

WELCOME TO OPEN ENROLLMENT

The Annual Open Enrollment Period is October 14 - November 11, 2019. During this time, we recommend that you review your personal information, the benefits being offered by Howard County Public School System (HCPSS), and the plans you are enrolled in, to determine if you would like to make any changes.

HCPSS is pleased to announce that we will continue to offer the same comprehensive benefits programs in Plan Year 2020, including: two health maintenance organization plans (HMOs) with Open Access Select Aetna and CareFirst Blue Cross and Blue Shield of Maryland HMO, one preferred provider organization plan (PPO) with Aetna PPO, a prescription drug program with Express Scripts, a dental PPO plan with Delta Dental PPO, a dental maintenance organization (DMO) plan with CIGNA DHMO, and a vision plan with Vision Service Plan (VSP).

As you proceed with making your Open Enrollment elections, it is really important that you read the instructions set forth on each of the Open enrollment pages as they contain information with regards to enrollment / changes to benefits.

IMPORTANT NOTE

If you do not wish to make any changes to your medical, dental, vision, short-term disability, long-term disability, critical illness, supplemental life, accident and whole life insurance benefits, your current benefit elections will continue for Plan Year 2020.

You must make new election(s) for the following benefits for Plan Year 2020. Your current benefits elections will not carry over to Plan Year 2020.

- Health Care FSA (New FSA maximum is \$2,700 per calendar year)
- Dependent Care FSA

To make changes to your current benefit elections, to update your personal information, to enroll, please log onto Workday.

- Log on to Workday by clicking the Workday icon located on the upper right hand side on the Staff Hub page.
- Next, enter your Active Directory user name and password.
- Go to your inbox and select the Open Enrollment task.
- Proceed with your Open Enrollment Elections.

You can learn more about the HCPSS Benefit offerings by reviewing the Benefits Enrollment Guide which highlights the array of benefits available to employees and by visiting the website www.hcpss.org/employees/benefits.

WHAT'S NEW FOR PLAN YEAR 2020?

Preventive Care Coverage

Effective January 1, 2020, the medical and prescription plans offered by HCPSS will no longer be grandfathered under the Affordable Care Act (ACA). Therefore, routine preventive care services will be covered under the CareFirst and Aetna medical plans and the Express-Scripts prescription plans without a copay. To review a list of covered preventive care services under each medical plan, please visit www.CareFirst.com and www.aetna.com.

Prescription Benefit Changes

The following prescription benefit changes will become effective on January 1, 2020. You can learn more about the prescription plan changes below by visiting www.hcpss.org/employees/benefits.

SMART90

The Express Scripts SMART90 network provides members access to 90-day medications used to treat ongoing conditions at a select network of participating retail pharmacies. Your access to retail pharmacies for 30-day supply medications will not change. While you are not required to transition pharmacies, access to a 90-day fill will be limited to participating pharmacies. On or after 01/01/2020, please call Express Scripts member services at (877) 866-5859 to verify if your pharmacy will allow a 90-day fill, or for assistance in locating a SMART90 participating pharmacy. You may also log in or register at www.Express-Scripts.com/90day to locate SMART90 participating pharmacies in your area.

ADVANCED UTILIZATION MANAGEMENT (AUM)

Express Scripts clinical review criteria will be enhanced effective January 1, 2020 and require additional medications be subject to a clinical review prior to dispensing. If you are taking a medication that will now require a clinical review prior to dispensing, you will be notified via mail in mid to late November. After January 1, your physician may call Express Scripts at 800.417.1764 to arrange a review prior to your next refill.

MANDATORY GENERICS (DAW2)

Starting January 1, if you choose a brand when a generic equivalent is available for a prescription that does not state Dispense as Written (DAW), you will pay your brand copayment plus the difference in cost between the brand name drug and the generic drug. If you use brands, you may want to ask your doctor whether generics are available and right for you. You can also see if there is a generic drug available for a brand name drug you take. Register or log in anytime at www.Express-Scripts.com and choose Price a Medication from the menu under Prescriptions. Enter your drug name and click Search.

VACCINE COVERAGE

Howard County is enhancing the pharmacy benefit to include coverage of common vaccines, such as, flu, shingles, or measles at retail pharmacies. Contact your network pharmacy in advance to inquire about vaccine availability, age restrictions, and current vaccination schedules. You can also log in at www.Express-Scripts.com and click Prescriptions, and then Find a Pharmacy.

LEARN MORE ABOUT YOUR BENEFIT OFFERINGS

Aetna HMO and PPO Plans

TELADOC

Teladoc offers the Aetna members the ability to consult with a national network of U.S. board-certified family practitioners, PCPs, pediatricians and internists to diagnose, recommend treatment, and write short-term prescriptions for non-controlled substances, when necessary, 24 hours a day, 7 days a week. Consultations are available by telephone as well as by online video (PCP copay will apply) using Teladoc.com or through the Teladoc Member mobile app. Teladoc can provide effective resolution to a wide range of common and routine illnesses as an option to receive urgent care services. Some of the more common illnesses that Teladoc handles are Allergies, Bronchitis, Ear Infection, Nasal congestion, and Urinary Tract infection.

