



Frequently Asked Questions

2019 Annual Enrollment

The Annual Enrollment window will open on Wednesday, Oct. 3 to make 2019 benefit elections. Failure to enroll by Wednesday, Oct. 17 will result in no coverage for 2019. Visit windstreambenefits.com to enroll.

Table of Contents

Annual Enrollment.....	1
Benefit Plans.....	3
Health Savings Plans.....	7
Benefit Enrollment Tools.....	8
Other Benefits Questions.....	9
Preparing for Enrollment.....	9

Annual Enrollment

Q. When is Annual Enrollment?

A. This year's Annual Enrollment begins Wednesday, Oct. 3, 2018, and ends on Wednesday, Oct. 17, 2018. During this time, you must enroll through Mercer Marketplace 365 to have health benefits starting January 1, 2019. Your current medical, dental, and vision coverage plus savings and spending accounts will not continue after Dec. 31, 2018.

Q. Do I need to enroll? What happens if I do nothing?

A. Yes, action is required! You must enroll online by visiting windstreambenefits.com to make your 2019 health and welfare benefits elections between Oct. 3 and Oct. 17. If you do not take action, you will not have Windstream benefits coverage in 2019.

Q. How do I enroll?

A. Starting Oct. 3, visit windstreambenefits.com or call **866.553.9409** to enroll. You can review enrollment instructions and link directly to the Mercer Marketplace 365 website by going to windstreambenefits.com. Enrollment instructions can also be found in the [2019 Annual Enrollment Decision Guide](#) which was mailed to your home address.

The enrollment website will guide you through the enrollment process step by step. As you go through the site, you will see the coverage details and costs for each plan clearly displayed in your shopping cart. When you check out, you will have a chance to review your selections and see your total cost. It is that simple!

If you prefer to enroll by phone, you may contact a Mercer Marketplace 365 benefits counselor at **866.553.9409** from 7 a.m. – 10 p.m. ET, Monday through Friday, and 10 a.m. – 2 p.m. ET on Saturdays.

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Q. Who is eligible to enroll in Windstream benefits?

A. Health coverage is available to all U.S. based employees regularly scheduled to work at least 30 hours per week and their eligible dependents, including a legal spouse (not separated or divorced), dependent children, and dependent grandchildren.

Q. What information is required to enroll my dependent in coverage?

A. If you are enrolling dependents in a Windstream plan for the first time, you will need to provide their name, date of birth and social security number. In addition, you will need to submit government-issued documentation showing your relationship, like birth and marriage certificates. Since you may need to order documents from vital records/your local clerk's office, please begin collecting these documents immediately. If this information is not provided by Dec. 7, 2018, your dependents will not have coverage in 2019. Dependents who were verified for 2018 will not need to be re-verified.

Q. How can documentation be submitted?

During enrollment, you will have the option to upload the documents in the enrollment system, or you can use one of the options below. You will be notified by email after enrollment about any necessary documentation you need to provide.

You may submit by:

- Email: MercerMarketplace.BenefitCenter@mercer.com
- Fax: 515.365.4364
- Mail: Mercer Marketplace/PO Box 14501/Des Moines, IA, 50306-3501

Q. How long do I have to provide proper documentation?

If you newly enroll dependents on a Windstream medical, dental or vision plan, you will have until **Dec. 7, 2018** to submit documentation. New hires or employees who experience qualified life events will have 60 days from date of hire or event date to provide documents.

Q. How long will it take Mercer Marketplace to confirm my dependents are eligible?

The standard turn-around time is 2-3 business days after receipt of documentation. However, with increased volume during annual enrollment, the time may increase to 7-10 business days.

Q. I'm a Canadian employee, do I have access to Windstream's benefits?

A: Windstream benefits are only available to U.S. based employees. Canadian benefits will remain as is. No action is required to continue coverage under Canadian health plans.

Q. Does Windstream cover domestic partners?

A: Since marriage equality and the opportunity to marry exists between same-gender and opposite-gender partners, Windstream does not offer insurance coverage to unmarried partners of any gender.

Q. What should I consider before I enroll in my 2019 benefits?

A. We encourage you to give some thought to these questions before you enroll:

- How much health care and what type of care did you and your covered family members need in 2018?
- Will your needs be similar in 2019? Do you foresee any changes?

