



# 2024 Benefits Enrollment <a href="Pre-65">Pre-65</a> Retirees (Non-Medicare)

October 9 – October 20, 2023

## Agenda



- Open Enrollment Overview
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- What Do I Need to Enroll?
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  - Additional Support Benefits
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  - Value-Added Benefits
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  - What Do I Need to Do for 2024 Enrollment?
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## Open Enrollment Overview

## Open Enrollment Overview



## Open Enrollment for Retirees is October 9<sup>th</sup> – 20<sup>th</sup>, 2023.

#### **Active Enrollment**

This year, Open Enrollment is **active**. You **MUST** complete the enrollment process by October 20th to ensure you have the opportunity to review and make any decisions regarding coverage. **If no action is taken, you will not have the opportunity to make any changes to your benefits coverage for the 2024 plan year.** 

- If you want to change your current elections, add or drop dependents, or contribute to a Health Savings Account, you MUST complete the enrollment process by October 20.
- Benefit elections will take effect January 1, 2024.

## Open Enrollment Overview



This is the only time during the year you can make changes to your coverage unless you experience a qualifying life event.

- Example: Marriage, divorce, etc.
- Any changes to your benefit elections must be made within 31 days of the qualifying event.

# How Do I Enroll or Make Changes?



#### By phone with a Benefit Specialist

Call (855) 855-2871 Monday-Friday, 8:15 a.m. – 5:15 p.m.

Benefit Specialists will be available starting October 9<sup>th</sup>.

# What Do I Need to Enroll or Make Changes?



### Supporting documentation required

If you add an eligible dependent who is not currently enrolled, you must provide supporting documentation (marriage license, birth certificate, etc.)

- Upload it from your computer during the online enrollment process (follow the on-screen instructions)
- Send it from your Smartphone with the My Selerix app
- Email it to yourenrollment@ebcoh.com
- Fax it to (513) 371-5559

#### Questions about or assistance with enrollment?

Call (855) 855-2871 Monday-Friday, 8:15 a.m. – 5:15 p.m.

Benefit Specialists will be available starting October 9<sup>th</sup>.



## Medical & Pharmacy Coverage

Blue Cross Blue Shield of Texas (BCBSTX)

## Medical Coverage



Due to IRS guideline updates for 2024, the Blue Choice HSA plan in-network deductibles will be adjusted to be compliant.

Medical costs continue to rise across the country, and the City of Dallas' plans are no exception.

This benefit plan year, the City of Dallas has decided to share a small portion of the plan cost increase to employees. The City is still absorbing the majority of the plan cost increase.

Remember, many of the City's health benefits are self-insured, which means claims are paid with premiums from you and the City. Making smart choices about our medical care and personal health now can help reduce everyone's health care costs in the future.

We are all in this together!

## Blue Essentials PCP Plan



Network	Blue Essentials (In-Network Only)
Annual Deductible	
Individual	\$1,500
Family	\$3,000
Annual Out-of-Pocket Max	
Individual	\$6,350
Family	\$12,700
Preventive Care	\$0
Primary Care Physician	\$25 copay
Specialist	\$50 copay
X-Ray and Lab Work*	\$25 copay / \$50 copay
Urgent Care	\$40 copay
F	\$300 copay plus 20% after
Emergency Room	deductible
Inpatient Hospital Care	20% after deductible
Outpatient Surgery	20% after deductible

<sup>\*</sup>For these services to be covered under your office visit copay, the lab or X-ray must be performed in and billed by your physician's office.

### **PCP Plan Highlights**

- Copays for multiple services.
- PCP must be selected to access benefits.

## Blue Choice Copay Plan



Network	Blue Choice (In-Network Only)
Annual Deductible	
Individual	\$1,500
Family	\$3,000
Annual Out-of-Pocket Max	
Individual	\$6,350
Family	\$12,700
Preventive Care	\$0
Primary Care Physician	\$25 copay
Specialist	\$50 copay
X-Ray and Lab Work*	\$25 copay / \$50 copay
Urgent Care	\$40 copay
F B	\$300 copay plus 20% after
Emergency Room	deductible
Inpatient Hospital Care	20% after deductible
Outpatient Surgery	20% after deductible

<sup>\*</sup>For these services to be covered under your office visit copay, the lab or X-ray must be performed in and billed by your physician's office.

### **Copay Plan Highlights**

- Copays for multiple services.
- Enhanced network option.
- No out-of-network benefits available.

