

BENEFIT REVUE

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2005 Open Enrollment Is Here!

BCBS & Minnesota Life Offer New Options

Two new benefits will be available to employees during the 2005 Open Enrollment which runs January 12 – February 11. Blue Cross Blue Shield (BCBS) will be offering a new lower-premium health plan option and Minnesota Life Insurance Company, the District's new life insurance carrier, will also offer additional \$50,000 and \$100,000 supplemental life insurance options.

The new BCBS 118 PPO health plan was specifically added to offer a lower-premium option for employees who purchase health insurance for their dependents. For a comparison of benefits between the BCBS 927, 903, and 118 plans, please refer to the October Benefit Revue which can be accessed on the Insurance & Benefits website or refer to your 2005 Open Enrollment packet.

Minnesota Life Insurance Company will offer two new amounts of supplemental employee life insurance - \$130,000 and \$180,000, which added to the \$20,000 of basic life insurance provided by the District, increase the total amounts of coverage to \$150,000 and \$200,000, respectively. The additional amounts are subject to medical underwriting and must be approved by Minnesota Life before they become effective.

Employees who purchase supplemental, spouse, or child life insurance will be guaranteed the same level of coverage they currently have with Union Central/AUL. If you do not want to change the level of coverage(s) you currently carry, you will be automatically enrolled for the same benefit levels under Minnesota Life and you will not be required to complete any paperwork.

Rates for supplemental life insurance will decrease slightly and rates for spouse and child life insurance will remain stable. All rates are guaranteed for three years.

Rates for other voluntary benefits – dental, vision, cancer (AIG), and disability insurance will not increase in 2005. You may see an increase in your disability insurance premium, however, because you have moved into a higher age bracket and/or your salary has increased.

Open Enrollment Video

In an effort to effectively reach more employees with Open Enrollment information, the Insurance & Benefits Department produced a video in lieu of the Open Enrollment meetings which many employees were unable to attend. The video will be aired on ITV and the Learn Network. (Please see the 2005 Open Enrollment Video Schedule on page 2.) The Benefit Contacts at each location will also make

video cassettes for employees to check out and view at their convenience.

The video will review each of the benefits offered during Open Enrollment and explain paperwork requirements, filing timelines, and other helpful suggestions.

Open Enrollment Packets

Personalized packets for all regular employees who work 20 or more hours per week have been mailed to each location and contain:

- Open Enrollment Directions
 - Comparison of the three BCBS PPO health plans
- (continued on page 4)

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In This Issue

- Page 1:
2005 Open Enrollment Is Here!
- Page 2:
2005 Open Enrollment Video Schedule
- BCBS 118 PPO Plan FAQ's
- Page 3:
Benefit Reminder – Beneficiary Designations
- January's "Benefit Review" — Benefit Bank
- Page 4:
Benefit Directory
- 2005 Retirement Seminar



2005 Open Enrollment **Video Schedule**

The 2005 Open Enrollment video will air on ITV on the following dates:

Jan. 10 - ITV channel 10
8:00 a.m.; 2:30 p.m.
Jan. 11 - ITV channel 12
8:00 a.m.; 2:00 p.m.
Jan. 12 - ITV channel 8
12:00 p.m.; 4:00 p.m.
Jan. 13 - ITV channel 10
8:00 a.m.; 2:00 p.m.
Jan. 14 - ITV channel 12
7:30 a.m.; 1:00 p.m.
Jan. 17 - ITV Channel 10
8:00 a.m.; 2:00 p.m.
Jan. 18 - ITV channel 12
7:30 a.m.; 2:00 p.m.
Jan. 19 - ITV channel 8
7:30 a.m.; 12:00 p.m.; 4:00 p.m.
Jan. 20 - ITV channel 10
8:00 a.m.; 2:00 p.m.
Jan. 21 - ITV channel 12
7:30 a.m.; 1:30 p.m.
Jan. 24 - ITV channel 10
8:00 a.m.; 2:00 p.m.
Jan. 25 - ITV channel 12
7:30 a.m.; 2:00 p.m.
Jan. 26 - ITV channel 8
7:30 a.m.; 11:30 a.m.; 4:00 p.m.
Jan. 27 - ITV channel 10
8:00 a.m.; 2:00 p.m.
Jan. 28 - ITV channel 12
7:30 a.m.; 1:30 p.m.
Jan. 31 - ITV channel 10
8:00 a.m.; 2:00 p.m.
Feb. 1 - ITV channel 12
7:30 a.m.; 1:30 p.m.
Feb. 2 - ITV Channel 8
7:30 a.m.; 11:00 a.m.; 2:30 p.m.
Feb. 3 - ITV channel 10
8:00 a.m.; 2:00 p.m.
Feb. 4 - ITV channel 12
7:30 a.m.; 2:30 p.m.
Feb. 7 - ITV channel 10
8:00 a.m.; 2:00 p.m.
Feb. 8 - ITV channel 12
7:30 a.m.; 2:30 p.m.
Feb. 9 - ITV channel 8
7:30 a.m.; 11:00 a.m.; 3:00 p.m.
Feb. 10 - ITV channel 10
8:00 a.m.; 11:00 a.m.; 3:00 p.m.

