AFSCME-Covered Employees

October 17 through November 18, 2016, is when the 2017 Enrollment and Change Period will be held. Unless you have a qualified life event, this is the only time period you can make changes to your health insurance, Flexible Spending Accounts (FSAs), or life insurance. Please use this Enrollment and Change Period as an opportunity to review your benefits.

Life Events

The State realizes that life happens. When it does, your benefit coverage may need to change. Experiencing a change in your situation – like getting married, having a baby, or enduring a death in the family – can make you eligible to enroll in benefits outside the yearly Enrollment and Change Period. More information about these life events is available at the DAS website (https://das.iowa.gov/human-resources/employee-and-retiree-benefits/employees/group-insurance/health-dental-insurance-1).

Enrollment for 2017

If you do not make any changes in your health insurance during the 2017 Enrollment and Change Period, your 2016 health plan and covered dependents will remain the same and carry over to 2017.

To participate in the Health Flexible Spending Account (FSA) and/or the Dependent Care FSA, you must enroll each year in IowaBenefits. Make your benefit elections in IowaBenefits.

2017 Benefits Highlights

Highlighted below are benefits updates that affect you.

Iowa Select and Program 3 Plus: Increase in the Out-Of-Pocket Maximum. The medical maximum out-of-pocket costs for Iowa Select and Program 3 Plus’s members will increase to:

- $1,000 from $650 for single coverage
- $2,000 from $1,450 for family coverage

The out-of-pocket maximum is the dollar amount you must pay before Wellmark pays 100 percent of the eligible medical claims. The out-of-pocket maximum provides you and your family financial protection against large, catastrophic medical claims.

Dental Insurance: NOT an Open Enrollment Period. Your 2016 dental coverage will automatically carry forward into 2017. The 2017 Open Enrollment and Change Period does not allow you to make any changes to your dental coverage.
Life Insurance: New Life Insurance Provider. The Standard Life Insurance Company will be the State of Iowa’s life and long-term disability (LTD) insurance carrier effective January 1, 2017. You do not need to re-enroll in life insurance. Your current supplemental life insurance elections will carry over to the new vendor.

Benefit Elections During the Enrollment and Change Period
You can make the following changes to your benefits during the 2017 Enrollment and Change Period.

Health Insurance
- Enroll in a health insurance plan, if not currently enrolled.
- Change health insurance plan.
- Change the contract holder in a double spouse family contract.
- Add or remove eligible family members from health insurance.
- Cancel your health insurance.

Supplemental Life Insurance
- Apply to increase the amount of supplemental life insurance to the maximum per contract status.
- Decrease the amount of your supplemental life insurance.
- Cancel your supplemental life insurance.

Flexible Spending Accounts
- Enroll in the Health FSA and elect up to a maximum of $2,550 on an individual basis.
- Enroll in the Dependent Care FSA and elect up to $5,000 if married and filing a joint tax return, or $2,500 if married and filing a separate tax return.

Premium Conversion Plan
- Change whether the premiums for health, dental, and supplemental life insurance are taken pretax (before federal, state, and FICA tax) or post-tax (after federal, state, and FICA tax).

Effective Date
Benefit elections made during the Enrollment and Change Period will be effective January 1, 2017. Increases to supplemental life coverage will be effective the first of the month after DAS receives approval from The Standard Life Insurance Company.

Visit IowaBenefits to Make Elections and Changes
To make your benefit elections and changes, visit the State of Iowa’s online enrollment system, IowaBenefits (https://bfi.secure-enroll.com/go/stateofiowa). Instructions for logging into IowaBenefits are located at the DAS website (https://das.iowa.gov/human-resources/employee-and-retiree-benefits/employees/group-insurance/iowabenefits).

IowaBenefits and Social Security Numbers
Similar to last year, the State must generate a report (Internal Revenue Service [IRS] Form 1095) to the IRS on the health insurance being offered to employees and retirees.
The State must report to the IRS:

- The name, address, and Social Security number of the employee and retiree, and
- The name and Social Security number of each individual covered by the employee and retiree’s health insurance plan

The IowaBenefits system is used to complete the information on IRS Form 1095 for both you and your covered dependents.

