



2010 Highmark Open Enrollment Webinar

October 5, 2009



Agenda

- What's New/Changes
- Affinity Access Online Enrollment Tool
 - Compare Plan Options and Rates
 - Download Forms
 - Submit Open Enrollment Changes
- Instructions for Paper Enrollment Changes
- Frequently Asked Questions

What's New or Changed in 2010

- New plan options now available

- 4 new PPO plans and 2 new Rx plans

- PPO 90/70
 - PPO 80/60
 - PPO 1500 80/60
 - PPO 2000 80/60
 - Incentive Rx \$8/\$50/\$75
 - Incentive Rx \$8/50%/70%

- Two RX plans no longer offered for new business*:

- Incentive Rx 10/20/40
 - Incentive Rx 15/25/40

* *Groups who currently have one of these Rx plans can keep them as long as they don't make any plan changes*

PPOBlue Plans	Deductible		Coinsurance		Out-of-Pocket Max (Does not count deductibles or copays)		Lifetime Maximum		E-Room Copay		Office Visit Copay		Prescription Drug Options (Retail 31-day Supply; Mail 90-day supply)	
	IN/OON (2x family)	IN/OON	IN/OON (2x family)	IN/OON	IN/OON	Network PCP/Spec	Incentive Rx \$8/\$35/\$50 Retail Mail		Incentive Rx \$8/\$50/\$75 Retail Mail		Incentive Rx \$8/50%/70% Retail ⁺ Mail ⁺			
PPO High	\$0/\$250	100%/80%	\$0/\$1,500	Un/\$1M	\$50	\$10/\$10	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
PPO Standard	\$0/\$500	100%/80%	\$0/\$2,500	Un/\$1M	\$50	\$15/\$15	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
PPO Basic	\$250/\$500	100%/80%	\$0/\$5,000	\$5 M	\$75	\$20/\$20	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
PPO Basic 90/70	\$250/\$500	90%/70%	\$1,000/\$2,500	\$5 M	\$75	\$20/\$20	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
PPO Basic 80/60	\$250/\$500	80%/60%	\$1,000/\$2,500	\$5 M	\$75	\$20/\$20	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
PPO Value 500	\$500/\$1,000	100%/80%	\$0/\$2,500	\$5 M	\$100	\$20/\$30	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
PPO Value 500 90/70	\$500/\$1,000	90%/70%	\$1,000/\$4,000	\$5 M	\$100	\$25/\$35	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
PPO Value 500 80/60	\$500/\$1,000	80%/60%	\$2,500/\$5,000	\$5 M	\$100	\$25/\$35	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
Coinsurance Plans[#]														
NEW PPO 90/70	\$0/\$500	90%/70%	\$500/\$1,500	\$5 M	90%	90%	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
NEW PPO 80/60	\$0/\$750	80%/60%	\$2,500/\$5,000	\$5 M	80%	80%	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
NEW PPO 1500 80/60	\$1,500/\$3,000	80%/60%	\$2,500/\$5,000	\$5 M	80%	80%	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
NEW PPO 2000 80/60	\$2,000/\$4,000	80%/60%	\$2,500/\$5,000	\$5 M	80%	80%	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
Non-Qualified HDHP Plans														
PPO Value 1000	\$1,000/\$2,000	100%/80%	\$0/\$2,000	\$5 M	\$100	\$20/\$30	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
PPO Value 1000 80/60	\$1,000/\$2,000	80%/60%	\$1,500/\$3,000	\$5 M	\$100	\$25/\$35	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
PPO Value 1500	\$1,500/\$3,000	100%/80%	\$0/\$2,000	\$5 M	\$100	\$20/\$35	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
PPO Value 2000	\$2,000/\$4,000	100%/80%	\$0/\$2,000	\$5 M	\$100	\$20/\$35	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
PPO Value 3000	\$3,000/\$6,000	100%/80%	\$0/\$2,000	\$5 M	\$100	\$20/\$35	\$8/\$35/\$50	\$20/\$90/\$125	\$8/\$50/\$75	\$20/\$125/\$190	\$8/50%/70%	\$16/50%/70%		
Qualified HDHP Copayment Plans[*] (federally qualified HDHPs can coexist with a Health Savings Account)														
PPO 1250 QHDHP Copay	\$1,250	100%/80%	\$3,750/\$7,500	\$5 M	\$100	\$20/\$35	\$8/\$35/\$50	\$20/\$90/\$125						
PPO 1500 QHDHP Copay	\$1,500	100%/80%	\$3,500/\$7,000	\$5 M	\$100	\$20/\$35	\$8/\$35/\$50	\$20/\$90/\$125						
PPO 2600 QHDHP Copay	\$2,600	100%/80%	\$2,400/\$4,800	\$5 M	\$100	\$20/\$35	\$8/\$35/\$50	\$20/\$90/\$125						
PPO 3500 QHDHP Copay	\$3,500	100%/80%	\$1,500/\$3,000	\$5 M	\$100	\$15/\$25	\$8/\$35/\$50	\$20/\$90/\$125						
Qualified HDHP Plans (federally qualified HDHPs can coexisting with a Health Savings Account)														
PPO 1500 QHDHP 100/80	\$1,500	100%/80%	\$0/\$1,500	\$5 M	100%	100%	100%							
PPO 2600 QHDHP 100/80	\$2,600	100%/80%	\$0/\$1,500	\$5 M	100%	100%	100%							
PPO 2600 QHDHP 90/70	\$2,600	90%/70%	\$1,000/\$2,000	\$5 M	90%	90%	90%							
PPO 3500 QHDHP 90/70	\$3,500	90%/70%	\$1,000/\$2,000	\$5 M	90%	70%	90%							
Traditional w/Standard MM	\$250 MM	100/80 MM	\$500	Un/\$1M MM	100%	80%	\$10/\$20	\$20/\$40						
Signature 65 w/discount Rx	\$0	100%	N/A	Un	100%	100%	BlueRx Option 4							



