



Benefit Focus

Department of Administration, Office of Group Insurance

Boise, Idaho

May 2005

Disease Management Options Available

Medical Plans Continue, PPO Premiums Unchanged; Traditional Plan Premiums Increase Slightly

State of Idaho employees and their dependents will see the same basic medical plans for FY 2006. There will be no changes to the basic medical, dental, prescription or vision benefits.

Your wellness benefits have been improved and voluntary disease management programs will be available to you and your dependents with the start of the new plan year, **effective July 1, 2005**. (See details, page 3).

No Increase to PPO Premium

Premiums for employees enrolled in the PPO program (Preferred Provider Organization) will not change for 2006.

Premiums for the **Traditional Plan** medical coverage and dental coverage will increase slightly. (See rate chart, page 2).

Employees Help Control Costs

The fact that premium costs are minimal, deductibles are unchanged, and enhancements were added to the plan, reflect in part the good job employees are doing watching their health care utilization. By becoming better consumers of health care, fewer claims

are being filed. BlueCross of Idaho is also using enhanced claims management techniques to contain overall plan costs. Together, the result is stable monthly premiums benefiting employees and their families, and Idaho taxpayers.

May 25, 2005 Deadline For Any Changes to Plan

Any changes in your plan choice, premium withholding status, and new enrollment or re-enrollment in the FSA, must be received by the Office of Group Insurance **by end of the business day, May 25**.



The deadline applies to **both** online submission and receipt of hard copies of the Open Enrollment Choice Card, the premium withholding election form, and the FSA enrollment form.

If you do not receive your paycheck through the SCO, you must first return all forms to your HR/Payroll Office.

You can access online enrollment; or download needed forms from the State Employee Portal at:

www.employee.idaho.gov

Governor and Idaho Legislature Appropriate Additional Funds

The Governor and Legislature have appropriated an additional **\$632** per employee for FY 06, which adds up to an additional annual increase of **\$11.7 million** for the state's share of health insurance costs.

No Changes? Plan Coverage Automatically Continues ...

If you will **not** be making any changes to your coverage, there is **no action required on your part** during the Open Enrollment period, May 9-25. Your current selections will continue for FY 2006.

If you want to make changes in either your plan selection, PPO or Traditional, or to change your pre- or post-tax withholding election status; you can do so online via the State Employee Portal.

This is also the only time of the year you can enroll or continue participation by re-enrolling in the Flexible Spending Account (FSA) program. **At this time, you cannot enroll or re-enroll in the FSA online, and a separate enrollment form is required.** (See page 4).

Online Medical Plan Enrollment Available

If you submit your timesheets and/or access your pay stubs online, you can now make changes to your medical plan and pre- or post-tax premium withholding option electronically!

The Department of Administration has partnered with the State Controller's Office (SCO) to create an online enrollment application.

If you are not making any changes to your insurance coverage, i.e., switching plan designs, changing your pre- or post- tax premium withholding option, or enrolling or

re-enrolling in an FSA, no actions are required on your part.

At this time, only employees whose payroll goes through the SCO can enroll online. You access the online Medical Open Enrollment program using the **same sign-on and password** you use to submit timesheets or view pay stubs.

Once signed on, click on Employee Self Service. At the IPOPS site, put your cursor over the Self Service tab on the left of the screen and select 'Action'. You will now be at the Open Enrollment application site, which resides on a **secure server**. Click on 'next', and

the online form will appear, then follow the special instructions on the SCO website.

Note: The form is already populated with your employee information. Your marital status is a *required* field and since the SCO does not collect this kind of information, it is necessary for you to provide the requested data in order to successfully submit your application.

For those who cannot access the SCO payroll system, hard copies of the open enrollment choice card, the pre- or post-tax premium withholding form, and the FSA election form can be downloaded from the State Employee Portal:

www.employee.idaho.gov

Fiscal Year 2006 Monthly Premium Rates:

The fiscal year 2006 monthly contribution rates for Employee-paid Medical, Dental and Vision coverage under the two Plan Options — **Traditional** or Preferred Provider Organization Plan (**PPO**) — are listed below:

Note: PPO and Vision premiums are unchanged. Traditional Plan premiums reflect a slight increase in all categories. The Dental premiums also reflect a slight increase. New payroll deduction amounts will begin with the June 17, 2005 pay date for those on biweekly payroll.

