As we prepare for the new year, the GW Benefits Administration team would like to share some important reminders and expectations regarding your benefits.

**Medical**

If you *elected to continue medical coverage*, in the Choice Plus-High Deductible Health Plan (HDHP), Choice Plus-Basic, or Choice Plus-Medium plans for 2016, you will not receive a new ID card from UnitedHealthcare (UHC).

If you elected to *change medical plans or are newly enrolled* in the Choice Plus-High Deductible Health Plan (HDHP), Choice Plus-Basic, or Choice Plus-Medium plans for 2016, you will receive a new ID card from UnitedHealthcare (UHC) by Jan. 1, 2016.

If you have not received your new ID card by your next visit to your medical provider, please follow the steps below to obtain a temporary ID card or download the Health4Me application (see bottom page for instructions) to access the electronic version.

**NOTE:** Participants **must** be registered with UHC for online account access to review claims data, health information, print temporary ID cards and order additional and/or replacement ID cards.

Please follow the steps below to complete registration on the UHC website:

**Step 1:** Go to [www.myuhc.com](http://www.myuhc.com)  
**Step 2:** Click “Register Now”  
**Step 3:** Enter your personal information, member ID and group/account number; click “Next Step” (Note: Click “No ID card” if you don’t have a UHC ID card).  
**Step 4:** Create a username and password then click “Next Step.”  
**Step 5:** Enter your email address and optional phone numbers, and choose “Security Questions.” Review and agree to the website policies and be sure to keep the email opt-in checked, so you receive relevant news and wellness information. By registering, if applicable, you will also receive Health Statements, Explanation of Benefits, Claim Letters, Regulatory Notices, and other important information electronically. You may choose to receive free paper communications at any time by changing your mailing preferences.  
**Step 6:** When done, click “Submit.”

**How to view, print or request the UHC ID card on the UHC website:**

**Step 1:** Go to [www.myuhc.com](http://www.myuhc.com)  
**Step 2:** Enter user name and password then click “Login”  
**Step 3:** From the horizontal menu bar, click “Benefits & Coverage”  
**Step 4:** Under “Tools”, click “Request ID cards”  
**Step 5:** Click the “View” button.  
**Step 6:** Place cursor on card image, right mouse click, and select “print”  
**Step 7:** To request a new/replacement card(s), select “Mail”  
**Step 8:** Verify mailing address and click “Mail Card”. The view and print ID card feature is also available within the Mail ID card option.
UnitedHealthcare’s Health4Me Application provides instant access to your family’s critical health information at anytime, anywhere. Pull up your insurance card, find the closest physician, or speak directly with a health care professional with an easy swipe on your smartphone. You can also simplify your search by personalizing your interface with your own photos and tabs. Use the “favorites” tab to add your most commonly used contacts.

Using the Health4Me Application:

Step 1: Download “Health4Me App” in the iPhone App Store or Android Google Play Store
Step 2: Click “Select Your plan to Start,” select “UnitedHealthcare”
Step 3: Click “Register”
Step 4: Enter your information and continue through next four screens
Step 5: Log in using your username and password
Step 6: Click “Menu,” then “My Coverage”
Step 7: Select “ID Card”

Please contact UHC customer service if you need assistance with online registration or password resets at (877) 844-4999.

UHC Member Services: (877) 706-1739 / Available Monday – Friday from 8:00 a.m. to 8:00 p.m. (EST) excluding holidays.

Nurse Line: (800) 846-4678 / Available 24/7

CVS/caremark

If you have newly enrolled in a medical plan for 2016, you will receive an ID card from CVS/caremark. If you have not received your prescription benefit card by the time you need to fill your prescription, please follow the steps below to obtain a temporary ID card. NOTE: Participants must be registered with CVS/caremark in order to access their online account and print temporary ID cards.

Online Registration:

Step 1: Go to, https://www.caremark.com
Step 2: Click on “Not registered yet”
Step 3: Enter Participant ID number (available on CVS/caremark participant ID card) and required personal information

NOTE: Call CVS/caremark online customer service at (800) 378-9442 if you don’t have your participant ID number or need assistance with completing registration.

