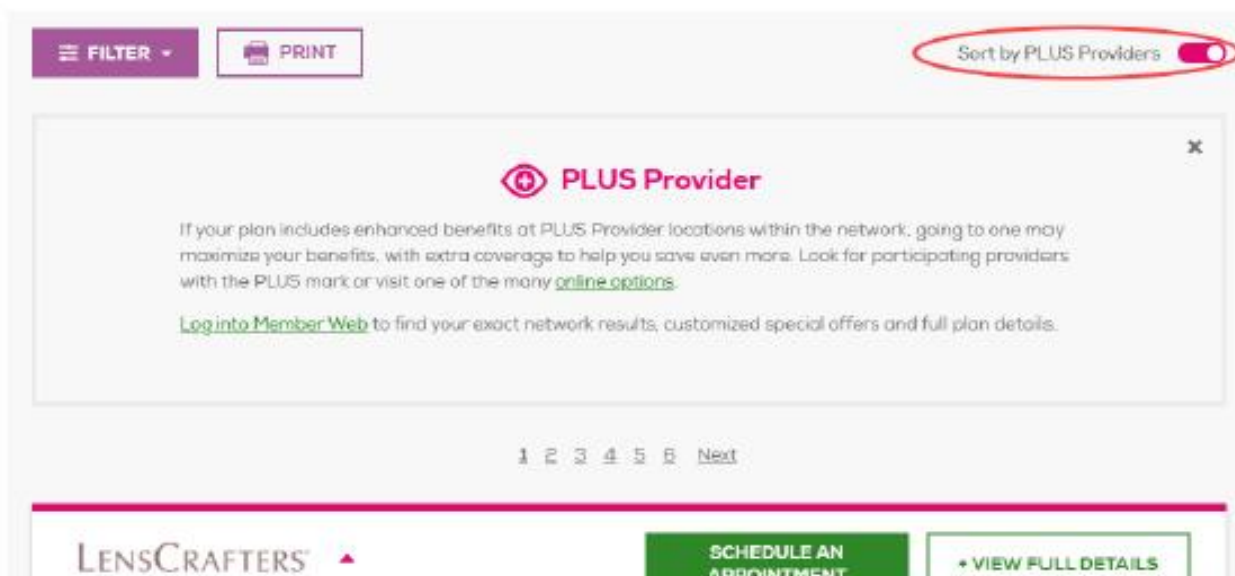
1. GO TO EYEMED.COM
2. CLICK "FIND AN EYE DOCTOR" AT THE TOP OF THE PAGE



3. ENTER THE "INSIGHT" NETWORK
4. ENTER THE ZIP CODE



5. TO FIND A PLUS PROVIDER, LOOK FOR PROVIDERS HIGHLIGHTED IN PINK OR USE SLIDER TO SORT BY PLUS PROVIDERS



FLEXIBLE SPENDING ACCOUNTS (for POS Members)

Paying for health care can be stressful. That's why Ohio Wesleyan offers an employer-sponsored flexible spending account (FSA) which can be paired with the POS plan.

WHAT ARE THE BENEFITS OF AN FSA?

There are a variety of different benefits of using an FSA, including the following:

- **It saves you money.** Allows you to put aside money tax-free that can be used for qualified medical expenses.
- **It's a tax-saver.** Since your taxable income is decreased by your contributions, you'll pay less in taxes.
- **It is flexible.** You can use your FSA funds at any time, even if it's the beginning of the year.
- **It has a friendly app.** Download the app to your smart phone to manage your funds.

You cannot stockpile money in your FSA. **If you do not use it, you lose it with the exception of the \$500 carry-over.** You should only contribute the amount of money you expect to pay out of pocket during the July 1st through June 30th benefit year.

If you were previously enrolled in an FSA, you will keep the same card, and HRPro will reload it on July 1st. Make sure to keep all receipts for your records and in case of an IRS inquiry.

You can check your current card balance at hrpro.biz or hrpro.navigatorsuite.com/login, or using the HRPro Mobile App.

WHAT IS A DEPENDENT CARE FSA?

Dependent Care FSAs allow you to contribute pre-tax dollars to qualified dependent care. The maximum amount you may contribute each year is \$5,000 (or \$2,500 if married and filing separately).

Can I have a health FSA if I am enrolled on the HSA plan?

If you are enrolled on the HSA plan, you cannot contribute to a health FSA account, but you can use any funds you have previously accumulated by June 30th.

<i>Annual FSA Contribution Maximum</i>	\$2,850
<i>Annual Dependent Care FSA Contribution Maximum</i>	\$5,000

HEALTH SAVINGS ACCOUNTS

Health savings accounts (HSAs) are a great way to save money and budget for qualified medical expenses. HSAs are tax-advantaged savings accounts that accompany high deductible health plans. HDHPs offer lower monthly premiums in exchange for a higher deductible (the amount you pay before insurance kicks in).

WHAT ARE THE BENEFITS OF AN HSA?

There are many benefits of using an HSA, including the following:

- **It is portable.** The money in your HSA is carried over from year to year and is yours to keep, even if you leave the company.
- **It is a tax-saver**—HSA contributions are made with pre-tax dollars. Since your taxable income is decreased by your contributions, you'll pay less in taxes.

The maximum amount that you can contribute to an HSA in 2022 is \$3,650 for individual coverage and \$7,300 for family coverage.

