



# CIGNA HSA PRESENTATION 2023

**Expert**Quote



Snap to access your benefits website!

# MEDICAL PLAN: CIGNA HMO

MEDICAL BENEFITS	
Calendar Year Deductible	None
Office Visits	\$10/\$20 Copay
Out-of- Pocket Maximum (Individual/Family)	\$1,000/\$2,000
Hospital Expenses	
Inpatient Services	No Charge
Outpatient Surgery/Services	No Charge
Emergency Room Visit / Urgent Care	\$50 Copay/\$25 Copay
Physician Services	
Diagnostic, Lab and X-Ray	No Charge
Well Child Exams	No Charge
Well Woman Exams	No Charge
Adult Physicals	No Charge
Infertility Services	
Office Visits	\$20 Copay
Treatment/Surgery	Coverage varies based on place of service
Prescriptions	
Generic	\$7 Copay (30 day)
Formulary Brand Name	\$15 Copay (30 day)
Non-Formulary Brand Name	\$35 Copay (30 day)
Short Term Rehabilitation	
Physical Therapy	\$20 Copay
Chiropractic/Acupuncture	\$20 Copay/ Acupuncture not covered
Mental Health	
Inpatient Services (Non - Severe)	No Charge
Outpatient Services (Non-Severe)	\$10 Copay



# MEDICAL PLAN: CIGNA POS

MEDICAL BENEFITS	NETWORK	NON-NETWORK
Calendar Year Deductible (Individual/ Family)	None	\$250/\$500
Office Visits	\$25/\$45 Copay	20% after deductible
Out-of- Pocket Maximum (Individual/Family)	\$1,000/\$2,000	\$2,000/\$4,000
<b>Hospital Expenses</b>		
Inpatient Services	No Charge	20% after deductible
Outpatient Surgery/Services	No Charge	20% after deductible
Emergency Room Visit / Urgent Care	\$50 Copay/\$25 Copay	\$50 Copay/\$25 Copay, deductible waived
<b>Physician Services</b>		
Diagnostic, Lab and X-Ray	No Charge	20% after deductible
Well Child Exams	No Charge	20% after deductible
Well Woman Exams	No Charge	Not Covered
Adult Physicals	No Charge	Not Covered
<b>Infertility Services</b>		
Office Visits	\$45 Copay	Not Covered
Treatment/Surgery	Coverage varies based on place of service	Not Covered
<b>Prescriptions</b>		
Generic	\$15 Copay (30 day)	Not Covered
Formulary Brand Name	\$30 Copay (30 day)	Not Covered
Non-Formulary Brand Name	\$50 Copay (30 day)	Not Covered
<b>Short Term Rehabilitation</b>		
Physical Therapy	\$45 Copay	20% after deductible
Chiropractic/Acupuncture	\$45 Copay/ Acupuncture not covered	20% after deductible/ Acupuncture not covered
<b>Mental Health</b>		
Inpatient Services (Non - Severe)	No Charge	20% after deductible
Outpatient Services (Non-Severe)	No Charge	20% after deductible



# WHAT IS A HEALTH SAVINGS ACCOUNT (HSA)?

- > The **IRS** determines how you can use the funds in your HSA.
  - > Use your **HSA** to pay for **qualified medical expenses** for yourself and your dependents:
    - > The funds in your HSA are **not** considered part of your wages, so they're **not** subject to **federal** income taxes.
    - > HSA funds **used to pay** for qualified medical expenses are **not** subject to taxes.
    - > Any investment earnings in an HSA are **tax-free** so long as they're used for qualified medical expenses.
    - > Please consult with your tax advisor with any tax related questions.
    - > Take money out penalty-free **after** age 65, such withdrawals are **taxable** if they're **not** for a qualifying medical expense.
  - > An HSA is a **savings account** that works with the CIGNA HSA Plan ONLY
  - > Your employer will **contribute** money to your **HSA** each year and use those funds to pay for qualified medical expenses, now or in the future.
  - > **You own** the money in this account, which you can grow and take with you, even if you change jobs or retire. **H.S.A. is not F.S.A.**



