



## DRAKE UNIVERSITY EMPLOYEE BENEFITS PLAN YEAR 2022

### DRAKE UNIVERSITY HEALTH PLAN

We are happy to announce monthly premiums for Drake's Health Plan benefits will **not increase in 2022**. A key factor in maintaining monthly contribution rates is continued access to Wellmark's Blue Choice Point of Service (POS) network, as well as special pricing for those choosing to seek care from the Broadlawns network. This pricing is effective on January 1, 2022. ([See Contribution Rates](#))

#### **New: Broadlawns Network**

Broadlawns is an Iowa-based network which includes an acute care hospital, emergency services, inpatient and outpatient services, lab and radiology services, mental health services, specialty clinics and a 24-hour crisis team. The network is comprised of over 1,200 employees and 100 physicians who work together to provide high-quality healthcare that is coordinated, compassionate and cost-effective.

The Broadlawns Partnership will greatly enhance Drake's Health Plan in 2022 by providing:

- Reduced costs to participants who choose to obtain network services
- Greater access to care – at any Broadlawns location
- Additional choice for health plan participants

It is important to note this enhancement will not affect Drake's Health Plan design. **Utilization of Broadlawns services and providers is voluntary.** You and your covered dependents have continued access to Blue Choice POS and out-of-network providers and services during 2022. **All Broadlawns providers participate within the Blue Choice POS network.** Currently, there are more than 320 Broadlawns providers in the Blue Choice POS network. To learn more about Broadlawns services, click [here](#).

Drake's Health Plan will aggregate Broadlawns, Blue Choice POS, and out-of-network annual deductibles and out-of-pocket maximums. Although the amounts will continue to accumulate separately, they will not be mutually exclusive. **To view a side-by-side cost summary of Broadlawns, Blue Choice POS and out-of-network services,** click [here](#).

#### **Continued Access to Out-of-network Providers**

If you see a provider that is not in the Blue Choice POS network, the service will be covered per the plan's out-of-network cost share. Members who seek services out-of-state from a Blue Card Provider will not be subject to balance billing. If you obtain services from an out-of-state, non-Blue Card provider, you may be required to pay the full amount due at the time of service. Wellmark will process the claim and reimburse you directly. You may likewise be balance-billed for charges over the allowed amount.

### Health Plan Enhancements for 2022

The following enhancements will become effective January 1, 2022:

- Special pricing stemming from the new Broadlawns partnership
- Extended timing for dental accidental injury treatment
- Surgical removal of impacted teeth covered under medical plan if required by current medical condition
- Removal of the skilled nursing facility 90-day limit
- Removal of the home health care 100-day limit
- Removal of the pre-certification notification penalty
- Removal of the annual 60-day limit for speech, occupational, physical, and pulmonary therapy
- Coverage for mental health visits added to Doctors on Demand® services

### Health Plan Alignment Changes for 2022

- Removal of cost share waiver for the first three days of nutritional counseling
- Removal of coverage for out-of-network preventive care benefits

### Designating a Primary Care Provider (PCP)

**You and your covered dependents must designate a primary care provider (PCP), if you have not already done so.** Primary Care Providers include general or family practice physicians, internists, pediatricians, nurse practitioners and physician assistants. Women may also select an obstetrician or gynecologist as a co-care provider.

You may visit [wellmark.com/finder](https://wellmark.com/finder) to obtain your PCP's name, enrollment identification number, and organization name. Once you have obtained this information, you must enter your PCP selection in the Benefits Portal in [myDrake](#). Instructions are provided [here](#). **If you are unsure whether you need to designate a PCP, you may contact Wellmark at 800-362-2230.**

Here are some important things to keep in mind when selecting a PCP:

- You will be asked to name a PCP for yourself and all dependents you enroll in the plan.
- Members who wish to designate an obstetrician or gynecologist as a co-care provider must contact Wellmark Customer Service at 800-362-2230.
- You may change your PCP at any time by contacting Wellmark Customer Service.
- Each member enrolled in the Plan will receive an insurance card listing their designated PCP. **If you do not designate a PCP for yourself and your dependents in the Benefits Portal, Wellmark will be unable to issue your new insurance card(s) for the 2022 Plan Year.**

To ensure your claims process correctly, you will need to designate a PCP before seeking care. If Wellmark receives a claim for preventive services without your PCP on file, the claim may be denied. You may add a PCP at any time; the designation will become effective the first of the month following the addition.

