

Medical Plan for Part-Time Employees FAQs

This FAQ is designed to help you understand the **Minimum Essential Coverage** (**MEC**) **Plus + Globe Life Plan**, a cost-effective medical option available to all part-time faculty and staff.

1. Who is eligible for the MEC Plus plan?

All part-time faculty and staff scheduled to work **less than 30 hours per week** are eligible, regardless of the number of hours worked. You must enroll yourself in order to enroll eligible dependents.

2. Who qualifies as an eligible dependent under the plan?

You may enroll the following dependents if you enroll yourself:

- Spouse or domestic partner
- Biological children, stepchildren, legally adopted children, or children placed with you for adoption
- Foster children
- Children of your spouse or domestic partner

Note: You cannot enroll dependents unless you are also enrolled in the plan.

3. What does the MEC Plus plan cover?

The plan covers 100% of preventive care, includes 3 primary care visits, specialist visits at a network discount, unlimited free telemedicine, prescription coverage, behavioral health support, and limited hospital indemnity benefits. For full plan details available on the **Benefits Website**.

4. How much does the plan cost per month?

Please note that This plan is direct billed. Premiums are not deducted from your paycheck. Monthly billing will be sent to your home address. **The merchant who will be collecting the payment is called PIOPAC**.

Employee Only: \$138.00

Employee + Spouse: \$259.00Employee + Child(ren): \$245.00

• Family: \$386.00

5. How do I enroll?

Enrollment is completed through the <u>AEZ Benefits</u> platform. For technical support, please use the **Chat Feature** within the enrollment platform.

6. When can I enroll in the MEC plan?

- New hire: Within 30 days of your date of hire.
- Annual open enrollment: During the annual two-week enrollment period.
- **Qualifying life event (QLE):** Within 30 days of QLE such as marriage, divorce, birth or adoption of a child, or loss/gain of other coverage. You must notify askhr@nu.edu to initiate changes.



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7. How to Find a Provider?

PHCS is a nationwide network with over 900,000 in-network providers. To locate a provider

- Visit www.multiplan.com
- Click "Find a Provider" in the top right corner and click "OK" on the pop-up that appears in the bottom right
- Click "Select Network"
- In the pop-up box, select "PHCS" then select "Specific Services"
- In the search bar:
 - o Enter the **type of provider** you're looking for (e.g., urgent care, primary care, etc.)
 - o Enter your **ZIP code**
- Click the search icon to view results

For additional assistance, call PHCS Provider Support at 888-371-7427

8. Will I receive an ID card?

Yes. Loomis will mail your ID card to your home after enrollment is processed. ID cards from your new carrier typically take 7 to 10 business days to receive after the coverage effective date.

9. Who do I contact with questions about the plan or enrollment?

PIOPAC | Billing Questions and Updates

Phone: 808-792-5276

Email: Darleen Crook (<u>dcrook@benefitharbor.com</u>) | Chantal Vonner (<u>cvonner@benefitharbor.com</u>)

• Benefit Harbor | Enrollment Questions

Phone: 888-575-0536

- Loomis | ID Cards
 - Joseph Lovelidge <u>ilovelidge@loomisco.com</u>
 - o Cami Lee clee@loomisco.com
 - o Kriss Hovis khovis@loomisco.com
 - o Chelsa Minch cminch@loomisco.com

10. Does this plan meet ACA or California coverage requirements?

Yes, this plan satisfies the California individual mandate for Minimum Essential Coverage (MEC), helping you avoid a state tax penalty. However, it does not meet the ACA Minimum Value standard and should not be used to fulfill an employer's ACA requirements.

11. Can I enroll if I already have other health coverage?

No. This plan does not allow dual coverage. You must not be enrolled in another MEC or major medical plan to qualify.

12. How does this differ from Medicare or state-subsidized coverage?



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The MEC Plus plan is designed to provide basic, low-cost access to preventive and routine care and satisfy MEC requirements – not to replace full coverage plans like Medicare or marketplace plans. Unlike **Medicare** or **Covered California** plans, MEC Plus:

- Does not include comprehensive major medical or inpatient coverage
- Has limited visit allowances (3 PCP visits PPY)
- Does not include subsidies, cost-sharing reductions, or broad benefits

13. Is there a recorded presentation of the MEC plan overview?

Yes. You can watch the recorded presentation here: