

# Montana University System 2026 Employee Annual Enrollment Benefits Presentation

choices<sup>TM</sup>

**MUS** **EB**  
Montana University System  
Employee Benefits



# choices




Photo by: Karl Kraeger, NatureZone Photography

*Active Benefits*

**2026 - 2027**  
Montana University System

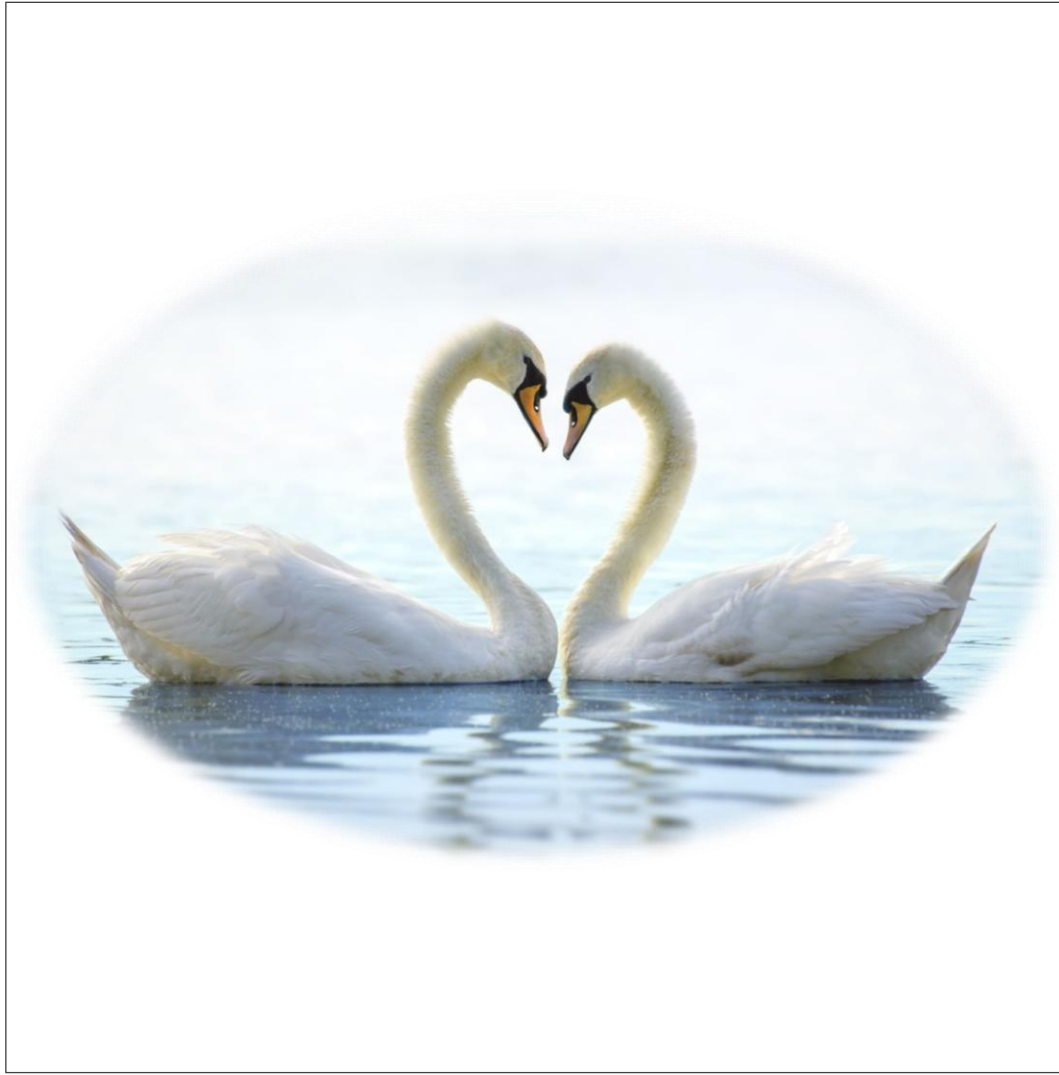
## Agenda

1. Annual Enrollment & Dependent Eligibility Information
2. MUS Self-Insured Plan Information
3. Medical Plan Benefits/Rates
4. Prescription Drug Plan Benefits
5. Dental Plan Benefits/Rates/Fee Schedule
6. Vision Hardware Plan Benefits
7. Provider Network Reminders
8. Dependent Premium Hardship Waiver
9. Flexible Spending Accounts (FSAs)
10. MUS Wellness Programs
11. Benefitsolver Online Benefits Enrollment



*MUS Choices*  
*Annual Enrollment*

April 27 – May 15, 2026



## Employee Annual Enrollment Information

- If you do not complete your Annual Enrollment benefit elections by **May 15, 2026**, you and your covered dependents will be **automatically** re-enrolled in your current benefit elections, with the exception of Flexible Spending Accounts (which **must** be elected each Plan Year to continue participation).
- Flexible Spending Account (FSA) enrollment
  - ✓ You **must** enroll in an FSA **each** Plan Year and specify the annual contribution amount you want to elect for each FSA.
  - ✓ You **must** re-enroll in a HCFSAs or LPFSAs for any unused FSA funds to rollover into FY2027.
- **Verify** your Beneficiaries for your Life and AD&D coverages.



**MUS** **EB**  
Montana University System  
Employee Benefits

## Dependent Eligibility Information

- ✓ Dependent children, up to age 26, may be enrolled in Medical, Dental, and/or Vision Hardware Plan coverage during the Annual Enrollment period.

~ ***MUS has a closed enrollment for Medical and Dental coverage for a Legal Spouse*** ~

- ✓ Proof of dependent eligibility is **required** for all new dependents being added to the MUS Plan during Annual Enrollment.
- ✓ Mid-year enrollment or disenrollment may **only** occur with a “Qualifying Life Event”.
  - *Such as, marriage, birth, death, divorce, loss or gain of eligibility for other health insurance coverage.*

