OPEN ENROLLMENT

Make your elections January 17-February 8, 2023
Your elections take effect March 1, 2023

Open enrollment is your annual opportunity to review your current benefit elections and make any enrollment changes. It's also a time to review your beneficiary designations for the Life and Accident Insurance plans.

What do I need to do during open enrollment?
- Log on to **Oracle Alyeska Employee Self Service** for Medical, Dental and/or FSA.
  - Review current elections, verify covered dependent(s), and update if necessary.
  - Evaluate FSA enrollment. **FSAs require re-enrollment every year.**
  - Review your personal information and emergency contacts.
- Log onto MetLife website for Life and Accident Insurance.
  - Review or change your current elections and make any beneficiary updates at **https://boonchapman.benselect.com/alyeska**
  - Log in with your Alyeska employee ID and your PIN (last four digits of your SSN followed by the last two digits of your date of birth.)
  - Proceed through all the screens by pressing "next" and electronically sign for any changes using the PIN number from your log in.

Note: If you take no action, you will remain in your current medical, dental and/or MetLife elections and will not participate in an FSA for 2023 unless you have a qualifying life event.

As a participant in Alyeska Pipeline Service Company's health plans, your actions and use of the health plan directly affect the rates and coverage. You have tools to help you become a better consumer while getting the benefits to keep you healthy. Keep reading on what you can do to contain costs.

Medical & Dental Plan: To assist employees with the high rate of inflation and general increased costs, Alyeska has made the decision to not have a rate increase for the 2023 plan year. While the overall cost of the plan has increased, your bi-weekly health care premiums will remain the same. It is critical we work hard this year to contain health plan costs. Stability of health care premiums is only possible with your disciplined and active participation. Here are ways we can all contain cost that can benefit you and the plan, too.
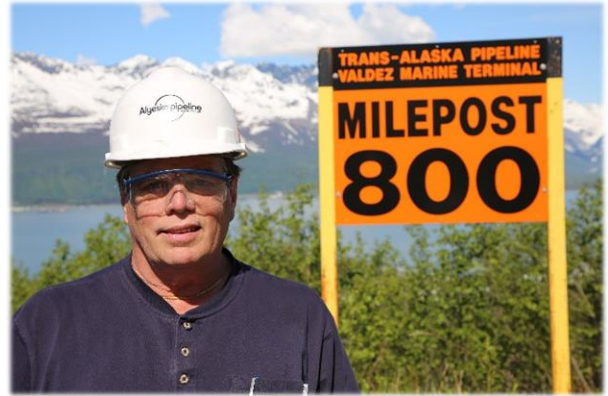
◈ [Log in to ditch the paper!](#) Read your Explanation of Benefits (EOB) online. Premera BCBS will send you an email when a new EOB is available to view. Log on and change your preference to **Paperless EOB**.

◈ **Optavise** (previously called Direct Path) is your Benefit Advocate **1-800-548-7714**. Call to get a cost comparison prior to having a medical procedure. Talk with the nurse regarding your health and ask questions regarding options for treatment. Have your advocate assist you with getting the prior approval needed for medical travel. Your advocate is there to help save you time, frustration, and money!

◈ A **Center of Excellence (COE)** is in Seattle and now in Anchorage, too! A COE provides specialty medical services such as total joint replacements (knee and hip), spine surgery, and certain gynecological procedures. A pre-approved procedure performed at a COE will waive your cost share (deductible and copay) and may cover airfare, hotel, and transportation of either out-of-state or in-state. Currently, the Anchorage COE is only for knee and hip total joint replacement.

◈ The **Elective Procedure Travel** program reimburses approved costs such as airfare, hotel, and car rental when you travel outside Alaska for an eligible medical procedure. Premera BCBS pre-approval is required; call (800) 508-4722 to inquire and get started.

