Open Enrollment ‘95: April 10—21

Open Enrollment is here! Most of you will be receiving your Pennflex Open Enrollment packet in the mail during the first week in April. This packet will include:
- Pennflex 1995-96 booklet describing the Pennflex plans and highlighting changes
- Medical/Dental Assistance Plan Rate Sheet
- Personal Report listing your Pennflex options
- Personalized Pennflex Open Enrollment Form
- Personalized Pennflex Medical Plan Enrollment & Change Form
- Personalized Benefits Statement (if you were hired before July 1, 1994)

Check the inside pocket of your PennFlex booklet for more details on what to find in your Open Enrollment packet and how to use it.

Open Enrollment provides a once-a-year opportunity to review your current benefits and make any necessary changes. If you have been thinking about switching your medical plan, reducing your life insurance or increasing your contributions to the Dependent Care Pre-tax Expense Account, this is the time to act!

The annual Benefits Fair sponsored by Human Resources/Benefits will be held on Thursday, April 13 at the Faculty Club: 10:30 a.m.-2:30 p.m. If you need further assistance with Open Enrollment, the Benefits staff is also sponsoring Question & Answer Sessions throughout campus. Highlighting the Open Enrollment events will be a presentation by Carol Bennett-Speight, director of the Faculty/Staff Assistance Program, entitled: Stress Management in a Changing Environment to be held on April 11. See below for details.

Also, a new medical plan option has been added: PENN Care. The Benefits Staff will hold seminars on April 17 & 18 to discuss this new medical plan. See below for details.

Enrollment Form(s) must be submitted by April 21. For your convenience, a drop-off box will be located in the Funderburg Information Center at 3401 Walnut Street. As in previous years, contributions to the Pre-tax Expense Accounts will cease effective July 1, 1995 if Enrollment Forms are not received by April 21.

If you misplace your Pennflex Open Enrollment packet, or if you are a new employee, in which case you will not be receiving one, you may obtain a Pennflex packet in the main Benefits Office: 3401 Walnut Street, Suite 527A or the Medical School Benefits Office at 316 Blockley Hall.

Call the Pennflex Hotline beginning April 10 if you have any questions regarding enrollment or your coverages: 898-0852.

Open Enrollment Events for Faculty and Staff

Monday, April 10  Open Enrollment Begins. Call the Pennflex Hotline: 898-0852 through April 21 with questions or attend a Benefits Question & Answer Session. Benefits specialists will be at each of the sessions to answer your questions or assist you in completing enrollment forms. Bring your Pennflex packet along.  (see listings on April 12, 19 & 20).

Tuesday, April 11  Stress Management In A Changing Environment; Carol Bennett-Speight, director, Faculty/Staff Assistance Program, noon-1 p.m., Houston Hall, Room 305. Change is a fact of life. But today's rapid rate of change can be at times overwhelming. Job transitions, single parenting, aging parents — today's common stresses at work and home may leave you feeling uncertain, confused and, at times, angry. You can't always control change, but you can control your response to it and you can choose a constructive action plan. This keynote presentation will examine our changing environment and ways to manage the stress of change.

Wednesday, April 12  Benefits Questions & Answer Session; New Bolton Center, 11 a.m.-2 p.m. Stop in to speak with medical and dental plan representatives. Members of the Benefits Staff will also be available to answer your questions, help with your Pennflex enrollment form(s) and accept your completed Pennflex forms.

Stress: The Change & The Challenge; HIP Health Plan of New Jersey, noon-1 p.m., Houston Hall, Smith-Penniman Room. One hour, in a lifetime, is a mere “drop in the bucket.” How much can you learn in an hour that will make life fuller, less stressful, and more enjoyable? Each of us must decide that for ourselves—because we are responsible for our own well-being! Give yourself the gift of one hour, this hour.