Medical, Vision, Dental	Employee Only	Employee Plus Spouse	Employee Plus Child	Employee Plus Children	Employee Plus Spouse Plus Child	Employee Plus Spouse Plus Children
PPO Plan	\$23.00	\$59.00	\$38.00	\$53.00	\$72.00	\$80.00
Traditional Plan	\$29.50	\$72.50	\$48.00	\$65.00	\$88.00	\$98.00
Vision Plan (VSP)	\$0.00	\$2.00	\$3.00	\$3.00	\$4.00	\$6.00
Delta Dental	\$4.50	\$26.75	\$22.25	\$34.75	\$39.00	\$45.25



Benefit (No changes to Plans)	State Health Insurance Plans		
	Traditional	PPO In-Network	PPO Out-of Network
Deductible	\$350 Individual \$1,050 Family	\$250 Individual \$750 Family	\$500 Individual \$1,500 Family
Office Visit	Applied to Deductible	\$20 Co-pay (additional services subject to Deductible and Co-insurance)	Applied to Deductible
Co-insurance	80% / 20% of allowable charges	85% / 15% of allowable charges	70% / 30% of allowable charges
Out of Pocket Maximum	\$4,300 / Indiv. \$8,600 / Family Includes Deductible	\$3,250 / Individual \$6,750 / Family Includes Deductible	\$6,500 / Individual \$13,500 / Family Includes Deductible
Well Baby, Nursery Care	Subject to Deductible and Co-insurance	Subject to Deductible and Co-insurance	Subject to Deductible and Co-insurance
In Patient Hospital	Subject to Deductible and Co-insurance	Subject to Deductible and Co-insurance	Subject to Deductible and Co-insurance
Wellness	\$250 per person annual benefit for listed procedures, not subject to deductible. After \$250, expenses subject to deductible and Co-insurance.	\$20 Office Co-pay, then 100% for listed procedures. No annual limits. Unlisted procedures are subject to deductible and Co-insurance.	Not Covered, except for screening mammography services at 70% of allowable charges subject to deductible.

Supplemental Life Premium Adjusted

Premiums for the employee paid **Supplemental Life** plan are set at a level that is slightly exceeding the appropriate level to fund the plan. However, rather than reducing monthly premiums for FY2006 and the possibility of a rate increase next year, the Office of Group Insurance will be extending a **premium holiday** during the new plan year.

This will effectively return excess premium to those enrolled in the plan while maintaining rate stability from one year to the next. FY06 Supplemental Life premium rates for the plan are shown in the following chart below:

Supplemental Life Insurance Rates Unchanged

Supplemental Life Insurance premiums will not increase in FY 2006. They will remain as follows:

(Per \$1,000 Coverage)

Age	Mo. Prem.	Age	Mo. Prem.
35 and Under	\$0.08	56-60	\$0.73
36-40	\$0.11	61-65	\$0.99
41-45	\$0.16	66-70	\$1.52
46-50	\$0.26	71-75	\$2.17
51-55	\$0.41	76-80	\$3.27
		81-85	\$4.88

Prescription Drug Benefits— FY 06 (Traditional & PPO Plans — No Changes)

Network and Non-Network Dispensing	Network Pharmacy Co-payments	Non-Network Pharmacy Co-payments
30-day supply per co-payment Maintenance drugs — 2 co-payments per 90-day supply	Generic — \$12 Brand Name with no generic equivalent — \$18; Brand with generic equivalent — \$40 plus difference in cost between brand and generic.	\$25 co-payment plus 20% of balance.



FY 06 Medical Plan Enhancements, Disease Management Options Introduced



Two commonly ordered blood tests have been added to the Wellness Benefit for both the PPO Plan and the Traditional Plan.

Included are: the **Complete Blood Count (CBC)** and the **Blood Chemistry Panel (SMAC)** tests.

Significantly improved wellness benefits were included in both plans last year. Major changes included not limiting the wellness benefit to a 24 or 36 month time limit, and in most cases, increasing the dollar limit.

Disease Management Program Options Available For Congestive Heart Failure, and Diabetes

Effective July 1, 2005, two Disease Management program options will be available.

These programs serve to coordinate medical resources and information for both the plan member and the provider. This coordination can shift the care of chronic conditions from one of treatment, to that of prevention and early detection.



The new programs will focus on two chronic ailments: **Congestive Heart Failure** and **Diabetes**.

