



People First E-Newsletter

Governor Charlie Crist ♦ Department of Management Services ♦ Secretary Linda South

September 2008

SPECIAL OPEN ENROLLMENT EDITION

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Service Center Hours

Monday through Friday
8:30 a.m. to 5:30 p.m. EDT

Service Center Numbers

(866) 663-4735
(866) 221-0268 TTY

Open Enrollment Dates

Preview Period: September 15-19

- This period gives you planning and research time.
- You should receive an open enrollment benefits package in the mail. Be sure to read your benefits statement carefully; it will show you the plans and coverage levels you will have beginning January 1, 2009, if you make no changes.
- You can go to the Health & Insurance tab in People First to see the other coverage and plan options, call the Service Center, and go to the [MyBenefits](#) Web site.

Open Enrollment Period: September 22 —October 17 Ends at 5:30 p.m. Eastern Time

In People First you can:

- Enroll in plans for the 2009 plan year
- Change your coverage levels and/or
- Drop coverage during this period

Correction Period: October 20-31

- If you make changes during open enrollment, you will receive a confirmation statement. Review this statement carefully and call the Service Center to make corrections, if needed, during this period.

Benefit Fairs

Talk with benefit representatives throughout the Open Enrollment period to get the latest in plan information. For specific dates, times, and locations, click [here](#).

Keys to Open Enrollment Success

- Know your [People First password](#).
- Go to the [MyBenefits](#) Web site for plan comparisons, a cost calculator, and more.
- Use the convenient, self-service options through the [People First system](#)—online access anytime.
- [Watch the Open Enrollment video](#) for tips on how to navigate People First.
- Read the [Benefit Guide](#) from cover to cover.
- Avoid the rush—enroll early!
- Visit each company's online provider directory.

Important Terms

Flexible Spending Accounts (FSA)—accounts that allow you to reimburse yourself with pre-tax dollars for eligible out-of-pocket healthcare costs and/or the costs associated with caring for a dependent. With these accounts, you decide what you want to contribute before the plan year begins. You must submit your claims for the entire amount you had withheld for the plan year by the April 15 tax filing deadline; otherwise, you lose any unused money.

Health Maintenance Organization (HMO)—a prepaid medical plan. You agree to use a specific, limited network of providers.

Preferred Provider Organization (PPO)—a plan that offers discounted rates on services if you use providers in the network. If you use services or providers outside of the network, you are reimbursed a smaller portion of the charges.

Primary Care Physician (PCP)—the healthcare professional who monitors your health needs. This physician also coordinates your medical care, including referrals for tests or to see specialists.

Provider Network—a group of healthcare providers who agree to accept predetermined rates when they service members of the network. These providers may be physicians, hospitals, or other healthcare facilities or specialists.



Overview of Plans for 2009

For detailed plan and coverage information, go to to the [MyBenefits](#) Web site or see your [Benefit Guide](#). For general overviews, see below.

Health

Premiums for employees remain the same for the 2009 plan year. For retiree premium information, click [here](#). Expanded HMO services will be available in Bay, Hendry, Martin and St. Lucie counties.

Life

[Minnesota Life Insurance Company](#) is our basic and optional life insurance company. Be sure your beneficiary information is up-to-date.

Dental

Like last year, dental plans offer four levels of coverage: employee, employee + spouse, employee + child(ren), and employee + family. Compare the coverage levels carefully to get the best value for your needs.

Vision

Vision coverage will be available for 2009 through HumanaVision. You can choose either a full coverage vision plan or a materials only plan.

Dependents up to Age 30 (Over-Aged Dependents)

You now have the option to cover certain, eligible dependents up to age 30. These dependents can be covered under their own individual plan for a cost of \$449.26 per month.

New "Grace Period" for Flexible Spending Accounts

From January 1 through March 15, 2009, you can have medical and dependent care FSA expenses and then use any FSA account balance from 2008 to pay them. If you don't use your 2008 money by March 15, you'll lose it. Just like other FSA expenses, you must file your claims on or before April 15, 2009, for 2008.

Don't Miss It!

Look for your 2009 Benefit Guide in the mail or online. If you don't receive one, please log on to People First and update your address information so that you'll be good to go next year!

