

Think healthy. Act healthy. Stay healthy.

Soundings

Open Enrollment 2010

Open enrollment is November 1 to November 30, 2009.

Open enrollment is your annual opportunity to review your benefit choices, learn what's new for 2010 and make any changes. For 2010, we're changing our medical plan options so you may need to make a new medical plan choice for next year. In this newsletter, you'll receive all the information, tools and resources needed to help you make an educated plan selection.

During open enrollment you can:

- **Change your medical plan.**
If you are currently a participant in the Regence Basic Plan, PPO 1, Selections 1 or FourFront medical plans, you will need to enroll in one of the new WEA Select Health Plans or switch to Group Health Cooperative for 2010.
- **Add or delete** a family member from coverage.
- **Add coverage** you previously waived (dental, long-term disability or vision, for example).
- **Enroll** in a Flexible Spending Account (Health Care or Dependent Care).
- **Change** your optional or dependent life insurance choices.

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Questions?

If you need assistance selecting your benefits or if you have any questions about the changes being made this year, contact The Sound Partnership at (253) 571-1240. You can also contact us at www.tsp-soundliving.com, select *Feedback* at the top left of the home page.



What's New for 2010

Beginning January 1, 2010:

- The Regence Basic Plan, PPO1, Selections 1 and FourFront medical plans, along with the Caremark Prescription Drug Plan, will be eliminated.
- Seven new Washington Education Association (WEA) medical plan options will be offered in their place.
- **If you are currently participating in the Regence Basic Plan, PPO 1, Selections 1 or FourFront plans and you do not make any enrollment elections, you will automatically be enrolled in the WEA Select Health Plan 3.**
- Medical coverage levels will change to Employee only, Employee + spouse/domestic partner, Employee + child(ren) and Employee + family.
- Monthly contributions will increase for Group Health Cooperative. Deductibles and coinsurance will also be added to this option.
- If you are currently a participant in a Regence plan, your Caremark **mail order** prescriptions will no longer be valid. You will need to get new prescriptions from your doctor and submit them to your new mail-order pharmacy.
- All members will receive new medical ID cards.
- New and improved **Sound Living—Achieving4Life** wellness program.

What's Not Changing?

- Dental, vision, life insurance and long-term disability will remain unchanged for 2010.

2010 Medical Plan Changes

The Sound Partnership's cost for providing healthcare to our members has continued to increase over the past few years. By making changes to our benefit plans and cost structures along with spending down the Trust's reserve fund, we've been able to offer you and your family healthcare plans with the best coverage options at the best price. Next year, if we made no changes, The Sound Partnership's cost for providing healthcare to our members would create a deficit of \$3.7 million. After a thorough review of our options for 2010 and our current and projected available funding, we have decided to move from providing healthcare benefits as a self-insured plan to a fully insured plan, so we'll be changing our medical plan options for 2010.

Why Change to Fully Insured Plans?

As part of our fiduciary responsibility, The Sound Partnership Trustees review our plans each year to ensure they meet the financial obligations of the Trust as well as the healthcare needs of our members. This year, the Trustees have determined that moving to the WEA medical plans offers the following advantages to our members:

- Affordable medical coverage for full-time *and* part-time employees.
- A lower average annual contribution rate increase: less than 7% over the past five years, which is lower than the national average of 10%.
- A variety of plans to suit members' personal circumstances.
- A large purchasing pool, with over 62,000 employees and 114,000 total plan participants.
- A similar network of doctors so most members should not need to find a new doctor.

The WEA medical plan (as well as the State PEBB option) has been available in prior years as well, and the Trustees have regularly reviewed the benefits and costs for these programs against the benefits and costs for the current self-insured plans. In the past, based on this comparison, the Trustees determined that the self-insured plans provided better benefits at a competitive cost in comparison to these other options. Over time, as our population has aged and our health care costs have increased, we have lost this competitive advantage in comparison to the WEA plan. As a result, the decision was made to move to the WEA plan.

