



Retiree Benefits
Mandatory
Open Enrollment
April 16 – May 4

Benefit Elections
Effective July 1, 2018

Mandatory Open Enrollment

Because of the many changes to the City's benefit offerings, this year **Open Enrollment is mandatory for all retirees.**

Retirees who do not make a health plan selection during Open Enrollment will be defaulted to the Aetna Whole Health plan option.

Enrollment and changes are to be made on the City's **New enrollment system called Employee Navigator**. Access Employee Navigator with computers and mobile devices at: www.employeenavigator.com

The deadline for all enrollment and changes on Employee Navigator and for forms to be uploaded or submitted to Human Resources is **Friday May 4th at 5:00 PM.**



Open Enrollment Action

At Open Enrollment you may add or drop eligible dependents from your coverage *without a qualifying event*.

During the plan year, you may add or drop eligible dependents from your coverage *only when you have a qualifying event*, such as:

- Marriage
- Birth
- Loss or gain of other health insurance coverage
- Adoption
- Divorce

Who is an Eligible Dependent

- Spouse
- Certified Dependent
- Biological Child
- Step Child
- Child of Certified Dependent
- Disabled Child
- Adopted Child
- Court Ordered Child

Claiming someone on your benefits who does not qualify as an eligible dependent is a violation of the City's Ethics Policy and could lead to sanctions up to and including repayment of claims.

Dependent Documentation Requirement

When a retiree elects to enroll a dependent not previously covered on the City's health plan, **the dependent's coverage will not go into effect unless the retiree provides required eligibility documentation for the dependent.**

To find out more about required eligibility documentation, contact HR Connect at (919) 560-4214 or HRConnect@durhamnc.gov.

2 ways to submit eligibility documentation:

- Scan copies can be uploaded in the City's enrollment system called Employee Navigator
- Hardcopies can be provided to Human Resources.

Agenda

New Online Enrollment Tool

New Aetna Health Plan with Two Provider Networks

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Wellness Credit Requirements 2019-2020

New Flexible Spending Accounts (FSA) Administrator and **New** Debit Card

One-on-One Enrollment Meetings
Enrollment Counselors

New Online Enrollment Tool – Employee Navigator

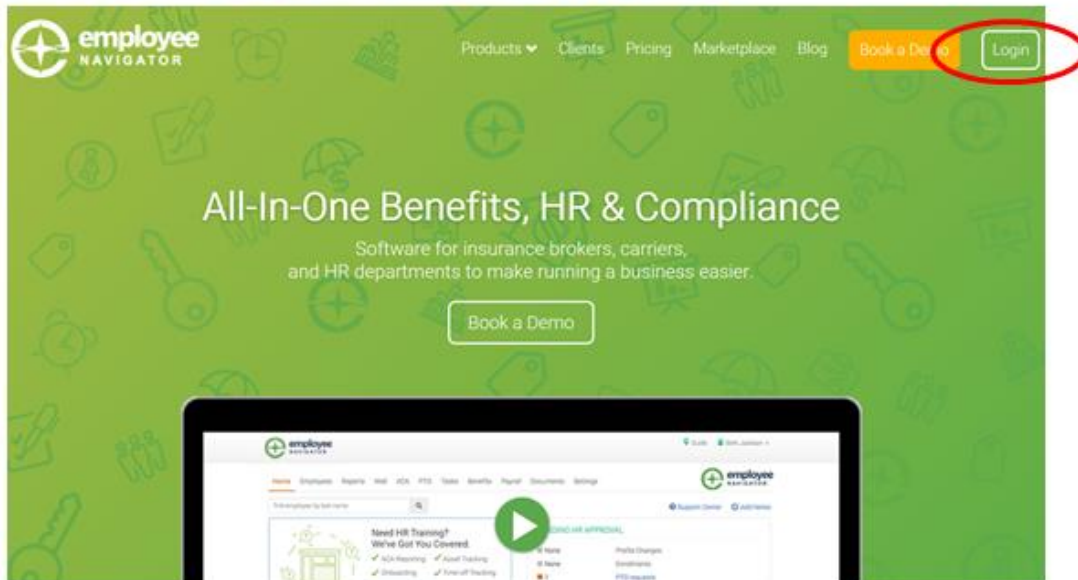
Complete your 2018-2019 open enrollment elections online for Medical and FSA plans. **Use the City’s new Employee Navigator enrollment system.**

www.employeenavigator.com

The login procedure is new and different. Follow the instructions posted on the Human Resources page of CODI.

www.employeenavigator.com

Click on the “Login” button to get started.



