

**This newsletter concerns the following RIT populations:**

- Current pre-Medicare retirees
- Current Medicare-eligible retirees

References to “retirees” generally include surviving spouses.



Key Dates

October 1

Retiree Open Enrollment **BEGINS**

Weeks of October 4 and October 11

Retiree Meetings  
(see schedule on page 11)

October 29

Retiree Open Enrollment **ENDS**

**Welcome to RIT’s Annual Open Enrollment for 2005!**

In January, you received the RIT “2004 Retiree Health Care Update Newsletter.” In that newsletter, we announced some upcoming changes to expect in health care benefits. The changes were designed to keep retiree benefits sustainable for present and future RIT retirees in the face of rapidly rising health care costs.

During this year’s enrollment, we will begin to implement these changes. This newsletter is designed to help you understand what is changing for 2005 and what actions you need to take during this year’s open enrollment period, now through October 29, 2004.

For those of you living in the Rochester area, we hope you will be able to join us at one of the special retiree meetings we’ve scheduled during October. These meetings are your best opportunity to get answers to your questions about your RIT benefits—and you may even see some familiar faces of your former colleagues. Details on when and where the meetings will be held, and how to register to attend, can be found on page 11.

**Do I Have to Do Something?**

Yes!

If you are a:

- Pre-Medicare retiree or surviving spouse
- BCBS Blue Million Plan participant

**You must make a medical plan election!**

Your 2004 election *will not* carry over to 2005. See the article “The Enrollment Process” for detailed enrollment instructions on page 12.



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# 2005 Changes for All Retirees

## Introducing “RIT Rx”: RIT’s New Prescription Drug Plan

The benefit change for 2005 that will affect nearly every RIT employee and retiree is in the area of prescription drug benefits. Beginning January 1, 2005, prescription drug coverage for RIT employees and retirees will be provided under the new RIT Prescription Drug Plan called “RIT Rx.” Detailed information about RIT Rx is outlined on pages 2–5.

### What is RIT Rx?

RIT Rx is a self-funded plan managed by a Pharmacy Benefit Manager (PBM), Medco. If you are covered by an RIT-offered medical plan (other than Blue Point2 POS B No Drug, which does not have drug coverage), you will automatically be covered by RIT Rx. This coverage will replace the insured drug riders that are presently provided by BlueCross BlueShield and Preferred Care.

### BlueCross BlueShield Blue Million/Complementary Plan No Longer Available

As was previously announced in the January 2004 Retiree Health Care Update newsletter, the BlueCross BlueShield Blue Million/Complementary Plan will no longer be offered to RIT plan participants after December 31, 2004. In 1999, RIT stopped offering this plan to employees, with the exception of those already enrolled. In 2004, RIT closed the plan to new retiree entrants. The cost of the plan now outweighs its value, making it impractical for RIT to offer this plan going forward. Those currently in the Blue Million plan must elect another medical plan for 2005. Refer to the *Medical Benefits Comparison Book* for detailed information about the plan options available to you.

With the introduction of RIT Rx, our new prescription drug plan for 2005, combined with the variety of other medical plans available, we are confident that you will find an alternative plan that meets your needs.

### RIT Joins the Preferred University Rx Purchasing Coalition

RIT has agreed to join the Preferred University Rx Purchasing Coalition (the Coalition). The Coalition was originally comprised of four universities: Boston University, Columbia, Cornell, and Princeton. These four original universities formed the Coalition in 2002 for the purpose of gaining volume leverage to negotiate deep discounts on both prescription drugs and services.

With the help of a consultant specializing in pharmacy benefits, the Coalition conducted an extensive search process that resulted in the selection of Medco as its Pharmacy Benefit Manager (PBM). In joining the Coalition, RIT will benefit from the attractive financial arrangements that have been negotiated. Several other universities have joined the Coalition or are in the process of joining. Each participating university has its own self-funded benefit plan with its own unique plan design, and the cost to each university is based on its own population’s utilization. The other universities in the Coalition report that they and their employees have had very positive experiences with Medco.



### IMPORTANT CHANGE:

The RIT Rx plan design will be the same for you regardless of which medical plan you elect, except for Blue Point2 POS B No Drug, which does not have prescription drug coverage. Prescription drug benefit differences will no longer be a factor in your selection of a medical plan.

### Why is RIT Rx Being Introduced?

Prescription drugs are certainly a critical part of the health care delivery system. They are vital to keeping us healthy. As the population ages, the role of prescription drugs becomes even more important. The good news is that new drugs are contributing to higher quality lives that are longer and more productive.

The not-so-good news is that prescription drug costs are continuing to rise more rapidly than other health care costs. In recent years, the cost of prescription drugs has increased 15-20% per year. Prescription drugs represent about 18% of medical costs for employees during their working years, between 35-45% of medical costs for retirees, and over 50% of costs for retirees age 65 and older.

Creating a separate, self-funded plan will allow RIT to gain some long-term control over a key factor in rising health care costs. With a self-funded plan, RIT can receive aggregate claims experience data to better understand and address the health needs of our population.\*

Because prescription drugs represent such a large portion of medical costs for retirees, savings will reduce not only RIT’s current expense but also the liability for retiree medical benefits that is required to be reported on RIT’s financial statements, called FAS I06. This initiative is an important part of the new strategy for retiree health care benefits which was adopted by RIT’s Board of Trustees in November 2003, and communicated to you in January 2004.

\*RIT will **not** receive individually identifiable claims data.



# 2005 Changes for All Retirees

## RIT Rx Plan Design\*

Your cost for a prescription will be based on a 3-tier copay structure, and will differ depending on:

- The drug's tier—generic, formulary brand or non-formulary brand;
- Whether you choose (or your doctor prescribes) a brand name drug when a generic is available;
- Whether you purchase your drug through a retail pharmacy or the PBM's home delivery pharmacy;
- Whether you purchase your drug from a participating or non-participating retail pharmacy; and
- Whether your prescription is subject to any special procedures such as prior authorization or quantity limitations.

\*If you are on Medicare prior to January 1, 2005, you will be covered by a separate plan design during 2005. See the article directly below for details.

## Standard Plan Design

**Copays for employees, pre-Medicare retirees and those becoming eligible for Medicare after 1/1/2005**

Following are the standard copays you will pay for a 30-day supply when purchasing your drug at a participating retail pharmacy:

**Tier 1: Generic: \$10**

**Tier 2: Formulary Brand: \$25**

**Tier 3: Non-Formulary Brand: \$40**

If you purchase your maintenance medications (those you take for chronic conditions on an ongoing basis) from Medco's home delivery pharmacy, Medco By Mail, your copays for a 90-day supply will be:

**Tier 1: Generic: \$20**

**Tier 2: Formulary Brand: \$50**

**Tier 3: Non-Formulary Brand: \$80**

The rest of the cost of your drugs will be paid by RIT Rx. While the retail pharmacy copays listed above apply to each 30-day supply, you are able to fill your prescription for up to a 90-day supply at one time at a retail pharmacy. To do so, your physician must write the prescription for a 90-day supply. Your cost for a 90-day supply at a retail pharmacy will be equal to three 30-day supplies. For example, for a 90-day supply of a generic drug, you will pay \$30 at a retail pharmacy (3x \$10). You would save money by using Medco By Mail (see article on page 4).

