

*from the HR Department*  
RIT HUMAN RESOURCES

Dear Colleagues:

It's time to start thinking about your benefit needs for the coming year. We'd like to highlight a few changes/additions you'll want to be aware of for 2007.

You may remember that last year, we introduced a medical cost-sharing approach based on pay. The intention was to help shield our lower-paid population from becoming uninsured. As health insurance costs continue to rise more rapidly than salaries and the general cost of living, it becomes unaffordable for people at lower, and even average pay levels, to continue to absorb large annual cost increases. Therefore, beginning in 2007, we will expand the pay-based approach to include a total of four cost-sharing levels.

We are also making an added improvement to Beneflex — with the introduction of a "flex card." In 2007, you will be able to make your Beneflex-eligible purchases with a card — just like a credit card — that will take the funds right from your Beneflex account. You will no longer need to pay for the expense and then wait for reimbursement.

Another change for next year is the elimination of the medical opt-out benefit. The money saved is intended to be used to help fund an employee wellness program accessible to all regular RIT faculty and staff. Our wellness strategy is still in development, but stay tuned for more to come in 2007.

Several modifications will be made to the prescription drug copays to encourage greater participation in the mail order pharmacy. People who use Medco By Mail for their maintenance medications have reported high satisfaction overall. This helps RIT keep our program competitive by providing the same medications at a lower cost with equal or greater quality.

Finally, as we continue to expand our voluntary benefit offerings, we are introducing pet insurance — medical coverage for the rest of your immediate family: your pets!

You will find more details about these changes in this newsletter. We encourage you to read through the newsletter as well as take advantage of the other information resources available to you, including the annual Benefits Fair on October 24<sup>th</sup> and 25<sup>th</sup>.

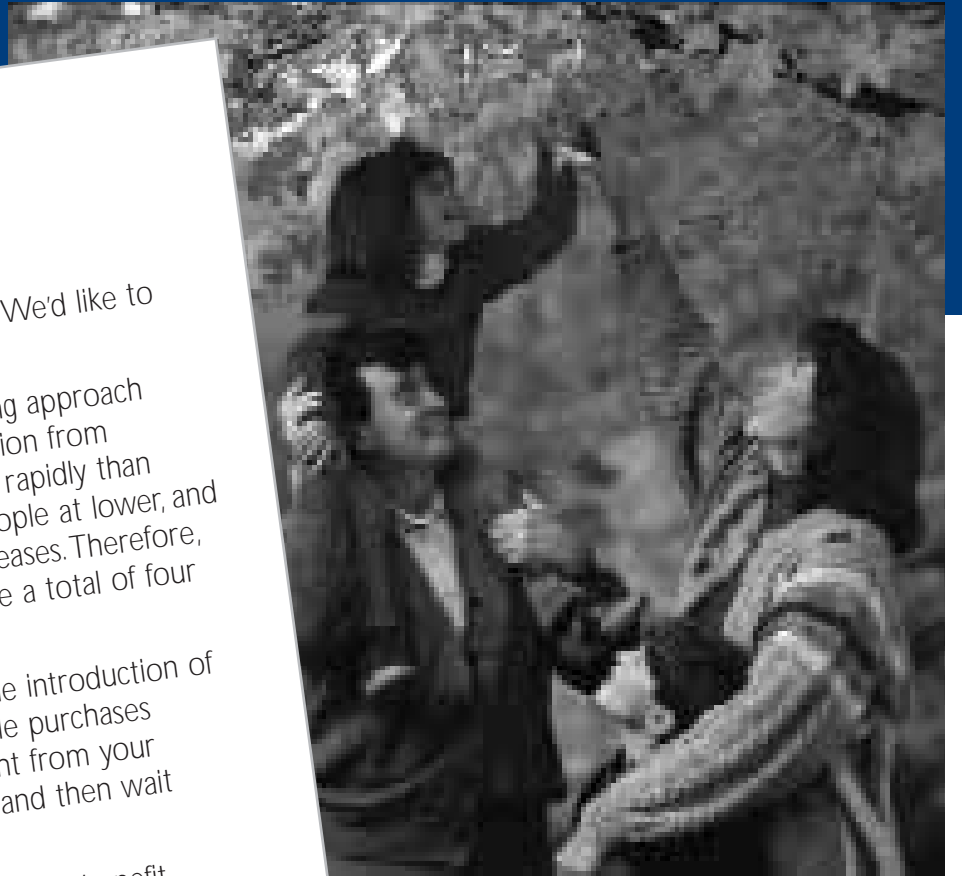
We look forward to another successful enrollment season.

*Patty Spinelli*

Patty Spinelli  
Assistant Vice President  
HUMAN RESOURCES

*Renee Brownstein*

Renee Brownstein  
Associate Director  
HUMAN RESOURCES – COMPENSATION & BENEFITS



**BENEFITS  
OPEN ENROLLMENT 2007**

*Key Dates*

**October 23**  
**Open Enrollment  
BEGINS**

**October 24 & 25**  
**Benefits Fair  
and Workshops**  
**9 AM – 3 PM**  
FIRESIDE LOUNGE  
STUDENT ALUMNI UNION

**November 15**  
**Open Enrollment  
ENDS**

**TOPICS**

- 2007 OPEN ENROLLMENT INFORMATION
- PAY-BASED HEALTH CARE COST-SHARING EXPANDED
- MEDICAL OPT-OUT BENEFIT ELIMINATED
- 2007 PRESCRIPTION DRUG CHANGES
- BENEFICIARY DESIGNATION UPDATE
- ADVANCE CARE PLANNING
- NEW RIT BENEFITS

## This is your **ONLY** opportunity to make a change

Please remember that the Benefits Open Enrollment period is your **only opportunity to enroll, change, or cancel most of your benefit elections**, unless you have a qualified family or employment status change during the year. A qualified family or employment status change includes:

- Marriage
- Birth or adoption of a child
- Divorce
- Death of a spouse or dependent
- A change in employment (e.g., spouse gaining or losing employment, or your status changing from part-time to full-time)

If you have one of these events and you want to elect, change, or cancel your coverage, you must notify the Human Resources Department **within 31 days of the event**. Otherwise, you must wait until the next Open Enrollment for a January 1 effective date. Please remember that the event must be consistent with the change you want to make (e.g., changing from two person to family coverage after the birth of a child) and allowed under IRS rules. **You cannot change insurance plans during the year** (e.g., Blue Point2 POS B No Drug to Blue Point2 POS A) even if you have a change in family or employment status.

