What’s Inside?

1. Medical Plans
   UnitedHealthcare

2. Prescription Drug Benefit
   CVS Caremark

3. Dental Coverage
   Aetna

4. Vision Coverage
   UnitedHealthcare

5. Flexible Spending Accounts (FSAs)
   PayFlex

6. Health Savings Account (HSA)
   PayFlex

7. Legal Resources and Additional Information
MEDICAL

UnitedHealthcare

If you elected to continue medical coverage in the GW Health Savings Plan (HSP) or the GW PPO for 2018, you may continue to use your 2017 UnitedHealthcare (UHC) ID card in 2018, as it will remain valid. You will not receive a new UHC ID card for 2018.

If you elected to change medical plans, or if you are newly enrolled in the GW HSP or the GW PPO for 2018, you will receive a new healthcare ID card from UHC by January 1, 2018.

If you do not receive your new UHC ID card prior to your next visit to your healthcare provider, you may obtain a temporary ID card through the UHC website. You can also access an electronic version of your ID card on your smartphone or device through the Health4Me app.

Please note: Participants must register with UHC for online account access to review claim data and health information, print temporary ID cards and order additional/replacement ID cards. Beginning January 1, 2018, you may register by visiting www.myuhc.com and selecting “Register Now.”

To Access a UHC ID Card on the Health4Me App:

Step 1: Download the Health4Me app from the iPhone App Store or Android Google Play Store.

Step 2: Click on “Select Your Plan to Start,” and select “UnitedHealthcare” from the next screen.

Step 3: Select “Register,” then enter your information and continue through the next four screens.

Step 4: Log in using your username and password.

Step 5: Select “Menu,” then “My Coverage.”

Step 6: Select “ID Card” to view.

Castlight

With GW medical plan participation, you gain access to Castlight, a free tool that lets you experience healthcare in a whole new way with:

- Personalized cost estimates
- Doctor ratings and reviews
- Your past bills in one place
- Explanations of past medical spending
- Benefits program information (medical and pharmacy)
- In-network doctor, facility and pharmacy locator, including contact information
- Information about conditions and treatments
- Current balances for your Health Care Flexible Spending Account (HCFSA) and Health Savings Account (HSA)
- Prescription drug option information (cost, coverage)

Castlight is completely confidential and free for GW employees and their spouses/domestic partners and adult dependents enrolled in a university medical plan. Register for Castlight at https://mycastlight.com/gw.

Contact Information

For assistance with online registration or password resets, please contact UHC Customer Service at (877) 706-1739 (available Mon - Fri, 8 a.m. - 8 p.m. EST).

For immediate, physician-approved answers to your health questions, please contact UHC Nurseline at (800) 846-4678 (available 24/7).
If you newly enrolled in a medical plan for 2018, you will receive a prescription ID card from CVS Caremark. If you do not receive your ID card by the time you need to fill a prescription, you may obtain a temporary ID card through your CVS Caremark online account.

Please note: Participants must register with CVS Caremark in order to access their online account. You may register for online account access beginning January 1, 2018.

To Register Online with CVS Caremark:
Step 2: Select “Not Registered Yet.”
Step 3: You will be prompted to enter a “Participant ID Number,” as well as other required personal information. Note: To obtain your Participant ID Number, you must call CVS Caremark Online Customer Service at (800) 378-9442.
Step 4: Create a username and password.
Step 5: Review information and confirm.

Once you have registered online with CVS Caremark, you may print a temporary ID card.

To Print a Temporary ID Card:
Step 1: Log into your online CVS Caremark account at www.caremark.com.
Step 2: Select “Update Your Profile.”
Step 3: On the left-hand side, under “My Account,” select “Print My Prescription Benefit Card.”

If you are unable to register online and would like to request a temporary ID card, please contact CVS Caremark Customer Service at (877) 357-4032.

Contact Information
For assistance with CVS Caremark online registration, please call (800) 378-9442.
CVS Caremark Customer Service: (877) 357-4032.
Available seven days a week, 8 a.m. - 8 p.m. EST.

