

SAN DIEGO UNIFIED SCHOOL DISTRICT

Date: October 14, 2015

To: All Benefits Eligible Employees in Paid Status in Monthly Salaried Positions

Subject: **2016 OPEN ENROLLMENT FOR MEDICAL/DENTAL/FSA/ ADDITIONAL SUPPLEMENTAL LIFE INSURANCE PLANS**

Department and/or Persons Concerned: All Benefits Eligible Employees in Paid Status in Monthly Salaried Positions

Due Date: **November 13, 2015**

Reference: None

Action Requested: **Plan changes (with the exception of adding dependents-see below) must be done online via PeopleSoft Employee Self-Service.**

Brief Explanation:

The Annual Open Enrollment period will be held October 19 through November 13, 2015. Employees are encouraged to review their health benefits coverage each year at this time in order to evaluate their needs and the needs of their families. During this period, eligible employees may enroll in and make changes to medical/dental/vision/FSA and supplemental life insurance coverage, change plans, and/or add eligible dependents. **All Open Enrollment changes will become effective January 1, 2016.**

All Open Enrollment information (Medical, Dental, Vision, Flexible Spending Accounts and supplemental life insurance) will be posted on the Employee Benefits Department web page. **All enrollment changes (except when adding dependents-see below) must be done via PeopleSoft Employee Self-Service. Employees may login at the following link <https://dwa.sandi.net/psp/hcm/?cmd=login>.** Please have your employee ID number and password ready in order to login. Please contact the IT help desk at 619-209-4357 or go to the following link for assistance with password issues <https://pss.sandi.net/>. Step-by-step instructions for making online changes are available on the Employee Benefits Department web page for your convenience. You may access the department page at <https://www.sandi.net/staff/benefits/benefits>.

Employees adding dependents to health coverage must complete an enrollment change form and provide the required proof of dependent eligibility documents. Forms will be available electronically on the web page for your convenience. Please print this form, complete it and either bring it to Employee Benefits or mail it in with the required documents. **Please remember all forms are due to the Employee Benefits Department no later than November 13, 2015 at 5:00 p.m.**

Please review the information located on the web-site very carefully, including the “Summary of Medical Benefits Plans” and “Summary of Dental Benefits Plans,” to determine which of the medical/dental plans offered best meets your needs and the needs of your family. Please also review the FSA brochure to see if this benefit helps you with your qualified expenses.

Provider booklets and information regarding changes to any plans/coverage will be delivered to your site to be shared among staff. All provider website links will be available on the Employee Benefits web page at the Open Enrollment link. You will be able to select your doctors and dentists for plans requiring provider designation when making your changes online with PeopleSoft Employee Self Service without any assistance of a provider booklet.

There will also be opportunities to have your questions addressed directly by our medical, dental, FSA and life insurance providers at various open enrollment meetings and at the Annual Open Enrollment Benefits Fair on October 19, 2015 at the Education Center on the front lawn. Carriers will be in attendance along with the Kaiser Mobile Clinic and flu shots will be provided free of charge. Open enrollment meetings are scheduled as shown below:

DATE	SITE	TIME
October 19, 2015 Annual Benefits Fair	Eugene Brucker Education Center Front Lawn (Over-flow parking available at the New Vision Church, main parking lot on the corner of Park Blvd and Meade Ave.)	3:00 p.m. –6:00 p.m.
October 22, 2015	Marshall Middle School In the New Gym	2:00 p.m. – 5:00 p.m.
October 26, 2015	Morse High School Room 103	2:00 p.m. – 5:00 p.m.
October 27, 2015	Transportation Department Classroom 1 and 2	9:00 a.m. – 1:00 p.m.
November 2, 2015	Clairemont High School	2:00 p.m. – 5:00 p.m.
November 4, 2015	Eugene Brucker Education Center Front Lawn	2:00 p.m. – 5:00 p.m.

MEETING FOR RETIREES

October 29, 2015	Ballard Center Auditorium	2:00 p.m. – 5:00 p.m.
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WHAT'S CHANGING FOR PLAN YEAR 2016?

This is a summary of changes. See the attached 2016 VEBA Renewal Information flyer for further details.

Express Scripts Prescription Drug Plan Changes for United Healthcare Members

- New Express Scripts Advantage Network (EAN) Pharmacies Express Scripts has more than 60,000 participating supermarkets, retail stores, drugstore chains, and independent pharmacies in its large network. Within this network, Express Scripts negotiates special deals with specific pharmacies and creates smaller networks such as the Smart90 network introduced last year.
- In an effort to continue to lower costs, the Express Scripts Advantage Network (EAN) will be introduced. The EAN will reward members with lower copays for using more cost-effective pharmacies. It provides broad access with 287 locations in San Diego, 3,784 in California and 34,456 nationally.

