



# Member Benefits Presentation

Effective January 1st – December 31st, 2025

# Open Enrollment

2025

# Today's Agenda

## Overview of Open Enrollment

- Medical Plan - Aetna
  - Two plan options
- Dental Plans – MetLife
- Employee Assistance Program (EAP) – Penn Medicine
- 2025 Open Enrollment Dates & Process

# Open Enrollment

2025

# What is Open Enrollment?

The time of year when you can make changes to your benefits without a qualifying life event. You can:

- Enroll or cancel coverage
- Enroll or drop dependents
- Switch medical plans

All changes will be in effect for one year, from January 1, 2025 to December 31, 2025.

Enrollment changes and elections must be completed by Friday, November 15th.

After open enrollment ends, you are not allowed to make changes during the year without a Qualifying Life Event (such as marriage, divorce, birth of a baby or loss of coverage).

# Medical

Aetna

# Benefit Definitions

## ▶ What is a premium?

A premium (also referred to as a contribution) is your cost that you pay for health insurance, whether you use medical services or not. Premiums are deducted directly from your paycheck and are usually on a pre-tax basis.

## ▶ What is a deductible?

A deductible is the amount you pay out of your pocket before your insurance pays. The deductible runs from January 1<sup>st</sup> to December 31<sup>st</sup> each year. Once you have satisfied that dollar amount, you have met the requirements for the plan year.

## ▶ What does a copay pay for?

Copayments, or copays, are pre-set dollar amount you are expected to pay for office visits or prescription drugs under your insurance plan. Once the copay has been met, the insurance company pays all remaining costs.

## ▶ What does coinsurance mean?

Coinsurance is a set percentage of service costs that you will be expected to pay once you have met your annual deductible. When your annual deductible is met, your insurance provider pays for their portion of the full cost of the service and you pay the coinsurance, or remaining percentage.

## ▶ What counts towards my out-of-pocket maximum

An out-of-pocket maximum is an annual cap on the dollar amount you are expected to pay out of your own pocket for services (including deductibles, copays, and coinsurance) throughout the plan year. Once you meet the out-of-pocket amount, your insurance provider will cover 100% of remaining eligible medical expenses for the remainder of the plan year.

# Medical Plan – Base Plan



	<i>In-Network</i>	<i>Out-of-Network</i>
Deductible (Individual / Family)	\$500 / \$1,000	\$2,000 / \$4,000
Out-of-Pocket Max (Individual / Family)	\$2,000 / \$4,000	\$3,000 / \$6,000
Coinsurance	20%	30%
Preventive Care	Covered in Full	Covered in Full
Office Visit	\$30 copay	30% after deductible
Specialist Visit	\$50 copay	30% after deductible
Behavioral Health Visit	\$30 copay	30% after deductible
Telemedicine – CVS Health	\$0 copay	30% after deductible
Telemedicine – Other Providers	\$30 copay	30% after deductible
Urgent Care	\$75 copay	30% after deductible
Emergency Room Care	\$250 copay	\$250 copay
Outpatient Surgery	20% after deductible	30% after deductible
Inpatient Hospitalization	20% after deductible	30% after deductible
Labs / X-ray / Advanced Imaging	20% after deductible	30% after deductible



# Medical Plan – Enhanced Plan



	<i>In-Network</i>	<i>Out-of-Network</i>
Deductible (Individual / Family)	\$250 / \$500	\$1,000 / \$2,000
Out-of-Pocket Max (Individual / Family)	\$1,000 / \$2,000	\$3,000 / \$6,000
Coinsurance	0%	20%
Preventive Care	Covered in Full	Covered in Full
Office Visit	\$20 copay	20% after deductible
Specialist Visit	\$30 copay	20% after deductible
Behavioral Health Visit	\$20 copay	20% after deductible
Telemedicine – CVS Health	\$0 copay	20% after deductible
Telemedicine – Other Providers	\$20 copay	20% after deductible
Urgent Care	\$50 copay	20% after deductible
Emergency Room Care	\$250 copay	\$250 copay
Outpatient Surgery	0% after deductible	20% after deductible
Inpatient Hospitalization	0% after deductible	20% after deductible
Labs / X-ray / Advanced Imaging	0% after deductible	20% after deductible