### Preventive Services

Annual physical exams must be performed by your designated PCP, or a partner provider within the same health system (*e.g.*, Broadlawns, Mercy, Unity Point, Iowa Clinic etc.) if your PCP is not available. Per the Affordable Care Act, participants will not experience a cost share for preventive services obtained from in-network providers. **Preventive services obtained from out-of-network providers will not be covered by the plan.** You can find Wellmark's List of Preventive Services covered by the Affordable Care Act [here](#).

### **Coverage for Drake Employees Permanently Residing Out-of-State**

Drake employees who permanently reside out-of-state will continue to utilize Wellmark's Alliance Select network. Members will not receive a new insurance card for 2022.

### **Coverage for Employee Dependents Residing Out-of-State**

Covered dependents who reside out-of-state will have access to the Blue Choice POS network. Likewise, covered employees residing at least 90 consecutive days or more out-of-state continue to have access to the Blue Choice POS network during their travel.

If you haven't already done so, you must designate an Iowa PCP for your out-of-state dependent. After January 1, 2022, you must contact Wellmark Customer Service to request a Guest Membership and designate an out-of-state PCP for your dependent. Members may locate Blue Card providers by calling 800-810-BLUE or visiting the National Doctor and Hospital Finder at [bcbs.com](http://bcbs.com)

### **Plan Prescription Drug Benefit**

Drake's current prescription drug coverage will remain unchanged for 2022.

### **Health Plan Enrollment Instructions**

Your current participation in Drake's Health Plan will automatically be continued during 2022. If you wish to participate in the Health Plan during 2022, you must designate a Primary Care Provider in the Benefits Portal via [myDrake](#), if you have not already done so. If you wish to terminate your current coverage, you must do so in the Benefit Portal via [myDrake](#). *Summary of Benefits and Coverage* documents addressing the Health Plan's Minimum Essential Coverage and Benefits are posted [here](#).

### **DRAKE UNIVERSITY WELLNESS HEALTH INSURANCE PREMIUM DISCOUNT PROGRAM**

Employees who are enrolled in Drake's health plan and complete an annual physical with their designated PCP, are eligible to receive the wellness health insurance premium discount. This is a savings in premiums of approximately \$30 per month. To receive this discount in 2022, employees participating in Drake's health plan must complete a physical with their designated PCP between December 1, 2020 and November 30, 2021 and submit a [Physical Exam Completion Form](#) to Human Resources by December 2, 2021. This is the only option to receive the premium discount in 2022.

Besides receiving a premium discount, an annual physical is a great way to receive important health information through age and gender specific examinations, schedule recommended preventive screenings, and create a doctor-patient relationship. For more information, please contact [linda.feiden@drake.edu](mailto:linda.feiden@drake.edu).

### **DRAKE UNIVERSITY DENTAL PLAN**

**Dental contribution rates will remain unchanged for the 2022 Plan Year.** You and your eligible dependents continue to have access to Delta Dental's PPO and Premier networks, as well as services from out-of-network providers. Effective January 1, 2022, waiting periods will no longer be required for members who do not enroll upon immediate eligibility. Your current dental participation will automatically be continued during the 2022 Plan Year. If you wish to make a change, you must do so in the Benefits Portal via [myDrake](#). A summary of Drake's Dental Plan is available [here](#).

### **VOLUNTARY LIFE INSURANCE PLAN**

During the annual open enrollment period, you may elect to enroll or increase existing life insurance coverage for yourself and your eligible dependents, one benefit increment, without providing proof of good health, to not exceed the maximum life insurance benefit allowed. This provision is available

during each annual open enrollment period. Even if you do not wish to make changes, please review the beneficiary information for your Drake-sponsored (basic) and voluntary life insurance in the Benefits Portal via [myDrake](#).

<b>Insured</b>	<b>Increased Coverage Amount Allowed Without Proof of Good Health</b>
<b>Employee</b>	<b>\$25,000</b>
<b>Spouse/Partner</b>	<b>\$10,000</b>
<b>Children</b>	<b>\$2,500</b>

### **DRAKE UNIVERSITY FLEXIBLE SPENDING ACCOUNT (FSA) PLANS**

Flexible spending accounts help you save money by allowing you to set-aside pre-tax dollars through automatic payroll deduction, for qualifying expenses. This [FSA Fact Sheet](#) addresses some of the money-saving features of these plans. If you wish to participate in Drake's Health Care or Dependent Care FSA Plans during the 2022 Plan Year, **you must make a new election during the annual open enrollment period in the Benefits Portal via [myDrake](#).**

#### **Health Care FSA Plan**

The maximum contribution limit for the Health Care FSA will increase to \$2850 during the 2022 Plan Year. The Health Care FSA Plan will allow participants to **carry over up to \$550 of unused contributions to the 2022 Plan Year**. Contributions carried over, in addition to newly elected amounts, may be used to pay for eligible expenses incurred during the 2022 Plan Year. For example: Participants who elect \$2850 for the 2022 Plan Year and carry over \$550 of unreimbursed contributions will have a total of \$3400 in their Health Care FSA effective January 1, 2022.

