

## BENEFIT SUMMARY INFORMATION

Healthy  
Living  
Is  
Important

for you, your family, and campus

# 2010 Annual Benefits Open Enrollment



- **Enrollment Period** – October 21 to November 6, 2009 for your Medical, Dental, Vision, Life and Flexible Spending Account elections. Please note that changes to your retirement plan elections can be made any time during the year.
- **Enrollment Options** - Enroll online through InsideND under the My Resources tab or <http://openenroll.nd.edu>. Hourly staff employees may elect their benefits online or complete and return their paper Personal Benefits Enrollment Worksheet. This is the last year that hourly staff will receive printed copies of the guidebook and enrollment worksheet. Next year all employees will be required to enroll online.
- **Consequences If You Do Not Enroll** - You will not be eligible for flexible spending accounts (health care and/or dependent care) in 2010. You will have to keep the same plan coverage in place as you had for medical, dental, vision, and life insurance for 2009.
- **HealthQuotient Incentive** - Only a few days remain for you to qualify for the incentive. If you complete the on-line assessment during the open enrollment period, a \$10 per month credit towards your medical plan contribution will be provided (\$120 annually). If your spouse is covered on your University medical plan and completes the HealthQuotient, an additional \$5 per month credit toward your medical plan contribution will be provided (\$60 annually). Paper assessments must be postmarked by October 31, 2009.
- **Irish Health - Vendor Open House - Wednesday, October 21 & Thursday, October 22 at Rolfs Sports Recreation Center.** This is an opportunity to meet vendors for the 2010 plan year (retirement vendors will also participate). Health screenings for WebMD's HealthQuotient, giveaways, and prizes will be available. Call askHR at 631-5900 to schedule your screening.



UNIVERSITY OF NOTRE DAME  
Office of Human Resources

## **CHANGES FOR 2010**

### **MEDICAL PLANS**

#### **MERITAIN PPO, MERITAIN SELECT HMO, AND MERITAIN CHA HMO**

##### **Preventive Care**

Current plans cover one colonoscopy or sigmoidoscopy per year after the age of 50. This benefit will continue and will be enhanced to cover the procedure prior to age 50 if you or a close relative (parent, sibling or grandparent) have had colorectal polyps or colorectal cancer.

##### **Developmental Delays**

A Developmental Delay is defined as a significant variation in normal development in one or more of the following areas measured by appropriate diagnostic instruments and procedures and identified by the American Academy of Pediatrics as an appropriate developmental milestone based upon the age of the Covered Person: cognitive development; physical development; communication development; social-emotional development or adaptive development.

Coverage will include: Diagnostic testing, education and training of developmental delays. Treatment of developmental delays can include but is not limited to, speech therapy, occupational therapy, and physical therapy. Outpatient therapy benefits for developmental delays will be subject to the maximum benefits allowed for physical, speech and occupational therapy. This benefit will cover developmental delays when diagnosed by a physician and submitted with a treatment plan for covered dependents under the age of 5.

##### **Diabetes Education**

This benefit will be enhanced to cover up to three sessions per calendar year.

##### **Mental Health Parity and Addiction Equity Act of 2008**

This new law requires all medical plans not to impose any greater financial requirements or treatment limitations on mental health and/or substance abuse benefits than the predominant financial requirements or treatment limitations the Plan imposes on substantially all medical and surgical benefits provided under the Plan. The term "financial requirements" refers to co-payments, deductibles, co-insurance and out-of pocket expenses. The term "treatment limitations" include the number of visits, days of coverage, frequency of treatment or any other similar limits on the scope or duration of treatment.

Therefore, all mental health and/or substance abuse benefits under the Plans will be paid the same as any other illness or injury.

##### **Specialty Drugs & Medications**

The current prescription drug benefit structure has four tiers. They are generic, formulary, non-formulary, and specialty medications. Specialty medications are drugs that are used to treat complex conditions, such as cancer, growth hormone deficiency, hemophilia, hepatitis C, immune deficiency, multiple sclerosis, and rheumatoid arthritis. Whether they are administered by a healthcare professional, self-injected, or taken by mouth, specialty medications require an enhanced level of service.