# CVS/Caremark Pharmacy managed by RxBenefits



	Base Plan 30 Day Retail	Enhanced Plan 30 Day Retail
Tier 1	\$15 copay	\$10 copay
Tier 2	\$25 copay	\$25 copay
Tier 3	\$40 copay	\$35 copay

	Base Plan 90 Day Mail Order	Enhanced Plan 90 Day Mail Order
Tier 1	\$30 Copay	\$20 copay
Tier 2	\$50 Copay	\$50 copay
Tier 3	\$80 Copay	\$70 copay

\*\*Specialty Medications must be filled at CVS Specialty Pharmacy

30 days prescription - available at any pharmacy

90 days prescription - available at CVS ONLY

# My RxBenefits



By registering for My RxBenefits, you will gain access to information related to your pharmacy benefits that you can access anytime, 24 hours a day, 7 days a week.

Registering will allow you to:

- Access prior authorization status, including explanation of determinations, and view 18 months of previous prior authorization activity
- Receive communications and personalized updates for alternative medication therapies related to anti-inflammatory and dermatological conditions
- View 18 months of pharmacy claims, including claims for eligible dependents
- View, download, or email a digital copy of your ID card
- Manage communication preferences
- And view pharmacy benefit coverage information

Set up your account or log in today  
Visit [RxBenefits.com](https://www.RxBenefits.com)

# Brightline

## Built for kids and teens, here for you

Brightline is the first comprehensive behavioral health solution specifically designed to support kids, teens, and their families across a range of everyday challenges and common conditions. With our range of options for families, we're all here to help your members and their families find care that works for them — so that every family can thrive.

### What's covered for your members:

#### Premium Connect+ membership

- ✓ Content collections, videos, and other resources tailored by age and concern
- ✓ Interactive exercises to continue making progress between sessions
- ✓ Coach chat for guidance through resources and support
- ✓ Group classes on topics like staying on track with school or managing anxiety

#### Brightline Coaching

- ✓ 30-minute video sessions with expert behavioral health coaches
- ✓ Short-duration programs for building positive skills kids & teens can use long-term
- ✓ Focused on specific topics many families experience

#### Brightline Care

- ✓ 50-minute video visits with therapists, speech therapists, psychiatric nurse practitioners, and other clinicians
- ✓ Personalized care plans built on programs proven to move kids & teens forward
- ✓ Clinical measurement and ongoing progress updates for parents & caregivers

Visit [hellowbrightline.com/aetna](https://hellowbrightline.com/aetna)

# CVS Virtual Care



## Access to quality care at your fingertips

- Talk to a U.S. Board Certified Doctor, Therapist or Psychiatrist
- Get an online Dermatology review
- Get expert medical advice by phone, video, web or app
- Cost for Primary Care - \$0
- Cost for Behavioral Health Care - \$0
- **Best Practice Tip – Register for CVS Virtual Care *before* you need to call for a consultation!**

Set up your account or log in today

Visit [CVS.com/virtual-care](https://www.cvs.com/virtual-care)

Download the Mobile App

# Aetna MinuteClinic



- MinuteClinic is available 7 days a week, including evenings
- No appointment is necessary
- View wait times or schedule an appointment on MinuteClinic.com or in the CVS Pharmacy app
- Licensed providers treat more than 125 minor illnesses and injuries
- They provide vaccinations, physicals and screenings
- Help monitor and treat common chronic conditions
- Write prescriptions, when medically necessary
- Share your records with your primary care provider with your permission
- **No cost to participants!**

# 2025 Medical Contributions after Subsidy



Below are the new contributions for the upcoming plan year.