#### **FSA Reimbursement Options**

Advantage Administrators will continue to charge a \$2.00 processing fee for reimbursement made by check. Participants may request reimbursement via direct deposit or use a debit card to avoid the check processing fee. Direct deposit information may be entered via participant online accounts, or forwarded to Advantage Administrators via US mail to P.O. Box 118, Waverly, IA 50677; via fax at 319-352-4018 or 319-352-2610; or via email at [customercare@advantageadmin.com](mailto:customercare@advantageadmin.com).

#### **FSA Debit Cards**

Current Health Care FSA participants may continue to utilize a debit card to pay for qualified expenses. Advantage Administrators will reactivate previously issued debit cards for participants requesting to utilize a card during 2022. Should your current debit card expire before or during the 2022 Plan Year, two new cards will be issued shortly before the expiration date. **All enrollees wishing to utilize a debit card must request to receive one when making an election in the Benefits Portal.** Advantage Administrators will deactivate current debit cards of those participants not electing to utilize one during the 2022 Plan Year. Debit cards are not available for Dependent Care flexible spending accounts.

#### **FSA Contribution Limits**

Election contributions must be utilized for expenses incurred during the 2022 Plan Year. Allowable contribution amounts for Drake's FSA Plans effective January 1, 2022 are as follows:

<b>FSA Annual Contribution Limits</b>	<b>Minimum Contribution</b>	<b>Maximum Contribution</b>
<b>Health Care FSA Plan (Per Employee)</b>	<b>\$120</b>	<b>\$2850</b>
<b>Dependent Care FSA Plan (Per Family)</b>	<b>\$300</b>	<b>\$5000</b>

## **ANNUAL LEGAL NOTICES**

### **CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)**

The Department of Labor requires employers who sponsor group health plans to provide information regarding premium assistance under Medicaid and CHIP to full-time employees.

### **WOMEN'S HEALTH AND CANCER RIGHTS ACT (WHCRA)**

The Federal Omnibus Appropriations Bill requires employers who sponsor group health plans to provide information regarding coverage for mastectomy breast reconstruction.

### **MEDICARE PART D NOTICE**

The Medicare Modernization Act of 2003 requires Drake University to notify Medicare eligible employees and covered dependents whether or not its Health Plan provides comparable coverage to Medicare Part D.

### **HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)**

Drake University is required by the Health Insurance Portability and Accountability Act of 1996 to provide this Special Enrollment Rights Notice for Health Insurance.

### **PRIVACY PRACTICES NOTICE**

This notice describes how medical information about you may be used and disclosed and how you can get access to this information.

To access these notices, please visit Legal Notices, Summary Plan Descriptions and Information [here](#).

## **OPEN ENROLLMENT NEXT STEPS**

You will need to visit the Benefits Portal to make benefit elections for the 2022 Plan Year. Next Step Instructions and information about how to access the Benefits Portal are available [here](#). All benefit elections for the 2022 Plan Year must be made no later than 11:59 PM on November 30, 2021.

## **MARK YOUR CALENDAR FOR THE FOLLOWING EVENTS**

### *November 4: Annual Benefits & Wellness Fair*

Drake's Annual Benefits & Wellness Fair will be held Thursday, November 4 from 9 AM to 11 AM at the Olmsted Center (Parents Hall South). This "come and go" event will provide an opportunity for you to visit with benefit representatives from Wellmark Blue Cross and Blue Shield, Broadlawns, Advantage Administrators, Delta Dental of Iowa, TIAA, Long Term Care Strategies, Principal Life

Insurance Company, Employee and Family Resources, and Drake Human Resources. There will also be wellness experts on hand, including Samantha Matt, Drake's on-campus dietitian, Drake Recreational Services, Drake Athletics, and Profile by Sanford.

*November 8: Virtual Open Forum*

Join Human Resources for a brief overview of Drake's benefit plans Monday, November 8 at 9:00 AM. Attend [here](#) via Teams. Watch your email for additional details.

**Contact Us:** Should you have questions, please do not hesitate to contact [drakehr@drake.edu](mailto:drakehr@drake.edu) or Marlene directly at: [marlene.heuertz@drake.edu](mailto:marlene.heuertz@drake.edu).