

2027 Open Enrollment Presentation

November 2026

Sacred Heart UNIVERSITY

CONNER STRONG & BUCKELEW

2027 Open Enrollment



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Open Enrollment Important Information

- Open Enrollment Window: November 1st to November 15th
- Plan effective date: ***January 1st, 2027***
- Active Enrollment – Sacred Heart will be holding an **ACTIVE** Open Enrollment this year, which means your elections from 2026 will not automatically roll over into 2027
  - **You will be required to re-enroll in benefits to maintain coverage**
- During Open Enrollment, you can make the following changes:
  - Change your plan election (this applies for all benefits, including medical, dental, vision, HSA, FSA, etc.)
  - Change your coverage tier (i.e. Employee, Employee + Spouse, Employee + Child(ren), or Family coverage)
  - Add/remove dependents
  - If you are not currently enrolled and would like to enroll for 2027
  - If you are currently enrolled in coverage but would like to waive for 2027
- Once you have made your elections, you will not be able to change them until the next Open Enrollment period, unless you experience a qualifying life event
- All open enrollment information can be found on Sacred Heart's benefit site: https://www.shubenefits.com/

2027 Open Enrollment Highlights

- **Medical Plan Design Changes:**
  - Both Plans: In-network out-of-pocket maximum will now be $4,000/$7,500 (single/family)
  - Both Plans: Removal of In-network and Out-of-network Deductible and out-of-pocket maximum cross accumulation
- **Prescription Drug Plan Design Changes:** Apply to both plans
  - All drug copays will increase $5 per tier for both the Copay & HDHP plans
  - New Specialty Rx tier is being added with a $100 copay
- **Employee Contributions**
  - Medical/Rx: Contributions will be increasing by 9.5%, contribution amounts will continue to be based on each employee's salary band, medical plan selection, and coverage tier. Employees are encouraged to review the 2027 Open Enrollment Guide for detailed contribution rates and specific payroll deduction amounts applicable to their salary band and selected coverage level
  - Dental & Vision: Remaining the same
- Life and Disability:
  - New York Life will be replacing Mutual of Omaha as our new carrier partner

II.

2027 Medical/Rx Plans & Cigna Programs



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*after combined medical/pharmacy deductible is satisfied
** after pharmacy deductible is satisfied

2027 Medical/Rx Plan Designs

	Copay Plan		HDHP Plan	
Cigna Network	**Open Access Plus, OA Plus, Choice Fund OA Plus (OAP) Network**			
In-Network Benefits	**In-Network**	**Out-of-Network**	**In-Network**	**Out-of-Network**
In-Network Deductible (Single/Family)	$750/$1,500	$2,000/$4,000	$2,500/$5,000	$4,000/$8,000
Health Savings Account Employer Contribution	Not applicable		$1,000/$2,000	
Coinsurance	80%/20%	60%/40%	80%/20%	60%/40%
Out-of-Pocket Maximum (Single/Family)	$4,000/$7,500	$7,000/$13,700	$4,000/$7,500	$7,000/$13,700
Preventive	Plan pays 100% No copay	Plan pays 60%*	Plan pays 100% No Coins	Plan pays 60%*
PCP Visit	$30 copay	Plan pays 60%*	Plan pays 80%*	Plan pays 60%*
Specialist Visit	$40 copay	Plan pays 60%*	Plan pays 80%*	Plan pays 60%*
Diagnostic Lab/X-ray	Plan pays 80%*	Plan pays 60%*	Plan pays 80%*	Plan pays 60%*
Advanced Imaging	Plan pays 80%*	Plan pays 60%*	Plan pays 80%*	Plan pays 60%*
Telemedicine	$30 copay	Plan pays 60%*	Plan pays 80%*	Plan pays 60%*
Urgent Care	$40 copay	Plan pays 60%*	Plan pays 80%*	Plan pays 60%*
Inpatient Hospital	Plan pays 80%*	Plan pays 60%*	Plan pays 80%*	Plan pays 60%*
Outpatient Surgery	Plan pays 80%*	Plan pays 60%*	Plan pays 80%*	Plan pays 60%*
Emergency Room	$200 copay	Plan pays 60%*	Plan pays 80%*	Plan pays 60%*
Prescription Drug Benefits				
Formulary	**Cigna National Preferred 4-Tier**			
Deductible	$100/$200		N/A	
Retail (up to 30-day supply)				
Generic	$20 copay**	Plan pays 60%**	$20 copay*	Plan pays 60%*
Preferred Brand	$35 copay**	Plan pays 60%**	$35 copay*	Plan pays 60%*
Non-Preferred Brand	$50 copay **	Plan pays 60%**	$50 copay *	Plan pays 60%*
Specialty	$100 copay**	Plan pays 60%**	$100 copay*	Plan pays 60%*
Mail Order (up to 90-day supply)				
Generic	$40 copay**	Not covered	$40 copay*	Not covered
Preferred Brand	$70 copay**	Not covered	$70 copay*	Not covered
Non-Preferred Brand	$100 copay **	Not covered	$100 copay *	Not covered
Specialty	$100 copay **	Not covered	$100 copay *	Not covered

Cigna One Guide

Cigna One Guide® helps you make informed choices and get the most from your plan, offering personalized support to help you stay healthy and save money.

During enrollment, we're just a call away to help:

- Answer questions about the basics of coverage for medical plans and products as well as Cigna Healthcare® pharmacy
- Identify the types of health plans available to you to help you choose the one that best meets your needs
- Find out if your doctors are in-network to help you avoid unnecessary costs
- Get answers to any other questions you may have about the plans or provider networks available to you



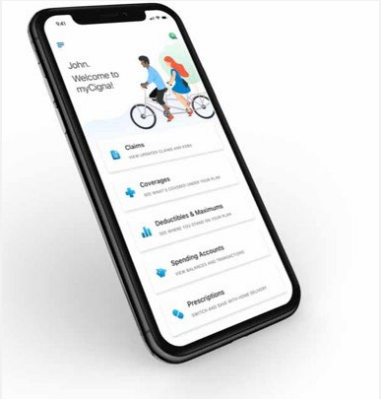
How to Contact:

- Call 888.806.5042
- Visit: myCigna.com
- Utilize My Cigna App

myCigna.com

- Your online home for assessment tools, plan management, medical updates and much more:

  - Find in-network doctors, dentists and medical services
  - View, print and email ID cards
  - Review your coverage
  - Manage and track claims, account balances and deductibles
  - Compare cost and quality information for doctors and hospitals
  - Access a variety of health and wellness tools and resources
  - Receive alerts when new plan documents are available
  - Manage your home delivery prescription orders[2] or talk with a pharmacist
  - Use the Price a Medication feature to explore medication costs[3]



Download the **myCigna®** app and access your account.[1]

For illustrative purposes only.

