



INTEGRIS Fall 2019 Newsletter



Get Ready for 2020 Open Enrollment: November 1 – 21, 2019

As a part of the INTEGRIS family, your health and well-being are a top priority. When you are at your best – physically, mentally, and financially, you bring the best of who you are to your loved ones and to our patients. That's why we offer a comprehensive benefits program that provides the resources you need to be healthy in all areas of your life. During this open enrollment period, we encourage you to take time to review your benefits, so you can make informed decisions to meet your needs in 2020.

The information in this newsletter outlines what you need to know about benefit consistencies with 2019 as well as improvements for 2020. Thank you for all you do to make INTEGRIS a special place to work!



Each one of us is contributing to the success of the organization and creating a culture of improvement in safety, quality, experience, access, stewardship and caregiver engagement.

2019 Recap

In 2019, INTEGRIS made many strides toward achieving status as a Top5 organization. Through idea generation, huddle board collaborations, and intentional leadership, each one of us is contributing to the success of the organization and creating a culture of improvement in safety, quality, experience, access, stewardship, and caregiver engagement.

For 2019, there were changes to the medical plan design and premium structure that more fairly aligned the metro and regional plans and added a copay option to the basic plan design. Based on your feedback, we added an option for caregivers who have dependents living out-of-state and out-of-state urgent care coverage for those covered by the IHP network. These changes improved access to quality care for you, our caregivers, and your families and helped reduce your out-of-pocket costs.

Our initiatives to contain costs included:

- Negotiated better terms with our vendors
- Conducted a dependent audit to ensure only eligible dependents are covered
- Conducted an audit of our medical plan claims administration to ensure correct payment of claims
- Implemented a pharmacy specialty program to save money on high cost specialty medications

In March, we conducted a benefit survey to get your feedback on the programs we offer and programs you would like to see implemented. One key finding was that we need to do a better job of communicating the value and depth of our benefit programs. To help you better understand our benefit programs, we implemented several communication initiatives to empower our caregivers with knowledge around our benefit offerings. First, we share benefit information via an ongoing segment in the INTEGRIS newsfeed that addresses many of the questions raised in the survey. Second, we enhanced the Benefits website so that you can now access benefits information from any computer or mobile device. Finally, we began featuring a specific benefit topic each month to help you learn about the benefits INTEGRIS provides.

Another key finding was that many employees need more information around how we determine premiums and plan provisions, how our premiums compare to average health insurance costs, and how much INTEGRIS spends each year to provide this benefit to our caregivers. See “INTEGRIS Cares” on the next page. Many of you also expressed an interest in a High Deductible Health Plan (HDHP) with a Health Savings Account (HSA) option. In order to empower you as healthcare consumers, we will be initiating an educational campaign to help you better understand the advantages and disadvantages of these types of plans.

New for 2020

- We are pleased to announce that there will be no plan design changes and you will see no premium increases for 2020 on your medical and dental plan benefits.
- Although we are continuing to partner with Cigna for Life, Accidental Death & Dismemberment, and Disability, you will see an increase in your premiums for these benefits in 2020. Insurance companies base their premiums on the past experience of the individual client and, unfortunately, INTEGRIS has had high claims experience over the past three years. Fortunately, we were able to negotiate a lower increase than what was originally proposed.
- The IRS has increased the Health Care Reimbursement account limit from \$2,650 to \$2,700.
- Caregivers who elect medical plan coverage for their spouse will be required to provide verification that the spouse is not eligible for medical coverage through their employer. This is a change from the 2019 affidavit process and will be required in order to waive the \$35 per pay period spousal surcharge.

INTEGRIS Cares



Medical coverage is an essential benefit that provides financial security when you or your family members are sick, injured, or go to the doctor. Health plans are either fully insured (an insurance company assumes the risk) or self-insured (the employer assumes the risk). The INTEGRIS health plan is self-insured, which means all claims are paid by INTEGRIS. For 2019 we budgeted over \$90 million to pay claims for you and your families. Although we have no control over catastrophic claims that occur when a member has an acute disease or accident, it is important that we take steps to manage those things that we can control. The dependent eligibility audit, claim reviews, plan design, network options, and choosing the right administrators are examples of steps an employer takes to help contain cost. Premiums are determined by plan design, number of participants, claims experience, and administrative costs. According to data gathered by eHealth, the average health insurance cost for single coverage premiums in 2018 was \$440 per month. For family coverage, the average cost in 2018 was \$1,168 per month. Your premiums are considerably less than this benchmark.

