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2025 Benefits Enrollment – Frequently Asked Questions

Updated Oct. 23, 2024

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A. General

1) What is 2025 Benefits Enrollment?

Benefits Enrollment is the time each year when you're allowed to enroll, waive or change your benefit elections for coverage effective Jan. 1, 2025.

2) When is 2025 Benefits Enrollment?

Benefits Enrollment occurs from Monday, Nov. 4, 2024, through Monday, Nov. 18, 2024.

3) Will my current benefit elections carry over for plan year 2025? Do I have to submit my enrollment in Workday?

If you do not submit your Workday enrollment, most current elections will roll over into 2025, **except for the following benefits:**

- Flexible Spending Accounts (Health Care FSA, Limited Purpose FSA and Dependent Care FSA)
- PTO Purchase (if eligible)

You must re-enroll in the benefits listed above to have coverage in 2025.

4) Can I make changes to my benefit elections outside of the Benefits Enrollment period?

No, you cannot make changes to your benefits outside of the Benefits Enrollment period unless you experience a qualified life event, such as but not limited to:

- Change in legal marital status. Includes marriage, divorce, legal separation and annulment.
- Change in number of dependents. Includes any event that changes the number of an employee's dependents (e.g., adoption, birth child).
- Loss or gain of other health care coverage (e.g., through a spouse's employer).

5) Who is eligible to participate in 2025 Benefits Enrollment?

Benefits eligible employees of Allina Health.

- If you are on a paid leave of absence, you are required to submit your enrollment by the Nov. 18, 2024, deadline.
- If you are on an unpaid leave of absence, you will be required to complete your enrollment upon your return from leave.

6) What if my spouse’s employer’s annual benefits enrollment period is different than Allina Health’s annual enrollment period, what are my options?

If your spouse gains other medical coverage on Jan. 1 (or any other time during the year), you may remove them from your medical plan in Workday within 30 days of them gaining other medical coverage. If your spouse loses other medical coverage on Jan. 1 (or any other time during the year), you may add them to your medical plan in Workday within 30 days of them gaining other medical coverage.

7) Where do I enroll in benefits during 2025 Benefits Enrollment?

Enrollment is in [Workday](#). Go directly to your Inbox in Workday to complete and submit your enrollment. [View instructions here](#).

8) Can I change my elections after I submit my enrollment in Workday?

Yes, you may change your 2025 Benefits Enrollment elections after you submit your enrollment but before the 2025 Benefits Enrollment deadline, Monday, Nov. 18. Log in to Workday, select the Benefits application and then under Current Cost select ‘Change Open Enrollment.’ This will bring you to your enrollment again. After you click on ‘Change Open Enrollment,’ be sure to submit your enrollment again.

9) I submitted my enrollment in Workday. Where can I access what I submitted?

Go directly to your Inbox in Workday. Click on the tab titled “Archive.” Then, click on the event titled, “Open Enrollment Change: (Your name) on 01/01/2025.” Your elections will be located here.

10) I was recently hired at Allina Health. I submitted my benefits enrollment as a new hire for 2024. Do I have to submit another benefits enrollment for 2025?

Yes. If your start date is prior to Monday, Dec. 2, 2024, you are required to submit two enrollments:

1. First, submit your new hire enrollment for 2024 benefits.
2. Next, you will receive another enrollment to complete in your Workday inbox for 2025 benefits.

Complete both events to ensure you are enrolled in the benefits of your choice for 2024 and 2025.

11) The Coverage Begin Date and Deduction Begin Date within my 2025 Benefits Statement shows a different date than 1/1/2025 for some of my benefits. Is this correct?

Yes. If you did not change your enrollment, your Coverage Begin Date and Deduction Begin date will reflect the date you entered the plan originally. If you made changes to your enrollment, your Coverage Begin Date and Deduction Begin Date will reflect 1/1/2025.

12) Will I still receive the \$100 well-being dollars in my Well-being Savings Account through ThrivePass?

Yes, eligible employees above a 0.00 FTE will automatically receive \$100 well-being dollars in their Well-being Savings Account on Jan. 1, 2025. To access your account, visit the employee well-being site, allinahealth.org/well-being, and select “Learn More” under the Well-being Savings Account tile.

B. Medical

1) Are the medical plans changing for 2025?

- Select Health Savings Plan: The deductible is increasing to \$1,650 for individual coverage and \$3,300 for family coverage.
- To ensure the cost of medical coverage remains affordable for everyone, Allina Health employee medical plans will no longer cover prescriptions for GLP-1 weight loss medications for legacy members beginning Jan. 1, 2025. [View more details](#) on this change.

2) I am age 65+ and would like to enroll in a high deductible health plan (HDHP) but am unable to select either the Premier Health Savings plan or the Select Health Savings plan. How do I submit my enrollment?

