



Open Enrollment 2025 Guide

November 1-15, 2024





At Mayo Clinic, we're on a mission to transform healthcare for our patients. We want you to feel supported and valued every step of the way. Mayo's investment in benefits reflects our core belief that our greatest strength lies in our staff and our shared commitment to putting the needs of patients first. That's why the organization provides a leading benefits program with flexible and robust options designed to meet you and your family's unique needs.

This coming year, benefits premiums will remain the same. Plan members will have no increase because Mayo Clinic is absorbing the increased cost of coverage. We're also expanding fertility benefits and increasing the maximum annual contributions to pretax savings accounts.

No matter how long you've been enrolled in Mayo Clinic benefits, take the time to evaluate your options for 2025 and ensure your coverage aligns with your needs. If you don't update your selections, your current plan will remain in place, except for pretax savings accounts — flexible spending accounts (FSA) and health savings accounts (HSA) — which must be renewed annually.

If you would like to make adjustments to your benefits, you can do so from Nov. 1 –15, 2024. Changes will go into effect Jan. 1, 2025.

Please reach out to our Human Resources team at 507-266-0440 or 888-266-0440 with any questions you have — we're always happy to help.

Be well,

Paula Menkosky

Chief Human Resources Officer
Mayo Clinic

Charanjit Rihal, M.D.

Chair, People and Culture Committee
Mayo Clinic

Welcome to 2025 Open Enrollment

Each year, Mayo Clinic evaluates current benefit plans and determines if any changes will be made for the following year. You are encouraged to review plan information and evaluate your options regarding your 2025 coverage. The open enrollment period is November 1-15 and changes go into effect January 1, 2025.

Open enrollment will be completed in Oracle. Here's what you need to know about the process:

- All benefits-eligible staff will be assigned an open enrollment Journey.
- The Journey will guide you through related tasks, including the actual enrollment.
- Allied health staff who want to pre-elect PTO to sell next year, must do so in UKG.

Open Enrollment Resources

OPEN ENROLLMENT TOOLKIT




Visit the [Open Enrollment Toolkit](#) on the HR Benefits intranet site to access more plan information and resources.

OPEN ENROLLMENT EXPOS

Make plans to attend the virtual or in-person [Open Enrollment Expo](#) to get your benefits check-up with plan experts before open enrollment begins.

BENEFITS UNIVERSITY

Plan to join these educational sessions virtually to learn more about open enrollment topics. If you are not able to attend live, the recordings will be posted on the Video Exchange under the Benefits University program. All sessions will take place live via Zoom from 11 a.m.–Noon Central Time.

DATE	TOPIC	DESCRIPTION	CLICK THE LINK FROM YOUR COMPUTER TO JOIN THE MEETING	SCAN WITH YOUR MOBILE DEVICE TO JOIN THE MEETING	WEBINAR PASSCODE
10/09/2024	Pre-tax Savings Accounts	Learn about the advantages to contributing to a pre-tax savings account.	Zoom Video Link		236971
10/16/2024	Open Enrollment	Learn about all the benefit plan choices you have during open enrollment.	Zoom Video Link		686562
10/23/2024	Choosing Your Mayo Medical Plan Option	Learn about the differences (and similarities) between the three medical plan options so you can make an informed enrollment decision.	Zoom Video Link		662912

2025 Plan Information

For 2025, employee premiums for medical, dental, vision, legal insurance or voluntary benefits, including accident, critical illness and hospital indemnity insurance, will remain the same.

Changes to benefit plans include:

- An expanded, simplified Mayo Medical Plan Network.
- Enhanced fertility coverage in the Mayo Medical Plan, with reduced coinsurance (member responsibility) from 50% to 20%, and an increased lifetime medical maximum of \$25,000.
- Increased annual contribution limits for the pretax savings accounts:
 - Healthcare flexible spending account (FSA) increasing to \$3,200.
 - Health savings account (HSA) increasing to \$4,300 for employee-only coverage, and to \$8,550 for all other coverage levels.
- Increased healthcare FSA rollover amount from \$500 to \$640, effective for 2024 rollovers.
- Added coverage to Critical Illness Insurance for sperm cryopreservation for those with a cancer diagnosis.
- To comply with the 2025 IRS requirement, the Mayo Custom in-network deductible will increase slightly to \$1,650 for employee-only coverage and to \$3,300 for all other coverage levels.