1. App/online store terms and mobile phone carrier/data charges apply. Actual myCigna® features may vary depending on your plan and individual security profile.
2. Not all plans include home delivery as a covered pharmacy option. Please log in to the myCigna® app or website, or check your plan materials, to learn more about the pharmacies in your plan's network.
3. Prices shown on myCigna® are not guaranteed and coverage is subject to your plan terms and conditions. Visit myCigna® for more information.

Digital ID Cards

Enjoy easy, secure access to your ID cards.

No longer worry about misplacing your ID. Simply log in to myCigna.com® mobile app or website to view your digital ID card.[1]

Getting your digital ID card is easy!

- Log in to myCigna® website or app.
- Click or tap “ID Cards.”
- View your card(s) and the cards of any dependents.[2]

You can **show** your digital ID card on your phone screen, **print** it or **email** it to your doctor’s office.



1. Customers under age 13 (and/or their parent/guardian) will not be able to register at myCigna.com.

Medical Network: Open Access Plus (OAP)

Primary Care Provider: A primary care provider (PCP) is recommended but not required

Specialist: You can see a specialist without a referral

Network: Lower costs by using providers and health care facilities in the OAP network

- Use the Cigna Healthcare℠ network of providers, health care facilities, labs, x-ray and radiology centers, as well as emergency care

Deductible: You may pay an annual amount — a deductible — before your health plan begins to pay for covered health care costs.[1] Only services covered by the health plan count toward the deductible

Copay and co-insurance: Once you meet your deductible, you will pay a portion of covered health care costs and the plan pays the rest[2]

Out-of-pocket maximum: Once you meet an annual limit on your payments — out-of-pocket maximum — your plan pays 100% of covered costs



Plans may vary; see your employer's plan documents for details related to your specific medical plan. Coinsurance is what you pay for covered services after you've met your deductibles. It does not include charges for services not covered by your plan. If you use an out-of-network provider, your expenses may be more than the coinsurance amount shown because the out-of-network provider can bill you for charges that are more than what your benefit plan will pay.

Telemedicine-MD Live

Cigna Healthcare has partnered with MDLIVE® to offer a comprehensive suite of convenient virtual care options — available by phone or video whenever it works for you.

Primary Care

Preventive care, routine care and specialist referrals

- Preventive care checkups/ wellness screenings available at no additional cost[2]
- Prescriptions available through home delivery or at local pharmacies, if appropriate
- Receive orders for biometrics, blood work and screenings at local facilities[3]

Behavioral Care

Talk therapy and psychiatry from the privacy of home

- Access to psychiatrists and therapists
- Schedule an appointment that works for you
- Option to select the same provider for every session
- Care for issues such as anxiety, stress, grief and depression

Urgent Care

On-demand care for minor medical conditions

- On-demand 24/7/365, including holidays
- Care for hundreds of minor medical conditions
- A convenient and affordable alternative to urgent care centers and the ER
- Prescriptions available, if appropriate

Dermatology[4]

Fast, customized care for skin, hair and nail conditions — no appointment required

- Board-certified dermatologists review pictures and symptoms
- Care for common skin, hair and nail conditions including acne, eczema, psoriasis, rosacea, suspicious spots and more
- Diagnosis and customized treatment plan, usually within 24 hours

1. Cigna Healthcare provides access to virtual care through national telehealth providers as part of your plan. This service is separate from your health plan's network and may not be available in all areas or under all plans. Referrals are not required. Video may not be available in all areas or with all providers. Not all preventive care services are covered, refer to plan documents for complete description of virtual care services and costs. Virtual primary care through MDLIVE is only available for Cigna Healthcare medical members aged 18 and older.
2. For customers who have a non-zero preventive care benefit, MDLIVE virtual wellness screenings will not cost $0 and will follow their preventive benefit.
3. Limited to labs contracted with MDLIVE for virtual wellness screenings.
4. Virtual dermatological visits through MDLIVE are completed via asynchronous messaging. Diagnoses requiring testing cannot be confirmed. Customers will be referred to seek in-person care. Treatment plans will be completed within a maximum of 3 business days, but usually within 24 hours.

Cigna Healthy Pregnancies, Healthy Babies®

Enroll in Healthy Pregnancies, Healthy Babies to get the education, guidance and support of a dedicated team during your special journey.Our maternity specialists will reach out to you during and after your pregnancy to support you along the way, answer any questions, offer screenings for post-partum depression and much more.

- Get ongoing support from a maternity specialist with nursing experience
- Download a guide with information, tools and resources
- Get support from our dedicated condolence team if you suffer the loss of a baby
- Order complementary breast pumps and access virtual lactation network at no cost to you

Enrolling in the program is easy and at no cost to you. Just call 800.615.2906 or sign up through the Cigna Healthy Pregnancy® app.[2]

1. Incentive paid after completion of post-partum call. Reward eligibility and type may vary based on plan offering. Incentive awards may be subject to tax; you are responsible for any applicable taxes.
2. The app is for educational purposes only. Medical advice isn't provided. Don't use information in this app to diagnose yourself. Always check with your health care provider for information about examinations, treatment, testing, and care recommendations. In an emergency, dial 911 or visit the nearest emergency room. App/online store terms and mobile phone carrier/data charges apply.

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Take Control of Your Health and Your Health Costs

Here are a few easy ways to save on out-of-pocket health care expenses:



Stay with in-network providers and facilities



Visit an urgent care center instead of the hospital Emergency Room for non-life-threatening health concerns



Use a convenience care clinic (inside supermarkets, pharmacies and other retail stores) for routine care



Access virtual care[1] through MDLIVE® 24/7 for a range of minor conditions

1. Cigna Healthcare provides access to virtual care through national telehealth providers as part of your plan. This service is separate from your health plan's network and may not be available in all areas or under all plans. Referrals are not required. Video may not be available in all areas or with all providers. Refer to plan documents for complete description of virtual care services and costs. Virtual primary care through MDLIVE is only available for Cigna Healthcare medical members aged 18 and older.
2. This information is for educational purposes only. It is not medical advice. Always consult your doctor for examinations, treatment, testing and care recommendations. In an emergency, dial 911 or visit the nearest emergency room.