How You Can Help Manage Healthcare Costs

Here are some things you can do to help make the most of your healthcare dollars:

- **Take care of yourself**—eat healthy, try to exercise 30 minutes a day and manage your stress. Be sure to schedule an annual physical with your doctor and get the preventive screenings recommended for your age and gender.
- **Put your health first** by joining The Sound Partnership's wellness program, **Sound Living—Achieving4Life**. Get ready for four new Seasons, with the opportunity to earn points and prizes while you improve your health.
- **Quit tobacco for good**. The Free & Clear program is available to you and your eligible dependents at no charge.
- **Lower your tax bill**. Use your Health Care Flexible Spending Account to pay for eligible healthcare expenses (like deductibles, prescription drugs, etc.) while cutting your taxable income.
- **Ask for generic drugs** or use the mail order prescription service when you can.

Your Medical Plan Options

The Sound Partnership now offers a choice of eight medical plans—seven WEA Select Plans administered by Premera Blue Cross and one plan by Group Health Cooperative. All medical plan options include prescription drug coverage.

WEA Select Health Plans

Highlighted below are a few key differences between our current plans and the new WEA Select Health plans. Refer to the WEA Summary of Benefits provided in your enrollment packet for more detailed information about each plan.

Provider Networks

WEA Select Plans use a different provider network—Premera Blue Cross. The good news is that the majority of doctors and hospitals in the current Regence network are also in the Premera Blue Cross network.

You can use out-of-network providers with all the WEA plans, but your benefits will be at the lower out-of-network level, which means you'll pay more out-of-pocket. To find out more about the Heritage and Foundation provider networks, go to www.premera.com/wea and select "find a Doctor" or call the WEA Service Team at (800) 932-9221.

A key difference with Premera's provider network is that there are two networks associated with the plans—Heritage (Premera's largest network) and Foundation. Here's how it works:

- If you choose Plan 5 or EasyChoice Option C, or you'll use the **Foundation network**.
- If you choose Plan 1, Plan 2, Plan 3, or EasyChoice Option A or Option B, you'll use the **Heritage network**.

WEA Select Plans Extras

If you enroll in a WEA Select Health Plan, you'll be eligible for the following extra benefits provided at no cost to you:

- \$20,000 decreasing term employee life insurance (in addition to \$25,000 Basic Life insurance provided by The Sound Partnership).
- In the event of your death, premiums will be waived for up to the first 12 months of COBRA coverage for your surviving spouse and children who were covered by the plan at the time of your death.

See your WEA enrollment materials for details.

Prescription Drug Benefit

Retail pharmacy benefits are provided by Premera participating pharmacies and mail order service is administered by Medco. If you use mail order service, you'll need to get new prescriptions from your doctor. The cost for prescription drugs under the WEA Select Plans depend on the category or tier of the drug.

- Tier 1: Generic drugs. When you choose generic drugs, you pay the lowest copay.
- Tier 2: Preferred brand name drugs listed in the formulary.
- Tier 3: Non-preferred brand name drugs. These drugs are either new or have Tier 1 or Tier 2 alternatives that are more cost-effective or are a specialty drug. When you choose a non-preferred drug, you pay the highest copay.

Refer to the WEA Summary of Benefits or visit www.premera.com/wea for more information about the prescription drug benefit or to find a copy of the formulary.

Mid-year Plan Changes

Because the WEA Select Plans renew in October instead of January, any benefit or rate change takes effect at October 1. You will receive information about any plan changes each year in early fall. Typically, plan changes for the Select Health Plans have been minimal.

New ID Cards for 2010

All members will receive new medical ID cards for 2010. Premera will mail new ID cards as soon as your enrollment form is processed. If you return your enrollment form promptly, you could receive an ID card as early as November, 2009. Group Health will mail new ID cards to members in late December. You will need to show your card to all your healthcare providers starting in January.

Group Health Cooperative

Next year, along with the other medical plan options, the Group Health option will be fully insured. This means The Sound Partnership will pay premiums only, while Group Health will be ultimately responsible for paying the healthcare costs of all members who elect this option. The Group Health fully-insured option plan design includes deductibles and coinsurance. Following is a preview of what's changing effective January 1, 2010:

- An annual deductible of \$200 per person and \$600 per family will be added.
- The annual family out-of-pocket maximum will increase from \$2,000 to \$3,000.
- Coinsurance of 20% will be added.
- Copays for retail and mail order preferred brand name drugs will decrease:
 - Retail: From \$30 to \$20
 - Mail order: From \$60 to \$40

For more information, refer to the Group Health Benefit Summary provided with your enrollment materials. See your main office coordinator if you need a Group Health enrollment form.