There are several different types of health plans: Health Maintenance Organizations (HMO) tend to be more affordable but you usually have less coverage and more restrictions; Preferred Provider Organizations (PPO) are more flexible and provide greater coverage, but usually have a deductible and a higher premium cost; High Deductible Health Plans (HDHP) usually have the lowest premium but have higher deductibles and do not allow copayments for office visits. In addition, prescription medications are not subject to coinsurance until the deductible has been met. Generally speaking, these work best for healthy individuals who usually have low healthcare costs. INTEGRIS currently offers a PPO, and we are looking at providing an HDHP option in the future.

Employee Wellness

Our goal with the Wellness Program is to help you improve your general health and well-being.

- The Wellness Incentive applies to all employees and spouses enrolled in the INTEGRIS medical plan. You and your spouse can earn up to \$400 in 2020.
- You can earn the incentive by receiving your Wellness Visit and participating in one of our Lifestyle Management and Maintenance Programs, such as Maternal Wellness, National Diabetes Prevention Program, Care Coordination, and more.
- In addition to the formal Caregiver Wellness program, the benefits team will be exploring additional ways to meet the overall well-being needs of our caregivers. We will continue to explore and expand the programs available through our Employee Assistance Program (EAP), financial wellness programs, and additional voluntary programs.

In-Network vs. Out-of-Network Providers

Get the most out of your benefits by receiving care from in-network providers.

Network for Miami and Grove Caregivers

Miami and Grove caregivers, as well as caregivers that live outside of the IHP service area, have access to the Healthcare Highways Logix (HCH) network. If you receive services at an INTEGRIS facility, the plan pays the highest benefit. You pay a larger share of the cost if you are admitted to an HCH facility or a non-network facility. Be aware, there are certain facilities for which there is no coverage. Find an in-network provider at www.hchlogix.com. Choose INTEGRIS as the employer.

Network for Oklahoma City and Enid Area Caregivers

The network available to the Oklahoma City and Enid area caregivers is the INTEGRIS Health Partner (IHP) network. If you live in one of the counties highlighted on the map located on the Total Rewards Site, you are eligible for the IHP network. You must receive prior authorization to see an out-of-network provider for the plan to pay benefits (except for in the case of a medical emergency or out-of-area urgent care). To receive special services that are not available in the IHP network, complete the following steps:

1. Visit www.hclogix.com to see if there is an in-network provider for the service you require.
2. Choose INTEGRIS as the employer and IHP as the network.
3. Search for the specialty or service you need.
4. If you are unable to find the service or specialist through the website, contact the IHP Care Coordination team at 405-951-2504 or toll free at 855-582-3003. The Care Coordination team will need the following:
 - The name and specialty of the provider.
 - The service that is needed.
 - Documentation from the referring physician supporting the need for the service, such as the last office visit, history, and physical or referral notes.
5. The care coordinator will contact the IHP Medical Director with the documentation for review.
6. The care coordinator will contact the member with the decision.

Out-of-network services approved under these circumstances will be paid as if they were in-network. **Failure to follow the authorization process may result in non-payment. Emergency services and out-of-state urgent care services are excluded from this requirement.** A map of Oklahoma counties can be found on the Total Rewards Site.