# Remember

**If you did not add a new baby to your medical or dental plan when he/she was born, Open Enrollment is the time to do it. You cannot add the child during the year.**

## The following are benefits you need to consider for 2007:

- Medical
- Dental
- Beneflex
- Hyatt Legal Plan
- Supplemental, Spouse, Child AD&D Insurance
- Supplemental LTD Insurance
- Supplemental, Spouse, Child Life Insurance

If you do not take action during the enrollment period, you will not be able to make changes to these benefits during the year, except as described to the left. Your 2006 benefit elections for the above-listed benefits will continue into 2007 with no action on your part, EXCEPT Beneflex. Your 2006 Beneflex election DOES NOT CONTINUE in 2007. If you want to participate in Beneflex for 2007, you MUST enroll.

## How To Enroll

Once again, you will enroll online using Oracle Self-Serve. We encourage you to take advantage of the many enrollment resources available to you. Enclosed in this packet you will find the 2007 rates for all of the various benefit plans. You will also find personalized rates for your benefit choices on the enrollment screen when you log in.

More detailed, step-by-step instructions can be found on the HR website. In addition, each screen has Help Text with important information.

We have also scheduled several Open Lab sessions, staffed by HR representatives, where employees can come, at their convenience, for help with the online process (see lab schedule below). Finally, computer kiosks will be available at the Benefits Fair on October 24<sup>th</sup> and 25<sup>th</sup>. HR representatives will be there to help with your enrollment and answer your questions.

**IMPORTANT:** When completing your online enrollment, you must go through all the screens until you get to the Confirmation screen. **If you do not get to the Confirmation screen, your enrollment will not occur.** One of the great features of employee self-serve in Oracle is that you can print a confirmation when the enrollment process is completed, giving you a record of your elections for 2007. And, if the enrollment period has not ended, you can log in as many times as you want to make benefit election changes.

## Lab Schedule

Session #	Date	Time	Location
1	Tuesday, October 24	9 a.m. – 3 p.m.	Fireside Lounge, SAU (Benefits Fair)
2	Wednesday, October 25	9 a.m. – 3 p.m.	Fireside Lounge, SAU (Benefits Fair)
3	Thursday, November 2*	7:30 a.m. – 10 a.m.	Wallace Library, Room 3650
4	Tuesday, November 7	11 a.m. – 2 p.m.	Wallace Library, Room 3650
5	Monday, November 13	11 a.m. – 5 p.m.	Wallace Library, Room 3650

\*Interpreter will be available

If you have a problem logging in, contact the Help Desk at x5-4357/v and x5-2810/TTY. If you have any questions or experience any difficulty during the enrollment process, please call Val Liegey (x5-5346), Brett Lagoe (x5-5983), Judy DeCoursey (x5-2604), or Julie Hawk (x5-2427) in Human Resources. Our TTY number is x5-2420. Please note that due to the Benefits Fair, our in-office availability will be limited on October 24<sup>th</sup> and 25<sup>th</sup>.

During the Open Enrollment period, there may be times when the system is slower due to other system processes (month-end closing activities, payrolls running, and pay days when employees are viewing their online payslips). Therefore, we suggest you try to avoid these peak daytime hours (9-11 a.m. and 2-4 p.m.) and complete your enrollments early in the morning or later in the day or evening.

Please be patient. If the system “kicks you out,” simply log back in and try again.

After completing your online enrollment you may need to complete the following:

- **Beneflex Direct Deposit Authorization Form** Whenever you do **not** use your Flex Card (described on page 4), you will need to submit claims to be reimbursed. You may also request additional Flex Cards (see page 4). If you did not have your Beneflex claims direct deposited in 2006, and you want your reimbursements sent directly to your bank account, you will have to complete this form. You can obtain the form from the HR website.
- **Unum’s Evidence of Insurability (EOI)** Certain life and LTD changes require you to complete the EOI process. Use the link on the Oracle Enrollment confirmation page to access this online. Changes that require EOI will not go through until the insurance company has approved them. You are not required to complete the EOI process if you are enrolling in Supplemental Life for yourself for 1 times your base pay or increase from 1 to 2 times your base pay. All other life and LTD insurance enrollments and increases require the insurance company’s approval. You do not need approval to enroll or increase any AD&D elections or to reduce or cancel any life, AD&D or LTD coverage amounts.

**Because most people do not change medical plans from one year to the next, and to save on printing costs, we have not enclosed a *Medical Benefits Comparison Book* with your enrollment information. You will find the plan details on the HR website, or you can pick up a copy from Human Resources.**

# 2007 Health Care Changes

## Pay-Based Health Care Cost-Sharing Expanded

For 2006, RIT introduced a new medical cost-sharing approach. In response to rising health care costs, and in an effort to minimize the number of RIT employees without health care coverage, RIT created a two-level structure based on annual base pay. Currently, Level 1 applies to full-time employees whose annual pay is less than \$30,000; Level 2 applies to full-time employees whose annual pay is \$30,000 or more.

Beginning January 1, 2007, the cost-sharing approach for full-time employees will be expanded to four levels based on annual base pay, as follows:

Cost-Sharing Level	Annual Base Pay
Level 1	Less than \$33,000
Level 2	At least \$33,000 but less than \$70,000
Level 3	At least \$70,000 but less than \$105,000
Level 4	\$105,000 or more

While each level will have increased contributions for 2007, the increases for Levels 1 and 2 will be lower than for Levels 3 and 4. Here is an example of the **monthly** increase for employees participating in Blue Point 2 POS B, family coverage:

Cost-Sharing Level	Monthly Increase in POS B Family Contribution
Level 1	+\$ 1.60
Level 2	+\$ 8.67
Level 3	+\$12.75
Level 4	+\$18.46

Approximately 70% of RIT employees are in Levels 1 and 2. Extended part-time employees will continue to have a separate contribution schedule. An employee who retires after January 1, 2007 will remain in his or her pre-retirement level for contributions as a pre-Medicare retiree.

RIT will once again absorb the bulk of the 2007 increase in premiums — about 68%, with employees absorbing about 32%.

