



PALM BEACH COUNTY FIREFIGHTERS EMPLOYEE BENEFITS FUND

www.MyFFBenefits.com

Keeping You Informed On Your Benefits

Volume 2, Issue 1 Winter 2012

Insurance Trust looks at “On-Site” Health Clinic

You may have heard...

The Health Insurance Trustees are currently doing a period of due diligence on a property (office building) that may fit our future needs on multiple levels. Current collective bargaining negotiations suggest that yearly physicals may be conducted through the insurance fund and we will need to be ready to go should that happen. Additionally, your Health Insurance Trustees have been investigating the idea of our own “walk-in” type clinic to further advance wellness and the overall health care to our members and their families.

As trustees, we recognize the uncertainties over healthcare reform, the evolving models of healthcare delivery, and the impact of ever rising health care costs. Your trustees have to deal with these and many more challenges to provide you with the best and most affordable health care we can. We are proud of our fund, its efficient operation, and will continue striving to further enhance and protect our benefits.

As you can imagine, as we have continued to grow we have nearly outgrown our existing office space. Finding a new site for our office and a site that can accommodate our future needs in a location that is convenient for the majority of our members has become a priority. This is happening at a time when property values have declined and availability is at its peak. These are some of motivating factors for looking into purchasing a building that can meet our needs.

If you have any questions about your health insurance fund or where we are headed, please contact the office or one of your trustees.

2012 Plan Documents for Medical, Dental & Vision

Are available on the web-site, www.MyFFBenefits.com

Due to the costs of mailing a copy to each participant we have elected to post them online and to mail copies upon request, if you would like a hard copy mailed to you please contact the Benefits Fund office.

PROVIDING QUALITY BENEFITS FOR YOU AND YOUR FAMILY

2328 S. Congress Ave. • Suite C • West Palm Beach, FL 33406 • Telephone: (561) 969-8863 • Fax: (561) 966-7760

EXPECTING?



If you are currently expecting a new baby in your life don't forget about the Benefits Fund Cord Blood harvest-

ing and cryogenic storage program. For only \$100 out of your pocket you can protect your newborn from numerous health issues. The Fund will pick up the balance of the cost for harvesting the stem cells and storing them for 18 years..... It's well worth the small investment on your part.

Call the Fund office to get a brochure and contact information for the Stem Cell Cryobank located at the Bethesda Health City on Hagen Ranch Road in Boynton Beach.

New ID Cards

New Insurance ID cards were mailed to all Fund participants in December. If you did not receive new ID cards please contact us at the Fund office. UMR failed to wait until after all Open Enrollment changes were made and therefore anyone needing new cards due to those changes should be receiving updated cards this week. Please verify the listed dependents and coverage's on your new cards to make sure the information is correct. If you need any additional cards for any reason please call or send an email. Your old cards are still good.



Blood Work

**USE
LAB CORP,
RSS LABS**

**or any network approved Lab Facility
for all blood work**

It's your responsibility to inform your doctor!!!

Life Insurance Benefits

All employee's and retiree's who are participants of the Fund receive life insurance benefits, the amounts are as follows:

Active Employee's..... \$100,000

Retiree's under age 70..... \$ 50,000

Retiree's over age 70..... \$ 25,000

Are your beneficiary designations up to date?

Contact the Fund office to be sure or email

tamara@MyFFBenefits.com

Did you have a child turn 26 in 2011?

If you had a child on your health insurance plan who turned 26 last year then you needed to complete an eligibility form to keep them insured, please contact the Fund office if did not complete a form. Additionally, children over the age of 26 are not eligible for Dental coverage

Address Change?

Don't forget to let the Fund know if you have a change of mailing address, email address or cell phone #. tamara@MyFFBenefits.com

www.MyFFBenefits.com

Your one stop shop for all forms, links to provider networks, contact information, Plan Documents and up to the minute important information.

No log in or passwords required!