Blue Cross Blue Shield 118 PPO

Plan FAQ's

Below are questions employees have asked about the new Blue Cross Blue Shield (BCBS) 118 PPO Plan. The answers to these questions should help you better understand the plan and decide if it meets your family's medical insurance needs.

- Q.** Is the BCBS 118 plan a PPO plan or an HMO plan?
A. The BCBS 118 plan is a PPO (Preferred Provided Organization) plan.
- Q.** Since our current health insurance plans are also PPO plans, how is the BCBS 118 plan different?
A. Although all the District's health plans are PPO plans, the BCBS 118 plan has the following significant differences:
- Medical benefits covered by co-insurance (80% in-network, 60% out-of-network), not copays.
 - Separate per-admission \$150 in-network hospital deductible
 - Higher deductible and out-of-pocket maximums
 - Lower calendar year maximum benefits for preventive services, therapies, home health care, hospice, and substance abuse
 - No hearing aid benefit
 - No gastric bypass surgery benefit
 - No Medical Excellence Travel & Lodging Expense benefit
 - 3-tier pharmacy benefit with higher copay for non-preferred prescription drugs
- Q.** What is the 3-tier pharmacy benefit under the BCBS 118 PPO plan?
A. A 3-tier pharmacy has the following categories of prescription drugs:
- Generic drugs - \$10 copay
 - Preferred brand drugs - \$25 copay
 - Non-preferred brand drugs - \$40 copay
- Q.** Is the hospital Per Admission Deductible (PAD) different than the Calendar Year Deductible?
A. Yes, the hospital PAD is a separate deductible for which you are responsible and it is in addition to the CYD and it does not count toward your CYD.
- Q.** Should I expect to incur more out-of-pocket expenses under the BCBS 118 plan than under the two current plans?
A. Yes, except for prescription drugs, all other medical services are subject to a \$500 individual/\$1,000 family deductible; therefore, you will be responsible for the first \$500 per individual (maximum \$1,000 per family).
- Q.** Are premiums for the BCBS 118 PPO plan lower than premiums for the BCBS 927 and 903 PPO plans?
A. Yes, the premiums for the BCBS 118 PPO plan are significantly lower because the benefits are not as rich as the other plans.
- Q.** How can I plan ahead to have the money to cover the calendar year deductible for myself and my dependent(s)?
A. You can plan ahead by enrolling in a Medical Spending Account. You can put pre-tax dollars aside each pay period to cover un-reimbursed medical expenses (like deductibles and coinsurance payments). By putting approximately \$20 per pay in a Medical Spending Account, you will have \$500 available to cover medical expenses subject to the calendar year deductible. The full \$500 is available at the beginning of the plan year even though you may have had only one or two payroll deductions. Please refer to your Open Enrollment packet or visit the Insurance & Benefits website for more information on Medical Spending Accounts.

Benefit Reminder

January is a Good Time to Review Your Beneficiary Designations

January is a good time to review your financial records, including your beneficiary designations for both life insurance and the Florida Retirement System.

If you are a regular employee who works 30 or more hours a week, you have \$20,000 of term life insurance provided by the School District. You may also carry additional supplemental life insurance. At your date of hire, you were provided a life insurance beneficiary election form. Due to changes in life circumstances, however, you may wish to change your beneficiary or change the percent distribution among your existing beneficiaries. You can do this by calling Insurance & Benefits at 337-8321 and requesting a life insurance Beneficiary Change Form.

Forms for naming or changing beneficiaries for any FRS benefits that may be due if you die before your retirement, can be accessed at www.myflorida.com/frs under the Forms menu or by calling Personnel Services at 337-8147.



January's "Benefit Review": Benefit Bank

Below are questions employees frequently ask about the Benefit Bank. The answers to these questions should help you better understand the Benefit Bank and how it can affect your selection of, and payment for, health insurance and certain voluntary benefits.

Q. What is the Benefit Bank?

A. The Benefit Bank is an amount of money the School District contributes to each employee who is regularly scheduled to work 30 or more hours a week.

Q. How much is the School District's contribution to my Benefit Bank account?

A. The District's contribution to your Benefit Bank account is equal to 100% of the "employee" premium for the highest-cost health plan, the Blue Cross Blue Shield 927 plan. That amount will increase from \$361.80/month to \$432.90/month in March, 2005.

Q. Can Benefit Bank dollars pay for dependent health insurance coverage?

A. If you choose the BCBS 927 plan, the full Benefit Bank amount will be used to pay for your "employee" coverage and there will be no Benefit Bank dollars left to pay for dependent premiums. If you choose the BCBS 903 plan, you will have \$13.25 per paycheck (24-pay employees) and \$15.90 per paycheck (20-pay employees) of Benefit Bank dollars applied toward your dependent's health insurance. If you choose the BCBS 118 plan, you will have \$54.75 per paycheck (24-pay employees) and \$65.70 per paycheck (20-pay employees) of Benefit Bank dollars applied toward your dependent's health insurance. **Dependent premiums for the BCBS 903 and 118 plans listed on the 2005 Open Enrollment Authorization Form already reflect the Benefit Bank credit.**

Q. If I enroll in the BCBS 903 or 118 plans and I don't purchase health insurance for my dependents, can I use those Benefit Bank dollars for something else?