# MEDICAL PLAN: CIGNA HSA

Benefit Description	Employee Experience	In Network	Out of Network
	In Network with MVLA Funding		
Calendar Year Deductible (Individual/Family)	\$0/\$0	\$2,000 / \$4,000	\$4,000/\$8,000
Out of Pocket Max (Individual/Family)	\$0/\$0	\$3,000 / \$5,000	\$6,000/\$10,000
Office Copay	\$0 using the HSA card assuming card is used in network only	20% after deductible	40% after deductible
Hospital Charges			
Physician Charges			
Outpatient Surgery			
Diagnostic/Lab/X-ray			
Maternity			
Adult Physicals			
Urgent Care			
Emergency Room			
Prescriptions			

\*This is a summary of some benefits and their copayments and coinsurance.

Please see your Evidence of Coverage for information about coverage, limitations, and exclusions for all benefits, including those not listed in this summary.



# CIGNA HSA

## YOUR 2023 HSA FUNDING

<b>Employer Contribution</b>	<b>January to June</b>	<b>July to December</b>	<b>Total</b>
Employee Only	\$1,925	\$1,925	\$3,850
Employee + Dep	\$3,650	\$3,650	\$7,750

# CIGNA HSA

## YOUR 2023 HSA FUNDING

### Out of Pocket Maximum

- > Your annual out-of-pocket maximum offers peace of mind by **limiting the total amount you'll pay** for all covered services each year.
- > Your **copays, coinsurance, and deductible** payments count towards your out-of-pocket maximum.
- > After you **reach your** out-of-pocket maximum, **Cigna** will pay the **full amount** for all covered services for the rest of the calendar year.
- > **Use your H.S.A.** funds to make payments under **Out-of-Pocket Max**

	Individual	Family
Annual out-of-pocket maximum	\$3,000	\$5,000
MVLA Funding	\$3,850	\$7,750
Net Excess Funds (Yes, the funding exceeds the Out of Pocket Max)	\$850	\$2,750

# CIGNA HSA

## HOW DOES THIS WORK?

	Medical Plan Usage
<b>Cigna service fees</b>	
Annual physical exam	\$0
Office visit	\$150
Prescription	\$65
<b>You pay with HSA card</b>	
Annual physical exam	\$0
Office visit	\$150
Prescription	\$65
<b>Employee Out of Pocket Cost</b>	<b>\$0</b>





# CIGNA HSA

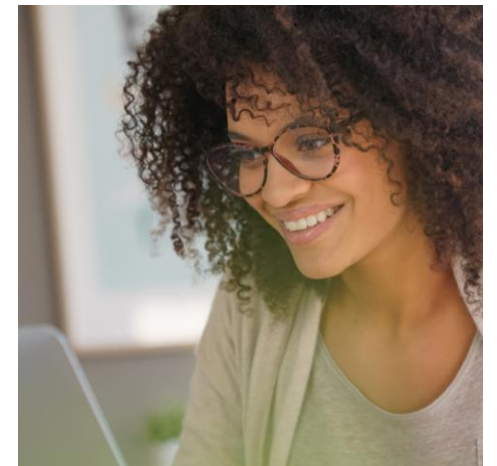
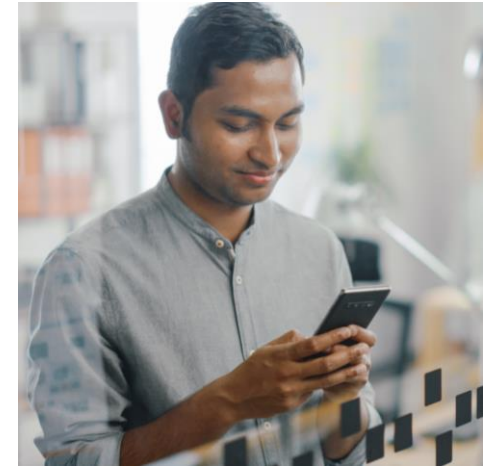
## OPENING YOUR ACCOUNT AT HSA BANK