- How do you prefer to handle costs? For instance, would you rather pay more from your paycheck for a medical plan that covers more of your costs when you need care, or pay as little as possible from your paycheck – even if that means bigger bills when you need care?
- How much life insurance do you need to feel comfortable and well protected?

Carefully consider all your enrollment decisions. After Annual Enrollment ends, you won't be able to change your benefits until the next annual enrollment period, unless you experience a qualified life event, like a marriage, divorce, birth of a child or a change in your spouse's work status.

Q. What if I make a mistake when I enroll in my 2019 benefits?

A. We encourage you to review your benefits carefully after enrolling to ensure you have enrolled yourself and your intended dependents in the plan you choose. Please print out your confirmation statement as a record of your enrollment. If you realize you made a mistake after the enrollment window closes, you should contact Mercer Marketplace 365 at 866.553.9409 before your 2019 benefits begin. Please note that you must have enrolled during the enrollment window to make changes. If you miss the enrollment deadline of October 17, you will not be able to enroll unless you have a qualifying event.

Benefit Plans

Q. Where can I learn about my health and welfare benefit options for 2019?

A. With so many benefit choices, you have important decisions to make. We will support you every step of the way with education and resources to ensure you understand your options and feel confident about the enrollment process, including:

- **windstreambenefits.com** – Beginning in early September, windstreambenefits.com will provide all the details you need to understand your options.
- **Annual Enrollment Decision Guide** – You will receive a guide, mailed to your home address in mid-September, which provides an overview of your expanded benefits program and the improved enrollment process.
- **Mercer Marketplace 365 website** – Starting Oct. 3, you will be able to access Mercer Marketplace 365 through **windstreambenefits.com**. This site provides education and decision-support tools to help you select the benefits that are right for you. This is also where you will enroll for 2019 benefits.

Q. How are my health and welfare benefits changing for 2019?

A. There are very few changes to Windstream's core benefits for 2019, and you will have two new programs available at no cost to you. Health Advance Expert Medical Opinion and Progyny Fertility. You can find more information about your 2019 benefit options on **windstreambenefits.com**. Once the Mercer Marketplace 365 enrollment website opens on Oct. 3, you will also be able to see your cost and coverage details as you go through the enrollment process.

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At a high level, you will be offered:

1. **Your choice of carriers – Blue Cross Blue Shield (BCBS) or UMR (UnitedHealthcare).** The plan design features and benefits with each carrier are the same. In each state, one carrier will have a lower cost than the other. This represents the larger discount that doctors and facilities have with one carrier over the other in each state. The lower cost provider is identified as Carrier 1.
2. **Prescription drug coverage.** Coverage for prescription medications comes with each plan and is provided by Express Scripts.
3. **Free in-network preventive care.** Services such as annual physicals, immunizations and routine cancer screenings are fully covered at 100% in-network. That means you pay nothing. For a list of covered services, review the summary plan document for your plan.
4. **Annual deductible.** You pay for initial medical and prescription drug costs until you meet your annual deductible.
5. **Coinsurance.** After meeting your deductible, you pay a percentage of eligible costs through coinsurance, then the plan pays the rest. *Keep in mind: With the \$1,850 Deductible Plan — per IRS regulations — coinsurance for any person covered under an employee plus dependent plan begins only after the entire family deductible has been met.*
6. **Tax-saving opportunity:** If eligible, you can contribute to a Health Savings Account (HSA) on a before-tax basis to help pay for your eligible out-of-pocket healthcare costs – in 2018 or in the future.
 - a. Your HSA funds roll over year after year; they are always yours to keep!
 - b. Windstream will contribute up to \$600 tax-free to your HSA, deposited over the course of the year (per pay period).
 - c. If you enroll in a high-deductible health plan and you do not meet the HSA eligibility requirements, or choose not to enroll in one, Windstream will contribute up-to \$500 tax-free to a Health Care FSA if you enroll in one and contribute a minimum of \$1 annually. The IRS limits employer contributions to a Health Care FSA to \$500.
7. **Out-of-pocket maximum.** Each plan protects you by capping the total amount you will pay each year for medical care. Once you meet your out-of-pocket maximum, the plan pays 100% of your eligible expenses for the rest of the year. Medical premiums are not included in the out-of-pocket maximum calculation.
8. **Health Advocacy –** Get free, personalized assistance to help you navigate the health care system, from understanding claims to choosing providers and negotiating fees. Available to you and your family members January 1, 2018, this service can save you time and money.