A. Yes, if you're enrolled in the BCBS 903 or 118 plans, and you do not purchase dependent health insurance, your discretionary Benefit Bank dollars will be applied toward dental, vision, or cancer insurance, in that order, until exhausted.

Q. If I have BCBS 903 or 118 single coverage and I don't purchase dental, vision, or cancer insurance, can I apply the Benefit Bank dollars toward my disability or life insurance or receive them in my paycheck?

A. No, discretionary Benefit Bank dollars may only be applied toward dependent health, dental, vision, or cancer insurance and may not be distributed as cash. Discretionary Benefit Bank dollars that are not applied to those benefits are forfeited.

Q. If I'm enrolled in single coverage under the BCBS 903 or 118 plans and I later add my dependent(s) to that plan, will the discretionary Benefit Bank dollars continue to be applied toward my current dental, vision, or cancer insurance?

A. No, once you add dependents to your BCBS 903 or 118 health plan, the discretionary Benefit Bank dollars will be applied to their health insurance premium (which are already reflected in the dependent premium amounts) and you will then be charged the full amount for your dental, vision, or cancer insurance. Benefit Bank dollars are applied, by bargaining agreements, in the following order: health insurance, dental insurance, vision insurance, cancer insurance.

"I find television very educating. Every time somebody turns on the set, I go into the other room and read a book." — Groucho Marx

Benefit Directory

Cancer Insurance:

Hartford Life/AIG
1-800-880-2776

Dental Insurance:

DeltaCare DHMO
1-800-422-4234
Delta Indemnity
1-800-521-2651

Disability Insurance:

UNUM
General Information
1-800-633-7479
Claims (local) 337-8155

Employee Assistance Program:

EAP Consultants
(local) 433-1211

Health Insurance:

Blue Cross Blue Shield
(claim information and
new ID cards)
1-800-945-3676
*On-site CSR (Insurance &
Benefits Management)*
(local) 335-1403

Insurance & Benefits

Management:

General Information
(local) 337-8321

Life Insurance:

Union Central
(local) 337-8638

Mail-Order Prescription Drugs:

Walgreens Healthcare Plus
Customer Service
1-888-257-6641
Hearing Impaired
1-800-925-0178
Spanish
1-800-758-0002

Vision Insurance:

VisionCare Plan
1-800-865-3676

Workers' Comp. (Johns Eastern):

(800) 749-3044

2005 Retirement Seminar

Valuable Information for Employees Contemplating Retirement

The 2005 annual Retirement Seminar, coordinated by the School District's Personnel Services Department, will be held on Thursday, January 20, 2005, from 4:30-7:30 P.M. in the Fort Myers High School cafeteria. The seminar is available to all School District employees and features representatives from the Florida Retirement System, BENCOR, and Social Security Administration. The seminar offers valuable retirement planning information and is a wonderful planning tool for any employee contemplating retirement in the upcoming 18 months.

Schedule of presentations:

4:15-4:30 Registration

4:30-4:45 Welcome & Overview

Georgianna McDaniel, Personnel Services
Dr. Arthur Smith, Lee County Retired Educators Association

4:45-6:00 Florida Retirement System

Doug Cherry, Florida Retirement System

6:00-6:15 Health & Life Insurance

Cecilia Rucker, Insurance & Benefits Management

6:15-6:45 BENCOR Special Pay Plan

William Shoap, Personnel Services

6:45-7:15 Social Security

James Jackson, Social Security Administration

7:15-7:30 Closing Remarks

Georgianna McDaniel, Personnel Services

2005 Open Enrollment Is Here!

(continued from cover)

- BCBS application form and instructions
- Minnesota Life brochure and enrollment forms
- Flexible Spending Account information
- Cancer insurance brochure and enrollment form
- Dental insurance brochure and enrollment form
- An individualized UNUM disability insurance application form
- 2005 Open Enrollment Payroll Authorization Form

Please take time to review the materials in your Open Enrollment. The Open Enrollment Directions will answer many of your questions. They are conveniently presented in bullet format, by benefit, so you only have to read those sections in which you are interested.

Final Open Enrollment Reminders

1. For most benefits, Open Enrollment is the **only** time you can add, drop, or change a benefit. Do not miss this important opportunity!
2. If you are currently enrolled in a Flex Spending Account and wish to participate in the new plan year, **you must re-enroll!**
3. If you are currently enrolled in the BCBS 927 or 903 PPO plans and wish to switch plans or enroll in the new BCBS 118 PPO plan, **you must complete the appropriate paperwork.**
4. Please watch the 2005 Open Enrollment video.
5. Please study the information in your personalized Open Enrollment packet.
6. Return all Open Enrollment paperwork as soon as possible. **All paperwork must be received in Insurance & Benefits Management no later than February 11, 2005!**