The information in IowaBenefits (https://bfi.secure-enroll.com/go/stateofiowa) must match the Social Security information.

Please ensure all individual names and Social Security numbers are listed exactly as they are shown on the Social Security card(s).

If you need assistance accessing or updating your information in IowaBenefits(https://bfi.secure-enroll.com/go/stateofiowa), please contact your Human Resources Associate.

**Benefit Eligibility**

You are eligible to participate in the 2017 Enrollment and Change Period if you are:

- A permanent or probationary employee and
- You work the following hours per week:
  - 20 hours per week
    - Health Insurance
    - Dental Insurance
    - Flexible Spending Accounts
    - Premium Conversion Plan
  - 30 hours per week
    - Supplemental Life Insurance

**Family Members Eligible for Insurance Coverage**

Family members eligible for health and dental insurance coverage are:

- Your spouse (A husband or wife as the result of a marriage that is legally recognized in Iowa. This does not include a spouse from whom you are legally separated or divorced.)
- Your domestic partner (same sex or opposite sex)
- Your children

**Children**

A child eligible for coverage is:

- Your natural child
- A child placed with you for adoption or a legally adopted child
- A child for whom you have legal guardianship
- A stepchild
- A foster child

You may be required to provide documentation that a dependent is eligible as defined above.
Children Eligibility

Your child may be covered for health and dental insurance through the end of the year in which they turn age 26. The dependent child under age 27 can:

- Be a student or non-student
- Live in Iowa or outside Iowa
- Be unmarried or married (A dependent’s spouse is not eligible for coverage.)

Your dependent child who is an unmarried, full-time student in an accredited institution of postsecondary education may be covered regardless of age.

Your unmarried, dependent child who is totally and permanently disabled, physically or mentally, may be covered regardless of age. (The disability must have existed before the dependent child turned age 27 or while a full-time student.)

Health Insurance

You can choose one of the following health plans for 2017.

- Blue Access
- Iowa Select
- Program 3 Plus

Side-by-Side Comparison


If you have questions about a specific health service, contact Wellmark’s customer service representatives dedicated exclusively to the State at 800.622.0043.

Out-of-Pocket Maximum

The health plan’s out-of-pocket maximum is the dollar amount you must pay before Wellmark pays 100 percent of the eligible medical claims. The out-of-pocket maximum provides you and your family financial protection against large, catastrophic medical claims.

The out-of-pocket maximum includes:

- Deductible
- Coinsurance
- Copayments

The out-of-pocket maximum does not include:

- Premiums paid
- Services not covered in the State’s plan

Let’s look at an example ...

- Jack is an AFSCME-covered employee enrolled in Iowa Select, family coverage.
- Jack covers Jill, his wife, and Polly, his daughter.
- The Iowa Select benefit design for AFSCME-covered employees is:
- **Deductible** – $250 for single coverage, $500 for family coverage (The deductible applies to both inpatient and outpatient services.)
- **Office visit** - $15 copay
- **Coinsurance** – 10 percent (in-network), 20 percent (out-of-network)
- **Out-Of-Pocket Maximum (OOP)** - $2,000 for family coverage in 2017

- Jack and his family went to health care providers belonging to the Wellmark network.