*Why is RIT making this change?* As health insurance costs continue to rise more rapidly than salaries and the general cost of living, it becomes unaffordable for people at lower and even average pay levels to continue to absorb large annual increases in cost. Employee contributions for health insurance represent a much larger percentage of a lower-paid employee's salary than a higher-paid employee's. This approach, set in place for 2006, enables RIT to help prevent people from becoming uninsured. It also begins to bring more equity to the portion of pay people are spending for health insurance.

Pay-based contributions are becoming more popular among employers. Bausch & Lomb, Chrysler, GlaxoSmithKline, ITT, and Wachovia are examples of large national employers who have recently made this switch. In higher education, this also appears to be a trend. CUPA-HR (the College and University Professionals Association for Human Resources) reports that 54 of 413 respondents to their 2006 benefits survey use a salary-based tiered system for determining employee health care contributions.

## Medical Opt-Out Benefit Eliminated

Beginning January 1, 2007, employees who choose not to have medical coverage through RIT will no longer receive the medical opt-out benefit.

The benefit, which has been in effect for many years, has provided a payment of \$400 annually to a full-time employee, or \$250 to an extended part-time employee who elects no medical coverage through RIT.

This step is being taken for several reasons:

- The money being paid to employees for opting out of coverage is intended to be used to help fund a wellness program for all RIT employees that will be introduced in the near future.
- The amount of the opt-out benefit has not increased. With the steady rise in health care costs, RIT's philosophy has been to spend its money to provide health care coverage to those employees who need it, rather than increase the opt-out benefit for those who have coverage elsewhere.
- Opt-out benefits are taxable, further reducing their value to employees.
- Many employers who introduced opt-out benefits during the 1990s are beginning to discontinue them for similar reasons.

While the amount paid to each employee who opts out is relatively small, the total dollars paid out are significant. The opportunity to redirect this money to help RIT faculty and staff become healthier holds great promise.



# 2007 Beneflex Changes

## Beneflex Becomes Even More Convenient With New “Flex Card”!

If you've been using Beneflex to help pay for your health care and/or dependent day care expenses, you are enjoying the savings you get by paying for those costs with pre-tax dollars. Now, Beneflex is about to become even better!

Beginning in January 2007, each Beneflex participant will be provided with an “EBS Flex Card.” The Flex Card is a new, convenient way for you to pay for your health care and dependent day care expenses. It automates the process of paying for your eligible expenses by paying your provider at the point of service. This way, you avoid having to pay cash for a service and wait for your reimbursement check to arrive.

Instead, simply use your Flex Card for eligible expenses wherever MasterCard is accepted, from physician and dental offices to pharmacies and vision care providers, as well as at certain dependent day care providers. Your contributions for these eligible expenses are first deducted from your paycheck and then added to your Beneflex account to fund your Flex Card. You may use your Flex Card as often as you like to pay for your eligible expenses.

**How it works:** When you seek eligible services (such as doctor's office visit, prescription or over-the-counter drugs, eyeglasses or contacts), present your Flex Card and the charge will automatically be deducted from your pre-tax account after your card has been swiped. If requested, indicate that this is a credit card, and not a debit card. You do not need a PIN when you use your Flex Card, and you cannot withdraw cash with your card.

Here is some important information you need to know about using the Flex Card:

- The Flex Card is programmed to be used only at approved health care and dependent care providers. If you attempt to use it elsewhere, it will not be accepted.
- It is critical that you save your receipts and supporting detailed information from each Flex Card transaction, as your Beneflex claims are subject to review and audit, especially certain pharmacy and over-the-counter drug claims. EBS Benefit Solutions, RIT's Beneflex administrator, will conduct audits during the year, as required by the Internal Revenue Service.
- You should also save claim reimbursement documentation since EBS does not retain this beyond the current year.
- Be sure to use your Flex Card for eligible expenses only. If you are purchasing both allowable and non-allowable items, such as at the grocery store or pharmacy, please separate your items and use your Flex Card for allowable expenses only.
- If you inadvertently pay for a non-allowable expense with your Flex Card, you will be required to repay the non-allowable amount back to keep your account tax-free.

- Your Flex Card can be used only for the portion of the health care service or supply that is not being reimbursed from a health or dental plan. You will typically use it for copays, coinsurance and deductibles, and for items such as over-the-counter drugs that are not covered by health plans.
- You can submit a claim form for reimbursement if you do not have your Flex Card with you when you incur an eligible expense and pay for it. Reimbursements are typically processed weekly with a \$30 minimum payment amount.

One Flex Card will automatically be provided to you when you enroll in Beneflex. If you wish to have an additional card for a spouse or eligible dependent, you may request one by completing the “Request Form for Issuance of EBS Flex Card to Dependent” found on the HR website, and mailing it to EBS at the address indicated on the form. It takes several weeks to receive additional cards, so be sure to do this as soon as possible once you have enrolled in Beneflex for 2007.

Other conveniences that have been added to Beneflex in recent years have made it more popular with RIT employees — participation in Beneflex has increased 40% in the last 3 years! Those conveniences include:

- Direct deposit of reimbursements — By using the Flex Card, most of your eligible expenses will be paid automatically from your Beneflex account. However, for the occasional claim for which you cannot or do not use your Flex Card, you can choose to have your reimbursements directly deposited to your bank account. To sign up for direct deposit, simply print the Beneflex Direct Deposit Authorization Form from the RIT HR website. Complete and mail the form to the address indicated on the form, with a voided check or deposit slip.
- Online access to check your Beneflex accounts 24 hours a day, 7 days a week via EBS' secure website at [www.online-enrollment.com/excellus](http://www.online-enrollment.com/excellus). You can also access forms and information, and request a PIN for online access.
- The Internal Revenue Service added over-the-counter medications as eligible expenses. These include, but are not limited to, such items as allergy medicines, Tylenol, aspirin, antacids, anti-itch creams, first aid supplies and eye drops.
- Beginning in 2005, the IRS permitted an employer to extend the timeframe for incurring expenses by a 2 1/2 month “grace period.” RIT adopted the new grace period to provide maximum flexibility for Beneflex participants. Eligible expenses for a year can now be incurred through March 15<sup>th</sup> of the following year.

If you have been a Beneflex participant, you know what a great benefit this is. If you haven't tried Beneflex in the past, we encourage you to consider it for 2007.