- > If you elect to enroll in the HSA plan offered by your employer, a bank account will automatically be opened for you at HSA Bank
- > HSA Bank assigns you an account number and performs a Customer Identification Process (CIP)
- > Once your account is opened, you will be sent a Welcome Brochure and debit card(s)



# ACCESS YOUR HSA FUNDS THROUGH MYCIGNA ONLINE

By clicking on the [user guide](#) you will find step by step instructions on pages 4 and 5 to access your online account.



# ONLINE HSA RESOURCES

Click the following links that will guide you to videos and other online resources for more details on using your HSA account and investment options.

A. [HSA overview](#)

B. [Investment Options](#)

C. [FAQs](#)

D. [Website Demos](#)



# MYCIGNA

## By phone – 800.Cigna24

- > Call anytime day or night for live customer service
- > Ask for a Spanish-speaking representative or speak with us in your preferred language – interpreter service is available in over 200 languages
- > Speak with a nurse anytime, day or night through the 24-Hour Health Information Line

## myCigna<sup>SM</sup> – online or through the app

- > Directory of doctors, hospitals, facilities with cost and quality information
- > Useful tools to help you:
  - > Review your coverage
  - > Manage and track claims
  - > Track account balances and deductibles, and sign-up for email notifications
  - > Find quality of care information for common procedures and treatments
  - > Get Claims and Balances statements on demand to view claim history and account transactions
  - > View prescription drug prices
  - > Save money when you order through Cigna Home Delivery Pharmacy<sup>SM</sup> (**myCigna.com** only)

# ELECTING BENEFITS ONLINE VIA BENETRAC



## Employee Online Enrollment Guide

- Get online
- Enter the following address into your browser:  
<https://www.eemrollmentenrollment.com/STV/SIB/2012/01>
- Your user name is your first initial and last name (no spaces/no hyphens, up to a maximum of 16 characters).
- Your password is the last four digits of your social security number.

[Click here if you have forgotten your User Name or Password](#)

### Review your personal information on the My Family page

It is important to review all of your personal information to ensure accuracy.

#### Steps

1. Click your name to update your personal information. You can also change your password in this area.
2. Click here to add your spouse.
3. Click here to add your dependents.

**Navigation:** BENEFITS | Election Summary | Edit Family | Resource Library | News & Alerts

**Your Personal Information: Jerry Abel**

Please review the information below. Add any family member you wish to enroll in your benefit offerings.

Employee						
Name	SSN	Address	DOB	Gender	Contact	Approved
Jerry Abel	23-45-6789	345 Thurman Avenue #34, Eureka Springs, AR 72632	2/13/1979	Male	Use	9/18/2012

Dependents							
Name	SSN	Address	Status	DOB	Gender	Approved	Tasks
Johnny Abel	889-00-0042	345 Thurman Avenue #34, Eureka Springs, AR 72632	Dependent Child	1/1/2000	Male	9/18/2012	Create

[PROCEED TO MY BENEFITS >](#)

### Enroll in your benefits

If your enrollments have not been previously set up in the system, you can make your selections by following the instructions below.

#### Steps

1. Click a link under the **Benefits** menu to review a particular category of benefits.
2. In each benefit block, make a selection from your list of **Manage Benefit** options.

**Medical**

Quick Links (15 total)  
 Medical Health Savings Account  
 Medical Care FSA  
 Dependent Care FSA  
 Flexible Spending Account  
 Flexible Spending Account  
 Flexible Spending Account  
 Flexible Spending Account

**MANAGE BENEFIT** (dropdown menu)

[Add or View Plan Options](#)  
[Check Benefit](#)

**Medical Care FSA**

**MANAGE BENEFIT** (dropdown menu)

**Costs**

Total Cost of Election:	\$0.00
Total Benefit dollars:	\$0.00
Out of pocket expense:	\$0.00

### Change existing benefits

Your current elections will appear in a similar fashion as shown in the picture below. To make a change, select an option from the list in the **Manage Benefit** section.

