



BRINGING YOUR BENEFITS INTO FOCUS

2020 Enrollment Frequently Asked Questions (FAQs)

Enrollment and Eligibility

Q: When is Open Enrollment this year?

A: The 2020 Open Enrollment period will take place from Friday, November 15 – Monday, December 2, 2019. This is your only opportunity to elect or make changes to your benefits coverage, unless you experience a Qualified Family Status Change Event (QFSC), such as marriage/divorce or the birth/adoption of a child.

Q: How do I enroll in benefits?

A: Go to LPL@Work. Under “My Apps / Systems,” select “ADP My Pay and Benefits.” From here, you can review your current elections and make any necessary changes.

Note: if you are accessing the enrollment site while on the LPL network, you will be automatically signed in. If you are accessing the enrollment site from outside of the LPL network, you will need to use your login credentials to sign in. For first time users, follow the self-registration process on the sign-in page.

Q: If I like the benefits I have today, do I need to do anything during Open Enrollment?

A: If you are not making any changes to your plans, you should still log on to ADP's My Pay and Benefits and confirm the accuracy of your current elections, including your life insurance beneficiary designation and covered dependents.

Please note that you must re-enroll in the Health Savings Account (HSA) and Health Care, Limited Purpose or Dependent Care FSAs each year to participate in these plans.

Q: Can I change my benefit elections throughout the year?

A: No. You cannot make changes to your benefits outside the Open Enrollment period, unless you experience a Qualified Family Status Change (QFSC). The benefits you elect during Open Enrollment will be in effect from January 1, 2020 – December 31, 2020.

Q: What is a Qualified Family Status Change event (QFSC)?

A: A Qualified Family Status Change (QFSC) is an event such as the birth/adoption of a child, marriage or divorce, which allows you to make changes to your benefits during the year. For more information on what qualifies as a QFSC, contact ADP at 855-894-7752.

Q: Who is eligible for benefits?

A: All full-time employees scheduled to work at least 30 hours per week are eligible to participate in the LPL benefits program. You may also enroll your eligible dependents, subject to limitations as noted within each plan description. Eligible dependents include your:

- Spouse or domestic partner (same or opposite gender)
- Your child(ren) and your covered spouse's or domestic partner's child(ren) up to age 26
- Unmarried children of any age if they depend on you for support due to a physical or mental disability which commenced before the limiting age

Refer to myLPLbenefits.com for more details on eligibility.

Medical and Prescription Drugs

Q: Is preventive care covered under all of the medical plans?

A: Yes, all ACA-mandated preventive care is covered at 100% under all of the medical plan options offered by LPL. For a list of covered preventive care services, go [here](#).

Q: What is a Primary Care Physician and why do I need one?

A: A Primary Care Physician (PCP) is the doctor you go to for routine screenings and wellness visits, and also consult with for any health questions and concerns. If you elect the Aetna (Select) EPO plan or the Kaiser HMO (CA only), you and your enrolled dependents are required to select a PCP to manage your health needs. A PCP must provide referrals before you see a specialist (with the exception of an OB/GYN).

Q: What if my doctor isn't in the covered network?

A: Some of our plans provide you with the option to seek treatment from an out-of-network provider, however, you will pay more than if you were to use an in-network provider, and some services will not be covered. It is more cost efficient to use an in-network provider.

Q: How do I find an in-network provider?

A: For AETNA, go to aetna.com/docfind and follow the steps below. You can also call Aetna at 866-987-0327 for assistance.

Already enrolled in an Aetna plan:

1. Type in the provider's name and zip code
2. Click the Search button
3. Then, select your medical plan from the drop-down menu.
 - For the Aetna EPO, scroll down and pick "Aetna Select (Open Access)"
 - For the Aetna PPO and High Deductible Plans, scroll down to "Aetna Open Access Plans" and select "Aetna Choice POS II (Open Access)"
4. If your provider shows up in the search results, he/she is in the network.

Not currently enrolled in an Aetna plan:

1. Under 'Continue as a guest' enter your home location (zip, city, county or state) and choose correct location
2. Click the Search button
3. Enter your medical plan in the search field, select the plan, then click on the Continue button
 - For the Aetna EPO, enter "Aetna Select (Open Access)"
 - For the Aetna PPO and High Deductible Plans, enter "Aetna Choice POS II" and select the "Aetna Choice POS II (Open Access)" plan
4. Search by provider name or category

A: For KAISER, visit kp.org/searchdoctors to browse doctor profiles and select a doctor who matches your needs or call Kaiser at 800-464-4000.

