



Perry Township Schools

2021 Open Enrollment Frequently Asked Questions (FAQs)

Q. What is Open Enrollment?

A. Open Enrollment is the annual enrollment period where you may make changes to your plans (add or drop dependents, add or drop plans, etc.) without first having a qualifying life event. It is required that everyone log in and complete the enrollment even if you aren't making changes or have your benefits elsewhere. You must log in and either elect or waive each plan presented to you and then confirm your choices.

Q. When is Open Enrollment?

A. Open Enrollment starts on October 13, 2020, and runs through November 1, 2020. You can self-enroll online or contact Steele Benefits at 855-892-6224 to speak with an enroller and/or to enroll over the phone. There will not be enrollers on-site this year due to visitor restrictions.

Q. How do I enroll?

A. Visit the website <https://Aflacatwork.com/enroll>. You will need your Username (which is your social security number) and PIN (the last 4 of your social security number and the last 2 digits of your birth year, for example, 999980). You can also contact Steele Benefits at 855-892-6224 to enroll. You can not enroll before October 13, 2020, as Open Enrollment has not started.

Q. Are there any changes to the health plan this year?

A. No, there are no plan design changes. However, the mail-order pharmacy manager is changing from IngenioRx to TrueScripts. Your new Anthem ID card will reflect this change.

Q. Are there any changes to our mail order and specialty prescription drug provider?

A. The mail-order pharmacy manager is changing from IngenioRx to TrueScripts. A plan design change for 2021 will be that after 90 days, you don't have to move to mail order; you can continue to fill these drugs at a retail pharmacy. More information about how to transfer prescriptions will be coming in December.

Q. Are my premiums increasing?

A. The premiums for dental and vision are not increasing. Premiums are increasing minimally for some of the medical plans. When claims increase, premiums increase.

Q. Why are premiums increasing?

A. Perry Township Schools is part of a Trust of seven school districts (named the Hoosier Schools Benefit Trust or HSBT). The Trust is self-insured so all claims are paid directly by the Trust. Participating school districts include Beech Grove, Franklin Township, Decatur Township, CIESC, Southside Special Services, and Lebanon Community Schools.

Q. Can my spouse enroll in the HSBT medical plan?

A. HSBT has a spousal carve-out on our medical plan only. If your spouse is offered medical insurance through their employer, they may not enroll in the HSBT medical plan. If you are enrolling a spouse for the first time for a 1/1/21 effective date, you will need to complete the Affidavit of Spousal Health Care Coverage form and send it to the Benefits Office at PTEC before spousal coverage is effective. Spouses can be enrolled in dental or vision regardless of their employment status.

Q. How can I find out which plan I am currently enrolled in for 2020?

A. Visit the Employee Benefits Portal to confirm current coverage. You can access the portal by going to www.perryschools.org, selecting "For Staff," and then click on the Employee Benefits Portal. Follow the directions on the page for your user ID and PIN.

Q. Can I enroll using my cell phone or tablet?

A. Yes. You can enroll with a cell phone or tablet by visiting the website <https://Aflacatwork.com/enroll>

Q. Are there any restrictions on enrolling dependents in a plan?

A. Dependent children can be enrolled in medical, dental, and/or vision plans through the month they turn age 26 regardless of status (student, marital, employment, tax, location, etc.).

Q. Where and how do I add dependents to my plan?

A. Dependents, including spouses, should be added directly to the Aflacatwork site when enrolling.

Q. My spouse is a Perry Township Schools employee. Should we remain on the plan as an employee and spouse or should we each have our own plan?

A. It is most likely in each employee's best financial interest to have an individual plan. However, if you have a family plan, it is most likely in your family's best financial interest to continue on a family plan because of the combined family deductible. Review the plan premium costs to determine what is best for your family.

Q. When do the benefits I choose during Open Enrollment begin?

A. Benefits elected during Open Enrollment will be effective January 1, 2021.

Q. What happens if I do not enroll during the Open Enrollment Window?

A. If you miss the open enrollment period, you will not be able to enroll or make changes until the next annual open enrollment period unless you experience a qualifying life event that permits benefit changes under IRS rules.

Q. I am a recent new hire and just signed up for benefits in 2020. Do I have to enroll again for 2021?

A. Yes, you will still need to enroll for 2021 benefits.

Q. What if I am not making any election changes for 2021?

A. You are still required to log in and elect or waive each of the benefits offered to you for 2021.

Q. Will I receive a new medical ID card?

A. Yes, new Anthem ID cards will be mailed out to your home address in late December in an unmarked envelope. Please check your mail carefully. Anthem will be issuing new ID cards this year due to a change in the pharmacy provider. Each enrolled family member will receive a card with their name on it. ***Please verify that each card has the correct coverage listed on the bottom left (medical, dental and/or vision).***

Q. How much can I contribute to my Health Savings Account (HSA)?

A. For 2021, the maximum contribution amount is \$3,600 for individual coverage and \$7,200 for family coverage. Maximum amounts include all contributions (both employee and employer). Persons aged 55 or older may make additional catch-up contributions of up to \$1,000 in 2021.

Q. How much can I contribute to my Flexible Spending Account(s) (FSA)?

A. For 2021, the maximum contribution amount is \$2,750 for Medical and Limited Purpose FSAs. The maximum contribution for the Dependent Care FSA is \$5,000.

Q. Is Short-Term Disability (STD) right for me?

A. Short-Term Disability will replace 60% of your base salary during a period of disability. The employee pays the premium 100%. It begins after a 14-calendar day waiting period (10 business days) and lasts for the first 90 days of the disability. If you have sick/personal/vacation days that can cover the 90-day disability period, then enrolling may not be in your best interest as Cigna will not pay STD benefits while you are receiving paid time off. You may not opt to use STD instead of using available paid time off.

Q. Who can help me determine which health plan option is the best for me?

A. You can speak with an enroller by calling the Steele Benefits Call Center at 1-855-892-6224 for additional assistance.

Q. Where can I find additional reference documents regarding my benefits?

A. The Form Library is located on the Aflacatwork site in the upper right-hand corner and looks like a paper icon. When you click on the icon, you will see plan information, claim forms and brochures.

Q. I still have questions. Who do I call?

A. Contact Steele Benefits at 855-892-6224 for any additional questions regarding open enrollment.