

2017-2018 Open Enrollment May 08 thru May 19, 2017



To: All Benefit Eligible Employees

2017-2018 Annual Health Benefits Open Enrollment is here!

Benefits are important; they provide support to you when you need it the most. They're also a personal choice; your life circumstances change from year to year and your financial and protection needs may change as well.

During the District's open enrollment you have the opportunity to review your family's changing needs, evaluate your existing coverage and decide whether to continue with your current choices or make a change. Being proactive now will ensure that you and your family have the coverage you need throughout the year ahead. This is the time to change plans and add or delete dependents. If you are enrolling a spouse, domestic partner or child(ren), you will need to provide supporting documentation to the benefits office as proof of eligibility.

Open Enrollment will be held from **May 8 to May 19, 2017** through our on-line benefits administration system, **BenefitBridge**, for **CHANGES ONLY**. If you wish to keep your current election, you do not need to do anything.

Login to make changes:

- Select a different medical plan, add or delete dependent, change medical groups or opt out of medical coverage with proof of other coverage
- To enroll or delete a voluntary product or update your Life insurance beneficiary
- Log in to enroll in the new ID Theft Protection plan
- Update your beneficiaries for the Prudential District Paid Life and Voluntary Life or Voluntary AD&D Life plans

BenefitBridge Benefits Portal – is a personalized, benefits resource system that allows employees to view their currently enrolled benefits, compare plan options, access quick links to carrier websites, open and print benefits-related documents and utilize a health-related resource library and other interactive tools.

On-Line Open Enrollment

- Employees can log in to **BenefitBridge** beginning May 8, 2017, to establish a password and review your options. Follow the **BenefitBridge** instructions included separately in this email.
- The materials in this packet will help you make informed decisions about your health plans. Please review the Medical Plan Changes to see what is new and different.
- **DEADLINE** to complete enrollment is **Friday, May 19, 2017 at 5:00 p.m.**

Informational Meetings have been scheduled to review 2017 plan changes!

Informational Meeting	April 26 th 2017	3:30pm	Conference Room
Informational Meeting	April 28 th 2017	10:30am	Conference Room
Informational Meeting	May 2 nd 2017	11:00am	Board Room
Informational Meeting	May 2 nd 2017	3:00pm	Conference Room
Retiree Meeting	May 3 rd 2017	4:00pm	Conference Room

ANNOUNCING PLAN CHANGES & NEW PLAN OFFERINGS



EFFECTIVE JULY 1, 2017

Open enrollment is quickly approaching! Please review the following information carefully to better understand your choices for the 2017-18 plan year.

United HealthCare & Anthem HMO Medical Plans

- NO CHANGES to the current HMO 20 and HMO 30 medical benefits with full HMO network plans, and NO CHANGES for HMO 40 narrow network plan through Anthem or UHC.

Express Scripts Prescription Drug Plans

- There are no changes to your prescription drug programs for 2017-18.

Kaiser Medical Plans

Kaiser Dual Coverage

Effective January 1, 2018, members covered by multiple Kaiser Plans (dual coverage) may be impacted by a new process for coordinating benefits. Kaiser is introducing a new system effective January 1, 2018 which will change dual coverage benefits for some members. This change is a global Kaiser change and not specific to REEP. Questions regarding this change should be directed to Kaiser at 1-800-464-4000.

- **Kaiser Low Opt 2 will be changing as follows:**
The current Rx benefit of \$10 generic/\$30 brand name copay with 100-day supply will be changing to:
\$10 generic/\$30 brand name copay with 30-day supply
(Enrollees have access to 100-day supply of maintenance medications through Kaiser mail order for two copays)
- **No changes to other Kaiser High Opt 3 or Kaiser Minimum Value Plan**

Traditional PPO & PPO H.S.A. Plans through Anthem or UHC & H.S.A

Traditional PPO & HSA 1 and HSA 2

- No change to the medical benefits

New Navigate PPO 500 & Navigate HSA 1 Plans – New Narrow Network and Plan Design

- REEP is offering new “narrow network” PPO plans to help reduce costs. Redlands has chosen to offer both the UHC Navigate PPO 500 and Navigate HSA 1 plans alongside the current PPO500/PPO750 and HSA 1/ HSA 2 plans.
- If your PPO provider participates in the UHC Navigate Plus network, you have an opportunity to keep change your medical benefits and lower your payroll deduction.
- To determine if your PPO provider is in the UHC Navigate Plus network, visit the following websites: www.myuhc.com – Select Find a Provider – Select Navigate Plus Network – Enter Your Zip Code or City & State – Enter Provider Info

