

# Few changes for open enrollment in 2020

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Open enrollment, the time period each year when employees can change their medical plans, is Nov. 5 - 26 at The Boeing Company.

When reviewing the annual open enrollment information from The Boeing Company, keep the following in mind:

- **Routine changes** – This is the only time of the year you can make routine changes

to your health care coverage. If you opt for a different plan, changes take effect Jan. 1, 2020. The good news is any change you make for this year is only locked in for a single year. If you're unhappy with a change you made for 2020, you can make a change for the following year during open enrollment for 2021.

- **Deadline for correcting mistakes** – Even if you don't change your benefits package, you will receive a confirmation letter in the mail. You have a limited amount of time to request a correction. Make sure your home address is correct in Worklife.

## Compare and choose a medical plan

### Advantage+ – 0% premium contribution

- Around half of SPEEA members are currently enrolled in this plan. For 2020, the annual deductibles increase by \$50/\$100 and Health Savings Account (HSA) contribution limits have increased by the same amount. The percentage Boeing contributes to your HSA remains the same.
- Anyone may be covered by the Advantage+ plan. But not everyone is eligible to establish and fund the associated Health Savings Account (HSA). Ensure you understand the rules at [www.healthequity.com/boeing](http://www.healthequity.com/boeing).
- Because the Advantage+ plan uses the exact same network as the Traditional Medical Plan, the plans are very similar after the annual deductible is met. One notable exception is for families – all covered members share a deductible and Out-of-Pocket (OOP) maximum.

### Traditional Medical Plan – 5% premium contribution

- Just over 40% of SPEEA-represented Professional and Technical workers are enrolled in the Traditional Medical Plan (TMP). Most who are eligible for HSA accounts should weigh the TMP against the Advantage+ plan.
- This plan carries a \$300 per person deductible and 10% medical coinsurance. After your deductible is satisfied, the more expensive your service, the more expensive your 10% share becomes until that person reaches their \$2,000 OOP maximum.
- Employees covering themselves on the TMP are required to pay 5% of the cost of

the plan. Premiums went up slightly this year to \$31.78. This equals \$381 a year. Those covering themselves and a spouse or a child (or more than one child) will pay \$763 per year. Anyone covering themselves, plus a spouse and a child (or more than one child) will pay \$1,144 per year.

### Select Network Plan – 12% premium contribution

- Very few active SPEEA members are enrolled in this plan. The Select Network Plan has **no network outside of the United States and provides no out-of-network benefits**. The only non-network claims covered are for emergency room visits.
- When comparing the Select Network medical plan to the Advantage+ and Traditional plans, don't forget the annual premiums required for Select Network. For example, the annual premiums for a family (\$2,903) plus Boeing's portion of family HSA contribution (\$1,400) is more than the entire Advantage+ family deductible (\$2,800) and 10% of the next \$15,000 of in-network medical expenses.
- Because of the high premiums, the lack of non-network coverage and the service area being limited to the United States, the Select Network Plan does not make sense for most active employees.

### Kaiser Permanente – 12% premium contribution

- Kaiser is an HMO with a very limited network. Similar to Select Network, Kaiser has **no out-of-network benefits**. The only non-network claims covered by

### SPEEA Prof and Tech contracts

## Health assessment requirement

Like the past three years, SPEEA members and their covered spouses who do not complete the online health assessment will be assessed a non-compliance fee of \$20 per month per person. This does not apply to dependents.

Boeing encourages participation as a means for individuals to become more aware of their health-risk factors. Addressing them early is a way to potentially lower the health-care costs for the employee and the company. In addition to raising awareness of potential illnesses, the lowered health-care costs directly affect the company's bottom line because the majority of medical plans are self-funded.

The assessment is available through the Step by Step link on Boeing's Worklife. Once you've located the health assessment link, members are redirected to a Vida portal. Members have until the end of open enrollment, Nov. 26, to complete the assessment.

### Biometric screening optional

The SPEEA-Boeing contracts also reference health screenings, but SPEEA members are again not required to submit biometric data this year.

Members can still receive screenings from the onsite nurses, but *no penalty* will apply for noncompliance.

### Privacy

As called out in the collective bargaining agreements, the health-assessment data is collected by a third party. This data is subject to the privacy laws of the Health Insurance Portability and Accountability Act (HIPAA) at all times. Additionally, individual employee assessment results shall not be disclosed to Boeing employees.

## Changes to life insurance and disability

- **Life insurance** – Because of a recent change, Boeing employees are not required to have supplemental life insurance as a prerequisite for their spouses to have supplemental life.
- **Disability** – The Hartford bought Aetna's long-term disability business. The SPEEA contract benefits will not change. This is likely to improve members' experience with this benefit.

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## Frequently asked questions

### Does the change to Paid Time Off (PTO) for non-union apply to SPEEA?

No. SPEEA's medical and benefit plans are negotiated through 2022. This is an example of the predictability and stability brought by working under a collective bargaining agreement.

