



WHAT'S NEW

2011 Benefits Update

✓ New CDH Gold Plan offered through both Blue Cross Blue Shield of Delaware and Aetna.

✓ Adult children up to age 26 will be eligible for State health, dental and vision coverage, effective July 1, 2011.

✓ DelaWELL, the State's Health Management program, offers expanded services for the 2011-2012 plan year. Take advantage of all DelaWELL offers.

✓ New vision coverage through EyeMed (available to active state employees, retirees and dependents only).

✓ To help you choose the health plan that fits your family best, active state employees will receive a customized Smart Enrollment Analyzer with your medical costs in your mail at home. Please look for it and consider this information in choosing your health plan for 2011 - 2012.

Open Enrollment • May 9 - May 25

The State of Delaware is committed to offering a health care benefits program that provides employees, retirees and their families with the peace of mind in knowing you're covered for routine and preventive care and from the unexpected expense of a significant illness or injury. We understand our comprehensive benefits program is extremely important to you and your family.

As you know, the State must balance the importance of offering valuable coverage with the increasing costs of healthcare. We have reviewed our current health plan options and have added a new option with a lower monthly employee cost than the HMO and Comprehensive PPO plans. Our goal is to provide an option that gives you the opportunity to use tools and resources to learn more about healthcare and to be a more active and engaged consumer in determining how you use healthcare.

For the 2011 - 2012 plan year, the State of Delaware will add a Consumer-Directed Health Plan (CDH Gold) to your health plan options. Please read the rest of this brochure carefully for an overview of the CDH Gold Plan. Enrollment materials from Aetna and Blue Cross Blue Shield of Delaware (BCBSD), as well as the Statewide Benefits Office website, will provide more detailed information.

CDH Gold Plan Offers Choice, Flexibility

BCBSD and Aetna will offer CDH Gold Plan options. This means you can continue to use the same network providers—and still take advantage of the CDH Gold Plan. The CDH Gold Plans will be accompanied by a Health Reimbursement Account (HRA) funded by the State.

The new CDH Gold plan has a higher deductible than the First State Basic and out-of-network deductible for the Comprehensive PPO plans; however, you pay less out of your paycheck for the monthly employee premium than for the HMO or Comprehensive PPO plans. In addition, a large portion of the deductible is paid directly from the Health Reimbursement Account.

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For more benefit information, go to the Statewide Benefits Office website at www.ben.omb.delaware.gov.

CDH Gold Plan Offers Choice, Flexibility, *cont'd*

Highlights of the CDH Gold Plan

You will find detailed information about the CDH Gold Plan in the enrollment materials on the Statewide Benefits website (www.ben.omb.delaware.gov) and at the health fairs. However, these are some highlights of the plan:

- **Preventive care is covered at 100%** with no deductible or copayments (subject to the frequency guidelines provided by BCBSD or Aetna).
- The **CDH Gold Plan includes the same prescription drug coverage** through Medco as the HMO and Comprehensive PPO plans.
- The **CDH Gold Plan functions like a PPO** with in-network and out-of-network benefits. When you use in-network providers, the plan pays 90% for eligible expenses, after the deductible. If you choose out-of-network providers, the plan pays 70% for eligible expenses, after the deductible.
- If you enroll in the CDH Gold Plan, you will also have access to a **State-funded Health Reimbursement Account (HRA)** to offset a large part of the deductible. If you enroll for employee coverage for the 2011 - 2012 plan year, the State will provide \$1,250 in your HRA. If you enroll a spouse or dependents, the State will provide \$2,500 in your HRA for the plan year. For the plan year, you are responsible for deductible amounts of only \$250 for employee coverage or \$500 for other coverage levels, after the HRA is exhausted. Then, the plan begins to pay 90% for eligible expenses (see More About the HRA, on page 3).
- When you reach the annual coinsurance amounts (see next page), the plan pays 100% for eligible expenses for the rest of the plan year.



