

Benefits of Caring

spring 2019 newsletter

Did You Hear the News? Spring is in the Air!

Sunnier days aren't the only newsworthy topic. Read this newsletter to find information on the rich benefits and discounts offered to you as a CHS employee.

- On this page, find out where to go for information regarding our benefits plans and learn about the great work happening at the Long Island Gianna Center for Women's Health & Fertility.
- Page 2 provides answers to CHS employees' most asked questions.
- Page 3 reviews the Tuition Assistance program and informs you on how to report a leave of absence.
- Page 4 lets you know how to request and print any new ID cards you need to receive care.
- Page 5 outlines what to do if you have a qualified status change as well as details some of the documents you may need to provide when adding dependents to your benefits.

Gianna of Long Island Center for Women's Health and Fertility

In collaboration with the Diocese of Rockville Centre, CHS operates the Long Island Gianna Center for Women's Health & Fertility. The center delivers highly specialized restorative reproductive medicine (RRM) in accordance with Catholic teaching. This innovative program was inspired by St. Gianna Beretta Molla, a wife, mother and physician who heroically chose to sacrifice her own life to save her unborn child.

Located at 661 Deer Park Avenue, Babylon, the initiative incorporates the Creighton Model FertilityCare™ System and NaProTECHNOLOGY™, both of which are central to the scientifically based RRM. The program enables women across the region to get treatment that upholds the sanctity of life and honors the dignity of procreation. At the Gianna Center, exceptional, holistic medical care is given to women of all ages, and male infertility is successfully treated, too.

Go to www.chsli.org/gianna-center-long-island for a complete list of services.

Available to women and couples of any faith, the Gianna Center can be reached at 631-376-3232.

Want to Compare Health Plans and More? Visit the Benefits Information Site.

Visit www.benefitsquest.com/CHSLI to see expanded benefits information that provides a more in-depth look at eligibility requirements, medical plan differences, key benefit terminology, voluntary benefit offerings and more. The website is your resource to learn about our plans, so you can make informed benefit choices.

You can also access reimbursement and claims forms, vendor materials, FAQs, and more. Be sure to check your confirmation statement to review your 2019 Open Enrollment benefit elections.

www.benefitsquest.com/CHSLI



Because You Asked

You have questions, and we have answers. Here are some of the questions we've received about benefits in 2019.

WHEN DOES MY DEPENDENT AGE OUT?

- Our **medical plans** cover dependent children until the end of the year in which they turn age 26, and any age if they are physically or mentally disabled and depend financially on the eligible employee.
- Our **dental plans** cover dependent children until the end of the year in which they turn age 25, and any age if they are physically or mentally disabled and depend financially on the eligible employee.
- Our **enhanced vision** coverage through Blue View Vision is offered until the end of the year in which your dependent children turn age 25.
- Our **dependent life** insurance benefit is offered for unmarried dependent children 14 days of age until the end of the year in which they turn age 26.
- Our **voluntary benefit plans** are offered until the end of the year in which your dependent children turn age 26.

For enrollment information online, visit www.benefitsquest.com/chsli/ and click on Enrollment Materials > Enrollment Eligibility.

HOW DOES THE MEDICAL SELECT PLAN WORK?

The CHS Select plan is designed for employees who are comfortable receiving care for themselves and their families at CHS facilities and by CHS Physician Partner Providers. It also includes Mt. Sinai Hospital in Manhattan and the Empire physician network, so you never have to worry about having access to services that are not provided by CHS.

You don't need to choose a Primary Care Physician (PCP) to coordinate your care. There are no out-of-network benefits offered under this plan.

If your spouse is offered coverage by his/her employer, **you may not enroll him/her** in the CHS Select plan.

For plan information online, visit www.benefitsquest.com/chsli/ and click on Benefits > Medical & Rx.

HOW DO I ADD DEPENDENTS DUE TO A QUALIFIED STATUS CHANGE?

If you have a qualified status change, you must contact MyHR within 31 days of the event. You must also send in documentation with proof of the event (i.e. proof of gain/loss of other insurance, marriage certificate, death certificate, etc.). **Note: Newborns are NOT automatically added to your coverage.**

See page 5 of this newsletter for information on how to provide appropriate documentation for your newly enrolled dependents.

For status change information, go to www.benefitsquest.com/chsli/ and click on Enrollment Materials > Enrollment Eligibility.

WHAT'S THE DIFFERENCE BETWEEN BASIC VISION COVERAGE COMPARED TO THE BUY UP OPTION?

