

## General Information

- **What are the open enrollment dates? How will we enroll?**
  - The special enrollment period will be May 4, 2020 through May 29, 2020.
  - The Extension HR will have an electronic blank form available.
- **Where can we find the cost information on each policy?**
  - Follow the link: <https://coextension.hr.iastate.edu/county-extension-isu-plan> -- then scroll to the medical and dental sections to find the bolded links on the premium amounts. The tables show total premiums without potential county subsidization.
- **Is the insurance plan offered county employees the same plan that ISU employees have?**
  - Yes, the plan offered is the same insurance offered to all ISU employees.
- **Is the cost of the insurance plan offered county employees the same as it costs ISU employees?**
  - ISU offers the same insurance to its employees but there are two different pools with different premiums.
    - Faculty and P&S employees have been in one pool for many years with a proven health record and established reserve fund.
    - ISU Merit employees are in a second pool because they were not on the ISU insurance plan until a few years ago. That pool has a higher premium because it is still building a reserve fund and proving their health risk. ISU Departments, as the employer, are responsible for paying the same premiums that counties are quoted. ISU Departments provide a larger subsidy to Merit employees so the monthly cost of insurance to the employee is the same for all ISU employees.
    - Counties are offered the ISU insurance plan at the Merit premium rate because there is no reserve fund or health record. The amount of premium assistance provided employees is at the discretion of Extension councils and differs across counties.
    - Once a health record and reserve fund are established, the premium may decrease. The cost of ISU insurance has held constant for seven years while insurance costs have generally increased, in large part because ISU knows the health record and manages the reserve fund.
- **Is it up to the county to determine if the premium cost will fully be covered by the office or by the employee correct?**
  - Your councils will need to approve how much of the premiums they will subsidize (provide as a benefit), if any.
- **Is the cost of the ISU insurance differ due to preexisting condition or age?**
  - No, there are no restrictions on preexisting conditions and the premium is the same for all within one of the four categories.
    - Employee only
    - Employee and spouse or partner
    - Employee and children
    - Family

- **How will payments for insurance be billed? Are they billed ahead or behind?**
  - Details are still being defined. Counties will be billed for the full premium and will, based on their policy will determine how much is withheld from the employee's paycheck.
  - Premiums are paid ahead.
- **Will there be training on how to bill for the insurance?**
  - A bookkeeper training is scheduled for May 7.
- **Is termination date the date of the event or the end of that month?**
  - When someone terminates, the term date for the insurance will be the end of the month.

## Health

- **Is there a database that explains which providers are In-Network and those that are out-of-network?**
  - Visit the <https://coextension.hr.iastate.edu/county-extension-isu-plan> page.
- **Is there out of country coverage if on vacation?**
  - This is a complex question, for both the HMO and the PPO out of country coverage will be limited. The PPO does have some "In-Network" hospital providers in some countries. The HMO will consider emergency services. The best place to review coverage is each plan Coverage Manual. The links to those follows.
  - <https://www.hr.iastate.edu/sites/default/files/hr-managed-file/benefits/generic-usage/442/2020-wellmark-blueppo-coverage-manual-active-2020-03-11-1416.pdf>
  - <https://www.hr.iastate.edu/sites/default/files/hr-managed-file/benefits/generic-usage/359/2020-wellmark-bluehmo-coverage-manual-active-2020-03-11-1417.pdf>

## Dental

- **Can a spouse be on dental only or are they required to be on medical as well?**
  - You can enroll a spouse on dental only.
- **Is removing wisdom teeth considered basic or major restorative?**
  - Routine oral surgery is a basic restorative service. For any dental benefit category exceeding \$200.00, Delta should be notified to review, see the Notification Program in the coverage manual. <https://www.hr.iastate.edu/sites/default/files/hr-managed-file/benefits/generic-usage/729/delta-dental-plan-certificate-2019-11-04-1110.pdf>
- **Are orthodontics checkups part of the regular dental plan or is it considered part of the \$2000 orthodontic max per person?**
  - Orthodontic checkups are not regular dental service, those would be considered Orthodontic service and fall under the \$2,000.00 max per plan participant.

## Vision

- **Is there eye care coverage or is it part of the medical?**
  - An eye exam is part of the medical plan. Each person on the member's plan can have one routine eye exam per year as long as the eye care provider is participating in the plan the member is enrolled in. Glasses, contacts and laser eye surgery for myopia are not covered by the plans.

## FSA

- **Can we participate in the flex spending without enrolling in any other insurance plans?**
  - Yes. We will be allowing counties to just offer Flexible Spending/DCAP. However, we will only be using one form. In counties where only Flex/DCAP will be offered employees will need to waive ISU health and dental on the form.
- **If my spouse has an HSA or FSA account, can I still have one also to cover extra costs once we run out of his?**
  - The FSA offered is not a “limited purpose FSA (LPFSA) so it should not be held at the same time as an HSA.
- **Can you explain the difference between the FSA and the HSA or is there a resource available to explain the difference?**
  - Very simply, HSAs go with an employer’s High Deductible Health plan and allows contributions to roll over from one year to the next. FSA are less flexible, funds must be claimed in the year the funds are contributed except for a \$500 carry over, which is subject to an employer participating. The FSA you are being offered does have a \$500 carry over. Contributions above \$500, not claimed with expenses incurred in the year the funds were contributed would be subject to forfeit. Participants have until April 30 of the following year to make prior year claims.