



# BENEFITS GUIDE

January 1, 2024





# INSIDE THIS BENEFITS GUIDE



## A NOTE ON HEALTHCARE REFORM

Health Care Reform was set into law in order to help Americans purchase health insurance. The law states that all Americans must be enrolled in a qualified health plan, or they will be subject to penalties by the IRS when they file their taxes each year. The law also allows for individuals and families to purchase their own plan through State Exchanges. However, if your employer offers affordable and creditable coverage, it may be better for you to enroll in your group health plan rather than purchase on your own through the State Exchange.



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# UNDERSTANDING YOUR BENEFITS

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Dear Colleague:

This booklet has been created to provide you with an efficient way to obtain information and answers to your questions regarding your employee benefit plans. We encourage you to take the time to understand your benefits

better by reviewing the information provided to you as an employee. If you have any questions about the benefits shown in this booklet, please contact the **HR Department at (530) 898-3536** or **[csehr@csuchico.edu](mailto:csehr@csuchico.edu)**.

Thank you,

**Chico State Enterprises**



For additional compliance information, please refer to the health and welfare notices sent to you during open enrollment. You are encouraged to review and retain the notices and this booklet for use as a reference guide during the year to help you understand your benefits better.

# ELIGIBILITY AND CHANGING BENEFITS

## BENEFITS ELIGIBILITY

You are eligible to participate in the benefit plans if you are an eligible employee who regularly works **30 hours** or more per week.



### DEPENDENTS

**Your eligible dependents include:**

- Your legal spouse
- Your registered domestic partner
- Your eligible dependent children



### EFFECTIVE DATE

**Medical, Dental, Vision, and Life and Voluntary Plans:**

Your benefits will be effective the first day of the month coinciding with or next following your date of hire



### DEPENDENT AGE LIMITATIONS

**Medical, Dental and Vision Plans**

Eligible dependents covered up to age 26

## CHANGING YOUR BENEFITS

Once your elections take effect, you are not able to make changes until the next Open Enrollment. Certain exceptions may be allowed during the year for change of status or life events, if submitted within **30 days** from the date of the event. Examples of status or life events that allow you to make changes to benefits at times other than during Open Enrollment:

Marriage, divorce or legal separation

Birth, adoption (or placement for adoption), or change in the custody of your child

Death of your spouse, domestic partner or a dependent child

Change in employment status for you, your spouse or domestic partner that results in loss or gain of

A change in your dependent's eligibility status due to marriage, age, or loss of

A legal judgment, decree, or order that requires coverage (i.e., QMCSO or NMSN)

A change in residence for you or your enrolled dependent(s), if the change in

# ENROLLING IN BENEFITS

employeenavigator.com

## 1. WELCOME

You will receive a welcome email from **Employee Navigator** with a registration link. Click on the "Registration" link in the email. You will need the company identifier noted in the email: **Chico State Enterprises**

Create Your Account

First, let's find your company record

First Name

Last Name

Company Identifier (provided by HR)

PIN (Last 4 Digits of SSN / ID)

Birth Date (mm/dd/yyyy)

Next >

Create Your Account

Welcome, New Hire

Your account is almost ready -- just set up a username and password

Username (preferably email address recommended)

Password (minimum length of 8, number and symbol required)

Show it

Last 4 Digits of SSN (just to be sure)

Register >

## 2. CREATE YOUR ACCOUNT

Create a Username and Password  
Terms of Use & Privacy Policy. [Accept and Continue](#)

## 3. WALK THROUGH YOUR ENROLLMENT

Welcome! We're excited to have you on our team.

Say hello to your benefits management tool! Here you'll have 24/7 access to detailed information about our employee benefits program, company documents, interactive tools, and more! Click continue to find out what HR needs from you before you begin navigating your personalized employee profile.

Continue

Good Afternoon, New Hire!

Grab a cup of coffee and let's get some work done.