If you must fill a prescription prior to receiving your prescription ID card (and you are unable to obtain a temporary ID card online), you may provide the following information to your pharmacy:

ID Number: Cardholder Social Security Number
Group Number: RX6475
BIN: 004336
PCN: ADV PCS

CVS Caremark Mobile App
“Easy, convenient, accessible” is the CVS Caremark mobile app motto. Indeed, the app provides just about everything you need for managing your medicine, from easy refills to timesaving tools to convenient savings. App features include:

- Scan a prescription label for refill
- See when prescriptions are due for refill
- Manage prescription deliveries by mail, auto refill and pharmacy
- Submit a photo of your paper prescription
- ID unknown pills with the pill identifier
- Check for potential drug interactions
- Check order status and view prescription history
- Set reminders for when to take medications

Download the CVS Caremark mobile app today and get the access you need, anywhere and anytime.
DENTAL
Aetna

If you changed or continued your dental plan, or elected new coverage for 2018, you have the option to print your dental ID card from your online Aetna account or access an electronic version of your dental ID card through the Aetna mobile app.

Aetna does not issue dental ID cards, as ID cards are not required to receive coverage – you are only required to provide the dental office with your name, date of birth and Member ID Number (or your Social Security Number). You can obtain your Member ID Number by calling Aetna Member Services at (877) 238-6200.

Please note: Participants must register with Aetna for online account access in order to review claim activity and Explanation of Benefits (EOB) information, locate in-network providers and print a dental ID card. Beginning January 1, 2018, you may register by visiting www.aetna.com and selecting “Log In/Register” from the blue box located on the right-hand side of the screen.

To View or Print a Dental ID Card Online:
Step 2: Select “ID Card” form the upper right area of the screen.
Step 3: Select member name and card type (dental).
Step 4: Select “View.”
Step 5: Select “Print/Download ID Card” and follow the instructions to print your ID card.

Aetna members also have the option of requesting an eligibility letter - which will arrive in an envelope containing paper dental ID card(s) - by contacting Aetna Member Services at (877) 238-6200.

If You Elected the Aetna DMO Plan:
You must elect a Primary Care Dentist (PCD) from within the Aetna DMO network to coordinate all of your dental care. To have coverage effective on the first of the month, your PCD selection must be received by Aetna by the 15th of the month prior in order for your name to appear on your PCD’s monthly roster. You may notify Aetna of your PCD selection through your online account or by calling Aetna Member Services at (877) 238-6200.

Aetna Mobile App
With Aetna Mobile, you can view your dental plan information whenever you want, wherever you are. Check out some of the features of the Aetna Mobile app:
• Search claims
• Pull up dental ID card information
• Find a dentist or facility based on your current location and get turn-by-turn directions to the office
• Transfer a dentist’s contact information right to your address book
• Check benefits and coverage information
• Access to the Message Center, one location for all Aetna email correspondence from Member Services
• Contact Us feature for fast answers

Two ways to download your free Aetna Mobile app:
1. Text Apps to 23862 to download now*
2. Scan the code on the right with your mobile device

To learn more, visit www.aetna.com/mobile.

*Standard text messaging rates apply.

Contact Information
To request an eligibility letter, please contact Aetna Member Services at (877) 238-6200.
VISION

UnitedHealthcare

If you changed or continued your vision plan, or if you elected new coverage for 2018, you have the option to print your vision ID card from your UnitedHealthcare (UHC) Vision online account. UHC does not issue vision ID cards, as they are not required to receive coverage.

Please note: Participants must register with UHC for online account access to view claim activity and detailed benefit coverage, locate network providers and print a vision ID card. You may register for online account access beginning January 1, 2018 (steps differ depending on whether you are also enrolled in a GW medical plan).

How to Register:

If you are enrolled in a GW medical plan and elected vision coverage

Step 1: Visit www.myuhc.com and log in using your username and password. If you do not have a username and password, register using the information found on your medical ID card.