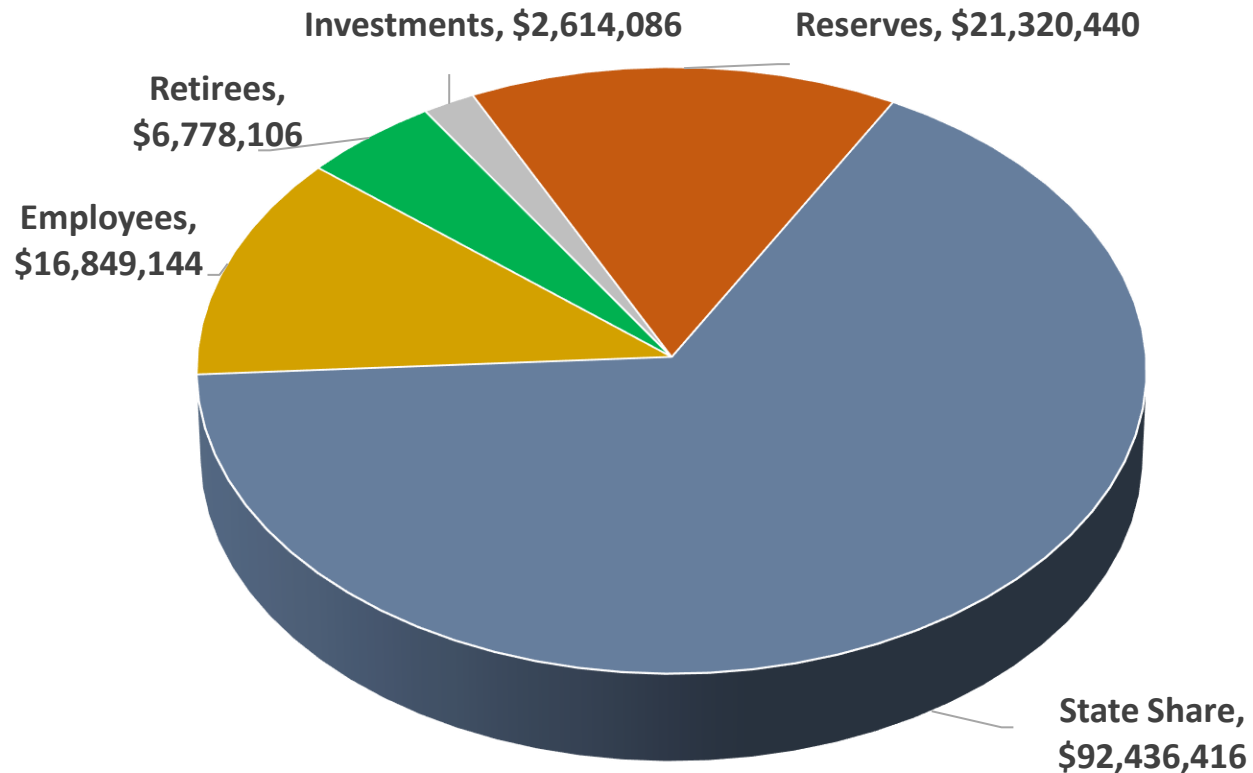
# MUS is a Self-Insured Plan –



## What does this mean?

- MUS *Choices* benefit plans (Medical, Prescription Drug, Dental, and Vision Hardware) are self-insured (self-funded).
- Premium contributions go directly into a fund, which is used to pay the cost of benefits for MUS Plan participants who experience illness or injury.
- To keep the Plan financially sound and affordable, it is important that all Plan participants use their benefits responsibly.
- Plan Participants are expected to pay a portion of their medical costs in the form of annual deductible, percentage coinsurance, and/or flat dollar copayments.
- These cost-containment features are part of the MUS Plan design, so Plan funds will be available should a high-cost medical emergency or a catastrophic illness strike a covered MUS Plan participant.

# MUS Revenue Sources – Projected FY2027 Income Sources

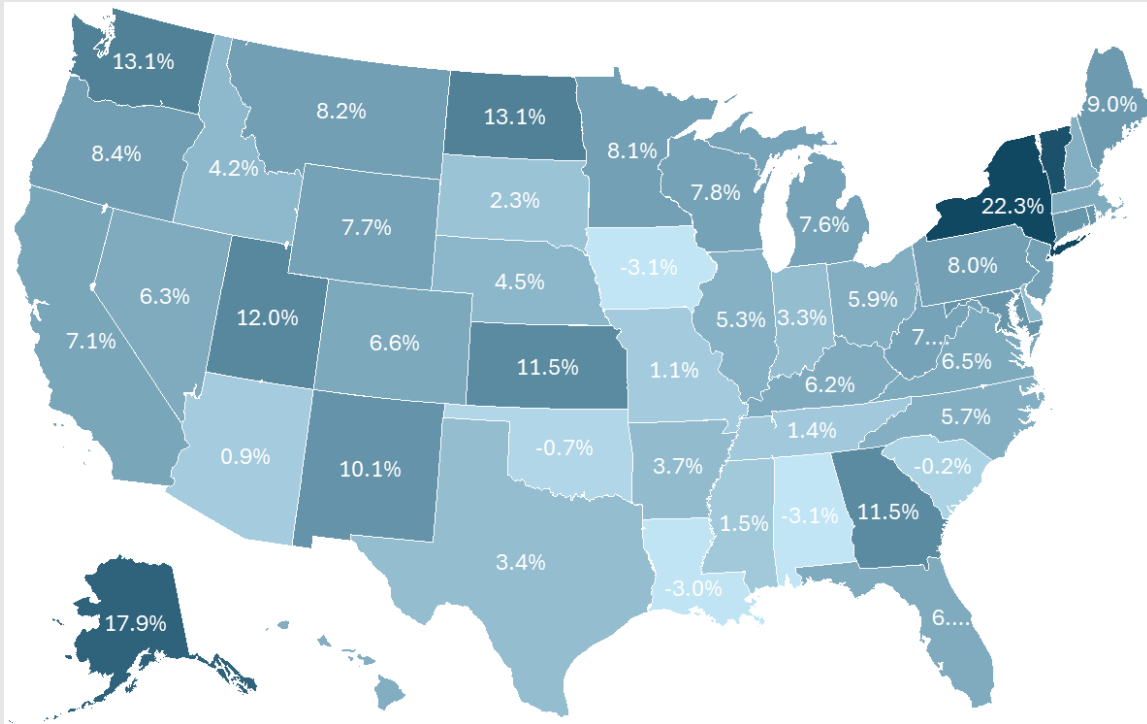


- **66%** of MUS funding comes from State Share employer contributions
- Employees contribute - **12%**
  - Dependent coverage
  - Buy-up coverage
  - COBRA
- Retirees contribute - **5%**
- **2%** comes from investment income from Plan reserves
- Plan reserves cover the remaining - **15%**

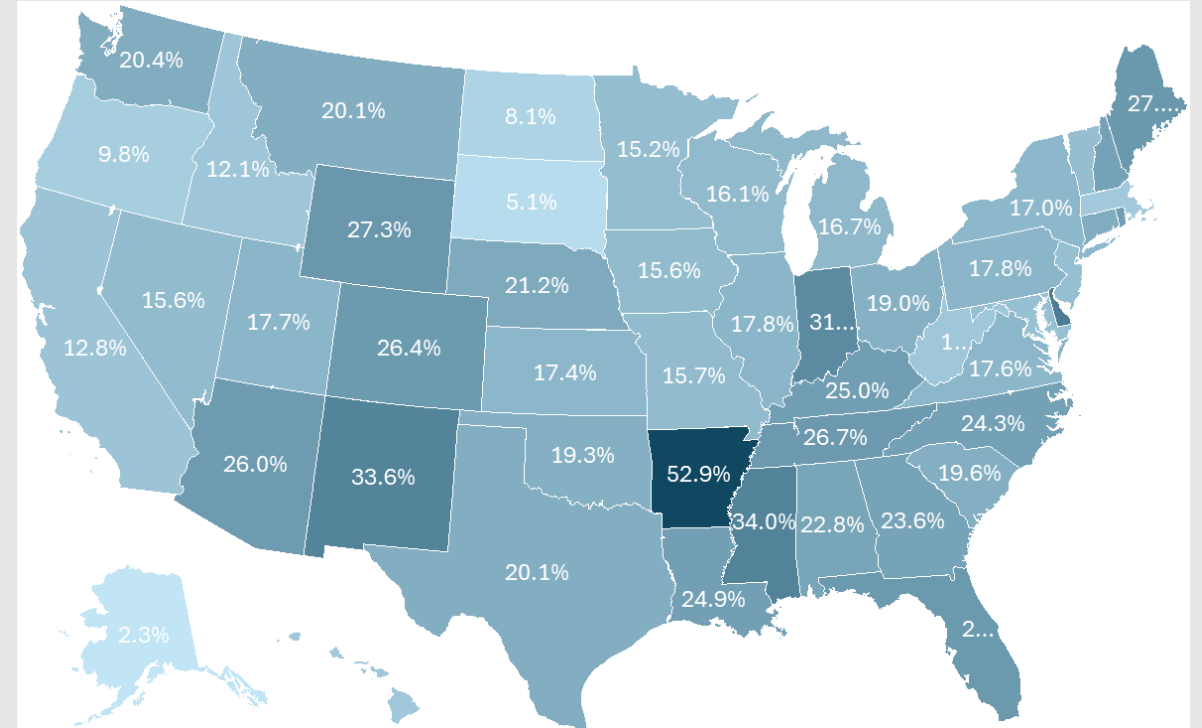
Revenue growth options include State Share increases (2.5% for FY2027), employee premium rate increases, dependent subsidy reductions, and retiree rate increases.

