2012 Benefits Open Enrollment

February 14 – February 29, 2012

Open Enrollment for Jefferson Lab's health and welfare benefits runs from <u>Tuesday</u>, <u>February 14</u>, through Wednesday, <u>February 29</u>, 2012, via the <u>Employee Self Service</u> (ESS) system.

The ESS system allows you to review your current plan enrollments choices; read about plan benefits, review plan design and rate changes for 2012.

All **Regular and Term** employees are eligible for medical, dental, health and dependent care flexible spending accounts, short-term disability and supplemental life insurance.

2012 IMPORTANT ENROLLMENT INFORMATION YOU NEED TO KNOW

- 1. As in the past, we will continue to offer a <u>Default System of Benefits Enrollment</u>. This means that if you are <u>NOT</u> changing benefits, selecting a medical option outside of the default health plan and do NOT enroll in a Flexible Spending Account (FSA), you do not need to re-enroll. Your current benefit elections will remain on file and be effective for the 2012 benefit year.
- 2. Flexible Spending Accounts do not carry over from year to year. Therefore, if you are currently enrolled in the Medical or Dependent Care Flexible Spending Account, and wish to continue your participation you must re-enroll. You will need to go into the ESS system online and enroll if you wish to participate in the Flexible spending plans.
- 3. <u>Health Care Flexible Spending Accounts (FSA) maximum contributions will be changed from \$5,000 to \$2,500.</u> The dependent care flexible spending maximum will remain at \$5,000.
- 4. Short-term disability premium rates decreased by approximately 35 percent.
- 5. The ESS system can only be accessed on-site. Restricted access to the system is to protect your security.
- 6. If you choose to make changes to your current benefit elections outside of the default health plan, you will be required to enroll via the online ESS system. The ESS system is now integrated with the Lab's time collection system. Benefits enrollment can be accessed via the web-based menu located on the left of the ESS system.
- 7. As a result of the Health Care Reform you may be eligible to enroll your adult children up to age 26 on your medical and dental plan. Dependent(s) may be added regardless if they reside with you, their marital status, financial dependency, or student status.
 - However, your adult children are <u>NOT eligible</u> for coverage on your insurance plan if they have group-sponsored coverage available through their employer.
- 8. Jefferson Science Associates (JSA) is a grandfathered group-sponsored plan.

9. Be sure to review your <u>beneficiary designations for life insurance</u> during the open enrollment period.

You can access the ESS system via the link on the JLab Insight page or directly at: misportal.jlab.org/time

Use your JLab username and password to login.

Training on the ESS Software as well as an overview of the 2012 new Anthem plans and all other sponsored Lab's Benefits will be offered at the following times:

Wednesday	February 15th	9:00-10:00 a.m.	Anthem Representative
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Friday	February 17th	2:00-3:00 p.m.	Anthem Representative
Wednesday	February 22nd	3:00- 4:00 p.m.	Treva Ferguson/Benefits Consultant
Thursday	February 23rd	2:00 – 3:00 p.m.	Anthem Representative
Monday	Eobruory 27th	9:30 – 10:30 a.m.	Trava Forguson, Ponofita Conquitant
Monday	February 27th	9.30 – 10.30 a.III.	Treva Ferguson, Benefits Consultant
Wednesday	February 29th	1:00-2:00 p.m.	Anthem Representative

Key Changes for 2012

Medical Plans

- KeyCare PPO 15 medical plan will be replaced with Anthem's Key Care PPO 10 medical plan. The KeyCare PPO 10 plan closely resembles the current PPO selection that is available today. All KeyCare PPO 15 participants will automatically default to the KeyCare PPO 10 medical plan effective April 1, 2012. You will have the option to go into the Employee Self Service system during open enrollment to change your elections if you choose.
- BlueCare Indemnity medical plan will be discontinued as a product offered by Anthem
 effective March 31, 2012. The robust network that Blue Care once offered to its members
 is no longer applicable because the KeyCare PPO network has become as inclusive. All
 BlueCare Indemnity members will automatically default to the KeyCare PPO 10
 medical plan effective April 1, 2012. You will have the option to go into the Employee
 Self Service system during open enrollment to change your elections if you choose.
- Healthkeepers HMO medical plan will be eliminated and replaced with a Point of Service (POS) medical plan. The POS plan will offer an out-of-network feature that is currently not an option provided by the Healthkeepers HMO plan. All HealthKeepers HMO members will automatically default to the HealthKeepers POS medical plan effective April 1, 2012. You will have the option to go into the Employee Self Service system during open enrollment to change your elections if you choose.