## Blue Choice HSA Plan



Network	Blue Choice (In-Network Only)
Annual Deductible	
Individual	\$3,200
Family	\$6,400
Annual Out-of-Pocket Max	
Individual	\$6,350
Family	\$12,700
Preventive Care	\$0
Primary Care Physician	20% after deductible
Specialist	20% after deductible
X-Ray and Lab Work	20% after deductible
Urgent Care	20% after deductible
Emergency Room	20% after deductible
Inpatient Hospital Care	20% after deductible
Outpatient Surgery	20% after deductible

### **HSA Plan Highlights**

- You can open a Health Savings Account (HSA).
- Contribution from the City of Dallas:
  - Up to \$700 for individual coverage
  - Up to \$1,700 for family coverage
- You pay all costs for care until your deductible is met.

## **Network Options**



# Blue Choice Copay and HSA plans include the enhanced benefit tier option

- Regular BCBS in-network facility: Plan pays 80% of your facility charges (after deductible).
- Enhanced benefit facility: Plan pays 90% of your facility charges at Baylor or Methodist Health Systems (after deductible).

Network	Blue Choice	Blue Essentials
Network Description	Blue Choice provides a broad network of providers and covers 80% of your eligible expenses after you have met the deductible. Out-of-network services are not covered.	Blue Essentials is a targeted, narrow network, with an emphasis on the most high-quality and costeffective physicians. Outof-network services are not covered.
Medical Plan	Copay & HSA Plan	PCP Plan

## Is your Doctor in the BCBS Network?

- 1. Go to <u>www.bcbstx.com</u> and click on the blue Find a Doctor box.
- 2. Click on the Search as Guest box.
- 3. Click on Search In-Network Providers and answer the on-screen questions.

## Medical Coverage – Pre-65 Retiree Contributions



				Doo	lav	
	Retiree Monthly Rate		Retiree Hired After 1/1/2010 Monthly F		Monthly Rate	
	PCP Plan	Copay Plan	HSA Plan	PCP Plan	Copay Plan	HSA Plan
Retiree Only	\$712.01	\$689.09	\$666.37	\$1,424.02	\$1,378.19	\$1,332.75
Retiree + Spouse	\$2,136.03	\$2,067.28	\$1,999.12	\$2,848.04	\$2,756.37	\$2,665.49
Retiree + Child(ren)	\$1,424.02	\$1,378.19	\$1,332.75	\$2,136.03	\$2,067.28	\$1,999.12
Retiree + Family	\$2,848.04	\$2,756.37	\$2,665.49	\$3,560.05	\$3,445.47	\$3,331.86
Spouse Only	\$996.82	\$964.73	\$932.92	\$1,424.02	\$1,378.19	\$1,332.75
Spouse +Child(ren)	\$1,708.83	\$1,653.82	\$1,599.29	\$2,136.03	\$2,067.28	\$1,999.12
Child Only	\$712.01	\$689.09	\$666.37	\$712.01	\$689.09	\$666.37

Pending Council approval

## Pharmacy Coverage



#### There are no changes to the pharmacy plan design.

30 Day Retail	Blue Essentials PCP Plan	Blue Choice Copay Plan	Blue Choice HSA Plan
<b>Generic Medications</b>	\$15 copay	\$15 copay	You pay 20% after medical deductible is met
Preferred Brand-Name Medications	\$40 copay	\$40 copay	You pay 20% after medical deductible is met
Non-Preferred Brand-Name Medications (Includes Specialty Drug Formulary)	\$75 copay	\$75 copay	You pay 20% after medical deductible is met

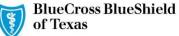
#### **Additional Pharmacy Discounts**

- Free diabetes and hypertension medications for certain drug classes.
  - Available to Blue Essentials PCP and Blue Choice Copay plan members.
- Preventive Therapy Drug List (PTDL) also available for Blue Choice HSA plan members.
- The Mail Service Pharmacy can help you save on the cost of long-term (maintenance) medications.
- Additional Mail-Order pharmacy option through Cost Plus Drugs for generic medications.

## **BCBS** Discount Programs









Blue365 offers premier health and wellness discounts and is free to join for medical plan members. Members have access to discount programs in:

- Apparel & Footwear
- Fitness
- Hearing & Vision
- Home & Family
- Nutrition
- Personal Care
- Additional Mail-Order pharmacy option through Cost Plus Drugs for generic medications.

How to access? Visit

https://www.blue365deals.com/BCBSTX/

## BCBS Member Rewards Program



A program administered by Sapphire Digital that offers cash rewards when a lower-cost, quality provider is selected.

