

ICUBA MEMBERSHIP

"Better Benefits Through Collaboration"

April 1, 2022 - March 31, 2023



Dear Prospective Member,

ICUBA is proud to celebrate our 20th year as a non-profit, self-funded employee health insurance plan created by educators for educators. We are comprised of 25 member educational institutions and more than 15,800 participants enrolled in an ICUBA sponsored Health and Wellbeing Plan. Membership is open to any Florida based, not-for-profit, private educational institution participating in Florida Council of Independent Schools (FCIS) or Independent Colleges and Universities of Florida (ICUF).

It is FREE to join ICUBA with an initial three-year membership term required. ICUBA's mission is to provide high quality, cost-effective Health and Wellbeing benefits to our members through collaboration. We offer a multitude of services including administrative assistance, customer service for your employees, health, welfare, and voluntary benefits, all with low premium increases. We welcome you to explore what ICUBA has to offer your institution in our executive summary.

Thank you,

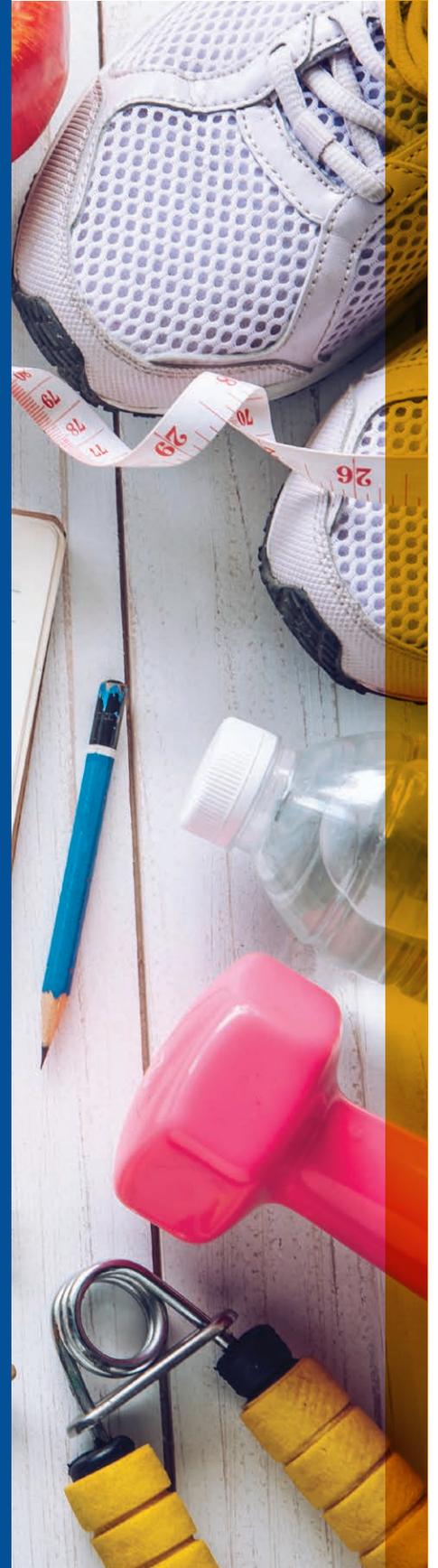
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EXECUTIVE SUMMARY

CREATED BY EDUCATORS FOR EDUCATORS

Joining ICUBA makes you a member of a non-profit employee health insurance cooperative of fellow employers in the education industry. ICUBA meets with our member institutions regularly through the Human Resources Advisory Committee and Board of Directors to ensure needs are met and exceptional service and benefits are provided to our beneficiaries. Each member institution has a voice and influences the plans we develop, benefits offered, and has a direct impact on the services offered to your employees.

BENEFITS OF SCALE

As a member of ICUBA, together we are much larger than an individual school's purchasing power alone. The value received from 25 member institutions and more than 15,800+ people enrolled in an ICUBA sponsored Health and Wellbeing Plan brings large bargaining power to the marketplace and helps keep costs low. On average, 93 cents of every premium dollar is spent directly on employee benefits. Through ICUBA, members also gain access to large scale broker services including big data, actuarial support, compliance, and communications.

LOW PREMIUM INCREASES

ICUBA medical plan premium increases are below national averages, and among the lowest in the education industry. We attribute our success for low premium increases to our focus on total wellbeing by informing our members how to best utilize our plans. Our goal each year is to keep premium increases below 6%. By joining a large health insurance pool like ICUBA, employer members significantly reduce the annual volatility that claims have on employee health care cost each year.

LARGE EMPLOYER CUSTOMER SERVICE

ICUBA provides our members with concierge customer service and support at various levels. Your Human Resources team will have direct access to the ICUBA Management team and our Brand Partner representatives for sensitive and urgent issues or questions. Employees will also gain access to specialized customer service representatives through BlueCross BlueShield's CareConnected customer service unit, Optum's Healthcare Advisors, ICUBAcares advocates and the ICUBA Benefits Administration team.

SUPERIOR COMPLIANCE SUPPORT

Full support is provided for health and welfare related compliance responsibilities including Affordable Care Act (ACA) assistance and related filings, COBRA administration, Plan Documents, Wrap Documents, Summary of Benefit Coverage (SBC), Annual Notices, 5500 filings, discrimination testing, Summary Annual Reports, W-2 reporting and more.

EASY ACCESS TO CARE FOR YOUR EMPLOYEES

Your employees will receive many free benefits including Embold Health Preferred Providers, Primary Care visits to BlueCross BlueShield Total Care Providers, low cost access to telehealth and convenient care clinics, a host of services not subject to the deductible including but not limited to prescription drugs, physical and occupational therapy and specialist office visits. We believe having only major services applied to the deductible creates easy access to care, free from financial burden for basic services. Our benefits administration site, [ICUBAbenefits.org](https://www.icubabenefits.org), also provides easy access to all ICUBA brand partner portals through convenient single sign-on access to insurance carrier websites.

EXCEPTIONAL INNOVATIVE BENEFITS

ICUBA is proud to bring innovation to our medical plan members through industry leading programs like Embold Health, SurgeryPlus, Hinge Health, Rally, ICUBAcares Pharmacist Advocate Program, Teladoc, AbleTo, and Talkspace. We spend a great deal of time vetting and researching new opportunities to improve our population health through programs that “meet the member where they are.” These programs enhance the lives of the ICUBA population and inevitably lower premium increases by helping members manage risk.

CREATE A CULTURE OF WELLBEING

ICUBA and our Brand Partners are fully prepared to support your on-campus wellbeing efforts through health fairs, benefits days, and onsite campus events. ICUBA provides quarterly incentives for your institution (up to \$24 PEPY) to support your wellbeing initiatives; and annual ICUBA incentives through Rally to members and spouses enrolled in the medical plan. We also meet regularly to gain ideas through collaboration and have resources available for your on-campus wellbeing committee. (A low administration fee of \$2.50 PEPY contributes to ICUBA’s wellbeing initiatives and member incentives.)

EMPLOYEE ASSISTANCE PROGRAM

Employees, dependents and all household members will gain access to a robust Employee Assistance Program. ICUBA’s EAP includes six free counseling sessions per issue per plan year for which we are proud to report above average utilization. ICUBA members benefit from 24/7 access to emotional wellbeing support, daily life assistance, a discount center, legal & financial services and much more.

COMPETITIVE VOLUNTARY BENEFITS

ICUBA offers competitive dental, vision, life, disability, family medical leave administration (FMLA), critical illness, hospital indemnity, accident, long term care, legal, and pet insurance benefits to our member institutions. You have the freedom to choose what voluntary benefits meet the needs of your institution from our offering portfolio. ICUBA strives for multi-year rate guarantees for all voluntary benefits.

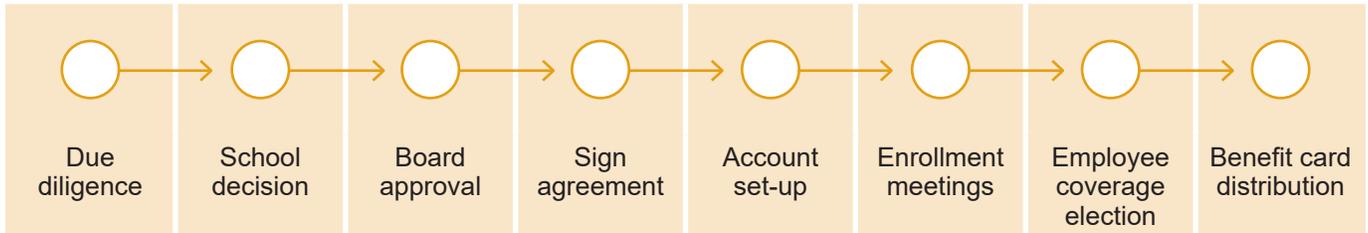
BECOMING AN ICUBA MEMBER INSTITUTION

In order for an employer to become a member of ICUBA, the employer must meet the due diligence criteria and be approved by the Board of Directors. Upon Board approval, you will sign a three (3) year membership agreement, giving ICUBA the right to assess monies beyond premiums collected. (This is highly unlikely given the large ICUBA cash reserves.) After three (3) years of membership, a six (6) month notice is required in order to terminate membership. Once you are a member, you will experience all the great perks of “better benefits through collaboration!”