Cost Sharing Terms to Know

Copay: The fixed dollar amount you must pay each time you use certain services such as physician office visits, emergency room and inpatient hospital.

Deductible: The amount you must pay before your plan starts to pay benefits toward certain services each year.

Coinsurance: The percentage of covered service you pay as your share of the covered cost. For example, if your plan pays 80% of covered charges, your coinsurance is 20%.

Out-of-pocket maximum: The maximum amount you're required to pay out of your own pocket for coinsurance in a calendar year.

Open Enrollment Calendar 2010

Date	Event
November 1	Open enrollment starts. Remember to review the information in this guide, the WEA Summary of Health Plans and Group Health Benefit Summary to determine if any benefit selections will better meet your needs in the coming year.
November 4-18	Attend one of the open enrollment meetings (schedule on page 17 of this issue).
November 19	Attend the Benefits Fair.
November 30	Open enrollment ends. Return your completed Benefits Enrollment Form and any applicable District enrollment forms to The Sound Partnership office.
November— December 2009	Watch for new medical plan ID cards mailed to your home.
January 1, 2010	Your new elections go into effect.
January 5, 2010	First paycheck with 2010 benefit deductions.

2010 Costs for Coverage

Monthly Cost of Medical Coverage for Full-Time Employees

Your share of the cost for medical coverage will be based on:

- Your employment type—full-time or part-time.
- The medical plan option you choose—WEA EasyChoice, Plan 1, Plan 2, Plan 3, Plan 5 or Group Health Cooperative.
- How many people are covered—employee only, employee + spouse/domestic partner, employee + child(ren) or employee + family

	Employee only	Employee + Spouse/Domestic Partner	Employee + Child(ren)*	Employee + Family*
EasyChoice Plan A, B or C	\$10.00	\$60.00	\$30.00	\$80.00
Plan 1	\$171.45	\$382.57	\$273.90	\$485.02
Plan 2	\$90.06	\$221.08	\$158.74	\$289.76
Plan 3	\$30.00	\$105.00	\$75.00	\$150.00
Plan 5	\$104.47	\$302.52	\$195.59	\$393.64
GHC	\$100.00	\$240.00	\$180.00	\$320.00

* Includes your child(ren) or your domestic partner's child(ren).

2010 Costs for Coverage

Monthly Medical Costs for Part-Time Employees

	Employee only	Employee + Spouse/ Domestic Partner	Employee + Child(ren)*	Employee + Family*
WEA EasyChoice				
.90-.99	\$36.02	\$86.02	\$56.02	\$106.02
.80-.89	\$81.15	\$131.15	\$101.15	\$151.15
.70-.79	\$126.28	\$176.28	\$146.28	\$196.28
.60-.69	\$165.41	\$215.41	\$185.41	\$235.41
.50-.59	\$204.54	\$254.54	\$224.54	\$274.54
WEA Plan 1				
.90-.99	\$209.47	\$420.59	\$311.92	\$523.04
.80-.89	\$278.60	\$489.72	\$381.05	\$592.17
.70-.79	\$347.73	\$558.85	\$450.18	\$661.30
.60-.69	\$416.86	\$627.98	\$519.32	\$730.44
.50-.59	\$485.99	\$697.11	\$588.45	\$799.57
WEA Plan 2				
.90-.99	\$128.09	\$259.10	\$196.76	\$327.78
.80-.89	\$197.22	\$328.23	\$265.90	\$396.91
.70-.79	\$266.35	\$397.36	\$335.03	\$466.04
.60-.69	\$335.48	\$466.50	\$404.16	\$535.17
.50-.59	\$404.61	\$535.63	\$473.29	\$604.30
WEA Plan 3				
.90-.99	\$68.02	\$143.02	\$113.02	\$188.02
.80-.89	\$137.15	\$212.15	\$182.15	\$257.15
.70-.79	\$206.28	\$281.28	\$251.28	\$326.28
.60-.69	\$275.41	\$350.41	\$320.41	\$395.41
.50-.59	\$344.54	\$419.54	\$389.54	\$464.54
WEA Plan 5				
.90-.99	\$142.49	\$340.54	\$233.61	\$431.66
.80-.89	\$211.62	\$409.67	\$302.74	\$500.80
.70-.79	\$280.75	\$478.80	\$371.87	\$569.93
.60-.69	\$349.88	\$547.93	\$441.01	\$639.06
.50-.59	\$419.01	\$617.06	\$510.14	\$708.19
Group Health HMO				
.90-.99	\$126.02	\$266.02	\$206.02	\$346.02
.80-.89	\$171.15	\$311.15	\$251.15	\$391.15
.70-.79	\$216.28	\$356.28	\$296.28	\$436.28
.60-.69	\$255.41	\$395.41	\$335.41	\$475.41
.50-.59	\$294.54	\$434.54	\$374.54	\$514.54