# ACA Individual Market Rate Increases by State, 2025 & 2026

2025

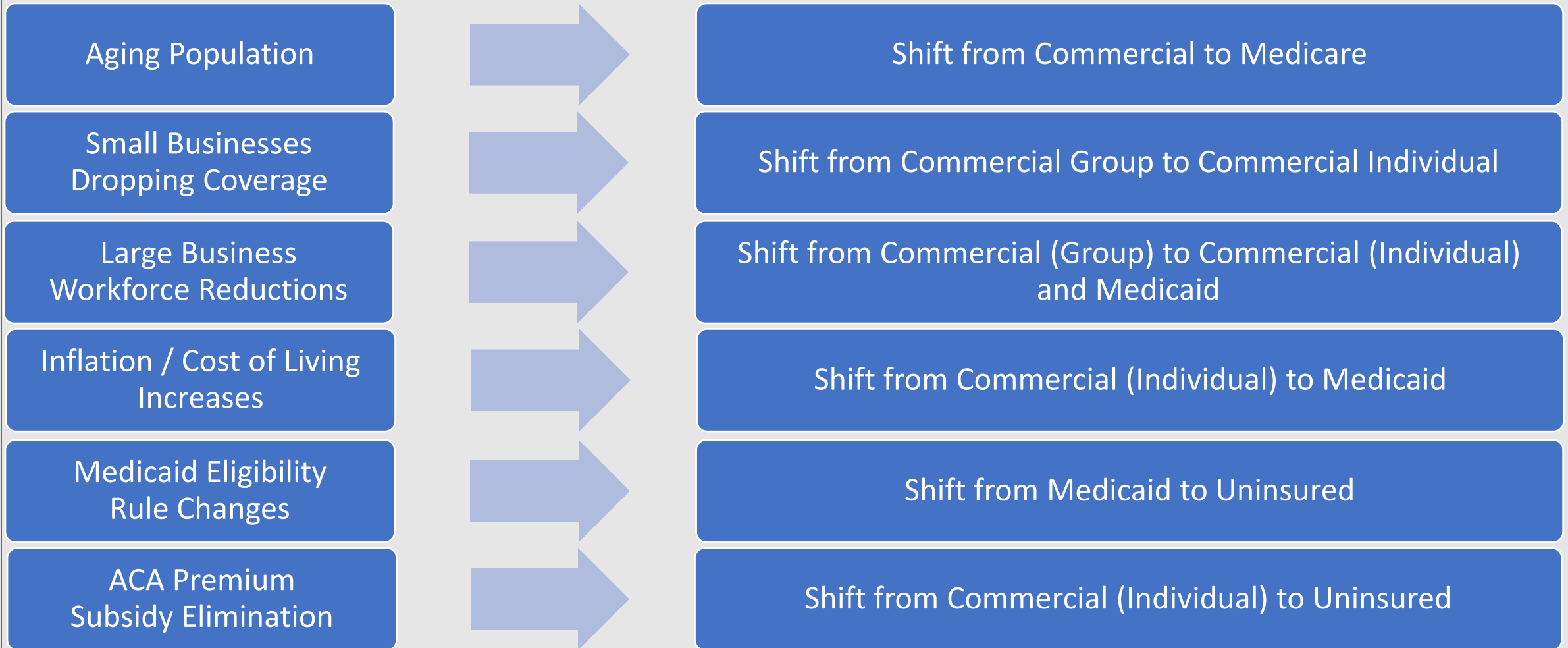


2026



# Health Care Cost Drivers – Shifting Demographics

Payor	Commercial (All)	Medicare	Medicaid	Uninsured
Provider Payment (Illustrative)	\$260 - \$300	\$100	\$70 - \$75	\$0 - \$30



# BENEFITS



The Inter-Unit Benefits Committee (IUBC) and the Commissioner of Higher Education continue to work on behalf of MUS Plan members to provide quality, essential health care coverage for you and your eligible dependents.

Over the past few years, the MUS Plan has experienced significant increases in health care costs and Plan benefits utilization. These increases are driving necessary Plan changes for the upcoming Plan Year (July 1, 2026 – June 30, 2027).

Beginning July 1, 2026, the MUS Plan will implement Employee Medical and Prescription Drug benefit adjustments and premium increases.

- There will be an increase of \$27/month to the Employer Contribution (State Share) from \$1,080 to \$1,107 for FY2027.
- There will be no changes to:
  - ✓ Employee Dental or Vision Hardware Plan benefits or premium rates for FY2027.

# FY2027 *Choices* Employee Medical Plan Benefit Changes



BlueCross BlueShield  
of Montana

(BCBSMT administers the Medical Plan)

Benefit Description	Benefit as of July 1, 2025	Benefit as of July 1, 2026
Medical In-Network Deductible	\$1,000 (individual) / \$2,500 (family)	\$1,250 (individual) / \$3,125 (family)
Medical In-Network OOP	\$4,500 (individual) / \$11,250 (family)	\$5,600 (individual) / \$14,000 (family)
Medical Out-of-Network Deductible (separate)	\$1,000 (individual) / \$2,750 (family)	\$1,250 (individual) / \$3,125 (family)
Medical Out-of-Network OOP (separate)	\$6,750 (individual) / \$16,875 (family)	\$8,450 (individual) / \$21,100 (family)
Primary Care Physician (PCP) Office Visit	\$25/visit	\$30/visit
Specialist Office Visit	\$40/visit	\$50/visit
Federally Qualified Health Center (FQHC) Visit	\$10/visit	\$15/visit
MDLIVE Virtual Visit	\$10/visit	\$15/visit

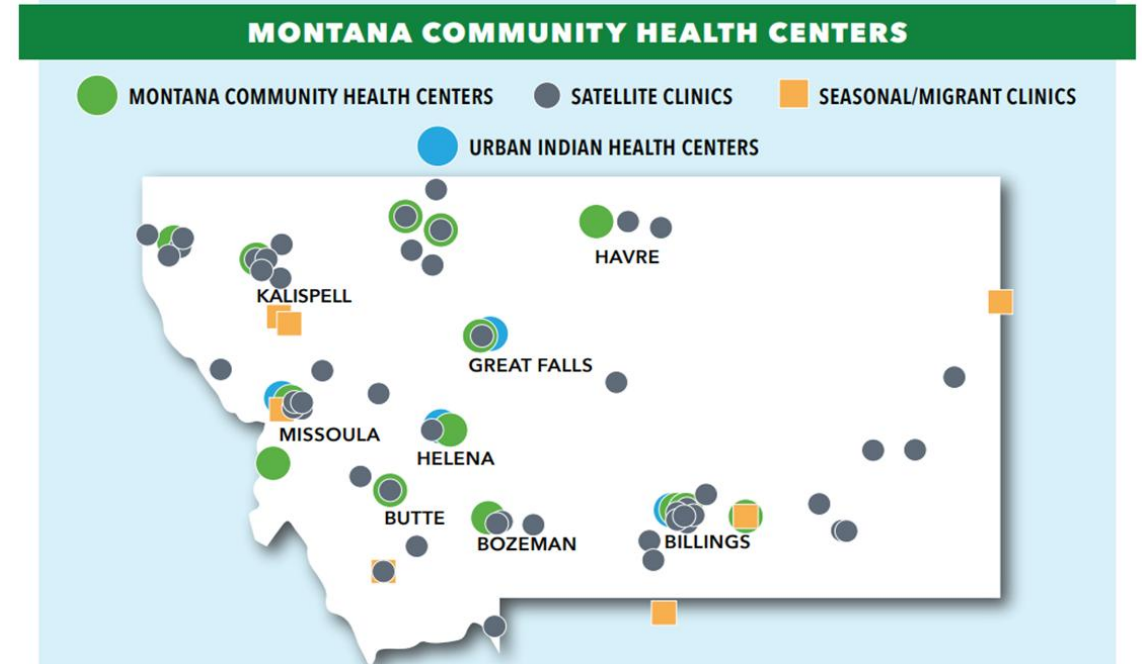
# Federally Qualified Health Centers (FQHC)

Primary Care Alternatives



## Montana Health Plus

- **Purpose**
  - Ensure Access. Lower Costs. Improve Outcomes.
- **Key Operating Principles**
  - Providing integrated, high-quality, patient-centered care in a network of community-based health centers.
  - Deliver integrated medical, dental and behavioral health services while increasing access to comprehensive primary care services.
  - Value-based care to remove the limits of the standard for primary care teams to meet patient needs.



