

City of Green Bay 2014 Benefit Enrollment



Dear City of Green Bay Employee:

October, 2013

Good News About Your Health Plan

The City of Green Bay is dedicated to providing you and your family with a valuable benefit package. Each year various insurance options are evaluated with the City's Employee Benefit Committee in partnership with our consultants, M3 Insurance Solutions. Our goal is to balance the needs of the employees against the ever rising cost of health care.

The market is again expecting significant increases in health care costs along with the additional requirements associated with the Affordable Healthcare Act that will also impact the cost of health insurance plans. The City is pleased to announce the recommendation to the City Council is for a 2.7% increase in premiums for 2014—which is well below the market increases. All of the rates listed in this brochure are based on this number, however, premiums are not finalized until after the Council holds its Budget hearing which is scheduled for November 4, 2013, should there be a change we will get a communication out to all employees.

Additionally, the City is awaiting an arbitration decision affecting police officers and until the City has a chance to review the decision we can't determine the health coverage and design plan for this group. Once the decision is received and the City has a chance to review we will get a communication out to all police officers and supervisors about the health plan.

Each year we assess all of the City's insurance providers to make sure we are providing a benefit program which meets two goals: providing you with valuable benefits while making sure those benefits are financially sustainable. That's why this year we have changed our Basic Life, Voluntary Life and Voluntary Long Term Disability benefits. Our new insurance partners will be MetLife and Aetna for those benefits. You will be able to enroll in the new program during our open enrollment period from November 18, 2013 thru December 2, 2013 at 4 p.m. Please see the schedule below for Employee meeting dates and times.

Date	Time	Location
October 24	8:30-10:00 a.m.	City Hall Council Chambers
October 24	10:30-Noon	Police Department Training Center
October 24	1:30-3:00 p.m.	DPW Break Room at West Side Garage
October 25	9:30-11:00 a.m.	City Hall Council Chambers
October 25	Noon-1:30 p.m.	Fire Department Station 1

The meetings will also be taped and made available on-line

Quick Reference Guide

Medical:

UMR

1-800-826-9781 (or call the number on your ID card if issued)

www.umar.com

Dental:

Care Plus

1-920-431-0345

www.careplusdentalplans.com

Humana

1-800-233-4013

www.humana.com

Flexible Spending Account (FSA):

Employee Benefits Corporation (EBC)

1-800-346-2126

www.ebcflex.com

Personalized Benefit Account (PBA):

Employee Benefits Corporation (EBC)

1-800-346-2126

www.ebcflex.com

Voluntary Long Term Disability:

Aetna

1-866-326-1380

www.aetnadisability.com

Life Insurance:

MetLife

1-800-438-6388

www.metlife.com

City of Green Bay Employees 2014 Benefits Options

1. Medical - No plan election is necessary if no changes are being made for 2014.
2. Flexible Spending Account (FSA) elections **must** be made on the Employee Benefits Corporation (EBC) enrollment form. Your FSA will terminate 12-31-13 if not re-enrolled.



- **Grace Period:** You will have until 03-15-2014 to incur expenses for the 2013 plan year.
- **Run Out Period:** You have 90 days after the end of the plan year, or until 03-30-2014, to submit claims for all expenses incurred in the 2013 plan year. No exceptions can be made.

Get the Most from Your FSA - You must enroll to be eligible!

Enrollment is November 18, 2013 to December 2, 2013 at 4:00 p.m.

By participating in the City of Green Bay Flexible Spending Account (FSA) you can lower your taxable income and help pay your health care expenses on a pre-tax basis. With an FSA, you agree to set aside a portion of your pretax salary in an FSA account. That money is deducted from your paycheck over the course of the year and can be used to pay for eligible out-of-pocket medical expenses like prescription drugs, eye glasses, acupuncture and more! Here are a few things to remember when it comes to your FSA:

- FSA accounts are setup on a “use it or lose it” basis, so it’s important to carefully calculate how much money to set aside each year.
-
- The pretax dollars you contribute are not subject to social security, federal, state, or local income taxes, which adjusts your annual taxable salary.
 - The annual maximum contribution to the health care reimbursement FSA is \$2,500 per participant.
 - Eligible expenses include deductibles, copayments, immunizations and more. For a complete list of eligible expenses, refer to the attached handout.
3. Dental - Humana & Dental Associates
 - \$2,500 Annual Maximum.
 - If continuing on Dental, no election is necessary.
 - If electing Dental, please complete the City of Green Bay Insurance Benefit form and return to Human Resources.
 4. Voluntary Life Insurance — MetLife
 - Additional Supplemental Life Options will be offered in 2014.
 - If electing Voluntary Life, please complete the City of Green Bay Insurance Benefit form and return to Human Resources.
 5. Voluntary Long Term Disability—Aetna
 - Provides sound financial protection in the event of a disability.
 - 60% of monthly earnings to a maximum benefit of \$6,000 per month.
 - If electing Voluntary Long Term Disability, please complete the City of Green Bay Insurance Benefit form and return to Human Resources.

