

City Of Dallas Human Resources Department



***2010 Employee
Open Enrollment***



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Open Enrollment Overview

- Dates
 - Enroll September 8 through October 30, 2009
 - Effective – January 1, 2010
- Enrollment Process
 - One-on-one meetings with a Benefits Counselor
 - Enroll in your Core Benefits (Medical, Dental, Vision, FSA, and Life)
 - Participate in a Dependent Eligibility Audit
 - You may enroll in Voluntary Benefits
- Benefits Service Center (BSC)
 - Effective September 8, 2009 the BSC is at City Hall
 - Location L1EN
 - At your service to answer 2009 benefit questions
 - Enroll the Retirees
 - Telephone number 1-888-752-9122



Dependent Eligibility Audit

- You will be **required** to prove your dependents eligibility to be covered on the City's Benefits Plan
- Please Bring **Copies** of the following Documentation:
 - **Spouse** – Marriage License, SSN, Date of Birth
 - **Common Law** – Registration Document, and two documents showing financial interdependence
 - **Domestic Partner** – Affidavit, and two documents showing financial interdependence
 - **Child** – Birth Certificate, SSN
- Failure to provide **copies** of the aforementioned documents will result in your being defaulted to employee only coverage.





City of Dallas 2010

Employee Enrollment Period

Dates are as follows
September 8th thru October 30th, 2009

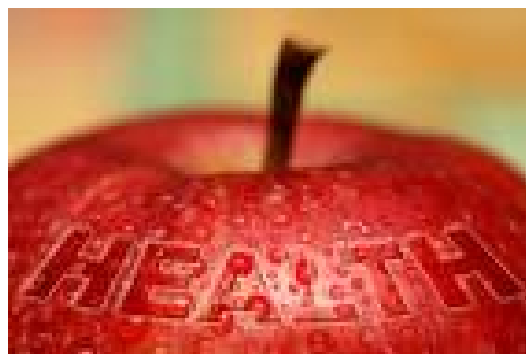
Documents Required at Open Enrollment for all Insured



Type of Eligible Dependent	Required Documentation
<p>Spouse Person of opposite gender</p> 	<ul style="list-style-type: none"> -Copy of marriage license -Copy of Social Security Card -Date of Birth <p>Common-Law</p> <ul style="list-style-type: none"> -Common-Law- registration and copies of documentation showing that you and your spouse have lived together for at least six months (provide two documents from list below). <p>Examples include copies of:</p> <ul style="list-style-type: none"> -Lease or deed naming both partners -Joint checking account statement -Utility bills and/or Credit accounts -Will and or life insurance policies <ul style="list-style-type: none"> -Copy of Social Security Card -Date of Birth
<p>Domestic Partner Person of same gender</p> 	<ul style="list-style-type: none"> -Domestic Partner registration and copies of documentation showing that you and your partner have lived together for at least six months (provide two documents from list below). <p>Examples include copies of:</p> <ul style="list-style-type: none"> -Lease or deed naming both partners -Joint checking account statement -Utility bills and/or Credit accounts -Will and or life insurance policies <ul style="list-style-type: none"> -Copy of Social Security Card -Date of Birth
<p>Dependent Child Child who is unmarried, under age 25 and is the biological child, legally adopted child, or stepchild of you and/or your spouse, domestic or common law partner</p>	<ul style="list-style-type: none"> -Copy of birth certificate showing you as a parent, or -Copy of adoption agreement, or -Copy of court custody or guardianship documents, or -Copy of the portion of the divorce degree showing the dependent, or -Copy Qualified Medical Court Support Order (QMCSO) -Copy of Social Security Card



Your Benefit Options



Your 2010 Medical Plan Options

Changes for 2010:

Your 2010 Benefit Plan options are:

- *70/30 \$3000 Deductible PPO plan*
- *75/25 PPO plan with HRA (Health Reimbursement Account)*

To streamline administration, City of Dallas has decided to eliminate the EPO plan in 2010. Utilization and plan costs warranted a very large premium increase and it became cost prohibitive to continue to offer that plan.

