

Calvin Benefits Enrollment 2011-12

What do I need to know?

No change in coverage

- All services that were covered before are still covered and at the same rate
- No change in co-pays
- No change in prescription coverage

Impact of Health Care Reform

Rates for 2011-12

New on-line enrollment process

Update on the HMO/HRA

- ❑ 650 (95%) employees and their families are enrolled on this plan.
- ❑ The plan has a personal/family deductible of \$250/\$500 and then the college pays the next \$1750/\$3500 before Priority Health begins paying the costs.
- ❑ Due to a lower than expected utilization of deductible services the college payments have been less than anticipated.

HMO/HRA Rates for 2011-12

- The premium share will increase by 8% in July 2011.
- Personal deductibles (\$250/\$500) will be reset in July 2011.

HMO/HRA Employee Rates

	Total Cost	Calvin Cost	Employee Annual Cost	Monthly Cost
HMO/HRA Single	\$ 4,416.45	\$ 3,886.48	\$ 529.97	\$ 44.16
HMO/HRA Double	\$ 10,059.91	\$ 8,852.72	\$ 1,207.19	\$ 100.60
HMO/HRA Family	\$ 12,935.98	\$ 11,383.66	\$ 1,552.32	\$ 129.36

Update on the POS

- ❑ 37 (5%) employees and their families are enrolled on this plan.
- ❑ The plan has an in-network deductible of \$250/\$500 and an out-of-network deductible of \$500/\$1000.
- ❑ The plan has a maximum out of pocket for prescription costs of \$1000/\$2000.
- ❑ We are capping employee contribution for this plan at 30% to maintain “grandfathered” status.
- ❑ The college needs to find a new “second” plan in addition to HMO/HRA because rising costs of the POS plan make it unsustainable.

POS Employee Rates

	Total Cost	Calvin Cost	Employee Annual Cost	Monthly Cost
POS Single	\$ 5,670.18	\$ 3,969.13	\$ 1,701.05	\$ 141.75
POS Double	\$ 12,916.73	\$ 9,041.71	\$ 3,875.02	\$ 322.92
POS Family	\$ 16,746.18	\$ 11,722.33	\$ 5,023.85	\$ 418.65

Health Care Reform

- ❑ Adding dependents up to age 26
 - May be married
 - May be working
 - No longer need to be a student
 - Those with dependents who live out of the PH network should compare options carefully before enrolling
- ❑ Maintaining “grandfathered” status
 - This means that all aspects of the plan will be the same including co-pay amounts for routine services

Dental Renewal

- ❑ Based on quotes from Delta Dental there will be no change to coverage or to premium shares for 2011-12.
- ❑ Deductibles (\$25) and plan year maximums (\$1250 per person) will be reset in July 2011.



Dental Rates

	Total Cost	Calvin Cost	Employee Cost	Monthly Cost
Dental Single	\$ 467.76	\$ 411.63	\$ 56.13	\$ 4.68
Dental Double	\$ 844.80	\$ 743.42	\$ 101.38	\$ 8.45
Dental Family	\$ 1,584.24	\$ 1,394.13	\$ 190.11	\$ 15.84

Flexible Spending Enrollment

- ❑ The health flex spending maximum is \$5000 for 2011-12.
- ❑ The dependent care flex spending maximum will be \$5000 for 2011-12.
- ❑ You will continue to have an extra 2.5 months (through September 15) to incur expenses.
- ❑ You can login to retrieve information on your account at www.benefitspaymentssystem.com
- ❑ You need to elect your 2011-12 amounts during the benefits open enrollment process.
- ❑ No election = no flex spending account for 2011-12

What's Next?

- ❑ Our office will be sending each eligible employee an email on Friday with a link to the online process. You can also access it from the HR home page.
- ❑ You can elect your health and dental coverage, change your dependents and enroll in flexible spending for 2011-12.
- ❑ You can elect to receive more information about making contributions to a supplemental retirement plan or setting up a voluntary life insurance benefit.

Benefit Enrollment

INSTRUCTIONS

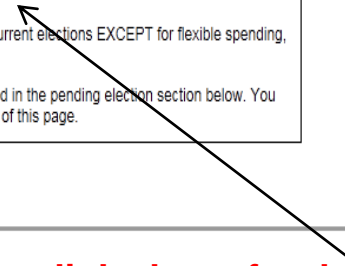
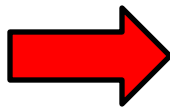
Your current benefits are listed below. You are now enrolling for the plan year that covers **July 2011 through June 2012**.

If this is your first time logging in, please indicate your financial head of household status and continue through enrollment. Make changes as necessary.

If you do not work through the enrollment screens, you will keep your current elections EXCEPT for flexible spending, which will be discontinued.

