2021 Benefits Enrollment Guide
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Open Enrollment Checklist

- Read this Benefits Enrollment Guide to learn what's new and changing for 2021.
- Visit the 2020 Benefits-Wellness Virtual Expo online, Nov. 2-20, at wmich.edu/hr/benefits-expo. Catch live events Monday, Nov. 2–Friday, Nov. 6.
- Complete a Health Insurance Enrollment and Change Form to add or drop coverage for yourself or your dependents. To add an eligible dependent to the health plan, complete the designated eligible individual enrollment form. Gather the supporting documentation you’ll need to submit with it, as noted on the form.
- Contact Human Resources to update your address and life insurance beneficiaries, if applicable.
- Complete and submit enrollment and change forms—along with any required supporting documentation—to Human Resources by mail, fax or email by Friday, Nov. 20.
- If you recently received a new Medicare card number, send a copy of it to Human Resources.

For additional information contact Human Resources.

If you don’t enroll

- You and your covered dependents will have the same medical, dental and vision benefits you had in 2020.
- If you waived coverage for a spouse or dependent in 2020, they will not have coverage in 2021.
- Unless you experience a qualifying life event (marriage, divorce, adding to your family, etc.), you will need to wait until the next Open Enrollment period to make changes to your benefits that take effect January 2022.
Benefits That Support Your Evolving Needs

No matter what life throws at you, your WMU health plan benefits are designed to keep you and your family healthy and to sustain you when you’re not. Take a look at the programs and incentives that support your physical, financial and emotional health, including fully covered preventive care (annual checkups, immunizations, tests and screenings) and dental cleanings.

Open Enrollment is Nov. 2-20

Despite so much changing around us, there's one constant you and your family can depend on: your WMU benefits.

Open Enrollment is your once-a-year opportunity to make changes to your benefits. Outside of experiencing a qualifying life event, like getting married or expanding your family, it's the only time you can add or drop coverage for yourself or a dependent.

If you make no changes to your current benefit elections, they’ll carry over to 2021.

Your elections take effect Jan. 1, 2021.

What’s new for 2021

Your plan coverage will not change for 2021, but please note the following:

• Monthly health plan rates will be adjusted. View your 2021 health plan rates on page 8.

• The Benefits-Wellness Expo has gone virtual this year, with webinars, videos and chat rooms. Visit the Expo online, Nov. 2-20, at wmich.edu/hr/benefits-expo. Don’t miss the live events Monday, Nov. 2–Friday, Nov. 6.
WMU Retiree Health Plan Overview

When you elect the Blue Cross Blue Shield of Michigan (BCBSM) Community Blue PPO plan, you'll automatically be enrolled in the dental and vision plans. The medical plan includes prescription drug coverage and preventive care at no additional cost to you. It uses a specific network of providers and facilities to offer the highest-quality care at the lowest rates.

WMU Retiree Health Plan and Medicare

Retirees and spouses who are eligible for Medicare and enrolled in the WMU Retiree Health Plan must carry Medicare Parts A and B; the WMU Retiree Health Plan is secondary coverage.

When you or your spouse first become eligible for Medicare—or if you receive a new Medicare number—be sure to send a copy of your Medicare card to Human Resources.

Don’t want to leave home for care?

You don’t have to. The Community Blue PPO plan offers virtual medical and mental health visits to you and your covered dependents through Blue Cross Online Visits. See a certified health professional, 24/7/365—wherever you are—using your smartphone, tablet or computer. If you need medication, the doctor can send a prescription directly to your pharmacy. You'll pay no copay for a medical visit; for behavioral care, you'll pay a $30 copay.

You can get help for conditions including cough, sinus infection, sore throat, bronchitis, fever, diarrhea, pink eye, cold, flu, headache, weight concerns, smoking cessation, depression, anxiety, grief and insomnia.

To get started, visit [bcbsmonlinevisits.com](http://bcbsmonlinevisits.com), add the app to your smartphone or tablet, or call (844) 606-1608.
Community Blue PPO

The Community Blue PPO plan offers set copays for some services, like doctor’s visits and prescriptions. For other services, such as diagnostic tests and hospital stays, you must first meet your annual deductible. Then, the plan will pay 90% of expenses, and you’ll pay 10% coinsurance—up to an annual cap.

To locate a provider, visit bcbsm.com and select Find a Doctor. For your plan, select Community Blue PPO.

Learn more about the Community Blue PPO plan.

