



## IMPORTANT NOTICE 2012 PLAN CHANGES

The Maine Municipal Employees Health Trust (MMEHT) Board of Trustees annually considers benefit plan updates to help meet the needs of our members, manage premium costs if possible, and to be competitive in the commercial insurance market. As a result, the Trustees recently approved a number of changes to the flexible benefit program available to you through your employer's participation in the Health Trust.

**This notice will provide an overview of the employee benefit changes for participants and their dependents effective January 1, 2012. Your employer may offer some or all of the options available through the Trust.**

**Changes Effective January 1, 2012:** In summary, there are changes to the existing medical plans; updates to the medical plan options; an enhancement to the dental plan; and a change in life insurance carriers. Please see below and pages within for the details of these changes. Additional information will be mailed to you in the coming months.

- **Medical Plan-Existing Plans- Benefit Changes.** In an effort to capture some potential premium cost savings, the changes to the existing medical plans will result in some additional participant out-of-pocket cost shares for certain benefits. There are clarifications to the specialist copays for the PPO plans; increases in the emergency room department copayments, and a change to a new five-tier prescription drug program. All enrollees in the medical plan will receive new ID cards by 2012.
- **Medical Plans – Plan Options for 2012.** Participating employers decide what plans to offer to their employees. With continued declining enrollment, the *Indemnity Choice* medical plan will be “grandfathered” to those employers that currently offer the plan. The Trust will offer two new PPO plans. The new PPO-500 and PPO-1000 will fill the gap between the POS-200 plan and PPO-1500 plans. These new PPO plans will have deductible, coinsurance, and some reasonable copayments. These plans will introduce value-based purchasing incentives such as a lower office copayment when using a physician rated as “Good, Better, and Best” on the [www.getbettermaine.org](http://www.getbettermaine.org) website. More information will be available at a later date. As a result, in 2012, there will be eight medical plans available through the Trust including four PPO plans, three POS plans, and the one Indemnity plan (for an employer that is “grandfathered” to offer it.)
- **Dental Plan – Enhancement.** Orthodontic coverage for adults and children will be added to the dental plan. The 2012 premium rates will be adjusted to include this coverage.
- **Life Insurance–Carrier Change.** *The Standard Insurance Company* will be replacing *Prudential* as the life insurance carrier for basic, supplemental (now called additional), and dependent life insurance. There are no major changes in provisions. Additional information will be issued in the future.

**Reminder: 2012 Rates:** The complex rate-setting process is under way with the Health Trust finance team and actuaries. The 2012 rates will be mailed to your employer in November. You will also receive a notification of the rate changes at the end of that month. Your employer will contact you to let you know of any change to your personal premium contributions (payroll deductions) or changes in your program options.

**Reminder: Annual Enrollment:** December 2011 is the annual open enrollment period for the Health Trust program. MMEHT Field Service Representatives will be assisting your employer in understanding the plans and options available through the Health Trust this year. Your employer will contact you regarding any changes to your program with the Health Trust.

Please contact your MMEHT Member Service Representatives with any questions at [htservice@memun.org](mailto:htservice@memun.org) or 1-800-852-8300. We appreciate your continued participation in this unique, flexible, and non-profit program.

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# Maine Municipal Employees Health Trust 2012 PLAN CHANGES

(Medical – Existing Plans - Page 1 of 2)

*This is a summary of MMEHT plan changes. In the case of any inadvertent discrepancies, the plan amendment will govern.*

*This is the information available at the time this notice was prepared. Additional clarification or changes may be forthcoming depending on review of any required federal or state mandates and the finalization of relevant documents and amendments.*

This page outlines changes to the existing medical plans that will affect enrolled employees and their dependents.

## Specialist Office Visit Copay Clarifications

Medical-Two PPO Plans: PPO-1500, PPO-2500

Effective January 1, 2012, for the two PPO plans, the office visit copayment structure was updated to include a split copayment of \$25 for a primary care physician and \$35 for a specialist and to clarify that the specialist copayment applies to visits to Walk-In Center visits.

