



Benefits Overview with 2019 Rates

www.NavBenefits.org

MEDICAL High Deductible Health Plan (HDHP) Aetna International, Group #706366	2019 Monthly Rates						Plan Coverage			
(855) 829-9558 aiservice@aetna.com www.aetna.com www.aetnainternational.com Coverage begins the 1 st of the month following your date of hire or the 1 st of the year after Open Enrollment. Register for an account online with your SSN. ID cards will arrive 3 weeks after your benefits begin; temporary cards can be printed online.		HQ, Admin, & Glen Eyrie	US Field Staff & Nav Rep	OVER-SEAS Field Staff	EDGE Corps & ELP < 24 months	Staff-in-Training < 48 months	<i>You pay 100%</i> Deductible	<i>You pay 20%, Aetna pays 80%</i> + Coinsurance	= Max Out-of-Pocket Annual	
	Single	\$91	\$456	\$233	\$312	\$398	\$1,500	\$500	\$2,000	
	Empl.+1	\$224	\$899	\$458	\$643	\$797	\$3,000	\$1,000	\$4,000	
	Empl.+2	\$309	\$1,181	\$603	\$855	\$1,051	\$3,000	\$1,000	\$4,000	
	Empl.+3	\$419	\$1,549	\$791	\$1,128	\$1,381	\$3,000	\$1,000	\$4,000	
PHARMACY <i>(included with medical)</i>	Drug Tier			U.S. Coverage Level*						
Before meeting the deductible, you are responsible for 100% of the Rx cost. After meeting the deductible, this chart lists Rx coverage levels. *If you live overseas and purchase your prescription(s) outside the U.S. after your deductible, each tier is 10%.	Generic			\$10 co-pay (per 1 month supply)						
	Generic Preventive			Free (eligible maintenance drugs determined by Aetna)						
	Preferred Brand Name			30% (maximum of \$45 per 1 month supply)						
	Non-Preferred Brand			50% (maximum of \$75 per 1 month supply)						
	Specialty			20% (maximum of \$100 per 1 month supply)						
TELADOC <i>(included with medical)</i>	Rates				Coverage					
(855) 835-2362 www.teladoc.com/aetna Set up your account online and provide your medical history before requesting a consult.	\$40 per consultation: speak with a U.S. board-certified doctor through a phone, web, or mobile app.				The physician can remotely diagnose and prescribe medication, as needed. For treatment in the U.S. only for non-life-threatening conditions.					
HEALTH SAVINGS ACCOUNT (HSA) Optum Bank	Contribution 2019 Limits		Nav Gift Contribution		Fees & Investments					
(877) 470-1771 healthaccountservicing@optum.com https://mycdh.optum.com/ Optum will email you instructions to open and manage your account online. You will then receive a debit card. Contact Optum for all questions regarding your login/password.	Single	\$3,500	\$800	<i>prorated for mid-year changes</i>		Optum charges a \$2.75 monthly fee for any account with a balance less than \$2,500. When your account balance exceeds \$2,500, you can invest the amount over \$2,500 in a variety of different mutual funds. The earnings on those investments can be tax-free.				
	Empl.+1	\$7,000	\$1,600							
	Empl.+2 or more	\$7,000	\$2,400							
	Age 55+ CatchUp	Additional \$1,000								
FLEXIBLE SPENDING ACCOUNT (FSA) Optum Bank	Contribution 2019 Limits		Nav Gift Contribution		Coverage					
(877) 470-1771 healthaccountservicing@optum.com https://mycdh.optum.com/ Optum will email you instructions to open and manage your account and submit claims online. You will then receive a debit card.	Single	\$2,700	\$500	<i>prorated for mid-year changes</i>		Your full FSA election amount is available once you activate your Optum account (after Jan. 1 st or the 1 st of the month following your date of hire). The FSA is a use-it-or-lose-it plan; any amount over the \$500 rollover will be lost after 12/31.				
	Rollover to next year	Max. of \$500								

