

# 2022 BENEFITS ENROLLMENT GUIDE

Log in and enroll October 18 - November 1



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# Welcome

I'm pleased to share with you our 2022 Benefits Enrollment Guide—which provides an overview of the comprehensive benefits program Dartmouth offers to help care for your and your family's physical, emotional, and financial wellbeing.

The Dartmouth community includes faculty and staff from diverse backgrounds, with a variety of different needs and interests. So, our Human Resources team works to provide inclusive, competitive, and flexible benefits options that offer something for everyone, along with the tools and resources you need to make the best decisions for both your personal needs and budget.

Our annual Open Enrollment period is just around the corner. This means it's time for you to think about your benefit needs for next year. Rather than defaulting into what you have today, I encourage you to take this opportunity to understand your options and make sure you have the right mix of coverage. For example,

- Have you compared your medical plan choices recently? The premium you pay up front out of your paycheck is only part of the story. Use our ALEX decision support tool to find out which plan may offer you the lowest total expenses.
- Are you getting the "triple tax advantage" from our Health Savings Account (HSA)? It's a great opportunity to lower your taxable income today while also helping you save for the future.
- Will you have health care or dependent care expenses that aren't covered by insurance? Then you might want to consider one of our Flexible Spending Accounts (FSAs) to reduce your out-of-pocket costs.
- Do you have enough life insurance to protect your family? We often underestimate these needs and fail to consider our full household budget.

See the Checklist inside this guide for other things to consider as you weigh your options.

As always, we encourage you to take advantage of all of the benefits and resources we make available to ensure you get the most value from your Dartmouth benefits package.

Sincerely,

Scot R. Bemis Chief Human Resources Officer

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# **Benefit Terms to Know**

This guide was created to help you make important decisions about your benefits. Before you begin, we think that understanding certain words will help you better understand the choices you need to make. Following are some definitions of words and phrases that you'll see in this guide.

# **Medical Plans**

**Deductible:** A fixed annual dollar amount that you pay out-of-pocket during the calendar year toward health care services before the medical plan begins to pay.

**Copay:** A fixed dollar amount you pay at the time health care services or prescription drugs are received, regardless of the total charge for service. The medical plan pays the rest.

**Coinsurance:** A fixed percentage of covered health care services or prescription drug costs that you pay, after the deductible amount (if any) was paid. The medical plan pays the rest.

**Out-of-pocket maximum:** The most you pay before the medical plan begins to pay 100% of covered charges.

**In-network:** Health care professionals and facilities that have contracts with the medical, pharmacy, or dental plan to deliver services at a negotiated rate (discount). You pay a lower amount for those services.

**Out-of-network:** A health care professional or facility that doesn't participate in your plan's network and doesn't provide services at a discounted rate. Using an out-of-network health care professional or facility will cost you more.

# **Prescription Drug Coverage**

**Generics:** Generic medications have the same active ingredients, dosage, and strength as their brand-name counterparts. You'll usually pay less for generic medications.

**Preferred brands:** Preferred brand medications will usually cost more than generics but may cost less than non-preferred brands on your plan. Also known as formulary brands.

**Non-preferred brands:** Non-preferred brand medications generally have generic alternatives and/or one or more preferred brand options within the same drug class. You'll usually pay more for non-preferred brand medications. Also known as non-formulary brands.

**Specialty medication:** A specialty medication is a prescription drug that is either a self-administered (non-diabetic) injectable medication; a medication that requires special handling, special administration, or monitoring; or, is a high-cost oral medication.

# Tax-Advantaged Accounts\*

**Flexible Spending Account (FSA):** A pre-tax employeeor employer-funded account that can be set up to reimburse you for qualified expenses.

Dartmouth has two types of FSAs:

- A general-purpose Health Care FSA (HCFSA) allows you to use pre-tax dollars to pay your share of eligible health care expenses not covered by your medical or dental plan.
- A Dependent Care FSA (DCFSA) allows you to use pre-tax dollars to pay for childcare or care for an elderly or disabled family member.

**Health Reimbursement Account (HRA):** An employerfunded account that pays up to a pre-determined amount toward certain out-of-pocket medical costs. Your unused HRA funds may be carried over to the next benefit year if you remain in the same medical plan.

**Health Savings Account (HSA):** A tax-free, individually-owned savings account used to pay for your and your eligible dependents' qualified medical expenses in the current year or in future years.

# Other

**Dependent:** Certain benefits at Dartmouth allow coverage for family members of benefits-eligible employees. Family members include spouses, children, and stepchildren.

**Full-Time Equivalent (FTE):** The percentage of working full-time. FTE is often based on the number of hours worked per week and/or number of months worked per year. Some benefits are pro-rated when you work less than full-time. FTE status is assigned on your date of hire or when you experience a change in employment status.

Plan cost/rates: For some benefits, Dartmouth will pay the full plan cost/rate, some you will share the plan cost/rate with Dartmouth, and others you will pay the full plan cost/rate. Your share of the plan cost/rate is deducted from your paycheck.

<sup>\*</sup> Contributions and earnings in these accounts are not subject to Federal taxes. State and local taxes may apply. For detailed information please contact your local department of taxation and tax professional.





# **Checklist**

# Review these key steps before making your benefit elections

$\bigcirc$	Ev	aluate	
Y		Think about your health history and health care needs.	
		Review your current <b>FSA and HSA contributions</b> and expermake an election based on your anticipated expenses for 2	
		Determine if your current <b>life, dependent life and disabilit</b> adequate protection if you or your family were to experience	
		Gather your <b>dependent and beneficiary information</b> , incluof birth, addresses and phone numbers.	ding Social Security numbers, dates
	En	gage	
		Read through this <b>Enrollment Guide</b> to make sure you und available to you.	erstand the full spectrum of benefits
		View the <b>Benefits &amp; Health Care Presentation by Rick Mills</b> on October 13 to better understand the decision-making proor watch the recording anytime at <b>dartgo.org/benefits202</b>	rocess for annual benefits changes;
		Attend an Educational Session to learn about your benefits Sign up or watch the recording anytime at <b>dartgo.org/ben</b>	
		Review Dartmouth's <b>Benefits Website</b> at <u>dartgo.org/bene</u>	fits.
		Use the online tool, <b>ALEX</b> , to help you evaluate your medic see what medical plan ALEX suggests for you at <b>dartgo.or</b>	
		Use the <b>Benefits Cost Estimator</b> to determine your plan rate annual base salary and FTE. Visit <b>dartgo.org/benefits-cost</b>	
		Need help navigating the FlexOnline system? Sign up for a <b>Assistance Session</b> and meet via Zoom one-on-one with a October 18 and November 1 at <b>dartgo.org/benefits2022</b> .	
ß	En	roll	
		Complete and save your 2022 elections during the annual <b>Open Enrollment period</b> (8:00 a.m., Monday, October 18, 2021 through 11:59 p.m., Monday, November 1, 2021) at <b>dartgo.org/enrollonline</b> .	<b>FlexOnline</b>
		Print a confirmation page and keep it for your records as proof of your elections.	Log into <u>dartgo.org/enrollonline</u> Use your NetID and Password (same as Dartmouth email).
		Complete your life insurance statement of health	(same as baramouth citially.

**Note:** If you have a phone number or address change, log into **employee.dartmouth.edu**.

☐ While you can change your retirement elections at any time

during open enrollment.

during the year, you may want to review your contributions

# **Eligibility and Enrollment**

As a benefits-eligible employee, Dartmouth College offers a choice of three different medical plans, two dental plans, life insurance for you and your family members, disability insurance, and a number of other tax- and money-saving options.

# **Plan Year**

Dartmouth's benefits run on a calendar plan year, from January 1 through December 31. Some benefits are pro-rated based on your start date or benefits eligibility date.

# **Eligibility**

Employees who regularly work 20 hours per week, nine months out of the year, are considered eligible for benefits at Dartmouth College. The amount that you pay for coverage may be affected by the amount of hours you work, as well as the amount of annual salary received. This is important to know when you are considering a change in hours or FTE. Temporary employees are not eligible for benefits.

# When Benefits Begin

Benefits elected during the Open Enrollment period will begin January 1, 2022.

# When You Can Make Changes To Your Plans

Once you have made your benefits elections, you may not make changes to most of your benefits until the following plan year due to IRS regulations. You will not have another opportunity to change your benefits coverage election until the next Open Enrollment period held each fall, unless you have a qualifying life status change. This can be a marriage, a divorce, a birth or adoption of a child, or anytime you or a dependent loses or gains coverage. It is important to know that you must submit a qualifying life status change through the FlexOnline system no more than 31 days after the date of the event.

# **How To Enroll Online**

To enroll in or make changes to your benefits elections, access your FlexOnline benefits page:

- 1. Go to dartgo.org/enrollonline.
- 2. Choose the link for Active Employees.
- Enter your NetID and password. (HINT: This is the same ID and password you use for email.) If you have forgotten your ID or password, follow the instructions on the Web Authentication page to retrieve them.

- 4. From the main FlexOnline dashboard, click on the COMPLETE NOW button in the upper right hand corner to start your Open Enrollment event.
- 5. Review your address and phone number on the ME page.
- 6. Carefully review and answer the questions on the MY PERSONAL INFORMATION page.
- 7. Review and update your dependent demographic information on the MY FAMILY page (dependents cannot be removed from this page).
- 8. On the SELECT YOUR BENEFITS page, you will add/remove coverage, add/remove dependents from coverage, and/or change plans.
- Review and update your life insurance beneficiaries if needed on the REVIEW BENEFICIARY ALLOCATION page.
- On the VERIFICATION page, complete the Life Insurance, Evidence of Insurability process (if required) and upload your Dependent Verification if adding new dependents to medical and/or dental coverage.
- 11. On the final REVIEW ELECTIONS page, be sure to check your elections carefully. Once you click the SUBMIT MY ELECTIONS button, you will be asked to ACCEPT or DENY the changes. Click ACCEPT to confirm and finalize your elections. If you do not click ACCEPT and finalize your elections, you may not have the benefits that you want in 2022.
- 12. Once you see the confirmation page, your elections will be saved. Please print and save a copy of the confirmation page for your records.