#### How does it work?

- When a doctor recommends treatment, call a Benefits Value Advisor at the number on the back of your member ID card, or log into Blue Access for Members<sup>SM</sup> at <a href="www.bcbstx.com">www.bcbstx.com</a> and click the Doctors and Hospitals tab – then on Find a Doctor or Hospital.
- Choose a Member Rewards-eligible location, and you may earn a cash reward!
- Complete your procedure and, once verified, you will receive a check within 4 to 6 weeks.
- Questions? Call the number on the back of your member ID card.

## Benefit Value Advisor



# BVAs can help you save money on health procedures and tests. They can also help you understand and use your benefits more wisely.

## You'll get guidance for all your health plan benefits so you only need one call to get support. BVAs can help you:

- Maximize your benefits to get better value
- Get cost estimates for various providers and procedures
- Schedule appointments
- Find a doctor or facility
- Set up preauthorization



One call can help you get the most from your benefits. Call the number on the back of your member ID card before your next procedure.



Health Savings Account (HSA)

# Health Savings Account (HSA) – Blue Choice HSA Plan Only



- The Health Savings Account (HSA) maximum annual contribution amounts will increase to \$4,150 for individual coverage and \$8,300 for family coverage.
- If you would like to participate in the HSA in 2024, you MUST actively enroll during Open Enrollment. Otherwise, your current HSA elections will end on December 31, 2023.
  - You do not have to contribute to your HSA to receive the City's contribution.
  - You can change your contribution amount at any time.

Coverage Level	Annual IRS Contribution Maximum	City Annual Contribution	Employee Contribution Maximum
Employee Only	\$4,150	\$700	\$3,450
Employee + Dependent(s)	\$8,300	\$1,700	\$6,600
Catch-Up (age 55+)	\$1,000		\$1,000

Funds are fully vested. Penalties apply if used for non-qualified expenses.

# Health Savings Account (HSA) – Blue Choice HSA Plan Only



### To be eligible for an HSA:

- You must participate in an IRS-qualifying high deductible health plan (HDHP).
- You cannot be entitled to benefits under Medicare or "double covered" under any other medical plan.
- You or your spouse cannot be enrolled in a Medical Spending FSA.
- You cannot be claimed as a dependent on another person's tax return.

#### **Notes:**

- While you cannot participate in the City Medical Spending FSA, you can participate in the Limited Purpose FSA, which covers dental and vision expenses only.
- If you are currently enrolled in the Medical Spending FSA, all funds must be completely exhausted by December 31st to be eligible for a 2024 HSA.



## Additional Support Benefits

## Pre-Retiree Concierge Service



The City of Dallas has partnered with Health Advocate to help make navigating your healthcare easier whether you're considering retirement, a current pre-65 or post-65 retiree, or transitioning to post-65.

### **Health Advocate Can:**

- Answer questions about the benefits provided by the City of Dallas.
- Explain your Medicare and City of Dallas health plan options and help choose the best plan for you by comparing coverage costs and features.
- Review the many plans and parts of Medicare, what each covers, and what they cost.
- Discuss the City of Dallas' Comeback Provision for retirees.
- Inform you about enrollment deadlines and when to sign up to avoid paying late Medicare enrollment penalties.

To get started, simply e-mail <u>answers@HealthAdvocate.com</u> or call (866) 799-2731. Or, visit <u>HealthAdvocate.com/cityofdallas</u> to send a message or chat live with a representative.

## Mental Health Support Services



If you are enrolled on one of the City's medical plans, you have access to Headway. Headway helps get you matched with the right provider for your mental health care needs.

### **Benefits of Using Headway:**

- Headway offers same-day matching with providers who have openings within 48 hours.
- You can schedule in-person or virtual appointments.
- Headway offers a diverse network of over 4,000 providers in Texas, with over 1,200 that specialize in child and adolescent care.

Find matching support at headway.co/m/cityofdallas.