Community Blue PPO plan highlights

- Provider choice—stay in-network or use an out-of-network provider or facility. And you don’t need a referral to see a specialist.
- You’ll pay more out of pocket if you use an out-of-network provider, and some services may not be covered.
- Includes 24/7/365 virtual care through Blue Cross Online Visits™.
- Sindecuse Health Center is in-network, including preferred pricing at Sindecuse Pharmacy. For some services, you’ll be billed for up to only 50% of the in-network plan deductible.
- WMU Unified Clinics provide services to you and your family. Plan coverage and costs vary by service.
- Nationwide coverage through BCBS PPO networks.
What you pay for medical care

To understand the basics, start with this overview.

<table>
<thead>
<tr>
<th></th>
<th>Community Blue PPO</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>In-Network</td>
</tr>
<tr>
<td><strong>Deductible</strong></td>
<td>$800 individual</td>
</tr>
<tr>
<td></td>
<td>$1,600 family</td>
</tr>
<tr>
<td><strong>Coinsurance</strong></td>
<td>10% after deductible</td>
</tr>
<tr>
<td></td>
<td>(50% for select services)</td>
</tr>
<tr>
<td><strong>Out-of-Pocket Maximum</strong></td>
<td>$1,700 individual</td>
</tr>
<tr>
<td></td>
<td>$3,400 family</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Community Blue PPO</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(In-Network)</td>
</tr>
<tr>
<td><strong>Preventive care</strong></td>
<td>$0</td>
</tr>
<tr>
<td><strong>Primary care provider</strong></td>
<td>$30 copay</td>
</tr>
<tr>
<td><strong>Blue Cross Online Visits</strong></td>
<td>$0 copay (medical)</td>
</tr>
<tr>
<td></td>
<td>$30 copay (behavioral care)</td>
</tr>
<tr>
<td><strong>Specialist</strong></td>
<td>$40 copay</td>
</tr>
<tr>
<td><strong>Chiropractor</strong></td>
<td>$0, no deductible/coinsurance</td>
</tr>
<tr>
<td></td>
<td>(12 visits per calendar year)</td>
</tr>
<tr>
<td><strong>Urgent care</strong></td>
<td>$50 copay</td>
</tr>
<tr>
<td><strong>Emergency room</strong></td>
<td>$150 copay (waived if admitted to the hospital)</td>
</tr>
<tr>
<td><strong>Hospital services</strong></td>
<td>10% coinsurance after deductible</td>
</tr>
<tr>
<td><strong>Diagnostic testing</strong></td>
<td>(X-ray, labs, etc.)</td>
</tr>
<tr>
<td></td>
<td>10% coinsurance after deductible</td>
</tr>
<tr>
<td><strong>Advanced imaging</strong></td>
<td>10% coinsurance after deductible</td>
</tr>
<tr>
<td></td>
<td>(MRI, CT/PET Scan, etc.)</td>
</tr>
<tr>
<td><strong>Outpatient physical therapy, speech therapy, occupational therapy (for rehab)</strong></td>
<td>10% coinsurance after deductible</td>
</tr>
<tr>
<td></td>
<td>(combined 60-visit maximum per member per calendar year)</td>
</tr>
<tr>
<td><strong>Outpatient mental health care</strong></td>
<td>10% coinsurance after deductible</td>
</tr>
<tr>
<td></td>
<td>($30 copay for Blue Cross Online Visits)</td>
</tr>
</tbody>
</table>

* Prior authorization required

For coverage details, review the Community Blue PPO plan Benefits at a Glance. You’ll find it on the HR website at [wmich.edu/hr](http://wmich.edu/hr). Choose your Employee Group, then select Health care insurance and coverage.
Prescription Drugs

Prescription drug coverage is included with your medical plan. What you pay depends on your plan coverage, the medication type, fill quantity and where you fill the prescription. In addition to your plan’s retail and mail-order pharmacy options, you can also fill your prescriptions at Sindecuse Pharmacy. You’ll receive preferred pricing there when you’re a Community Blue PPO plan member.

What you pay

(In-network pharmacy)

<table>
<thead>
<tr>
<th>Tier 1 (generic)</th>
<th>30-Day Retail</th>
<th>90-Day Mail Order</th>
<th>90-Day Retail</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$10 copay*</td>
<td>$20 copay*</td>
<td>$25 copay*</td>
</tr>
<tr>
<td>Tier 2 (preferred brand)</td>
<td>$40 copay</td>
<td>$80 copay</td>
<td>$100 copay</td>
</tr>
<tr>
<td>Tier 3 (non-preferred brand)</td>
<td>$80 copay</td>
<td>$160 copay</td>
<td>$200 copay</td>
</tr>
<tr>
<td>Tier 4 (preferred specialty)**</td>
<td>15% coinsurance, up to a maximum of $150</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tier 5 (non-preferred specialty)**</td>
<td>25% coinsurance, up to a maximum of $300</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* If the price of the drug is less than the copay, you’ll pay the lower amount.
** Specialty drugs are limited to a 15- or 30-day supply. Learn more about special coverage and mail order through AllianceRx Walgreens Prime delivery.