Eligibility Information

CONFIRM ONLY ELIGIBLE DEPENDENTS ARE COVERED ON YOUR BENEFITS

Starting during open enrollment this year, you'll be asked to attest that dependents you enroll in benefits are eligible for coverage. Dependents who are eligible for medical, dental, vision, dependent life and voluntary plans include your:

- Legally married spouse.
- Biological, legally adopted (or placed for adoption), and stepchildren under age 26.
- Children aged 26 or older who have qualified for Social Security Disability Insurance (SSDI) before age 26.

If your dependents do not meet eligibility criteria, you must remove them from coverage when you complete the open enrollment process through Oracle. Removed dependents will maintain coverage through Dec. 31, 2024.

ELIGIBILITY RULES FOR MAYO CUSTOM

While Mayo Clinic will not be auditing Mayo Custom enrollment eligibility, you are responsible to confirm your own eligibility. Per IRS requirements, you are not eligible to participate in Mayo Custom if you or your spouse are:

- Covered under a health plan that is not a high-deductible health plan
- Claimed as a dependent on another person's federal tax return
- Participating in a Health Care Flexible Spending Account

Additionally, there are IRS guidelines regarding eligibility to contribute to a Health Savings Account (HSA), an option for Mayo Custom enrollees.

- Contributions for California and New Jersey residents will be made post-tax.
- You are not able to contribute to an HSA if you are age 65 or older.
- You must be enrolled in Mayo Custom for a full plan year in order to remain eligible to contribute to an HSA.
- There is a 20% tax penalty for using HSA dollars on non-eligible expenses.
- For additional details on HSAs, visit [IRS.gov](https://www.irs.gov), and look for publication 969 or 502.

Overview

The chart below outlines what you can do during open enrollment and what happens if you don't complete open enrollment, based on specific benefit plans. The chart also includes links to the current benefits booklet for each plan listed. 2025 versions for the Mayo Medical Plan are available now; all others will be available at the beginning of the calendar year. During open enrollment, you will be asked to attest that you are aware the plan documents are available on the Mayo Clinic intranet.

		WHAT CAN I DO DURING OPEN ENROLLMENT?	WHAT HAPPENS IF I DON'T COMPLETE OPEN ENROLLMENT?
Mayo Medical Plan	2025 Mayo Medical Plan	— Add, change, or decline coverage	Your current coverage will remain in place for you and your covered dependents.
• Mayo Premier	• 2025 Mayo Premier	— Add or remove eligible dependents	
• Mayo Select	• 2025 Mayo Select		
• Mayo Custom	• 2025 Mayo Custom		
Spousal Surcharge (Mayo Medical Plan only)		Change your responses to the spousal surcharge questions, which may impact whether or not the spousal surcharge applies in 2025.	Your current spousal surcharge designation will remain in place. If your situation changes during the year, you can contact HR Connect to change your responses.
Health Care Flexible Spending Account Dependent Care Flexible Spending Account Health Savings Account		Elect your 2025 contribution amount.	You will not have a 2025 election. Elections do not automatically renew for the next year.
Mayo Reimbursement Account (MRA) Delta Dental - Standard Delta Dental - Deluxe Vision Care Plan		— Add, change, or decline coverage — Add or remove eligible dependents	Your current coverage will remain in place for you and your covered dependents.
Critical Illness Insurance Accident Insurance Hospital Indemnity Insurance		— Add, change, or decline coverage — Add or remove eligible dependents	Your current coverage will remain in place for you and your covered dependents.
Legal Insurance		Elect new coverage or decline current coverage.	Your current coverage will remain in place.
Pre-elect to sell Paid Time Off (PTO)* in UKG		Pre-elect the number of PTO hours you will sell in 2025 at 100% of your hourly rate. Pre-elected hours should be added to the date November 15th on your timecard, for administrative purposes.	Any PTO hours sold in 2025 will be paid at 85% of your hourly rate.

