

2024 US BENEFITS OPEN ENROLLMENT FAQ

This document provides answers to some commonly asked questions of the overall open enrollment event as well as guidance as it relates to our transition from 2023 into the 2024 plan year.

GENERAL

Q: What is Benefits Open Enrollment?

A: Open Enrollment is the time each year when all US benefits eligible employees can enroll or make changes to important benefits programs.

Q: How do I know if I am benefits-eligible?

A: For medical, Rx, dental and vision coverage, all employees are eligible for benefits. For all other benefits, regular full- or part-time employees who are scheduled to work 30 hours per week or more are eligible.

You may also be able to cover dependents if they meet certain eligibility requirements.

Your Dependents May Include:

- Your legal spouse/domestic partner*
- Your children up to age 26 (children may include biological children, adopted children, stepchildren, foster children, and children for whom you have legal guardianship)
- Your children over age 26 who are unmarried and unable to support themselves due to a physical or mental disability which began prior to age 26

Q: When is the 2024 benefits open enrollment?

A: October 30–November 13th, 2023. The elections or changes made during the enrollment period go into effect January 1st, 2024.

Q: What if I have a Qualifying Life Event (QLE) (such as birth/adoption of child, marriage, divorce, etc) before 1/1/2024?

A: You must contact hr@healthedge.com. You have 30 days from the qualifying life event date to make changes. After you submit your QLE event, both your 2023 elections AND your 2024 benefit elections will need to be refreshed to reflect any changes you made. To do this, you will need to re-submit both your 2023 and 2024 elections.

Q: What's different this year with Open Enrollment?

A: This year we are hosting a **PASSIVE** enrollment, which means if no action is taken during the Open Enrollment period, current benefits elections will become the default selection and continue for the coming year, except flexible spending accounts which must be set up every year.

For the 2024 Open Enrollment we are not requiring employees to complete this event, but we still encourage all US employees to participate. Before choosing to stick with the same plan, employees should be aware that there are several changes in 2024.

Q: Why should I participate?

A:

- ✓ You need to make dependent changes
- ✓ You currently have 2023 coverage and do not want coverage in 2024 – waive all coverages
- ✓ You would like to make plan changes for 2024
- ✓ You would like to re-elect or elect an FSA
- ✓ HSA contribution changes for 2024

Q: What happens if I don't log into UKG and make elections for 2024 by the deadline?

A:

- ✓ Your FSA accounts will not roll over for 2024
- ✓ All other benefits will roll over for 2024 based on your current elections
- ✓ You may see premium and coverages changes starting Jan 1st, 2024, depending on the benefits you currently have elected

Q: If I don't want benefits in 2024 do I have to do anything?

A: If you do not have benefits through HealthEdge in 2023 then you do not have to take action. You will not have benefits in 2023.

If you currently have benefits through HealthEdge in 2023 then you must go in and waive the coverages you do not wish to have in 2024.

Q: Which plans should I enroll in?

A: Consider the below helpful resources when reviewing your 2024 options:

- Aetna Concierge is ready to assist you with talking through your options.
- The Benefits Portal has many resources built to give you the understanding of each benefit offering.
- When viewing your medical, dental and vision plan options, check the networks and see which may have better coverage with any preferred Providers.
- View the comparison charts that are available on the Benefits Portal for medical, dental and vision plan options.
- Determine if there are any planned life events you may want to consider when making your decisions such as surgery, marriage, buying a home, orthodontia needs, etc.
- Attend the benefit fair or watch the recordings.
- Read through the benefit content available on the Helix US Benefit Page.

Q: When will my paycheck match my submitted elections for the new year?

A: Any employee contributions and/or employer contributions begin on next year's first paycheck.

Q: Will I be receiving new ID cards for my elected benefits?

A: Please reference the grid at the end of this document.

Q: Does the UKG 2024 open enrollment event show what plans I currently have for 2023?

A: Yes, your currently elected benefits will show in the upper right-hand corner

of the screen and will also be available for comparison once you reach the final submission page.

Q: Where is the 2024 open enrollment option on UKG?

A: Once in UKG, go under Myself > in the search box type "Open Enrollment" and hit search to enter. Click on the Open Enrollment event, this will populate a new page with an event labeled "2024 Open Enrollment". Click 2024 Open Enrollment to enter the event.

Q: Can you share our definition of domestic partner qualifications?

