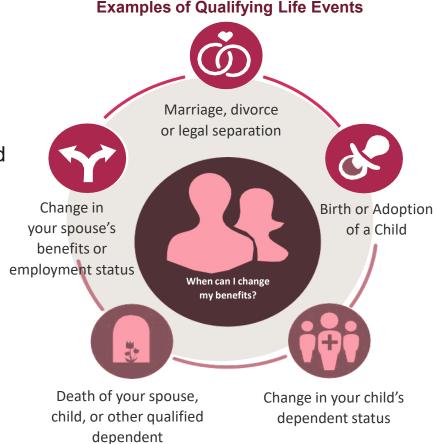


Eligibility

- Full-time employees (30 hours per week)
- Make changes to your benefits and covered dependents
- When it is not Open Enrollment, you must have a qualifying event
- Examples of Qualifying Events: Marriage, birth, death, change in employment ...





Anthem BlueChoice Open Access Advantage Health Reimbursement Plan

	Anthem BlueChoice Open Access Advantage	FPU HRA Pays	You Pay
Calendar Year Deductible			
Individual / Family	\$8,000/\$16,000	\$5,200/\$10,400	\$2,800/\$5,600
Calendar Year Out-of-Pocket Maximum (Oเ	t of Pocket Maximum Includes Deductible)		
Individual / Family		\$2,800/\$5,600	\$2,800/\$5,600
Lifetime Maximum	Unlimited		
Coinsurance / Copays			
Preventive Care	100%	0%	0%
Primary Care Physician	Deductible then covered in full	65%	35%
Specialist	Deductible then covered in full	65%	35%
Laboratory	Deductible then covered in full	65%	35%
Diagnostic X-Ray and High-End Radiology	Deductible then covered in full	65%	35%
Urgent Care (Per Visit)			35%
Convenience Clinic	Deductible then covered in full	65%	35%
Urgent Care Clinic	Deductible then covered in full	65%	35%
Hospital Urgent Care	Deductible then covered in full	65%	35%
Emergency Room	Deductible then covered in full	65%	35%
Inpatient Hospital Care	Deductible then covered in full	65%	35%
Outpatient Surgery			35%
Hospital Affiliated	Deductible then covered in full	65%	35%
Non-Hospital Affiliated	Deductible then covered in full	65%	35%





How the Deductible Share Account (HRA) Works

- Members enrolled in the health plan receive an FPU funded Deductible Share Account (HRA)
- Deductible Share Account pays using electronic claims transfer
- Checks are Auto-Generated & sent to <u>Providers</u>
- Member is responsible for their share
- Payment Status shown on the WEX Website or App
- Prescriptions 65% paid in real time at the pharmacy using program debit card

1-Medical Provider

Generates Claim

2-Insurance Provider

Electronic Claim Sent to HRA Provider

3-Deductible Share Account

\$\$\$ (65%) paid to Provider by HRA Provider

4-Employee's Share of Deductible

35% Remaining Paid to Provider by Member (from FSA or Personal Funds)

In general accounts are; funded for health plan enrollees only, are not pro-rated for new hires, pay 1st ahead of flex spending, do not rollover & they can be used for medical & prescription expenses only.

Prescription Drug Benefit for FPU Plans

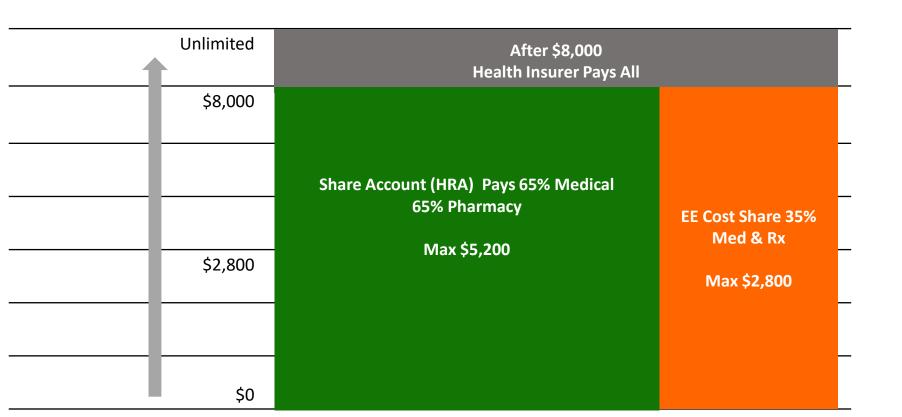
	HRA Only Plan	HSA and HRA Plan
Pharmacy		•
Retail RX (up to 30-day supply)		
Tier 1	35%	Covered in full after Sub-Deductible
Tier 2	35%	Covered in full after Sub-Deductible
Tier 3	35%	Covered in full after Sub-Deductible
Tier 4	35%	Covered in full after Sub-Deductible
Mail Order Rx		
Tier 1	35%	Covered in full after Sub-Deductible
Tier 2	35%	Covered in full after Sub-Deductible
Tier 3	35%	Covered in full after Sub-Deductible
Tier 4	35%	Covered in full after Sub-Deductible
Preventive Drugs		
	Covered in full	Covered in full