You may continue to log in and make changes to your 2022 elections until 11:59 p.m. on Monday, November 1, 2021.

Changes cannot be made after November 1, 2021.

For assistance using FlexOnline, please use the step-by-step Navigation Guide found at **dartgo.org/enrollonline**.



# What Happens if You Don't Enroll

If you do not make any active elections during the enrollment window, you will be defaulted to the same benefits you had for 2021 with one exception: your current Flexible Spending Accounts (FSAs) and Health Savings Account (HSA) elections. If you do not make new elections, you will not contribute to either of these accounts for 2022.

Please log into FlexOnline during the Open Enrollment period to elect or waive these benefits.

Benefit	Default Coverage for 2022
Medical/Vision/Prescription Drug Coverage	The same coverage that you had at the end of 2021
Health Reimbursement Account (HRA)	Employer contribution (if eligible) plus any carryover remaining from 2021 if you stay in the same plan.
Health Savings Account (HSA)	Employer contribution only (if eligible). You can elect and make changes to this benefit during the year.
Health Care FSA (HCFSA)	Employer contribution only (if eligible). You will not be able to start a contribution mid-year unless you have a qualifying event.
Dependent Care Flexible Spending Account (DCFSA)	No contribution
Dental	The same coverage that you had at the end of 2021
Life Insurance	The same coverage that you had at the end of 2021
Supplemental Benefits	The same coverage that you had at the end of 2021
Disability Coverage	The same coverage that you had at the end of 2021
Wellness	The same coverage that you had at the end of 2021

**IMPORTANT NOTE:** Unless you have a qualifying life status change, you will not have another opportunity to change your benefit coverage elections until the next Open Enrollment period held each fall. Please review your elections carefully prior to the close of Open Enrollment (11:59 p.m. on November 1, 2021) and print a copy of your final confirmation page for your records.

# **Changes for 2022**

There are minimal plan changes for 2022, with no medical and dental rate changes, an increase in HSA limits, and a new Life Insurance Plan carrier. There will also be extended timing limits on your 2021 FSA plans.

### **Medical Plans**

Dartmouth will continue to offer three different medical plan options, with no changes to the plans or rates in 2022; see rates at <u>dartgo.org/benefit-cost-estimator</u>.

# **Pharmacy**

The Copay Assistance Program, administered by PillarRx, is a cost savings program for those taking specialty medications through Accredo. You and/or your dependents will be notified if you are impacted by this program, and new for 2022, enrollment is mandatory.

Note: Manufacturer coupons will no longer apply toward your annual deductible on the HDHP.

# **Health Saving Account (HSA)**

Per IRS guidelines, the new limit for individual coverage will increase to \$3,650/year, and the family limit will increase to \$7,300/year.

# Flexible Spending Accounts (FSAs)

IRS limits are subject to change. If you choose to contribute to the Health Care Flexible Spending Account (HCFSA) or Dependent Care Flexible Spending Account (DCFSA) for **2022**, please keep in mind that your **2021** accounts have been granted extended timing limits due to COVID-19. For the HCFSA, you will be able to carry over any remaining 2021 balance (with a \$30 minimum) into 2022. For the DCFSA, you will have a grace period to use your 2021 account through December 2022.

### Life Insurance

The life insurance carrier will change from MetLife to Lincoln Financial Group. Plan limits and coverage amounts are not changing. Supplemental life insurance rates are increasing slightly—on average less than 5%.

# **Retirement Plan**

IRS limits are subject to change. IRS limits will not be available until middle to late October. Please refer to dartgo.org/retirement dartgo.org/retirement.

# **Dependent & Event Verification**

Dartmouth requires dependent verification whenever you are adding dependents to your medical or dental plans, as well as when you are completing a qualified life event. For more information on dependent and event verification, please visit <a href="http://Dartgo.org/e-verification">http://Dartgo.org/e-verification</a>.

Please notify the Benefits Office if you will be traveling abroad for more than 6 months and need medical coverage.



Dartmouth offers a choice of three different medical plans through Cigna:

- Open Access Plan (OAP)
- Cigna Choice Fund (CCF)—includes a Dartmouth-funded HRA
- High Deductible Health Plan (HDHP)-includes a Dartmouth-funded HRA and/or HSA

All three plans include prescription drug coverage through ExpressScripts, and preventive vision care (see pages 21 and 22).

# All three medical plans offer:

- > Coverage for medical care, including visits to your doctor's office, hospital stays, mental health and substance abuse services, chiropractic treatment, physical therapy, and other services.
- An option to choose a primary care doctor to help guide your care. It's recommended, but not required.
- A national network of providers (Open Access Plus/Carelink), as well as emergency coverage when traveling abroad for personal travel.
- No referral needed to see a specialist, although precertification may be required.
- In-network preventive care\* services covered at no additional cost to you. See your plan materials for a list of covered preventive care services.
- > 24-hour coverage for emergency care, in- or out-of-network.
- ▶ Limits on what you'll pay out-of-pocket. Once you spend the annual out-of-pocket maximum amount, the medical plan pays your covered health care costs at 100%.
- > No copay or coinsurance (depending on the plan) for care received through Cigna Telehealth Connection.
- > No claim paperwork when you receive care in-network.
- Access to Dartmouth Health Connect (except when contributing to or receiving contributions to an HSA).
- The ability to manage and track claims, order ID cards, find doctors, and track account balances at myCigna.com.

Your share of medical premiums are deducted from your paycheck pre-tax. Research Fellows pay on a post-tax basis.

Please note that each family member pays toward their own individual deductible and out-of-pocket maximum. The family limits are in place to help minimize the total amounts your family must pay in a given year.

# For an estimate on plan rates in 2022, please use the Benefits Plan Cost Estimator at <u>dartgo.org/benefits-</u>cost-estimator.

# Cigna Telehealth Connection: The Care You Need - When, Where and How You Need It

With Cigna Telehealth Connection, you can get the care you need for a wide range of conditions by video chat or phone, without leaving your home or office. There is no office visit copay under the Open Access Plus or Cigna Choice Fund plan to use Telehealth Connection. If you are enrolled in the High Deductible Health Plan, you must meet the deductible. Log into **myCigna.com** and select Cigna Telehealth Connection to learn more.\*\*

<sup>\*</sup> Some preventive services may not be covered. For example, immunizations for travel are generally not covered. Other non-covered services/supplies may include any service or device that is not medically necessary or services/supplies that are unproven (experimental or investigational).

<sup>\*\*</sup> Telehealth services are provided by third party telehealth providers and not by Cigna. Providers are solely responsible for any treatment provided. Not all providers have video chat capabilities. Video chat is not available in all areas. These services are separate from your health plan's provider network and may not be available in all areas.

# **Medical Plan Comparison Chart**

# Open Access Plus (OAP) Plan

You may be eligible for a separate contribution in your HCFSA. Please see page 19.

# Cigna Choice Fund (CCF) Plan

# High Deductible Health Plan (HDHP)

Medical plan highlights	ı					
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Medical deductible Individual Family	000'1\$ 005\$	\$1,000 \$2,000	\$1,500 \$3,000	\$3,000	\$2,800	\$4,100 \$8,200
Out-of-pocket maximum Individual Family	\$2,500 \$5,000	\$5,000 \$10,000	\$4,000 \$8,000	\$6,000 \$12,000	\$4,000 \$8,000	\$6,500 \$13,000
Coinsurance Individual Family	10%	30%	10%	30%	10% 10%	30%
Contribution from employer <sup>1</sup> Individual Family	You may be eligible for a separate contribution in your HCFSA.	contribution in your HCFSA.	## \$5 \$5 \$1,(\$	HRA \$500 \$1,000	HSA <sup>2</sup> \$5 \$1,0	450√ \$500 \$1,000
Office/Routine care						
Adult preventive care	Covered at 100% <sup>3</sup>	Deductible/Coinsurance	Covered at 100% <sup>3</sup>	Deductible/Coinsurance	Covered at 100% <sup>3</sup>	Deductible/Coinsurance
Office visit	\$25	Deductible/Coinsurance	\$35	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance
Specialist visits	\$35	Deductible/Coinsurance	\$50	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance
Chiropractic	\$25	Deductible/Coinsurance	\$35	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance
Physical, occupational and speech therapies	\$25	Deductible/Coinsurance	\$35	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance
Well-child care	Covered at 100% <sup>3</sup>	Deductible/Coinsurance	Covered at 100% <sup>3</sup>	Deductible/Coinsurance	Covered at 100% <sup>3</sup>	Deductible/Coinsurance
Lab, X-Ray, diagnostic tests	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance

Deductible/Coinsurance

Deductible/Coinsurance

Deductible/Coinsurance

Deductible/Coinsurance

Deductible/Coinsurance

Covered at 100%<sup>3</sup>

Hearing aid coverage — maximum one pair for 36 months

Deductible/Coinsurance

Deductible/Coinsurance

Deductible/Coinsurance

Deductible/Coinsurance

Deductible/Coinsurance

Deductible/Coinsurance

**Durable medical equipment** 

# Open Access Plus (OAP) Plan

# Cigna Choice Fund (CCF) Plan

# High Deductible Health Plan (HDHP)

Hospital care						
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Inpatient hospitalization	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance
Outpatient surgery	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance
Emergency room	\$125	\$125	\$175	\$175	Deductible/Coinsurance	In-Network Deductible/ Coinsurance
Urgent care center	\$50	\$50	\$50	\$50	Deductible/Coinsurance	In-Network Deductible/ Coinsurance
Ambulance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance
Mental health and substance abuse	ce abuse					
Inpatient	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance
Outpatient	\$25	Deductible/Coinsurance <sup>4</sup>	\$35	Deductible/Coinsurance <sup>4</sup>	Deductible/Coinsurance	Deductible/Coinsurance <sup>4</sup>

НОНР		Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance		Deductible/Coinsurance	Deductible/Coinsurance	Deductible/Coinsurance
CGF		\$7.50	\$30	\$50		\$15	860	\$100
OAP	to a 30-day supply)	\$7.50	\$30	\$50	Express Scripts mail service or CVS Pharmacy (up to 90-day supply)	\$15	09\$	\$100
Pharmacy	Retail pharmacy network (up to a 30-day supply)	Generic	Preferred brand	Non-Preferred brand	Express Scripts mail service or	Generic	Preferred brand	Non-Preferred brand

Prescription out-of-pocket maximum: Out-of-pocket maximum includes all prescription drug and medical expenses (copays, deductibles, and coinsurance).

