2021 Open Enrollment FAQs

1. Do I need to enroll?

Yes, you **must** enroll through AIM **by Friday, October 30th** if you wish to do any of the following:

- Make pre-tax contributions to any Flexible Spending or Health Savings Accounts in 2021
- b. *NEW* Decline the default Associate Basic Life insurance coverage of 2-1/2 times eligible earnings, up to \$500,000, and elect instead the \$50,000 flat dollar coverage amount (the Company pays the entire cost for either option)
- c. Change plans, coverage tiers (i.e. Associate, Associate & Spouse, etc.) or decline coverage
- d. Enroll in or change supplemental life insurance for you or your eligible dependents
- e. Add or remove dependents in any of the plans in which you're enrolled

Go to HR Now or JM Family's benefits website for guidance on navigating Open Enrollment in AIM.

2. I plan to add dependents and/or change my life insurance beneficiaries for 2021. What information will I need when I'm enrolling through AIM?

You will need the complete names, dates of birth and Social Security numbers for all eligible dependents and beneficiaries who you want to add to your plans. (*Please note beneficiary designations under the <u>retirement benefit</u> plans are registered <u>separately</u> in <u>401k.com</u>)*

3. During Open Enrollment, can I add my adult dependent child to my plans if he/she still lives at home?

You may enroll <u>benefits-eligible dependents</u> to the plan who are 25 and younger. Dependents already removed from the plan during the year because they attained age 26 cannot be added back during Open Enrollment.

4. Will I be issued new plan membership ID cards for 2021?

Because Cigna will replace Optum* as the pharmacy plan's service provider starting in 2021, you and your covered dependents will be mailed a new Cigna medical card if you enroll in the HRA or HSA for 2021. The newly issued card will indicate you're eligible for *both* medical <u>and</u> pharmacy benefits. You and your covered dependents will receive new Cigna *dental* ID cards before January 1, 2021 <u>only if</u> you change dental plans for 2021. A vision care card will be issued by Superior Vision only if you are newly enrolled or make a change to your coverage tier (i.e. Associate only, Associate & Spouse, etc.) under that plan.

*Please refer to the Pharmacy Benefits FAQ in HR Now (<u>click here</u>) for further information on the transition of the pharmacy benefits from Optum to Cigna.

5. I am considering enrolling in the HSA medical plan. What are the eligibility requirements to make pre-tax contributions into a health savings account?

Any benefits-eligible associate can enroll in the HSA medical plan. However, to make pre-tax contributions to the account, you cannot be covered by any other medical plan that is **not** a qualified high-deductible health plan (HDHP). This includes Medicaid, Medicare Parts A and B, TriCare or any group health plan. Please note the 2021 maximum is \$3,600 for single coverage and \$7,200 for family coverage. Your pre-tax contributions <u>and</u> those made by JM Family are included in that maximum.

6. I am currently enrolled in the HRA medical plan and want to switch to the HSA plan in 2021. What will happen to my remaining HRA balance?

Your account balance will remain with Cigna until March 31, 2021, to ensure all pending claims from 2020 are paid. Then on April 1, 2021, any balance you may still have will be transferred to a new Limited Purpose HRA account (LPHRA). The LPHRA will be administered by PayFlex and can only be used to pay dental and vision expenses. Any funds remaining in your LPHRA after December 31, 2021 will be permanently forfeited.

Please note 2020 will be the final year for which any HRA balance remaining at year-end will transfer over to a Limited Purpose HRA in the following year. Starting with the 2021 plan year, if you're an HRA participant who switches to an HSA in the next year, you'll forfeit any HRA balance remaining at year-end.

7. I am currently enrolled in the HSA medical plan and want to switch to the HRA plan in 2021. What will happen to my remaining HSA balance?

You are the owner of your HSA and any balance in the account. You can continue to use the balance in your HSA account to pay any medical, pharmacy, dental or vision expenses. However, because you will **no** longer be enrolled in the HSA medical plan, the HSA account administrator, HSABank, will deduct a monthly account maintenance fee from your account.

8. I'd like to start saving now for health care costs in the future. Which plan will allow me to accrue the largest balance?

Both the HRA and HSA will allow contributions to accrue from one year to the next. The HSA does *not* limit the amount you may accrue in the account. In addition, all contributions earn interest and can be invested to assist with growing your HSA account balance for the future. The HRA *does* limit your account balance to the amount of your out-of- pocket maximum for the HRA medical plan. Any amount in your HRA account exceeding this limit is forfeited on December 31 of the plan year.

9. Is there a maximum contribution for the Flexible Spending Accounts?

Yes, the maximum contribution per household is \$5,000 for the Dependent Care Flexible Spending Account (DCFSA) and \$2,750 for both the Healthcare and Limited Purpose Flexible Spending Accounts. **Note:** Under federal regulations, if you meet the definition of a Highly Compensated Employee (HCE) and are making pre-tax contributions to the DCFSA, you may see a reduction to your elected annual contribution after Open Enrollment closes.

10. What expenses can I get reimbursed through my Dependent Care Flexible Spending Account?

You may only use the account to get reimbursed for the cost of daycare for your dependent child younger than 13 and/or nursing care for your spouse or any other qualified dependent who is physically or mentally unable to care for him/herself. If you do not have dependents who meet this definition, you cannot enroll in this benefit.

11. Is it beneficial for me to enroll in Long-term Disability "buy-up" option?

The maximum paid benefit paid by the LTD plan is \$10,000 per month. This amount includes both the company-paid core LTD benefit and the buy-up benefit. If your annual eligible earnings exceed \$200,000, you may not benefit from purchasing the buy-up. However, you may want to maintain the buy-up coverage in case your eligible earnings drop below this amount in the future. Please refer to the Company's *Benefits Handbook* for more information on how this benefit is determined.

12. Will I need to re-enroll in my voluntary benefits?

Re-enrolling is not necessary for plans in which you're currently enrolled. However, if you wish to enroll in one of the Accident or Critical Illness policies, you **must** do so by logging into <u>imfamily.com/voluntarybenefits_during_Open_Enrollment_from_October_19th to October_30th</u>, 2020.

13. If I don't have access to a work computer or laptop, can I enroll in benefits using my personal computer or mobile device?

To ensure you successfully complete and submit your benefit elections, it is strongly recommended you enroll through AIM on a desktop computer or laptop. Enter "AIM.jmfamily.com" in your computer's browser and sign in to AIM using your JM Family network user ID email, *NetworkID@jmfamily.com*, and password. If you attempt to enroll using a mobile device such as a smartphone or a tablet, you may experience difficulty. Please first clear the cookies and cache from the mobile device's browser (Safari, Google Chrome).