The Medical Claims Process



You visit an in-network doctor/hospital/ facility

Cigna Healthcare receives and processes the claim

Your claims are forwarded to the bank

You can elect to have all or some of your claims paid directly from your HSA

If not, you have the option to pay the doctor bill using out of pocket funds

Cigna sends an explanation of benefits (EOB) as your receipt

Manage your communication settings (i.e., mail or email) on the myCigna® app[1] or website

Build an on-demand health statement at myCigna

1. App/online store terms and mobile phone carrier/data charges apply.

Your Pharmacy Plan Options- National Preferred Four Tier Formulary

Cigna



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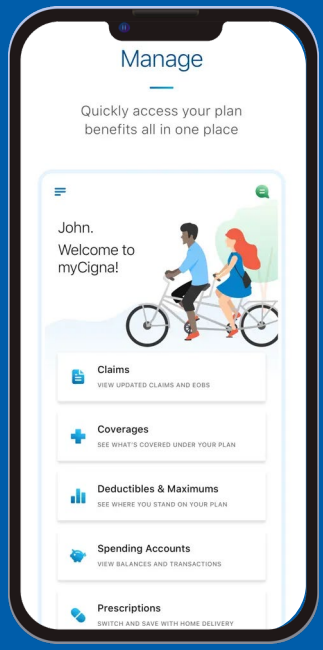
Use the myCigna® App[1] or Website – 24/7

Manage all your prescriptions on the My Medications page

- See which medications your plan covers
- Price a medication[2]
- Search for lower-cost alternatives, if available
- View all the prescriptions you've filled in the last 18 months
- Find an in-network pharmacy
- Ask a pharmacist a question
- Switch a prescription from a retail pharmacy to our home delivery pharmacy

For home delivery prescriptions:

- Refill and track your orders
- Pay your bill online
- Sign up for automatic refills
- Request a payment plan
- For specialty medications, connect to your online Accredo® account



For illustrative purposes only.

1. App/online store terms and mobile phone carrier/data charges apply.
2. Prices shown on myCigna are not a guarantee. Coverage falls under your plan terms and conditions. Visit myCigna for more information.

Save a Trip With Home Delivery

Order, manage, track and pay for medications on your phone or online

Standard shipping at **no extra cost**[1]

Fill up to a **90-day supply** at one time[2]

Automatic refills[3] or refill reminders so you don't miss a dose

Helpful pharmacists available 24/7

Flexible payment options

To learn more about Express Scripts® Pharmacy,
go to **Cigna.com/homedelivery** or call **800.835.3784**

1. Standard shipping costs are included as part of your prescription plan.
2. Some medications aren't available in a 90-day supply and may only be packaged in lesser amounts. For example, three packages of oral contraceptives equal an 84-day supply. Even though it's not a "90-day supply," it's still considered a 90-day prescription.
3. Express Scripts Pharmacy can automatically refill certain medications. You can sign up for the automatic refill program when you call. Or, you can log in to the myCigna App or website to sign up on your own. The downloading and use of the myCigna mobile app is subject to the terms and conditions of the App and the online store from which it is downloaded. Standard mobile phone carrier and data usage charges apply.

Help With Your Medications

Talk with a pharmacist from the privacy – and comfort – of your own home.

As part of your pharmacy plan, you can talk with a licensed, specially trained pharmacist from Express Scripts®. They'll help you
stay on track with your medication routine.

- Find ways to save on your medication
- Better understand how your medication works and how it helps keep you healthy
- Learn how to work through side effects
- Get tips to help you remember to take your medication
- See how you can make refills easier



Choose the Pharmacy That Works Best for You

Retail pharmacies

There are thousands of retail pharmacies in your plan's network.

- Local independent pharmacies
- Grocery stores
- Retail chains

You can fill:

- 90-day prescriptions at select participating pharmacies
- 30-day prescriptions at all participating pharmacies

Home delivery with Express Scripts® Pharmacy

Home delivery is simple and safe – and saves you trips to the pharmacy.

- Easily order, manage, track, and pay for your medications **on your phone or online**
- Standard shipping at **no extra cost**[1]
- Fill up to a **90-day supply** at one time
- **Helpful pharmacists** available 24/7
- **Automatic refills** or refill reminders so you don't miss a dose
- **Flexible** payment options

1. Standard shipping costs are included as part of your prescription plan.

Behavioral Health Support

Cigna



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Cigna Total Behavioral Health® (CTBH)[1] and EAP

- **Large, national network**
  Includes national virtual network[2] that features Talkspace, MDLIVE, Headspace Care, and more. Online scheduling and text messaging. Appointment availability often in as little as two days.[3] Appointment scheduling assistance provided.

- **Care Navigators**
  Special Care Navigators are available to support you with all your behavioral health needs, from matching to the right therapist to feeling better, and more.

- **In-the-moment clinical consultations**
  Speak with a clinician by phone 24/7/365. Connect directly with a licensed clinician for an unlimited number of 45-60 minute sessions for an evaluation, or to discuss your concerns, whenever you need to.

- **Employee Assistance Program (EAP)**
  Up to 6 sessions per issue with a licensed clinician in the EAP Network.[4] Virtual behavioral care options let you connect with a counselor on your phone, tablet, or home computer. Online, on-demand seminars, referrals, and community resources to encourage work/life balance.

- **Coaching and support**
  Dedicated support for a broad range of conditions including autism, eating disorders, intensive behavioral case management, substance use, opioid and pain management, and parents and families.