Step 4: Create user name and password
Step 5: Review information and confirm

Print Temporary ID Card:

Step 1: Go to, https://www.caremark.com
Step 2: Log into your account.
Step 3: Click on “Update Your Profile”.
Step 4: On the left side of the screen under “My Account”, select “Print My Benefit Prescription Benefit card”

Newly enrolled members without an ID card or who are unable to register online can provide the following information to their pharmacy:

ID Number: Social Security Number
Group Number: RX6475
BIN: 004336
PCN: ADV PCS
CVS/caremark and CVS/pharmacy applications can be downloaded from the iPhone App Store or Android Google Play Store. Download one or both applications.

**CVS/pharmacy** – The CVS/pharmacy application puts CVS/pharmacy and MinuteClinic in the palm of your hand. Link your ExtraCare Card, manage prescriptions and refills, scan refills, view family member history and even shop online.

**CVS/caremark** – The CVS/caremark application enables you to manage your mail order prescriptions, manage your and your family’s Rx history, check drug costs, identify pills, check for potential drug interactions among medications and locate pharmacies near you. All at your fingertips.

**CVS/caremark Customer Service:** (877) 357-4032 / Available from 8 a.m. to 8 p.m. (EST) seven days a week

**Registration Assistance:** (800) 378-9442

**AETNA**

If you changed dental plans or elected new coverage for 2016, on or after January 1st, you have the option to print your ID card or display it on your smart device. Note: Aetna does not issue ID cards as ID cards are not required. Simply provide the dental office your name, date of birth and Member ID# (or your social security number). You can obtain your member ID number by calling Aetna Member Services at (877) 238-6200.

If you prefer, you can print an ID card by accessing your Aetna account online at [www.aetna.com](http://www.aetna.com). Registration of your account will also allow you to review your claims activity, review your Explanation of Benefits (EOB), and locate in-network providers in your area.

If you elected the [Aetna DMO Plan](http://www.aetna.com), you must elect a Primary Care Dentist (PCD) from within the Aetna DMO network to coordinate all of your dental care. In order 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 to so that your name appears on his/her monthly roster.

To log in or register for Aetna Navigator, the secure member website:

**Step 1:** Go to [www.aetna.com](http://www.aetna.com)

**Step 2:** Click on “Aetna Navigator Member Log In” (orange-colored link on the left) and enter your user name and password - OR -

**Step 3:** Click on “Register” in the blue box on the right hand side of the page.

**Step 4:** Follow the instructions to complete registration.

Once logged in to Aetna Navigator, click on “Get an ID card” in the left side navigation column under the heading “I want to…”

To Print an Aetna Dental ID card:

**Step 1:** Select member name and card type (Dental)

**Step 2:** Click on “Print an ID card”

**Step 3:** Click on “Print” to print the ID card

Members have the option to request an eligibility letter be sent to them, which will have the paper ID card(s) listed by contacting Aetna Member Services.

**Aetna Member Services:** (877) 238-6200
Smart Device Applications
Aetna’s free app is easy too. It works with most smartphones and tablets (Apple and Android). Access your benefits information when you’re on the go. To learn more, visit us at [www.aetna.com/mobile](http://www.aetna.com/mobile).

Vision
If you newly elected or already have UHC Vision, please note UHC Vision does not issue ID cards. ID cards are not required to receive coverage, but if you prefer, you can print an ID card by accessing your UHC Vision online account at [www.myuhcvision.com](http://www.myuhcvision.com). In addition, you can review claims activity, detailed benefit coverage and locate network providers.

