

*Celebrating 13 Years of
"Better Benefits Through Collaboration"*



NOVA SOUTHEASTERN
UNIVERSITY



Open Enrollment for Plan Year

April 1, 2015 - March 31, 2016

Open Enrollment Period:

February 9, 2015 to February 20, 2015

Welcome to the 2015 Open Enrollment Season for the Plan Year April 1, 2015 – March 31, 2016



Barry University



CLEARWATER
CHRISTIAN COLLEGE

Corbett
Preparatory
School of IDS



FLORIDA
MEMORIAL
UNIVERSITY
A PROMISE. A FUTURE.



Poynter.



Tampa Preparatory School

THE UNIVERSITY
OF **TAMPA**



Health Care Reform

- ❑ Enrollment in an ICUBA Medical Plan satisfies the requirement for having coverage.
- ❑ ICUBA Medical Plans are equivalent to Gold Plans offered on the Public Marketplace Exchanges.
- ❑ ICUBA has lower out-of-pocket costs, broader networks of providers, pre-tax benefits, employer contributions into HRA's, and more generous **FREE** wellness benefits.
- ❑ All other requirements of Health Care Reform are in place.

Same Great Benefits in 2015

Florida Blue 
In the pursuit of health®

Blue Physician
RECOGNITION

BlueRewards

KNOW
BEFORE
YOU GO 
✓Quality ✓Cost ✓Savings




catamaran™

MHNet
BEHAVIORAL HEALTH

Resources for Living®


ADVANTICA®
See. Smile. Live.®

Humana®

 **Quest
Diagnostics®**

Plan Enhancements Effective 4/1/15



**New maternity
brochure**

BlueRewards

Points for colonoscopy (100),
Mammogram (100) and
MyHealthy Turnaround™ Pre-Diabetes
Prevention (400).



FREE
Ultrasounds of the Breast



**Emergency Transportation
Services**
\$250 co-pay



FREE ICUBA Cares™ In-Network Benefits

All of the following benefits are **always FREE** to Members regardless of your health condition, age, gender or number of times you receive the medically necessary service:



- Lab Tests
- Pap Tests
- Urinalysis
- Colorectal Screenings
- Prostate Cancer Screenings



- Electrocardiograms
- Echocardiograms
- Mammograms
- Colonoscopies and Sigmoidoscopies
- Immunizations
- Allergy Injections
- Bone Mineral Density Tests
- Ultrasounds of the Breast



Employee Assistance Program is available to all employees and household members.

Call Resources for Living™, your EAP 24-hours a day at 1.877.398.5816

Receive up to six FREE face-to-face counseling sessions per presenting issue per plan year.



- Prescribed diabetic supplies including meters, lancing devices, lancets, test strips, control solution, needles, and syringes
- Aspirin for adults with a physician prescription
- Prescribed generic folic acid and generic pre-natal vitamins for pregnancy



ALL VISITS TO A BLUE PHYSICIAN RECOGNITION PROVIDER ARE ALWAYS FREE!

PPO Medical Plan Comparisons

ICUBA offers two **Blue Options** PPO Plans: [PPO 70](#) and [Preferred PPO](#)

Plan Similarities

- All **FREE** ICUBA Cares™ Wellness Benefits
- Free Blue Physician Recognition™ office visits
- 24/7 Toll free Health Dialog® line
- Catamaran Prescription Drug Benefit (Same low co-pays for 90-day at mail or retail)
- Behavioral Health and EAP Benefits
- Plan Rules
- Same \$20 copay for initial Maternity Visit
- ER & Urgent Care Benefits

Plan Differences

- Premiums
- Deductibles
- Coinsurance
- Co-pays (except maternity visits)
- Annual Out-of-Pocket Maximums
- HRA Contributions

2015-16 Medical Plan Comparison Chart

2015-2016 Plan Year	PPO 70 Blue Options		Preferred PPO Blue Options	
	Network	Non Network	Network	Non Network
Deductible Individual/Family	\$1,000/\$2,500	\$1,500/\$4,000	\$2,000/\$4,000	\$3,500/\$9,750
Coinsurance	30% after deductible	50% after deductible	20% after deductible	40% after deductible
Out of Pocket Maximum (includes all medical co-pays, deductibles, and coinsurance)	\$3,000/\$6,000	\$6,000/\$12,000	\$3,500/\$7,000	\$7,000/\$14,000
Blue Recognition Office Visits (includes Family Practice, Internal Medicine, and Pediatrics)	\$0	N/A	\$0	N/A
Physicians Office Visit (includes General Practice, Internal Medicine, Family Practice, Pediatrics, and OB/GYN)	\$20 co-pay; no deductible	50% after deductible	20% no deductible	40% after deductible
Maternity Office Visits \$20 co-pay for initial office visit to confirm pregnancy. Please refer to the brochure "What to Expect When You're Expecting"	\$20 co-pay per plan year; not subject to deductible	50% after deductible	\$20 co-pay per plan year; not subject to deductible	40% after deductible

2015-16 Medical Plan Comparison Chart

2015-2016 Plan Year	PPO 70 Blue Options		Preferred PPO Blue Options	
	Network	Non Network	Network	Non Network
Specialist Office Visit, including Chiropractors and Therapists	\$30 co-pay; no deductible	50% after deductible	20% no deductible	40% after deductible
Wellness Exam	\$0	Not Covered	\$0	Not Covered
Outpatient Diagnostic Imaging	\$100 co-pay and 30% after deductible	50% after deductible	20% after deductible	40% after deductible
Urgent Care	\$30 co-pay; no deductible	\$30 co-pay; no deductible	20% no deductible	20% no deductible
Emergency Room Services	\$100 co-pay (waived if admitted) no deductible	\$100 co-pay (waived if admitted) no deductible	\$100 co-pay (waived if admitted) no deductible	\$100 co-pay (waived if admitted) no deductible
Medically Necessary Emergency Transportation	\$250 co-pay; no deductible	\$250 co-pay; no deductible	\$250 co-pay; no deductible	\$250 co-pay; no deductible
Hospital Inpatient	\$250 co-pay and 30% after deductible	\$500 co-pay and 50% after deductible	20% after deductible	40% after deductible

