DATE: November 3, 2010

TO: Non-Represented Employees
Library Employees

FROM: Brenda Taubel, HR Specialist

RE:
1) 2011 Flexible Spending Election – return by December 3, 2010 – *changes to allowable expenses*
2) 2011 Insurance Plan Changes – *new federal law*
3) Monthly Insurance Premiums and Employee Contributions
4) Open Enrollment – Health, Dental and Vision Insurance

1) **Flexible Spending Election for 2011**. If you elect to participate, you decide the approximate amount of allowable expenses, including co-pays, co-insurance and over-the-counter items, that you will use in 2011, and that amount is deducted from your paycheck. You don't pay social security, federal or state withholding tax on those dollars as the amount is deducted from your gross pay before taxes are calculated. This is a "use-it or lose-it" plan, so don't overestimate the amount you will use.

   Reimbursement of over-the-counter (OTC) medicines and drugs changed for 2011. Some OTC items will require a prescription, while others are no longer eligible for reimbursement. Attached is a list of the eligible health care expenses. Please review this list prior to making your annual election.

   If your spouse participates in an HSA (Health Savings Account) through his or her employer, please contact M&I for information regarding eligible expenses through the City. The federal government has limited the type of eligible expenses under this plan if you participate in any HSA. The website for M&I is miwebflex.com, or you can call at 1-800-236-3539.

   If you want to participate in the flex plan, **return the completed form to me no later than Friday, December 3, 2010.** *If you do not return this form, you will not be able to participate in the flex plan in 2011.*

   a. Medical/Dependent Care Minimum/Maximum Amounts through the City of Menasha. The minimum annual election is $100, and the maximum annual election for the medical reimbursement is $4,000. The IRS maximum annual contribution for dependent care reimbursement is $5,000.

      The City has a HRA (Health Reimbursement Arrangement) policy that applies to mail order prescriptions costs that exceed $200 for Tier 2, or $320 for Tier 3, per prescription, and

4) **Open Enrollment for Health, Dental and Vision Insurance**. This is the only time during the year you can change your coverage or add an eligible dependent without a qualifying event, for coverage effective January 1, 2011.

The comparison chart for the health insurance is available on the employee intranet. Please contact me if you want a copy of the comparison chart. The plan coverage is the same for all plans. Differences between the plans are co-pays, co-insurance and ability to go outside the network of doctors. Remember that Network Health Plan now includes a number of physicians and other ThedaCare service providers. Please contact either Network Health Plan at 720-1300 or access their website to determine if your physician or service provider is now included in the Network Health Plan.

- If you do not want to change anything, you need not do anything.
- If you want to change your health plan coverage (for example, from HMO-1 to HMO-4), please contact me prior to Friday, December 3, 2010.
- If you want to add an eligible dependent for any plan, please contact me prior to Friday, December 3, 2010. This includes adult child enrollment.
- If you want to change any of your insurance coverage levels, please contact me prior to Friday, December 3, 2010.

Please contact me if you have any questions. Thank you.