New Aetna Health Plan

Effective July 1, 2018, City of Durham has a new health plan from Aetna.

The new Aetna health plan has two provider networks. You can use both networks at the same time!

Two Aetna Provider Networks:

Tier 1: Smaller network based on Duke Health and WakeMed

Tier 2: Larger nationwide network

The provider network you use determines the coverage level you receive.

Check online for the Aetna network participation of your providers.

Detailed instructions for using the Aetna online provider search are included in your handouts.

Two Aetna Provider Networks - **New Flexibility & Freedom!**

- ✓ **You can use both Aetna networks at the same time!** You are not locked in to one network or the other.
- ✓ **You can mix and match networks!** You can see a Tier 1 PCP and a Tier 2 specialist. You can see a Tier 2 specialist and go to a Tier 1 hospital. You have the flexibility to use the provider that you want to get the savings that you want!
- ✓ **You can't lose!** You get credit in both networks for the charges you paid using either network. For example, the deductible amount you paid using one network is credited toward the deductible in the other network. You don't double pay when you mix and match networks.
- ✓ Ninety-six percent of the providers that you are currently using are in one or the other new Aetna networks.

Tier 1 Maximum Savings: Duke Health and WakeMed (ACO)

- ✓ **Focused, smaller network** of providers
- ✓ Accountable Care Organization (ACO): Outcomes based medical care by providers that are incentivized by their contracts to enhance quality of care and coordinate care
- ✓ **Maximum savings** for City of Durham retirees! When using this network, **you pay the lowest charges for medical care**: lowest copays, lowest coinsurance, and lowest deductible.
- ✓ Providers located in 12 counties: Alamance, Chatham, Durham, Franklin, Granville, Johnston, Lee, Orange, Person, Vance, Wake, Wilson
- ✓ Includes the Duke Health, WakeMed, Duke LifePoint, Alamance Regional Medical Center, and Granville Medical Center hospital systems. **UNC Health Care hospitals and other hospitals are not in the network!**
- ✓ 1,100+ PCPs. 4,000+ Specialists. 11 urgent care facilities in the Triangle.

Tier 2 Standard Savings: Choice POS (Open Access)

- ✓ **Broad, national network** of providers
- ✓ **Standard savings** for City of Durham retirees. When using this network, **you pay a medium level of charges for medical care:** medium copays, medium coinsurance, and medium deductible.
- ✓ Great when traveling and for college students away at school.
- ✓ Thousands of doctors and hospitals across the country.
- ✓ Includes UNC Health Care hospitals.

Tier 3 Out-of-Network: **Highest Out-Of-Pocket Costs**

- ✓ Providers not in the two Aetna networks.
- ✓ Except for Emergency Room Visits, **out-of-network benefits are lower and your out-of-pocket costs are higher.**
- ✓ No credit toward the two Aetna network benefits for out-of-network charges you pay.
- ✓ **Use the two Aetna networks of providers to save money.**

New Dual Option Health Plan Overview

You have your choice of two Aetna health plans:

Aetna Whole Health

Default plan with \$0 monthly retiree only wellness rate

Aetna Whole Health Plus

Buy-up plan with \$50 monthly retiree only wellness rate

Simple! Both plans work the same way, but have different copays, deductibles, and other out-of-pocket costs.

You choose the plan that is the best fit for you and your family.

Aetna Whole Health – Benefit Highlights

Benefits	Tier 1 Maximum Savings Duke and WakeMed	Tier 2 Standard Savings Choice POS	Tier 3 Out-of-Network
Annual Deductible (Individual / Family)	\$2,000 / \$4,000	\$3,000 / \$6,000	\$4,000 / \$8,000
Medical Out-of-Pocket Limit (Individual / Family)	\$3,250 / \$6,500	\$5,000 / \$10,000	\$9,000 / \$18,000
Primary Care Physician Office Visit	\$30 copay	\$45 copay	50% after deductible
Specialist Office Visit	\$60 copay	\$90 copay	50% after deductible
Preventive Care	100% covered	100% covered	Not covered
Hospital Services	80% after deductible	60% after deductible	50% after deductible
Urgent Care Center Visit	\$30 copay	\$90 copay	50% after deductible
Emergency Room (First 2 Visits)	\$300 copay	\$300 copay	\$300 copay
Emergency Room (Additional Visits)	\$500 copay	\$500 copay	\$500 copay
Prescription Drugs (Tier 1 / Tier 2 / Tier 3-4)	\$0 / \$35 / \$50 copays	\$0 / \$35 / \$50 copays	Extra charge in addition to copay
Rx Out-of-Pocket Limit (Individual / Family)	\$1,500 / \$3,000	\$1,500 / \$3,000	\$3,000 / \$6,000

