

Beth Israel Deaconess Medical Center

Benefits Program Overview



Beth Israel Deaconess
Medical Center



Agenda

- BIDMC benefits
- Eligibility and enrollment
- Health plans
- Insurance plans
- Flexible Spending Accounts
- Retirement program
- Other BIDMC programs
- Enrolling through “Employee Connection”
- Where to go for help
- Wrap Up





BIDMC Benefits

- Broad-based
- Flexible, offering choice in coverage
- Cost-effective, with opportunities for tax savings

BIDMC offers you a broad range of benefit options to meet your personal and family needs.





Eligibility

- **For you:**
 - > Budgeted regular position, scheduled for 20+ hours per week
- **For your dependents:**
 - > Your spouse (or same-sex partner if you live outside MA)
 - > Unmarried dependent children up to age 19, up to age 26, depending on the plan, if a full-time student or tax dependent
 - > Massachusetts provides an extension for medical coverage: To the earlier of age 26 or two calendar years after dependent no longer claimed on federal tax return

Special tax rules may apply for same-sex partners and children over age 19 who are no longer full-time students—contact the Benefits Office for details.





Automatic Enrollment

- Automatic enrollment in these benefits fully paid by BIDMC:
 - > Basic Life Insurance
 - > Trainee Short-Term Disability Insurance
 - > Long-Term Disability Insurance (50% benefit)
 - > HIV Supplemental Benefit Plan
 - > Business Travel Accident Policy
- All other benefits you must enroll in via Employee Connection





When Coverage Begins

- New Trainees:
 - > First day of employment
 - > You will receive your medical card within 3 weeks. If you have a doctor's appointment or need a prescription filled prior to the 3 weeks, you will need to pay out of pocket and then get reimbursed.





When Coverage Begins (cont'd)

- If you don't enroll within 30 days, you must wait for the next plan year, unless you have a qualifying change in status.
- For example:
 - > Marriage, legal separation, divorce, death
 - > Change in a spouse's benefit coverage
 - > Birth or adoption of a child
 - > Change in eligibility status





Medical Plan Costs

- BIDMC pays a large portion of the cost of medical coverage.
- Your cost depends on choice of plan, coverage level, work status: full-time (30-40 hours/week) or part-time (20-29.9 hours/week).
- Your share is pre-tax.

NOTE: If you are a resident of Massachusetts, you must enroll for medical coverage or complete an Employee Health Insurance Disclosure (HIRD) form.





Medical Plans

- Harvard Pilgrim Health Care (HPHC)
 - > Point of Service (POS) Value and Plus Plan
 - > Preferred Provider Organization (PPO)
- All plans offer Out-of-Network coverage
- All plans include prescription drug coverage (administered by Caremark)





Harvard Pilgrim POS Plans

- CareGroup Value and PLUS Point-of-service (POS) plans
- You choose a primary care physician (PCP) to coordinate care
- Your deductibles, copays, coinsurance and out-of-pocket limits vary based on plan selected
- Under both plans, you receive the most cost effective coverage when you receive treatment from CareGroup providers
- CareGroup Value Plan
 - > Lower weekly premium costs
 - > You pay more out-of-pocket for care
 - > Hospitalization not covered in full
- CareGroup Plus Plan
 - > Covers 100% all inpatient services including Day Surgery and Maternity Care
 - > Lowest office visit co-payment





Harvard Pilgrim PPO

- A preferred provider organization (PPO) that offers both in- and out-of-network coverage levels
- No discount for CareGroup facilities and physicians
- No requirement to name a primary care physician; you coordinate your own care





Prescription Drug Coverage

The Value, Plus and PPO plans include prescription drug coverage at participating Caremark pharmacies (CVS, Walgreen's, Brooks, Rite-Aid, etc.).

