IOWA STATE UNIVERSITY

University Human Resources

2026 Retiree Open Enrollment

ISU Plan Benefits for January 1, 2026

Open Enrollment: October 15 – December 7, 2025

IOWA STATE UNIVERSITY

Contact Us

ISU Employment and Benefits Center
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Benefits Consultant	Retirees Last Name Begins With:
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https://www.hr.iastate.edu/retiree-benefits

2026 Impact to ISU Retirees

- Medical premiums are increasing – 3-7%.
- No medical plan design changes.
- Humana prescription drug plan out of pocket maximum increasing to $2,100.

- Dental premiums will remain the same as in 2025.
- No dental plan design changes.

What should you do for 2026?

- Stay with your current plan(s) - no forms to submit
- Move to the other ISU plan choice or add/remove dependents – submit open enrollment form
- Terminate ISU plan – submit drop form
- Submit forms to indicate plan or terminate coverage by **December 7, 2025**

- **Reminder:** If you move during the year, make sure to call or email the Benefits Office to provide your new address. We will update your address with the insurance vendors.

Eligible Dependents

- Legally Married Spouse or Domestic Partner
- Dependent Child(ren)
  - Who have a relationship with the retiree or enrolled spouse/domestic partner
  - Biological, foster, legally adopted/placed for adoption, legal guardianship, court-ordered
  - Through December 31st of the year in which they turn age 26
  - Unmarried, full-time students over age 26
  - Totally & permanently disabled child

* You may add or remove an eligible family member during the year with timely reporting of a qualifying event

Medical Insurance

Wellmark. Your Health. Well Protected.™

- Administered by Wellmark Blue Cross/Blue Shield
  - BluePPO (the Preferred Provider Organization, a national network of the Blue Cross Blue Shield Association)
  - BlueHMO (the Wellmark Health Plan of Iowa Network)

- If you drop coverage, you cannot re-enroll.

Wellmark

BluePPO

- Access to nationwide network of participating providers
- Deductible, coinsurance and out-of-pocket maximums for in-network and out-of-network do not aggregate
- Deductible and out-of-pocket maximums reset every January

BlueHMO

- Iowa network of participating providers
- Emergency services only outside the state of Iowa
- Must designate a primary care physician (PCP)
  - Female participants may also designate a primary OB/GYN physician
- Referrals are not required for in-network providers
- Out-of-Network Specialist: Wellmark must approve out-of-network referrals before you receive services
- Guest membership: while away from home for 90 days or longer.
  - College students
  - Snowbirds
- Deductible and Out-of-pocket maximum resets every January

Medical Plan Comparison

Plan Provisions	BluePPO		BlueHMO
	In-Network	Out-of-Network	*PCP designation required
Annual Deductible • Single • Family	$400 $800	***Does not aggregate** $800 $1,600	$250 $500
Coinsurance • In-patient or out-patient services	20%	40%	10%
Annual Out-of-Pocket Maximum • Single • Family	$2,000 $4,000	$4,000 $8,000	$1,500 $3,000
Preventive Services	$0	40%, after deductible	$0
Office Visit • Mental Health Services • Physical Therapy • Occupational Therapy • Speech Therapy *Non-office setting, coinsurance may apply	$25 copay per provider per date of service (a separate copay may apply to lab and x-ray services if billed separately under a different provider)	40%, after deductible	$15 copay per provider per date of service (a separate copay may apply to lab and x-ray services if billed separately under a different provider)
Emergency Room	$125 copay, plus 20% coinsurance *copay waived if admitted	$125 copay, plus 20% coinsurance *copay waived if admitted	$125 copay, plus 10% coinsurance *copay waived if admitted

- **Medicare eligible retirees minimally impacted due to Medicare being primary payer**
- Copays, deductible & coinsurance apply to yearly out-of-pocket maximum

2026 Medical Monthly Premiums for Retirees of the ISU Plan

Plan Tier (price includes appropriate prescription coverage)	BluePPO & RX	BlueHMO & RX
Retiree Only		
Not Medicare eligible	$845.00	$826.00
Medicare eligible	$419.00	$399.00
Retiree & Spouse/Partner		
Two not Medicare eligible	$1,923.00	$1,886.00
One with Medicare/one without Medicare	$1,257.00	$1,218.00
Two Medicare eligible	$830.00	$792.00
Retiree & Child(ren) only		
Retiree is not Medicare eligible	$1,502.00	$1,476.00
Retiree is Medicare eligible	$1,076.00	$1,049.00
Family – Retiree, Spouse/Partner and child(ren)		
None are Medicare eligible	$2,464.00	$2,398.00
One with Medicare & others without Medicare	$1,798.00	$1,730.00
Two Medicare eligible & others without Medicare	$1,371.00	$1,304.00

