



Your Enrollment Reference Newsletter

OCTOBER 2016

Enroll for 2017 Benefits Between Oct. 31 and Nov. 11!

ENROLL ONLINE OR BY PHONE

Starting Oct. 31, you can enroll online through the MySource for Human Resources website at www.mysourceforhr.com, or by calling 1-888-640-3320. During the enrollment period, Customer Service Associates are available from 8:30 a.m. to 6:00 p.m. Eastern time, Monday through Friday.

Take Control of Your Future

The annual enrollment period—Oct. 31 through Nov. 11—is an opportunity to review your current coverage and consider any changes for 2017.

The following are some tips to help you have a smooth, hassle-free enrollment experience:

- ▶ **Access** the MySource for Human Resources website at www.mysourceforhr.com by confirming your user ID and password. If you need a reset, you can do so via self-service by clicking the “Forgot User ID or Password?” link. The Benefits Center will not be able to process these changes for you.
- ▶ **Review** your current plans and coverage levels and think about any changes you’ll need for next year. For example, could you save more money by enrolling in a different medical plan? Or does a family change mean that you should re-examine your life insurance coverage amounts?
- ▶ **Consider** increasing the amount you contribute to your Health Savings Account (HSA) in 2017 if you are re-enrolling in an HD PPO health plan. Remember, any HSA dollars you don’t use remain in your account and can be applied to future medical expenses.
- ▶ **Confirm** you have Social Security Numbers (SSNs) for yourself and your covered dependents. You will need to enter any missing SSNs online while making your enrollment elections or you may call the Benefits Center at 1-888-640-3320 and provide the information over the phone.
- ▶ **Enroll** in your 2017 benefits. All the information you will need to enroll can be found on the MySource for Human Resources website at www.mysourceforhr.com. At the start of the enrollment period, you will receive an email with a link to the website.

Please read through this entire newsletter carefully to understand the changes for 2017. **It’s important for you to be informed and to make good choices, because IRS rules prevent NiSource from letting you make changes after the enrollment period ends.**

What Happens If You Don’t Enroll?

If you don’t make any changes to your benefits coverage, your current elections will continue in 2017 (as long as they are available).

However, if you currently participate in a flexible spending account (FSA) or Health Savings Account (HSA), your elections will not carry over. You must elect to enroll in these options each year.

Important Changes for 2017

Here's information about some important changes that may affect your benefits enrollment decisions for next year.

HSA Contribution Maximum Increase

If you participate in the HD PPO 1 or HD PPO 2 health plan for 2017, the maximum Health Savings Account (HSA) contribution you can make (including your contributions and any NiSource contributions) will increase to \$3,400 for Employee only coverage. Currently, contributions are limited to \$3,350 for Employee only coverage. The contribution limit for Family coverage will not change for 2017; it will remain at \$6,750.

You can also make additional "catch-up" contributions to your HSA of up to \$1,000 annually if you are age 55 or older. You will have the opportunity to include your catch-up contribution (if eligible) in your 2017 HSA election amount.

Individual Out-of-Pocket Maximum for HD PPO 2

As required under the Affordable Care Act (ACA), the individual out-of-pocket limit under the HD PPO 2 medical plan option will increase from \$6,850 to \$7,150.

HD PPO 2 Changes

	2016 Amounts	2017 Amounts
Employee Only Coverage		
Deductible	\$2,500	\$2,500 (no change)
Out-of-Pocket Max.	\$5,000	\$5,000 (no change)
Family Coverage		
Deductible	\$5,000	\$5,000 (no change)
Out-of-Pocket Max.	\$6,850 per person, not to exceed \$10,000 combined family	\$7,150 per person, not to exceed \$10,000 combined family

NEW LOOK FOR THE ENROLLMENT WEBSITE

When you log into the MySource for Human Resources website this fall, you will notice the home page has a new look and feel. The site has been updated to make it more user friendly and easier to get to the transactions and personal information you need.

Starting Oct. 31, you can enroll online through the MySource for Human Resources website at www.mysourceforhr.com, or by calling 1-888-640-3320. During the enrollment period, Customer Service Associates are available from 8:30 a.m. to 6:00 p.m. Eastern time, Monday through Friday.

Prevention Is Still the Best Medicine

Preventing serious illnesses such as colon cancer, breast cancer, heart disease and diabetes from occurring is still the best way to manage your health care.

