

Self-Pay Tier FAQs

QUESTION: When does the new Self-Pay tier structure become effective?

ANSWER: January 1, 2012.

QUESTION: What are the new Self-Pay tier rates?

ANSWER: Please see the chart below for Self-Pay coverage options.

Options	Plan I	Plan II (with 3 or more Health Years)	Plan II (with less than 3 Health Years)
Benefits	Hospital, Medical, Prescriptions, Dental, Vision, Mental Health/Substance Abuse	Hospital, Medical, Prescriptions*, Dental	Hospital, Medical, Prescriptions*
Individual only	\$551/monthly	\$448/monthly	\$419/monthly
Individual plus 1 dependent	\$1,102/monthly	\$896/monthly	\$838/monthly
Individual plus 2 or more dependents	\$1,543/monthly	\$1,254/monthly	\$1,173/monthly

*Does not include prescription drugs for mental health and substance abuse treatment.

QUESTION: Do I have to select a tier and enroll in order to continue my coverage in the Self-Pay Program?

ANSWER: **Yes.** If you are currently enrolled in Self-Pay and are eligible for Self-Pay coverage on and after January 1, 2012, **you must re-enroll in order to continue your coverage.**

QUESTION: How can I change my tier rate?

ANSWER: The tier rate is based on the number of dependents covered under the Plan. During Open Enrollment, you can enroll/dis-enroll your dependents by submitting an enrollment/dis-enrollment form or completing the process on our website.

QUESTION: When is my enrollment form due?

ANSWER: If you are currently enrolled in Self-Pay, your tier enrollment form should be submitted by December 9, 2011. If your Self-Pay effective date is on/after January 1, 2012, your enrollment is due within 60 days of the later of: the date coverage terminated or the date on your Self-Pay Enrollment Offer.

QUESTION: How long will it take to process my enrollment form?

ANSWER: Please allow 1-2 business days to process your enrollment form. You will receive a confirmation letter in the mail once your form has been processed. For faster service, log onto our secure website to make changes to your dependents and make your premium payment online.

QUESTION: What are enrolled and dis-enrolled dependents?

ANSWER: Enrolled dependent(s) are qualified family members you have chosen to cover on and after January 1, 2012. Once the premium is received, you and your enrolled dependent(s) will have health coverage. Dis-enrolled dependent(s) are individuals you have chosen not to cover as of January 1, 2012. Dis-enrolled dependents are not eligible for health coverage or Self-Pay. Dependents may only be enrolled or dis-enrolled during the annual Open Enrollment period or if a life event occurs.

QUESTION: What is Open Enrollment?

Answer: The period of time each year where you will have the opportunity to make changes to your dependent/tier enrollment. Please note that you will not be able to change your original plan type selection. Open enrollment materials will be mailed each November. Enrollment changes must be completed online or by submitting a paper form by December 31st to be effective January 1st of the following year.

QUESTION: If I want to dis-enroll my dependents, what do I need to do?

ANSWER: Simply use our secure website to make the change. No other paperwork or explanations are required. You also have the option of making your selections on your enrollment/dis-enrollment form by checking the appropriate boxes and return the form to the Plan Office.

QUESTION: Can I dis-enroll myself as a participant but elect coverage for a dependent?

ANSWER: No. The participant must be enrolled in order for dependents to have coverage.

QUESTION: During Open Enrollment, how can I add a dependent that is not currently listed on file?

ANSWER: To add a dependent during Open Enrollment, you must complete a New Dependent Form and submit via mail, fax or e-mail with the appropriate proof documents (such as a recorded birth certificate or recorded marriage certificate). Please indicate on the form if you would like the dependent enrolled in the Health Plan. If adding the dependent changes your tier rate, we will send you new payment coupons that reflect your new premium amount. Please see the Self-Pay Program Summary for more information.

QUESTION: Can I enroll or dis-enroll dependents outside of my Open Enrollment period?

Answer: You may make dependent enrollment changes outside of the open enrollment period if you experience a life event that results in a change in family status. A change in family status is defined as an increase or decrease in the number of your dependents, which may result from birth, adoption, marriage, establishment of a same-sex domestic partnership, divorce, dissolution of a qualified same-sex

domestic partnership, death or loss of dependent "child" status as defined by the Plan, or if your dependent obtains or loses insurance coverage on their own.

If one of these events should occur, you will be permitted to change your dependent's enrollment status and change your premium tier (if applicable) based on the addition or loss of that dependent. A written request must be submitted to the Plan Office within 60 days from the date on which the life event occurred. No verbal requests will be accepted.

QUESTION: I previously dis-enrolled my spouse from coverage and am now getting a divorce. Is my former spouse entitled to Self-Pay coverage of their own?

Answer: Possibly. Please contact the Plan Office for more information.

QUESTION: I dis-enrolled my dependents while on Self-Pay coverage. If I qualify for Earned coverage, will my previous dependent enrollment selections carry over?

Answer: If you qualify for Earned coverage, you will have the opportunity to make changes to your enrolled dependents during your Earned open enrollment period.

QUESTION: If I dis-enroll my dependents while on Self-Pay coverage, what will happen if I qualify for the Senior Performer plan?

ANSWER: Qualified dependents will automatically be re-enrolled if and when you qualify for the Senior Performer plan.

QUESTION: I have completed my Self-Pay tier enrollment. When is my new premium rate due?

ANSWER: Your new premium rate is due on January 1, 2012.

QUESTION: When will I receive my annual payment coupons?

Answer: You will receive your annual payment coupons after your enrollment has been processed.

QUESTION: Will I be able to make my new tier payment online or over the phone?

ANSWER: Yes. Please note that you must first complete your tier enrollment before you will be able to make your payment.

QUESTION: If I am already enrolled in Auto-Debit, will the deduction amount automatically change?

ANSWER: Yes. Once your enrollment is processed, the deduction amount will automatically change to the new tiered rate. The new rate will be deducted around the 25th of the month prior to the premium due date.

QUESTION: Once I complete my enrollment and submit my premium, can any changes be made?

ANSWER: You may make multiple changes during your Open Enrollment Period regardless of whether a payment is made or not. The only restriction is that once payment is made you can no longer make changes through the website. Additional changes must be made via a paper form.

QUESTION: When will my Notice of Eligibility packet be sent?

ANSWER: Notice Of Eligibility (NOE) packets will be mailed once your enrollment is completed and your initial premium payment is received.

QUESTION: Can I print out an NOE online once my payment is made?

ANSWER: Yes, once your enrollment has been processed and your initial payment has been posted. Please allow 48 hours for your payment to post before attempting to print your NOE.