<table>
<thead>
<tr>
<th>Service</th>
<th>Employee Payment</th>
<th>Total Amount Toward Out-of-Pocket Maximum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jill has an office visit with her health care provider and lab work ($150) done in the provider’s office. Jill is responsible for the $15 copay for the office visit and 10 percent coinsurance for the lab work. $15 + ($150 * 10%)</td>
<td>$30</td>
<td>$30</td>
</tr>
<tr>
<td>Jack has an office visit with his health care provider, and he is responsible for a $15 copay.</td>
<td>$15</td>
<td>$45</td>
</tr>
<tr>
<td>Polly had an accident and goes to an Urgent Care Center. The bill for the Urgent Care Center was $750. Jack is responsible for the single deductible of $250, plus 10 percent of the charge. $250 + ($500 * 10%)</td>
<td>$300</td>
<td>$345</td>
</tr>
<tr>
<td>Jack has four visits to the chiropractor, and he is responsible for $15 copays for each visit. ($15 * 4)</td>
<td>$60</td>
<td>$405</td>
</tr>
<tr>
<td>As a result of Polly’s accident, she had five outpatient physical therapy visits. The charge for each visit was $300. Jack is responsible for 10 percent of the charge. (Polly has already met the deductible with her visit to the Urgent Care Center.) $300 per visit * 10% = $30</td>
<td>$150</td>
<td>$555</td>
</tr>
<tr>
<td>Jill goes into the hospital. The hospital bill is $20,000. Jill has a $250 deductible plus 10 percent coinsurance up to the $2,000 out-of-pocket maximum. In this case, Jack’s responsibility is $1,445 because this will bring him to the family out-of-pocket maximum of $2,000. The hospital will not bill him for any covered services over this amount.</td>
<td>$1,445</td>
<td>$2,000</td>
</tr>
</tbody>
</table>

At this point, Wellmark will pick up any future claims for this calendar year for Jack and his family.
2017 Monthly Health Insurance Premiums

AFSCME-Covered Monthly Health Insurance Premiums

<table>
<thead>
<tr>
<th></th>
<th>Monthly Premium</th>
<th>State Share</th>
<th>Employee Share</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Blue Access</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>$682.00</td>
<td>$662.00</td>
<td>$20.00</td>
</tr>
<tr>
<td>Family</td>
<td>$1,598.00</td>
<td>$1,578.00</td>
<td>$20.00</td>
</tr>
<tr>
<td>Double Spouse – Contract Holder</td>
<td>$800.00</td>
<td>$780.00</td>
<td>$20.00</td>
</tr>
<tr>
<td>Double Spouse – Contributing Spouse</td>
<td>$800.00</td>
<td>$800.00</td>
<td>$0.00</td>
</tr>
<tr>
<td><strong>Iowa Select</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>$935.00</td>
<td>$915.00</td>
<td>$20.00</td>
</tr>
<tr>
<td>Family</td>
<td>$2,189.00</td>
<td>$1,861.00</td>
<td>$328.00</td>
</tr>
<tr>
<td>Double Spouse – Contract Holder</td>
<td>$1,095.00</td>
<td>$1,075.00</td>
<td>$20.00</td>
</tr>
<tr>
<td>Double Spouse – Contributing Spouse</td>
<td>$1,095.00</td>
<td>$1,095.00</td>
<td>$0.00</td>
</tr>
<tr>
<td><strong>Program 3 Plus</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>$938.00</td>
<td>$918.00</td>
<td>$20.00</td>
</tr>
<tr>
<td>Family</td>
<td>$2,196.00</td>
<td>$1,861.00</td>
<td>$335.00</td>
</tr>
<tr>
<td>Double Spouse – Contract Holder</td>
<td>$1,099.00</td>
<td>$1,079.00</td>
<td>$20.00</td>
</tr>
<tr>
<td>Double Spouse – Contributing Spouse</td>
<td>$1,099.00</td>
<td>$1,099.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

(Ask your Human Resources Associate for part-time premiums.)

Double Spouse Family Insurance Contract

If you and your spouse are both employees of the State of Iowa, you have the option of enrolling in the double spouse family insurance contract. The double spouse family insurance contract is one family health insurance plan. The total premium—made up of the state contribution and the employee contribution—is split between each spouse. One spouse is the contract holder. The other spouse is the dependent under the contract holder’s health insurance plan.

If the health insurance contract holder is an AFSCME-covered employee, the contract holder will contribute the total of $20 per month for health insurance. The contributing spouse will not contribute toward the coverage.