- **PPO-1500 Medical Plan**

Physician Office Visits: \$25 copay for a *primary care physician* office visit (or non-specialist) and  
\$35 copay for a *specialist* office visit

Walk-In Center Visits: \$35 copay (same as specialist copay)

- **PPO-2500 Medical Plan**

Physician Office Visits: \$25 copay for a *primary care physician* office visit (or non-specialist) and  
\$35 copay for a *specialist* office visit (no change)

Walk-In Center Visits: \$35 copay (same as specialist copayment)

## Emergency Room Services Copay Changes

Medical Plans: POS-A, POS-C, POS-200, PPO 1500

Effective January 1, 2012, for four medical plans, the emergency room services copayments are updated so that all POS plans have \$100 and all PPO plans have \$150. The PPO-2500 already has the \$150 copay.

- **POS-A, POS-C, POS-200 Medical Plans**

Emergency Room Services: \$100 copay

- **PPO-1500 Medical Plan**

Emergency Room Services: \$150 copay

*For specific inquiries or questions, please contact your Health Trust Service Representatives at [htservice@memun.org](mailto:htservice@memun.org) or 1-800-852-8300.*

# Maine Municipal Employees Health Trust

## 2012 PLAN CHANGES

(Medical – Existing Plans - Page 2 of 2)

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### Prescription Drug Changes – 5 Tier Program

Medical - All Plans: POS-A; POS-C; POS-200; PPO-1500; PPO-2500; Indemnity Choice; Retiree Group Companion Plan

Effective January 1, 2012, all Health Trust medical plans will include a prescription drug program change. The five-tier program introduces a new "Tier 1-Select Generic" category with a lower copayment, slightly higher copayments for Tier 2 and Tier 3 medications, and a new "Tier 4-Specialty and Lifestyle" for the highest cost medications. Participants will be mailed additional information and new ID cards in the coming months.

	DESCRIPTION	30 Day Supply	31-90 Day Supply
1	<b>Tier 1-Select Generic</b> drugs have the lowest Copay. These Select Generic drugs offer the greatest value within a therapeutic class. Select Generics are the most commonly prescribed and proven generic medications that are known for effectiveness and value in treating many medical conditions. All of these are generic equivalents of brand name drugs.	\$4	\$8
2	<b>Tier 1-Standard</b> drugs have the second lowest Copay. These drugs offer good value within a therapeutic class. Some of these are generic equivalents of brand name drugs.	\$10	\$20
3	<b>Tier 2</b> drugs have a mid-range Copay. These drugs may be preferred brand drugs and possibly newer, more expensive generic drugs based on clinical effectiveness and value.	\$30	\$60
4	<b>Tier 3</b> drugs have a higher Copay. These drugs may be higher cost brand name drugs and some generics that may cost more than therapeutically equivalent drugs. These drugs may include medications recently approved by the FDA.	\$50	\$100
5	<b>Tier 4-Specialty and Lifestyle</b> drugs have the highest Copay. These Specialty and Lifestyle drugs may be the highest cost brand name drugs and some generics that may cost more than therapeutically equivalent drugs. These drugs may include medications recently approved by the FDA. Specialty drugs are most commonly prescribed to treat complex, chronic conditions and may require special handling and/or management. Lifestyle drugs are most commonly prescribed to treat impotency. (Some specialty drugs may only be available in a 30-day supply.)	\$60	\$120

Please visit the MMEHT website at [www.mmeht.org](http://www.mmeht.org) under "What's New" for more information.

For specific inquiries or questions, please contact your Health Trust Service Representatives at [htservice@memun.org](mailto:htservice@memun.org) or 1-800-852-8300.

# Maine Municipal Employees Health Trust 2012 PLAN CHANGES

(Medical – Plan Options for 2012 - Page 1 of 1)

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**This page outlines changes to the medical plan options that a participating employer may offer in 2012.**  
Each employer works with their Health Trust Field Service Representative to implement or change any medical plan options at your worksite.

## Indemnity Choice – “Grandfathered”

Medical Plan: Indemnity Choice

Effective January 1, 2012, the Trust will only offer the Indemnity Choice plan to any employer that currently has it.

- **Indemnity Choice** This Indemnity plan will be “grandfathered” so that any participating employer still offering the plan may continue to do so. However, if an employer drops this plan from its options to employees, it will be unable to select it in the future.