## Not really sure what Beneflex is all about?

We encourage you to read the Beneflex section of your *Employee Benefits Handbook* or the online summary found on the HR website. There is a detailed description of how Beneflex works and its advantages, examples, and information about eligible expenses.

In a nutshell, Beneflex is what is known generally as a “flexible spending account (FSA).” Beneflex allows you to pay certain eligible expenses with pre-tax dollars. Contributions are deducted from your paychecks before taxes are calculated, thus saving you the cost of Federal and State income taxes, and Social Security and Medicare (FICA) taxes. And you do not pay taxes when you are reimbursed, so payment for these expenses is truly tax-free!

There are two types of Beneflex accounts:

- Health Care Spending Account for eligible medical and dental expenses for you and your eligible tax-dependent family members. The maximum annual contribution is \$3,000.

- Dependent Day Care Spending Account for expenses to care for your children under age 13 or adults whom you claim as dependents on your tax return, so you and your spouse can work or attend school full-time. The maximum annual contribution is \$5,000 (IRS limit per family).

A worksheet is provided in your enrollment package to help you calculate your Beneflex contribution for 2007. It is important to calculate your expected eligible expenses carefully. The IRS requires that any account balance remaining after April 15<sup>th</sup> must be forfeited. However, with the addition of the new conveniences described in the article, RIT participants have been forfeiting fewer dollars recently than in the past.

# 2007 Prescription Drug Changes

Beginning January 1, 2007, RIT's prescription drug plan, RIT Rx, will undergo a number of changes affecting most maintenance medications.

The first change is a **new limit on the amount of medication you can purchase at a retail pharmacy at one time**. The maximum will be a 30-day supply. To purchase more than a 30-day supply of maintenance medications, you should use Medco By Mail (see details on page 6).

The next change is the **introduction of a "Retail Refill Allowance" (RRA)**. The purpose of the RRA is to encourage plan participants to fill their prescriptions for maintenance medications (those drugs you take for an ongoing medical condition) through Medco's home delivery pharmacy, Medco By Mail.

## How the RRA works

On the 4<sup>th</sup> fill (original plus 3 refills) of a maintenance prescription at a retail pharmacy, your copay for a 30-day supply will be equal to the copay for a 90-day supply of the medication if you ordered it from Medco By Mail. This will result in greatly increased copays if you continue to fill your maintenance medications at a retail pharmacy beyond the 3<sup>rd</sup> fill.

The RRA does not apply to acute care drugs such as antibiotics taken for a short-term infection. Copays for these medications purchased at a retail pharmacy will remain the same. The RRA will also not apply if a certain medication is not available from Medco By Mail, such as controlled substances.

Another change is an **increase in the mail-order copay**. Currently, a 90-day supply of medication from Medco By Mail has a copay equal to twice the 30-day copay at a retail pharmacy. In 2007, the 90-day mail-order copays will be equal to two-and-a-half times the 30-day retail copays.

These changes will result in a new copay structure for the plan, described in the chart below.

	RETAIL — 30-day supply up to 3 fills*	RETAIL — 30-day supply 4 <sup>th</sup> fill and after*	MEDCO BY MAIL — 90-day supply
<b>Tier 1: Generic Drugs</b>	\$ 10	\$ 25	\$ 25
<b>Tier 2: Brand Name Formulary Drugs</b>	\$ 25	\$ 62.50	\$ 62.50
<b>Tier 3: Brand Name Non-Formulary Drugs</b>	\$ 40	\$100	\$100

\*You will no longer be able to purchase more than a 30-day supply at one time at a retail pharmacy.

If you are currently filling your maintenance medications at a retail pharmacy, you can save money in 2007 by switching to Medco By Mail. **By doing so, your cost will be less than the current retail copays.** If, however, you continue to fill those prescriptions at a retail pharmacy past the 3<sup>rd</sup> fill, your copays will increase significantly. The choice is yours. While it is not mandatory that you use Medco By Mail, your cost sharing will reflect the greater total cost of most medications when purchased at a retail pharmacy.

## Getting Started With Medco By Mail is Simple

In addition to lower copays, and lower cost for the plan, Medco By Mail offers you the convenience of home delivery. Getting started is simple. Let your doctor know you have a home delivery prescription drug program and that you would like to have the maximum supply of medication (usually 90 days) plus refills for up to one year. You may mail your prescription(s) to Medco or ask your doctor to use the prescription fax service. If your order is faxed, your doctor must have the member number from your Medco ID card. An order form and prescription fax form are enclosed in the enrollment mailing for your convenience. Feel free to make copies, if necessary, or to print more forms from Medco's website.

To check on the status of an order, you may call Medco member services or check the Medco website. You can find out the date your prescription was received, the status of your order, the date your prescription was mailed to you, and other billing and timing data. On the website, you can even request to be notified via e-mail when it's time to refill your medication, and when an order has been shipped to you.

To order refills, go online anytime at [www.medco.com](http://www.medco.com), or call 1-800-4REFILL (1-800-473-3455) and use the automated telephone system. You can also mail in your refill orders by using the special home delivery envelope. If you order by phone or via Medco's website, you will need to provide your member number and the 12-digit prescription number found on the medication container and the refill slip.

You can also order home delivery envelopes or retail claim forms online or by phone. The requested materials will be mailed to you right away.

Some things to keep in mind:

- Occasionally, a particular drug will not be available through Medco By Mail. In this situation, you will need to fill your prescription at a retail pharmacy and pay the appropriate retail pharmacy copay. You would not be charged the higher RRA copay in this situation.
- Do not submit 30-day prescriptions to Medco By Mail because you will automatically be charged the copay for a 90-day supply.



