



2019 Dual Coverage Parameters

Definition:

Dual Coverage: allows for enhanced benefits under the Canyons School District's health and pharmacy benefits. Dual coverage is allowed when both spouses in a couple are employed full time with the District and both spouses elect to enroll in either family or couple coverage through the traditional plan. Both spouses must elect coverage on the same plan design, with the same level of coverage, in the same network. This election needs to be made during open enrollment or within the initial new hire eligibility period in the event that one of the spouses is a new hire or newly eligible for benefits.

The setup for dual coverage is a manual process, therefore employees must notify the Insurance Department in writing of their intent to receive dual coverage through the District. Please note: Governmental regulations prohibit enhanced dual coverage benefits for Qualified High Deductible Health Plans (QHDHP) therefore, participants would receive no additional value from dual enrollment in the High Deductible plan. If both spouses were to enroll in a QHDHP standard Coordination of Benefits would apply; there wouldn't be any premium reduction, each spouse would need to meet the parameters of each coverage, and each would need to meet the annual deductible.

Premiums:

One of the enhanced benefits for dual coverage is a reduced premium obligation. One spouse will pay the full family or couple premium and the other will pay the single employee premium rate while receiving full family or couple coverage. The insurance department team sets the reduced premium rate manually each payroll. The Insurance department must receive guidance in writing from the couple as to which spouse will pay the full premium and which will pay single rate.

Administration:

The administration of dual coverage is very similar to the standard coverage. The covered procedures, benefits, allowances, benefit maximums etc. are the same as the standard coverage. Also, the coverage networks are the same for dual coverage as the standard coverage.

Pharmacy- Dual coverage participants will be set up on a special 0 copay level of coverage. This means that they will not need to pay a cost share for Prescriptions. The participant will need to present both cards to the pharmacist. They will need to contact the pharmacy administrator for assistance with pharmacy issues pertaining to dual coverage.

Health Carrier - Health coverage is set up on a make whole 100%. The participant would need to present both cards to the provider (i.e., Doctors office, urgent care, emergency room) Claims would be covered without the typical 80/20 cost share.

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