During implementation, ICUBA will...

- Provide overall project management of implementation.
- Coordinate and orchestrate transition with all vendors.
- Ensure that the data feeds and card distributions are timely.
- Perform benefits presentations to employees.
- Deliver exceptional support during implementation including individual enrollment support for your employees.

Timeline of events when becoming a Member Institution





MEDICAL PLAN OPTIONS

The Preferred PPO Plan is the only required plan offering as a member of ICUBA. This is ICUBA’s “Preferred” Plan. This plan is a 20% co-insurance based plan with low copays for various items. Only major services apply to the deductible. Bundled with these premiums, members receive OptumRx prescription benefits and Aetna Behavioral Health; as well as full access to ICUBA’s innovative benefits as outlined in the executive summary.

Preferred PPO Plan

	Preferred PPO	
	In-Network	Out-of-Network
	Employee Pays	
Deductible (Individual/Family)	\$2,500/\$5,000	\$4,000/\$10,750
Coinsurance	20%	40%
Out-of-Pocket Maximum (Individual/Family) Includes all medical copays, deductibles & coinsurance	\$4,000/\$8,000	\$7,500/\$15,000
HRA is funded by your Institution	An HRA account is funded through your Institution to help you pay for qualified expenses such as your deductible, copays, co-insurance and/or prescriptions. The Institution funds a predetermined, monthly dollar limit. After 36-months of continuous coverage in an ICUBA medical plan, employees are vested in the funds.	
Total Care (BDTC) (Family Practice, Internal Medicine, Pediatrics)	\$0	Not applicable
Embold	\$0	N/A
Physician Office Visits	\$15 copay	40% after deductible
Specialist Office Visits	\$35 copay	40% after deductible
Convenient Care Clinics	\$10 copay	N/A
Independent Clinical Labs* (free standing facilities & office visits)	0%*	40% after deductible
Preventive Care	0%	Not covered
Teladoc Visit	\$5 copay	Not covered
Urgent Care Center	\$30 copay	
Emergency Room Services	0% after \$300 copay (waived if admitted)	
Ambulance	\$250 copay	
Hospital Inpatient	20% after deductible	40% after deductible
Surgery Plus	\$0	N/A

*Quest Diagnostic Labs is the In-Network Lab for BlueCross BlueShield of Florida.



MEDICAL PLAN OPTIONS

The \$4,000/\$8,000 Deductible PPO Plan was created with healthy children and families in mind. Our members asked for an alternative plan offering which could provide premium cost savings to growing families of the younger generation. This plan is a 30% co-insurance based plan with low copays for various items. Only major services apply to the deductible. Bundled with these premiums, members receive OptumRx prescription benefits and Aetna Behavioral Health; as well as full access to ICUBA's innovative benefits as outlined in the executive summary.

High Deductible PPO Plan

	High Deductible PPO Plan	
	In-Network	Out-of-Network
	Employee Pays	
Deductible (Individual/Family)	\$4,000/\$8,000	\$8,000/\$16,000
Coinsurance	30%	50%
Out-of-Pocket Maximum (Individual/Family) Includes all medical copays, deductibles & coinsurance	\$5,350/\$10,700	\$10,700/\$21,400
HRA is funded by your Institution	An HRA account is funded through your Institution to help you pay for qualified expenses such as your deductible, copays, co-insurance and/or prescriptions. The Institution funds a predetermined, monthly dollar limit. After 36-months of continuous coverage in an ICUBA medical plan, employees are vested in the funds.	
Total Care (BDTC) (Family Practice, Internal Medicine, Pediatrics)	\$0	Not applicable
Embold	\$0	N/A
Physician Office Visits	\$15 copay	50% after deductible
Specialist Office Visits	\$50 copay	50% after deductible
Convenient Care Clinics	\$10 copay	N/A
Independent Clinical Labs* (free standing facilities & office visits)	0%*	50% after deductible
Preventive Care	0%	Not covered
Teladoc Visit	\$5 copay	Not covered
Urgent Care Center	\$30 copay	
Emergency Room Services	0% after \$300 copay (waived if admitted)	
Ambulance	\$250 copay	
Hospital Inpatient	30% after deductible	50% after deductible
Surgery Plus	\$0	N/A

*Quest Diagnostic Labs is the In-Network Lab for BlueCross BlueShield of Florida.

MEDICAL MONTHLY PREMIUMS

Preferred PPO Plan

	Monthly Premium
Employee	\$703
Employee + Spouse	\$1,498
Employee + Child(ren)	\$1,267
Employee + Family	\$1,973

High Deductible PPO Plan

	Monthly Premium
Employee	\$697
Employee + Spouse	\$1,486
Employee + Child(ren)	\$1,008
Employee + Family	\$1,688

HRA Contribution, *optional*

An HRA account is funded by your Institution to help members pay for qualified expenses such as deductible, copays, co-insurance and/or prescriptions. The Institution funds a predetermined, monthly dollar amount. After 36 months of continuous coverage in an ICUBA Medical plan, employees are vested in the funds.



BEHAVIORAL HEALTH

Aetna's Resources for Living services for Mental Health, Substance Abuse Benefits and Applied Behavioral Analysis (ABA) are provided by Aetna Behavioral Health.

These services are available to all members who are enrolled in the BCBS Medical Plan.

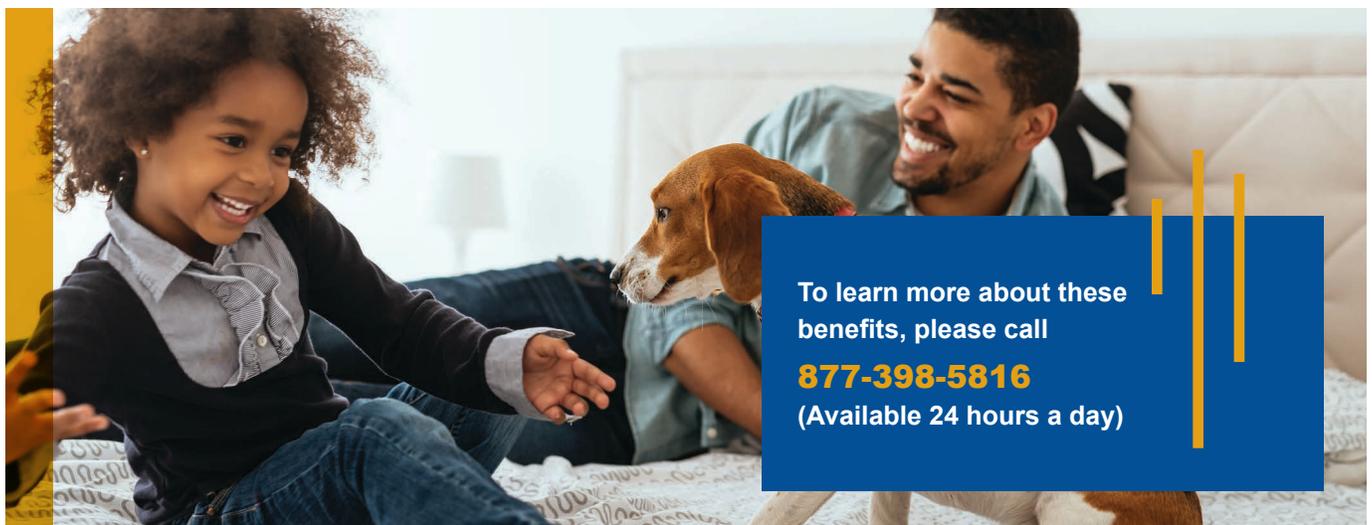
	Preferred PPO Plan	High Deductible PPO Plan
	In-Network ¹	In-Network ¹
	Employee Pays	
Deductible and Out-of-Pocket Maximums	Deductibles and Out of Pocket Maximum Amounts are COMBINED with your BCBS Medical Plan Benefits.	
Employee Assistance Program (EAP)² Up to 6 short-term professional counseling sessions per episode per year. Talk with a licensed clinician regarding stress, relationship issues, grief, etc.	\$0	\$0
Inpatient²		
Mental Health Hospital Admission²	20% after deductible	30% after deductible
Substance Abuse Hospital Admission²	20% after deductible	30% after deductible
Residential² Focus on evaluating to learn effective ways to cope with the symptoms and impact of the illness.	20% after deductible	30% after deductible
Inpatient Detoxification² 24-hour treatment in a residential or hospital setting for patients who are abusing alcohol or other addictive drugs.	20% after deductible	30% after deductible
Outpatient		
Professional Counseling Sessions Talk with a licensed clinician regarding anxiety, ADHD, depression, mood disorders, trauma, etc.	\$15 copay	\$15 copay
Psychiatric Medication Evaluation	\$15 copay	\$15 copay
Applied Behavioral Analysis Therapy² Behavioral health services related to Autism Spectrum Disorder (ASD) diagnosis.	\$15 copay	\$15 copay