### How do the deductible, coinsurance and Out-Of-Pocket maximum work together?

Below is an example of a \$25,000 in-network hospitalization. This illustrates how the deductible, coinsurance and OOP maximum work together for an individual on the 2020 Traditional Medical Plan.

Charged	\$25,000
Negotiated Discount	\$10,000
Allowed Amount (#1 - #2)	\$15,000
Deductible	\$300
Remaining Allowable (#3 - #4)	\$14,700
In-Network Coinsurance (#5 x 10%)	\$1,470
Plan Paid Provider (#5 - #6)	\$13,230
Member Paid Provider (#4 + #6)	\$1,770

In this example, the member's \$300 deductible is satisfied and has also satisfied \$1,770 of his/her in-network \$2,000 OOP maximum.

### How much do I pay out of my paycheck for health care?

The Advantage+ medical plan is free from premium contributions. If you enroll in the Traditional Medical Plan, employees will contribute 5% of the cost. For those employees whose coverage is with another plan, they will contribute 12% of the cost of the plan the employee chooses. The paycheck contributions are taken pre-tax from the first two paychecks of the month. For example, the 5% for the Traditional Medical Plan is \$31.78 if you are covering yourself, \$63.56 per month if you are covering yourself and a spouse or yourself and child(ren), or \$95.34 per month if you are covering your entire family.

### What is the Supplemental Savings Plan (SSP)?

The SSP plan allows eligible individuals to defer their salary income-tax free after they have reached the 2020 "Annual Additions" limit of \$57,000. The "Annual Additions" limit includes all employee, employer matching and employer non-matching 401k savings. Boeing sends a notice to you. If eligible, enroll between Nov. 5-26. Last year, 20% of eligible SPEEA-represented Boeing employees enrolled in the SSP plan.

Look for a video coming soon to the retirement page at [www.speea.org](http://www.speea.org) (drop-down menu: Medical/Retirement).



## Compare and choose a medical plan

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Kaiser are for emergency room visits.

### Flexible Spending Account (FSA)

Once you choose a medical and dental plan for 2020, estimate the amount of out-of-pocket expenses you had this year and consider enrolling in the FSA. Your entire election is generally available the first day of the year, and if you leave mid-year, you do not have to repay the amount you spent in excess of the sum of your elections.

**Up to \$500 of your unused FSA can roll over**, so making at least a \$500 election in the FSA could be a good idea, depending on your circumstances.

If you sign up for the Advantage+ plan and are eligible to make an HSA contribution, it may be beneficial to contribute the maximum to your HSA before considering putting money in the FSA.

Additionally, if you are enrolled in the Advantage+ plan, the HSA and FSA work differently. Before satisfying your annual Advantage+ deductible, the FSA cannot be used for anything the plan covers.

### Dental Plans

The SPEEA/Boeing Professional and Technical contracts provide three dental plan options for represented employees in the Puget Sound region. All three are free from premium contributions.

- **Dental Delta of Washington (DDWA) Preferred Dental** - This is recommended for most SPEEA-represented employees. For the highest benefit, plan to use an in-network Delta Dental of Washington (DDWA) PPO dentist. Nationwide in-network coverage is available, using the National Delta Dental PPO networks.

Next year brings an increased annual benefit to \$2,500 for non-orthodontia care, which also makes this plan the obvious choice. **Note:** PPO Network and Premier Network dentists are **prohibited** from billing you the difference between the charged and the maximum allowable rate, known as "balance billing."

- **DDWA Scheduled Dental Plan** - The Boeing Scheduled Dental Plan is administered by DDWA. There is still no network of providers, and covered employees can use any licensed dentist in the United States, but the reimbursable fee schedule has not changed for approximately 20 years.
- **DDWA Prepaid Dental** - The Prepaid Dental Plan is an HMO. This is a 'buyer-beware' plan, because SPEEA receives more complaints on this plan than the other two plans combined.

## SPEEA-Boeing open enrollment webinar online

For an overview of changes and tips on how to choose the best medical and dental plan during open enrollment, see the webinar on the medical page at [www.speea.org](http://www.speea.org) (drop-down menu: Medical/Retirement).

The webinar features the presentation given by SPEEA staff at workplace lunchtime meetings.

## In-network plan comparison

EE = Employee Only, ES = Employee & Spouse, EC = Employee and Child(ren), ESC = Employee, Spouse & Child(ren)