You have 15 days left to complete your open enrollment.

You have 1 item to complete.

1 Enroll in your benefits

Start Enrollment

Progress: 2 of 8

View steps

1. Personal Information
2. Address
3. Dependent Information
4. Medical
5. Dental
6. Vision
7. Group Life
8. Enrollment Summary

You must add at least one beneficiary for your employer-paid life insurance.

Primary Beneficiaries

Add a beneficiary +

You are required to enter a primary beneficiary.

## 4. COMPLETE YOUR ENROLLMENT

Good to go.....

Enrollment Summary

Below is a summary of your elections and cost for the upcoming plan year. If you have any questions about your enrollment or would like to make changes, please contact HR.

**Signature required**  
You've elected all your benefits, but we still require a signature before advancing.

Please review the acknowledgment below.

As an eligible employee, I acknowledge that I understand the benefits, rights, and obligations available to me under the plan. I certify the facts contained in this summary are true and complete to the best of my knowledge. I understand that deductions can be made on a pre-tax or post-tax basis. Furthermore, I understand that elections for plans that are deducted on a pre-tax basis cannot be changed during the plan year unless I experience a Qualified Life Event.

Sign to complete enrollment [Click to Sign](#)

Enrollment Summary

Below is a summary of your elections and cost for the upcoming plan year. If you have any questions about your enrollment or would like to make changes, please contact HR.

**Acknowledged and Submitted**  
Enrollment completed on Thursday, August 12, 2021 4:23 PM

NOT Good to go.....

Enrollment Summary

Below is a summary of your elections and cost for the upcoming plan year. If you have any questions about your enrollment or would like to make changes, please contact HR.

**Enrollment Not Complete!**  
Please complete the required highlighted steps from your enrollment progress menu.

Progress: 7 of 8

View steps

1. Personal Information
2. Address
3. Dependent Information
4. Medical
5. Dental
6. Vision
7. Group Life
8. Group Life Beneficiary
8. Enrollment Summary

# MEDICAL PLANS – HMO/EPO

[kaiserpermanente.com](https://www.kaiserpermanente.com)
[myHNAS.com](https://myHNAS.com)

		<b>Kaiser HMO</b> Limited Availability based on Kaiser Service Area	<b>EPO</b> HNAS w/ Blue Shield PPO network
DEDUCTIBLE PER CALENDAR YEAR	Individual	None	None
	Family	None	None
OUT-OF- POCKET MAXIMUM PER CALENDAR YEAR	Individual	\$2,000	\$3,000
	Family	\$4,000	\$6,000
PHYSICIAN SERVICES	Office Visits	Copay: \$20	Copay: \$20
	Specialist Office Visits	Copay: \$20	Copay: \$40
PREVENTIVE SERVICES	Routine exams, screenings and vaccinations	No Charge	No Charge
OTHER MEDICAL SERVICES	Hospitalization General	\$250 per admission	\$500 per admission
	Lab / X-ray / Advanced Imaging	Copay: \$10	\$0 / \$0 / \$100
	Outpatient Surgery-Hospital	\$100 per procedure	\$200 per procedure (\$50 ambulatory center)
	Emergency Room	\$100 per visit	\$150 per visit
	Urgent Care Facility	Copay: \$20	Copay: \$20
PRESCRIPTION DRUGS	Tier 1	Copay: \$15	Copay: \$10
	Tier 2	Copay: \$30	Copay: \$30
	Tier 3	Copay: \$30	Copay: \$50
	Mail Order	2 x copay	2 x copay
	Specialty Prescriptions (30 days)	30% up to \$250	20% up to \$250
MENTAL HEALTH	Mental Health Services	Same as other medical services	

