



Open Enrollment 2024

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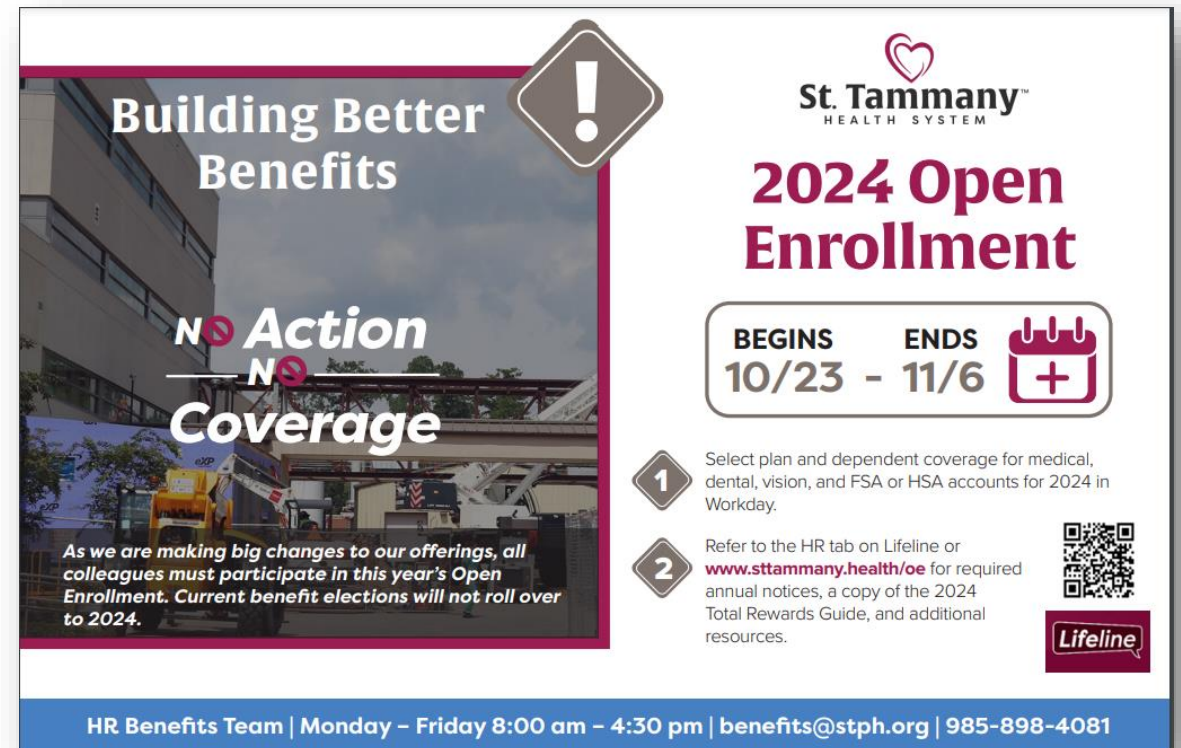


Building Better Benefits

1. Timelines and Events
2. ACTIVE ENROLLMENT
3. Team Members
4. Building Better Benefits
5. Policy Updates/Leave of Absence

Postcard – Oct 7

- Open enrollment dates and information
- QR Code for home access to...
 - Enrollment resources
 - Plan documents
 - Annual notices
- Contact information for HR



Building Better Benefits

**NO Action
NO Coverage**

As we are making big changes to our offerings, all colleagues must participate in this year's Open Enrollment. Current benefit elections will not roll over to 2024.

St. TammanySM
HEALTH SYSTEM

2024 Open Enrollment

BEGINS 10/23 - ENDS 11/6

1 Select plan and dependent coverage for medical, dental, vision, and FSA or HSA accounts for 2024 in Workday.

2 Refer to the HR tab on Lifeline or www.sttammany.health/oe for required annual notices, a copy of the 2024 Total Rewards Guide, and additional resources.





