University of Virginia Health Plan
Basic Health Wage option

Basic Health Wage is a high-deductible “consumer-driven” health plan. Basic Health Wage has two parts: medical coverage with low premiums but a high deductible; and a Health Savings Account (HSA) to help pay for eligible medical expenses. Health and non-tobacco rewards that you earn will be deposited in your HSA. The balance rolls forward at the end of the year to the next year and grows so you have the money when you really need it.

There are some restrictions on those who can enroll in an HSA. If you do not meet the eligibility requirements, you will not be able to open an HSA and receive rewards. Employees who meet the following requirements may participate in an HSA: 1) be enrolled in the Basic Health Wage option, 2) have no other first-dollar medical coverage (cannot be covered on another health policy that does not have a high deductible of at least $1250 for single coverage or $2500 for family coverage), 3) not claimed as a dependant on another person’s tax return, 4) not enrolled in Medicare or Medicaid or have received veteran’s services in the past three months, 5) not already made maximum contributions to an HSA, 6) self or spouse is not enrolled in a Full Flexible Spending Account (FSA) while enrolled in Basic Health Wage, and 7) neither you nor your spouse have a balance available in a Full FSA from a prior year’s enrollment. See “Basic Health and its HSA” brochure for more information.

**Health Reward:** You are eligible annually to perform wellness-related tasks that will result in $40 monthly health rewards. These rewards will be deposited in your HSA beginning the following January. Look for information in the fall detailing the requirements for earning health rewards.

**Non-Tobacco Reward:** You can earn non-tobacco rewards of $10 per month. Sign the Tobacco-free Affidavit during your initial enrollment and open enrollment and certify that you and your covered adult dependents haven't used tobacco in the past 12 months to earn the reward. The reward will be deposited in your HSA. If you think you might be unable to meet a standard for a reward under this wellness program, you or your physician may contact us at 434.924.3068 or hooswell@virginia.edu about a reasonable alternative standard to qualify for the same reward.

**Basic Health Wage Prescription Drug Program:** Pharmacy benefits for those enrolled in Basic Health Wage are administered by Aetna Pharmacy Management (APM). APM maintains its own formulary, specialty drug list, prior authorization list, quantity limits, and pharmacy management programs. Aetna Pharmacy Management is available Monday – Friday 9am-7pm (EST) at 888.792.3862. An on-call pharmacist is available 24 hrs/day, 7 days/wk, 365 days/yr. Open enrollment materials include the most current Aetna formulary and prior authorization lists.

**HealthyRx Program:** The HealthyRx Program is available for Basic Health Wage participants at the current reduced cost sharing for tier 1 and tier 2 drugs used to treat nine specific conditions when the member fully participates in Aetna’s Disease Management (DM) program for one of the following conditions: Asthma, COPD, Diabetes, High Cholesterol, Hypertension, CAD, Stroke, Peripheral Artery Disease, and Heart Failure. The 30-day retail cost sharing will be $0 for tier 1 and $15 for tier 2. The mail order cost sharing will be $0 for tier 1 and $30 for tier 2. See “HealthyRx Aetna” for additional information including how the program works, how to enroll in the program, and the HealthyRx drug list for Basic Health Wage enrollees.
**Specialty drug pharmacies:** Specialty drugs for Basic Health Wage enrollees must be filled through UVA Specialty Pharmacy or Aetna Specialty Pharmacy. Contact UVA Specialty Pharmacy at 800.251.3627 or 434.924.3627. Contact Aetna Specialty Pharmacy at 866.782.2779. Aetna Pharmacy Management should be contacted at 855.240.0535 for prior authorization when it is required for specialty medications. See “UVA Specialty Pharmacy” and “Aetna Specialty CareRx Drug List” for additional information.

