



CHRISTIAN SCHOOLS
INTERNATIONAL

CSI Insurance Plan & Trust Fund

UPDATE

Date: July 19, 2005

To: Retirees Covered by Priority Health

From: Howard Van Mersbergen
Executive Secretary-Treasurer

- From Howard's Desk
- September 1, 2005, Open Enrollment
- Premium Rates for September 1, 2005
- New Health Plans
- Change in Prescription Drug Copay
- Changes in Medical Coverage
- Maternity Length of Stay
- Reconstructive Surgery following Mastectomy
- Contacting the CSI Benefits Office

From Howard's Desk

The Trustees have continued to work diligently on solutions that will provide members with good benefit coverage at a reasonable cost. We, with the help of our consultants at Marsh, Inc., have negotiated with our insurance carriers in finalizing the insurance renewals for next year in an effort to minimize your cost. We have also looked at how our programs compare to the marketplace from the benefit side and are now offering a second supplemental plan for retirees over the age of 65 through Priority Health. We are also offering a Health Savings Account plan and Health Reimbursement Account plan to retirees under the age of 65. As health care costs continue to rise, we will need to continue adjusting plan design to help manage premium costs.

Feel free to contact me by phone at 800-635-8288, ext. 226 or e-mail at hvanmersbergen@CSionline.org to share your ideas on ways that we can work together to provide for your insurance needs.

September 1, 2005, Open Enrollment

September 1, 2005, is the deadline for open enrollment for the 2005/2006 Plan Year. **You will have the same health and dental coverage for the 2005/2006 Plan Year as you have now unless you complete a new enrollment form and change your coverage.** To obtain an enrollment form, call 800-635-8288 or 957-1070, ext. 233.

In past years, vision coverage has not rolled over to the following Plan Year, requiring participants to enroll annually. **There is a change this year:** vision coverage will rollover to the next Plan Year just like your other coverage. If you wish to terminate your vision coverage as of end of the Plan Year, complete the vision form and select the option indicating that you want the coverage terminated.

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Premium Rates for September 1, 2005

A rate sheet for your coverage is enclosed. All rates include both health and dental coverage.

New Health Plans

Effective September 1, we will offer two new plans for retirees under the age of 65: a Health Savings Account Plan and a Health Reimbursement Account Plan. For retirees over the age of 65, a second supplemental plan will be available in order to provide a lower cost alternative to the current plan. Coverage details are listed in the summary brochure included with this Update.

Change in Prescription Drug Copay

Effective September 1, 2005, for the Priority Health plans, the prescription copay amount is changing from \$15/\$30/50% (for generic/brand/non-formulary) to \$15/\$30 (for generic/brand). This means that non-formulary drugs will no longer be covered unless your doctor and Priority Health authorize its continued use.

If you are using a non-formulary drug because you have tried other alternatives on the formulary and they have been ineffective, your doctor will need to contact Priority Health's pharmacy department in order to authorize continuation of coverage for the non-formulary drug. When approved, the drug will be covered at the appropriate brand or generic copay level.

If you have not tried a formulary alternative, you will need to discuss with your doctor if doing so is appropriate for your needs. If your doctor and Priority Health determine that the non-formulary drug is best for you, your doctor can authorize the drug to be covered at the appropriate brand or generic copay. If you continue to use a non-formulary drug after September 1, 2005, without obtaining authorization, the drug will not be covered.

Changes in Medical Coverage

The following changes to coverage for retirees under the age of 65 will be made effective September 1, 2005:

Plan	Current	Effective 09/01/05
Priority Health POS	<ul style="list-style-type: none">• \$15 Office Visit Copay• No Deductible	<ul style="list-style-type: none">• \$20 Office Visit Copay• \$100/\$200 Deductible (Alternate Deductible \$500/\$1,000)
Priority Health HMO100	<ul style="list-style-type: none">• \$15 Office Visit Copay• No Deductible	<ul style="list-style-type: none">• \$20 Office Visit Copay• \$100/\$200 Deductible

Maternity Length of Stay

Where a plan covers maternity benefits, guidelines for a hospital length of stay are at least forty-eight (48) hours for a vaginal delivery and ninety-six (96) hours for a cesarean delivery. The length of stay begins at the time of delivery, if the delivery takes place in a hospital. If the delivery does not take place in a hospital, the length of stay begins once the mother and newborn are admitted to the hospital as inpatients.

The mother and newborn are not required to stay 48/96 hours if the attending provider, after consulting with the mother, decides to discharge the mother and newborn earlier.

Pre-certification procedures for maternity hospital stays will be required as described in your Policy.

Reconstructive Surgery following Mastectomy

Individuals receiving benefits in connection with a mastectomy may elect breast reconstruction in connection with such mastectomy. Such reconstruction includes the following:

- (1) Reconstruction of the breast on which the mastectomy has been performed;
- (2) Surgery and reconstruction of the other breast to produce a symmetrical appearance;
and
- (3) Prosthesis and physical complications of all stages of mastectomy, including lymphedemas.

These benefits will be subject to the terms, conditions and limitations of your health coverage with Trustmark, including determinations of medical necessity and reasonable and customary charges. Coinsurance and deductibles will also continue to apply as permitted by State law.

Contacting the CSI Benefits Office

If you have questions or need additional information, contact Lois by phone at 800-635-8288 or 616-957-1070, ext. 233 or by e-mail at LLandheer@CSIONline.org.

The CSI web site contains information on CSI benefits, forms that you may need and benefit publications like plan books and Updates. Go to www.CSIONline.org and select the Employee Benefits tab to see the useful items available.