KNOW YOUR BENEFITS

Your new benefits plan year began September 1, 2018. It is important to log into Workday through Single Sign On (https://sso.tamus.edu/) and verify the benefits you elected for FY18 by clicking on the Benefits Worklet. If you find an error in your benefit elections or need to make a change, this must be done before September 15. or within 10 days of receiving your first paycheck with your new plan year's deductions. Contact your Human Resources office or Benefits Partner.

NEW HEARING AID BENEFIT FOR FY19

A hearing aid benefit has been added to the A&M Care Plans. You can receive up to \$1,000 per hearing aid per ear, every 3 years, subject to 20% coinsurance. The deductible will not apply to this benefit. You will get more for your benefit if you use a Blue Cross and Blue Shield network provider.

PROVIDER FINDER UPDATES

The Brazos Valley Network (BVN) is now identified in the Blue Cross and Blue Shield provider finder. Log in to your Blue Access for Members (BAM) account, select the Find Doctors and Hospitals tab, and search within your zip code. Those locations with a maroon banner are in the BVN.

Benefit Briefs



NEW BENEFIT: MDLIVE VIRTUAL VISITS

Virtual Visits is a new feature provided by MDLive through your Blue Cross and Blue Shield (BCBS) health plan. You can schedule visits with doctors and therapists via telephone, online video or mobile app. This alternative to in-person appointments provides health care for simple, nonemergency medical and behavioral health conditions 24/7/365.

You can select your doctor from a large, national virtual visit network, or choose to meet with the first available physician. If you want to meet with the same doctor on your second virtual visit, you are able to select him or her from your MDLive dashboard for a follow-up appointment. When appropriate, prescriptions can be sent to your pharmacy of choice. Behavioral health consultations are available by appointment and video only.

Virtual Visits are included in the A&M Care plans with a \$20 copay. All retirees including those with Medicare or in the 65PLUS plan can use these services for the \$20 charge. These services are not covered by Medicare and will be paid by BCBS without needing to be submitted to Medicare. You will be asked to pay up front before you speak with the physician. To use

MDLive, go to https://mdlive.com/bcbstx and activate your account. You can also download the MDLive app on your phone.

MYEVIVE HEALTH ASSESSMENT IS NOW AVAILABLE

Beginning September 1, 2018, you will need to complete a two-step process to receive the lowest insurance premium for the **2019-2020 plan year.** If you completed a wellness exam in FY18, you are already receiving your wellness exam credit for FY19. When you take the Heath Assessment, it will apply to FY20.

- You and your spouse*, if enrolled, still must complete your annual wellness exam.
 Preventive visits are no cost to you under the A&M Care Plan
- You and your spouse*, if enrolled, must also take a Health Assessment on MyEvive which will provide you with personalized information about available A&M System programs and wellness tools.

*Retirees already receive the lowest premiums and may participate, but it is not required.

THE
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MyEvive will process both actions and you will receive your \$30 premium credit. Your credit does not depend on participation in any of the suggested programs. There will no longer be a \$50 deductible credit for taking the Blue Cross and Blue Shield Health Risk Assessment.

If you are unfamiliar with MyEvive, it is a personalized benefit resource that alerts you about health and savings opportunities so you don't have to search for them yourself.

Some of MyEvive's features include:

- · your current wellness premium incentive status
- easy access to contact information and links to your health benefits and wellness resources
- access to your out-of-pocket spend and deductible anytime, anywhere
- a convenient on-the-go app experience
- · a place to upload a digital insurance card
- · personalized reminders right when you are due for care

If you have not already registered for MyEvive, go online to https://tamus.myevive.com and enter your UIN and information from your BCBSTX insurance card. You may also download the MyEvive app on both Android and Apple devices and use the token code, myevivetamus.

DELTA DENTAL SINGLE-SIGN-ON (SSO) ACCESS

MyEvive, the online benefit website available to those enrolled in the A&M Care health plans, recently added Single-Sign-On access for Delta Dental. This means that when you log into MyEvive, you can seamlessly connect to your Delta Dental account without having to enter your Delta Dental user ID or password. Go to MyEvive, and click the "My Resources" menu item, then click the "Delta Dental" card to access your account. The first time, if you haven't already done so, it will ask you to sign into your existing account. After you log in once, the SSO will work every time you visit MyEvive and will take you directly to your Delta Dental account upon clicking the link.