Renewal only
Renewal only

[#] Network preventive care is reimbursed at 100%; network preventive care, office visits, and outpatient therapies are not subject to deductible.

^{*} Medical and prescription drug copayments apply after the deductible

⁺ Percentage reflects plan payment. The maximum member payment is \$250 per retail prescription and \$500 per mail prescription.

Retail Prescription Drug Example Cholesterol Lowering Medication

Prescription Drug Plan	\$8/\$35/\$50	\$10/\$20/\$40 (Grandfathered Plan -Closed to New Business*)	\$15/\$25/\$40 (Grandfathered Plan -Closed to New Business*)	Traditional RX \$10/\$20 (Grandfathered Plan -Closed to New Business*)	\$8/\$50/\$75 (New Plan Available 1/2010)	\$8/50%/70% (New Plan Available 1/2010)
Drug Name	Member Cost	Member Cost	Member Cost	Member Cost	Member Cost	Member Cost
Generic: <u>Simvastatin</u> Generic Equivalent of Zocor	\$8	\$10	\$15	\$10	\$8	\$8
Preferred Brand: <u>Lipitor</u> Highmark Discounted Retail Price of \$70*	\$35	\$20	\$25	\$20	\$50	\$35
Brand Non-Preferred: <u>Vytorin</u> Highmark Discounted Retail Price of \$100*	\$50	\$40	\$40	\$20	\$75	\$70
<p><i>Please note that the Retail Pharmacy Prices are for the purpose of this example and do vary by pharmacy</i></p> <p><i>*If you are currently enrolled in one of the Grandfathered Prescription Drug plans you may continue to offer that plan but you may not move to one of the other Grandfathered plans</i></p>						

What's New or Changed in 2010

- **Dependent Coverage to Age 30:** Senate Bill 189 Extends medical coverage to adult children up to age 30 at the insured employee's expense provided the child meets all of the following requirements:
 - Is not married
 - Has no dependents
 - Is a resident in the Commonwealth of Pennsylvania or is enrolled as a full-time student at an institute of higher education
 - Is not provided coverage as a named subscriber, insured, enrollee or covered person under any other group or individual health insurance policy or enrolled in or entitled to benefits under any government health care benefits program, including benefits under Title XVIII of the Social Security Act.

What's New or Changed in 2010

- **The Mental Health Parity and Addiction Equity Act of 2008 (MHP):**
 - All medical plans have been updated to comply with the requirements of this act
 - Prohibits a group health plan from applying financial requirements, treatment limitations or network limitations to mental health and substance abuse benefits that are more restrictive than the “predominant” requirements or limitations applied to “substantially all” medical/surgical benefits.

What's New or Changed in 2010

- **Vision Insurance**
 - Rate change effective 1/1/2010
 - Rates are guaranteed for 2 Years
- **Direct Pay Option**
 - Have your monthly payment automatically deducted from your checking or savings account. Call 610-833-1800 to learn more or sign up
- **Free Health Reimbursement Account (HRA) Administration**
 - For qualifying plans

Strategy for Savings: Health Reimbursement Account (HRA)

HRA Highlights

- Higher deductible plan coupled with HRA offers lower premiums without reducing benefits
- Seamless HRA administration means no paperwork for you or your employees
- Highmark BlueShield administers the HRA for Association members at no cost!