Additionally, if you are age 55 or older, you may make an additional "catch-up" contribution of \$1,000. You may change your contribution amount at any time throughout the year as long as you don't exceed the annual maximum.

WHO IS ELIGIBLE FOR AN HSA?

- Covered by a High Deductible Health Plan
- NOT enrolled in first dollar coverage (PPO)
- NOT enrolled in Medicare, Medicaid, Tricare
- NOT claimed as a dependent on someone else's tax return

Employer HSA Contribution

Employee Only: \$1,000

Family: \$2,000

WHAT CAN HSA DOLLARS BE USED FOR?

HSA funds can be used tax-free for members of the family who meet the IRS's definition of a "tax dependent".

Distributions for non-qualified expenses are taxable income plus a 20% excise tax. You can use HSA dollars for qualified medical, dental, and vision expenses. Once you turn 65 years old, HSA funds can be transferred to retirement savings account and used on any expenses. For more information check out www.irs.gov/pub/irs-pdf/p502.pdf.

MEET YOUR APTA CARE COORDINATORS

Care Coordinators are an expert team of nurses, patient services representatives and benefits specialists who are ready to help you before, during and after any health event. Think of Care Coordinators as your personal healthcare team. They fight hard to help you save money and make sure you get the best possible care for you and your family.

Turn to your Care Coordinators for help with:

- ID Cards
- Claims, billing and benefit questions
- Finding in-network providers
- Nurse coaching to help you stay or get healthy
- Reducing out-of-pocket costs
- Anything that can make the healthcare process easier for you



CARE COORDINATORS
BY QUANTUM HEALTH

<https://OhioWesleyan.myaptahealth.com>
1-866-274-9478

CARE COORDINATORS ARE MOBILE

Download the **MyQHealth** mobile app that lets you:

- Find in-network providers
- Access your ID card
- Check claims information
- Schedule a call with a Care Coordinator
- And so much more





COORDINATE YOUR CARE THROUGH YOUR PRIMARY CARE PHYSICIAN

Obtain a referral from your PCP before seeing a specialist:

- Saves money on member out-of-pocket costs
- Helps avoid visits to the wrong specialist
- Helps avoid referrals to an out-of-network specialist
- Get in to see specialist faster
- Get alerts for benefits not fully covered
- All referrals obtained are valid for 12 months.
- You have a 60 day grace period, through 08/31/2019, to obtain all necessary referrals before a reduction in benefits will apply.
- The PCP must provide the referral to the Care Coordinators.

**61% OF THE TIME
MEMBERS SELF-REFER
TO THE WRONG
SPECIALIST**

PRE-CERTIFICATION

Before you receive certain medical services or procedures, your health plan requires a doctor to confirm that these requested services are considered medically necessary under your plan. This verification process is called "pre-certification." Even if some services or therapies are performed in your doctor's office, you may still need a pre-certification. Pre-certification requests must be submitted by your physician directly to the Apta Care Coordinators.

SERVICES REQUIRING PRE-CERTIFICATION

Inpatient Hospitalizations & Skilled Nursing Facility Admissions	Home Health Care and Services	Oncology Care & Services (chemotherapy, radiation therapy, etc.)	MRI's, MRA's and PET Scans
Hospice Care	Occupational & Physical Therapy	Speech Therapy	Genetic Testing
Out-Patient Surgeries (includes Colonoscopies)	Durable Medical Equipment (DME) over \$500	Dialysis	Transplants – Organ and Bone Marrow



Talk to a anytime

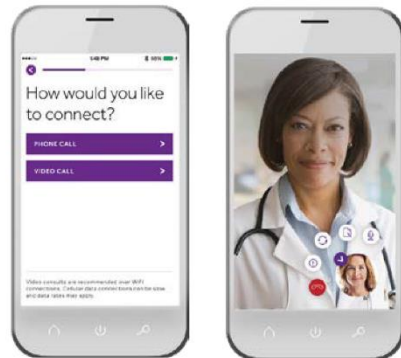
Teladoc is one of the nation’s most established providers of telehealth services. Our national network of U.S. board-certified doctors is standing by to provide quality healthcare for you and your family, 24/7.

From the information you provide, Teladoc can diagnose many illnesses and injuries, order prescriptions, and know immediately if you need to be referred to in-person emergency care.

Benefits:

- Consults with U.S. Board-Certified doctors via phone or video conference 24/7
- Access to a doctor anytime, anywhere – from home, work, or on the road
- Diagnosis and treatment for many common, non-emergency medical conditions
- A way to avoid unnecessary visits to the ER and long waits for doctor appointments
- Prescriptions called-in when appropriate

Talk to a doctor anytime.



POS PLAN: \$0 co-pay
HSA PLAN: deductible then 20%

Downloading the App is quick and easy!

 [Teladoc.com/mobile](https://www.teladoc.com/mobile) or visit your app store.

