



FAQs

Employee Benefits Edition

tilson

Employee Benefits FAQs



INTRODUCTION

Tilson proudly offers Fortune 500-level employee health insurance and benefits to our valued clients. Our team of professionals are here to serve you by providing employee benefits administration throughout open enrollment and beyond.

HOW-TO USE THIS RESOURCE

The following content consists of our most frequently asked benefits questions. Some questions and answers are followed by an additional resource section. To access a resource, simply click on the resource's title to be directed to the document or item.

OPEN ENROLLMENT

Q	What is Open Enrollment?
A	Open Enrollment is the term used to define the window of time in which employees are able to enroll in their employee benefits, like healthcare, dental, vision, and more. Watch the Open Enrollment Overview to learn about how to best prepare for this year's Open Enrollment.
RESOURCES: Video: Open Enrollment 101	

Q	How do I view my current Benefits?
A	Use Tilson's Employee Portal to access and view your current Benefits.
RESOURCES: How-to View My Elected Benefits	

OPEN ENROLLMENT CONTD.

Q	How do I enroll in benefits during Open Enrollment?
A	<p>Tilson's Employee Portal provides a simple and easy way for employees to complete their benefits enrollment. Here's how-to enroll in four easy steps:</p> <ol style="list-style-type: none">1. Login to Tilson's Employee Portal2. From the side menu bar, select the Benefits tab3. From the drop-down menu, select the Benefit Enrollment tab4. Follow the prompts to elect benefits and complete the enrollment process <p><i>Note: For more detailed instructions, see the user guide below.</i></p>

RESOURCES: [User Guide: Benefits Enrollment](#)

Q	Can I change my benefits at any point in time or just during open enrollment?
A	<p>The IRS has established that certain life events entitle eligible individuals to make mid-year changes to their pre-tax benefit elections. Examples include, but are not limited to:</p> <ul style="list-style-type: none">• Marriage or Divorce• Birth or Child Adoption• Change in spouse's employment affecting benefits eligibility• Dependent's loss of eligibility <p>If an employee is eligible to make a mid-year benefit change, Tilson will work with the individual to facilitate the process within the IRS-imposed deadline. Please direct employees to contact Tilson for assistance as needed.</p>

RESOURCES: [IRS Qualifying Events List with Corresponding Deadlines](#)

Q	How do I obtain a MEDICAL/DENTAL/VISION ID CARD ?
A	<p>If your insurance carrier provides physical ID cards, you will receive it in the mail at your home address listed. You may access your digital ID card, print/download a copy of your physical ID card, or request a re-delivery of a physical ID card, via your carrier's member portal.</p> <p><i>Note: Some insurance carriers have ended the practice of providing physical ID cards. In these instances, digital ID cards can be accessed via the carrier's member portal. The resource below provides links to each insurance carrier's ID Card help site. Employees can select the appropriate link to learn more about how to access, print, or download copies of their physical ID cards.</i></p>

RESOURCES: [Quick Reference Guide - Medical ID Cards](#)

Q	How do I know if my provider is in network?
A	<p>Certain doctors and hospitals, or "in-network" providers, may offer medical care at a lower cost than those outside of the network. In some cases, policy holders are required to use in-network providers. To find out which doctors and hospitals are within your network, view your carriers' in-network support and resources webpage.</p>

RESOURCES:

- [Anthem In-Network Resources](#)
- [Humana In-Network Resources](#)
- [United Healthcare In-Network Resources](#)

Q	Why would a carrier not pay certain claims, and what can be done about it?
A	<p>Due to the confusing nature of medical billing and insurance claims, claimants often don't look into such issues despite their frustration. However, often a simple mistake is the root of a denied or delayed claim and there may be an easy solution.</p> <p><i>To learn more about unpaid insurance claims and proactive solutions, check out our Benefits Insights article below.</i></p>

RESOURCES: [Benefits Insights - Know Your Insurance Claims](#)

Q	How do I file a claim with Aflac?
A	<p>Follow these simple steps to file your insurance claim with Aflac:</p> <ol style="list-style-type: none">1. Go to www.aflacgroupinsurance.com2. Select the "Customer Service" option3. Select the type of claim being filed4. If applicable, complete any preliminary steps as directed5. Select the "File Online" option and then follow the prompts accordingly <p>If you have any questions, please call Aflac's helpline at 1.800.433.3036</p>

RESOURCES: [Aflac Video Tutorial - How To File a Claim Online with Aflac Group](#)

HEALTH/SUPPLEMENTAL INSURANCE CONTD.

Q	What is an Explanation of Benefits (EOB), and what purpose does it serve?
A	<p>After submitting a claim for medical treatment, you may receive an EOB from your insurance company. The EOB is a form that insurance companies send to their members to explain what part of a claim was paid by insurance, what part was not paid, and why.</p> <p>The main purpose of your EOB is to help you determine if your claim has been paid, how much has been paid by your insurance company, and how much is your responsibility. Then, you will know which invoices to pay and how much.</p>

RESOURCES: [Benefits Insights - Understanding Your Explanation of Benefits \(EOB\)](#)

FINANCIAL/MEDICAL BENEFITS

Q	What is a FSA (Flexible Spending Account)?
A	<p>An FSA is an employer-sponsored savings account for health care expenses. Employees are not taxed on the money put into the FSA, and can then use the account to pay for qualified out-of-pocket health care costs, such as deductibles and copays, but not premiums. However, employees cannot stockpile money in the account from year to year, and they will lose leftover money in the account at the end of the plan year unless your organization offers an option that allows for either a short extension or a small carry-over into the next year. <i>If you are interested in providing FSAs as a fringe benefit to your employees, contact your Tilson HR Advisor to set up an appointment.</i></p>

RESOURCES: [Benefits Insights - Flexible Spending Accounts](#)

Q	What is a HSA (Health Savings Account)?
A	<p>Health savings accounts (HSAs) are a great way for employees to save money and efficiently pay for medical expenses. HSAs are tax-advantaged savings accounts that accompany high deductible health plans (HDHPs).</p> <p>HSAs were created to provide individuals who have HDHPs with a tax-preferred method of saving money for medical expenses. There are certain advantages to putting money into these accounts, including investment earnings and favorable tax treatment. The rationale behind the HSA/HDHP combination is that people will have a clearer idea of their medical costs and more control over their spending, enabling them to reduce their medical costs.</p> <p>HSA money can be used tax-free when paying for qualified medical expenses, helping employees pay their HDHP's larger deductible. At the end of the year, employees keep any unspent money in their HSA. This rolled over money can grow with tax-deferred investment earnings, and, if it is used to pay for qualified medical expenses, then the money will continue to be tax-free. For employees, having an HSA can be a tremendous asset, providing them more control over how they save for future expenses.</p>

RESOURCES: [Benefits Insights - Health Savings Accounts](#)

Q	What is a limited purpose FSA?
A	<p>A Limited Purpose FSA is a Flexible Spending Account that is compatible with a Health Savings Account (HSA). An employee can use a Limited Purpose FSA alongside their HSA but it can only be used for payments related to eligible dental and vision care expenses.</p>

RESOURCES: [Benefits Insights - Limited Purpose FSAs](#)

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1530 American Way, Suite 200 | Greenwood, IN 46143 | 800.276.3976 | tilsonhr.com