

Montefiore

Annual Benefits Election Period

November 12 – November 30

WHAT'S NEW IN BRIEF!

- Healthcare Benefits
 - New **IN-NETWORK** Out-of-pocket Maximum
 - Prescription Drug Benefits
- Health Care and Dependent Care FSA Annual Contributions
- Life Insurance Beneficiary Designations
- Voluntary Tax Deferred Annuity 403(b) Plan



Dear Montefiore Registered Nurse:

According to a MetLife Benefits Election Poll, 20% of workers who had the opportunity to participate in a benefits enrollment last year failed to act and defaulted to either the prior year's choices or their employer's default choices.

This year it is more important than ever to take the time to explore your benefit options and choose the plans that best fit your individual needs.

This newsletter announces and explains changes to Montefiore's RN Benefits Program for 2014 as required by health care reform. It is your responsibility to read this newsletter and learn about these changes so that you may make informed choices during this Annual Benefits Election Period.

If you need assistance, contact the HR-Benefits Office by email at montebenefits@montefiore.org or call **914.378.6531**.

Sincerely,



William Shanahan

Vice President, Human Resources – Total Compensation

www.MyMonteBenefits.com

Your Gateway to Montefiore's Benefits & Wellness Programs

There is a special section just for you! Be sure to enter the site through "Enter Here" – "If You Work At: Montefiore Medical Center or Emerging Health Information Technologies (EHIT)".

My MonteBenefits has everything you will need to help you make informed enrollment decisions – Benefit Summaries and Rate Sheets, Medical Comparisons, Contact Information, Summary of Benefits and Coverage and Summary Plan Descriptions – and a direct link to Montefiore's Enrollment Website www.montebenefits.com.

YOUR MONTEFIORE HEALTHCARE BENEFITS

Healthcare Benefits

New *IN-NETWORK* Out-of-Pocket Maximum

Effective January 1, 2014, as required by the Patient Protection and Affordable Care Act (PPACA), a total dollar limit on the amount an individual or family has to pay out of pocket in a calendar year for in-network services is being established under the the Registered Nurses Health Plan. Currently there is no out of pocket limit. The new out-of-pocket maximum includes, where applicable, coinsurance, deductibles and copayments. Once the annual out-of-pocket maximum is reached, the Registered Nurses Health Plan will pay 100% of all remaining eligible covered expenses for you or your family for the rest of the calendar year. The combined expenses of all family members count toward the family out-of-pocket amount.

	In-network	
	RN Montefiore Provider Network Empire Traditional/Indemnity Network	Out-of-network
Registered Nurses Health Plan		
<ul style="list-style-type: none"> Individual/Family Out-of-pocket Maximum (Deductible + Copayment + Coinsurance) 	\$6,350/\$12,700	None

Prescription Drug Benefits

Under the Patient Protection and Affordable Care Act (PPACA) and the Women’s Health Coverage Act, the following medications are now covered at 100%.

- Bowel Preparation Agents – Generic and Single Source Brand only; including OTC with a prescription for adults over age 50, limited to 2 prescriptions within 365 days
- Vitamin D
 - Generic only; including over-the-counter (OTC) with a prescription for adults over age 65
 - Single entity vitamin D2 or D3 containing 1,000 IU or less per dosage
 - Combination products that also contain calcium (combination of two agents for the combinations)
- Women’s Contraceptives
 - Generic, Single and Multisource brand with DAW1 only; including OTC with a prescription:
 - Barrier methods – diaphragms/cervical caps
 - Hormonal methods – oral, transdermal, intravaginal
 - Injectable Hormonal contraceptives
 - Emergency method – e.g. Plan B and Ella
 - Implantable medications – e.g. Implanon
 - Intrauterine contraceptives – e.g. Mirena, Skyla

Health Care and Dependent Care FSAs

During the past year, did you:

- Pay any medical, dental or vision plan deductibles, copayments and/or coinsurance?
- Have any out-of-pocket expenses not covered by medical, prescription drug, dental, vision or hearing benefits?
- Pay someone to provide day care for your dependents so you can work?

If you answered “yes” to any of these questions, a Flexible Spending Account (FSA) can help you save money!

An FSA is a tax-effective way to pay certain out-of-pocket expenses for you and your family members. By contributing a portion of your payroll dollars on a before-tax basis, you reduce your taxable income as well as setting aside funds to cover eligible expenses.

For the 2014 calendar year:

- The maximum Health Care FSA contribution is \$2,000
- The maximum Dependent Care FSA contribution is \$5,000 for you or both you and your spouse, if you are married.

You **must** make a new Health Care and/or Dependent Care FSA election each year. Your 2013 FSA elections **will not automatically** continue for 2014.

Additional Contributory Life Insurance

You can elect Additional Contributory Life Insurance of 25%, 50%, 75% or 100% of your Basic Non-contributory Life Insurance. You pay the cost of any additional contributory coverage based on your age and the amount of coverage you elect.