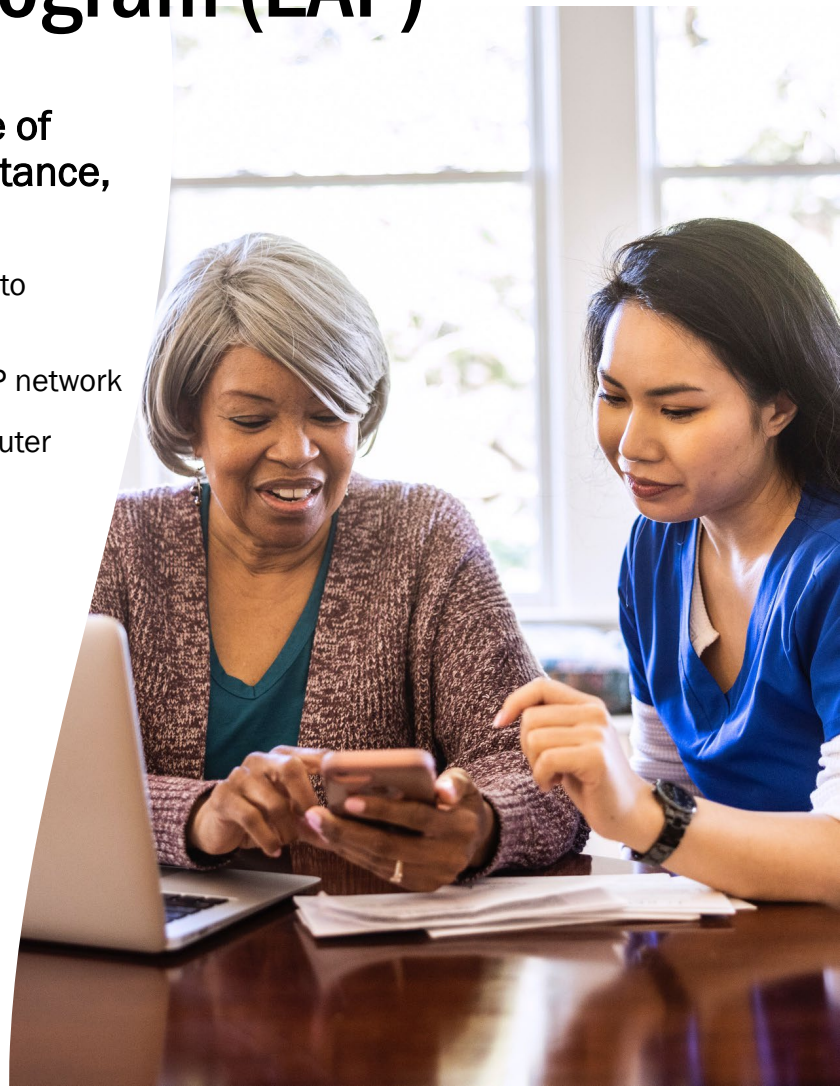
- **24/7/365 crisis and emergency support**

1. All Cigna Healthcare products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Evernorth Care Solutions, Inc., and Evernorth Behavioral Health, Inc. Use and distribution limited solely to authorized personnel.
2. Cigna Healthcare provides access to virtual care through national telehealth providers as part of your plan. This service is separate from your health plan's network and all services may not be available in all areas; subject to state regulations. Referrals are not required. Video may not be available in all areas or with all providers. Refer to plan documents for complete description of virtual care services and costs.
3. Employee assistance program services are in addition to, not instead of, your health plan benefits. These services are separate from your health plan benefits and do not provide reimbursement for financial losses. Customers are required to pay the entire discounted charge for any discounted legal and/or financial services. Legal consultations related to employment matters are excluded. Additional restrictions may apply. Program availability may vary by plan type and location, and are not available where prohibited by law.
4. Employee assistance program services are in addition to, not instead of, your health plan benefits. These services are separate from your health plan benefits and do not provide reimbursement for financial losses. Customers are required to pay the entire discounted charge for any discounted legal and/or financial services. Legal consultations related to employment matters are excluded. Additional restrictions may apply. Program availability may vary by plan type and location, and are not available where prohibited by law.

Employee Assistance Program (EAP)

Cigna Healthcare's EAP can connect you with a range of services, including emotional support, financial assistance, home/life support, and legal assistance.[1]

- Connect over the phone or through live chat, and receive a referral to licensed clinicians and consultants
- Provides 1-6 sessions to connect with licensed clinicians in our EAP network
- Meet with counselors virtually on your phone, tablet or home computer
- Live, on-demand EAP webcasts
- 100% confidential
- Available to anyone in your household
- No additional cost to you



1. Employee assistance program services are in addition to, not instead of, your health plan benefits. These services are separate from your health plan benefits and do not provide reimbursement for financial losses. Customers are required to pay the entire discounted charge for any discounted legal and/or financial services. Legal consultations related to employment matters are excluded. Additional restrictions may apply. Program availability may vary by plan type and location, and are not available where prohibited by law.

Employee Assistance Program

When you're facing challenges — big or small — Employee Assistance Program (EAP)[1] is here to connect you with real people who can help you find real solutions.

Your program also offers a variety of services to help you and your family balance changes at work or in other areas. Call for assistance or a referral to a service in your community, such as:

- Legal consultation or identity theft
- Financial consultation
- Parenting, childcare and adoption assistance
- Convenience services
- Senior care and caregiver support
- Pet care

Online EAP resources and tools are available on **myCigna.com**® for you and your household members, regardless of whether the person is enrolled in your employer's medical plan.

1. Employee assistance program services are in addition to, not instead of, your health plan benefits. These services are separate from your health plan benefits and do not provide reimbursement for financial losses. Customers are required to pay the entire discounted charge for any discounted legal and/or financial services. Legal consultations related to employment matters are excluded. Additional restrictions may apply. Program availability may vary by plan type and location, and are not available where prohibited by law.

Behavioral Health: Supporting Your Needs



Network includes licensed therapists, psychiatrists and psychiatric nurse practitioners, behavioral facilities or programs and more



Appointment availability often in as little as two days.



Virtual care via online appointments with licensed counselors or psychiatrists[1]

1. Cigna Healthcare provides access to virtual care through participating in-network providers. Not all providers have virtual capabilities. Cigna Healthcare also provides access to virtual care through national telehealth providers as part of your plan. This service is separate from your health plan's network and may not be available in all areas.

Cigna Healthcare Lifestyle Management Programs

Our health advocates provide personalized support to help you make lasting changes.