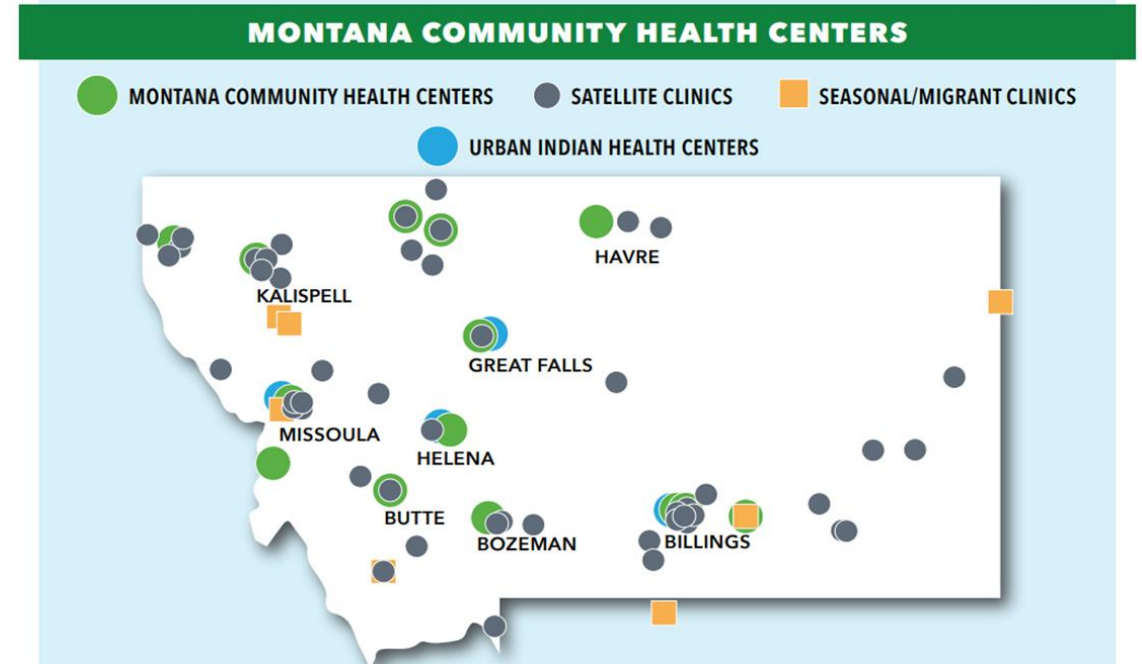
- Medical Providers
- Dental Providers
- Integrated Behavioral Health
- Efficient Referrals
- On-line scheduling

# Federally Qualified Health Centers (FQHC)

## Primary Care Alternatives

### • **Locations:**

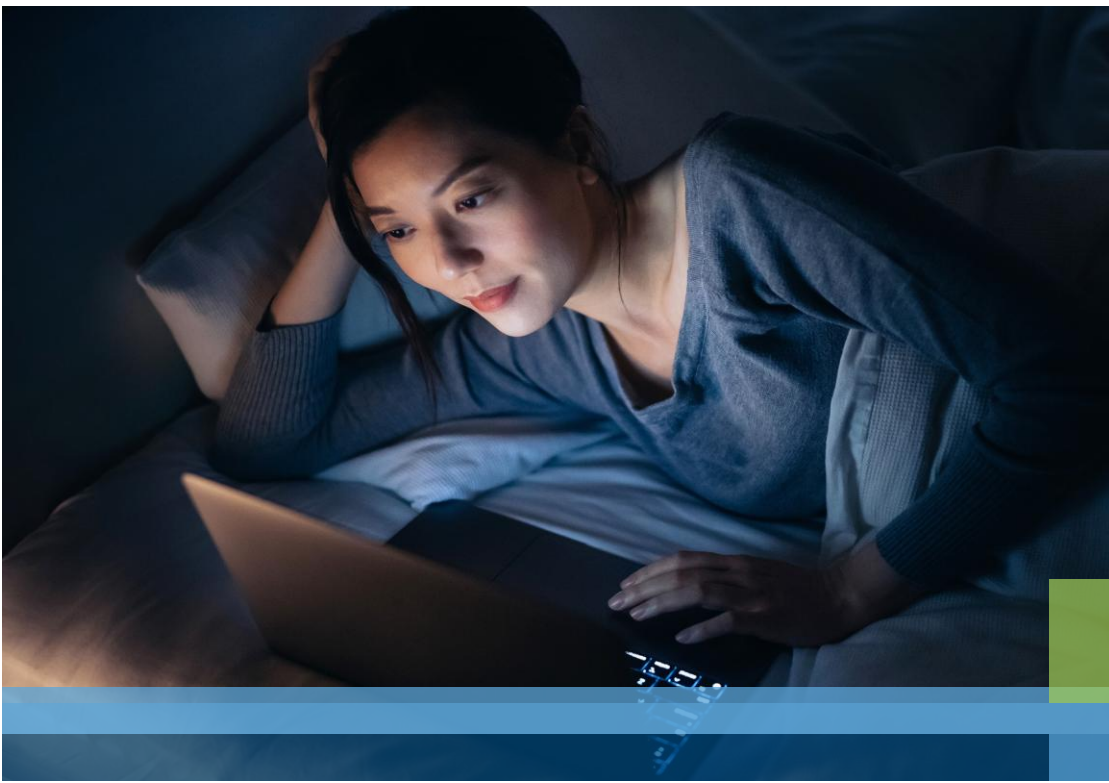
- Alluvion Health (Great Falls, Choteau)
- Billings Urban Indian Health (Billings)
- Bull Hook Community Health Center (Havre)
- Blacktail Health (formerly Butte-Silver Bow) (Anaconda, Butte, Dillon)
- Central MT Community Health (Lewistown)
- Glacier Community Health Center (Cut Bank)
- Greater Valley Health Center (Kalispell)
- Helena Indian Alliance (Helena)
- Lincoln County Community Health Center (Troy, Libby)
- Marias Healthcare Clinic (Conrad, Sunburst, Shelby)
- Montana Migrant Council (Dillon, Billings, Polson, Fairview, Lolo)
- One Health (Wyola, Hardin, Ashland, Livingston, Hardin, Belgrade, Glendive, Bozeman, Miles City, Lewistown, Chinook, West Yellowstone, Harlem)
- Partnership Health Center (Missoula, Seeley Lake, Superior)
- Pure View Health Center (Helena, Lincoln, East Helena)
- Riverstone Health Clinic (Billings, Joliet, Worden, Bridger, Billings)
- Rocky Boy Health Center (Box Elder)
- Sapphire Community Health (Hamilton)



- **Primary and Preventive visits 25% less expensive**



BlueCross BlueShield of Montana



# Virtual Visits:

**Get Cost-Effective, 24/7 Care**

Powered  
by  
**MDLIVE**

With Virtual Visits from MDLIVE<sup>®</sup>, the doctor is always in. This BlueCross BlueShield of Montana (BCBSMT) benefit gives you access to 24/7 non-emergency care from a board-certified doctor or therapist by phone, online video or mobile app from almost anywhere.

Skip expensive ER bills and waiting to see a doctor. You can speak with a Virtual Visits doctor within minutes.

Services are available in both English and Spanish with translation services available in other languages.

## Why Virtual Visits?

- 24/7 access to an independently contracted, board-certified doctor or therapist.
- Access via phone, online video or mobile app from almost anywhere.
- Average wait time of less than 20 minutes.
- Doctors can send e-prescriptions to your local pharmacy.

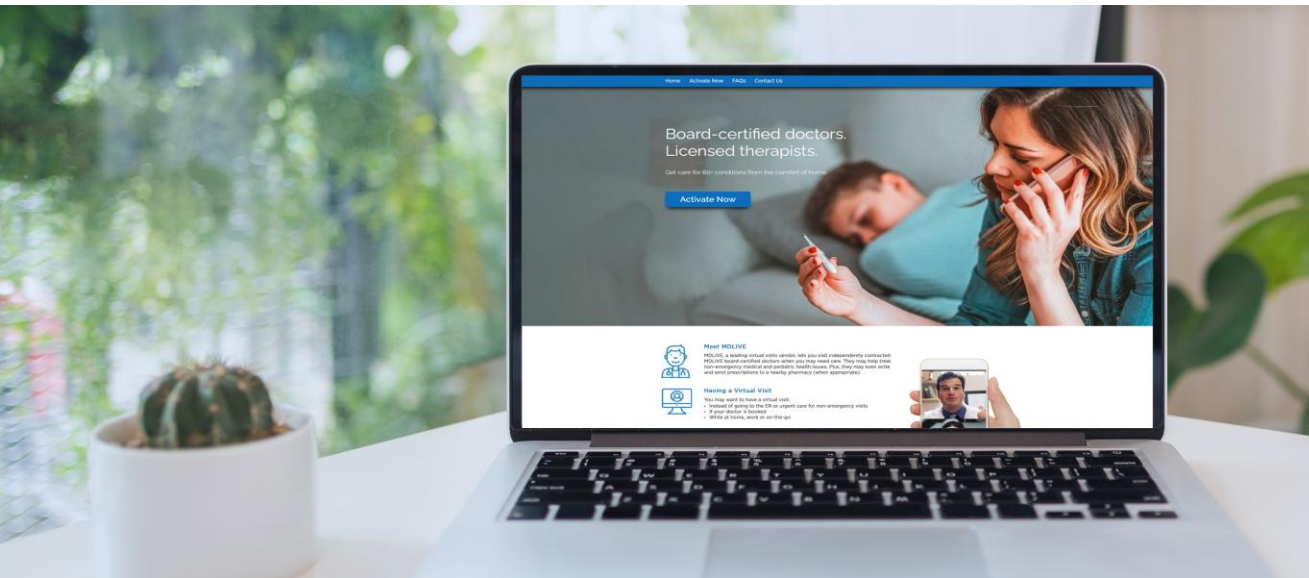
The Virtual Visits benefit is a convenient alternative for treatment of more than 80 health conditions, including:

- Allergies
- Cold/Flu
- Fever
- Headaches
- Nausea
- Sinus infections

Virtual Visits sessions with licensed behavioral health therapists are available by appointment. Get virtual care for:

- Depression
- Eating disorders
- ADHD
- Substance use disorders
- Trauma and PTSD
- Autism spectrum disorder

First, call your doctor's office; they may also offer telehealth consultations by phone or online video. If you have any questions about this BCBSMT benefit, please call the number on the back of your ID card.



