

Benefit Highlights Guide

2015



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OHSU knows how important it is to have good, affordable health and welfare benefits. That's why we offer competitive benefits that can provide protection, peace of mind and savings. From health care to income protection and other benefits, we've got you covered.

Use this overview of your benefit choices and how to enroll to help you select the coverage that is right for you and your family.

Enrollment

When can I enroll?

New employees

As a new employee, you have 60 days from your date of hire to enroll in benefits. Your benefits will go into effect on the 1st of the month following the date you make your benefit elections. If you do not make elections during those 60 days, you will be enrolled by default for employee-only coverage in OHSU PPO medical, Moda Health dental and VSP core vision. Default coverage will remain in effect until the end of the plan year, unless you experience a qualifying life event such as a marriage or a birth. (In that case, you can elect benefits relevant to the qualifying life event.) Our benefit plan year runs from Jan. 1 through Dec. 31.

Open Enrollment

As a benefits-eligible employee, you have an opportunity once each year to enroll in or make changes to your benefit plans during the Open Enrollment period. Open Enrollment is typically held in the fall. **Open Enrollment for your 2015 benefits is Oct. 27 through Nov. 21, 2014, with elections effective Jan. 1, 2015.**

Note: If you make no changes during Open Enrollment, your current benefit elections will remain in place through 2015—with the exception of flexible spending accounts. **FSA elections do not carry over from year to year.** If you want an FSA, you must actively enroll in one during Open Enrollment.

How do I enroll?

All benefit enrollments are completed online at <http://benefits.ohsu.edu>. Use your OHSU user name and password to log on to the system.

Before logging on, have a list of your benefit choices and changes, as well as the names, Social Security numbers, birthdates and addresses of those you wish to designate as beneficiaries or enroll as dependents. If you are enrolling new dependents on your medical plan, you will be required to provide documents verifying them as your dependent (e.g., marriage license, birth certificate).

Eligible dependents

Who can I cover?

You can enroll yourself in the benefits listed in this guide if you are a 0.5 FTE or greater and are working in a benefits-eligible position. For more detailed information on employee and dependent eligibility, visit the Benefits website at <https://o2.ohsu.edu/benefits>.

If you participate in OHSU benefits, you may also enroll:

- Your spouse (opposite or same sex) or domestic partner (opposite or same sex; registered or unregistered).
- Your child(ren) (including child(ren) of a domestic partner or spouse) up to age 26. This applies regardless of the child's marital or student status.
- Your child(ren) of any age who is incapable of supporting himself or herself due to a mental or physical disability and who is totally dependent on you.
- Your child(ren) by adoption or court-ordered judgment who otherwise meets these dependent eligibility requirements.

Please contact the OHSU Benefits team for additional information.

Dependent verification

When adding a new dependent to your benefits, you will be required to provide documents verifying your relationship to the dependent (e.g., marriage license, birth certificate). You'll be provided a list of the specific document(s) required once you enroll your dependent.

What if things change?

The benefits you choose will be effective through the end of the calendar year. You cannot make changes to your coverage during the year, unless you have a qualifying life event, including:

- Marriage, establishment of a domestic partnership, legal separation, divorce or termination of a domestic partnership.
- Birth, legal adoption of a child or placement of a child with you for legal adoption.
- Death of your spouse/domestic partner or dependent child.
- Change in residence (only if your current coverage isn't available in the new location or if you are offered an option that you were not previously offered).

To make a change due to a qualifying life event, you must complete your enrollment change online within 31 days of the event, in most cases. You have 60 days if you, your spouse/domestic partner or eligible dependent child loses coverage under Medicaid or a state Children's Health Insurance Program (CHIP) or becomes eligible for state-provided premium assistance.

Only certain changes to benefits are allowed during a qualifying life event. OHSU Benefits will review your request and determine whether the change you are requesting is allowed. For a complete description of allowable benefit changes, go to <https://o2.ohsu.edu/benefits>

You will be required to provide verification of your qualifying life event upon making enrollment changes.