Mental Health Parity

Federal Mandate to remove any day or visit limits on Mental Health that are not the same (in “parity”) to the medical plan benefits.

Prescription Drug Listing changes

This year there will be 25 Brand Name medications changing from Tier 2 to Tier 3. The listing can be found on the City’s intranet. City of Dallas has not made any changes to the medication tiering since 2006. The PDL is reviewed on a quarterly basis looking at therapeutic equivalents in other tiers, treatment cost effectiveness, utilization and medication cost.

The HRA Medical Plan Option

The UnitedHealthCare Definity HRA is a **high-deductible medical plan, plus a health reimbursement account.**

Broken down into its individual parts, it works like this:

1. Medical Plan and Prescription Plan:

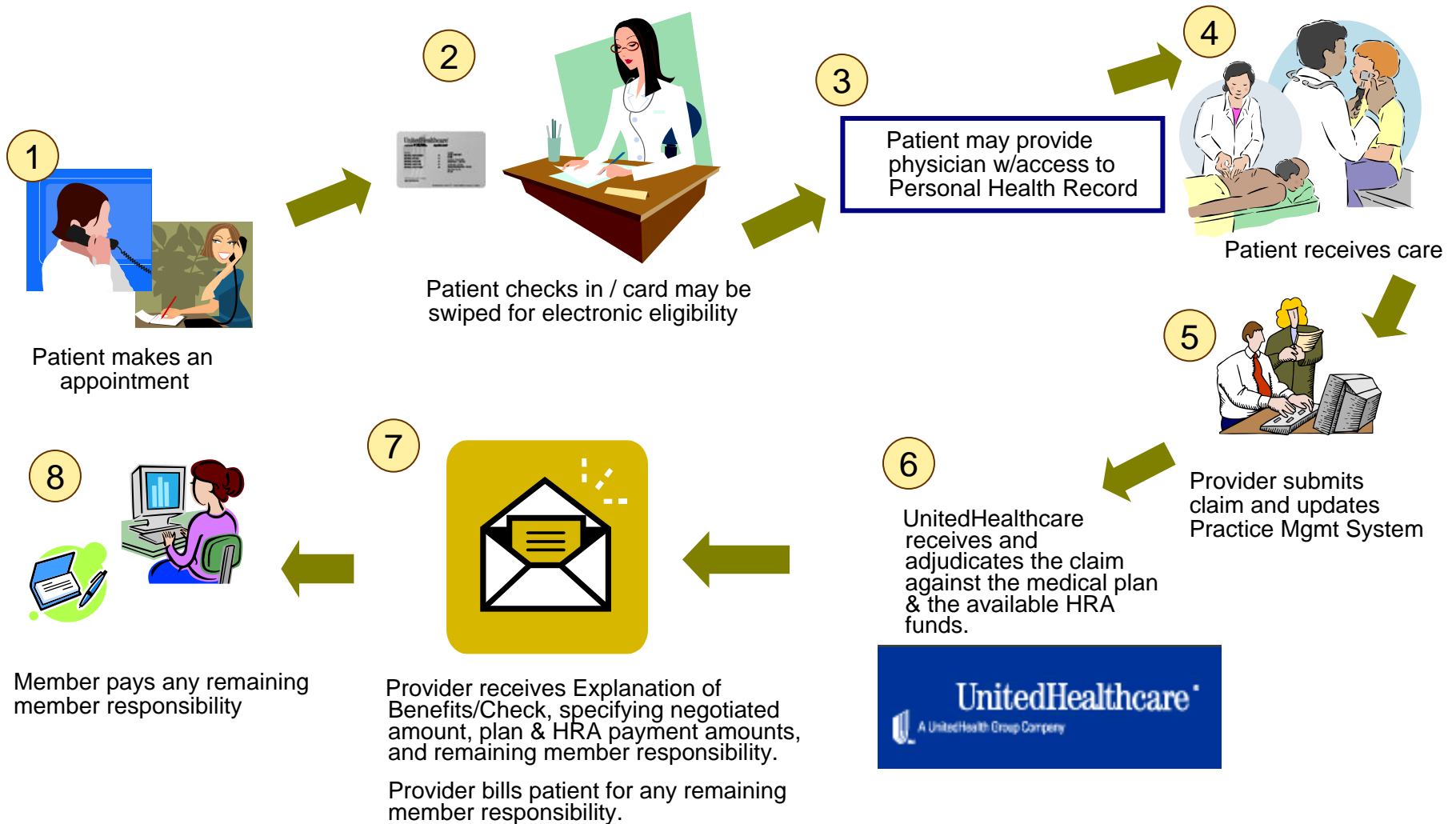
- Combined Medical and Prescription Deductible
- Provides benefits with an annual maximum out-of-pocket
- Provides you up to 100% coverage for preventive care
- Generally ensures lower out-of-pocket costs when you use network physicians and health care professionals
- Covers emergency services anywhere in the world