For detailed instructions on how to access your accounts, please go to <http://greenbaywi.gov/humanresources/benefits>. Or you may go directly to the websites listed below:

Medical - UMR <https://member-fhs.umar.com>
Flexible Spending - Employee Benefits Corporation (EBC) www.ebcflex.com
For technical support please call Human Resources at 920-448-3147.

City of Green Bay Employees 2014 Health Insurance Benefit Information

Benefit Plan		Group Health Self Funded—\$500 Deductible Plan						
Health Carrier		UMR						
Provider Network		UHC Choice Plus						
Deductible		Single			Family			
	<i>In Network</i>	\$500			\$1,500			
	<i>Out of Network</i>	\$1,000			\$3,000			
Co-Insurance								
	<i>In Network</i>	90%						
	<i>Out of Network</i>	65%						
Out-of-Pocket Maximum		Single			Family			
	<i>In Network</i>	\$1,000			\$3,000			
	<i>Out of Network</i>	\$2,750			\$8,250			
Lifetime Maximum		Unlimited						
Office Visits								
	<i>In Network</i>	\$15 Copay, then 100%						
	<i>Out of Network</i>	Deductible and Coinsurance Apply						
Routine/Preventive Care								
	<i>In Network</i>	100%						
	<i>Out of Network</i>	Deductible and Coinsurance Apply						
Prescription Drugs		Generic / Brand / Non-Preferred						
	<i>In Network</i>	\$5 / \$25 / \$45						
Hospital Services								
	<i>In Network</i>	Deductible and Coinsurance Apply						
	<i>Out of Network</i>	Deductible and Coinsurance Apply						
Retail Clinic								
	<i>In Network</i>	\$5 Copay, then 100%						
Emergency Room								
		\$200 Copay (Waived if admitted as inpatient within 24 hours, or coded as a true emergency)						
Other								
	Chiropractic	Deductible, then 90%/65%						
	Durable Medical Equipment	Deductible, then 90%/65%						
	Occ., Speech, Physical Therapy	Deductible, then 90%/65%						
	Emergency Room Sickness	Deductible, then 90%/65%						
	Outpatient Ancillary Services	Deductible, then 90%/65%						
	Nervous and Mental Benefits	Deductible, then 90%/65%						
	Ambulance	Deductible, then 90%/65%						
Personal Benefit Account (PBA)								
	The Plan will fund up front \$100 Single and \$200 Family in your PBA. In addition, you can earn the following PBA dollars. Your dependents are also eligible to earn PBA dollars.	Single \$200 (Plan will fund \$100)			Family \$400 (Plan will fund \$200)			
		\$50 Health Coaching						
		\$25 per Dental Cleaning						
		\$25 Vision Exam						
Eligibility and Rates		City of Green Bay Employees						
	Monthly	12.5% EE Monthly Premium Contribution		13.75% EE Monthly Premium Contribution		15% EE Monthly Premium Contribution		
		EE Amount	City Amount	EE Amount	City Amount	EE Amount	City Amount	
	Employee	\$615.26	\$76.91	\$538.35	\$84.60	\$530.66	\$92.29	\$522.97
	Family	\$1,490.32	\$186.29	\$1,304.03	\$204.92	\$1,285.40	\$223.55	\$1,266.77

* Rates are subject to approval by the City Council. * Police Rates and design subject to review of arbitration decision.

This is a summary of benefits and features offered by the City of Green Bay and UMR. All benefits are subject to the limitations, and exclusions set forth in the Summary Plan Description.

City of Green Bay Employees 2014 Dental Insurance Benefit Information

Dental Carrier:	Humana	Dental Associates
Deductible		
<i>Single</i>	\$50	\$0
<i>Family</i>	\$150	\$0
Annual Maximum		
	\$2,500	\$2,500
Preventive Services		
<i>Oral Exams</i>	100%	100%
<i>X-Rays</i>	100%	100%
<i>Cleanings</i>	100%	100% (Evidenced Based Cleanings included)
<i>Topical Fluoride</i>	100%	100%
<i>Sealants</i>	80%	100%
<i>Space Maintainers</i>	80%	100%
Basic Services		
<i>Oral Surgery</i>	80%	100%
<i>Amalgam/Composite Fillings</i>	80%	100%
<i>Full & Partial Denture Repair</i>	80%	100%
<i>Stainless Steel Crowns</i>	80%	100%
<i>Simple Extraction</i>	80%	100%
Major Services		
<i>Endodontics</i>	80%	100%
<i>Periodontics</i>	80%	100% - Lab fees Additional
<i>Porcelain Crowns</i>	50%	100%
<i>Inlays/Onlays</i>	50%	Only re-cements covered
<i>Partial or Complete Dentures</i>	Partial—80% - Full—50%	100%
<i>Removable or Fixed Bridgework</i>	80%	100%
<i>Implants</i>	80%	100%
Orthodontics (per course or treatment)		
	50% to \$2,000 (Included in annual maximum)	50% to \$2,500 (Separate \$2,500 Ortho lifetime maximum)
Eligibility and Rates	12.5% EE Monthly Contribution	12.5% EE Monthly Contribution
Employee Single Contribution	\$4.95	\$3.96
Employer Single Contribution	\$34.64	\$27.76
Employee Family Contribution	\$15.03	\$12.04
Employer Family Contribution	\$105.24	\$84.32

These are summaries of benefits and features offered by the City of Green Bay and Humana. All benefits are subject to the limitations, and exclusions set forth in the Summary Plan Description.