Over the past several years, many specialty drugs have been introduced in the marketplace. Currently there are several hundred additional specialty drugs in the pipeline pending FDA approval for release in the next few years. Speciality drug spend is one of the fastest growing components of our pharmaceutical drug costs. We have been partnering with Accredo Health Group Inc., Medco's specialty pharmacy to provide services to our members, which provides benefit consistency and consistency in the application of clinical protocols.

---

## **CHANGES FOR 2010 SPECIALTY DRUGS AND MEDICATIONS (CONT.)**

Accredo, (Medco's specialty pharmacy), is dedicated to serving the needs of patients living with complex conditions that require specialty medications. If you are already using Accredo, you are aware firsthand of the excellent services which they provide. Accredo provides:

- Enhanced clinical training, privacy and support
- 24/7 access to specialized nurses and pharmacists
- Access to products and services
- Compliance monitoring and side-effect mentoring
- Refill reminders
- Benefit consistency
- Shipping convenience

If you are already using Accredo to obtain your specialty medications, there is no change in the process for you.

Effective January 1, 2010 specialty medications on the enclosed list\* will no longer be covered under your medical benefit. They will be covered only when ordered through Accredo, which is already part of your prescription drug benefit. Please note that this change does not affect medication supplied by an outpatient clinic or hospital. The plan will allow a "one-time" fill at the pharmacy for these specialty medications.

For current members obtaining specialty medications through their provider's office or other specialty vendor, Accredo will be reaching out to you and your physician to notify you of this change in process, and to coordinate prescription transfers as appropriate. You may continue to have your healthcare professional administer the prescription to you, but he/she will need to obtain the specialty drug through Accredo.

The copayment for specialty medications will remain \$70 at the retail pharmacy for a one month supply or \$150 through Accredo for a 3 month supply.

\*Please note the enclosed specialty drug list is subject to change as new drugs are approved.

### **Delta Dental Premier Plan**

Benefit coverage for composite white fillings will be added. Composite fillings are a current benefit under the enhanced Delta Preferred PPO plan.

### **Eye Med Vision Insurance**

The current plan benefit covers an annual eye exam every 12 months. The eye exam benefit will change to one exam every calendar year. Please note that other covered services will remain every 12 months for lenses and every 24 months for frames.

### **No Credit for Opting Out of Medical**

Current full-time faculty and staff who opt out of medical coverage and are covered under their spouse's plan through another employer currently receive a \$400 annual credit. This annual credit will discontinue as of January 1, 2010.

---

In 2009 our rates decreased in two of our three medical plans. As you may recall the decrease in rates was due to contract renegotiations with Medco and Meritain, lower medical utilization, and wellness initiatives. For 2010 the University's medical plan trend increase is 8%. The increase is lower than the national average medical trend which is 10%. As a result the monthly employee contribution rates are similar to the 2008 rates for two of our three medical plans. The CHA HMO plan continues to trend higher.

<b>Plan</b>	<b>2008 Employee Contribution</b>	<b>2009 Employee Contribution</b>	<b>2010 Employee Contribution</b>	<b>2008-2010 Contribution Change</b>
<b>Meritian Select HMO</b>				
Family	\$146.00	\$140.00	\$154.00	5%
Individual + one	\$132.00	\$120.00	\$132.00	0%
Individual	\$38.00	\$35.00	\$38.00	0%
<b>Meritain CHA HMO</b>				
Family	\$188.00	\$198.00	\$216.00	15%
Individual + one	\$171.00	\$180.00	\$197.00	15%
Individual	\$50.00	\$48.00	\$52.00	4%
<b>Meritain PPO</b>				
Family	\$227.00	\$217.00	\$227.00	0%
Individual + one	\$205.00	\$190.00	\$205.00	0%
Individual	\$64.00	\$54.00	\$64.00	0%

The next page illustrates faculty and staff members opportunity to lower their monthly rate by completing WebMD's HealthQuotient.

#### **SPECIAL ENROLLMENT NOTICE**

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if the employer stops contributing toward your or your dependents' other coverage). However, you must request enrollment within 30 days after your or your dependents' other coverage ends (or after the employer stops contributing toward the other coverage).

In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents. However, you must request enrollment within 30 days after the marriage, birth, adoption, or placement for adoption.