Monthly	Base Plan Monthly Subsidy	Base Plan (after subsidy)	Enhanced Plan Monthly Subsidy	Enhanced Plan (after subsidy)
Employee Only	\$875.00	\$155.81	\$1,030.00	\$258.52
Employee + Spouse	\$1,940.00	\$327.78	\$2,300.00	\$534.74
Employee + Child(ren)	\$1,550.00	\$305.46	\$1,820.00	\$499.34
Employee + Family	\$2,650.00	\$442.43	\$3,220.00	\$645.56

# Dental

MetLife



# Dental - MetLife DPPPO



Covered Procedures	In- and Out-of-Network
Annual Maximum	\$3,500
Deductible	
- Single	\$25
- Family	\$75
Preventive Services	100%
Basic Services	80%
Major Services	50%
Orthodontia Services Adult & Children	50%
Orthodontia Lifetime Maximum	\$1,500

# 2025 Dental Contributions

Below are the new contributions for the upcoming plan year.



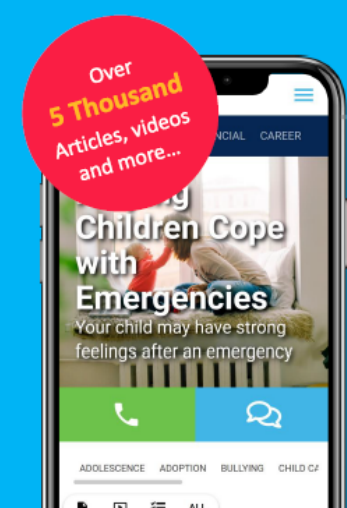
Monthly	Dental DPPO
Employee	\$40.24
Employee + Spouse	\$81.69
Employee + Child(ren)	\$93.73
Employee + Family	\$143.39

# Employee Assistance Program

Penn Medicine

# Employee Assistance Program

We are also offering another EAP option for you through Penn Medicine Princeton Health at no cost to you! Counselors are available for support by phone 24 hours a day, seven days a week at **800-527-0035**.



## MyLifeExpert

Our work/life portal gives members access to thousands of up-to-date, topic-related **articles, videos, podcasts, calculators, interactive checklists, webinars, and more** related to:

- Financial & Legal
- Child Care & Education
- Eldercare
- Health & Wellness
- Career & Military
- Everyday Living and more...

Available in English, Spanish and French



Health & Lifestyle Assessments



50+ Soft Skills Courses



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Nationwide Resources



24/7/365 Support

Members have instant, confidential, 24/7/365 support to get access to the help they need all in the palm of their hand.

Create your account at  
[PennMedicineEAP.MyLifeExpert.com](https://PennMedicineEAP.MyLifeExpert.com)

Scan Here to  
Download:



Help is a one call or click away!  
800 527-0035

Use company code: **PR017**

EMPLOYEE ASSISTANCE PROGRAM - AVAILABLE 24/7 - ALWAYS CONFIDENTIAL

**Penn Medicine Princeton Health**  
Clock Building  
1000 Herrontown Road  
Princeton, NJ 08540

**1.800.527.0035**  
[princetonhcs.org/eap](https://princetonhcs.org/eap)



# Open Enrollment

Dates and Process

# Open Enrollment

- All elections and changes must be completed by Friday, Nov. 15<sup>th</sup>.
- Open Enrollment is the one time of year when you can make changes to your benefits without a qualifying life event. You can:
  - Enroll or cancel coverage
  - Enroll or drop dependents
  - Switch medical plans

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# Enrollment

- If you would like to make any changes for your current IAS plan, please reach out to Cindy Pearce at [cpearce@ias.edu](mailto:cpearce@ias.edu)
- All members who are currently enrolled in the medical benefit plan are required to complete a new enrollment form

# Questions?

- If you have questions on how to make benefit changes, please reach out to:

**Cindy Pearce**

Human Resources

[hr@ias.edu](mailto:hr@ias.edu)

609-951-4436

- If you have questions on the how the benefits work, please reach out to:

**Jillian Quaranto**

Alera Group

[Jillian.Quaranto@aleragroup.com](mailto:Jillian.Quaranto@aleragroup.com)

860-990-6420

Or

**Andrew MacDonald**

Alera Group

[Andrew.MacDonald@aleragroup.com](mailto:Andrew.MacDonald@aleragroup.com)

312-867-7355