Pay Only the Proper Amount of Your Out-of-Pocket Expenses

- If you are going in for your wellness visit, make sure you have a discussion with your doctor/office staff to have the visit filed as a wellness claim.
- If you are using a **Blue Physician Recognition™** provider, All office visits are **FREE** and your doctor should not collect a payment.
- All In-Network Maternity office visits are **FREE** after the initial office visit co-payment per plan year. Care Consultants will advocate on your behalf. Remember to enroll with Healthy Additions and review “What to Expect When You’re Expecting” brochure.
- If you are billed for a facility fee for an office visit or are billed for an annual physical or annual gynecological exam, please advocate on your behalf and contact **Florida Blue™ Customer Service at 1 (800) 664-5295** and have your claims properly adjusted.
- Always pay your provider based on the Member Health Statements available to you as a registered member at **www.floridablue.com**.

Definitions

- **Blue Physician Recognition™ (BPR):** Personal physician (Family Practice, Internal Medicine, and Pediatrics) who coordinates all aspects of patient care and who meets NCQA quality measures and is designated as a participating Blue Physician Recognition™ provider by Florida Blue.
- **Deductibles:** The cumulative amount that you must pay in the Plan Year before benefits will be paid by the Plan. **Physician office visits, Therapy office visits, Urgent Care visits, Emergency Room visits, Emergency Transportation Services, And Prescription Drugs DO NOT apply to the deductible.**
- **Coinsurance:** The percentage of a covered expense that you pay after the satisfaction of any applicable deductible. For example, the plan may pay for 70% of covered services and you pay 30%.
- **Copays (Co-payments):** The fixed dollar amount you are required to pay each time a particular service is used. The copay does apply to out-of-pocket but does not reduce amounts applied to the deductible or co-insurance.
- **Plan Year:** The plan year runs from April 1, 2015 through March 31, 2016.
- **Annual Out-of-Pocket Maximum:** The maximum amount of deductible, co-insurance and co-payments during any Plan Year that you pay before the Plan begins to pay 100% of Covered Expenses for the balance of the Plan Year.
- **Flexible Spending Account:** A Health Care or Dependent Care Spending Account in which you put aside pre-tax dollars to pay for eligible expenses.
- **Centers of Excellence:** Preferred places of care with the best outcomes, finest operational standings and best patient care.

Blue Physician Recognition Program

FREE OFFICE VISITS FOR ALL TYPES OF CARE

When you're searching online for a doctor, you may notice that certain primary care physicians—Family Practice, Internal Medicine and Pediatricians, have a Blue Physician Recognition (BPR) designation. This program recognizes doctors who show a commitment to quality, patient-centered care. They also specialize in care for people with chronic conditions, such as diabetes, asthma, COPD and heart problems, to ensure each person receives preventive screenings and follow-up care.

Free Office Visits

When you are using a Blue Physician Recognition™ provider, all office visits are **FREE**. Your doctor should not collect a co-payment

How to find BPR doctors

Visit **www.FloridaBlue.com** and select **Find a Doctor** or log in.

- Enter your plan name
- When you log in, this step is done for you.
- Enter the type of doctor your looking for.
- Enter location.
- Under Search Criteria select Programs and then Blue Physician Recognition.

When Blue Physician Recognition is shown under Programs, you'll know that this doctor is participating.

The image displays three screenshots of the Florida Blue website's search interface. The first screenshot shows the 'Find a Doctor' button circled in the top navigation bar. The second screenshot shows the search criteria section where 'Blue Physician Recognition' is selected under the 'Programs' dropdown, with a checkmark indicating it is the chosen option. The third screenshot shows the search results for '25 of 581 Search Results', with the 'Blue Physician Recognition' label circled next to the first result, Dr. IMAM, TALAT, MD.

A convenient way to verify the cost of an office visit or procedure.



✓ Quality ✓ Cost ✓ Savings



Members have a choice when accessing the tool:



Call: The Care Consultant Team at 1 (888) 476-2227



Click: Visit www.floridablue.com and click on Members, login with your user name and password, then select compare medical costs



Visit: A Florida Blue Center

Call 1 (877) 352-5830 for a location near you

Monthly Medical Plan Premiums

The ICUBA Employee Member premium increase is 4% (+ 1.5% tax increase) for the Blue Options Plans as compared to 9% in the Florida market for April 1, 2015.

Preferred PPO Blue Options Premium

	Total Premium	Employer Contribution	Employee Contribution	HRA
Employee	\$539	\$454	\$85	\$50
Employee + Spouse	\$1,109	\$554	\$555	\$100
Employee + Child(ren)	\$971	\$602	\$369	\$100
Family	\$1,510	\$770	\$740	\$100
Dual Enroll	\$1,510	\$1,039	\$471	\$150

PPO 70 Blue Options Premium

	Total Premium	Employer Contribution	Employee Contribution	HRA
Employee	\$692	\$441	\$251	\$25
Employee + Spouse	\$1,424	\$483	\$941	\$50
Employee + Child(ren)	\$1,247	\$530	\$717	\$50
Family	\$1,939	\$696	\$1,243	\$50
Dual Enroll	\$1,939	\$972	\$967	\$75

