

# Open Enrollment

2017

Active Employee Group Insurance



**Open Enrollment**

Office of Human Resources, Montgomery County Government

# Open Enrollment

Open Enrollment is, generally, the only time of year employees can make changes (enroll, change or cancel) to certain benefits for the next plan year.

Active Employee Open Enrollment will be held  
September 19 – October 7, 2016

**Changes will take effect January 1, 2017**



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# Health Insurance Plans



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# Health Insurance Plans

- Mobile Apps
- Fitness Discounts
- Online Laboratory Results
- 24 Hour Nurse Lines
- Website Portals
- Online Refills
- Appointment Scheduling
- Comprehensive Coverage
- **Virtual Doctor Visits**



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# Your Medical Options

## ***Health Maintenance Organizations (HMO):***

Option 1: Kaiser Permanente Signature (HMO)

Option 2: United Healthcare Select (HMO)(IPA)

## ***Point of Service Plans (POS):***

Option 3: CareFirst BCBS (POS) High Option

Option 4: CareFirst BCBS (POS) Standard Option

***Three tiers of coverage: Self, Self + 1, or Family***



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# Kaiser Permanente (HMO)

- “One-stop” health services
- 38 Kaiser facilities in DC/MD/VA
- Kaiser facility selected for you based on home address
- No claim forms or deductibles
- \$5 copay for office visits
- Rx: \$5 Kaiser Pharmacy/\$15 participating
  - Mail order program available for maintenance drugs
- Hospital care covered in full
- \$50 copay for ER (unless admitted)
- Discounted dental and vision benefits with Kaiser-affiliated providers (directories available)
- Chiropractic care/\$5 per visit; limited to 20 visits per year



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# UnitedHealthcare Select HMO (UHC)

- National program, not restricted to MD/DC/VA area
- No deductible
- No charge for hospital
- Primary Care Physician (PCP) will be selected for you based on your home address
- Open access – may see specialist without a PCP referral; however, some services require a PCP referral (check with PCP or UHC)
- Copays: \$5 office visit; \$10 specialist
- \$25 copay for ER (unless admitted), \$15 for Urgent Care Facility
- \$5 for Behavioral health outpatient services
- Discounted vision benefits available with affiliated providers
- **Does not include Rx coverage (except for diabetic supplies)**



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# What's New?

CareFirst BlueChoice Advantage Network



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# CareFirst BlueChoice Advantage Network

- Beginning January 1, 2017, the CareFirst BlueCross BlueShield (BCBS) Point-of-Service (POS) High Option and Standard Option Plans will utilize a new network — BlueChoice Advantage — that provides national network coverage.
  - The plan benefits will remain the same.
  - Participants in the out-of-area plans will be automatically enrolled in the applicable in-area plan (High Option or Standard Option), and the out-of-area plans will be discontinued.
  - All CareFirst BCBS POS participants will receive new cards in January 2017. These cards will not list a primary care physician.



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# CareFirst BlueChoice Advantage Network

- Participants seeking care outside of the CareFirst service area (Maryland, Northern Virginia and Washington, D.C.) will receive in-network benefits by using a national BlueCard provider. Participants will still have the option to opt-out of this network but will pay a higher out-of-pocket expense. If you receive services from a provider outside of the BlueCard network, you will have to:
  - Pay the provider’s actual charge at the time you receive services.
  - File a claim for reimbursement.
  - Satisfy a deductible and coinsurance.



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# CareFirst BCBS POS High Option In-Network

- Open access – may see a specialist without a PCP referral.
- \$10 office visit copay; \$25 copay for ER (unless admitted)
- No deductible or charge for hospital
- No dental or vision discount available
- Does not include Rx coverage (except for diabetic supplies)



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# CareFirst BCBS POS High Option Out-of-Network

- See any doctor; PCP not required
- Must meet annual deductible before benefits apply:
  - \$300 individual deductible, or
  - \$600 family deductible
- After annual deductible is met, member pays 20% of allowed amount for services
- Member also pays any charges above allowed amount (balance billing)
- **Does not include Rx coverage (except for diabetic supplies)**
- Does not include discounted vision or dental



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# CareFirst BCBS POS Standard Option In-Network

