

Wartburg College Benefits 1/1/2017-12/31/2017

Health Insurance

PPO Plan - Alliance Select	Current	2017		Employee Current	Employee 2017	Wartburg 2017	Total 2017
Deductible	\$2500/\$5000	\$4000/\$8000	Single	\$149.57	\$153.29	\$357.68	\$510.97
Coinsurance	20% IN/40% OUT	25% IN/50% OUT	E+SP	\$306.31	\$314.24	\$732.23	\$1,046.47
Out of Pocket Max	\$5000/\$10,000	\$6850/\$13,700	E+CH	\$283.13	\$290.18	\$677.09	\$967.27
Office Visit & ER Copay	20%	25%	Family	\$459.02	\$470.45	\$1,097.72	\$1,568.17
Rx	\$10/\$35/\$50 w/ Ded	\$15/\$50/\$75/\$100 w/ Ded					
Annual Eye Exam	Covered 100%	Covered 100%					

MCO Plan - Blue Advantage	Current	2017		Employee Current	Employee 2017	Wartburg 2017	Total 2017
Deductible	\$1000/\$2000	\$2500/\$5000	Single	\$107.37	\$105.77	\$423.06	\$528.83
Coinsurance	20% IN Only	20% IN Only	E+SP	\$219.89	\$216.61	\$866.43	\$1,083.04
Out of Pocket Max	\$2500/\$5000	\$5000/\$10,000	E+CH	\$203.25	\$200.22	\$800.86	\$1,001.08
Office Visit & ER Copay	20%	20%	Family	\$329.52	\$324.60	\$1,298.38	\$1,622.98
Rx	\$10/\$35/\$50 w/ Ded	\$15/\$50/\$75/\$100 w/ Ded					
Annual Eye Exam	Covered 100%	Covered 100%					

* Must name Primary Care Physician

QHDHP (H.S.A.) - Alliance Select	Current	2017		Employee Current	Employee 2017	Wartburg 2017	Total 2017
Deductible	\$2500/\$5000	\$3000/\$6000	Single	\$93.30	\$98.02	\$392.08	\$490.10
Coinsurance	Deductible	Deductible	E+SP	\$191.09	\$200.74	\$802.98	\$1,003.72
Out of Pocket Max	\$2500/\$5000	\$3000/\$6000	E+CH	\$176.63	\$185.55	\$742.21	\$927.76
Office Visit & ER Copay	Deductible	Deductible	Family	\$286.36	\$300.82	\$1,203.30	\$1,504.12
Rx	Deductible	Deductible					
Annual Eye Exam	Covered 100%	Covered 100%					

* IRS Max Contribution for H.S.A. : \$3400 Single/\$6750 Family

QHDHP (H.S.A.) - Blue Advantage	Current	2017		Employee Current	Employee 2017	Wartburg 2017	Total 2017
Deductible	\$2500/\$5000	\$3000/\$6000	Single	NA	\$13.68	\$430.61	\$444.29
Coinsurance	Deductible	Deductible	E+SP	NA	\$28.02	\$881.89	\$909.91
Out of Pocket Max	\$2500/\$5000	\$3000/\$6000	E+CH	NA	\$25.90	\$815.14	\$841.04
Office Visit & ER Copay	Deductible	Deductible	Family	NA	\$41.99	\$1,321.54	\$1,363.53
Rx	Deductible	Deductible					
Annual Eye Exam	Covered 100%	Covered 100%					

* IRS Max Contribution for H.S.A.: \$3400 Single/\$6750 Family * Must name Primary Care Physician

Dental Insurance

Delta Dental	Current	2017		Employee Current	Employee 2017	Wartburg 2017	Total 2017
Deductible	\$50/\$150	\$50/\$150	Single	\$7.87	\$7.87	\$23.61	\$31.48
Check-ups & Cleaning	Covered every 6 mo.	Covered every 6 mo.	E+SP	\$15.51	\$15.51	\$46.54	\$62.05
Benefit Period Max	\$1,000	\$1,000	E+CH	\$16.26	\$16.26	\$48.78	\$65.04
Orthodontics	\$1000 lifetime	\$1000 lifetime	Family	\$23.82	\$23.82	\$71.47	\$95.29

Vision Insurance

Avesis Vision	Current	2017		Employee Current	Employee 2017	Wartburg 2017	Total 2017
Exam Copay	\$10	\$10	Single	\$10.69	\$10.69	\$0.00	\$10.69
Frames up to \$150	\$15 materials copay	\$15 materials copay	E+SP	\$20.50	\$20.50	\$0.00	\$20.50
Standard Lenses	Covered	Covered	E+CH	\$22.36	\$22.36	\$0.00	\$22.36
Contacts	Up to \$130	Up to \$130	Family	\$28.78	\$28.78	\$0.00	\$28.78

Flexible Spending

Advantage Administrators	Current	
IRS Maximum Contribution		w/ carry over provision of \$500 annually
Medical Reimbursement	\$2,550	
Dependent Care Reimbursement	\$5,000	

Life & Disability Insurance

Group Life & Accidental Death Insurance - College Paid

Company-Paid life insurance policy of 2x earnings, rounded to the next higher \$1000.
Minimum of \$50,000

Voluntary Life Insurance - No Open Enrollment

Employee < 60yrs.	\$100,000 guarantee issue
Spouse <60yrs	\$50,000 guarantee issue
Children <20yrs (26 if FT Stud.)	\$10,000 guarantee issue

Short Term & Long Term Disability - College Paid

STD Benefit - 66.67% of Total Weekly Earnings to a Weekly Max of \$1,000	LTD Benefit - 66.67% of Total Weekly Earnings to a Monthly Max of \$7,500
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Retirement

TIAA CREF Retirement

Wartburg contributes 5% of base salary to your retirement account.
All Benefit-eligible employees working at least 1000 hours annually are enrolled.

Wellness Membership

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Employee only	\$25 monthly payroll deduction	taxed on remaining \$25 benefit
Employee + one	\$45 monthly payroll deduction	taxed on remaining \$25 benefit
Employee + family	\$55 monthly payroll deduction	taxed on remaining \$25 benefit

How to Enroll..

Employee Navigator

<https://wartburg.employeenavigator.com>

you must create a user ID and Password the first time logging in

⬇️ Website open from November 8th - November 23rd ⬇️

Questions: contact HR & Payroll 319-352-8521

Employee Resources

	Website	Phone
Wellmark	www.mywellmark.com * see your EOBs and your personal information * locate providers * review Wellmark's drug formulary and check drug costs * compare your costs (deductible/coinsurance etc) for various procedures/tests at many network providers	800-355-2031
Delta Dental	www.deltadentalia.com	800-544-0718
Avesis Vision	www.avesis.com	855-214-6777
TIAA-CREF	www.tiaa-cref.org	800-842-2776
Wartburg College	Infocenter: http://info.wartburg.edu/Employment benefit contact: Amy Wilson Benefits Administrator amy.wilson@wartburg.edu	319-352-8278