Out-of-State Dependents

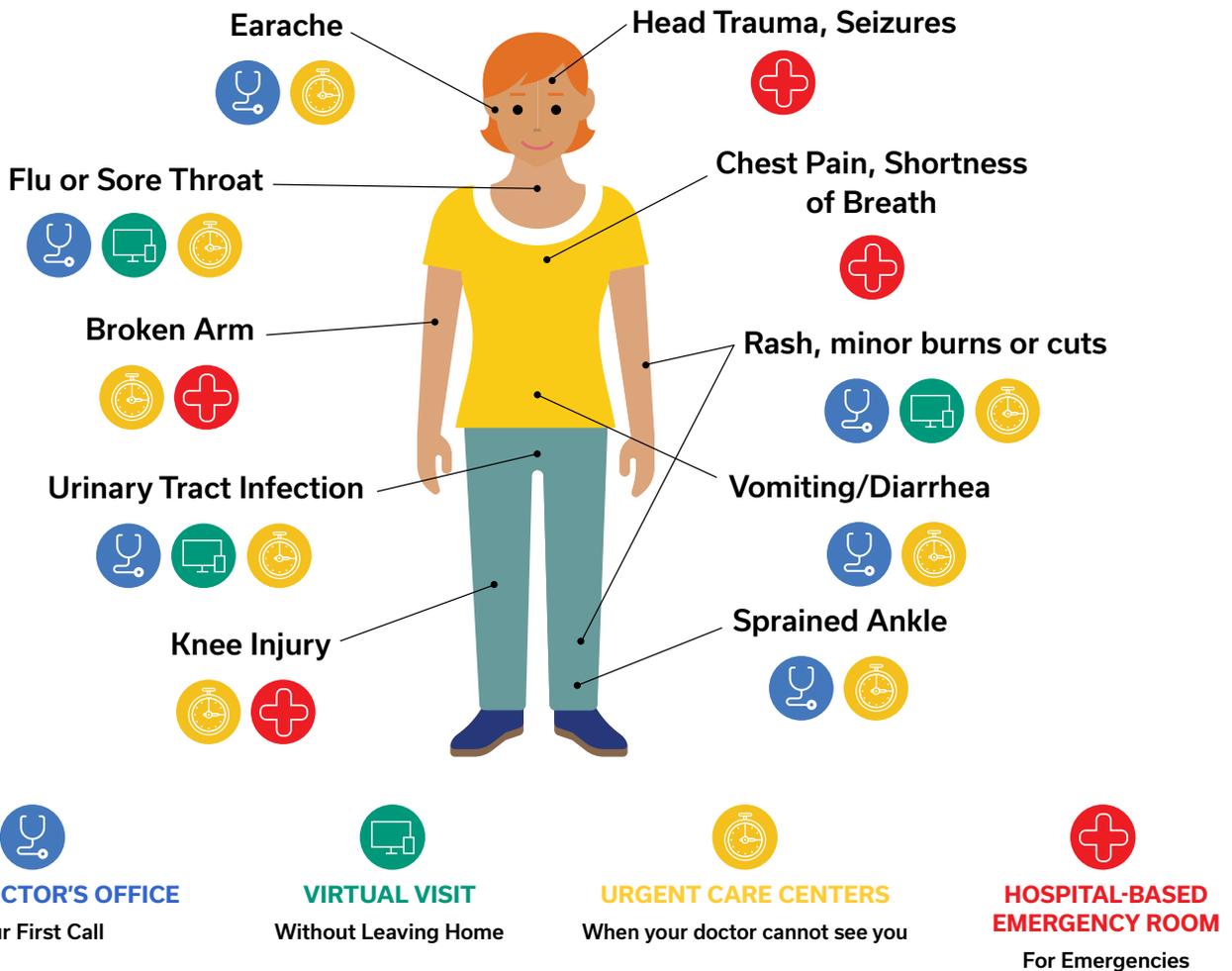
If you have a dependent that resides outside of Oklahoma, you can elect additional coverage through the PHCS multiplan network. Proof of residency must be provided in order for the out-of-network claims to be approved. Download the Out-of-State Dependent Proof of Residence form on the Total Rewards Site at <https://integrisok.com/-/media/total-rewards/Docs/ProofofResidenceform>.

Pick the Right Place for Medical Care

When you're sick or injured, you don't want to worry about where to access care, but the right level of care, delivered in the right setting, is very important. The illustration below provides a handy breakdown of your care center options and the best place to receive the treatment you need.



Accessing Health Care



Health Care and Dependent Care Reimbursement Accounts



Reimbursement accounts (also called Flexible Spending Accounts or FSAs) allow you to set aside pre-tax dollars through payroll deductions to pay for eligible health and dependent care expenses. You choose how much money to contribute each year, up to the annual IRS limits. Access the FSA Savings Calculator at www.connectyourcare.com to estimate your Health Care and Dependent Care FSA contributions and see how much you can save. ConnectYourCare offers 24-hour customer service, online and mobile app claims submission, and partners with WebTPA, Cigna Dental, and VSP to streamline the substantiation process.

IMPORTANT NOTE: The funds in your Reimbursement Accounts do not roll over from year to year. All 2019 expenses must be incurred in calendar year 2019 and filed with ConnectYourCare by March 15, 2020, or you will forfeit any remaining balance.

INTEGRIS Total Rewards Site

The INTEGRIS Total Rewards Site is your one-stop location to access all of the benefits available to you as an INTEGRIS caregiver. The Total Rewards site provides educational and engaging material about the many rewards and resources available to you. Get more information by visiting HRanytime and clicking on “Benefits” on the left side of the web page menu. Please be sure to check your personal contact information in HRanytime and update any information that is incorrect.