* Allied health staff only

Medical

Mayo Medical Plan Premiums for 2025



Click here for more information about your 2025 plan options.

	MAYO PREMIER		MAYO SELECT		MAYO CUSTOM	
	Monthly	Per Pay Period	Monthly	Per Pay Period	Monthly	Per Pay Period
EMPLOYEE PREMIUMS (0.75 -1.0 FTE)						
Employee	\$141	\$70.50	\$81	\$40.50	\$22	\$11
Employee + Child(ren)	\$255	\$127.50	\$157	\$78.50	\$38	\$19
Employee + Spouse	\$315	\$157.50	\$179	\$89.50	\$43	\$21.50
Employee+ Family	\$418	\$209	\$239	\$119.50	\$54	\$27
EMPLOYEE PREMIUMS (0.50 - 0.74 FTE)						
Employee	\$212	\$106	\$122	\$61	\$33	\$16.50
Employee + Child(ren)	\$383	\$191.50	\$236	\$118	\$57	\$28.50
Employee + Spouse	\$473	\$236.50	\$269	\$134.50	\$65	\$32.50
Employee+ Family	\$627	\$313.50	\$359	\$179.50	\$81	\$40.50

Note: The premium is taken out of the first two pay periods per month, so the amount shown per pay period is taken out of your paycheck 24 times per year. The amount shown does not include the \$100 per month spousal surcharge (if applicable).

Spousal Surcharge

A \$100 pre-tax monthly surcharge will be added to the cost of the medical plan for staff covering a spouse who is offered medical coverage through their employer, does not elect that coverage, and is instead covered under the Mayo Medical Plan.

There are several instances where the spousal surcharge will not apply:

- Spouses who are not employed (or not employed in a benefits-eligible position)
- Spouses who are employed at Mayo Clinic
- Spouses who elect their employer's coverage and enroll in Mayo's plan as secondary coverage
- Retirees

Note: If spousal employment changes occur after open enrollment, contact HR Connect.

The following questions will be asked as part of your enrollment to determine whether the spousal surcharge applies:

- Will you cover your spouse on the medical plan?
- Is your spouse employed outside of Mayo Clinic?
- Is your spouse offered medical coverage through their employer?
- Is your spouse enrolled in medical coverage through their employer?



Mayo Medical Plan Cost-Sharing

	MAYO PREMIER		MAYO SELECT		MAYO CUSTOM	
COST-SHARING AMOUNTS	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Annual Deductible	\$600 per person	\$1,300 per person	\$1,100 per person	\$2,300 per person	Employee (EE): \$1,650	Employee (EE): \$3,000
					EE+Child(ren): \$3,300	EE+Child(ren): \$6,000
	\$1,200 per family	\$2,600 per family	\$2,200 per family	\$4,600 per family	EE+Spouse: \$3,300	EE+Spouse: \$6,000
					EE+Family: \$3,300	EE+Family: \$6,000
Annual Out-of-Pocket Maximum	\$2,600 per person	\$4,600 per person	\$4,100 per person	\$6,100 per person	\$5,000 per person	\$7,000 per person
	\$5,200 per family	\$9,200 per family	\$8,200 per family	\$12,200 per family	\$10,000 per family	\$14,000 per family

Provider Network

The Mayo Medical Plan provides you with a choice to go to an in-network or out-of-network provider to receive care. When you choose an in-network provider through the Mayo Medical Plan Network, the plan provides a higher level of benefits coverage, meaning lower costs for you.

If you select an out-of-network provider, you will receive a reduced level of benefits and you may be subject to usual and customary charges.



[Click here to search for a 2025 in-network provider.](#)

Mayo Medical Plan Prescription Drug Coverage



Click here for more information about prescription drug coverage.