2. Health Reimbursement Account:

- Helps you pay for eligible medical expenses
- Funds are provided by your employer and your employer determines the amount in the account
- You will receive a blue Consumer Account Card, however you are not required to use it to access funds.
- Money in the account is yours to use during your plan year. If you have an FSA in addition to the HRA, you must use the HRA dollars first.
- Unused HRA funds can rollover to next year

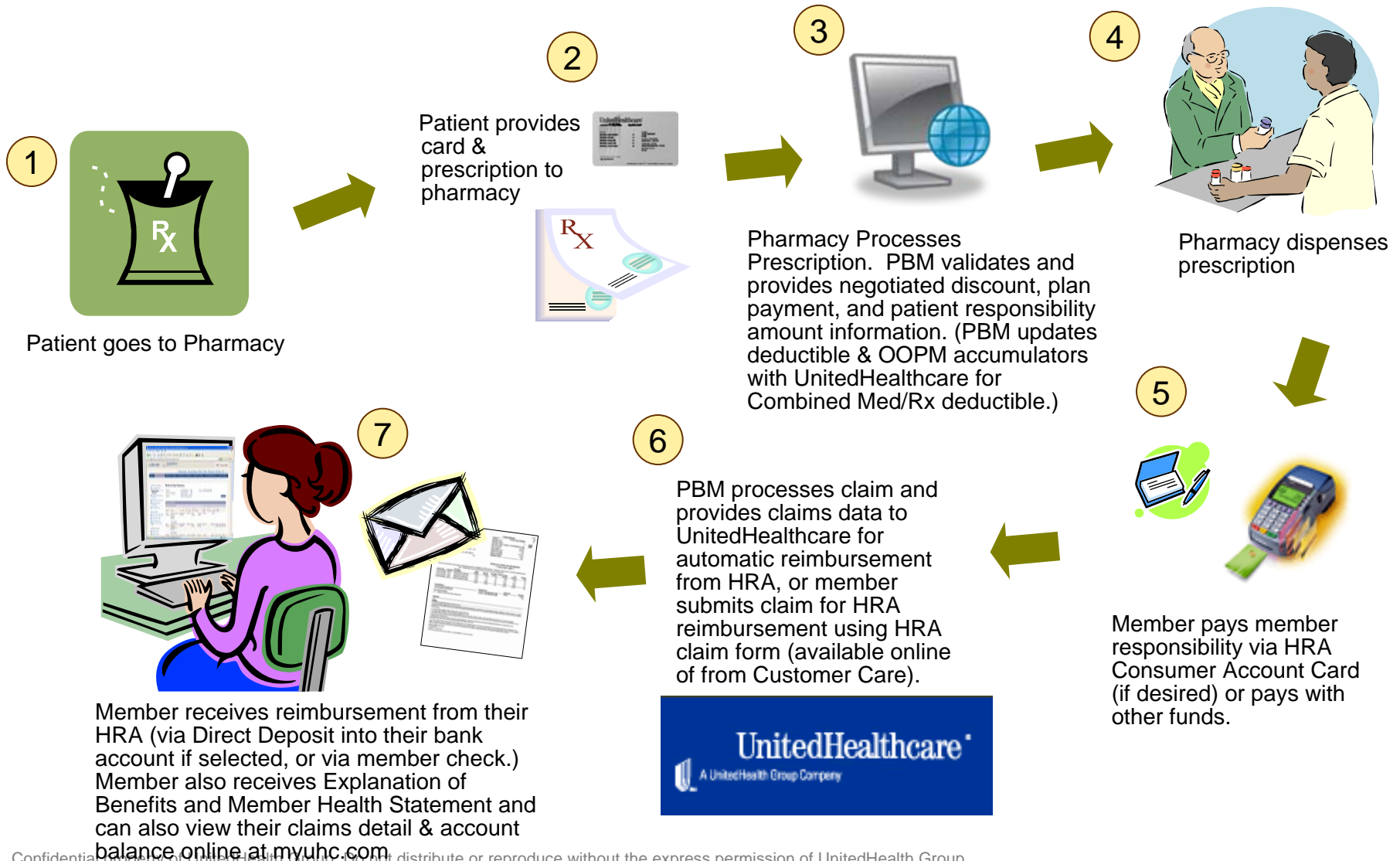
Simplifying the Consumer Experience

Member Visits Provider for Office Visit - HRA



Simplifying the Consumer Experience

Member Visits Pharmacy After Office Visit - HRA



Your Consumer Account Card

UnitedHealthcare[®]
Healing health care. Together.™

What do I do when I receive my blue CAC card?

- Review the terms and conditions
- Sign the card
- Call the toll-free number on the activation sticker to activate your card. (1-866-755-2648)
- Begin using the card one full business day after activating it.
- If you choose not to activate it, cut it up. You can also be reimbursed for eligible expenses as they flow through the claim processing system and the HRA account.

What if I have not received my blue CAC card?

- Is your address correct on file at City of Dallas?
- If it is, call the toll-free number to request a new card to be mailed to you. (1-866-755-2648)