HRA Case Study

Renewal Breakdown				
Contract Type	Count	Current	Renewal	Alternative
Single	5	\$444.75	\$501.12	\$395.86
Parent/Child	1	\$933.98	\$1,052.35	\$831.31
Parent/Children	0	\$933.98	\$1,052.35	\$831.31
Two Person	1	\$1,000.69	\$1,127.52	\$890.69
Family	3	\$1,289.78	\$1,453.25	\$1,147.99
	Change	n/a	12.67%	-10.99%

HRA Comparison Current Plan v. New Plan with Reimbursement Arrangement	PPOBlue Standard (Current)	PPOBlue Value 1000 (Alternative)	
Employee Deductible Responsibility	\$0/\$0	\$0/\$0	
Employer Responsibility	\$0/\$0	\$1,000/\$2,000	
Employer Risk By Plan			
100%	\$0.00	\$15,000.00	
75%	\$0.00	\$11,250.00	
50%	\$0.00	\$7,500.00	
35%	\$0.00	\$5,250.00	
20%	\$0.00	\$3,000.00	
Plan Premium	\$96,333.12	\$85,743.24	
Premium + Risk (amount reimbursed to employees for deductible expenses)			% Over Current
100%	\$96,333.12	\$100,743.24	4.58%
75%	\$96,333.12	\$96,993.24	0.69%
50%	\$96,333.12	\$93,243.24	-3.21%
35%	\$96,333.12	\$90,993.24	-5.54%
20%	\$96,333.12	\$88,743.24	-7.88%

Please note Self Employed individuals (sole proprietors, partners, and more-than-2% shareholders of a subchapter S corporation) cannot receive tax-free contributions into an HRA. Please consult your tax professional concerning your specific situation.

How to Register for Affinity Access

1. Log on to: www.usiaffinity.com/affinityaccess

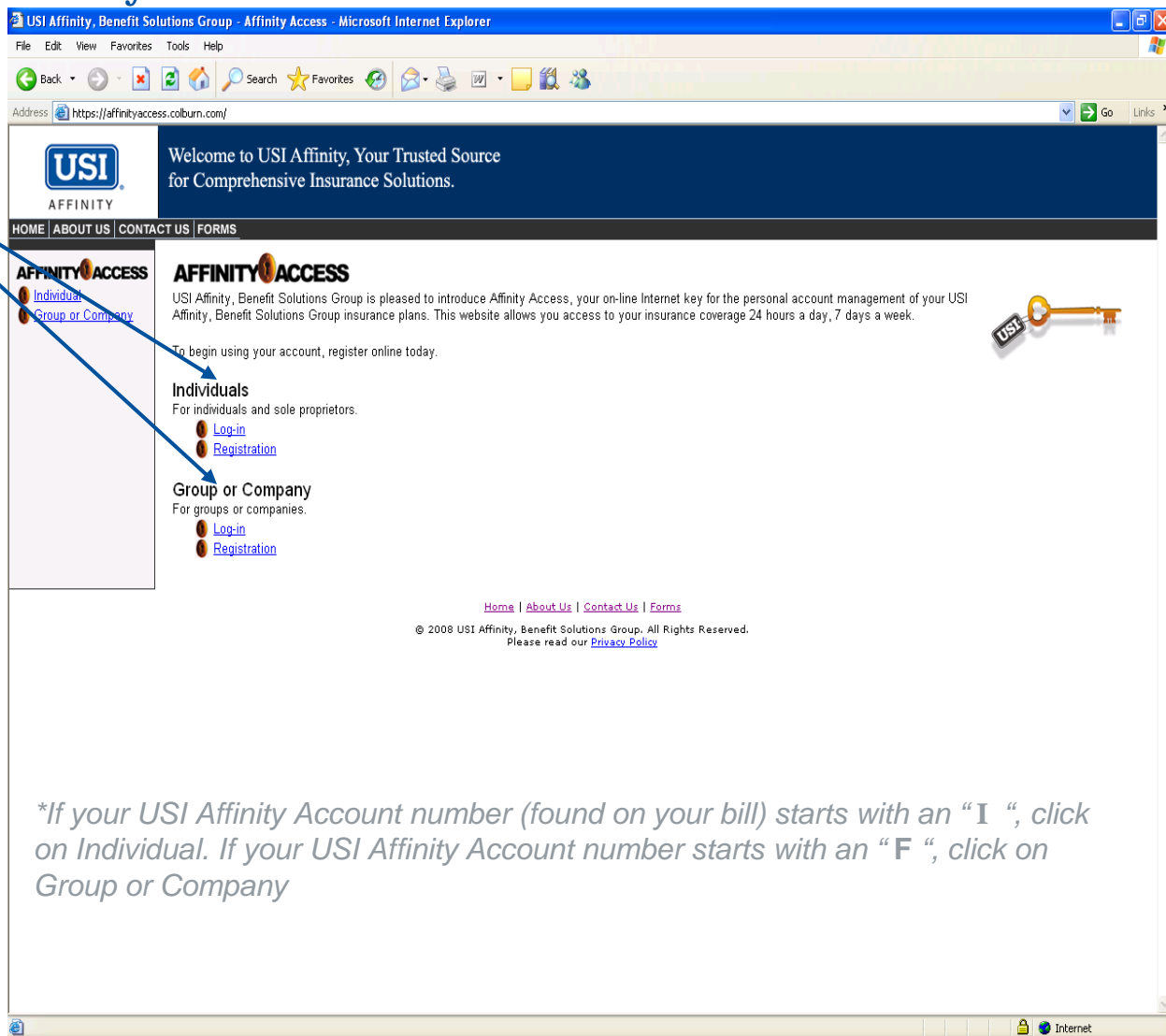
2. Click the Registration Link under Individual or Group or Company*