Making a Choice

Estimating Your Financial Risk

Coverage/Tier	ANNUAL PREMIUM	OUT OF POCKET MAXIMUM (OOP) MEDICAL	OUT OF POCKET MAXIMUM PHARMACY	PREMIUM + OOP	NSU HRA CONTRIBUTION	ESTIMATED IN-NETWORK FINANCIAL RISK
EMPLOYEE ONLY						
PPO 70 Blue Options	\$3,012.00	\$3,000.00	\$2,000.00	\$8,012.00	\$300.00	\$7,712.00
Preferred PPO Blue Options	\$1,020.00	\$3,500.00	\$2,000.00	\$6,520.00	\$600.00	\$5,920.00
EMPLOYEE & SPOUSE						
PPO 70 Blue Options	\$11,292.00	\$6,000.00	\$4,000.00	\$21,292.00	\$ 600.00	\$20,692.00
Preferred PPO Blue Options	\$6,660.00	\$7,000.00	\$4,000.00	\$17,660.00	\$1,200.00	\$16,460.00
EMPLOYEE & CHILD(REN)						
PPO 70 Blue Options	\$8,604.00	\$6,000.00	\$4,000.00	\$18,604.00	\$ 600.00	\$18,004.00
Preferred PPO Blue Options	\$4,428.00	\$7,000.00	\$4,000.00	\$15,428.00	\$1,200.00	\$14,228.00
EMPLOYEE & FAMILY						
PPO 70 Blue Options	\$14,916.00	\$6,000.00	\$4,000.00	\$24,916.00	\$ 600.00	\$24,316.00
Preferred PPO Blue Options	\$8,880.00	\$7,000.00	\$4,000.00	\$19,880.00	\$1,200.00	\$18,680.00

Did you know?
\$20.365 Million Annual NSU Contribution

Tier	Annual Amount Paid by NSU		
	Premium	HRA	Total Annual Contribution
PPO 70 Employee	\$5,292.00	\$300.00	\$5,592.00
PPO 70 Employee / Spouse	\$5,796.00	\$600.00	\$6,396.00
PPO 70 Employee / Child(ren)	\$6,360.00	\$600.00	\$6,960.00
PPO 70 Family	\$11,628.00	\$600.00	\$12,228.00
Preferred PPO Employee	\$5,448.00	\$600.00	\$6,048.00
Preferred PPO Employee / Spouse	\$6,648.00	\$1,200.00	\$7,848.00
Preferred PPO Employee / Child(ren)	\$7,224.00	\$1,200.00	\$8,424.00
Preferred PPO Family	\$9,240.00	\$1,200.00	\$10,440.00

- NSU will contribute approximately **20.3 65 million** dollars to employee healthcare coverage costs in the 2015-2016 plan year!
- Annual premium for 2015-2016 plan year: **\$18,058,152.00**
- Annual HRA for 2015-2016 plan year: **\$2,307,600.00**
- **Total NSU Contributions 2015-2016 plan year:**
\$20,365,752.00



Pharmacy Benefits

Understanding Your Tiered Copays

- Your Catamaran™ pharmacy benefit plan offers three categories or tiers of drugs that determine your cost share or copay.
- Whenever possible, have your doctor consult your Preferred Medication List for the lowest cost generic or brand medications available for your therapy.
- You may visit www.mycatamaranRx.com or call member services at 1-800-207-2568.

Tier	Co-pay 30 day Retail/90 day Retail or Mail Order	Definition
1 – Generic	\$5/10	Generics contain the same active ingredient as their brand-name equivalents and offer the same effectiveness and safety. Some generics use a brand name instead of a chemical name. Both have the lowest co-pay.
2 – Preferred	\$27/50	Medications in this tier have been selected by your pharmacy benefit plan as preferred brand drugs. These drugs have higher co-pays than generics but are less costly than non-preferred medications on the third tier.
3 – Nonpreferred	\$60/120	Because a generic version or a second-tier alternative is available, non-preferred medications have the highest co-pays and are not listed on the Preferred Medication List.

Maximum annual plan year out-of-pocket for prescription drug co-pay is \$2,000 per individual; \$4,000 for family.
90-day prescriptions are available at the same co-pay at retail and mail order.

Remember 90 day prescriptions save you money!

Catamaran™ Pharmacy Benefits

Free Generic Drugs at NSU Pharmacy

- Full service pharmacy
- Accepts NSU/ICUBA prescription plan
- **FREE** generic drugs for NSU/ICUBA healthcare subscribers
- Open:
 - Monday – Friday
9:00 AM – 6:00 PM
 - Saturday
9:00 AM – 1:00 PM



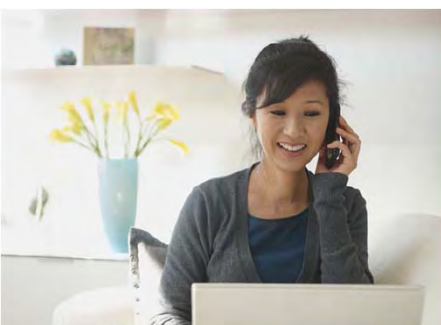
For questions and appointments please call: 954.262.4550

Web address: <http://pharmacy.nova.edu/clinic/index.html>



Employee Assistance Program (EAP) Benefits

- **FREE Resources for Living** Employee Assistance Program (EAP) (up to six counseling sessions per issue per plan year) is available to **ALL EMPLOYEES AND HOUSEHOLD MEMBERS**. You do not need to be enrolled in any ICUBA benefit plan in order for you and/or a household member to access EAP services.
- **Client Connect® Provider Matching Service** assists members in locating an appropriate provider for their current situation.
- The Resources for Living EAP website has many helpful resources including informative articles, interactive health and wellness instruments, health assessments and videos, family, personal, and mental health information, on-line seminars, discounts to vendors and community resources.



