

HEALTHFLEX EXCHANGE

How Do I Choose My HealthFlex Plans?

a general agency of The United Methodist Church

What Is Great About HealthFlex Exchange?

Plan Options to Meet Your Unique Needs

Everyone's health care needs are different. What works for one individual may not be the best for a family or person with different medical or financial circumstances. With HealthFlex Exchange, you choose the HealthFlex plans that are best for you.

You can select from:



With flexibility to select the plans that best fit your budget and health care needs, and more choice over how to allocate your Premium Credit, HealthFlex Exchange puts you in control.



Shop for Coverage With Your Premium Credit

Your annual conference or UMC employer will help pay your monthly premium costs for coverage with a Premium Credit to be used specifically for purchasing the HealthFlex plans you select. Your credit is applied to your plan premiums—offsetting *what you owe.*

Premium Credit Example					
Monthly Premium Credit Amount Monthly Premium Difference					
Pastor John	\$700	\$800	-\$100		
1. HealthFlex bills plan sponsor \$800/month for Pastor John.					
2. Plan sponsor bills Pastor John's church or department \$700/month.					
3. Pastor John's church or employer withholds \$100/month from his paycheck for additional premium costs.					

ALEX Benefits Counselor

ALEX is a tool to help you select the right plans. The "benefits counselor" will ask a series of questions to help determine which plans may be the best fit for participants.

Use ALEX to:

- Estimate out-of-pocket costs, such as deductibles, co-payments or co-insurance
- Compare HealthFlex plans and which might cost the least overall
- Estimate health account contributions



To access ALEX, go to wespath.org and log into HealthFlex/WebMD.

Medical Plan Comparisons

There are also important differences in how each type of HealthFlex plan covers some services:

		HSA Plans			
Plan Feature		H1500	H2000	H3000	
Health Account Employer Contribution		\$750 for 1 person \$1,500 for > 1 person	\$500 for 1 person \$1,000 for > 1 person	None	
	Deductible Participant pays all	\$1,500 per person \$3,000 per family	\$2,000 per person \$4,000 per family	\$3,000 per person \$6,000 per family	
		If > 1 person is cove	ered the family deductible	e always applies	
n-network	Co-insurance Participant pays part (Plan Participants pays)	80% 20%	70% 30%	40% 60%	
	Out-of-Pocket Max (OOP) After this, plan pays all	\$5,000 per person \$10,000 per family	\$5,000 per person \$10,000 per family	\$6,000 per person \$12,000 per family	
Off	Office Visits				
	ctor visit before luctible is met	Participant pays full discounted cost			
	ctor visit after luctible is met	Participant pays 20%Participant pays 30%Participant pays60%			
Me	dical Services				
	spital stay, lab or ly before deductible				
Hospital stay, lab or x-ray after deductible		Participant pays 20%	Participant pays 30%	Participant pays 60%	
Pharmacy		After deductible, participant pays copay or co-insurance	After deductible, participant pays copay or co-insurance	After deductible, participant pays 60%	
		Do not need to meet deductible if Rx is on the preventive drug list			
Out	tpatient Counseling	Participant pays full discounted cost until deductible is met			
		then 20%	then 30%	then 60%	

See HealthFlex Plan Comparisons for more benefit details by plan.

	B1000		
C2000	RA Plans C3000	B1000	
\$1,000 for 1 person \$2,000 for > 1 person	\$250 for 1 person \$500 for > 1 person	None	
\$2,000 per person \$4,000 per family	\$3,000 per person \$6,000 per family	\$1,000 per person \$2,000 per family	
80% 20%	50% 50%	80% 20%	
\$5,000 per person \$10,000 per family	\$5,000 per person \$10,000 per family	\$5,000 per person \$10,000 per family	
Participant pays fu	ll discounted cost	\$30 PCP*/ \$50 specialist	
Participant pays 20%	Participant pays 50%	\$30 PCP*/ \$50 specialist	
Participant pays fu	ll discounted cost	Participant pays full discounted cost	
Participant pays 20%	Participant pays 50%	Participant pays 20%	
Participant pays copay or co-insurance	Participant pays copay or co-insurance	Participant pays copay or co-insurance	
No ded	uctible	Car C	
Participant pays 20% Participant pays 50%		\$15	