Thursday, April 13  Benefits Fair; 10:30 a.m.-2:30 p.m., Faculty Club, Alumni Hall.
- Make your 1995-96 Pennflex decisions
- Talk to medical, dental and retirement plan carriers
- Meet with Social Security and Medicare representatives

Learn more about:
- PENN Care
- Tuition benefits
- Your 1995-96 Pennflex options
- Penn Special Delivery
- The Faculty/Staff Assistance Program
- Retirement plan options

Friday, April 14  Fitness Tips; U.S. Healthcare, noon-1 p.m., Houston Hall, Smith-Penniman Room. Armand Tecco, a certified physiologist, will speak about starting and maintaining a qualified fitness program. He will offer fitness tips and answers to the most commonly asked questions. There will be time available for questions and answers.

Monday, April 17  What’s New In Benefits; Benefits Staff, noon-1 p.m. & 1-2 p.m., Houston Hall, Room 305. Come learn about the University’s newest medical plan option “PENN Care.” How does this plan compare to the other medical plan options, including the Blue Cross/Blue Shield Plans? Who are the network physicians?

Tuesday, April 18  Social Security & Medicare; noon-1 p.m., Houston Hall, Room 305. This program will answer the “Who, What, When and How” questions on Social Security and Medicare.

What's New In Benefits; Benefits Staff, 1-2 p.m., Houston Hall, Room 305. Come learn about the University’s newest medical plan option “PENN Care.” How does this plan compare to the other medical plan options, including the Blue Cross/Blue Shield Plans. Who are the network physicians?

Wednesday, April 19  Benefits Questions & Answer Session; Stemmler Hall, Dunlop Lobby, 11:30 a.m.-2 p.m. Stop in to speak with medical and dental plan representatives and members of the Benefits Staff.

Quick Healthy Meals For The Working Family; Lisa Hark, coordinator, Nutrition Education Program, Penn School of Medicine, noon-1 p.m., Houston Hall, Smith-Penniman Room. Do you find it challenging to make healthy choices for your family when you’re working and eating on the run? Come learn about how you can prepare quick healthy meals even if you do not have time to plan.

Thursday, April 20  Benefits Question & Answer Session; 11:30 a.m.-2 p.m., Dental School Lobby. Stop in to speak with medical and dental plan representatives and members of the Benefits Staff.

University Transitions: A Survivor’s Guide; Carol Bennett-Speight and Alan Bell, noon-1 p.m., Houston Hall, Smith-Penniman Room. “Downsizing”, “reorganization”, “refocussing”: The University is going through transitions that may affect you and your department. Change can leave you feeling uncertain, confused, stressed out. Learn how to develop supports and new skills that can help you survive the transitions.

Friday, April 21  Open Enrollment Ends. This is the last day to submit Open Enrollment forms. The coverage you elect will be effective July 1, 1995.