MetLife - City of Green Bay

Life and AD&D Benefits

Explore the coverage that makes it easy to give yourself and your loved ones more security today...and in the future

Basic Term Life and Accidental Death and Dismemberment Insurance (AD&D)

Class 1 – Municipal Employees:	<ul style="list-style-type: none"> The greater of \$30,000 or 1 times pay up to a maximum of \$100,000.
Class 2 – Protective Service & Transit Union Employees:	<ul style="list-style-type: none"> Coverage in the amount of \$30,000.
Class 3 – Contributory, Part-Time Employees:	<ul style="list-style-type: none"> Coverage in the amount of \$30,000.
AD&D Coverage	<ul style="list-style-type: none"> 100% of your Basic Life amounts shown above.

Supplemental Term Life and Accidental Death & Dismemberment Insurance

		<i>Cost per \$1,000 of coverage</i>	
For You – Base Plan	<ul style="list-style-type: none"> Flat \$20,000 		\$0.25
Additional Amount For You - Buy Up Plan	<ul style="list-style-type: none"> \$10,000 increments to a maximum of the lesser of 5 times pay or \$500,000. Medical Evidence Level – lesser of 3 times pay or \$250,000 	>30	\$0.040
		30-34	\$0.075
		35-39	\$0.110
		40-44	\$0.145
		45-49	\$0.180
		50-54	\$0.215
		55-59	\$0.250
		60-64	\$0.660
		65-69	\$1.065
		70+	\$1.998
Supplemental AD&D Coverage	<ul style="list-style-type: none"> 100% of your Supplemental Life coverage elected. 		\$0.022

Dependent Term Life Insurance

For Your Spouse/Dependent Children† – Base Plan	<ul style="list-style-type: none"> Spouse: Flat \$50,000, not to exceed 100% of employee's Basic and Optional Life Benefit. Children: Flat \$10,000 for dependent children to age 19. 	Flat \$6.09 per family
Additional Amount For Your Spouse – Buy Up Plan	<ul style="list-style-type: none"> Spouse: \$10,000 increments to a maximum of the lesser of \$200,000 or 100% of employee's Supplemental Life Benefit. Medical Evidence Level (spouse) – \$10,000 Child: \$5,000 increments to a maximum of \$15,000. 	Spouse rates are based on employee age (chart above). Child rates: \$0.135/\$1,000

† Covers all eligible children

Use the table below to calculate your premium based on the amount of life insurance you will need.

Example: \$100,000 Supplemental Life Coverage

1. Enter the rate from the table (example age 36)	Example \$0.110	\$ _____
2. Enter the amount of insurance in thousands of dollars (Example: for \$100,000 of coverage enter \$100)	100	_____
3. Monthly premium (1) x (2)	\$11.00	\$ _____

Repeat the three easy steps above to determine the cost for each coverage selected.

Aetna - City of Green Bay

Long Term Disability Benefits

City of Green Bay - Full time employees regularly scheduled to work 37.5 hours a week

Your Summary of Long Term Disability (LTD) Benefits

Benefit Election Period: November 18th – December 2nd

Coverage Effective Date: 01/01/2014

Your Long Term Disability Benefits

Financial protection during illness or injury

Coverage Basics

When am I eligible for coverage?

You qualify if you are an active full time employee working at **least 37.5** hours a week. You must be working in an eligible group as defined by your employer.

When does coverage become effective?

Coverage for current plan participants enrolling in the Aetna plan will begin on **01/01/2014** if you are actively at work.

New hire employees in a position eligible for benefits may enroll within 30-calendar days of their hire date. The effective date of coverage is the first day of the month following the date of enrollment.

If you are enrolling for the first time or refuse coverage during a Benefit Election Period and decide to enroll at a later date, you will need to provide proof of good health known as evidence of insurability subject to Aetna's approval before coverage begins.

How much Long Term Disability insurance can I buy?

You have two voluntary long term disability plan options each providing **60%** of your Pre-disability Earnings* up to **\$6,000** a month. With option 1 benefit payments begin after a 90 day elimination period and with option 2 benefit payments begin after 180 days.

*Generally, Pre-disability Earnings include your total income before taxes and any deductions for pre-tax contributions. For definition of your Pre-disability earnings please consult your Booklet-Certificate maintained by your employer for additional information.