<table>
<thead>
<tr>
<th></th>
<th>State Contribution</th>
<th>Employee Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contract Holder</td>
<td>One-half of the total monthly premium minus $20</td>
<td>$20 per month</td>
</tr>
<tr>
<td>Contributing Spouse</td>
<td>One-half of the total monthly premium</td>
<td>$0 per month</td>
</tr>
</tbody>
</table>

Contact your Human Resources Associate before making any changes to your double spouse family contract.
Life Insurance

Basic Life Insurance

The State pays 100 percent of the premium for basic life and accidental death and dismemberment (AD&D) insurance. The basic amount of coverage is $20,000. (Age reductions apply beginning at age 65.)

Supplemental Life Insurance

In addition to the basic life insurance coverage, you have an opportunity to elect supplemental term life insurance at group rates.

<table>
<thead>
<tr>
<th>Supplemental Life Insurance*</th>
<th>Minimum Amount</th>
<th>Maximum Amount</th>
<th>Purchase in Increments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$5,000</td>
<td>$100,000</td>
<td>$5,000</td>
</tr>
</tbody>
</table>

* Age reductions apply beginning at age 65.

Supplemental life insurance premiums are based on your age and the amount of coverage you elect. You can pay the premium on a pretax or post-tax basis. The 2017 life insurance premiums are available at the DAS website (https://das.iowa.gov/human-resources/employee-and-retiree-benefits/2017-enrollment-change).

Changing Your Supplemental Life Insurance Election

If you want to increase your supplemental life insurance coverage:

- You can purchase additional life insurance from $5,000 to $100,000 in increments of $5,000. (Evidence of insurability must be provided to and approved by The Standard Life Insurance Company before the increased coverage can go into effect.) After the Enrollment and Change Period is over, The Standard Life Insurance Company will mail you a Personal Health Application. You must complete and mail the Personal Health Application back to them.
- Increases to supplemental life coverage will be effective the first of the month after DAS receives approval from The Standard Life Insurance Company.

If you want to decrease or cancel your supplemental life insurance coverage:

- You can decrease the amount of your supplemental life coverage or cancel your supplemental life insurance coverage. Your election to increase or decrease your supplemental life insurance coverage is made in IowaBenefits.

Effective Date

Decreases to supplemental life coverage made during the Enrollment and Change Period will be effective January 1, 2017. Increases to supplemental life coverage will be effective the first of the month after DAS receives approval from The Standard Life Insurance Company.
Flexible Spending Accounts

Flexible Spending Accounts (FSAs) allow you to set aside pretax dollars to reimburse you for eligible health or dependent care expenses.

When you enroll in a Flexible Spending Account, you decide how much to contribute to each account for calendar year 2017. The money is then deducted from your paycheck pretax (before federal and state income taxes and FICA taxes are deducted) in equal amounts over the course of the year. After you incur expenses that qualify for reimbursement, you submit claims (reimbursement requests) to ASIFlex (the administrator of the program) to request tax-free withdrawals from your Flexible Spending Account to reimburse yourself for these expenses.

You may elect to have your reimbursement placed directly into your checking or savings account by adding direct deposit information into IowaBenefits when you enroll.

Health FSA

With the Health FSA, certain health care expenses for you and your eligible family members can be reimbursed. Medical expenses eligible for reimbursement include most medically necessary health care expenses that are not paid through medical or dental insurance plans. Your share of health and dental insurance premiums are not eligible to be reimbursed from the Health FSA. Premiums are already made with pretax dollars.

Maximum Annual FSA Elections

The maximum annual Health FSA contribution is $2,550 per employee per plan year.

No more use it or lose it!

Up to $500 of unused health FSA amounts remaining at the end of 2017 can be carried over to reimburse medical expenses incurred during the entire calendar year of 2018.

The carryover will not reduce your 2018 election. The carryover of up to $500 is in addition to the State’s plan limit of $2,550. You can carry over up to $500 of unused funds for a total of $3,050 to be used for calendar year 2018 expenses.

A great provision is that you do not have to enroll in the next year in order to use the $500 carryover. You do have to be employed in 2018, but you do not have to enroll in the health flex plan to use your carryover dollars.