Resources For Living services are available to you, all members of your household and your adult children up to the age of 26, regardless of your medical insurance coverage. **Services are confidential and are available 24 hours a day, 7 days a week.**

To access services, simply call **1-877-398-5816** or login online at **www.mylifevalues.com**

Username: ICUBA

Password: 8773985816

Behavioral Health & Substance Abuse Benefits



- Behavioral Health/Substance Abuse Benefits are provided by MHNet Behavioral Health.
- Members must be on the Medical Health Plan.
- [Provider Search: www.mhnet.com](http://www.mhnet.com) or call 877-398-5816 and press option for Behavioral Health Benefits.
- MHNet contact information can be located on the back of the Florida Blue ID card.
- Deductible and out of pocket maximum is combined with medical.
- In-network services must be rendered by a MHNet provider.
- Services rendered by an out of network provider may be subject to balance billing by the out of network provider for the difference between the allowed amount and the provider billed charges.



Tobacco Cessation Program

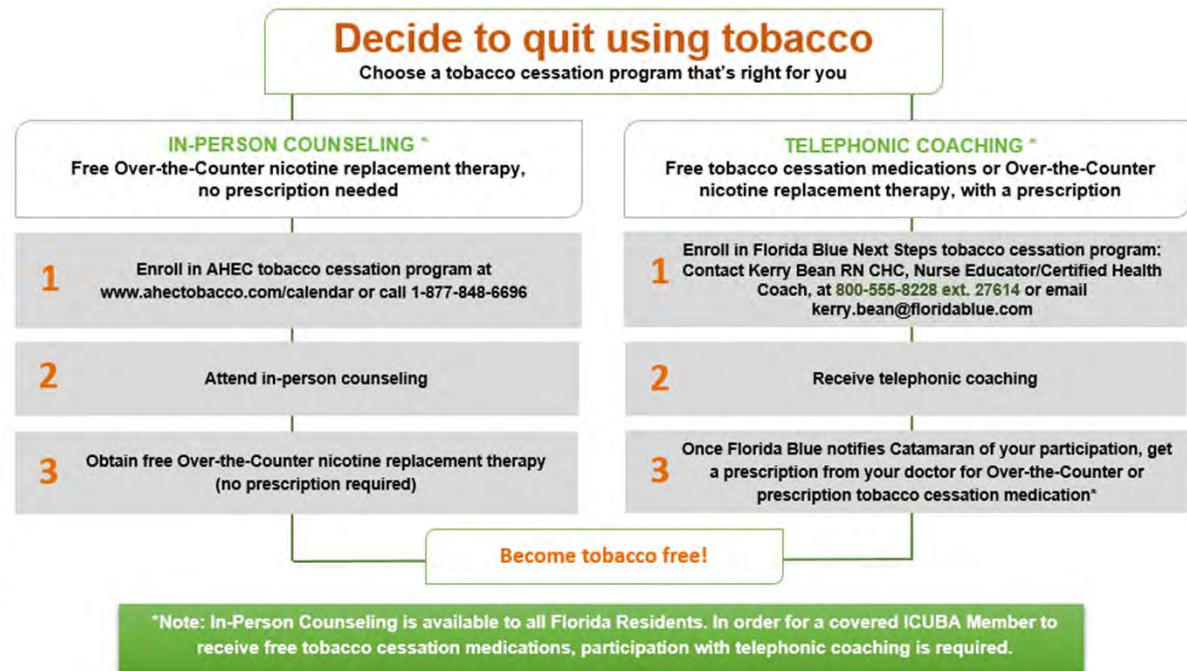
It's okay to be a quitter— it's time to stop using tobacco

Once you make the decision to quit tobacco, you may enroll with the **Next Steps** program or a counseling program with the **Area Health Education Center (AHEC)**. Once you initiate the counseling session and obtain a prescription from a physician, you will be eligible for **FREE** tobacco cessation medications. Call **877-848-6696** or access www.ahectobacco.com/calendar.

Both prescription and over-the-counter (OTC) tobacco cessation products are available through this program with up to two twelve-week cycles each plan year at no cost to you.

Products that can help you quit include:

- **Nicotine replacement products (NRP):** These products provide small doses of nicotine and are considered tobacco substitutes. Some nicotine replacement product options are: nicotine skin patches, gum, lozenges, or nasal sprays.
- **Prescription medications like Chantix or Zyban.** Since medication isn't for everyone, you should meet with your doctor and discuss which product is right for you.
- **Take your prescription, Catamaran ID card, and over the counter product (if applicable) to the pharmacy counter,** they will process your claim at no cost to you as long as you actively participate in the tobacco cessation program.



Have you heard about

BlueRewards

The Wellness Incentive Program developed in partnership with Florida Blue to help you achieve your wellness goals and get rewarded for it.

BlueRewards is a positive way to help you improve your health through a variety of activities, tools and resources, including a Personal Health Assessment (PHA). **As you work toward your wellness goals, you'll earn points redeemable online.** You can earn up to 1,800 points* for Plan Year April 1, 2015—March 31, 2016!

Choose from thousands of Great Rewards!