Are all types of illnesses and injuries covered?

Long Term Disability covers injuries and illnesses that are both work-related and non-work-related.

When does my benefit begin and end?

You are eligible for Long Term Disability (LTD) benefits if you have a significant change in your physical or mental condition(s) and cannot perform the material duties of your occupation because of that illness, injury or disabling pregnancy-related condition. As a result, your work earnings are **80%** or less than your pre-disability earnings.

Your benefit will extend beyond **24** months only if you cannot perform the material duties of any reasonable occupation and your work earnings are **60%** or less of your pre-disability earnings.

If your occupation requires a professional license or certification, you will not be considered disabled solely because you lose your license or certification.

Once your claim is approved, you will be eligible to receive LTD benefits starting on the **90th or 180th** day after the date your disability began depending upon the plan option you choose.

Generally your benefit payment will continue for as long as you remain disabled and meet the requirements of the LTD policy, or until you reach your social security normal retirement age, whichever is sooner. If your disability occurs at age 62 or above, your benefit may be reduced based on pre-determined schedule. Please refer to your Booklet-Certificate.

Are there any reductions, exclusions or limitations on Long Term Disability?

Reductions

Your benefits may be reduced if you are receiving income from other sources. Examples include:

- Any governmental retirement system earned as a result of working for your current employer
- Any disability or retirement benefit received under a retirement plan
- Any benefits from Social Security or similar plan or act
- Workers' Compensation
- Earnings from any form of employment
- Payment from Statutory Disability Plans

This Summary of Benefits and the accompanying Brochure and Enrollment Form explain/explains the general purpose of the insurance described, but in no way changes or affects the policy as it is actually issued. In the event of any discrepancy between any of these documents and the policy, the terms of the policy apply. Life, AD&D Ultra, STD, and LTD products contain limitations and exclusions, complete coverage information can be found in your Booklet-Certificate if you become insured. Please read it carefully and keep it in a safe place with your other important papers.

Aetna - City of Green Bay Long Term Disability Benefits

City of Green Bay- Full Time

Your Summary of Long Term Disability (LTD) Benefits

Exclusions

You will not receive benefits under certain circumstances. Examples include:

- Your disability results from an intentional self-inflicted injury; or you became injured while committing a criminal act or driving under the influence of alcohol/drugs.
- You are not under the regular care of a doctor when requesting disability benefits.
- You are receiving payment under a salary continuance or retirement plan sponsored by your employer.

Limitations

- You can receive benefit payments for Long term Disabilities resulting from mental illness, alcoholism and substance abuse for a total of **24 months**. This time period may be extended if you are confined to a hospital.

Pre-existing Conditions

Your Long Term Disability policy may limit the benefits you can receive for pre-existing conditions. A pre-existing condition is an illness, injury or pregnancy related condition for which you were diagnosed, treated; or received medical treatment or; were prescribed medications

Please refer to your booklet certificate for a complete list of income sources that will reduce your benefits, as well as a complete list of exclusions and limitations

Is there anything else I should know about my plan?

Recurring disabilities

If you return to work full-time from a disability, and become disabled from the same illness or injury in less than **6 months**, you will begin receiving benefits again immediately.

If you return to work full time for **6 months** or more, a recurring disability will be considered a new disability.

Partial disabilities

You are considered partially disabled if you are unable, due to an injury or illness, to perform the main duties of your regular occupation on a full time basis. Partial disability benefits allow you to work, earn income from your employer and continue receiving benefits.

This may enable you to receive 100% of your income during the first **12 months** of your disability. After the first **12 months**, partial disability benefits can continue based on a formula that you will find in your Booklet-Certificate.

Vocational Rehabilitation and Return to Work

Our goal is to help you return to gainful employment. Consultants will review each claim to determine if rehabilitation services would be appropriate and effective. We will work with your employer to provide reasonable accommodations to help you return to work. You may even qualify for an increase in your benefits by participating in a rehabilitation program.

What additional features should I know about?

Survivor Benefit

If you die after **180 days** of disability, your eligible survivor will receive a lump sum **3 month(s)** gross disability benefit.

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Voluntary Long Term Disability Plan Options and Premium Rate Examples

City of Green Bay- Full Time

Your Summary of Long Term Disability (LTD) Benefits

How do I file a Long Term Disability claim?

To file a Long Term Disability claim

Customer Service

Toll-free Number: 866-326-1380

Hours: 8 a.m. to 8 p.m., EST Monday through Friday

Voluntary Long Term Disability Plan Options and Premium Rate Examples

Plan Option 1: 60% of pre-disability earnings with **90 day** elimination period.