* Includes your child(ren) or your domestic partner's child(ren).

Monthly Costs of Dental Coverage

Monthly contributions for dental coverage for full-time employees will not change for 2010.

Willamette Dental of Washington

Your monthly contribution is \$20, regardless of how many eligible dependents you enroll. Copayments are waived after you have three years of service with the Tacoma School District.

United Concordia Dental Plan

If you choose the United Concordia Dental Plan, your share of the monthly cost of coverage will depend on who you enroll.

If You Enroll . . .	Your Monthly Payroll Deduction Will Be . . .
Employee only	\$20
Employee + Spouse/Domestic Partner	\$30
Employee + Spouse/Domestic Partner + 1 Child*	\$35
Employee + Spouse/Domestic Partner + 2 or More Children*	\$40
Employee + 1 Child*	\$25
Employee + 2 or More Children*	\$30

* Child(ren) includes your child(ren) or your domestic partner's child(ren).

2010 Costs for Coverage

Optional Employee Life Insurance

Rates for Optional Employee Life insurance are **decreasing** for 2010. You may purchase additional life insurance for yourself in coverage levels of 1, 2, 3, 4 or 5 times annual earning up to \$500,000. Your monthly cost for Optional Employee Life Insurance is based on your age and the coverage amount you elect.

Your Age	Monthly Cost Per \$1,000 of Coverage
Under age 30	\$.035
30-34	\$.045
35-39	\$.06
40-44	\$.075
45-49	\$.11
50-54	\$.17
55-59	\$.32
60-64	\$.63
65-69	\$1.07

Note: If you were enrolled in Optional Life prior to January 1, 2007 and did not change your coverage level and coverage amount last year, regardless of your salary, your coverage amount will remain at the following levels:

Coverage Level Up to	Coverage Amount
1 x annual earnings	\$50,000
2 x annual earnings	\$100,000
3 x annual earnings	\$150,000
4 x annual earnings	\$200,000
5 x annual earnings	\$250,000

Evidence of good health may be required to increase coverage during open enrollment.

Monthly Cost for Life Insurance and Long-Term Disability Coverage

The Sound Partnership will continue to provide the same level of Basic Life Insurance and Long-Term Disability coverage in 2010.

Dependent Life Insurance

Rates for Dependent Life insurance will not change for 2010. Your monthly cost for \$12,500 in spouse/ domestic partner coverage is based on your current age as shown in the following table.

Your Age	Your Monthly Cost
Under age 30	\$0.75
30-34	\$1.00
35-39	\$1.25
40-44	\$1.63
45-49	\$2.50
50-54	\$3.75
55-59	\$6.63
60-64	\$10.38
65-69	\$17.63

Child Life Insurance

Rates for Child Life insurance will not change for 2010. Coverage for your eligible children (including your domestic partner's eligible children) is \$1.00 per month if you select Dependent Life Insurance, regardless of the number of dependent children covered, but you must enroll **each** child for coverage. Each eligible child is covered for \$5,000.

Note: Employee and spouse/domestic partner optional coverage terminates at age 70. In order for dependents to be covered, the employee must be covered.