Vision coverage is included with your medical plan coverage at no additional cost. You have the option of choosing the buy up option, Blue View Vision Plus, which you pay for through payroll contributions. You may enroll in this plan even if you do not enroll in medical plan coverage. Under the Blue View Vision Plus plan, you can receive a routine eye exam every 12 months, as well as allowances and discounts not available on the basic plan.

To compare vision plans online, visit www.benefitsquest.com/chsli/ and click on Benefits > Vision.

WHAT IS THE DIFFERENCE BETWEEN IN- AND OUT-OF-NETWORK BENEFITS?

The main difference between in- and out-of-network benefits is the dollar amount you pay to receive coverage. Availability and the amount you pay varies from one medical plan to another. For example, if you are enrolled in the CHS Select Plan or the Empire EPO plan, you do not have the option of going out-of-network. Under the Empire PPO and POS plans, you do have the option of seeking out-of-network care, but will be required to meet a higher deductible and have increased coinsurance. Choosing a plan that allows out-of-network treatment may only be the right option if you are unable or prefer not to receive in-network care. It's important to note that in-network means in the Empire network, which includes both Tier 1 CHS facilities and providers, as well as Tier 2 Empire facilities and providers.

To compare your benefits in- and out-of network online, visit www.benefitsquest.com/chsli/ and click on Benefits > Medical & Rx.

WHY SHOULD I SEEK CARE WITHIN THE CHS PHYSICIAN PARTNERS NETWORK?

When you choose a physician in the CHS Physician Partners network, you can rest assured knowing that you're receiving the best care at the lowest copay. Copays for Physician Partner Providers are considered Tier 1, and are therefore \$0 for primary physician and specialist office visits, preventive care, and even inpatient and outpatient care.

To see your savings at CHS Physician Partners (Tier 1), visit www.benefitsquest.com/chsli/ and click on Benefits > Medical & Rx.

Wondering who's included in the Physician Partners Network? To view the CHS physician partners directory, visit www.empireblue.com/CHS and click **CHS Physician Partners Directory** under **Tools and Information**.

Because You Asked, cont.

WHERE DO I GO TO CONFIRM MY BENEFITS COVERAGE?

Visit the benefits information site at www.benefitsquest.com/CHSLI to view confirmation of your benefits elected during the 2019 Open Enrollment period. Any changes made since the 2019 Open Enrollment period (for example, due to a Qualified Status Change, Dependent Eligibility Verification, EOI approval) will not be reflected on this Confirmation Statement.

To download your confirmation statement, visit www.benefitsquest.com/chsli/, click on the “Benefits Enrollment & Confirmation Statement” button, and follow the prompts to log into the portal with your CHS Network credentials.

HOW DO I SUBMIT EVIDENCE OF INSURABILITY (EOI)?

You should have received an EOI packet from Prudential if you newly submitted an election, or made a change to your election that is subject to EOI, for Supplemental Employee Life Insurance, Spouse Life Insurance, Short Term Disability, and/or Long Term Disability during Open Enrollment. If you never received your packet and believe you need to provide this information, please contact Prudential directly at 1-866-439-9026.

To learn about EOI online, visit www.benefitsquest.com/chsli/ and click on Benefits > Life & Disability.

HOW DO I SIGN UP FOR DIRECT DEPOSIT AND/OR AUTO REIMBURSEMENT FOR MY FLEXIBLE SPENDING ACCOUNT?

Please call Baker Tilly at 1-800-307-0230, Prompt 9 or visit www.myflexdollars.com for questions regarding your FSA accounts.

To learn more about reimbursement accounts and eligibility, visit www.benefitsquest.com/chsli/ and click on Benefits > FSA.

Tuition Assistance

Catholic Health Services of Long Island encourages all employees to take advantage of continuous learning opportunities to grow professionally as well as to enhance their skills and knowledge. CHS offers pre-paid tuition assistance to benefit-eligible employees for approved undergraduate, graduate, post-graduate or certification courses offered at an accredited college or university.

