



BENEFITS CONNECTION

2009-2010 PLAN YEAR INFORMATION



April 2009

WELCOME

TO WPI'S 2009 ANNUAL OPEN ENROLLMENT

April 7 – May 7, 2009

For the next four weeks, we will have open enrollment for participation in our group medical and dental plans. Those deciding to either join our plan or make changes to their current plan elections can do so during this period. Some changes might be:

- ▶ Enrolling in the health plan for the first time
- ▶ Adding or removing dependents
- ▶ Switching from a HMO to a PPO and vice versa
- ▶ Enrolling in a Flexible Spending Account

HEALTH AND BENEFITS FAIR

The annual Health and Benefits Fair is scheduled for **Tuesday, April 7, 2009** from **12:00P.M. to 4:00P.M.**, and will take place at the **Campus Center Odeum**. Representatives from our insurance vendors and Protector Group Insurance will be available to answer any questions you may have.

WELLNESS CORNER

Some of the wellness/fitness programs we offer include:

- ▶ Worcester Fitness -- \$150/year, reimbursable through BCBS
- ▶ Weight Watchers
- ▶ Ballroom Dancing
- ▶ Yoga
- ▶ Aerobics

We encourage you to join!

Health and Dental Plans

If you **do not** want to make any changes to your **current** health and/or dental coverage, you **will not** need to complete any paperwork and your current health and/or dental elections will remain intact.

If you **want** to make a change to your current health and/or dental coverage, you will need to complete a new enrollment form. All enrollment forms must be returned to the Office of Human Resources by **May 7** to ensure prompt delivery of ID cards.

All changes will take effect on **July 1, 2009**, and deductions will be reflected in the June payroll.

Flexible Spending Accounts

FSAs for medical and dependent care renew at this time as well. **If you wish to participate during FY2010, you must complete an enrollment form.** All enrollment forms must be returned to the Office of Human Resources by **May 7**.

- ▶ **New provider -- Ameriflex**
- ▶ Debit card available
- ▶ Daily check processing
- ▶ Direct Deposit optional

WHAT HAS CHANGED

Due to the continually escalating healthcare costs and utilization of healthcare, it is necessary for us to periodically review our employee benefit program. Our ongoing goal is to maintain an employee benefit plan that delivers high quality healthcare at a competitive price.

We are happy to announce that we have added benefits to the medical plans while keeping the rate increase minimal:

- ▶ You now have the option of choosing a **PPO plan**
- ▶ All wellness visits will have **no co-pay**
- ▶ Routine colonoscopies are now **covered 100%**

Please Note: A complete listing of ALL benefits offered by WPI is available on your *Employee Benefit Center*, 24 hours/day, 7 days/week:

www.protectorgroup.com/ebc.php
user name: wpi-ee
password: wpi-ee

The following is a summary of our medical and dental insurance, as well as the payroll deductions for each. More information will be provided and discussed at the Health and Benefits Fair on April 7.

MEDICAL INSURANCE – BLUE CROSS BLUE SHIELD

Description	HMO Blue NE \$1,000	HMO Blue NE Premier Value	Blue NE Value Plus	Blue Care Elect Enhanced Value PPO
Coinsurance (Out-of-Network)	N/A	N/A	N/A	20%
Office Copay	\$25	\$25	\$25	\$20
Wellness Copay	\$0	\$0	\$0	In Network: \$0 Out-of-Network: 20% co-insurance
Chiropractic Copay	\$25	\$25	\$25	\$20
Emergency Room Copay	\$100	\$100	\$100	\$75
Deductible-Individual	\$1,000	See Inpatient Copay	N/A	In Network: N/A Out-of-Network: \$500
Deductible-Family	\$2,000	See Inpatient Copay	N/A	In Network: N/A Out-of-Network: \$1,000
Hospitalization After Deductible	Covered in Full	Covered in Full	N/A	N/A
Inpatient Hospital Copay	\$0 After Deductible	\$1,000/\$2,500 Ded.	\$250	\$500
Outpatient Hospital Copay	\$0 After Deductible	\$250	\$250	\$250
MRI, CT, PET	\$0 After Deductible	\$150 per Category	Covered in Full	Covered in Full
Routine Colonoscopy	Covered in Full	Covered in Full	Covered in Full	Covered in Full
Out-of-Pocket Max-Ind.	\$5,000	\$1,000	\$1,000	In Network: N/A Out-of-Network: 1,000
Out-of-Pocket Max-Fam.	\$10,000	\$2,000	\$2,000	In Network: N/A Out-of-Network: \$2,000

Prescription Drugs				
Generic	\$15	\$15	\$15	\$15
Preferred	\$30	\$30	\$30	\$30
Non-Preferred	\$50	\$50	\$50	\$50
Retail (pharmacy)	\$15/\$30/\$50	\$15/\$30/\$50	\$15/\$30/\$50	\$15/\$30/\$50
Mail Order (90 day supply)	\$30/\$60/\$100	\$30/\$60/\$100	\$30/\$60/\$100	\$15/\$30/\$50

Pre-Tax Payroll Deductions	Monthly	Bi-Weekly	Monthly	Bi-Weekly	Monthly	Bi-Weekly	Monthly	Bi-Weekly
Individual	\$76.58	\$38.29	108.31	54.16	127.64	\$63.82	\$169.22	\$84.61
Family	\$202.95	\$101.48	\$287.03	\$143.52	\$338.22	\$169.11	\$448.45	\$224.23

DENTAL INSURANCE – BLUE CROSS BLUE SHIELD

The benefits of your dental plan are outlined below. More information, if necessary, will be available at the Health and Benefits Fair on April 7.

	Dental Blue 2 – High		Dental Blue PPO - Low	
	In Network	Out-of-Network	In Network	Out-of-Network
Calendar Year Max	\$1,000	\$1,000	Calendar Year Max	\$750
Preventive	100%	100%	Preventive	80%
Basic	80%	80%	Basic	64%
Major	50%	50%	Major	40%

Pre-Tax Payroll Deductions	Monthly	Bi-Weekly	Payroll Deductions	Monthly	Bi-Weekly
Individual	\$28.75	\$14.38	Individual	\$22.82	\$11.41
Family	\$98.06	\$49.03	Family	\$80.91	\$40.46

As your Human Resources Department, our goal is to continue to provide you with an excellent and competitive benefit program. We hope that you find this information useful and look forward to seeing you at the Health and Benefits Fair.

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