	MAYO PREMIER/MAYO SELECT*			MAYO CUSTOM*		
Prescription Drug Coverage	Mayo Clinic Mail Service (up to 90-day supply)	Mayo Clinic Outpatient Pharmacy (up to 90-day supply except where indicated)	Alluma Network Pharmacy (up to 34-day supply)	Mayo Clinic Mail Service (up to 90-day supply)	Mayo Clinic Outpatient Pharmacy (up to 90-day supply)	Alluma Network Pharmacy (up to 34-day supply)
Formulary generic (Tier 1)	\$10 maximum	\$10 maximum up to 34-day supply	\$10 maximum	5%	10%	25%
Formulary preferred brand or injectable drug (Tier 2)	25% (\$25 minimum)	30% (\$25 minimum)	40% (\$25 minimum)	25%	30%	40%
Formulary non-preferred drug (Tier 3)**	50% (\$25 minimum)	50% (\$25 minimum)	60% (\$25 minimum)	50%	50%	60%
Deductible	None			Combined with medical deductible		
Annual out-of-pocket maximum	Combined with medical out-of-pocket maximum					

* Certain specialty prescriptions are covered under the Plan only when filled by a Mayo Clinic Specialty Pharmacy, Mayo Clinic Pharmacy Mail Service, or a Mayo Clinic or Mayo Clinic Health System outpatient pharmacy.

** Formulary non-preferred (Tier 3) prescriptions do not apply to the Mayo Premier or Mayo Select plans' out-of-pocket maximums.

Medical Plan Scenarios



Click here for a total expense comparison of Mayo Medical Plan options.

Open enrollment allows you to change your Mayo Medical Plan option for the following year. Since health care needs can change year-to-year, it's a good idea to review your options annually to determine which option is best for you. Below you will find scenarios that demonstrate how each of the Mayo Medical Plan options work to meet the needs of three different employees. These are fictional examples and are not intended to be advice or recommendations.

SCENARIO 1	Maya and her spouse are expecting their third child next year. Due to this large medical expense, they've decided to enroll in Mayo Premier so their out-of-pocket expenses are lower at the time of service. They prefer to pay higher premiums out of her paycheck in exchange for a lower deductible when services are needed. Maya will elect a Health Care Flexible Spending Account to use pre-tax dollars for next year's labor and delivery expenses.
SCENARIO 2	Sam and his son each have a few prescriptions per year as well as annual bloodwork for a genetic condition. Sam will enroll in Mayo Select because of the moderate premiums and out-of-pocket expenses. He is comfortable with the moderate premium coming out of his paycheck knowing he has good coverage for their health care costs.
SCENARIO 3	Amir does not have any dependents and is in good health. He chooses Mayo Custom because of the low premium and the ability to contribute pre-tax dollars to a Health Savings Account (HSA) for future expenses. Amir is financially prepared to pay for the higher out-of-pocket expenses if an unexpected medical service is needed.

Pre-Tax Savings Accounts

OPTIONS

PRE – TAX SAVINGS ACCOUNT	ADMINISTERED BY	ANNUAL CONTRIBUTION	ELIGIBLE FOR ROLLOVER?
Health Care Flexible Spending Account (not available with Mayo Custom)	Medica ONESource	\$3,200 per staff member	\$640 per year* (if still eligible to participate)
Dependent Care (daycare) Flexible Spending Account	Medica ONESource	\$5,000 per household	No
Health Savings Account (only available with Mayo Custom)	Fidelity Investments	Employee: \$4,300 Employee + Child(ren): \$8,550 Employee + Spouse: \$8,550 Employee + Family: \$8,550 (Age 55+ catch-up contribution of \$1,000 allowed)	Yes

* Will allow full IRS rollover amount that goes into effect Jan. 1, 2025.

New HSA Participants

There are two types of HSAs — Simple HSA and Full HSA. The Simple HSA is intended for those who have not previously participated in an HSA with Fidelity. A Full HSA is intended for those who have previously participated in an HSA with Fidelity (either through a previous employer or on an individual basis).