Age	Rate per \$1,000	Age	Rate per \$1,000	Age	Rate per \$1,000
Under 20	0.032	35-39	0.053	55-59	0.317
20-24	0.032	40-44	0.072	60-64	0.449
25-29	0.034	45-49	0.115	65-69	0.759
30-34	0.043	50-54	0.185	70+	1.192

Enter your Basic Non-contributory Life Insurance coverage	
Multiply your coverage by 25%, 50%, 75% or 100%	
Your Contribution Rate/\$1,000 based on your age (from chart)	
Your cost per paycheck	

Is Your Life Insurance beneficiary Designation Up-to-date?

You must designate a beneficiary to receive your insurance benefit in the event of your death. As you go through the enrollment process, make sure you have designated a beneficiary and your designations are up-to-date. Along with your Personal Confirmation Statement, you may find a Principal Beneficiary Designation Form and Barcoded Fax Coversheet. The new Barcoded Fax Coversheet expedites matching your beneficiary form to your record. Complete the Beneficiary Designation Form and fax it along with the Barcoded Fax Coversheet to **866.879.0220**.

Evidence of Insurability (EOI)

Evidence of Insurability (EOI) will be required if during this Annual Benefits Election Period:

- You elect Additional Contributory Life Insurance for the first time after you have previously waived coverage
- You increase your Additional Contributory Life Insurance (your current coverage will remain in effect until your additional coverage has been approved).

If EOI is required, your new coverage and contributions won't begin until you receive written approval from the insurance company.

Thinking About Retirement Can Be Overwhelming

All too often, saving and planning for retirement is overshadowed by immediate financial worries and debt. You owe it to your future financial security to find out more about the Montefiore Voluntary Tax Deferred Annuity 403(b) Plan, retirement planning and investing through the Principal Financial Group® educational seminars – onsite or online. Go to www.MyMonteBenefits.com for the Group Seminar schedule or to view the online seminars.

- Onsite Educational Group Seminars – “Shifting Gears” or “Road Map Toward Retirement”
- Online Seminars – “Should you be saving for retirement?” or “Are you saving enough for retirement?”

If you prefer, you may schedule a confidential one-on-one meeting with an onsite Principal representative, contact Jason Lipka at **718.219.0537**. You can make an appointment using the Montefiore Intranet or go to www.principal.com, log in to your account and click on the one-on-one meeting sign up link.

Voluntary Tax Deferred Annuity 403(b) Plan

The Montefiore Voluntary Tax Deferred Annuity 403(b) Plan provides an excellent tool to help you save for your future financial security.

- Your before-tax contributions are automatically deducted from your paycheck and accumulate earnings on a tax-deferred basis. Your account is credited with investment earnings based on your portfolio's performance and accumulate tax-free while they remain in the Plan.
- You make your own investment decisions based on your investment strategy and the level of risk you are willing to accept.
- You may change your allocations and transfer amounts among investment options.
- You are always 100% vested in your contributions.
- You may be eligible to borrow against your account and under certain circumstances you may even make a withdrawal.

Maximum contributions are determined by the IRS and are adjusted annually. There are also two “catch-up” opportunities:

- If you are age 50 or older and you contribute the maximum permitted amount, you are eligible to make an annual Age 50+ Catch-up contribution

At any time during the year, to elect the Voluntary Tax Deferred Annuity 403(b) Plan, change your election *and/or* if you are eligible for and want to make a “catch-up” contribution, contact The Principal Financial Group at **800.547.7754** or go online to www.principal.com.

- If you have worked for Montefiore for at least 15 years and your previous Voluntary Tax Deferred Annuity 403(b) contributions did not exceed an average of \$5,000 for each year of service, you may be eligible to contribute up to a maximum of \$15,000 of 15+ Years of Service Catch-Up contributions, limited to \$3,000 in any one year.

Maximum Voluntary Tax Deferred Annuity 403(b) contribution amounts for 2014 are shown below.

If You:	The Maximum You Can Contribute Is:
Are under age 50	\$17,500
Qualify for the full annual 15+ Years of Service Catch-up Contribution	\$20,500 (17,500 + \$3,000)
Qualify for the Age 50+ but not the 15+ Years of Service Catch-up Contribution	\$23,000 (\$17,500 + \$5,500)
Qualify for the Age 50+ and the 15+ Years of Service Catch-up Contributions	\$26,000 (\$17,500 + \$3,000 + \$5,500)



To Make Your Benefit Elections

Log on to Montefiore's Enrollment Website – www.montebenefits.com – or call the Benefits Enrollment Call Center at **888.860.6166**, Monday through Friday, between 8am and 8pm EST. You'll speak to an enrollment specialist who will help you enroll.

- Review your current information (address, phone number, etc.) and notify HR of any corrections on a Change of Information Form (available under the Resource section on www.MyMonteBenefits.com).
- **Healthcare** – Make sure you record each family member you wish to enroll in healthcare coverage! All enrolled family members must have their Social Security Numbers on file to be eligible for coverage.
- **Flexible Spending Accounts** – You must make a new Health Care and/or Dependent Care FSA election if you want either or both of these accounts in 2014. Your current elections will not roll over into next year.
- **Life Insurance** – Make sure your beneficiary designations are up-to-date. Download a Principal Beneficiary Form and Barcoded Fax Coversheet from www.montebenefits.com. Fax your completed Beneficiary Designation Form with the Barcoded Fax Coversheet to MonteBenefits at **866.879.0220**.