3. Enter your USI Affinity Account number (omitting any alpha characters) and your registration number:

- If you're an **Individual**, your registration number is your social security number

- If you're a **Group or Company**, please refer to the registration letter mailed to you on 9/15/09 or contact us for your registration number

4. You will then be prompted to choose a username and password and provide your Name and E-mail Address.



**If your USI Affinity Account number (found on your bill) starts with an "I", click on Individual. If your USI Affinity Account number starts with an "F", click on Group or Company*

Using Affinity Access

USI Affinity, Benefit Solutions Group - Affinity Access - Policy List - Microsoft Internet Explorer

Address: http://affinityaccess/aa-groups/policy_list.aspx

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- [Logout](#)

Open Enrollment 2010
It's time to consider your 2010 health insurance renewal. You can select plans, compare rates and features, download forms, fill out your census form and submit both your selected plans and census form to USI Affinity by visiting the [Open Enrollment](#) section of Affinity Access.

Manage Your Benefits
Now you can do adds, changes, removals and more right here. [Manage Your Benefits](#)

Policy List * Active Only | [Inactive Only](#)
Endorsed By: Pennsylvania Veterinary Medical Society

Type of Policy	Carrier	Plan Description	Prefix / Policy / Group Number
Dental Insurance	United Concordia Companies, Inc.	UCCI COMPREHENSIVE DENTAL - DEP AGE 25	834307000
Medical Insurance	Highmark, Inc.	PVMA PPO	2519669
Vision	Davis Vision	VISION ONLY	25050001

* The Policy List does not include information for insurance policies that are paid directly to a carrier.