## Temporary Plan Design for Retirees on Medicare Prior to 1/1/2005

If you are a retiree, surviving spouse or LTD recipient covered by Medicare prior to January 1, 2005, you will be temporarily covered by a separate prescription benefit plan design that has lower copays than those listed above. We understand that some of you have very low copays for maintenance medications through your current medical plans. This temporary plan offering is intended to ease your transition to RIT Rx. The lower copays will be in effect for 2005, and will be evaluated for possible continuation into 2006. The intent is to ultimately cover all participants with the standard plan design. While your copays under RIT Rx may be higher than you are currently paying, the standard plan design is comparable to, and competitive with, today's prescription drug benefit plans.

### Temporary Copays During 2005 for Retirees on Medicare Prior to 1/1/2005

Following are the standard copays you will pay for a 30-day supply when purchasing your drug at a participating retail pharmacy:

**Tier 1: Generic: \$5**

**Tier 2: Formulary Brand: \$15**

**Tier 3: Non-Formulary Brand: \$30**

If you purchase your maintenance medications (those you take for chronic conditions on an ongoing basis) from Medco's home delivery pharmacy, your copays for a 90-day supply will be:

**Tier 1: Generic: \$10**

**Tier 2: Formulary Brand: \$30**

**Tier 3: Non-Formulary Brand: \$60**

As an additional way to ease your transition to the new plan, during 2005, any 3rd tier (non-formulary brand) medication that you were taking prior to 1/1/2005 will be eligible to be covered at the 2nd tier copay. This special rule will be in effect only during 2005 for those on Medicare before 1/1/2005. More detailed information will be provided in December.

## Medco, Our New Pharmacy Benefit Manager

**Who is Medco and why were they selected?** Medco is one of the largest and most experienced full-service pharmacy benefit management firms (PBM) in the nation. Medco contracts with pharmaceutical manufacturing companies and pharmacies to ensure we receive the most competitive prices and discounts for prescription drugs. This helps both the university and our employees and retirees save on prescription drug costs.

Medco has a broad network that includes more than 50,000 pharmacies nationwide. The network includes nearly all major retail pharmacy chains such as CVS, Eckerd, Rite Aid,

(but not Walgreen's); certain stores containing pharmacies such as Wegmans, Tops, K-Mart, Target and Wal-Mart; and most smaller, independent pharmacies, including virtually all in the Rochester area.

Medco also has a home-delivery pharmacy service, Medco By Mail, for convenient ordering of maintenance medications. In addition, Medco offers a full complement of Internet services on their website, sophisticated drug use checks and balances, an around-the-clock hotline for patients staffed with clinical pharmacists, and well-trained member service representatives. Medco has won awards of excellence for its clinical aspects as well as its customer service.

Medco currently manages pharmacy benefits for Preferred Care plan participants.

# 2005 Changes for All Retirees

## Medco By Mail: A Way to Save You and RIT Money

If you are taking medication for an ongoing medical condition, you'll want to consider Medco's home delivery pharmacy, Medco By Mail, to purchase your prescription medications.

With the home delivery service you have lower copays than with retail pharmacies, so you can save money (see plan design on page 3). Keep in mind that the copays for home delivery are based on a 90-day supply, versus the retail pharmacy copays that are based on a 30-day supply. For example, under the RIT Rx standard plan design, your cost for a 30-day supply of a brand name drug on Medco's formulary, if you purchase it at a participating retail pharmacy, is \$25, and the cost of a 90-day supply at retail is \$75 (3x \$25). Your cost for a 90-day supply of the same drug through Medco By Mail is \$50; so your savings on a 90-day supply will be \$25. Assuming you fill the prescription four times during the year, your annual savings for this medication would be \$100 by using Medco By Mail!

Your copays can be lower because RIT is sharing the savings that come from deeper discounts through Medco By Mail. In addition, you'll save time with the convenience of home delivery. Your initial prescription will be delivered within 10 to 14 days.

Let your doctor know that 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) in Medco special home delivery order envelopes or ask your doctor to call 1-888-EASYRXI (1-888-327-9791) for instructions on how to fax the prescription. If your order is faxed, your doctor must have the member number from your Medco ID card.

To check on the status of an order, you may call Medco member services or you can track your order online at [www.medco.com](http://www.medco.com). 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.

If you would like to order refills, you can do this through Medco By Mail. You can order online 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.

If you need to order home delivery envelopes or retail claim forms, you can do this online also. Or, if you prefer, you can call Medco Member Services toll-free number found in your enrollment package to use the automated telephone system. The requested materials will be mailed to you right away.

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.

## When Your Doctor Prescribes a New Medication

When you are filling a prescription for a new drug 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. You should first fill the 30-day prescription at a retail pharmacy and try the new drug 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, if you choose—but you have the option to fill it at a retail pharmacy if you prefer. The choice is up to you, although your cost for a 90-day supply through Medco By Mail will be lower.

**NOTE:** Do not submit 30-day prescriptions to Medco By Mail because you will automatically be charged the copay for a 90-day supply.

## IMPORTANT COVERAGE ALERT: DIABETIC MEDICATIONS AND SUPPLIES

**If you or a covered family member is a diabetic, the following information is very important.**

Under New York State law, insured medical plans are required by mandate to include coverage for diabetic medications and supplies, even if there is no insured prescription drug rider. Because of this law, the medical plans offered by RIT through BlueCross BlueShield and Preferred Care Gold will continue to provide coverage for diabetic medications and supplies. RIT Rx will not provide coverage for these items because it does not make sense to do so when the insurance premium for the medical plans already includes the cost of these items. When you go to the pharmacy to purchase your diabetic medications and supplies, you will need to use your BlueCross BlueShield or Preferred Care Gold medical plan ID card. Your copays will be determined by the medical plan. For all other covered non-diabetic pharmaceuticals, you should use your RIT Rx (Medco) ID card at the pharmacy.

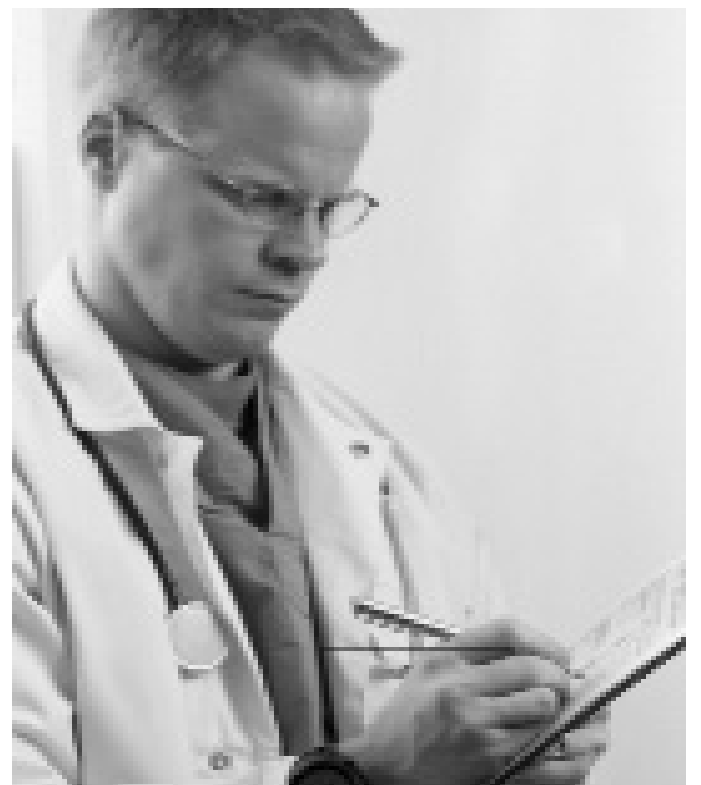
### REMEMBER TO USE:

#### Medical ID Card

For diabetic medications and supplies

#### RIT Rx Medco ID Card

For other covered medications



# 2005 Changes for All Retirees

## Other RIT Rx Details to Know

**ID Card:** You need to use your Medco ID card for all of your prescription drug purchases (except diabetes-related, see page 4). The medical plans will not cover your claims at the pharmacy counter or by mail order. Remember, you will still need to use your medical plan ID card to receive all other medical services.