 1-800-Teladoc

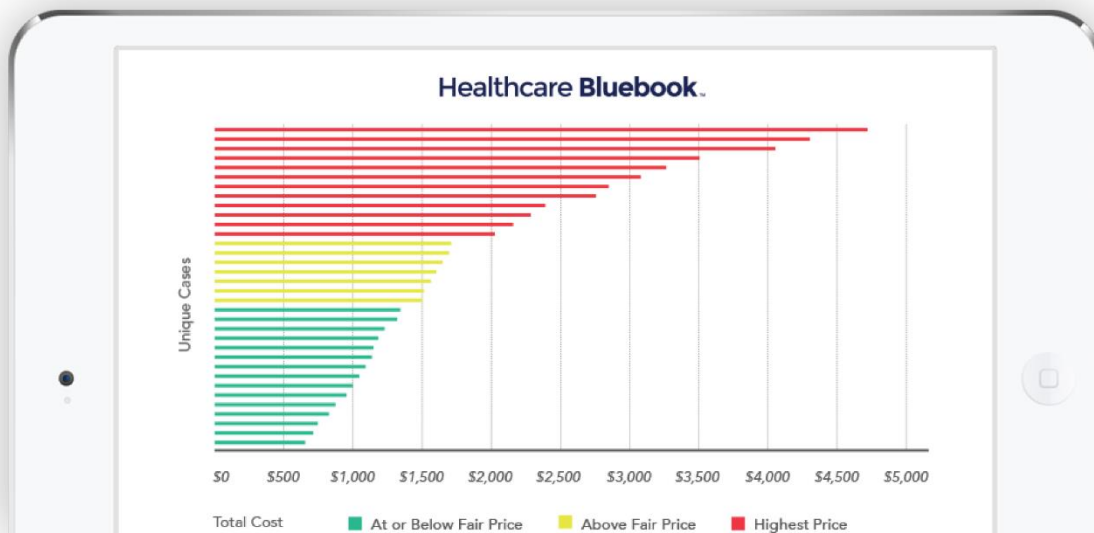


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Healthcare Blue Book is an online pricing tool which enables you to find the best prices for the healthcare services you may need. With Healthcare Blue Book, you can shop for care so that you get the most affordable care available in your area, from high quality providers.

COMPARE PROVIDERS • SHOP FOR CARE • SAVE MONEY

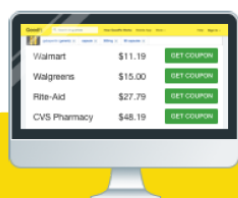


Be sure to visit [www. OhioWesleyan.myaptahealth.com](http://www.OhioWesleyan.myaptahealth.com) to look up your access code. You'll need it when downloading and setting up your app.



Red = Among the most expensive providers
Yellow = Provider somewhat above the Fair Price
Green = Provider at or below the Fair Price

Drug prices vary widely between pharmacies.
GoodRx finds the lowest prices and discounts.



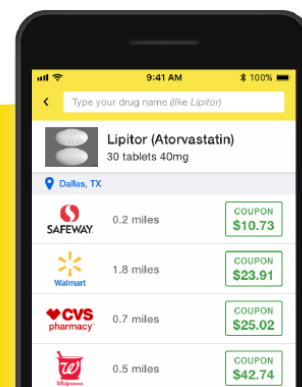
Compare prices
GoodRx collects prices and discounts from over 70,000 U.S. pharmacies



Print free coupons
Or send coupons to your phone by email or text message



Save up to 80%
Show the coupon to your pharmacist for massive savings on your meds



GoodRx





Aetna Choice POS II (Open Access)

It's Easy to Find Doctors and Hospitals in Your Network

When you and your family need care, you can look for doctors and hospitals in the **Aetna Choice POS II (Open Access)** network. It's easy when you use the online directory from Aetna. With up-to-date listings, you can search for providers by name, specialty, gender, hospital affiliations and more. You will pay less if you use a provider in the plan's network vs. if you use an out-of-network provider. Check with your provider before you get services.

Find Aetna Providers Online in Just a Few Quick Steps

1. Visit <http://www.aetna.com/docfind/custom/mymeritain/>.
2. Key in the zip, city, county or state of the desired geographical area in the Enter location here field. Click Search.
3. Key in **Aetna Choice POS II (Open Access)** under Select a Plan or you can select **Aetna Choice POS II (Open Access)** from the list of plans. Click Continue.
4. There are two options available to search for providers. The guided flow search uses some of our most commonly searched terms and easily organizes them for our users to find. To use the guided search flow chose and click on one of the categories under Find what you need by category.
Or
5. Use the search box which includes type-ahead suggestions and will present provider, facility, specialty, and condition search options based on what is entered. These suggested options will present an exact match or relevant providers. To use the search box, key in the type of provider, provider name, specialty or condition in the search field under What do you want to search for near (will display your chosen location).
6. Choose your provider from the list of providers displayed on the results screen. You can learn more about each by clicking on the provider's name.
7. Narrow your search results by using the Filter & Sort option. Choices include Gender, Languages, Hospital Affiliations, Office Detail, Individual Practice Association Affiliations, Group Affiliations, and Provider Type.

Care Coordinators

Turn to your Care Coordinators for help in finding in-network providers by calling 866-274-9478 or go to <https://OhioWesleyan.myaptahealth.com>.



MAGELLAN RX MANAGEMENT

Understanding Your Prescription Benefit Program

Magellan Rx Management is dedicated to giving you the best information and resources to help you make better healthcare decisions to lead more healthy, vibrant lives.

90 Day Supply of Your Medications By Mail

If you take maintenance medications for long-term conditions like arthritis, asthma, diabetes, high blood pressure or high cholesterol you could save with Magellan Rx Home, Magellan Rx Management's mail service pharmacy.