- Weight management: Learn to manage your weight using a non-diet approach that helps you change habits, eat healthier and become more active
- Quit tobacco: Develop a personal quit plan to become — and stay — tobacco-free
- Reduce stress: Understand the sources of your stress and learn coping techniques to better manage it in all areas of your life

Use the telephone coaching program for the support you need.



Headspace

- **Key Benefits**
  - **Support Better Resilience:** Tools to manage stress and signs of burnout
  - **Mental Health & Well-being:** Guided meditations, mindfulness exercises, sleepcasts, focus music, and more
  - **Personalized Recommendations:** Tailored content based on individual needs

- **Exclusive Features**
  - **Ebb – Empathetic AI Companion:**
    - Offers guided self-reflection and emotional check-ins
    - Provides personalized in-app guidance
  - **Clinically Validated Programs:**
    - Evidence-based tools for stress, sleep, anxiety, and burnout
    - CBT (Cognitive Behavioral Therapy) programs for mood and anxiety management

- **Seamless Integration with Cigna Healthcare**
  - **myCigna® Access:**
    - Connect to other Cigna Healthcare benefits
    - Find in-network providers for additional support

- **Proven Results**
  - **Science-backed Impact:**
    - 30 days of Headspace reduced perceived stress by 32%*
    - Tools designed to promote lasting improvements in mental health outcomes

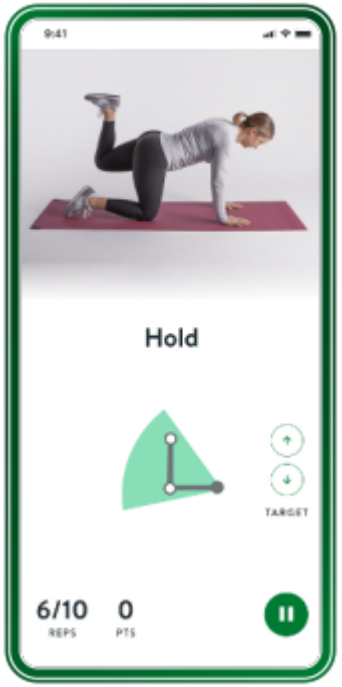
Cigna Healthcare provides insurance coverage. Headspace services are delivered independently of Cigna Healthcare. For medical or mental health emergencies, contact a qualified healthcare professional immediately.

Hello Heart

- Easy-to-use program that helps you track, understand and manage your heart health from the privacy of your own phone
- The Hello Heart program is offered at no cost to eligible members enrolled in the medical plan
- Program Features:
  - Blood pressure, cholesterol, activity and medication tracking technology
  - Instant, clear explanations of what your numbers mean
  - Easy-to-apply personalized tips for maintaining a healthy heart
  - Progress reports that are easy to review or share with your physician
  - Auto-imported lab results from clinics, with personalized explanations
  - Support team available to answer any questions via phone or email
- How to enroll?
  - Employees, spouses and adult dependents (18+) covered by a Cigna medical plan with a blood pressure reading of 130/80 mmHg or above and/or that are taking blood pressure medication are eligible to enroll
  - Text SHU2 to phone number 75706 or visit https://join.helloheart.com/SHU2 to register
- Support:
  - support@helloheart.com or 800-767-3471

Hinge Health

- What is Hinge Health?
  - A digital program to help you manage and reduce musculoskeletal (MSK) pain, improve mobility, and prevent costly surgeries—all from the comfort of your home
- Key Features:
  - Personalized Care Plans: Tailored exercise therapy programs
  - Expert Support: Virtual physical therapists and health coaches
  - Easy-to-Use Technology: Wearable sensors and a mobile app for tracking progress
- Why Use Hinge Health?
  - Reduce pain and improve quality of life
  - Convenient, flexible care—anytime, anywhere
- How to Get Started:
  - Sign up via the Hinge Health app or website
  - Complete an assessment to create your custom plan
  - Start your journey to better MSK health!
- Contact Information
  - 855-902-2777



Utopia Wellcare

- **Functional Nutrition by UtopiaWellCare**
  - Personalized, virtual nutrition plans tailored to your unique needs
  - Say goodbye to brain fog, fatigue, aches, and restrictive diets
  - Focus on sustainable lifestyle changes, not fad diets
- **What is Functional Nutrition?**
  - A holistic approach addressing your body's natural functions
  - Considers your health, diet, and lifestyle to uncover root causes and create personalized solutions
- **What's Included?**
  - **6 FREE virtual appointments per year** with Registered Dietitians
  - Available for you and your dependents—covered under SHU's health benefits plan
- **Get Started Today!**
  - Scan the QR code or visit www.utopiawellcare.com
  - Follow @utopiawellcare for tips and updates

III.

Dental and Vision

Delta Dental & Cigna



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Dental Plan

	Base Plan*		Buy-Up Plan	
Network	Delta Dental PPO	Delta Dental Premier	Delta Dental PPO	Delta Dental Premier
	In-Network	Out of Network	In-Network	Out of Network
Annual Plan Deductible	$50 individual $150 family	$75 individual $225 family	$50 individual $150 family	$75 individual $225 family
Calendar Year Maximum (preventive/diagnostic services are not subject)	$1,000	$700	$2,000	$1,500
Preventive and Diagnostic Services Exams, cleanings, x-rays, sealants	Plan pays 100% no deductible	Plan pays 100% no deductible	Plan pays 100% no deductible	Plan pays 100% no deductible
Basic Services Fillings, root canals, oral surgery	Plan pays 70%** after deductible	Plan pays 50%** after deductible	Plan pays 80%** after deductible	Plan pays 70%** after deductible
Major Services Crowns, Dentures etc.	Plan pays 40%** after deductible	Plan pays 30%** after deductible	Plan pays 50%** after deductible	Plan pays 40%** after deductible
Orthodontia Benefits Child & Adult Orthodontia	Not Covered		Plan pays 50%, NO Deductible	
Orthodontia Lifetime Maximum (Per Patient)	Not Covered		$2,000	

**those enrolled in the university medical plan receive the base plan employee only tier for themselves at no additional cost*

***After deductible*

Carryover Max Feature

- Carryover Max Feature from Delta Dental allows you to carry over a portion of your unused standard annual maximum benefit limit into the next year
- To qualify, you must receive at least one cleaning or one oral exam during the plan year.
  - *If you don't receive a cleaning or exam, you won't be eligible to carry over any of your benefit dollars to the following year. If you fail to do so, any accumulated carryover will be lost.*
- Eligibility: A covered person is eligible for the Carryover Max benefit if less than half of the standard annual maximum is used in the prior benefit year
  - Carryover Max allows you to carry over up to 25% of the unused portion of your standard annual maximum up to a maximum of $500
- Example: $1,000, and you use $200, you can carry over $200 ($800 x 25% = $200)
  - The accumulated amount can never exceed your standard annual maximum.