	Preferred PPO Plan	High Deductible PPO Plan
	In-Network ¹	In-Network ¹
Employee Pays		
Partial Hospitalization (PHP)² Physician and nursing services, group, individual, family or multi-family group and other services.	\$15 copay	\$15 copay
Outpatient Detoxification Monitor withdrawal from alcohol or another substance of abuse.	\$15 copay	\$15 copay
Intensive Outpatient Sessions (IOP) Planned and structured programs may include group, individual, family and other services.	\$15 copay	\$15 copay
AbleTo Meet with a therapist and coach via web-based videoconferencing or by phone for an 8-week program for select conditions including cancer recovery, heart problems, diabetes, depression, pain management, caregiver status, grief/loss and more.	\$0	\$0

1. Out-of-network services are covered at a reduced benefit. The Preferred PPO Plan will cover all services at 40% after the deductible is satisfied; the High Deductible PPO Plan will cover all services at 50% after the deductible is satisfied. The EAP Plan and AbleTo benefits are not available out-of-network.

2. Services require prior-authorization.





CARE MANAGEMENT FOR ICUBA EMPLOYEES

About Care Management

This free program connects you with a care manager who knows about your situation and health concerns. Care managers are registered nurses, so they have insight and knowledge about a range of medical conditions. If you have questions about your condition and the treatments you are receiving, they can help you get answers. Also, as you deal with an illness or injury, you might need special equipment, transportation to medical appointments, or groceries from a local food bank.

Is Care Management for You?

Care management can be especially helpful for members who experience:

- An illness such as end-stage renal disease (ESRD that requires intensive, costly dialysis treatment or a kidney transplant).
- Frequent hospitalization.
- Long-term or life-threatening illness.
- Extensive home health care.
- Effects of traumatic injury.

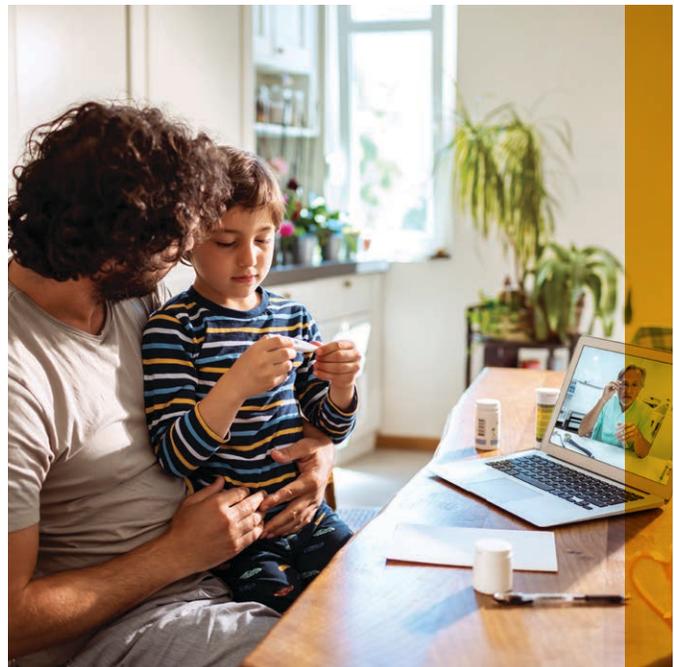
An Advocate Who's on Your Side

When a person is dealing with serious illness or injury, it can be stressful for the whole family. You might be uncertain about which health goals are realistic for you now, or how to make the most of your health insurance benefits. Care managers have experience connecting patients with the resources and information they need.

Do you think you might benefit from care management services?

You don't have to go through these challenging times alone.

Call a care manager at
855-263-0675, ext 40471





EMBOLD PREFERRED PROVIDERS

Taking the guesswork out of finding top-quality doctors. Embold is a program offered by your employer that identifies top-performing providers in your area.

What's Different about Embold Doctors?

Doctors recognized as Embold Preferred Providers have been thoroughly evaluated based on appropriateness of care, effectiveness and cost.

Who Should Use an Embold Preferred Provider?

Anyone can choose an Embold Preferred Provider. Embold providers are available for Primary Care, Pediatrics, Cardiology, Endocrinology, Joint Care (Orthopedic), Gastroenterology, Obstetrics, Pulmonology, and Spine Care (Orthopedic/Neurosurgical).

How Does Using an Embold Preferred Provider Benefit You?

- If you visit an Embold Preferred Provider, your copayment is waived.
- Seeing an Embold Preferred Provider can save you money and ensure that you receive top quality care, experience better health outcomes and potentially avoid unnecessary treatments or procedures.

To Find Embold Preferred Providers

- Log in to **My Health Toolkit** and select the **Resources** tab.
- Choose **Find a Doctor or Hospital**. Enter your location and the specialty type and then select **Search**.
- Select **Embold Preferred Provider**.

Or call the number on the back of your membership card to talk to a customer service advocate.

I See a Provider Recognized Under the Total Care Program. Is Anything Changing?

Good news! You can continue to see your current provider for family care, pediatric care, or internal medicine and take advantage of the waived copayment. Embold offers access to primary care, as well as specialists in the following fields: Cardiology, Endocrinology, Gastroenterology, Obstetrics, Pulmonology, Ortho-Joint and spine health.



PRESCRIPTION PLAN

Tier	Prescription-Fill Copays		
	Retail	90-day at Retail Program	Mail
	Up to a 30-day supply	Up to a 90-day supply	Up to a 90-day supply
Preferred generics at the Nova Southeastern University (NSU) pharmacy	\$0	\$0	N/A
Chronic Conditions	\$0	\$0	\$0
Preferred generics at other network pharmacies	\$5	\$10	\$10
Non-Preferred generics	\$10	\$20	\$20
Preferred brands: brand-name medications on the Preferred Medication List (PML)	\$40	\$80	\$80
Non-Preferred brands: brand-name medications not on the Preferred Medication List	\$75	\$150	\$150
Preferred specialty at Optum Specialty Pharmacy	\$75*	N/A	N/A
Non-Preferred specialty at Optum Specialty Pharmacy	\$75	N/A	N/A

*Preferred Specialty medications are eligible for copay card usage.

The Optum prescription plan is included with your election in an ICUBA Medical Plan.

Pharmacy Out-of-Pocket Maximum

In-Network Rx copays will be applied toward an individual maximum out-of-pocket of \$2,000/single and \$4,000/family. Once you reach your out-of-pocket maximum, your prescriptions will be paid for at 100% by the plan and no cost to you (\$0 copay). If you have a question about your pharmacy benefit, call the OptumRx Customer Care Center, 24 hours a day, 7 days a week. The toll-free number is 855-811-2213 and can be found on the back of your Optum ID card.

Free Over the Counter Items and Diabetic Supplies

With a prescription from your provider you can receive FREE prescribed diabetic supplies including meters, lancing devices, lancets, test strips, control solution, needles, and syringes. Other items include prescribed aspirin for adults, prescribed generic folic acid, and generic prenatal vitamins for pregnancy. Simply take the prescription to the pharmacy counter and your local pharmacist can assist you.

Tobacco Cessation Benefit

Tobacco cessation medications are covered—up to two cycles each year— \$0 copay when you participate in coaching or counseling options through local Area Health Education Centers, BCBS telephonic coaching or Resources for Living counseling.

FREE Preventive Drugs for Chronic Conditions!