Choosing a Medical Plan

After the November 30 deadline, you generally won't be able to change your medical plan until open enrollment next year. And you can't change other benefits unless you have a "qualifying event," like marriage or a new child. So it's important to think about your choices carefully before you enroll. Here are some things to consider if you're choosing a new medical plan:

- Consider how you and your family tend to use medical services during the year. Make a list of the benefits most important to you—preventive care or prescription drug coverage, for example and then check how the plans you like cover them.
- Be sure to look at exclusions and limitations to determine what is and is not covered by each plan.
- Take a look at last year's Explanation of Benefits (EOBs) and receipts to help you think about your potential needs in 2010.

Does your spouse or domestic partner have medical coverage offered through their employer? Be sure to look at their coverage options before you enroll for 2010.

Remember, your annual medical cost is more than your monthly contribution amount. You'll also need to consider your deductible, coinsurance and prescription drug usage when deciding which healthcare plan is the best fit for you and your family.

Which WEA Select Plan Best Matches My Regence Plan?

If you're interested in the WEA Select Health Plans and would like to choose a plan with coverage most similar to your current medical plan, take a look at the chart below.

If your current medical plan is...	You might consider enrolling in the following WEA Select Health Plans...
FourFront	Plan 3 or EasyChoice Option A
Basic Plan	Plan 1, Plan 2 or Plan 3
PPO 1	Plan 1 or Plan 5
Selections 1	Plan 1 or Plan 5

How to Enroll

Completed enrollment forms must be returned to The Sound Partnership office **no later than November 30, 2009**. Follow these easy steps to complete enrollment for your 2010 Trust-sponsored benefits:

- 1. Review** the information in this newsletter, the WEA Summary of Benefits and the Group Health Benefit Summary.
- 2. Attend** one of the open enrollment meetings shown in the schedule on page 17 and/or the Benefits Fair on November 19.
- 3. Complete** a Benefits Enrollment Form available from your main office coordinator. If you are currently a participant in one of the Regence Plans—Basic Plan, PPO 1, Selections 1 or FourFront—and do not enroll, you will automatically be enrolled in the **WEA Select Plan 3**.
- 4. Enroll** any eligible dependents—including a domestic partner or their eligible dependent child(ren)—by completing and returning the Benefits Enrollment Form and an Affidavit of Domestic Partnership. If an affidavit is on file, you will not need to complete a new one.
- 5. Return** the top two copies of your completed Benefits Enrollment Form and any applicable District enrollment forms to The Sound Partnership office.

Enrollment decisions you make for benefits during this open enrollment period will be in effect from January 1 through December 31, 2010, unless you have a qualifying change in family status.

Don't Forget! Health Care and Dependent Care Spending Accounts Enrollment

To participate in one or both of the Health Care and Dependent Care Spending Accounts in 2010, you must enroll online at <https://www.flexplan.com/ssl/enroll>—even if you are a current participant.

Once enrolled, you'll receive additional information from Flex-Services, Inc. Remember, you can not participate in the Health Care or Dependent Care Spending Accounts for 2010 if you don't enroll by November 30, 2009.

Domestic Partner Coverage

According to federal tax law, your taxes may be affected when you enroll your domestic partner for coverage. Coverage for domestic partners and their children may not be paid for with before-tax dollars unless they are financially dependent on you as outlined by the IRS.

The Sound Partnership domestic partner coverage is considered a taxable benefit under federal IRS regulations. If you have this coverage, additional taxable income will be added to your pay each month and the appropriate taxes withheld. The impact on your tax withholding will depend on your gross pay and your W-4 filing status. Since the tax requirements are complex, be sure to consult with your tax advisor.

If You Don't Return a Completed Benefits Enrollment Form

You and your currently enrolled dependents will be automatically re-enrolled for the same coverage in The Sound Partnership sponsored benefits you have for 2009 unless you are enrolled in one of the Regence Plans—Basic Plan, PPO 1, Selections 1 or FourFront. If you are a current participant in a Regence Plan and do not enroll, you will automatically be enrolled in the **WEA Select Plan 3**.

To participate in the Health Care and Dependent Care Spending Accounts for 2010, even if you were a participant last year, you must enroll by logging on to <https://www.flexplan.com/ssl/enroll>.