# MEDICAL PLAN – PPO



		PPO 2800 HNAS w/ Blue Shield PPO Network	
		In-Network	Out-of-Network
DEDUCTIBLE PER CALENDAR YEAR	Individual	\$2,800	\$2,800
	Family	\$3,200 ind / \$5,200 fam	\$3,200 ind / \$5,200 fam
OUT-OF- POCKET MAXIMUM PER CALENDAR YEAR	Individual	\$5,500	\$10,000
	Family	\$11,000	\$20,000
PHYSICIAN SERVICES	Office Visits	20% after deductible	40% after deductible
	Specialist Office Visits	20% after deductible	40% after deductible
PREVENTIVE SERVICES	Routine exams, screenings and vaccinations	No Charge	Not Covered
OTHER MEDICAL SERVICES	Hospitalization General	\$100 + 20% after deductible	40% after deductible
	Lab / X-ray	20% after deductible	40% after deductible
	Outpatient Surgery-Hospital	20% after deductible	40% after deductible
	Emergency Room	\$150 + 20% after deductible	\$150 + 20% after deductible
	Urgent Care Facility	20% after deductible	40% after deductible
PRESCRIPTION DRUGS	Tier 1	Copay: \$10	Copay: \$10 + 25%
	Tier 2	Copay: \$25	Copay: \$25 + 25%
	Tier 3	Copay: \$40	Copay: \$40 + 25%
	Mail Order	2 x copay	Not Covered
	Prescription Deductible	30% up to \$250	Medical Deductible Applies
MENTAL HEALTH	Mental Health Services	Same as other medical services	



# MEDICAL PLAN – PPO



		PPO 1000 HNAS w/ Blue Shield PPO Network	
		In-Network	Out-of-Network
DEDUCTIBLE PER CALENDAR YEAR	Individual	\$1,000	\$3,000
	Family	\$3,000	\$9,000
OUT-OF-POCKET MAXIMUM PER CALENDAR YEAR	Individual	\$5,000	\$10,000
	Family	\$10,000	\$20,000
PHYSICIAN SERVICES	Office Visits	Copay: \$20	40% after deductible
	Specialist Office Visits	Copay: \$20	40% after deductible
PREVENTIVE SERVICES	Routine exams, screenings and vaccinations	No Charge	Not Covered
OTHER MEDICAL SERVICES	Hospitalization General	20% after deductible	40% after deductible
	Lab / X-ray	Copay: \$25 / \$45	40% after deductible
	Outpatient Surgery-Hospital	\$25% after deductible	40% after deductible
	Emergency Room	\$150 + 20% after deductible	\$150 + 20% after deductible
	Urgent Care Facility	Copay: \$20	40% after deductible
PRESCRIPTION DRUGS	Tier 1	Copay: \$10	Copay: \$10 + 25%
	Tier 2	Copay: \$30	Copay: \$30 + 25%
	Tier 3	Copay: \$50	Copay: \$50 + 25%
	Mail Order	2 x copay	Not Covered
	Specialty Prescriptions (30 days)	30% up to \$250	Not Available
MENTAL HEALTH	Mental Health Services	Same as other medical services	