Onsite Enrollment Assistance

We encourage you to take advantage of our **enrollment assistance sessions** for help with the enrollment process (first come/first served). The times are listed below:

Day	Date	Facility	Enrollment Assistance Room	Enrollment Assistance Times
Friday	11/1	IBMC	Room F & G	7:00 – 4:00
Mon	11/4	Deaconess	Nursing Conf Room	7:00 – 4:00
Tues	11/5	Edmond	IHE Cafeteria	7:00 – 4:00
Wed	11/6	ISMC	Dining Room 3&4	9:00 – 5:00
Wed	11/6	Grove	Private Dining Room	7:00 – 4:00
Thurs	11/7	Miami	Miami Room	7:00 – 4:00
Thur	11/7	Lakeside	Conference Room	8:00 – 2:00
Fri	11/8	ICI	ICIO Room D&E	10:00 – 3:00
Mon	11/11	IBMC	Room J & K	7:00 – 4:00
Tues	11/12	ISMC	Auditorium	7:00 – 4:00
Wed	11/13	Yukon	Conf D	7:00 – 4:00
Wed	11/13	Enid	Baker Dining Room	9:30 – 3:30
Thurs	11/14	Spencer	Meeting Room A/B	7:00 – 4:00
Mon	11/18	IBMC	Room F	7:00 – 4:00
Wed	11/20	Deaconess	Physician Conf Room	11:00 – 3:00
Thurs	11/21	ISMC	Classroom 3	7:30 – 9:30



How to Enroll or Make Changes

1. Access the online enrollment system at www.myintegrishenefits.com.
2. Click “Login.”
3. Enter your Network ID for the username (generally the first four letters of your last name, followed by your first and middle initial).
4. Enter your password (the first four letters of your last name (first letter capitalized), + the last four numbers of your Employee ID + the last four numbers of your SSN).
 - You will immediately be prompted to reset your password.
5. After you enroll, be sure to review your confirmation statement.
 - Your elections will remain in effect from January 1 through December 31, 2020, unless you experience a qualifying change in status event, such as marriage or the birth of a child.
 - Send all required dependent verification forms to Human Resources by November 21, 2019. Important: INTEGRIS will verify spousal coverage for 2020. Any dependents who are not verified will be dropped from coverage.

Reminders and Next Steps

- The Open Enrollment period will run from November 1 to November 21, 2019. Benefits will be effective on January 1, 2020.
- This is an active enrollment. You must re-enroll in your benefits for the next plan year. Even if you do not wish to make any changes to your benefits, you need to log in to the enrollment system and confirm your tobacco status, your spouse’s eligibility for other coverage (if applicable), and your PPL Sell and Reimbursement Account elections.
- After the Open Enrollment period, you cannot make changes to your coverage during the year unless you experience a qualified life event. You have 30 days from a change in status to make changes to your current coverage.
- **Please make sure your and your dependents’ Social Security numbers are accurate. If they are not, please provide the correct information to Human Resources Customer Service.**
- **Check your beneficiaries and make any necessary changes.**
- All caregivers who elect medical plan coverage must login to the enrollment system to complete the spousal coverage and tobacco usage affidavits. **INTEGRIS will verify spousal coverage. Without a signed affidavit, a surcharge will be assessed for 2020.**
- Have questions or need assistance? Reach out to the HR Customer Service team by calling 405-949-4045 or 888-546-8347.

Key Dates to Remember

Take advantage of the many opportunities to learn about the changes to our benefits, so you can be confident that you are making the right decisions for 2020.

Key Open Enrollment Milestones	Date
Open Enrollment Begins	November 1, 2019
Open Enrollment Ends (This is the deadline for submitting all dependent verification forms and documentation to Human Resources Customer Service.)	November 21, 2019
Health Care Reimbursement Account Deadline for 2019 Claims (Any money left in your Health Care Reimbursement Account after you have been reimbursed for expenses incurred through December 31, 2019 will be forfeited.)	Deadline for incurred expenses: December 31, 2019 Deadline for reimbursement filing: March 15, 2020
Dependent Care Reimbursement Account Deadline for 2019 Claims (Any money left in your Dependent Care Reimbursement Account after you have been reimbursed for expenses incurred through December 31, 2019 will be forfeited.)	Deadline for incurred expenses: December 31, 2019 Deadline for reimbursement filing: March 15, 2020
INTEGRIS Contribution to RSP for plan year 2019	January 2020
IRS Form 1095-C	Mailed by January 31, 2020
Benefits Plan Year Begins (This is when new elections go into effect.)	January 1, 2020
Benefits Plan Year Ends	December 31, 2020