- Open access – may see a specialist without a PCP referral
- Office visit copays – \$15 PCP; \$30 specialist
- \$150/admission charge for hospital
- \$35 copay for ER (unless admitted)
- No dental or vision discount available
- Does not include Rx coverage (except for diabetic supplies)



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# CareFirst BCBS POS Standard Option Out-of-Network

- See any doctor; no PCP required
- Annual deductible must be met before benefits apply:
  - \$300 individual deductible, or
  - \$600 family deductible
- After meeting annual deductible, member pays 20% of allowed amount for services
- Member also pays any charges above allowed amount (balance billing)
- **Does not include Rx coverage (except for diabetic supplies)**
- Does not include discounted vision or dental



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# Prescription Drug Cost Comparison

	<b>High Option \$4/8</b> MCGEO/IAFF	<b>High Option \$5/10</b> FOP/NON-REP	<b>Standard Option</b>
<b>Copay</b>	\$4 Generics \$8 Brand Name	\$5 Generics \$10 Brand Name	\$10 Generics \$20 P/Brand Name \$35 NP/Brand Name
<b>Deductible</b>	n/a	n/a	\$50/year
<b>Mail Order</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>
<b>Maintenance Choice</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>
<b>Drugs</b>	<b>Same</b>	<b>Same</b>	<b>Same</b>



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# Prescription Drug Cost Comparison

Cost	High Option \$4/8 MCGEO/IAFF	High Option \$5/10 FOP/NON-REP	Standard Option
Self Only	Bi-Weekly: \$105.98 Monthly: \$211.96 <b>Yearly: \$2,755.48</b>	Bi-Weekly: \$103.83 Monthly: \$207.66 <b>Yearly: \$2,699.58</b>	Bi-Weekly: \$20.10 Monthly: \$40.20 <b>Yearly: \$522.60</b>
Self + 1	Bi-Weekly: \$196.06 Monthly: \$392.12 <b>Yearly: \$5,097.56</b>	Bi-Weekly: \$192.10 Monthly: \$384.20 <b>Yearly: \$4,994.60</b>	Bi-Weekly: \$37.18 Monthly: \$74.36 <b>Yearly: \$966.68</b>
Self + Family	Bi-Weekly: \$303.82 Monthly: \$595.36 <b>Yearly: \$7,899.32</b>	Bi-Weekly: \$297.68 Monthly: \$595.36 <b>Yearly: \$7,739.68</b>	Bi-Weekly: \$57.61 Monthly: \$115.22 <b>Yearly: \$1,497.86</b>



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# UCCI Dental PPO (Traditional)

- In- and out-of-network coverage available
- Use any provider (but may be balance-billed out-of-network)
- Coinsurance fees based on UCCI's Maximum Allowable Charges
- Annual maximum per enrolled family member = \$2,000 (excludes Orthodontia maximum)
- Annual deductible = \$50 Individual / \$150 Family
- Claim forms required for out-of-network dentists
- Specialist referrals not required
- Covered services:
  - Diagnostic & Preventive -100% of Reasonable & Customary (R&C); no deductible
  - Basic Restorative - 80% of R&C
  - Major Restorative - 60% of R&C
  - Orthodontia - 60% of R&C to \$1,000 per person lifetime maximum
- May coordinate with discounted dental benefits through Kaiser

## **Important:**

If you cancel or do not elect dental coverage, you will have a **two-year waiting period** from the start of the next plan year.



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# UCCI Dental HMO (DHMO)

- Must use Primary Dental Office (PDO)
- UCCI will assign you a PDO; you can change it at any time by calling UCCI
- ***Only in-network services are available***; no out-of-network benefits except in event of emergency (more than 50 miles from your PDO)
- Fixed copayment schedule
- No deductibles or claim forms
- Only listed procedures are covered
- Specialist referrals are required

## **Important:**

If you cancel or do not elect dental coverage, you will have a **two-year waiting period** from the start of the next plan year.



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# Vision Insurance

- Administered by National Vision Administrators (NVA)
- Benefits payable for exams, lenses and contacts (elective or necessary) every calendar year, frames every two calendar years
- In-network or out-of-network benefits available
- Claim forms available online
- May coordinate with discounted vision benefits through Kaiser or United Healthcare

## **Important:**

If you cancel or do not elect vision coverage, you will have a **two-year waiting period** from the start of the next plan year.