- 1. Employer contributions to HRA accounts are available to use as of your first paycheck in January. Employer HSA contributions will be available to spend once you have activated your account with Fidelity.
- 2. The 2022 maximums for both employer and employee contributions are \$3,650 for an individual and \$7,300 for a family. HSA limits are set by the IRS. Employees who reach age 55 may make an additional catch-up contribution of up to \$1,000. The maximum contribution allowed is determined by the number of months you are enrolled in the medical plan during the year. Employer and incentive contributions reduce the maximum an employee can contribute by an amount equal to the contribution.
  - 3. Certain in-network preventive care services and well-child care services are covered at no added cost to you. You have no deductible to meet for these services.
- 4. Mental Health Exception Benefit: When utilizing out-of-network mental health providers through any of Dartmouth College's medical plans, you or your covered family members may attend up to 12 visits with an out-of-network provider at a 10% member coinsurance cost. This exception benefit does not renew annually, therefore all visits beyond the initial 12 are subject to out-of-network deductibles and coinsurance.



# **Open Access Plus (OAP) Plan**

# Has the highest plan rates, but lowest deductible and out-of-pocket costs

# **Key benefits**

- The deductible and medical copays are the lowest of the three plans.
- > Dartmouth Health Connect is available.

# Other considerations

- The OAP plan has the highest rates of all three plans.
- Medical and prescription copays DO NOT count toward annual deductibles, but DO count toward annual out-of-pocket maximums.
- ➤ This is the only plan available to J-VISA holders.
- This plan has additional hearing aid coverage.

For more information, visit dartgo.org/medical.

If you enroll in the OAP Plan, you can also participate in a Health Care FSA (and/or **receive a Dartmouth contribution if eligible**). See page 19 for eligibility.

	In-network	Out-of-network
Medical deductible		
Individual	\$500	\$1,000
Family	\$1,000	\$2,000
Out-of-pocket maximum		
Individual	\$2,500	\$5,000
Family	\$5,000	\$10,000
Coinsurance		
Individual	10%	30%
Family	10%	30%
Copays		
Office visit	\$25	Deductible/Coinsurance
Specialist visit	\$35	Deductible/Coinsurance
Emergency room	\$125	\$125
Urgent care	\$50	\$50
Prescription drugs — Generic/F	Preferred/Non-Preferred	l
30-Day retail pharmacy	\$7.50/\$30/\$50	N/A
90-Day mail order	\$15/\$60/\$100	N/A
90-Day CVS retail	\$15/\$60/\$100	N/A

# Sample of how an individual OAP plan works (in-network)



YOU OR A
DEPENDENT
RECEIVES
COVERED
MEDICAL
CARE

FOR DOCTORS VISITS, AS WELL AS EMERGENCY ROOM AND URGENT CARE VISITS

FOR ALL OTHER SERVICES

YOU PAY A FIXED DOLLAR AMOUNT (COPAY) PER VISIT

MEDICAL PLAN PAYS THE REST

YOU PAY UP TO THE \$500 DEDUCTIBLE THEN YOU PAY 10%
COINSURANCE

MEDICAL PLAN PAYS 90%

UNTIL
YOU
REACH
THE
\$2,500
ANNUAL
OUT-OFPOCKET
MAXIMUM

THEN YOUR MEDICAL PLAN PAYS AT 100% FOR THE REMAINDER OF THE PLAN YEAR

# Has mid-level plan rates and out-of-pocket costs

# **Key benefits**

- > The deductible and copays are mid-level.
- > Dartmouth contributes to an HRA.
- > Dartmouth Health Connect is available.

# Other considerations

Medical and prescription copays DO NOT count toward annual deductibles, but DO count toward annual out-of-pocket maximums.

For more information visit **dartgo.org/medical**.

If you enroll in the CCF Plan, you can also participate in a Health Care FSA.

	In-network	Out-of-network			
HRA contribution from Dartmouth*		ndividual O family			
Medical deductible					
Individual	\$1,500	\$3,000			
Family	\$3,000	\$6,000			
Out-of-pocket maximum					
Individual	\$4,000	\$6,000			
Family	\$8,000	\$12,000			
Coinsurance					
Individual	10%	30%			
Family	10%	30%			
Copays					
Office visit	\$35	Deductible/Coinsurance			
Specialist visit	\$50	Deductible/Coinsurance			
Emergency room	\$175	\$175			
Urgent care	\$50	\$50			
Prescription drugs – Generic/Preferred/Non-Preferred					
30-Day retail pharmacy	\$7.50/\$30/\$50	N/A			
90-Day mail order	\$15/\$60/\$100	N/A			
90-Day CVS retail	\$15/\$60/\$100	N/A			

# Sample of how an individual CCF plan with HRA works (in-network)



**MEDICAL** 

**CARE** 

FOR DOCTORS VISITS, AS WELL
AS EMERGENCY ROOM AND URGENT
CARE VISITS AND PRESCRIPTIONS

FOR ALL
OTHER
COVERED
MEDICAL
SERVICES

HRA AUTOMATICALLY PAYS UNTIL EXHAUSTED YOU PAY A FIXED DOLLAR
AMOUNT (COPAY) PER VISIT

MEDICAL PLAN PAYS THE REST

YOU PAY REMAINING DEDUCTIBLE UP TO \$1,500\*

THEN YOU PAY 10%
COINSURANCE

MEDICAL PLAN PAYS 90%

UNTIL
YOU
REACH
THE
\$4,000
ANNUAL
OUT-OFPOCKET
MAXIMUM

THEN
YOUR
MEDICAL
PLAN PAYS
AT 100%
FOR THE
REMAINDER
OF THE
PLAN YEAR

\* Your HRA contribution from Dartmouth will help pay up to the first \$500 or \$1,000 in deductibles for you and your family.



# **High Deductible Health Plan (HDHP)**

# Has the lowest plan rates, but also has the potential for the highest out-of-pocket costs

# **Key benefits**

- > The plan has the lowest rates of all three plans.
- ▶ Dartmouth may contribute to an HRA or HSA this is the only plan that allows HSA contributions.
- Dartmouth Health Connect is available for employees with an HRA.

# Other considerations

- This plan has the highest deductible of the three plans.
- You pay 100% of all medical and prescription costs until your annual deductible has been met.

For more information, visit dartgo.org/medical.

If you enroll in the HDHP with HRA, you can also participate in a Health Care FSA. You should only choose the HDHP with HRA plan if you are not eligible for an HSA but would still like to participate in the HDHP.

To see if you are eligible for an HSA, please see page 14.

	In-network	Out-of-network
HSA/HRA contribution from Dartmouth*	\$500 individual \$1,000 family	
Medical deductible		
Individual	\$2,800	\$4,100
Family	\$5,600	\$8,200
Out-of-pocket maximum		
Individual	\$4,000	\$6,500
Family	\$8,000	\$13,000
Coinsurance		
Individual	10%	30%
Family	10%	30%
Office visit	Deductible/Coinsurance	Deductible/Coinsurance
Specialist visit	Deductible/Coinsurance	Deductible/Coinsurance
Emergency room	Deductible/Coinsurance	In-Network Deductible/ Coinsurance
Urgent care	Deductible/Coinsurance	In-Network Deductible/ Coinsurance
Prescription drugs		
30-Day retail pharmacy	Deductible/Coinsurance	N/A
90-Day mail order	Deductible/Coinsurance	N/A
90-Day CVS retail	Deductible/Coinsurance	N/A

# Sample of how an individual HDHP with HSA/HRA works (in-network)



FOR ALL
NONPREVENTIVE
SERVICES
YOU WILL
HAVE TO
PAY UP
TO THE
DEDUCTIBLE

HRA
AUTOMATICALLY
PAYS UNTIL
EXHAUSTED

HSA YOU CHOOSE TO USE HSA TO PAY UNTIL EXHAUSTED YOU PAY REMAINING DEDUCTIBLE UP TO \$2,800\*

YOU PAY 10%
COINSURANCE

MEDICAL PLAN PAYS 90%
COINSURANCE

UNTIL YOU REACH THE \$4,000 ANNUAL OUT-OF-POCKET MAXIMUM

THEN YOUR MEDICAL PLAN PAYS AT 100% FOR THE REMAINDER OF THE PLAN YEAR

\* Your HRA or HSA contribution from Dartmouth can help pay up to the first \$500 or \$1,000 in deductibles for you and your family.



