



# **BAUGHER FINANCIAL & ASSOCIATES, INC.**

*Employee Benefits Consulting & Financial Services*

## **MEMO**

**TO:** Employees of Massac Unit District #1

**FROM:** Kerry Baugher  
Employee Benefits Consultant

**DATE:** October 1, 2012

**RE:** Medical Insurance Reimbursement Program

This memo is to give you more information regarding the medical insurance reimbursement program that became effective October 1, 2012 to all eligible Full Time employees and their dependents covered under the District's group health medical plan. The medical plan with BCBS has a \$7,500.00 calendar year deductible in-network and a \$15,000.00 calendar year deductible out-of-network. You are responsible for the first \$750 of deductible per calendar year, and then Massac School District will reimburse you the next \$2,750.00. The District will then pay 75% of your remaining deductible and you will be responsible for 25% of the remaining deductible making your Maximum Out-of-Pocket In-Network of \$1,750.00.

**\$0-\$750.00 Employee Responsibility**

**\$751.00-\$3,500 District Responsibility**

**\$3,501.00- \$7,500.00 Employee Responsible for 25% (\$1,000.00) District Responsible for 75% (\$3,000.00)**

In order to receive reimbursement, you simply have to make a photocopy of the explanation of benefits (EOB) provided by BCBS that shows charges applied to your deductible. The photocopy should be placed in a sealed envelope and mailed or faxed to Baugher Financial. To protect your privacy the District personnel will NOT see your request for reimbursement. It is important that you keep your originals and submit copies only because they will not be returned to you.

This reimbursement program does not reimburse Dr. Office co pays or Prescription drug co pays. Reimbursements will be processed on a monthly basis. Remember you must submit a copy the insurance company explanation of benefits in order to receive a reimbursement.

**Please call Baugher Financial @ 800-645-2026 with any questions you may have.**

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