



Frequently Asked Questions

2022 Open Enrollment

The Open Enrollment window opens Wednesday, Oct. 6 to make 2022 benefit elections. Failure to enroll by Wednesday, Oct. 20 will result in no coverage for 2022. Visit windstreambenefits.com to enroll. FAQ updated as of Sept. 1, 2021.

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Enrollment System Tips

'Add to Cart' Functionality

Our benefits partner, Mercer Marketplace, uses "Add to Cart" functionality throughout the enrollment system you will access to make your benefit elections. In fact, you will see this feature as you make your selection for each benefit plan. For medical, dental, vision and all spending and savings accounts you must choose "Add to Cart" to enroll in each To select a spending and savings account, enter your annual contribution amount, click "Calculate" and then "Add To Cart."

Medical Plan Recommendation

The enrollment system will recommend a plan based on your answers to the guided-shopping questions. The medical plan design is the same for both BCBS and UMR. Please review your plan and carrier election carefully to ensure you have selected the lower cost carrier, if desired.

Unverified Dependents

Unverified dependents are those who are new to coverage for 2022 and/or were not enrolled in 2021 medical, dental, or vision. They will need to be verified within 30 days of making your enrollment selections. Your unverified dependents will not show as enrolled in medical, dental, and/or vision, and your medical, dental, and vision rates will not reflect the cost of those dependents until the verification process is complete. After your dependents are verified, you may go back and update your HSA contribution up to the family maximum, if desired.

Health Savings Account (HSA) – Medical Plan Default Option

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If you enroll in a Windstream medical plan, you have the option to enroll in the Health Savings Account (HSA). If you desire the Health Care FSA instead of the HSA, the system requires that you click the “remove” button in the HSA section prior to enrolling in the FSA plan on the Savings and Spending Account page.

Company Paid Benefits

All eligible employees are automatically enrolled in Basic Life, Basic AD&D, Short-Term Disability, and Long-Term Disability. There are no changes to these plans and Windstream pays the full cost. However, short-term disability will not show in the Mercer platform as it is a pay policy administered by Windstream payroll.

Beneficiaries

Beneficiary information from 2021 has been transferred to the enrollment system for 2022 for each benefit plan that requires a beneficiary (basic, voluntary, AD&D, and supplemental). You can update your beneficiary information at any time, but it is a wise practice to review at least once a year during open enrollment.

Tobacco and Spousal Surcharge Questions

Please be aware that the system defaults the question, “Have you used Tobacco Products in the last 12 months?” to “Yes”. You can change your response as you go through the enrollment process.

If after making benefit selections you need to update your answers to the questions that drive the tobacco and spousal surcharges, follow these steps: Home > Open Enrollment (Edit Selections) > Get Started > My Information > Edit (button beside “My Information” right above your address). Once there you may make your applicable changes/selections.

Open Enrollment

Q. When is Open Enrollment?

A. This year’s Open Enrollment begins Wednesday, Oct. 6, 2021, and ends on Wednesday, Oct. 20, 2021. During this time, you must enroll through Mercer Marketplace 365+ (MM365+) to have health benefits starting January 1, 2022. Your current medical, dental, and vision coverage plus savings and spending accounts will not continue after Dec. 31, 2021; these benefits do not “roll over.”

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

A. Yes, action is required! You must enroll to make your 2022 health and welfare benefits elections between Oct. 6 and Oct. 20. If you do not take action to enroll, you will not have Windstream benefits coverage in 2022.

Q. How do I enroll?

A. Starting Oct. 6, visit windstreambenefits.com or call **866.553.9409** to enroll. You can review enrollment instructions and link directly to the MM365+ website by going to windstreambenefits.com.

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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 MM365+ 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.

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, such as 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. Dependents who were verified for 2021 will not need to be re-verified.

Q. How is dependent verification documentation submitted?

You can upload the documents in the enrollment system.

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 30 days from the day of your enrollment to submit documentation.

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 open 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: The benefits related to this open enrollment 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 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 use this past year?
 - Will your needs be similar to last year? Do you foresee any changes?

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- 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 Open Enrollment ends, you won't be able to change your benefits until the next open 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 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 save your benefits summary as a record of your enrollment. If you realize you made a mistake after the enrollment window closes, you should contact Mercer at 866.553.9409 before your 2022 benefits begin. Please note that you must have enrolled during the enrollment window to make changes. If you miss the enrollment deadline of Oct. 20, 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?

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

- **windstreambenefits.com** – Beginning in Sept., windstreambenefits.com will provide details you need to understand your options.
- **Open Enrollment Decision Guide** – You will receive the guide mailed to your home address in late September, which provides an overview of your expanded benefits program and the improved enrollment process.
- **MM365+ website** – You are able to access MM365+ through windstreambenefits.com. This site provides education and decision-support tools to help you select the benefits that are right for you.