**Participating Pharmacies:** More than 50,000 retail pharmacies nationwide participate in Medco's network. All major retail pharmacy chains are included except for Walgreen's. Most, if not all, pharmacies in the Rochester area are in the network. Outside Rochester, many small chain and independent pharmacies also participate. Medco conducted a geographic access analysis against the RIT population's zip codes and found that 97% of RITs employees and retirees live within six miles of at least two participating retail pharmacies. The other 3% live in more rural areas where there likely are no retail pharmacies whatsoever within six miles.

To locate a participating pharmacy close to your home, you can call Medco Member Services at 800-230-0508, or check Medco's website.

If you purchase a prescription at a non-participating pharmacy, you will have coverage but your out-of-pocket cost may be higher. You will need to pay the full cost of your prescription at the non-participating pharmacy, and then file a claim for reimbursement. Reimbursement will be based on the plan's cost if you had obtained your prescription at a participating pharmacy. So, it is possible that your cost may be higher than the applicable retail copay at a participating pharmacy.

**Formulary:** For many medical conditions, there are several comparable drugs available, both brand name and generic. A "formulary" is a list of preferred drugs. These medications are selected by

Medco's Pharmacy & Therapeutics Committee based on both the drugs' clinical effectiveness and opportunity to help contain the plan's costs. The Pharmacy & Therapeutics Committee is an independent committee of community physicians and pharmacists (*not* employed by Medco) who meet regularly to review medications for their safety and effectiveness.

To find out if the medication you are currently taking is on Medco's formulary, you can call Medco Member Services at (877) 722-6279. **This is a special number set up only for the enrollment period;** there is a different number that will be used beginning in January. Be sure to tell them that you are a retiree of Rochester Institute of Technology (tell them the full name, not "RIT"). Member Services will be able to help you determine if your medication is on Medco's formulary and at which tier (which helps determine the copay).

You can access Medco's formulary on the web by following the instructions below:

- Go to [www.medco.com](http://www.medco.com)
- Scroll to the bottom right hand of the screen and select "CLIENTS"
- Next screen click on "DRUG FORMULARY"
- The following screen gives you a few options. Select "PREFERRED PRESCRIPTIONS FORMULARY"
- On the last screen you can enter a specific drug name to determine if that drug is on the formulary. Click search and you will be directed to the formulary screen.

**Key to Reading the Formulary:** Generic drugs are shown with a "circle," meaning the drugs fall under the 1st tier. Approved drugs are shown with a "check," meaning the drugs fall under the 2nd tier. Non Formulary drugs are shown as "NF" in an octagon shape and this means the drugs fall under the 3rd tier.

## CHANGES TO EXPECT

RIT Rx is a new plan. It has been designed with the input of several medical and pharmacy specialists, including those at Medco.

Please do not assume that if the medication you are currently taking is on your medical plan's formulary, it will automatically be on Medco formulary—even if you are presently in Preferred Care Community or Gold, for which Medco is the pharmacy benefit manager. Preferred Care has its own separate formulary, which will no longer apply to RIT participants.

There will also be some different requirements that you will want to be aware of regarding prior authorizations, plan limitations and other rules. Specific information about these items can be found on Medco's website when you "price a medication."

## More RIT Rx Communications Coming in December

In late December, you will receive an important mailing from Medco. This "welcome package" will include:

- Your new **Medco ID cards** (two cards will automatically be provided; if you need more, just call Medco Member Services);
- A **brochure** on how to use your RIT Rx benefit;
- The **drug formulary pocket guide**;
- **Detailed information** about how to use Medco's home delivery pharmacy, Medco By Mail, including how to transition your existing prescriptions if you desire, and order forms;
- An **envelope** for your first Medco By Mail order;
- A **health questionnaire**; and
- A **guide** you can provide to your physician with the information he/she will need to help you use your plan most effectively.

### For Additional Information

Medco Member Services is available 24 hours a day, 7 days a week. The toll-free telephone number to call during the enrollment period is (877) 722-6279. Be sure to tell them that you are a retiree of Rochester Institute of Technology (tell them the full name, not "RIT"). Additionally, the Medco website ([www.medco.com](http://www.medco.com)) contains a wide assortment of information.

# News for Pre-Medicare Retirees

## Important Medical Plan Changes for 2005

The medical plans offered to RIT employees and pre-Medicare retirees will undergo major changes for 2005. All medical plans for employees and pre-Medicare retirees will be provided through Excellus BlueCross BlueShield under a new “exclusive” arrangement.

### The following plans will NOT be available for 2005:

- Preferred Care Community
- Preferred Care Opportunity
- Blue Choice Select
- Blue Choice Plus
- ViaHealth Plan
- BlueCross BlueShield Blue Million

### The plans available to employees and pre-Medicare retirees for 2005 are:

- Blue Point2 POS A (new)
- Blue Point2 POS B (new)
- Blue Point2 POS B No Drug (new)
- BlueCross BlueShield Comprehensive
- Blue PPO\*

\*only available to employees and retirees living outside the 31-county Excellus Blue Point2 service area

### What is “POS”?

POS means Point of Service. A POS plan is similar to an HMO but has the added advantage of an out-of-network benefit. Under a POS plan, if you receive medical care from participating physicians, hospitals, and other providers, benefits will be paid at the “in-net-

work” level. If you receive care from providers who are not part of the plan’s network, benefits will be paid at the “out-of-network” level, which is a lower level than the in-network benefits.

Essentially, you get the benefits of an HMO if you use participating providers, and have the flexibility to go outside the network and still have a benefit! To

receive in-network benefits, your care must be coordinated by your primary care physician (PCP). If referrals are required for a particular specialty, your PCP must provide the specialist referral through Excellus BCBS. If you receive services from a participating specialist but you do not have a necessary referral from your PCP, benefits will be paid at the out-of-network level. To see if your doctor participates, refer to the Excellus BlueCross BlueShield website at: <https://www.bcbscnny.org/apps/ProviderSeach/providerHome.do> and choose Blue Point2 or contact Excellus BlueCross BlueShield.

## Uniform Prescription Drug Coverage in 2005

Prescription drug coverage will now be provided under a separate RIT Prescription Drug Plan called “RIT Rx”.

For any of the RIT-offered medical plans (except Blue Point2 POS B No Drug, which has no drug coverage), your prescription drug benefits will be the same. Prescription drug benefits design will no longer be a factor when comparing medical plan options. More information on this change is found on pages 2–5.