• For those enrolled in Optima, medical insurance plan offerings will not change. You will continue to automatically default to your current elections in the Optima Plan. During open enrollment you will have the option to go into the Employee Self Service system to change elections if you choose.

The medical plans will continue to be administered through Anthem and Optima. In compliance with health care reform, preventative care will now be provided at no cost to you and essential benefits will no longer have annual dollar limit restrictions. The adult dependent age limit has also been extended up to age 26; the new eligibility requirements must be met to allow for coverage up through age 26. Eligibility rules are located in the ESS system and on the Benefits page.

Please refer to the Benefits Overview Matrix and the Summary of Changes Table available on the Company Links page of the ESS system (2nd link on the web menu in the ESS system). These documents provide information on the plans and the premium rates. If you are changing plans, adding or dropping dependents or modifying levels of coverage outside of the medical default, you must complete the online Enrollment Form (Anthem or Optima).

Dental Plan

Delta Dental of Virginia will continue to be Jefferson Lab's dental administrator. There is no increase to the dental premium rates for the 2012 plan year. The adult dependent age limit has also been extended up to age 26; the new eligibility requirements must be met to allow for coverage up through age 26. Eligibility rules are located in the ESS system and on the Benefits page.

The Summary of Changes Table is available on the Company Links page of the ESS system. If you are enrolling in the plan for the first time or are changing your coverage you must complete the Enrollment/Change form.

Short-Term Disability

If you are already enrolled in Short-Term Disability (STD) and wish to continue the coverage, you are not required to do anything. If you do not have STD and wish to apply, you must indicate this on the STD enrollment page. You will also be required to fill out an application form. This will be reviewed by MetLife to determine if coverage will be offered. The form is available in the ESS Company Links page (2nd link on the web menu in the ESS system). Note: Coverage is not guaranteed. The premium rates decreased approximately 35 percent.

Supplemental (Optional) Life

Under MetLife, supplemental Life is called Optional Life. If you are already enrolled in supplemental life and do not want to change your coverage you do not have to re-enroll; your coverage will be continued automatically. If you do not have supplemental life and want to enroll in the Optional Life plan, you must submit a MetLife application. MetLife reviews all applications to determine coverage availability and offers. The form is available in the ESS Company Links page (2nd link on the web menu in the ESS system). Note: Coverage is not guaranteed

Same-Sex Domestic Partner Coverage

Jefferson Lab will continue to provide same-sex domestic partners coverage through the medical and dental plans. The dependents of the same-sex domestic partner may also be covered. See the Domestic Partner Coverage Summary on the Company Links page of the ESS system. A notarized affidavit is required (available on the medical and dental ESS pages). Contact Human Resources, if you are enrolling in this coverage.

Beneficiaries

It is important that you review your beneficiaries. This applies to both the Basic Life and Optional Life plans. While you are going through the enrollment process check your beneficiaries to be sure that the information is correct. The named beneficiaries in the ESS system will be those that are forwarded to MetLife and receive the benefits of your policies.

Annual Enrollment Instructions:

- From a JLab computer, go to the JLab Insight page and Click on the Open Enrollment Link or type <u>misportal.jlab.org/time</u> in your browser address window and click on enter.
- This brings you to the Deltek Time & Expense with Employee Self Service.
- Enter your current JLab user ID and password to access your ESS account.
- Click "Benefits" (link on the left side of the online menu).
- Click "Benefits Enrollment".
- Read Carefully and Follow Instructions. (<u>Continue</u>, <u>Done and Save</u>, <u>allows you</u> to move forward).
- Review your changes carefully.
- Click the "Confirm" button (bottom of Benefit Summary screen).
 - Note: You will not receive an email confirmation from the system after the process is complete.
- Important Print the Confirmation page and keep it for your records.

Review of 2012 Benefit Facts

If you do not want to make any changes outside of the medical default for your Health

Care option you do not have to re-enroll.

If you do not want to make any changes and do not want to enroll in the Health Care or Dependent Care Flexible Spending Account you do not have to re-enroll.

If you want to make any changes and/or sign up for one of the Flexible Spending Accounts you must go through the enrollment process via the ESS.

Remember, if you make any changes to your current plan options outside of medical default, you will be required to complete the corresponding application.

If you want to make any changes in your beneficiaries' designation you must go through the enrollment process using ESS.

The deadline to turn in application/enrollment forms and other documents to Human Resources, VARC room 40C, is February 29, 2012.

2012 Open Enrollment benefits coverage will be effective April 1, 2012 through March 31, 2013.

Your 2012 premium deductions will be reflected on your March 30, 2012 paycheck.