	Retail Pharmacy (30-day supply)	Mail Service (90-day supply)
Tier 1: Generic	\$10	\$20
Tier 2: Formulary brand	\$25	\$50
Tier 3: Non formulary	\$50	\$150

***Administered by Caremark with a separate ID card**



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Dental

- Delta Dental PPO Plus Premier Plan
 - > Includes access to 95% of MA dentists
- Includes a rollover provision (a portion of the unused annual benefit maximum may be rolled over to the next year)
- Covers dependent children to age 19, age 26 for full-time students

You pay the full cost of coverage (pre-tax).





Dental Benefits

Service	You Pay...
Preventive care (cleanings)	Nothing; plan pays 100%
Basic restorative care (fillings, oral surgery)	20% after \$50/person; \$150/family deductible
Major restorative care* (crowns, bridges)	50% after \$50/person; \$150/family deductible
Orthodontia (under age 19)	50%
Maximum benefits	\$2,000/person per year; \$2,000/child lifetime for orthodontia

***Dental coverage is immediate except for major restorative care which has a 6-month waiting period for new employees.**





EyeMed Vision

Service	In-network Cost	Out-of-network Cost
Eye exam	Not covered (check with your medical plan)	Not covered (check with your medical plan)
Lenses	\$10 copay	\$42 to \$130 reimbursement based on type of lenses
Frames (once every 12 months)	\$140 allowance plus 15% discount on balance over \$140	\$82 reimbursement
Contacts (once every 12 months)	\$140 allowance plus 20% discount on balance over \$140	\$112 to \$200 reimbursement depending on type of contacts
Medically necessary	You pay nothing	\$200 reimbursement
Laser vision correction	Discounts available	No coverage





Life/Accident Insurance (for You)

- Basic Life Insurance (automatic; fully BIDMC paid):
 - > 1 times annual base pay
- Supplemental Life Insurance (optional; paid by you after-tax):
 - > Elect up to 5 times pay in ½ annual base pay increments
 - > Evidence of insurability required for supplemental coverage in excess of \$500,000
- Accidental Death & Dismemberment (optional; paid by you after-tax):
 - > ½ up to 6 times pay in ½ annual base pay increments
- You must name beneficiaries.





Life Insurance for Dependents

- For your spouse/domestic partner:
 - > \$10,000, \$25,000, \$50,000 or \$100,000
 - > Evidence of insurability required for coverage in excess of \$25,000, or for any amount of coverage you elect after your initial eligibility date
- For your dependent children (to age 19, to age 25 for full-time students):
 - > \$10,000 per child
 - > No evidence of insurability required
- You pay the full cost after-tax.
- You are the beneficiary.





Disability Insurance

Short-Term Disability (STD)

- Coverage up to the first 6 months

Long-Term Disability (LTD)

- Coverage after the first 6 months





Short-term Disability (STD)

- Automatically enrolled, at no cost to you
- Must be out of work and unable to perform the duties of your job due to illness or injury
- Generally
 - > Weeks 1 to 8 are covered at 100% of your base pay
 - > Weeks 9 to 26 are covered at 60% of your base pay
- This plan is administered by the Medical Center





Long-term Disability (LTD)

- BIDMC provides full-time employees 50% LTD coverage at no cost to you.
- You may buy up to a 60% LTD benefit (after-tax).
- After a 6-month waiting period, plan pays 50% or 60% of your base pay, depending on your election.
- The maximum monthly LTD benefit is \$7,500 per month.
- LTD benefits are offset by other disability income, e.g., Social Security disability benefits, Workers' Compensation.
- Plan benefits are payable as long as you are totally disabled, usually up to age 65.





Flexible Spending Accounts

- Flexible Spending Accounts (FSA) help pay for eligible out-of-pocket health care and/or dependent day care expenses with tax-free dollars.
- IRS rules apply:
 - > “Use-it-or-lose-it” — Estimate your contributions carefully. You must use all the money in your account for eligible expenses incurred during the plan year; otherwise you forfeit your unused balance.*
 - > All claims for Health Care reimbursement must be filed by March 31 of the following year.
 - > You must re-enroll each year.