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

A: For 2022, medical rates are increasing 8%. For carrier one rates, this means you'll see an increase of \$2 to \$20 depending on plan and tier selected. This increase is higher than our historical run rate due to COVID-19 treatment expenses and the impact of delayed care.

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

A. Total spending on medical and dental care is expected to be approximately \$100M. The company covers approximately 75% of these costs, or \$75M.

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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 (\$46.15 per pay period) for any spouse who has 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 (\$23.08 per pay period) will be applied to each medically enrolled employee and spouse who attest to using tobacco products during enrollment. If you complete a tobacco cessation program or quit tobacco use, you can have the surcharge removed by calling 866.553.9409.
- **Medical Surcharge for Biometric Screening** – Employees AND spouses who enroll in a Windstream medical plan who complete the biometric screening will maintain a lower medical premium. There is a \$500 annual surcharge for not completing before the deadline. More information will be published in 2022.

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 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. For 2022, medical ID cards will only be issued to those newly enrolling in the plan. Additionally, dental cards, Rx cards, and HSA/FSA debit cards will not be issued unless you are newly enrolled in the plan or your debit card is set to expire. If you make changes to your benefits during enrollment, hold on to all cards until you receive new ones. Remember, vision and dental ID cards are not required and can be downloaded from the provider's website. Medical and Rx ID cards can be found in the Grand Rounds app.

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.

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2. Enter “**UnitedHealthcare Choice Plus Network**” in the provider network box.
3. Click **View Providers**.
4. Enter your doctor name, facility or specialty in the keyword search.

You may also call Grand Rounds for assistance locating an in-network physician.

Q. Who can I contact with questions?

A. For questions regarding your 2022 benefits, you have the following options available to you for personalized service:

- **Medical Insurance Questions and Claims Issues**– Windstream provides access to Grand Rounds at no cost to you. Grand Rounds can be reached at **855-524-8426**.
- **Enrollment** – If you need help choosing your plan or have trouble navigating the enrollment system, MM365+ 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 starting when the enrollment window opens on Oct. 6.

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 tax-free money to pay your health care expenses. In addition to your own contributions, Windstream also provides up to a \$600 tax-free company contribution if you enroll in a Windstream medical plan and elect an HSA. The company 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.

A Health Care Flexible Spending Account (FSA) is a pre-tax benefit account that is also used to pay for eligible medical expenses. You cannot contribute an HSA and have a rollover to an FSA in the same plan year. Unlike an HSA, a Health Care FSA is a “use it or lose it” account. You are allowed to roll over up to \$550 of unused funds if you enroll in an FSA the following year. Your full annual election is available at the start of the plan year with a Health Care FSA, regardless of how much you have contributed thus far.

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

A. No. This plan design is governed by federal regulations. You cannot contribute to an 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.

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If you are newly enrolling in an HSA you'll be prompted to affirm the set-up of a health savings account during your online Open 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 an HSA?

A. All eligible family members 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.

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 change it?

A: Yes. You will be able to change your contribution throughout the year through MM365+. 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 MM365+?

A. MM365+ is an online benefits shopping platform where you will enroll in your Windstream health and welfare benefits during Open Enrollment this fall. Through the MM365+ 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 MM365+ help me make decisions?

A. As you enroll on the MM365+ 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 MM365+ “best match” feature. After you log in, you will be asked a few profile questions about your medical insurance usage,

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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. Keep in mind that the “best match” may not always be the lowest cost carrier or plan.

Another great tool is the plan comparison feature on the Medical Plan page of the MM365+ 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 MM365+ help me stretch my health care dollars?

A. The MM365+ 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.
- 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 open 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 2021, 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 open enrollment, you will also need to update your benefit elections for 2022. After changing your 2021 benefits, update your 2022 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 employed by Oct. 6, you will need to enroll in Windstream benefits for 2021 coverage. You will also need to enroll for 2022 benefits coverage during open enrollment. Those with a start date of Oct. 7 or after will only need to enroll for 2022 benefits coverage.

Preparing for Enrollment

Q. How do I make sure I receive the enrollment materials 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

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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 2021, 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?

If have questions about enrollment, or dependent verification, licensed benefits counselors will be available by phone (866.553.9409) or through secure online chat to answer your questions and provide any assistance you might need.

During Open Enrollment, MM365+ 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. You may also use the Click to Chat with Chatbot virtual assistant in the enrollment site.

After Open Enrollment ends, licensed benefits counselors will remain available to you year-round at 866.553.9409 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.

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