Premium Rates per \$100 of Monthly Covered Payroll:

Age	Less than Age 24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60+
Rate	.115	.115	.167	.252	.395	.582	.798	.947	.926

For example: For a 35 year old, earning \$36,000 annually

$\$36,000/12 = \underline{\$3,000}$ (Covered Monthly Payroll)

$\$3,000/100(\text{Units}) = \underline{30}$ (Number of \$100 units of Monthly Covered Payroll)

$\underline{30} \times \underline{.252}$ (35 year old rate) = $\underline{\$7.56}$ Cost per month or $\$3.78$ per paycheck.

$(\$7.56 \times 12 \text{ months} / 24 \text{ pay periods} = \$3.78 \text{ per pay check cost})$

Plan Option 2: 60% of pre-disability earnings with **180 day** elimination period.

Premium Rates per \$100 of Monthly Covered Payroll:

Age	Less than Age 24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60+
Rate	.095	.095	.141	.216	.343	.496	.717	.822	.830

For example: For a 35 year old, earning \$36,000 annually

$\$36,000/12 = \underline{\$3,000}$ (Covered Monthly Payroll)

$\$3,000/100(\text{Units}) = \underline{30}$ (Number of \$100 units of Monthly Covered Payroll)

$\underline{30} \times \underline{\$.216}$ (35 year old rate) = $\underline{\$6.48}$ Cost per month or $\$3.24$ per paycheck.

$(\$6.48 \times 12 \text{ months} / 24 \text{ pay periods} = \$3.24 \text{ per pay check cost})$

This Summary of Benefits and the accompanying Brochure and Enrollment Form explain/explains the general purpose of the insurance described, but in no way changes or affects the policy as it is actually issued. In the event of any discrepancy between any of these documents and the policy, the terms of the policy apply. Life, AD&D Ultra, STD, and LTD products contain limitations and exclusions, complete coverage information can be found in your Booklet-Certificate if you become insured. Please read it carefully and keep it in a safe place with your other important papers.

Employee Benefit Enrollment Procedures for New Hires and Current Employees

In compliance with the Affordable Care Act (ACA) the City will hold an open enrollment each fall at which time employees will be able to make changes to, or apply for, employee benefit coverage for the next calendar year. Enrollment for employee benefit insurance coverage is subject to the requirements of the specific summary plan document, agreements between the vendor and the City or vendor requirements. To accommodate these requirements the following procedures will be followed regarding new employee and current employee enrollment.

NEW EMPLOYEES: New employees in a position eligible for benefits may enroll within 30-calendar days of the hire date for health, dental, long term disability, life insurance, and/or Section 125 flexible spending account. The effective date of coverage is the first day of the month following the date of enrollment. Eligibility for benefits will be in accordance with the definition under each summary plan document. If the new employee declines coverage for self, spouse and/or eligible dependents, the employee may apply for coverage for self, spouse and/or eligible dependents at the next open enrollment period except in the case of a qualifying event that permits earlier enrollment.

CURRENT EMPLOYEES: Following initial employment, current employees may change or apply for coverage annually during the open enrollment period for the next calendar year, except in the case of an event that permits changes during the calendar year in accordance with the specific summary plan document. If a current employee declines coverage for self, spouse and/or eligible dependents, the employee may apply for coverage for self, spouse and/or eligible dependents at the next open enrollment period except in the case of a qualifying event that permits earlier enrollment.

QUALIFYING EVENTS: Qualifying events under HIPAA Special Enrollment and Section 125 (Flexible Spending Accounts):

- Marital status change: marriage, death of spouse, divorce, annulment or legal separation.
- Number of dependents change: birth, adoption or placement for adoption, death of dependent child, newly eligible dependents due to plan design change.
 - Note: HIPAA allows the employee who may have elected employee only coverage initially to not only add a new dependent, but also allows the employee to add the spouse at the time the new dependent is added.
 - HIPAA does not require all eligible dependents (i.e., other dependent children) be added.
- Loss of coverage: if the employee loses other coverage (e.g. Spouse's health plan coverage terminates, or Medicare or Medicaid eligibility ends).

Changes to plan elections may be made under section 125 (flexible spending account) rules under the following circumstances (in addition to the HIPAA special enrollment events):

- Dependent status change: dependent no longer satisfies rule for eligibility as a dependent due to attainment of age, loss of student status, marriage of dependent child
- Employment status: commencement or termination of employment, commencement of or return from leave of absence, change from part-time to full-time status or vice versa, strike or lockout.
- Judgment decree or order requiring coverage: QMSCO.
- Change in residence: may qualify if there is a loss of eligibility for a region-specific plan, such as an HMO.
- Other additional circumstances as allowed under section 125.

