

2023

BENEFITS GUIDE

wittenberg
UNIVERSITY



Welcome to *your* Benefits!

At Wittenberg University, we recognize our ultimate success depends on our talented and dedicated workforce. We understand the contribution each employee makes to our accomplishments and so our goal is to provide a comprehensive program of competitive benefits to attract and retain the best employees available. Through our benefits programs we strive to support the needs of our employees and their dependents by providing a benefit package that is easy to understand, easy to access and affordable for all our employees. This brochure will help you choose the type of plan and level of coverage that is right for you.

You can also view summaries of our benefit plans by browsing to our [Benefits webpage](#).



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This brochure summarizes the benefit plans that are available to Wittenberg University's eligible employees and their dependents. Official plan documents, policies and certificates of insurance contain the details, conditions, maximum benefit levels and restrictions on benefits. These documents govern your benefits program. If there is any conflict, the official documents prevail. These documents are available upon request through the Human Resources Department. Information provided in this brochure is not a guarantee of benefits.



Eligibility

Eligible Employees

Full time employees working at least 30 hours per week are eligible to participate in our benefit plans.

Eligible Dependents

If you are eligible for our benefits, your dependents may also be eligible. In general, eligible dependents include your spouse and children up to age 26. Working spouses with an offer of medical coverage from their own employer are not eligible for the Wittenberg medical coverage. Children are eligible for coverage until the end of the month of their 26th birthday. Mentally or physically disabled children may continue coverage beyond age 26 provided evidence of the ongoing disability is shown. Children may include natural, adopted, stepchildren and children obtained through court- appointed legal guardianship.

When Coverage Begins

Benefit coverage for newly hired employees and dependents is effective on the first day of the month on or following your official start date. Elections are in effect for the entire plan year, with the exception of HSA and TIAA contributions which can be changed at any time. All other benefits can only be changed during Annual Enrollment, unless you experience a qualified family status event.

Family Status Change

A change in family status is a change in your personal life that may impact your eligibility or dependent's eligibility for benefits. Examples of some family status changes include:

- Change of legal marital status (i.e. marriage, divorce, death of spouse, legal separation)
- Change in number of dependents (i.e. birth, adoption, death of dependent, ineligibility due to age)
- Change in employment or job status (spouse loses job, etc.)
- A qualified child support order for medical coverage
- Gain or loss of other coverage (including COBRA and Medicare).

If such a change occurs, you must make the changes to your benefits within 30 days of the event date. Documentation may be required to verify your change of status. Failure to request a change of status within 30 days of the event may result in your having to wait until the next Annual Enrollment period to make your change. Please contact HR to make these changes.

Medical Plan



Wittenberg University will continue to offer medical through Anthem Blue Cross and Blue Shield. The chart below is a brief outline of what is offered. Please refer to the summary plan description for complete plan details.

	HDHP
Annual Deductible	In-Network
Individual / Family per calendar year	\$3,000 / \$6,000
Coinsurance	0% after deductible with the exception of specialty Rx
Maximum Out-of-Pocket	
Individual / Family per calendar year	\$3,500 / \$7,000
Physician Office Visit	
Primary Care / Specialty Care	Covered in full after deductible
Preventive Care	
Adult Wellness Exams Well-Child Care	Covered in full, not subject to deductible
Diagnostic Services	
X-Ray and Lab Tests	Covered in full after deductible
Complex Radiology	Covered in full after deductible
Urgent Care	Covered in full after deductible
Emergency Room	Covered in full after deductible
Hospital, Outpatient or Inpatient	Covered in full after deductible
Lab/X-Ray	Covered in full after deductible
Retail Pharmacy (30-Day Supply)	
Generic	\$15 copay
Preferred	\$30 copay
Non-Preferred	\$45 copay
Preferred Specialty	25% copay \$250 Max after deductible
Mail Order Pharmacy (90-Day Supply)	
Generic	\$30 copay
Preferred	\$60 copay
Non-Preferred	\$90 copay

Refer to the benefit summary or certificate of coverage for more information.



Medical Contributions

Employee Contributions (Monthly)	
HDHP	
Employee	\$157
Employee & Spouse	\$330
Employee & Child(ren)	\$282
Family	\$471

Health Savings Account(HSA)

Health Savings Account (HSA)

When you are enrolled in a Qualified High Deductible HSA Health Plan (QHDHP) and meet the eligibility requirements, the IRS allows you to open and contribute to a Health Savings Account or HSA.

What is a Health Savings Account (HSA)?

An HSA is a tax-sheltered bank account that you own to pay for eligible health care expenses for you and/or your eligible dependents for current or future healthcare expenses. The Health Savings Account (HSA) is yours to keep, even if you change jobs or medical plans. There is no “use it or lose it” rule; your balance carries over year to year.

Plus, you get extra tax advantages with an HSA because:

- Money you deposit into an HSA is exempt from federal income taxes
- Interest in your account grows tax free; and
- You don’t pay income taxes on withdrawals used to pay for eligible health expenses. (If you withdraw funds for non-eligible expenses, taxes and penalties apply).
- You also have a choice of investment options which earn competitive interest rates, so your unused funds grow over time.