Access 2010 Open Enrollment Information

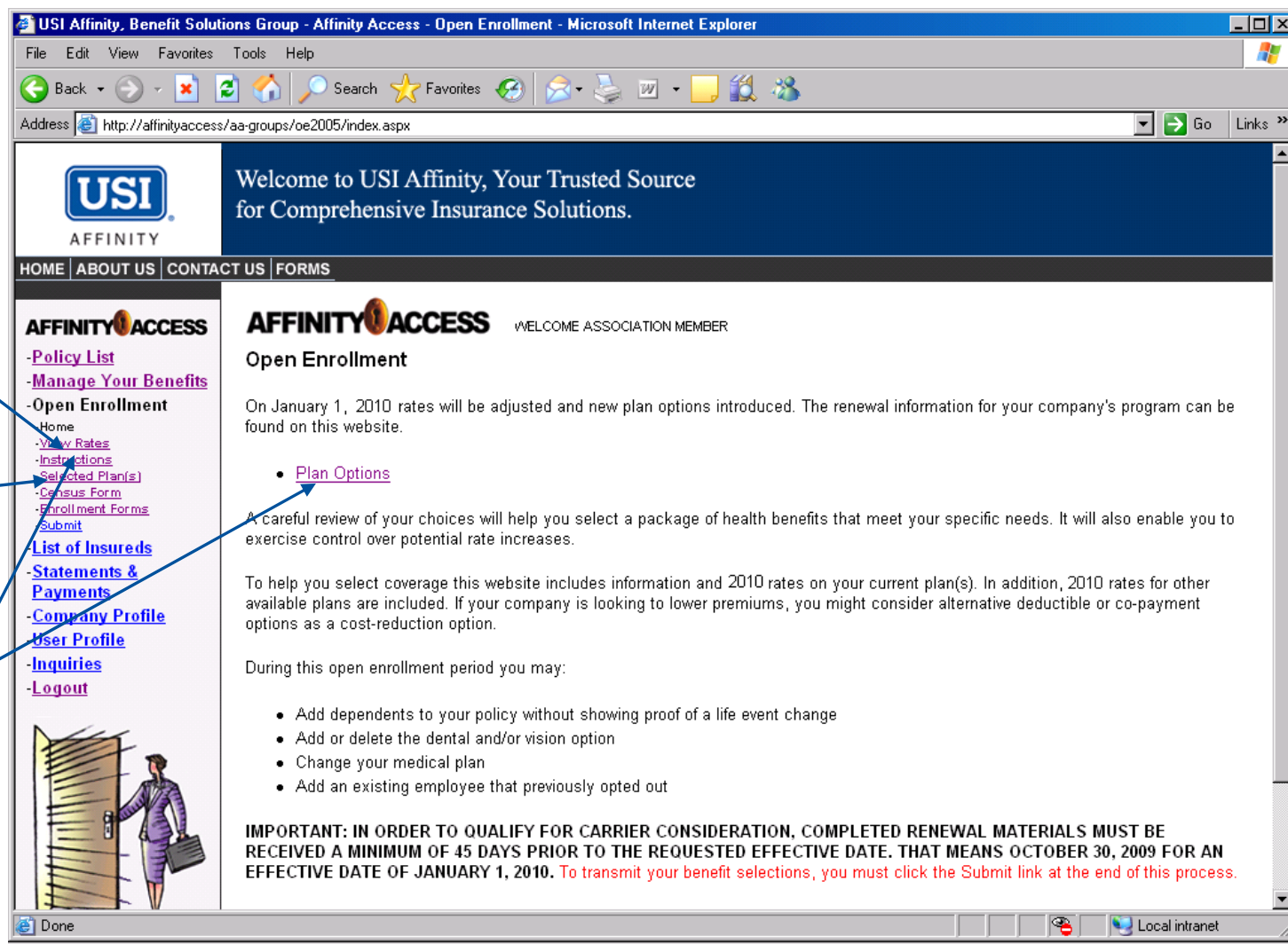
Manage your benefit program year round

List of current benefit options

Instructions for submitting changes online

View and compare rates and plan overview for current and alternative options

Access rate and benefit information for all 2010 Medical, Dental and Vision Options



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Open Enrollment

On January 1, 2010 rates will be adjusted and new plan options introduced. The renewal information for your company's program can be found on this website.

- [Plan Options](#)

A careful review of your choices will help you select a package of health benefits that meet your specific needs. It will also enable you to exercise control over potential rate increases.

To help you select coverage this website includes information and 2010 rates on your current plan(s). In addition, 2010 rates for other available plans are included. If your company is looking to lower premiums, you might consider alternative deductible or co-payment options as a cost-reduction option.

During this open enrollment period you may:

- Add dependents to your policy without showing proof of a life event change
- Add or delete the dental and/or vision option
- Change your medical plan
- Add an existing employee that previously opted out

IMPORTANT: IN ORDER TO QUALIFY FOR CARRIER CONSIDERATION, COMPLETED RENEWAL MATERIALS MUST BE RECEIVED A MINIMUM OF 45 DAYS PRIOR TO THE REQUESTED EFFECTIVE DATE. THAT MEANS OCTOBER 30, 2009 FOR AN EFFECTIVE DATE OF JANUARY 1, 2010. To transmit your benefit selections, you must click the Submit link at the end of this process.

Navigation menu (left):

- Policy List
- Manage Your Benefits
- Open Enrollment
 - Home
 - View Rates
 - Instructions
 - Selected Plan(s)
 - Census Form
 - Enrollment Forms
 - Submit
- List of Insureds
- Statements & Payments
- Company Profile
- User Profile
- Inquiries
- Logout

View and Print rates for all available 2010 Medical Options

USI Affinity, Benefit Solutions Group - Affinity Access - Open Enrollment - Microsoft Internet Explorer

Address: http://affinityaccess/aa-groups/oe2005/print_rates_med.aspx

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To transmit your benefit selections, you must click the Submit link at the end of this process.
 ⚠ At this time, your selections have not been submitted.