## New Plan Comparisons

It is important that you review the *Medical Benefits Comparison Book* to understand the differences between the new plans. You should pay particular attention to any benefit item that is important to you and your covered family members to ensure you understand what coverage is provided by each of the new plans before you make your election. The chart below shows each plan’s in-network benefits for some commonly utilized services.

	Blue Point2 POS A	Blue Point2 POS B & Blue Point2 POS B No Drug
<b>Diagnostic Office Visit</b>	• \$15 co-payment per visit	• \$20 co-payment per visit
<b>Routine Preventive Services</b>	• \$15 co-payment per visit for routine physicals • 100% coverage of semi-annual pelvic exams, pap smears, and periodic mammograms • 100% coverage for well child visits, immunizations, laboratory and other services ordered at time of visit	• \$20 co-payment per visit for routine physicals • \$20 co-payment per visit for semi-annual pelvic exams, pap smears, and periodic mammograms • 100% coverage for well child visits, immunizations, laboratory and other services ordered at time of visit
<b>Eye Exams</b>	• \$15 co-pay for routine eye exams, once every 2 years • Children under age 19, once every year	• \$15 co-pay for routine eye exams, once every 2 years • Children under age 19, once every year
<b>Eyewear</b>	• \$60 allowance once every 2 years (every year for children under age 19) • 100% coverage for one pair of corrective lenses after cataract surgery	• 100% coverage for one pair of corrective lenses after cataract surgery
<b>Hearing Aids</b>	• 80% coverage for one aid per ear every three years up to \$3,000 per aid	• Not covered
<b>Hospital Services</b>	• 100% coverage for unlimited days of semi-private accommodations and all medically necessary services for acute care	• \$100 co-pay per admission for unlimited days of semi-private accommodations and all medically necessary services for acute care

# News for Pre-Medicare Retirees

## Why did RIT agree to an “exclusive” arrangement with Excellus BCBS?

The exclusive arrangement offered by Excellus BCBS is very attractive financially. It allows RIT and its employees and retirees to share in significant savings compared with the projected community rates for 2005. Had we not made this change, the total additional premium required from RIT, employees and retirees would have been over \$1 million, resulting in much higher increases in employee and retiree contributions.

The plans will be offered under “experience-rated” contracts with Excellus BCBS. Experience rating is a form of insurance. Under an experience-rated contract, the insurance company charges a premium that is based directly on the actual utilization experience of the covered group. This is different from community rated plans, such as RIT’s current plans, that factor in the utilization experience of the entire covered community to set premiums. Experience rating offers RIT the opportunity to achieve savings if our utilization is lower than that of the community at large.

In addition to providing a financial advantage, Excellus BCBS has a consistent reputation for excellence among its members, local physicians, accreditation associations, and other national and state organizations that assess quality.

Another advantage offered by the exclusive relationship with Excellus BCBS is that RIT will receive aggregate claims data that will help us design more tailored plans and programs that best address the specific health needs of our population.

**NOTE:** RIT will not receive individually identifiable claims information.

Over 75% of RIT’s employees and retirees are covered by Excellus BCBS plans today. Blue Point2 offers an expanded network of providers in a 31-county area (versus the current 6); this means that some RIT employees and retirees living in outlying areas will now be able to participate in Rochester-based plans. Nearly all Rochester area providers participate in Excellus’ Blue Point2 network (called CrossBridge), although there are a few that do not. *Be sure to confirm your physicians participation* by contacting them directly or referring to the Excellus BlueCross BlueShield website at:

<https://www.bcbscnny.org/apps/ProviderSeach/providerHome.do> and choose Blue Point2 or contact Excellus BlueCross BlueShield.

## New “Out Of Network” Benefit Replaces Excellus BCBS Guest Membership Program

If you currently participate in one of the Excellus BCBS plans, you may be familiar with the Guest Membership Program that covers individuals under local BCBS plans if they are away from the Rochester area for a significant period of time, such as college students and those on extended travel. The out-of-network benefit under the new POS plans will replace Guest Membership, and that program will no longer be available. If you are presently using Guest Membership for a family member, you may want to contact Excellus BCBS Member Services to understand the differences between the two programs.

## New Rule for Adding Newly-Eligible Dependents Starting January 1, 2005

One of RIT’s “guiding principles” for retiree health care is to provide access to quality health care coverage. Reflecting that principle, any person who becomes an eligible dependent of a retiree on or after January 1, 2005 may be added to the retiree’s health care coverage through RIT. However, the retiree will be required to pay the full difference in premium for the added individual(s).

**Example:** Martha is retired from RIT and marries Sam in August 2005. Martha is covered by Medicare Blue Choice and chooses to add Sam to her coverage. RIT will continue to pay the premium for Martha’s own coverage, but Martha will pay the full premium for Sam’s Medicare Blue Choice coverage.

This change does not apply to any person who became a retiree’s spouse, partner or other eligible dependent before January 1, 2005.

**Example:** John is an RIT retiree whose spouse of 35 years, Nancy, has been covered under her employer’s plan while she has been working. When Nancy retires in August 2005, her employer does not offer retiree health care coverage. John is able to add Nancy to his RIT coverage and does not have to pay the full premium for adding Nancy because they were married prior to January 1, 2005.

**Reminder to surviving spouses:** RIT coverage ends if you remarry.

## Cost Sharing for Future Medicare Eligible Retirees Based on “Benchmark Plans”

In the special retiree health care newsletter sent to you in January, we outlined an important change regarding cost sharing for future Medicare-eligible retirees. If you become Medicare-eligible on and after January 1, 2005, RIT’s contribution toward your health care coverage will be based on an annually designated “benchmark plan.”

For 2005, the benchmark plans are:

- In Rochester—both of the Medicare HMOs: Medicare Blue Choice and Preferred Care Gold
- Outside of Rochester—Blue PPO

### What does this mean?

When you are Medicare-eligible:

- If you enroll in the benchmark plan, RIT will pay your premium in full, and you will pay a contribution for a portion of the premium for your spouse or other dependent.
- If you enroll in a plan that has a higher premium than the benchmark plan, you will pay the difference between RIT’s contribution for the benchmark plan and the premium for the more costly plan.

Please note that a more costly plan is not necessarily a better plan, and may not be right for you and your family. It is important to review the entire plan’s features and benefits. See the enclosed *Medical Benefits Comparison Book* for detailed information on each of the plans.

# News for Medicare-Eligible Retirees

*from the Director of Human Resources*

Dear Retired Colleague:

One of the key reasons RIT is so successful today is the dedication of you and your colleagues who worked here in past years. Now, RIT has one more favor to request of you. If you live in the Rochester area and are not presently enrolled in a Medicare HMO (Medicare Blue Choice or Preferred Care Gold), I ask you to give consideration to joining one of them for 2005.

In 2003 and early in 2004, Dr. Simone wrote to you about our deepening concern with the dramatic increases in health care costs—particularly for retiree benefits. He informed you that he had appointed a multidisciplinary committee to review RIT health care benefits. Recommendations were approved by RIT's Board of Trustees in November 2003. These recommendations were communicated to you in the newsletter we sent in January of this year. The time has now come to implement the changes.

One of the committee's recommendations was to encourage Medicare-eligible individuals to participate in Medicare HMOs. Because our retiree population is concentrated primarily in Rochester, we have only been able to offer HMOs to those living in the Rochester area. We have nearly 800 Medicare-eligible retirees and spouses who elect coverage in the Rochester area. During 2004, about half participated in the two Rochester-area HMOs.