The OptumRx pharmacy benefit plan includes special coverage for generic preventive medications. These medications help protect against or manage a medical condition including:

- Preventing blood clots and reducing the risk of a stroke.
- Preventing heart disease and reducing high blood pressure.
- Preventing osteoporosis.

These generic drugs found on OptumRx's preventative drug list are a \$0 copay to our members!



The ICUBAcares team can review your prescriptions and answer questions.

Call for a free prescription check-up at **877-286-3967**.

ICUBACARES PHARMACIST ADVOCATE PROGRAM

Real Pharmacists. Real Advocates. Real Solutions.

Our ICUBAcares Pharmacist Advocates will make outbound phone calls to members identified for specific services and assistance. Our members can also call our Pharmacist Advocates directly and speak to a real pharmacist if a question arises.

ICUBAcares Rally Incentive

If you are a candidate for a qualified medication change, the ICUBAcares team will assist you with your transition to a medication less costly to the plan and reward once complete. Call for a prescription check-up to find out more!

Our ICUBAcares Pharmacist Team is ready to:

- Serve as a liaison between your doctor, the pharmacy and the insurance company — taking the burden off of you!
- Answer questions on a medication you are taking or considering — providing useful information on side effects and drug interactions.
- Discuss preferred and non-preferred tier options to save you money.
- Provide assistance for a prior authorization from your provider.



TELADOC

Teladoc gives you 24/7/365 access to US board-certified doctors through the convenience of phone or video consults. It's an affordable alternative to costly urgent care and ER visits when you need care now! With your consent, Teladoc can provide information about your Teladoc consult to your primary care physician.

The Teladoc benefit is included with your election in an ICUBA Medical Plan.



TALK TO
A DOCTOR
ANYTIME!
\$5
COPAY

When can I use Teladoc?

- Teladoc does not replace your primary care physician. It is a convenient and affordable option for quality care.
- When you need care now.
- If you're considering the ER or urgent care for a non-emergency issue.
- On vacation, on a business trip, or away from home.
- For short-term prescription refills.

Get the care you need

Teladoc doctors can treat many medical conditions, including:

- Cold & Flu symptoms.
- Allergies.
- Bronchitis.
- Urinary tract infection.
- Respiratory Infection.
- Sinus Problems.
- And more!

Doctor Requirements

Teladoc is simply a new way to access qualified doctors.

All Teladoc doctors:

- Are practicing PCPs, pediatricians, and family medicine physicians.
- Average 15 years experience.
- Are US board certified and licensed in your state.
- Are credentialed every three years, meeting NCQA standards.

Members must establish an account at teladoc.com prior to seeking treatment. For first time registration with Teladoc there is a single sign-on feature through BCBS MyHealthToolkit or dependents may visit teladoc.com directly. If you need further assistance, call **800-Teladoc**, and a customer representative can walk you through the account setup.



SURGERYPLUS

SurgeryPlus is a comprehensive benefit at NO ADDITIONAL COST that provides access to a premiere narrow network of high-performing surgeons for non-emergent, planned surgical procedures. **The SurgeryPlus benefit is included with your election in an ICUBA Medical Plan.**

No Enrollment Necessary

If you are covered under ICUBA’s medical plan, you have been automatically enrolled in this extra benefit at no additional cost. If you are planning a procedure, call SurgeryPlus at 855-200-2119 and you could save thousands of dollars.

Save Money

If you choose to use the SurgeryPlus benefit, ICUBA will waive your deductible and coinsurance, eliminating all out-of-pocket costs, including consultation, your surgical procedure and post-procedure appointments for up to 90 days. Please keep in mind, pre-operative labs and testing will be done at your PCP or Quest and will be submitted to your current medical plan through BCBS. Additionally, follow-up care such as physical therapy, durable medical equipment and lab work will still be covered by the BCBS medical plan and necessary prescription drugs will be covered under OptumRx.



To learn more about SurgeryPlus, call **855-200-2119**

The same dedicated care advocate manages the entire pathway of care for you.



Surgeon Selection

SurgeryPlus will recommend at least three of the best fitting surgeons for your individualized needs.



Scheduling

SurgeryPlus will book appointments, transfer medical records and manage logistics.



Advocacy

SurgeryPlus will listen and anticipate your surgery related needs.



Follow-up

SurgeryPlus will work to ensure your complete satisfaction.



HINGE HEALTH

ICUBA is excited to announce we are continuing to partner with Hinge Health to help you with back, knee, hip, neck or shoulder pain.

While SurgeryPlus can assist when surgery is the appropriate form of treatment, Hinge Health is a non-surgical treatment option for musculoskeletal conditions. **These services are available to all members who are 18 years or older and enrolled in the BCBS Medical Plan.**

Available at no cost, you and your family members will have all the tools you need to manage your pain. Participants report an average pain reduction of 60% and it only takes 45 minutes per week!

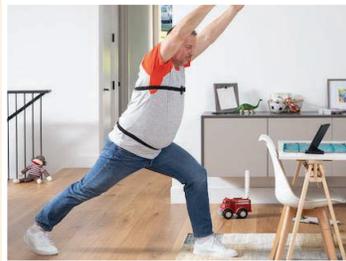
Once enrolled, you will receive the Hinge Health Welcome Kit, which includes a tablet computer and wearable motion sensors that guide you through exercise therapy. You'll also be paired with your personal health coach who will tailor your sessions to you, your schedule, and your pace.

Chronic Care Program



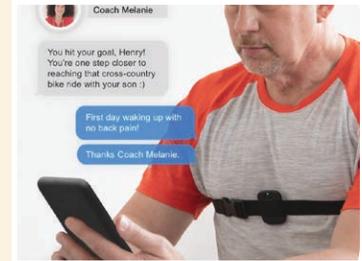
Clinical Team

Unlimited 1-on-1 virtual PT and coaching



Sensor-based Exercise Therapy

Care plan designed by PT



Behavioral Health

Patient education, CBT & goal-setting



FREE Benefit for your Back and Joint Health

We provide all the tools you need to get moving again from the comfort of your home. You'll get exercise therapy tailored to your condition and a personal care team of experts. Best of all, it's free — 100% covered by ICUBA for you and eligible family members.

Sign up today for help with any of the following:

- Conquer pain or limited movement.
- Recover from a recent or past injury.
- Prepare for and recover from surgery.
- Keep joints healthy and pain free.

Advanced Healthcare Technology Powers MSK Care

Combining sensors, computer vision, and wearable pain relief to pioneer a new standard in digital MSK care

MOVEMENT TRACKING



Wearable Sensors

Motion sensors for guided PT



NEW! Computer Vision

Motion tracking for full body assessments



PAIN MANAGEMENT

NEW! Hinge Health Enso

Wearable device for pain relief



For questions, call Hinge Health at **855-902-2777** or send an email to hello@hingehealth.com.
Apply at hingehealth.com/icuba.



WELLBEING PROGRAM

ICUBA spends a great deal of focus on improving our population health. One large area of focus is the Rally Wellbeing program. Through our partnership with BlueCross BlueShield, employees gain access to Rally Health.

Through Rally, ICUBA helps members...

- Reduce the complexity of wellbeing by breaking down the barriers to meaningful action and bringing benefits to life.
- Take control of their own health by encouraging small steps which lead to healthy habits — through easy activities like Missions, Challenges, and more.
- Provide self-directed online learning to intensive interventions and Rally Coach™ programs help individuals take ownership of their health and lower their risk of chronic disease.

We encourage our member institutions to engage in ICUBA’s vision of providing better access to care so members engage in ICUBA benefits which lead to improved population health and wellbeing outcomes. This is achieved through collaboration from you, our other member institutions, our brand partners and ICUBA Management.

As the ICUBA medical plan participants work towards goals, they will earn Rally coins and ICUBA dollars that can be redeemed through the Rally Marketplace. Coins can be used for a variety of discounts and ICUBA dollars can be used for electronic gift cards.



ICUBA'S Wellbeing Program Mission Statement

To create a culture that supports overall employee wellbeing to empower employees, to become aware of daily activities and overall health status, and to support members in actively taking steps to maintain or improve their health and wellbeing. Creating and maintaining this culture will lead to a happier, healthier workforce and a positive return for the member organizations overall.