New benefit contributions will be deducted from your pay and will be reflected on your first paycheck in 2010.

Tools and Resources

Your health and wellness is important and can be difficult to manage alone. That's where The Sound Partnership comes in. Let us help you on your wellness journey with a variety of free health management tools and resources. By using these tools and maintaining a healthy lifestyle, you can help reduce healthcare costs while becoming an engaged, educated and active healthcare consumer.

1 Wellness Program 4 Great Seasons

Sound Living—Achieving4Life

It's Back and better than ever! This year, **Sound Living—Achieving4Life**, The Sound Partnership's wellness program, is turning up the volume on getting healthy. Like last year, the program will run for four Seasons, focusing on the goal of overall health and wellness. New this year, prizes and points will accumulate with each Season, so the more Seasons you compete in, the more points you'll earn and the greater your likelihood of winning prizes. If you didn't participate last year, what a great time to join in the fun. Simply register, participate and compete for prizes!

fall

Live & Learn:

Find out more about health and wellness by learning about good nutrition, exercise and living well.

winter

Million Step Challenge:

Can you feel the intensity? Step up to the plate and get moving by counting your steps, eating well and heading in a healthy direction.

spring

Bon Appétit:

Direct your attention to nutrition by increasing your fruit and veggie intake—while keeping up your exercise and continuing to step to the beat.

summer

Explore the Scene:

An adventure awaits! Join your colleagues, family and friends while heading outdoors and exercising.

For more information on **Sound Living—Achieving4Life**, check the Sound Living website at www.tsp-soundliving.com.

www.tsp-soundliving.com

Know Your Numbers

Health Risk Assessment (HRA)

Ever wondered where your health stands? Well, now you can find out. Discover your personal health numbers by simply answering a few questions, online in a free and confidential HRA questionnaire. Once you've finished the HRA, you can discuss your results with a personal health advisor and develop a wellness plan. If you have specific health-related needs or would like to make general health improvements, this questionnaire can help get you started.

To access an HRA, log onto your plan's website:

- **WEA/Premera:** Visit www.premera.com/wea and select the Health Management tab. Then, log on to **StayingHealthy**, through WebMD. Here you can access the **HealthQuotient (HQ)**. If you enroll in a WEA medical plan, more information about this program will be mailed to your home in January.
- **Group Health Cooperative:** Log in to <https://member.ghc.org/> and upgrade your account to Enhanced Services. Then select *Health Profile*.

WEA Medical Plan Health Quotient

From February 1 to April 11, 2010 if you and/or any of your eligible family members enrolled in a WEA medical plan, complete the **HealthQuotient (HQ)**, you may be eligible to receive **\$50 and qualify for health coaching!**

Just a Phone Call Away . . .

All The Sound Partnership medical plans have a 24/7 telephone number where you can reach a registered nurse. Call anytime for free, confidential medical answers.

- Premera (800) 841-8343
- GHC (800) 297-6877

Tools and Resources

Quit Smoking

Free & Clear, Quit for Life Program

You said you would quit when you had children, got a new job, and finally got that promotion. But you still haven't. Well, there's hope—and help out there. The Free & Clear program is a fully covered benefit for up to 30 days of treatment, including free nicotine patches or gum, for all forms of tobacco, including cigarettes, smokeless tobacco, pipes and cigars. As well, the smoking cessation program is available to both you and your eligible dependents (under all The Sound Partnership medical plans). And it works! Studies show 25% to 30% of Free & Clear participants have a success rate over a 12-month period. Also, you may enroll in Free & Clear anytime, through the year.

Remember, it can take several tries to successfully give up tobacco. When you're prepared, just contact Free & Clear at (866) 784-8454 or visit www.freeclear.com for more information.

Note: Medical plan prescription drug benefits apply when purchasing any prescription smoking cessation aid.

Free & Clear Helps You:

- Identify smoking triggers.
- Prepare for your "quit process."
- Learn new behaviors and skills to help you stay tobacco-free.
- Manage withdrawal symptoms.
- Develop a support network.

Help Is Here

Employee Assistance Program

The Employee Assistance Program (EAP) is a **free** and confidential service available to both you and your family regardless of which The Sound Partnership medical plan you choose.