**Activate your Virtual Visits  
account today:**

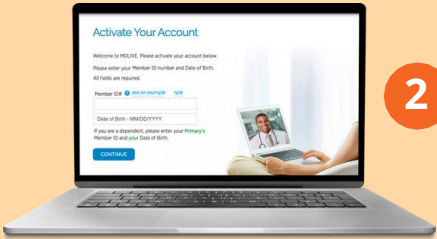
- Call 888-684-4233
- Go to [MDLIVE.com/bcbsmt](https://MDLIVE.com/bcbsmt)
- Text BCBSMT to 635-483
- Download the app

MDLIVE offers reliable 24/7 health care by phone or online video for your medical and mental health needs.

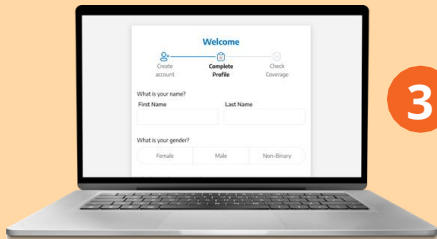
## HOW TO CREATE AN ACCOUNT VIA THE MDLIVE WEBSITE



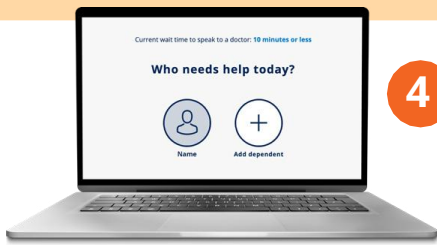
**1** Visit [mdlive.com/bcbsmt](https://mdlive.com/bcbsmt) and click “Activate Now.”



**2** Enter your BCBSMT member ID number and date of birth. If you’re a dependent, enter the **primary policy holder’s ID information** and **your date of birth**. Click “Continue.”



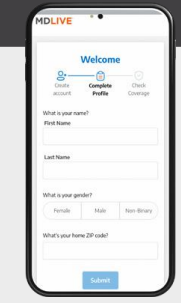
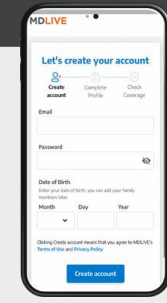
**3** Create your username and password and then complete your profile. Please enter your name **exactly** as shown on your member ID card. Click “Submit.”



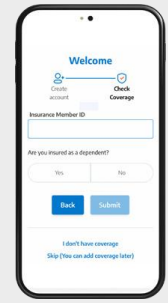
**4** Your secure MDLIVE account is now created. We’ll send you an email; just click “Sign In To Your Account” to load your MDLIVE dashboard.

## HOW TO CREATE AN ACCOUNT VIA THE MDLIVE APP

**1** Get the MDLIVE app in the App Store or Google

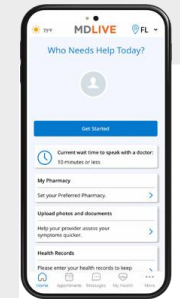


**2** Click “Create Account.” Enter your email address and create a password. Then complete your profile information on the next page. Click “Submit.”



**3** Enter the required information as shown on your BCBSMT member ID card and verify your coverage. If you’re a dependent, enter the **primary policy holder’s information**.

**4** Your secure MDLIVE account is now created. We’ll send you an email; just click “Sign In To Your Account” to load your MDLIVE dashboard.



# FY2027 *Choices* Employee Prescription Drug Plan Benefit Changes



(Navitus Health Solutions administers the Prescription Drug Plan)

Benefit Description	Benefit as of July 1, 2025	Benefit as of July 1, 2026
Rx OOP	\$2,150 (individual) / \$4,300 (family)	\$2,400 (individual) / \$6,000 (family)
Tier \$0 (preventive)	\$0 copay/month	No change
Tier 1 (generic)	\$15/month or \$30/90 days	\$20/month or \$40/90 days
Tier 2 (preferred brand)	\$50/month or \$100/90 days	\$60/month or \$120/90 days
Tier 3 (non-preferred brand)	50% coinsurance	No change
Tier 4 (specialty)	\$200 copay/month	\$250 copay/month

\*\* Coinsurance in Tier 3 and Tier 4 **do not** apply to the Out-of-Pocket Maximum.



# Choices Employee Prescription Drug Plan

- Lumicera Health Services administers the Specialty Pharmacy.



- Western Drug (Bozeman only), CVS, & Target pharmacies are not participating in the pharmacy network. If you choose to use these pharmacies, you will be responsible for all charges.
- Prescriptions can be filled at a participating retail pharmacy for either a 34-day or 90-day supply.
- Mail Order prescriptions for a 90-day supply can be filled at Ridgeway or Costco.



## FY2027 *Choices* Employee Medical Plan Premium Changes

Tier	Rates as of July 1, 2025	Rates as of July 1, 2026	\$ Change Increase
Employee/Survivor	\$756/month	\$830/month	\$74
Employee + Spouse	\$1,302/month	\$1,429/month	\$127
Employee/Survivor + Child(ren)	\$1,101/month	\$1,208/month	\$107
Employee + Family	\$1,547/month	\$1,698/month	\$151

9.75% Aggregate Increase

# Choices Employee Dental Plan Benefits

(Delta Dental administers the **Basic** & **Select** Dental Plans)



## ❖ **Basic Plan** – Diagnostic/Preventive services only.

✓ **\$750 ANNUAL MAXIMUM**, per covered Plan member

## ❖ **Select Plan** – Diagnostic/Preventive, Basic, & Major Restorative,

– **Orthodontia services** (\$1,500 lifetime maximum/covered Plan member)

✓ **\$2,000 ANNUAL BENEFIT MAXIMUM**, per covered Plan member

(Select Plan annual maximum does not apply to Diagnostic/Preventive/Orthodontia services)



**DELTA DENTAL**

The Delta Dental logo consists of a green rectangular box. Inside the box, on the left, is a white stylized triangle icon. To the right of the icon, the words "DELTA DENTAL" are written in a bold, white, sans-serif font.

*\* No changes to  
Dental benefits or premiums  
rates for FY2027!*

# Dental Network/Fee Schedule



- MUS dental claims are reimbursed based on a fixed dental fee schedule.
- The fee schedule's fixed dollar amount is the maximum reimbursement for the specified procedure code, regardless of provider network.
- Covered Dental Plan enrollees are responsible for the difference (if any) between the provider's billed charge and the fee schedule's fixed reimbursement amount.
- MUS Dental Plan enrollees have the freedom of choice to visit any licensed dentist, however, out-of-pocket costs may be reduced if utilizing a Delta Dental PPO or Premier network dentist.



# Choices Employee Vision Hardware Plan Benefits

(BCBSMT administers the Vision Hardware Plan)

\* No changes to  
Vision Hardware  
benefits or premium  
rates for FY2027!

