

Online Benefits Enrollment Aid

For Plan Year July 1, 2020 – June 30, 2021

For Employees of Yavapai College



The YCT Benefits Plan

The Trust offers you a choice of different benefit options to better meet your personal needs. Use this Enrollment Aid to help you with your online enrollment.

The YCT Benefits Plan offers:

- Medical (Premier, High Deductible Health Plan with a Health Savings Account, and Basic Plus)
- Dental (Comprehensive and Preventative)
- Vision
- Basic and Voluntary Life Insurance
- Short-Term Disability Insurance
- Flexible Spending Accounts (FSAs) for health care and dependent care

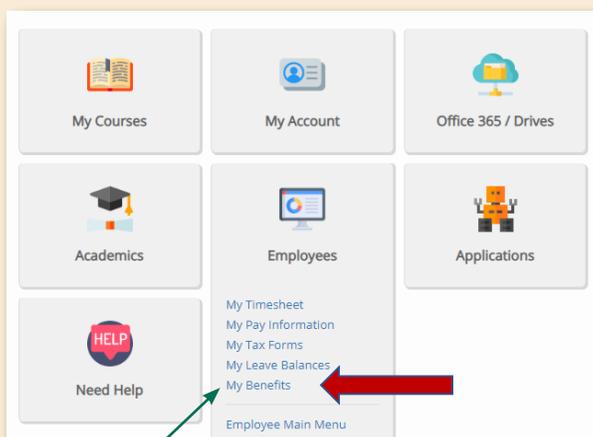
When to Enroll

You must complete your enrollment online during open enrollment, which runs May 1 through May 31, 2020, or you will not have any benefits for the 2020-2021 plan year unless you have a Special Enrollment Event or mid-year change in status.

How to Enroll

During your initial benefits enrollment period, you must enroll within 31 days of your date of hire or of becoming benefits-eligible.

1. Log in to **My Benefits** from the YC portal to review your YCT Benefits Plan options.
2. Use the **My Benefits Cost Estimator** to compare your medical plan options based on your personal medical claim history, then you can calculate your annual and monthly out-of-pocket cost for each plan and details on your employee and employer's contributions.
3. If you are covering a new dependent, during this Open Enrollment, you will need the Social Security number and date of birth for any new dependent you enroll in the Plan.
4. Consider enrolling in a Savings Program which allows you to set-aside pre-tax dollars for healthcare or dependent care expenses. HDHP participants may elect a Health Saving Account (HSA) and/or a Limited Flexible Spending Account (LFSA); Base Plus or Premier Plan participants may elect a Health Care FSA and all employees may contribute to a Dependent Care FSA. Please note: maximum contributions do apply per IRS regulations. More information is provided in the Savings Programs tab of **My Benefits**.
5. Consider supplementing your YC-provided Life Insurance with Voluntary Life insurance. All employees can newly elect, or increase, their insurance by \$10,000 (not to exceed \$250,000) without any health questions. More information is provided in the Life & Disability tab of **My Benefits**.
6. Be sure to complete your beneficiary information in **My Benefits**.
7. Watch your mailbox for your Member ID/Prescription Drug Cards before your coverage becomes effective.



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From www.yc.edu, log in to your YC portal and select **My Benefits** from the Employees section.

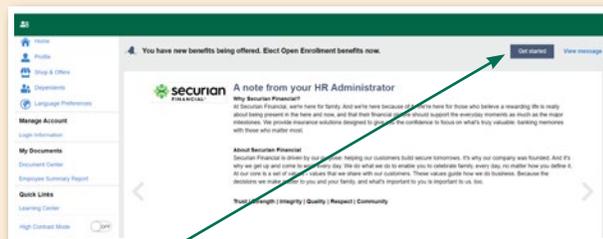


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In **My Benefits**, review your options from the main menu, and the Quick Links. You can see what benefits are offered and get more detailed information about each medical plan.