**Step 1:** Go to [www.myuhcvision.com](http://www.myuhcvision.com)
**Step 2:** Click “Member Login” Log in or register. (Do not register if you also have medical coverage with UnitedHealthcare. Please login via myuhc.com to access your vision benefits.)
**Step 3:** Enter the subscribers’ ID number (participants may use their social security number; employees enrolled in a UHC medical plan can use their medical plan participant ID number in lieu of the SS number), last name, and date of birth. Then click “Next” *(Note: Call UHC Vision at (800) 638-3120 if you don’t know your subscriber ID number or need online assistance).*
**Step 4:** Click on “Print ID Card” If you do not see this option, click on the blue “Select” button next to your plan name.
**Step 5:** From the drop down menu, select the person you would like to print an ID card for. Click on “Get ID Card.”
**Step 6:** This generates a document with your ID card called “How to Use Your Vision Care Benefits.” Scroll to the bottom of this document. A toolbar will appear; click on the printer icon to print.

[UnitedHealthcare Vision Customer Service: (800) 638-3120](tel:(800)638-3120)

Flexible Spending Accounts (FSA)
If you are newly enrolled in a FSA, you should receive your new debit card by Jan. 1, 2016. If you enrolled in both health care and dependent day care accounts, you will receive only one debit card; the debit card will reflect both accounts.

Please be sure to sign, activate, and get a Personal Identification Number (PIN) for your debit card. You can activate your card and get a PIN by calling the number on the label on the front of the card.

You will receive one debit card in the mail. To request additional debit cards for your dependents at no additional charge please visit [www.payflex.com](http://www.payflex.com).

2015 FSA participants will not receive a new debit card. Debit cards have an expiration date; PayFlex issues new debit cards 30 days prior to expiration. If you did not elect a FSA for 2016, your debit card(s) will be deactivated the third week of January 2016. Paper claims need to be submitted by April 30, 2016, for healthcare expenses incurred during the grace period between Jan. 1, 2015, and March 15, 2016.

If you elected a FSA for 2016, your 2016 annual election will be front-loaded to your existing debit card (if you were enrolled during 2015). If newly enrolled, you should receive your new debit card by Jan. 1, 2016. Participants can review account balances, claims activity (for 2015 health care grace period and plan year 2016) and request either a replacement or additional debit cards for yourself and eligible dependents at [www.payflex.com](http://www.payflex.com).
Participants must be registered with PayFlex in order to access their online account by going to www.payflex.com

Step 1: Click on, “EMPLOYEE ACCOUNT LOGIN” (upper left corner of web page)
Step 2: Click on, “REGISTER”
Step 3: Enter “Member ID” (This is your GWID number without the G)
Step 4: Enter “Zip Code” (This is your W-4 address zip code.)
Step 5: Click on “Register”

Don’t recall your GWID? Click Here: http://gwid.gwu.edu

Please contact PayFlex for assistance with registration or password resets at (800) 284-4885.

Please follow the steps below if you wish to file a Paper Claim Reimbursement:

Step 1: Complete a Flexible Spending Account Claim Form click here. You may request reimbursement for health and dependent day care expenses on the same form.
Step 2: Attach copies of your itemized receipts or an Explanation of Benefits from the insurer for the expenses. Important: You cannot be reimbursed if receipts do not accompany the request. Cancelled checks do not qualify as receipts.
Step 3: Receipts for dependent day care expenses must include a written statement from the provider stating that the dependent day care expense has been incurred, the amount of the expense, and the tax ID number of the day care provider. Your dependent day care provider’s signature must be on the statement.
Step 4: Sign and date the form.
Step 5: Mail to: PayFlex Systems USA, Inc.
                   P.O. Box 3039
                   Omaha, NE 68103-3039
                   Or fax to: (402) 231-4310
                   Or On-line: http://www.payflex.com

PayFlex FSA Claim Form: click here

PayFlex Customer Service: (800) 284-4885 / Available Monday - Friday, 8 a.m. – 8 p.m. (EST) and Saturday, 10 a.m. – 3 p.m. (EST).

2015 Flexible Spending Account Reminder:

Health Care FSA: 2015 FSA expenses for your health care account need to be incurred no later than March 15, 2016. Per IRS regulations, unclaimed funds are required to be forfeited to the plan. The deadline to submit eligible claims from Jan. 1, 2015 – March 15, 2016, is April 30, 2016.

