Health and Dental Insurance

Frequently Asked Questions

What is the difference in services between Health Insurance Option 1 and Option 2?

The difference is the maximum deductible amount.

Option 1: deductibles are \$500 for a single and \$1000 for a family (spouse and children).

Option 2: deductibles are \$1000 for a single and \$2000 for a family (spouse and children).

All other benefit services are the same.

What is a deductible?

A deductible is an annual dollar amount, which the employee must pay first before the insurance company starts to pay.

Deductibles incurred in April, May, and June will be applied towards the deductibles for the plan starting July 1.

Example: (Based on single tier, Option 1) Prior to April 1, you incurred \$130 of your \$500 deductible, and then in the months of April, May and June you incurred an additional \$70 of deductible. The \$70 will be applied to the \$500 deductible starting July 1. Meaning between July 1 and June 30 of this coming fiscal year you will need to pay \$430 before moving to co-insurance.

What is co-insurance?

Co-insurance is the percentage of costs you pay after your deductible.

Example: (After you have met your deductible)

Incurred allowable charge is \$100. You pay 20% of \$100, or \$20. BCBS pays \$80.

What is a co-pay?

A co-pay is a fixed amount you pay for a covered health care service.

Example: Office call co-pay is \$25

Co-pays are not credited towards either your deductible or co-insurance. Additional services performed at the doctor's office may have additional costs, e.g. blood tests, etc.

What is the maximum out of pocket limit?

Maximum limits are \$5,000/single and \$10,000/family

These limits are the most you have to pay for covered services in a plan year. After, you spend this amount on deductibles, co-insurance, and co-pays. BCBS must pay 100% of the costs of covered benefits.

Example:

\$500 deductible

\$1,000 co-insurance

\$1,500 out of pocket total

Meaning your co-pays would make up the difference between \$5,000 and \$1,500 = \$3,500. With the benefits services covered by the health plan meeting the maximum limit may be difficult.

When does my benefit year start?

Your benefit year starts every July 1.

What happens after I've met my heath deductible and co-insurance?

After you reach the maximum amounts for health deductibles and co-insurance, BCBS will pay 100% of allowable charges.

What are allowable charges?

An allowable charge is the maximum dollar amount BCBS will reimburse a provider for a specific service.

Will our dental coverage change along with the health coverage for fiscal year

2019? No the college's dental plan is a stand-alone plan with no changes to benefits.

Will I need to complete the Open Enrollment Selection Form even though I will not be insured through the college?

Yes, the college is required to maintain records for those employees eligible but not insured through the college.

May I enroll in the health insurance without the dental insurance?

Yes, since both plans are stand-alone plans, the employee may select both or just the health or dental.

May I enroll if I'm currently not insured through the college's plan?

Yes, a full-time employee may enroll during open enrollment. Other than open enrollment, a qualifying event due to a status change may allow you to enroll.

May I make changes to my health insurance?

Yes, a full-time employee may make changes during open enrollment. Other than open enrollment, a qualifying event due to a status change may allow a change to your coverage.

What is the type of health plan?

The health plan type with BCBS will be a "PPO," Preferred Provider Organization. You will need this information when searching the BCBS provider directory for contracted providers. BCBS Provider directory is located at www.bcbsks.com front page towards the top.

What is the cost for each Option?

Option 1: \$500/\$1000 Deductible			
	Employee	Employer	
Coverage Tier	Cost	Cost	
Single	\$115.00	\$702.77	
Family	\$764.00	\$1,088.88	

Option 2: \$1000/\$2000 Deductible			
	Employee	Employer	
Coverage Tier	Cost	Cost	
Single	\$87.50	\$704.43	
Family	\$714.00	\$1,080.30	

What is the cost of dental insurance?

Dental			
	Employee	Employer	
Coverage Tier	Cost	Cost	
Single	\$ 5.00	\$38.34	
Family	\$36.00	\$61.28	