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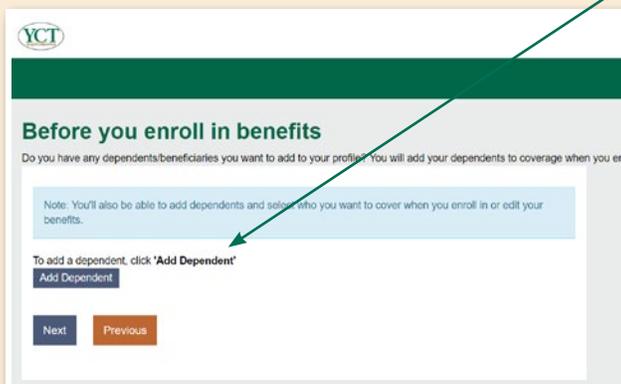
When you are ready to start your enrollment, click **Open Enrollment**.



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Click **Get started** to begin your enrollment through **My Benefits**.

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You will need the Social Security number and date of birth to enroll any **new** dependents.

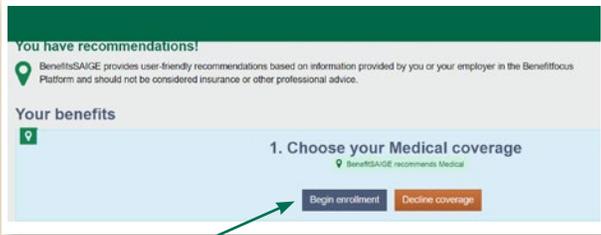
Your dependent is not enrolled in the Plan until Human Resources has verified your dependent's status.

You will need to provide a Birth or Marriage Certificate to verify your new dependent's status within 31 days of your enrollment. You can upload your scanned copy into **My Benefits**.

Be sure to enter or update your beneficiary information in **My Benefits** even if you're not electing additional voluntary coverage.

You will need the beneficiaries' name, Social Security number, and their relationship to you.

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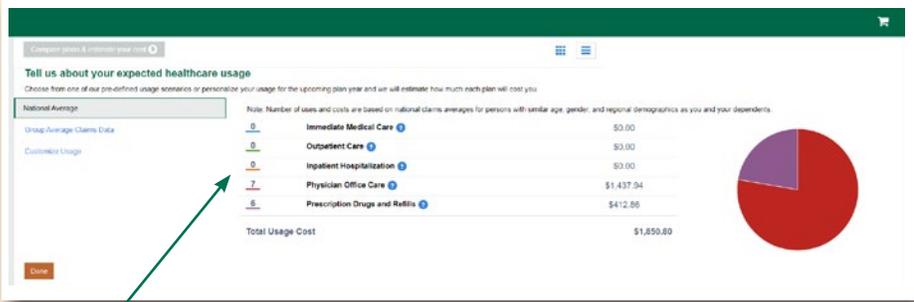
Click **Begin enrollment** to see your medical plan options. Use the **My Benefits Cost Estimator** tool to help you select the medical plan that best meets your needs.

Overview

The Cost Estimator tool is a set of interactive decision support tools to aid you in your medical benefit plan selection.

The Cost Estimator tool allows you to:

- View your healthcare usage and costs for the previous year (if available)
- View the average healthcare usage and costs of families similar to yours
- Estimate your potential healthcare usage and cost for the coming year
- Estimate tax savings of HSA or Flexible Spending Account (FSA) contributions for eligible plans
- View the estimated out-of-pocket costs for each plan
- Compare costs and plan attributes, such as deductibles, copay and out-of-pocket maximums, for up to four plans side-by-side



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Add your personalized expected healthcare usage here to see an example of estimated out-of-pocket costs.



Please use the **My Benefits Cost Estimator** tool to help you compare your healthcare costs, and to select the most cost effective medical plan for you and your family!

Estimating Plan Costs

Follow the steps below to estimate plan costs.

1. Select the Cost based on drop-down menu on the Plan Selection page to review the estimated healthcare costs.
 - **Your Usage Last Year** is the actual number of uses and associated costs incurred by you and your covered dependents over the previous year for each usage category (Emergency Room Visits, Outpatient Procedures, Inpatient Procedures, Doctor Office Visits and Prescription Drugs).
 - **The Group Average Claims** is the average number of uses and associated costs for each usage category for other employees at your company of the same gender and age band as you. Note, averages are family averages, meaning the average is based on usage by the employees and their covered dependents.
2. Select the **Customize Usage** tab to customize your estimated healthcare costs based on your experience or projected usage. For example, if you know you have an inpatient surgery in the coming plan year, you would adjust the Inpatient Hospital Procedure category to reflect this.
3. Drag the sliders to adjust the number of uses to show the related costs. Hover over the pie chart to see the percentage of costs associated with each category.
4. If available, select the **tax savings contributions** drop-down menu to estimate your potential tax savings for any plan that has a tax-savings account (such as an HSA or FSA) associated with it.
5. Enter applicable income and contribution information. You will see the total savings update as you enter amounts.
6. Click **Done** to collapse the tax information.
7. Click the **How was this calculated** link to learn more information about a specific plan's estimated out-of-pocket costs (Estimated Annual Cost).