Consumers - www.myuhc.com Provider - www.unitedhealthcareonline.com Manufacturer

AUTHORIZED SIGNATURE NOT VALID IF NOT SIGNED ICA8228 230759H 08/03 GD
Issue Date: 00/00/0000

Customer Service: 1-866-755-2648
This card does not prove membership nor guarantee coverage.

This is a restricted use card. Your use of this card is subject to the terms and conditions of the card, which have been provided to you and which may be amended from time to time. Be sure to review your benefit program materials to ensure that this card is used only at proper locations and for eligible expenses. It cannot be used at all MasterCard acceptance locations.

UnitedHealthcare Consumer Accounts Card - United HealthCare Insurance Company.

For Claim Submissions: UnitedHealthcare, P.O. Box 981178, El Paso, TX 79998-1178
This card is issued by Exante Bank pursuant to license by MasterCard International

Medical Plan and Prescription Plan have separate deductibles

1. Medical Plan

- High Deductible Medical plan (\$3000/\$9000)
- You must meet your deductible before the plan will pay, except for preventive services
- Preventive Care you pay 30% coinsurance, the deductible is waived
- Provides benefits with an out of pocket maximum

2. Prescription Drugs

- \$75 deductible per person
- Tier 1 - 10% with \$10 minimum
- Tier 2 - 25% with \$25 minimum
- Tier 3 - 40% with \$40 minimum