If you elect the Simple HSA through open enrollment in Oracle (and accept the Terms & Conditions), a Fidelity HSA will be opened for you automatically. After receiving your medical plan ID card from Medica, visit netbenefits.com to **Activate** your account features and your contributions will begin the first paycheck in January 2025.

If you elect the Full HSA through open enrollment in Oracle or complete open enrollment by contacting HR Connect, you will need to open a Fidelity HSA before contributions can begin. After you receive your medical plan ID card from Medica, go to netbenefits.com, log-in (or register if you are a first-time user) and select **Open HSA**. You will receive a confirmation from Fidelity that your account was established and your contributions will begin the first paycheck in January 2025.

Note: Failure to activate or open your HSA will delay the start of your contributions. If you activate or open your HSA after January 1, 2025, your contributions will begin the following paycheck.

Dental and Vision

Dental and Vision Plan Premiums for 2025

	MAYO REIMBURSEMENT ACCOUNT (MRA) Can be elected with Vision Care Plan, but not Delta Dental		DELTA DENTAL STANDARD OPTION Can be elected with Vision Care Plan, but not MRA		DELTA DENTAL DELUXE OPTION Can be elected with Vision Care Plan, but not MRA		VISION CARE PLAN Can be elected with MRA or Delta Dental	
	Monthly	Per Pay Period	Monthly	Per Pay Period	Monthly	Per Pay Period	Monthly	Per Pay Period
EMPLOYEE PREMIUMS (0.75 -1.0 FTE)								
Employee	\$4	\$2	\$17	\$8.50	\$33	\$16.50	\$9	\$4.50
Employee + Child(ren)	\$4	\$2	\$27	\$13.50	\$71	\$35.50	\$16	\$8
Employee + Spouse	\$4	\$2	\$37	\$18.50	\$63	\$31.50	\$19	\$9.50
Employee + Family	\$4	\$2	\$42	\$21	\$107	\$53.50	\$24	\$12
EMPLOYEE PREMIUMS (0.50 -0.74 FTE)								
Employee	\$4	\$2	\$17	\$8.50	\$33	\$16.50	\$9	\$4.50
Employee + Child(ren)	\$4	\$2	\$37	\$18.50	\$107	\$53.50	\$16	\$8
Employee + Spouse	\$4	\$2	\$48	\$24	\$83	\$41.50	\$19	\$9.50
Employee + Family	\$4	\$2	\$57	\$28.50	\$162	\$81	\$24	\$12

Note: The premium is taken out of the first two pay periods per month, so the amount shown per pay period is taken out of your paycheck 24 times per year.

Mayo Reimbursement Account (MRA)**

Deductible	N/A
Annual Contribution (paid by plan)	\$1,150 per calendar year per enrolled employee
Maximum Account Balance	\$5,000
Preventive (exams/cleaning)	\$0 after reimbursement*
Basic Services	\$0 after reimbursement*
Major Restorative Services (crowns/inlays)	\$0 after reimbursement*
Lifetime Orthodontic Maximum (paid by plan)	\$1,500 per individual per lifetime
Vision Expenses	\$0 after reimbursement*

** Results in \$0 employee responsibility when eligible services are reimbursed with MRA dollars.



Delta Dental

	STANDARD OPTION	DELUXE OPTION
Deductible	\$50 per person / \$150 per family	\$50 per person / \$150 per family
Annual Maximum (paid by plan)	\$1,000 per person per calendar year	\$2,000 per person per calendar year
Preventive (exams/cleaning)	\$0	\$0
Basic Services	20%*	10%*
Major Restorative Services (crowns/inlays)	50%*	40%*
Lifetime Orthodontic Maximum (paid by plan)	\$1,500 per individual per lifetime	\$2,500 per individual per lifetime
Vision Expenses	N/A	N/A

*Percentage you pay after deductible.