Wellmark Information

- http://www.wellmark.com/
- 800-494-4478
- Register to receive electronic explanation of benefits & claims information
- Locate participating providers
- Setting up automatic withdrawal with Wellmark is encouraged

Wellmark Member Services

- **For those enrolled in the ISU Wellmark PPO or HMO plans**
  - **Identity Protection Services**
    - Credit monitoring, cyber monitoring, fraud detection, complete identity recovery, reimbursement insurance
    - https://hr.iastate.edu/files/documents/2023-09/Wellmark%20Identify%20Protection.pdf
  - **Blue365 Member Discounts & Services**
    - Discounts & services related to diet, family care, financial, fitness, hearing, vision and travel
    - https://www.blue365deals.com/WellmarkBCBS/

ISU Plan as Medicare Secondary Plan

- Keep original Medicare (A & B). Medicare is required and must be the primary insurance for those eligible for Medicare when retired.
- The ISU Wellmark plan is secondary insurance
- Patient liability is a rare occurrence but can happen. If you have an amount to pay at a clinic or hospital, you may want to follow up on why.

- ISU Benefits Office will mail information to upcoming newly Medicare eligible members 3 months before Medicare eligibility.
- **If you become Medicare eligible early due to disability, End-Stage Renal Disease (ESRD), or ALS, <u>you must notify the Benefits Office</u> in order to update your benefits and enroll in our Medicare Part D prescription plan (Humana).**

Medicare Part B Premiums

- Each year, Part B premiums are based on income from 2 years earlier. 2024 income will determine your 2026 Medicare Part B premium
- Pay attention each year to gross income and possible capital gains.
- Required minimum distributions from retirement plans can trigger higher Medicare premiums a couple of years later.
- 2026 Medicare Part B Premiums
  - https://www.medicare.gov/basics/get-started-with-medicare/medicare-basics/what-does-medicare-cost

Prescription Coverage

- The ISU Wellmark Plan premiums includes the Express Scripts / Humana Part D Prescription Drug Plan (PDP)
- There is not a choice of prescription plans.
- Express Scripts is coverage for pre-Medicare members
- The ISU Humana PDP is required for retirees/any family members that are Medicare eligible on the ISU Wellmark medical plan.
- The ISU Humana plan is a unique group Medicare Part D PDP

Express Scripts Plan Design

Annual Out-of-Pocket Maximum	Single $2,000 Family $4,000
30-day supply – retail pharmacy *If you're on a maintenance medication, you may qualify for Smart90 where you will be required to move to a 90-day supply at retail or mail order.	• $15 copay for generic • 30% coinsurance for preferred brand name ($125 maximum copay/prescription) • 50% coinsurance for non-preferred brand name ($250 maximum copay/prescription)
90-day supply – retail pharmacy	• $0 copay for generic • 25% coinsurance for preferred brand name ($300 maximum copay/prescription) • 33% coinsurance for non-preferred brand name ($600 maximum copay/prescription)
90-day supply – Express Scripts Home Delivery Pharmacy	• $0 copay for generic • 25% coinsurance for preferred brand name ($300 maximum copay/prescription) • 33% coinsurance for non-preferred brand name ($600 maximum copay/prescription)

Medicare Part D Standard "Framework"

	2025	2026
Deductible	$590 – eliminated for ISU members	$615 – eliminated for ISU members
Initial Coverage Limit (ICL)	Not Applicable	Not Applicable
Out-of-Pocket Threshold	$2,000	$2,100

Humana Plan Design

	Retail Pharmacy: 30-day supply (90-day supply)	Mail Order: 90-day supply (CenterWell Pharmacy)
Deductible	$0	
Tier 1: *Generic or Preferred Generic*	$10.00 ($30.00)	$0
Tier 2: *Preferred Brand*	30% up to $50.00 maximum out-of-pocket per prescription (30% up for $150.00)	20% up to a $100.00 maximum out-of-pocket per prescription
Tier 3: *Non-Preferred Brand*	50% up to $50.00 maximum out-of-pocket per prescription (50% up for $150.00)	33% up to a $100.00 maximum out-of-pocket per prescription
Tier 4: *Specialty*	50% up to $50.00 maximum out-of-pocket per prescription (N/A)	N/A – limited to a 30-day supply
Annual Maximum Out-of-Pocket (MOOP)	$2,100 – After your out-of-pocket drug costs reach this total, Humana pays 100% of your total drug costs for the remainder of the plan year.	

