



FOOTHILL-DE ANZA
Community College District

Office of Human Resources and Equal Opportunity

2011 Open Enrollment Newsletter

March 31 – April 29, 2011

A Message from Christine Vo, Benefits Manager



Open Enrollment Summary for Plan Year 2011/2012

Open Enrollment is your annual opportunity to consider whether your health and welfare benefits meet your needs. It offers you an opportunity to review the benefit options offered by FHDA and **add** or **make changes** to your benefit package!

1) OPEN ENROLLMENT for Plan Year 2011/2012 is **March 31 to April 29.**

If you or your dependents are not currently enrolled for health benefits, now is your opportunity! During open enrollment, you may

- a. Participate in the FHDA benefit programs
- b. Drop/waive your participation in the FHDA benefit programs
- c. Switch between Medical plans
- d. Add/drop your dependents
- e. Participate in the Flexible Spending Accounts (FSA)
- f. Participate in the Voluntary Term Life and AD&D

Enrollment/changes will be effective **July 1, 2011 through June 31, 2012.** Open Enrollment is the only time to make changes unless you have a qualifying change in family status. The occurrence of a "qualifying event" (birth, marriage, adoption) will allow you to enroll dependents outside of Open Enrollment. See notice of special enrollment rights on the Annual Legal Notices page.

The District will be continuing with our current medical plan offerings through UnitedHealthcare (UHC) and Kaiser. You have a choice between three medical plans (three medical plan options in CA):

1. **Kaiser Foundation Health Plan** (HMO – *CA residents only*)
2. **UnitedHealthcare CHOICE Health Plan** (Exclusive Provider Organization - **EPO**)
3. **UnitedHealthcare CHOICE PLUS Health Plan** (Preferred Provider Organization – **PPO**)

To insure under the "**Exclusive Provider Organization (EPO) Medical Plan**", you **must** have access to contracted UnitedHealthcare providers and facilities **within a 30 miles** radius from your home residence. Otherwise, you must select the PPO Plan.

2) WHAT'S NEW?

A. Self-Funded Medical Plans and Kaiser HMO

For the Plan Year 2011/2012, the following changes to the benefit design to comply with health reform:

- The Patient Protection and Affordable Care Act of 2010 requires that group health plans cover dependents on a parents plan until the dependent's 26th birthday through the date the child attains age twenty-six (26) without regard to student, marital, dependency, residency, or employment status. A dependent child is defined as your child or your spouse or domestic partner's child (natural, adopted, foster, stepchild, or a child placed with you for adoption).
- Lifetime maximums have been removed
- Pre-existing condition limitations have been removed for members to age 19
- Preventive care is covered at 100% in-network on all plans.
- Flexible Health Care Flexible Spending Accounts. Except for insulin, over-the-counter (OTC) medications and other supplies are no longer reimbursed through a health care spending account. First aid supplies, allergy and cold medication, and contact lens cleaner unless you can show proof that it was prescribed by your health care provider. The maximum amount you can set aside in the FSA will stay the same (\$3,000), for PY 11/12. **Please note:** the maximum will be reduced to \$2,500 in 2013 as mandated by the health care reform law.

B. Other changes to the benefit program, effective 07/01/2011, include:

UnitedHealthcare CHOICE (EPO) and CHOICE PLUS (PPO) Health Plans

➤ **Autism Coverage**

The District is expanding coverage for autism under self-funded plans. The Plan offers diagnostic assessments and prescription medications, excluding applied behavioral analysis.

➤ **Hearing Aids Coverage**

Hearing Aids benefit allowance is increasing from \$1,000 to up to \$5,000 per calendar year. Subject to Annual Deductible and Coinsurance schedule is changing from 90% to 50%. Benefits are limited to a single purchase (including repair/replacement) every three years.

➤ **Therapeutic Treatments - Outpatient**

The Plan pays Benefits for therapeutic treatments received on an outpatient basis at a Hospital or Alternate Facility or in a Physician's office, including but not limited to dialysis (both hemodialysis and peritoneal dialysis), intravenous chemotherapy or other intravenous infusion therapy and radiation oncology. Benefits will be subject to annual deductible and coinsurance.

3) HOW TO CHOOSE THE RIGHT HEALTH PLAN?

Please access www.MyUHC.com website and carefully look at the list of available providers in your area to determine which option is the best choice for you and your family. Before choosing the UnitedHealthcare **CHOICE** Health Plan (**EPO**) or UnitedHealthcare

CHOICE PLUS Health Plan (**PPO**), please check UHC's website to be sure there are providers in your area that are part of those plans. You will receive greater savings and higher benefits when using an In-Network Provider.