**Dependent Coverage:** Coverage is available for you and your eligible dependents. These include:

- your spouse recognized as legally married in Virginia who has no access to affordable health care coverage of minimum value through his/her employer.
- your spouse recognized as legally married in Virginia who is employed at the UVa Academic Division or Medical Center in a health-benefit eligible position.
- your dependent children through the end of the year in which they turn age 26:
  - your children by birth or adoption
  - children placed with you for adoption
  - children for whom you are the legal parent through a surrogate contract
  - stepchildren; and
  - foster children.
- your unmarried, dependent children for whom you are the legal guardian with permanent custody through the end of the year in which they turn age 26 if custody was awarded prior to the child’s 18th birthday, the child lives at home and is declared as a dependent on your income tax return, unless either of the child’s biological parents also reside with you (except when the biological parent(s) is (are) a minor who share(s) custody with you).
- your unmarried, dependent child of any age who lives at home, is declared as a dependent on your income tax return and is permanently and totally handicapped, provided that the handicap began before the child reached the Plan’s age limit for coverage and the child has maintained continuous coverage under an employer-sponsored plan of the employee or the other natural/adoptive parent.

Documentation verifying dependent eligibility for any dependents (spouse or child(ren)) you wish to cover on your plan must be submitted with your enrollment request in order for it to be approved.

**Working Spousal Provision:** Working spouses who have access to affordable coverage that provides minimum value through their own employer are not eligible for coverage under the UVa Health Plan. Spouses who do NOT have coverage elsewhere can enroll on the plan. You must complete a Spousal Affidavit when you enroll in order to cover your spouse on your plan. Spouses who are employed in a health benefits-eligible position by the UVa Academic Division or Medical Center may enroll on your plan. However, you will need to complete the Spousal Affidavit for him or her.

**Premiums:** Employee premiums for Basic Health Wage in 2015 are below. These rates do not reflect any wellness rewards.

<table>
<thead>
<tr>
<th></th>
<th>Employee Premium</th>
<th>Employer Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single</td>
<td>$141.50/month</td>
<td>$221.50/month</td>
</tr>
<tr>
<td>Employee + Child(ren)</td>
<td>$450.50/month</td>
<td>$221.50/month</td>
</tr>
<tr>
<td>Employee + Spouse</td>
<td>$458.50/month</td>
<td>$221.50/month</td>
</tr>
<tr>
<td>Family</td>
<td>$807.50/month</td>
<td>$221.50/month</td>
</tr>
</tbody>
</table>
Premiums will be deducted from your biweekly paycheck. On the occasion that your check does not have sufficient funds to cover your premium, you will need to pay the balance owed by check or money order within 30 days of the missed or insufficient premium deduction. Additional premium deductions from a future paycheck within this 30-day grace period will also satisfy the premium requirement. Coverage will be terminated if the balance owed is not paid within the 30-day grace period with no opportunity for re-enrollment during this twelve-month stability period.

**How Should Enrollment Be Made?**
- Enrollment must be made online by Medical Center employees using Employee Self Service.
- Enrollment must be made online by Academic Division employees using Benefits@.

**What Is The Deadline for submitting enrollment materials online or via paper?**
- Enrollment online must be completed by midnight on the last day of your wage administrative period.

**What Is The Effective Date of Enrollment?**
- The first day of the month following the last day of your wage administrative period.

**What must I do during my initial enrollment?**
- If you wish to cover your spouse, you must sign the spousal affidavit, certifying that your spouse does not have access to affordable coverage that provides minimum value through their own employer.
- If you wish to cover a spouse or dependents, you must make sure they are eligible. Dependent eligibility documentation must be submitted with your enrollment request. Employees with ineligible dependents improperly enrolled on their policy will be responsible for the costs of incurred claims, and may be suspended from the health plan for up to 3 years. Ineligible dependents include:
  - the employee’s spouse who is not recognized as a legal spouse in Virginia;
  - the employee’s spouse who has access to affordable coverage that provides minimum value through their own employer;
  - the employee’s ex-spouse;
  - the employee’s natural children, legally adopted children, step-children, children for whom you are the legal parent through a surrogate contract, or foster children if they have reached their 26th birthday prior to the end of the current calendar year;
  - “other” children for whom the employee is the legal guardian and was awarded permanent custody prior to the child’s 18th birthday who are married, do not reside full-time with the employee in a regular parent-child relationship, or are not declared as a dependent on the employee’s income tax return;
  - the employee’s dependent children who submitted a request for extended coverage beyond their 26th birthday and were approved due to a permanent and total handicap who are married, do not reside full-time with the employee, or are not declared as a dependent on the employee’s income tax return; and
  - other relatives.
- Sign the tobacco-free affidavit to earn monthly rewards.