* PCP: Primary Care Provider

Dental and Vision Plan Comparisons



Dental	Dental HMO	Passive PPO 2000	РРО
Preventive/Diagnostic Services Covered at 100%	~	~	~
Coverage for basic and major restorative care, plus orthodontia up to age 19	(Plus adult orthodontia)	~	~
Same benefits whether your dentist is in-network or not		~	
More generous benefits if you see an in-network dentist ¹			~
In-network benefits only, with narrower provider network	~		
Annual maximum benefit	No benefit max; see charge schedule	\$2,000 ²	\$2,000 ² (in network) \$1,000 ² (out of network)

Vision	Exam Core	Full Service	Premier
Basic eye exam for \$20	~	~	~
Discount-only for glasses and contacts	~		
Allowance toward glasses and/or contacts		\$160 ³	\$200/year (each)

¹ HealthFlex uses the Cigna Advantage Network for the PPO and Passive PPO. The HMO uses the Cigna Dental Care Access Network.

- ² Increases \$150/year for 3 subsequent years if you get regular preventive checkups.
- ³ Glasses—frames every 12 months, lenses every 12 months or contacts every 12 months.

How Do Health Accounts Work?

Choosing a plan with a health account option may save you money on taxes and help you better manage your health care expenses. HSAs, HRAs and FSAs are all offered by HealthFlex. They share some similar traits, but have important differences. Learn more below.

	HealthFlex HSA	HealthFlex HRA	HealthFlex Health Care FSA
Which Plans?	H1500, H2000, H3000*	C2000, C3000	All
How Funded?	Plan sponsor and individual	Plan sponsor	Individual
Earnings/ Interest	May earn tax-deferred interest or dividends	No interest	No interest
Tax Implications**	 Triple tax advantage: 1. Contributions are not subject to federal income tax 2. HSA earnings accrue tax-free 3. HSA withdrawals, including investment earnings, are tax-free for eligible expenses 	Plan sponsor contributions are excluded from your gross income and are not subject to federal income tax	Your contributions are excluded from gross income and are not subject to federal income tax
Annual Funding Limit (2021)	\$3,600 individual \$7,200 family	Determined by plan sponsor	\$2,750
Carry-Over at Year-End	Unlimited carry over	Unlimited carry over as long as you remain in HealthFlex (and through retirement)	\$550
If You Retire	Unused balance remains with you indefinitely regardless of UMC employment/ appointment	Unused balance remains until exhausted	Eligible expenses through your last date of HealthFlex coverage Deadline to file claims: 90 days after leaving HealthFlex
If You Terminate UMC Employment or Waive HealthFlex	Unused balance remains with you indefinitely regardless of UMC employment/ appointment	Unused balance can be used for eligible expenses for up to 90 days after termination or waiver	Eligible expenses through your last date of HealthFlex coverage Deadline to file claims: 90 days after leaving HealthFlex

* H3000 has no plan sponsor contribution for HSA.

** Please consult your tax adviser if you will soon be Medicare-eligible. There may be additional tax implications.

Make Your 2021 HealthFlex Elections— October 28 through November 12, 2020

This is your only opportunity to select 2021 HealthFlex benefits, change who you'll cover and elect health account contributions. To make your elections, go to **wespath.org** and log into **HealthFlex/WebMD**.

- Use ALEX Benefits Counselor to estimate costs under each plan and explore your health account options
- Select your HealthFlex plans—medical, dental and vision
- Choose which eligible dependents to cover in 2021
- Contribute to health accounts for pre-tax savings in 2021 and to save for future health needs

If you don't make any elections, you will either remain in your current elections or default into the plan chosen by your plan sponsor (if you are new to HealthFlex Exchange). If you are making health account contributions in 2020, they will not continue into 2021.

After Annual Election, you can only change benefits, add or drop dependents, or make new FSA elections if you experience a qualifying "change of status" event, such as marriage, divorce, death of a spouse, birth/adoption of a child, or loss of spouse's health coverage. If you have an HSA, you can change your HSA elections/contribution through November of that year, without a change of status event. However, you cannot reduce your contribution mid-year to an amount less than you have already contributed year-to-date.

> 1-844-688-1375 Annual Election Support Team

For questions about your HealthFlex elections