

# 2015 Benefits Open Enrollment October 20 – November 7 Retirees

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# Agenda



What's New



Actions for Open Enrollment



Benefit Program Summaries



Health Care Reform Update



Questions

# What's New

TelaDoc

Rx  
Changes

Medical  
Changes

Dental  
Changes

Vision  
Changes

# Actions for Open Enrollment?



Review your coverage needs



Review your current elections



Make changes as needed

*– Submit forms to Benefits & Wellness no later than 11/7/2014*

# New: Chronic Care Management Program

Waived Generic Medications (only at City Employee Pharmacy) if engaged or graduate from Ameriben Disease Management Program for the following chronic conditions:

Asthma

Coronary  
Artery Disease

COPD  
Chronic Obstructive  
Pulmonary Disease

Diabetes

GERD  
Gastroesophageal  
Reflux Disease

Hypertension

***NOTE: Diabetes Ten City Challenge program – No changes to waived medications & supplies for participation***

# Prescription Changes

<b>City Employee Pharmacy</b>	<b>2015</b>	
<b>Generic co-pay</b>	\$6	30 Day
	\$15	90 Day
<b>Preferred Brand co-pay</b>	\$35	30 Day
	\$70	90 Day
<b>Non-Preferred Brand co-pay</b>	\$60	30 Day
	\$120	90 Day
<b>Maxor Retail Pharmacy</b>	<b>2015</b>	
<b>Generic co-pay</b>	\$25	30 Day
<b>Preferred Brand co-pay</b>	\$55	30 Day

# Teladoc: 1-800-teladoc

## www.teladoc.com



Available on both Advantage & Premier Plans  
24/7/365



\$40 co-pay  
-Set up account prior to service



Telephone or video consultation  
-Can fax prescription to pharmacy of choice



Type of illnesses:  
Colds, flu, allergies, respiratory infections & more

# Medical Plan Changes

## Plan Design Changes:

Premier Plan		
In Network	Individual	Family
Deductible	\$500	\$1250
Out of Pocket Maximum	\$2,500*	\$7,500*

Advantage Plan		
In Network	Individual	Family
Deductible	No Change	No Change
Out of Pocket Maximum	\$3,500*	\$8,000*

*\*Includes prescription & City Employee Medical Clinic co-pays*

# Reminder: Tools



## Quality & Cost Comparison Tools



[www.anthem.com](http://www.anthem.com)

[www.myameriben.com](http://www.myameriben.com)

[www.fairhealthconsumer.com](http://www.fairhealthconsumer.com)

[www.healthgrades.com](http://www.healthgrades.com)

[www.healthcarebluebook.com](http://www.healthcarebluebook.com)

[www.leapfroggroup.org](http://www.leapfroggroup.org)

# Medical Plan Choice Options

## What is the same?

Preventive  
Care 100%

Access to  
City EE  
Medical  
Clinic &  
TelaDoc

Same  
Network &  
Services  
Same Rx

The differences are premiums and how you pay for the service

# City Employee Medical Clinic

Mon-Fri  
7:30am - 4:30pm

Phone: 385-5841  
Validate Parking

\$15 co-pay Office Visit  
\$0 co-pay Wellness  
\$15 co-pay - Lab

*Additional Nurse  
Practitioners -  
More appt times  
available*



*On-site  
phlebotomist*

# City Employee Pharmacy



Mon-Fri  
8:30am - 5:30pm

Phone: 385-2261

Validate Parking

Interoffice delivery  
available

# Total Health Management Programs

Ameriben Disease  
Management  
Program

Sleep Care  
Management  
Program

Depression Care  
Management  
Program

Diabetes Ten  
City Challenge

# 2015 Medical Plan Monthly Rates

<b>Level of Coverage - Not Medicare Eligible</b>	<b>Premier</b>	<b>Advantage</b>
<b>Early Retiree (not Medicare Eligible)</b>	\$839.74	\$682.39
<b>Early Retiree &amp; Spouse (not Medicare Eligible)</b>	\$1,668.58	\$1,383.48
<b>Early Retiree &amp; Family (not Medicare Eligible)</b>	\$2,093.91	\$1,715.32
<b>Early Retiree &amp; Children (not Medicare Eligible)</b>	\$1,254.16	\$1,032.93
<b>Retiree or Spouse 65+ but not Medicare Eligible</b>	\$839.74	\$682.39
<b>Retiree &amp; Spouse 65+ but not Medicare Eligible</b>	\$1,668.58	\$1,364.78

***- Please See Rate Handout For Additional Rate Structures***

# 2015 Dental Plan – Several Changes

Coverage	PPO Plus Premier (Hi)		PPO (Standard)	
	PPO	Premier/ Non-Par	PPO	Premier/ Non-Par
<b>Network</b>				
<b>Deductible</b>	\$50/\$150		\$50/\$150	
<b>Annual Max</b>	\$2,000	\$1,500	\$1,500	
<b>D &amp; P</b>	100%	80%	100%	80%
<b>Basic</b>	90%	50%	80%	50%
<b>Major</b>	60%	50%	50%	50%
<b>Ortho</b>	60%	50%	not covered	
<b>Ortho Lifetime Max</b>	\$2,000		not covered	
<b>Implant Coverage</b>	All steps included		not covered	
<b>Prevention First</b>	Included		Included	
<b>Pre-Molar Sealants</b>	Included		Included	

# 2015 Dental Plan Monthly Rates – no changes

<b>2015 Monthly Retiree Dental Plan Rates</b>	
<b>Delta Hi-Option Premier</b>	
Retiree Only	\$42
Retiree + Spouse	\$95
Retiree + Children	\$76
Retiree + Family	\$118
<b>Delta Standard Option PPO</b>	
Retiree Only	\$30
Retiree + Spouse	\$69
Retiree + Children	\$55
Retiree + Family	\$86

# Vision Plan



NEW: Exam co-pay \$20



Contacts or Frames Allowance - up to \$175  
Available 1x/year



[www.vsp.com](http://www.vsp.com)

Providers & Discounts

# 2015 Vision Plan Rates – no changes

<b>2015 Monthly Retiree Vision Plan Monthly Rates</b>	
<b>VSP - Choice Plan</b>	
Retiree Only	\$7.58
Retiree + Spouse	\$15.16
Retiree + Children	\$16.23
Retiree + Family	\$25.93

# Health Care Reform Update



Additional Rx covered as preventive care

All Rx & Medical included in Out Of Pocket Maximum

New Reporting Requirements – issued in 2016 for 2015 coverage

# Insurance Cards

New Medical  
Cards

New Rx  
Cards

***Contact Ameriben or Maxor if you do not receive  
your new cards by the end of December***

No Dental or  
Vision Cards

# Questions?

Contact your Benefits & Wellness Team  
at

Benefits line: 385-5125

Benefits email:  
[citybenefitshelp@springsgov.com](mailto:citybenefitshelp@springsgov.com)

Benefits & Wellness website on  
[www.springsgov.com](http://www.springsgov.com)