Express Scripts Copays to Change

- Most short-term drug copays (up to 30 days) will increase by \$5 at non-EAN or Smart90 pharmacies.
- Most maintenance drug copays (up to 90 days) will continue to be 2 times the cost of short-term drugs at a Smart90 pharmacy or through Express Scripts mail order.
 - If you fill the 4th and following refills of maintenance drugs at a network pharmacy other than Smart90 or Express Scripts Mail Order, you will pay 2 times the short-term medication for a 30-day supply.
- The minimum and maximum amounts you pay for Non-Preferred Brand drugs will increase as follows:
 - **Short-term**, non-preferred brand drugs will increase from \$30 minimum and \$125 maximum in 2015 to **\$40 minimum and \$175 maximum in 2016**
 - **Maintenance**, non-preferred brand drugs will increase from \$60 minimum and \$250 maximum in 2015 to **\$80 minimum and \$350 maximum in 2016**

Express Scripts Members to Pay 100% for Certain Drugs that are Available Over-the-Counter

- Shop around to get the lowest cost for antihistamines, proton-pump inhibitors, etc.
- Choose prescription drugs and/or over-the-counter drugs
- Pay 100% of the cost (copays do not apply)
- Over-the-counter drugs are not available through Express Scripts Mail Order

Medical Plan Changes for Plan Year 2016:

UnitedHealthcare PPO Plan Changes for 2016

- **New Premium Designation PPO Plan** identifies Premium Tier 1 providers and lower-cost facilities.
 - United Healthcare's new Premium Designation PPO plan empowers members to use higher quality providers and free-standing facilities and pay less when they do. This new plan will continue to be in the UnitedHealthcare Select Plus network.
- **Premium Tier 1 Primary Care Providers and Specialists Have Lower Costs.**
 - The Premium Designation PPO plan evaluates primary care providers and specialists across 27 different specialty areas for overall quality and cost effectiveness. Providers who meet quality and/or cost-efficiency requirements are placed in Premium Tier 1. Members who use Premium Tier 1 providers pay lower costs for doing so.
- **Finding a Premium Tier 1 Provider:**
 - Visit www.myuhc.com – Find Physician, Laboratory or Facility – UnitedHealthcare Select Plus
 - You can search by Name, Specialty, Location, Condition or by Premium Tier 1 Providers
 - Premium designation is based on the primary declared specialty of the physician.
 - Providers with the Premium Tier 1 designation will be indicated on the physician profile.
- **Using Free-Standing Facilities Instead of Hospital-Based Facilities Lowers the Cost of Services**
 - The amount facilities charge for standard services, such as x-rays or MRIs, can vary greatly based on where the service is delivered. Hospitals, who carry a significant amount of additional overhead, can charge up to three times as much for the exact same service. To encourage members to use more cost-effective facilities, the new Premium Designation PPO Plan rewards members with lower out of pocket costs when they use free-standing facilities.

WHAT'S NOT CHANGING FOR 2016?

The UnitedHealthcare HMO Networks 1-3 and the Kaiser plan will remain in force with no changes for Plan Year 2016.

The Hartford Life, Supplemental and AD&D Insurance

The Hartford, the district's carrier for life, supplemental life and AD&D, opened up a web-based platform for employees in 2015. This web tool houses all enrollment, coverage details, beneficiary information and provides for new visibility into your life insurance policy, what The Hartford offers in coverage and additional services. If you haven't set-up your account to review your basic life

insurance policy and define beneficiaries, please do so during this open enrollment period at the following web address: <https://enroll.thehartfordatwork.com/Enroll/Login.aspx>. Defining beneficiaries is a critical element to managing your life insurance policy and the open enrollment period is the perfect time each year to review your coverage.

If you are logging in for the first time, follow these instructions:

Your Login ID	Your Password	Questions?
Your login ID is the first letter of your first name and the first letter of your last name followed by your Employee ID # For example: John Smith's Employee ID # is 123456. His login ID is js123456.	Your password is the first letter of your first name and the first letter of your last name followed by your date of birth (YYMMDD). For example: John Smith's birth date is October 25, 1963. His password is js19631025. You will be required to reset your password during your initial login.	Once you log into the site you will have access to tools and information to assist you in your election process. In the event that you require assistance and need to speak with a customer service representative, you can contact us at 855.EZ.NROLL (855.396.7655). Representatives are available Monday through Friday, 5am to 5pm Pacific Time.

Flexible Spending Accounts (FSA)

Eligible employees who wish to participate in the Flexible Spending Account (FSA) Plans for calendar year 2016 will have the opportunity to enroll online via PeopleSoft Employee Self-Service during the open enrollment period, October 19 through November 13, 2015. The Employee Benefits Department will continue to accept paper FSA enrollment forms through November 30, 2015. No FSA enrollment forms will be accepted after November 30, 2015.