Dependent Care FSA

The Dependent Care FSA reimburses you for qualified dependent care expenses necessary for you to work, or if you are married, for you and your spouse to work. Expenses eligible for reimbursement up to the annual maximum limit include:

- Care of dependent children under age 13
- Care of adult disabled dependents

Maximum Annual FSA Elections

The maximum annual Dependent Care FSA contribution is $5,000 per household ($2,500 if you are married and file a separate tax return).
**Grace Period**

The grace period for the Dependent Care FSA allows you to incur eligible expenses in the year after the plan year ends, through March 15 of the second year. For instance, if your 2017 Dependent Care FSA is $5,000 and you incur claims totaling $4,400 in 2017, you can incur claims for $600 from January 1, 2018 – March 15, 2018, and be reimbursed from your 2017 Dependent Care FSA.

**Enrolling in Flexible Spending Accounts**

You must enroll each year in IowaBenefits to participate in either or both of the Flexible Spending Accounts.

If you are currently enrolled and are enrolling for 2017, please check your existing deposit information in IowaBenefits for accuracy. The State of Iowa encourages you to “go green” by receiving reimbursements via direct deposit and paperless notifications from ASIFlex (https://das.iowa.gov/sites/default/files/hr/fsa/documents/ASI_dir_dep_pprless_form.pdf), for the form to “go green.”

For more information about the FSA program, visit ASIFlex website (http://www.asiflex.com/), call ASIFlex at 800-659-3035, or visit DAS website (https://das.iowa.gov/human-resources/employee-and-retiree-benefits/employees/additional-benefits/flexible-spending).

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**Dental Insurance**

The year 2017 is not an open enrollment period for dental.

You cannot enroll, add any dependents, or cancel your coverage during this Enrollment and Change Period. You will have to wait until the next open enrollment period to make changes to your dental insurance.

The only exception is if you have a qualified life event that would allow you to add or remove dependents on your dental plan during 2017.

**AFSCME-Covered Monthly Dental Insurance Premiums**

<table>
<thead>
<tr>
<th>Delta Dental</th>
<th>Monthly Premium</th>
<th>State Share</th>
<th>Employee Share</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single</td>
<td>$28.68</td>
<td>$28.68</td>
<td>$0.00</td>
</tr>
<tr>
<td>Family</td>
<td>$77.06</td>
<td>$38.54</td>
<td>$38.52</td>
</tr>
<tr>
<td>Double Spouse – Contract Holder</td>
<td>$38.53</td>
<td>$28.69</td>
<td>$9.84</td>
</tr>
<tr>
<td>Double Spouse – Contributing Spouse</td>
<td>$38.53</td>
<td>$28.69</td>
<td>$9.84</td>
</tr>
</tbody>
</table>

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**Premium Conversion Plan**

If you work at least 1,040 hours per year, you have the option to pay your share of health, dental, and supplemental term life insurance premiums with pretax* dollars. Participating in the Premium Conversion Plan helps you:
• Decrease taxes
• Increase net take-home pay

All employees are enrolled in the Premium Conversion Plan at the time they are hired. Unless you have previously opted out, your enrollment will carry into 2017.

If you do not wish to participate in 2017, complete the Premium Conversion (Pretax) Plan election form (https://das.iowa.gov/sites/default/files/hr/documents/Premium_Conversion_Form_fillable.pdf) and forward it to your Human Resources Associate. You may not re-enroll until the 2018 Enrollment and Change Period, unless you have a qualifying life event (https://das.iowa.gov/human-resources/employee-and-retiree-benefits/employees/group-insurance/health-dental-insurance-1).

* The term pretax, for purposes of the Premium Conversion Plan, means "before federal, state, and FICA taxes." Your pretax premium amount will reduce the amount of wages reported to Social Security. The effect on your Social Security benefit will be proportional to the amount of total pretax premiums you pay.

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**For More Information**

If you have questions or need more information, contact your Human Resources Associate or visit the DAS website (https://das.iowa.gov/human-resources/employee-and-retiree-benefits/2017-enrollment-change).