

2017 HEALTH PLAN CHANGES

YOUR MEDICAL OPTIONS

Choice of Traditional Plan or High Deductible Plan:

MEDICAL BENEFITS	TRADITIONAL PLAN	HIGH DEDUCTIBLE HEALTH PLAN (HDHP)
Annual Medical Deductible		
Individual Family	\$200 \$600	\$1,500 \$3,000
Reimbursement Percentage	Plan pays 80% Plan pays 60% (non-PPO facility)	
Out-of-Pocket Maximum (Not including deductible) Individual	\$1,000	\$2,000
Family Chiropractic and Rolfing Services	\$3,000 \$4,000 20 visits / calendar year	
Acupuncture	20 visits / calendar year	
Physical Therapy		alendar year ved based on medical necessity)
Prescription Drug Coverage Generic Copay Preferred Brand Copay Non-preferred Brand Copay Specialty Copay	\$5 \$25 \$50 \$100 (limited to a 30-day supply)	
Health Reimbursement Arrangement	None	\$750 / year*
Employee contribution (annual)	\$3,727.92	\$2,229.76**

^{*\$375} will be credited on January 1 for January – June 2017. Another \$750 will be credited on July 1 for the period July 2017 – June 2018.

What is a Health Reimbursement Arrangement (HRA)?

An HRA allows KPBSD to set aside funds for you to spend on qualified health care expenses. Money not used in one calendar year can be rolled over from year-to-year. If you enroll in the High Deductible Health Plan, KPBSD will contribute \$375 to your HRA account on January 1, 2017. If you are enrolled in the HRA on July 1st (the first day of the fiscal year), KPBSD will contribute another \$750 to your HRA account.

You may use these funds for you and your dependents who are enrolled in the HDHP. If you terminate KPBSD employment, the funds will be forfeited.

Your HRA funds can be used towards medical, prescription, dental, and vision expenses. The HRA will be administered by Rehn. A claim form will be made available to submit for HRA reimbursements.

How the HRA works with a Health Care Flexible Spending Account (FSA):

You may have both an HRA and enroll in a Health Care FSA. Expenses are paid from the Health Care FSA first, because that account is "use it or lose it." A Flexible Spending Account is available to employees through American Fidelity. It is not a part of the health plan.



^{**}Based on broker recommended rate.

SEPARATE DENTAL AND VISION COVERAGE OPTION

DENTAL	TRADITIONAL OR HDHP PLAN
Annual Deductible Individual Family	\$50 \$150
Reimbursement Percentage Preventive Basic Major	Plan pays 100% (not subject to the deductible) Plan pays 100% Plan pays 50%
Calendar Year Benefit Maximum	\$2,500

VISION	TRADITIONAL OR HDHP PLAN
Eye Exam	Plan pays 80%
Frames	Plan pays 80% up to \$100 every two years
Lenses	Plan pays 80%
Contacts	Plan pays 80%

Allowable charges and all plan provisions apply. Please see the Summary Plan Description for more information.

<u>OPEN ENROLLMENT: NOVEMBER 14 – DECEMBER 16</u>

- ✓ You MUST enroll no later than 4:30PM on December 16, 2016.
- ✓ If you do not turn in an enrollment form, your enrollment in the Traditional Plan will remain the same and you will have Dental and Vision coverage.
- ✓ Enrollment forms will be mailed to you in your Open Enrollment packets and will also be available online at http://www.kpbsd.k12.ak.us/employees.aspx?id=5232

QUESTIONS:

✓ Call Stacey Cockroft at 907-714-8879