DISCOUNTS ON HEARING AIDS AND VISION SERVICES FROM AETNA

Aetna members are eligible to receive a discount from Hearing Care Solutions and Amplifon on hearing aids, exams, repairs and materials. Aetna's VisionSM discount program provides discounts on designer frames, the latest in lens technology, non-disposable contact lenses, sunglasses, eye exams, and LASIK laser eye surgery. For more detailed information regarding hearing aid discounts and vision discounts, log in to your member website at <https://www.aetnaresource.com/n/HCPSS>.

MANAGE A HEALTH CONDITION WITH AETNA HEALTH CONNECTIONSM DISEASE MANAGEMENT PROGRAM

Aetna's disease management program supports over 35 conditions such as diabetes, heart disease, asthma and low back pain. Let us be the coach in your corner and try one of our online programs or one on one discussions with a nurse.

CALL OUR INFORMED HEALTH LINE

Get answers to health questions anytime, day or night. You can talk with a registered nurse, 24 hours a day, toll free. While only your doctors can diagnose, prescribe, or give medical advice, our nurses can discuss a wide variety of health and wellness topics.

HABILITATIVE THERAPY IS NOW COVERED UNDER THE AETNA MEDICAL PLAN

Habilitative Therapy (Physical, Speech and Occupational therapy) will now be covered under both the Aetna PPO and HMO plans. Habilitation therapy services are services defined as those that help you keep, learn, or improve skills and functioning for daily living (e.g., therapy for a child who isn't walking or talking at the expected age). These services are provided with a diagnosis of developmental delay or autism for children.

CareFirst HMO Plan

CAREFIRST BLUECROSS BLUESHIELD VIDEO VISIT

CareFirst BlueCross BlueShield Video Visit allows you and your family members to connect with a doctor whenever and wherever you want—without an appointment! Video Visit is perfect when your primary care provider (PCP) isn't available or if you don't have a PCP. You can utilize Video Visit from your computer, tablet or smartphone for health concerns including bronchitis, cough/sore throat, sinus infection, fever, cold/flu, headache, sprains/strains, and more. You can access the Video Visit platform from the CareFirst member website at www.carefirst.com/needcare. You can also download the CareFirst Video Visit app (iTunes and Android) to see a doctor on their smartphone or tablet. Before the first visit, you will need to register for an account. Upon successful registration, you will receive a welcome email with instructions on how to schedule a visit.

CAREFIRST BLUECROSS BLUESHIELD BLUE365®

With the Blue365 wellness discount program, CareFirst members receive discounts on various items such as items through Reebok, Jenny Craig and various gym memberships. To take advantage of Blue365, register at www.carefirst.com/wellnessdiscounts. Have your CareFirst member ID card handy.

You are also eligible to receive vision discounts through Eye Med and discounts on hearing relating items through TruHearing.

Delta Dental PPO Plan

DISCOUNTS ON HEARING AIDS AND LASIK SERVICES FROM DELTA DENTAL

Delta Dental members are eligible to receive a discount from Amplifon on hearing aids. Members are able to receive an average of 62% off of the retail price for a pair of hearing aids. You will also have access to a national network of hearing aid professionals. Call (888) 779-1429 to schedule your hearing exam with a local participating provider near you or visit www.amplifonusa.com/deltadentalins. Delta Dental has partnered with QualSight to offer members access to discounts on LASIK services. Through QualSight, you can save 40-50% off the national average price of Traditional LASIK along with big savings on Custom and Custom Bladeless LASIK procedures. To learn more visit www.qualsight.com/-delta-dental or call (855) 248-2020 to speak to a QualSight care manager.

VSP Vision Plan

DISCOUNTS ON HEARING AIDS FROM VSP

VSP members are eligible to receive a discount from TruHearing on hearing aids. Members can save up to \$2,400 on a pair of hearing aids with the program. You will have access to a national network of more than 4,500 licensed hearing aid professionals. Call (877) 396-7194 to schedule your hearing exam with a local participating provider.

LASER VISION CORRECTION

VSP members will receive a discount on Laser Vision Correction surgery. You can receive an average of 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities. After surgery, use your frame allowance (if eligible) for sunglasses from any VSP doctor.

You can learn more about the HCPSS benefit offerings by reviewing the Active Benefits Enrollment Guide and by visiting www.hcpss.org/employees/benefits.

PREMIUMS/BOARD CONTRIBUTIONS

The Board strives to maintain high quality affordable health care options. Premium costs have changed for medical coverage for 2020, dental and vision premiums will remain the same. Please review the rate tables in the Benefits Guide for the specific changes. The Board will continue to pay 87% of the monthly health premium for benefits eligible employees with a hire date on or prior to 06/30/2011. All benefits eligible employees with a hire date on or after 07/01/2011 receive a Board contribution of 85% towards their monthly health premium.