Step 2: After logging in, select “Benefits and Coverage.”

Step 3: Select “Vision” from the tool bar located on the left-hand side of the screen.


Step 5: Select “Print ID Card” from the Main Menu.


If you are not enrolled in a GW medical plan, but you elected vision coverage


Step 2: Select “Register Now.”

Step 3: Complete the User Registration page. Please note: You will need to use your full Social Security Number (SSN) or the last four digits of your SSN.

Step 4: Once you are logged in, select “Print ID Card” from the Main Menu.

Contact Information

For assistance with online registration, please contact UHC Vision Customer Service at (800) 638-3120.

Health Advocate

Health Advocate is the nation’s leading independent healthcare advocate and assistance company. As a special benefit paid for by GW, Health Advocate can help you:

• Find doctors, hospitals and treatment centers
• Clarify insurance plan(s) and help you decide which plan is right for you
• Untangle medical bills, uncover errors and negotiate fees
• Estimate costs for medical procedures
• Locate eldercare and caregiver support resources
• Understand conditions and treatment options

As a GW employee, you are automatically enrolled in Health Advocate at no cost, and you do not need to participate in a GW medical plan to be eligible. Call Health Advocate at (866) 695-8622.
FLEXIBLE SPENDING ACCOUNTS

PayFlex

If you are newly enrolled in a Flexible Spending Account (FSA), you should receive your new debit card by January 1, 2018. If you enrolled in both a Health Care Flexible Spending Account (HCFSA) and a Dependent Day Care Flexible Spending Account (DCFSA), you will receive only one debit card; this debit card will reflect both accounts. Please be sure to sign, activate and obtain a Personal Identification Number (PIN) for your debit card by calling the number found on the label on the front of the card.

2017 FSA participants who are continuing their FSA(s) for 2018 will not receive a new debit card, but may continue to use their existing card.

PayFlex Debit Card Expiration and Deactivation:

Debit cards have an expiration date; PayFlex issues new debit cards 30 days prior to expiration.

If you did not elect a HCFSA for 2018, your debit card will work through the plan’s grace period deadline of March 15, 2018, after which your card will be deactivated. Card deactivation may occur at any time on March 15, 2018.

Healthcare expenses incurred after the deactivation of your debit card will require a paper claim form (instructions provided on page 6).

2018 FSA participants: If you elected the HCFSA for 2018, your 2018 annual election will be front-loaded to your existing debit card on January 1, 2018 (if you were enrolled during 2017). If you newly enrolled, you should receive your new debit card by January 1, 2018.

You will receive only one debit card in the mail. You may request replacement or additional debit cards for yourself or for your eligible dependents at no additional charge by visiting www.payflex.com.

Participants may also review account balances, as well as claims activity for the 2017 health care grace period and plan year 2018, through their online PayFlex account.

Please note: Participants must register with PayFlex for online account access. You may register for online account access beginning January 1, 2018.

To Register Online with PayFlex:


Step 2: Select “Sign In” from the upper right corner of the screen.

Step 3: Select “Create Your Profile” (located at the center of the webpage).

Step 4: Follow the prompts to enter your personal information and create a username and password. Please note: The mailing address you provide should be your home address (the address that appears on your W-4).

Step 5: Once complete, review entered information and confirm.

Contact Information

For assistance with online registration or password resets, please contact PayFlex Customer Service.

PayFlex Customer Service:

(800) 284-4885 or (844) PAYFLEX (729-3539).

Available Mon - Fri, 8 a.m. - 8 p.m. EST;
Sat, 10 a.m. - 3 p.m. EST.

On the next page, you will find:

• Instructions for filing paper claim reimbursements
• Important account use deadlines for 2017 HCFSA and DCFSA participants
FLEXIBLE SPENDING ACCOUNTS (CONT’D)

PayFlex

To File a Paper Claim Reimbursement:

Step 1: Complete a Flexible Spending Account Reimbursement Claim Form. You may request reimbursement for health and dependent day care expenses on the same form.

