Benefit Focus News

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In This Issue:
• Open Enrollment • Health Insurance 101

Open Enrollment

This year's medical, dental and FSA Open Enrollment will be conducted from **April 29th through May 17th**.

Employees do not need to reenroll for medical or dental coverage, but if they want to change from one medical plan to another or add previously declined dependent dental coverage they can only do so during Open Enrollment.

In addition, Open Enrollment also provides an opportunity for employees who did not enroll in the FSA when first eligible to do so and for those who are currently enrolled and want to continue participation to re-enroll for the coming plan year. **Remember, enrollment in the FSA is on a year by year basis and elections do not continue from one year to the next.**

Watch OGI's website for further announcements.

Photo Credit: www.gograph.com

Health Insurance 101: Insurance Lingo

Health Insurance 101 will be a monthly series appearing in *Benefit Focus News* that will help you understand group health insurance further. This month we'll start with the basics by defining some of the confusing insurance language.

- Premium: The amount of money charged by an insurance carrier for active coverage. You and the State share in the cost of these coverages. How much you pay depends on which plan you choose, how many family members are enrolled and how many hours per week you work. Premiums are deducted on the first and second pay dates of each month to pay for the next month's coverage. Currently, the state pays 92% of the premium as part of your benefit package.
- Deductible: This is the amount you pay to providers each year before your insurance carrier begins paying benefits under your plan. Your provider may bill you for these charges.
- Coinsurance: The coinsurance is the amount you pay for services after your deductible is met.
- Copayment: The copayment is the amount separate from the coinsurance that you are responsible to pay for certain services.
- Network Savings: This is the amount you save by using a contracting (in-network) provider. You do not have to pay providers for this amount.

Source: Blue Cross of Idaho

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