2010 Medical/Rx Rates << Go Back

Plan Name	Monthly Rates ¹				
	Single	Member & Child	Member & Children	Husband & Wife	Family
Traditional					
PVMA Traditional w/ Standard MM w/ 10/20 Rx	\$412.96	\$867.22	\$867.22	\$929.16	\$1,197.59
Highmark PPO					
PVMA PPO Standard w/ 10/20/40 Incentive Rx	\$391.75	\$822.68	\$822.68	\$881.44	\$1,136.07
PVMA PPO Standard w/ 15/25/40 Incentive Rx	\$388.72	\$816.32	\$816.32	\$874.62	\$1,127.29
PVMA PPO Basic 90/70 w/ 15/25/40 Incentive Rx	\$343.43	\$721.21	\$721.21	\$772.72	\$995.95
PVMA PPO Basic 100/80 w/ 15/25/40 Incentive Rx	\$356.48	\$748.61	\$748.61	\$802.08	\$1,033.80
PVMA PPO Value 500 100/80 w/ 8/35/50 Incentive Rx	\$325.00	\$682.50	\$682.50	\$731.26	\$942.50
PVMA PPO Value 90/70 w/ 8/35/50 Incentive Rx	\$310.85	\$652.79	\$652.79	\$699.42	\$901.46
PVMA PPO Value 1000 80/60 w/ 8/35/50 Incentive Rx	\$284.82	\$598.12	\$598.12	\$640.85	\$825.98
PVMA PPO Value 1000 100/80 w/ 8/35/50 Incentive Rx	\$306.91	\$644.51	\$644.51	\$690.55	\$890.04

USI Affinity, Benefit Solutions Group - Affinity Access - Open Enrollment - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address: http://affinityaccess/aa-groups/oe2005/selected_plans.aspx

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To transmit your benefit selections, you must click the Submit link at the end of this process.
 ⚠ At this time, your selections have not been submitted.

Selected Plan(s) [Restore Current 2008 Plans](#) | [View Selected Plan\(s\) with Rates](#)

When you are finished selecting plan(s), you can then complete your [Census Form](#).

Medical / Rx

1. [PYMA PPO Basic 100/80 w/ 15/25/40 Incentive Rx](#) [\(Remove\)](#)

Dental

1. [UCCI Comprehensive Dental to Age 25 \(Central Area\)](#) [\(Remove\)](#)

Vision

1. [Davis Vision](#) [\(Remove\)](#)

Download a list of your current plan participants

Select and Compare your current plan(s) rates and benefits with alternate options

Print Open Enrollment Forms

Compare rates and features of up to 5 different plans

Select your options for 2010

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To transmit your benefit selections, you must click the Submit link at the end of this process.
 ⚠ At this time, your selections have not been submitted.

Medical / Rx Plan Selections [Guidelines](#) | [Return To Selected Plan\(s\)](#)

- View Medical/Rx Rate Sheet

Check the compare boxes for up to five plans, then click the "Compare Rates & Features" button.

<input checked="" type="checkbox"/>	Plan Name	Monthly Rate (Single)	
Traditional			
<input type="checkbox"/>	PVMA Traditional w/ Standard MM w/ 10/20 Rx	\$412.96	<input type="button" value="Select"/>
Highmark PPO			
<input checked="" type="checkbox"/>	PVMA PPO Standard w/ 10/20/40 Incentive Rx	\$391.75	<input type="button" value="Select"/>
<input type="checkbox"/>	PVMA PPO Standard w/ 15/25/40 Incentive Rx	\$388.72	<input type="button" value="Select"/>
<input type="checkbox"/>	PVMA PPO Basic 90/70 w/ 15/25/40 Incentive Rx	\$343.43	<input type="button" value="Select"/>
<input checked="" type="checkbox"/>	PVMA PPO Basic 100/80 w/ 15/25/40 Incentive Rx	\$356.48	<input type="button" value="Select"/>
<input type="checkbox"/>	PVMA PPO Value 500 100/80 w/ 8/35/50 Incentive Rx	\$325.00	<input type="button" value="Select"/>
<input type="checkbox"/>	PVMA PPO Value 90/70 w/ 8/35/50 Incentive Rx	\$310.85	<input type="button" value="Select"/>
<input type="checkbox"/>	PVMA PPO Value 1000 80/60 w/ 8/35/50 Incentive Rx	\$284.82	<input type="button" value="Select"/>
<input checked="" type="checkbox"/>	PVMA PPO Value 1000 100/80 w/ 8/35/50 Incentive Rx	\$306.91	<input type="button" value="Select"/>

Selected Plan(s)

Medical / Rx
 1. PVMA PPO Basic 100/80 w/ 15/25/40 Incentive Rx

Dental
 1. UCCI Comprehensive Dental to Age 25 (Central Area)

Vision
 1. Davis Vision

Click on plan name for printable benefit grid for each plan

Compare Plan Rates and Features

USI Affinity, Benefit Solutions Group - Affinity Access - Open Enrollment - Microsoft Internet Explorer

Address: http://affinityaccess/aa-groups/oe2005/med_rx_choices.aspx

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 ⚠ At this time, your selections have not been submitted.

