

# 2011 Benefit Plan Changes...

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CBIZ has made a few changes to the employee benefit plans for the 2011 plan year; summarized here for your convenience. If you have specific questions, please contact the applicable carrier at the phone number listed in your enrollment book. You may also call the Employee Service Center at 1-877-227-4372 or refer to summary plan documents posted at [www.cbizesc.com](http://www.cbizesc.com).

A change to benefit eligibility for all CBIZ plans has occurred due to the Patient Protection and Affordable Care Act (or PPACA). To date CBIZ has considered dependent children as eligible to participate in CBIZ benefit plans up through the end of the month in which they turn 25, regardless of student status. Effective 1.1.2011, dependent coverage may continue through the end of the month in which he/she reaches age 26 regardless of student status. Other eligibility rules may apply to your dependent; see complete rules at [www.cbizesc.com](http://www.cbizesc.com). The Open Enrollment period is always an opportunity to add dependents, if eligible, who are not already enrolled in a CBIZ plan.

## Medical Insurance Plans

*The CBIZ medical plans will be considered “grandfathered” under PPACA. This means that reforms to the US health care system recently publicized through the Patient Protection and Affordable Care Act will only impact the CBIZ medical plans in a minor way.*

1

*In-network preventative services, as defined by PPACA, will be covered at 100% regardless of the CBIZ medical plan you choose. There will be minimal impact to you as a majority of these preventative medical services are already paid at 100% by the CBIZ plans.*

2

*PPACA requires all plans to eliminate lifetime maximum limits. Therefore, CBIZ will remove the lifetime maximum limits from all of our plans. This change will only impact the the out-of-network limit on the \$500 and \$1000 Deductible Plans.*

## Value-Based Prescription Program (launched in 2010)

1

*Associates who enroll in the 2011 Qualified High Deductible Health Plan once again will enjoy the Tier 1 Preventative Prescription Drug Program. Preventative prescriptions posted as Tier 1 in the UHC formulary will be covered at 100% and will not be subject to the medical plan deductible. Please refer to the “Preventive Prescription Drug Program” flyer posted at the CBIZ ESC website ([www.cbizesc.com](http://www.cbizesc.com)) for specific information on this program.*

2

*Select associates enrolled in the 2011 traditional plans, either the \$500 or \$1000 deductible plans, will continue to enjoy lower costs for select prescription medications through the Value-Based Prescription Drug program. This program continues for the employees, spouses and children enrolled in these plans, using prescription medications to prevent or treat Asthma, Coronary Artery Disease and Diabetes.*

3

There were a number of program rules introduced in 2010 including requirements to be met by the employee and/or spouse, in order to continue with these incentive-priced medications. Although the carriers reported good compliance with the program requirements, it has been determined that all individuals enjoying the discounts this year should be allowed to continue. All medications in this program are vital to the continuing health of these members, and at a reduced price we expect your compliance with doctor's orders will remain high. See further details at [www.cbizesc.com](http://www.cbizesc.com).

## Optional Life Insurance

1

The premium costs for the optional life insurance plan have been reduced. With this reduction, there will be a new one-time opportunity during the 2011 open enrollment period to purchase an additional \$20,000 in life insurance up to the guarantee issue amount\* without medical underwriting (\$5000 for spouses).

\*The Plan has always allowed for a guarantee issue amount when an individual has an initial opportunity to enroll. The guarantee issue amount is equal to the lesser of three times your annual salary or \$500,000.

## Great Health Program

1

There will be new requirements for obtaining a premium discount in 2012. Watch for information on the new program requirements in January 2011.

2

Continue to check the CBIZ ESC website for **Great Health Highlights**. These Highlights offer further details on the various resources associates have available through the Great Health program that we think are important for you and your dependents. The **Great Health Highlights** can be found at [www.cbizesc.com](http://www.cbizesc.com) under the "Great Health" heading on the left side of the main menu or on the new Great Health program webpage (<http://intranet.cbiz.com/greathhealth>), Great Health Highlights tab.

## Cafeteria Plan

1

A final change to the CBIZ plans, due to PPACA, is specific to the flexible spending accounts that are part of the Cafeteria Plan. Plan participants, with a medical Flexible Spending Account or Health Savings Account, may no longer receive reimbursement, or use an HSA, to cover the costs of over-the-counter medications (except for insulin, saline solution, band-aids, etc.) unless the medications have been prescribed by a physician.

2

The Flex Plan Administrator will require a copy of a prescription to keep on file, in order for a participant to receive reimbursement for over-the-counter medication claims. The debit cards will no longer be an acceptable means of payment for OTC drugs without first providing a prescription. Further details are posted at [www.cbizesc.com](http://www.cbizesc.com) or [www.myflexonline.com](http://www.myflexonline.com).