A: The partners are and intend to remain one another's only domestic partner. · They live together in a shared residence. · The members of the partnership are both at least 18 years old. · The partners share financial responsibility. · Both partners are not married or a member of a joint civil union with anyone else.

Q: Where can I find the rates for our benefit plans?

A: Rates can be found in the 2024 Benefits Enrollment Guide.

Q: Where is the 2024 Benefit information?

A: <https://healthedgebenefits.com>

Q: I missed the 2024 Benefit Fair meetings. Are the meetings recorded?

A: Yes, a list of meetings and their recordings can be found under "Webinars" on the benefit portal.

Q: I can't log in to UKG – I keep getting errors or need a password.

A: Remember to go through the Okta portal to access UKG! Okta is the single sign-on tool used to access multiple applications with your HealthEdge credentials. To access your apps (including UKG), visit Okta. NOTE: if you have old bookmarks saved in your browser, delete them and only refer to the UKG link in Okta.

Q: Why isn't 401(k) showing up/Why can't I elect 401(k)?

A: 401(k) elections are not part of the 2024 Open Enrollment Event. You may change your retirement elections at any time during the year on the Empower Retirement website.

Q: How do I add dependents and beneficiaries in UKG?

A: To add your beneficiaries/dependents, you will first want to add them as a Contact in UKG > Myself > Contacts > click "Add" in the top right-hand corner.

Once you add your Contacts, you will want to include their SSN and DOB if you also plan to add them as a dependent/beneficiary in any manner. Otherwise, you will be able to select their Designation on that screen.

Q: Once we make our benefits elections, how long does it usually take for the medical/dental/vision insurance to be activated so that we have access?

A: Typically, a week + a couple days from the date of election. You may still go to appointments/pick up prescriptions, but you will need to submit for reimbursement later.

Q: Where do I go for:

Benefit Plan Rates (Cost)	The 2024 Benefits Enrollment Guide
Benefit Plan Documents	The benefit portal under "2024 Benefits Information". Choose the plan you would like to learn more about.
FSA Information	<ul style="list-style-type: none"> The benefit portal under "2024 Benefits Information" in the Flexible Spending Accounts section In the 2024 Benefits Enrollment Guide
HSA Information including ER Contributions	<ul style="list-style-type: none"> The benefit portal under "2024 Benefits Information" in the Health Savings Account section In the 2024 Benefits Enrollment Guide
Vendor Contact Information	<ul style="list-style-type: none"> In the 2024 Benefits Enrollment Guide. In the benefit portal under "Contacts".
How to Enroll	Benefits Enrollment is completed through UKG which is an application found on your UKG landing page. For a step-by-step enrollment guide can be found on the Benefit Portal.

MEDICAL & PHARMACY COVERAGE

Q: When is coverage effective?

A: : If you elected coverage for you or your family during open enrollment it is effective January 1, 2024.

Q: If I'm a new enrollee, will I receive a physical ID card?

A: Yes, any new enrollee will receive hard-copy ID cards from Aetna. You also have access to a digital ID card on the Aetna member site & can request a hard copy ID card reissue there, too. If you prefer to speak with someone live, call your Health Concierge to help guide you at 855.627.5518.

Q: How do I access the Aetna site?

A: Once you're a member, here's how you can connect: • Download the Aetna Health app. Just text "GETAPP" to 90156 for a link to download the app and create an account. • Go to www.Aetna.com to create an account and log in to your member website

Q: Are In and Out of Network benefit maximums, deductible and coinsurance limits combined?

A: Yes, In and Out of network benefit maximums, deductible and coinsurance limits are combined.

Q: Is the in/out network list different for each plan? For example, is the Core Plan in-network list the same as the HDHP plan?

A: The in-network would be the same for all plans. You can find in-network providers on www.aetna.com. Please note that there is no list for out-of-network providers, generally anyone not noted on the in-network provider is considered out-of-network.

Q: Are the Family Formation Services something that has to be elected or are they included with all plans?

A: Family Formation services are included with all plans.

Q: What is the fertility cap?

A: \$30,000 maximum

Q: Do any plans cover pregnancy and childbirth?

A: Yes, all plans have benefit coverage for Maternity services

Q: Does HealthEdge offer any IVF or fertility treatments?

A: All medical plan options provide coverage for basic and comprehensive infertility services. The services are subject to any deductibles, co-insurance, co-pays, etc., that the employee chooses to elect.