If you participate in an HD PPO or PPO plan, NiSource will help you do just that by continuing to provide you with a variety of health and wellness resources, such as:

- ▶ A Wellness Day, (additional paid time off), will be provided to employees (including employees if covered in their Collective Bargaining Agreement) to be used to receive an annual check-up and preventive health screens.
- ▶ Free preventive care and screenings. Preventive services include:
 - Routine physical exams
 - Immunizations
 - Routine lab work
 - Routine prostate specific antigen (PSA) tests
 - Well-woman visits
- ▶ Coverage at 100 percent for one in-network colonoscopy and one in-network mammogram per year regardless of diagnosis (preventive or non-preventive).
- ▶ Coverage of smoking cessation products may be available. You can contact Anthem at **1-800-228-2891** for more details.
- ▶ A variety of tools and resources available through Anthem, including an online health assessment, 24-hour NurseLine, support for future moms and access to ConditionCare nurse coaches. Contact Anthem at **1-800-228-2891** or **www.anthem.com** for more details.

PLAN DETAILS FOR HMOs

If you are enrolled in a Health Maintenance Organization (HMO) plan, please see your Health Plan Comparison Chart for 2017 benefits information including preventive care coverage.

You can find your Health Plan Comparison Chart on the MySource for Human Resources website at **www.mysourceforhr.com** during the enrollment period.

LEARN MORE ABOUT LIVING WELL

Refer to the Live Well Kit for more information about NiSource wellness benefits. To access the Live Well Kit, go to **www.mysourceforhr.com** and navigate to **Health & Insurance > Coverage Details > Plan Information > Live Well Save Well.**

SAVE ON A NEW FITBIT

It's back! For a limited time, NiSource employees will again have an opportunity to purchase up to two Fitbit units at a preferred rate. This time, employees can choose from any of the models that Fitbit offers. Official ordering and details will be announced soon via **MySource.com**.

NEW for 2017: Telemedicine

Effective Jan. 1, 2017, you'll be able to connect with a doctor without leaving your home or office simply by using your smartphone, tablet or computer.

Available to all Anthem health plan members, **LiveHealth Online** provides 24/7 access to doctors who can assess your condition, provide treatment options and even send a prescription to the pharmacy of your choice. It will be a convenient and cost-effective option for receiving medical care in non-urgent situations.

Look for more details later this year.

Use the Right Resource for the Right Need

When you need medical care, your first instinct may be to head straight to the emergency room. But in many situations, it may be more appropriate to seek treatment from a different, less costly resource. This chart can help you decide which resource is the right one for your need.

	24/7 Nurseline for Anthem Members	Telemedicine (new in 2017)	Doctor's Office Visit	Urgent Care	Emergency Room
When to use...	When you need to discuss symptoms with a registered nurse to get advice on the care you may need	For 24/7 access to a doctor for minor illnesses (such as the flu, pink eye or bronchitis)	Your doctor should be your go to resource when you need health care (especially preventive care)	For a non-emergency medical situation that needs more immediate care (like a painful ankle sprain)	When you need immediate medical care for a potentially life threatening or serious medical situation (such as a heart attack or broken bone)
General cost...	Free for Anthem medical plan participants	\$	\$\$	\$\$\$	\$\$\$\$



How is Your Financial Health?

Now is also a good time to review your 401(k) Savings Plan. Are you leaving money on the table by not receiving the full company match?

Fidelity recommends contributing 10 to 15 percent of your eligible pay each year to your 401(k) Savings Plan. If you're not quite there, start slowly by increasing your contribution amount by 1 percent every year. It's easy to do if you enroll in the 401(k) Savings Plan Annual Increase Program. Just select an annual increase amount and the date you want your increases to begin—it's that simple. To increase your contribution today, log on to **401k.com** and click on "Contribution Amount" under Quick Links.

You can change your contribution amount at any time. And remember, even a small increase can help you reach your goals. If you have any questions about increasing your contribution or participating in the Annual Increase Program, call the Fidelity Investments Service Center toll free at **1-800-305-4015**.

YOUR BENEFICIARY INFORMATION

Open enrollment is a good time to confirm the beneficiary information you have on file with MySource for Human Resources.

You can review and make updates to your beneficiaries via www.mysourceforhr.com, or by calling 1-888-640-3320 to request assistance.

Other Important Reminders for 2017

Covering Your Dependents

It's your responsibility to ensure your dependents meet the eligibility criteria. NiSource reserves the right to audit your covered dependents to confirm that they are eligible for coverage. Refer to the Summary Plan Description (SPD) posted at www.mysourceforhr.com for details.

Opt-out Credit

If you are a full-time active employee and decide not to enroll in NiSource medical and/or dental coverage, you may be eligible for an opt-out credit. Refer to your personalized enrollment information available at www.mysourceforhr.com for details about your opt-out credit amount. If you are married and your spouse has access to coverage from another source—such as his or her employer—you should carefully evaluate all your options.