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# Eligible Dependents

For Medical, Prescription, Dental and Vision coverage

## Spouse

- Legally married? **Yes**
- Divorced? **No**

## Children

Biological, legally adopted, stepchildren, or under your legal custody and who are either:

- Under age 26? **Yes**
- Age 26 and over? **No**, unless incapable of self support

## Relatives

- Sisters, brothers, parents or parents-in-law? **No**
- Grandparents, grandchildren, aunts, uncles, cousins, nieces or nephews? **No**



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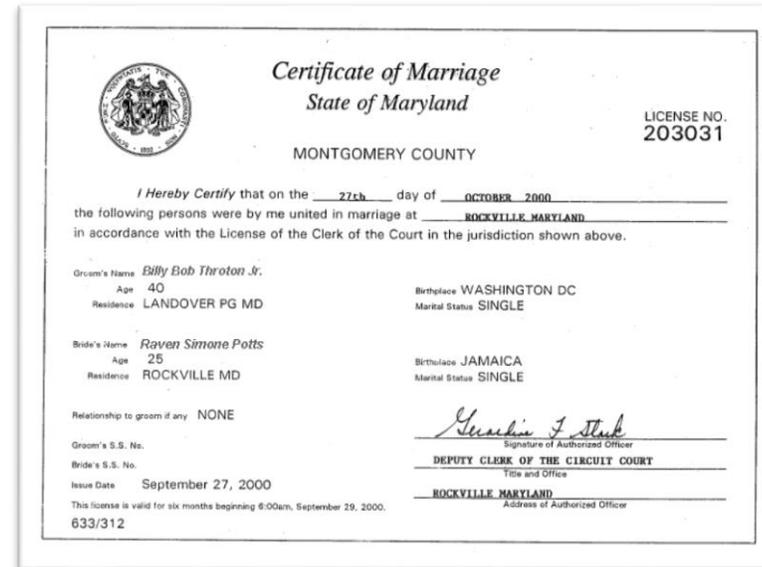
# Proof of Eligible Dependents

## What is considered proof of eligibility?

For Spouse: Official State Marriage Certificate (certified by appropriate State or County Official)



Not acceptable



Acceptable



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# Proof of Eligible Dependents

- **For a Biological Child:** State Birth Certificate\* (For newborns, OHR will accept hospital discharge papers for first 60 days; birth certificate must then be submitted)
- **For an Adopted Child:** Copy of Adoption or Placement for Adoption Papers
- **For a Step Child:** State Birth Certificate\*, Marriage Certificate and Divorce Decree or Custody Papers
- **For a Disabled Child:** Medical plan verification of disability prior to age 26
- **For Legal Custody:** Copy of Court Order granting legal custody

*\* Must show plan member or spouse as parent.*



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# Optional Life Insurance / AD&D

- You may elect Optional Life / AD&D coverage of 1 to 8 times your basic annual earnings (\$1 million maximum)
- Coverage is not guaranteed issue for any level (1 through 8). You must complete an Evidence of Insurability Form no matter what level of coverage you elect (1, 2, 3, 4, 5, 6, 7 or 8)



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# Optional Dependent Life Insurance

## Life insurance for:

- Your opposite or same sex spouse
- Your unmarried children under age 26
  - Natural / adopted
  - Stepchildren/foster children who depend on you for support

## You may elect:

- \$2,000 Spouse/\$1,000 Child
- \$4,000 Spouse /\$2,000 Child
- \$10,000 Spouse /\$5,000 Child



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# Flexible Spending Account (FSA)

- 2 types: Dependent Care and Health Care
- *Benefit Strategies* is the administrator
- These before-tax accounts lower reportable salary and wages by a pre-determined amount
- FSAs are calendar year plans for claims incurred from January 1 through March 15 of the following year
- FSAs are *use-it or lose-it*; **claims must be submitted by April 30 of the following year**
- FSA debit card enables you to pay for certain expenses onsite
- Weekly processing of reimbursements; direct deposit available
- Must **re-enroll every Open Enrollment** if you want to participate



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# Flexible Spending Account

- Why enroll in an FSA?
  - You give yourself a raise by reducing your taxes!
  - You contribute money to your FSA account before taxes are taken from your paycheck
  - Then, you use your FSA account to pay for eligible "out-of-pocket" health care and day care expenses



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# FSA: How it works

1. You elect the annual amount you want to place in your FSA(s) for the upcoming plan year during Open Enrollment
2. That amount is divided by 26 and taken from your biweekly paychecks on a before-tax basis
3. You access your FSA funds throughout the year to pay for eligible expenses



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# FSA Tax Savings

	Without FSA	With FSA
Annual Earnings	\$36,000	\$36,000
Annual FSA Election	\$0	-\$1,500
Taxable Income	\$36,000	\$34,500
Approximate Taxes Paid*	-\$9,954	-\$9,539
Annual Tax Savings	<b>\$0</b>	<b>\$415</b>

\* Approximate taxes paid based on 27.65% rate.