# **Health Reimbursement Account (HRA)**

# Funded by Dartmouth to help pay for certain medical expenses, including your deductible and coinsurance

# **Eligibility**

All employees who elect either the Cigna Choice Fund (CCF) plan or the High Deductible Health Plan (HDHP) with HRA will receive a Dartmouth contribution in an HRA.

# **Key benefits**

- ▶ HRA dollars are solely funded by Dartmouth to help reduce the amount you pay toward medical care during the year.
- When you receive care, HRA dollars are automatically deducted to cover your deductible and coinsurance costs - they even count toward your out-of-pocket maximum.
- Your full HRA balance is available January 1, so you can use the funds immediately.

# Other considerations

- Your unused 2021 balance will only be available to you in 2022 if you re-enroll in the same medical plan.
- If you choose the CCF plan, your HRA dollars cannot be used to pay for prescription drugs or medical copays.
- ➤ The Dartmouth contribution will change mid-year if you add or remove dependents.

Which medical plan must	→ CCF
I elect to participate?	➤ HDHP with HRA
Who can contribute to the account?	Dartmouth
What is the annual Dartmouth contribution?	\$500 for individuals, \$1,000 for families.
What is the maximum I can contribute?	\$0
How are Dartmouth's contributions taxed?	Dartmouth contributions are excluded from your gross income.
Can funds be carried over from one year to the next?	Yes — as long as you remain on the same medical plan.

Cigna administers and manages your HRA, and pays your providers directly. There is no action you need to take.

# Sample of how your HRA works



DEPENDENT INCURS
AN ELIGIBLE HEALTH
CARE EXPENSE

CIGNA
PROCESSES
THE CLAIM AND
DETERMINES
IF ANY
DEDUCTIBLE OR
COINSURANCE
IS OWED

IF COPAY IS OWED, YOU PAY AT TIME OF VISIT, OR RECEIVE A BILL FOR THE COPAY AMOUNT

IF DEDUCTIBLE OR COINSURANCE IS OWED, CIGNA PAYS DIRECTLY FROM YOUR HRA UNTIL THE FUND IS EXHAUSTED

YOU RECEIVE BILL FOR REMAINING DEDUCTIBLE OR COINSURANCE OWED





# **Health Savings Account (HSA)**

# A tax-free,\* individually owned savings account you use to pay for qualified medical expenses, funded by Dartmouth and you

# **Eligibility**

- All benefits-eligible Faculty, Exempt, Non-Exempt, SEIU and Research Associate B employees who elect the High Deductible Health Plan and who are:
  - NOT a Research Fellow or a J-VISA holder.
  - NOT enrolled in Medicare, Medicaid or any other type health insurance that is not a qualified HDHP.
  - NOT a patient of Dartmouth Health Connect.
  - NOT being claimed as a dependent on another person's tax return.
  - NOT eligible to receive medical-expense reimbursement under a general-purpose health care FSA of a spouse or a parent.

# Key benefits of an HSA

- The HSA provides a triple tax advantage: money goes in tax-free, grows tax-free, and is tax-free when used to pay for eligible health care expenses.
- You and Dartmouth contribute. You can change your annual contribution amount anytime during the plan year.
- When you have an eligible expense, you have the option of using a Fidelity-provided debit card, or checkbook, or you may submit claims manually.
- Expenses you pay with HSA dollars count toward your annual deductible and out-of-pocket maximums.
- You choose how to invest the money in your account, and your account can grow through investment earnings or interest payments.
- The money is always yours. Besides being free to choose when and how much of your HSA funds to use, any money left over at year's end is yours to keep. You can even take your HSA dollars with you

- when you leave the plan, change jobs or retire.
- Administration is easy with no submission deadlines.
- > The Dartmouth contribution to your HSA is available with your first paycheck in January and can be used once you have activated your account. Your own contributions are available as they are deposited.

# Other considerations

- Unlike the HRA, payments are not automatic. You decide when and how to use the money in your HSA. Spend it during the year, save it for the future, or open an investment account.
- ➤ Consider consulting a tax professional when contributing to an HSA.
- If you will be Medicare eligible in 2022, please see the HSA & Medicare enrollment section on page 30 of this guide.

AT A GLANCE	
Which medical plan must I elect to participate?	➤ HDHP with HSA
Who can contribute to the account?	You and/or Dartmouth
What is the annual Dartmouth contribution?	\$500 for individuals, \$1,000 for families.
What is the maximum I can contribute?	\$3,650 for individuals which includes Dartmouth contribution of \$500, and \$7,300 for families which includes Dartmouth contribution of \$1,000 — plus an extra \$1,000 if you are over age 55.
How are contributions taxed?	Your contributions are tax deductible. Dartmouth contributions are excluded from your gross income.
Can funds be carried over from one year to the next?	Yes
For more information, visit	dartgo.org/hsa.

<sup>\*</sup> HSA contributions and earnings are not subject to Federal taxes and not subject to state taxes in most states. A few states do not allow pre-tax treatment of contributions and earnings. Contact your tax advisor for details on your specific location.

# Sample of how your HSA works



YOU OR A DEPENDENT INCURS AN ELIGIBLE HEALTH CARE EXPENSE

YOU RECEIVE BILL FOR DEDUCTIBLE OR COINSURANCE OWED YOU PAY OUT-OF-POCKET

OR

YOU PAY WITH YOUR HSA CARD UNTIL THE FUND IS EXHAUSTED

THEN YOU WRITE A CHECK TO YOURSELF FOR REIMBURSEMENT

THEN YOU PAY OUT-OF-POCKET

# **HRA vs. HSA Comparison Chart**

Feature	HRA	HSA
Which medical plan must I elect to participate?	<ul><li>CCF</li><li>HDHP with HRA</li></ul>	<b>▶</b> HDHP with HSA
Who may contribute to the account?	Solely funded by Dartmouth.	You, Dartmouth or both.
What is the annual Dartmouth contribution?	Individual maximum: \$500 Family of two or more: \$1,000	Individual maximum: \$500 Family of two or more: \$1,000
What is the maximum I can contribute?	Employees do not contribute to this plan.	Individual maximum: \$3,650 Family of two or more: \$7,300 Age 55+: Additional \$1,000
Which expenses are eligible?	Only those which require you to pay a deductible or coinsurance. The HRA does not cover copays, dental or vision expenses.	Money in your HSA can be used for medical expenses, as well as dental and vision expenses.
Can my account grow tax-free?	No	Yes, interest and investment income accrue tax–free.
What is the tax treatment of the contributions?	Dartmouth contributions are excluded from your gross income.	* Your contributions are tax deductible. Dartmouth contributions are excluded from gross income and not subject to employment taxes (e.g., FICA).
Can funds be carried over from one year to the next?	Yes, unused amounts can carry into the next year if you remain on the same medical plan.	Yes, HSA funds can be carried over indefinitely during your lifetime, regardless of the plan you pick the following year.
Can I take my funds with me if I leave Dartmouth?	No, unused HRA balances are forfeited if you leave or change jobs. COBRA regulations also apply.	Yes, you may take funds with you when you leave or change jobs.
Can my Dartmouth contribution change mid-year?	Yes, if you add or drop dependents, switching between individual coverage and a family of two or more.	No
Can I change my contribution mid-year?	N/A	Yes, as long as you do not change your annual election to an amount less than what you have contributed year-to-date.
Can I contribute to a Health Care FSA?	Yes, you may contribute up to the annual maximum.	No, and you are not eligible for the HSA if your spouse or parent can claim you on their general purpose Health Care FSA.
Can I use Dartmouth Health Connect?	Yes	Not while actively contributing to an HSA.
Who administers the account?	Cigna	Fidelity

<sup>\*</sup> HSA contributions and earnings are not subject to Federal taxes and not subject to state taxes in most states. A few states do not allow pre-tax treatment of contributions or earnings. Contact your tax advisor for details on your specific location.



Which medical plan is best for me? How much should I save in my FSAs? Is an HSA right for me? We know you have questions about the best options for you and your family.

# To make these choices easier, Dartmouth College offers an easy-to-use tool called ALEX.

You can log in from any computer or mobile device. ALEX will prompt you for some basic information about you and your family, and ask you some questions. Your responses are completely confidential\* and will be used only to help you with your decision-making process.

Start your conversation with ALEX on October 13. Visit <u>dartgo.org/ALEX22</u>. ALEX will make personalized benefits recommendations based on your responses.

**Note:** ALEX provides a summary of your benefits and every attempt has been made to ensure its accuracy. Cost estimates are based on national averages and may not directly reflect medical costs in your geographic area. It is important to fully utilize all of the educational tools provided to you prior to enrolling in benefits, including, but not limited to, ALEX. ALEX may provide estimates or suggestions, but only you can elect benefits to best suit your needs. ALEX is not an application for enrollment.

\* ALEX does not create, receive, maintain, transmit, collect, or store any identifiable end-user information.



# **Dartmouth Health Connect**

Dartmouth Health Connect is an innovative, relationship-based primary care practice that provides the type of healthcare patients deserve. It offers highly personalized, friendly, expert care delivered by a team of professionals who are passionate about managing health in a better way.

### Other key benefits include:

- More time with your provider and care team, resulting in better relationships.
- Personal health coach dedicated to your well-being.
- > Meetings available with a behavioral health specialist in the comfort and privacy of your doctor's office.
- A convenient location in Hanover, plus the ability to communicate by phone, email, video, and text.
- ▶ 24/7 phone access to a doctor and same or next day appointments for urgent needs.
- **>** \$0 copays.

Employees and adult family members (age 18+) enrolled in any medical plan through Dartmouth College are able to join Dartmouth Health Connect.