# HEALTHNOW ADMINISTRATORS

 myHNAS.com

## About HNAS

- Who is HNAS? HNAS is an administrator that helps companies with their medical insurance, and they handle customer service, claims and ID cards for the Medical EPO and PPO plans.
- What is an EPO plan and how does it differ from an HMO? EPO stands for Exclusive Provider Organization. It is technically a PPO plan with NO Option to go out of network. It differs from an HMO in that there is no one “managing” the member (No Medical Group). You are free to see any provider in the Blue Shield network. There is no option to go out of network.
- What about my ID card? Your ID card will say HNAS but directs providers to send claims to Blue Shield. This way Blue Shield can apply their network discount before HNAS processes the claims. Your doctor should **NOT** call Blue Shield to verify coverage. They should call the number on your ID card.
- How do I know if a doctor is In Network? Go to <http://www.blueshieldca.com/networkppo> and use their find a doctor tool to see if your doctor is in the network.
- How do I access my information once I enroll? Please visit [www.myhnas.com](http://www.myhnas.com) to access your claims, eligibility, temporary ID cards and to find a network provider. There is a flier provided to tell you how to get started.
- Do I need a prior authorization for services? Certain Services will require Preauthorization such as Inpatient Hospital Stays, Elective Surgical Procedures, etc. To determine if Preauthorization is required for a service, your provider should call the “Provider Service” phone number on the back of your ID Card.
- Where does my provider send my claims? Claims for services within the state of California will be submitted by the Provider to BlueShield of CA at the address on the back of your ID Card. Claims for services outside the state of California will be submitted by the Provider to the local BlueCross/BlueShield plan.
- What if I have questions? Please contact **HealthNow Administrative Services at 1.877.356.0666**. A dedicated **HNAS Service Team Member** will be available to assist you Monday through Friday 8:00 am to 7:00 pm nationally. After normal customer service hours, the interactive telephone response system is available for claims status, eligibility, and benefit information.

## Prescriptions

- Who handles my prescriptions? The Pharmacy Benefit Manager is **Express Scripts** and they will handle the prescriptions at the pharmacy or Mail Order. Blue Shield does not handle the prescriptions in any way.
- What if I have a mail order prescription? You will need to contact your doctor, provide them with your new insurance information and request a new 90-day prescription that he or she can ePrescribe directly to Express Scripts. You may also print a form from [express-scripts.com](http://express-scripts.com) or Employee Navigator.

# DENTAL PLAN



		Sun Life PPO	
		PPO Network	Out-of-Network*
CALENDAR YEAR MAXIMUM		\$2,000	
CALENDAR YEAR DEDUCTIBLE**	Individual	\$50	
	Family	\$150	
COVERED BENEFITS	Diagnostic / Preventive	100%	100%
	Basic Services	80%	80%
	Major Services	50%	50%
	Orthodontia	50% up to \$2,000 lifetime max child(ren) only	

\*Non-network claims will be reimbursed up to the usual, reasonable, and customary charge of the 95<sup>th</sup> percentile of Usual & Customary. Patients will be responsible for the billed amount beyond this charge.

\*\* Deductible waived for preventive care

**Note: Always request a treatment plan from your dentist so you know your out-of-pocket costs.**



# VISION PLAN

 [vsp.com](https://vsp.com)

		Sun Life VSP PPO	
		In-Network	Out-of-Network*
VISION EXAM	Every 12 months	Copay: \$10	Up to \$45 reimbursement
LENSES	Every 12 months	Copay: \$10	Up to \$30-\$100 reimbursement
FRAMES	Every 12 months	\$150 allowance (\$80 Costco)	Up to \$70 reimbursement
CONTACT LENSES	Every 12 months	\$150 allowance in lieu of frames and lenses	Up to \$105 reimbursement in lieu of frames and lenses

# FLEXIBLE SPENDING ACCOUNT (FSA)

 [enrollwithtag.com](https://enrollwithtag.com)

The Advantage Group (TAG)	
HEALTHCARE REIMBURSEMENT	Allows up to \$3,200 per calendar year for salary reduction and subsequent pre-tax reimbursement for qualified health related expenses, such as prescriptions, vision services, office visits and dental expenses not covered by your plan.
DEPENDENT CARE REIMBURSEMENT	Allows up to \$5,000 per calendar year for salary reduction and subsequent pre-tax reimbursement for dependent care expenses. The expenses, such as pre-school, day care or after school care must be necessary in order to be gainfully employed.



