

WELCOME TO OPEN ENROLLMENT

The Annual Open Enrollment Period is October 11 - November 5, 2021. 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 2022. These offerings include: 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 CIGNA PPO, a dental maintenance organization (DMO) plan with Aetna DMO, 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.

VIRTUAL BENEFITS FAIRS

HCPSS will be hosting a Virtual Benefits Fair during the Open Enrollment period to offer employees and their families a safe alternative to meet with representatives from the Carriers and the Benefits Office. Employees will have the opportunity to enter a Benefits virtual chat room dedicated to each of the Carriers and the Benefits Office by visiting www.hcpsswellness.com and following the directions for "Accessing Virtual Benefits Fairs." Employees will have the opportunity to meet with representatives real time, to learn more about their benefit options, and ask benefits related questions. **Please note: the chat rooms are accessible to all HCPSS active employees and their families. These are not confidential one on one sessions, so please be mindful of disclosing any personal information. Please see below for specific virtual fair dates and times.**

Monday, October 18, 2021	10:30 am- 12pm, and 1pm-4:30pm
Tuesday, October 26, 2021	10:30 am- 12pm, and 1pm-4:30pm
Wednesday, November 3, 2021	10:30 am- 12pm, and 1pm-4:30pm

The Virtual Benefits Fair will be accessible by visiting: <https://www.employeehealthhub.com/hcpss/>.

WHAT'S NEW FOR PLAN YEAR 2022?

SPECIALIST CO-PAY CHANGE

The specialist co-pay for all medical plans increased by \$5.00. Please refer to the Open Enrollment Benefits Guide benefit charts for co-pay amounts.

EMPLOYER BOARD CONTRIBUTIONS / EMPLOYEE CONTRIBUTIONS

Starting January 1, 2022, the employee/employer cost share for all medical plan premiums will be modified as follows in accordance with the collective bargaining agreements:

- Active Full-time / Part-Time Employees with a Hire Date on or Before 06/30/2011 will contribute 14% and the BOE will contribute 86%.
- Active Full-time / Part-Time Employees with a Hire Date on or After 07/01/2011 and on or Before 06/30/2021 will contribute 15% and the BOE will contribute 85%.
- Active Full-time / Part-Time Employees with a Hire Date on or After 07/01/2021 will contribute 16% and the BOE will contribute 84%.

NEW WORKDAY LAYOUT FOR MAKING BENEFIT SELECTIONS

Under the new Workday layout, benefit options are visually separated out into its own benefit categories in a single display making it easier for employees to navigate through their benefit elections. In the new layout employees will select “tiles” (for example; medical will have its own tile, dental will have its own tile etc.) to make benefit elections.

If an employee is currently enrolled in a benefit, underneath the tile it will display the term “manage”. Click on “manage” to view and make any changes to your benefit elections, and follow the prompts on the screen to continue. If you have made an error during the process, Workday will display an error message in red. Please click on the error message which will inform you as to what the error is. After correcting the error proceed following the prompts.

If an employee is enrolling in a new benefit for the first time, underneath the tile is will display the term “enroll”. Click on “enroll” and enroll in the benefit and follow the prompts on screen to continue. If there is an error, please refer to the above process.

Once you have completed your Open Enrollment benefit election process by following all of the prompts, review /sign and submit your benefit elections in order for your new elections to take effect 01/01/2022.

IMPORTANTNOTE

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 2022.

You must make new election(s) for the following benefits for Plan Year 2022. Your current benefits elections will not carry over to Plan Year 2022.

- Health Care FSA (New FSA maximum is \$2,750 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.

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](https://www.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 can make the most of their plan by taking advantage of several discounts and services to promote healthy living. These services include fitness and health coaches, activity trackers and blood pressure monitors, hearing aids, nutritional services and acupuncture, oral care products and kits, vision discounts, weight management programs and meal plans, and much more.

For more detailed information regarding discounts from Aetna, log in to your member website at

<https://www.aetnaresource.com/p/HCPSS-Open-Enrollment-2022>.

MANAGE A HEALTH CONDITION WITH AETNA HEALTH CONNECTIONSSM DISEASE MANAGEMENT PROGRAM

Our 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.

AETNA MATERNITY PROGRAM

Get help from the time you start planning a family, through your pregnancy as well after your baby is born. The Aetna Maternity Program is designed to help you make choices for a healthy pregnancy, cope with post partum depression and more. Log in to your member website at [aetna.com](https://www.aetna.com) and look under “Stay Healthy.”

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 VSP and discounts on hearing relating items through TruHearing.

CareFirst HMO Plan continued

STAYING HEALTHY DURING PREGNANCY PROGRAM

Carefirst BlueCross BlueShield and CareFirst BlueChoice, Inc (CareFirst) wantto help you maintain the best possible health throughout your pregnancy. There are many programs and tools available to help you prepare for the healthiest arrival. Such as an online pregnancy center, 24 hour healthcare advice line, high risk pregnancy support, and more. For more information, please visit www.carefirst.com/pregnancy or call 800-535-9700.

CIGNA PPO Dental Plan

DISCOUNTS ON HEARING AIDS AND LASIK SERVICES FROM CIGNA

CIGNA 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 (877) 822-7095 to schedule your hearing exam with a local participating provider near you or visit www.amplifonusa.com/healthyrewards. CIGNA has partnered with LasikPlus, and other participating U.S. laser network providers, to offer members access to discounts on LASIK services. Through these partners, you can get discounts off the national average price of Traditional LASIK along with big savings on custom bladeless LASIK procedures. To learn more call (800) 870-3470 to speak to find a provider near you.

OTHER CIGNA HEALTHY REWARDS:

By using your CIGNA ID card, members have access to discounts on health programs and products including Nutritional Meal Delivery Services, Fitness Memberships and Devices, Alternative Medicine, Yoga Products and Virtual Workouts. For more information on these offerings, login to www.mycigna.com or call (800) 870-3470.

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.

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 Impact, 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 medical insurance cards will be issued for plan year 2022. Dental ID cards will be issued only if you are new to the dental plan or if you have changed your coverage level. There are no ID cards for the Vision Service Plan (VSP).

PREMIUMS/BOARD CONTRIBUTIONS

The Board strives to maintain high quality affordable health care options. Premium costs have changed for medical, dental and vision coverage for Plan year 2022- please review the rate tables in the Benefits Guide.

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

IMPORTANT THINGS TO REMEMBER

- **The Open Enrollment Period is October 11 - November 5, 2021.** 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 2022.
- *Your current Health Care and/or Dependent Care Flexible Spending Accounts (FSA) **will not carry over** to Plan Year 2022. You must make a new election for Plan Year 2022 for Health Care and/or Dependent Care FSA by logging onto Workday. The maximum FSA Health Care election for Plan Year 2022 is \$2,750. The maximum FSA Dependent Care election for Plan Year 2022 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 (PCP) for the CareFirst BlueChoice HMO Open Access.
- You **MUST** select a Primary Care Dentist (PCD) under the Aetna DMO plan upon receiving the Welcome Kit from Aetna. Your selection of PCD must be made prior to the 15th of the month, so that you are able to visit the selected PCD by the 1st of the next month.
- 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, 2021. 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, 2021.
- 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 Impact, Inc.
- 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, 2022.
- Payroll Deductions will begin January 7, 2022.

QUESTIONS?

HCPSS Benefits Call Center is available to answer any questions you may have Monday through Friday, 8:30am to 4:30pm. Please call (410) 313-7333; select option 1.

You may email the Benefits Office staff at benefits@hcpss.org