Medical Plan Comparison



	PPO 70/30/\$3000	PPO 75/25/HRA
Total Deductible	\$3000 (single) \$9000 (with dep(s))	\$2500 (single) \$5000 (with dep(s))
HRA Allocation (City \$\$)	N/A	\$1000 (single) \$2000 (with dep(s))
Deductible (Your \$\$)	Same as Total Deductible	\$1500 (single) \$3000 (with dep(s))
Coinsurance	Member pays 30% Plan pays 70%	Member pays 25% Plan pays 75%
Primary Care Physician Preventive Services	Plan pays 70% no deductible	Plan pays 100% (in-network only) doesn't reduce HRA
Out-of-Pocket Max	\$7500 (single) \$15000 (with dep(s))	\$6000 (single) \$12000 (with dep(s))
RX Deductible	\$75/person	Same as (Your \$\$) Deductible above
Generic	10% or \$10 minimum	10%
Preferred	25% or \$25 minimum	25%
Non-Preferred	40% or \$40 minimum	40%
Out-of-Pocket Max*	\$2500/person	N/A
Full-Time Rates		
EE Only	\$39	\$75
EE + Spouse	\$330	\$421
EE + Child(ren)	\$105	\$212
EE + Family	\$396	\$539

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Upset that the EPO plan is going away...?

Think about this...

Would you rather spend your money on health care when you need it or would you rather pay it upfront in premiums?

Employee Only Calculation:

2009 EPO cost is \$237.00 monthly

2010 HRA cost is \$75.00 monthly

Difference is \$162.00 savings in monthly deductions, times 12 months = **\$1944.00**

Don't forget that if you enroll in the HRA plan you will also have \$1000 of HRA money to pay for expenses. Simply put, you are looking at a total of almost \$3000 (\$1000 HRA plus \$1944 payroll deduction savings) to pay for health care expenses. This means you have enough dollars to satisfy your \$2500 deductible, and have almost another \$500 towards coinsurance expenses!!!

Even more to think about...

What if you took the difference in the premiums (\$1944) and payroll deducted that amount into a pre-tax FSA account to use on health care or prescription expenses when you need it?

You are currently in the HRA plan and are thinking about switching to the 70/30 plan...?

- Remember that you will be responsible to pay the entire \$3000 deductible before the plan begins to pay any medical expenses.
- In addition, you have to meet a \$75 per person prescription deductible
- Preventive services are paid at a 70% coinsurance, you pay 30%.
- If you had any unused HRA dollars in 2009, you lose those dollars if you move to the 70/30 plan.

Employee Only Calculation

2010 HRA cost is \$75.00 monthly = \$900.00

2010 70/30 cost is \$39.00 monthly = \$468.00

- While you will have \$432.00 more in payroll deductions annually by choosing the HRA plan, you get \$1000.00 allocated to you to pay for medical and prescriptions.

Things to think about at Open Enrollment



Surprised at the cost of medical services and prescriptions when you enrolled in the HRA plan...?

The full cost of medications and medical services are the same under each plan. What is different is what the employees were paying and the cost shared with City of Dallas.

If employees were paying a small co-payment, who was paying the remaining amount?

When you pay more of the shared cost, you become a more educated consumer. You'll notice that you begin to spend your HRA dollars like it is your own money.

Have you recently made a purchase? Maybe a TV, Fridge, stereo equipment or maybe even a car? How much research did you do before you made that purchase...?

How much time did you spend researching decisions regarding your health care needs? Selecting a physician, discussing medical or prescription options with you physician?"

Where to Go for Help to Make Decisions

Start by Registering on www.myuhc.com

Prescriptions:

- **New prescriptions:** Talk to your doctor about lower tier/generic alternatives when they are writing a prescription.
- Use “Price a Medication” on www.myuhc.com to find how much a specific drug costs before you get it filled.
- **Existing prescriptions:** Visit “MyRxChoices” under “Pharmacies and Prescriptions” on www.myuhc.com today. It will provide you with lower cost alternatives to the medications you are currently taking, or talk to your doctor.