BENEFITS OPEN HOUSE EVENT

To learn more about the health, dental, vision, flexible spending accounts (Health Care and Dependent Care), disability, voluntary benefits, 403(b) tax sheltered annuity programs, and 457(b) deferred compensation program, please attend one of the Benefits Open House Events. All Open House Events will be held at **Ascend One Conference Center** - 8930 Stanford Boulevard, Columbia, MD 21045.

Monday, October 14, 2019	10:00 a.m.–5:00 p.m.	Room: Susquehannah
Tuesday, October 29, 2019	10:00 a.m.–5:00 p.m.	Room: Susquehannah
Wednesday, November 6, 2019	12:30 p.m.–5:00 p.m.	Room: Susquehannah

Carrier representatives will be present to provide information and to answer any questions. In addition, the Benefits Office staff will be onsite to answer questions and / or to assist with enrollment.

DEPENDENT ELIGIBILITY VERIFICATION

Employees who add new dependents to their health benefits plans during the open enrollment period and throughout the benefits calendar year as a result of a qualifying event, will be required to provide verification of their newly enrolled dependent(s). The verification of eligible dependent(s) will be conducted by Bolton Partners, Inc., an independent third party that specializes in dependent verification. You will receive an information packet in the mail with instructions on how to submit verification documents.

INSURANCE CARDS

New insurance cards will be issued only if you are new to a plan or if you changed your coverage level. As a reminder, there are no ID cards for the Vision Service Plan (VSP).

IMPORTANT THINGS TO REMEMBER

The Open Enrollment Period is October 14 - November 11, 2019. All benefit change(s) must be completed by the end date as **Open Enrollment will not be extended.**

- Learn more about HCPSS Benefits Offerings by visiting our website at www.hcpss.org/employees/benefits.
- Review the Benefits Enrollment Guide.
- All employees must log onto Workday to review/update personal information and to elect/change/cancel benefits.
- If you are not making any changes to your current medical, dental, vision, short-term disability, long-term disability, critical illness, supplemental life, accident and whole life insurance benefits elections, they will continue for Plan Year 2020.
- ***Your current Health Care and/or Dependent Care Flexible Spending Accounts (FSA) will not carry over to Plan Year 2020. You must make a new election for Plan Year 2020 for Health Care and/or Dependent Care FSA by logging onto Workday. The maximum FSA Health Care election for Plan Year 2020 is \$2,700. The maximum FSA Dependent Care election for Plan Year 2020 is \$5,000 per household.***
- FSA Health Care Debit cards are issued every three years. If your card is less than three years old, your new Health Care FSA election amount will be loaded to your existing FSA debit card. New enrollees will receive a debit card with your new election amount loaded.
- You MUST select a primary care physician for the CareFirst BlueChoice HMO Open Access.
- You MUST select a primary care dentist for Cigna DHMO dental plan.
- Enter your Life Insurance Beneficiary designations on Workday.
- If you are applying for Supplemental Life Insurance above the guarantee issue coverage, you must complete a Statement of Health Form and mail it to MetLife by November 30, 2019. Your deduction for the additional coverage will begin the first of the month following notification of approval from MetLife.
- You MUST enroll in Supplemental Life for yourself, in order to elect Dependent Supplemental Life.
- If you elected Supplemental Dependent Life, you MUST complete a Statement of Health Form for each of the covered dependent(s) and mail it to MetLife by November 30, 2019.
- You MUST only select one Supplemental Life plan in addition to Dependent Supplemental Life.
- To enroll in Whole Life Insurance with Long Term Care Rider contact The Farmington Co. at (800) 621-0067.
- Dependent eligibility verifications will be required for any new dependents added to your benefits during open enrollment. You will receive an information packet in the mail with instructions for providing documentation, from Bolton Partners, Inc.
- New insurance cards will be issued only if you are new to a plan or if you changed your coverage level. There is no vision insurance card for the Vision Service Plan (VSP).
- All medical, dental, vision, flexible spending accounts, disability, and voluntary benefits deductions are based on 20 pays.
- All benefits elections take effect on January 1, 2020.
- Payroll Deductions will begin January 10, 2020.

QUESTIONS?

HCPSS Benefits Support Center (BSC) representatives are available to answer any questions you may have Monday through Friday, 8:30am to 5:30pm. Please call 855-245-9479. Additionally, the Benefits Office staff will be available to answer any questions and assist with enrollments Monday through Friday, 8:30am to 4:30pm at the Benefits Office located below.

10910 Clarksville Pike • Ellicott City, MD 21042

You may also email the Benefits Office staff at:

Steven_rosario@hcpss.org | Cynthia_harrison@hcpss.org | Jeeni_griffin@hcpss.org