#### **HIPAA NOTICE OF AVAILABILITY**

The Privacy Rule under The Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires health plans to remind covered participants of the availability of the Privacy Notice and how they can obtain it.

The Notice of Privacy Practices for the University of Notre Dame's Flex Plan describes the uses and disclosures of your protected health information and your rights regarding them.

A copy of The Notice of Privacy Practices for the University of Notre Dame's Flex Plan can be obtained by:

- Visiting the Human Resources website at: <http://hr.nd.edu/benefits/privacypractices.shtml>
- Contacting the askHR customer service center at: 574-631-5900
- Email: [askhr@nd.edu](mailto:askhr@nd.edu)
- Visiting the Office of Human Resources, Grace Hall, Second Floor

#### **WOMEN'S HEALTH & CANCER RIGHTS ACT ENROLLMENT NOTICE**

If you have had or are going to have a mastectomy, you may be entitled to certain benefits under the Women's Health and Cancer Rights Act of 1998 (WHCRA). For individuals receiving mastectomy-related benefits, coverage will be provided in a manner determined in consultation with the attending physician and the patient for:

- All stages of reconstruction of the breast on which the mastectomy was performed;
- Surgery and reconstruction of the other breast to produce symmetrical appearance;
- Prosthesis;
- Treatment of physical complications of the mastectomy, including lymphedema

These benefits will be provided subject to the same deductibles and coinsurance applicable to other medical and surgical benefits provided under this plan.

## 2010 MONTHLY RATES FOR FULL-TIME FACULTY AND STAFF

<b>Medical</b>	<b>Individual Without HQ</b>	<b>Individual With HQ</b>	<b>Individual + 1 Without HQ</b>	<b>Individual + 1 With HQ</b>	<b>Individual + 1 Spouse/ Emp With HQ</b>	<b>Family Without HQ</b>	<b>Family With HQ</b>	<b>Family Spouse / Emp With HQ</b>
Meritain PPO	\$64.00	\$54.00	\$205.00	\$195.00	\$190.00	\$227.00	\$217.00	\$212.00
Meritain Select HMO	\$38.00	\$28.00	\$132.00	\$122.00	\$117.00	\$154.00	\$144.00	\$139.00
Meritain CHA HMO	\$52.00	\$42.00	\$197.00	\$187.00	\$182.00	\$216.00	\$206.00	\$201.00

**NOTE:** Rates include medical and prescription coverage

**HQ** = WebMD HealthQuotient

<b>Dental</b>	<b>Individual</b>	<b>Individual + 1</b>	<b>Family</b>
*Delta Premier (PPO) - 2010	\$16.36	\$29.18	\$53.46
*Delta Preferred (PPO POS) - 2010	\$21.08	\$39.50	\$71.50
*Delta Premier (PPO) - 2011	\$17.26	\$30.78	\$56.44
*Delta Preferred (PPO POS) - 2011	\$22.24	\$41.68	\$75.46

<b>Vision</b>	<b>Individual</b>	<b>Individual + 1</b>	<b>Family</b>
Eye Med	\$8.32	\$15.72	\$23.04

## 2010 MONTHLY RATES FOR PART-TIME FACULTY AND STAFF

<b>Plan</b>	<b>Individual</b>	<b>Individual + 1</b>	<b>Family</b>
<b>Medical</b>			
- Meritain PPO	\$497.00	\$993.00	\$1489.00
- Meritain Select HMO	\$425.00	\$850.00	\$1275.00
- Meritain CHA HMO	\$493.00	\$985.00	\$1478.00
NOTE: Rates include medical and prescription coverage			
<b>Dental</b>			
- Delta Premier (PPO) - 2010	\$29.22	\$52.08	\$95.48
- Delta Preferred (POS) - 2010	\$35.12	\$65.82	\$119.18
- Delta Premier (PPO) - 2011	\$30.84	\$54.98	\$100.78
- Delta Preferred (POS) - 2011	\$37.06	\$69.46	\$125.78
<b>Vision</b>			
EyeMed	\$8.32	\$15.72	\$23.04

Part-time employees who elect medical coverage through the University and complete WebMD's HealthQuotient are eligible for the \$10 per month premium reduction.