- Save money: Depending on the plan you choose, you could get up to a 90-day supply of your medication for less money than three separate fills and standard shipping is free.
- Save time: Refill your medication just once every three months easily online or by phone. That means no more drive time or waiting at the pharmacy.
- Peace of mind: Your medication is mailed quickly and securely. Registered pharmacists check all orders and are available for help 24/7.

Understanding Step Therapy

From time to time, your physician may prescribe a medication that requires you to first try another drug before your prescription benefits will pay for the prescribed drug. This process is referred to as Step Therapy and it is an approach to help control the risks and costs associated with prescription drug use.

If a drug has a high potential to be over-prescribed or taken for a non-FDA approved use, a Step Therapy edit may be needed. For example; in the case of Vimovo (a COX-2 drug), clinical research indicates that this medication should be reserved for patients at high risk for gastro-intestinal (GI) track bleeding or distress.

Take Advantage of Additional Over-The-Counter (OTC) Benefits

- Some medications previously only available by prescription (e.g., Claritin®, Prilosec®, and Zyrtec®) are now available over-the-counter at a \$0 Copay if your PCP writes OTC on your prescription.
- Ask your doctor if any OTC alternatives are available to effectively treat your condition. Switching to an OTC product could save both you and your plan money.

Frequently Asked Questions

When should I use a retail pharmacy? You should use your local retail pharmacy for the first 30-day prescription you get from your doctor as well as prescriptions received for an acute condition like an infection.

How do I order my specialty medication?

Step 1: Have your doctor e-prescribe Magellan Rx Pharmacy - Specialty or fax your prescription to us at 866-364-2673. Make sure the form includes your contact information.

Step 2: We will contact you to get important information and schedule your first delivery.

Step 3: Your prescription will arrive when and where you've requested.

Questions? Please visit your Apta Health Care Coordinators at: OhioWesleyan.myaptahealth.com (866) 274-9478



Think OTC for your Ulcer and Allergy Medications

A smarter way to think. An easier way to save.

Brand name drugs like Nexium®, Prevacid®, Prilosec®, Zyrtec®, Claritin® and Zantac® that used to only be available with a prescription are now available over-the-counter (OTC). If the OTC version is available in the same strength as the prescription drug you're currently taking, then the OTC version could provide additional savings opportunities for you. As a result, your plan has elected to cover select OTC medications at a low co-payment (after deductible, if applicable). Covered medications include non-sedating antihistamines (NSAs) and ulcer/heartburn treatments packaged as name brands, store brands or generics as long as they are prescribed by your physician and processed using your prescription benefit card at your local pharmacy.

Talk to your physician today to find out if an OTC product is right for you.

Get Started Today



To take advantage of this low co-pay OTC program, please follow these 3 easy steps once you and your doctor agree that an OTC product is right for you:

1. Ask your physician to write (or telephone in) a prescription for the specific OTC product.
 - Make sure your physician writes "OTC" on the prescription.
2. Take the prescription to your local pharmacy (not available through mail service) and ensure that your pharmacist:
 - Uses your prescription benefit card to fill the OTC prescription.
 - Fills the prescription just like any other prescription medicine, making sure to include your doctor's name and instructions on the label.
 - Charges you a low co-pay as a result of this program (after deductible, if applicable).
3. Make sure to follow your doctor's instructions for use when taking the medication.

It doesn't make any sense to pay more. Talk to your physician to find out if an OTC product is right for you and start saving today!

Examples of Covered OTC Medications

- ALAVERT
- ALLEGRA
- ALLEGRA-D
- AXID AR
- CETIRIZINE
- CIMETIDINE
- CLARITIN
- CLARITIN-D
- DIMETAPP ND
- FAMOTIDINE
- FEXOFENADINE
- FEXOFENADINE-PSEUDOEPHEDRINE
- LORATADINE
- NEXIUM 24HR OTC
- OMEPRAZOLE
- PEPCID COMPLETE
- PEPCID AC
- PREVACID 24 HR CAP
- PRILLOSEC OTC
- RANITIDINE
- TAGAMET HB
- TAVIST ND
- TRIAMINIC TAB
- XYZAL OTC
- ZANTAC
- ZEGERID OTC
- ZYRTEC
- ZYRTEC-D



National and Regional Retail Pharmacy Listing

Below is a listing of national and regional retail pharmacies that participate in Magellan Rx Management’s broadest commercial pharmacy network. Many of the independent pharmacies across the United States also participate in our network. This list is subject to change. To determine if a pharmacy is in our network, please visit magellanrx.com.

Remember: Always show your medical ID card or drug card when you purchase a prescription. This saves you the time and trouble of filing a paper claim.