# Prescription Drug News

## Prescription Drug Saving Opportunities are Right at Your Fingertips

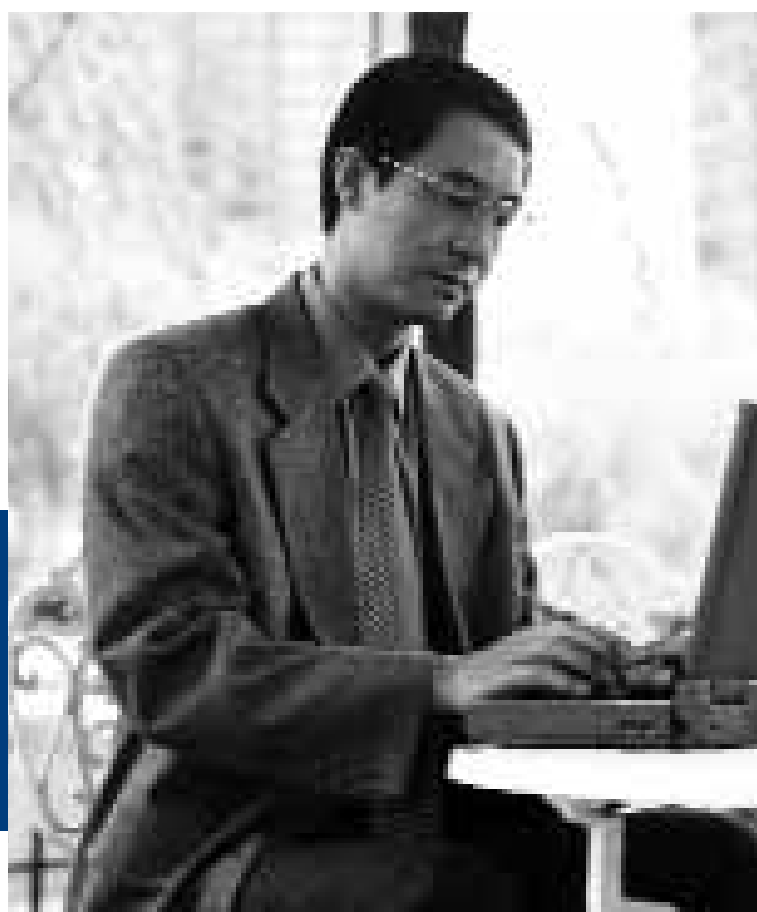
If you're using Medco's website to help manage your medications, Savings Advisor is a new tool that may help you lower your prescription drug costs. It's a personalized addition to Medco's online resources and provides information to help you and your doctor make the right prescription decisions for you. It is available at no charge to all registered users of [medco.com](http://medco.com).

With Savings Advisor, you can easily identify potential cost-saving alternatives for any of your prescriptions — or for a medication you might take in the future. Those alternatives may include generics equivalents or alternatives, lower-cost brand-name alternatives, over-the-counter medications, or ordering up to a 3-month supply of your long-term medication through Medco By Mail.

### Point. Click. Save.

Using Savings Advisor is easy. Go to [www.medco.com/savingsadvisor](http://www.medco.com/savingsadvisor) and log in. Then select your name and one of the listed medications that are part of your personal prescription history, and click the "go" button for the list of cost-saving alternatives. You can also get cost-saving alternatives for a new medication by using the "Search for a drug" option. To take advantage of a cost-saving alternative listed by Savings Advisor, just click the "print" button to get your personalized results page, which you can take to your doctor. It will also print a Medco By Mail fax form so your doctor can quickly fax a new prescription to Medco.

Visit Medco's website to take advantage of many tools and resources that can help you get the best value from your prescription drug benefit. If you are a first-time visitor to the site, it's easy to register. Simply click "Register now" and follow the instructions. You'll need your member ID number (found on your Medco ID card) and the drug name (or, if it is for a refill, the prescription number). When you access the site in the future, you'll just need to enter your e-mail address and password.



## When Your Doctor Prescribes a New Medication

When you are filling a prescription for a new maintenance medication for the first time, you should have your physician write two prescriptions — one for a 30-day supply and one for a 90-day supply. First, fill the 30-day prescription at a retail pharmacy to ensure you will not experience any adverse reaction and that the drug will be effective for you. Once you determine that the new drug will work for you, you can fill the 90-day prescription through Medco By Mail and have a lower copay. Remember, if you continue to fill the same prescription at a retail pharmacy past the 3<sup>rd</sup> fill, you will be charged a much higher copay. Note that if your doctor changes the dose of your medication, this is considered a different prescription.



# Prescription Drug News

## Everything You Ever Wanted to Know About Generic Drugs (But Didn't Know Whom to Ask!)

Did you know that you can reduce your prescription drug costs — sometimes significantly — by asking for the generic version of your medication? Today, more than 77% of all prescription drugs have at least one generic version, and more will become available in the next few years.

### What are generic drugs?

First, you should know what generic drugs are not. Generics are not inferior imitations of brand-name drugs. Generic drugs have the exact same active ingredient(s), in the same strength, as their brand-name equivalents.

“Most people believe that if something costs more, it has to be better quality. In the case of generic drugs, this is not true,” said Gary Buehler, Director of Generic Drugs at the Food and Drug Administration (FDA). “The standards for quality are the same for brand name and generic products.”

### Are generics safe and effective?

Yes. The FDA requires a generic to have the same strength, quality, purity, and potency as the original drug. In addition, the generic drug must be expected to produce the same effect as the brand-name drug.

### How do generics differ from their equivalent brand-name drugs?

Generic drugs may look different from their brand-name equivalents because they have different inactive ingredients, such as the fillers and dyes that give a drug its color and size.

In rare cases, a person may react to a drug's inactive ingredients. Check with your doctor or pharmacist about possible side effects.

### Why do generic drugs cost less?

Quite simply, generic drug manufacturers don't pay the high costs of creating a new drug. Before a drug company can apply for FDA approval, it invests a lot of money in the research and development process.

To protect their investment, drug companies get a patent that can last up to 20 years. By the time a drug wins FDA approval, however, less than 10 years may remain on the patent. As long as a drug has patent protection, no other company can make the drug. Once the patent expires, other companies can make and sell copies of the original drug, using the generic name or a different brand name.

Using generics whenever possible not only can reduce your prescription drug costs, it reduces overall benefit costs. Keeping costs down helps your plan continue to offer an affordable benefit now and in the years ahead.

### Why do generics have strange names?

Every drug has two names. The brand name is the name that the drug manufacturer uses to market and advertise the drug. Well-known brand names include *Nexium*® and *Prozac*®.

The generic name describes the chemical, or the drug's active ingredient. Some generic names, such as acetaminophen and ibuprofen, are nearly as familiar as their original brand names, *Tylenol*® and *Motrin*®.

### Do all brand-name drugs have a generic form available?

Not all do, but more than three-quarters of all prescription drugs have generic versions, and others will soon be available.

*continued on page 8*

## Generic fast facts

- Generics have the same active ingredients and must meet the same strict FDA standards as their equivalent brand-name drugs.
- Generics cost as much as 70% less.
- More than 77% of all prescription drugs are now available as generics.



