

## Benefits Q&A - Open Enrollment 07/01/2016

**MEDICAL:** If I am enrolled in one Group Health plan now, but I change to a different GH plan for July 2016, will my deductible start over (according with the new plan)?

For example, if I am in the Bronze plan and have \$1,200 toward the deductible for the 2016 year, but I switch to the HDHP, will I have credit for the \$1,200? Or, will I start all over from zero, to work toward the HDHP \$3,000 deductible?

*ANSWER: Deductibles on all of the Group Health Plans are on a calendar year basis. If you change plans effective July 1, then anything paid towards a previous deductible during 2016 will be credited against the new deductible.*

*If you move from a higher deductible plan to a lower deductible plan, anything paid will be credited, however, if you have paid more than the "NEW" deductible that is effective July 1, you will not receive a refund.*

*If you move from a lower deductible plan to a higher deductible plan, you will be subject to the full annual deductible of the new plan, with a credit applied for anything already paid towards your deductible in 2016.*

**MEDICAL (Bronze Plan):** does regular blood work fall under the preventive care portion of the benefit? Or does the deductible apply to blood work? I am enrolled in the Bronze plan.

*ANSWER: In order to be covered as preventative, blood work and other lab tests would need to be submitted with a billing code of preventive. There are many such tests that can be billed as both preventive and diagnostic so it will come down to how the provider submits the claims.*

*Any lab work submitted with a diagnostic code will be subject to the deductible first and then coinsurance.*

**HSA versus FSA:**

- 1) I have a balance in my HSA right now, but I am leaving the HDHP for a plan that does not permit an HSA contribution. I plan to start an FSA, and I wonder what impact that will have on my HSA? Can I use the funds from my HSA while I also contribute to my new F S A during 2016-2017?

*ANSWER: You can continue to use your HSA Funds while contributing to a FSA during 2016-2017. You are no longer eligible to contribute to the HSA if you un-enroll in the HDHP (and enroll in an FSA) but you may continue to use the funds for all qualified medical/dental/vision expenses until the funds are exhausted.*

**DENTAL: If I am enrolled now, in Guardian, is there a waiting time before major services can be done through the new Ameritas?**

*ANSWER: There is no waiting period for dental services that fall under the MAJOR (Type 3) category. Only the Ameritas HIGH plan provides coverage for Major/Type 3 procedures.*

**DENTAL: If I am not enrolled in dental at all, and I enroll now in the new Ameritas, is there a waiting time before major services can be done?**

*ANSWER: There is no waiting period for dental services that fall under the MAJOR (Type 3) category. Only the Ameritas HIGH plan provides coverage for Major/Type 3 procedures.*

**DENTAL: What does the 12 month wait under the new Ameritas Dental plan apply to?**

*ANSWER: There is a 12 month wait for ortho coverage under the Ameritas High Plan but this is waived for initial enrollees (7/1/2016) and would only apply to new hires after that.*

**DENTAL: My child is in the middle of an ortho treatment plan. How will the change from Guardian to Ameritas impact that?**

*ANSWER: There is a 12 month wait for ortho coverage under the Ameritas High Plan but this is waived for initial enrollees (7/1/2016) and would only apply to new hires after that. Ameritas' lifetime ortho benefit is 50% up to \$1,500. This maximum benefit is not reduced by prior carrier payment.*