Humana Part D Smart Summary

- Humana's SmartSummary provides a comprehensive overview of your Part D benefits and prescription drug spending.
- You'll receive this statement after each month you've had a prescription claim processed.
    - Includes:
        - Numbers to watch – shows your total drug costs for the month and year-to-date.
        - Personalized messages – tips on saving money, information about changes in prescription copayments and how to plan ahead.
        - Prescription details

Humana Discounts

- **Dental Discount:** HumanaDental and Florida GoldPlus
- **Dental Health:** Truthbrush discounts
- **Hearing Discount:** Hearing aid discount through TruHearing Hearing Center
- **Vision Discount:** EyeMed
- **IMG Travel Medical/Evacuation Protection:** discounted travel insurance
- **Complementary and Alternative medicine and Weight Management**: Specialists, Nutrisystem, The Vitamin Shoppe, Fitbit
- **Personal Emergency Response System:** Lifeline Medical Alert System
- **Meal Delivery Discount:** Mom's Meals
- **Petzey Pet Telehealth:** on-demand mobile pet telehealth and wellness app

* All offers are subject to change

Medicare Part D & High Income

- Income-Related Monthly Adjustment Amount (IRMAA) is determined by Center for Medicare and Medicaid Services (CMS) and will be reported to you, if you must pay.
- The amount will be deducted from the Social Security Income (SSI) each month in addition to the premium you pay to Wellmark.
- If you decline the deduction for IRMAA, CMS will disenroll you from the ISU Humana Group PDP. This may create issues for regaining the coverage.
- 2026 Medicare Part D Premiums
  - https://www.medicare.gov/basics/get-started-with-medicare/medicare-basics/what-does-medicare-cost

Medicare Part D & Low Income Subsidy

- Participants with low income may qualify for extra help from Medicare and the Part D cost may be reduced.
- Humana is informed by CMS and alerts ISU to adjust the Part D premium.
- ISU alerts Wellmark to reduce your premium for the subsidy amount reported to us by Humana.

Dental Insurance

- Administered by Delta Dental of Iowa
- Two plan choices:
  - Basic Plan
  - Comprehensive Plan – 3-year lock in
- PPO plus Premier Network

- If you drop coverage, you cannot re-enroll.

Dental Plan Comparison

Delta Dental Premier Plus PPO	Basic	Comprehensive 3-year lock in
Maximum Per Person/Year	$750 (applied to restorative services only)	$1,500
Annual Deductible – **applied to first restorative visit**	$25	$50
Check Ups & Cleaning	100%	100%
BASIC RESTORATIVE		
Cavity Repair & Extractions	50%	80%
Root Canals	50%	80%
Gum & Bone Disease	50%	80%
MAJOR RESTORATIVE		
High Cost Restorations	50%	50%
Bridges, Dentures, Implants	Not Covered	50%
Orthodontics	Not Covered	50% after deductible up to lifetime maximum of $2,000 (no age limit)

2026 Dental Insurance Premiums

Tier of Coverage	Basic Plan	Comprehensive Plan
Retiree or Surviving Spouse	$25.00	$44.00
Retiree & Spouse/Partner	$60.00	$113.00
Retiree & Child(ren)	$67.00	$119.00
Retiree & Family	$77.00	$135.00

Delta Dental Information

- www.deltadentalia.com
- 800-544-0718
- Register as a subscriber to access coverage details
- Register to receive electronic explanations of benefits
- Setting up automatic withdrawal with Delta Dental is encouraged
- Locate participating providers
- Order replacement ID cards
- **Vision discount service through DeltaVision**
  - https://www.deltadentalia.com/webres/File/Member/vision-discount.pdf
- Mobile app for Smart phones

Retiree Life Insurance

- If you had ISU life insurance for 10 consecutive years at the time you retired (by June 30, 2021)
  - $4,000 to designated beneficiary

- Update Principal Beneficiary Designation
  - https://www.hr.iastate.edu/retiree-life-insurance

Questions:

Contact ISU Benefits Office

- benefits@iastate.edu
- 515-294-4800

Questions specific to medical & dental services/prescriptions – call customer service phone number on your ID card(s)

Open enrollment closes December 7, 2025!