Activity to Complete	Incentives
Complete health survey	Gatekeeper plus 400 Coins & ICUBA Private Sweepstakes
Missions	ICUBA Private Sweepstakes & Unlimited Coins
Rally Virtual City Challenges	\$5 per quarter – achieve a challenge milestone (\$20 per year)
Onsite Campus Event	\$10 Gift Card (10 events, \$100 maximum)
Biometric Screening (Physician Results Form)	\$100 Gift Card
Annual Wellness Exam	\$50 Gift Card
Preventive Screening: Colorectal exam, Mammogram or PSA	\$50 Gift Card (first claim processed)
ICUBAcares Pharmacist Advocate Program	\$50 Gift Card
Teladoc Registration	400 Coins
Tobacco Attestation	400 Coins
Flu Shot Attestation	400 Coins
Covid 19 Vaccine Attestation	400 Coins
Eye Exam Attestation	400 Coins
Dental Exam Attestation	400 Coins
Clinical Rewards	500 Coins per quarter (2,000 Coins per year)
My Health Novel: Assessment or Milestone	\$10 Gift Card (completion of MHN survey and/or activation/engagement in program)
Incentive Total	\$380 (and unlimited Coins)

As you work toward your goals, you will earn Rally coins and ICUBA dollars that can be redeemed through the Rally Marketplace. Coins can be used for a variety of discounts and ICUBA dollars can be used for electronic gift cards.

How do I get credit for completing my biometrics in Rally?

It's easy to complete your biometric screenings with your regular blood work through your annual wellness exam with a PCP. It's easy! The *Physician Fax Results Form* allows ICUBA Medical Plan members and covered spouses to earn credit for biometrics in Rally by completing it as a part of your annual wellness visit. Screenings will include total cholesterol, HDL/LDL, triglycerides, blood sugar, blood pressure, and A1c.

- Employees and spouses enrolled in the ICUBA Medical Plan can visit your individual portal at **[My.QuestForHealth.com](https://myquestforhealth.com)** and download the *Physician Results Form*.
- If you have never registered before, please use:
 - Registration Key: **ICUBA**
 - Unique ID: **Your BCBS ICI#**
- The *Physician Results Form* contains a bar code specific to the employee or spouse and cannot be shared – it is unique to you!
- Pro Tip: If you have an established relationship with your physician, request your blood work ahead of your annual wellness exam to save time and check this off your list with one visit.
- When you visit your PCP, remember to take the form with you to your annual physical. It is important both you and your doctor sign the Quest Physician Results Form; then your doctor's office can fax it to the number found on the form.
- You are encouraged to request a copy for your records, and if necessary, upload/fax the form to your Quest portal.
- Members should allow at least 30 days after the form is uploaded/faxed to see credit in Rally.
- Remember, the final deadline for submission to Quest is no later than March 31, 2023.

Need help registering, downloading/uploading forms, etc.? Please contact Quest Customer Service at **855-623-9355**.



SPENDING ACCOUNTS

ICUBA Benefits Card

ICUBA administers a benefits card which supports your choice of Health Reimbursement Arrangement (HRA), Healthcare Flexible Spending (HCFSA) and/or Dependent Care Flexible Spending (DCFSA) accounts. These additional funds help offset incurred healthcare costs for the employee, while providing security for unforeseen expenses. HRA funds are contributed from the employer, while FSA funds are set aside pre-tax from the employee. *(An additional \$4.50 PEPM administration fee will apply.)*

Understanding Your Spending Accounts

FYI...
Your HRA is paired with your ICUBA medical plan

HCFSA Healthcare Flexible Spending Account	DCFSA Dependent Care Flexible Spending Account	HRA Healthcare Reimbursement Account
Funded by benefit eligible employees Note: A medical insurance election is not required to enroll in flex spending.		Funded and contributed by your employer; provided when you enroll in an ICUBA Medical Plan
Deducted pre-tax throughout the year	Deducted pre-tax throughout the year	No deductions; funded by employer
Available for immediate use April 1, 2022	Deposited each pay period	Available at the end of each month and earns interest quarterly
Can be used for healthcare expenses for you and eligible dependents	Can be used for the care of dependents under the age of 13	Can be used for eligible healthcare expenses for participants enrolled in an ICUBA medical plan
If enrolled in an ICUBA medical plan: HCFSA funds are used before HRA	Covered expenses include: day care, after care, gap camps	If you elect an HCFSA the Flex funds are used before the HRA funds
IRS annual individual limit: \$2,850	IRS calendar year household limit: \$5,000	Funds rollover every year; after 36 continuous months of enrollment in an ICUBA medical plan with HRA, you are considered vested and the funds are yours to keep
Use-it-or-lose-it, no annual carry over. Please plan wisely.		

Reminder: Keep your receipts so that you can substantiate your charges.



SPENDING ACCOUNTS

Understanding Your Spending Accounts

	FSA Healthcare Flexible Spending Account	HRA Healthcare Reimbursement Account
Funding Contribution	Funded by employee pre-tax dollars. The maximum amount you can contribute to the Healthcare Spending Account is \$2,850. The maximum amount you can contribute to the Dependent Care Spending Account is \$5,000. Flexible spending amounts are subject to discrimination testing. Highly compensated employees may be asked to adjust flexible spending dollars based on results.	Funded by your employer.
Tax Benefits for Employees	Employee contributions are exempt from federal and FICA tax as well as most state and local tax. Reimbursements are tax-free.	Reimbursements are tax-free.
Rollover of Funds	Have to spend funds by June 15 and claim by June 30 of the following plan year (Use-it-or-lose-it).	Funds roll over at the end of each plan year indefinitely.
Medical Plan Enrollment	Enrollment in medical plan not required.	Must be enrolled in ICUBA medical plan to be eligible.
Dependent Eligibility	All qualified dependents are eligible, even if not enrolled in medical plan.	Only if covered on medical plan.
Availability of Funds	Annual election amount available the 1st business day of the plan year for Healthcare Flex Spending Account; the amount available for the Dependent Care Spending Account is the balance of the account as it accumulates through payroll deduction throughout the year.	Can withdraw up to what has been deposited.
Portability	Available for remainder of plan year through COBRA.	Can continue after 36 months of continuous participation in an ICUBA medical plan.

FSA/HRA eligible items can be located on the Ameriflex website at myameriflex.crunch.help/participants/eligible-expenses.

Remember: Each time you use your Health Reimbursement Account (HRA) or Flexible Spending Account (FSA) debit card, you should keep your receipts. Each request for reimbursement must be substantiated before it can be reimbursed.





DENTAL BENEFIT OPTIONS

Dental coverage is offered through Delta Dental. You can select from the Base PPO, Buy-Up PPO, or the DeltaCare DHMO plan options. If you select one of the PPO Plans, you can visit any licensed dentist to receive treatment under your plan, but you'll maximize your savings by visiting a dentist in one of Delta's nationwide networks.

Both PPO plans offer two dental networks:

- **Delta Dental PPO** dentists generally offer the lowest contracted rates and greatest cost savings.
- **Delta Dental Premier** dentists are your next best option, with contracted rates that help you save.

For additional information on the Delta Dental plans call **800-521-2651** or visit deltadentalins.com.

If you enroll in the DeltaCare DHMO plan you will select a primary care dentist from the DeltaCare USA network, who will then coordinate any needed referrals to a specialist. Covered services provided by your DeltaCare USA dentist have preset copayments (dollar amounts), which are listed in your plan booklet.

	Base PPO			Buy-Up PPO			DeltaCare DHMO
	In-Network	Premier-Network	Out-of-Network	In-Network	Premier-Network	Out-of-Network	Patient Pays Assigned Network Provider
Plan Year Maximum	\$1,500	\$1,500	\$1,500	\$2,000	\$2,000	\$2,000	Unlimited
Ortho Lifetime Maximum	\$1,500	\$1,500	\$1,500	\$2,000	\$2,000	\$2,000	No Maximum; member pays pre-set copay
Providers	In- and Out-of-network providers			In- and Out-of-network providers			Network providers/ Assignment Providers
Employee Pays							
Deductible - Individual	\$75	\$100	\$100	\$50	\$50	\$50	Not applicable
Deductible - Family	Not applicable; individual deductible applies to all covered members			\$150	\$150	\$150	Not applicable
Preventive Services	0%	50%	50%	0%	20%	20%	You pay a pre-set copay
Basic Services	20% after ded	70% after ded	70% after ded	20% after ded	50% after ded	50% after ded	You pay a pre-set copay
Major Services	70% after ded	80% after ded	80% after ded	50% after ded	70% after ded	70% after ded	You pay a pre-set copay
Orthodontia	Child Only			Adult and/or Child			Adult and/or Child
Benefit Percentage	50%	50%	50%	50%	50%	50%	You pay a pre-set copay

Please refer to your summary plan description for full plan benefits. Services are based on maximum contract allowance.