- Basic infertility and comprehensive infertility services. Covered services include diagnose and evaluate the underlying medical cause of infertility, artificial insemination, which includes intrauterine (IUI)/intracervical (ICI) insemination
- Allows access to the Institutes of Excellence infertility network. This network offers high-quality, high-value infertility care and has proven, successful treatment rates. It includes clinics that specialize in assisted reproductive technology (ART), including IVF and elective single embryo transfer (eSET).

Q: Do we need a referral from our PCP to go to urgent care to have the services covered?

A: No referral is needed; you may use Urgent Care services and pay the copayment for Urgent Care.

Q: Are mammograms covered at 100% on all plans?

A: Yes, the plans cover routine mammograms at 100%

Q: Are any of the plans considered to be an HMO?

A: No, none of the current HealthEdge medical plans through Aetna are HMOs

Q: Is any type of bariatric surgeries covered by any of these plans?

A: Bariatric services are covered, limitation may apply to these services, please call Aetna member services for additional details.

TRANSITION OF CARE TO AETNA

Q: How do I find out if my current providers are in-network?

A: You can contact the Aetna concierge via phone, website, or app – as well as directly use the provider finder on the Aetna website.

Q: What if I'm currently in the middle of care for a serious condition (for example cancer care, pregnancy, etc.) and my current medical provider is not in-network with Aetna?

A: Transition of Care is offered to members who are in an active course of covered treatment that meets clinical coverage/guidelines with a treating provider. The transition of care form must be sent to Aetna within 90 days of the enrollment date.

TRANSITION OF CARE TO OPTUMRX (AUTOMATICALLY PROVIDED WITH YOUR AETNA MEDICAL PLAN)

Q: Will I need my Rx prescriptions pre-authorized with Optum Rx before I can get a prescription filled?

A: All new enrollees into Aetna coverage should expect to receive their card within 30 days of elections. You may contact Optum Rx (reference the number on your Optum Rx ID card) to inquire if your prescription may need a pre-authorization. Any Provider prescribing new medications for employees in 2023 that require pre-authorization will need to submit the pre-authorization with OptumRx.

PRESCRIPTION DRUG BENEFITS

Q: Are In-Network and Out-of-Network deductibles and other maximums tracked separately?

A: Out of Network claims are covered under the pharmacy benefit at the contracted rate minus the copay. The pharmacy benefit does not have

separate Out of Network accumulators. As such, the claims would apply to the accumulator buckets (Deductible and MOOP) setup on the pharmacy benefit.

Q: What is the fertility benefit cap?

A: From a pharmacy benefit perspective, there is up to a \$30,000 individual lifetime maximum on the combination of both oral and injectable fertility agents.

SPENDING/SAVING ACCOUNTS

Q: Who is the FSA administrator for the 2024 plan year?

A: For 2024, your FSA administrator is PayFlex.

Q: How much can I contribute to my FSA for 2024?

A: The IRS maximum contribution limits are \$3,200 for HealthCare FSA & Limited Purpose FSAs, and \$5,000 for Dependent Care FSAs.

Q: How long will I be able to use my 2024 FSA funds? Is there a "use it or lose it" provision?

A: If you have not spent all the amounts in your health FSA by 12/31/2024, you may continue to incur claims during the "Grace Period" which will extend an additional 2.5 months (3/15/2024) remaining in your health FSA. Any monies left at the end of the plan year and the grace period will be forfeited. You will have 90 days after the end of the plan year to submit any expenses (3/31/2024) for reimbursement that were incurred prior to the end of the grace period.

Q: For the FSA and Dependent care amounts for the remainder of 2024, do I enter the amount I want to use for the rest of the year?

A: Yes, only enter the amount that you will be able to utilize in the remainder of the year. FSA(s) are use-it-or-lose-it-accounts. If you have any funds remaining at the end of the year the unused amount will be forfeited.

Q: If I elect the HDHP medical plan, am I able to elect the Healthcare FSA?

A : If you have an HSA, you are not eligible to also have a regular purpose Healthcare FSA but you would be able to enroll in the Limited Purpose

Healthcare FSA. The Limited Purpose Healthcare FSA is for HSA participants and can be used for eligible dental and vision expenses only.

Q: When do my Employee and Employer contributions begin for the HSA?

A: The employee contributions typically begin one to two pay periods after election and the employer contribution takes up to four pay periods after election to be deposited.

Q: Do I need to contribute my own dollars to receive the Employer contribution for the HSA?

A: Yes, you must contribute your own dollars per pay period to receive the Employer contribution into the account.