- ✓ **Eyeglass Frames and Prescription Lenses, in lieu of Contacts (1 pair)**

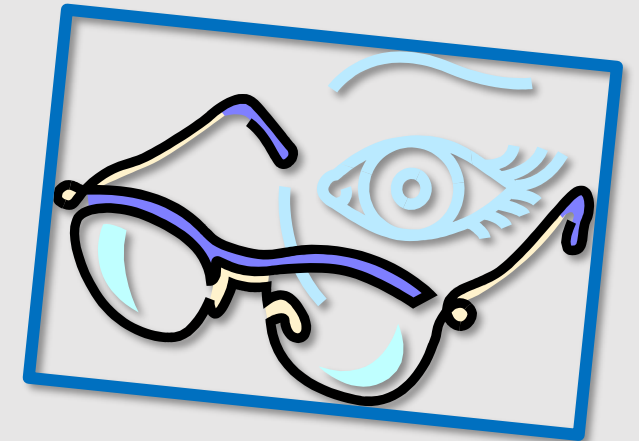
UP TO \$300 ANNUAL ALLOWANCE, per covered Plan member

- ✓ **Prescription Contacts, in lieu of Frames and Lenses (1 purchase)**

UP TO \$200 ANNUAL ALLOWANCE, per covered Plan member

- ❖ **Eye Exam (routine or medical) is provided as part of the Medical Plan (1/Plan Year); \$0 copay when using an In-Network provider.**

- ❖ **Vision Hardware Plan covers hardware ONLY**  
(frames/lenses or contacts)



# Provider Network Reminders.....



**Use In-Network Providers** – Be sure to use In-Network providers to ensure you do not incur “balance billing” charges.



Always check - **DO NOT** assume participation “...but my doctor has always been In-Network!”



Contact the Plan Claims Administrator or the MUS Benefits office if you need assistance finding In-Network providers.



To check to see if your provider is an In-Network provider, visit the Plan Claims Administrator’s online provider finder.

- To find a BCBSMT Blue Preferred PPO In-Network provider, visit [bcbsmt.com/find-a-doctor-or-hospital](https://bcbsmt.com/find-a-doctor-or-hospital).
- To find a Delta Dental PPO or Premier Network provider, visit [deltadentalins.com/mus/](https://deltadentalins.com/mus/).

## *Choices* Dependent Premium Hardship Waiver

- MUS offers a Dependent Premium Hardship Waiver to assist employee families who have a financial hardship with the cost of medical coverage for dependent children (ages 0-26) who are covered on the MUS *Choices* Medical Plan.
- The child's family **must** first apply for Healthy Montana Kids (HMK) for all children under age 19. If HMK denies coverage due to not meeting the HMK income guidelines, a Hardship Waiver Application **must** be submitted to the MUS Benefits office to request the premium waiver. If the total household income is not more than 125% of the HMK income guidelines, covered dependent children will be eligible for the premium waiver for the Plan Year.
- The family **must** re-apply for HMK **and** submit a waiver application **each** Plan Year prior to Annual Enrollment to be eligible for the premium waiver.
- Visit [choices.mus.edu/forms.html](https://choices.mus.edu/forms.html) to apply or contact the MUS Benefits office at 1-877-501-1722 for more information.



# Flexible Spending Accounts (FSA)

\* FSA administrative fees  
are paid by MUS

The MUS *Choices* Plan offers three optional Flexible Spending Accounts (FSA) –

- Health Care FSA – Medical, Rx, Dental, and Vision expenses.
- Limited Purpose FSA – Dental and Vision expenses only.
- Dependent Care (Day Care) FSA – Day Care expenses only.

\* New FSA Claims Administrator (yet TBD)  
for FY2027!  
Watch for more information coming soon!

These optional reimbursement accounts (FSAs) allow you to set aside a portion of your earnings (pre-tax) in equal installments throughout the Plan Year (July 1 – June 30) to pay for qualified out-of-pocket expenses for health care and dependent care (day care) services. FSA funds may only be used for expenses incurred on or after your FSA effective date (includes debit card transactions).

## ~ No Automatic Enrollment ~

Employees must re-enroll during each Annual Enrollment to participate in a FSA and to continue contributions.  
(no exceptions can be made on late enrollment)

### Irrevocable Elections:

- After Annual Enrollment, FSA participants have until their first paycheck after July 1<sup>st</sup> to identify any issues with their FSA election(s) (***this does not include not enrolling in a FSA during Annual Enrollment***).
- No changes to FSA Annual Enrollment elections will be allowed after the first paycheck after July 1<sup>st</sup>.

# Health Care Flexible Spending Account Types (FSA)

❖ **Health Care FSA (HCFSA) (general purpose)** – You may elect amounts to be withheld from your earnings to assist you with paying for your out-of-pocket **Medical, Rx, Dental, and/or Vision** expenses (including, but not limited to: deductible, copays, coinsurance).

\*\* If you and/or your legal spouse are enrolled in a High-Deductible Health Plan (HDHP) with a Health Savings Account (HSA) and/or have an account balance in a HSA through another insurance plan, you are **not** eligible to elect the MUS general purpose Health Care FSA.

❖ **Limited Purpose FSA (LPFSA) (HSA-Compatible)** – If you and/or your legal spouse have a HSA and/or have an account balance in a HSA , you may choose to elect a HSA-Compatible LPFSA, which you can use to pay for eligible **Dental and Vision** expenses **only** (including, but not limited to: dental exams, dentures, contacts, eyeglass frames and prescription lenses).

- The LPFSA guidelines are the same as the HCFSA, with the exception of eligible expenses.

# Health Care Flexible Spending Accounts (FSA)

- ❖ The minimum amount an employee can contribute to a HCFSA or LPFSA for FY2027 is **\$120** and the maximum amount an employee can contribute is **\$3,400**.
- ❖ **Health Care FSA balance:** If an employee doesn't enroll in an FSA for FY2027 and has unused FSA funds that are not expended by June 30, 2026, the FSA will be closed and the remaining unused funds will be forfeited.
- ❖ HCFSA/LPFSA participants will **automatically** receive a Healthcare Card (debit card) at no additional cost.
- ❖ **Reimbursement Options:**
  - Direct Deposit
  - VISA Healthcare Card (debit card)
  - Pay Me Back or Pay My Provider
- ❖ **FSA Store:** Have FSA funds you need to spend before the end of the Plan Year? The FSA Store has one of the largest selections of eligible HCFSA products. You can use your Healthcare Card to conveniently order and pay for these items online at [fsastore.com/!](https://fsastore.com/)



## HCFSA / LPFSA Rollover Funds

The IRS permits health care FSAs to rollover a limited amount of unused FSA contributions from one Plan Year to the next. This means that HCFSA/LPFSA balances from the current Plan Year, can be rolled over to the next Plan Year that begins July 1<sup>st</sup>. ***Be sure not to elect more than you will need to cover expenses incurred by you and/or your eligible dependents during the Plan Year.***

MUS no longer allows unused FSA contribution amounts to rollover if an FSA participant **does not** re-enroll in a HCFSA **or** LPFSA during Annual Enrollment. Under the “**use it – or – lose it**” rule, any FSA contribution amount not used by the end of the Plan Year will be forfeited.

FSA participants **must** re-enroll in a HCFSA/LPFSA for any unused FSA contribution amounts to rollover into the next Plan Year.

- ✓ **\$660** of unused FSA contributions from FY2026 (July 1, 2025 – June 30, 2026) will rollover into FY2027 (July 1, 2026 – June 30, 2027) **if an FSA is elected for FY2027.**
- ✓ **\$680** of unused FSA contributions from FY2027 (July 1, 2026 – June 30, 2027) will rollover into FY2028 (July 1, 2027 – June 30, 2028) **if an FSA is elected for FY2028.**

# Dependent Care (Day Care) Flexible Spending Account (DCFSA)

~ *Dependent Care (Day Care) FSA is not used for reimbursement of health care expenses.* ~

~ *DCFSA is used for day care expenses only.* ~

❖ You may elect amounts to be withheld from your earnings to assist you with paying for your out-of-pocket **Dependent Care (Day Care)** expenses.

❖ The minimum amount an employee can contribute to a DCFSA for FY2027 is **\$120** and the maximum amount an employee can contribute is **\$7,500** for a single employee/married couple filing jointly **or \$3,750** each for a married couple filing separately.



❖ DCFSA (Day Care) eligible expenses include: live-in care, babysitters, licensed day care/preschool centers, and after school care for children under age 14 or for individuals unable to care for themselves. Schooling expenses at the kindergarten level and above, overnight camps, and nursing home care are **not** reimbursable.

❖ **Reimbursement Options:**

- Direct Deposit
- Pay Me Back or Pay My Provider

\* ***Unused DCFSA (Day Care) contribution balances cannot be rolled over to the next Plan Year.***



## FSA Claims Submission

- FSA funds may **only** be used for expenses incurred on or after the Annual Enrollment effective date (7/1/26) and can be used at any time during the Plan Year (includes debit card transactions).
- All FSA claims incurred during FY2026 (July 1, 2025 – June 30, 2026) **must be received by September 30, 2026** by HealthEquity/WageWorks to be eligible for reimbursement.
- All FSA claims incurred during FY2027 (July 1, 2026 – June 30, 2027) **must be received by September 30, 2027** by the new FSA Administrator (TBD) to be eligible for reimbursement.