The current **Kaiser's Live-Work Eligibility Rule** allows active employees who reside within the state of California and work in the Kaiser service area to enroll in the Kaiser Medical Plan regardless of their residence. Article 19 retirees and full-time retirees are not eligible.

4) MANDATORY Online Medical Benefit Election for all Employees: Open Enrollment starts March 31 and ends April 29, 2011.

ALL benefited employees are required to complete election online at www.iElect.com during open enrollment to either enroll/renew health insurance plans or make changes to benefits for Plan Year 11/12 (July-June). This year the process is **paperless** – any election to renew benefits or changes must be processed through iElect Online Benefits Enrollment System by **5pm, Friday, April 29, 2011**. *Your election will be effective from July 1, 2011 – June 30, 2012.*

To continue our **"green"** sustainability commitment to the District, again this year you will not receive paper enrollment materials. Instead, you will receive an email that will contain links to all of your open enrollment materials. All open enrollment materials may be found on FHDA's Human Resources website at: <http://hr.fhda.edu/benefits/>. I encourage you to use this time to thoroughly review all your benefits, and sign up for a health flexible spending account. A "FSA" can be great way to use pre-tax dollars to pay for anticipated medical costs.

Who Should Participate?

ALL Full-time and Reduced-Contract employees should participate by reviewing current benefit options and picking their own choice of health plan for PY 11/12.

You **must** complete the Open Enrollment Online Process if you are:

1. Maintaining the same benefits option as the previous year.
2. Adding or deleting a dependent (spouse, same-sex domestic partner or dependent children) on your insurance plan
3. Changing from the Select Benefits plan to another Benefits Plan (transferring from Kaiser HMO to Self-funded plans: (EPO/PPO) or vice versa)
4. Retiring under Article 19 or fully retired effective July 1, 2011
5. Enrolling or continuing participation in a FSA (health and dependent care)
6. Waiving health option due to other coverage (**evidence of other coverage is NOT required**)

Consequences If You Do Not Enroll - Your coverage will be defaulted to **"Waive of Health Plan"** option. This means that you and your dependent coverage will be defaulted to **"No Coverage"** for the following plans: **Medical, Prescriptions, Dental** and **Vision care effective July 1, 2011**. Similarly, if you elect to "Waive" benefits for PY 11/12 *due to other coverage (evidence of insurability is NOT required)*, your coverage provided by the district will cease as of June 30, 2011 for the same benefits. Special open enrollment (reinstatement) is permitted *only* if you incur an IRS life-qualifying event (i.e. marriage, divorce, death, newborn, change in dependent status or loss of other coverage). However, you may continue to be eligible to participate in flexible spending accounts (health care and/or dependent care) for Plan Year 2011-2012.

5) iElect ENROLLMENT ONLINE WORKSHOP:

For assistance regarding enrollment on-line, please refer to the benefits web site: <http://hr.fhda.edu/benefits/> for details of dates, times and locations for hands.

Failure to enroll during the open enrollment period by **April 29, 2011, 5pm** means coverage for both employee and the dependent ***will be cancelled*** effective June 30, 2011.

HOW TO ENROLL FOR BENEFITS: You may enroll online 24 hours a day, 7 days a week, by log on www.iElect.com between March 31 and April 29, 2011, 5pm (LOGIN and password are required).

Please be advised that your **Personal Identification Number (PIN)** will be sent to your mailing address under a separate cover by SECOVA, our online benefits carrier. Your **LOGIN** number is the **last 4 digits** of your **Social Security Number**, immediately followed by the **month, date, and birth year**. e.g. (**Last Four Digits of SSN#MMDDYYYY**).

6) EMPLOYEE CONTRIBUTIONS

The District will continue to fund the majority of the premium costs for all of our health plans; your contribution is a portion of the total cost.

For benefits plan year 2011/2012 (July-June), the employee contributions will be deducted from your pay on a **pre-tax** basis. The premium is based on 12 months of coverage. Premium for ten (10) and eleven- (11) month employees are collected in arrears at the earliest opportunity.

For example, if you are not in pay status for the months of July and August, the insurance premium will be collected with the September paycheck for two arrears payment (July & August) plus the current month (September) to bring the account up-to-date.

Monthly Employee Contributions over 12 months period: July 2011 - June 2012

PLAN OF COVERAGE	Employee Only	Employee + One DEP*	Employee + Two or More DEP*
KAISER	\$48.00	\$96.00	\$144.00
EPO	\$48.00	\$96.00	\$144.00
PPO	\$120.00	\$240.00	\$360.00

Note: Please be advised that the employee contribution rates include \$1/mo. for Vision and \$4/mo. for dental, and the remainder belong to the medical care.