Vision Plan

- Employees enrolled in the medical plan are automatically enrolled in the vision plan at no additional cost
- If you are not enrolled in the medical plan, you can elect stand-alone vision coverage

	In-Network	Out-of-Network
Exam	$10 copay	Up to $45 Allowance
Frames	$0 copay $200 allowance	Up to $110 Allowance
Lenses Single Bifocal Trifocal Lenticular	$10 copay	Up to $80 Allowance
Contact Lenses	$200 allowance 15% off balance over $200	Up to $160 Allowance
Frequency **Exam, Lenses or Contacts, Frames**	Once per calendar year	Once per calendar year

Why Vision Health Matters

You may go to the eye doctor to get glasses or contact lenses to help you see. But eye exams also give your doctor a view of your health in general.[1] They can reveal the first signs of chronic conditions, including:[1]

- Diabetic retinopathy, a symptom of diabetes
- Heart disease
- High blood pressure
- High cholesterol
- Rheumatoid arthritis
- Stroke
- Vitamin A deficiency



1. American Academy of Ophthalmology. "20 Surprising Health Problems an Eye Exam Can Catch." www.aao.org/eye-health/tips- prevention/surprising-health-conditions-eye-exam-detects. Published Apr. 17, 2025

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Your Vision Network

With vision coverage, you have greater access at more locations. The vision network is the largest in the U.S.[1] and includes:



24,000 independent providers[1]



11,000 retail providers, including LensCrafters®, Pearle Vision®, Target Optical®, Costco Optical©, Walmart Vision Center® and more[1]



Access to online retailers that include LensCrafters.com®, Ray-Ban.com®, Glasses.com®, TargetOptical.com®, contactsdirect.com® and Oakley.com®



Online appointment scheduling[2]

1. The Cigna Healthcare Vision Network is serviced by EyeMed. Number of contracted providers as of July 2023, EyeMed internal reporting. Subject to change.
2. Online scheduling available with select providers.

IV.

Life and Disability

New York Life



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Life/Disability Insurance

- Sacred Heart University provides all benefit eligible employees Basic Term Life and Accidental Death & Dismemberment Insurance at no additional cost
  - Benefit: 1x Basic Annual Earnings to a maximum of $500,000
- Supplemental Voluntary Life: Employees can elect voluntary life insurance at an additional cost for themselves and their eligible spouses/children
  - Employees: 1-3 x salary up to $500,000 in increments of $1,000
  - Spouses: $40,000 benefit amount
  - Children: $10,000 benefit amount
- ***During this open enrollment employees can elect up to $150,000 (guaranteed issue amount) with no evidence of insurability (EOI) needed. Spouses can elect the $40,000 with no EOI needed and Child coverage is always elected with no EOI needed***
- Disability Benefits: Short & Long-Term Disability
  - Short-Term Disability Insurance is provided to all full–time benefits eligible employees of the university at no additional cost
  - Long-Term Disability:
    - Core: all full-time benefits employee automatically receive an LTD benefit of 60% base salary up to $2,500/month at no additional cost
    - Buy-up: employees have the ability to elect an additional LTD benefit on a voluntary basis of 60% base salary up to $7,500/month
      - This year is a special enrollment where the Buy-up plan can be elected with no EOI needed, in future years, EOI will be needed to elect the buy-up plan
- Rates for voluntary life and disability are age-banded and can be found in the enrollment system

V.

Spending Accounts

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Health Savings Account (HSA)

- What is an HSA?
  - A tax-advantaged savings account to help you pay for qualified medical expenses,
  - HSA accounts are only available to those enrolled in the HDHP Plan
- Key Benefits:
  - Triple Tax Advantage:
    - Contributions are pre-tax
    - Earnings grow tax-free
    - Withdrawals for qualified expenses are tax-free
  - Flexibility: Use funds for current or future healthcare costs
  - Portability: The account stays with you, even if you change jobs or retire
  - Investment Opportunities: Grow your savings by investing unused funds
- Contribution Limits for 2027:
  - Individual Coverage: **$4,500**
  - Family Coverage: **$9,000**
  - Catch-Up Contribution (**55+**): Additional **$1,000**
- Eligible Expenses Include:
  - Doctor visits, prescriptions, and lab tests
  - Dental and vision care
  - Medical equipment and more

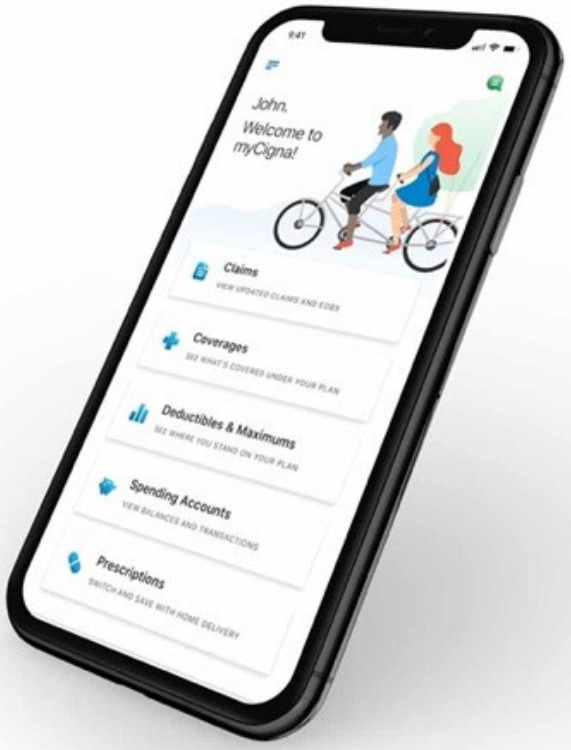
Health Savings Account

- Sacred Heart University Contributions:
  - Employee Only: Up to $1,000/year ($500 in January, $500 in July)
  - Employee + 1/Family: Up to $2,000/year ($1,000 in January, $1,000 in July)
  - Note: University contributions count toward IRS annual limits
- Key Details:
  - Automatic Enrollment: An HSA account will be opened if you enroll in the HDHP plan
  - Investment Option: Invest funds once your HSA balance reaches $1,000