-
- | | | | |
|--------------------------------|-------------------------|---------------------------|-----------------------|
| Albertsons | Food City Pharmacy | Knight Drugs | Save Mart Supermarket |
| Acme Pharmacy | Food Lion Pharmacy | Kroger Pharmacy | Sav-On Drugs |
| Aurora Pharmacy | Fred Meyer Pharmacy | Long’s Drugs | Schnucks |
| Bartell Drug | Fred’s Pharmacy | Marsh Drugs | Shopko Pharmacy |
| Bashas’ | Fresh Market Pharmacy | Medicap Pharmacy | Shop N Save Pharmacy |
| BI-LO Pharmacy | Fruth Pharmacy | Medicine Shoppe Pharmacy | Shoppers Pharmacy |
| Bi-Mart | Fry’s Food and Drug | Meijer Pharmacy | Shoprite Pharmacy |
| Brookshire Brothers Pharmacy | Giant Eagle Pharmacy | Navarro Discount Pharmacy | Stop & Shop Pharmacy |
| Brookshire Grocery City Market | Giant Pharmacy | Oscos Drug | Thrifty White |
| Coborn’s Pharmacy | Good Neighbor Pharmacy | Oscos Pharmacy | Times Pharmacy |
| Costco Pharmacy | Hannaford Food and Drug | Pavilions Pharmacy | Tom Thumb Pharmacy |
| Cub Pharmacy | Harris Teeter Pharmacy | Pick N Save Pharmacy | Tops Pharmacy |
| CVS Pharmacy | Harveys Supermarket | Publix Super Market | United Pharmacy |
| Dierberg Pharmacy | H-E-B Grocery | Quality Food Center | U Save It |
| Dillon Pharmacy | Health Mart | Raley’s Pharmacy | Vons Pharmacy |
| Discount Drug Mart | Homeland Pharmacy | Ralphs Pharmacy | Walgreens |
| Duane Reade | Hometown Pharmacy | Randalls Pharmacy | Walmart |
| Fairview Pharmacy | Hy-Vee | Rite Aid Pharmacy | Wegman Food Market |
| Family Fare Pharmacy | Ingles Markets Pharmacy | Safeway Pharmacy | Weis Pharmacy |
| Farm Fresh Pharmacy | King Soopers Pharmacy | Sam’s Club Pharmacy | Winn Dixie |
| | Kinney Drugs | | |
| | Kmart Pharmacy | | |

LIFE BENEFITS



Life insurance

If something happens to you, life insurance can help your family reduce financial stress.

Life insurance helps protect your family's finances by providing a cash benefit if you pass away. This ensures that they'll be financially supported, and can cover important things from bills to funeral costs. With life policies, you can get affordable life insurance protection for a set period of time.

Who is it for?

Everyone's life insurance needs are different, depending on their family situation. That's why group life insurance through an employer is an easier and more affordable option than individual life insurance.

What does it cover?

Life insurance protects your loved ones by providing a benefit (which is usually tax-exempt) if you pass away.

Why should I consider it?

Life insurance is about more than just covering expenses. Depending on your circumstances, it could take your family years to recover from the loss of your income.

With a life insurance benefit, your family will have extra money to cover mortgage and rent payments, legal or medical fees, childcare, tuition, and any outstanding debts.

Guardian, its subsidiaries, agents, and employees do not provide tax, legal, or accounting advice. Consult your tax, legal, or accounting professional regarding your individual situation.

You will receive these benefits if you meet the conditions listed in the policy.



Watch our video
How life insurance protects families and covers critical costs.



Preparing and planning

Jorge's never considered purchasing life insurance, but after being offered it through work, he decides it's a smart way to protect his family.

Jorge has a mortgage, and because his wife is helping to take care of her mother, she only works part-time. In addition, his daughter is about to start college.

Jorge looks at how his family would be affected by losing him.

Average funeral cost: **\$9,000**

Average mortgage debt: **\$202,000**

Average cost of college: **\$17,000 - \$44,000**

Average household credit card debt: **\$8,500**

With life insurance, Jorge can make sure that part of these costs are covered if something happens to him.

This example is for illustrative purposes only. Your plan's coverage may vary. See your plan's information on the following pages for specific amounts and details.



Your life coverage

	BASIC LIFE	VOLUNTARY TERM LIFE
Employee Benefit	Your employer provides Basic Life Coverage for all full time employees in the amount of 200% of your annual salary, to a maximum of \$250,000.	\$1,000 increments to a maximum of \$500,000. See Cost Illustration page for details.
Accidental Death and Dismemberment	Your Basic Life coverage includes Enhanced Accidental Death and Dismemberment coverage.	Employee, Spouse & Child(ren) coverage. Maximum 1 times life amount.
Spouse Benefit	N/A	\$10,000 increments to a maximum of \$250,000. See Cost Illustration page for details.‡
Child Benefit	N/A	Your dependent children age birth† to 20 years (26 if full time student). You may elect one of the following benefit options: \$10,000. Subject to state limits. See Cost Illustration page for details.
Guarantee Issue: The 'guarantee' means you are not required to answer health questions to qualify for coverage up to and including the specified amount, when you sign up for coverage during the initial enrollment period.	Guarantee Issue coverage up to \$250,000 per employee	We Guarantee Issue coverage up to: Employee Less than age 65 \$250,000, 65-69 \$50,000, 70+ \$10,000. Spouse Less than age 65 \$50,000, 65-69 \$10,000, 70+ \$0. Dependent children \$10,000.
Premiums	Covered by your company if you meet eligibility requirements	Increase on plan anniversary after you enter next five-year age group