REEP WELLNESS PROGRAMS

UHC & Anthem Subscribers

Employees can earn \$150 in Amazon Gift Cards by participating in the Health Fitness program through <https://reepwellness.biovia.healthfitness.com> Get more info at the Open Enrollment meetings.

Kaiser Permanente Subscribers

Employees can earn \$150 in Visa Gift Cards by participating in the program through <https://healthworks.kp.org/REEP>. Get more info at the Open Enrollment meetings.

- Please note: Gift cards earned through the Wellness programs are considered taxable income by the IRS and will be reported to the IRS at the end of the calendar year.

NEW SPOUSAL ADVANTAGE MERP (Medical Expense Reimbursement Plan)

Do you or your dependents have access to group health coverage through your spouse/partner? This plan may be a great cost savings for you.

Under the MERP plan, you could potentially have no out of pocket costs for you or your dependents when covered by your spouse/partner's employer health plan. Copays, deductibles, coinsurance, etc. will be reimbursed up to 100% when you and/or your dependents enroll in the MERP plan through Redlands REEP and enroll in your spouse's employer health plan. This plan could not only mitigate or eliminate your district payroll deduction, if you have one, but it could cover you and your dependents for up to 100% of out-of-pocket medical costs. To be eligible:

- You must current be currently enrolled in one of the district's medical plans in 2016-17
- You or your dependents must have access to medical coverage through your spouse/partner's employer
- Your spouse/partner's employer cannot be another REEP District

If you are interested in enrolling in the MERP program, you are required to meet with the District Benefits office, or a Keenan representative, at an Open Enrollment meeting to learn more. Don't miss out on this wonderful opportunity and mark your calendar to attend our Open Enrollment to obtain the information you need!

Anthem & Kaiser Minimum Value Plans (MVP)

- There are no changes to the medical plans.

DENTAL, VISION & HEARING BENEFIT

- There are no changes to the Delta Dental, MES and EPIC Hearing plans.

ADDITIONAL VOLUNTARY PLAN OFFERINGS

EARLY RETIREE HRA PLAN OFFERING

Are you retiring soon? Do you want more choice when looking for the right health insurance coverage? The Early Retiree Health Reimbursement Arrangement (HRA) may be for you.

For benefit eligible employees under age 65, who are retiring soon, (i.e. July 1, 2017), you have the opportunity to voluntarily shop for health care coverage outside of the District's medical plans. This program provides you the opportunity to comparison shop for more affordable health care coverage that fits your health care needs and your budget. If you find a more affordable health care plan that you would like to enroll in, you can use your negotiated District contribution to purchase that coverage through a Health Reimbursement Account (HRA). The HRA offers you several tax advantages and the opportunity to stretch your District paid benefits even farther. If you are satisfied with your District sponsored health plan, you do not need to do anything.

If you are a retiree under age 65, who retired prior to June 1, 2017, and you are receiving a district contribution to purchase the health care plans offered by the District, you too may have an opportunity to participate. Your next opportunity to participate will be in Fall 2017. Watch for information from the District on group meetings to be held between October 1 and December 1, 2017.

If you want an opportunity to see if more affordable health care coverage is available, you can meet with the District Benefits Office, or the Keenan representative at the District Open Enrollment meeting for more information.

IDENTITY TheftPROTECTOR PLAN – Voluntary Benefit Option

REEP is offering the most comprehensive and affordable identity fraud and resolution service available today. For \$10.00 per month (\$12.00 tenthly) you can protect your entire family against identity theft and fraud. **REEP ID TheftPROTECTOR** is available to you and your family during Open Enrollment. Information on this valuable benefit option will be available at our Open Enrollment meetings or through the District office.

Keenan & carrier representatives will be available with details on all of the plan offerings at the District Open informational meetings.