Please submit an *HRConnect* ticket by no later than Monday, Nov. 18, 2024, and request enrollment in your desired HDHP plan.

3) Which medical plans are offered?

[View the plan comparison chart](#) or [plan comparison chart for SEIU-represented employees](#).

Access the ALEX plan comparison tool on allinahealth.org/2025enrollment.

4) Who administers the medical plans and which networks are available?

- **Network:** The facilities, providers and suppliers the medical plan has contracted with to provide health care services.
- **Administrator:** Handles claims processing, pays providers and manages other functions related to the operation of your health insurance.

Medical plan name	Networks included in plan	Third-party plan administrator
Premier Health Savings Plan	Allina Elevate Network	Blue Cross Blue Shield of MN
Allina First Plan	Allina First Network	
	Extended Network	
Select Health Savings Plan	Allina First Network	
	Extended Network	
Allina Elevate Plan	Allina Elevate Network	Allina Health Aetna

5) Are out-of-network emergency department care and transportation services covered?

Yes, out-of-network emergency and transportation services are covered as in-network. Please see the Summary Plan Description for limitations.

6) Where can I see the premiums for the medical plans?

Rates are available in:

- **HRConnect:** Log in to *HRConnect* from the AKN homepage and search by medical plan name to review current and 2025 rates.
- **ALEX:** Access the ALEX plan comparison tool at allinahealth.org/2025enrollment.
Note: ALEX is not intended for SEIU-represented employees.
- **Workday:** Nov. 4 - 18, go directly to your Workday Inbox and then select Manage or Enroll within the medical tile. Upon adding or removing dependents, your biweekly premium will populate within the field "Plan cost per paycheck."

7) When selecting a medical plan in the Workday enrollment tool, which medical plan name should I select?

Medical plan name	Name in the Workday enrollment tool
Allina Elevate Plan	Allina Aetna EPO Elevate
Premier Health Savings Plan	BCBS HDHP Premier
Select Health Savings Plan	BCBS HDHP Select
Allina First Plan	BCBS PPO First

8) Who can I cover under my medical plan?

You may cover your legal spouse and child(ren) up to the age of 26.

9) Who administers the Allina Health medical plans?

Blue Cross Blue Shield (BCBS) of MN administers all plans except for the Allina Elevate Plan, which is administered by Allina Health | Aetna.

10) How can I find out what is considered in-network coverage under the Allina First, Select Health and the Premier Health Savings plans?

You can search for network coverage including specialties, primary care, hospitals and other facilities and providers by visiting: bluecrossmn.com/allina. You may also call BCBS of MN at 800-509-5310, option 1 for inquiries related to medical benefits and network coverage.

11) How can I find out what is considered in-network coverage under the Allina Elevate Plan?

You can search for network coverage including specialties, primary care, hospitals and other facilities and providers by visiting: ah.allinahealthaetna.com/. You may also call Aetna at 800-343-9264 for inquiries related to medical benefits and network coverage.

12) How do I find out if a prescription drug is covered or get pricing for a medication?

Our pharmacy benefits are administered through Express Scripts. You may visit Express Scripts site at express-scripts.com/frontend/open-enrollment/allinahealth or call 800-509-5310, option 2 or 800-343-9264, option 2, to obtain information related to medication prices, network pharmacies, preferred formulary exclusion and standard preventive medication lists.

13) Where can I access the Summary of Benefit Coverage (SBC) or the detailed Summary Plan Description (SPD) for information related to medical benefits, covered procedures and other information?

Visit BCBS website at bluecrossmn.com/allina or Allina Health|Aetna website at ah.allinahealthaetna.com/. Both the SBCs and SPDs are viewable on the websites. You can also access SBCs in [HRConnect](#), under each plan's article.

14) I need help understanding insurance related terms like network, deductible, copay, coinsurance and out-of-pocket maximum. Where can I learn more about what these mean?

Our [Health Plan 101 video](#) ([view transcript](#)) is a helpful tool that explains what these terms mean and how they impact your medical plan.

C. Elevate Network (narrow network option)

1) What providers are in network for the Premier Health Savings plan and the Allina Elevate Plan?

Review [Who Provides Care in the Allina Elevate Network](#).

2) Is emergency care covered under these two plans for emergencies out of network in another state?

Yes, if the event you or a covered dependent experience an unforeseeable medical emergency the emergency care (e.g., hospitalizations, urgent surgery, ambulance) will be covered by your insurance and expenses will apply toward your in-network deductible and in-network out-of-pocket maximum.

3) Where can I fill prescriptions under these plans?

The first fill of any medication can be filled at any [Express Scripts network pharmacy](#) (except Walgreens); however, any subsequent fills would need to go through [Allina Health pharmacies](#). There is no out of network pharmacy coverage.