HR Benefits Team | Monday – Friday 8:00 am – 4:30 pm | benefits@stph.org | 985-898-4081

Open Enrollment – Oct 23 to Nov 6



- OPENS

- Full-Time Monday, Oct 23
- Part-Time and Per Diem, Tuesday Oct 24



- CLOSES

- 11:59pm Monday, Nov 6
- No extension

- **ACTIVE** Open Enrollment =  Action,  Coverage

- Colleague and Dependent Coverage for **Medical, Dental, Vision**, Health Savings Accounts, and Flexible Spending Accounts **will NOT rollover from previous benefit selections.**

- **Must reenroll in plans AND reselect dependents**

- Benefit Card: Manage/Enroll, Select Plan, “Confirm and Continue”

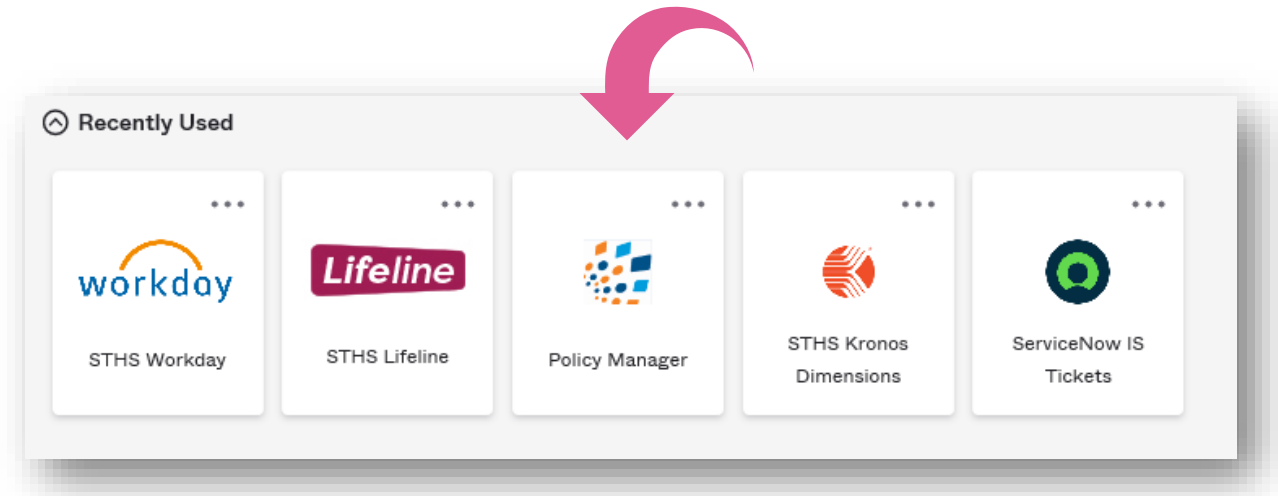
- Select dependents on next screen 

Open Enrollment – Oct 23 to Nov 6

- **ALL COLLEAGUES** must take action in Workday
 - No-Benefits? Yes
 - There is another guarantee issue of Aflac Products you must enroll or waive
 - There is a NEW Employee Assistance Program and Wellness Platform for which you will have eligibility
 - Per Diem and part-time? Yes
 - You may qualify for FT medical rates under the Affordable Care Act and must either **waive or elect** coverage

“No Benefits”

- Moving from “No-Benefits” BACK to Benefits
 - Still complete Open Enrollment as is
 - Email leader, CC Benefits@stph.org by 11/17
 - **Status and pay change 11/19/2023**, complete status change benefit event in Workday by 12/18
 - Benefits effective 1/1/2024
 - **DO THIS IF YOU ARE TURNING 26 NEXT YEAR AND WILL NEED MEDICAL COVERAGE!**
- Moving to “No-Benefits”
 - Still complete Open Enrollment as is
 - Email leader, CC Benefits@stph.org by 12/20
 - **Status and pay change 12/31/2023**
 - Benefits end 12/30/2023
 - **PTO pays out, EIB is lost**



Open Enrollment Support

- Schedule of information tables will be posted on Lifeline and sent to leaders to post
 - One-day computer lab: October 30th in Folsom Room
 - Benefits by the Board Room
 - Last Minute Lobby
- 1:1 Questions and Enrollment Support
- Lifeline—Lifeline—Lifeline





HR Team Update

New HR Benefit Team Members

KAT REYES

- Started with us in June, replacing Mark Moss as Benefits Analyst
- Same Phone and Email: #4081 and benefits@stph.org
- 10+ years in healthcare, 3 years in Human Resources
- Responsible for all things benefits: New Hires, qualifying events, reporting and documentation, etc.