Compare Medical Plans [Return To Medical / Rx Plan Selections](#)

	PVMA PPO Standard w/ 10/20/40 Incentive Rx	PVMA PPO Basic 100/80 w/ 15/25/40 Incentive Rx	PVMA PPO Value 1000 100/80 w/ 8/35/50 Incentive Rx	PVMA PPO High w/10/20/40
Monthly Medical Rates				
Single	\$391.75	\$356.48	\$306.91	\$401.25
Member & Child	\$822.68	\$748.61	\$644.51	\$842.63
Member & Children	\$822.68	\$748.61	\$644.51	\$842.63
Husband & Wife	\$881.44	\$802.08	\$690.55	\$902.82
Family	\$1,136.07	\$1,033.80	\$890.04	\$1,163.62
Features¹				
Office Visit	In-Network - \$15 copay Out-of-Network - 80% after deductible	Network \$20 copayment Out-of-Network 80% after deductible	In-Network - \$20 copay after deductible Out-of-Network - 80% after deductible	In-Network - \$10 copay Out-of-Network - 80% after deductible
Specialist Office Visit	In-Network - \$15 copay Out-of-Network - 80% after deductible	Network \$20 copayment Out-of-Network 80% after deductible	In-network - \$30 copay Out-of-Network - 80% after deductible	In-Network - \$10 copay Out-of-Network - 80% after deductible
Emergency Room	100% after \$50 copayment (waived if	100% after \$75 copayment (waived if	100% after \$100 copayment (waived if	100% after \$50 copayment (waived if

Selected Plan(s)

Medical / Rx
 1. PVMA PPO Basic 100/80 w/ 15/25/40 Incentive Rx

Dental
 1. UCCI Comprehensive Dental to Age 25 (Central Area)

Vision
 1. Davis Vision

Add a new employee

Choose Open Enrollment Options for Each Employee

Cancel an employee's coverage

AFFINITY ACCESS WELCOME ASSOCIATION MEMBER

Open Enrollment

To transmit your benefit selections, you must click the Submit link at the end of this process.
 ⚠ At this time, your selections have not been submitted.

Edit Census Form

The changes you make to the census form will only be saved when you click the "Save My Changes" button. To add an employee to the census form, click the "Add Employee To Form" link.

[Save My Changes](#) [Cancel](#)

[Add Employee To Form >>](#)

Name	Medical	Dental	Vision	Cancel Employee*
John Smith	<input type="radio"/> PVMA PPO Basic 100/80 w/ 15/25/40 Incentive Rx <input type="radio"/> PVMA PPO Value 1000 100/80 w/ 8/35/50 Incentive Rx <input checked="" type="radio"/> None Chosen <input type="text" value="Choose Status"/>	<input type="radio"/> UCCI Comprehensive Dental to Age 25 (Central Area) <input checked="" type="radio"/> None Chosen <input type="text" value="Choose Status"/>	<input type="radio"/> Davis Vision <input checked="" type="radio"/> None Chosen <input type="text" value="Choose Status"/>	<input type="checkbox"/>
Jane Smith	<input type="radio"/> PVMA PPO Basic 100/80 w/ 15/25/40 Incentive Rx <input type="radio"/> PVMA PPO Value 1000 100/80 w/ 8/35/50 Incentive Rx <input checked="" type="radio"/> None Chosen <input type="text" value="Choose Status"/>	<input type="radio"/> UCCI Comprehensive Dental to Age 25 (Central Area) <input checked="" type="radio"/> None Chosen <input type="text" value="Choose Status"/>	<input type="radio"/> Davis Vision <input checked="" type="radio"/> None Chosen <input type="text" value="Choose Status"/>	<input type="checkbox"/>

Step by Step instructions for completing your 2010 Open Enrollment changes on line

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Open Enrollment

Instructions

Using this website you will be able to select plans, complete your census form, print forms and submit your selected plans and census form to USI Affinity, Benefit Solutions Group. Each section is explained in more detail below.