Currently, Express Scripts, Blue Cross and Blue Shield, Well on Target, and Delta Dental are are all connected to MyEvive through Single-Sign-On.

MEDICAL INSURANCE ID CARDS

New FY19 Blue Cross and Blue Shield medical insurance ID cards are being mailed to all enrollees starting mid-August. **Do not dispose of your Express Scripts prescription ID Card.**

- Active Employee cards begin with the prefix TXW
- Retiree cards for the A&M Care plan use the prefix TXW if the retiree or any other covered dependent is under age 65
- Retiree cards for the A&M Care plan, use the prefix ZGB if the retiree is over age 65 and all covered dependents are age 65 or older
- Retiree Cards for the 65+ Plan use the prefix ZGB since all enrollees should be Medicare primary.

No copays will be listed on the new ID cards.

NEW FLEXIBLE SPENDING ACCOUNT VENDOR: NAVIA BENEFIT SOLUTIONS

Navia Benefit Solutions will be replacing Payflex as the Flexible Spending Account (FSA) Provider. You can visit https://www.type-payflex.nd the Flexible Spending Account (FSA) Provider. You can visit https://www.type-payflex.nd the Flexible Spending Account (FSA) Provider. You can visit https://www.type-payflex.nd the Flexible Spending Account (FSA) Provider. You can visit https://www.type-payflex.nd the Flexible Spending Account (FSA) Provider. You can visit https://www.type-payflex.nd the Flexible Spending Account (FSA) Provider. You can visit https://www.type-payflex.nd the Flexible Spending Account (FSA) Provider. You can visit https://www.type-payflex.nd the Flexible Spending Account (FSA) Provider. You can visit https://www.type-payflex.nd the Flexible Spending Account (FSA) Provider (FSA) Pr

<u>naviabenefits.com/</u> to create an account, review your claims, and file claims online.

To register for online account access, you will be requested to provide the following information:

- · Last Name, First Initial
- Email Address
- Employer Code: A&M
- Last four digits of your social security number/employeeID
- · Date of Birth
- Choose a User Name
- Answer three security questions

Do not forget to review and accept the 'Terms and Conditions'. After clicking 'Submit', you will receive an email confirmation.

FlexConnect

FlexConnect is one option to manage your Navia claims. You can link your FlexConnect account to your insurance providers and Navia will automatically prepare FSA-eligible claims.

First, you must "opt-in" to use FlexConnect from your Navia user account. Wait 1-2 business days, then simply add your login information for your medical, dental and vision insurance accounts to FlexConnect. After you have connected the accounts, your insurance claims will be periodically downloaded to the portal. When Navia notices one that is reimbursable through your FSA, a "Reimburse Me" button will appear next to the item. Click "Reimburse Me," and Navia automatically prepares and submit your claims with the required documentation.

FY18 Flexible Spending Account Deadlines

If you have remaining funds in your FY18 healthcare or dependent care **Payflex** Flexible Spending Account (FSA), you are eligible for a 2 1/2 month grace period. This means you may file eligible **Payflex** claims with a date of service of September 1, 2017 through November 15, 2018 to use your remaining FY18 Payflex FSA funds. If you do not have remaining funds, you must file new claims with Navia beginning September 1, 2018.

SPECIAL BEGINNINGS

Special Beginnings, a Blue Cross and Blue Shield program available at no cost through your A&M System insurance plan, provides pregnancy education and support to expecting couples. The program includes:

- Support to identify any risk factors and help monitor the baby throughout the pregnancy
- Educational material on topics such as prenatal and postpartum nutrition, newborn care, and post-pregnancy information
- Personal telephone contact with the program staff until 6 weeks after delivery
- A complimentary book about having a healthy pregnancy and baby

The Special Beginnings website provides a video library and week-by-week pregnancy information which can be accessed through your Blue Access for Members (BAM) account. You can enroll or find out more information about the program by calling 888-421-7781.