4) What out-of-network care is available?

Urgent care expenses are the only allowable expense covered out of network. All other types of out-of-network care is not covered except for out of network medical care for unforeseen medical emergencies.

5) Can I access urgent care out of the network under these plans (e.g., getting a strep test while on vacation in Florida)?

Out-of-network urgent care is covered, and expenses apply toward your out-of-pocket deductible and out-of-pocket maximum.

6) If I cover a dependent on the Premier Health Savings plan, does the \$2,000 individual deductible apply to the first covered dependent who meets the \$2,000 deductible?

The \$2,000 individual deductible only applies to single only coverage. If you are covering more than yourself, it only takes one covered individual to meet the \$4,000 deductible/out-of-pocket maximum.

D. Dental

1) Where can I see the rates for the dental plan?

Rates are available in Workday. Go directly to your Workday Inbox and then select Manage or Enroll within the Dental tile. Upon adding or removing dependents, your biweekly premium will populate within the field "Plan cost per paycheck."

2) Who administers Allina Health's dental plan and how can I find an in-network provider?

Delta Dental of Minnesota is the plan administrator. Visit the Delta Dental website at deltadentalmn.org/allina-health-members or you may call Delta Dental Customer Service at 651-406-5916 or toll free at 800-553-9536.

3) What is the enhancement to the 6451 Dental Plan and who does it apply to?

Delta Dental has two provider networks, Delta Dental PPO and Delta Dental Premier. Preventive dental care services are currently covered at 100% for the Delta Dental PPO network and covered at 80% for the Delta Dental Premier network. This means members currently have out-of-pocket costs for preventive care at Premier network providers. The enhancement to 100% coverage for 2025 provides all in-network preventive dental care at no cost to the member. The 6451 Dental Plan is

offered to most benefit-eligible employees, excluding SEIU Pharmacists and certain MNA groups who have different dental plan options.

4) I am covered under more than one dental plan. How does the claim process work?

If you have questions regarding coordination of benefits, please contact Delta Dental Customer Service at 651-406-5916 or toll free at 800-553-9536.

5) Where can I view the detailed Summary Plan Description (SPD) to access information related to dental benefits, covered procedures and other information?

Visit *HRConnect* and use search word "Dental." The Dental SPD is viewable within the Dental article.

E. Health Savings Account (HSA)

1) What is a Health Savings Account?

A Health Savings Account (HSA) allows you to save pre-tax dollars for health care costs. An HSA is an individual trust account that is designed to help you pay for medical expenses.

2) Do HSA dollars rollover year to year?

Yes, HSA dollars rollover year to year.

3) Will I receive a debit card in the mail?

If you newly elect an HSA, you will receive one Visa debit card to use when paying for eligible expenses. Additional cards may be ordered online or by calling Optum Financial 24/7 at 1-844-400-5723 upon the accountholder's request, for spouses and dependents also enrolled in the plan.

4) Can I change my HSA contributions later?

Yes, you can [contact the HRConnect Service Center](#) to start, stop or change your HSA contributions at any time.

5) Which medical plans are compatible with an HSA?

The Select Health Savings Plan and the Premier Health Savings Plan. The Allina Elevate Plan and the Allina First Plan are not compatible with an HSA.

6) Does Allina Health contribute to my HSA?

Only the Premier Health Savings plan has an Allina Health HSA contribution. Allina Health will contribute \$600 if you are just covering yourself or \$1,200 for all other coverage tiers.

7) I enrolled in the Premier Health Savings Plan. Do I have to enroll in the HSA?

Yes, you are required to enroll in the HSA if you enroll in the Premier Health Savings Plan, as Allina Health contributes to this account. You are not required to contribute yourself – simply enter your contributions to \$0.00 in Workday if you do not wish to contribute pre-tax dollars.

8) How much am I allowed to contribute to my HSA in 2025?

Both the employee and Allina Health contributions combined are subject to Internal Revenue Service (IRS) annual limits. The IRS annual limit for 2025 is:

- Self-only coverage: \$4,300
- All other coverage levels: \$8,550
- Catch-up for age 55+: \$1,000 above the limits listed.

F. Flexible Spending Accounts (FSAs)

1) What types of FSAs are offered?

- **Health Care FSA:** Put pre-tax money aside in an account to pay for eligible health care expenses incurred by you and your eligible dependents that cannot be covered by any other benefit plan.
- **Limited Purpose FSA:** Put pre-tax money aside in an account to pay for eligible health care expenses incurred by you and your eligible dependents that cannot be covered by any other benefit plan. Eligible expenses are limited to certain dental, vision, and over-the-counter item expenses.
- **Dependent Care FSA:** Put money aside on a pre-tax basis so that you can pay someone to care for your eligible dependents while you and your spouse (if you are married) work, look for work or go to school.