## LONG TERM DISABILITY



	Sun Life
BENEFIT AMOUNT	Up to 66.67% of basic monthly earnings to a maximum of \$5,000 per month
BENEFIT WAITING PERIOD	90 days
MAXIMUM BENEFIT PERIOD	Social Security Normal Retirement Age

## BASIC LIFE AND AD&D



	Sun Life
BASIC LIFE	\$50,000
BASIC AD&D	\$50,000
AGE REDUCTION SCHEDULE	35% at age 65, 50% at age 70

## VOLUNTARY LIFE AND AD&D



	Voluntary Life	Voluntary AD&D
EMPLOYEE	\$10,000 increments up to \$500,000 not to exceed 5x annual salary Guarantee Issue for new hires: \$300,000	\$10,000 increments up to \$500,000 not to exceed 5x annual salary
SPOUSE	\$5,000 increments up to \$250,000 not to exceed 100% of employee amount Guarantee Issue for new hires: \$30,000	\$5,000 increments up to \$250,000 not to exceed 50% of employee amount
CHILD(REN)	\$10,000 Birth to 14 days: \$0 14 days to 6 months: \$250	\$1,000 increments up to \$100,000 not to exceed 50% of employee amount Birth to 14 days: \$0 14 days to 6 months: \$250
AGE REDUCTION SCHEDULE	35% at age 65, 50% at age 70	35% at age 65, 50% at age 70

Guarantee issue amounts only apply if you enroll when first eligible. To request amounts over the guarantee issue or are enrolling/increasing after you were first eligible, visit this link to complete your health questionnaire:

<https://www.sunlife-usa.net/eoi/> policy number: 963653

# EMPLOYEE ASSISTANCE PROGRAM



## What counseling services does the EAP provide?

The EAP provides free short-term counseling with counselors in your area who can help you with your emotional concerns.

If the counselor determines that your issues can be resolved with short-term counseling, you will receive counseling through the EAP. However, if it is determined that the problem cannot be resolved in short-term counseling in the EAP and you will need longer-term treatment, you will be referred to a specialist early on and your insurance coverage will be activated.

### Confidential Emotional Support



Our highly trained clinicians will listen to your concerns and help you or your family members with any issues, including:

- Anxiety, depression, stress
- Grief, loss and life adjustments
- Relationship/marital conflicts

### Work-Life Solutions



Our specialists provide qualified referrals and resources for just about anything on your to-do list, such as:

- Finding child and elder care
- Hiring movers or home repair contractors
- Planning events, locating pet care

### Legal Guidance



Talk to our attorneys for practical assistance with your most pressing legal issues, including:

- Divorce, adoption, family law, wills, trusts and more
- Need representation? Get a free 30-minute consultation and a 25% reduction in fees.

### Financial Resources



Our financial experts can assist with a wide range of issues.

- Retirement, taxes, mortgages, budgeting and more
- For additional guidance, we can refer you to a local financial professional and arrange to reimburse you for the cost of an initial one-hour in-person consult.

### Online Support



GuidanceResources® Online is your 24/7 link to vital information, tools and support. Log on for:

- Articles, podcasts, videos, slideshows
- On-demand trainings
- "Ask the Expert" personal responses to your questions

### Help for New Parents



ParentGuidance™ supports you through the process of becoming a biological or adoptive parent, including:

- Preparing for the baby emotionally and financially
- Finding child care
- Planning for back-to-work and other issues

### Free Online Will Preparation



EstateGuidance® lets you quickly and easily create a will online.

- Specify your wishes for your property
- Provide funeral and burial instructions
- Choose a guardian for your children



## Talk to a counselor

Sometimes, you just need someone to talk to. Get short-term counseling to work through:

- Depression & Anxiety
- Work/Life Stress
- Family & Anxiety
- Substance Use
- Grief & Loss
- And More

Visits occur on your time! Get support via phone or video anytime between 8 a.m. to 8 p.m. Monday-Friday.



## No cost to you

There are no fees or copays!



## Care for your family

Provided to all employees and your immediate family!