Please note: Dartmouth Health Connect patients are eligible to participate in HDHPs, however, they cannot contribute to or receive a contribution to an HSA. Dartmouth Health Connect also accepts Medicare-eligible patients on the Dartmouth College Medicare Supplement Plan, AARP Medicare Advantage plans, as well as traditional Medicare with or without most other supplemental plans.

For more information, please visit <u>dartmouthhealthconnect.com</u> or call 603.738.1164 to learn more about becoming a patient at Dartmouth Health Connect.

# Faculty/Employee Assistance Program

# 24/7 Confidential Support

The F/EAP, in partnership with GuidanceResources, is available 24 hours a day, seven days a week and gives you and your household members confidential support, resources, and information for personal and work-life issues, at no cost to you. Services include confidential counseling (up to eight sessions per issue per year), legal support, financial information, and work-life solutions. There are three ways to access your F/EAP resources:

- 1. Call toll-free **844.216.8308** 
  - You'll speak with a counseling professional who will listen to your concerns and can guide you to the appropriate services you require, including local providers as well as the Dartmouth College campus counselor, for in-person/virtual counseling.
- 2. Visit GuidanceResources® Online at <u>www.guidanceresources.com</u> and enter your Company ID: "Dartmouth" during the registration process
  - You will find timely, expert information on thousands of topics such as relationships, work, school, children, wellness, legal, financial, and other work-life topics. You can search for qualified child care and elder care, attorneys and financial planners, as well as ask questions, take self-assessments, and more.
- 3. Download the GuidanceResources® Now App
  The app provides fast, easy access to your F/EAP. After downloading the app, tap Member Resources
  and enter your username and password to access your services.

For more information please visit **dartmouth.edu/eap**.

# **Mental Health Exception**

Mental health benefits are also available through your Dartmouth Medical Plans through Cigna, at the cost of a PCP visit for those in the OAP and CCF plans when using in-network providers, and covered at 90% coinsurance for those in the HDHP plan once the in-network deductible is met.

In addition, Dartmouth offers the Mental Health Exception benefit for those employees using out-of-network mental health providers. This Exception benefit allows for out-of-network claims to be paid at 90% for a lifetime maximum of twelve mental health visits. This benefit is available to employees and covered dependents. Regardless of who submits the claim (individual or provider), Cigna will pay 90% of the provider's charged fee and the individual will be responsible for 10% of the provider's charged fee. For more information on the Mental Health Exception benefit, please visit <a href="http://dartgo.org/mhe">http://dartgo.org/mhe</a>.



# **Flexible Spending Accounts**

Participating in a Health and/or Dependent care Flexible Spending Account is a way of putting money aside tax-free throughout the year, and then using those dollars to pay for your health care or dependent care needs.

Dartmouth offers eligible employees:

- Health Care Flexible Spending Account (HCFSA) for health care expenses
- Dependent Care Flexible Spending Account (DCFSA) for dependent care expenses

# **Timing Extensions on 2021 FSAs**

If you choose to contribute to the Health Care Flexible Spending Account (HCFSA) or Dependent Care Flexible Spending Account (DCFSA) for **2022**, please keep in mind that your **2021** accounts have been granted extended timing limits due to COVID-19. For the HCFSA, you will be able to carry over any remaining 2021 balance (with a \$30 minimum) balance into 2022. For the DCFSA, you will have a grace period to use your 2021 account through December 2022.

**NOTE:** Spouses who work at the college must maintain their own individual Flexible Spending Accounts. Accounts are not tied together and spouses cannot combine their balances or contribute to each other's accounts.

**Example:** Jenny and Bill Edwards are both employees of Dartmouth College and are married to one another. Bill elects to put \$2,750 into an HCFSA for 2022. Jenny elects to put \$500 into an HCFSA for 2022.

- 1. Per IRS guidelines, Jenny is not allowed to contribute pre-tax dollars into Bill's account and Bill is not allowed to contribute pre-tax dollars into Jenny's account. \$229.16 will be deducted pre-tax each month from Bill's paycheck and \$41.67 will be deducted pre-tax each month from Jenny's pay.
- 2. When submitting claims to Sentinel Benefits & Financial Group, if Bill submits \$3,100 (more than his annual election), Sentinel will only pay back up to the maximum amount of his annual election. In this case \$2,750. Sentinel will not automatically use any of the \$500 remaining in Jenny's account because the accounts are not tied together, and Sentinel does not know that they are married. Jenny will need to submit her own \$500 in claims.
- 3. The IRS does allow Bill to use his \$2,750 to pay for Jenny's health claims and Jenny is allowed to use her \$500 to pay for Bill's health claims.

<sup>\*</sup> Contributions and earnings in these accounts are not subject to Federal taxes. State and local taxes may apply. For detailed information please contact your local department of taxation and tax professional.





# **Health Care Flexible Spending Account (HCFSA)**

# Allows you to use pre-tax dollars to pay eligible health care expenses not covered by your medical or dental plan

# **Eligibility**

- All benefits-eligible Faculty, Exempt, Non-Exempt and SEIU employees are eligible to contribute.
- Research Associate Bs and Research Fellows are not eligible to participate in the HCFSA.
- You may also be eligible for a Dartmouth contribution of up to \$250 if you:
  - Are Non-Exempt or SEIU; or are Faculty or Exempt and make \$60,000/year or less; AND
  - Select the OAP medical plan or elect no medical coverage.
- You are NOT eligible to contribute to a HCFSA if you are eligible for medical-reimbursement under your spouse's or parent's Health Savings Account (HSA).

# **Key benefits**

- Set aside pre-tax dollars that you can use during the year to pay for eligible medical expenses.
- Use your Sentinel Benefits & Financial Group (Sentinel) Benny Card to pay for eligible expenses.
- The account can be used together with an HRA to help pay vision and dental expenses, copays, and additional deductible and coinsurance amounts not paid by the HRA.

AT A GLANCE	
Who can contribute to the account?	You and Dartmouth
What is the annual Dartmouth contribution?	Up to \$250 for those who are eligible.
What is the maximum I can contribute?	\$2,750 per calendar year. Amount is subject to change pending IRS guidelines.
How are my contributions taxed?	You pay no Federal, Social Security or state taxes.
Can funds be carried over from one year to the next?	Yes. Note that you must have a minimum of \$30 in your account to carry it over (otherwise the balance will be forfeited). You will be able to carry over \$30 – \$550 from your 2022 account into the 2023 plan year.
	If you elect HDHP with HSA for the 2022 plan year, you may only access carryover dollars for expenses incurred in the 2021 plan year.

# Other considerations

For more information, visit dartgo.org/fsa

- Some expenses require substantiation as you spend. Keep your receipts for any expense that is paid by your HCFSA.
- > There is a \$30 minimum to carry over unused HCFSA funds to the following year. If your balance is below \$30, be sure to spend the balance before the end of the year so you don't lose it.
- HCFSAs have claim deadlines regulated by the IRS. For 2022 into 2023, funds in excess of the \$550 carryover will be forfeited.

### Sample of how your HCFSA works **CREATE CLAIM USE YOUR BENNY** ONLINE, THEN CARD TO PAY AT SENTINEL WILL SCAN AND TIME OF SERVICE EITHER MAIL UPLOAD RECEIPT WHEN YOU A CHECK FILL OUT REQUIRED, OBTAIN OR DEPOSIT YOU OR A COPY OF OR SENTINEL MAILS REIMBURSEMENT **COPY OF** REIMBURSEMENT A REQUEST FOR **DEPENDENT** INTO YOUR RECEIPT FORM SUBSTANTIATION BANK ACCOUNT **FILL OUT YOUR INCURS AN** TO YOUR HOME PAY EXPENSE **CLAIM AND FAX ELIGIBLE** OUT-OF-POCKET OR MAIL IT TO **HEALTH CARE** SENTINEL **EXPENSE** If you do not provide proper substantiation in a timely manner, your Benny Card will be suspended, and you could forfeit funds.



# **Dependent Care Flexible Spending Account (DCFSA)**

# Allows you to use pre-tax dollars to pay for child care or care for an elderly or disabled family member

# **Eligibility**

- All benefits-eligible Faculty, Exempt, Non-Exempt, and SEIU employees may contribute.
- Research Associate Bs and Research Fellows are not eligible to participate in the DCFSA.
- You may NOT contribute to a DCFSA while you or a spouse are not working (i.e., leave of absence, hiatus, unemployed).

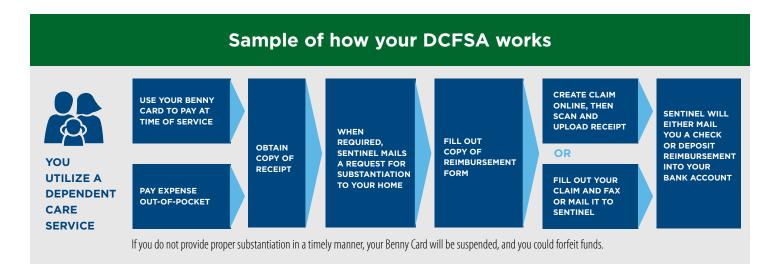
# **Key benefits**

- ➤ Funds can be used tax-free to pay qualified dependent care expenses, including:
  - Child care services.
  - Nannies.
  - After-school programs.
  - Summer day camps.
  - Adult day centers for aging parents.
  - Nursing care for dependents with disabilities.
- > Funds are available as they are deposited.
- You will receive a Benny Card to use to pay eligible expenses.

You	
\$0 — Dartmouth does not contribute.	
\$5,000 per year per household.	
You pay no Federal, state or Social Security taxes.	
No — all funds must be used by March 15 of the following year.	