- **Selected Plan(s)**
Here you can select the plans for your employees to choose from. To help you make your selections, you can view and compare plan rates and features. When you have completed your plan selections, you can move onto your census form.
- **Census Form**
In this section you can make your employees plan selections. You will also have the ability to cancel coverage for employees and add new employees.
- **Enrollment Forms**
Enrollment related forms are available here in PDF format for you to download and print from your computer.
- **Submit**
When you are done selecting plans and filling out your census form, here you can submit them to USI Affinity. A USI Affinity customer service representative will review your enrollment information and, if necessary, contact you for any required information. **To transmit your benefit selections, you must click the Submit link at the end of this process.**

[Selected Plan\(s\) >>](#)

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Instructions for Paper Enrollment

- Forms included in your renewal packet:
 - Benefit Election Form (Form A): **Not required** if you use Affinity Access for your enrollment.
 - Census Form (Form B): Only required if selecting a new plan or a group with 20 or more employees electing two options. Please complete one census form for each medical option chosen
 - Open Enrollment Medical/Dental/Vision Enrollment/Change Form (Form C): Should your employees wish to change plans, or make a change to their covered dependents – **Required** for both paper and internet enrollment.
 - Group Enrollment Application (Form D): Only required if selecting a new plan.

Instructions for Paper Enrollment

- All paperwork will be reviewed to assure compliance with carrier guidelines, and that all paperwork is completed.
- **Deadline for Benefit Change Submissions is October 30, 2010!**
- Please consult page 4 of the Renewal Instructions brochure mailed to you for more information

Frequently Asked Questions

Q. Are there limits on how many plans I may offer?

A. Yes, groups with 1 to 19 participants may elect 1 medical plan, 20 to 50 participants may elect 2 plans; groups with 51+ participants may elect 3 plans. Signature 65 does not count toward your maximum number of plans. So a firm of 20-50 could have 2 standard medical plans + the Signature 65.

Q. I have an employee age 65 or older. Should that employee be insured under the Signature 65 program?

A. If you have less than 20 employees according to government guidelines, carrier guidelines require that the Medicare eligible employees be insured under the Signature 65 with the Blue Rx. Carrier guidelines will not permit a Medicare eligible individual to be insured under a standard policy. The employee must have Medicare Part A and Part B. This would apply to the dependent of an employee if insured under the plan. If you do not currently have an insured under the Signature 65 plan, please contact our Medicare Unit at 1-866-888-6736 for information, or you can email your request for information to medicalmailbox@usi.biz.

Frequently Asked Questions

Q. My Traditional Insurance plan is becoming cost prohibitive but I'm concerned about the changes to my coverage if I change to a PPO. What changes might occur?

A. One benefit to PPO Plans is that preventative and screening services are encouraged and covered based on established frequencies. Traditional coverage does not provide benefits for these types of preventative services. You may also see lower out of pocket costs for office visits since there is a copay instead of the cost of the visit going toward your deductible. Please refer to the document in your renewal packet titled "Converting from ClassicBlue Traditional to PPOBlue Coverage"

Q. Are there any rate changes to the Vision options?

A. Yes, the vision rates will adjust effective January 1st.

Q. Are there any changes to the UCCI Dental Program?

A. No, there are no changes to the dental program for 2010.

Q. When can we enroll in the Dental and Vision plans?

A. You may enroll into the Dental or Vision plan effective January 1, 2010. To enroll, check the appropriate box on your 2010 benefit election form and complete the enclosed enrollment form. One enrollment form is required for each enrollee into the plan. The dental and vision can only be added, changed or canceled at Renewal. You may however add or delete dependent during the year in the event of a lifestyle change such as marriage, adoption, birth, etc.

Frequently Asked Questions

Q. How many enrollment forms does an individual need to complete if we are making multiple changes?

A. Only one Medical/Dental/Vision Enrollment/Change form is required from each individual. Please be sure all appropriate boxes are checked under Section A indicating all of the changes being made by that individual. For example, if you are changing your medical plan, and the individual is also adding dependents, they would check the appropriate box under “Plan Type – Medical,” and then under “Type of Activity,” they would check Change, Change type of coverage, and add dependent.

Q. What if my paperwork is determined to be incomplete when received?

A. We will notify the individual listed as the contact on your Benefit Election form immediately. If an email address is supplied we will send the notification to that email address. If no email address is supplied we will either fax or call the designated contact.

Thank You

We hope you found this webinar to be helpful. If you have any further questions, please contact the Employee Benefits department at USI Affinity

Phone: (800) 265-2876

Email: medicalmailbox@usi.biz