Vision Care Plan (through Avesis)

SERVICE	DOLLARS	FREQUENCY	EXPLANATION
VISION CARE PLAN IN-NETWORK COVERAGE (WITHIN U.S. ONLY)			
Exam Copay	\$10	Once per 12 months	Includes case history, refraction evaluation, and diagnosis and treatment plan
Material Copay – Spectacle Lenses*	\$25	Once per 12 months	Includes single vision, bifocal, trifocal, level 1 and 2 progressive lenses, and enhanced lens options
Material Copay – Frames		Once per 24 months	Pay one copay if purchasing both lenses and frames at same time
Frames Allowance	\$150	Once per 24 months	Includes product up to \$150 retail value at most optical centers (less at discount retailers)
Contact Lenses Allowance**		Once per 12 months	
VISION CARE PLAN OUT-OF-NETWORK REIMBURSEMENT			
Exam Reimbursement	\$45	Once per 12 months	Includes case history, refraction evaluation, and diagnosis and treatment plan
Material Reimbursement – Spectacle Lenses*	\$25 single, \$45 bi-focal, \$60 tri-focal	Once per 12 months	Member reimbursed for spectacle lenses based on type of lenses listed
Material Reimbursement – Frames	\$65	Once per 24 months	Member reimbursed for either, up to dollar amounts listed
Contact Lenses Reimbursement**	\$130	Once per 12 months	

*Lens package includes adult polycarbonate, standard scratch-resistant coating, ultra-violet screening, solid or gradient tint, standard anti-reflective coating, level 1 and 2 progressives.
 **In lieu of spectacle lenses and frames

Voluntary Benefits

Critical Illness, Accident and Hospital Indemnity Insurance Premiums for 2025



Click here for more information about Voluntary Benefits.

Critical Illness Insurance provides a lump sum payment directly to you upon the first diagnosis of a covered illness for a covered person. You can use the payment for any expenses you choose.

Accident Insurance provides a lump sum payment directly to you when a covered person experiences a qualified loss, injury, hospitalization, or paralysis due to an accident. You can use the payment for any expenses you choose.

Hospital Indemnity Insurance* provides a lump sum payment directly to you when a covered person experiences a hospital or ICU admission and stay. You can use the payment for any expenses you choose.

CRITICAL ILLNESS INSURANCE

Monthly Cost per \$1,000 of Coverage		
AGE	EMPLOYEE	SPOUSE
<25	\$0.152	\$0.156
25-29	\$0.200	\$0.192
30-34	\$0.276	\$0.256
35-39	\$0.432	\$0.416
40-44	\$0.636	\$0.608
45-49	\$1.000	\$1.000
50-54	\$1.424	\$1.508
55-59	\$2.000	\$2.308
60-64	\$2.744	\$3.236
65+	\$3.252	\$3.880
Monthly Cost per \$1,000 of Coverage		
Child up to age 26 = \$0.216		\$0.216

ACCIDENT INSURANCE

HOSPITAL INDEMNITY INSURANCE

	Monthly	Per Pay Period	Monthly	Per Pay Period
EMPLOYEE PREMIUMS				
Employee	\$5.76	\$2.88	\$9.56	\$4.78
Employee + Child(ren)	\$10.08	\$5.04	\$13.60	\$6.80
Employee + Spouse	\$9.44	\$4.72	\$17.36	\$8.68
Employee + Family	\$16.24	\$8.12	\$22.40	\$11.20

Note: The premium is taken out of the first two pay periods per month, so the amount shown per pay period is taken out of your paycheck 24 times per year.

IMPORTANT INFORMATION

- Residents of California, Massachusetts, New Jersey, New York, or Washington D.C. must be enrolled in a major medical plan in order to be eligible for these plans.
- When you elect voluntary benefits during open enrollment, you are guaranteed coverage to begin Jan. 1, 2025 as long as you are in active employment status. If you are in a leave status on this date, your coverage will begin when you actively return to work.

***IMPORTANT:** This is a fixed indemnity policy, NOT health insurance. Although Hospital Indemnity Insurance may pay you a limited dollar amount if you're sick or hospitalized, you're still responsible for paying the cost of your care. The payment you get isn't based on the size of your medical bill, there might be a limit on how much the policy will pay each year and the policy isn't a substitute for comprehensive health insurance. Since Hospital Indemnity Insurance isn't health insurance, it doesn't have to include most Federal consumer protections that apply to health insurance. For questions about Hospital Indemnity Insurance, contact HR Connect.

