2020 Open Enrollment

BEGINs: Tuesday, May 5, 2020, at 7:00 a.m. CST
ENDs: Tuesday, May 19, 2020, at 5:00 p.m. CST

During Open Enrollment, all eligible State of Nebraska employees have the opportunity to elect or change benefit plans. To prepare for this annual event, you should review your current benefit elections along with your current and anticipated future benefit needs.

The choices you make during Open Enrollment take effect on July 1, 2020, and remain in effect until June 30, 2021. You can make limited changes at other times during the year only as a result of a qualifying event as defined by the IRS. Detailed information regarding the state’s changes can be found on the Employee Benefits website at [www.link.nebraska.gov](http://www.link.nebraska.gov) under “My Benefits - Benefit Options”.

Open Enrollment 2020
All State of Nebraska teammates are required to log into the Employee Work Center and complete the Open Enrollment process.

If you failed to qualify for the Wellness incentive, you must select an alternate plan. Your WellNebraska Plan with incentive will end as of 6/30/20 and you will be left with no coverage for 2020-2021.

As you make your Open Enrollment plan selections, please verify and update any contact information (address, email, phone number, etc.) for you, your dependents and your beneficiaries.

Update Important Information
This is the ideal time to confirm and update important information such as addresses, emergency contacts, and dependent information. Keeping personal information up to date will help ensure you are receiving communications from the State of Nebraska and benefit vendors.

Open Enrollment is also a good time to review your beneficiary elections for the life and AD&D insurance plans. Any amount for which a beneficiary is not named will be paid to your estate. If you elect coverage for your spouse or dependent children, you are automatically their beneficiary.

If Adding a Spouse or Child(ren) to Health Insurance
If adding dependents, you will need social security numbers and dates of birth for dependents enrolled in a group health plan.

Dependent Eligibility Verification Process
Around July 1st, you will receive a letter from Alight Dependent Verification Center (formerly Aon Hewitt) requesting documentation to verify that your newly added dependent(s) meet the definition of an eligible dependent on the state’s health plan. You will have 30 days to send Alight Dependent Verification Center (formerly Aon Hewitt) the requested documentation. Examples include a certified birth certificate or marriage certificate.

Failure to respond and provide the requested documentation by the stated deadline will result in loss of coverage for your new dependent(s).

Employee Work Center (EWC)
Complete your Open Enrollment in the EWC found at [www.link.nebraska.gov](http://www.link.nebraska.gov). You may also scan the QR code to be linked to the EWC. Using the EWC, you will elect, view and make changes to your benefit plan choices.

Open Enrollment To-Do List

- **Health, Dental, and Vision Insurance**: Review current coverage and make any changes/elections
- **FSA Healthcare**: Select or waive your annual contributions
- **FSA Dependent Care**: Select or waive your annual contributions
- **Health Savings Account**: Select or waive your contribution amounts if you elect the Consumer Focused Health Plan
- **Employee Supplemental Life Insurance**: Increase coverage by one increment ONLY if currently enrolled - No Evidence of Insurability (EOI) required
- **Dependent Supplemental Life Insurance**: Review current coverage and make any changes. Evidence of Insurability (EOI) will be required for a spouse not currently covered
- **Short Term Disability Long Term Disability**: Evidence of Insurability is required unless you are completing your new hire event
- **AD&D Insurance**: Coverage Continues - Review current coverage and make any changes
- **Electronic W2**: Sign up to receive electronic W2
- **Electronic 1095-C**: Sign up to receive electronic 1095-C form
- **Verify Address**: Confirm or edit address
- **Verify Beneficiaries**: Confirm or edit beneficiaries
NEW THIS YEAR
Enhanced Maternity Benefits are available through the WellNebraska Health Plan (with Incentive)

Effective July 1, 2020, teammates who have qualified for the WellNebraska Plan (with incentive) will be eligible for additional maternity benefits.

New benefits include:
• In-network medically necessary outpatient maternity related services will be paid at 100% of eligible expenses
• In-network inpatient medically necessary hospital charges that are maternity related services will have a $500 copay and then be paid at 100% of eligible charges. In-network inpatient well baby nursery eligible charges will also be paid at 100%

Please note, you must have completed the requirements of, and be on the WellNebraska Health Plan (with Wellness Incentive) prior to the birth, to receive this benefit. This benefit will not be offered on any other State of Nebraska Medical plan.