- Certificate programs must be related to the employee's current position or afford the employee an opportunity for advancement in their current department
- Courses taken must be part of the chosen degree program to qualify for reimbursement
- Employee must have completed six months continuous employment prior to course commencement
- Part Time employees are eligible for a pro-rated amount in accordance with their Full-time Equivalent

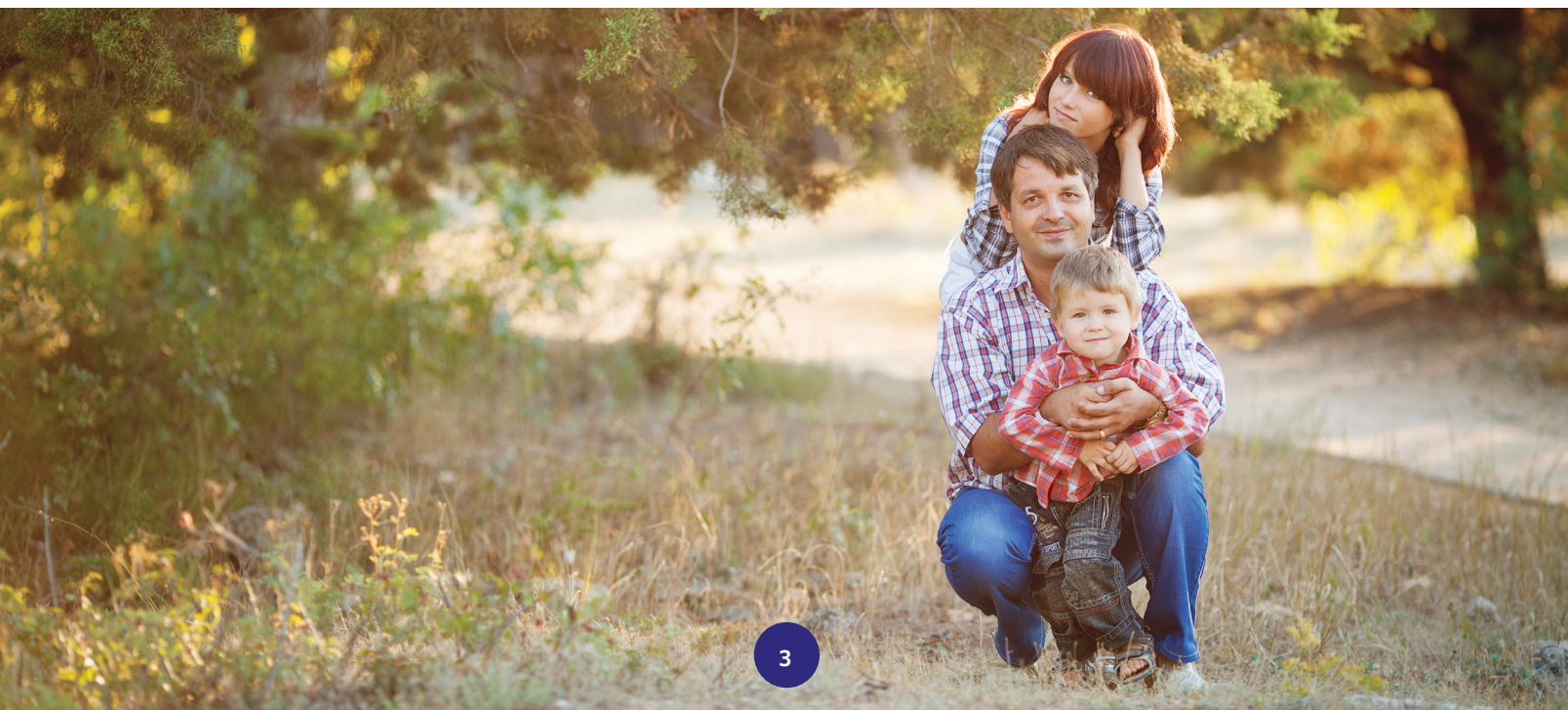
Please refer to the Tuition Assistance Policy for further details.

Reporting a Leave of Absence

If you need to report your absence for any one of these reasons please contact Prudential at 1-877-367-7781:

- Short Term Disability (STD)
- Family Medical Leave (FML)
- Long Term Disability (LTD)
- NY Paid Family Leave (PFL)
- Military Duty
- Personal Leave
- Lost-time, work-related injury—after first reporting it to your Manager

To discuss payments while away from work please contact HRLOA at 516-705-6947.



Health Insurance ID Cards

EMPIRE MEDICAL ID CARDS

Everyone enrolled in Medical coverage should have received a new Empire ID card. The three-letter prefix part of the member ID for all members has changed from 2018 to 2019. It is important that you present your current ID card when receiving medical care in order to ensure that the most accurate information is on file with your physician's office and there are no issues with processing your claims.