#### Steps

1. Click here to select a **Manage Benefit** option. The system will guide you through the process of making changes to your elections.

**Medical** Sample PPO Plan

These options vary depending on the type of benefit

Elite Health

Status: Active  
 Activity: 6/1/2012  
 Coverage: Employee + All Children  
 Employer Cost: \$175.00 (Semi-Monthly)  
 Employee Cost: \$200.00 (Semi-Monthly)

**MANAGE BENEFIT** (dropdown menu)

Name	Type	Group Number	Provider	Action	Effective	Approved	Sent
Jerry	EMP	H200_PPO		Ass	6/1/2012	7/6/2012	
Johnny	DEP	H200_PPO		Ass	6/1/2012	7/6/2012	

# ELECTING BENEFITS ONLINE VIA BENETRAC

# MVLA

HIGH SCHOOL DISTRICT

[Your Personal Information](#) ]

Benefits - George Jetson

[Proceed to Log Out](#)

## BENEFITS

[Election Summary](#)

[Edit Family](#)

[Resource Library](#)

[News & Alerts](#)

Unfinalized

### Quick Links (15 total)

- [Medical](#)
- [Health Savings Account](#)
- [Medical Care FSA](#)
- [Dependent Care FSA](#)
- [Dental](#)
- [Vision](#)
- [Core Life](#)
- [Long Term Disability](#)
- [Short Term Disability](#)
- [Optional Life](#)

### Costs

Total Cost of Elections: **\$87.50**  
 Total Benefit dollars: **\$0.00**  
 Out of pocket expense: **\$87.50**

[Go to Review & Finalize](#)



The Benefit Blocks below show your current status in each benefit. Use 'Manage Benefit' on each block to see choices available to you. If you wish to enroll members other than yourself in any benefit, [click here](#) to make those changes now.

**IMPORTANT:** If you are adding a new dependent you must enroll them in each applicable benefit block. Your dependent will not be enrolled without explicitly adding them to each benefit.

### Medical Blue Shield of CA Access+ HMO Plan

[Benefit Description](#) | [History](#) | [Enrollment Recap](#) | [View Questions](#) |



<b>Status:</b>	Active
<b>Activity:</b>	11/1/2013
<b>Coverage:</b>	Employee + Family
<b>Employer Cost:</b>	\$295.80 (Bi-Weekly)
<b>Employee Cost:</b>	\$87.50 (Bi-Weekly)

**MANAGE BENEFIT**

[Change or View Plan/Options](#)

Name	Type	Group Number	Provider	Action	Decline Benefit
George	EMP	BSHMO BS HMO		Add	11/1/2013 10/14/2013
Jane	SPS	BSHMO BS HMO		Add	11/1/2013 10/14/2013
Elroy	DEP	BSHMO BS HMO		Add	11/1/2013 10/14/2013

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# ELECTING BENEFITS ONLINE VIA BENETRAC



## BENEFITS

[Election Summary](#)[Edit Family](#)[Resource Library](#)[News & Alerts](#)[Your Personal Information](#) > [Benefits](#) >

**Manage Medical:** Change or View Plan/Options

\* Required

### Carefully review the information below before finalizing

<b>Transaction Type:</b>	Change Coverage
<b>* Event Date:</b>	11/1/2013
<b>Comment:</b>	Change or View Plan/Options
<b>Transaction Date:</b>	11/1/2013
<b>Included:</b>	<b>George Jetson</b> (Employee) <b>Jane Jetson</b> (Spouse) <b>Elroy Jetson</b> (Dependent)
<b>Product:</b>	Medical PPO
<b>Group Number:</b>	1234 PPO
<b>Coverage Level:</b>	Employee + Family
<b>Employer Cost:</b>	\$376.36 (Bi-Weekly)
<b>Employee Cost:</b>	\$82.62 (Bi-Weekly)

