

2010 Enrollment Readiness Checklist

Use this checklist to help you make your benefit choices for next year. Step 3 includes important information about election deadlines.

Step 1: Review Your Medical Plan Options

Consider the medical and prescription drug needs you and your family may have next year.

1. Make a note of any care you will need next year, such as an annual physical, suggested surgery, a baby on the way or prescription drugs you take regularly.
2. Consider the medical and prescription drug care you received last year. Will any of that care be repeated next year? What did it cost?
3. If you're currently in the Standard or the Health Investor PPO, view your annual health statements for the last year by logging on to the "MyBlueService" page on BlueCross BlueShield of Florida's (BCBSF) Web site www.bcbsfl.com. You need your BCBSF user ID and PIN to log in; if you haven't received one, register using your Social Security number and birth date. If covered dependents authorize you to see their claim records, gather the claim history for the entire family and use it to consider what your expenses may be next year. Check your prescription drug history on www.caremark.com

Understand your medical plan options. Most retirees have four types of health plans to choose from:

- A Standard Preferred Provider Organization Plan with worldwide coverage.
- A Health Investor Preferred Provider Organization Plan with worldwide coverage.
- A Standard Health Maintenance Organization Plan, based on where you live.
- A Health Investor Health Maintenance Organization Plan, again based on where you live.

Use these valuable resources:

- Benefits guide
- www.MyFlorida.com/MyBenefits
- <https://PeopleFirst.MyFlorida.com>
- www.FloridaHealthFinder.gov

Compare your options.

Use the Medical Plan Cost Comparison Tool at www.MyFlorida.com/MyBenefits to compare what your total costs are likely to be under each of the medical plan options, including what you pay for care and coverage.

Check out the health care providers and hospitals participating in each plan.

The Standard and Health Investor PPO plans both use the same network of BCBSF medical providers. Remember, with the PPO, you have lower out-of-pocket expenses when you use network providers.

The provider networks available under the HMO plans vary by plan. With the HMOs, care outside of the network is not covered, except in emergency situations.

If you decide to make changes, select the best plan for you.

See Step 3.

Step 2: Review Your Life Insurance Options

Learn more about your options.

Think about your family's needs in the event of your death.

What ongoing expenses would they have, such as daily living expenses and college education? What financial resources would they have?

If you decide to make changes, select the coverage amount that is best for you.

See Step 3.

Step 3: Make Changes

Make your 2010 benefit elections on the People First Web site, by telephone through People First at (866) 663-4735 or by completing and returning a 2010 election form to People First. Election forms are available on the People First Web site > Health and Insurance > Benefit Materials.

1. You must make changes for the 2010 plan year by 5:30 p.m. Eastern Time (4:30 p.m. Central) on Friday, October 9, 2009.
2. You can make changes during the plan year if you experience a qualifying event. For most qualifying events, you have 31 days from the date of the event to make related benefit changes. For birth or adoption, you have 60 days to make related benefit changes.