Contributions - Standard Network Option	Advantage+	Traditional Medical Plan	Select Network Plan
Premium contribution	0%	5%	12%
Annual premiums EE	\$0.00	\$31.78	\$80.63
Annual premiums ES or EC	\$0.00	\$63.56	\$161.26
Annual premiums ESC	\$0.00	\$95.34	\$241.89
Boeing EE HSA contribution*	\$700	n/a	n/a
Boeing ES, EC or ESC HSA contribution*	\$1,400	n/a	n/a
Plan Provisions - Standard Network Option	Advantage+	Traditional Medical Plan	Select Network Plan
Annual deductible	\$1,400 EE; \$2,800 ES, EC or ESC	\$300 per individual, no more than \$900 per family	n/a
Out-Of-Pocket (OOP) maximum	\$2,800 EE \$5,600 ES, EC, or ESC	\$2,000 per person, no more than \$4,500 per family, medical only	\$6,850 per individual, \$13,700 per family, medical & Rx
Preventative care (USPSTF A & B)	No cost	No cost	No cost
Primary care	10% after deductible	10% after deductible	\$20 co-pay
Specialty care	10% after deductible	10% after deductible	\$25 co-pay
Emergency Room	10% after deductible	10% after deductible	\$75 co-pay
Hospital bills	10% after deductible	10% after deductible	\$250 if admitted
Tests	10% after deductible	10% after deductible	\$0
Rx retail generic (G)	10% after deductible**	10% before ded (\$5 - \$25)	\$5
Rx retail brand name (B)	20% after deductible	20% before ded (\$15 - \$75)	\$25
Rx retail non-formulary brand (NFB)	30% after deductible	30% before ded (\$30 - no max)	\$40
Rx Mail order (G / B / NFB)	Same as retail	\$10 / \$40 / \$70	\$10 / \$40 / \$70
Pharmacy OOP max	Combined with medical	\$4,000 per individual, no more than \$8,000 per family, Rx only	Combined with medical

\*Boeing HSA contributions are made lump sum in the first paycheck of the year  
 \*\*Certain preventative drugs are not subject to annual deductible

## Health Savings Accounts may be a good way to reduce costs for those who are eligible

A Health Savings Account (HSA) is a tax-exempt account you set up with an HSA custodian to reimburse yourself for certain medical expenses you incur. HSAs are individually owned (similar to an IRA), portable if you change employers and are 100% vested at all times.

HSAs are commonly referred to as a “triple-tax-advantaged” method to pay for health-care expenses. Contributions are pre-tax, the funds can grow income-tax deferred, and if funds are spent on eligible medical expenses, they are completely income-tax free.

### Restrictions apply

Not everyone is eligible to establish and contribute to an HSA. There are many restrictions. Some are listed below.

- An individual must be covered by a HSA-qualified High Deductible Health Plan (HDHP). Boeing’s Advantage+ is a qualified HDHP.
- You may not have other health coverage except what is permitted (such as dental

and vision). If you are “double covered” by your spouse’s non-HDHP medical plan, you are not eligible to contribute to an HSA.

- If you are enrolled in Medicare, or if you can be claimed as a dependent on someone else’s tax return, then you are not eligible to contribute to an HSA.

HSA funds may be used for eligible medical expenses for you or any of your IRS tax dependents, even if they are not covered by the HDHP. The IRS determines which medical expenses qualify, but they include all the items subject to the HDHP medical plan deductible, as well as dental and vision expenses. In addition to eligible medical expenses, HSA funds may also be used to pay for Medicare Part B premiums income-tax free.

### Learn more

Individuals interested in HSAs should read IRS Publication 969 and the material available on [www.healthequity.com/boeing](http://www.healthequity.com/boeing).

### Preferred Partnership

## Plan reduces premiums

The Preferred Partnership network option is a way for members to potentially reduce the out-of-pocket expenses.

The option is available for the Advantage+, Traditional Medical and Select Network plans. If selected, your entire network of providers is replaced with the University of Washington Accountable Care Organization (UW ACO). Find out which providers are covered in the UW ACO online at [www.speeahealthpartnership.com](http://www.speeahealthpartnership.com).

The limited network is one of the only downsides with the Preferred Partnership network option. While the Advantage+ plan and Traditional Medical Plan cover non-network benefits, they are much costlier than if you stick to providers who are in-network. The Select Network has no out-of-network benefits.

### Enhancements

A single enrollee in the Preferred Partnership network option with Select or Traditional receives a \$30 monthly reduction in health-care premiums. The reduction is \$60 a month for enrollees covering themselves and a spouse or child(ren). If you are covering yourself, spouse and child(ren), the monthly health-care premium is reduced by \$90. Additionally, for those enrolled in the Advantage+ plan, Boeing will increase the HSA contributions to \$1,120 for an individual or \$2,240 for the family plan (i.e. 80% of the deductible).

In addition to saving on monthly premiums, this network option should provide an enhanced health-care experience with more enhanced care coordination for complex issues or multiple diagnoses. Additionally, when the option is combined with the Traditional Medical Plan or Select Network, primary care and generic drugs are free. On the Advantage+ plan, primary care and generic drugs are free after the annual deductible is satisfied.

### Limits outside of Puget Sound

The Preferred Partnership network option is best suited for people living within the UW ACO service area. People living outside the UW ACO service area, and those living inside the service area but who have dependent children living outside the Puget Sound, will likely want to avoid this option because of the very limited number of service providers available outside the Puget Sound area. However, for people who currently see UW providers and/or live inside the UW ACO service area and are willing to see only providers in the Preferred Partnership list, this option can reduce monthly premiums while potentially enhancing your health care experience.