# Prescription Drug News

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Here are just *some* popular brand-name drugs that have generic equivalents:

Brand	Generic	Condition
Accupril®	Quinipril	High blood pressure
Biaxin®	Clarithromycin	Infection
Celexa®	Citalopram HBr	Depression
Darvocet® N-50 & N-100	Propoxyphene napsylate and acetaminophen	Pain
Mevacor®	Lovastatin	High cholesterol
Prilosec® 10 & 20mg	Omeprazole	Frequent heartburn
Prozac®	Fluoxetine HCl	Depression
Sporanox®	Itraconazole	Fungal infection
Tegretol®	Carbamazepine	Seizure disorder
Xanax®	Alprazolam	Anxiety

**NOTE:** RIT Rx and many other prescription plans encourage the use of generic drugs when available. If you purchase a brand name drug when a generic is available, you will pay the cost difference plus the applicable copay.

Your health plan may ask your pharmacist to contact your doctor about whether using generic drugs is appropriate for you. If you use Medco By Mail, the mail-order pharmacy, a Medco pharmacist may call your doctor to ask if it's all right to substitute a generic equivalent for a brand-name drug. If your doctor agrees, they will fill your prescription with the generic drug and notify you of the change.

#### Still have questions?

If you have any questions about your benefits, co-payments or prescriptions, visit Medco online or call Medco Member Services.



## Ask your doctor or pharmacist...

1. Are generics right for me?
2. Is there a generic version of the drug that I'm taking?



# Advance Care Planning

## What Is It and Why Is It Important?

*Remember the Terri Schiavo case in Florida last year? One positive result of that family's painful situation is that many more people are taking steps to do advance care planning. RIT and Excellus BlueCross BlueShield are partnering to bring you the information and resources you need to participate in this process. Please note that much of this information is specific to New York State. Laws, forms, and process vary from state to state. If you or your family member reside in a state other than New York, you should learn about the process and obtain the necessary forms from that state.*

Advance Care Planning is the process of planning for future medical care in the event you are unable to speak for yourself due to illness or injury. Advance Care Planning involves open, honest discussions about your values, beliefs, and wishes regarding end-of-life care and life-saving treatments. Advance Care Planning also requires the completion of Advance Care Directives that reflect your wishes.

Most people spend little time thinking about the last chapter of their life. Yet, life is much like a story. There is a beginning, middle, and an end. How you want your story to end is not a question easily answered, nor is it easily discussed. For most, it is a subject that would rather be avoided. However, remaining silent is risky. If you are unable to speak for yourself, how will you ensure that the care at the end of your life will meet your needs? If you are unable to speak for yourself, how will your loved ones know what you want and need?

### Advance Care Planning involves:

1. Identifying your values, beliefs, and goals.
2. Choosing a Spokesperson and an Alternate Spokesperson to work with doctors to make medical care decisions on your behalf in case you are unable to speak for yourself. (Spokesperson is referred to as an "Agent" in the New York Health Care Proxy form.)
3. Reviewing your wishes and desires about death and dying with your Spokesperson, Alternate, and the people you trust and/or those that will make decisions impacting the manner in which you die (e.g., family, spiritual leader, doctors, lawyers).
4. Completing the New York Health Care Proxy form that identifies your Spokesperson and Alternate.
5. Completing the New York Living Will form that specifies your desires and wishes should you develop an irreversible, terminal condition. The Living Will also provides "clear and convincing evidence" of your wishes.
6. Reviewing and updating these forms periodically and after major life-altering events, or as necessary.
7. Discussing and updating your wishes and desires about death with your Spokesperson, Alternate, those you trust and/or those who may care for you when you are approaching death.

Taking these steps allow your doctors, friends, and family to provide the care you want.

### The Gift of Advance Care Planning

Advance Care Planning is a gift you can give yourself and your loved ones. It removes the stress and guilt from your family that results from the burden of having to make unaided decisions about your medical care. Since you have previously discussed your wishes and goals, Advance Care Planning helps to prevent conflict and confusion over the management of your care should you be unable to speak for yourself.

Excerpted from Excellus BlueCross BlueShield website

## More Information and Resources Available

You can find more detailed information about advance care planning, as well as forms and other resources, on the Excellus BlueCross BlueShield website at [https://www.excellusbcbs.com/members/health\\_and\\_wellness/health\\_care\\_planning/advance\\_care\\_planning.shtml#k](https://www.excellusbcbs.com/members/health_and_wellness/health_care_planning/advance_care_planning.shtml#k). You will need to register as a member on the Excellus website in order to access this information, if you have not already done so.

### Forms and Resources for New York State:

- [Advance Care Planning Booklet \(PDF\)](#)  
This booklet is a comprehensive resource developed by the Community-Wide End of Life/Palliative Care Initiative. To order bulk copies, download and complete this order form (PDF) and fax it to (585) 238-4400. The booklet is also available in Spanish.
- [New York State Health Care Proxy and Living Will Forms](#) and instructions for these forms
- [New York State Bar Association Information on Living Wills and Health Care Proxies](#)
- [Information about organ donations and an Organ Donation Form](#)
- [Register your intent to be an organ donor via the New York Donor Registry](#)
- [Information about the New York State Nonhospital Order Not to Resuscitate \(DNR Order\) Form](#)

### Forms for Other States:

- [Caring Connections](#)  
Each state has different Advance Care Directive laws. If you live in another state or spend extended periods of time in other states, you should look up that state's laws. The web sites of the National Hospice and Palliative Care Organization or their Caring Connections program are excellent places to start.



RIT will sponsor a mini-workshop on Advance Care Planning as part of our annual Benefits Fair in October. Be sure to attend to hear from an Excellus BlueCross BlueShield expert on this important topic. Copies of forms will be available.

# Other Benefit News



## Absence Reporting Reminder

RIT's new absence reporting process (that became effective July 1, 2006) has been running very smoothly. Employees have found the new process easy to use. For those who may not remember what the change was, we want to take this opportunity to remind you. You can find all the details on the HR website.

Effective July 1, 2006, RIT changed the process for employee reporting of disability-related absence as well as family-related absence. Unum Provident (Unum), our insurance company for short-term and long-term disability benefits (as well as life insurance and accidental death & dismemberment insurance), now provides expanded disability management services to RIT and its employees.