Dependent Day Care FSA: 2015 FSA expenses for your dependent day care account need to be incurred no later than Dec. 31, 2015. Per IRS regulations, unclaimed funds are required to be forfeited to the plan. The deadline to submit eligible claims Jan. 1, 2015 – Dec. 31, 2015, is April 30, 2016.

Important: Claims for 2015 FSA expenses submitted to PayFlex after April 30, 2016 will be considered ineligible.

Health Savings Account (HSA) (For Choice Plus-HDHP Participants Only)

Choice Plus-HDHP participants that elect the HSA will receive a debit card following account activation. Participants can manage their HSA on payflex.com including the scheduling of automatic payments and linking to other bank accounts.

Step 1: Go to www.payflex.com; select “Employee Account Login”.
Step 2: Enter your username and password. Click “Login.”
First-Time Users: If you are new to PayFlex click on “Register Now.” Enter your Member ID. (This is your GWID number without the G). Enter your zip code. Click “Register.” Create a username and password. Re-enter your password to confirm. Select a security question and answer. Enter your email address. Click “Confirm”.

Activating your HSA:

As an HSA accountholder you will have to agree to the online account terms and conditions. You will also have to provide the following information.

A- Email address
B- Health plan information – start date, coverage type, and deductible amount
C- Beneficiary information – names, addresses, and Social Security numbers
D- Personal account information – to link your HSA to a personal bank account for free deposits and withdrawals.

You will be receiving a letter from PayFlex via mail with information on how to activate your HSA. Please be sure to respond timely to ensure your account can be opened quickly.

IMPORTANT: If you have a healthcare flexible spending account (HCFSA) for 2015 and you have funds left in this account as of Dec. 31, 2015, they will carryover and be available during the FSA grace period which ends on March 15, 2016. Your HSA will be effective on April 1, 2016*. Please visit Pay Flex’s website for up to date HCFSA balance and claims status. (Under the plan, participants are not eligible to have an active HSA and HCFSA at the same time.) If you wish to have your HSA begin as of Jan. 1, 2016, please be sure to use all funds in your HCFSA (your balance must be zero) by Dec. 31, 2015. If you have questions regarding your current HCFSA please contact PayFlex at (800) 284-4885 or access your online account at www.payflex.com.

* If you have claims pending substantiation as of Dec. 31, 2015 (even if your HCFSA balance is zero), your HSA will also be effective on April 1, 2016.

Legal Resources

If you are newly enrolled in the Legal Resources plan, you should receive a membership card by Jan. 1, 2016 which includes your law firm’s name and telephone number. You may then call your law firm directly with all of your legal needs with no restrictions on usage. If you would like to change your law firm, call Member Services at 800-728-5768.

Questions? Call Member Services at 800-728-5768 or go to http://www.legalresources.com

Please Review Your Paycheck

Although Open Enrollment for 2016 has closed, the last step in this process is for you to review your first paycheck in 2016 to make sure your 2016 benefit elections are accurate. After Jan. 1, 2016, please refer to your most current benefit confirmation statement to verify the deductions reported on your paycheck. You can access a copy of your confirmation statement by visiting www.benedetails.gwu.edu

* Please note that you will not be able to make any changes to the 2016 elections documented on your confirmation statement unless you have a qualifying life event.

Health and Welfare Plan Questions?

If you have any questions regarding your health and welfare plans, contributions or eligibility, please contact our benefits call center at 888-4GWUBEN (449-8236).
Health Advocacy Service

Are you struggling to untangle your current medical bills? Are you looking for a specialist physician?

Health Advocate, the nation’s leading independent healthcare advocacy and assistance company, is a special benefit paid for by GW that can help you personally resolve your healthcare and insurance issues, promptly and reliably. Health Advocate is designed to help cut through the barriers that often create frustration and problems.