Legal Insurance

The voluntary Legal Insurance plan is offered through ARAG at a monthly premium of \$18.56 (post-tax). With this coverage, you (and your eligible dependents) can take advantage of a wide range of legal coverage and services to protect your family

and help you better navigate life's legal challenges. The plan offers in-network attorney fees that are 100% paid-in-full for many covered matters.

Well-Being and Mental Health Resources

The well-being of every employee matters, which is why Mayo Clinic provides resources to foster your well-being.

Watch this brief [Well-Being Overview](#) video to learn about resources to support your physical, emotional, social, financial and mental well-being. Explore the [Well-Being Central website](#) or click on the topics below to learn more:

- [Well-Being Workshops](#)
- [Virtual Well-Being Coaching Groups](#)
- [Well-Being Champions](#)
- [HELP peer support program](#)
- [Resources to Support Supervisors & Work Unit Well-Being](#)
- [Joy at Mayo Clinic](#)
- [Program on Physician Well-Being](#)

Our employees are the heart and soul of everything we do at Mayo Clinic. We know mental health is vital to your well-being, both personally and professionally.

We want to ensure you have access to resources wherever you find yourself today, in this moment. Whether you are looking for support or someone to talk to, visit our [mental health website](#).

- Employee assistance program
- Training and education
- Lend an Ear modules
- Interactive skill-building modules
- Personal stories
- Support to get help now
- Additional mental health resources



Need Help?

Visit HR CONNECT on the Mayo Clinic intranet to:	Visit HR BENEFITS on the Mayo Clinic intranet to:
<ul style="list-style-type: none">• Use the “Chat” feature for immediate assistance from an HR representative Monday-Friday, 8 a.m. - 5 p.m. CST• Click “I Need Help” to submit a question or request to an HR representative	<ul style="list-style-type: none">• Explore benefits content by subject, key word, life event• Review upcoming benefits events

Contact [HR CONNECT](#) regarding:

- Open Enrollment support
- Assistance with Oracle navigation
- Enrollment in benefit plan(s) if unable to access the Mayo Clinic intranet

507-266-0440 | 888-266-0440
Hours: Monday – Friday , 7 a.m. - 6 p.m. CST

When calling HR Connect, you will need your Person Number, your date of birth, last four digits of your Social Security number, and your home address.

Contact [MEDICA CUSTOMER SERVICE](#) regarding:

- The status of your medical claims
- Finding an in-network provider
- Benefit balances and coverage information
- Ordering new membership cards

866-839-4015
Hours: Monday - Friday 7 a.m. - 8 p.m. CST (closed Thursdays 8 a.m. - 9 a.m.); Saturdays 9 a.m. - 3 p.m. CST
[Medica.com/SignIn](#)

When contacting Medica, you will need your member ID number from your Mayo Medical Plan ID card.

Other Contact Information:			
Alluma	877-239-7159	Allumaco.com	Mayo Medical Plan prescription drug benefits
ARAG	800-247-4184	ARAGlegal.com/myinfo (access code 18569mc)	Legal Insurance
Avesis	855-214-6777	Avesis.com	Vision Care Plan
Delta Dental	800-448-3815	Deltadentalmn.org	Dental Care Plan
Fidelity Investments	800-343-0860	NetBenefits.com/atwork	Health Savings Account
Medica ONESource	866-839-4015, option 2	Medica.com/onesourcemhpslogin	Reimbursement Accounts
Prudential	844-656-MAYO (6296)	mybenefits.prudential.com	Accident Insurance, Critical Illness Insurance and Hospital Indemnity Insurance

If there are any inconsistencies between this document and the plan document, the plan document is the document that will be relied upon for plan administration and is the document that governs the benefits available.

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[mayoclinic.org](https://www.mayoclinic.org)

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