Your HSA Experience on myCigna®

Easy, at-a-glance web and mobile view under Spending Accounts

- Check balances
- Get account updates
- Use the calculator tool to determine your contribution
- Order or cancel debit cards
- Learn about investment options
- Access educational information and videos



Flexible Spending Accounts

- Healthcare FSA
  - A Flexible Spending Account (FSA) allows you to set aside money, on a pre-tax basis, for eligible out-of-pocket medical, dental, vision and dependent care expenses
  - The current 2026 annual maximum contribution to the Healthcare FSA is ***$3,400****, the IRS has not released the 2027 FSA limits yet, the limit is projected to increase to* ***$3,500*** *for 2027*
  - You can use the FSA to pay for deductibles, copays, coinsurance & other eligible expenses not covered by the medical, dental or vision plans
  - ***Employees who elect the HDHP Plan cannot participate in the Health Care FSA***
- Dependent Care FSA
  - The annual maximum contribution to the Dependent FSA is ***$7,500*** per year ($3,750 if married filing separately)
  - A dependent care FSA is used to reimburse eligible expenses related to the care of your dependents (both children and adults)
  - Qualified expenses include before/after school programs, nursery, day care (child and adult), preschool, camp, etc.
- Flexible Spending Accounts: Use it or lose it provision
  - ***It is very important that you estimate your annual contributions carefully. Any funds left in your account(s) at the end of the year will be forfeited***
- ***Your entire FSA contribution is available to you from day one***

VI.

Supplemental Health

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Accidental Injury Insurance

Helps to pay for expenses involved with a covered accident or injury.

Benefits may be payable for:[1]

- Initial treatment
- Emergency room visit
- Hospitalization
  - Admission (per occurrence)
  - Confinement (per day)
- Follow-up care

Covered injuries may include:[1]

- Broken bones
- Burns
- Dislocations
- Torn ligaments
- Concussions
- Eye injuries
- Ruptured discs
- Cuts requiring stitches

1. These are examples only. Helps pay for fixed-dollar amounts from a schedule of benefits for a broad range of treatments or minor and major injuries resulting from a covered accident. Refer to your plan materials for the features of your specific plan. To receive benefits, the event must meet the terms and definitions of the policy. Waiting periods and frequency limitations may apply. Subject to all other plan exclusions and limitations. See Appendix C for more information.

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Critical Illness Insurance

Treating more conditions with more plan options

Benefits Details	Lump-sum benefit paid upon the diagnosis of a covered condition: $10,000 (low plan) or $20,000 (high plan)

Covered conditions may include:[1]

Vascular
- Heart attack
- Stroke
- Coronary artery disease
- Aortic & cerebral aneurysm
- Advanced heart failure

Cancer
- Invasive cancer
- Carcinoma in situ
- Skin cancer

Other specified conditions
- Paralysis
- Renal (kidney) failure
- Major organ failure
- Benign brain tumor
- Coma
- Blindness
- Advanced obesity
- Crohn's disease
- Pulmonary embolism

Nervous system
- ALS (Lou Gehrig's disease)
- Advanced Alzheimer's disease
- Parkinson's disease
- Multiple Sclerosis

Childhood
- Heart wall malformation
- Sickle cell anemia
- Cerebral palsy
- Cystic fibrosis
- Muscular dystrophy
- Poliomyelitis

Refer to benefit summary for details

1. Some benefit payouts vary by condition. These are examples only. Refer to your plan materials for the features of your specific plan. To receive benefits, the event must meet the terms and definitions of the policy. Waiting periods and frequency limitations may apply. Subject to all other plan exclusions and limitations. See Appendix B for more information.

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Hospital Care Insurance

Pays benefits for a covered hospital stay for events like an in-patient procedure or birth of a child.

- After the first hospital stay, coverage continues, so you have additional protection for future hospital stays.[1,2]
- You can use the money however you'd like.[2]
- The average hospital stay is 4.7 days.[3]
- The average out-of-pocket hospitalization expense with a medical plan is $1,457.[4]

The average inpatient hospital stay in the United States: **$3,132 per day.**[5]

1. The term Hospital does not include a clinic, facility for: (1) rehabilitation, convalescent, custodial, educational, hospice or skilled nursing care; (2) the aged, drug addiction or alcoholism; (3) a facility primarily or solely providing psychiatric services to mentally ill patients. The term Hospital also does not include a unit of a hospital for rehabilitation, convalescent, custodial, educational, hospice or skilled nursing care. Please refer to your plan documents as the actual definition of "Hospital" may vary by policy.
2. Pays a fixed-dollar amount from a schedule of benefits for a covered hospital event (i.e., hospital admission or stay). Benefits may be paid directly to the hospital on assignment.
3. Definitive Healthcare. "Healthcare Insights." https://www.definitivehc.com/resources/healthcare-insights/average-length-of-stay-by-state. October 23, 2024.
4. GD&A Analysis of Cigna Healthcare Medical Book of Business 2022-2023.
5. Kaiser Family Foundation. Hospital Adjusted Expenses per Inpatient Day." 2022. https://www.kff.org/health-costs/state-indicator/expenses-per-inpatient-day/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D . Last Accessed June 2024.

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Submitting a Claim

To file your claim online:

1. Log in to **myCigna.com®**
2. Select **Supplemental Health** under the **Coverage** tab
3. Scroll down and select **Submit a Claim**
4. Complete the online submission and easily upload all the documents needed to support the claim

myCigna.com® and the myCigna® app also allow you to:[1]

- Enroll in direct deposit
- View personalized Supplemental Health plan information
- Track the status of claims
- Monitor and respond to correspondence
- View Explanations of Benefits (EOBs)

1. Children under age 13 are not permitted to register for a personal profile at myCigna.com. The downloading and use of the myCigna Mobile App is subject to the terms and conditions of the App and the online store from which it is downloaded. Standard mobile phone carrier and data usage charges apply

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VII.