Relaxation Technique; Greater Atlantic Health Service, noon-1 p.m., Houston Hall, Room 305. Learn relaxation and stress management techniques through visualization, concentration and attention skill training.
<table>
<thead>
<tr>
<th>PLAN FEATURES</th>
<th>BLUE CROSS PLANS</th>
<th>HEALTH MAINTENANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Type of Plan</strong></td>
<td>Comprehensive (Pennflex Option)</td>
<td>One plan covering hospitalization, medical and surgical services. Plan pays 80% of covered expenses after a $200 deductible is met ($400 family aggregate). Maximum out-of-pocket expenses (excluding co-pays for outpatient mental care) is $1,200 for individual coverage and $3,400 for family coverage if you use participating Pennsylvania Blue Shield providers. Non-participating Blue Shield providers may bill you for any balance that exceeds UCR.</td>
</tr>
<tr>
<td><strong>Service Area and Emergencies</strong></td>
<td>Guaranteed benefits in any approved hospital services of any physician up to the “Usual, Customary and Reasonable” UCR fee charged for that treatment.</td>
<td>Five Delaware Valley counties. Burlington, Camden and Gloucester county residents may enroll and access Philadelphia, service area physicians and hospitals. Emergency treatment anywhere covered in full after $25 co-pay. Co-pay waived if admitted to hospital. Primary care physician must be notified within 24-48 hours of treatment, otherwise expenses not covered. (No out-of-network benefits)</td>
</tr>
<tr>
<td><strong>Inpatient Hospital</strong></td>
<td>Unlimited days, semi-private room. Covered up to 80% UCR subject to $300 deductible. Pre-certification is required for any admission other than maternity or emergency admission.</td>
<td>No maximum limit.</td>
</tr>
<tr>
<td><strong>Hospital Emergency Room Treatment</strong></td>
<td>Covered in full within 72 hours of accident or medical emergency. Hospital Charges...BC/BSS Physician Charges covered up to 100% UCR.</td>
<td>Covered in full. $25 co-pay for emergency services waived if admitted to hospital.</td>
</tr>
<tr>
<td><strong>Physician Visits:</strong></td>
<td>Covered up to 80% UCR; subject to $200 deductible.</td>
<td>Covered up to 100% UCR...</td>
</tr>
<tr>
<td><strong>Office</strong></td>
<td>Covered up to 80% UCR; subject to $200 deductible.</td>
<td>Covered up to 100% UCR...</td>
</tr>
<tr>
<td><strong>Home</strong></td>
<td>Covered up to 80% UCR; subject to $200 deductible.</td>
<td>Covered up to 100% UCR...</td>
</tr>
<tr>
<td><strong>Physician Care:</strong></td>
<td>Covered up to 80% UCR for inpatient; subject to $300 deductible. Covered at 100% UCR for outpatient. No deductible or co-pay required.</td>
<td>Outpatient $25 co-pay. Inpatient no co-pay. Referral required.</td>
</tr>
<tr>
<td><strong>Surgery</strong></td>
<td>Covered up to 80% UCR; subject to $200 deductible.</td>
<td>Covered up to 100% UCR...</td>
</tr>
<tr>
<td><strong>Anesthesia</strong></td>
<td>Covered up to 80% UCR; subject to $200 deductible.</td>
<td>Covered up to 100% UCR...</td>
</tr>
<tr>
<td><strong>Consultants</strong></td>
<td>Covered up to 80% UCR; subject to $200 deductible.</td>
<td>Covered up to 100% UCR...</td>
</tr>
<tr>
<td><strong>Laboratory, X-rays and Tests</strong></td>
<td>Covered up to 100% UCR. No deductible or co-pay required.</td>
<td>Outpatient hospital charges covered up to 100% UCR after $5 copay.</td>
</tr>
<tr>
<td><strong>Maternity</strong></td>
<td>Covered up to 80% UCR; subject to $200 deductible.</td>
<td>Global fee covered up to 100% UCR...</td>
</tr>
<tr>
<td><strong>Preventive Medicine, Physical Exams</strong></td>
<td>Routine childhood immunizations for dependent children under age 18 are covered. Office visits are not covered. One routine Pap smear and gynecological exam per year.</td>
<td>Routine childhood immunization for dependent children under age 18 are covered.</td>
</tr>
<tr>
<td><strong>Eye, Ear Exams</strong></td>
<td>Routine examinations not are covered.</td>
<td>Routine examinations are not covered.</td>
</tr>
<tr>
<td><strong>Second Opinions</strong></td>
<td>Covered at 100% UCR for certain procedures. No deductibles or co-pay required.</td>
<td>Covered up to 100% UCR...</td>
</tr>
<tr>
<td><strong>Mental Inpatient:</strong></td>
<td>Covered for 30 days per plan year. Covered up to 80% UCR; subject to $200 deductible. Maximum coverage limited to $10,000 lifetime, including outpatient care.</td>
<td>Covered for 30 days. Covered up to 100% UCR with $5 co-pay. Additional hospital days under Major Medical. Maximum coverage limited to $25,000 lifetime, including outpatient care...</td>
</tr>
<tr>
<td><strong>Hospital and Physician</strong></td>
<td>Covered for 30 days per plan year. Covered up to 80% UCR; subject to $200 deductible. Maximum coverage limited to $10,000 lifetime, including outpatient care.</td>
<td>Covered for 30 days per plan year with plan approval.</td>
</tr>
<tr>
<td><strong>Mental Outpatient:</strong></td>
<td>90% UCR, up to $1,250 per plan year; subject to $200 deductible. Services must be rendered by a licensed psychologist or psychiatrist. Maximum coverage limited to $10,000 lifetime for outpatient treatment.</td>
<td>50% UCR up to $200 per plan year; subject to $200 deductible. Services must be rendered by a licensed physician or psychologist. Maximum coverage limited to $25,000 lifetime, including outpatient care...</td>
</tr>
<tr>
<td><strong>Physician</strong></td>
<td>90% UCR, up to $1,250 per plan year; subject to $200 deductible. Services must be rendered by a licensed psychologist or psychiatrist. Maximum coverage limited to $10,000 lifetime for outpatient treatment.</td>
<td>50% UCR up to $200 per plan year; subject to $200 deductible. Services must be rendered by a licensed physician or psychologist. Maximum coverage limited to $25,000 lifetime, including outpatient care...</td>
</tr>
<tr>
<td><strong>Mental, Drug, and Alcohol Treatment</strong></td>
<td>The benefits provided under all the plans comply with Pennsylvania State Law; however, there are variations to the levels of benefits provided under each plan. Permissible under state laws, three of the HMO plans –</td>
<td></td>
</tr>
<tr>
<td><strong>Prescriptions</strong></td>
<td>Covered up to 80% UCR; subject to $200 deductible.</td>
<td>Covered up to 80% UCR; subject to $200 deductible...</td>
</tr>
<tr>
<td><strong>Dental Care</strong></td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>
## Healthcare HMO of New Jersey

