



CHRISTIAN SCHOOLS
INTERNATIONAL

CSI Insurance Plan & Trust Fund

UPDATE

Date: June 2007

To: Retirees Covered by Priority Health

From: Howard Van Mersbergen
Executive Secretary-Treasurer

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From Howard's Desk

The Trustees continue 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 Mercer Health & Benefits, 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 the coverage contained in our retiree plans and compared them to plans offered by other insurance companies.

The premium rates for the Medicare Advantage Plan have increased substantially because the Centers for Medicare Services (CMS) is not reimbursing Medicare Advantage plans as much as anticipated. We believe, in spite of the increase, that the Medicare Advantage Plan continues to be a good value.

Plans Available to Retirees

For retirees under the age of 65, these four plans are available through Priority Health:

- Point of Service Plan (POS)
- HMO 100
- Health Savings Account (HSA)
- Health Reimbursement Account (HRA)

For retirees age 65 and over, these two plans are available through Priority Health:

- Point of Service Plan (POS)
- Medicare Advantage Plan

All of these plans include both health and dental coverage. A summary of benefit provisions is attached.

Benefit Information Meeting on July 18

Join us at the Pinnacle Center on Wednesday, July 18, at 10:00 a.m. to learn more about the plans listed above. We will let you know about these options and discuss differences in benefit levels and premium. Representatives from CSI and Priority Health will be available to answer questions and assist with paperwork. Refreshments will be provided.

The Pinnacle Center
3330 Highland Drive
Hudsonville MI 49426

Please RSVP by July 16 by calling Kathy at 800-635-8288 or 616-224-1880, ext. 229.

Change in Prescription Copay

- For the POS, HMO 100, HRA, and POS Supplemental plans, the prescription drug copay amount changes from \$15/\$30 (generic/brand) to \$10/\$40 effective September 1, 2007.
- The prescription copay for the Medicare Advantage Plan does not change and remains at \$15/\$30.

Change in Office Visit Copay Amounts

- Effective September 1, 2007, for the POS, HMO 100, HRA, and POS Supplemental plans: To better match the copay amount with the actual amount of the expense, the physicians office visit copay changes to
 - \$ 15 for primary care physician
 - \$ 30 for specialists
 - \$ 45 for urgent care facilities
 - \$100 for emergency room services
 - \$150 for Advanced Diagnostic Services (CT, CTA, MRI, MRA, Nuclear Cardiology Studies, and PET Scan in an office, outpatient, or emergency room setting. There is no copay for inpatient hospital advanced diagnostic services. Annual maximum of 10 copays per individual.)
- For the Medicare Advantage Plan the office visit copay for primary care physicians, specialists, and urgent care changes from \$20 to \$15. The emergency room copay remains at \$75 and there is no copay for Advanced Diagnostic Services.

September 1, 2007, Open Enrollment

September 1, 2007, is the deadline for open enrollment for the 2007/2008 plan year. You will have the same health, dental, and vision coverage for the 2007/2008 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 616-957-1070, ext. 233.

Premium Rates for September 1, 2007

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

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 Member Resources to see the useful items available.