The EAP is an excellent resource for professional evaluations and recommendations for concerns you may have about things like physical, mental and emotional stress, alcohol and drug abuse, and other daily life challenges and issues. EAP services will provide up to three assessment visits per topic through Health Venture.

To contact Health Venture counselors, call:

- Pierce County (253) 572-5552
- Washington State (800) 447-8327

Another Great Resource

Sound Living Website

Visit www.tsp-soundliving.com

The *Sound Living* website has tons of information, tips and research about almost every health related topic—in an easy to find format online. Here you can register to participate in the **Sound Living—Achieving4Life** wellness program and can find out contact information for your medical plan vendors. You'll also find most open enrollment materials, including this newsletter.

Benefits Fair

Thursday, November 19, 2009, 3 p.m. to 6 p.m.
Professional Development Center (PDC)
6501 N. 23rd Street, Tacoma, WA 98406

The Sound Partnership Benefits Fair is an excellent opportunity to get information and resources about your healthcare options for 2010. Come for the free health screenings—flu shots, blood pressure, body composition, glucose and cholesterol, body-fat testing and be entered in a drawing for prizes.

During the fair, you can also meet with benefit representatives from the following services:

- Medical and prescription drug
- Dental
- Vision
- Life Insurance (Standard, AFLAC)
- Disability (Short- and Long-Term)
- Health Care and Dependent Care Spending Accounts from Flex Services, Inc.
- 529 College Savings Plan
- Employee Assistance Plan
- Legal Plan

Open Enrollment Meetings Schedule

Each November, The Sound Partnership offers a series of open enrollment meetings at locations throughout the District. These meetings give you an opportunity to learn more about the new WEA Select medical plans and your other The Sound Partnership benefits. Mike Peterson, Executive Director of

The Sound Partnership and representatives from Premera Blue Cross, will be available at the meetings to answer your benefit questions. Please plan to attend.

You and your spouse/domestic partner may attend any of the following open enrollment meetings:

Date	Location	Time
Wednesday, November 4	Mount Tahoma H.S., Staff Lounge	2:30–5:30 pm
Monday, November 9	C.A.B., 4th Floor Auditorium	11:00 am–1:00 pm
Tuesday, November 10	Foss High School, Staff Lounge	2:30–5:30 pm
Thursday, November 12	Stadium High School, Library	2:30–5:30 pm
Tuesday, November 17	Lincoln High School, Cafeteria	2:30–5:30 pm
Wednesday, November 18	Wilson High School, Staff Lounge	2:30–5:30 pm

Frequently Asked Questions

Q1. Why were all The Sound Partnership medical plans except the Group Health option eliminated?

The WEA medical plans are more cost-effective than the plans offered by Regence. In addition, the WEA plans were developed specifically for school districts and are a good fit for our needs. For most employees currently enrolled in a Regence plan, their doctor also participates in the Premera network. Group Health is an integrated group practice and Group Health physicians contract exclusively with the Group Health Plan. For employees enrolled in Group Health, if that plan was eliminated, almost all employees would have to find new doctors. Because of this high level of disruption, the Trustees elected to retain Group Health as an option.

Q2. Why did monthly contributions increase only for the Group Health option?

This plan has become more expensive. Monthly contributions for Group Health will increase in 2010 as a result of increased utilization—how much participants used medical services in 2009.

Q3. Why will the Group Health plan have a deductible and coinsurance next year?

Along with the other medical plan options, the Group Health option is fully-insured. This means that The Sound Partnership pays premiums only, while Group Health is ultimately responsible for paying the healthcare costs of all members who elect this option. The Group Health fully-insured option plan design we selected includes deductibles and coinsurance.

A deductible is the amount you must pay before your plan starts to pay benefits for certain services each year. In 2010, the annual deductible will be \$200 per person and \$600 per family.

Coinsurance is the percentage of covered services you pay as your share of the covered cost. In 2010, Group Health will pay 80% of covered charges and your coinsurance will be 20%.

Q4. If I enroll in a WEA medical plan, can I still see my same doctor in 2010?