## Talk to a Counselor via Phone or Video

(888) 691-7867 | [fshealth.com](https://fshealth.com)

Get the app ↓



### Contact EAP Business Class Anytime

Call: 877.595.5281

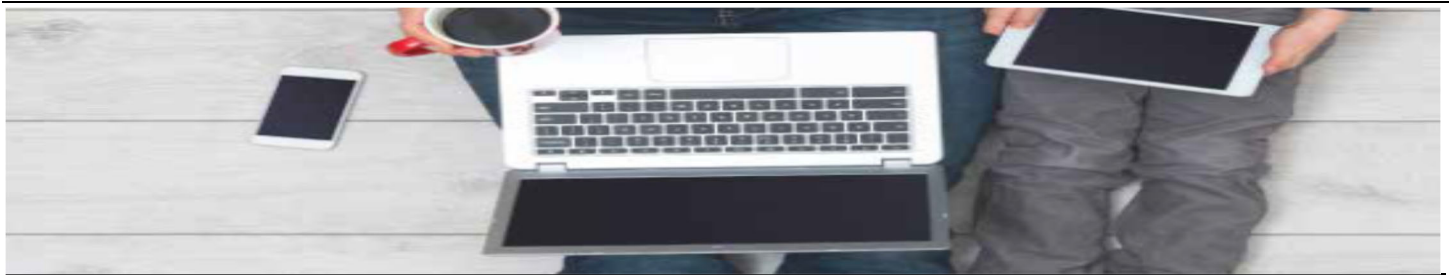
TTY: 800.697.0353

Online: [guidanceresources.com](https://guidanceresources.com)

App: GuidanceNow<sup>SM</sup>

Web ID: EAPBusiness

# CONTACT NUMBERS AND ONLINE RESOURCES



**MEDICAL**  
877-356-0666

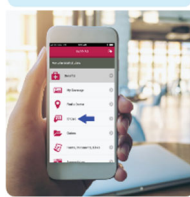
Group Number: T53

[www.myhnas.com](http://www.myhnas.com)

- Print an ID card
- Review your claims
- Wellness Tools
- See what's covered
- Find a doctor

Download myHNAS today!

Download on the App Store GET IT ON Google Play



**SUN LIFE DENTAL, DISABILITY,  
LIFE/AD&D**  
800-442-7742

<http://www.sunlife.com/account>

- Print an ID card
- Find a Dentist
- See what's covered



**KAISER MEDICAL**  
800-464-4000

Group Number: 606682

[www.kp.org](http://www.kp.org)

- Create a member profile
- Print an ID card
- Use "My health manager" to keep track of medical records, coverage and more
- Find a doctor/facility
- Health and Wellness Information



**SUN LIFE WITH VSP VISION**  
800-877-7195

[www.vsp.com](http://www.vsp.com)

- Find a provider
- View your benefits
- View your ID cards
- Review or file a claim



**FIRST STOP HEALTH**

**VIRTUAL MENTAL HEALTH**

888-691-7867

[www.fshealth.com](http://www.fshealth.com)



**FLEXIBLE SPENDING ACCOUNT**

800-877-506-1660

[www.enrollwithtag.com](http://www.enrollwithtag.com)



**EMPLOYEE ASSISTANCE PROGRAM**

877-595-5281 24/7

[www.GuidanceResources.com](http://www.GuidanceResources.com)

App: GuidanceNow<sup>SM</sup>

Web ID: EAPBusiness

**HUMAN RESOURCES**

530-898-3536

csehr@csuchico.edu

**ACRISURE, BENEFIT ADVISER**

Krista Guerrero

800-451-8037 x316

kkguerrero@acrisure.com



To enhance the "Quality of Life" for those we serve through insurance and financial services

The information in this booklet is only a brief summary of the covered benefits and is not a legal document. In the event of a discrepancy between this document and the plan documents/evidence of coverage, the plan document/evidence of coverage will always govern. Please refer to your Certificate of Coverage or your Summary Plan Description for a complete explanation of the benefits, limitations and exclusions. Please contact your Human Resources Department for additional information.

Prepared by Acrisure