Employee Benefit Enrollment Procedures for New Hires and Current Employees (continued)

BENEFITS:

- Health and Dental Insurance. During open enrollment a current employee may enroll, add or discontinue health and/or dental insurance coverage for the employee and/or eligible dependents.
- Supplemental Term Life Insurance. During the MetLife initial enrollment only for January 1, 2014 employee's who previously had not elected supplemental life insurance for self, spouse and/or eligible dependent(s) will have a one-time opportunity to elect \$20,000 for self, \$50,000 for spouse and \$10,000 for eligible dependent(s) without medical evidence of insurability. You will also have the opportunity to purchase supplemental life insurance for employee coverage in \$10,000 increments to a maximum of 3x's pay or \$250,000 without medical evidence of insurability during this enrollment period only.
- **During future open enrollments** an employee who has supplemental term life insurance may purchase additional insurance in \$10,000 increments per year without evidence of insurability. An employee who does not have supplemental life insurance and does not apply for it during this initial enrollment may apply for supplemental term life insurance for self, spouse and/or dependent (s), however, medical evidence of insurability will need to be provided at that time. In the future, medical evidence of insurability will always be required to add spouse and dependent(s) coverage or increase spouse over \$50,000 and dependent(s) over \$10,000. Determination of medical eligibility rests with MetLife.
- Long Term Disability Insurance. During open enrollment a current employee who does not have long term disability coverage may apply for coverage. However, when applying for coverage the employee must provide medical evidence of insurability to add long term disability insurance coverage. The determination of medical eligibility rests with Aetna. A current employee with long term disability coverage with a 90-day waiting period may change to the 180-day waiting period without providing medical evidence of insurability. A current employee with long term disability coverage with a 180-day waiting period may change to the 90-day waiting period without providing medical evidence of insurability. However, the employee will be subject to the pre-existing conditions clause described in the summary plan document.
- Section 125 (Flexible Spending Account): During open enrollment a current employee may enroll in the flexible spending account for the next calendar year. Enrollment eligibility and changes to the flexible spending account during the calendar year are subject to qualifying events.
- Discontinuation of Health, Dental, LTD, Life Coverage during the Calendar Year: Employees may discontinue coverage for health, dental, long term disability and life insurance without a qualifying event during the calendar year, but will only be eligible to re-enroll during the open enrollment period and in accordance with the requirements of the summary plan document.

Urgent Care Information

How to Choose

In this issue:

Medical study indicates that 30 percent of all emergency room visits could have either been addressed in an urgent care facility, retail clinic facility or solved in a doctor's office. But how can you determine which is more appropriate for your condition?

It is important to be a wise health care consumer. We consistently provide you with information that will help you save health care costs, help the employee health plan save health care cost, and save Contract Health costs as well. Many medical situations need emergency treatment. However, studies indicate that about 30% of all emergency room visits are not true emergencies, and treatment could have been provided at an "urgent" care or "retail" clinic or doctor's office. As we all know, emergency room treatment costs are significantly higher than urgent care or retail clinics. To help you save, please read the following information carefully. This is meant to be a practical guide to help you choose the right care at the right place at the right cost. Each visit may be different based on where you are treated, the type of medical issue you're being treated for, and the services provided.

Did You Know....?

For emergency room treatment, your out-of-pocket cost, plan cost, and Contract Health costs are usually **much** higher than an urgent care or retail clinic visit.

⇒ Using an Emergency Room (highest cost)

Emergency rooms are equipped to handle life-threatening injuries and illnesses and other serious medical conditions. An emergency is a condition that may cause loss of life or permanent or severe disability if not treated immediately. You should go directly to the nearest emergency room if you experience any of the following:

Chest pain or shortness of breath

Severe abdominal pain following an injury

Uncontrollable bleeding

Remember....

Confusion or loss of consciousness, especially after a head injury

Poisoning or suspected poisoning

You have a **\$5 co-pay** for treatment at a retail (or fast care) clinic

Serious burns, cuts or infections

Inability to swallow

For Your Reference....

Seizures

Paralysis

Broken bones

Keep the list on the following page handy on the front of your refrigerator, in your cubicle, and for the babysitter.

Those who go to the ER with relatively minor injuries or illnesses often have to wait more than an hour to be seen, depending the severity of other patients conditions. Often, many patients could be seen at an urgent care or retail clinic.

⇒ Using Urgent Care (lower cost than ER - higher than retail clinic)

Urgent care centers are stand alone clinics or located in clinics or hospitals, and, like emergency rooms, offer after-hours care. Unlike emergency rooms, they are not equipped to handle life-threatening situations. Instead, they handle conditions that require immediate attention - those where delaying treatment could cause serious problems or discomfort. Examples of conditions that require urgent care are:

Ear infections (though can usually also be treated at retail clinics)

Sprains

Urinary tract infections (though can usually also be treated at retail clinics)

Vomiting

Urgent Care Locations in the Greater Green Bay Area

*****Urgent care visits are a \$15 copay; any other charges will be applied to your deductible and coinsurance*****

Aurora Urgent Care:

Aurora Bay Care Health Center
2253 W. Mason Street
Green Bay
Mon - Fri: 8 am to 8 pm
Closed Holidays
920-327-7240

Aurora Health Center
1881 Chicago Street
DePere
Mon - Fri: 8 am to 8 pm
Weekends: 9 am to 5 pm
920-403-8291