## Dental Coverage

Delta Dental

## Dental Coverage



# There are no changes to current plan designs or coverage costs for 2024!

Dental Plan Monthly Rates			
	<b>Dental PPO</b>	Dental HMO	
Retiree Only	\$44.53	\$12.33	
Retiree + Spouse	\$81.93	\$22.70	
Retiree + Child(ren)	\$82.99	\$22.82	
Retiree + Family	\$115.77	\$32.09	

## Dental Coverage



In-Network Benefits	Dental PPO (DPPO)	Dental HMO (DHMO)
Network	Plus Premier	DHMO Managed Care
Calendar Year Maximum (Does not apply to Diagnostic & Preventive Services)	\$1,750	Unlimited
Deductible (Applies to Basic and Major Services Only)	\$50 per person; \$150 per family	None
Preventive Services (Cleanings, Exams, Flouride, X-Rays)	100%	\$5 exam copay
Basic Services (Filling, Extractions, Anesthesia, Non-Surgical Periodontics)	80% after deductible	Per copay schedule
Major Services (Crowns, Dentures, Bridges, Endodontics, Surgical Periodontics)	50% after deductible	Per copay schedule
Orthodontia (Adult & Child)	50%	Per copay schedule
Orthodontia Maximum (Adult & Child)	\$1,750	\$1,750

#### **DPPO Plan Highlights**

 If you use an out-ofnetwork dentist, you are responsible for 100% of the amount the dentist charges that exceeds Delta Dental's networknegotiated fee.

#### **DHMO Plan Highlights**

 You MUST select a primary dental office to begin using your benefits.

#### Locate a Provider

https://www1.deltadentalins.com/individuals/find-adentist.html



## Vision Coverage

Davis Vision by MetLife

## Vision Coverage



# There are no changes to plan designs or coverage costs for 2024!

Vision Plan Monthly Rates			
	High Plan	Low Plan	
Retiree Only	\$9.79	\$5.56	
Retiree + Spouse	\$17.91	\$10.16	
Retiree + Child(ren)	\$18.78	\$10.66	
Retiree + Family	\$28.85	\$16.37	

#### **Plan Highlights**

- FREE frames at all Visionworks stores (excludes Maui Jim).
- In-network benefits online at glasses.com, 1-800-Contacts, and Befitting.
- Go to <u>www.mybenefits.metlife.com</u> to find providers in your network.

## Vision Coverage



Plan Feature	High Plan (2-Pair Benefit)	Low Plan (iDEALChoice)
Benefits	2 pairs mix or match	Glasses or Contacts
Eye Exam   Retinal Imaging	\$10 copay   \$39 copay	\$10 copay   \$39 copay
Frame Allowance OR Davis Vision Collection Frames	\$150 allowance plus 20% off balance OR covered-in-full frames at Visionworks locations	\$140 allowance plus 20% off balance OR covered-in-full frames at Visionworks locations
Lens Benefit		
Single Vision	Covered in full after \$10 copay	Covered in full after \$20 copay
Bifocal	Covered in full after \$10 copay	Covered in full after \$20 copay
Trifocal   Lenticular	Covered in full after \$10 copay	Covered in full after \$20 copay
Contact Allowance		
Davis Vision Collection	\$10 copay, then covered in full up to 8 boxes	\$20 copay, then covered in full up to 4 boxes
Retail	\$130 allowance plus 15% off balance	\$130 allowance plus 15% off balance
Frequency Guidelines		
Exams	Once every January 1	Once every January 1
Frames	Once every January 1	Once every other January 1
Contacts or Lenses	Once every January 1	Once every January 1



## Value-Added Benefits

No Cost to You!

## Wellness Portal



Navigate is the City's total well-being portal and dedicated resource hub for all City of Dallas Wellness information.

#### **Create your log-in on the Navigate portal and have access to:**

- Online learning tools & videos
- Well-being assessments
- Group & personal activity challenges
- Tracking your completion status on earning your wellness incentive (for those enrolled in one of the City's medical plans).

To register or get started, visit <u>wellbeingfirstabalancedyou.com</u>.

## EAP – ComPsych

#### **New for 2024**



#### **Benefits Available through your EAP with ComPsych:**

- 100% Fully Confidential Service.
- You will continue to have access to licensed mental health care professionals & up to 5 free therapy sessions per instance.
- 24/7 Access to online tools & resources
- Access to referrals for childcare services, legal services, financial services, & more!