<table>
<thead>
<tr>
<th>HIP Health Plan of NJ</th>
<th>Keystone Health Plan East, Independence Blue Cross and Pennsylvania Blue Shield’s HMO</th>
<th>PENN Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>(8)</td>
<td>A mixed model HMO comprised of medical professionals providing care from a center or from a network of private medical offices.</td>
<td>(11) PENN Care allows you to use HUP and CHOP and the University of Pennsylvania Health System (CPUP, CCHA) and CHOP (Faculty Only) with $10 co-pays for most services. This network is designated as the Preferred Provider network. Plan provides Non-Preferred Provider benefits—the Blue Cross Comprehensive Plan (Option 1 on this chart) at $200 deductible or co-pay required. Maximum out-of-pocket expenses (excluding co-pay for outpatient mental care) is $1,200 for individual coverage and $2,400 for family coverage if you use participating Pennsylvania Blue Shield providers. Non-participating Blue Shield providers may bill you for any balance that exceeds UCR.</td>
</tr>
<tr>
<td></td>
<td>An individual practice association HMO comprised of physicians who provide care through their own offices and affiliated hospitals.</td>
<td>Preferred Provider Plan pays 80% of covered expenses after a $200 deductible is met ($400 family aggregate). Maximum out-of-pocket expenses (excluding co-pay for outpatient mental care) is $1,200 for individual coverage and $2,400 for family coverage if you use participating Pennsylvania Blue Shield providers. Non-participating Blue Shield providers may bill you for any balance that exceeds UCR.</td>
</tr>
</tbody>
</table>

### Covered Services

- **Alcohol Treatment**
  - No maximum limit for medically necessary service. Covered at 100% UCR, subject to $200 deductible.

- **Dental Care**
  - Covered up to 80% UCR; subject to $200 deductible. Covered up to 100% UCR for surgical services. Plan pays 80% of covered costs after a $200 deductible. Co-pay for glasses or contacts of $20 or 20% at participating out-of-network providers.

- **Mental, Drug and Alcohol Inpatient Treatment**
  - Covered up to 80% UCR; subject to $200 deductible. Services must be rendered by a licensed physician or psychologist. Lifetime maximum limited to $25,000, including mental health, drug, or alcohol intervention.