### Other considerations

- Qualifying dependents are children under age 13, or a child or relative who is physically or mentally incapable of self-care.
- If you don't use your Benny Card to pay for qualifying DCFSA expenses, claims can either be submitted online through Sentinel's portal or manually by using the claim form found at dartgo.org/hrforms.
- DCFSAs have deadlines regulated by the IRS. All funds for 2022 accounts not used by the end of the grace period of March 15, 2023 will be forfeited.





# **Prescription Drug Coverage**

# All three of our medical plans include prescription drug coverage through Express Scripts

# Key features include:

- **Broad retail network** of more than 56,000 pharmacies nationwide, including independent pharmacies and chain pharmacies such as CVS and Walgreens.
- **The same flexible prescription service** for maintenance medications. 90-day supplies of maintenance medications may be filled through home delivery from Express Scripts Pharmacy or at a CVS Pharmacy.
- > Certain preventive prescriptions offered at no cost to members enrolled in the HDHP medical plan.
  A comprehensive list of those drugs can be found at <a href="https://www.express-scripts.com/DartmouthCollege">www.express-scripts.com/DartmouthCollege</a>.

# > Tiered drug pricing:

Pharmacy	OAP	CCF	HDHP
Retail pharmacy network (up to a 30-day supply)			
Generic	\$7.50	\$7.50	Deductible/Coinsurance
Preferred brand	\$30	\$30	Deductible/Coinsurance
Non-Preferred brand	\$50	\$50	Deductible/Coinsurance
Home Delivery from Express Scripts Pharmacy or at CVS Pharmacy (up to 90-day supply)			
Generic	\$15	\$15	Deductible/Coinsurance
Preferred brand	\$60	\$60	Deductible/Coinsurance
Non-Preferred brand	\$100	\$100	Deductible/Coinsurance

Call Express Scripts at **877.788.5766** or visit their website at <u>www.express-scripts.com/DartmouthCollege</u> to check drug coverage and cost, search for pharmacies, and view other plan information.

# What's changing?

- > Periodically, medications can change tier levels or be removed from the list of covered medications (the formulary). Please watch your mail for these notifications.
- Current enrollees who are impacted by formulary changes will receive information from Express Scripts before the end of 2021.
- > Dartmouth works with PillarRx to assist employees and family members who take specialty medications for complex or chronic medical conditions. If you or your covered spouse or dependent take a specialty medication through Accredo for which the Copay Assistance program is available, you will receive information directly from PillarRx. New for 2022, enrollment is mandatory.

**Note:** If you are taking an eligible medication but choose not to participate in this program, you will be responsible for 30% coinsurance on the Copay Assistance-eligible medication.



# As part of the preventive care services under your Dartmouth College medical plan, coverage includes the following:

	OAP and CCF Plans		HDHP	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Exam copay	\$0	N/A	\$0	N/A
Exam coinsurance (once per year)	Covered 100%	Covered 70%	Covered 100%	Covered 100% up to reasonable and customary amount
Materials allowance**	Up to \$50	Up to \$50	N/A	N/A

In addition, you can also take advantage of vision discounts through Cigna Healthy Rewards®\* - visit **dartgo.org/healthy\_rewards** for more information.

For more information, visit dartgo.org/vision.



<sup>\*</sup> Healthy Rewards is a discount program. Some Healthy Rewards programs are not available in all states and programs may be discontinued at any time. If your Cigna plan includes coverage for any of these services, this program is in addition to, not instead of, your plan benefits. A discount program is NOT insurance, and you must pay the entire discounted charge.

# All benefits-eligible employees can enroll in one of two dental plans, offered through Northeast Delta Dental

# The Low Plan

A lower-cost option that provides coverage for preventive and basic restorative care.

# The High Plan

A higher-cost option that provides coverage for basic and major care, as well as orthodontia. And new for 2022—mouthguards for temporomandibular joint dysfunction will be covered.

SERVICE	LOW PLAN	HIGH PLAN	
Standard Dental Services			
Annual Deductible	\$50 Individual \$150 Family	No Deductible	
Diagnostic and Preventive Services (e.g., exams, cleanings, X-Rays)	100% No Deductible	100%	
Basic Restorative Services (e.g., fillings, extractions, root canals)	80% After Deductible	80%	
Major Restorative Services (e.g., crowns, bridges, implants)	N/A	50%	
Annual Plan Max (per person)	\$1,000	\$5,000	
Orthodontia Coverage			
Orthodontia Coinsurance	N/A	50%	
Orthodontia Lifetime Max	N/A	\$2,000**	
Adult Orthodontia Coverage	N/A	Yes	
MONTHLY RATES*	LOW PLAN	HIGH PLAN	
Individual	\$36.94	\$68.04	
2-Person	\$65.75	\$121.11	
Family	\$113.04	\$208.21	

<sup>\*</sup> Amount paid by employee.

- ▶ \$2,000\*\* Orthodontia Lifetime Max is separate from \$5,000 Annual Plan Max.
- Both plans offer in-network discounts through the Delta Dental PPO and Premier networks.
- To find out if your dentist is in Delta Dental PPO or Premier network, search the directory at <a href="www.nedelta.com">www.nedelta.com</a>.

  For additional savings, PPO network providers offer deeper discounts.

For more information, visit dartgo.org/dental.



# **Wellness at Dartmouth**

# Wellness at Dartmouth supports employees and family members through a variety of programs and resources

All employees who regularly work 20 hours per week, at least nine months each year (sometimes referred to as "benefits-eligible"), will need to elect a free Wellness Benefit option for 2022, even if you waive medical coverage. These Wellness Benefits are offered as a benefit of employment and not as part of the group health plan. You will not be able to change this election until the next Open Enrollment period. If you do not make an election, you will be defaulted to the Wellness Benefit you had at the end of 2021.

# Here is an overview of your options — with new features for 2022:

# Option 1: Pulse Program

This comprehensive program provides cash rewards of up to \$400 (\$800/family) for participating in a variety of activities, including:

- New! My Care Checklist dashboard to self-track preventive exams, tests, and vaccinations.
- **New!** Spotlight mindfulness challenges with personalized goals.
- **New!** Journeys, daily cards, and healthy habit challenges to embrace diversity.
- More than 45 digital coaching Journeys on topics such as sleeping well, reducing stress, eating healthy, managing finances, heart health, being tobacco-free, and more.
- Fun, step-based team MOVE IT challenges multiple times each year.
- Monthly individual healthy habit challenges on topics such as sustainability, financial wellbeing, mindfulness, and nutrition.
- Daily health tips tailored to your interests, including getting active, building relationships, sleeping well, reducing stress, and being productive.
- Activity, sleep, and nutrition trackers, a personal health assessment - and more!

# > Option 2: Fitness Reimbursement Benefit

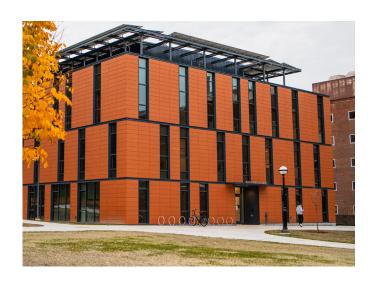
This benefit provides reimbursement of up to \$225 for expenses incurred for fitness facility memberships and exercise classes (including online/DVD exercise classes).

# Option 3: Dartmouth Fitness Membership at Alumni Gym

This benefit provides a free Dartmouth Fitness annual membership (value: \$450) from July 1, 2022 through June 30, 2023.

**Please note:** All Dartmouth Fitness memberships expire on June 30 of each year and renewals begin on July 1. This benefit applies only to memberships beginning July 1, 2022, or later in 2022; any membership purchases prior to July 1, 2022 will be the sole responsibility of the employee.

The Dartmouth Fitness membership provides access to the indoor racquet and squash courts, indoor track and gymnasium, and the swimming pools within Alumni Gym, as well as the Zimmerman Fitness Center, which has a wide selection of cardio and strength training equipment.



	Pulse_M	Fitness Reimbursement Benefit	Dartmouth Fitness Membership at Alumni Gym
How much money can I receive per year?	Up to <b>\$400</b> per year as cash rewards.	Up to \$225 per year as a reimbursement.	A credit of up to \$450 is applied at the time of membership purchase.  * Membership purchases made prior to July 1, 2022 will be the sole responsibility of the employee.
How much additional money can my spouse receive?	Up to <b>\$400 per year</b> .  Spouse must be enrolled in the employee's  Dartmouth College health plan to be eligible.	None. However, a spouse may share the \$225 with the employee (spouse must be enrolled in the employee's Dartmouth College health plan to be eligible).	<b>None.</b> This option is available to active benefits-eligible employees only.
What can I use the rewards/ reimbursement/ credit for?	Pulse rewards are cash that can be transferred to a bank account of your choice, redeemed for a gift card or Visa cash card, used toward a purchase in the Pulse store, or donated to a charity.	The reimbursement is for expenses you incurred for fitness facility and/or exercise class fees only (includes online/DVD exercise classes).	Receive a free Dartmouth Fitness Membership at Alumni Gym from July 1, 2022 (or a later 2022 date) through June 30, 2023.
What do I have to do to receive my reward/ reimbursement/ credit?	Engage with the Pulse program to earn points that translate into cash, for activities such as participating in step-based challenges, tracking your healthy habits, reading healthy tips, attending webinars, and more!	Make an eligible purchase and mail your completed form and receipt(s) to Cigna. Reimbursements will be provided in your paycheck.	Sign up for a Dartmouth Fitness membership beginning on July 1, 2022, or later in 2022, and receive the value of a free annual membership through June 30, 2023.
Will I be taxed on the money I receive?	<b>Yes</b> , applicable taxes will be withheld from your paycheck as you and your spouse (if applicable) <b>earn</b> any rewards.	<b>Yes</b> , applicable taxes will be withheld from your paycheck when you receive your reimbursement.	<b>Yes</b> , applicable taxes will be withheld from your paycheck after you sign up for a membership.
Who do I contact if I have questions about the program?	Wellness at Dartmouth can assist with general Pulse questions (wellness@dartmouth.edu) and Virgin Pulse support can help with technical questions (844-394-9646).	Wellness at Dartmouth can assist with questions regarding the submission process and the status of your reimbursement (wellness@dartmouth.edu).	Wellness at Dartmouth can assist with general questions (wellness@dartmouth.edu) and the Dartmouth Fitness Membership Office can assist with specific membership and pricing questions (603.646.8106).

