



**EMPLOYEE BENEFITS
OPEN ENROLLMENT**



Agenda

- What is Open Enrollment ?
- Look at each benefit and discuss any changes.
- Question and Answer.



What is Open Enrollment?

- Why do we have it?
 - The only time period which allows you to add, cancel, or make changes to your employee benefits.
- Changes to think about?
 - Have you changed your name or address?
 - Have you been married, divorced, had a baby, had a child to marry, etc.?
 - Have you had a death in the family?
 - Do you need to increase/decrease your Supplemental Life Insurance?
 - Do you need to add/delete Dependent Life Coverage?
 - Do you need to change your beneficiary?
 - What new FSA Changes are coming in 2011.
- Changes become Effective – January 1, 2011
- Deadline for submitting paperwork
 - December 10, 2010



2011

Health Insurance

- Two Plans will be offered this year:
 - Basic Medical Plan
 - Enhanced Medical Plan available with :
 - Participation in the Health Risk Assessment
 - Wellness Program
 - Compliance with Disease Management Program
 - Both Plans include Medical, Dental, and Prescription Drug Coverage



Enhanced Medical Plan

- To Enroll in this plan you are required to:
 - Participate in the Wellness Program offered by Quantum Health and Wellness
 - Complete a Health Risk Assessment
 - Compliance with Wellness Program and Disease Management Program (if required)
 - Participation would be based on the results of your lab work and biometric screenings
 - Diseases include: Cholesterol, Hypertension, Diabetes, Obesity
 - Quantum provides Health Coaches to assist you with your needs based on your health condition
 - Monthly onsite – vital checks with education materials provided
 - Additional resources provided
 - Newsletters
 - Online system for communication
 - Tele-classes are offered quarterly



Basic Medical Plan

To enroll in this plan you must:

- Be a fulltime employee with 30 or more hours.
- You elect coverage for you and any qualifying dependents.
- Complete the Enrollment Form.
- Pay the higher Premium on a bi-weekly basis.
- **You don't participate in Wellness/Disease Management Program or you fall out of compliance with Enhanced Plan.**



2011 Medical Plans Comparison



Benefit	Basic Medical Plan		Enhanced Medical Plan	
	In-Network	Out-of Network	In-Network	Out-of-Network
Deductible	\$ 1,500 Per covered Person	\$ 4,500 Per Covered Person	\$ 500 Per Covered Person	\$ 1,500 Per Covered Person
Out of Pocket Maximum	\$6000 Per Covered Person	Unlimited	\$2500 Per Covered Person	Unlimited

2011 Medical Plans Comparison Continuation



Benefit	Basic Medical Plan		Enhanced Medical Plan	
	In-Network	Out-of Network	In-Network	Out-of-Network
Hospital In and Outpatient				
Radiology				
Pathology				
Maternity Care				
Ambulance				
Diagnostic Testing	60% after CYD	40% after CYD	80% after CYD	50% after CYD
Office Visit	60% after CYD	40% after CYD	20% co-pay after CYD	50% after CYD

2011 Medical Plans Comparison Continuation



Benefit	Basic Medical Plan		Enhanced Medical Plan	
	In-Network	Out-of Network	In-Network	Out-of-Network
Preventative Care				
Well Adult			\$500 Per Covered	Not Covered
Well Child	60% after CYD	40% after CYD	Person Per Year	
Vision	Eye Exam Only Covered at 100% up to \$100 with \$25 copay		Eye Exam Only Covered at 100% up to \$100 with \$25 copay	
Emergency Care	\$500 copay, 60% after CYD	40% after CYD	\$500 copay, 80% after CYD	50% after CYD
Chiropractic Care	Max of \$27.50 per visit and \$1000 per year	Max of \$27.50 per visit and \$1000 per year	Max of \$27.50 per visit and \$1000 per year	Max of \$27.50 per visit and \$1000 per year

Benefits Remaining

- Lab Services
 - Doctor's Lab – (South GA Area) - Client # 12191
 - Quest Laboratories – www.mylabisquest.com
- Urgent Care Clinics
- Gym Membership Reimbursement
 - ½ of fee up to \$150 per family
- Well Adult includes: Annual exam (no Ultrasound), pap, mammogram, PSA, Immunizations, lab work.
- Well Child includes exam, immunizations.

Prescription Coverage

	2010 Plan	2011 Plan
OTC	N/A	N/A
Generic	\$10	\$10
Brand Formulary	35%	35%
Brand Non-Formulary	60%	60%
Specialty and Injectables	\$10,000 max per yr	\$10,000 max per yr

Partners Rx

90 day supply mail order available

www.partnersrx.com



Dental Plan

- **No Changes-Coverage will remain the same.**
 - Preventative Visits a year – 100%
 - Basic – X-rays, Fillings, Etc – 80% **of UC**
 - Major – Crowns, Dentures, Etc – 50%
- **No Dental Network Required**
- **May be responsible for filing your own dental claims if a dental provider does not file for you**



Waiting Periods

- **Health – Creditable Coverage Letters**

Medical conditions that you may currently have or have been treated for within the last 6 months before employment with Stafford, may not be covered for 1 year. This includes prescriptions that you are taking to treat this medical condition (Ex. You have high blood_pressure and are taking Lipitor-may not be covered for 1 year.)