Step 2: Attach copies of your Explanation of Benefits (EOB) statement issued by the insurance provider (preferred) or itemized receipts. If submitting receipts, the receipts should include:

- Name of the doctor, hospital or facility that treated you
- Your name or the name of the patient
- Date of service
- Type of service
- Final amount paid

Please note: You cannot be reimbursed if the EOB or receipt(s) do not accompany the request. Cancelled checks and credit card receipts do not qualify as receipts. PayFlex is not able to accept the EOB or detailed statements that show estimated or pending amount due; you must provide the final amount that you paid.

Step 3: Receipts for dependent day care expenses must include a written statement from the provider (1) stating that the dependent day care expense has been incurred, and (2) listing the amount of the expense as well as the tax ID number of the day care provider. Your dependent day care provider’s signature must be on the statement. If your dependent care caregiver completes and signs the Reimbursement Claim Form in the Dependent Care Expenses section, you do not need to include an itemized statement or receipt.

Step 4: Sign and date the form.

Step 5: Submit the form by mail or fax, or submit an Express Claim online:

Mail: PayFlex Systems USA, Inc.
P.O. Box 981158
El Paso, TX 79998-1158
Fax: (855) 703-5305
Online: www.payflex.com

2017 Flexible Spending Account Reminders:

Health Care FSA
2017 FSA expenses for your health care account must be incurred no later than March 15, 2018. Per IRS regulations, unclaimed funds are required to be forfeited to the plan. The deadline to submit eligible claims incurred between January 1, 2017 and March 15, 2018, is April 30, 2018.

Dependent Day Care FSA
2017 FSA expenses for your dependent day care account must be incurred no later than December 31, 2017. Per IRS regulations, unclaimed funds are required to be forfeited to the plan. The deadline to submit eligible claims incurred between January 1, 2017 and December 31, 2017, is April 30, 2018.

Important: Claims for 2017 FSA expenses submitted to PayFlex after April 30, 2018 will be considered ineligible.

NEW!

Email Option for PayFlex Customer Service
PayFlex now offers a more convenient, 24/7 solution when it comes to contacting their customer service department. Members can now directly email their questions throughout the year to PayFlex Customer Service.

To Email PayFlex Customer Service:

Step 1: Visit www.payflex.com and sign in.

Step 2: From your account dashboard, select “Help & Support” at the top of the screen.

Step 3: Select “Contact Us.”

Step 4: From that page, select “Send an Email.”

You can also call PayFlex Customer Service at (844) PAYFLEX (729-3539), available Monday - Friday, 8 a.m. - 8 p.m. EST and Saturday, 10 a.m. - 3 p.m. EST.

https://benefits.gwu.edu
https://blogs.gwu.edu/gwbenefits
HEALTH SAVINGS ACCOUNT

PayFlex
GW HSP Participants Only

If you are a GW Health Savings Plan (HSP) participant and you newly enrolled in a Health Savings Account (HSA), you should receive a debit card from PayFlex in the mail.* If PayFlex requires additional information to open your HSA, you will receive a letter. Please respond quickly in order to avoid delays in opening your account and receiving your debit card.

Current HSA participants who are continuing their HSAs for 2018 may continue to use their existing card.

*Action Required: You will receive your debit card from PayFlex via mail with account activation information, as well as other useful tips to manage your account. Be sure to take action immediately to ensure that you can access your account.

Activating Your HSA:

HSA accountholders must agree to online account terms and conditions and provide the following information:

- Marital status
- Health plan information - including start date and coverage type
- Beneficiary information - including primary and contingent beneficiary information

Participants can manage their HSAs online at www.payflex.com. Here, you can initiate account actions such as scheduling automatic payments, linking other bank accounts and setting up account notifications.

Debit cards have an expiration date; PayFlex issues new cards 30 days prior to expiration.

Please note: Participants must register with PayFlex for online account access. You may register for online account access beginning January 1, 2018.

To Register Online with PayFlex:

Step 2: Select “Sign In” from the upper right corner of the screen.