Fitbit Flex Wireless Activity and Sleep Wristband-Black
495 Points



Fitbit Aria WiFi Smart Scale - Black
635 Points



Sharp 32 In. AQUOS 1080p LED HDTV
1,434 Points



Apple iPad Mini with Retina display Wi-Fi 32GB - Silver
1,599 Points



Sony 1000W 5.1 Channel Blu Ray Home Theater
1,297 Points



Apple TV
482 Points



Apple iPod 2GB Shuffle - Slate
256 Points



Brookstone Tech-Grip Mobile Mini Speaker
162 Points



Keurig Gourmet Brewing System
480 Points



Cuisinart 5.5 Quart 800 Watt Mixer
1,132 Points



Breville The Juice Fountain Duo
1,631 Points



Hamilton Beach 8 Cup Bowl Food Processor
204 Points



Black & Decker 12" Bump Feed String Trimmer
198 Points



Coleman RoadTrip® LXE 2-Burner Grill
908 Points



Wilson NCAA MVP Optima Rubber Basketball
96 Points



Coleman 7X7 Sundome Tent
302 Points



Black & Decker Lithium Saw
258 Points



Seiko Men's Stainless Brown Dial Strap Chronograph Watch
507 Points



Maui Jim World Cup Classic Sunglasses
661 Points



Dooney & Bourke Florentine Medium Russell Bag, Black
1,241 Points



Brookstone Comfort Slippers
172 Points



Instep Safari Sport Stroller
982 Points



Motorola Digital Audio Baby Monitor
206 Points



Fisher Price Cradle 'N Swing Snugapuppy
652 Points



Fisher Price Portable Bassinet Green
487 Points

BlueRewards

How would you like to... get in shape, eat better, quit tobacco, or lose weight ... and be rewarded for it?

Employees and eligible spouses who are enrolled in an ICUBA medical plan are eligible to receive up to 1,800 points for participating in healthy activities.

As you work toward your wellness goals, you can earn the points for the activities outlined in the chart to the right!

The points may then be used to buy items through an online marketplace, where you can choose from thousands of name brand rewards.

Know Your Numbers!	Points	Date Completed
Complete BYFB Health Screening and Personal Health Assessment with health coaching	200	
– Normal body mass index (27 or less)	25	
– Healthy cholesterol (4.0 or less)	25	
– Ideal blood pressure (less than 120/80)	25	
– Non-tobacco user (2+ years)	25	
Complete preventive care screening (annual/physical exams only)	200	
Complete WebMD personal health assessment	25	
Enroll in Healthy Addition Prenatal Program	200	
Participate in BYFB Next Steps Coaching Program	50 per call/max 150	
Mammogram	100	
Colonoscopy	100	

Get Informed!	Points	Date Completed
My Healthy Turnaround™ Pre-Diabetes Program	400*	
Attend a campus-sponsored wellness event	50 each/200 max	
<i>Get informed through MyHealth Assistant on Floridablue.com for the following Activities...</i>		
Select and achieve an Exercise Goal	10 select/15 achieve	
Select and achieve a Maintain Positive Mood Goal (and maintain that goal)	10 select/15 achieve	
Select and achieve a Nutrition Goal	10 select/15 achieve	
Select and achieve a Quit Tobacco Goal	10 select/15 achieve	
Select and achieve a Stress Goal	10 select/15 achieve	
Select and achieve a Weight Loss Goal	10 select/15 achieve	

Get Moving!	Points	Date Completed
Utilize Exercise Tracker in WebMD	5 each/75 max	
Utilize Weight Tracker in WebMD	5 each/25 max	
Utilize Stress Tracker in WebMD	5 each/25 max	
Utilize Cholesterol Tracker in WebMD	5 each/25 max	
Utilize Blood Pressure Tracker in WebMD	5 each/25 max	

**My Healthy Turnaround™ Pre-Diabetes Program - 200 points awarded at week 9 and 200 points awarded at completion.*

Health Reimbursement Account (HRA) and Health Care Spending Account (HSCA) Differences

HRA

Health Reimbursement Account

- Funded monthly by NSU
- Available for PPO 70 and Preferred PPO Plans
- Can only be used for eligible medical expenses incurred by the employee and dependent(s)
- Funds rollover at the end of each plan year as long as you are on the ICUBA Medical Plan or vested
- Portable after 36 months of continuous participation in an ICUBA Medical Plan
- Can have an HRA without electing an FSA

HCSA FSA

Health Care Flexible Spending Account

- Funded by employee pre-tax dollars
- Can be used for employee and eligible dependent medical expenses
- No carry-over of funds from year to year (by law)
 - Subject to Use-it-or-lose-it
- HCSA funds expended before tapping into HRA funds
- HCSA maximum annual limit is \$2,550 under Health Care Reform
- **Entire election amount will be available as of 4/1/15**

Dependent Care Spending Account (DCSA)

DCSA

Dependent Care Spending Account

- Funded by employee with pre-tax contributions and used to pay for eligible dependent care expenses
- Maximum annual limit of \$5,000 per household (Married filing jointly)
- Can only be used for the care of dependent(s) under age 13 and physically or mentally challenged adults who are unable to care for themselves when employee (and spouse) are either working or looking for work
- Funds can be accessed by using the ICUBA Benefits MasterCard™
- File your claims online at <http://icubabenefits.org>
- Subject to use-it-or-lose-it rule
- Funds are available as they are deducted from payroll
- You do not need to elect an HCSA or have an HRA to elect a DCSA



ICUBA Benefits MasterCard™

You can use your ICUBA Benefits card at any eligible provider that accepts MasterCard™

There is no need for a Personal Identification Number (PIN); all you need to do is select the credit option at the point of payment.

Some card transactions may require you to submit additional documentation to verify/substantiate the transaction.

If additional documentation is required, you will receive notification by mail or email to the address on file for you.

Always save your receipts and EOB forms

If additional documentation is required, you will need to provide itemized documentation that displays the patient's name, provider name, date of service (not date of payment) was rendered, the amount owed after all credits and payments have been applied, and a description of services rendered. You may also use the Explanation of Benefits (EOB) form as itemized receipt.