If Your Spouse or Parent Also Works at (or is Retired from) NiSource

If you and your spouse (or parent) both work at NiSource (or if your spouse or parent is retired from NiSource), it's not possible for one of you to enroll as a dependent of the other and receive the opt-out credit(s). If you are currently enrolled as a dependent on your spouse's (or your parent's) plan, you must call MySource for Human Resources at 1-888-640-3320 during enrollment to update your status. Ineligible opt-out credits will be recovered through payroll deductions.

Electing Child Life Insurance

If you and your spouse are both NiSource employees, either of you may choose to purchase life insurance for your eligible children up to age 26. However, it's not possible for you and your spouse both to cover your child(ren) under the child life plan. If you do both elect to cover the same child(ren), double benefits are not available—in effect, you will be paying twice to cover your children.

Also please note that if your child is employed at NiSource and covered under another NiSource-sponsored employee life insurance plan, he or she cannot be covered under the child life policy.

To remove a child from coverage, you must call 1-888-640-3320 and request to discontinue his or her participation in the plan. If your child becomes ineligible for coverage mid-year, it is your responsibility to call and have him or her removed from coverage.

Electing Supplemental AD&D Insurance

Similar to life insurance, your child cannot have dual coverage under any NiSource-provided supplemental AD&D insurance plan. That means if you and your spouse are both NiSource employees, your child can be covered by one—but not both—of you under the supplemental AD&D insurance plan.

And if your child is employed at NiSource and covered under another NiSource-sponsored employee life insurance plan, he or she is not eligible to be covered as a dependent under any other NiSource life policies.

Dental—What’s the Best Choice for Me?

What’s the difference between Dental and Dental Plus? It’s simple, really. Dental Plus includes coverage for orthodontia and a \$2,000 annual benefit maximum for total coverage. Dental does not include coverage for orthodontia and has no annual out-of-pocket maximum.

	Preventive Dental	Dental	Dental Plus
Coverage for Basic Services	Included	Included	Included
Orthodontia Benefits	No coverage	No coverage	Up to \$1,500 per person lifetime max.
Annual Deductible	\$75 Employee only \$225 Family	\$50 Employee only \$150 Family	No deductible
Annual Benefit Maximum	Up to \$2,000 per person per year	No annual max.	Up to \$2,000 per person per year

SUMMARY OF BENEFITS AND COVERAGE

The federal health care reform law requires employers to provide a Summary of Benefits and Coverage (SBC) communication to employees prior to the start of open enrollment.

SBC documents will be available via the MySource for Human Resources website or on the MySource intranet.

LIFE EVENTS

To add or remove dependents from coverage due to a life event such as marriage, divorce, change in spouse or dependent employment status, birth or adoption, you must contact MySource for Human Resources at 1-888-640-3320 to request a change in coverage. You must take action within 31 days of the date of the qualified event.

Please note that marriage, divorce and birth/adoption may be updated online at www.mysourceforhr.com.

UMB CUSTODIAL AGREEMENT

If you are currently enrolled in an HD PPO plan, have an active HSA and plan to continue it for 2017, then you do not need to provide acknowledgement of the custodial agreement again during open enrollment. Your acknowledgement of the custodial agreement will continue automatically.

If you currently participate in an HSA but are no longer eligible to contribute in 2017, you must actively **not agree** to the UMB custodial agreement during open enrollment and notify a Your Spending Account™ representative at **1-888-640-3320**.

However, if you are opening an HSA for the first time in 2017 or are re-enrolling in an HD PPO/HSA plan after not participating in 2016, you will need to provide acknowledgement of the UMB custodial agreement during open enrollment. You will not be able to participate in the HSA or receive HSA contributions from NiSource until you do so. If you don't provide prompt acknowledgement, you may receive a pro-rated HSA contribution amount from NiSource.

The Benefits of an HD PPO

If you want high-quality medical coverage plus more control over how you pay for health care, then a High Deductible Preferred Provider Organization (HD PPO) plan may be right for you. Consider these plan features:

- ▶ With an HD PPO, you have many of the same features as with a typical PPO—for example, a plan deductible, co-insurance and an out-of-pocket maximum—but your monthly cost for coverage is **lower** and your deductible is **higher** when compared to the PPO.
- ▶ Once you meet your deductible, co-insurance pays 80 percent of your eligible medical expenses.
- ▶ If you reach the plan's annual out-of-pocket maximum, the plan pays 100 percent of any other eligible expenses for the rest of the calendar year.
- ▶ Both **HD PPO 1** and **HD PPO 2** (NiSource's two HD PPO options) protect you from significant or unexpected health care expenses, and cover health care you receive from in-network and out-of-network providers (though you pay less when you use in-network providers).
- ▶ A key benefit of enrolling in an HD PPO is having access to a Health Savings Account (HSA), which you can use to set aside before-tax dollars to pay for qualified health expenses (including your deductible or other out-of-pocket medical costs). Any dollars in your HSA that you don't use in 2017 can be saved and used for future medical expenses.
- ▶ If you enroll in an HD PPO plan and open an HSA, NiSource contributes money to your account in 2017:
 - \$800 each year if you enroll in HD PPO 1; or
 - \$300 each year if you enroll in HD PPO 2These contributions are made to your account by the end of January, and you receive them even if you don't contribute.

You Can Pay Yourself Back, Too

While the company makes its contribution to your HSA in January, your contributions are funded throughout the year. This may mean that if you open a new HSA or have no remaining funds from the prior year, your HSA balance will be at its lowest in January.

There may be times early in the year when you need to pay for eligible expenses out of pocket. If that happens, once funds are available in your account, you can simply reimburse yourself for the amount you paid out of pocket.

Requirements to Enroll in an HSA

To contribute to an HSA, you must be enrolled in an HD PPO. In addition, you cannot be:

- ▶ Covered by another health plan (for example, you cannot be a dependent on anyone else's plan, except for under vision and dental coverage).
- ▶ Enrolled in Medicare benefits.
- ▶ Claimed as a child dependent on another person's tax return.
- ▶ A participant in an annual Health Care FSA for 2017, and you must have a \$0 balance in your 2016 Health Care FSA on Dec. 31, 2016. If you continue to have an FSA balance, you will not be allowed to contribute to an HSA until April 2017. Plan now to incur expenses and submit all claims before Dec. 15, 2016. You may still need to validate your claims before the end of the year to ensure that you have a \$0 balance on Dec. 31, 2016.

You are required to elect your contribution amount each year during annual enrollment; your prior year contribution elections will not roll over automatically to the following year. Also, remember that general purpose Health Care FSA dollars cannot be used to cover your HSA-eligible expenses.

Changing Your HSA Amount During the Year

Remember, after you set your HSA contribution amount for 2017, you are allowed to change it at any time during the year.

For your convenience, a mid-year election change tool is available on the www.mysourceforhr.com website.

From the Health and Insurance tab, select "Health Savings Account Contribution Change" from the Take Action drop-down menu and follow the instructions.

Your HSA BENEFICIARY

If you participate in an HSA, be sure to complete a beneficiary designation form. This form is available on the UMB website (which you can access via www.mysourceforhr.com). Completed forms should be returned directly to UMB.

If you have questions or problems accessing the form, call **1-888-640-3320** and speak with a Your Spending Account representative. During the enrollment period, representatives are available from 8:30 a.m. to 6:00 p.m. Eastern time, Monday through Friday.

Is an HD PPO Plan Right for You?

The Benefits Source website has a variety of tools and resources to help you make your enrollment decisions. One tool—the **Medical Expense Estimator**—can help you select the right medical plan by estimating your costs for next year based on your past usage and comparing your total annual medical expenses for each available option. You can also customize your results by entering new details about your anticipated service needs.

Steps for Using the Medical Expense Estimator

1. When you log in to the Benefits Source website to make your annual enrollment choices, select “Step 2: Review Your Healthcare Costs” and click on “Estimate Your Medical Costs” to open the Medical Expense Estimator tool.
2. Use the check boxes to choose which dependents to cover and select which medical plans to compare, then click on “Compare these plans.”
3. The tool will display a comparison of your total estimated medical plan costs for the upcoming year, including a detailed breakout of each expense.
4. To get a more accurate estimate, select “Customize Your Medical Expenses” and update your anticipated service needs or enter specific estimates for types of care you expect to receive, then select “Update Needs” or “Update Results.”

1. Annual Enrollment Deadline November 11

You've Enrolled in Your Benefits
You can [make changes](#) now, or first review information below to help you with any changes.

- 1 Learn What's New and Changing
- 2 Review Your Healthcare Costs
- 3 Compare Plan Details
- 4 Find a Doctor
- 5 Your Spending Accounts
- 6 Dependent Eligibility Rules
- 7 Enroll in Your Benefits

Estimate Your Medical Costs
Estimate and compare what you might pay out-of-pocket for medical services.

2. Medical Expense Estimator
Compare your medical plan costs. The costs are based on your average medical service need.

Choose Dependents [Missing dependents?](#)
Who would you like to cover?
 Jane A Doe69100031

[Update Results](#)

Select up to 3 plans to compare estimated expenses for the upcoming year.