For additional information about the Wellness Benefit options for 2022, as well as other Wellness at Dartmouth programs and resources, please visit <u>dartmouth.edu/wellness</u>.



Dartmouth College offers a variety of insurance products and services to benefits-eligible employees. For 2022, the plan administrator will be Lincoln Financial Group.

A brief description of each is provided below, but for additional details, including rates, FAQ, informational materials, and enrollment information, please visit dartgo.org/life-insurance.

# **Basic and Supplemental Life Insurance**

- Faculty, Exempt, and Non-Exempt employees receive \$50,000 basic life insurance at no cost.
- In addition to the basic life benefit, Faculty, Exempt and Non-Exempt employees are also eligible to elect a **supplemental group term life insurance plan** up to 8x their annual salary, to a maximum of \$1,500,000. Evidence of Insurability may be required. For 2022, costs for supplemental life insurance are increasing slightly—on average, less than 5%.
- > Group term life rates are calculated based on age bands and per thousand dollars of coverage.
- ➤ SEIU employees receive a basic life benefit of 2.5x their annual salary at no costs, after one year of eligible employment.
- ➤ Research Associate Bs and Research Fellows have the option of purchasing the \$50,000 basic life plan and/or 1-8x annual salary.

# **Dependent Life Insurance**

Plan coverage and rates:

Plan	Coverage	Rates
Spouse	\$25,000 coverage for spouse	\$5.98 per month
Dependents	\$10,000 coverage for each child	\$2.28 per month
Family	\$25,000 coverage for spouse and \$10,000 coverage for each child	\$7.68 per month

Plan guidelines do not allow Dartmouth couples to cover one another on dependent life, and only one spouse can cover the children. SEIU employees are eligible to elect dependent life after one year of eligible employment.

### **Travel Assistance**

Lincoln Financial Group's TravelConnect ® program provides employees with 24/7 access to a multilingual assistance coordinator who can assist with doctor referrals, transportation, prescriptions, and use of a 24/7 nurseline. This program, provided at no cost to you, also supports you in the event of a medical emergency, natural disaster, and political upheavals. Evacuation to the nearest hospital or safe haven can be arranged, or travel arrangements home can be made as needed. For general travel, LFG can assist with pre-trip travel services, lost travel documents, and legal consultation/referrals.

# Will Preparation and Estate Planning Services

Lincoln Financial Group's LifeKeys® program allows employees access to free, step-by-step will preparation and estate planning resources, as well as memorial planning, grief counseling for beneficiaries, and legal/financial consultation. Six in-person sessions will be made available to beneficiaries. These services are included with your basic and/or supplemental life coverage through Lincoln Financial Group. For more information and eligibility visit <a href="mailto:dartgo.org/estate">dartgo.org/estate</a> resolution.

# **Voluntary Benefits**

Voluntary benefits can provide additional financial protection from out-of-pocket expenses, and can be helpful if your medical plan has a high deductible. All benefits are separate from medical coverage and are 100% portable, which means the coverage is yours to take with you, should you leave Dartmouth College for any reason.

All benefits-eligible Dartmouth employees can choose to enroll in any of these employee-paid voluntary benefits plans:

- Aflac Hospital Indemnity Insurance Helps pay for deductibles and coinsurance, as well as everyday living expenses due to a hospitalization.
- Personal Accident Insurance (Aflac and Boston Mutual available) - Helps pay for medical costs associated with an accidental injury.
- Transamerica Critical Illness/Cancer Insurance Pays a lump sum benefit in the event of a diagnosis of a covered critical illness, including heart attack, stroke, invasive cancer, and end-stage renal failure.

For information on enrollment and rates, call Winston Benefits at 855-805-5840.



# **Disability Coverage**

Dartmouth offers disability benefits that provide income protection if an illness or injury prevents you from working.

# **Short Term Disability (STD)**

If you cannot work due to disability, the Short Term Disability plan can provide income replacement for up to 26 weeks. Benefits are determined by your employment category.

- > Non-Exempt employees have an elimination period of five days, during which you can use Paid Time Off. The elimination period is the number of consecutive work days you would need to be totally disabled before benefits begin. The plan replaces salary at 100% for weeks two through eight and 60% for weeks nine through 26.
- > Exempt employees and Research Associates Bs and Cs have an elimination period of 10 work days which is paid for by the department. The elimination period is the number of consecutive work days you would need to be totally disabled before benefits begin. The plan replaces salary at 100% for the weeks three through eight and 60% for weeks nine through 26.
- **Faculty members,** please refer to the faculty handbook.
- **Research Fellows** are not eligible for this benefit.

- ➤ For SEIU employees, the duration of benefits depends on the number of continuous years of service as of the last day worked prior to disability.
  - Those with 90 days to one year of service receive two weeks\* of 100% salary replacement.
  - Those with one to two years of service receive six weeks\* of 100% salary replacement.
  - Those with two or more years of service receive 100% salary replacement for the first eight weeks\* and 60% for weeks nine through 26.

# Long Term Disability (LTD)

If your disability continues beyond 26 weeks, you may be eligible for benefits through the Long Term Disability plan. Dartmouth College provides 50% pay replacement at no cost to employees up to a maximum of \$15,000 per month. An employee may purchase additional coverage in 10% increments during annual Open Enrollment, to 60% pay replacement if currently enrolled in 50% pay replacement or 70% pay replacement if currently enrolled in 60% pay replacement.

- SEIU Employees need three continuous years of service to be eligible for LTD.
- Research Associate Bs and Research Fellows are not eligible for this benefit.

For more information or questions regarding your disability benefits, visit **dartgo.org/disability**.

<sup>\*</sup> After the 5 work day elimination period



# **Retirement Savings Benefits**

Dartmouth College provides retirement savings plans to help eligible employees build toward future financial security. Retirement saving plans are not part of Open Enrollment. If eligible, you may enroll or make changes at any time. If you would like to enroll or change your contribution amount, you would need to make your change through the Retirement Planning website at **www.dartmouth.edu/hrs/benefits/access**.

# 401(a) Defined Contribution Retirement Plan

- Dartmouth makes contributions on your behalf, with no contributions required from you.
- You direct where the contributions are invested among investment options available at the time of enrollment.
- If you do not make an election within 30 days of eligibility, you will be defaulted to a Vanguard Institutional Target Retirement Fund at Fidelity, with a target date closest to the year in which you will reach age 65.
- Contributions accumulate with interest, earnings and investment gains or losses. The resulting amount will be the source of your retirement income from the plan.
- Dartmouth contributes to your account based on your age (no contribution from you is required).

Your age	Dartmouth contribution as a % of your base salary
21 to 29	3%
30 to 34	5%
35 to 39	7%
40 or older	9%

- Participants become fully vested after three years of regular employment with Dartmouth.
- **>** For more information visit **dartgo.org/retirement**.

# 403(b) Supplemental Retirement Accounts (SRAs)

- You may make pre-tax or Roth post-tax contributions from your paycheck.
- > Contributions may be changed at any time.
- You may roll over funds from a previous employer's retirement plan(s).
- Loans are available from your pre-tax account.

> The annual limits are subject to change each year.

Your age	2021 contribution limit
Under 50	\$19,500
50 and older	\$26,000

IRS limits are subject to change. **2022 IRS limits will not be available until middle to late October.** Please refer to **dartgo.org/retirement**.

> For more information visit dartgo.org/sra.

# **Dartmouth Matching SRA Contribution**

- > Employees hired on or after July 1, 2009 may receive a matching contribution from Dartmouth College.
- > Contributions from Dartmouth College will match an employee's SRA contributions for up to six years from date of hire, to a lifetime maximum of \$3,000.
- Matching contributions are directed to your 401(a) account and are subject to the same vesting requirements.
- Matching contributions will be proportionately distributed, consistent with the employee's 401(a) fund designation.

# Workshops

Given the wide range of choices available to you, you may want some help making your retirement decisions. To assist you, Dartmouth College offers one-on-one consultations and workshops with representatives from Fidelity and TIAA. Visit <a href="mailto:dartgo.org/retirement-counseling">dartgo.org/retirement-counseling</a>.

# **Accessing Retirement Benefits**

Visit www.dartmouth.edu/hrs/benefits/access/.



# Dartmouth provides additional programs to support you. For details, please visit <u>dartgo.org/benefits</u>.

# > Paid Time Off

- Salaried Employees Visit dartgo.org/salaried-pto
- Non-Exempt Employees Visit dartgo.org/hourly-pto
- SEIU Employees refer to your union contract.
- Holidays and Winter Break Visit dartgo.org/holidays
- Volunteer Time Off Visit dartgo.org/vto

# > Educational Assistance Program

After at least one year of continuous service, benefits-eligible employees may take courses at an accredited college or university that have been pre-approved. Dartmouth College will reimburse 100% of the cost of tuition, registration fees, and books, up to a maximum benefit of \$2,000 per fiscal year for successfully completed courses in which you receive a grade of C- or higher (associate or undergraduate courses) or B- or higher (graduate courses). Visit **dartgo.org/tap**.

