



What's New for 2018?

MEDICAL & PRESCRIPTION

- The Cigna Choice Fund HSA maximum tax deductible contribution is increasing for single coverage from \$3,400 to **\$3,450** and from \$6,750 to **\$6,900** for family.

Reminder for Cigna Choice Fund HSA participants that are entitled to Medicare:

- Once an individual enrolls in Medicare (Part A, Part B, Part D), they are no longer eligible to contribute to an HSA and must prorate their annual contribution amount (including the catch-up amount) based on the number of months that they will be eligible for the Cigna Choice Fund HSA during the year.
- There are slight increases for Medical, Dental, and Vision.

- Express-Scripts (ESI): We are adopting a new program coordinated by **SaveonSP** for the Cigna Core medical option. If you are taking a medication on the Non-essential Health Benefit Specialty Drug listing or begin taking one of these medications at a later date, you may benefit by paying a **zero-dollar copay** after you enroll. If you are currently on one of these medications, **SaveonSP** will reach out to you directly with more information and steps on how to enroll. (SaveonSP is not currently available under the Cigna Choice Fund with HSA option).

Vision.	Employee Only		Employee +1		Employee + Family	
(Full-time = 40 hours) (Part-time ≥ 30 hours)	Wellness Credit	No Credit	Wellness Credit	No Credit	Wellness Credit	No Credit
Cigna Choice Plan with HSA						
Monthly	\$72.00	\$132.00	\$161.00	\$281.00	\$252.00	\$432.00
Cigna Core Plan						
Monthly	\$111.00	\$171.00	\$240.00	\$360.00	\$373.00	\$553.00
(Part-time < 30 hours)						
Cigna Choice Plan with HSA						
Monthly	\$144.00	\$264.00	\$322.00	\$562.00	\$504.00	\$864.00
Cigna Core Plan						
Monthly	\$222.00	\$342.00	\$480.00	\$720.00	\$746.00	\$1,106.00

DENTAL

Beginning on January 1st a covered individual can increase their **annual dental maximum by \$100** for the next plan year when they receive preventive care.

Routine preventive care includes:

- Cleanings
- X-rays
- Oral exams

Monthly Contributions	2018
Employee Only	\$18.00
Employee + 1	\$33.00
Employee + Family	\$52.00

VISION

Monthly Contributions	2018
Employee Only	\$6.05
Employee + 1	\$12.12
Employee + Family	\$19.50





What's New for 2018?

WELLNESS

Employees and eligible spouses will need to complete the Annual Well Visit and Online Health Assessment during the period of September 1st of the prior year through August 31st of the current year to qualify for the wellness credit.

Your annual savings could be significant – we are significantly increasing the wellness credit for 2017 and you can now save as much as **\$720 for single coverage** and **\$2,160 for family coverage**.

If an employee and spouse completed the Annual Well Visit and Online Health Assessment anytime on or after Sept. 1, 2016, the employee will only need to confirm tobacco-free family status during open enrollment to receive the wellness credit.

FLEXIBLE SPENDING ACCOUNT

If you wish to participate in the Health Care and Dependent Care Account (FSAs) for 2018, you must make an election during annual enrollment as your prior elections will not carry forward.

The maximum Health Care Flexible Spending Account (FSA) contribution limit is **\$2,600** for 2018.

For the Dependent Care FSA, your contribution maximum is \$4,550. Huber will provide a 10% match on your contributions, up to \$450.

Keep in mind that if you enroll in the Cigna Choice with HSA, you are not eligible to enroll in the Cigna Health Care FSA. If you are switching from FSA to HSA, or vice versa, you must deplete your current savings account before a new savings account can be established.



NEW VOLUNTARY BENEFITS

Critical Illness Insurance: Pays a lump-sum benefit if you are diagnosed with a covered illness or disease. Samples of covered illness and benefits are heart attack, stroke and cancer. The level of coverage will vary depending if you are electing coverage for yourself or your eligible covered dependents. To elect coverage for your dependents, you must be enrolled for coverage. **The maximum covered benefit you can purchase is \$10,000 for yourself, \$5,000 for your spouse and \$5,000 for your children.**

Accident Insurance: Pays benefits for specific injuries and events resulting from a covered accident. The benefit amounts paid depend on the type of injury and care received. The benefit can be used for things like lost time from work, mortgage/rent payments, copays, deductibles and everyday living expenses.

Hospital Indemnity Insurance: Pays a daily benefit if you have a covered stay in a hospital, critical care unit or rehabilitation facility. These benefits can be used for any purpose, such as lost time from work, mortgage/rent/utilities, copays/deductibles/coinsurance, home health care expenses and childcare expenses.

For more information or to access the certificate of insurance, please call the **Voya Employee Benefits Customer Service at 1-877-236-7564** or log on to **www.hubervoluntarybenefits.com**.

To enroll in these benefits, please call the **J.M. Huber Benefits Service Center at 1-844-347-9035** or log on to **www.huberbenefits.com** between **November 1-15th**.

These are limited benefit policies. This is not health insurance and does not satisfy the requirement of minimum essential coverage under the Affordable Care Act.



A FAMILY OF SOLUTIONS