Choose Plans	Plan Premium	Estimated Out-of-Pocket Costs	Total Cost
<input checked="" type="checkbox"/> High Deductible PPO 1 Upcoming year	\$2,128	\$3,722	\$5,850
<input checked="" type="checkbox"/> High Deductible PPO 2 Upcoming year	\$492	\$5,822	\$6,314
<input checked="" type="checkbox"/> PPO Upcoming year	\$6,611	\$2,258	\$8,869

[Get More Details](#)
When you compare your medical plans you'll see your detailed costs in easy to understand charts.

[Compare these plans](#)

Medical Expense Estimator
Compare your medical plan costs. The costs are based on your average [service need](#).

TIP To get a more accurate estimate, indicate your medical needs. [Customize Your Medical Expenses](#)

3.

Choose other plans. [Choose Again](#)

Total Estimated Cost Details	High Deductible PPO 1	High Deductible PPO 2	PPO
Plan Premium	\$2,128	\$492	\$6,610
Out-of-Pocket Expenses			
Deductible	\$3,000	\$5,000	\$1,000
Office Visits	\$411	\$355	\$391
Facility Use	\$0	\$0	\$0
Prescription drug expenses	\$1,112	\$768	\$867
Services exceeding plan limits	\$0	\$0	\$0
Services not covered	\$0	\$0	\$0
HSA/HRA Account			
Employer contribution amount	\$800	\$300	--
Prior year rollover amount	\$0	\$0	--
\$ <input type="text" value="0.00"/> update			
HSA/HRA Reimbursement Total	-\$800.00	-\$300.00	--
Out-of-pocket Expense Total (Based on average medical service needs. Amounts may not add up exactly due to rounding.)	\$3,722	\$5,822	\$2,258
Annual Estimated Expenses	\$5,850	\$6,314	\$8,868

TIP Check Medical Costs
See how much you may pay for doctor visits and other medical services before you meet the deductible.
[Review Average Costs](#)

Save Money
Reduce your taxes by putting before-tax dollars in a health care spending account.
[Learn More](#)

*For any plan with different benefit levels (such as in-network and out-of-network), costs shown assume you receive 100% of service from in-network providers offering the highest benefit levels. Your expenses will be higher if you use other providers.

Be sure to check out the Medical Expense Estimator and other helpful tools on the Benefits Source website during the annual enrollment period.

When to Expect ID Cards for 2017

Depending on the plan(s) you choose, you may receive one or more new ID cards from plan administrators in the mail in December.

	New Card?	How Many Cards?	When?
Medical—PPO Plan	Only if you change plans.	Two per family*	Before Jan. 1, 2017
Medical—HD PPO Plans	Only if you change plans.	One per member*	Before Jan. 1, 2017
Medical—Health Maintenance Organization (HMO)	Only if you change plans. Check with your HMO for details.		
Prescription Drugs	You'll have a single card for both medical and prescription drug.	N/A	N/A
Flexible Spending Account (FSA)	Only if you elect to newly enroll in an FSA.	One per family*	Before Jan. 1, 2017
Health Savings Account (HSA)	If you elect to newly enroll in the HSA and are not currently participating in the Health Care FSA. If you re-enroll in the HSA, a new card will be sent to you once every three years.	One per family*	Before Jan. 1, 2017
Dental	No, you do not need a card to access dental services. Use your Social Security Number and Group Number 3205656 when you visit a provider. You also can log in to www.mycigna.com and click on "Print a Temporary Card" to print a card with the information above for reference. Or use the myCigna mobile app to access an electronic version.	N/A	N/A
Vision	No, you do not need a card to access vision services. Use your Social Security Number and date of birth when you visit a provider. You also can log in to www.vsp.com to print a temporary card.	N/A	N/A

*You can request additional cards online or by calling a Customer Service Associate at no cost.

HSA DEBIT CARD

If you enroll in an HD PPO plan (1 or 2) for 2017 and open an HSA after participating in the Health Care FSA for 2016, you should keep and continue to use your current debit card. You will not automatically receive a new debit card for the HSA.

Remember, you cannot participate in both an HSA and a Health Care FSA in the same year.

The information included in this newsletter has been prepared to summarize some provisions of the plans and is not intended to be a complete summary of the plans. To the greatest extent possible, non-technical language has been used to explain some of the plans' provisions. The official plan texts are the governing documents if questions arise. While NiSource intends to continue the plans described in this document, the company reserves the right to change or discontinue any or all of them at its discretion and without prior notice to any person.



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IMPORTANT BENEFITS INFORMATION ENCLOSED