The new prefixes are as follows:

Plan	2018 Prefix	2019 Prefix
Select	YLK	KCH
POS	YLF	UYC
EPO	YLK	KCH
PPO	YLD	KCH

To receive a new card for yourself and/or your covered dependents:

1. Call Empire at 1-800-496-6132 to request new cards be mailed to you.
2. Download the Empire Anywhere mobile app on your phone to view the front and back of your card (and your dependents' cards) electronically.
 - Download the **Empire Anywhere** app from iOS (iPhone) App Store or the Google Play (Android) App Store.
 - Log into the **Empire Anywhere** app.
 - Click the "**View ID Card**" box.
 - Your ID card will be displayed on the screen.
 - You have the option to save your ID card so that you can view it in the future without logging into the app – click "**Save Offline**".
3. You can print a temporary card or request that new cards are mailed to you by logging in to www.empireblue.com/chs.
 - Log in to www.empireblue.com.
 - On the Home tab, scroll down to the **Resources** box and click "**Print Temporary ID Card**". You can also select "**Request ID Card**" if you'd like a new ID card to be sent to your home address on file with CHS (this will take 7-10 business days).
 - Once you click "**Print Temporary ID Card**", your ID card will be displayed on the screen to print.

ENVISIONRX PHARMACY ID CARDS

You should only have received a 2019 EnvisionRx ID Card if you newly enrolled for 2019.

Print your card online at www.envisionrx.com.

- Log into www.envisionrx.com.
- On the **My Dashboard** page, click on the "**Click Here**" button in the **Display/Print Your ID Card** box.
- Your ID card will then be displayed – click "**Print**".

EnvisionRx Mobile App

- Download the **EnvisionRx** app from iOS (iPhone) App Store or the Google Play (Android) App Store.
- Log into the **EnvisionRx** app.
- Click the **Menu** icon in the top left corner of the screen.
- Select "**My ID Card**" – your ID card will be displayed on the screen.

BLUE VIEW VISION PLUS ID CARDS

If you are enrolled in the Blue View Vision Plus plan (Empire's vision buy-up plan), you will not be issued new cards unless you newly enrolled for 2019. If you lost your Blue View Vision Plus card, call Empire at 1-800-496-6132 to request replacement cards.

CIGNA DENTAL

If you are enrolled in dental coverage, you will not receive a Cigna Dental ID card in the mail. A card is not needed for dental care. Simply provide your dentist with the Dental Plan Group number – 3332036. For information regarding your dental coverage, you can log into www.mycigna.com.

Making Changes to Your Benefits: Qualified Status Changes

Certain life events, like having a baby or getting married, may affect your employee benefits status. If you experience one of these events, called a qualified life event, you must contact MyHR within 31 days of the event. You must also send in documentation with proof of the event (such as a marriage certificate or death certificate). Note: Newborns are NOT automatically added to your coverage.

Contact MyHR if you experience any of the following:

1. Your legal marital status changes.
2. You increase or decrease your number of dependents (birth, death, adoption or placement for adoption).
3. A court decree orders that you must provide health coverage for your dependent.
4. Coverage under your spouse's plan is reduced or ceases.
5. You, your spouse, or your dependent child begins or terminates employment, or your spouse or dependent child switches from full-time or part-time employment (or vice versa) and you, your spouse and/or dependent child becomes or ceases to be eligible for coverage.
6. You switch from full-time to part-time employment (or vice versa). Benefit changes become effective the first of the month following this type of change.
7. Your spouse or dependent child(ren), who formerly was not a resident of the United States, arrives in the United States.

Dependents are covered until the end of the year in which they turn 25 for vision and dental coverage, or 26 for medical coverage. At that time, dependents are automatically removed from your coverage and will be offered continuation of coverage for medical and/or dental.

Verify Your Dependents

If you are newly adding dependents to your plan due to a qualified status change (i.e. marriage, birth of a baby, etc.), you will be asked to send the required eligibility documentation to Consova. You should receive a letter in the mail from Consova approximately three weeks after your dependent's coverage becomes effective. Please submit your documents directly to Consova within the timeframe stated in the letter to avoid loss of coverage for your dependents.

A partial list of documents you may be asked to provide includes:

- Marriage Certificate
- Adoption Certificate
- Federal Tax Return
- Court Order/QMCSO
- Birth Certificate

Please be assured and understand that any/all information you provide to Consova is kept secure and confidential, at ALL times.





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Hello Sunshine, Hello Savings!

The sun is out and the discounts are here! Save on your next outdoor concert, new spring wardrobe, or baseball game by checking out your Catholic Health Services of Long Island Discount Program.

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chsli.perkspot.com