GAGE FELTES

- Starting with HR on 10/9/2023 as HR Generalist replacing Ellen
- Same Phone and Email: #4041 and LOA@stph.org
- Clinical background in occupational health and clinic
- Responsible for all leave management, workers' comp post-claim management, assisting Emp Health with new hire drug screenings, etc.



Transformation in Progress



2024 Colleague Total Rewards Guide

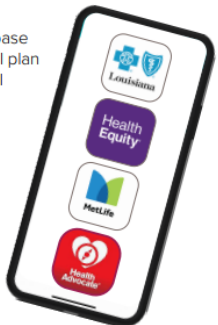
JANUARY 1 - DECEMBER 31, 2024

BUILDING BETTER BENEFITS

New & Noteworthy

- » **Premiums for 2024:** For the first time in 3 years, STHS will have a mild, 2%, premium increase for colleague medical plans. This is paired with broader network access (see next bullet point), lower in-network deductibles, and richer co-insurance benefits. Dental premiums are only higher for the new High Plan. Vision premiums have increased slightly.
- » **Medical Plan Administered by Blue Cross Blue Shield of Louisiana:** Starting on January 1st, the medical benefits will be administered by Blue Cross Blue Shield of Louisiana. Some of your benefits like deductibles and copays are a little different than they have been in the past and you'll be accessing new networks. More details can be found on page 6.
- » **St. Tammany Services:** If you seek services at St Tammany Health System, you will enjoy the richest benefit plan with the lowest out of pocket costs. This "Enhanced" tier offers a 72% discount at STHS facilities.
- » **Tier 1: Blue Connect Network:** If you utilize the Blue Connect network, you will receive Tier 1 benefits. Blue Connect providers can be found at www.bcbsla.com/find-a-doctor/local-provider. Please select the "Blue Connect HMO/POS OR Blue Connect EPO" network. This is the tier you will now find all Louisiana-based Ochsner facilities and providers, as well as partner facilities and providers such as the St. Tammany Cancer Center, Slidell Memorial Hospital and Physicians Network, Pelican Urgent Care-Slidell, Ochsner-Baton Rouge, Ochsner LSU Health-Shreveport, and more.
- » **Tier 2: BCBS National PPO Network:** If you seek services from a Blue Cross network provider who is not in the Blue Connect network, you will receive Tier 2 benefits. In this tier, there will be higher deductibles and out-of-pocket maximums. Check out tips in the telemedicine section for seeking medical care while traveling.
- » **Tier 3: Out-of-Network:** If you seek services from someone who is not in the Blue Cross Network, you will receive Tier 3 benefits.
- » **The HR Intranet is now on Lifeline:** You can locate a variety of Total Rewards (Benefits and Compensation) resources from your desktop or the mobile app, as well as all the benefit program links.

- » **New Wellness Platform and Employee Assistance Program:** All part-time and full-time colleagues will now be eligible for a brand new well-being experience; complete with challenges, access to well-coaching, and an interactive well-being platform in addition to EAP services. We can't wait to roll this out in January.
- » **New Medical ID Cards:** You will now have **two** ID cards. One will be your Medical ID Card from Blue Cross and the other will be your Pharmacy ID Card from MedImpact.
- » **Flexible Spending Accounts:** If you would like to participate in the FSA or Dependent Care FSA in 2024, HealthEquity will provide those benefits to you. You will still use your remaining 2023 FSA funds through HealthComp within the existing timelines and deadlines for use.
- » **Health Savings Accounts:** For those who participate in the High Deductible Health Plan, your HSA accounts will now be with HealthEquity. These new HSA accounts even allow for investment opportunities. Information on rolling over existing HSA accounts can be found on Lifeline.
- » **Dental & Vision Plans with MetLife:** Starting in January, MetLife will be the provider of your dental and vision benefits and you should utilize their in-network providers in order to receive the best benefit. More details can be found on page 11. Dental and Vision coverage will not have cards. You will use your birth date and SSN at the providers office to verify coverage.
- » **Dual Option Dental Plan & The Addition of Adult Orthodontia!** You will now have the option between a base dental plan and a buy-up dental plan. The buy-up dental plan includes orthodontia for children and adults. Both dental options will now offer coverage for **dental implants** as major services.