Monthly Dental Contributions

	Base PPO	Buy-Up PPO	DeltaCare DHMO
Employee	\$23.80	\$41.69	\$11.83
Employee + 1	\$55.32	\$83.04	\$23.73
Employee + Family	\$91.59	\$139.65	\$36.85



VISION BENEFIT OPTIONS

ICUBA offers two voluntary vision plans through EyeMed. The Base Vision Plan allows you and your covered family members one routine exam every 12 months, plus lenses once every 12 months, and new frames every 24 months. The second option is the Buy-up Vision option that works the same as the basic plan but allows for new frames every 12 months and has an increased frame allowance of \$160.

To view the entire provider network, please visit the EyeMed website at eyemed.com or contact the Vision Service Center at 866-800-5457. Please review the complete summary of benefits for full coverage details.

	Base Plan		Buy-Up Plan	
	In-Network	Out-of-Network Reimbursement	In-Network	Out-of-Network Reimbursement
Exam Once every 12 months	\$5 copay	Up to \$35	\$5 copay	Up to \$35
Frames Base Plan Once every 24 months Buy up Plan Once every 12 months	\$0 copay; \$130 allowance; 20% off balance over \$130	Up to \$65	\$0 copay; \$160 allowance; 20% off balance over \$160	Up to \$80
Single Vision Lenses (in lieu of Contacts) Once every 12 months	\$15 copay	Up to \$20	\$15 copay	Up to \$20
Contacts (in lieu of Lenses) Once every 12 months	\$0 copay; \$100 allowance; plus balance over \$100	Up to \$80	\$0 copay; \$130 allowance; plus balance over \$130	Up to \$104

ContactsDirect: Save \$20 off your contacts (and free shipping) beyond your regular contact lens benefit! Just create an account at contactsdirect.com and an extra \$20 will be deducted at checkout.

Monthly Vision Contributions

	Base Plan	Buy-Up Plan
Employee	\$4.74	\$7.38
Employee + Family	\$12.15	\$18.87

Download the EyeMed Members App

EyeMed gives you access to your benefit information on-the-go. Check your benefit details for eye exams, eyeglass frames, contacts, and lenses directly from your phone.





INCOME PROTECTION

The following Income Protection options are available to new groups with 500 or less employees without additional underwriting requirements.



Basic Life – Option 1

Group Life Insurance in the amount of \$50,000 is provided at no cost to all active, benefits-eligible employees. Reduction of life insurance benefit levels will occur when you are 65 or older.

Basic Life – Option 2

Group Life Insurance in the amount of one times your annual earnings to a maximum of \$150,000 is provided at no cost to all active, benefits-eligible employees. Reduction of life insurance benefit levels will occur when you are 65 or older.

Basic Life – Option 3

Group Life Insurance in the amount of two times your annual earnings to a maximum of \$250,000 is provided at no cost to all active, benefits-eligible employees. Reduction of life insurance benefit levels will occur when you are 65 or older.

Basic Life AD&D

Group Basic Life Accidental Death & Dismemberment insurance is available to pair with the Basic Life options provided.

Voluntary Employee Life

Employees are provided the opportunity to purchase additional life insurance for themselves and their dependents. An employee may elect increments of \$10,000 to a maximum of \$500,000 or 5x annual salary, whichever is less. Evidence of Insurability will be required for elections in excess of \$150,000. Reduction of life insurance benefit levels will occur when you are 65 or older.

Evidence of Insurability (EOI) requirements are as follows:

- Guarantee Issue (GI) Amount: \$150,000
- If you are newly eligible for this benefit (ie: new hire), you may elect up to the Guarantee Issue Amount. If above the GI, EOI will be required.
- Late Entrants will require an EOI for first time elections of any amount.

Voluntary Employee AD&D

Employees have the opportunity to purchase Accidental Death & Dismemberment insurance. An employee may elect increments of \$10,000 to a maximum of \$500,000 or 5 x annual salaries whichever is less.



Voluntary Spouse Life

In order to purchase life insurance for your spouse and/or child, you must purchase Voluntary Life coverage for yourself. The spouse value can be purchased up to 50% of employee amount in increments of \$5,000, not to exceed \$250,000. Evidence of Insurability will be required for elections over the Guarantee Issue amount of \$50,000 and must be approved by the insurance carrier.

- If you are newly eligible for this benefit (ie: new hire), you may elect up to the Guarantee Issue Amount. If above the GI, EOI will be required.
- Late Entrants will require an EOI for first time elections of any amount.
- Age reductions are applied at ages 65 and over.
- A dependent can only be either an Insured or a Dependent under the same policy, not both. (Employees who are also spouses are not eligible for dependent life and both parents cannot cover dependent children.)

Voluntary Spouse AD&D

Employees have the opportunity to purchase Accidental Death & Dismemberment insurance for their spouse. An employee may elect increments of \$5,000 to a maximum of \$250,000.

Voluntary Child Life

- In order to purchase life insurance for your child, you must purchase Voluntary Life coverage for yourself.
- Child life insurance can be purchased in the flat amount of \$10,000.
- Employees with spouses also employed by an ICUBA institution cannot both cover dependent children. A dependent is only eligible for coverage one time by the insurance carrier policy.

Voluntary Child AD&D

Employees have the opportunity to purchase Accidental Death & Dismemberment insurance for their dependents in the amount of \$10,000.

Short Term Disability – Option 1

- The STD benefit is 67% of weekly covered earnings, to a maximum benefit duration of \$1,000 per week.
- The elimination period of this coverage is 7 consecutive days for injury or sickness.
- The maximum benefit duration is 26 weeks.

Short Term Disability – Option 2

- The STD benefit is 60% of weekly covered earnings, to a maximum benefit duration of \$1,000 per week.
- The elimination period of this coverage is 14 consecutive days for injury or sickness.
- The maximum benefit duration is 26 weeks.

Long Term Disability – Option 1

This Long-Term Disability benefit is equal to 60% of monthly covered pay and has a monthly maximum benefit of \$6,000 per month after a 180 day elimination period.

Long Term Disability – Option 2

This Long-Term Disability benefit is equal to 60% of monthly covered pay and has a monthly maximum benefit of \$8,000 per month after a 180 day elimination period.



BENEFITS FOR THE UNEXPECTED

The ICUBA BlueCross BlueShield medical plans provide great coverage for you and your family’s general healthcare needs. Still, everyone’s needs are slightly different. That’s where the Aflac Voluntary Accident, Critical Illness and Hospital Indemnity options come in! These benefits are designed to protect your family’s finances in case of an unforeseen injury or illness.

Accident Insurance

The Voluntary Accident Plan is designed to help cover the expenses associated with an accidental injury such as a medical plan deductible. The Voluntary Accident plan pays direct cash benefits for emergency treatment, hospitalizations, specific injury treatments, diagnostic exams and accidental death.

Accident Benefit Highlights

Plan Features	
Emergency Room	\$175
Accident follow-up with physician	\$50 per treatment, 6 per accident
X-ray	\$50
Dislocation and fractures	Up to \$6,000
Hospital Admission	\$1,000 per confinement, once per accident within 6 months after accident
Ground ambulance / Air	\$400 / \$1,200
Concussion	\$500 per accident, once per accident within 6 months after accident
Physical Therapy	\$50 per treatment, 10 per accident
Wellness / Health Screening Benefit (Employee and Spouse Only)*	\$50

Critical Illness Insurance

The Voluntary Critical Illness coverage is designed to pay cash in the event you or a covered family member is diagnosed with a critical illness such as cancer, heart attack, stroke, kidney failure, benign brain tumor, loss of hearing or sight due to a severe medical condition or Alzheimer’s. The Critical Illness plan helps protect your income and personal assets when out of pocket expenses increase as a result of a specified critical illness.

Critical Illness Benefit Highlights

- \$10,000 – \$30,000 benefit (based on selected plan) for employees on a guaranteed issue basis.
- The ability to collect 100% of enrolled benefit amount for different diagnosed illnesses and recurrence of the same condition.
- Pays a lump sum benefit tax free regardless of any other insurance you may have.
- Employee, spouse and children up to the age of 26 are eligible for this plan.*
- Wellness / Health \$50 Screening Benefit (Employee and Spouse only) which includes one of the qualifying routine tests performed each year including: COVID-19 screening, annual physical exam, ultrasound, colonoscopy, mammogram, Pap Smear, and more.

* Children are automatically covered at 50%.