Q: What is telehealth and how might I use the telehealth services?

A: Telehealth is a form of virtual care that allows you 24/7 access to board certified physicians. When you enroll in a medical plan through LPL, you automatically receive telehealth services available to you through Teladoc if you are enrolled in an Aetna plan or through Virtual Care if you are enrolled in Kaiser (for CA residents only). You can use telehealth services for issues like a fever, sore throat, or rash. Generally, you will be connected with a doctor in under an hour.

Q: What expenses count toward my deductible and out-of-pocket maximum?

A: **Deductible:** The deductible is the amount you are responsible for paying before the plan pays benefits for services that are subject to the deductible. The amount you must pay in order to meet your deductible depends on the plan in which you enroll.

Out-of-Pocket Maximum: An out-of-pocket maximum is the limit on how much you will pay toward medical expenses in a single plan year (January 1 – December 31) Once you reach the out-of-pocket maximum, the medical plan will cover 100% of eligible costs for the remainder of the plan year. Copayments, deductibles and coinsurance paid for covered medical/Rx expenses all count toward your out-of-pocket maximum.

Q: If I take a maintenance medication, is there a mail order delivery option available?

A: Yes, you can save time and money by obtaining a 90-day supply of your maintenance medication through the mail order option. The medication will be shipped directly to your home address on file for the price of a 60-day retail supply.

Q: Are preventive medications covered at 100%? If so, where can I find a list of them?

A: Yes, preventive medications are covered at 100%. You can find a full list of covered medications through your Prescription Drug Provider's website.

Health Savings Accounts (HSA)

Q: What is a Health Savings Account (HSA)?

A: A Health Savings Account is a special bank account owned by you. It allows you to use pre-tax dollars for current and future health care expenses for you and your eligible dependents. The HSA is paired with the Health Fund (HSA) PPO plan, which when used together give you more control over your health care expenses. LPL automatically contributes to your HSA and you also have the option to make your own contributions, up to \$3,050 if you elect employee only coverage and up to \$6,100 if you elect employee+dependent(s) coverage.

Q: How much will LPL contribute to my HSA?

A: LPL will contribute \$500 annually for employee only coverage and \$1,000 annually for employee+dependent(s) coverage to your Health Savings Account in 2020.

Q: Can I contribute to the HSA?

A: Yes, you can contribute up to \$3,050 if you elect employee only coverage and up to \$6,100 if you elect family coverage. If you will be age 55 or older by December 1, 2020, you are permitted to make catch-up contributions – an extra \$1,000 a year.

Q: If there are funds left in my HSA at the end of the year, do the funds roll over to the next year?

A: Yes, any remaining funds left in your HSA at the end of 2020 will roll over for use in 2021 or beyond. Also, if you retire from or leave LPL, the account is yours to take with you.

Dental

Q: If I or one of my dependents will need braces next year, which dental plan is best for me?

A: The Enhanced PPO Dental Plan is best if you or one of your covered dependents need orthodontia coverage. The plan pays 50% for covered orthodontia services, and the lifetime out-of-pocket-maximum for orthodontia is \$2,000. The Traditional PPO Dental Plan does not cover orthodontia.

Q: How do I find a network dentist?

A: Go to deltadentalins.com and select “Find a Dentist” on the right side bar or call 800-765-6003.

Vision

Q: How do I find a network provider?

A: Go to www.vsp.com and click “Find a Doctor” or call 800-877-7195.

Q: How often can I get a vision exam?

A: Both the Traditional and Enhanced Vision plans cover one vision exam each year. (every 365 days)

Q: What is the allowance for frames and lenses under the vision plans?

A: The table below outlines the frames/lenses benefits under each of the vision plans.

	Traditional Plan		Enhanced Plan	
	In-Network	Out-of-Network	In-Network	Out-of-Network
	Every 24 months		Every 12 months	
Lenses				
- Single Vision	Paid in full	Up to \$30	Paid in full	Up to \$30
- Bifocals		Up to \$50		Up to \$50
- Trifocals		Up to \$65		Up to \$65
- Lenticular		Up to \$50		Up to \$50
Frames	\$150 allowance	Up to \$70	\$200 allowance	Up to \$70
Costco/Walmart Frames	\$80 allowance	Not covered	\$110 allowance	Not covered

Q: What is the allowance for contact lenses under the vision plans?