*For domestic partners and their children that do not qualify as dependents under Section 152 of the Internal Revenue Code, premiums associated with domestic partner coverage will be paid by the employee with after-tax dollars and the fair market value of any Foothill-De Anza Community College District's contributions made on behalf of your domestic partner will be imputed as income to the employees.

IMPORTANT: In an event the required monthly contribution exceeds compensation in any regular pay period, the employee shall have the responsibility for paying the District directly for the uncovered amount no later than the last day of the month of coverage. Also, please be mindful that when you are out on any type of leaves such as approved unpaid leave with paid benefits, or FMLA, you are required to pay for your monthly contributions with a personal check and submit it to District accounting by the end of each insured month. For example, April contribution is due by April 30th.

Please review the Open Enrollment materials online at <http://hr.fhda.edu/benefits/>.

Highlights for 2011 include:

- Health Care Reform Changes (please refer to the attachment)
- Dependent Children Covered to Age 26
- Plan Summaries
- Your health plan cost starting July 1, 2011
- Three-Tier Prescription Drugs, Specialty Drugs and PDL
- Preventative Care Services
- Immunizations
- Flexible Spending Accounts (FSA)
- Annual Notices
- Online Open Enrollment
- Supplemental Life Insurance
- Dependent Eligibility Definition
- Same-sex Domestic Partner Calculations of Cost
- Dependent Eligibility Audit (DEA) Process
- FAQ's

7) NEW BENEFITS CONTACT

Effective immediately, you may send **ALL** benefit inquiries to: MyBenefits@fhda.edu, a Benefit Team Member will reply to you within 24 hours from the time we received it. Benefits Unit may also be contacted at **650-949-6224**.

8) WHAT IF I HAVE QUESTIONS?

- ❖ Questions on self-funded Medical Plans such as EPO/PPO/OOA, verification of contracted medical, providers, coordination of benefits, and etc.... please contact UnitedHealthcare Customer Care at toll-free **1-800-510-4846, Group #708611**.
- ❖ Questions regarding KAISER Medical Plan, please contact Kaiser Customer Service at toll-free **1-800-464-4000, Group # 857**.
- ❖ For information relating to Flexible Spending Accounts (Health Care and Dependent Care Accounts), please contact UnitedHealthcare Customer Care at toll-free **1-877-311-7849, Group #709593**.
- ❖ To find the complete information on FHDA group benefit programs for current plan year, Annual and Privacy Notices, Claims Forms, Request to Change Benefit Plan Form, etc. at our website, <http://hr.fhda.edu/benefits>.

IMPORTANT REMINDER

- A) Where an employee, or retiree, and his/her spouse/domestic partner, who is also an employee or retiree, each choose the same plan, the District may administratively join the two individuals (and any qualifying dependents) on one plan, with either the employee or retiree identified as a dependent of the other. The District shall have the right to determine the conditions for, and ways of, administratively joining the plans in accordance with legal statutes.
- B) Where a qualified child is enrolled in a District health benefits plan:
- (1) The child shall be covered as a dependent of only one employee or retiree; i.e., the employee or retiree and his/her spouse/domestic partner shall not both enroll the child as a dependent.



IMPORTANT DATES TO REMEMBER

Open Enrollment for Plan Year 2011/2012	March 31 – April 29, 2011
Workshop – Retirees Only	Friday, April 8, 1:00 pm - 2:15 pm (PST) De Anza College, Hinson Campus Center, Conference Rooms A & B
Benefits Workshop – Active Employees Only	Monday – Thursday April 11-14 Please access the benefits website: http://hr.fhda.edu/benefits for details and locations
iElect Enrollment On-Line Assistance Sessions	April 18-19 and April 27-28 at Foothill April 20-21 and April 25-26 at De Anza
DEADLINE: Online election must be completed	Friday, April 29, 2011 – no later than 5:00 pm

If you are unable to attend any of Benefits Workshop scheduled above, a PowerPoint Presentation of the Benefits Workshop will be available on the District benefits web page: <http://hr.fhda.edu/benefits> on Friday, April 15, 2011.

**THE DEADLINE FOR OPEN ENROLLMENT FOR PLAN YEAR 2011-2012 is
Friday, April 29, 2011 – 5:00 P.M.**

This memorandum does not provide all of the contractual provisions, limitations or exclusions included in our policies and should be considered only as a summary of our current benefits. A complete description of each benefit can be found in the Benefit Program Booklets provided by the insurance carriers. If any discrepancies exist between this summary and the contract, the contract shall prevail.