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# Health Care FSA

- Annual maximum \$2,550 for 2016
- Examples of reimbursable expenses:
  - Copays (medical, Rx, dental, vision and hearing), deductibles and coinsurance; amounts over reasonable & customary charge
  - Eyeglasses, contact lenses / supplies
  - Braille books or guide dogs for people who are blind
  - Hearing aids
  - Acupuncture
  - Orthopedic shoes
  - Over-the-counter (OTC) drugs with a doctor's prescription
  - Insulin without a doctor's prescription
- Funds available in full on the first day of the plan year



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# Dependent Care FSA

- \$5,000 annual maximum (\$2,500 for married filing separately)
- Funds available as you accumulate through payroll deductions
- Reimbursable expenses:
  - day care centers
  - elder care
  - before/after school care
  - babysitter fees that allow you and your spouse to work or go to school (no child support payments)
- Must coordinate between filing a tax credit with IRS and your Dependent Care FSA plan



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# Dependent Care FSA (cont.)

Eligible dependents include:

- Your qualifying child under age 13 whom you may claim as a dependent for Federal income tax purposes
- Your spouse who is physically or mentally incapable of self care and resides with you for more than half the year
- A person who is physically or mentally incapable of self care, resides with you for more than half the year, and either:
  - Was your dependent, or
  - Would have been your dependent except that:
    - He or she received gross income of \$3,650 or more,
    - He or she filed a joint return, or
    - You, or your spouse if filing jointly, could be claimed as a dependent on someone else's previous year's return.



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# How to File FSA Claims

- Download and use the mobile app
- Use the FSA debit card
- Scan and submit your receipts online
- Complete a paper claim form and submit via fax, secure email or mail

*Typical turnaround time: 3 to 5 days*



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# How to Make Changes

1. Go to [montgomerycountymd.gov/OE](http://montgomerycountymd.gov/OE) and select your Open Enrollment Home Page.
2. Review your Open Enrollment Guide and 2017 rates. Also take advantage of the online decision-making tools, such as the variety of calculators and plan materials.
3. If you want to make changes or enroll/re-enroll in an FSA for 2017, click the link to Self-Service Benefits. You may find it helpful to have on hand the step-by-step Self-Service Benefits Online Instructions (available on your Open Enrollment Home Page) to help you make your changes.
4. Print your 2017 online confirmation statement and keep it for your records.
5. Send any additional required paperwork so that it is received by the deadline: October 7, 2016 at 5:00 pm ET.



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# No Changes?

If you review your Open Enrollment materials and decide not to make any changes for 2017, you do not need to do anything—unless you want to re-enroll in an FSA for 2017.

**Remember:** FSA plan participation does not carry over from year to year. You must re-enroll during Open Enrollment to continue FSA participation for 2017.



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# ID Cards

- Typically, ID cards are not sent each year.
  - All BCBS members will receive new ID cards
- Participants who change plans or enroll for the first time during Open Enrollment should expect to receive new member ID cards by late January 2017
- Replacement ID cards can be requested via your carrier by:
  - PHONE
  - ONLINE PORTAL WEBSITE



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# OHR Customer Service Center

If your provider cannot answer your health insurance question, please contact OHR MC311.



**Monday to Friday, 8 a.m. to 5 p.m.**

Speak with a Customer Service Representative at MC311.

Call 240-773-OHR1 (240-773-6471); 1-877-613-5212 toll-free; TTY: 711

Any questions MC311 cannot answer are immediately routed via a service request to the OHR Health Insurance Customer Care Center, open Monday through Friday, 8 a.m. to 5 p.m.



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# Employee Wellness Program

Live Well is the Montgomery County Government, joint labor-management employee wellness program.