This Benefit is part of your company's Section 125 plan. Part or all of your portion of the premium is paid on a pre-tax basis. If you would like it changed, please contact your Benefits Administrator

[CANCEL](#)[<< GO BACK](#)[I AGREE](#)



# ELECTING BENEFITS ONLINE VIA BENETRAC



[Your Personal Information](#) >

Benefits - George Jetson

Unfinalized

**BENEFITS**   Election Summary   Edit Family   Resource Library   News & Alerts

**Quick Links** (14 total)

- [Medical](#)
- [Health Savings Account](#)
- [Dental](#)
- [Vision](#)
- [Medical Care FSA](#)
- [Basic Life/AD&D](#)
- [Long Term Disability](#)
- [Voluntary STD](#)
- [Voluntary Employee Life/AD&D](#)
- [Voluntary Spouse Life/AD&D](#)

**Costs**

Total Cost of Elections: **\$82.62**

[Go to Review & Finalize](#)

The Benefit Blocks below show your current status in each benefit. Use 'Manage Benefit' on each block to see choices available to you. If you wish to enroll members other than yourself in any benefit, [click here](#) to make those changes now.

**IMPORTANT:** If you are adding a new dependent you must enroll them in each applicable benefit block. Your dependent will not be enrolled without explicitly adding them to each benefit.

**Medical**   Medical PPO

[Benefit Description](#) | [History](#) | [Enrollment Recap](#) |

MEDICAL

<b>Status:</b>	Active
<b>Activity:</b>	11/1/2013
<b>Coverage:</b>	Employee + Family
<b>Employer Cost:</b>	\$376.36 (Bi-Weekly)
<b>Employee Cost:</b>	\$82.62 (Bi-Weekly)

MANAGE BENEFIT

Name	Type	Group Number	Provider	Action	Effective	Approved	Sent
George	EMP	1234 PPO		Change	11/1/2013	Submitted	
Jane	SPS	1234 PPO		Change	11/1/2013	Submitted	
Elroy	DEP	1234 PPO		Change	11/1/2013	Submitted	

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# ELECTING BENEFITS ONLINE VIA BENETRAC

Election Summary				
<b>Employee:</b> Jetson, George <b>Address:</b> 123 Milky Way Sky City, CA 90123			<b>Hire Date:</b> 10/2/2013 <b>Status:</b> Full Time Employee	
<b>Benefits as of:</b> 11/1/2013				
Plan Elections <small>Amounts shown are per (Bi-Weekly) pay period</small>				
Benefit Category	Plan Description	Coverage	Pre-Tax	Post-Tax
Medical	Medical PPO	Employee + Family	\$82.62	\$0.00
Dental	Assurant Dental PPO Plan	Employee + Family	\$38.20	\$0.00
Vision	Declined	Declined	\$0.00	\$0.00
Medical Care FSA	Declined	Declined	\$0.00	\$0.00
Basic Life/AD&D	Assurant Basic Life Plan	\$50,000.00	\$0.00	\$0.00
Long Term Disability	Assurant Long Term Disability Plan	\$5,000.00 (Monthly)	\$0.00	\$0.00
Summation <small>Amounts shown are per (Bi-Weekly) pay period</small>				
		<b>Total out of pocket expense:</b>	\$120.82	
Your Employer is contributing \$401.52 to your Benefit Package.				
Family Members				
Name	Relation	Medical	Dental	
Jane Jetson	Spouse	Y	Y	
Elroy Jetson	Dependent	Y	Y	
Primary Beneficiaries				
Benefit	Name	Relationship	%	Address
Basic Life/AD&D	Jane Jetson	Spouse	100	
Contingent Beneficiaries				
Benefit	Name	Relationship	%	Address
There are no Contingent Beneficiaries				

The above reflects benefits that I have elected and grants authorization to my employer to make the necessary payroll deductions. I understand that I cannot make changes to my elected benefits, or enroll in any currently declined or terminated benefits until the next open enrollment period, except for specified "Qualified Family Status Changes". Pursuant to IRS Section 125 rules, I must notify Assurant Employee Benefits in writing of a "Qualified Family Status Change" within 31 days from the date of occurrence.