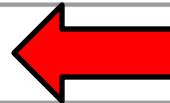
If you have already made elections during this enrollment, they are listed in the pending election section below. You can make changes by choosing the appropriate selection at the bottom of this page.

Each page has instructions



Check if financial head of household (see definition above)

Check if not financial head of household (see above)



Required. See link above for definition

Current Benefits	Coverage or Participation Levels	Dependents	Health Care Provider Information
Dental Coverage	Family Coverage	Happy Charming; Sleepy Charming; Snow White Charming	
Dependent Care Flexible Spending	\$208.33		
Health Care Flexible Spending Account	\$104.17		
Priority Health HMO Coverage	Family Coverage	Happy Charming; Sleepy Charming; Snow White Charming	

Action Steps

- Enroll or Change Benefits
- Manage Dependents/Beneficiaries
- Proceed to Enrollment Completion

You must choose one

Continue

Click continue to proceed

Enroll in or opt out of next year's health plan on this page

Benefit Selection

HEALTH PLAN ENROLLMENT

CURRENT HEALTH COVERAGE: Your current health plan election and covered dependents are listed below. To opt out or make any changes to your coverage, please see below.

Current Medical Coverage Benefits	Coverage or Participation Levels	Dependents	Health Care Provider Information
Priority Health HMO Coverage	Family Coverage	Happy Charming; Sleepy Charming; Snow White Charming	

Pending Elections for This Enrollment	Enrollment Action	Coverage or Participation Levels	Dependents	Health Care Provider Information
You currently have no pending elections for this benefit type.				

ENROLLING IN HEALTH COVERAGE: If you are currently enrolled in a health plan it is checked below. To change your election, please uncheck the current box and select the appropriate coverage level. You will have an opportunity to enroll or drop dependents after you select continue below.

Select	Medical Coverage Benefits	Coverage or Participation Levels	Rate Information
<input type="checkbox"/>	Priority Health HMO Coverage	Single Coverage	Rates
<input type="checkbox"/>	Priority Health HMO Coverage	Double Coverage	Rates
<input checked="" type="checkbox"/>	Priority Health HMO Coverage	Family Coverage	Rates
<input type="checkbox"/>	Priority Health POS Coverage	Single Coverage	Rates
<input type="checkbox"/>	Priority Health POS Coverage	Double Coverage	Rates
<input type="checkbox"/>	Priority Health POS Coverage	Family Coverage	Rates

Summary of health plan and rates available through links



OPTING OUT OF HEALTH COVERAGE: If you wish to opt out of health coverage, please select the box below. The next time to enroll in this benefit without a life event will be Open Enrollment 2012.

Opt out of Medical Coverage

Action Steps

- Save information and continue
- Do not save changes and continue

Continue

Enrollment Confirmation

Almost done! Prince Charming is enrolling for another year

INSTRUCTIONS

Your benefit elections for the 2011 enrollment period are listed below.

If you are interested in information on voluntary life insurance or if you want to make changes to your current policy, check the box below. Human Resources will follow-up with information and an application for voluntary life insurance via email.

Please confirm and check the appropriate box at the bottom of this page. If you are ready to submit these benefits, please select the **save choices and submit** and **electronic signature** box below.

Pending Elections for This Benefit Enrollment	Enrollment Action	Coverage or Participation Levels	Dependents	Health Care Provider Information	Beneficiaries
Priority Health HMO Coverage	Keep/Update	Family Coverage	Grumpy Charming; Happy Charming; Sleepy Charming; Snow White Charming	Grumpy Charming - Dr. Help	
Dental Coverage	Keep/Update	Family Coverage	Grumpy Charming; Happy Charming; Sleepy Charming; Snow White Charming		
Health Care Flexible Spending Account	Keep/Update	Annual: \$500.00; Pay Period: \$20.84			
Dependent Care Flexible Spending	Keep/Update	Annual: \$2,500.00; Pay Period: \$104.17			

Action Steps

<input type="radio"/>	Save Choices and Complete Later
<input type="radio"/>	Save and go back to make other selections or corrections
<input type="radio"/>	Manage Dependents/Beneficiaries
<input checked="" type="radio"/>	Save Choices and Submit


Coverage & deductions begin 7/1


Check that all dependents you want covered are listed

Supplemental Retirement: Please check to enroll/change:


Select if you are interested in receiving additional information

Voluntary Life Insurance: Please check to enroll/change:

By choosing the ready to sign button and selecting the electronic signature box below you are authorizing Calvin College to enroll you in the selected benefits. This signature also authorizes Calvin College to make the appropriate adjustments to your paycheck to pay the employee portion of these benefits costs.

Action Steps Electronic Signature for Final Enrollment

SUBMIT

Must hit submit to complete enrollment

Questions?

April 27, 2011

CALVIN