Monthly Retiree Contribution* **\$0.00**

*Retiree Only Enrollment Tier - Wellness Rate



Aetna Whole Health Plus – Benefit Highlights

Benefits	Tier 1 Maximum Savings Duke and WakeMed	Tier 2 Standard Savings Choice POS	Tier 3 Out-of-Network
Annual Deductible (Individual / Family)	\$750 / \$1,500	\$1,500 / \$3,000	\$3,000 / \$6,000
Medical Out-of-Pocket Limit (Individual / Family)	\$2,500 / \$5,000	\$4,000 / \$8,000	\$8,000 / \$16,000
Primary Care Physician Office Visit	\$15 copay	\$30 copay	50% after deductible
Specialist Office Visit	\$30 copay	\$60 copay	50% after deductible
Preventive Care	100% covered	100% covered	Not covered
Hospital Services	80% after deductible	60% after deductible	50% after deductible
Urgent Care Center Visit	\$15 copay	\$60 copay	50% after deductible
Emergency Room (First 2 Visits)	\$300 copay	\$300 copay	\$300 copay
Emergency Room (Additional Visits)	\$500 copay	\$500 copay	\$500 copay
Prescription Drugs (Tier 1 / Tier 2 / Tier 3-4)	\$0 / \$30 / \$45 copays	\$0 / \$30 / \$45 copays	Extra charge in addition to copay
Rx Out-of-Pocket Limit (Individual / Family)	\$1,300 / \$2,600	\$1,300 / \$2,600	\$2,600 / \$5,200

Monthly Retiree Contribution* **\$50.00**

*Retiree Only Enrollment Tier - Wellness Rate

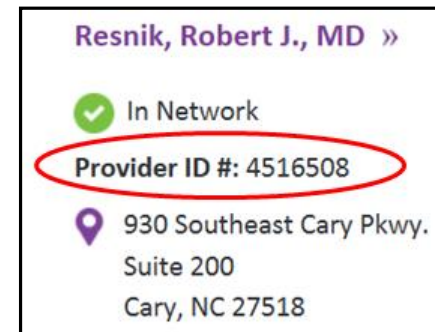


Health Plan Monthly Retiree Contributions

Plan and Rating	Enrollment Tier	Retiree (20 plus years of service)	25% Prorated (15 - 19 years of service)	50% Prorated (10 - 14 years of service)
Aetna Whole Health Plan (Wellness Rates)	Retiree	\$ -	\$ 179.48	\$ 358.96
	Ret & Spouse	\$ 154.40	\$ 417.08	\$ 679.75
	Ret & Child(ren)	\$ 86.78	\$ 347.82	\$ 608.86
	Family	\$ 159.65	\$ 556.72	\$ 953.78
Aetna Whole Health Plan (Non-Wellness Rates)	Retiree	\$ 20.00	\$ 199.48	\$ 378.96
	Ret & Spouse	\$ 174.40	\$ 437.08	\$ 699.75
	Ret & Child(ren)	\$ 106.78	\$ 367.82	\$ 628.86
	Family	\$ 179.65	\$ 576.72	\$ 973.78
Aetna Whole Health Plus Plan (Wellness Rates)	Retiree	\$ 50.00	\$ 229.08	\$ 408.16
	Ret & Spouse	\$ 232.68	\$ 495.36	\$ 758.03
	Ret & Child(ren)	\$ 149.61	\$ 410.65	\$ 671.69
	Family	\$ 273.98	\$ 671.05	\$ 1,068.11
Aetna Whole Health Plus Plan (Non-Wellness Rates)	Retiree	\$ 70.00	\$ 249.08	\$ 428.16
	Ret & Spouse	\$ 252.68	\$ 515.36	\$ 778.03
	Ret & Child(ren)	\$ 169.61	\$ 430.65	\$ 691.69
	Family	\$ 293.98	\$ 691.05	\$ 1,088.11

