

PRINCE GEORGE'S COUNTY GOVERNMENT

# 2020 EMPLOYEE BENEFITS

LIGHTS! CAMERA! ENROLL!



Angela D. Alsobrooks  
County Executive



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# WELCOME

## Lights! Camera! Enroll!

It's time for Open Enrollment 2020—this is your annual opportunity to make changes to your benefit elections. Open Enrollment will begin on Friday, November 1 and will end on Friday, November 15, 2019. We encourage you to review your current benefit elections and decide if you need to make any changes for calendar year 2020.

## You are the star of the show!

Open Enrollment is the time of year to review your coverage and carefully consider the healthcare needs of you and your family. We strongly encourage you to review all plan materials to make an informed decision about your healthcare. Being a well-informed consumer can potentially save you money—and help you maximize your employee benefits.

## Here's your script—learn your lines!

This Benefits Guide is a valuable source of information about the County's health benefit plans. Review this guide to learn more about the changes and requirements of the health benefit plans for calendar year 2020. This guide also includes a list of the dates, times, and locations of each of the provider sessions. These sessions will provide you with opportunities to meet with the health benefit plan providers and ask any questions that you may have about the plans. Additionally, each provider session will have plenty of giveaways and raffle drawings.

Complete the online enrollment process via Employee Self-Service by Friday, November 15, 2019, to make any changes to your 2020 benefit elections. Make yourself a VIP—take advantage of this opportunity to review, elect, and reward yourself by enrolling in your employee benefits.

# OPEN ENROLLMENT 2020

**LIGHTS! CAMERA! ENROLL!**  
**FRIDAY, NOVEMBER 1 – FRIDAY, NOVEMBER 15, 2019**

## WHAT YOU NEED TO KNOW...

Open Enrollment 2020 begins Friday, November 1, 2019, and ends at 11:59 p.m. on Friday, November 15, 2019. Open Enrollment is the annual opportunity for you to make changes to your current benefit elections, outside of the initial-hire period and qualifying life events. The benefits you select during Open Enrollment will be effective January 1 – December 31, 2020. Once the deadline to enroll passes, you will not be able to make changes to your elections unless you experience a qualified status change, for example, marriage, divorce, birth or adoption of a child or loss of coverage.

Open Enrollment is your once-a-year opportunity to review your options and select or change to the benefits that work best for you and your family. Make the most of our investment in you with the choices you make during Open Enrollment.

## PREMIUM RATE INCREASES

As healthcare costs across the nation continue to rise, so do the costs in the Prince George's County Government. Therefore, your costs for coverage will increase in 2020. The County will pay much of this increase, but some of this cost will be shared with employees.

To keep future cost increases at a minimum, we must work together to properly use the benefits—visiting in-network doctors, using wellness resources, visiting urgent care facilities instead of going to the emergency room when appropriate, and obtaining generic instead of brand-name prescription drugs.

## WHAT YOU NEED TO DO...

### Preparing for Open Enrollment 2020

All employees are strongly encouraged to do the following prior to the start of Open Enrollment:

1. Review your current elections in Employee Self-Service and consider potential changes, if applicable.
2. If you do not remember your Employee Self-Service user ID and password, please contact the IT Helpdesk at 301-883-5322. You will need this to access ESS and make changes to your elections.
3. Please note, to receive Medical Opt-Out Credits and/or participate in a Flexible Spending Account (FSA), you must enroll/re-enroll every year during Open Enrollment. FSA elections do not rollover.
4. Review the Open Enrollment 2020 event schedule and select a convenient Info Session to meet with our healthcare providers or attend a computer session for assistance with making your 2020 elections online.

**Join us for the Open Enrollment 2020 Kickoff Event on Monday, November 4, at the Sports and Learning Complex. Our healthcare providers will be onsite—and we'll have some fun wellness activities and prizes!**



## Open Enrollment Kickoff Event!

**Come to the Open Enrollment Kickoff Event on Monday, November 4!**

OHRM encourages all employees to attend the Open Enrollment Kickoff Event on Monday, November 4, 2019, at the Prince George's County Sports and Learning Complex.

The Open Enrollment Kickoff Event will feature:

- Benefit providers
- Deferred compensation representatives
- Information sessions to learn more about your benefits
- Wellness activities
- Prizes and giveaways
- And more!

### Open Enrollment 2020 - Event Schedule

Event	Date	Time	Location
<b>Kickoff Event!</b>	<b>Mon. 11/4</b>	<b>10a-4p</b>	<b>Prince George's Sports and Learning Complex, 8001 Sheriff Road, Landover, MD 20785</b>
Info Session	Wed. 11/6	10a-2p	RMS Building, 1400 McCormick Drive, <b>Lobby</b> , Largo, MD 20774
Info Session	Thu. 11/7	10a-2p	CAB Building, 14741 Governor Oden Bowie Drive, <b>Lobby</b> , Upper Marlboro, MD 20772
Info Session	Fri. 11/8	12:30-4p	MOC Building, 8400 D'Arcy Road, Forestville, MD 20747
Info Session	Thur. 11/14	4-7p	RMS Building, 1400 McCormick Drive, <b>Lobby</b> , Largo, MD 20774
Computer Session	Wed. 11/6	10a-2p	RMS Building, 1400 McCormick Drive, <b>REC Computer Lab</b> , Largo, MD 20774
Computer Session	Thu. 11/7	10a-2p	CAB Building, 14741 Governor Oden Bowie Dr, <b>3rd floor 3087</b> , Upper Marlboro, MD 20772
Computer Session	Fri. 11/8	12:30-4p	MOC Building, 8400 D'Arcy Road, <b>Operations Center</b> , Forestville, MD 20747
Computer Session	Tue. 11/12	12:30-4p	MOC Building, 8400 D'Arcy Road, <b>Operations Center</b> , Forestville, MD 20747
Computer Session	Wed. 11/13	10a-2p	CAB Building, 14741 Governor Oden Bowie Dr, <b>3rd floor 3087</b> , Upper Marlboro, MD 20772
Computer Session	Fri. 11/15	10a-4p	RMS Building, 1400 McCormick Drive, <b>REC Computer Lab</b> , Largo, MD 20774