Who are our vendors?

	<u>2023</u>	<u>2024</u>
Medical	HealthComp (formerly Gilsbar)	Blue Cross Blue Shield of LA
Dental	HealthComp (formerly Gilsbar)	MetLife- with network discount
Vision	VSP	MetLife- Superior Vision Network
Health Savings Accounts	HomeBank	HealthEquity
Flexible Spending Accounts	HealthComp (formerly Gilsbar)	HealthEquity
COBRA	HealthComp (formerly Gilsbar)	HealthEquity
EAP	Lifeworks	Health Advocate
Wellness	Gilsbar Wellness (ended 2022)	Health Advocate

Plan Feature	High Deductible Health Plan (HDHP)				Traditional Plan			
	Enhanced Tier 1: St. Tammany Services	Tier 1: Blue Connect Network	Tier 2: National BCBS PPO Network	Tier 3: Out-of-Network	Enhanced Tier 1: St. Tammany Services	Tier 1: Blue Connect Network	Tier 2: National BCBS PPO Network	Tier 3: Out-of-Network
Annual Deductible (deductible must be met before plan begins to pay)								
<i>St. Tammany Services and Tier 1 deductibles cross accumulate. Tier 2 and Tier 3 deductibles are separate.</i>								
Individual	\$1,600	\$2,500	\$8,000	\$8,000	\$500	\$1,200	\$3,600	\$9,100
Per Person Deductible	\$1,600	\$2,500	\$8,000	\$8,000	\$500	\$1,200	\$3,600	\$9,100
Overall Family	\$3,200	\$5,000	\$8,000	\$16,000	\$1,000	\$2,400	\$7,200	\$18,200
Co-Insurance	HSA from STHS: \$250 / \$500							
The Plan Pays	90%	80%	50%	50%	90%	80%	50%	50%
Annual Out-of-Pocket Maximum								
Individual	\$3,000	\$6,000	\$8,000	Unlimited	\$3,500	\$6,000	\$9,450	Unlimited
Per Person Out-of-Pocket Maximum	\$6,000	\$8,000	\$8,000	Unlimited	\$3,500	\$6,000	\$9,450	Unlimited
Overall Family	\$6,000	\$12,000	\$16,000	Unlimited	\$7,000	\$12,000	\$18,900	Unlimited
<i>RX Out-of-Pocket Maximum: Prescription drug copayments and expenses will apply to the Tier 1 Blue Connect out-of-pocket maximum.</i>								
Office Visits								
Primary Care / Specialist	Plan pays 90%*	Plan pays 80%*	Plan pays 50%*	Plan pays 50%*	\$15 / \$15 copay	\$25 / \$40 copay	Plan pays 50%*	Plan pays 50%*
Urgent Care	Plan pays 90%*	Plan pays 80%*	Plan pays 50%*	Plan pays 50%*	\$25 copay	\$50 copay	Plan pays 50%*	Plan pays 50%*
Preventive Care	Plan pays 100%, no deductible	Plan pays 100%, no deductible	Plan pays 50%*	Plan pays 50%*	Plan pays 100%, no deductible	Plan pays 100%, no deductible	Plan pays 50%*	Plan pays 50%*
Emergency Facility** Visit (copay waived if admitted)	\$150 copay then 90%*	\$150 copay then 80%*	\$150 copay then 80%*	\$150 copay then 80%*	\$150 copay			
Hospital/Facility Inpatient ¹ (Precertification required)	Plan pays 90%*	Plan pays 80%*	Plan pays 50%*	Plan pays 50%*	Plan pays 90%*	Plan pays 80%*	Plan pays 50%*	Plan pays 50%*
Hospital/Facility Outpatient Expenses	Plan pays 90%*	Plan pays 80%*	Plan pays 50%*	Plan pays 50%*	Plan pays 90%*	Plan pays 80%*	Plan pays 50%*	Plan pays 50%*
Professional Services: PCP / Specialist	Plan pays 90%*	Plan pays 80%*	Plan pays 50%*	Plan pays 50%*	Plan pays 90%*	Plan pays 80%*	Plan pays 50%*	Plan pays 50%*
Professional Services: Specialist	Plan pays 90%*	Plan pays 80%*	Plan pays 50%*	Plan pays 50%*	Plan pays 90%*	Plan pays 80%*	Plan pays 50%*	Plan pays 50%*