Your life coverage

	BASIC LIFE	VOLUNTARY TERM LIFE
Portability: Allows you to take coverage with you if you terminate employment.	Yes, with age and other restrictions, including evidence of insurability	Yes, with age and other restrictions
Conversion: Allows you to continue your coverage after your group plan has terminated.	Yes, with restrictions; see certificate of benefits	Yes, with restrictions; see certificate of benefits
Accelerated Life Benefit: A lump sum benefit is paid to you if you are diagnosed with a terminal condition, as defined by the plan.	Yes	Yes
Waiver of Premiums: Premium will not need to be paid if you are totally disabled.	For employees disabled prior to age 60, with premiums waived until age 65, if conditions are met	For employees disabled prior to age 60, with premiums waived until normal retirement age, if conditions met
LifeAssistSM: Provides supplemental income that is calculated based off a percentage of your Life benefit to a specified dollar amount if you are ADL disabled. Benefits are paid to the lesser of 100 months or to when waiver of premium ends.	No	Yes
Benefit Reductions: Benefits are reduced by a certain percentage as an employee ages.	50% at age 75	35% at age 70, 55% at age 75, 70% at age 80, 80% at age 85

Subject to coverage limits

† Voluntary Life: Infant coverage is limited based on age.

‡ Spouse coverage terminates at age 70.

Annual Election Option allows employees to increase the amount of their life coverage without a medical exam when they re-enroll in their company's Voluntary Life plan. This option allows employees to step up to an amount of up to \$50,000, up to the Guarantee Issue amount.



WillPrep

Protect the ones you love with a range of dedicated services designed to help you provide for your family.

WillPrep Services includes a range of different resources that make it easier for you to prepare a will.

These range from a library of online planning documents to accessing experienced professionals that can help you with the more complicated details.

How it can help



Access simple documents including wills and power of attorney letters



Speak with consultants to discuss estate planning



Prepare your will with the assistance or support of an attorney

This service is only available if you purchase qualifying lines of coverage. See your plan administrator for more details.

WillPrep Services are provided by Uprise Health, and its contractors. The Guardian Life Insurance Company of America (Guardian) does not provide any part of Will Prep Services. Guardian is not responsible or liable for care or advice given by any provider or resource under the program. This information is for illustrative purposes only. It is not a contract. Only the Administration Agreement can provide the actual terms, services, limitations and exclusions. Guardian and Uprise Health reserve the right to discontinue the WillPrep Services at any time without notice. Legal services will not be provided in connection with or preparation for any action against Guardian, Uprise Health, or your employer.



How to access

To access WillPrep Services, you'll need a few personal details.



Visit

willprep.uprisehealth.com



Username

WillPrep



Password

GLIC09

For more information or support, you can reach out by phoning **1 877 433 6789**.



Electronic Evidence of Insurability (EOI)

Our online EOI forms are an easier, quicker alternative to traditional paper forms, helping you get covered when you need to provide additional information.

There are a few situations where you need to answer health questions, enroll for higher amounts of coverage, or request coverage after the initial eligibility period. In all of these situations, our online EOI form keeps things simple.

Electronic EOI keeps things simple

With Guardian's electronic EOI forms, your data is kept secure at every stage of the process. And with fewer errors than hand-written forms, and faster submission digitally, it's easier than ever to complete it and get covered.

Electronic EOI can be used for*:

- Basic life
- Voluntary life
- Short term disability
- Long term disability

*Applicable to coverage requiring full Evidence of Insurability (not applicable to conditional issue amounts). Electronic EOI is available using most internet browsers.



How it works

You will receive a letter or email from your employer or Guardian with instructions and a unique link to submit your EOI form online.

First register and create an account on Guardian Anytime. Then simply fill out the form, electronically sign it, and click 'Submit'.

Once we receive the form, we'll contact you with any questions, before notifying you (and your employer if the coverage amount changes).



Employee Assistance Program

We all need a little support every now and then.

Guardian's Employee Assistance Program gives you and your family members access to confidential personal support, across everything from stress management and nutrition to handling legal or financial issues.

The services available include consultations with experienced professionals, as well as access to resources and discounts designed to help you in a variety of different ways.

How it can help



Consultative services are available to provide direct support and assistance



Work/life assistance that can help you save money and balance commitments



Access legal and financial assistance and resources – including WillPrep Services

This service is only available if you purchase qualifying lines of coverage. See your plan administrator for more details.

WorkLifeMatters Program services are provided by Uprise Health, and its contractors. Guardian does not provide any part of WorkLifeMatters program services. Guardian is not responsible or liable for care or advice given by any provider or resource under the program. This information is for illustrative purposes only. It is not a contract. Only the Administration Agreement can provide the actual terms, services, limitations and exclusions. Guardian and Uprise Health reserve the right to discontinue the WorkLifeMatters program at any time without notice. Legal services provided through WorkLifeMatters will not be provided in connection with or preparation for any action against Guardian, Uprise Health, or your employer. WorkLifeMatters Program is not an insurance benefit and may not be available in all states.

¹Office hours: Monday-Friday 6 a.m.–5 p.m. PST.



How to access

To access the WorkLifeMatters Employee Assistance Program, you'll need a few personal details.

 **Visit**

worklife.uprisehealth.com



Access Code

worklife

For more information or support, you can reach out by phoning **1 800 386 7055**. The team is available 24 hours a day, 7 days a week¹.