2) Which medical plans are compatible with a Health Care FSA?

The Allina First and the Allina Elevate plans are compatible, or if you waive health care coverage. The Premier Health Savings and the Select Health Savings plans are not compatible with a Health Care FSA.

3) Which medical plans are compatible with the Limited Purpose FSA?

The Select Health Savings Plan and the Premier Health Savings Plan are compatible. The Allina Elevate and the Allina First plans are not compatible with a Limited Purpose FSA.

4) How much am I able to contribute in 2025 to the Health Care FSA or the Limited Purpose FSA?

The 2025 IRS limit is \$3,300. The minimum contribution is \$100.

5) When will I be able to access the funds within the Health Care FSA or Limited Purpose FSA?

The full amount you elected will become available to on Jan. 1.

6) Do Health Care FSA or Limited Purpose FSA dollars rollover year to year?

If you elect an FSA for the following year, you can roll over funds, up to the current IRS limit of \$610. If you do not re-enroll in the FSA, you will lose any funds left after March 31 of the next calendar year.

For example: If you have an FSA in 2024 and elect an FSA for 2025, you may carry over up to \$610 of your 2024 balance into the 2025 benefit year. If you don't elect an FSA for 2025, you will lose any contributions left in your account after March 31, 2025. A rollover limit of \$660 will apply for 2025 contributions and 2026 enrollment. If your eligibility ends for the benefit, you will lose any contributions left after 90 days from the date you lose eligibility.

7) Do Dependent Care FSA dollars rollover year to year?

You will lose any 2025 contributions left in your account after March 31, 2025, or 90 days from the date you lose eligibility for the benefit if earlier.

8) How much am I able to contribute to my Dependent Care FSA?

The 2025 IRS limit is \$5,000.

9) Will I receive a debit card in the mail?

If you newly elect a Health Care or Limited Purpose FSA, you will receive one Visa debit card to use when paying for eligible expenses. Additional cards may be ordered online or by calling Optum

Financial 24/7 at 1-844-400-5723 upon the accountholder's request, for spouses and dependents also enrolled in the plan.

G. Supplemental Life Insurance

1) What is evidence of insurability (EOI)?

EOI provides proof of good health. This includes an application process where you provide information on the condition of your health or your spouse's health to get approved for the additional life insurance coverage you elected.

2) How much life insurance can I elect for myself, spouse or child without submitting evidence of EOI?

Your Workday benefit enrollment is programmed to indicate if EOI is required based on the level of coverage you select. You will see a message under "Coverage" if EOI is required.

3) If my coverage requires EOI, how do I submit my EOI form?

Securian Financial, Allina Health's life insurance carrier, will contact you directly in the next few weeks with instructions on how to submit EOI forms. You do not submit EOI to Allina Health.

4) How much life insurance should I elect?

Use the Securian Financial [life insurance decision tool](#) to get started. By answering a few simple questions about your family and finances, you can determine the coverage that meets your needs and budget.

5) Who can I cover under my Spouse or Child Life Policy?

- Your legal spouse who is not legally separated from you.
- You or your spouse's child, legally adopted or stepchildren who are less than 26 years old. Children over 26 or older are also eligible if they are physically or mentally incapable of self-support, were incapable of self-support prior to age 26 and are financially dependent on you for more than one-half of their support and maintenance.

6) Where can I view the rates for supplemental life insurance?

In Workday, go directly to your Inbox and select "Change Benefits for Open Enrollment" and then "Let's Get Started." Select the Supplemental Life, Spouse Life or Child Life tiles, then view the coverage options and rates by clicking on the plan under 'Benefit Plan Details.'

7) Do I need to re-enroll supplemental life insurance for myself, my spouse and child for 2025?

No. Your 2024 Supplemental Life, Spouse Life, and Child Life coverage amounts will carry over to 2025.

H. Voluntary Benefits

1) If I have had voluntary benefits before, do I need to reenroll?

Your 2024 voluntary benefit elections will carry over to 2025. Voluntary benefits include:

- Voluntary Life for spouse or child
- Vision
- Identity Theft
- Hospital Indemnity
- Critical Illness
- Accident Insurance
- Legal Plan

2) When can I buy PTO hours?

Eligible employees can purchase PTO hours during Benefits Enrollment. PTO purchase election is not allowed outside of that period. If an employee becomes newly eligible for PTO purchase (as a new hire or because of a job change) during the year, they must wait until Benefits Enrollment to purchase PTO.

3) Where can I find more information on PTO purchase and how to use purchased PTO?

Information on Purchase PTO can be found in the [PTO Purchase policy](#) and in the [PTO Purchase FAQ](#) on *HRConnect*.