Both of these illnesses have a great impact on the lives of our employees and their dependents, as well as on overall plan costs. These programs are designed around proven information from medical studies to improve the quality of care and help manage or reduce health care costs. Additionally, they can reduce members' out of pocket expenses because they will not need costly treatment as often as they might otherwise require.

Participation is Voluntary

Participation in the disease management programs is **voluntary**. If you are interested, please contact **BlueCross of Idaho** at: **208-387-6924** or **1-800-627-6655 ext: 6924**.

Low risk participants may only receive the educational materials. **High-risk** participants will have frequent contact with a disease management nurse. Participants will be provided with results, or measurements of their progress or improvement, as a result of the plan.

Your Health Plan — 24/7

My Health Plan offers you quick and secure access to your individual health plan information via the BlueCross of Idaho's Web site at:

www.bcidaho.com

After completing a short registration process, you can access the secure Member section where you will find many self-service tools. Here are some of the services you'll find on *My Health Plan*:

- Review your benefits and eligibility
- Check your claims status online
- Track your deductible accumulation

Other features and services available on the BlueCross of Idaho Web site include:

- Personalized information
- No more waiting on hold
- Order additional ID cards
- Check provider's contracting status
- Available 24/7, Convenient, secure access

If you have questions about *My Health Plan* or Blue Cross of Idaho's Web site, or need more information, please call **Customer Services at 1-866-804-2253** or **208-331-8897**.

PERSI announces option for unused sick leave balances



PERSI is introducing a new option for using unused sick leave balances to **pay health care premiums** for retirees effective July 1, 2005.

Previously, premiums could only be paid from a single source. Now, sick leave credits can be used to pay partial health care premiums, which could extend your sick leave entitlement to or closer to age 65 when you become eligible for Medicare.

For example, if your total health care premium is \$350 per month, \$200 from your unused sick leave balance can be applied towards the premium, with the remaining \$150 deducted from your retirement benefit check.

PERSI will be sharing more details about this "split" option with members as they prepare to retire.

Pay Your Premiums With Pre-Tax Dollars

The Health Plans allow you to **save money** by paying your monthly premiums with "before tax" dollars, thereby reducing your taxable income at the state and federal level. Before Open Enrollment ends on May 25, 2005, you may change your premium election form from pre-tax to post-tax, or vice versa.

Open Enrollment is the Time to Enroll or Continue Participation in Flexible Spending Account Program

Open Enrollment is the **only** time of the year you may enroll in the Flexible Spending Account program (FSA). **Current participants must also re-enroll to continue an existing account before the open enrollment deadline, or their enrollment will end on June 30, 2005.**

Enrollment information along with Frequently Asked Questions are available on the Open Enrollment website via the State Employee Portal at:

www.employee.idaho.gov

If you choose to enroll, or to continue your participation, simply download an enrollment form from the Group Insurance website, complete, and return it to your HR/payroll office, and they will submit to Office of Group Insurance **no later than close of business on May 25, 2005.**

Flexible Spending Accounts allow you to pay for eligible health care and dependent daycare expenses on a tax-free basis.

There are two kinds of accounts for you to choose:

The **Dependent Care Account** allows you to set aside up to **\$4,992** per plan year to pay for eligible dependent daycare expenses.

The **Medical Reimbursement Account** allows you to set aside up to **\$3,000** per plan year to pay for eligible health care expenses such as:

- ◆ Deductibles, Coinsurance, Copays,
- ◆ Prescription Drugs,
- ◆ Over the Counter Medical Treatment Items, such as aspirin and allergy medications,
- ◆ Orthodontia and Hearing Aids

Remember to carefully calculate the amount you want set aside into your Medical Reimbursement and/or Dependent Care Accounts for the coming year. **Money left in either account after the plan year claim filing period ends is lost and cannot be carried over into the next year.**

Open Enrollment Resources, Contacts

Department of Administration

Office of Group Insurance: 1-800-531-0597

(Boise Area: 332-1860) ogi@adm.idaho.gov

[www2.idaho.gov/adm/insurance/
group_index.htm](http://www2.idaho.gov/adm/insurance/group_index.htm)

BlueCross of Idaho

1-866-804-2253 (Boise Area: 331-8897)

www.bcidaho.com



This publication presents general benefit information. In the event of any conflict between the information in this publication and the Plan provisions, the Plan documents and insurance contracts will govern.

RETURN SERVICE REQUESTED

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2006 Health Insurance
Open Enrollment May 9-25, 2005

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