If you are requested to verify/substantiate a card transaction, do so promptly to avoid card suspension.

Additional cards may be ordered for eligible dependents that are 18 and over.

To request a card you may contact an ICUBA Benefits Administrator at 866.377.5102 or via email at benefitsadministration@icuba.org

Reliance Standard Optional Term Life Insurance

- Enroll now or increase your coverage level
- Elect coverage amount between \$10,000 and \$300,000 in \$10,000 increments
- Your application will be subject to Evidence of Insurability (EOI), access this form through <http://www.reliancestandard.com/eoi/hom/nova/nsueoi.pdf>
- Reliance Standard will notify you when your application is approved, denied or pending additional information
- First monthly premium deduction will occur in the first pay of the month following the approval of your coverage
- If you do not send an EOI to Reliance Standard by 4/30/2015 your enrollment request will expire
- The value of the policy reduces to 65% at age 65, and 50% at age 70

24 – Hour Travel Assistance Services



Emergency Medical Transportation

- Emergency evacuation
- Medically necessary repatriation
- Visit by family member of friend



Emergency Personal Services

- Urgent message relay
- Interpretation/translation services
- Emergency travel arrangements



Pre – Trip Assistance

- Passport/ Visa requirements
- Currency exchange rates
- Consulate/ embassy referral
- Weather information



Medical Services Include:

- Medical referrals for local physician/dentist
- Prescription assistance
- Medical case monitoring

In the US 800-456-3893
Worldwide, collect 603-328-1966

<https://www.oncallinternational.com/login/?returnurl=/partners/>

IDENTITY THEFT PROTECTION

- Your Life Insurance carrier provides this service if you become a victim of identity theft
- 24/7 telephone support and step-by-step guidance by anti-fraud experts
- Expert case worker assigned to you to perform the recovery process for you.
- Call **InfoArmor** at 1-855-246-7347
- <http://www.myprivacyarmor.com/>

Vision and Dental Providers



Humana®

Dental Provider

Humana Dental plans
are exactly the same and the
prices are not changing from
last year.



Vision Provider

Advantica Vision plans
benefits and costs remain the
same as last year.



High Option PPO Dental Plan

- Two additional preventive cleanings for a total of four cleanings per year.
- Two periodontal cleanings per year to be covered at preventive levels of benefits.
- Coverage for composite fillings on all teeth.
- Addition of an Extended Annual Maximum Benefit paying 30% coinsurance after the annual maximum benefit is met.

High Option PPO Plan	In-Network	Out-of-Network
Plan Year Deductible – Single / Family	\$50 / \$150	\$50 / \$150
Deductible Waived for Preventive	Yes	Yes
Plan Year Maximum (excludes orthodontia services)	\$2,000	\$2,000
Preventive Services	100%	80%
Basic Services	80% after deductible	50% after deductible
Major Services	50% after deductible	30% after deductible
Orthodontia – Adult & Child	50%	50%
Orthodontia Lifetime Maximum	\$2,000	\$2,000

High Option PPO Dental Plan 2015-2016 Monthly Dental Rates	
Employee	\$36.68
Employee + 1	\$73.04
Family	\$122.84

the NSU Dental Faculty Practice PPO Plans Accepted Only

Refer to your Dental Summary Plan Description (SPD) for full benefit description.



Low Option “Preventive Plus” Plan

* Services include amalgam/resin restorations and simple extractions.

** Receive a discount on these services if you see participating dentists.

Low Option PPO Plan	In-Network	Out-of-Network
Plan Year Deductible – Single / Family	\$50 / \$150	\$50 / \$150
Deductible Waived for Preventive	Yes	Yes
Plan Year Maximum (excludes orthodontia services)	\$1,000	\$1,000
Preventive Services	100%	100%
*Basic Services	80% after deductible	80% after deductible
**Major Services	Discount available	Not Covered
Orthodontia – Adult & Child	Discount available	Not Covered

Low Option “Preventive Plus” Plan 2015-2016 Monthly Dental Rates	
Employee	\$19.48
Employee + 1	\$45.28
Family	\$74.96

**Major Services are not covered under this plan, however you can receive a discount for services if you see participating dentists.

**Benefits can be obtained at the NSU Dental Faculty Practice
PPO Plans Accepted Only**

Refer to your Dental Summary Plan Description (SPD) for full benefit description.



DMO CS250 Dental Plan

DMO CS250 Plan	In-Network Only
Calendar Year Deductible	No deductible
Out of Pocket Maximum	No maximum
Office Visit Copays (during normal business hours)	\$5 copay per visit
Preventive Services	Please refer to dental schedule for copay amounts
Basic Services	Please refer to dental schedule for copay amounts
Major Services	Please refer to dental schedule for copay amounts
Orthodontics – Adult & Child	\$2,000 Adult; \$1,800 Child fixed copay

DMO CS250 Dental Plan 2015-2016 Monthly Dental Rates	
Employee	\$10.98
Employee + 1	\$22.02
Family	\$34.20

Refer to your Dental Summary Plan Description (SPD) for full benefit description.