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- 9. Advance Medical** - The expert medical opinion program through Advance Medical ensures that the medical treatment you get is the medical treatment you need. You work directly with a doctor whenever you're concerned about a treatment or diagnosis, feel that you're not clear on what to do next, or wonder if you have all the information you need to make a decision. This service is available 24/7 at no extra cost to you and your enrolled family members. More information will be available at windstreambenefits.com when the program is available in 2019.

Q. What is staying the same?

A. Express-Scripts, UMR and BCBS will continue to be the prescription and medical providers. There are no changes to the Dental and Vision plans. Basic Life and AD&D insurance, disability insurance, retirement savings and other voluntary benefits will continue to be offered with no changes to premiums or plans.

Q: Is my insurance going to cost me more than last year?

A: For 2019, you will see a 2% increase, on average, in the medical plan premium. Dental, vision and life insurance rates are not increasing.

Q. How much does Windstream contribute toward employee health care?

A. National healthcare costs are increasing 4-8% per year. Despite overall cost increases, the company continues to provide competitive plan options to our employees. Total spending on medical care in 2019 is expected to be approximately \$100 M. The company's share of the premium expense averages 75% on medical and 50% on dental.

Q. Will there still be surcharges?

A. Yes, the following surcharges will remain in place.

- **Spousal Surcharge** – Windstream has a spousal surcharge of \$100 per month for spouses who have coverage available through his/her employer and chooses to be on a Windstream medical plan. If your spouse is not offered coverage through his/her employer or is not employed, the surcharge does not apply. If your spouse is employed by Windstream, the surcharge does not apply.
- **Tobacco Use Surcharge** – A \$50 monthly surcharge will be applied to each medically enrolled employee and spouse who attest to using tobacco products during enrollment. The surcharge can be removed if you complete a tobacco cessation program or quit tobacco use by calling 866.553.9409.
- **Medical Surcharge for Biometric Screening/WB5 Non-Completion** – Employees AND spouses who enroll in a Windstream medical plan who complete BOTH the biometric screening and online WB5 health assessment will maintain a lower medical premium. There is a \$500 annual surcharge for not completing both activities between Feb. 1 and May 31, 2019.

Q. What about preventive care?

A. Windstream health plans cover a set of preventive services in-network at no cost to you even if you haven't met your deductible. Covered preventive care services include biometric screenings, mammograms, colonoscopies, vaccines and well-woman visits. Be sure to follow

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the recommended age guidelines outlined in the medical summary plan description when scheduling your preventive care. Also, certain medications are defined by the IRS as preventive. Preventive prescription medications are available at a coinsurance rate whether or not you have met the deductible of your medical plan.

Q. Will I get new ID cards?

A. In most cases, you will continue to use your current medical and Rx ID cards. If you make changes to your benefits during enrollment, hold on to all cards until you receive new ones. Remember, VSP and dental ID cards are not required and can be downloaded from the providers website.

Q. How can I tell if my doctor is in-network?

A. Using in-network providers saves you money. You can easily find doctors in your medical plan network by visiting each provider's website:

Blue Cross Blue Shield

1. Visit **windstream.blueadvantagearkansas.com**.
2. Scroll down to the appropriate category: **Georgia Employees, Florida Employees or All Other Employees.**
3. Update your location and start searching.

UMR/UnitedHealthcare

1. Visit **UMR.com**.
2. Click **Search for a Medical Provider.**
3. Enter your Zip Code.
4. Enter your doctor name, facility or specialty in the keyword search.

Starting Oct. 3, you may call 866.553.9409, for assistance locating an in-network physician.

