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**Welcome to Open Enrollment 2017!**

At USHydrations, we strive to provide our employees with quality medical coverage at affordable rates. With the significant rise in healthcare claims over the past few years, we understand how costly healthcare coverage can be for our employees. Each year, USHydrations actively researches the best plans and coverage options on the market to offer our employees.

Open Enrollment is your once‐a‐year opportunity to review your benefit plan coverages and make adjustments to meet your current needs. Please review all materials to make informed decisions on benefits for you and your family in 2017-2018. In most cases, this is your only opportunity to change your elections for the 2017-2018 plan year. If you later decide to make a change to your plan selection or add/delete dependents, you may only do so within 30 days of a qualified status change as outlined in the summary plan description. This includes, but is not limited to, marriage/divorce, birth/adoption of a child, or gain/loss of other coverage.

**An Important Note:** We understand that many of you have a spouse/domestic partner with a different Open Enrollment election period for their employer‐sponsored coverage. DON’T WORRY! If you need to make an election plan change due to your spouse/domestic partner’s Open Enrollment that occurs AFTER ours, this may be considered a qualifying status change. Contact Human Resources at 570-655-7755, ext. 228 for assistance.

**2017 PLAN CHANGES**

* Geisinger Health Plan Tobacco Surcharge – A tobacco surcharge will be applied to employee participants who have certified their status as a tobacco user and have not completed a tobacco cessation program. The surcharge for 2017-2018 is 13% of the monthly premium for individual coverage and will be deducted on a semi-monthly basis.
* Monthly health benefit stipend – Employees who are covered under another insurance plan and choose to waive the GHP benefit offered by USHydrations may be eligible for the monthly benefit stipend. Proof of existing coverage and certified status as a non-tobacco user is required.
* Guardian Dental has expanded their participating providers list through Alliance Network.

**2017 ANNOUNCEMENTS**

* All employees are required to complete and return the Benefit Election form, even if you are declining enrollment into the benefits, to Human Resources by **September 29, 2017**.

* All employees, including NON-Tobacco users, are required to complete and return the Tobacco Affidavit to Human Resources by September 29, 2017.
* USHydrations will continue contributing 65% of the monthly premium for healthcare coverage under the Geisinger Health Plan
* 401K Retirement Plan – Employees who are at least 21 years of age and who were hired on or before October 1, 2016 are eligible to enroll in the 401K plan October 1st.
* Employees who declined Guardian Short-term or Long-term Disability benefits upon their initial open enrollment, must complete an Evidence of Insurability form if they choose to enroll October 1st. This form can be obtained from HR. Completion of this form does not guarantee insurability.
* Representatives from Geisinger Health Plan and Edward Jones will be onsite September 13, 2017 to provide employees an overview of the benefit plans. This is your opportunity to ask questions and learn more about the plan’s coverage. All employees and/or spouses are encouraged to attend. The meetings will be held at the following times:

**Geisinger Health Plan**

**Wednesday, September 13, 2017**

**Second floor conference room**

**7:15AM, 10:15AM, 11:15AM, 2:15AM, 3:15AM, 4:15AM**

**Edward Jones – 401K Retirement**

**Wednesday, September 13, 2017**

**Booth located by Production Line 1**

**Representative will be available 10:30AM to 12:00PM & 3:30PM to 5:00PM**

**Guardian** - Dental, STD, LTD & **Highmark** - Vision

Employees should contact Human Resources with any questions related to Guardian and Highmark benefits.

**The *semi-monthly* premium rates outlined below are effective October 1, 2017:**

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| **GEISINGER HEALTH PLAN** | | |
| Level of Coverage | Employee Contribution  Rate 35% | Employer Contribution |
| **Employee** | **$76.72** | $284.95 |
| **Employee/Spouse** | **$182.61** | $678.27 |
| **Employee/Child** | **$120.23** | $446.57 |
| **Employee/Children** | **$171.09** | $635.49 |
| **Family** | **$210.35** | $781.29 |

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| **OPTION #1 – GUARDIAN CORE DENTAL PLAN** | |
| Level of Coverage | Employee Contribution Rate 100% |
| **Employee** | **$10.23** |
| **Employee/Spouse** | **$23.91** |
| **Employee/Child(ren)** | **$25.05** |
| **Family** | **$38.34** |
| **OPTION #2 – GUARDIAN BUY UP DENTAL PLAN** | |
| Level of Coverage | Employee Contribution Rate 100% |
| **Employee** | **$14.45** |
| **Employee/Spouse** | **$31.44** |
| **Employee/Child(ren)** | **$33.53** |
| **Family** | **$47.97** |

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| **HIGHMARK DAVIS VISION PLAN** | |
| Level of Coverage | Employee Contribution Rate 100% |
| **Employee** | **$2.09** |
| **Family** | **$5.42** |

**OPEN ENROLLMENT INSTRUCTIONS**

* Complete and sign the 2017-2018 Benefit Election form. **(All employees must complete this form)**
* Complete and sign the Tobacco Affidavit **(All employees must complete this form)**
* If you need to update your address/personal information or add or delete dependent(s) for the new benefit year, you must complete, sign and return each benefit change form.
* If you are a new enrollee, complete, sign and return each enrollment form.
* Provide proof of insurance coverage if waiving the GHP benefit for the monthly stipend option. Acceptable documentation includes: Insurance Card or Proof of Coverage letter from insurer.
* Complete and notarize the Declaration of Fact for Domestic Partner if applicable. Form can be obtained from HR.

**DEADLINE TO SUBMIT FORMS: Friday, September 29, 2017**

Submit your signed Benefit Election, Tobacco Affidavit, Enrollment and/or Change form(s) to the Human Resources Department or place in the HR drop box no later than September 29, 2017.

**QUESTIONS?**

Contact Jennifer Verry, HR Manager, at [jverry@ushydrations.com](mailto:jverry@ushydrations.com) or 570-655-7755, ext. 228. ***Don’t hesitate to ask questions***. It is important that you feel comfortable about your benefit decisions because they will be in effect for the entire 2017-2018 benefit period unless you experience a qualified status change event.