Q: What is the HSA Employer contribution?

A: \$750 for Individual, \$1,500 for Family.

Q: Is there a minimum amount employees should pay to get the full employer HSA contribution?

A: Yes, you must contribute at least \$1 per pay period to receive the full employer HSA contribution.

MENTAL WELLNESS SUPPORT WITH HEADSPACE CARE (formerly Ginger)

Q: What is Headspace Care?

A: Headspace Care offers confidential mental healthcare through coaching via text-based chats, skill-building content, and video-based therapy and psychiatry for employees age 18 and older. Support is available anytime, 24/7/365, anywhere, for a variety of challenges.

Q: Who is eligible to use the Headspace Care?

A: Employees (full- or part-time working at least 30 hours per week) and their dependents, who are age 18 and older, are eligible for Headspace Care.

Q: When will I have access to Headspace Care?

A: You will have access to Headspace Care after 30 days of employment.

Q: How do I access Headspace Care?

A: Visit the app store on your phone & download the 'Headspace Care emotional support' app. In the app, tap 'get started', then 'my organization'. Follow the instructions & you're all set.

Q: Will my employer or peers I work with know that I am using Headspace Care?

A: No. Headspace Care does not share any individual-level service usage or other private data with your employer. Headspace Care protects your confidential health & personal information in accordance with state, federal, & international law as described in the Privacy Statement and Terms of Service.

Q: Will my dependents know that I am using Headspace Care, and will I be notified of their usage?

A: No, Headspace Care will never share usage information with family members, dependents, or primary benefit recipients.

Q: Where do I go for additional questions?

A: Members can reach out to Member Support through the app or email help@headspacecare.com.

DENTAL COVERAGE

Q: When is coverage effective?

A: If you elected coverage for you or your family during open enrollment it is effective January 1, 2024.

Q: If I'm a new enrollee, will I receive a physical ID card?

A: Yes, any new enrollee should receive hard-copy ID cards from Delta Dental.

Q: Where do I go for additional questions?

A: Call 800.817.0500, visit www.deltadentalma.com, or reach out to HealthEdge HR at HR@healthedge.com. Online at www.deltadentalma.com you can:

- Verify plan details, like deductible & annual max
- Check the status of claims
- Request a replacement ID card

VISION COVERAGE

Q: When is coverage effective?

A: From date of hire.

Q: If I'm a new enrollee, will I receive a physical ID card?

A: No. Your vision provider will be able to locate your coverage using your social security number & date of birth.

Q: Where do I go for additional questions?

A: Call 800.877.7195, visit www.vsp.com, or reach out to HealthEdge HR at HR@healthedge.com.

LIFE & DISABILITY COVERAGE

Q: When is coverage effective?

A: From date of hire. These benefits (short- & long-term disability, basic life, AD&D) are paid for by HealthEdge & you did not need to enroll to have coverage. Please ensure that your beneficiary information is up to date.

Q: Where do I go for additional questions?

A: For Life Claim Customer Service call 800.524.0542 · For Disability or Absence Customer Service call 877.367.7781 · Website: www.prudential.com/mybenefits · or reach out to HealthEdge HR at HR@healthedge.com.

Q: I am expecting a child. Can I submit the claim early to get the ball rolling?

A: Yes, please contact HR at HR@healthedge.com.

Q: I only have company paid Basic Life and AD&D coverage; do I still need to designate a beneficiary?

A: Yes. The UKG Open Enrollment event will not allow you to proceed to the next step and submit your benefit elections until you assign your beneficiaries. The same beneficiaries need to be used for both Basic Life and Basic AD&D.

Q: Do I need to select Beneficiaries for separately elected Voluntary Life and AD&D coverage?

A: Yes. You can choose the same beneficiary or assign different ones for each line of voluntary coverage.

VOLUNTARY BENEFITS

Q: What if I already have an ID Theft or Legal plan with Metlife?

A: If you enroll in the HealthEdge ID Theft program with Metlife and you already have an individual plan with Metlife, you will need to cancel your current individual plan by contacting Metlife.

Q: Where do I go for additional questions?

A: You can contact MetLife at 800.438.6388, or visit their website at www.metlife.com/mybenefits

ID Cards – Be on the lookout for a physical ID card if newly elected, or log into your account to access your digital ID card at any time!