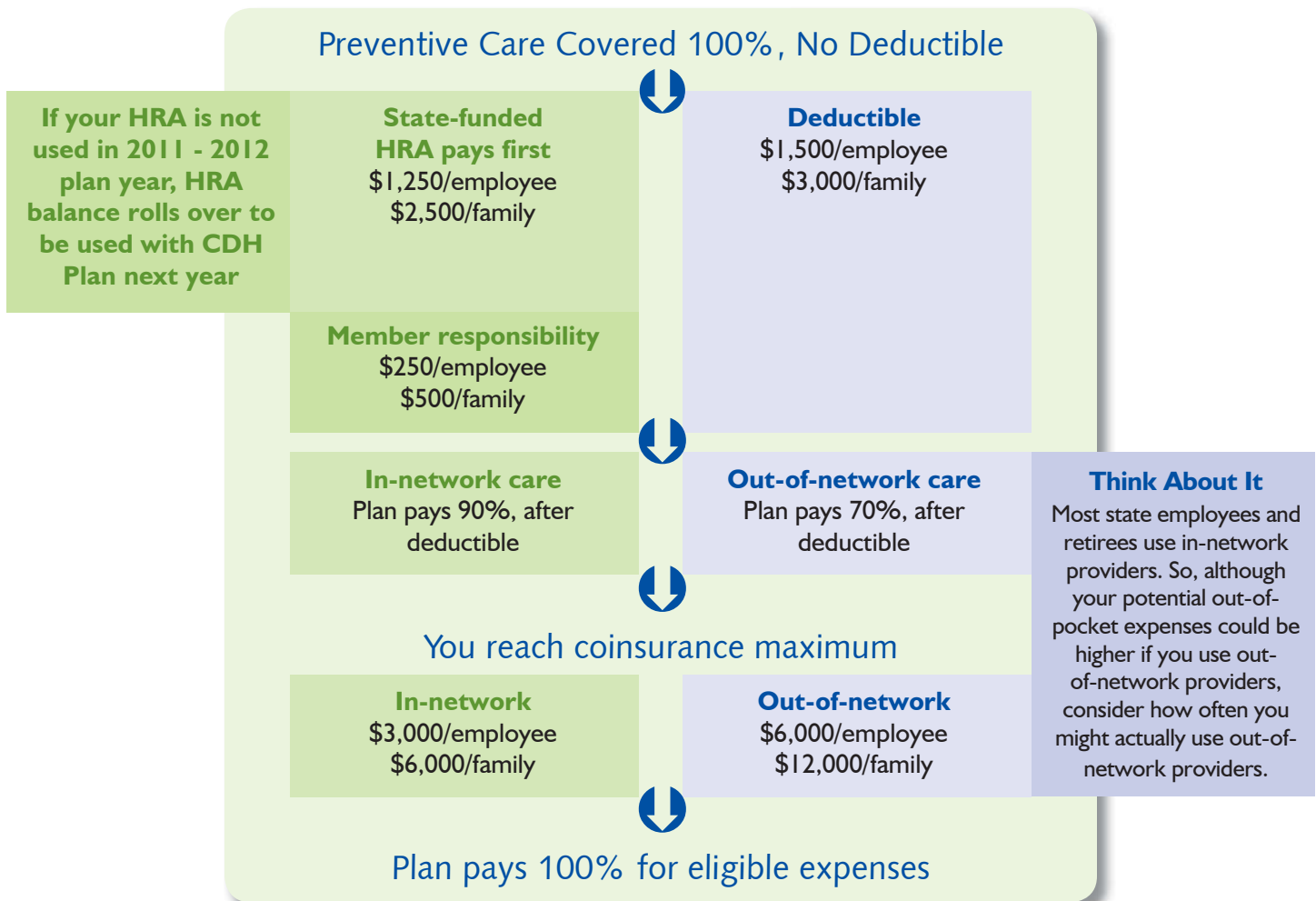
When you choose CDH Gold, you also choose BCBSD or Aetna.