"ologists"

Blue Cross Blue Shield of LA- FAQ

Can I keep my current provider?



Yes. STHS employed providers will be STHS Services/Enhanced Tier 1 and there is still a 72% colleague discount off facility services



Blue Connect Tier 1: STQN and ALL of Louisiana Ochsner and their other partners will be Tier 1. This now includes all OHS NOLA Metro locations, St. Tammany Cancer Center, Slidell Memorial Hospital and Physicians Network, OMC-Northshore, OHS-LSU Shreveport, Ochsner Medical Center- Baton Rouge, Physical Therapy throughout parishes. All “ologists” at STHS are confirmed to be in Blue Connect so their coverage will remain at the same level as it has been.



BCBS National PPO Tier 2: There is a separate deductible for these providers. As a self-funded plan, we pay our own claims. The broader the network, the **less control we have on the cost of the bandaid**. Steering members to STHS Services and the Blue Connect network keeps claims cost under control and colleague premiums lower.

What about premiums?

- There will be a 2% increase to the Medical premiums. Current \$ X 1.02 = new. That equates to \$1.00 for every \$50 you are currently paying. 2024 Colleague Total Rewards Guide is on Lifeline and at QR code.

I live/I have a dependent living out of the Covington/LA area, how will this work?

- The tiers will work the same way for all colleagues and their dependents in LA and in MS south of Hwy 84.
- If you are currently listed as an out-of-area member/dependent, we are working on specific instructional communications for colleagues/dependents living in other states.
- We have tips and tricks on accessing care while traveling as well. Stay connected on Lifeline!

MetLife : Dental & Vision www.metlife.com

Provider Network: MetLife PDP Plus

Standard Plan

- \$1500 Max Annual Benefit
- 100% preventative coverage
- 80% basic services
- 80% major services
- NEW- Implants covered under Major
- No Ortho

High Plan

- \$2000 Max Annual Benefit per person
- All of the above, PLUS...
- Major services covered at 80%
- NEW- Orthodontia for all ages
- NEW- Implant coverage

Provider Network: Superior Vision

- Frequency
 - Exam 12-months
 - Lens 12-months (for Glasses or Contacts)
 - Frames 24-months
- Exam Allowance/Copays
 - \$10 Exam
 - \$30 Standard contact lens fitting
- Frame Allowance
 - NEW: \$130 + 20% off balance
- Lens Allowance
 - Single, Bifocal, Trifocal, Lenticular- \$25 materials copay
- Contacts Allowance
 - NEW: \$130 + 10% off balance
 - Medically Necessary: covered

MetLife: Dental & Vision www.metlife.com

Can I keep my current dental provider?

- **Yes.** All providers will be paid based on 90% of reasonable and customary. If you have a non-network provider, you may be responsible for the balance of the bill. Talk to your provider's office about how they handle "Balance Billing".

My child is already in braces, what will happen?

- We will be coordinating with HealthComp to transition existing ortho members' history to MetLife. If you haven't started the process yet, you may want to wait until January 1st for an ortho consult. (HSA/FSA funds are great for this)

Will we get new cards?

- MetLife does not provide membership cards for Dental/Vision in the mail. You may print a card by registering on the MetLife website or simply give your SSN to the MetLife provider of your choice at the time of your appointment.