* Qualifying routine tests include one of the tests performed each year: COVID-19 screening, annual physical exam, ultrasound, colonoscopy, mammogram, Pap Smear, and more.

Coverage is available for you, your spouse and or child(ren). Your coverage is portable which means you can take the policy with you if you leave the institution.



Hospital Indemnity Insurance

An unexpected or even planned stay in the hospital can be expensive as you meet your deductible and out-of-pocket obligations under the medical plan. The Hospital Indemnity plan is designed to provide financial protection by paying you a direct benefit to meet out-of-pocket expenses and extra bills that can occur. Lump sum benefits are paid directly to you based on the type of facility and number of days of confinement.

Benefit Highlights

- Guarantee issue (no medical questions).
- No pre-existing condition limitation.
- Portability is included.

Plan Features	Low	High
Hospital Confinement / Admission	\$500 per confinement \$100 per day up to 31 days	\$1,000 per confinement \$100 per day up to 31 days
Daily Confinement	\$100 per day, to a maximum of 31 days per calendar year	
Hospital Intensive Care Unit Confinement	\$100 per day up to 10 days	



Visit aflacgroupinsurance.com to learn more.

Employees should reference ICUBA Independent Colleges and Universities Benefits Association Group **#26710**.

How to File a Claim with Aflac

Aflac helps pay expenses the medical plan doesn't cover. If you're sick or hurt, follow these instructions to file a claim:

1. Visit aflacgroupinsurance.com and click on "Customer Service" and then "File a claim."
2. Choose from accident, hospital, critical illness or wellness and follow the instructions.
3. Complete and upload your HIPAA authorization, claim details and documents, and direct deposit information.



EMPLOYEE ASSISTANCE PROGRAM (EAP)

Unlike Aetna's Behavioral Health benefits which are only available if you are enrolled in an ICUBA medical plan, the Resources for Living EAP benefits are available to all employees, all family members in your household and your adult children up to the age of 26. Services are confidential and are available 24 hours a day, 7 days a week. This resource includes six free counseling sessions per issue per plan year.

Emotional Wellbeing Support

Support is available 24 hours a day for in-the-moment emotional wellbeing. You can also access up to 6 counseling sessions per issue each year.

Visit with a counselor face to face, online with televideo or get in-the-moment support by phone. Services are free and confidential. Resources For Living (RFL) is here to help with a wide range of issues including:

- Relationship support.
- Stress management.
- Work/life balance.
- Family issues.
- Grief and loss.
- Depression.
- Anxiety.
- Substance misuse and more.
- Self-esteem and personal development.

Legal Services

You can get a free 30-minute consultation with a participating attorney for each new legal topic related to:

- General.
- Family.
- Criminal law.
- Elder law and estate planning.
- Divorce.
- Wills and other document preparation.
- Real estate transactions.
- Mediation services.

Daily Life Assistance

Competing day-to-day needs can make it tough to know where to start. Call RFL for personalized guidance. RFL will help you find resources for:

- Child care, parenting and adoption.
- Summer programs for kids.
- School and financial aid research.
- Care for older adults.
- Caregiver support.
- Special needs.
- Pet care.
- Home repair and improvement.
- Household services and more.

RFL also offers carekits related to growing families, child care, caregiving and more.

Financial Services

Simply call RFL for a free 30-minute consultation for each new financial topic related to:

- Budgeting.
- Retirement or other financial planning.
- Mortgages and refinancing.
- Credit and debt issues.
- College funding.
- Tax and IRS questions and preparation.



PET INSURANCE

ICUBA's Voluntary Pet Insurance program is provided by Nationwide insurance. My Pet Protection is offered exclusively to ICUBA members and provides more choices and flexibility. If you sign up multiple pets you will receive a discount for additional savings. Like human medical insurance this plan also has deductibles, coinsurance, exclusions and pre-existing conditions limitations. Select the My Pet Protection Plan with or without wellness. **Your monthly payment will be direct billed with Nationwide.**

Choose the level of coverage that fits your needs

Get 90%, 70% or 50% reimbursement on these vet bills and more.*



Accidents, including poisonings and allergic reactions	✓	✓
Injuries, including cuts, sprains and broken bones	✓	✓
Common illnesses, including ear infections, vomiting and diarrhea	✓	✓
Serious/chronic illnesses, including cancer and diabetes	✓	✓
Hereditary and congenital conditions	✓	✓
Surgeries and hospitalization	✓	✓
X-rays, MRIs and CT scans	✓	✓
Prescription medications and therapeutic diets	✓	✓
Wellness exams	✓	
Vaccinations	✓	
Spay/neuter	✓	
Flea and tick prevention	✓	
Heartworm testing and prevention	✓	
Routine blood tests	✓	

Both plans feature a \$250 annual deductible and have a maximum annual benefit of \$7,500.

Pre-existing conditions are not covered. Any illness or injury a pet had prior to start of policy will be considered pre-existing.

* Some exclusions may apply. Certain coverages may be subject to pre-existing exclusion.

How to use your pet insurance plan

1. Visit any vet, anywhere
2. Submit claim
3. Get reimbursed

Get a fast, no-obligation quote at benefits.petinsurance.com/icuba or call **877-738-7874**.



LEGALSHIELD NATIONAL PLAN OVERVIEW

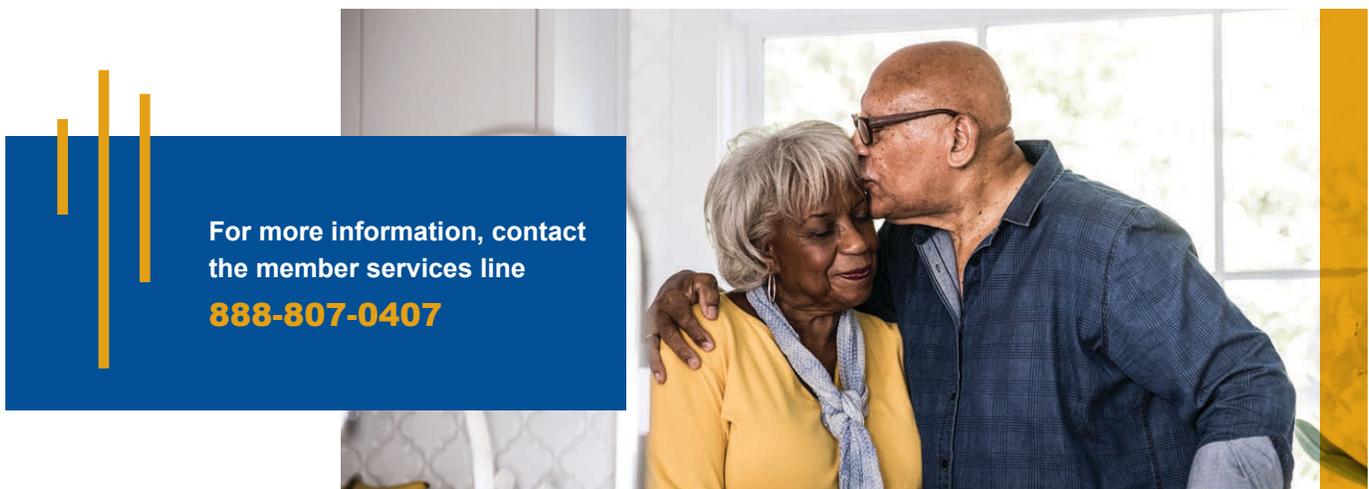
A comprehensive and affordable legal protection plan

LegalShield legal plans cover the member; member’s spouse; never married dependent children under 21 living at home; dependent children under the age 18 for whom the member is the legal guardian; never married dependent children up to age 23 if a full-time college student; or physically or mentally disabled dependent children.

Direct access to a qualified attorney	Participants receive direct access to a dedicated provider law firm, including 24/7 emergency legal access for covered matters.
Dedicated network of provider law firms	100% in-network coverage guarantee.
Fast response	An attorney will respond to participant requests within four business hours or less.
Quality Assurance	Our proprietary system provides daily, real-time online monitoring of our provider law firms, which ensures high service standards are kept. Satisfaction surveys are also sent to participants.
No claim forms	By paying our provider firms on a per capita basis, we provide hassle-free service for participants.
Mobile App	The LegalShield mobile app provides direct access to participant’s dedicated provider law firm and makes it easy to upload and prepare documents for fast legal review.