Enrollment in a Flexible Spending Account is not automatic. Employees who participated during the 2015 calendar year must re-enroll if participation is desired for the 2016 calendar year.

These FSA Plans are made possible by Section 125 of the Internal Revenue Code which enables employees to set aside pre-tax money from their paychecks to pay for:

- Out-of-pocket health care expenses Annual limit: \$2550
(annual federal limit adjusted up \$50 for plan year 2016)
- Dependent child/elder day care expenses Annual limit: \$5000

The claims administrator for Plan Year 2016 will continue to be American Fidelity Assurance. You can access them on the web at: [American Fidelity Assurance District Landing Page](#).

Please be advised all online enrollment must be completed no later than Friday, November 13, 2015. If an election is made after that date but by November 23, 2015, the enrollment form attached to the circular must be used.

PLEASE NOTE THE FOLLOWING VERY IMPORTANT INFORMATION:

Once this enrollment period is closed, you will not have the opportunity to make additional changes until the next open enrollment period scheduled for October/November 2016. The only exception to this rule is if you experience a qualifying event, as defined in the "Additional Information" section of the Employee Benefits web-page at the link shown above.

If you need additional information or have any uncertainty about your employee/dependent enrollment status, please contact Employee Benefits located in Room 1150-A at the Eugene Brucker Education Center. The Employee Benefits Department regular office hours are 8:00 a.m. to 5:00 p.m. Hours will be extended during the open enrollment period as follows:

- Monday, October 19, 2015 (Annual Health Fair) 8:00 a.m. to 6:00 p.m.
- Monday, Wednesday and Thursday, November 9, 10 and 12, 2015 8:00 a.m. to 6:00 p.m.
- Wednesday, November 11, 2015 *district offices are closed in observance of Veteran's Day.*
- Friday, November 13, 2015 *the office will close at 5:00 p.m.*

Please visit the Employee Benefits Department web site at www.sandiegounified.org for more information regarding Open Enrollment.

For telephone inquiries, the central number is 619.725.8130. We can also be reached by email at employeebenefits@sandi.net. Please be advised that open enrollment results in a high volume of calls and visits to the department. This may result in delayed response times based on the volume at any given time. Be assured, our staff is committed to providing the highest level of customer service possible during this extremely busy period.

Sue Weir
Director, Payroll/Benefits

APPROVED:



Jenny Salkeld
Chief Financial Officer

SW:pa

Attachment (2)

Distribution: List G

2016 FLEXIBLE SPENDING ELECTION FORM

Important Note: If you would like a copy for your records, please bring a copy of the completed form and we will date stamp it. Benefits Operations will not be able to provide you with a copy.

Last Name: _____ **First Name:** _____ **Employee ID#:** _____

Address: _____ **Phone:** () _____

City: _____ **State:** _____ **Zip:** _____

HEALTH CARE FSA (medical, dental, etc...) -- \$2,550 Annual maximum per employee

I wish to redirect \$ _____ for the upcoming plan year (\$ _____ per pay period, **except July and August**)
(total for the year) (ten month amount)
to my Health Care FSA.

DEPENDENT CARE FSA (CHILD CARE) -- \$5,000 Annual maximum per family (or \$2,500 if married filing separately)

I wish to redirect \$ _____ for the upcoming plan year (\$ _____ per pay period, except July and August) to my Dependent Care FSA. I have considered the IRS tax credit available to me. I understand that if I am married and filing a separate tax return, my maximum is \$2,500.

FLEX DEBIT CARD (for Health FSA only) -- I am interested in signing up for the Flex Debit Card.

By checking this box, I understand that American Fidelity will contact me to explain the Flex Debit Card and enroll me, if requested. (Also available for spouse and dependents over the age of 18). You may request information on the Debit Card by emailing DebitCard-Request@americanfidelity.com.

Authorization — Read Carefully

I request and authorize the District to reduce the amount of salary payments due me by the above amount(s) and to divert the amount(s) of such reduction(s) to my FSA account(s).

I agree that the District shall in no way be liable to me or my successors for any monetary damages which might arise from the federal or state tax consequences of my participation in this plan and consistent therewith. I further agree to save and hold harmless the District from any such monetary damages.

I understand that the choices I have indicated above must remain in effect for the entire plan year unless I have an eligible family status change. Eligible family status changes are: change in employee's legal marital status; change in the number of tax dependents; termination or commencement of employment by employee, spouse or dependent; change in work schedule (summer recess and intercession periods are not considered family status changes); dependent satisfies (or ceases to satisfy) dependent eligibility requirements; change in residence or worksite of employee, spouse, or dependent.