### Exclusions

- **Routine childhood immunization for dependent children under age 18** are covered. 
  - Unlimited, semi-private room. Covered up to 80% UCR; subject to $200 deductible. Pre-Certification is required for any admission other than maternity or emergency admission.

### Pre-Certification

- **For outpatient mental care** is $1,200 for individual care. Maximum out-of-pocket expenses (excluding co-pay) is $2,400 for family coverage. Non-participating Blue Shield providers may bill you for any balance that exceeds UCR.

### Co-Payments

- **Preferred Provider**
  - Co-pay $200 for general and $10 co-pay for non-generic at participating pharmacies. Includes oral contraceptives, insulin, related needs, syringes. 
  - N/A

- **Non-Preferred Provider**
  - Co-pay up to $200 deductible; subject to $200 deductible. Maximum coverage limited to $10,000 lifetime for outpatient treatment, including any benefits provided by a Preferred Provider.

## University of Pennsylvania

### Hospital Services

- **Hospital services at HUP and CHOP**
  - Covered in full. Co-pay $200 deductible. Co-pay waived if admitted to hospital. Primary care physician must be notiﬁed within 24 hours of treatment, otherwise expenses not covered. Co-pay waived if admitted to hospital. Primary care physician must be notiﬁed within 24-48 hours of treatment, otherwise expenses not covered.

### Physician Services

- **Physician services from CPUP, CCHA, or CHOP (Faculty Only)**
  - Covered 100% for inpatient. Covered $10 co-pay for outpatient. Limited to Preferred Provider. Covered at 100% UCR for outpatient. No deductible or co-pay required.

### Dental Services

- **Dental care**
  - Covered up to 100% at HUP and CHOP. Covered in full within 72 hours of accident or medical emergency. No deductibles or co-pay required.

### Mental Health Services

- **Mental health services**
  - Covered at 100% UCR for inpatient. Covered at 50% UCR up to $1,250 a year for outpatient mental care. Covered at 100% UCR for inpatient. Covered at 50% UCR up to $1,250 a year for outpatient mental care. Covered at 100% UCR for inpatient. Covered at 50% UCR up to $1,250 a year for outpatient mental care.

### Co-Payments

- **Preferred Provider**
  - Co-pay $200 for general and $10 co-pay for non-generic at participating pharmacies. Includes oral contraceptives, insulin, related needs, syringes. 
  - N/A

- **Non-Preferred Provider**
  - Co-pay up to $200 deductible; subject to $200 deductible. Maximum coverage limited to $10,000 lifetime for outpatient treatment, including any benefits provided by a Preferred Provider.

### Children’s Services

- **Children under 12 covered**. No referral required for routine dental. Two visits per year for cleaning, scale, and exam, $5 co-pay per visit.

### Specific Information

- **Plan Booklets**
  - Specific information. Plan Booklets can be obtained from the Benefits Office.
HUMAN RESOURCES

Medical & Dental Plan Rate Sheet
July 1, 1995 to June 30, 1996

Dental Assistance Plans Comparison Chart
As the following chart indicates, the PFPP generally pays a higher percentage of the costs of your treatment. The Prudential Plan offers freedom of choice as to where you receive your care.