Dependent Verification

If you elect family healthcare coverage for the first time, you must submit verification of your family members' status with a copy of the following documentation:

- Marriage License or Affidavit of Domestic Partnership (if marriage between same sex partners is not recognized in your legal state of residence)
- Birth Certificate, final Adoption Papers or Court Documents.

To ensure coverage for January 1, 2014, your documentation must be received by December 16, 2013. Please send documents via email, fax or mail to:

- Email: mmcdeverify@winstonbenefits.com
- Fax: **732.903.1166**
- Mail: Winston Financial Services
Montefiore Dependent Audit
PO Box 430
Manasquan, NJ 08736

You can view your status by checking the website at www.mmcdeverify.com.

Counseling Available!

In conjunction with the Annual Benefits Enrollment Period, you may schedule an appointment with a Professional Benefit Counselor to review the coverage options available to you and your family. Watch for a schedule of times and locations on MyMonteBenefits.com or go online to schedule an appointment at www.Onlinepolicycenter.com/Montefiore.



Legal Notices

The following are summaries of legal notices regarding your rights and procedures to protect those rights. The actual notices are available in Montefiore Benefits Program Summary Plan Description or online at www.MyMonteBenefits.com.

Claims Procedures and Appeals

Federal law requires your healthcare plan to provide a process for filing claims for services and supplies that are urgent in nature in addition to procedures for post-service claims.

Consolidated Omnibus Budget Reconciliation Act (COBRA)

The Consolidated Omnibus Budget Reconciliation Act (COBRA) gives workers and their families who lose their health benefits the right to choose to continue their group health benefits for limited periods of time under certain circumstances.

Genetic Information Nondiscrimination Act (GINA)

GINA prohibits employers, employment agencies, and labor unions from discriminating against employees based on genetic information. It also prohibits insurers from charging higher premiums based on genetic information or from using genetic information in underwriting decisions. Genetic information expressly falls within HIPAA's definition of "protected health information" and must be treated as such.

Health Insurance Portability and Accountability Act of 1996 (HIPAA)

These privacy rules set limits on how health plans, pharmacies, hospitals, clinics, nursing homes and other direct-care providers use individually identifiable health information. It is important that you understand your rights to privacy and the protection of information related to your health. It is also important that you safeguard the privacy of our patients' health care information.

HIPAA Special Enrollment Rights

You may request a special enrollment in Montefiore's health care coverage under the following circumstances:

- Within 30 days of the date:
 - You or a family member loses other group health plan coverage (such as a spouse's plan)
 - You acquire a new family member through marriage, establishment of domestic partnership, birth, adoption or legal guardianship
- Within 60 days of the date you or a family member:
 - Is no longer eligible for coverage under the Children's Health Insurance Program (CHIP) or Medicaid
 - Becomes eligible for premium assistance under the State's Children's Health Insurance Program (CHIP) or Medicaid.

Newborns' and Mothers' Health Protection Act (Newborns' Act)

The Newborns' and Mothers' Health Protection Act requires group health plans which offer maternity coverage to pay for at least a 48-hour hospital stay following childbirth (96-hour hospital stay in the case of Cesarean section).

Women's Health and Cancer Rights Act (WHCRA)

The Women's Health and Cancer Rights Act (WHCRA) requires group health plans and health insurance issuers which provide coverage for medical and surgical benefits with respect to mastectomies to also cover certain post-mastectomy benefits. These benefits include reconstructive surgery and the treatment of complications.

Medicare Part D

If you and/or your family members are Medicare-eligible, Federal law offers more choices for prescription drug coverage. See the “Important Notice from Montefiore about Your Prescription Drug Coverage and Medicare” in your Montefiore Benefits Program Summary Plan Description online at www.mymontebenefits.com for more details.

This Newsletter provides only highlights of the Registered Nurses Benefits Program as outlined in the collective bargaining agreement between Montefiore Medical Center and the New York State Nurses Association (NYSNA) and serves as a Summary of Material Modifications to the Summary Plan Description dated January 2011 describing the Montefiore Medical Center Registered Nurses Benefits Program, Montefiore Medical Center Multi-Benefit Cafeteria Plan and the Montefiore Medical Center Insured Benefit Plan with respect to Registered Nurses benefits. It describes benefit changes as well as additional Plan administrative information required by the Employee Retirement Income Security Act of 1974 (ERISA) and the Health Insurance Portability and Protection Act (HIPAA). You can find additional information about the Registered Nurses Benefits Program on Montefiore’s Benefits Website at MyMonteBenefits.com.

The actual provisions of the plans that make up the Registered Nurses Benefits Program are governed by the legal documents for each. If there is a discrepancy between the information presented here, in the Summary Plan Description and the legal documents, the legal documents will govern.

Montefiore expects to continue these plans indefinitely, but reserves the right to change, modify or terminate the Plans, in whole or in part, at any time and for any reason. In addition, the tax treatment of these benefits is subject to change without notice, as determined by federal, state or local tax authorities.

Montefiore

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