I will be frank. Your health care insurance premiums are fully paid by RIT, in most cases. RIT will save a great deal of money if you join an HMO. Based on the 2005 rates, the BlueCross BlueShield plan cost is \$3,336 annually compared to the Medicare Blue Choice which is one-half that cost at \$1,668 per year.

I would not ask you to do this if I did not believe that the Medicare HMOs in Rochester would provide you with at least as high quality care as you are used to receiving. Be sure to read the article "Top 10 Reasons Why You Should Join a Medicare HMO" on page 9 for details. You will find that, in most cases, the reasons you may not have joined an HMO in the past are no longer relevant—especially prescription drug coverage, which is now the same regardless of the medical plan you choose. In fact, we are so confident that once you try an HMO you will like it, that we are making this offer: If you elect an HMO and don't like it, you will be able to switch out of it effective July 1, 2005, instead of having to wait until 2006.

Thank you for considering a Medicare HMO for 2005. It is a significant way you can help RIT preserve quality health care coverage for employees and retirees, while continuing to receive excellent coverage from one of Rochester's two highly rated insurance companies.

Sincerely,



Patty Spinelli, Director  
HUMAN RESOURCES



# News for Medicare-Eligible Retirees

## Top 10 Reasons Why You Should Join a Medicare HMO (Medicare Blue Choice & Preferred Care Gold—For Rochester Area Retirees)

10

### Prescription drug coverage is no longer a factor when you choose your medical plan

When we asked retirees what was the main reason they wouldn't join an HMO, we heard "prescription drug coverage" loud and clear! We've eliminated this issue. If you have not already read the articles introducing RIT Rx on pages 2–5, be sure to do so. You will discover that your prescription drug coverage will be the same whether you join an HMO or the BCBS Comprehensive Plan.

9

### HMOs offer better coverage in many respects

Some examples where HMO coverage is better than BCBS Comprehensive:

- HMOs do not have upfront annual deductible before benefits are paid.
- For most services, HMOs require a \$15 or \$20 copay from you, rather than having you pay 20% of the total cost (after your deductible is met). You will know exactly how much you will pay, and often, it will be less than 20% of the total cost.
- Some services are covered in full by the HMOs such as: diagnostic laboratory and pathology services, hospice care, and routine mammograms.
- HMOs cover routine, preventive care, like physical exams, routine eye exams, and hearing exams.

Before making your selection, be sure to review the **Medical Benefits Comparison Book** enclosed with this mailing, and especially check any services that are important to you and your spouse/partner or other covered family member.

8

### HMOs focus on keeping you healthy

One of the key differences between a traditional indemnity plan like BCBS Comprehensive and an HMO is that indemnity plans cover you when you get sick, while HMOs try to keep you from becoming sick in the first place by covering preventive care. As described in #9 above, HMOs cover office visits for routine physical exams, routine eye and hearing exams, mammograms, pap smears and other routine screenings. HMOs also provide comprehensive coverage when you do become sick. Both HMOs sponsor wellness programs in which members can participate, such as Preferred Care Gold's Silver Sneakers program.

7

### Excellent, highly rated HMOs in Rochester

We are fortunate in Rochester to have two HMOs whose reputation for excellence is known nationally. For instance, both Excellus BCBS and Preferred Care have been awarded the "excellent" level of accreditation by the National Committee for Quality Assurance (NCQA)—a distinction that has been awarded to only the best plans in the United States.

6

### High satisfaction among participants

RIT retirees who currently participate in Medicare Blue Choice and Preferred Care Gold report very positive experiences with their plans. Over 97% of RIT's current employees participate in HMOs locally, and report a high satisfaction rate.

5

### Most local physicians participate

For example, 95% of primary care physicians and 86% of specialists in the Rochester area participate in the Medicare Blue Choice network. All area hospitals are in the network as well.

4

### Referrals are limited to a few specialties

Traditionally, one feature of managed care plans, such as HMOs, that some people do not like is the requirement that care be coordinated by a Primary Care Physician (PCP) and that referrals to specialists be obtained by the PCP through the HMO. The good news is that the Rochester HMOs no longer require referrals for many specialties. The plans have found that most referral requests for those specialties were being approved by the plan, and that the referral process simply added administrative cost. In many cases, no referral is required to see a specialist. It is recommended, however, that your PCP continue to coordinate your care to ensure you receive the appropriate, effective treatments. Your PCP is aware of the specialties still requiring referrals.

3

### Coverage outside the area

Another reason some people resist joining an HMO is due to a concern about not being able to access care while traveling outside an HMO's service area. This concern has now been addressed by each of the Rochester HMOs. Both plans cover emergency and urgent care outside the area. Additionally, each of the plans includes a travel benefit to cover members who travel outside the service area for up to six months of the year. See the "travel benefit" section of the **Medical Benefits Comparison Book** for details.

2

### Special offer for first year in HMO

If you still have concerns about making the change to join an HMO, we have a special offer for you. Retirees who enroll in a Medicare HMO for the first time in 2005 will have the opportunity to change plans as of July 1, 2005, if they are not satisfied with their HMO experience. You will not have to wait until January 1, 2006 to make a change if you are not happy with your HMO. This is a one-time offer for 2005 only, and is intended to help you feel more comfortable about switching to an HMO.

1

### Switching to an HMO helps RIT keep quality health care affordable

In 2004, RIT will spend over \$3.5 million on health care benefits for retirees and their family members. If each Rochester area retiree presently enrolled in BlueCross BlueShield Blue Million or Comprehensive Plans were to join Medicare Blue Choice HMO, RIT could save a significant amount each year! And you would continue to receive excellent health care coverage—creating a win-win situation for you and RIT.

**There's no punch line—just a bottom line. Please join an HMO for 2005!**

# News for Medicare-Eligible Retirees

## New Excellus BCBS Plan Arrangement Does Not Apply to Medicare-Eligible Retirees

The exclusive new plan arrangement with Excellus BlueCross BlueShield described in the News for Pre-Medicare Retirees section (pages 6–7) does not apply to Medicare-eligible retirees. The following plans are available to Medicare-eligible retirees for 2005:

- Medicare Blue Choice-Rochester area only
- Preferred Care Gold-Rochester area only
- Blue PPO (new for Medicare-eligible individuals)-Outside Rochester only
- BlueCross BlueShield Comprehensive-All



## Good News for Medicare-Eligible Retirees Living Outside the Rochester Area!

You asked for another out-of-Rochester option and we listened! For 2005, we are pleased to announce the expansion of the Blue PPO plan, which was previously available only to pre-Medicare retirees and employees. Blue PPO is a product of Excellus BlueCross BlueShield. It provides comprehensive medical coverage, but at a significantly lower premium than the BCBS Comprehensive Plan, which was first made available to Medicare retirees in 2004. And when you obtain medical services your out-of-pocket expenses may be lower too, so this might be a better choice for some people. For those retirees whose premium is paid in full by RIT, please note there is a significant difference in the premiums, so your choice of the Blue PPO will also help RIT control its costs for health care.

A PPO is a “preferred provider organization.” When you belong to a PPO, you can receive your care from any qualified medical provider, just as you can under the Comprehensive plan. If you obtain services from a network provider, your cost is lower than if you obtain services from a non-network provider. Network providers are those who have contracted with Excellus BlueCross BlueShield to provide services at a discounted rate.

