

# Your Health Benefits

**Plan Year:**  
**October 1, 2007 through**  
**September 30, 2008**

**Your personal guide to choosing the best benefits for you and your family**

## Your Options for Benefits

In order to receive maximum benefits for pooling, changes in your insurance coverage for the 2007-2008 school year must be returned to the payroll office **no later than Sept. 10, 2007.**

### Medical Insurance:

Blue Cross of Washington & Alaska  
(Plan 1, Plan 2, Plan 3, Plan 4A, Plan 4B, Plan 5)  
www.premera.com

1-800-345-6784

### Dental Insurance:

Washington Dental Service  
With or W/O Orthodontia (Depending on bargaining unit)

1-800-554-1907

### Vision Insurance:

Blue Cross Plan A

1-800-345-6784

### Other Optional Insurance:

Salary Insurance  
Cancer Insurance  
Optional Life Insurance / AD&D

### Flexible Spending Plans:

Medical Reimbursement Plan  
Dependent Care Assistance Plan

## IMPORTANT!

If you would like to make **any** of the following **changes** in your Health Benefits for the 2007-2008 school year, *please contact the Payroll Office no later than September 10, 2007:*

- Changes in insurance plans or coverage.
- Changes in dependents to be covered on your insurance plans.
- Changes in any beneficiaries.

### NOTE:

Your dental and/or vision coverage are Family Plans. They cover your whole family. Check to see that you have signed up all eligible dependents in your family.

## CHANGES IN YOUR FAMILY STATUS

**Please be sure to notify payroll if any of the following take place during the plan year.**

Marriage (within 30 days)

Birth or Adoption of Children (within 60 days)

Family Members no longer qualified to be covered as dependents on your insurance. They may qualify for COBRA coverage (contact the payroll Office for more information)

Address Change

Beneficiary Changes (marriage, divorce or other changes in family status)

# Medical Plan Changes 2007-2008

## Blue Cross PP01, PPO2, PP03, PP04A, PPO4B, and Foundation

### PP01, PP02, PP03, PP04A, PP04B, and Foundation

#### Group Basic Benefit Plans with Changes

##### Dependent Age Limit Enhancement

(Applies to the Medical, Dental, Vision, Voluntary Term Life and Voluntary AD&D plans only)

The dependent age limit will be increased to age 25. Employees that currently have over age dependent(s), age 23 and 24, will be given the opportunity to re-enroll them on coverage during their school district's open enrollment period this fall.

#### 1. Preventive Care (Plans 1, 2 and 3 Only)

The preventive care benefit annual maximum will be increased by \$100 as follows:

- Up to **\$300** each calendar year for enrollees ages 4 and up, and **\$600** per calendar year for enrollees from birth through age 3. This includes routine physical examinations, well baby examinations, immunizations, approved wellness classes, screenings, diagnostic x-rays and laboratory services performed in connection with such examinations.

*Note: Prostate cancer screenings (see below), mammograms (per state mandate), and colonoscopies will be and/or are paid under the General Benefits provisions of the plan, subject to deductible and coinsurance.*

#### 2. Prostate Cancer Screening (Plans 1, 2 and 3 – State Mandate)

Prostate cancer screenings will now be covered under the General Benefits provision of the plan (subject to the deductible and coinsurance).

#### 3. Chemical Dependency (All Plans – State Mandate)

The benefit maximum will increase to \$13,500 every 24 consecutive months.

#### 4. Private Duty Nursing (Plans 1, 2 and 3)

The specific private duty nursing benefit will be eliminated as these services are covered under the Home Health Care benefit.

#### 5. New Program – Health Risk Management (HRM)

WEA, Aon, Premera and WebMD (one of the premiere health risk management firms in the country) have collaborated to develop a health risk management (HRM) program designed to meet the unique needs of the WEA plan participants.

HRM programs are designed to assist people who due to family history or lifestyle factors, are at risk for developing chronic diseases in the future. This is different than the current disease management programs, which are designed to help people that have already been diagnosed with a chronic disease.

The goal for this program is to improve the health status and quality of life for our plan participants, which should in turn positively impact our future health care trends.

## Help!

Who do you call if you need assistance in learning more about your benefits and how to make changes?

Tammy Hubensack  
Penny Shea (A – K)  
Jennifer Henderson (L – Z)

Phone: 663-8161

# Medical Plan Changes 2007-2008

The program will include three components. **All aspects of the program are completely confidential and voluntary:**

- **Personal Health Manager** – A dynamic, personalized home page for access to a suite of online health management tools, resources, and trackers for participants to use. Information is refreshed daily.
- **Health Risk Assessment Survey** – An online survey tool, which based on information provided by the participant, will calculate an overall wellness score. Participants will receive a personal report based on their survey results, and their Health Manager home page will be personalized based on their specific results.
- **High Risk Coaching** – Participants that are in the lower 40% of the overall wellness scores with modifiable health risks receive 1-on-1 telephone coaching. The coaches use a “whole” person approach and discusses the participants overall health, specific personalized goals and strategies to begin reducing these risks.

The survey tool will be implemented in early 2008, after all the open enrollment changes have been processed.

More information will be communicated over the next few months.