I understand that any unused balances in either the Health Care or Dependent Care account at the end of the plan year shall be forfeited.

Signature of Employee

Date

FOR DISTRICT USE ONLY:	<i>Coverage Effective Date: 01/01/2016</i>	<i>No. of Pay Periods: 10</i>
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PLEASE RETURN TO:

**EMPLOYEE BENEFITS DEPARTMENT
Eugene Brucker Education Center
Room 1150-A**

NO LATER THAN NOVEMBER 30, 2015



Your 2016 VEBA Benefits

San Diego Unified School District

California Schools VEBA



Your school district purchases your health care, wellness, and advocacy benefits through the California Schools VEBA.

- **VEBA gives your district purchasing power.** With over 60 school districts and 120,000 members, VEBA negotiates better pricing with the carriers, on your behalf.
- **VEBA serves as your health care safety net.** You get information about the highest-performing providers and we help you navigate the complex health system to get the care you need.

No Changes in 2016



- **Kaiser HMO Plan Benefits**
- **Performance HMO Networks in San Diego**
- **Performance HMO Medical Copays for services** (For example, PCP Office Visits, Emergency Room and Inpatient Hospital Care)
- **OptumHealth EAP and Chiropractic Services**
- **VEBA Advocacy and Wellness Benefits**

What's Changing in 2016



New Express Scripts Advantage Network (EAN) Pharmacies for Short-Term Drugs

The new Express Scripts Advantage Network (EAN) helps lower the cost of out-of-pocket drugs. You can continue to use the pharmacies you use today. However, when you use an EAN pharmacy for short-term drugs, your costs will be lower. Here's a description of the Express Scripts networks for both short-term and maintenance drugs.

Short-Term Drugs (up to a 30-day supply)

Use EAN pharmacy (for lowest cost) or non-EAN pharmacy (you will pay \$5 more)

Maintenance Drugs (up to a 90-day supply)

Use Express Scripts Smart 90 pharmacy or Home Delivery for lowest cost (otherwise you will pay a penalty)

EAN Pharmacies



Non-EAN Pharmacies



Smart90 Pharmacies



Home Delivery





What's Changing In 2016

Express Scripts Members to Pay 100% of the Cost for Two Categories of Medication

Many drugs in these two classes are available both over-the-counter (OTC) and through a doctor's prescription. You will be required to pay 100% of the cost (copays do not apply).

- **Antihistamines** (Examples: Citirizine, Loratadine, Fexofenadine)
- **Proton Pump Inhibitors** (Examples: Nexium, Prilosec, Protonix)

Shop around to get the lowest cost for these medications:

- Choose prescription or OTC drugs, whichever are less expensive
- These will not be available through Express Scripts Mail Order
- Visit: VEBAonline.com → **Members** → **Enroll Here** → **Active Members** → **Choose a Health Plan** (*click on the Express Scripts weblink under your district health plans*)

New UHC Premium Designation PPO Plan to Replace Current PPO Plan

This new plan helps you get the highest quality care at the lowest cost in two ways.

1. **The plan identifies Premium Tier 1 Providers** who have received the highest quality ratings. It gives you the flexibility to choose providers from the following networks:
 - **New Premium Tier 1 Network Providers** are identified as the highest performing providers in 27 specialties and require a low copay at the time of service. (*Note: while oncology and dermatology specialists are not identified in these 27 specialties, if they are UHC network providers, they are automatically included in the Premium Tier 1 network*).
 - **Network Providers** require co-insurance payments (for which you are billed).
 - **Outside-Network Providers** require higher co-insurance payments (for which you are billed).
2. **The plan identifies lower cost outpatient surgery, lab, and x-ray facilities** that provide the same services as hospitals, but because they don't have the same overhead, charge much less.
 - You get lower copays and coinsurance when you use lower-cost outpatient facilities

To find a Premium Tier 1 Provider or Outpatient Facility, visit www.welcometouhc.com → **Find a Doctor** → **Search for a health plan** → **UnitedHealthcare Select Plus**

- Search by Name, Specialty, Location, Condition or by Premium Tier 1 Providers
- Providers with the Premium Tier 1 designation will be shown on the physician profile

Contact Information

Best Doctors — bestdoctors.com 888-362-8677
Employee Assistance Program (EAP) liveandworkwell.com Access code: veba 888-625-4809
Express Scripts — express-scripts.com 800-918-8011 <i>Home Delivery:</i> 800-633-2662
Kaiser — kp.org 800-464-4000
Optum Health (Chiropractic/Acupuncture) myoptumhealthphysicalhealthofca.com <i>Kaiser Members:</i> 800-428-6337 <i>UHC Members:</i> 888-586-6365
UnitedHealthcare — myuhc.com 888-586-6365
VEBA Advocacy Program — vebaonline.com 888-276-0250