Q. Who can I contact with questions?

A. For questions regarding your 2019 benefits, you have the following options available to you for personalized service:

- **Enrollment** – If you need help choosing your plan or have trouble navigating the enrollment system, Mercer Marketplace 365 offers a team of licensed benefits counselors to provide you with personal support. Just pick up the phone or chat with them online if you need help. Licensed benefits counselors will be available by phone at 866.553.9409 or online at **windstreambenefits.com** once the enrollment window opens Oct. 3.
- **Claims Issues and Insurance Questions** – Windstream will provide you access to Health Advocate services at no cost to you. You can turn to Health Advocate when you need help navigating the health care system, understanding a bill, dealing with a claim issue, making a doctor's appointment, and more. Simply call 866.695.8622 and ask to be connected to a representative. You may also use the online chat tool in the enrollment site.

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Health Savings Plans

Q. What is the difference between an HSA and a Health Care FSA?

A. A Health Savings Account (HSA) offers you the ability to save up tax-free money to pay your health care expenses. In addition to your own contributions, you will also receive up to \$600 in tax-free company contributions from Windstream if you enroll in a Windstream medical plan and elect an HSA. The contribution will be deposited in prorated amounts throughout the year each pay period. With an HSA, the account is yours to keep – unused money rolls over year after year, and it can even be used to help plan for health care expenses in retirement.

If you do not meet the IRS eligibility rules to open an HSA, or if you choose not to open one, you can enroll in a Health Care Flexible Spending Account (FSA). With this account, you can contribute money to pay for health care expenses tax-free. You will receive up to \$500 tax-free contribution from Windstream. (The IRS limits an employer contribution to a Health Care FSA to \$500.) Unlike an HSA, a Health Care FSA is a “use it or lose it” account. You are only allowed to roll over \$500 of unused funds if you enroll in an FSA the following year.

Q. Can anyone enroll in a Health Savings Account (HSA)?

A. No. This plan design is governed by federal regulations. You cannot contribute to a HSA if:

- You are enrolled in Medicare, TRICARE or TRICARE for Life
- You are claimed as a dependent on someone else’s tax return
- You are covered by a Full Medical Flexible Spending Account, or
- You are covered by any other health plan that is not a federally qualified, high deductible plan.

If you are newly enrolling in an HSA you’ll be prompted to affirm the set-up of a health saving account during your online Annual Enrollment session while making your medical election. If you do not open an HSA or provide documentation per the US Patriot Act verification process if requested, Windstream will be unable to make the contribution.

Q. What family members can I cover on a Windstream medical plan with a HSA?

A. All eligible family members (see eligibility section) may be enrolled in a medical plan. However, federal law only allows your federal tax dependents to have claims paid from your HSA.

Q. Can I have a Medical Flexible Spending Account and a Health Savings Account?

A. No. Federal law does not permit you to participate in a Full Medical Reimbursement Flexible Spending Account (FSA) if you enroll in a Health Savings Account. You’ll still be able to participate in Dependent Care Reimbursement, Mass Transit and Parking Reimbursement Accounts.

Q. Can I enroll in a Flexible Spending Account (FSA) if I don’t enroll in a Windstream medical plan?

A. Yes. You can enroll in an FSA account without enrolling in a Windstream medical plan. However, you will only be eligible for the company contribution by enrolling in a Windstream high-deductible medical plan and contributing at least \$1 annually.

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Q. Can I enroll in a Health Savings Account (HSA) if I don't enroll in a Windstream medical plan?

A. No. Enrollment in a Windstream HSA account is dependent on enrollment in a Windstream high-deductible medical plan.

Q: Once I choose how much I want taken out of my paycheck for my HSA contribution, can I ever change it?

A: Yes. You will be able to change your contribution throughout the year through Mercer Marketplace 365. However, you are responsible for making sure your annual voluntary contribution does not exceed the annual limits set by the IRS.

Benefit Enrollment Tools

Q. What is Mercer Marketplace 365?

A. Mercer Marketplace 365 is an online benefits shopping platform where you will enroll in your Windstream health and welfare benefits during Annual Enrollment this fall. Through the Mercer Marketplace 365 website, you will choose from an expanded selection of benefits – including a choice of four medical plans and two medical plan providers, and robust voluntary benefits like hospital indemnity insurance and identity theft protection. The website has decision-support tools to help you see which plans best fit your unique needs.

Q. How will Mercer Marketplace 365 help me make decisions?

A. As you enroll on the Mercer Marketplace 365 website, you will find key information displayed for each plan, including coverage details and what it will cost. You will also find tools, videos and other information to help you better understand your benefit options.

