

we are the county of
los angeles

You are a part of what makes the County of Los Angeles a great place to live and work — one of nearly 100,000 employees dedicated to serving the people of the County of Los Angeles. Your *Flex* benefit program is designed to give you the security of knowing we've got you covered — so you have the freedom to focus on what matters most at work and home.



annual enrollment is coming!

October 1 – October 31, 2010

Once again, it is time to review your *Flex* benefit program. This year, benefit enrollment is October 1 through October 31, with your benefit elections taking effect January 1, 2011. Last year, 68% of enrollments were made online. If you want to make changes for the 2011 plan year, you're encouraged to enroll online this year. It's fast and easy! Plus, you can immediately print a summary of your selections and make changes if needed.

Now is the time to make sure your benefit elections are still meeting your and your family's needs. Read on for details.

2011 *Flex* Benefit Plans

In 2011, you'll continue to have access to the same *Flex* benefit plans you have today. But it's still important to review your options. Benefits are not "one size fits all" — your needs may be different than those of your co-workers, and can change over time.

Your *Flex* benefit program includes medical, dental and life insurance as well as two Flexible Spending Accounts and medical coverage protection.

Benefit Costs and Changes for 2011

Be sure to review the Enrollment Highlights Guide and your Personalized Enrollment Worksheet in your annual enrollment packet for information on any benefit changes and monthly costs. Your packet should arrive by the second week in October (see box to the right for more information).

A Change to the Health Care Spending Account

Reimbursement for over-the-counter (OTC) medications using a Health Care Spending Account will be changing starting January 1, 2011. Certain OTC medicines will require a doctor's prescription in order to be eligible for reimbursement. Be sure to review "What Health Care Reform Means to You" on page 3 before you decide how much to contribute to a Health Care Spending Account for 2011.

Remember, your enrollment in spending accounts does not "roll over" from year to year. So, even if you are currently participating in a spending account, you must make a new election each year.

Don't Wait!

The fastest and easiest way to make changes to your benefits is to log on to the benefits Web site, mylacountybenefits.com. See page 2 for more information.

You can also make changes over the phone if you do not have access to the Internet.

If you have any questions about annual enrollment, call the Benefits Hotline at 213-388-9982 or ask your Departmental Benefits Coordinator. Just remember, you'll save a lot of time if you ask early. Don't wait until the last minute!

If you have not received your enrollment packet by the second week in October, log on to mylacountybenefits.com to download the enrollment materials or call the Benefits Hotline at 213-388-9982 to request a duplicate packet.

2011 annual enrollment

Get Ready To Enroll

Be sure to review the annual enrollment packet that will be mailed to your home. Annual enrollment is your once-a-year opportunity to make sure your benefits meet your needs during the coming year.

What Are Your Health Care Needs?

Consider how much you can afford to spend on medical care, and how much flexibility you need when you go to a provider or health care facility. Generally, the more doctors and hospitals you have to choose from, the greater your share of the cost will be. Review the Medical and Dental Plans Comparison Chart and consider each plan's coverage levels and flexibility to help you determine which plan may better meet your needs and those of your family.

Things to Consider...

HMO-Style Plans

HMO medical and "HMO-style" dental plans generally cost less money in deductibles and copays than a PPO plan. However, under an HMO, you can only obtain care from providers and facilities in the HMO network.

PPO-Style Plans

Under the PPO medical and "PPO-style" dental plans, you generally pay a higher amount at the time you seek services (as compared to an HMO), but you have the flexibility to see any doctor, specialist, or dentist of your choice, even if he or she is not in the PPO network.

POS-Style Plans

Under your POS medical plan options, you get to choose whether to use a network provider or to use providers outside the network each time you need health care. You do not need a referral from your Primary Care Physician (PCP) to see another physician. However, the plan typically pays more (and your costs are lower) when you go to your PCP and use network providers.

Enroll or Make Changes Online

You can enroll or make changes to your benefit elections using the County of Los Angeles benefits Web site, mylacountybenefits.com. Through this site, you can access all of the information you receive in your annual enrollment packet and quickly make your benefit elections.

Remember, the site is also available to you and your family all year long to provide you information about your *Flex* benefits whenever and wherever you need it.

mylacountybenefits.com is arranged in three sections:

my benefits

Includes detailed benefit summaries, facts on eligibility and enrollment, downloadable *Flex* Summary Plan Description (SPD), contact information, and online resources to help you find doctors and dentists in your plan networks.

my health

Here you'll find information on wellness programs, up-to-date calendars for wellness fairs and Webinars, and archives of the County's *For Your Benefit* wellness newsletter.

my tools

Provides access to the benefit enrollment system, calculators to help you figure out how much to contribute to your Health Care and Dependent Care Spending Accounts, and audio-visual tutorials about your benefits.

Best of all, the site gives you access to detailed information and tools 24 hours a day, seven days a week. You'll always have the information you need at your fingertips.

Dependent Social Security Numbers Required

During annual enrollment, be prepared to provide Social Security numbers for your family members if you make changes to your medical plan or add dependents. This is so your medical plan can comply with Centers for Medicare & Medicaid Services (CMS) federal reporting requirements.