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Comparing Medical Plans

Follow the steps below to compare medical plans side-by-side.

1. Navigate to the Medical plan selection page.
2. Select the **Compare** checkbox for the two Medical plan options, then select the **Compare plans & estimate your cost** button at the top of the page.
3. Review the plan attributes side-by-side.
4. Select a plan or click the **Return to Results** button at the top of the page to review more information about all benefit plans.

Choose your Medical plan.

	High Deductible Health Plan 2021	Basic Plus Plan 2021
	\$0.00 Semi-Monthly Cost Employer PSA Contribution \$1,284.66	\$5.00 Semi-Monthly Cost Employer Contribution \$0.00
	Selected plan	Selected plan
In-Network		
Annual Deductible (Single)	\$2,000	\$200
Annual Deductible (Family)	\$5,000	\$1,200
Individual Out of Pocket Max (OOP Max)	\$2,000	\$6,600
Annual Out-Of-Pocket Maximum (Family)	\$7,000	\$13,200
Office Visit	100% after deductible met	60%
Inpatient Hospital	100% after deductible met	90%
Outpatient Hospital	100% after deductible met	90%
Emergency Room	100% after deductible met	90%
Prescription Drugs	100% after deductible met	\$150 copay/ret then plan pays 50% <small>Generic: \$10 copay, Preferred Brand: 20% of the cost of the drug to a maximum of \$100 copay per fill Non-Preferred Brand: 50% of the cost of the drug with a \$20 minimum and \$150 copay maximum per fill</small>
Out-of-Network		
Annual Deductible (Single)	\$2,000	\$1,200
Annual Deductible (Family)	\$5,000	\$2,400
Individual Out of Pocket Max (OOP Max)	\$10,000	Unlimited
Annual Out-Of-Pocket Maximum (Family)	\$17,000	Unlimited
Office Visit	50% after deductible met	90%
Inpatient Hospital	50% after deductible met	90%
Outpatient Hospital	50% after deductible met	90%
Emergency Room	100% after deductible met	90%
Prescription Drugs	100% after deductible met <small>Non-Preferred Brand: 50% of the cost of the drug with a \$20 minimum and \$150 copay maximum per fill</small>	\$150 copay/ret then plan pays 50% <small>Generic: \$10 copay, Preferred Brand: 20% of the cost of the drug to a maximum of \$100 copay per fill Non-Preferred Brand: 50% of the cost of the drug with a \$20 minimum and \$150 copay maximum per fill</small>

8 View your semi-monthly cost for each plan option. Then you can compare plans and estimate your out-of-pocket cost.

✓ Congratulations John, you have successfully updated your benefits!

Below is a summary of your updated benefits and next steps.

Dental

Preventative Dental Plan 2024

[Join Now](#)

Helpful things to do right now

Review and print a copy of your [Benefit Detail Report](#)

More great news!

We've made several new benefits available to you throughout the year outside of Open Enrollment on the [Step & Offers](#) page. Continue on to check them out.

[Continue to next page](#)

[View and edit all benefits](#)

9 Once you have updated your benefit elections, you can review and print a copy of your elections.

Open Enrollment Complete!

You have completed enrollment for the next benefit year. To make changes to any of your benefits, select "Edit coverage".

You have recommendations!

BenefitsA&OE provides case-by-case recommendations based on information provided by you or your employer in the BenefitsHub Platform and should not be considered insurance or other professional advice.

Your benefits

- Your Medical coverage**
You have declined this benefit.

[Edit coverage](#)

[Complete Enrollment](#)

10 When you have completed your enrollment, you will see **Open Enrollment Complete!** You will still be able to edit your coverage elections until the end of the enrollment period.