10/14/2013 9:36:10 PM

# ELECTING BENEFITS ONLINE VIA BENETRAC



HIGH SCHOOL DISTRICT

[Your Personal Information](#)

## BENEFITS

[Election Summary](#)

[Edit Family](#)

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[News & Alerts](#)

Benefits - George Jetson

Finalized

### Quick Links (14 total)

[Medical](#)

[Health Savings Account](#)

[Dental](#)

[Vision](#)

[Medical Care FSA](#)

[Basic Life/AD&D](#)

[Long Term Disability](#)

[Voluntary STD](#)

[Voluntary Employee](#)

[Life/AD&D](#)

[Voluntary Spouse Life/AD&D](#)

### Costs

Total Cost of Elections: **\$120.82**

[Go to Review & Finalize](#)



The Benefit Blocks below show your current status in each benefit. Use 'Manage Benefit' on each block to see choices available to you. If you wish to enroll members other than yourself in any benefit, [click here](#) to make those changes now.

**IMPORTANT:** If you are adding a new dependent you must enroll them in each applicable benefit block. Your dependent will not be enrolled without explicitly adding them to each benefit.

### Medical Medical PPO

[Benefit Description](#) | [History](#) | [Enrollment Recap](#) |

**MEDICAL**

<b>Status:</b>	Active
<b>Activity:</b>	11/1/2013
<b>Coverage:</b>	Employee + Family
<b>Employer Cost:</b>	\$376.36 (Bi-Weekly)
<b>Employee Cost:</b>	\$82.62 (Bi-Weekly)

MANAGE BENEFIT

Name	Type	Group Number	Provider	Action	Effective	Approved	Sent
George	EMP	1234 PPO		Change	11/1/2013	Submitted	
Jane	SPS	1234 PPO		Change	11/1/2013	Submitted	
Elroy	DEP	1234 PPO		Change	11/1/2013	Submitted	

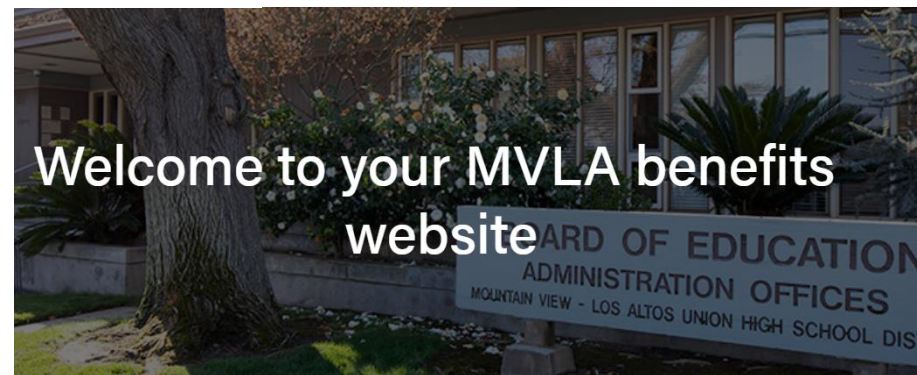
# MVLA MICROSITE

For additional information on your HSA and all other benefits offered at MVLA, please visit your custom website:

<https://www.eqmvlabenefits.com/>



Contact Us



# WHAT HAPPENS NEXT?

We're here to help

- > To enroll, please visit: [Benetrac.com](https://Benetrac.com) | MVLA Group ID# MSVD1245
- > ID cards will be available in approximately 7 – 10 business days after the new enrollment has been completed.
- > Please visit [EQMVLABenefits.com](https://EQMVLABenefits.com) for access to all benefits information
- > Questions? Contact [Ashlii@ExpertQuote.com](mailto:Ashlii@ExpertQuote.com)



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**ExpertQuote**