If you need help finding the right coverage, you can use the Mercer Marketplace 365 “best match” feature. After you log in, you will be asked a few profile questions about your medical insurance usage, payment preference and ability to afford an unexpected medical expense. Then, the website will show you the plans that may best match your situation. While the decision is yours, these suggestions may help you make an appropriate choice.

Another great new tool is the plan comparison feature on the Medical Plan page of the Mercer Marketplace 365 website. This tool allows you to compare different medical plan options and their costs. You can plug in different scenarios based on who you are covering in your family and what services you think you will need next year. Then, the tool will show you what your estimated costs for the year will be for each of the plans.

Q. How will Mercer Marketplace 365 help me stretch my health care dollars?

A. The Mercer Marketplace 365 website will help you take control of your health spending by:

- Clearly showing the costs associated with each plan.
- Offering a range of options at different prices.
- Helping you find the most cost-effective plan for your needs.
- Offering valuable tax savings through health and dependent care accounts.

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- Giving you access to group discounts on additional benefits such as auto and home insurance, pet insurance, and more.

Other Benefits Questions

Q. What do I do if I experience a qualifying life event during or after annual enrollment?

A. Qualifying events such as a marriage, death, birth or divorce are effective on the date of the event. Should you have a qualifying event before the end of 2018, you will need to change your benefits within 30 days of the event to enroll for coverage for the remainder of the year.

Should your qualifying event occur during or after annual enrollment, you will also need to update your benefit elections for 2019. After changing your 2018 benefits, update your 2019 enrollment by logging into windstreambenefits.com or calling 866.553.9409.

Q. Are voluntary medical supplement plan premiums pre-tax or post-tax?

A. Supplemental medical premiums are deducted on a post-tax basis. Claim payments made are not taxable.

Q. I was recently hired, where do I enroll?

A. If you were hired before Oct. 7, you will need to enroll in Windstream benefits for 2018 through Mercer Marketplace 365. You will need to enroll for 2019 benefits covered during annual enrollment which is Oct. 3-17). Those with a start date of Oct. 7 or after will need to enroll for 2019 benefits coverage via Mercer Marketplace.

Preparing for Enrollment

Q. How do I make sure I receive the enrollment brochure at home?

A. Make sure your home mailing address on file with Windstream is up to date using Employee Self Service in [The Hub](#). Click on the Personal Details Tile (on the Employee Dashboard). Choose the Menu link for the information that needs to be changed. For example: if you are changing your home mailing address, click on the Addresses menu link. Your current information will appear. Click on the item you want to change, then update and submit the online form.

Q. What information do I need to enroll my dependents?

A. Gather birth dates and social security numbers of dependents you plan to newly enroll. The law requires Security Numbers (SSN) for all family members enrolled in insurance. Please make sure that the SSN for each of your dependents is correct. Failure to update the SSN will result in a tax penalty for you and may cause issues with processing your claims. If your dependents were verified in 2018, you will not need to re-submit verification documentation.

Q. What do I need to do to verify that my dependents are eligible for coverage?

A. If you plan on enrolling a dependent, you will need to gather and submit government-issued documentation showing your relationship, like birth and marriage certificates. **Since you may**

need to order documents from vital records/your local clerk's office, please begin collecting these documents immediately.

Q. Where do I go when I need help?

A. Once Annual Enrollment begins on Oct. 3, licensed benefits counselors will be available by phone (866.553.9409) or secure online chat to answer your questions and provide any assistance you might need.

During Annual Enrollment, Mercer Marketplace 365 benefits counselors will be available at 866.553.9409 with extended hours from 7 a.m. – 10 p.m. ET, Monday through Friday, and 10 a.m. – 2 p.m. ET on Saturdays.

After Annual Enrollment ends, licensed benefits counselors will remain available at 866.553.9409 to you year-round to help you use your benefits wisely and answer any questions that may come up. Turn to these counselors when you have everyday questions about your benefits, like what is covered and what is not, as well as when you need guidance about how to make the best use of your benefits. Regular hours after Annual Enrollment ends are Monday through Friday, 7 a.m. – 9 p.m. ET.