### > Tuition Grant for Dartmouth Courses

Benefits-eligible employees who are actively at work for one year of continuous regular employment may be eligible to receive a tuition grant for courses at Dartmouth. Visit **dartgo.org/tap**.

# > Faculty and Staff Loan Program

Dartmouth College offers a no-interest emergency loan program to all benefits-eligible employees. For more information please visit <u>dartgo.org/employee-loans</u> or contact the Benefits office at **603.646.3588**.

# > Adoption Reimbursement

Dartmouth College will contribute up to \$5,000 per calendar year for qualified expenses associated with the cost of adopting a child. For more information and submission deadlines visit **dartgo.org/adoption**.

# > Health Care Cost Hardship Program

A program designed to help you with extensive medical costs. For more information visit **dartgo.org/healthcare\_cost\_hardship**.



# **Turning Age 65 and Becoming Medicare Eligible**

If you are turning age 65 in 2022 but will continue working in a benefits-eligible position, Medicare will allow you to delay your enrollment in Medicare Part B until you officially retire, without a late enrollment penalty (enrollment in Medicare Part A is optional). The Dartmouth College active benefits plans are considered to be creditable plans, according to the Medicare Modernization Act (MMA).

If you are turning age 65 or older in 2022 and you are considering retiring in 2022, please contact Medicare three months before your retirement date to set up your Medicare coverage to begin the first of the month following the date you retire. For additional information on Medicare eligibility and enrollment periods, please visit **www.Medicare.gov**.

If you qualify for the Dartmouth College retiree healthcare program and are Medicare eligible, you must be enrolled in Medicare Part A and Part B effective the first of the month following your final day of active employment. You must also provide a copy of your Medicare ID card, showing coverage in Medicare A & B, to the Benefits Office at least 45 days before your retirement date in order to be effectively enrolled in the Dartmouth College Medicare Supplement (DCMS) plan.

Employees will have access to the Dartmouth College retiree health program upon meeting the minimum

eligibility requirements. You must be at least age 55 and have at least 10\* consecutive years of benefits-eligible service to qualify.

# Health Savings Accounts (HSAs) and Medicare enrollment

If you choose the HDHP and elect to contribute to the HSA as an active employee, you will no longer be able to do so once you enroll in Medicare. Please note: Premium-free Medicare Part A coverage begins six months back from the date you apply for Medicare (or Social Security or Railroad Retirement Board RRB benefits), but no earlier than the first month you were eligible for Medicare. To avoid a tax penalty, you should stop contributing to your HSA at least six months before you apply for Medicare.

For additional information regarding the Dartmouth College retiree medical plans, please visit the retiree benefits website at **dartgo.org/retirees**.

Dartmouth's Medicare Supplement plan is a self-insured group retiree medical plan. It is NOT a standardized Medicare Supplement (Medigap) plan and is NOT offered under a contract with the Federal Government. Cigna Health and Life Insurance Company is not connected with or endorsed by the U.S. government or the Federal Medicare program.

<sup>\*</sup>When an employee has one or more breaks in benefit-eligible service and each break is one year or less, the break(s) will be ignored when determining "consecutive" years of service, but the length of each break will not be counted as service. An interruption in benefit-eligible service lasting more than one year will break an employee's years of consecutive service.



# **Annual Required Notices**

# Women's Health and Cancer Rights Act (WHCRA)

In compliance with the Women's Health and Cancer Rights Act this letter serves as your annual notification regarding benefits for mastectomies and various related services.

For any participant or beneficiary of the Plan who receives plan benefits for a mastectomy, your Group Health Plan provides coverage for performance of a mastectomy; the procedures necessary to effect reconstruction of the breast on which a mastectomy was performed; the cost of prostheses (implants, special bras, etc.) as well as physical complications of all stages of mastectomy, including lymphedema; and surgery or reconstruction of the breast on which a mastectomy was not performed in order to produce a symmetrical appearance as maybe recommended by an attending physician of any patient on whom a mastectomy has been performed.

Coverage for such surgery or reconstruction will be subject to the same deductibles and copayments that apply to mastectomies under the Plan's current terms, which are described in your Group Health Plan Summary Plan Description.

For more information visit dartgo.org/whcra.

# Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit <a href="https://www.healthcare.gov">www.healthcare.gov</a>.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **1-877-KIDS NOW** or <a href="www.insurekidsnow.gov">www.insurekidsnow.gov</a> to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at <a href="www.askebsa.dol.gov">www.askebsa.dol.gov</a> or call 1-866-444-EBSA (3272).

For more information visit <a href="http://dartgo.org/chip">http://dartgo.org/chip</a>.

### **Patient Protection Disclosure**

Dartmouth College generally allows the designation of a primary care provider. You have the right to designate any primary care provider who participates in your plan's network and who is available to accept you or your family members. For information on how to select a primary care provider, and for a list of the participating primary care providers, visit **myCigna.com** or contact Cigna customer service at **855-869-8619**.

For children, you may designate a pediatrician as the primary care provider who participates in your plan's network and is accepting patients.

You do not need prior authorization from Cigna or from any other person (including a primary care provider) in order to obtain access to obstetrical or gynecological care from a health care professional in our network who specializes in obstetrics or gynecology. For a list of participating health care professionals who specialize in obstetrics or gynecology, visit <a href="mycigna.com">mycigna.com</a> or contact Cigna customer service at 855-869-8619.

The health care professional, however, may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a pre-approved treatment plan, or procedures for making referrals.

For more information visit <a href="http://dartgo.org/patient-protection">http://dartgo.org/patient-protection</a>.

# **Notice of Privacy Practices**

Under the Health Insurance Portability and Accountability Act (HIPAA), Dartmouth College is required to maintain the privacy of protected health information. For information visit http://dartgo.org/hipaa

# **Creditable Prescription Drug Coverage Notice**

This notice is for Medicare eligible policy holders and it has information about your current prescription drug coverage with Dartmouth College and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. For more information visit <a href="http://dartgo.org/credible\_coverage">http://dartgo.org/credible\_coverage</a>.

# **Contacts and Other Resources**



# Don't forget!

Open Enrollment is October 18 through November 1, 2021.

Your current FSA and HSA elections will not automatically re-enroll in 2022. Please log into FlexOnline during the Open Enrollment period to elect or waive these benefits for 2022.

# **DARTMOUTH BENEFITS OFFICE**

For questions on enrolling in your benefits.

Phone: 603.646.3588

Website: <a href="mailto:dartgo.org/benefits">dartgo.org/benefits</a>
Email: <a href="mailto:human.resources.benefits@">human.resources.benefits@</a>

dartmouth.edu Fax: 603.646.1108

# **ALEX - Decision Support Tool**

An easy-to-use online tool; by responding to questions ALEX will help you figure out what to choose, based on your responses. Learn more about your plan options or get help choosing your benefits.

Website: dartgo.org/ALEX22

# HEALTH AND WELFARE BENEFITS

**CIGNA - Medical** 

Phone: 855.869.8619 Website: <u>Cigna.com</u>

Account login: myCigna.com

**CIGNA - Vision** 

Phone: 877.478.7557

CIGNA - Global Health Medical Benefits Abroad

Toll-free: + 1.800.243.1348

Direct (Collect calls accepted):

+ 1.302.797.3535

Website: cignaenvoy.com

**EXPRESS SCRIPTS - Pharmacy** 

Phone: 877.788.5766

Website: www.express-scripts.com/

DartmouthCollege

# SENTINEL - Flexible Spending Accounts

Phone: 888.762.6088

Website: www.sentinelgroup.com

Claims fax: 781.213.7301

Claims address:

100 Quannapowitt Pkwy, Suite 300

Wakefield, MA 01880

# DARTMOUTH HEALTH CONNECT - Primary Care

Phone: 603.738.1164

Website:

dartmouthhealthconnect.com

Email: info@

dartmouthhealthconnect.com

# NORTHEAST DELTA DENTAL - Dental

Phone: 800.832.5700

Website: www.nedelta.com

# FIDELITY - Health Savings

Account

**Phone:** 800.544.3716 **Website:** www.fidelity.com

Account login:

www.netbenefits.com

# LINCOLN FINANCIAL GROUP -Short and Long Term Disability Life and Travel Insurance

Wills and Estate Planning

Phone: 800.210.0268

Website: www.mylincolnportal.com

# FACULTY/EMPLOYEE ASSISTANCE PROGRAM (F/EAP)

**Phone:** 844.216.8308

Website:

www.guidanceresources.com
Company ID: Dartmouth

# WELLNESS AT DARTMOUTH

Phone: 603.646.3706

Website: dartmouth.edu/wellness Email: wellness@dartmouth.edu

# **WINSTON BENEFITS**

Voluntary benefits are managed through Winston Benefits and cannot be found in the FlexOnline system.

To learn more or enroll, please call:

**Phone:** 855.805.5840

# **RETIREMENT BENEFITS**

# **TIAA - Retirement**

Phone: 800.842.2252

Website: www.tiaa.org/dartmouth

# **FIDELITY - Retirement**

Phone: 800.343.0860

Website: www.netbenefits.com/

dartmouth



The employee benefits programs described in this Benefits Guide are effective in 2022, unless otherwise noted. The information is a summary of Dartmouth's benefits, and every attempt has been made to ensure its accuracy. The actual provisions of each benefits program will govern, if there is any inconsistency between the information in this Benefits Guide and Dartmouth's formal plans, programs, policies or contracts, or any subsequent change in such plans, programs, policies or contracts.