DENTAL MetLife Dental, Group #112753		Monthly Rates	Coverage
(800) 942-0854 www.metlife.com/mybenefits Register for an account online with your SSN. MetLife does not provide ID cards. Provide <i>Group #</i> and <i>SSN</i> to the dentist.	Single	\$31	Your coverage begins on the 1 st of the month following your hire date or on the 1 st of the new year after Open Enrollment. The dental plan covers up to \$1,250 per person each year for in-network providers.
	Empl.+1	\$67	
	Empl.+2	\$120	
VISION Aetna Vision Preferred, Group #706366		Monthly Rates	Coverage
(877) 973-3238 https://www.aetnavision.com Register for an account online with your SSN. ID cards will arrive in the mail 3 weeks after your benefits begin.	Single	\$6	Your coverage begins on the 1 st of the month following your hire date or on the 1 st of the new year after Open Enrollment.
	Empl.+1	\$12	
	Empl.+2	\$17	
LIFE INSURANCE (Basic & Supplemental) The Standard, Group #143754		DISABILITY (Short Term and Long Term) The Standard, Group #143754	LONG TERM CARE Unum, Group #907343 011
(800) 628-8600 www.standard.com Employer-paid basic life insurance is available for employee, spouse, and dependents. Coverage begins the 1 st of the month following date of hire. Supplemental life insurance buy-up for the employee and/or spouse is available through an application and underwriting process determined by The Standard.	(800) 628-8600 www.standard.com Employer-paid short-term disability pays 60% of wages if you are unable to work for a period of <90 days and it is dependent upon an approval process. Employer-paid long-term disability begins after 90 days and after employment is terminated. Long-term disability pays for 66.6% of your wages.	(800) 227-4165 Employer-paid long-term care (LTC) may include skilled care with \$1,000 of monthly coverage for the first 3 years. The LTC Care <i>buy-up plan</i> for the employee or spouse is available by applying online at the website provided here and will begin on the date of approval: https://w3.unum.com/enroll/navigators	
EMPLOYEE ASSISTANCE PROGRAM (EAP) The Standard		INTERNATIONAL TRAVEL INSURANCE International Medical Group	HEALTH ADVOCATE (Help Line)
(888) 293-6948 www.workhealthlife.com/Standard3 Coverage begins the 1 st of the month following your hire date and continues as long as you are benefit-eligible with The Navigators. You may have up to 3 face-to-face or phone-based assessment and counseling sessions. <u>Services include assistance with:</u> <ul style="list-style-type: none"> • Stress, anxiety, depression, grief, family • Life improvement/goal-setting • Financial and legal concerns • Identity theft and fraud resolution • Online will preparation 	(800) 576-2674 Coverage is required if you are traveling for ministry but not covered under Aetna. Please use this website to apply for coverage: www.missiontrioinsurance.com/thenavigators <u>Services include:</u> <ul style="list-style-type: none"> • \$0 medical deductible, \$100k cov'g • Medevac and repatriation • 24-hour emergency assistance <u>Rates:</u> <ul style="list-style-type: none"> • \$30 for 1st month; \$2/day after 1st month up to 60 days total 	(866) 695-8622 answers@healthadvocate.com https://members.healthadvocate.com/ Coverage for employees and immediate family begins on your hire date and continues as long as you are benefit-eligible. <u>Services include:</u> <ul style="list-style-type: none"> • Find providers and hospitals • Schedule appts. & 2nd opinions • Transfer medical records • Navigate your insurance plan • Resolve claims and billing issues with insurance companies • Help with eldercare, and more! 	
RETIREMENT PLANS Fidelity Investments		401(a) Employer Plan Fidelity #57499	403(b) Employee Plan Fidelity #90142
(800) 343-0860 www.netbenefits.com Register for an account online with your SSN. Login to begin or change your 403(b) contributions.		5.5% of your salary is contributed into the 401(a) after you have reached one year/1,000 hours of service.	You can choose to contribute a portion of your paycheck into Before-Tax, After-Tax, or Roth 403(b) options. You may begin contributing to the 403(b) immediately upon hire.