Medical Services:

- Select a Premium Designated Provider – These physicians are listed first when you search.
- Treatment Cost Estimator – estimate health care costs ahead of time



Other resources on myuhc.com:

- Look up benefit information, view claims and claim history, check HRA and FSA account balances, wellness tools and information, and much, much more!
- If you are also enrolled in the **Dental and Vision**, you can access information regarding those plans as well.

Additional Services:

- **Care24** – 24-7 access to nurses and counselors who can help with problems ranging from medical and family matters to personal legal, financial and emotional needs.
Example: [Emergency versus Urgent Care versus Convenient Care](#)
- **Care Coordination Nurses** – UHC Nurses dedicated to assist you and your family members with chronic or complex medical situations.



UnitedHealthcare Vision

Benefits	In-Network	Out-of-Network
Co-payments	\$10 Exam Copay \$25 Materials Copay	No co-payment
Frequency	12 Exam 12 Lenses 24 Frames	12 Exam 12 Lenses 24 Frames
Exam	100%	\$40
Spectacle Lenses	100%- single vision, lined bifocal, trifocal, or lenticular lenses	\$40 single vision lenses \$60 bifocal lenses \$80 trifocal/lenticular
Frames	\$50 wholesale, or \$130 retail allowance	\$45
Elective Contact Lenses -Covered-in-full contacts -All other elective contacts Necessary Contact Lenses	100% up to \$105 100%	up to \$105 \$210

Also discounts on laser vision correction and additional non-covered materials



Dental PPO Plan

- Over 4000 PPO access points in the Dallas/Ft. Worth Metro Area
- Flexibility to choose your own dentist
- \$1000 annual maximum

Dental HMO Plan

- Limited coverage network for DHMO – check availability in your area at www.myuhcdental.com
- No restrictions for pre-existing conditions
- Member must be assigned to a Primary Care Dentist
- Member pays co-payments at time of service
- Orthodontia – 24 month case
- Member must receive a referral for Specialty Care services
- No coverage for Out-of-Network services
- Services not listed on the Schedule of Benefits are offered at Usual, Customary and Reasonable (UCR) charges

Basic and Supplemental Life Accidental Death and Dismemberment

*****IMPORTANT REMINDER – REMEMBER TO UPDATE YOUR BENEFICIARY FORM*****

Basic Life Insurance Benefit

- \$50,000
- Terminates at retirement

Supplemental Life Insurance Benefit

- 1x, 2x, or 3x basic annual earnings to a maximum of \$500,000
- Terminates at retirement
- Dependent and Spouse supplemental coverage also available

Supplemental Accidental Death and Dismemberment

- \$25,000 to \$250,000 in increments of \$25,000 (amounts above \$150,000 cannot exceed 10 times basic Annual Earnings)
- Supplemental Accidental Death and Dismemberment Benefit will reduce to 65% at age 70, 45% at age 75, 30% at age 80, 15% at age 85 and terminate at retirement.
- Issued on a 24 hour basis

Free Travel Assist and Will Preparation Services

- Employees and their dependents have access to 24/7 OnCall Travel Assistance
- Assistance is provided when traveling 100 miles or more from home or office, up to 90 days, on any one trip
- Access to educational articles and frequently asked questions on a vast number of legal topics
- Access to hundreds of standard legal forms for each state
- Tools to help employees prepare legal documents quickly and efficiently in the privacy of their own homes, without the cost of an attorney
- Private and secure storage of legal documents created online
- Access to service specialists to answer questions by phone, if utilizing the Assisted Document Preparation service

Concentra TotalCare Clinic



Concentra TotalCare Health Clinic

- Located at City Hall 1CS
- Hours of Operation
 - Monday through Friday
 - 7:30 AM - 5:30 PM
- To Schedule your Appointment Call:
 - (214) 671-9140

Questions