Both BCBSD and Aetna offer the CDH Gold Plan. **The plan features** (deductibles, coinsurance, etc.) **are the same**. You choose the provider network with which you are most comfortable. In addition, BCBSD and Aetna offer different tools to help you estimate the cost of care, locate providers and learn more about healthcare, wellness and chronic conditions. It's important to evaluate the tools available, as well as the providers, when choosing your CDH Gold Plan provider.

More About the HRA

- The State provides the funds in your HRA on a **tax-free basis** and at **no cost** to you.
- The amount allocated to your HRA is based on your level of coverage. For the 2011-2012 plan year, if you enroll in employee coverage, the State will provide \$1,250 in your HRA; if you enroll for employee & spouse, employee & child(ren) or family coverage, the State will provide \$2,500 in your HRA.
- When you have an eligible healthcare claim expense, the allowable claim expense will be automatically deducted from your HRA first. Then you are responsible for paying the rest of the deductible before the plan begins to pay a portion of your expenses.
- If you don't use all the money allocated for your HRA, the balance rolls over from year to year, provided you continue to enroll in a CDH plan.

Consumer-Directed Health Plan With A Health Reimbursement Account



Separate Prescription Drug Coverage

Prescription drug copays will remain the same for the 2011 - 2012 plan year. Your prescription copays do not apply to your deductible or coinsurance maximums.

Look For Your Smart Enrollment Analyzer In The Mail

The State of Delaware realizes that, today more than ever, choosing a health plan can be complicated. It's important to have the right information at the right time to make these choices. That is why the State has worked to provide active state employees with a summary of your healthcare costs for July 1, 2009 through December 31, 2010 to help you make informed decisions during this annual Open Enrollment process.

This *Smart Enrollment Analyzer* will include personalized plan comparison information to help you consider your options.

Look for this valuable and important information in your mail at home!

Coverage for Adult Children Under Age 26 Effective July 1, 2011

Effective July 1, 2011, the State Group Health Insurance Plan (GHIP) will include coverage for adult children up to age 26. Your adult dependent children may be enrolled in the plan, up to age 26, with no requirement or restriction on marital, employment, student, resident or tax status. In other words, you may enroll an otherwise eligible adult child, up to age 26, whether or not the child is married, employed, a student, a tax eligible dependent or living with you.* Coverage of eligible adult children may continue until the end of the month in which the adult child turns age 26.

**The new federal health insurance law relating to dependent coverage of children requires the State of Delaware to offer group health coverage to an employee's children who have not reached age 26. An employee's children only includes sons, daughters, stepchildren and adopted children.*

Coverage for Adult Children Depends on the Plan

The rules that apply to coverage for adult children depend on the plan in which you are enrolled, as well as other factors, including available coverage your child may have through his or her employer. For a complete description of the rules and processes, please refer to the 2011 Open Enrollment booklet, as well as the Administration of Dependent Coverage to Age 26 Policy and the Adult Dependent Coordination of Benefits Form, posted on the Statewide Benefits website at www.ben.omb.delaware.gov/documents/COB.

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Coverage for Adult Children Under Age 26, *continued*

If you enroll in the First State Basic Plan, Aetna HMO, Blue Care® or Comprehensive PPO Plan, these plans are considered to be “grandfathered health plans” under the Patient Protection and Affordable Care Act (PPACA), also known as Health Care Reform. A “grandfathered” health plan is permitted to exclude full benefits coverage for adult children under age 26 if the child has access to medical coverage through his or her own employer under certain circumstances.

Generally, adult children between 21 and 26 who are not full-time students and have medical coverage available through another employer must enroll for that coverage. If they do not, the State will pay 20% of allowable charges for services covered under the State’s health care plan. In order for the State to verify other employer coverage, you must complete the **Adult Dependent Coordination of Benefits Form** for any adult child covered by your health plan who turned 21 before the end of the preceding

calendar year. If you do not return the **Adult Dependent Coordination of Benefits Form to your HR/Benefits Office by June 9, 2011,** the State will pay 20% of allowable charges for services covered under the State’s health care plan (until the form is received).