We're here to help you "Live Well" through:

- Small steps and balance
- Every day choices and lifestyle
- Wellness in body and mind



[montgomerycountymd.gov/livewell](http://montgomerycountymd.gov/livewell)



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# Employee Wellness Program (cont.)

Programs for insurance-eligible Montgomery County Government employees:

- **Virgin Pulse** – Earn up to \$350 per year!
- **Movement Classes** –15 classes at 3 locations every week: Zumba, Yoga, Ab Attack and more
- **Special Programs & Events** – Wellness Wednesdays, Yoga Challenge, 101 Days of Summer
- **Discounts** – Montgomery County Recreation classes and fitness/pool passes, and Capital BikeShare memberships
- **Wellness Webinars** – Monthly topics



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# Employee Wellness Program (cont.)

## Virgin Pulse

- An opportunity to earn points for healthy behaviors and **up to \$350 a year!**
- Fun challenges
- Wearable fitness device, the “Max”
- Health stations to check your blood pressure, weight and BMI
- Connect to FitBit, MyFitnessPal and Zipongo nutrition tools
- Invite up to 3 family members to join
- New employees are eligible to join approximately 3 weeks after your start date



Visit [join.virginpulse.com/livewell](https://join.virginpulse.com/livewell) to sign up!

*\*Family members are ineligible for the free fitness trackers and financial rewards*



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# Employee Assistance Program (EAP)

Employee Assistance Program (EAP) by ComPsych Guidance Resources®

## ***Confidential Counseling***

Up to 6 free face-to-face or telephonic sessions with an EAP clinician per separate issue, per year. Addresses concerns such as marital, relationship and family problems; stress, anxiety and depression; grief and loss; and, job pressures and substance abuse.

## ***Work-Life Solutions***

Need child care, elder care, or pet care? Looking for reputable home repair services, buying a car, planning an event, or selling a house? ComPsych Guidance Resources will provide qualified referrals for these needs and more.



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# Employee Assistance Program (cont.)

Employee Assistance Program (EAP) by ComPsych Guidance Resources®

## *Legal Support*

You now have an attorney on call! Speak with an on-staff licensed attorney about legal concerns such as divorce, custody, adoption, real estate, debt and bankruptcy, landlord/tenant issues, civil and criminal actions, and will preparation. If you require representation, you will be referred to an attorney for a free 30-minute consultation and a 25% discount on customary legal fees.

## *Financial Information*

On-staff CPAs and Certified Financial Planners will provide answers to your questions about budgeting, debt management, tax issues and other money concerns.



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# Employee Assistance Program (cont.)

## Employee Assistance Program (EAP) by ComPsych Guidance Resources®

Counseling professionals are available 24-hours-a-day, 365-days-a-year to assist you and your household members.

**1-855-350-1750**

**guidanceresources.com**

*Click first-time user*

**Important:** When registering, enter **MCG** in the Organization Web ID field.



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COMPSYCH®  
GuidanceResources® Worldwide

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I have already registered: [Help](#)

Please select your country/language:  
USA (English) »

User Name

Password

Remember Me?

Login

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[I forgot my username](#)

[I forgot my password](#)

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GuidanceResources Online is a comprehensive, interactive service that provides expert content and unique tools to assist you in every aspect of your life. All in a secure, easy-to-use, personalized environment.



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# Voluntary Benefits: Long-term Care

- Administered by ACSIA Partners; underwritten by LifeSecure
- Provides financial coverage for long-term care services in the event of disability or chronic care needs
- \$100,000 to \$1,000,000 total coverage amounts available

*\*Participants are billed directly for Long-Term Care Insurance*



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# Voluntary Benefits: Aflac

## ***Short-Term Disability***

- Provides short-term cash benefits in the event of disability
- Monthly benefit amounts available from \$500 - \$6,000 (subject to income requirements)
- Benefit options of 3, 6, 12, 18 or 24 months with a variety of elimination periods

## ***Critical Illness Insurance***

- Provides a lump sum cash benefit in the event of critical illness
- Benefit amounts available in \$5,000 increments from \$10,000 - \$30,000

*\*Participants pay 100% through payroll deduction for Short-Term Disability and Critical Illness Insurance*