Yes—the vast majority of doctors in the Regence network are in the Premera Blue Cross network too. And even if your doctor isn't in the Premera network, you can stay with that doctor, but you'll pay more because benefits will be at the lower out-of-network level.

You can also search for a provider on the Premera website at www.premera.com/wea. Just select *Find a Doctor* on the home page.

Q5. I'm planning surgery for early 2010, what do I need to do to get it preauthorized?

If you're currently in one of the Regence plans, and you're switching to a WEA medical plan, preauthorization is not required for coverage. You must be eligible on the dates of service and services must be medically necessary. Call the WEA Select Service Team at (800) 932-9221 to verify that you meet the required criteria for claims payment.

Q6. Are any changes being made to the dental or vision plans?

There will be no changes to dental or vision plans in 2010.

Q7. Will I need to complete a new enrollment form or will I move automatically to a new WEA medical plan?

Yes, you need to complete and return an enrollment form to The Sound Partnership office by **November 30, 2009**. If you are a current participant in the Regence Basic Plan, PPO 1, Selections 1 or FourFront medical plans and you do not make any enrollment elections, you will automatically be enrolled in the **WEA Select Health Plan 3**.

Q8. I have a claim for 2009 medical services, but I won't be filing it until 2010. Do I send the claim to Regence or Premera?

Claims are based on date of service, so if you incur a claim in 2009 and file it in 2010, you'll send the claim to Regence. Claims incurred in 2010 will go to Premera. Remember, when you use network providers, you don't need to file a claim; they will handle this for you.

Q9. Will I receive a new ID card?

Yes. Everyone will receive new medical ID cards. Group Health will mail new ID cards to members in late December. Premera will mail you a new ID card as soon as your enrollment form is processed. If you return your enrollment form promptly, you could receive an ID card as early as November, 2009.

Q10. If I'm in a Regence plan, what happens to my current Caremark prescriptions?

As of January 1, 2010, your Caremark **mail order** prescriptions will no longer be valid. You will need to get new prescriptions from your doctor and submit them to Medco to continue mail order service. You can use your new Premera ID card to fill prescriptions at your local retail pharmacy. Look for information about Medco mail order service in your enrollment materials.

Q11. Where can I learn more?

Contact The Sound Partnership at (253) 571-1240 or at www.tsp-soundliving.com, select *Feedback* at the top left of the home page, you can also contact the WEA Select Service Team at (800) 932-9221 (for hearing impaired TDD, call (800) 842-5357).

The Sound Partnership and Tacoma School District Benefit Programs

Working together for you

The Sound Partnership benefits	Tacoma School District benefits
<ul style="list-style-type: none">• Medical and prescription drug	<ul style="list-style-type: none">• Health Care and Dependent Care Spending Accounts
<ul style="list-style-type: none">• Dental	<ul style="list-style-type: none">• Short Term Disability and Accidental Death and Dismemberment insurance
<ul style="list-style-type: none">• Vision	<ul style="list-style-type: none">• Direct deposit of paychecks
<ul style="list-style-type: none">• Life insurance	<ul style="list-style-type: none">• Premium conversion plan
<ul style="list-style-type: none">• Long-Term Disability insurance	<ul style="list-style-type: none">• Cash Management Account
<ul style="list-style-type: none">• Long Term Care insurance	<ul style="list-style-type: none">• Cancer/Intensive Care/Accidental Injury/Hospital Confinement
<ul style="list-style-type: none">• Group legal plan	

The Sound Partnership Benefits Staff

We are here to help you and your family manage your benefits. Give us a call at (253) 571-1240 or contact us online at www.tsp-soundliving.com, select *Feedback* at the top left of the home page. The Benefits Staff:

- Provides benefits orientation and initial enrollment.
- Maintains records and financial accounts of various plan providers.
- Coordinates communications regarding plan benefits designs.
- Answers employee questions related to The Sound Partnership benefits.
- Acts as a member "advocate."

Soundings provides an overview of The Sound Partnership benefits program. It is not intended to be a summary plan description. If there is a conflict between Soundings and the official plan documents, provisions of official plan documents will govern how the plans work and how they pay benefits. The Sound Partnership may change or drop the benefits described here at any time. This is not an employment contract.