Contributions

Employee/Employee + Family	\$17.50
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For more information, contact the member services line
888-807-0407



CHUBB: LIFETIME BENEFIT TERM

Life insurance – valuable protection for your loved ones

Lifetime Benefit Term helps protect you and your family in the event you were no longer able to provide for them. Your family can receive cash benefits paid directly to them upon your death that they can use to help cover expenses like mortgage payment, credit card debit, childcare, college tuition and other household expenses.

When you make the promise to protect your family with LifeTime Benefit Term, there are several ways it can work.

- As Life Insurance
- For Qualified Long-Term Care
- Restoration of Your Death Benefit

How LifeTime Benefit Term Can Be Used

Three options	Life situation	Death benefit	Long-term care	Total benefit
1. Life insurance	You lead a full life and do not need long-term care (LTC)	\$100,000	—	
2. Long-term care (LTC) insurance	You lead a full life and need assisted living or nursing home care	—	\$100,000	\$100,000
3. Split your death benefit for LTC & life insurance	You lead a full life but also need some LTC funds (example: 4% of \$100,000 for 12 months)	\$52,000	\$48,000	
Additional Death Benefits				
Restore your death benefit	If you deplete your entire death benefit due to LTC, we will restore your death benefit to 50% of your original death benefit	\$50,000	—	\$50,000
Option 1, 2 or 3 + Restoration of Death Benefit = Total Coverage				\$150,000





Term Life Insurance Built for Today

- Life insurance premiums will never increase and are guaranteed to age 100.
- 100% guaranteed benefits during working years, the longer of 25 years or age 70.
- After age 70, the benefit is guaranteed to never be less than 50% of original death benefit.
- After 10 years, paid up benefits begin to accrue.
- If you need LTC, you can access your death benefit while you are living for home health care, assisted living, adult day care and nursing home care.
- Your contract contains a guarantee that if an increase to the LTC rider premium might cause you to lapse your coverage within 120 days, you'll have the option to retain LTC benefits of a reduced amount without any increase in premium.
- After your coverage has been in force for 2 years, you can receive 50% of your death benefit, up to \$100,000, if you are diagnosed as terminally ill.
- Additional Child Term (additional premium required) up to \$25,000 with guaranteed conversion to individual coverage at age 26- up to 5 times the benefit amount.

Good things happen every day, and unfortunately hardship happens too. Let us help you protect everything you value.



For more information on this benefit, contact Customer Service at **855-241-9891** x3 or email csmail@gotoservice.chubb.com.

ENROLLMENT PROCESS & ELIGIBILITY

Complete your enrollment online at [ICUBAbenefits.org](https://www.icubabenefits.org).

1 UNDERSTAND YOUR CHOICES AND REVIEW YOUR OPTIONS

This Guide contains valuable information to help you prepare for your enrollment. Keep it handy for reference throughout the year.

Make sure you include eligible dependents who will be affected by your elections in the decision-making process.

2 GO TO [ICUBAbenefits.org](https://www.icubabenefits.org)

From the home screen, enter your username and password. First time users, your default login is as follows:

Username:

Your user name is the First Initial of your...

First Name + Last Name + Last Four Digits of SSN
(e.g. JSmith6789)

Password:

Your Date of Birth (mmddyyyy).

Please note: You will be prompted to change your password after your initial login.

If you do not remember your password, select Forgot Password and answer your security questions. After three failed login attempts, your account will be locked and you will need to contact Human Resources or bswift at 866-524-5063.

3 PERSONAL CONTACT AND DEPENDENT INFORMATION

Upon login, you will be able to access your benefits information, complete enrollments and access our **Single Sign-On** capability under **My Carrier Accounts**. From the top task bar or side panel you can:

- **Verify your personal information.** Please contact your Human Resources office with any requested changes to your personal information.
- **Update contact information.** Please make sure your phone number and email address are up to date. This is how we will contact you about exciting benefits updates and wellbeing communication.
- **Confirm dependent eligibility** based on the plan document rules, if applicable.
- **Access ICUBA's insurance carrier sites** through our Single Sign-On section. Approximately 72 hours after successful enrollment of elections, you will gain access to the insurance carrier portals. You may be prompted to register with the carriers upon your first attempt. Your future visits will connect automatically through our Single Sign-On capability.

4 ENROLL IN YOUR BENEFIT SELECTIONS

Begin your enrollment. Click **Start Your Enrollment** button located on the home page.

Begin enrolling or waiving coverage as you proceed through each available election.

Review each benefit category shown below until the plan image appears **green** and reflects **Completed!** You may **View Plan Options** to find out more about each plan and your other available options (if applicable). Once completed, select the orange **Continue** button on the right panel to review your selections and complete your enrollment.

5 REVIEW ALL YOUR BENEFIT SELECTIONS

Review your benefit elections. Complete your benefit enrollment by checking the “I agree and I’m finished with my enrollment” box and click the **Submit** button.

Finally, be sure to **Save** your new benefit elections.

You’ll be directed to your final confirmation statement. You have the option of emailing, printing or viewing a confirmation of your elections. If you are not prompted to view or print your confirmation, you have NOT completed your enrollment.



Eligibility Requirements

EMPLOYEE

Full-time employees of your institution.

DEPENDENTS

Your eligible dependents include: your legally recognized spouse or qualified domestic partner and your legal child dependent(s) including natural child, legally adopted child, stepchild, child required to be covered pursuant to a Qualified Medical Child Support Order, child with proof of legal guardianship who resides with you, or a foster child. Dependent children may remain on the ICUBA plan until the end of the calendar year in which age 26 is attained.

WAITING PERIOD

Eligible on 1st of the month following or coinciding with the date of hire.



askEMMA™

Have you asked Emma?

If you have questions while enrolling for benefits, we encourage you to use our Ask Emma decision support tool.

Emma will assist you in making smart, cost-effective benefits decisions to fit your individual needs by estimating your annual costs, using real-life scenarios from your personal experiences. She will ask you a few questions for a personalized “walk through” to guide you in the right direction.

MEMBER TESTIMONIALS

“ICUBA’s initiatives on wellbeing and preventative care are impressive. The incentives are a great motivator and help to reduce the likelihood of major and catastrophic health issues for our employees. This translates into a healthier workforce and fewer missed workdays. We could not be more pleased with the comprehensive benefits offered. The great coverage is a selling point when recruiting new employees. ICUBA’s use of collaboration and getting ideas from the members helps to keep the coverage relevant. The approach is always positive and on being healthy and the customer service excellent. We love ICUBA!”

Lori Menger

Head of School
San Jose Episcopal Day School



“ICUBA is a valuable partner in the administration of the Rollins benefits plan. ICUBA manages the operations of the benefits program, relieving Rollins staff from the administrative and compliance tasks. This allows us to focus on the overall strategy and delivery of the Rollins benefit programs. Through ICUBA, we can offer innovative policies and solutions through the various brand partners, with more favorable plan designs than other employer plans, and better than if we were on our own. We also appreciate the collaboration with the other member institutions within ICUBA and enjoy working together to provide value-added programs for our employees.”

Jennifer Addleman, MBA

Director, Benefits & Wellbeing
Human Resources
Rollins College



“ICUBA presents the best opportunity for schools to enjoy the most robust health care options, coverage and service I have ever seen. It starts with their attention to detail, understanding and compassion for their members, willingness to listen and commitment to customer service and support. One word captures the Tampa Prep experience with ICUBA... TRUST!”

Kevin Plummer

Head of School

Tampa Preparatory School



“ICUBA provides schools with benefit packages that surpass industry standards. As industry experts and advocates, ICUBA monitors ever-changing plan options, constituent needs, and works closely and collaboratively with member schools to ensure full transparency. Every school has a voice in decision making. Monthly advisory committee meetings, regional meetings, and an accessible, knowledgeable staff keep member schools fully involved and supported in providing the best possible health benefit options for their employees. ICUBA is large enough to negotiate high-quality options with manageable premiums, and small enough to know each member school and allow for customization of which plans will be offered by each school. ICUBA is truly a collaborative partner in helping us keep our employees happy and healthy.”

Pat Walker

Head of School

Jacksonville Country Day School



JACKSONVILLE
COUNTRY DAY SCHOOL



Resources for Living®





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This summary of benefits does not create a contract between ICUBA and any employee. Details of these plans can be found in official plan documents that govern the plans. In the event of a discrepancy between the plan documents and this document, the plan documents govern. While care has been taken to ensure the accuracy of this information, the plan documents and your employer policies will govern in all cases. Although it is our intention to continue the plans, we reserve the right to modify, amend or terminate the plans at any time. All rates are based on current participation and are subject to change.