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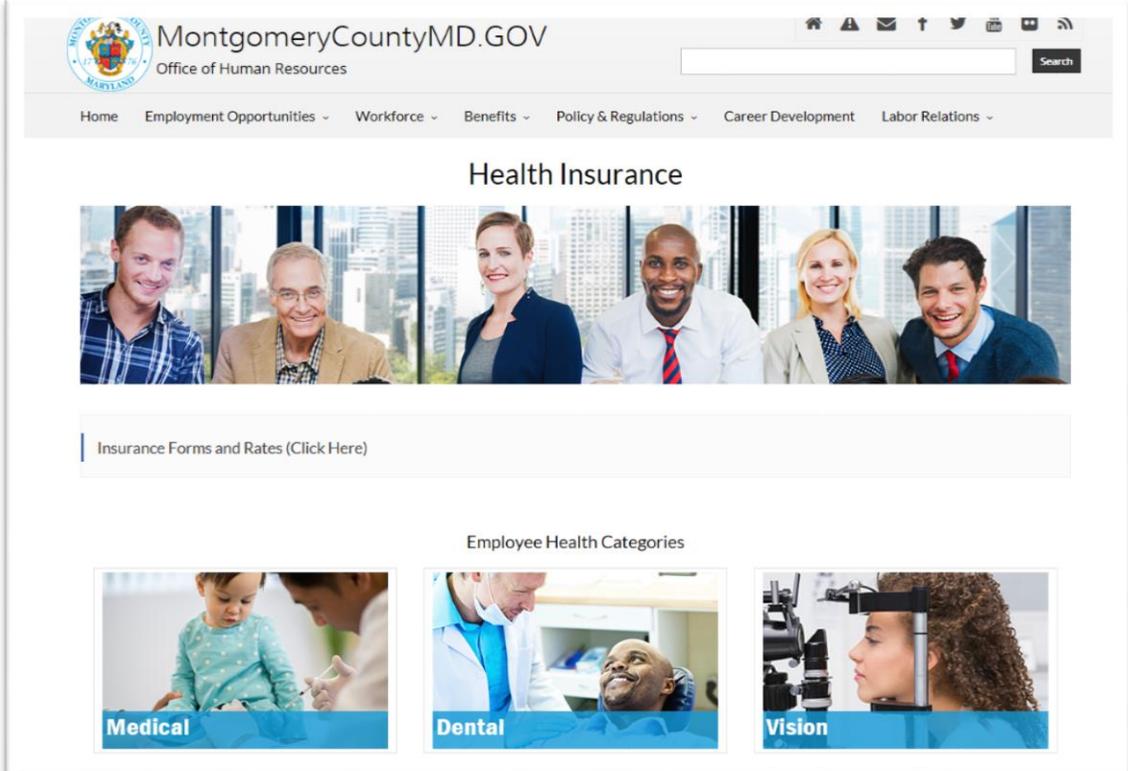
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# Online Resources

Visit the Employee Health Insurance page.

[montgomerycountymd.gov/hr](https://montgomerycountymd.gov/hr)

Click: *Benefits* > *Health Insurance*



The screenshot displays the Montgomery County MD Government website. At the top, the logo for Montgomery County, Maryland, is visible next to the text "MontgomeryCountyMD.GOV" and "Office of Human Resources". A search bar is located on the right side of the header. Below the header, a navigation menu includes links for Home, Employment Opportunities, Workforce, Benefits, Policy & Regulations, Career Development, and Labor Relations. The main content area is titled "Health Insurance" and features a large banner image of a diverse group of people. Below the banner, there is a link for "Insurance Forms and Rates (Click Here)". Underneath, the "Employee Health Categories" section includes three sub-sections: "Medical" (with an image of a doctor examining a child), "Dental" (with an image of a dentist examining a patient), and "Vision" (with an image of a person at an eye exam).



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# Legal Information

The County expects to continue its group insurance plans, but it is the County's position that there is no implied contract between employees and the County to do so, and the County reserves the right at any time and for any reason to amend the terms of the plans or terminate the plans, subject to the County's collective bargaining agreements. The County may also amend the plans at any time, either prospectively or retroactively, as required by federal law. In the event of a conflict between this presentation, the County Code and/or the Summary Description, the County Code and then the Summary Description will govern.



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# Thank You

We hope you have enjoyed learning about your health insurance package.  
Thank you for allowing us to serve your health insurance needs.

*~Your OHR Health Insurance Team*



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