Contact Information



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Benefits Member Advocacy Center

- Conner Strong & Buckelew's member advocacy program, is here to help you with your benefits related needs
- The Member Advocacy team can help answer questions or resolve issues such as:
  - Understanding how your benefit plan works
  - Questions regarding a bill you received from a doctor, lab or hospital
  - Researching a claim that was not paid properly
- You can reach a Member Advocacy representative by any of the following:
  - Calling - (800) 563-9929 Monday through Friday, 8:30 am to 5:00 pm
  - Faxing - (856) 685-2253
  - Submitting online via https://www.connerstrong.com/member-advocacy-web-form

Benefits Contact Information

Questions Regarding	Contact	Phone	Website/Email
Eligibility, Enrollment, Plan Options, Contributions, Qualifying Life Events, etc.	SHU Benefits Team	N/A	shuhealthbenefits@sacredheart.edu
	Earline Newton Director of Employee Benefits	203.371.7921	newtone2@sacredheart.edu
	Maria Carrasquillo Senior Manager of Employee Benefits	203.365.7572	carrasquillom2@sacredheart.edu
Medical Benefits	Cigna	800.244.6224	Health Insurance Plans for Individuals and Families | Cigna Healthcare
Health Savings Account	HSA Bank	800.357.6246	HSA Bank
Dental Benefits	Delta Dental	800.452.9310	Dental Insurance Plans for Individuals, Families, Groups & More | Delta Dental of New Jersey
Vision Plan	Cigna	877.478.7557	myCigna - Get Access to Your Personal Health Information
Flexible Spending Accounts	Cigna	800.244.6224	
Employee Assistance Program (EAP)	Cigna	877.622.4327	
Telemedicine	MDLive	888.726.3171	myCigna.com Find the “Talk to a Doctor” button on the homepage
Life and Disability	New York Life	800.225.5695	My Account | New York Life

Stay Connected

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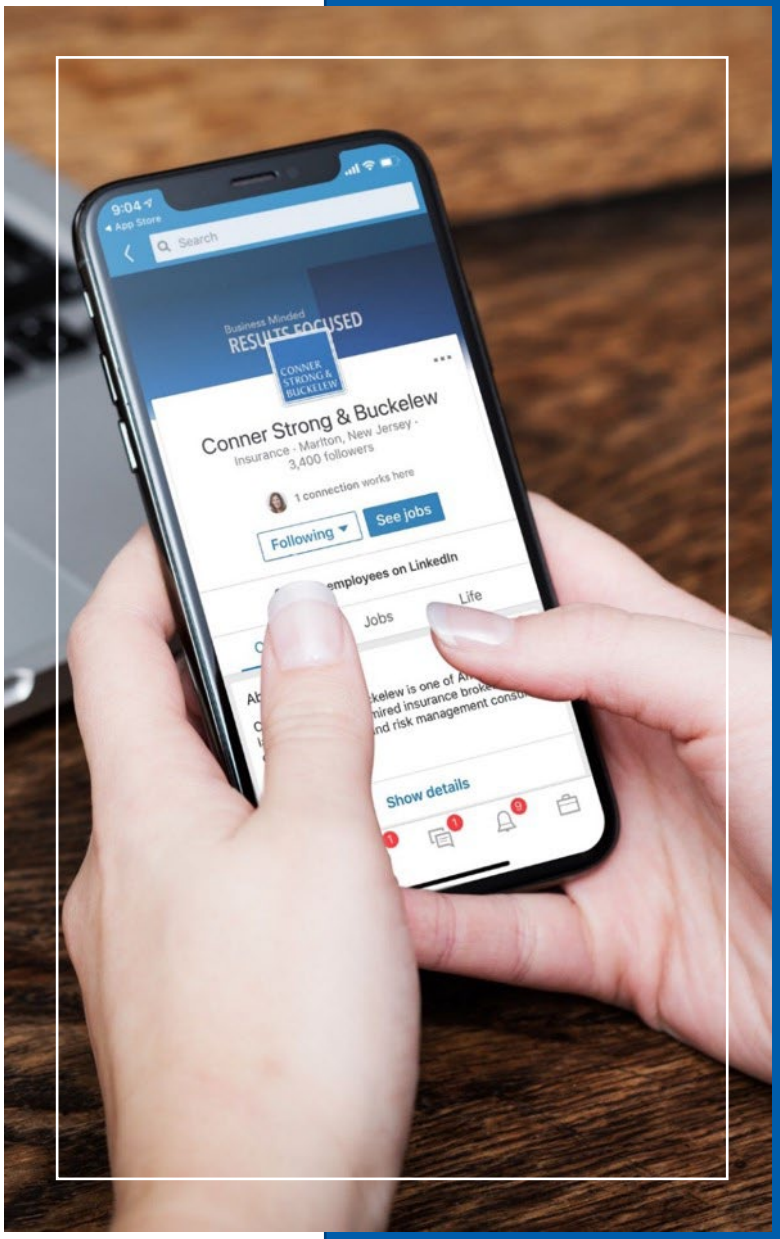
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Disclaimer

Conner Strong & Buckelew (CSB) is providing the work product herein in order to assist in the evaluation and analysis of your group benefit plan(s). The work product reflected herein and contained in any exhibits or attachments is based upon data and information supplied by your contracted administrators, carriers, insurers and other vendors engaged in the administration of your plans. In some instances, the data and information may have been supplied by you. As such, CSB cannot warrant the accuracy of said data and information received and used by us in order to produce this analysis. We have evaluated said data and information to the best of our capability and rely upon the representations of your contracted administrators, carriers, insurers and other vendors as to the accuracy of the data and information they have supplied. It is important to note that while our consultants are very familiar with the design, administration and operation of employee benefit plans and the law applicable to those activities, Conner Strong & Buckelew is not a law firm.

Therefore, our recommendations should not be construed as, nor are they intended to be, legal advice. You may wish to consult with legal counsel about the issues addressed. The information contained herein is not intended by Conner Strong & Buckelew to be used, and it cannot be used, for the purpose of avoiding penalties under the Internal Revenue Code that may be imposed on the taxpayer. The information contained herein and in any exhibits or attachments is confidential and may not be shared, reproduced or disclosed to any third parties without the express written consent of CSB.



THANK YOU

Questions? Comments?