Sindecuse Pharmacy Preferred Pricing

<table>
<thead>
<tr>
<th>Tier 1 (generic)</th>
<th>30-Day Fill</th>
<th>90-Day Fill</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$10 copay*</td>
<td>$22.50 copay*</td>
</tr>
<tr>
<td>Tier 2 (preferred brand)</td>
<td>$30 copay</td>
<td>$67.50 copay</td>
</tr>
<tr>
<td>Tier 3 (non-preferred brand)</td>
<td>$60 copay</td>
<td>$135 copay</td>
</tr>
<tr>
<td>Tier 4 (preferred specialty)**</td>
<td>15% coinsurance, up to a maximum of $120</td>
<td></td>
</tr>
<tr>
<td>Tier 5 (non-preferred specialty)**</td>
<td>25% coinsurance, up to a maximum of $240</td>
<td></td>
</tr>
</tbody>
</table>

* If the price of the drug is less than the copay, you’ll pay the lower amount.
** Specialty drugs are limited to a 15- or 30-day supply. Learn more about special coverage and mail order through AllianceRx Walgreens Prime delivery.

Refill maintenance meds by mail and pay less

Save time—and money—when you fill a 90-day prescription using Express Scripts mail-order pharmacy. Depending on the medication, you could pay less than you would if you filled the same prescription at a retail pharmacy. To get started, visit Express Scripts.

Special circumstances for some drugs

To ensure you’re receiving the most appropriate and cost-effective therapy, certain prescription drugs require prior authorization or step therapy before they’re covered. Step therapy involves trying less expensive options before the brand-name drug will be covered. View the step therapy overview and drug list.
Dental Plan

Dental coverage is included when you’re enrolled in the Community Blue PPO plan. The Blue Dental PPO plan offers both in- and out-of-network coverage, but you’ll always pay less when you use a dentist in the BCBSM Blue Care Network.

Tip: Have your Blue Cross member ID card handy when you make your appointment. Use your 9-digit enrollee ID on the front of your card if you need to verify coverage.

To find a PPO network dentist in your area or to confirm if your regular dentist is in-network, visit mibluedentist.com.

What you pay for care

<table>
<thead>
<tr>
<th></th>
<th>Individual</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Deductible</strong></td>
<td>$30</td>
<td>$60</td>
</tr>
<tr>
<td><strong>Class I—Preventive</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oral exams, cleanings, X-rays</td>
<td>$0, no deductible</td>
<td></td>
</tr>
<tr>
<td><strong>Class II—Basic</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fillings, extractions</td>
<td>10% coinsurance after deductible</td>
<td></td>
</tr>
<tr>
<td><strong>Class III—Major</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Crowns, bridges, dentures</td>
<td>50% coinsurance after deductible</td>
<td></td>
</tr>
<tr>
<td><strong>Class IV—Orthodontia</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Braces, appliances</td>
<td>40% coinsurance, no deductible</td>
<td></td>
</tr>
</tbody>
</table>

* $2,500 annual benefit maximum per member
** $2,500 lifetime benefit maximum per member

For details, including what you’ll pay for out-of-network dental care, review the Benefits at a Glance on the HR website at wmich.edu/hr. Also, you or your provider can call the number on your ID card, (800) 826-8152, from 8 a.m. to 6 p.m., Monday through Friday.

Vision Plan

Vision coverage is included when you’re enrolled in the Community Blue PPO or plan. As a member of the Vision plan, you receive a 20% discount on services through the Vision Service Plan (VSP) network.

When you see a VSP provider for an eye exam, you’ll pay only a $10 copay. And if you need glasses, you have a $400 allowance for prescription lenses and frames and/or contact lenses, with no copay. You can use this benefit once every 24 months. Other limitations and exclusions may apply. To choose a VSP provider, visit vsp.com.