Importance of Primary Care Physician (PCP)

- ✓ **During Open Enrollment all retirees MUST enter their Primary Care Physician's ID number in the City's new enrollment system, Employee Navigator.**
- ✓ **Before enrolling in your benefits online, look up your and your covered family members' PCPs on the Aetna online provider search tool.**
Detailed instructions for using the Aetna online provider search are included in your handouts.
- ✓ **Write down the "Provider ID #" for your PCP and your covered family members' PCPs.**
Retirees and their dependents can all have the same PCP or different PCPs.
- ✓ After open enrollment, retirees and their dependents can **change their PCP anytime by calling Aetna Customer Service.**
- ✓ **A good relationship with a PCP enhances medical care and outcomes.** It does not limit retirees or their dependents in any way. Retirees and their dependents can go to any doctor, including specialists, without a referral.



Wellness Credit Requirements for 2019-2020

The City's new benefit year begins July 1, 2018.

New The Health Risk Assessment (HRA) will no longer be required to receive Wellness Credit, nor will it have to be completed in order to qualify for the Health Reimbursement Arrangement from the new administrator, P&A Group.

To receive the health plan wellness rate for the 2019-2020 benefit year you will need to complete the following TWO wellness requirements:

1. Annual Routine Physical

(Retiree **New** AND Spouse/spouse equivalent)

2. One Additional Activity

Flu shot

Nutritionist visit

Annual routine eye exam

Flexible Spending Accounts (FSA) For Eligible Law Enforcement Officers

Personal Tax Shelter

Flexible Spending Accounts (FSA) allow you to avoid federal, state and Social Security (FICA) taxes on the money you pay for eligible out-of-pocket medical, dental, and dependent care expenses.

Your Money & Your Account

You choose an amount to be withheld from your paycheck before taxes are applied. The withholdings are placed in your FSA accounts.

No Fees

The City of Durham pays the administrative fees for the your FSA account.



Two Different Flexible Spending Accounts (FSA)

Medical Expense Reimbursement Account

Covers medical, dental and vision expenses that are only partially covered or not covered at all by your insurance.

Some examples include:

- ✓ Deductibles
- ✓ Coinsurance
- ✓ Dental Care
- ✓ Orthodontia
- ✓ Drug Copays
- ✓ Lasik

Maximum Contribution \$2,650

Dependent Care Reimbursement Account

Covers amounts you pay to daycare centers, babysitters, caregivers or after school programs that allow you and your spouse to work.

Maximum Contribution \$5,000

New FSA Administrator and **New** Debit Card

Effective July 1, 2018 the City's FSA accounts will be administered by P&A Group. P&A is not new to the City. They currently administer the City's COBRA benefits.

If you currently have FSA through Laymon Group, you will have until September 15, 2018 to exhaust your current 2017-2018 plan year benefits with your current Laymon Group debit card.

New Debit Card: P&A Group will send you a new card. The debit card provides instant access to the funds in your medical flexible spending account. Using the debit card eliminates the need to file a paper claim form for reimbursement.



FSA Enrollment Action

Even if you participate in the FSA this year, you must reenroll in Employee Navigator to continue your participation.

FSA amounts you elected must be for expenses you incur between July 1, 2018 and June 30, 2019. You have a 2½ month Grace Period starting July 1, 2019 to exhaust your unused benefit.

“Use It or Lose It” Rule: Any balance that remains in your FSA account at the end of the Grace Period is forfeited. Plan carefully. Elect only as much FSA benefit as you can use.

Always save documentation of your eligible expenses. The administrator or the IRS may require your documentation in an audit.

One-on-One Enrollment Meetings

Benefits Counselors will be available to meet one-on-one with retirees to discuss enrollment options. Meet with a counselor at the location and times listed below:

May 3-4, 2018

City Hall

101 City Hall Plaza

Audit Conference Room

9 a.m. – 4 p.m.

Benefits Counselors will be available to answer your questions about the new health plans and flexible spending accounts. They are also available to assist you with your online enrollment using Employee Navigator.



Open Enrollment Deadline

Complete your enrollment selections in Employee Navigator and submit any required forms to Human Resources by

Friday May 4th at 5:00 PM

For answers to your benefits questions contact **HR Connect:**

919-560-4214 Option 1
HRConnect@DurhamNC.gov