Details of Blue PPO coverage are included in the enclosed *Medical Benefits Comparison Book*. Several key features of Blue PPO include:

- \$15 copayment for physician office visits—including both diagnostic and routine preventive visits for adults
- Hospital inpatient and outpatient services covered at 80% subject to an annual deductible of \$500 for an individual, or \$1,500 for a family
- Routine mammograms covered in full

Since the Blue Million plan will no longer be offered, you must enroll for health care for 2005 if you are currently in Blue Million. It is important for you to review all the features of both plans—Blue PPO and BCBS Comprehensive—to determine which plan will best help meet the expected needs of you and your family members. If you have questions, please contact Excellus BlueCross BlueShield.

Because Excellus BlueCross BlueShield has national affiliate plans across the United States, the number of providers in the Blue PPO network is very large. To learn whether your physician participates in the Blue PPO network, or to locate a participating physician in your area, see the provider directory on Excellus BlueCross BlueShield’s website: [www.bcbsra.com/providers/findadoctor\\_home.htm](http://www.bcbsra.com/providers/findadoctor_home.htm), or contact Excellus BlueCross BlueShield. We hope you will take the time to do so and make an informed choice during this year’s enrollment period. It’s nice to have a choice! And we’re glad to be able to bring it to you.

## Update: Medicare Prescription Drug Benefits

*You have likely been bombarded with information about the recently enacted Federal law that will add prescription drug benefits to the Medicare program. If you are participating in an RIT-offered medical plan, you may be confused about how this might affect you. The following article provides you with some background information, as well as an update on what might occur in the future.*

Earlier this year, the government introduced the availability of temporary discount cards for prescription drugs as a first step toward adding this benefit to the Medicare program. These cards are being offered by many companies and organizations, and there is typically a cost to obtain the discount card.

**If you participate in one of the RIT-offered medical plans, there is no need for you to purchase one of the discount cards.** Your coverage under the medical plan is at least as beneficial as the discount you would receive with a card. This is true even if you reach the maximum benefit limit of an HMO this year because you are still entitled to receive the HMO’s negotiated prices at the pharmacy—and the plans have verified that those prices are still better than the prices available through a discount card. This will also be true in 2005 when the RIT Prescription Drug Plan goes into effect (refer to pages 2-5 for more details).

In 2006, the Medicare prescription drug benefit is scheduled to become effective. One of the key guiding principles adopted by RIT last year with respect to retiree health benefits is that “catastrophic and prescription drug benefits are included.” At this time, RIT’s intent for 2006 is to continue to provide its Medicare retirees with prescription drug coverage through the RIT Prescription Drug Plan. Longer term, there could be a change in this strategy if it becomes clear that a more cost-effective alternative exists to provide comprehensive prescription drug benefits to retirees. We will provide you with additional details next fall when further guidance is expected from the government.

# Enrollment News & Resources

## Survey Results Influence Decisions about Potential New Benefits

Earlier this year, Human Resources conducted a survey to gauge interest in two potential benefits for retirees: a retiree medical opt-out benefit and a retiree dental plan. The survey was sent to all retirees, and to employees age 60 and over.

While the response rate to the survey was quite good—48% completed and returned the survey—the results indicate that there is not sufficient interest in either of these benefits to justify offering them at this time. What follows is a breakdown of each of the benefits that were under consideration and how the survey results impacted decision-making.

### Opt-Out Benefit

Currently, if an employee chooses not to be covered under RIT medical plans, they are paid an “opt-out benefit” of \$400 per year. Retirees who opt out of RIT’s medical plans do not receive an opt-out benefit today. The survey sought to determine whether there was an opportunity to provide a similar incentive for retirees to obtain their medical coverage through a spouse or elsewhere.

A number of people indicated they would consider canceling participation in RIT’s plan if RIT offered an opt-out benefit. However, there were not enough to outweigh the added cost RIT would incur to also provide the opt-out benefit to all the retirees who are currently opting out of the RIT plan. So the decision was made to not offer a retiree opt-out benefit at this time.

### Dental Plan

RIT offered retirees a dental plan option in 2000 and 2001. The plan required the retiree to pay the full premium. Enrollment in the dental plan was very low and did not meet the insurance company’s underwriting requirements, resulting in the carrier’s elimination of this offering.

Since that time, some retirees have expressed an interest in having a dental plan available to them through RIT. The survey was conducted to determine why retirees did not participate in the plan previously offered, and to identify the maximum premium amount retirees would be willing to pay for the coverage.

The most common reason cited for not having participated in the earlier plan was that it was “too expensive.” Unfortunately, the options available today have similar minimum enrollment requirements and premium costs as the plan previously offered. Therefore, we would expect that enrollment in a new dental plan would, once again, be very low. As a result, we will not offer a retiree dental plan for 2005.

While we will not be implementing these two benefits, we will continue to explore other benefit solutions that are cost-effective for RIT, yet provide value for retirees.

**Clifton Frazier Wins Survey Raffle!** As an incentive to participate in the survey, those who responded got the chance to participate in a raffle for a \$50 VISA gift card. We are pleased to announce that the winner of the raffle was Clifton Frazier of West Virginia, who retired from the CIAS School of Printing Management Sciences (today called the School of Print Media). Congratulations, Cliff! And thank you to all those who took the time to participate in the survey. Your input is extremely valuable to RIT.

## Retiree Meetings

To help you understand more about the upcoming changes, we will hold a number of informational sessions on campus especially for retirees. Representatives will be available from RIT’s Human Resources Department, the medical plan insurance carriers, and the new pharmacy benefit manager.

#1	Tuesday, October 5	9:00 a.m. – 11:00 a.m.
#2	Wednesday, October 6	9:00 a.m. – 11:00 a.m.
#3	Wednesday, October 6*	6:00 p.m. – 8:00 p.m.
#4	Thursday, October 7	1:00 p.m. – 3:00 p.m.
#5	Monday, October 11*	9:00 a.m. – 11:00 a.m.
#6	Tuesday, October 12	1:00 p.m. – 3:00 p.m.

\*Sign language interpreter will be present at this session.

All sessions will be located in **Room 2210/2220** (elevator is available) in the **CIMS Conference Center in the Louise Slaughter Building (#78)**. To find the building, simply follow the signs located on campus. Please feel free to bring your spouse or partner. If you would like to attend a session reservations are required, so please RSVP in one of two simple ways:

1. Send an e-mail to [benefits@rit.edu](mailto:benefits@rit.edu) OR
2. Call the RSVP Hot Line at (585) 475-5877/V and leave a message. For TTY users, please call the main Human Resources TTY number at (585) 475-2420.

When you RSVP, please be sure to include the session number you would like to attend, your name, whether your spouse/partner will be attending with you, and your phone number.

# Enrollment News & Resources



## New Web Tool Helps You Compare Area Hospitals

Excellus BlueCross BlueShield has developed a valuable online tool to help consumers make more informed medical decisions. Called *Click and Compare Care*, the tool allows you to compare the performance of hospitals in a specific area.

You can create a personalized report comparing up to ten hospitals by procedure or by diagnosis—more than 175 procedures and conditions are covered. Your report will include:

- The number of patients treated annually at each hospital for that condition.
- The percentage of patients who developed complications.
- The percentage of patients who died.
- The average number of days people stay in each hospital.
- The average price each hospital charged.