The program offerings include personal health advocates to help you navigate the healthcare system, provide assistance with resolving insurance claims and/or billing issues, and support you in making choices concerning your health.

This benefit is available to you, your spouse/domestic partner, dependents, parents, parents-in-law and even your spouse’s or domestic partner’s parents at no cost to you. You do not need to participate in a GW health plan to be eligible.

Calls are unlimited and the service is available 24/7. Just call (866) 695-8622.

Work-Life Benefits

GW Wellbeing Hotline provides you with a number of benefits to support your efforts to balance your work and personal life. Work-life benefits include child and elder care referral services, in-person counseling, assistance with everyday needs or unexpected emergencies, financial and legal support, and back-up child care. You also have access to employee discounts, wellness programs, and a variety of other resources.

To learn more about your work-life benefits and the GW Wellbeing Hotline, visit the Colonial Community website at: http://hr.gwu.edu/colonial-community.

Smoking Cessation Benefit

GW has partnered with Alere Wellbeing to offer free telephonic coaching and up to eight weeks of over-the-counter nicotine replacement therapy (patch or gum) at no cost to you. This benefit is available to all GW employees and their adult household members. Alere’s Quit For Life® Program is the nation’s leading tobacco cessation program. It can help you or an eligible dependent permanently overcome the physical, psychological, and behavioral addictions to tobacco through expert coaching and support. You may qualify for nicotine replacement therapy. The program is free and confidential.

Call 1-866-QUIT-4-LIFE (1-866-784-8454), or go to smokefree.gwu.edu

Healthy Pregnancy Program

GW’s Healthy Pregnancy Program provides expectant mothers participating in UnitedHealthcare medical plans with 24-hour access to experienced nurses and one-on-one support throughout the pregnancy. In addition, those enrolling will have the opportunity to receive up to $250 in financial incentives for participation, plus free gifts and valuable resources to promote a healthy pregnancy for both mom and baby. The program is also open to spouses or partners if they are on a GW health plan. To learn more about this program and all the resources available to new and expecting parents, visit http://hr.gwu.edu/gws-healthy-pregnancy-program
GW Retirement Plans

The Internal Revenue Service has announced that the dollar limitations for retirement plans for the 2016 calendar year will not change. The dollar limitations for 2015 and 2016 are listed below:

<table>
<thead>
<tr>
<th>Limitation</th>
<th>2015 Amount</th>
<th>2016 Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maximum annual compensation taken into account for contributions to a qualified plan</td>
<td>$265,000</td>
<td>$265,000</td>
</tr>
<tr>
<td>Basic elective deferral limitations for the 403(b) and 457(b) plans</td>
<td>$18,000</td>
<td>$18,000</td>
</tr>
<tr>
<td>Catch-up contribution limits for individuals aged 50 and older for the 403(b) plan only</td>
<td>$6,000</td>
<td>$6,000</td>
</tr>
</tbody>
</table>

As you plan for the next calendar year, please take time to review your current retirement plan elections. If you decide to make any changes, visit [http://benefits.gwu.edu/retirement-savings-enrollment](http://benefits.gwu.edu/retirement-savings-enrollment).

You can change the percentage you contribute from your paycheck, change your investment elections or your investment provider, at any time during the year. Please note that any changes to the percentage you contribute from your paycheck are generally effective the following pay period.

Mobile Applications

Your retirement vendors offer applications for your mobile devices, allowing you to access your accounts whenever and wherever you want. Download apps for your Apple or Android devices using the links below:

Fidelity Mobile Apps: [https://www.fidelity.com/mobile/overview](https://www.fidelity.com/mobile/overview)


Retirement Savings Questions?

Retirement consultants from Fidelity and TIAA-CREF are available to assist you with enrollment and investment selection. To speak with a Fidelity representative, call 800-343-0860; to speak to a TIAA-CREF representative call 800-842-2776.

If you have any questions or concerns regarding the information above, please contact GW Benefits Administration at 571-553-8382, or email [benefits@gwu.edu](mailto:benefits@gwu.edu).