Flex 2011 Benefits at a Glance

Medical

- Kaiser
- Anthem Blue Cross CaliforniaCare HMO
- Anthem Blue Cross PLUS POS
- Anthem Blue Cross Prudent Buyer PPO
- Anthem Blue Cross Catastrophic Plan

Dental

- SafeGuard HMO-style plan
- DeltaCare HMO-style plan
- Delta Dental PPO-style plan

Accidental Death and Dismemberment (AD&D) Insurance

Medical Coverage Protection (Long-Term Disability Health Insurance)

Flexible Spending Accounts (FSAs)

- Health Care Spending Account
- Dependent Care Spending Account

Life Insurance

- Basic Term Life Insurance

Optional Life Insurance*

- Optional Group Variable Universal Life (GVUL) Insurance
- Optional Dependent Term Life

* You pay for both types of optional life insurance with after-tax dollars. Your premiums for the other benefits shown in this chart are generally paid with pre-tax (before-tax) dollars.



what health care reform means to you

In March, President Obama signed the Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010 (collectively “the Act”). The Act includes a number of changes that may affect you in the upcoming year.

While the details of the Act are still being determined, the following section provides a high-level summary of some of the major changes that take effect starting January 1, 2011.

Health Care Spending Accounts

To receive reimbursement for over-the-counter (OTC) medications from your Health Care Spending Account, you must submit a doctor’s prescription for that medication. Certain OTC items, such as band-aids, will continue to be eligible without a prescription.

While this is not a complete list, the following list shows some examples of OTC medicines that will require a doctor’s prescription starting January 1, 2011, in order to be eligible for reimbursement:

- Allergy Medicines
- Cough, Cold & Flu Medicines
- Pain Relief Medicines
- Respiratory Treatments
- Sleep Aids & Sedatives
- Stomach Remedies

The following list shows examples of some of the OTC items for which you can receive reimbursement without a doctor’s prescription:

- Band-Aids
- Contact Lens Supplies & Solutions
- Denture Adhesives
- First-Aid Supplies
- Diabetic Supplies

Be sure to consider this change when planning how much you want to contribute to your Health Care Spending Account for 2011.

Children Up to Age 26 May Be Covered

You may enroll your eligible adult children in your medical and dental plans until their 26th birthday, regardless of student or marital status. To be enrolled, you must attest that your adult children are not eligible for other employer-sponsored coverage (except under a parent’s plan) such as a plan from their own job or their spouse’s job.

If your children previously lost coverage (or will lose coverage in the next few months) due to reaching the current maximum age (25) or were not full-time students, you may add them to your

medical and dental plans during the upcoming annual enrollment. Coverage for adult children added during annual enrollment will begin January 1, 2011.

Elimination of Lifetime Dollar Maximums

Lifetime dollar maximums, such as the medical plan’s overall lifetime maximum, will no longer apply under any of the County of Los Angeles medical plans. While no participant in a County-sponsored medical plan has hit the medical plan’s lifetime maximum in the past, this limit will no longer apply effective January 1, 2011.

Pre-Existing Conditions

With the passage of the Act, insurance plans will no longer be able to deny coverage to participants with pre-existing conditions (children in 2011 and adults in 2014). This change does not affect the County of Los Angeles medical plans as participants with pre-existing conditions were not denied coverage.

Watch for more information in your annual enrollment materials about how the changes included in the Act may affect you and your families starting January 1, 2011.





The County of Los Angeles

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steps to better health

You have a considerable amount of power in determining your overall health and your risk for serious health issues. Annual enrollment is a great time to take charge of your health.

There are four important numbers you can use to help gauge your overall health and your risk for serious health issues – blood pressure, cholesterol, blood glucose, and body mass index (BMI). Follow these tips to get started today!

Know (and Use) Your “Health Numbers”

Have your blood pressure, cholesterol, blood glucose and BMI checked as needed. You can often have these important “health numbers” checked a variety of ways, including visiting your doctor, health fairs, gyms and fitness centers. Finding out your level of risk is the first step towards wellness.

Take Your HRA

Once you learn what your numbers are and how important they are, we encourage you to enter those numbers into a free Health

Risk Assessment (HRA). The HRA can provide you with a more complete picture of your overall health. This helpful tool gathers information about your health history, current “health numbers,” and lifestyle habits, such as exercise and diet. Your answers are used to create an easy-to-understand explanation of your health status and any risk factors you may have. Once you complete your HRA, your health plan will provide suggestions on how to improve your scores and achieve a healthier status.

Set Goals

Once you complete your HRA, you should set health goals based on your blood pressure, cholesterol, blood glucose, and BMI “health numbers.” Talk with your doctor about the results and determine what types of goals you should set, a realistic timetable for reaching them, and some ideas to help you achieve them.

Work to Reach Your Goals

Remember, your “health numbers” aren’t set in stone. You can turn bad numbers around

when you make healthy changes in your lifestyle. Exercise at least five days a week for a minimum of 30 minutes, eat healthier and take medication as directed, if recommended.

Get Help to Get Healthy

You can complete a Health Risk Assessment (HRA) no matter what medical plan you are enrolled in. To complete your HRA today, log on to:

Kaiser

<http://my.kp.org/ca/countyofla/>

Anthem Blue Cross*

www.anthem.com/ca/countyoflosangeles

* Receive up to \$50 in gift cards for taking your HRA.