The hospitals are ranked based on your own designation of which criteria are most important.

Anyone who participates in an Excellus BlueCross BlueShield plan has access to the *Click and Compare Care* tool. You will need to register on the Excellus website, if you have not already done so. Use of the tool is completely anonymous and is designed to protect your privacy.

In addition to the hospital comparisons, the *Click and Compare Care* website includes general information about conditions and procedures to assist you in making informed decisions. With so much medical information now on the Internet, it is often difficult to know what is reliable and accurate. With *Click and Compare Care*, you have access to a credible source of medical information that can serve as the basis for discussions with your physician.

We urge you to take a tour of the *Click and Compare Care* website to see how it can work for you. Here's how:

- Go to [www.excellusbcs.com](http://www.excellusbcs.com)
- Log in as a member (or register for the website, if you haven't already)
- Go to *Click and Compare Care* on the left side of the screen to get started

## The Enrollment Process

The annual benefits open enrollment period gives you the opportunity to re-evaluate your medical insurance coverage and make new decisions for your 2005 coverage. In addition, you will learn what is new about the plans that RIT is offering to retirees.

Enclosed you will find a *Medical Benefits Comparison Book* for 2005. Since the plans vary based on Medicare eligibility, we have created two different books: 1) Pre-Medicare book; and 2) Medicare-Eligible book. We have enclosed the book(s) that applies to you and your family, according to our records. If, however, you need the other version, please contact the RIT Human Resources Department (contact information on page I6). For those who contribute toward the cost of their medical insurance, please refer to the enclosed monthly contribution rates. **NOTE:** For ease of use, we have separated the Rochester and Out-of-Rochester plans.

For those who do need to enroll for 2005, we have enclosed several forms, but you do not need to complete all of them. Simply complete the form(s) applicable to your election indicated below.

**Pre-Medicare retirees/spouses** must complete the enclosed:

- RIT Health Care Enrollment/Change Form

**Medicare retirees/spouses who are covered under the BCBS Blue Million Complementary plan** must *each* complete one of the following enclosed forms:

- Medicare Blue Choice (Rochester area only); OR
- Preferred Care Gold (Rochester area only); OR
- EBCBS Medicare Plans Enrollment Form

Please send your completed form(s) to Q&F Benefit Administration in the enclosed pre-addressed, pre-paid envelope.

**This is your only opportunity to enroll, change plans, or cancel your medical insurance with two exceptions:**

- If you or your spouse becomes eligible for Medicare and switches to one of the plans for Medicare-eligible participants;  
**OR**
- If you have a qualified family or employment status change during the year. A family or employment status change includes marriage, divorce, birth or adoption of a child, death of a spouse or dependent, or a change in employment (e.g., spouse gaining or losing employment). If you have one of these events and you want to elect, change your coverage level, or cancel your coverage, you must notify Q&F Benefit Administration (RIT's administrator) **within 31 days of the event**. Otherwise, you must wait until the next annual Open Enrollment. Please remember that the event must be consistent with the change you want to make, and the change must be permitted under IRS rules. Also remember—**you cannot change insurance plans during the year** (e.g., Medicare Blue Choice to Preferred Care Gold) if you have a change in family or employment status, or if your physician leaves the plan you are in (except for the special offer described in #2 on page 9).

**Remember, you must enroll for 2005 if you are pre-Medicare, or if you are presently in the BCBS Blue Million Plan!**

## Other RIT Benefits

As an RIT retiree, you are eligible for a number of other benefits and services.

### Group Legal Services (Hyatt Legal)

Hyatt Legal Plans, a MetLife company, is a leading provider of group legal plans. A Hyatt legal plan is now available at over 300 organizations in the U.S. and provides legal services to over a million plan participants. This program can cover you, your spouse/domestic partner, and your dependent children. If you go to a participating attorney, coverage includes unlimited telephone advice and office consultations on personal legal matters (excludes business and employment-related matters) with a plan attorney of your choice. Covered services include preparation of wills, codicils, living wills and living trusts, and preparation of powers of attorney, deeds, demand letters, promissory notes and mortgages, identity theft defense, immigration assistance, and traffic ticket defense (not DUI).

The cost for this program is \$216 per year. To enroll in this program, send a check for \$216 (made payable to RIT) to the RIT Human Resources Department by Friday, October 29, 2004. Please be sure to put "Hyatt Legal" on the memo line of the check. **You must re-enroll in this plan. If you were enrolled for 2004, the enrollment will not continue. This is the only opportunity that you will have to join until next year's Open Enrollment period.**

### The Athenaeum

The Athenaeum is an innovative educational program dedicated to the enrichment of adults over the age of fifty who believe learning is a lifelong process. Founded in 1987 as an affiliate of RIT, the Athenaeum is run for and by its members. People with broad interests and inquiring minds will find pleasure in extending their knowledge and broadening their understanding of the works around them.

Regular members may participate in any and all activities appropriate to their interests and personal schedule. Benefits include courses, social events, travel, tours, field trips, and audiology services. The audiology services include hearing evaluation, as well as hearing aid service and purchase at a reduced rate from RIT's National Technical Institute for the Deaf (NTID), September through mid-May. The audiology services, including discounts on hearing aids, are available only to those who purchase a regular Athenaeum membership. Those who purchase a trial membership are not eligible for those services.

The regular annual membership cost is \$250. There is a special Trial Membership for first-time members of only \$140 for one term (audiology services NOT included in trial membership).

For more details or to request a catalog, contact The Athenaeum directly (contact information on page I6).

### Tuition Waiver

Retirees are eligible for tuition waiver benefits from RIT. Credit courses taken by retirees are automatically waived—you do not need to complete any forms. If you would like tuition waiver on credit courses for your eligible family members (spouse/partner and/or eligible children), you simply complete a Tuition Waiver Benefit Form—Family Member Information. This form is good for one academic year. You can obtain this form from the Human Resources website. Simply complete and sign the form and send to the Human Resources Department. If you do not have access to the Internet, contact the Human Resources Department (see the contact information on page I6). If you or a family member will be taking a course through the Learning Development Center (LDC) or English Language Center, you must complete a different form—Tuition Waiver Form. You can also obtain this form from the HR website.

### Other RIT Services and Discounts

During retirement, access privileges to RIT facilities, such as the Student Life Center, Wallace Library, and Campus Connections (RIT bookstore) are continued. To gain access to these facilities and to get a 10% discount on most items at Campus Connections, you will need a Retiree ID card. If you don't have a Retiree ID card, you can get one at the Registrar's Office (1st floor of the George Eastman Building). For questions, you can contact the Registrar's Office directly. If you remain connected with RIT, you are eligible for e-mail access through RIT. Simply contact the ITS Help Desk.



## Other RIT Benefits

### New York's 529 College Savings Program

New York's 529 College Savings Program Direct Plan provides a flexible, convenient, and low-cost way to save for college for you, your children, grandchildren, or anyone else. The Program features a wide range of investment choices, tax-free withdrawals when used for qualified higher education expenses, and contributions that are tax-deductible (up to certain limits) for New York State residents.

You can save for a child, grandchild, friend—or even yourself. And the Program includes a valuable opportunity to accelerate your college savings through **Upromise Rewards**—a free service that returns a percentage of your spending at thousands of America's leading companies and can transfer that money directly to your Program account.