**No exceptions can be made on late claims submissions!**

# MUS Wellness Program Highlights

MUS Employees and their legal spouses who are enrolled in the *Choices* Medical Plan are eligible for enrollment in the MUS Wellness programs.

- ✓ MUS WellChecks (2/Plan Year)
- ✓ MUS Wellness Lab  
(online fitness, nutrition, and healthy habits learning tool)
- ✓ Employee Assistance Program (EAP) via AllOne Health
- ✓ WellBaby Program
- ✓ Take Control Lifestyle Management Program  
(program available for non-Medicare enrollees only)
- ✓ Wondr Health, Hinge Health, Well onTarget Incentive Program, and Blue 365 Discount Programs via BCBSMT
- ✓ Amplifon (hearing aids) / Quallsight (LASIK surgery) Discount Programs via Delta Dental



For more information,  
visit.....[wellness.mus.edu](http://www.wellness.mus.edu)



# Your One Solution for Whole Health

We deliver a **comprehensive suite of whole health solutions** to help people live better—and help organizations grow stronger.

From mental health and well-being to leadership development and organizational resilience, our integrated services are designed to meet the real challenges of today's workplace.

**Expert care that powers people, strengthens culture, and delivers results.**

YOUR EMPLOYEE ASSISTANCE  
& WORK-LIFE PROGRAM

Visit...[allonehealth.com/portal](https://allonehealth.com/portal)

# Counseling Services:

AllOne Health has created specialized modalities of support that accommodate the ever-changing schedule of a MUS employee and their household members.

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## Short Term Counseling:

- 7 visits (per person, per issue, per year)
- Visits can be utilized in 3 ways:
  - face to face counseling
  - telephonic counseling
  - video counseling

## Alternate Modes of Support:

- Life Coaching
- iCBT (Internet Based Cognitive Behavioral Therapy)  
(available only on the AllOne Health website)

\*\*alternate modes of support options **DO NOT** count toward the 7 counseling visits\*\*



# Work/Life Services:

“Resource Referrals: Let AllOne Health handle your **To Do** list”

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## Daily Living/Convenience:

- Apartment locators
- Chore services/house cleaners
- Home repair (handymen, plumbers, electricians, contractors, etc.)
- Entertainment services
- Veterinarian
- Pet obedience training
- Pet Sitters/Kennels
- Transportation & travel services
- Fitness and Wellness Centers/Programs
- Moving and relocation services

## Childcare Resources:

- Daycare
- Preschool & nursery schools
- Adoption
- Summer programs
- Sports camps/leagues
- Play groups

## Eldercare Resources:

- Assisted Living facilities
- Nursing home
- Hospice
- Retirement communities
- “Meals on Wheels” programs
- Adult daycare facilities

# Legal/Financial Services:

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## Legal Services:

- Referrals for either telephonic or in-person consultations with an attorney.
- 25% discount off the attorney's hourly fee.
- Access to over 100 legal forms online at [allonehealth.com/portal](http://allonehealth.com/portal).

## Financial Services:

- Free telephonic financial counseling and education with an Accredited Financial Counselor on issues related to consumer debt and budgeting.
- Counselors address issues via the help line and follow up by emailing supporting educational materials.
- Counselors are available by appointment Monday through Friday, or through pre-scheduled Saturday sessions.



## How to Access Your AllOne Health Employee Assistance Program:

Helpline: 1-888-993-7650

Email: [eap-do@allonehealth.com](mailto:eap-do@allonehealth.com)

Website: [allonehealth.com/portal](https://allonehealth.com/portal)

Company Code: MUS



# WellBaby – *Healthy Moms, Healthy Babies.... a world of difference*

## Eligibility Requirements:

**MUS covered *Choices* Medical Plan members are eligible for ALL of the benefits, if enrolled within the 1<sup>st</sup> trimester of pregnancy. If enrolled during the 2<sup>nd</sup> or 3<sup>rd</sup> trimester, enrollee is eligible for all of the benefits EXCEPT the copay waiver benefit.**



- ❖ *Benefits begin the day the participant enrolls (enrollment cannot be backdated).*
- ❖ **Program benefits include:**
  - **Copay waivers** (pre-natal/post-partum office visits, ultrasounds, routine maternity lab work, physician delivery charges)
  - **Generic prescription pre-natal vitamins** (\$0 copay)
  - **Pregnancy books or exercise video**
  - **Enrollment in the Take Control Lifestyle Management Program**
  - **Breast Pump** (purchase or rental of one standard breast pump, to a maximum of \$300)
- ❖ *Enrollment in the WellBaby program is confidential and voluntary.*

Enroll by calling 406-660-0082 or email: [wellbaby@umwestern.edu](mailto:wellbaby@umwestern.edu)

# Lifestyle Management Program



**SIGN UP ONLINE:** [takecontrolmt.com](http://takecontrolmt.com)

Contact Take Control @ 1-800-746-2970 or email [info@takecontrolmt.com](mailto:info@takecontrolmt.com)

## TAKE CONTROL

*Eat Well, Stay Active, Reduce Your Risks.*

***\*\* Take Control offers comprehensive, confidential education and support using a telephonic delivery method, which allows the participant to engage from anywhere and receive the individual attention specific to their needs. The program includes one-on-one monthly health coaching telephonic sessions with licensed Dietitians, Exercise and Sports Science Trainers, and certified Diabetes Educators.***

***The Take Control Lifestyle Management Program offers the following health coaching programs:***

- ***High Blood Pressure***
- ***High Cholesterol***
- ***Weight Loss***
- ***Diabetes/Pre-Diabetes***
- ***Maternal***
- ***Perimenopause/Menopause***

***\* Enrollment in Take Control is confidential and voluntary.***



Wondr Health is a digital behavioral counseling program for metabolic syndrome reversal, weight management, and diabetes prevention.

Program features include:

- 10 weeks of counseling, personalized for skill building; 10 weeks customized for skill reinforcement; 32 weeks customized for skill maintenance.
- Weekly, self-paced, informative online video sessions (including mobile app, skill reinforcement, and habit formation).
- Interactions with health coaches and online community for social support.
- The program is available at no cost to all MUS Medical Plan enrollees over age 18.

# Expect skills, not rules.

Learn weight loss skills based on behavioral science.



## Metabolic Syndrome Reversal Program

Visit [wondrhealth.com/mus](https://wondrhealth.com/mus) for more information!



Conquer pain, recover from an injury, and regain an active lifestyle with Hinge Health!



Musculoskeletal Management Solution

Hinge Health provides a 12-week digital program, which includes:

- Unlimited 1:1 health coaching.
- Personalized exercise therapy.

- The program is delivered remotely using mobile and wearable technology.

- The program is available at no cost to **all** MUS Medical Plan enrollees over age 18.

Visit [hingehealth.com/mus](https://hingehealth.com/mus) for more information!



**Care for everybody and every body part**

A one-stop-shop Digital MSK Clinic™

# Well onTarget<sup>®</sup> Member Portal

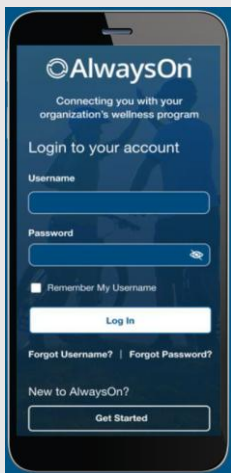
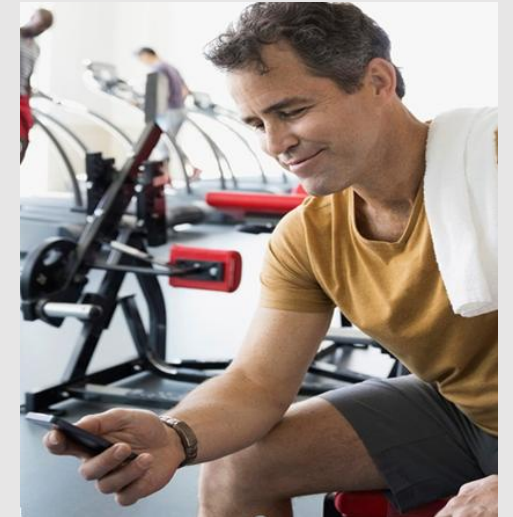
## Portal Highlights

- Health Assessment
- Member dashboard
- Explore your wellbeing
- My Journey recommended activities
- Digital self-management programs
- Interactive symptom checker
- Blue Points rewards
- Personal wellness challenges
- Fitness/nutrition tracking

## Offerings that earn Blue Points:

- Health Assessment completion.
- Digital self-management program engagement.
- Fitness Program visits: Earn Blue Points for joining. Earn additional points for weekly visits.
- Use of Online Trackers.
- Connecting and syncing a fitness or nutrition device or app.

