



Participation. Collaboration. Cooperation.

2011-12 Contract Year Renewal Effective September 1, 2011

Premium Rate Changes

The EHA Board is pleased to announce that there will be no change to the medical or dental premium rates for the 2011-12 contract year, effective September 1, 2011. Additionally, the EHA announces that the premium rates for the 2012-13 contract year will be limited to an increase of no more than 4 percent from the current year's rates. This will provide an unprecedented length of time of budget certainty for EHA participants. These rating decisions apply to all available seven active employee health benefit plans, three early retiree benefit plans, and five dental benefit plans. Individual EHA participating subgroups rates will only vary beyond these amounts for subgroup initiated changes in benefits or in contribution/enrollment status changes.

Benefit Changes

1. There will be no changes to the deductible, coinsurance, and prescription drug copayments of the existing benefit plans.
2. In compliance with the provisions in the Patient Protection and Affordable Health Care Act (PPACA), the following improvements and benefit changes will take effect on September 1, 2011:
 - a. The benefits for PPACA defined preventative services will be covered at 100%, and will not be subject to deductible or coinsurance. The current \$500 benefit limit on preventative services will be removed.
 - b. The current lifetime benefit maximum on all plans will be removed and changed to an unlimited maximum.
 - c. Eligible children of employees up to the age of 26 will be allowed to receive dependent coverage under a parent's policy as long as they do not have access to their own insurance through their employer and meet other PPACA requirements.
 - d. Pre-existing condition exclusions for children under the age of 19 have been eliminated.