Employees simply call a toll-free telephone number (1-800-605-2802/v or 1-800-887-2180/TTY) to report certain absences (you must still notify your supervisor as well). Unum will take it from there and send you the necessary paperwork to complete and will manage your time out of the office. HR serves as the liaison for communications between Unum and supervisors.

Refer to the recently issued (pink) update to your Employee Benefits Handbook or the HR website for more details on the process.

## Beneficiary Designation Update

Do you know who you have designated as your beneficiary to receive your various benefits if you die? Did you name a spouse — who is now your ex-spouse — to receive your life insurance benefit? Well, that ex-spouse will be the beneficiary of your life insurance, even if you have a new spouse! It is critical that you review this information to make sure that your various policies and accounts are paid out as you desire.

**Retirement Plan:** Under law and the terms of RIT's retirement plan, you must designate your spouse as the beneficiary for at least 50% of your benefit, unless your spouse waives in writing his/her right to this benefit. But, what this also means is that if you completed a beneficiary designation for Fidelity and/or TIAA-CREF prior to a marriage and then you marry, your spouse is entitled to a benefit under the account, even though he/she is not a named beneficiary.

RIT does not keep beneficiary designations on file for your retirement plan benefit, so you should contact Fidelity and/or TIAA-CREF directly. TIAA-CREF has your designations online — just go to [www.tiaa-cref.org](http://www.tiaa-cref.org) and log in (if you don't have a login, follow the instructions on how to get one). Or, you may call them at 800-842-2776/v and 800-842-2755/TTY. While the Fidelity beneficiary designations are not online, you can contact them directly for your current designation and forms. Call them at 800-343-0860/v and 800-259-9743/TTY.

**Life Insurance and AD&D:** You are able to name anyone you wish as your beneficiary for your life insurance and AD&D (Accidental Death and Dismemberment). The beneficiary designation for RIT's Life and AD&D is not available to view online; this information is kept on paper. If you want to verify that your designation is up to date, contact your benefits assistant (see back page of newsletter for contact information). If you do not have a valid beneficiary designation on file at the time of your death, the terms of the life insurance policy will determine to whom the proceeds of your insurance will be paid — and this may or may not be in accordance with your wishes.

*So, when you have any change in status: marriage, divorce, birth or adoption of a child, death of spouse, partner or child, it is important for you to review and update your beneficiary designations. If it has been awhile since you reviewed your beneficiary designations, we recommend that you do so from time to time even if you have not had a recent change in status.*



## Update on Fit for Retirement

We are so excited by the great response to our *Fit for Retirement* campaign introduced in February of this year. Almost 400 individuals have attended one or more of our *Fit for Retirement* events. In addition, since January 1, 2006, over 200 people have increased their contribution to the plan.

By focusing on the importance of saving for retirement, you are making important, positive changes that will impact your life. The result will be a much better retirement for RIT employees. We are so excited to be truly helping people have a better future!

And, don't forget, there will be a drawing in January to win a free iPod! Anyone who has increased their contribution during 2006, or who already contributes the maximum amount, will be entered into a raffle drawing for a free iPod. Don't miss your chance to win a great prize — increase your contribution today!

If you want to know more about RIT's retirement plan, refer to your *Employee Benefits Handbook* or the HR website.

# New RIT Benefits

## Re-Introducing a New Discount Program — RARES

We want to remind you about a new benefit RIT introduced earlier this year. RIT became a General Member of **RARES** — the **R**egional **A**rea **R**ecreation and **E**mployee **S**ervices Association. RARES offers you a unique way to obtain *significant discounts* as an employee/retiree benefit.

Each employer who joins receives a unique membership ID# which allows any employee from that organization to access the website and find out information about RARES, download forms, etc. For 2006, RIT's ID # is **20063123**; **beginning in 2007**, the ID# is **20075482** (there will be a new ID # assigned each year). When you visit the RARES website at [www.rares.org](http://www.rares.org), you can enter this membership ID# in the Membership ID box to the upper left of the home page. This will take you to a page designed for members only. The "discounts" tab will take you to a listing of all discounts available to you as a RARES member and how to access them.

RARES is a not-for-profit organization offering employee benefits and discounts on area products and services to its membership. RIT employees and retirees are now entitled to all discounts on RARES products and services. Presently, RARES has more than 75 Associate Members — those companies which offer discounts on their programs.

Discounts are provided in one of two ways:

**1. Some discounts you receive simply by showing your RARES ID card at the point of sale.** This list includes Downstairs Cabaret Theatre, Dunn Tire, Genesee Country Village & Museum, George Eastman House, Ravenwood Golf Club, Rhinos, Staubs Cleaners, and more.

**2. Other discounts are provided when you purchase tickets directly from RARES.** You may order online at the RARES online web store, using any major credit card. Or, you can submit an order form (found on their website) and order by mail. This list includes Buckmans Car Wash & Detail, Cedar Point Amusement Park, Dell Computers, Hershey Park, Marineland of Canada, Rochester Red Wings, Six Flags parks, Splash Lagoon Indoor Water Park Resort, and more.

As part of the RARES introduction, we have discontinued our partnership with the real estate vendors. This change should in no way reflect negatively on these vendors or their capabilities. The change was made simply because RIT now offers this type of discount program through the RARES organization. Therefore, we did recommend to the real estate providers that they may want to consider joining RARES.

The 2007 RARES ID card will be made available in December. If you have any questions about RARES, please feel free to contact their office at (585) 503-8160/v or by e-mail at [rares@rochester.rr.com](mailto:rares@rochester.rr.com).

## Pet Insurance

RIT is introducing a new medical plan for 2007 — a medical plan for your pets. Yes, that's right: Pet Insurance.

Veterinary medicine can do amazing things. The cost, however, can sometimes be overwhelming. With an affordable VPI Pet Insurance policy, you can have pet peace of mind.

Since your pet is a member of the family, you want the financial freedom to do everything medically possible to help if your pet gets sick or injured. The great news is that as an RIT employee, you can receive a group discount that makes a VPI Pet Insurance policy even more affordable. And if you enroll more than one pet, you can receive an even bigger discount.

A VPI policy covers thousands of medical problems and conditions related to accidents or illnesses (even cancer) for dogs, cats, birds, ferrets, rabbits, reptiles, and other exotic pets. You have the freedom to visit any licensed veterinarian, even when you're away from home. It is important to note that VPI will review your pet's medical history prior to enrollment if they have certain pre-existing conditions or if they are over ten years of age.