## New PPO Plans With Value-Based Purchasing Incentives

New Medical Plan: PPO-500 and PPO-1000

Effective January 1, 2012, the Trust will be adding two additional PPO plans. As a result, there will be eight medical plans available through the Trust including four PPO plans, three POS plans, and the one Indemnity plan (for an employer that is “grandfathered” to offer it.)

- **PPO-500**  
And
  - **PPO-1000**
- These new PPO plans have an upfront deductible and coinsurance up to an annual out-of-pocket maximum. They also include coverage for some services (office visits and emergency room visits) with reasonable copayments. These plans will introduce value-based purchasing incentives such as a lower office visit copayment when using a physician rated as “Good, Better, and Best” on the [www.getbettermaine.org](http://www.getbettermaine.org) website. More information will be available at a later date.

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# Maine Municipal Employees Health Trust 2012 PLAN CHANGES

(Life Insurance - Page 1 of 1)

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This page outlines changes to the life insurance program that will affect enrolled employees and their dependents.

## Life Insurance Program

Basic Life and AD&D; Supplemental Life and AD&D ; Dependent Life

- **New Carrier\***

Effective January 1, 2012, *The Standard Insurance Company* will replace Prudential as the life insurance carrier for the Trust life insurance program. There are no major changes in the benefit provisions. Remember, each employee enrolled in a Trust medical plan has basic life and accidental death and dismemberment (AD&D) coverage at no additional cost.

- **New Features\***

In the coming months, you will receive more information\* regarding the benefit provisions and new features and enhancements that active employees may be able to utilize such as the Medex Travel Assist program.

- **Group Insurance Certificate\***

You will receive a group insurance certificate containing a detailed description of the insurance coverage. The information presented above is controlled by the *group policy* and does not modify it in any way. The controlling provisions are in the group policy issued by Standard Insurance Company.

*\*This information is only a brief description of the group life insurance policy sponsored by Maine Municipal Employees Health Trust. The controlling provisions will be in the group policy issued by The Standard. The group policy contains a detailed description of the limitations, reductions in benefits, exclusions and when The Standard and the employer may increase the cost of coverage, amend or cancel the policy. A group certificate of insurance that describes the terms and conditions of the group policy will be available for employees who become insured according to its terms.*

For specific inquiries or questions, please contact your Health Trust Service Representatives at [htservice@memun.org](mailto:htservice@memun.org) or 1-800-852-8300.

# Maine Municipal Employees Health Trust 2012 PLAN CHANGES

(Dental - Page 1 of 1)

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This page outlines changes to the dental plan that will affect enrolled employees and their dependents.

## Dental Plan

### Addition of orthodontic coverage for children and adults

- **New Covered Services Effective January 1, 2012**

Coverage for Type IV Services (Orthodontic Services) will be added to the existing dental plan in accordance with the plan design outlined below.

COVERED SERVICES	BENEFIT PAYABLE
<b>Type IV Services (Orthodontics)</b> Repositioning/straightening of teeth for adults and children Lifetime Maximum Per Patient of \$1,250	50%*** To Lifetime Maximum (Deductible Does Not Apply)

\*\*\*Type III (Major) and Type IV (Orthodontics) services for late enrollees are covered after 12 months of coverage.

- **Eligibility and Enrollment Guidelines**

#### CURRENT ENROLLEES - COVERAGE FOR CURRENT ENROLLEES ON THE PLAN

Coverage for orthodontic services will be available to participants effective January 1, 2012 that are on the plan as of December 31, 2011.

- **Current Enrollees That May Start Orthodontic Services After the Effective Date** – Coverage for orthodontic services will be available with no late entrant provisions.
- **Current Enrollees In An Existing Late Entrant Period** – The enrollee must satisfy the remainder of their current late entrant period but will not need to satisfy an additional late entrant period.
- **Current Enrollees – Treatments in Process** – Generally dental plans do not routinely cover orthodontic services that are in process prior to the coverage effective date. However, under the Trust dental plan there may be coverage for orthodontia treatment already in progress depending on the enrollment date, original treatment effective date, and expected length of treatment of the member. There may be a limited prorated benefit for treatments incurred (or continuing) after the effective date. There are detailed claims processing guidelines including the submission of the original treatment plan to determine if there is any coverage. Please contact a Health Trust service representative for assistance.