<table>
<thead>
<tr>
<th>Service or Treatment</th>
<th>PFPP 1 % Paid</th>
<th>PFPP 2 % Paid</th>
<th>Prudential 1 % Paid</th>
<th>Prudential 2 % Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnostics (exams, x-rays)</td>
<td>100%</td>
<td>100% R&amp;C *</td>
<td>100%</td>
<td>100% R&amp;C *</td>
</tr>
<tr>
<td>Preventive (teeth cleaning)</td>
<td>100%</td>
<td>2 visits/plan year, (7/1-6/30) reimbursements limited</td>
<td>90% R&amp;C *</td>
<td>90% R&amp;C *</td>
</tr>
<tr>
<td>Restorative (fillings)</td>
<td>100%</td>
<td>90% R&amp;C *</td>
<td>100% R&amp;C *</td>
<td>100% R&amp;C *</td>
</tr>
<tr>
<td>Oral Surgery (extractions)</td>
<td>100%</td>
<td>100% R&amp;C *</td>
<td>100% R&amp;C *</td>
<td>100% R&amp;C *</td>
</tr>
<tr>
<td>(NOTE: Some oral surgery may be covered under your medical plan.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Endodontics (root canal therapy)</td>
<td>90% R&amp;C *</td>
<td>80% R&amp;C *</td>
<td>90% R&amp;C *</td>
<td>80% R&amp;C *</td>
</tr>
<tr>
<td>Periodontics (gum disorders)</td>
<td>90% R&amp;C *</td>
<td>80% R&amp;C *</td>
<td>90% R&amp;C *</td>
<td>80% R&amp;C *</td>
</tr>
<tr>
<td>Prosthodontics (bridges, false teeth)</td>
<td>60% R&amp;C *</td>
<td>50% R&amp;C *</td>
<td>60% R&amp;C *</td>
<td>50% R&amp;C *</td>
</tr>
<tr>
<td>Crowns and Restorations (gold crowns, restorations, caps)</td>
<td>60% R&amp;C *</td>
<td>50% R&amp;C *</td>
<td>60% R&amp;C *</td>
<td>50% R&amp;C *</td>
</tr>
<tr>
<td>Orthodontics** (teeth straightening, children under age 19 only)</td>
<td>60% R&amp;C *</td>
<td>50% R&amp;C * up to $1,000 lifetime maximum per person</td>
<td>60% R&amp;C *</td>
<td>50% R&amp;C * up to $1,000 lifetime maximum per person</td>
</tr>
<tr>
<td>Plan Year Benefits Maximum</td>
<td>none</td>
<td>$1000 per person</td>
<td>none</td>
<td>$1000 per person</td>
</tr>
</tbody>
</table>

CR: Credit (No retroactive credit adjustments will be made)

* Credit limited to Single premium credit.

** Note that if you change from one dental assistance plan to the other, certain treatments that have already begun under the first plan will continue to be covered by that plan. However, for orthodontia treatment, if banding has begun prior to July 1995, and if you change plans, neither the new plan nor the old plan will provide coverage for the remaining expenses. For the Penn Faculty Practice Plan: There is a 24-month waiting period for orthodontic services if a dependent age 5 or older is not enrolled within the initial 31-day enrollment period.

Major Changes to 1995-96 Pennflex
- Premiums for most of the medical plans and dependent life insurance have decreased; but the University contributions remain the same. As a result your cost this year may not only decrease, but also generate additional flexdollars credits. The cost of life insurance has decreased for employees under age 65 and increased for employees age 65 and over.
  - Flexdollar amounts have also changed since flexdollars are based not only on the employee's age and salary but also on the cost of life insurance.
  - The dental plan premiums remain the same.
  - A new medical plan–PENN Care (Option 1)–has been added which reduces out-of-pocket expenses to $10 co-pays per visit for most services rendered by the Hospital of the University of Pennsylvania (HUP) Preferred Provider network. The PENN Care plan provides a similar level of benefits as the BC Comprehensive Plan (Option 1) for those services not provided by or not available through the HUP Preferred Provider network.
  - Effective July 1, 1995 the prescription benefits available to Blue Cross and PENN Care subscribers may be provided through a pharmaceutical card company rather than through Blue Cross. Employees will be notified in June if such a change occurs.
  - Effective July 1, 1995 Greater Atlantic is a “point-of-service” plan providing certain out-of-network benefits. For additional information about this new plan, contact Greater Atlantic at 1-800-959-2181.
  - Other changes appear in shaded boxes throughout the Pennflex booklet.

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ALMANAC SUPPLEMENT March 28, 1995