NOTE: The new CDH Gold Plans are not “grandfathered” plans; therefore, the exclusion for other employee coverage for adult dependents does not apply and an **Adult Dependent Coordination of Benefits Form** is not required.

With the extension of coverage for dependents to age 26 as of July 1, 2011, you may also enroll or change your current election in the Health Care Flexible Spending Account. To enroll or make a change, complete the Election Change form at www.ben.omb.delaware.gov/fsa and follow the instructions for faxing the form to the Statewide Benefits Office.

See Clearly with New EyeMed Vision Care Plan

Part of maintaining your overall health is taking care of your whole self, including vision care. That is why the State of Delaware is pleased to introduce a new vision plan effective July 1, 2011. The EyeMed Vision Care plan offers active state employees, retirees and their dependents access to valuable savings on vision care, including exams, eyeglasses and contact lenses at very competitive rates. In addition, EyeMed offers discounts on vision correction procedures, such as LASIK, as well as additional discounts on eyeglasses and contact lenses after the initial benefit has been used.

Through the State of Delaware Access Network, you have access to in-network providers at leading optical retailers, such as LensCrafters® or Pearle Vision,® as well as thousands of private practitioners.

In addition, with the EyeMed Vision Care plan, you have the option of using out-of-network providers and still receiving a set reimbursement for exams, eyeglasses and contact lenses. You may receive benefits once every 12 months for exams, frames, lenses or contact lenses.

NOTE: School district employees with a district vision plan are not eligible for the state vision plan.

Please refer to the Open Enrollment booklet for detailed information on the EyeMed Vision Care plan costs, benefits, limitations and restrictions. Additional information will also be available from EyeMed at the health fairs.



Expanded DelaWELL Services for 2011-2012

We all know it's important to take care of our health, but the demands of our daily lives often take a priority over finding the time to get the information we need to develop a plan and work to achieve our health and quality of life goals.



As you think about your benefits during annual enrollment this year, it is also a good time to review all the health and wellness options available to you and your family through the **DelaWELL Health Management program**. If you are enrolled in a State of Delaware Group Health Plan (as an active employee or non-Medicare retiree), you (and your dependents) can take advantage of DelaWELL's **free** programs—you may even earn an **incentive** when you participate!

On average, the State of Delaware contributes 93% of the cost of healthcare coverage for employees, retirees and dependents. As a valuable and major part of your overall compensation, it's up to each of us to use the information and resources available to take control of our health and quality of life—and at the same time take control of healthcare costs.

Participating in DelaWELL is one way to help share the responsibility of managing rising costs. By helping you and your family stay healthy and manage risk factors such as obesity, smoking, diet and lack of exercise, we all benefit.

Begin the journey toward wellness today for you and your family by identifying and managing risk factors and making healthy choices. Commit to wellness today!

DelaWELL Health Management Program

The DelaWELL comprehensive wellness and condition care program continues exciting initiatives beginning July 1, 2011:

- Confidential, Online Wellness Assessment
- Onsite Biometric Health Screenings to include blood pressure, cholesterol and glucose testing
- Health Coaching
- Condition Care Programs
- Online Health Resources
- Onsite and Online Health Seminars
- Wellness Challenges
- Confidential Nurse24 line at 1-866-674-9103

If there is a conflict in interpretation between the contents of this booklet and the contract provisions and existing law pertaining to any of the enclosed benefit programs, contract provisions and existing law govern.



And Remember the Incentive!

Benefit-eligible state agency, school district, charter school and higher education employees, as well as non-Medicare eligible pensioners, who are currently enrolled in a State of Delaware Group Health Plan can earn a DelaWELL incentive in the 2011 - 2012 plan year as follows:

- ✓ \$100 for completing an annual Wellness Assessment and Health Screening
- ✓ \$200 for completing an annual Wellness Assessment, Health Screening and enrolling in a Health Coaching or Condition Care Program

For more about DelaWELL or for information on how to earn incentives, visit <http://delawell.delaware.gov/> today!