Are you eligible to open a Health Savings Account (HSA)?

Although all benefit eligible employees are able to enroll in the Qualified High Deductible Health Plan, not everyone is eligible to open and contribute to an HSA. If you do not meet these requirements, you cannot open an HSA.

- You must be enrolled in a Qualified High Deductible Health Plan (QHDHP)
- You must not be covered by another non-QHDHP health plan, such as a spouse’s PPO plan.
- You are not enrolled in Medicare.
- You are not in the TRICARE or TRICARE for Life military benefits program.
- You have not received Veterans Administration (VA) benefits within the past three months.
- You are not claimed as a dependent on another person’s tax return.
- You are not covered by a traditional health care flexible spending account (FSA). This includes your spouse’s FSA. (Enrollment in the limited purpose health care FSA and dependent care FSA is allowed).

	Individual Contribution	Employee + Dependent(s) Contribution
Maximum HSA Limit for 2023 Tax Year	\$3,850	\$7,750
Catch Up Ages 55 to 65	\$1,000	\$1,000
Wittenberg Annual Contribution*	\$650	\$1,300

*Prorated contributions will be made on a monthly basis.

How do I get reimbursed for my eligible expenses?

The easiest way to use your HSA dollars is by using your HSA Debit Card at the time you incur an eligible expense (see link below). But keep your receipts! You must be able to prove that you are paying for an eligible expense if you are audited. If you use your HSA funds for non-eligible expenses, you will be charged a 20% penalty tax (if under age 65) as well as federal income taxes. You can manage your HSA at www.chard-snyder.com 24 hours a day, seven days a week. If you prefer, you can also download the mobile app from your app store. For additional assistance, please go online or call Chard Snyder customer service at 800-982-7715.

Flexible Spending Account (FSA)

The Flexible Spending Account (FSA), Limited Flexible Spending Account (LMT) and Dependent Care Account (DCA) with Chard Snyder allow you to set aside pre-tax dollars to cover qualified expenses you might normally pay using out-of-pocket, post-tax dollars. The Flexible Spending Accounts are comprised of a Health Care FSA for participants not enrolled in the HDHP or contributing to an HSA, a Limited Purpose FSA specifically designed for participants enrolled in the HDHP and contributing to an HSA who want to make additional contributions for dental & vision expenses only, and a Dependent Care FSA for qualified dependent care expenses. You pay no federal or state income taxes on the money you place in an FSA, LMT, or DCA.

How FSAs/LMTs/DCAs work:

- Choose a specific amount of money to contribute each pay period, pre-tax, to your elected accounts during the year.
- The amount is automatically deducted from your pay at the same level each pay period.
- As you incur eligible expenses, you may use your debit card to pay at the point of service OR submit the appropriate paperwork to be reimbursed by the plan. Eligible healthcare FSA and Limited FSA expenses can be found here: chard-snyder.com/benefits

Important rules to keep in mind:

- For 2023, the Health Care FSA and Limited Purpose FSA carry-over amounts have been updated to coincide with Notice 2020-33. Now, the maximum carryover amount will be equal to 20% of the maximum salary reduction contribution allowed under section 125(i). This means that each year, as the FSA contribution limits are indexed for inflation, the carry over amount will increase accordingly. For 2023, the FSA maximum salary contribution amount is \$3,050, the carry over amount will be \$610. If it is increased, the carry over amount will automatically increase accordingly.
- The Dependent Care FSA maximum salary contribution amount is \$5,000. The DCA does not allow for any carry-over into the next year. If you do not use the full amount in your DCA in the year elected, you will lose any remaining funds.
- Once you enroll in the FSA, LMT, or DCA, you cannot change your contribution amount during the year unless you experience a qualifying life event.
- You cannot transfer funds from one FSA to another.
- Only amounts payroll deducted to date are available for distribution with Dependent Care Accounts.
- Employees enrolled in the Anthem HDHP may use their HSA, or for extra dental and vision expenses their Limited Purpose FSA.

Re-enrollment into the FSA, LMT, or DCA is required each year.

Maximum Annual Election	
Health Care FSA	\$3,050
Limited Purpose FSA	\$3,050
Dependent Care	\$5,000

Dental Plan

About the Dental Plan:

Wittenberg University offers Dental coverage to eligible employees through Superior Dental Care. The Dental plan offers a wide network of national providers and provides coverage for routine visits, basic and major services.

Superior Dental Care		
	In Network	Out of Network
Annual Deductible		
Individual / Family	\$25 / \$75	\$25 / \$75
Waived for Preventive	Yes	Yes
Annual Maximum		
Per Person / Family	\$1,500	\$1,500
Preventive Services	100%	100%
Basic Services	80%	80%
Major Services	50%	50%
Orthodontia		
Dependent Child(ren) to age 19	50% after deductible	
Lifetime Maximum	\$1,000	\$1,000

Please review your plan summary document for more detailed coverage information.