A: There is a \$150 allowance in-network and up to \$105 out-of-network toward contact lenses under the Traditional PPO plan once every 24 months. Under the Enhanced PPO plan, the allowance is \$200 in-network and up to \$105 out-of-network once every 12 months.

Flexible Spending Accounts (FSA)

Q: How much can I contribute to my FSA?

A: See the table below for FSA annual contributions limits for 2020.

Account Type	Contribution Limit
Health Care FSA	\$2,750
Dependent Care FSA	Single or married filing jointly: \$5,000 Married and filing separately: \$2,500
Limited Purpose FSA	\$2,750
Commuter Spending Account	\$270 (per month)

Q: If I have an FSA in 2019, will I automatically have an FSA in 2020?

A: No, you must re-enroll in the FSA each year during Open Enrollment in order to continue making contributions or to use roll-over funds in the Healthcare or Limited Purpose FSA.

Q: If I have unused funds left over in my FSA at the end of 2020, will those funds roll over to the following year?

A: If you have a remaining balance at the end of the year, you can roll over up to \$500 of unused Healthcare or Limited Purpose FSA funds into 2021 to be added to your available balance for use throughout the calendar year. Remember, you must actively re-enroll in the FSA each year during Open Enrollment in order to continue making contributions.

Life and Accidental Death & Dismemberment (AD&D) Insurance

Q: What is the maximum amount of Life and AD&D I can elect?

A: LPL provides Life Insurance and AD&D coverage in the amount of 2.5x your annual benefit salary (defined by LPL as your annual rate plus commissions, but not overtime or bonus) up to a maximum benefit amount of \$500,000.

Q: What is AD&D?

A: AD&D, or Accidental Death and Dismemberment Insurance, provides benefits for covered loss of life, limb, hearing or sight as a result of an accident. Dependents may also be insured. For other covered losses, the plan may pay the full coverage amount or a percentage of the coverage amount depending on the type of loss.

Q: What is Evidence of Insurability (EOI)?

A: If you are increasing your life insurance coverage or are enrolling for the first time, information on the current condition of your health or dependent's health will be required through the completion of Evidence of Insurability (EOI).

Additional Information

Q: Where can I go to learn more?

A: Visit myLPLbenefits.com for all your benefits information. From here you can see all of your benefits options and plan information, find important vendor contacts and flyers, link to vendor websites, and get helpful tips.

Q: Are there resources to assist me with work/life balance?

A: Yes

- **Employee Assistance Program (EAP):** LPL provides an EAP through Lincoln Financial that you can access 24/7 at no cost to you. The EAP provides confidential assessment, assistance, and referrals to additional services for you, your spouse/domestic partner, dependent children and all household members. Get support for a wide range of emotions, family and work issues such as alcohol and drug abuse, depression, legal or financial issues, and work or family stress/anxiety. Visit workhealthlife.com/mlassist or call 877-695-2789 for assistance.
- **LPL LiveWell:** LiveWell is an online portal for all things wellness. You can access physical activity and step-trackers, a nutrition journal or food diary, a fitness library, incentive programs that reward healthy activities, challenging programs that help you get fit and wellness podcasts. Visit LPL@Work to access the portal.

Q: Are there any resources or tools available to help me understand my benefits and manage my health care?

A: Yes, when you enroll in an LPL medical plan, you have access to the following services:

- **Compass Health Pro:** Compass Health Pro is available to provide straight answers and smart advice. Contact Compass Health Pro for help understanding your benefits, comparing service costs, scheduling appointments and even reviewing your bills and charges to ensure that everything is accurate. Visit compassphs.com or call 800-513-1667 for assistance.

- **Best Doctors:** If you or a family member receives a significant diagnosis, Best Doctors is available to ensure you are getting the best care possible so you can focus on your health, by providing the following services at no cost to you:
 - Review diagnosis and treatment plan
 - Find the best specialist in your area
 - Understand treatment options
 - Reduce medical expenses
 - Receive a second opinion from medical experts

Visit bestdoctors.com or call 1-866-904-0910 for assistance.