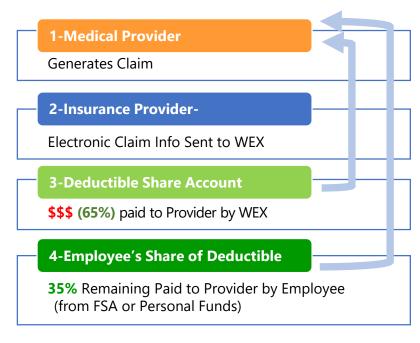
Option 1: Anthem Plan with HRA





How the Deductible Share Account Works

- Members enrolled in the medical plan receive an agency funded Deductible Share Account
- Deductible Share Account pays using electronic claim info
- Checks are Auto-Generated & sent to <u>Providers</u>
- Employee is responsible for their share
- Payment Status shown on the WEX Website or App





Reimbursement Accounts - Available

HRA

Health Reimbursement Account/Arrangement

- Employer funded only
 - Fully funded January 1
- Must be enrolled in Franklin Pierce medical plan
- Tax Free distribution on Medical and Rx Deductible expenses only
- Funds do not roll year-to-year

I'm enrolled in Medical, and I want employer money to pay for medical or pharmacy claims I expect to incur for this plan year

FSA

Flexible Spending Account

- Employee funded only
 - Fully Funded January 1
- Must be an eligible employee of Franklin Pierce
- Tax Free distribution on all eligible expenses
- Carryover provision allows up to \$640 of unused funds to carry into the following year

I want to pay for medical, pharmacy, dental or vision expenses for claims I expect to incur for this plan year with pre-tax dollars whether I am enrolled in the Aries Health Plan or not



Simple Provider Payment Process

- Provider sends claim to Anthem BC/BS
- Anthem issues an Explanation of Benefits
- Wex receives report from Anthem
- Wex sends payment directly to the provider

Simple Provider Payment Process

Employee: Show this to your doctor to explain payment.





Dear Healthcare Provider,

Franklin Pierce University provides employee health care coverage through a high deductible health plan underwritten by ANTHEM Blue Cross/ Blue Shield.

n addition to the insurance coverage, Franklin Pierce University also provides employees with a lealth Reimbursement Account (HRA) which covers significant portion of their deductible expense.

Ince your office submits charges to ANTHEM BC/S for services provided, the charges are checked painst the patient's deductible and an Explanation of Benefits showing the patient's responsibility is sent to you, the patient, and the patient's HRA.

After Anthem BC/BS send the claims information WEX, they will pay the provider directly until the ount is exhausted.

ask your cooperation in allowing this process work before collecting payment.

will ensure the correct payment from rance or patient and, more importantly, provide correct funds from the HRA to reimburse you ervices provided.

Sydney Health app; your personal health assistant

Download and register on the Sydney Health app to take full advantage of your Anthem plan.

Use it to:

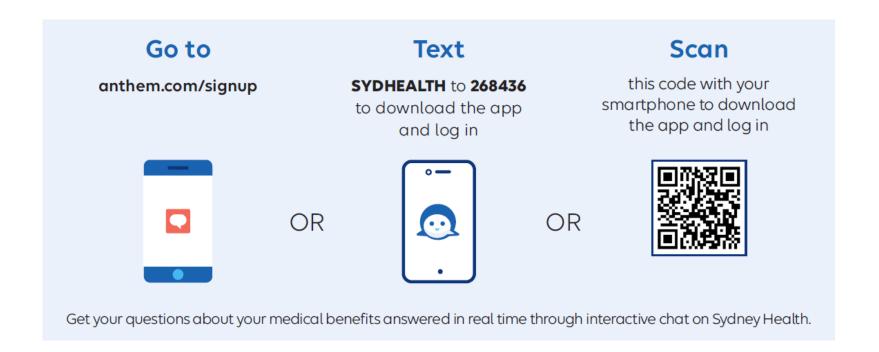
- Find care and check costs.
- See all your benefits.
- View claims and payment information.
- View and use digital ID cards.
- Manage prescriptions.