Employee Responsibilities

- Read your Summary Plan Description-know what is covered and what is excluded, as well as limitations on certain benefits.
- Pre-certification.
- Preferred Provider Options and Be Proactive with your Prescription usage (Provide your physician with the Formulary)
- Make sure you are giving Providers the new Insurance Card which will be **re-issued 2011**.



STAFFORD HEALTH PLAN

2011 Cost

Cost	Basic Plan	Enhanced Plan
Single	\$ 80	\$ 73
Employee +1	\$ 160	\$ 146
Family	\$ 205	\$ 170



401(k) Blueprint – Fidelity

Plan Name	STAFFORD DEVELOPMENT COMPANY
Eligibility with:	All Employees 21 years of age or older. 90 days of service.
Plan Entry Dates Employee Contributions:	Quarterly Enrollment. Contribute 3-15% of each paycheck before taxes.
Catch-Up Contributions:	The plan permits participants to make a catch up contribution if age 50 or older. These amounts are additional amounts that you may defer regardless of other limits imposed by the plan.
Fidelity Customer Service:	800-294-4015 – www.netbenefits.c



AFLAC Voluntary Products

- Cancer.
- Accident.
- Specified Health Event.
- Short Term Disability, Hospital, Sickness and Dental.
- Guaranteed Issued Life Insurance through Boston Mutual.



Prepaid Legal / Identity Theft Protection

- Prepaid Legal – (employee & spouse covered)
 - Will Preparation
 - Legal Consultation & Advise
 - Defense Services
 - Contract & Document Review
 - \$15.95 monthly
- Identity Theft
 - Free Credit Report and Continuous Credit Monitoring
 - Identity Restoration
 - \$12.95 monthly



Flexible Spending Account

- **WHAT IS THE FLEXIBLE BENEFIT PLAN?**

FSA allows you to pay for essential health care expenses that are not covered or partially covered by your group insurance. You can use these contributions to help pay for out of pocket expenses such as deductibles, co-payments and eligible expenses for which you have no coverage at all.

- **WHAT DOES IT COST TO PARTICIPATE?**

Nothing! There is no cost to you...no setup fee and no hidden fees.

- **HOW WILL THIS PLAN BENEFIT YOU?**

By electing a specified amount to be deducted on a bi-weekly basis from your gross income, this money is deducted as pre-tax dollars. Since your taxable gross income is lowered, you pay less federal income tax and social security tax and saves you from 20% to 40% based on the individual tax rate . Thus, your total take-home pay is more.

- **WHO IS ELIGIBLE?**

All employees who work at least 30 hours a week, are not a member of a collective bargaining unit, and are not a leased employee are eligible to participate in the plan the first day of the month after completing 90 days of service.



Flexible Spending Account

- **TWO REIMBURSEMENT OPTIONS:**
 1. FSA card
 2. Pay for the out of pocket expense and submit a Claim form for reimbursement.
- You do not have to participate in the health plan to be eligible to participate in the flex plan.
- You have immediate access to the money you elect to contribute for the year.
- The maximum contribution per year is \$5000.00.
- May be used for all of your qualified dependents.
- **Deadline for Filing Claims**
 - 12/31/10 – 3 month grace period for claims to be submitted on a FSA Grace Period Reimbursement Form. You will not be able to use your card from the previous year on expenses for the present year.
- **Save Your Receipts! IRS requires documentation**



Additional Flex Information

- Eligible Items include: Deductibles, Coinsurance, orthodontics, wheelchairs, Lasiks eye surgery, OTC's, etc.
- Approved Merchants – will reduce the number of receipts that are requested.
- Dependent Care Plan Available.
- Additional List, information, and Multimedia is available on the Intranet site
- **Change for 2011- Over the Counter Medication will not be covered.**
- www.flexdirect.adp.com.



ADP IPAY

Advantages of Going Paperless

- Receive a email notification from ADP when your pay stub is ready for viewing
 - Access your earning statements 24 hours a day and 7 days a week
 - Able to print your W-2 form
 - Financial Tools:
 - Salary Paycheck Calculator –
 - Hourly Paycheck Calculator –
 - Gross Paycheck Calculator –
- View previous check stubs for previous years



Contact and Deadlines

- Contact for Health Plan –
New Name Vantage Benefits in 2011
 - Christine Price – 888-889-6494
 - Paula Avila– 229-238-0877
 - Email: PaulaAvila@StaffordDev.com
 - Deadline to submit all paperwork or communicate changes December 10, 2010.
- Information is available on the Stafford Intranet Site
- Packets are available upon request



Questions/Comments?

THANK YOU.