#### **What This Means For You:**

- If you are in the middle of your 5 EAP sessions at the end of 2023, you will continue those sessions with Magellan
- If you complete your 5 EAP sessions, Magellan or ComPsych will refer you to an in-network BCBSTX provider so there will be no disruption in your care.
- Any new sessions on or after January 1, 2024 will be handled by ComPsych

844-213-8968 guidanceresources.com App: GuidanceNow Web ID: BCBSTXEAP



### CareATC Clinics



### **City Hall Onsite Clinic**

# Blue Essentials PCP and Blue Choice Copay plan members

 Free office visits (sick and preventive), onsite-dispensed medications, and onsite lab work

## Blue Choice HSA plan members

- Free preventive office visits
- \$25 fee for sick visits, onsitedispensed medications, and onsite lab work
  - Fee reduced to \$5 once the deductible has been met and \$0 once the out-of-pocket maximum has been met

SERVICE	EXAMPLE
Acute Care (Treatment of common illnesses and minor injuries)	<ul><li>Flu</li><li>Sinus infections,</li><li>Sprains</li></ul>
Chronic Disease Evaluation, Monitoring and Care Management	<ul><li>Hypertension</li><li>Diabetes</li><li>Asthma</li></ul>
Minor Procedures and Wound Care	<ul><li>Simple biopsies</li><li>Skin tag/mole removal</li></ul>
Preventive Care and Comprehensive Physical Exams	<ul> <li>Age appropriate physicals</li> <li>Routine gynecological exams</li> <li>prostate exams</li> <li>kids sports/camp physicals,</li> </ul>
Diagnostic Testing and Screenings	<ul><li>On-site lab work</li><li>EKGs</li></ul>

CareATC is currently by appointment only! To schedule yours, call 1-800-993-8244, visit <a href="https://www.careatc.com">www.careatc.com</a>, or use the CareATC mobile app.

## Kannact Diabetes Management



#### Diabetes management supplies and support program

ALSO SUPPORTS HYPERTENSION AND CARDIOVASCULAR RISK

#### You receive:

- Free glucometer and testing supplies delivered to your doorstep
  - Option for a traditional glucometer or a smartphone-based glucometer
- Dedicated, certified diabetes coach to help you self-manage your condition
- Personalized action plan
- Free blood pressure cuff (hypertension support)

Talk to a Kannact representative today or sign up at:

855-722-5513, <u>support@kannact.com</u>, or

www.kannact.com/cityofdallas



## Comeback Option

## Comeback Option



# You generally do not need to enroll in the Pre-65 plans in order to be eligible for the Post-65 Medicare Advantage plans.

If you retire from the City and opt out of the City's Pre-65 benefit offerings at any time before age 65 and elect coverage that meets your needs and budget elsewhere, then you will be eligible to "come back" and enroll in the City's Post-65 Medicare Advantage plans when you reach age 65 (provided you meet all required eligibility criteria).

If I Do This For Pre-65 Benefits…	Can I Still Enroll in The City's Post-65 Benefits?
Enroll in the City's Pre-65 plans at the time of retirement until age 65	Yes
Enroll in the City's Pre-65 plans at the time of retirement, then opt-out and find coverage elsewhere until age 65	Yes
Opt out of the City's Pre-65 plans at the time of retirement and find coverage elsewhere until age 65	Yes

## Comeback Option



#### **Additional Details:**

- Upon initial eligibility for the City's <u>Pre-65</u> health benefits, you must either enroll
  or actively waive/opt out of coverage; if you do nothing, you will not be eligible
  for the Comeback provision when you reach age 65.
- If you enroll in the City's Pre-65 health benefits, you may opt out of this
  coverage at any time. However, once you opt out of your Pre-65 benefits, you
  may not re-enroll in a City of Dallas Pre-65 plan at any point in the future. You
  must wait until you reach age 65 and are eligible for the City-sponsored Post-65
  Medicare Advantage plans.
- You must show proof of three years of continuous health coverage immediately preceding turning 65. This continuous coverage could be through your spouse's employer, the Health Insurance Marketplace (Exchange), or another qualified group health plan
- Enrollment in the City-sponsored Post-65 plans must be requested within 31 days of the loss of your other coverage and within 90 days of initial Medicare eligibility (at age 65).
- You may only use the Comeback provision once.



Next Steps

# What Do I Need to Do for 2024 Enrollment?



#### **Enrollment**

This is an ACTIVE open enrollment. You MUST complete the enrollment process by October 20th to ensure that you have the opportunity to review and make any decisions regarding coverage.

 If no action is taken, you will not have the opportunity to make any changes to your benefits coverage for the 2024 plan year.

## **Enrollment Reminder**



#### By phone with a Benefit Specialist

Call (855) 855-2871 Monday-Friday, 8:15 a.m. – 5:15 p.m.

Benefit Specialists will be available starting October 9<sup>th</sup>.

## Questions?



#### **Contact the Enrollment Center**

- Call (855) 855-2871
- E-mail <u>yourenrollment@ebcoh.com</u>

#### View our Benefit Materials and FAQ documents

www.cityofdallasbenefits.org

Open Enrollment October 9 – 20, 2023