◈ Many participants have discovered using **telemedicine** for access to a doctor, or a physical and mental therapist, and as a great way to save money and time. You have choices when it comes to how you want to access virtual care – text, video, phone or chat. Telemedicine providers are available as follows:
    o **Doctor on Demand** video or phone-based care for general medicine 24/7
    o **myCare Alaska** mobile texting platform for general medicine 24/7
    o **Talkspace** online therapy with licensed clinician for mental health needs
    o **Omada** virtual care physical therapy to provide rehabilitation with convenience
    o Get all the Virtual Care options with the **Premera MyCare App!**

Flexible Spending Account (FSA): Health Care FSA (HCFSA) and Dependent Care FSA (DCFSA) can save you money because of the pre-tax deduction. The 2023 HCFSA annual limit increases to $3,050 per employee and the DCFSA remains $5,000 per family. DCFSA is designed for childcare or adult care expenses that are necessary to allow you to work (e.g., daycare, in-home sitting, camp fees). Contact Peak One Administration if you have questions on FSAs, eligible expenses, and how to make claim.

GET THE APPS! After you have a member log on at www.premera.com, sign on with the app to have card, network, nurse hotline and more access right from your phone. Premera app and MyCare (virtual care) app are available from Apple Store and Google Play.

Women's Health and Cancer Rights Act October 1998, Congress enacted the Women's Health and Cancer Rights Act. This act requires group health plans that provide coverage for a mastectomy and provide coverage for breast reconstruction, including surgery, reconstruction for symmetrical purposes, prostheses, and treatment of physical complications of all stages of mastectomy, including lymphedema. The act requires we notify you about the law's provisions.

Preferred Provider Network Since Preferred Provider status is subject to change at any time, it is important to confirm the status of a provider before services are rendered. For the most current information on Preferred and Participating Providers in Alaska and Washington, please refer to www.premera.com, access the

Premera BCBS mobile app, or contact Premera BCBS Customer Service at 1-800-508-4722. If you are outside Alaska or Washington, call 1-800-810-BLUE (2583) to locate a Preferred Provider.

Using Preventative Benefits For those enrolled in the medical plan, click here for current Preventative coverage listing.

Contact Information

VENDOR / BENEFIT	PHONE NUMBER	WEBSITE
Optavise- Benefit Advocacy Formerly Direct Path	1-877-548-7714	advocate@optavise.com
Premera BCBS- Medical and Dental	1-800-508-4722 Premera 1-800-841-8343 NurseLine 1-800-364-2994 Travel	www.premera.com
Peak One Administration- FSA	1-866-315-1777	https://peak1.wealthcareportal.com/Authentication/Handshake
Express Scripts- Rx coverage	1-800-391-9701	www.express-scripts.com
MetLife- Term Life and Voluntary Insurance	1-800-GET-MET8	https://boonchapman.benselect.com/alyeska
Oracle HR Self Service- Healthcare Elections	Password resets online	Go to **A-Net** then **Applications/Oracle EBS**

This open enrollment guide is designed to highlight your 2023 health plan benefits. For more detailed information about your benefits, including covered expenses, exclusions and limitations, refer to the individual summary plan descriptions (SPDs), summary of benefit coverage (SBC), plan documents, full rate sheets and dependent eligibility guidelines. The official documents are available on A-Net and from computers outside of Alyeska at https://www.alyeska-pipe.com/employees-and-retirees. You may request a paper copy of any document from Dena Thomas at (907) 787-8110 or CompensationBenefits@alyeska-pipeline.com.

This document describes certain processes and provisions of Alyeska Pipeline Service Company. Nothing contained in this communication is a contract for employment or a promise to provide benefits. Alyeska reserves the right to amend or terminate the plans at any time and for any reason. In the event there is a conflict between the terms of this document and the governing plan document, the governing plan document shall control.

DirectPath is becoming Optavise. It's a new name for the same great Advocacy service.

THAT FEELING WHEN
YOU SAVE MONEY

Call your Advocate for ways to save!

Your Advocate can:

- Find lower-cost options for tests and procedures

- Save you money on prescription drugs

- Review your medical bill for errors

- Find an in-network doctor

- Appeal a denied claim

Call your Advocate for any benefits or health care question throughout the year!

Advocacy is completely confidential and provided as part of your benefits program at no cost to you.

advocate@directpathhealth.com

M–F: 7 a.m. – 8 p.m. CT

SAT: 8 a.m. – 1 p.m. CT