#### NEW ENROLLEES - LATE ENTRANT PROVISIONS

New enrollees that join the plan during the open enrollment period in December for an effective date of January 1, 2012 will need to be enrolled in the plan for 12 months before orthodontic services will be covered.

*For specific inquiries or questions, please contact your Health Trust Service Representatives at [htservice@memun.org](mailto:htservice@memun.org) or 1-800-852-8300.*

# Maine Municipal Employees Health Trust 2012 SAMPLE ID CARD

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**All enrolled MMEHT members will receive new medical ID cards by early January 2012**  
(Even if you do NOT change your plan during annual enrollment)

## 2012 SAMPLE ID CARD

MMEHT Comprehensive POS Medical Plan and MMEHT Dental Plan Combined Card

**5 Tier Prescription Drug Program Effective January 1, 2012**

<b>Anthem.</b> 		 <b>Maine Municipal Employees Health Trust</b>
<b>JOHN DOE</b>		
Identification Number		
<b>XVHxxxxxxxxxx</b>		<b>PCP: CARE PROVIDER, MD</b>
Group No.	<b>xxxxxxxxxx</b>	<b>COMPREHENSIVE POS, \$15 OV COPAY</b>
<b>BIN</b>	<b>003858</b>	<b>5 TIER RX COPAY \$4/\$10/\$30/\$50/\$60</b>
RxGroup	<b>WL8A</b>	<b>DENTAL</b>
Plan Code	<b>180/680</b>	<b>TOWN NAME HERE</b>
		

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# Maine Municipal Employees Health Trust ANNUAL ENROLLMENT REMINDERS

*This is a summary of MMEHT enrollment provisions. In the case of any inadvertent discrepancies, the plan document/amendment will govern.*

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This page outlines open enrollment reminders that may pertain to enrolled employees and their dependents.

## HEALTH TRUST 2012 PREMIUM RATES *Coming in November*

The Trustees recognize the financial pressures that participating employer groups are facing and are considering strategies for these challenging economic times. The 2012 premium rates and additional information will be released to participating employer groups in early November. Participants will receive notifications by the end of November. Your employer will inform you of any options or changes that may be under consideration for your group.

## ANNUAL OPEN ENROLLMENT Medical, Dental, Vision Plans *Coming in December*

The Health Trust medical, dental, and vision plans provide for an open enrollment period once each year during the month of December. This timeframe allows employees (and/or qualified dependent(s)) who did not enroll when originally eligible, the opportunity to enroll in Health Trust options as offered by their employer.

All enrollment or election or change forms should be completed, dated (prior to December 31<sup>st</sup>), and received by the Health Trust no later than the last day of December for coverage changes to be effective January 1. Please submit any forms through your employer so that any payroll deduction adjustments can occur if necessary.

**Medical Plans:** Employees enrolling into a medical plan during open enrollment also enroll in Basic Life Insurance without having to provide Evidence of Insurability. If an employer offers more than one Health Trust plan, employers should offer employees an annual choice between the plans for an effective date of January 1.

**Dental Plan:** As a reminder, there are updated eligibility and enrollment dental provisions including an annual enrollment. Late enrollees (employees that did not enroll when originally eligible) are now able to enroll during the annual enrollment in December with benefits subject to late entrant provisions. This means a late enrollee will need to be on the plan for defined periods of time before certain services are covered.

## OTHER ENROLLMENT PROVISIONS Income Protection, LongTerm Disability, Additional Life Insurance

For employer groups that offer other Health Trust benefits, the annual open enrollment does **not** apply to new enrollments or changes to Income Protection plan or LongTerm Disability plan or Additional Life Insurance coverage. Generally, should an employee want to enroll after their initial eligibility, he/she may apply for coverage at any time and must comply with any Evidence of Insurability requirements.

For specific inquiries or questions, please contact your Health Trust Billing Representatives at [htbilling@memun.org](mailto:htbilling@memun.org) or 1-800-852-8300.