HealthEquity

Flexible Spending Accounts (FSA)

Two Types

- Medical FSA
 - Use with Traditional Plan, those not eligible for HSA on HDHP, or not enrolled in our medical plan.
 - New cards will be issued in late December
- Dependent Care FSA
 - Childcare/Elder care expenses
 - No debit card

Health Savings Account (HSA)

- For use with High Deductible Health Plan only
- Not eligible if enrolled in Medicare (use FSA instead)
- Investment options will now be offered for balance > \$1000
- New cards will be issued
- Option to rollover balance from HomeBank

COBRA: Initial notices to new colleagues, eligibility notices to former colleagues. Will now support online payments.

Health Advocate

Employee Assistance Program (EAP) & Wellness Platform



- 24/7 access to resources covering a variety of mental health and well-being needs for our colleagues
- 2025 Wellness Incentive requirements and eligibility TBD by 1/1/2024
- All FT and PT colleagues, including No-Benefits and those not on Medical Plan, will have access to resources and support

Health Advocate

NEW! Colleague Wellness & Employee Assistance Platform: Health Advocate



Health Advocate's Well-Being Program meets our colleagues no matter where they are in their journey to health and well-being. The program is carefully constructed to focus on every aspect of well-being through four pillars.

Be Well | Be Balanced | Be Connected | Be Successful

At the heart of our program is a state of the art digital experience, which consists of a website and mobile app.



Colleagues have access to tools and resources that inspire behavior change, motivate skill building and increase self-efficacy.

- › Personal Health Profile
- › Personal Pathfinder
- › Personal Pathways
- › Workshops & Pulse Checks
- › Challenges & Trackers
- › Additional Features

Direct Access to Wellness Coaches coming 1/1/2024!

Health Advocate's EAP+ Work/Life solution takes a flexible, "whole person" approach to behavioral health and well-being support. It begins by offering a strategic combination of high-tech digital access and live support from experienced EAP clinicians so they can connect colleagues to the most appropriate care.



Digital engagement

The digital experience is inclusive and easy to navigate, with multiple ways to access services, browse and reach your optimal well-being.

- › Personalized assessments, checklists
- › Schedule online counseling, coaching
- › Instant navigation to digital therapy
- › State-specific Legal Center
- › Financial Fitness

Every call to the program is answered by an in-house staff of Care Managers that includes Employee Assistance Program (EAP) Professionals and Work/Life Specialists for confidential help with personal challenges, or work and life balance support. **Support is available 24/7/365.**

Contact information coming 1/1/2024!

Be Well

- Monthly Newsletters
- Cross-functional Committee
- Yoga Station in Recharge Room
- More exercise station installs coming
- Holistic Be Well policy coming for 2024!
- Send ideas and inspiration to benefits@stph.org

Don't Forget About...

Aflac

- Accident
- Critical Illness
- Hospital Indemnity



Corestream

- LegalEase Prepaid Legal
- Nationwide Pet Insurance
- Allstate ID Theft
- Home/Auto/Extended Warranty
- Kashable
- Purchasing Power
- Discount Program



Financial Wellbeing

- Voya Beneficiaries Online
- Empower and Corebridge
 - 2023 added ROTH options
 - Beneficiaries Online
 - Sign-up or make changes year round
- DailyPay
- Vizient Discounts
- Tickets at Work
 - Now has cruise specials



Qualifying Events

30-DAYS TO MAKE CHANGES

- Must make changes in Workday and upload documentation

BETWEEN OCT 23 & DEC 31

- Email documentation to benefits@stph.org
- HR will open you event for you

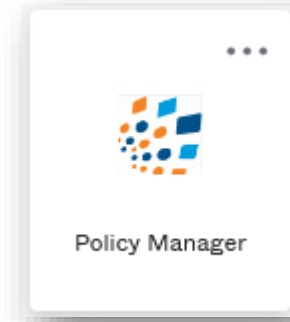




HR Policy Update- Highlights

Policy Manager (new)

- Family and Medical Leave Act (FMLA)
 - Updated with Lincoln processes
 - Denial of FMLA is not a denial of all types of leave
- Louisiana Leave Laws
- Americans with Disabilities Act (ADA)
 - Interactive Process: Request, Provider Documentation, Discussion with department
 - May or may not be able to work during the process
 - 15 days to provide medical documentation
- Occupational Injury and Illness
 - Follow Colleague/Supervisor Procedures in policy
 - Any worker's compensation injury/illness with "lost time" more than 7 days goes through Lincoln for a leave request as well
 - Notify LOA@stph.org and HR will notify Lincoln and handle Kronos



Interim RTW Guidelines

GENERAL ILLNESSES



UNPLANNED: 5 CALENDAR DAYS OR LESS

Covid, Flu, Stomach issues, Fever, Headaches, etc.