Coverage helps pay for:

- Diagnostic tests
- Diagnostic office visits
- Prescriptions
- X-rays
- Treatments
- Lab fees
- Hospitalization
- Surgeries



Optional Vaccination & Routine Care Coverage is also available to help dog and cat owners with the cost of regular routine care that is necessary to keep your pets healthy. There's no deductible on routine care benefits and coverage helps pay for:

- Annual physical exam
- Vaccinations
- Heartworm protection
- Prescription flea control
- Choice of: spaying/neutering, routine teeth cleaning, or comprehensive health screen
- And much more

You can pay by payroll deduction or monthly through an automatic debit to your bank account or credit card or you can pay the full annual amount by check or credit card.

Veterinary Pet Insurance/DVM Insurance Agency (VPI) is the nation's oldest and largest provider of health insurance for pets. Since 1982, they have worked with hundreds of thousands of pet owners to help deliver the very best care for their pets.

To learn more about protecting your pet, or to obtain a free quote, call 800-USA-PETS (800-872-7387/v), extension 4937 (be sure to mention that you are from Rochester Institute of Technology) or, log onto their website at [www.eb.petinsurance.com](http://www.eb.petinsurance.com).

## 2007 BENEFITS OPEN ENROLLMENT

# Questions? Ask the representatives!

- Medical, Dental, Life, LTD and Long-Term Care insurance
- Fidelity and TIAA-CREF
- The Health Association (EAP provider)
- RIT's CPD, Center for Human Performance, Credit Union, Food Service, Human Resources, Margaret's House, Payroll, Workplace Ergonomics Lab
- Hyatt Legal
- Marsh@WorkSolutions
- Medco (RIT Rx)
- Rochester Optical
- New York College Savings

### FOR MORE INFORMATION

For any benefits questions you may have, please contact your benefits representative in the Human Resources Department (TTY (585) 475-2420):

LAST NAME	CONTACT	TELEPHONE (V)	E-MAIL ADDRESS
A-L	Valerie Liegey	(585) 475-5346	valpsn@rit.edu
M-Z	Brett Lagoe	(585) 475-5983	blpsn@rit.edu

*Check out the Human Resources Department website at:*  
<http://finweb.rit.edu/humanresources/benefits/>

### ENROLLMENT INFORMATION RESOURCES

*Assembled here is a list of contact names, phone numbers, and websites to assist you as you begin to carefully evaluate your many choices.*

NAME	VOICE	TTY	WEBSITE
RIT Human Resources	(585) 475-2424	(585) 475-2420	<a href="http://finweb.rit.edu/humanresources/benefits/">http://finweb.rit.edu/humanresources/benefits/</a>
<b>Health Care:</b>			
BlueCross BlueShield	(585) 454-4810	(585) 454-2845	<a href="http://www.excellusbcs.com">www.excellusbcs.com</a>
Dental	(585) 325-3630 (800) 847-1200	(585) 454-2845	<a href="http://www.excellusbcs.com">www.excellusbcs.com</a>
Beneflex (EBS)	(585) 232-7500 (800) 544-0328	(585) 454-2845	<a href="http://www.excellusbcs.com">www.excellusbcs.com</a>
EAP	(585) 325-2980 (800) 417-6304	(585) 325-2980	<a href="http://www.thehealthassociation.org/EAP">www.thehealthassociation.org/EAP</a>
MedAmerica (Long-Term Care)	(800) 544-0327	(585) 454-2845	<a href="http://www.yourlongtermcare.com">www.yourlongtermcare.com</a>
Medco (RIT Rx)	(800) 230-0508	(800) 759-1089	<a href="http://www.medco.com">www.medco.com</a>
Rochester Optical	(585) 254-0022	Use Relay	<a href="http://rofactoryoutlet.com/">http://rofactoryoutlet.com/</a>
<b>Retirement Program:</b>			
Fidelity	(800) 343-0860	(800) 259-9743	<a href="http://www.fidelity.com">www.fidelity.com</a>
TIAA-CREF New York City	(800) 842-2776	(800) 842-2755	<a href="http://www.tiaa-cref.org">www.tiaa-cref.org</a>
TIAA-CREF Rochester	(585) 246-4600 (877) 209-3144	(585) 246-4610	<a href="http://www.tiaa-cref.org">www.tiaa-cref.org</a>
<b>Other Savings Programs:</b>			
U.S. Savings Bonds	(800) 487-2663	Use Relay	<a href="http://www.savingsbonds.gov">www.savingsbonds.gov</a>
<b>Employee Discount Services:</b>			
Hyatt Legal	(800) 821-6400	(800) 821-5955	<a href="http://www.legalplans.com">www.legalplans.com</a> password = 571112
Marsh@WorkSolutions	(866) 272-8902	Use Relay	<a href="http://www.metpay.com">www.metpay.com</a> company code = 017
RARES	(585) 503-8160	Use Relay	<a href="http://www.rares.org">www.rares.org</a>
Veterinary Pet Insurance	(800) 872-7387 x4937	Use Relay	<a href="http://eb.petinsurance.com">http://eb.petinsurance.com</a>

#### FREE SERVICES INCLUDING:

*Chair Massages  
Blood Pressure Checks  
Body Fat Analysis*

*Enter to Win!*  
**RAFFLES & FREE STUFF**

#### WORKSHOPS

Refer to flyer and HR website  
for workshop details.



*October 24 & 25 • 9AM - 3PM*

**FIRESIDE LOUNGE  
STUDENT ALUMNI UNION**

*Open Enrollment Begins October 23  
and Ends November 15, 2006*

**ATTEND THE BENEFITS FAIR!**

Rochester Institute of Technology  
Department of Human Resources  
George Eastman Building  
8 Lomb Memorial Drive  
Rochester, New York 14623-5604

RIT 2007 Benefits Open Enrollment Newsletter is distributed to employees to help explain RIT's Employee Benefits plans, describe features and provide hints on how to better use benefits. Some information contained in this newsletter may not apply to you. This newsletter does not replace the document/contract, unless specifically identified as a change in plan provision. If there is any confusion or conflict regarding plan features, the document/contract will be the final authority. RIT reserves the right to change, modify, discontinue, or terminate benefits at any time for any reason.

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