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stay connected, stay protected

Since so much of daily life is now spent online, it's more important than ever to stay connected. But more sharing online means more of your personal data may be at risk. In fact, 1 in 6 Americans were impacted by an identity crime in 2020.¹

Identity theft can happen to anyone. That's why your company is offering you Allstate Identity Protection as a benefit. So you can be prepared and help protect your identity and finances from a growing range of threats.

For 90 years, Allstate has been protecting what matters most. Prepare for what's next with:

-  Financial account and credit monitoring
-  24/7 alerts and fraud recovery
-  Up to \$1 million identity theft expense coverage[†]

Sign up at
myaip.com/owu

Questions?
1.800.789.2720






Plans and pricing

Allstate Identity Protection Pro+








\$10.95 per person / month
\$18.95 per family / month

1: 2021 Identity Fraud Study, Javelin Strategy & Research

With Allstate Identity Protection Pro+, get new and enhanced features designed to help you defend yourself from today's risks*

-  See and control your personal data with privacy insights and privacy management in our unique tool, Allstate Digital FootprintSM
-  Learn more about your risk potential by checking your Identity Health Status
-  Receive personalized threat insights to help you protect yourself against the latest trends in scams and fraud
-  Protect yourself and your loved ones with a family plan that includes senior family coverage for parents, in-laws, and grandparents over the age of 65 (everyone "under your roof and wallet")
-  Get reimbursed for many of your out-of-pocket costs, with additional coverage for:
 - Home title fraud expense reimbursement up to \$1 million[†]
 - Professional fraud expense reimbursement up to \$1 million[†]
 - Stolen wallet emergency cash up to \$500[†]

You'll also be able to:

-  Monitor social media accounts for questionable content and signs of account takeover
-  View and manage alerts in real time
-  Catch fraud early with tri-bureau monitoring and an annual tri-bureau credit report and score
-  Lock your TransUnion credit report in a click and get credit freeze assistance
-  See if your IP addresses have been compromised
-  Receive alerts for cash withdrawals, balance transfers, and large purchases
-  Get reimbursed for fraud-related losses, like stolen 401(k) & HSA funds, with our identity theft expense coverage[†]

*Terms and conditions apply. Certain features require additional activation and will not be available until a later date. Product may be updated or modified prior to availability.

[†]Identity theft insurance covering expense and stolen funds reimbursement is underwritten by American Bankers Insurance Company of Florida, an Assurant company. The description herein is a summary intended for informational purposes only and does not include all terms, conditions and exclusions of the policies described. Please refer to the actual policies for terms, conditions, and exclusions of coverage. Coverage may not be available in all jurisdictions.

Allstate Identity Protection is offered and serviced by InfoArmor, Inc., a subsidiary of The Allstate Corporation.



It's easy to get started

- 1 Choose your plan**
You're protected from your effective date.
- 2 Activate key features**
Explore additional features in our easy-to-use portal.
- 3 Live your best life online**
We've got you covered with 24/7 alerts.

AllstateSM
IDENTITY PROTECTION



Pets make your family whole. Cover them with Pet Insurance.

Help cover the costs of vet visits, accidents, illness and more.

No matter what unpredictable antics your furry family member gets into, your family isn't complete without them. With MetLife Pet Insurance,¹ you can feel confident that their health and your wallet are protected if you're faced with an unexpected trip to the vet.

Why choose MetLife Pet Insurance¹:

- Flexible coverage with up to 100% reimbursement² and freedom to visit any U.S. licensed vet
- Available optional Preventive Care coverage³
- 24/7 access to Telehealth Concierge Services⁴
- Access to discounts and offers on pet care⁴
- MetLife Pet mobile app to submit and track claims and manage your pet's health and wellness

Benefits of downloading the MetLife Pet mobile app:

- Manage pet insurance and your pet's health records
- Access to live 24/7 Telehealth Concierge Services⁴ and personalized articles
- Find nearby pet services

Now is the time to insure the whole family — even its furry members.

On July 1, 2022, get a quote or enroll, visit www.metlife.com/getpetquote or call 1 800 GET-MET8.

Or, scan the QR code with your smartphone camera to get started.



What's covered?⁵

- accidental injuries
- illnesses
- exam fees
- surgeries
- medications
- ultrasounds
- hospital stays
- X-rays and diagnostic tests

Coverage⁵ also includes

- hip dysplasia
- hereditary conditions
- congenital conditions
- chronic conditions
- alternative therapies
- holistic care
- and much more!



Pet Insurance

Pet insurance can help reimburse you for covered unexpected veterinary expenses for your pet.

How does MetLife Pet Insurance¹ work?



Select and enroll in the coverage that's best for you and your pet



Download our mobile app



Take your pet to the vet



Pay the bill and send it with your claim documents to us via our mobile app, online portal, email, fax or mail



Receive reimbursement² by check or direct deposit if the claim expense is covered under the policy

Did you know?

- 1 in 3 pets need emergency veterinary treatment each year⁶
- \$800 - \$1,500 is the average cost of an emergency vet visit for a dog⁷
- 56% of pet parents reported being unable to afford emergency care for their pets⁸
- Pre-existing conditions may not be covered – now is the time to insure your furry family members

To get a quote or enroll, visit [www.metlife.com/getpetquote] or call [1 800 GET-MET8].

Or, scan the QR code with your smartphone camera to get started.