Aurora Bay Care Medical Center
2845 Greenbrier Road
Green Bay
24 hours - 7 days a week
920-288-4040

Prevea Urgent Care:

Prevea - Ashwaubenon
2502 S. Ashland Avenue
Green Bay
Mon - Fri: 8 am to 8 pm
Weekends: 8 am to 4 pm
920-496-4700

Prevea - Howard
2793 Lineville Road
Green Bay
Mon - Fri: 8 am to 8 pm
Weekends: 8 am to 4 pm
920-496-4700

Prevea - East DePere
3860 Monroe Road
DePere
Mon - Fri: 8 am to 8 pm
Weekends: 8 am to 4 pm
920-496-4700

Prevea - Plymouth
825 Walton Drive
Plymouth
Mon - Fri: 8 am to 8 pm
Weekends: 8 am to 4 pm
920-892-4322

Prevea - East Mason
3021 Voyager Drive
Green Bay
Mon - Fri: 8 am to 8 pm
Weekends: 8 am to 4 pm
920-496-4700

Community Memorial Hospital -
Oconto Falls
835 South Main Street
Oconto Falls
Mon - Fri: 5 pm to 10 pm
Weekends: 8 am to 4 pm
888-277-3832

(Bellin does not have any Urgent Care locations)

⇒ **Using In-Network Retail (Fast Care) Clinics (LOWEST COST)**

Retail clinics are the lowest cost option for you and the health plan.

Many services can be rendered and common medical conditions can be treated at retail clinics like:

Monospots	Pregnancy Tests	Rapid Strep	Urinalysis
Allergies (6 yrs. & up)	Bladder Infections (females 12 yrs. & up)	Sports/Camp Physical	Cold/Flu Symptoms
Cold Sores	Ear Infections	Impetigo	Styes
Insect Bites	Laryngitis	Minor Burns & Rashes (including sunburn)	Mononucleosis
Pharyngitis	Poison Ivy (3 yrs. & up)	Upper Respiratory Infection	Sinus Infection

Uncertain? You can Ask A Nurse by calling the 24/7 Nurse Line at 888-758-7373

A listing of in-network retail clinics is included.

In-Network \$5 Co-Pay Retail Clinic Locations

Aurora QuickCare Retail Clinics

DePere

1415 Lawrence Drive
(920) 339-4328
Mon-Fri 9 am – 6:30 pm
Sat 9 am – 4:30 pm
Sun 10 am - 3:30 pm

Green Bay

2440 W. Mason Street
(920) 499-5917
Mon-Fri 9 am – 6:30 pm
Sat 9 am – 4:30 pm
Sun 10 am - 3:30 pm

Oshkosh

351 S. Washington Street
(920) 232-0718
Mon-Fri 9 am – 6:30 pm
Sat 9 am – 4:30 pm
Sun 10 am - 3:30 pm

Kenosha

2801 14th Place
(262) 553-9325
Mon-Fri 9 am - 6:30 pm
Sat-Sun 9 am - 2:30 pm

Mukwonago

250 E. Wolf Run
(262) 363-4751
Mon-Fri 9 am - 6:30 pm
Sat 9 am - 4:30 pm
Sun 10 am - 3:30 pm

Pewaukee

411 Pewaukee Road
(262) 695-4439
Mon-Fri 9 am - 6:30 pm
Sat 9 am - 4:30 pm
Sun 10 am - 3:30 pm

Greendale

5300 S. 76th Street
(414) 423-5538
Mon-Fri 9 am - 6:30 pm
Sat-Sun 10 am - 3:30 pm

Mequon

10932 N. Port Washington
(262) 241-0169
Mon-Fri 9 am - 7 pm
Sat 9 am - 5 pm
Sun 9 am - 3 pm

Brookfield

95 N. Moorland Road
(262) 786-9037
Mon-Fri 9 am - 6:30 pm
Sat-Sun 10 am - 3:30 pm

Sheboygan

3711 S. Taylor Drive
(920) 457-2915
Mon-Fri 9 am - 6:30 pm
Sat 9 am - 4:30 pm
Sun 10 am - 3:30 pm

Bellin Health (located in Shopko) - ThedaCare Retail Clinics [Note: Patients must be 18 months or older]

Green Bay/Ashwaubenon

301 Bay Park Square
(920) 445-7377
Mon-Fri 8:30 am - 8:30 pm
Sat 8:30 am - 5 pm
Sun 10 am - 5 pm
Holiday 10 am - 2 pm

Green Bay East

2430 E. Mason Street
(920) 445-7377
Mon-Fri 8:30 am - 8:30 pm
Sat 8:30 am - 5 pm
Sun 10 am - 5 pm
Holiday 10 am - 2 pm

Green Bay/Suamico

2318 Lineville Road
(920) 445-7377
Mon-Fri 8:30 am - 8:30 pm
Sat 8:30 am - 5 pm
Sun 10 am - 5 pm
Holiday 10 am - 2 pm

Shawano (in Shawano Med Center)