Advantica Base Vision Plan

The NSU Eye Care Institute participates in this plan	In-Network		Out-of-Network	
Vision Exam	\$5 Co-Pay		Up to \$40 Reimbursement (less applicable Co-Pay)	
Standard Frames	\$15 Co-Pay; \$100 allowance		Reimbursed up to \$40 (no Co-pay if included with eyeglass lenses)	
Single Vision, Bifocal, Trifocal, and Lenticular Lenses	Covered After \$15 Co-Pay		Up to \$20 for Single Vision, \$40 for Bifocal, \$60 for Trifocal, \$100 for Lenticular Reimbursement less Co-Pay	
Standard Progressive Lens	\$50 Co-Pay		Up to \$45 reimbursement less Co-pay	
Single Vision (SV) Polycarbonate	Included with Lens Co-Pay up to age 19; over age 19, \$30 Co-Pay		Up to \$10 reimbursement less Co-pay under age 19	
UV Coating Lens	\$12 Co-Pay		Up to \$5 reimbursement less Co-pay	
Contact Lenses - Medically Necessary (in lieu of eyeglasses and elective contact lenses)	\$15 Co-pay; \$250 materials allowance; \$30 fitting fee allowance		Up to \$250 reimbursement (less applicable Co-pay)	
Contact Lenses – Elective (in lieu of eyeglasses)	\$15 Co-pay; \$100 materials allowance; \$30 fitting fee allowance		Up to \$60 reimbursement (less applicable Co-pay)	
Frequency Limitations - Vision Exams	Once every 12 months	April 1, 2015 – March 31, 2016 Monthly Base Vision Plan Premiums		
Frequency Limitations - Eyeglass Lenses	Once every 12 months			
Frequency Limitations - Frames	Once every 24 months	Employee	\$3.98	
Frequency Limitations - Contact Lenses	Once every 12 months	Family	\$10.18	



Advantica Buy-Up Vision Plan

The NSU Eye Care Institute participates in this plan	In-Network		Out-of-Network
Vision Exam	\$5 Co-Pay		Up to \$40 Reimbursement (less applicable Co-Pay)
Standard Frames	\$15 Co-Pay; \$100 allowance		Reimbursed up to \$40 (no Co-pay if included with eyeglass lenses)
Single Vision, Bifocal, Trifocal, and Lenticular Lenses	Covered After \$15 Co-Pay		Up to \$20 for Single Vision, \$40 for Bifocal, \$60 for Trifocal, \$100 for Lenticular Reimbursement less Co-Pay
Standard Progressive Lens	\$50 Co-Pay		Up to \$45 reimbursement less Co-pay
Single Vision (SV) Polycarbonate	Included with Lens Co-Pay up to age 19; over age 19, \$30 Co-Pay		Up to \$10 reimbursement less Co-pay under age 19
UV Coating Lens	\$12 Co-Pay		Up to \$5 reimbursement less Co-pay
Contact Lenses - Medically Necessary (in lieu of eyeglasses and elective contact lenses)	\$15 Co-pay; \$250 materials allowance; \$30 fitting fee allowance		Up to \$250 reimbursement (less applicable Co-pay)
Contact Lenses – Elective (in lieu of eyeglasses)	\$15 Co-pay; \$100 materials allowance; \$30 fitting fee allowance		Up to \$60 reimbursement (less applicable Co-pay)
Frequency Limitations - Vision Exams	Once every 12 months	April 1, 2015 – March 31, 2016 Monthly Buy Up Vision Plan Premiums	
Frequency Limitations - Eyeglass Lenses	Once every 12 months	Employee	\$4.78 (\$9.60 in additional annual premium for frames once every 12 months)
Frequency Limitations - Frames	Once every 12 months		
Frequency Limitations - Contact Lenses	Once every 12 months	Family	\$12.22 (\$24.48 in additional annual premium for frames every 12 months)



- “Safeguard for Minors” identity theft protection for dependents for an extra \$1.00 a month
- Real Estate, Family Law, Estate Planning, Traffic Issues
- Legal Shield premium deductions once a month. Deductions will be taken in the second pay period of each month
- Voluntary employee benefit - no employer contribution
- Contact Kelley Kaupas-Rheault at (954)-214-0327 or John Broadbent at (954)-881-1296 or visit <http://www.legalshield.com/cp/>
- View additional information on benefits webpage <http://www.nova.edu/cwis/hrd/benefits/index.html>

Aflac

- Offers various insurance plans, accident insurance, hospital indemnity, short-term disability and cancer indemnity
- Voluntary employee benefit - no employer contribution
- View PowerPoint presentation on benefits webpage
- Clicking enroll button means you have an interest in enrolling
- Contact AFLAC representative Joe Evans at (954) 560-6000 for more information.





Benefits Open Enrollment Instructions

<http://icubabenefits.org>



Get started

Visit <http://icubabenefits.org> and login by entering your user name and password. If you are a first-time user, click on "Register" to set up your user name, password and security questions. Your "Company Key" is ICUBA (note: it's case sensitive).

Forgot your username or password?

1. Visit <http://icubabenefits.org> and click on the "Forgot your username or password?" link.
2. Enter your social security number, company key and date of birth.
3. Answer your security phrase.
4. Enter and confirm your new password, then click "Continue" to return to this page and login.



Begin enrollment

Click "Start Here" and follow the instructions to enroll in your benefits or waive coverage.

You must make your elections by the deadline under the "Start Here" button. If you miss the deadline your current benefit plan elections will be continued.

***Note: If you elected a Flexible Spending Account (FSA) for the current plan year, please be aware that your elections will not automatically rollover to the upcoming plan year and you will need to make an active election.**

Wondering what something means?

View the online glossary in the "Reference Center."

Want to review your current plan?

You have year-round access to your benefit summary and specific benefit elections at <http://icubabenefits.org>.

1. Click "Benefits Summary" in the "Benefits" tab.
2. Review your current plan.



Make your elections

Review your options as you walk through the enrollment process. Click "Select" on the plan(s) you choose. Track your choices along the enrollment bar which updates with your total cost.

If you have any questions as you go through enrollment, call the ICUBA Benefits Center at 1-866-377-5102.

Use the "Reference Center", "View Detailed Plan Comparison" or "Guide Me" tools to help you make elections.



Review your elections

Review, edit and approve your personal information, elections, dependents and total cost.