1. Pet Insurance offered by MetLife Pet Insurance Solutions LLC is underwritten by Independence American Insurance Company ("IAIC"), a Delaware insurance company, headquartered at 485 Madison Avenue, NY, NY 10022, and Metropolitan General Insurance Company ("MetGen"), a Rhode Island insurance company, headquartered at 700 Quaker Lane, Warwick, RI 02886, in those states where MetGen's policies are available. MetLife Pet Insurance Solutions LLC is the policy administrator authorized by IAIC and MetGen to offer and administer pet insurance policies. MetLife Pet Insurance Solutions LLC was previously known as PetFirst Healthcare, LLC and in some states continues to operate under that name pending approval of its application for a name change. The entity may operate under an alternate, assumed, and/or fictitious name in certain jurisdictions as approved, including MetLife Pet Insurance Services LLC (New York and Minnesota), MetLife Pet Insurance Solutions Agency LLC (Illinois), and such other alternate, assumed, or fictitious names approved by certain jurisdictions.

2. Reimbursement options include: 70%, 80%, 90% and 100%. In addition, there is also a 50% option for MetGen underwritten policies only and a 65% for IAIC underwritten policies only.

3. Can be purchased at an additional cost. For IAIC underwritten policies, optional Preventive Care coverage is based on a Schedule of Benefits. For MetGen underwritten policies, optional Preventive Care coverage is included in the annual limit.

4. May not be available in all states.

5. Provided all terms of the policy are met. Application is subject to underwriting review and approval. Like most insurance policies, insurance policies issued by IAIC and MetGen contain certain deductibles, co-insurance, exclusions, exceptions, reductions, limitations, and terms for keeping them in force. For costs, complete details of coverage and exclusions, and a listing of approved states, please contact MetLife Pet Insurance Solutions LLC.

6. American Pet Products Association "National Pet Owners Survey", 2017-2018.

7. Rover "The Cost of Owning a Dog", 2020.

8. Access to Veterinary Care Coalition "Access to Veterinary Care", 2018.



We Deliver Medicare Peace of Mind.

The RetireMEDiQ Program is designed to guide you through the transition to Medicare coverage upon retirement.

We deliver relevant, **personalized communications** and offer access to **exclusive online resources**. Our program provides you with readily available expert advice, access to health plans and dedicated lifelong support. These services are available at **no cost** to you.



Is the RetireMEDiQ Program Right for You?

Yes! We can help you prepare for your Medicare journey – whether you are considering retirement, new to Medicare or working beyond 65. We provide peace of mind to individuals who are at various stages of their Medicare journey.



What Other Benefits Does the Program Deliver?



Benefit Advisors

Meet one-on-one with a licensed Benefit Advisor about your Medicare plan options. Real people with real answers are available to support you, whether you have questions about Medicare, early retirement, plan options, cost savings or enrollment.



Access to Health Care Plans

When you have questions about your Medicare options, call us at **1-866-600-4266**. Our licensed Benefit Advisors will consider your doctors and prescriptions to provide plan recommendations that fit your health care needs—and your budget.



Lifelong Support

When you trust RetireMEDiQ with your retirement health insurance, we serve you for life! Our Client Services team provides year-round support including expert advice, help resolving claims and billing issues, assistance with annual plan renewals, and cost-savings analysis.

How Do You Sign Up for the Program?

It's easy!

Provide RetireMEDiQ with your email address by visiting www.retiremediq.com/mb

Once you finish this step, you will receive a Welcome email. You can complete your online profile by selecting topics of interest, as well as customizing how often you'd like communications delivered to your inbox. We are excited to guide you on your journey to Medicare—we are committed to supporting you every step of the way!

www.retiremediq.com/mb
1-866-600-4266





*EXCEPTIONAL SERVICE IS PART OF OUR BRAND.
WE ARE GOOD, SMART PEOPLE FIGHTING FOR YOU.*

WHAT WE DO

At MB, advocacy is more than a department ... it's the foundation of our organization. Our knowledgeable problem-solvers are passionately committed to finding the right solution for every client, every time.

HOW IT WORKS

If you've contacted your physician or carrier and weren't satisfied with the response, our MB Advocates are there to step in on your behalf. We have direct access to senior-level representatives at our carrier partners. We know how to get to the bottom of issues like:

- Explanation of Benefits*
- Provider Billing Questions*
- Coordination of Benefits*
- Pre-authorization Help*
- Enrollment Status*

For speedier resolution, have your insurance card, copies of any correspondence and details from conversations you may have had with the carrier or physician, including names and dates, EOB and bills.

CONTACT US

Our MB Advocates are ready to assist you
Monday-Friday, 8 a.m. to 5 p.m. EST
p: 937.260.4300 or 877.635.5372
f: 937.499.1160
e: mbadvocates@mcgohanbrabender.com



01/2020

TO DO LIST:

- Submit elections in ADP by May 25th
- Download the Apta App on your app store or google play by searching “MyQHealth”
- Confirm your Apta Account or set one up by visiting www.OhioWesleyan.myaptahealth.com
- If enrolling in an HSA for the first time, set-up your account with Pathways Financial Credit Union- contact HR for enrollment link
- If enrolling in the FSA, download the HRPro App for quick access and easy management of reimbursement

For questions about Open Enrollment please contact:
Elizabeth Foos, Associate Director of Human Resources

Email: ekfoos@owu.edu

Phone: 740-368-3327