1. Contact your immediate supervisor to report absences
2. If you have **REPORTABLE** symptom(s) according to Policy IPEH 0013 (see Policy Manager) contact Employee Health and follow CDC guidelines (ex. fever 100.4+, vomiting, diarrhea, open and actively draining skin condition, known exposure to infectious disease and showing symptoms)
3. Colleague Wellness Clinic is an option for treatment
4. No return to work (RTW) is required,

LEADERS: Refer colleagues to Lifeline Leave/FMLA Packet for FMLA rights. FMLA applies to ALL, Lincoln determines eligibility. **RTW is NOT needed** for illness related absences of 5 calendar days or less.



Leave of Absence/FMLA Packet

Contact Information (*Email Preferred)

Employee Health*

employeehealth@stph.org
985.898.4591

HR Leaves/Benefits*

LOA@stph.org
benefits@stph.org
985.898.4081/4089

Colleague Wellness Clinic Appointment

985.898.4001

Effective 8/23/2023



Leave of Absence/FMLA Packet

SERIOUS ILLNESSES, HOSPITALIZATIONS, INJURIES



PLANNED OR UNPLANNED:

Illness with repeat visits/treatments, chronic conditions, hospitalizations, injuries, OP surgeries

1. Contact your immediate supervisor to report absences **AND** contact Lincoln Financial Group to initiate a leave request (HR and your dept have business cards)
2. **READ and FOLLOW DIRECTIONS** from Lincoln
3. **Return to Work form must be emailed to HR via LOA@stph.org** at least 2 business days prior to your return. **DO NOT copy your leader.**

LEADERS: At day 6 of an absence, if you have not received a Lincoln notice about your colleague, send absence details to HR via email to LOA@stph.org. HR will initiate on their behalf. **On or after day 6, Do not allow anyone to work without clearance from HR/LOA@stph.org.**

Requesting FMLA or a leave of absence?

Call Lincoln at 877-628-5222
Monday through Friday, 8:00 a.m. – 10:00 p.m. Eastern
Or visit MyLincolnPortal.com
Use the code: STHS



Visit MyLincolnPortal.com any time to:

- Initiate a claim
- View claim status
- Upload requested documents
- Communicate with your claims specialist

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LW-3907412-11001 PDF 1/22 201 Order code: AM-LOAWC-BC001

Updates are coming to Absenteeism and Infection Prevention

How to Report a Claim/Leave

Requesting FMLA or a leave of absence?

Call Lincoln at 877-628-5222

Monday through Friday, 8:00 a.m. – 10:00 p.m. Eastern

Or visit [MyLincolnPortal.com](https://mylincolnportal.com)

Use the code: STHS



Visit [MyLincolnPortal.com](https://mylincolnportal.com) any time to:

- Initiate a claim
- View claim status
- Upload requested documents
- Communicate with your claims specialist














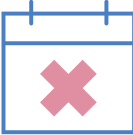


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LCN-3937412-113021 PDF 1/22 **Z01 Order code: AM-LOAWC-BCD001**



Colleague Responsibilities

-  **Report** their absence to STHS 
-  **Contact** Lincoln to report their absence (via phone or web) 
-  **Read** their letters from Lincoln, noting Actions Items and Next Steps 
-  **Respond** to their Lincoln Claims Specialist when contacted for any information 
-  **Provide** a signed authorization form to their physician 
-  **Return** necessary forms or other documentation to Lincoln when required 
-  **Keep** STHS and Lincoln informed of their expected return to work date 
-  **Make** sure your **personal email is in Workday** for efficient communications 



Thank you!



sttammany.health/oe



sths.corestream.com