Step 3: Select “Create Your Profile” (located at the center of the webpage).

Step 4: Follow the prompts to enter your personal information and create a username and password. Please note: The mailing address you provide should be your home address (the address that appears on your W-4).

Step 5: Review entered information and confirm.

If you elected an HSA for 2018, GW’s matching contribution will be front-loaded to your debit card on your first pay date of 2018. Your annual contribution will be deducted in equal amounts from each paycheck throughout the year.

Important:

If you have a Health Care Flexible Spending Account (HCFSA) for 2017, and you have funds left in this account as of December 31, 2017, these funds will carry over and be available during the HCFSA grace period, which ends on March 15, 2018. If you chose/choose to elect an HSA, the earliest it will be effective is April 1, 2018. (Participants cannot have an active HSA and HCFSA at the same time.)

If you wish to have your HSA begin as of January 1, 2018, be sure to use all funds in your HCFSA before December 31, 2017 (account balance must be zero*). If you have questions regarding your current HCFSA, please contact PayFlex Customer Service at (800) 284-4885.

*If you have claims pending substantiation as of December 31, 2017 (even if your HCFSA balance is zero), your HSA will be effective on April 1, 2018.

Contact Information
For assistance with online registration or password resets, please contact PayFlex Customer Service.

PayFlex Customer Service:
(800) 284-4885 or (844) PAYFLEX (729-3539).
Mon - Fri, 8 a.m. - 8 p.m. EST; Sat, 10 a.m. - 3 p.m. EST

NEW! Email Your Questions to PayFlex:
More information on page 6.

https://benefits.gwu.edu
@gw_benefits
https://blogs.gwu.edu/gwbenefits
LEGAL RESOURCES & ADDITIONAL INFORMATION

Legal Resources
If you are newly enrolled in the Legal Resources plan, you should receive a membership card by January 1, 2018. Your membership card will include your law firm’s name and telephone number.

After receiving your card, you may begin to contact your law firm directly regarding any legal needs, with no restrictions on usage. If you have questions or wish to change your law firm, please call Legal Resources Member Services at (800) 728-5768.

Contact Information
If you have questions or wish to change your law firm, please contact Legal Resources Member Services at (800) 728-5768.

Important Note to All GW Benefits Eligible Employees: Please Review Your Paycheck
Make sure to review your first paycheck in 2018 to ensure that the benefit elections you made during Open Enrollment are accurate.

After January 1, 2018, please refer to your most current benefit confirmation statement to verify the deductions reported on your paycheck. You may access a copy of your confirmation statement at go.gwu.edu/easyenroll.

Please note: You cannot make any changes to the 2018 benefit elections documented on your confirmation statement until the next Open Enrollment period unless you experience a Qualified Life Event (QLE).

What is a Qualified Life Event?
The health and welfare elections you make apply to an entire calendar year and generally cannot be changed outside of the annual Open Enrollment period, as per IRS rules. However, if you experience a Qualified Life Event (QLE), you will be able to make benefit changes that are consistent with your life event.

What is considered a QLE?
- Marriage, divorce or newly eligible same- or opposite-sex domestic partner
- Birth or adoption of a child
- Death of a spouse, same- or opposite-sex domestic partner or dependent child
- Dependent becoming ineligible for coverage
- Spouse or same- or opposite-sex domestic partner gaining or losing coverage at his or her job
- Transfer between full-time and part-time status
- Move from a non-benefits eligible position to a benefits eligible position

Learn more about Qualified Life Events - including steps to take to make mid-year benefits changes as well as examples of supporting documentation - on the GW Benefits website at https://benefits.gwu.edu/qualified-life-events.

Questions?
If you have any questions regarding GW’s health and welfare benefit offerings, contributions or eligibility, please contact the Benefits Call Center at (888) 4GWUBEN (449-8236). The Call Center is available Monday through Friday, from 9 a.m. to 6 p.m. EST. You may also seek assistance from GW Benefits by emailing benefits@gwu.edu or calling (571) 553-8382.