- Get answers quickly with the interactive chat feature.
- Access virtual care.
- Access wellness resources and rewards
- Sync with your fitness tracker.
- Reach Member Services for support.





Log in now to access your Anthem benefits:

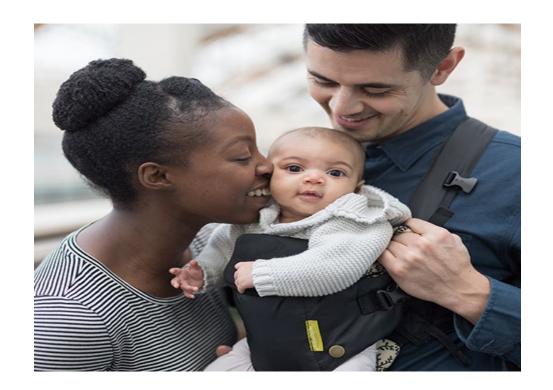




HRA Debit Card

Swipe at the pharmacy for Rx purchases

FSA Funds can also be pulled from a member's account to pay the balance left by the HRA



Flexible Spending Account

How the Plans Work:

Determine the annual amount of your contributions to a plan

The maximum amount you can elect for 2024 is \$3,200

Carryover:

You can carryover up to \$640 of unused funds from your Medical FSA

The rollover dollars will be available for you to use in 2024 and

They are in addition to your 2024 FSA contribution.

Dependent Care FSAs have a 60-day grace period to file for reimbursement from 2023 funds

Must be used by March 15th of 2024

Benefit Card:

If you enroll in a flexible spending account, a benefit card will be mailed to you

This card works like a debit card







Dependent Care FSA

- Reduces Taxable Income
- **\$5,000** Annual Maximum, Use it or Lose it
- Must elect annually
- Website for easy reimbursement



Eligible Expenses

- Nanny Services
- Babysitter while at work
- · Before and after school care
- Extended Day Programs
- Summer Camp (<13 y.o.)
- Elder Care



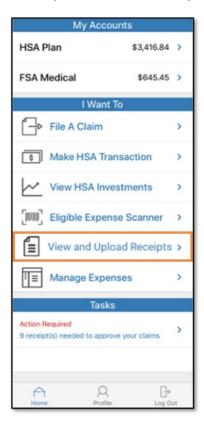


WEX Debit Card—When to use it

- Pharmacy Purchases under the FPU Medical Plan will draw from HRA then FSA
- Doctor Co-Pays under another plan will draw from FSA
- Vision or Dental Provider will draw from FSA
- If you have an FSA you can use the WEX card; however substantiation may be required.



Upload Receipts using the WEX Benefits Mobile App



To upload a receipt to the <u>Receipt Organizer</u> in the benefits mobile app, complete the following steps:

- 1. Navigate to the Home screen.
- 2. Tap "View and Upload Receipts" under the I Want To section.
- 3. Tap the plus sign in the bottom right-hand corner of the screen.
- 4. Select the receipt upload method.
 - Documents: Use an existing document on your phone.
 - Camera: Take a new photo with your phone's camera.
 - Photos: Use an existing photo on your phone.
- 5. View the confirmation message and tap "OK" to return to the Receipt Organizer, where you can view and edit your receipts.

Notes:

- Tap a receipt to make it larger.
- Once you apply a receipt to a claim, it will have a sticky note added that indicates it's been used.



Your receipt has been successfully uploaded to the Receipt Organizer.





What should be included in your claim submission/ Explanation of Benefits

- >WHERE Provider's name and address
- >WHEN Date of service/purchase
- >WHO Patient name
- >WHAT Description of service/purchase
- >WHAT Your Cost

If any information is missing, we will contact you through email to collect the needed documentation