** For the health care account only, you can submit expenses incurred up to March 15 of the following year for reimbursement from your account.*





Health Care FSA

- You may contribute from \$52 up to \$5,000 per year.
- Eligible expenses include:
 - > Deductibles, copays and coinsurance
 - > Medical, dental and vision services not covered by insurance
 - > Eyeglasses and contacts
 - > Hearing aids
 - > Over-the-counter medications (pain relievers, cold and allergy medications, antihistamines and antacids)
- A Debit Card is provided





Dependent Care FSA

- You may contribute from \$52 up to \$5,000 per year (\$2,500 if married and filing separately).
- Eligible dependents include:
 - > Your dependent child under age 13
 - > Other dependents (parent, spouse, elderly relative) physically or mentally unable to care for themselves and dependent on you for support
- Eligible expenses include:
 - > Dependent care in your home
 - > Dependent care outside your home, including home or daycare centers
 - > Nursery school or kindergarten expenses
 - > After school programs or summer day camps

Before you enroll, compare your tax savings under the dependent care FSA and the federal income tax credit.





Commuter Services FSA

- You may contribute up to \$230 a month towards this account for parking expense reimbursements.
 - > A Commuter Services representative will be available today to give you more information.





Retirement Program

- 401(k) Savings and Investment Plan
- Voluntary 403(b) Plan





401(k) Savings & Investment Plan

- > For 2009, you can save up to \$16,500 per year pre-tax, plus another \$5,500 in catch-up contributions if you are age 50 or older.
- > You are 100% vested in your savings
- > You invest your savings in a core group of Fidelity Investments funds
- > You can change contributions and investment elections any time
- > Loans and financial hardship withdrawals are available

Contact Fidelity Investments directly by phone or via the web site.





Voluntary 403(b) Plan

- Similar rules apply as the 401(k)
- You can invest your savings in an expanded group of Fidelity Investments funds
- Combined contributions to the 401(k) and 403(b) plans cannot exceed the IRS limit (\$16,500 for 2009)

Contact Fidelity Investments directly by phone or via the web site.





Additional BIDMC Programs

- ARAG Legal and Financial Advisory Plan
- Parents in a Pinch
- Employee Assistance Program
- Tanger Be Well Center





Employee Connection

- Online, self-service Benefits Enrollment & Information Service
- Same username and password as Outlook
- Manager must request access before your username and password is issued by IS
- Contact IS if you have access issues
- Available at work or from home, 24/7
 - > Enroll for benefits: Log on to the Employee Connection by using your ITS/Outlook username and password, and follow the prompts.

IS Helpdesk: x48080





Employee Connection – Features

- Important Uses of Employee Connection
 - > Access benefit information
 - > Update/view personal information
 - > View and print paycheck stubs
 - > Stop receipt of paper pay stubs
 - > Change
 - Address
 - Emergency contact information
 - Federal W4
 - Direct deposit



Where to Go for Help

Benefits Staff

Human Resources 169 Pilgrim Road, The Libby Building, BIDMC West Campus (by appointment only)	617-632-9400; internal (63)2-9400	benefits@bidmc.harvard.edu or visit our webpage: General Portal>Employee Resources>Human Resources>Departments/Contacts>Benefits
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Key Providers

Harvard Pilgrim	1-888-333-4742	www.harvardpilgrim.org
Caremark	1-800-386-8512	www.caremark.com/bidmc
Neighborhood Health	1-800-433-5556	www.nhp.org
Delta Dental	1-800-872-0500	www.deltadentalma.com
EyeMed	1-866-723-0514	www.eyemedvisioncare.com
ING	1-800-537-5024	www.ing-usa.com
ARAG Legal	1-800-888-4184	www.araggroup.com
Benefit Strategies LLC (FSA)	1-888-401-3539	www.benstrat.com
Fidelity Investments	1-800-343-0860	www.fidelity.com/atwork



Wrap Up

- Employee Connection – you must enroll online within 30 days
- Questions

Again, welcome to BIDMC!