UMR.com

**Use Network Providers
to get the most from
your benefits!!!**

UHC Choice Plus Network,
Dentemax and
CompBenefits Vision
all easily accessed from
www.MyFFBenefits.com

If you haven't signed up for UMR's new web portal do it today! UMR.com is an interactive website to review your claims, order ID cards to replace lost or damaged ones, review benefits, find providers for health & dental, and many other exciting things.

Just have your ID card handy and go to UMR.com to begin the registration process.

E.A.P. Employee Assistance Program

It's not just for employees!

All participants of the PBC FF's Employee Benefits Fund are eligible to use the EAP network of over 20 local providers. Wide variety of counseling services are available, and the best part.....

.....It's absolutely free and 100% confidential

Call Nancy Persenaire, Administrator of the EAP @ 561-967-3266 to get started today, or visit www.MyFFBenefits.com to get a list of providers in our EAP network.

Summary of Medical Plan Document Changes for Plan Year 2012 Effective January 1, 2012

This is only a summary of the changes for plan year 2012, for exact changes please refer to the posted Medical & Dental Plan Documents, revised and restated, and Summary Plan Description (SPD), effective January 1, 2012.

The full Medical and Dental Plan Documents can be viewed online at www.MyFFBenefits.com, or you can request a copy to be mailed to you by contacting the Fund office @ 561.969.6663.

Section 6.3 Retirees

Added employees hired after July 1, 2011 must have at least 8 years in the FRS to remain a participant in the Plan in retirement.

Section 6.3 Retirees, and Section 6.4 Other Employees

Added language that requires participant to notify Plan Administrator of any changes in status which might affect premiums, and failure to notify limits Funds liability for overpaid premiums to 6 months from the date of qualifying event.

Section 9.38 Morbid Obesity

Added definition to include BMI of 35 with co-morbid condition of diabetes.

Section 10.1 Lifetime Maximum Benefits

Changed In-Vitro Fertilization/Artificial Insemination payment schedule to 60% (from 50%) coverage in-network and to 40% (from 0%) coverage out of network.

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Section 10.2 Eight Calendar Years Maximums

Added benefit for Lasik Surgery covered at 50% to a maximum of \$2,500 once every 8 years, in or out of network.

Section 10.2(a) Three Calendar Years Maximum

Added benefit for Hearing Aids, covered at 50% to a maximum of \$2,000 once every 36 months, in-network, thru Epic Hearing Care, and covered at 50% to a maximum of \$1,500 once every 36 months out of network.

10.4 Major Medical Benefits

- Reduced per admission hospital co-pay to \$200, and waived per admission hospital co-pay for admissions related to child birth for in-network providers.
- Reduced Out-Patient Surgery Co-Pay to \$100, for in-network providers.
- Raised Calendar Year maximums for Mental & Nervous Conditions and Alcohol & Substance Abuse treatments from \$750,000 to \$1,250,000, per Federal Government guidelines.
- Changed coverage on spousal body scans to 100% from 50%.
- Changed coverage for Adult Stem Cell Harvesting to 80% from 50%.
- Changed Autism Spectrum Disorders to be treated as any other Mental & Nervous Condition

10.5 Prescription Drug Plan

Added PPI's (Proton Pump Inhibitors) to the Step Therapy Program, grandfathered for those currently taking PPI's.

11.2 Supplemental Accident Expense Benefit

Removed Urgent Care Facilities from this benefit, Urgent Care Facilities remain 100% covered after \$30 co-pay.

**Summary of Dental Plan Document Changes for Plan Year 2012
Effective January 1, 2012**

Eligibility Requirements for Retiree Coverage

Added employees hired after July 1, 2011 must have at least 8 years in the FRS to remain a participant in the Plan in retirement.

Preventative Services

- Changed Bitewing Films to every 6 months from every 12 months.
- Changed Panoramic Film to once every 3 years or when medically necessary.

Major Services

Changed in-network Crowns, Bridges & Implants to 80% coverage from 60%.

Orthodontia

Changed in-network benefits to 60% coverage from 50%.

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