For details, review the Benefits at a Glance on the HR website at wmich.edu/hr.
# Health Plan Monthly Rates

## Retiree

<table>
<thead>
<tr>
<th>Category</th>
<th>Medicare Eligible</th>
<th>Non-Medicare Eligible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retiree only</td>
<td>$139.46</td>
<td>$136.46</td>
</tr>
<tr>
<td>Retiree with one Medicare eligible dependent</td>
<td>$914.26</td>
<td>$911.25</td>
</tr>
<tr>
<td>Retiree with one non-Medicare eligible dependent</td>
<td>$897.56</td>
<td>$1,197.79</td>
</tr>
<tr>
<td>Retiree with two Medicare eligible dependents</td>
<td>$1,689.06</td>
<td>$1,686.05</td>
</tr>
<tr>
<td>Retiree with two or more non-Medicare eligible dependents</td>
<td>$1,655.84</td>
<td>$1,652.65</td>
</tr>
<tr>
<td>Retiree with one Medicare &amp; one non-Medicare eligible dependent</td>
<td>$1,672.36</td>
<td>$1,669.54</td>
</tr>
</tbody>
</table>

## Surviving Spouse

<table>
<thead>
<tr>
<th>Category</th>
<th>Medicare Eligible</th>
<th>Non-Medicare Eligible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surviving Spouse only</td>
<td>$433.26</td>
<td>$423.92</td>
</tr>
<tr>
<td>Surviving spouse with one Medicare eligible dependent</td>
<td>$841.13</td>
<td>$981.05</td>
</tr>
<tr>
<td>Surviving spouse with one non-Medicare eligible dependent</td>
<td>$981.05</td>
<td>$987.60</td>
</tr>
</tbody>
</table>
Call or email to schedule an appointment at the HR Service Center: Mondays, Wednesdays and Fridays, 10 a.m.-2 p.m.

(269) 387-3620
(269) 387-3441 (fax)
Email: hr-hris@wmich.edu
Website: wmic.edu/hr

Mailing address:
1903 W. Michigan Ave.
Kalamazoo, MI 49008-5217
Location:
1270 Seibert Administration Building

Contacts

Blue Cross and Blue Shield of Michigan
Community Blue PPO Medical plan (BCBSM)
(877) 671-2583
Website: bcbsm.com

Blue Cross and Blue Shield of Michigan
Dental plan
(877) 671-2583
Website: mibluedentist.com

Blue Cross and Blue Shield of Michigan
Online Visits
(844) 606-1608
Website: bcbsmonlinevisits.com

Express Scripts
Mail order prescription drugs
(800) 282-2881
Website: express-scripts.com

Sindecuse Health Center
Medical, pharmacy, sports medicine, physical therapy, massage therapy, nutrition counseling
(269) 387-3287
Website: wmic.edu/healthcenter

TIAA
Retirement savings, tax-deferred savings
(800) 842-2776
Website: tiaa.org/wmich

Unified Clinics
College of Health and Human Services
Specialty Clinics
(269) 387-7000
Website: wmic.edu/unifiedclinics

Location:
1000 Oakland Drive
Kalamazoo, MI 49008-5361
WMU Student Recreation Center  
University Recreation  
(269) 387-4732  
Website: wmich.edu/rec

West Hills Athletic Club  
(269) 387-0410  
Website: westhillsathletic.com  
Location:  
2001 South 11th St.  
Kalamazoo, MI 49009-5448

There’s an App for That

Download these mobile apps now, so you can access your benefits on your mobile device—wherever you are, whenever you need to.

- Blue Cross Blue Shield of Michigan  
  App Store  
  Google Play

- BCBSM Online Visits  
  App Store  
  Google Play

- Express Scripts  
  App Store  
  Google Play

- VSP  
  App Store  
  Google Play
Notices

You can review the following notices at wmich.edu/hr/benefits-notices:

- Notice of Special Enrollment Rights
- Notice of Patient Protection
- Newborns’ Act Disclosure
- Health Insurance Portability and Accountability Act of 1996 (HIPAA) Notification of Privacy Practice
- Women’s Health and Cancer Rights Act (WHCRA) of 1998
- Premium Assistance Under Medicaid and the Children’s Health Insurance Program (CHIP)
- COBRA Continuation of Coverage
- Notice Regarding Wellness Program
- Summary of Benefits and Coverage for Medical and Prescription Drug
- Summary of Benefits and Coverage for Employee Assistance Program

This guide is intended to be a summary of benefits offered and does not include complete coverage and policy details. In case of a discrepancy between the guide, the actual plan documents and policy statements, the actual plan documents and complete policy will prevail. For more information on what each benefit covers, visit wmich.edu/hr, and select your employee group to see the individual benefit summaries, contracts or policies.