**\*\* Blue Points monetary value are considered taxable income by the IRS once redeemed.**



**ACCESS**  
**WELL ONTARGET**  
Log into your **Blue Access for Members** account at [bcbsmt.com/members](https://bcbsmt.com/members) or use the AlwaysOn Mobile App

## Fitness Program

- The Fitness Program is available to you and your covered dependents (age 16+). The program gives you access to a nationwide network of fitness locations. Choose a location close to home, near work, or visit locations while traveling.

## Fitness Program perks include:

- Convenient payment methods.
- Redeem Blue Points for gift cards from 75+ merchants.
- The AlwaysOn Mobile App and Well onTarget portal track fitness activity in real-time.

# Blue365<sup>®</sup> Member Discount Program

Members and covered dependents can save money on value-added health and wellness products and services not usually covered by a medical benefit plan.

Visit [bcbsmt.com/member/advantages-of-membership/blue365-discount-program](https://bcbsmt.com/member/advantages-of-membership/blue365-discount-program).

## Discounts available in these categories:



Apparel and Footwear



Fitness



Hearing and Vision



Home and Family



Nutrition




Personal Care



BlueCross BlueShield  
of Montana

Save on fitness gear, gym memberships, healthy eating, dental, vision, hearing aids and more, from top national and local retailers.

**FITNESS**



**Fitbit**  
Up to 38% Off Fitbit Devices, Plus Free Shipping

**DETAILS** ❤️ 2.0k Favorites


**HEARING & VISION**



**EyeMed**  
\$50 Eye Exams and 35% Off Frames When Paired with Prescription Lenses

**DETAILS** ❤️ 1.4k Favorites

**NUTRITION**



**Nutrisystem**  
40% Discount on Nutrition Products and Services

**DETAILS** ❤️ 626 Favorites

Register for Blue365 on Blue Access for Members<sup>SM</sup>  
or visit [blue365deals.com/bcbsmt](https://blue365deals.com/bcbsmt)

Blue365 is a discount program only for BCBSMT members. This is NOT insurance. BCBSMT does not guarantee or make any claims or recommendations about the program's services or products and reserves the right to stop or change this program at any time without notice.



# Savings You Can See and Hear

Get exclusive discounts on LASIK eye surgery and Amplifon hearing aids

## Your wellness is more than oral health

That's why, as a Delta Dental enrollee, you have access to preferred pricing on hearing aids and LASIK vision services through Amplifon Hearing Services and QualSight.<sup>1</sup>




## How do I get the discounts?

It's easy. Just give Amplifon or QualSight a call. A dedicated representative will walk you through the program and help you pick a provider, make an appointment and receive your discount.

	Amplifon	QualSight
<b>Products and services</b>	Discounts on hearing aids and one year of free follow-up care	Discount on LASIK eye surgery, including pre- and post-operative visits
<b>Savings</b>	62% average savings off retail hearing aid pricing <sup>2</sup> , with a best-price guarantee of 5% <sup>3</sup>	40 to 50% off the national average price of traditional LASIK eye surgery <sup>4</sup>
<b>Access</b>	Nationwide network of providers	Over 1,000 LASIK locations nationwide <sup>5</sup>
<b>Quality</b>	Leading brands featuring the latest hearing aid technology and a three-year product warranty	Experienced LASIK surgeons who have collectively performed over 7.5 million procedures <sup>6</sup>
<b>Get started</b>	<ol style="list-style-type: none"> <li>1. Call Amplifon.</li> <li>2. A patient care advocate will explain the discount process, help you find a hearing care provider and help you make an appointment.</li> <li>3. Amplifon will send you and your provider the details to activate your discounts.</li> <li>4. Save on hearing aids, and receive complimentary batteries for two years.</li> </ol>	<ol style="list-style-type: none"> <li>1. Call QualSight.</li> <li>2. A care manager will explain the program, answer any questions, help you pick a provider and set up a free consultation to see if you're eligible for LASIK eye surgery.</li> <li>3. Receive written confirmation, including pricing information and directions to your provider's office.</li> <li>4. Pay a discounted price for LASIK services.</li> </ol>
<b>Website</b>	<a href="http://amplifonusa.com/deltadentalins">amplifonusa.com/deltadentalins</a>	<a href="http://qualsight.com/-delta-dental">qualsight.com/-delta-dental</a>


## Montana University System Online Benefits Enrollment

Active Employees

 UM NetID Login

 MSU NetID Login

 DCC, FVCC, MCC, OCHE Login

 Employee Benefits Enrollment Instructions



**MONTANA**  
UNIVERSITY SYSTEM

To enroll in MUS *Choices* benefits, visit [choices.mus.edu](https://choices.mus.edu) and click on the applicable campus login button.

\*\* UM/MSU campuses use NetID Single Sign-On (SSO)

# Benefitsolver – Welcome/Login Screen

benefitsolver

## Welcome

**User Name \***

case sensitive

**Password \***

case sensitive

[Login >](#)

[Forgot your user name or password?](#)

**First time here?**

Register to create your user name and password.

[Register](#)

- ❖ First time DCC, FVCC, MCC, and OCHE users must register by creating a User Name and Password.

# Benefitsolver – Member Home Screen

The screenshot displays the member home screen with a prominent enrollment announcement. On the left, a calendar icon shows '46 Days Left'. The main announcement reads '2026-2027 Annual Enrollment is Here!' and '2026-2027 Annual Enrollment Ends May 15th.' Below this is a blue 'Start Here >' button with an orange arrow pointing to it. A secondary section titled 'My Tasks 1' contains a task '2026-2027 Annual Enrollment - Start Here' with a yellow 'Action Required' tag, a grey '46 Days Left' tag, and an 'Enroll by 05/15/2026' deadline. A blue 'Start Here' button is positioned to the right of this task, with an orange arrow pointing to it.

46 Days Left

2026-2027 Annual Enrollment is Here!  
2026-2027 Annual Enrollment Ends May 15th.

Start Here >

My Tasks 1

2026-2027 Annual Enrollment - Start Here

⚠ Action Required 46 Days Left

Enroll by 05/15/2026

Start Here

# NEW HIRE/ ANNUAL ENROLLMENT SCREENS –

New hires or employees making a mid-year change during the Annual Enrollment period **must** complete **two** benefit elections:

- ✓ New Hire enrollment/MYC enrollment.
- ✓ Future Annual Enrollment (7/1/26).



## Benefits Enrollment



**Important! You have two enrollments to complete**

Because you have started your enrollment during your Annual Enrollment window, you have two enrollments to complete.

1. New Hire Enrollment
2. 2026-2027 Annual Enrollment

### Step 1: New Hire Enrollment

As a newly hired employee, you first need to enroll in your benefits that will cover you for the rest of this plan year.

Coverage will be effective based on  
03/09/2026

[Begin Enrollment](#)

Not Started

### Step 2: 2026-2027 Annual Enrollment

Once you complete your enrollment for this plan year, you will need to enroll in your benefits for the following plan year.

Any add or change in coverage will be effective on  
07/01/2026

[Begin Enrollment](#)

Must Complete New Hire Enrollment First

Access your benefits information, when and where you need it

Review and manage your benefits on the go!



Use the Benefitsolver MyChoice Mobile App for easy access on the go.

## Access your benefits information on the MyChoice<sup>®</sup> benefits app!

Below are some of the valuable features the MyChoice benefits app offers you:



**Plan Details** – View your medical, dental, and vision hardware plans, and supplemental benefits.



**Beneficiaries** – View and change primary & contingent beneficiaries.



**Document Upload** – Snap and upload important documents!



Thank you for viewing the MUS *Choices*  
Employee benefits presentation!

## QUESTIONS?

Contact your campus HR/Benefits  
Representative or the MUS Benefits office.

[choices.mus.edu](http://choices.mus.edu)

1-877-501-1722