Employee Contributions	Monthly Rates
Employee only	\$28.13
Employee + Spouse	\$55.29
Employee + Child(ren)	\$74.69
Family	\$110.58

Vision Plan

Our vision plan is offered through Anthem.

About the Vision Plan: Vision coverage is offered to eligible employees through Anthem Blue View Vision. The Vision plan offers a wide network of national providers and provides coverage for materials.



Anthem Blue View Vision

In-Network	Materials Only
Routine Exams (Annually)	Not covered under the vision plan (if enrolled in the Anthem HDHP, the vision exam is covered as a preventive benefit)
Vision Materials	
Prescription Lens Copay (in lieu of contacts) <i>Once every 12 months</i>	\$15 copay
Frames <i>Once every 24 months</i>	\$0 copay \$130 allowance
Contact Lenses (in lieu of lenses) <i>Once every 12 months</i>	\$0 copay; \$130 allowance
Elective	
Medically Necessary	\$0 copay; paid in full

Employee Contributions	Monthly Rates
Employee only(EE)	\$4.56
EE + Spouse	\$8.80
EE + Child(ren	\$15.38
Family	\$15.38



Long-Term Disability Insurance

Wittenberg University provides eligible employees, at no cost, with Long-Term Disability income protection should they become disabled with an illness or injury. Please see the summary plan description for complete plan details.

MetLife	
Benefit Percentage	60%
Maximum Monthly Benefit	\$7,000
Elimination Period	90 Days
Benefit Duration	SSNRA
Definition of Disability	2-year own occ



Basic Life Insurance and AD&D

Wittenberg University provides Basic Life and AD&D benefits to all eligible employees. The Life insurance benefit will be paid to your designated beneficiary in the event of death while covered under the plan. The AD&D benefit will be paid in the event of a loss of life or limb by accident while covered under the plan.

MetLife	
Full-Time Employees	
Benefit Amount	1.5 times annual base salary, to a maximum of \$400,000

The above benefits will begin to decrease at age 65.

Voluntary Life Insurance

In addition to the employer paid Basic Life and AD&D coverage, you have the option to purchase additional voluntary life insurance to cover any gaps in your existing coverage that may be a result of age reduction schedules, cost of living, existing financial obligations, etc. Your election, however, could be subject to underwriting approval.

Voluntary Life Insurance

This plan is 100% employee paid via payroll deductions, at a group rate. There is an option to purchase coverage for the employee, spouse and eligible children. The employee must be enrolled in order to elect coverage for the spouse and/or child(ren).

Important Reminder! Be sure to assign a beneficiary or living trust to ensure your assets are distributed according to your wishes.



Employee Assistance Program (EAP)

We're here to help...

As you go through life, you may be faced with health, personal, family or work-related challenges. Problems arising from illnesses, day care issues, loss of a loved one, relationship conflicts or financial difficulties can affect our life at home and at work. There is a resource that can help you sort things out – our comprehensive Employee Assistance Program (EAP). This program provides you and your family members with confidential, personal and web-based support on a wide variety of important and relevant topics.

How to Use the EAP

Sometimes a telephone call is all it takes. If you want or need additional counseling, you can schedule an appointment with an EAP counselor, three sessions per incident per year, per associate or dependent are provided at no cost to you. The EAP can also provide referrals to other providers or community resources if you need additional assistance.



MetLife's EAP assists employees and their eligible dependents with personal or job-related concerns, including:

- ✓ Emotional well-being
- ✓ Family and relationships
- ✓ Legal and financial matters
- ✓ Healthy lifestyles
- ✓ Work and life transitions

[Metlifeeap.lifeworks.com](https://metlifeeap.lifeworks.com)

User Name: metlifeeap
Password: eap

Phone: 1-888-319-7819
Available 25 hours a day, 7 days a week

Your Benefit Contacts

Medical Insurance

Anthem

Member Services: 833-363-1429

www.anthem.com

Dental Insurance

Superior Dental Care

Customer Service: 800-762-3159

www.superiordental.com

Vision Insurance

Anthem

Customer Service: 866-723-0515

www.anthem.com

Health Savings Account (HSA)

Chard Snyder

Customer Service: 800-982-7715

www.chard-Snyder.com

Flexible Spending Accounts (FSA)

Chard Snyder

Customer Service: 800-982-7715

www.chard-Snyder.com

Long-Term Disability Insurance

MetLife

Customer Service: 800-638-5433

www.metlife.com

Life & Accidental Death &

Dismemberment

MetLife

Customer Service: 800-638-5433

www.metlife.com

Employee Assistance Program (EAP)

MetLife


Customer Service: 883-319-7819

www.metlifeeap.lifeworks.com

Questions?

Please call the USI Benefit Resource Center (BRC) if you have any questions or issues with your Benefits. The BRC is designed to provide you with a responsive, consistent, hands-on approach to benefit inquiries.

Benefit Specialists are available to research and solve elevated claims, unresolved eligibility problems, and any other benefit issues with which you might need assistance. The Benefit Specialists are experienced professionals, and their primary responsibility is to assist you.

 BRCMidwest@USI.com | 855-874-0829
Monday through Friday, 8:00AM to 5:00PM EST.

USI



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