## Medical Plan

## Rate Increase

**+3.6%**

Benefit	PP01	PP02	PP03	PP04-500	PP04-750	Foundations
Employee	\$ 551.30	\$ 482.40	\$ 431.55	\$ 398.75	\$ 386.45	\$ 494.60
Employee + Spouse	\$1,070.95	\$ 934.20	\$ 835.95	\$ 772.15	\$ 748.40	\$1,003.15
Employee + Spouse + Child(ren)	\$1,290.95	\$1,125.65	\$1,007.30	\$ 930.25	\$ 901.65	\$1,213.50
Employee + Child(ren)	\$ 771.30	\$ 673.85	\$ 602.90	\$ 556.85	\$ 539.75	\$ 705.00

### Save

### Time and money with Prescriptions-by-Mail

For additional information call Medco Health Member Services at 1-800-391-9701 or visit **MyPharmacyPlus** through the Pharmacy section at [www.premera.com](http://www.premera.com).

## Dental & Vision 2007-2008

### Washington Dental Service

**Rate increase:** 0%

**RATES:** Dental \$111.20  
*(WEA Certificated and Bus Driver Bargaining Group)*

Dental with Orthodontia \$121.20  
*(All Bargaining Groups except WEA-Certificated and Bus Drivers)*

**The following benefit enhancements will be added to the “Core” Dental plans:**

- Sealants  
The age limit and replacement limitation will be removed
- Prescription Strength Fluoride Toothpaste  
Prescription Strength Fluoride toothpaste will be covered when dispensed at a participating dental office
- Antimicrobial Mouth Rinse  
Antimicrobial Mouth Rinse will be covered when dispensed at a participating dental office for enrollees with periodontal disease. It will also be available to female enrollees during pregnancy, regardless of whether they have received treatment for periodontal disease.
- Temporomandibular Joint Disorder (TMJ) Benefit  
Benefits will be added that cover diagnostic, non-surgical and surgical treatment for TMJ up to \$1,000 per year with a \$5,000 lifetime maximum.

### Blue Cross - WEA Vision Plan

**Rate increase:** 2.5%

**RATES:** Plan A \$17.35  
*(All bargaining groups)*

The frame allowance will increase \$35, and the exam and materials copayments will increase by only \$5.00.

#### **Reminder:**

Your dental and /or vision coverage are Family Plans. They cover your whole family. Check to see that you have signed up all eligible dependents in your family.

# Other Insurance

## Life Insurance

### **WEA Voluntary Term Life Insurance**

AON Consulting (206) 467-4646

#### **Benefit**

“Guarantee issue for employees” - \$50,000 Life Insurance Benefits

Your principal amount for death due to any cause.

#### **Accidental Death Benefits**

Twice your principal amount for death due to an accident or accidental injury.

#### **Spouse**

Coverage up to 50% of the employee’s amount, subject to approval of a short Health Evidence form.

#### **Dependent Children**

You may enroll your dependent children who are considered IRS dependents.

## Salary Insurance

### **American Fidelity Assurance Company**

#### **Voluntary Long-Term Disability Plan**

#### **NOTE:**

If you need more information on Life Insurance, Salary Insurance or Cancer Insurance, or want to sign up for any of these plans please contact the Payroll Office. Remember forms must be turned in to the Payroll Office by Sept. 10, 2007.

Phone: 663-8161

## Cancer Insurance

**AFLAC**

1-800-992-3522

[www.aflac.com](http://www.aflac.com)

# Flexible Spending Plan Section 125

**Plan Year October 1, 2007 through September 30, 2008**

Employees of Wenatchee School District have a wide variety of needs when it comes to employee benefits. These benefits are therefore offered in what is popularly known as a Flexible Spending Plan. There are three plans in the Wenatchee School District Flexible Spending Plan.

As the name implies, a Flexible Spending Plan gives employees important choices about the plans in which they enroll. Because it operates under special rules set out in the Federal Law and in regulations published by the Internal Revenue Service, this may enable you to realize significant tax advantages.

## **Insurance Premium Plan**

If you enroll in the Insurance Premium Plan, your cost for the premiums through Wenatchee School District's benefit plans will be deducted from your pay before Federal Income Tax and Social Security Taxes are deducted.

## **Medical Reimbursement Plan**

A separate account is available to you to take care of health care expenses not paid under the insurance contracts. The maximum amount of compensation you can direct each plan year for reimbursement of eligible health care expenses is \$2,400. If you do not use all the money you put in this plan for the year you will lose it per IRS rules. There is no reimbursement for funds not used in this plan, per IRS rules.

## **Dependent Care Plan**

A separate account calling for specific sums (up to \$5,000 per calendar year) can be allocated to this benefit account for reimbursement of dependent care expenses. If you do not use all the money you put in this plan for the year you will lose it per IRS rules.

### **NOTE:**

If you are considering the medical reimbursement plan and/or dependent care plan, please contact the payroll office for forms and additional information. Paper work must be received by the payroll office no later than **September 28 2007** to participate in this program for the 2007-2008 plan year.

### **REMINDER:**

**You must re-enroll each year for the Medical Reimbursement Plan and/or Dependent Care Plan by completing a new enrollment form. The deadline for these plans is September 28, 2007!**