#### Highlights of New York's 529 College Savings Program Direct Plan:

- Payment from a Tuition Savings Account can be made to accredited schools anywhere in the country.
- The program is designed to pay for qualified higher education expenses, including tuition, fees, supplies, room and board, books, and equipment required for enrollment or attendance at an accredited undergraduate, graduate, or professional institution of higher education, or at an approved business, trade, technical or other occupational school.
- Funds in the account will not be used toward the calculation of New York State financial aid under state-administered financial aid programs. However, federal or institution-based programs may take the amounts in the account into consideration when determining eligibility.
- The first \$5,000 invested each year will be excluded from New York State income—and none of the investment earnings will be taxed by the State—as long as the money is used for qualified higher education expenses at any accredited college in the United States. The earnings component of a qualified withdrawal will also be exempt from federal tax (unless extended, federally tax-free treatment of qualified withdrawals will expire after December 31, 2010).
- Choose from three age-based options that adjust your assets over time to more conservative allocations, as your beneficiary nears college, and 12 individual portfolios that you adjust yourself according to your own investment strategy and risk tolerance. You can select up to five investment options per account.
- You can open and manage your account online and choose to receive account statements and transaction confirmations online through [www.nysaves.org](http://www.nysaves.org).



**2005 RITiree Picnic  
on Liberty Hill  
June 15, 2005**

Mark your calendars for the  
6th annual RITiree Picnic.  
Look for your invitation in the mail next spring.  
We hope to see you there.

## Other RIT Benefits

### Computer Education Services Corporation Computer Training

Retirees are eligible for computer training at discounted rates at Computer Education Services Corporation, the official external supplier of computer training for RIT employees—and RIT retirees can take advantage of the discounts too! Through this exclusive arrangement, Computer Education Services Corporation will provide state-of-the-art computer training opportunities at substantial savings to individual members of the RIT community participating in their open-enrollment courses. In addition to the Microsoft products, Computer Education Services Corporation offers programs in a wide range of other computer applications, including desktop operating systems, desktop applications, the Internet, programming, networking and systems development, and a variety of certification programs. You can access the course directory at Computer Education Services Corporation's web page: <http://www.computeredservices.com>. When you register, be sure to let them know you are a retiree of RIT (you may also need to show them your RIT ID card—if you need an ID card, you can get one at the Registrar's Office).

To respond more effectively to the needs of deaf and hard-of-hearing RIT customers, Computer Education Services Corporation staff participated in NTID-provided training. In addition, deaf and hard-of-hearing individuals can contact Computer Education Services Corporation via a direct TTY line. If you need a sign language interpreter, contact them to learn if any interpreted classes have been scheduled. For a listing of fees and class schedules, or if you would like to take a class, simply contact Computer Education Services Corporation directly at the number (V/TTY) listed on page I6.

### Long Term Care Insurance

Long Term Care Insurance provides protection against the significant cost of care needed to support chronic medical conditions, disabling accidents and injuries, or simply from the complications of growing older. The need for Long Term Care Insurance is becoming critical considering that long-term care services are the greatest health care expense most retirees face, yet the only significant one not covered by either traditional medical insurance plans or Medicare.



RIT offers this benefit through MedAmerica Insurance Company, an Excellus company. This insurance coverage is offered to employees, retirees, and those on LTD, and their extended family members at group rates. There are several different programs available, depending on what you foresee your needs to be. For more information, contact MedAmerica directly at the number listed on page I6.

### Group Auto and Homeowners Insurance (VIP Services)

You are also eligible for a program that RIT offers which provides an opportunity to purchase auto, homeowners, and other kinds of personal insurance at group rates through *VIP Services*, managed by Marsh@WorkSolutions, a service of Seabury & Smith. The insurance is provided by MetLife Auto & Home®. While rates are not guaranteed, you may be able to save money off MetLife's retail insurance rates. For more information, contact Marsh@WorkSolutions directly at the number listed at the end of this newsletter.



## 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

*As you begin the enrollment process, you may have questions concerning your options. 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
ITS Help Desk	(585) 475-4357	(585) 475-2810	<a href="http://www.rit.edu/~wwwits/">http://www.rit.edu/~wwwits/</a>
Registrar's Office	(585) 475-2821	(585) 475-2821	<a href="http://www.rit.edu/~605www/">http://www.rit.edu/~605www/</a>
RIT Human Resources	(585) 475-2424	(585) 475-2420	<a href="http://finweb.rit.edu/HumanResources/benefits/">http://finweb.rit.edu/HumanResources/benefits/</a>
The Athenaeum	(585) 292-8989	Use Relay	<a href="http://www.isc.rit.edu/~athenwww/">www.isc.rit.edu/~athenwww/</a>

### Health Care

BlueCross BlueShield	(585) 325-3630	(585) 454-2845	<a href="http://www.excellusbcs.com">www.excellusbcs.com</a>
MedAmerica	(800) 544-0327	(585) 454-2845	<a href="http://www.yourlongtermcare.com">www.yourlongtermcare.com</a>
Medco	(877) 722-6279*	Use Relay	<a href="http://www.medco.com">www.medco.com</a>
Medicare Blue Choice	(585) 454-4810	(585) 454-2845	<a href="http://www.excellusbcs.com">www.excellusbcs.com</a>
Preferred Care Gold	(585) 327-2480	(585) 325-2629	<a href="http://www.preferredcare.org">www.preferredcare.org</a>
Q&F Benefit Administration	(585) 383-8520 (800) 687-0578	Use Relay	

### Retirement Program

Fidelity	(800) 343-0860	(800) 259-9743	<a href="http://www.fidelity.com">www.fidelity.com</a>
TIAA-CREF	(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>

### Discount Services

Computer Education Services Corporation	(585) 235-1190	Use Relay	<a href="http://www.computerservices.com">www.computerservices.com</a>
Hyatt Legal	(800) 821-6400	(800) 821-5955	<a href="http://www.legalplans.com">www.legalplans.com</a> password = 57005
VIP Services	(800) 999-6642	Use Relay	<a href="http://www.payrolldeduct.com">www.payrolldeduct.com</a> company code = 01725
Keys to the Community	(800) 527-0074	(585) 586-0361	<a href="http://www.piersonrealtors.com">www.piersonrealtors.com</a>
On the House	(800) 485-0222	(585) 244-2204	<a href="http://www.columbushomes.com">www.columbushomes.com</a>
Coldwell Banker	(585) 899-5508	Use Relay	<a href="http://www.earlkrakower.com">www.earlkrakower.com</a>

\*This number is for enrollment only. Beginning 1/1/05, use (800) 230-0508.



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The RIT 2005 Retiree Open Enrollment Newsletter is distributed to retirees and surviving spouses and children of deceased employees/retirees to help explain RIT's benefits, 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.

## Identity Theft and Your Medical ID Number

In response to the growing concern with the use of the Social Security Number (SSN) as an identifier, Congress recently enacted the Social Security Number Privacy and Identity Theft Prevention Act of 2004. With the implementation of this legislation in 2006, insurance companies will no longer use your SSN as your identification number (it will continue to be used during 2005). This has been a very complex systems issue for insurance companies and one that both BlueCross BlueShield and Preferred Care had already been working on. You will hear more about this issue as more information becomes available.