Approve

Once you have reviewed your elections and they are accurate, click "Approve".

Confirm your choices

Your enrollment isn't complete until you confirm your benefit elections.



Print

Print your election information and confirmation number for future reference.

You must complete your enrollment by 02/20/2015.



Benefits Enrollment Action Plan

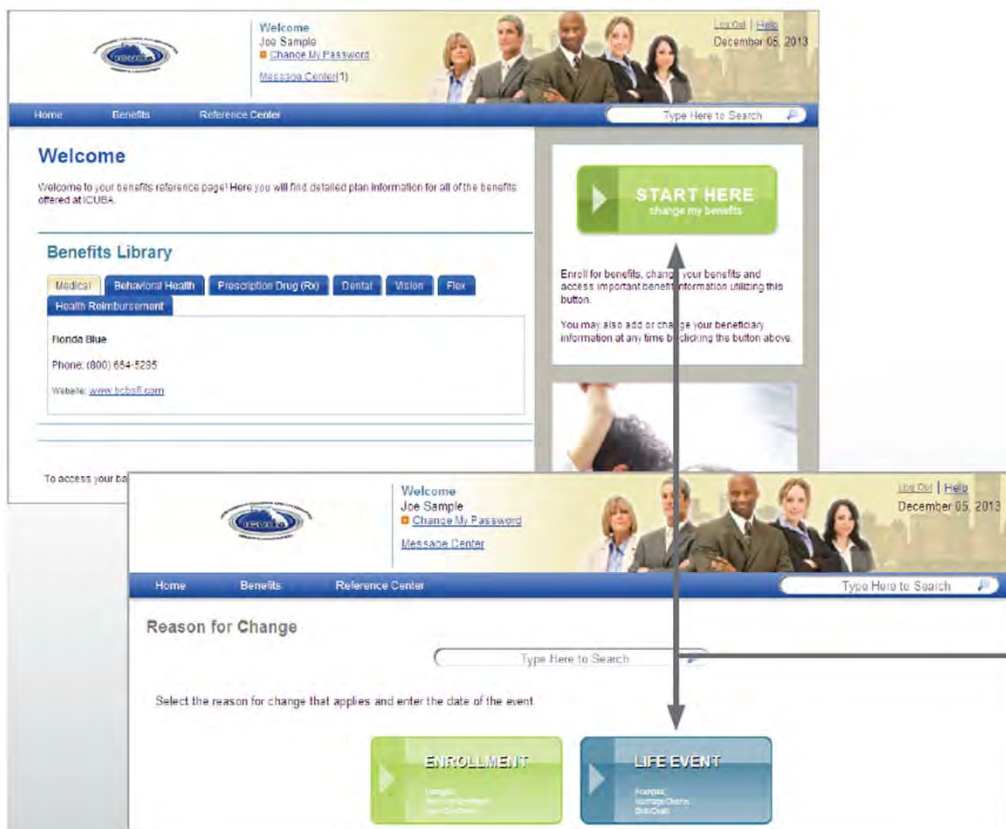
<http://icubabenefits.org>

MAKE MID-YEAR CHANGES

Your benefit elections will remain in effect until the end of the plan year in which your elections were made, unless you experience a qualifying life changing event. Examples of a life changing event would be, getting married or divorced, birth of a child, a change in job status, etc. For a complete list of qualifying life events, please review the ICUBA MEDICAL, BEHAVIORAL HEALTH, AND PRESCRIPTION DRUG PLAN DOCUMENT which is located under the "Reference Center".

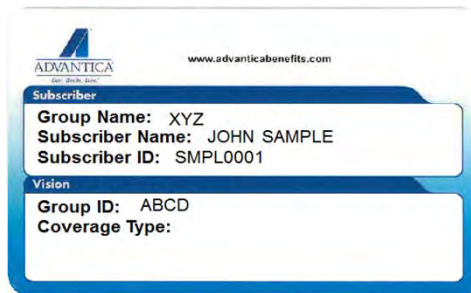
If you experience a qualifying life event, you must make changes within **30 days** of the life event and provide the necessary supporting documentation for change approval. If changes aren't made within **30 days**, you will have to wait until the next plan year open enrollment to change your benefits.

1. Login to <http://icubabenefits.org>.
2. Click on the "Start Here" button to change your benefits or your basic information.
3. Select the life event button and make your changes.





ICUBA Benefits Insurance Providers



RELIANCE STANDARD
LIFE INSURANCE COMPANY



MHNet
BEHAVIORAL HEALTH

Resources *for* Living®



Mobile Apps

Good health is in your hands.

Access personalized health information and tools while on the go! Mobile Apps provide you with easy access to your personalized health information.

Once you receive your ID card, download the app to take advantage of the benefits your plan offers.



The **Florida Blue mobile app** provides quick and easy access to your plan coverages and details such as deductibles, claims, an electronic copy of your Member ID card and a search feature to help you locate doctors in the network from wherever you are.



Catamaran gives you instant, secure access to your personal prescription information and trusted pharmacy resources. Check your prescription history, compare prescription prices and locate nearby pharmacies.



MyHumana Mobile app gives you quick access to view your dental plan and coverage details as well as a search feature to help you easily locate an in-network provider in your area.



Resources for Living allows you to access information, support and resources to help you manage the issues that impact your work, life and well-being.



The **WebMD** app provides **24/7** mobile access to mobile-optimized health information and decision support tools, including Symptom Checker, Drugs & Treatments, First Aid Information and Local Health Listings.



MyQuest™ allows you to conveniently access your health information, request and receive lab results, schedule your next lab appointment or find the nearest Quest Diagnostics Patient Service Center location.



Thank You!

We are available to discuss plan details and
problem solve with members after the presentation.