Vendor	Will I Get a Physical ID Card?	Didn't Receive or Lost Your Physical ID Cards?	Digital ID Cards
Medical – Aetna	<p>Only if newly elected for 2024</p> <ul style="list-style-type: none"> • Open Enrollment: to arrive in the mail by 01/01/2024 • 2024 New Hires: to arrive around 30 days after the date of election 	<p>Members can obtain a replacement ID card.</p> <ul style="list-style-type: none"> • Members can contact member services to request replacements 855-627-5518. • They can log onto their member portal and request replacement cards or they can download a digital copy from the site. 	<p>Available by creating an account with Aetna. Aetna Site Registration.</p> <p>Digital ID cards will be available:</p> <ul style="list-style-type: none"> • Open Enrollment: on 01/01/2024 • 2024 New Hires: Around 14 days after elections are approved in UKG
Rx – OptumRx	<p>Only if newly elected for 2024</p> <ul style="list-style-type: none"> • Open Enrollment: to arrive in the mail by 01/01/2024 • 2024 New Hires: to arrive around 30 days after the date of election 	<p>Call customer service 844-775-7416 and request a new ID card be sent at any time. The timeline on when they would expect to receive that card would roughly be 7-10 days.</p>	<p>Available by creating an account with OptumRx. Optum Site Registration.</p> <p>Digital ID cards will be available:</p> <ul style="list-style-type: none"> • Open Enrollment: on 01/01/2024 • 2024 New Hires: Around 7 days after elections are approved in UKG
Dental – Delta Dental of MA	<p>Only if newly elected for 2024</p>	<p>Call customer service 800-817-0500 and request a new ID card be sent at any</p>	<p>Available by creating an account with Delta Dental of MA.</p>

	<ul style="list-style-type: none"> • Open Enrollment: to arrive in the mail by 01/01/2024 • 2024 New Hires: to arrive around 30 days after the date of election 	time.	<p>Digital ID cards will be available:</p> <ul style="list-style-type: none"> • Open Enrollment: on 01/01/2024 • 2024 New Hires: Around 7 days after elections are approved in UKG
Health Savings Account – Payflex	<p>Only if newly elected for 2024</p> <ul style="list-style-type: none"> • Open Enrollment: to arrive in the mail by 01/01/2024 • 2024 New Hires: to arrive around 30 days after the date of election 	<p>Contact the PayFlex customer service team at 1-888-678-8242 to order a new physical card or for any lost/stolen card requests.</p> <p>Members can also go online and use the <i>Live Chat</i> function to request a replacement card with a representative.</p> <p>Ordering a secondary card for a family member - In addition to a member contacting the customer service team, members can order a card for their spouse or dependent right on the PayFlex website. Once logged into your account, the top navigation bar for both HSA and FSA has Account Settings and from Account Settings a member can go to the PayFlex Card and request</p>	<p>Submit for reimbursement online and/or find your debit card number on Payflex. Accessing your account.</p> <p>*If newly elected, you may start to submit for reimbursement on 01/01/2024 or after your hire date.</p>

		cards for their family members.	
FSA(s) – Payflex	<p>Only if newly elected for 2024</p> <ul style="list-style-type: none"> • Open Enrollment: to arrive in the mail by 01/01/2024 • 2024 New Hires: to arrive around 30 days after the date of election <p>The debit card you receive is a smart card and can be used for all Flexible Spending Accounts you open with Payflex.</p>	<p>Contact the PayFlex customer service team at 1-888-678-8242 to order a new physical card or for any lost/stolen card requests.</p> <p>Ordering a secondary card for a family member - In addition to a member contacting the customer service team, members can order a card for their spouse or dependent right on the PayFlex website. Once logged into your account, the top navigation bar for both HSA and FSA has Account Settings and from Account Settings a member can go to the PayFlex Card and request cards for their family members.</p>	<p>Submit for reimbursement online and/or find your debit card number on Payflex. Accessing your account.</p> <p>*If newly elected, you may start to submit for reimbursement on 01/01/2024 or after your hire date.</p>

Please review the [Contacts tab on the Benefits Portal](#) for group policy numbers and contact information for the following vendors that do not mail member ID cards to their participants:

- Vision – **VSP**
- Life/Disability, Critical Illness, Accident, Hospital Indemnity, EAP – **Prudential**
- Prepaid Legal, ID Theft, Pet Insurance – **MetLife**
- Mental Health Services – **HeadSpace Cares (formerly Ginger)**
- Financial Planning – **Hundley McGovern Wealth Management**

- Retirement – **Empower**