309 N. Bartlett Street
(715) 526-8110
Mon-Fri 8:30 am - 8:30 pm
Sat 8:30 am—5 pm
Sun 8:30 am - 5 pm
Holiday 10 am - 2 pm

Appleton (ThedaCare)

W3208 Van Roy
(866) 455-8111
Mon-Fri 8:30 am - 8:30 pm
Sat 8:30 am - 5 pm
Sun 10 am - 5 pm
Holiday 10 am - 2 pm

Appleton (ThedaCare)

000 W. Northland Avenue
(866) 455-8111
Mon-Fri 8:30 am - 8:30 pm
Sat 8:30 am - 5 pm
Sun 10 am - 5 pm
Holiday 10 am - 2 pm

Oshkosh (ThedaCare)

1300 S. Fuller
(866) 455-8111
Mon-Fri 8:30 am - 8:30 pm
Sat 8:30 am - 5 pm
Sun 10 am - 5 pm
Holiday 10 am - 2 pm

(Also a Bellin location in **Marinette** at 2741 Roosevelt Road)

Note: Bellin/ThedaCare closed for lunch 2-2:30 pm

Examples of What We're Saying....

Typical Services

ER Cost*

Urgent Care Cost*

FastCare Cost

Sore throat and rapid strep test

Sinus infection

\$617

\$226

\$57

Bladder infection and urinalysis

(*Based on the median charge at all WI facilities - ER and Urgent Care visits have co-pay and co-insurance charges to employees - in-network retail clinics do not.)

With so many eligible expenses to meet your health care needs, you're sure to pay less with the BESTflexSM Plan.

The
BESTflexSM
Plan

Eligible Expenses

Eligible Health Care FSA Expense Examples:

Dental Services

Crowns/Bridges
Dental X-Rays
Dentures
Exams/Teeth Cleanings
Extractions
Fillings
Gum Treatments
Oral Surgery
Orthodontia/Braces

Insurance-Related Items

Copays
Coinsurance
Deductibles

Lab Exams/Tests

Blood Tests
Cardiographs
Diagnostic Fees
Laboratory Fees
Spinal Fluid Tests
Urine/Stool Analyses
X-Rays

Medication

Insulin
Prescribed Birth Control

Prescribed Vitamins*

Prescription Drugs*

Other Medical Treatments/Procedures

Acupuncture
Alcoholism (inpatient treatment)
Chiropractor Services
Drug Addiction (inpatient treatment)
Hearing Exams
Hospital Services
Infertility
In-vitro Fertilization
Norplant Insertion or Removal
Patterning Exercises
Physical Examination (not employment related)
Physical Therapy
Speech Therapy
Sterilization
Vaccinations and Immunizations
Vasectomy and Vasectomy Reversals
Well Baby Care
Other Medical Supplies and Services
Abdominal/Back Supports
Ambulance Services
Arches

Breast Pumps and Lactation Supplies

Contact Lens Solution and Cleaners
Contraceptives
Counseling (except for Marriage and Family)
Crutches
Guide Dog (for visually/hearing impaired person)
Hearing Aids & Batteries
Hospital Bed
Insulin Supplies
Learning Disability (special school/teacher)
Lead Paint Removal (if not capital expense and incurred for a child poisoned)
Mastectomy Bras
Medic Alert Bracelet or Necklace
Medical Miles, Tolls, and Parking
Orthopedic Shoes
Oxygen Equipment
Pregnancy Tests
Prosthesis
Rubbing Alcohol
Splints/Casts
Suntan Lotion/Sunscreen greater than SPF 14
Syringes

*Excludes drugs imported from Canada and other countries. Some medically necessary items may be covered by the Health Care FSA if prescribed by a physician for a specific medical condition. The prescription should contain the specific medical condition and timeframe for treatment.

Women's Health and Cancer Rights Act Notice

On October 21, 1998, the federal government passed the Women's Health and Cancer Rights Act of 1998. As part of our plan's compliance with this Act, we are required to provide you with this enrollment notice outlining the coverage that this law requires our plan to provide.

Our group health plan has always provided coverage for medically necessary mastectomies. This coverage includes procedures to reconstruct the breast on which the mastectomy was performed, as well as the cost of necessary prostheses (implants, special bras, etc.) and treatment of any physical complications resulting from any stage of the mastectomy. However, as a result of this federal law, the plan now provides coverage for surgery and reconstruction of the other breast to achieve a symmetrical appearance with the breast on which the mastectomy is performed.

The following benefits are required to be provided if benefits are provided for a mastectomy:

- Coverage for reconstruction of the breast on which the mastectomy is performed.
- Coverage for surgery and reconstruction of the other breast to produce a symmetrical appearance with the breast on which the mastectomy is performed.
- Coverage for prostheses and physical complications resulting from any state of the mastectomy, including lymphedemas.
- These benefits are subject to the same deductible, copays and coinsurance that apply to mastectomy benefits under the plan.