# ELIGIBILITY

## WHO IS ELIGIBLE

Active employees who receive an annual salary and work at least 15 hours per week and their eligible dependents may enroll for the benefits described in this guide. You are required to provide documentation to add dependents to your health plans.

**The following must be submitted to verify coverage eligibility:**

Eligible Dependent:	Required Documents:
Lawful Spouse	<ul style="list-style-type: none"> <li>• Marriage certificate; AND</li> <li>• Social Security card</li> </ul>
Natural born child (under age 26)	<ul style="list-style-type: none"> <li>• Birth certificate; AND</li> <li>• Social Security card</li> </ul>
Guardianship (up to age 18)	<ul style="list-style-type: none"> <li>• Temporary or final guardianship order; AND</li> <li>• Social Security card</li> </ul>
Adoption (child is eligible at the time of placement)	<ul style="list-style-type: none"> <li>• Adoption decree or judgement</li> </ul>
Adoption in a foreign country (child is eligible at the time of placement)	<ul style="list-style-type: none"> <li>• Birth certificate (certified and translated into English); AND</li> <li>• Adoption order (certified and translated into English)</li> </ul>

## DEPENDENT VERIFICATION

- If you enroll dependents, you must verify their **eligibility**.
- Ineligible dependents include dependent children over the age of 26 (unless disabled), dependent children for whom you do not have guardianship or legal custody, common law spouses, or ex-spouses that have not been removed from the plan.
- Unverified dependents will be dropped from coverage within 30 days of enrollment.
- Dependents who are removed from the group health plans due to a lack of documentation or insufficient documentation will not be eligible for COBRA continuation coverage.

## DISABLED DEPENDENTS

Children who are physically or mentally incapable of self-support as determined by medical certification continue on your County coverage beyond the normal age limit if the disability continues and the child remains unmarried. You may be asked to provide certification of the child's disability every two to three years. Documentation must be on file prior to the child reaching the limiting age.

## WHERE TO SEND DOCUMENTATION

***All documents must include the Employee's Name and Employee ID number.***

Submit documents to the **OHRM Benefits and Pensions Division** via:

- Email a picture of your documents or scan to [Benefits@co.pg.md.us](mailto:Benefits@co.pg.md.us);
- Fax your documents to (301) 883-6192 or (301) 883-6358; or
- Mail or Hand-Delivery: 1400 McCormick Drive, Suite 245, Largo, MD 20774

# WHEN TO ENROLL

## WHEN TO ENROLL

The annual Open Enrollment period for 2020 benefits is November 1 – November 15, 2019. Eligible employees can enroll in or make changes to the medical, dental, vision, prescription drug, flexible spending accounts (FSAs), long-term disability, and supplemental life insurance benefit plans. The benefits you select will be effective January 1, 2020.

New employees have 30 days from the date of hire to enroll in the medical, dental, vision, prescription drug, flexible spending accounts (FSAs), long-term disability, and supplemental life insurance benefit plans. Benefits coverage is effective the first of the month following the date you enroll.

## WHAT HAPPENS IF YOU DO NOT ENROLL?

Open Enrollment: If you are an active employee and do not enroll during Open Enrollment, your current elections will roll over at 2020 rates, but your FSA enrollment will not.

New Hires: If you are a new hire and do not take action during your first 30 days of employment, you will receive basic life insurance and Employee Assistance Program (EAP) benefits. After the initial enrollment window closes, you must wait until the next annual Open Enrollment period or until you have a qualifying life event to enroll in or make changes to benefits.

## CHANGING YOUR COVERAGE

During the annual Open Enrollment period, you can make changes to your benefits coverage for the upcoming year. After the annual Open Enrollment period, you may only make changes to your coverage if you have a qualifying life event, which includes:

- Marriage or divorce
- Birth or adoption of a child
- Death of a dependent
- Loss or gain of other coverage by you or a covered dependent
- Eligibility for Medicare by you or a covered dependent
- Covered dependent turns age 26

If you have a qualifying life event, contact the Benefits and Pensions Division within 30 days of the event to make changes to your coverage. If you fail to notify the Benefits and Pensions Division within 30 days, you may not enroll, cancel, or change coverage until the next annual Open Enrollment, unless you have another qualifying life event.

## QUESTIONS?

Employees who need assistance outside of the computer assistance sessions can contact the Benefits and Pensions Division:

Call: 301-883-6380 /Email: [Benefits@co.pg.md.us](mailto:Benefits@co.pg.md.us)

Visit: 1400 McCormick Drive, Suite 245, Largo, MD 20774

Hours: 8:30 a.m. - 5:00 p.m., Monday through Friday

In addition, visit <https://www.princegeorgescountymd.gov/OE> for enrollment resources, including checklists, instructions, and more...

# HOW TO ENROLL

## CORE BENEFIT PLANS ENROLLMENT

Enrollment during the annual open enrollment period can be made through Employee Self Service (ESS) portal. You can access the ESS portal on any computer with an internet connection at <https://portal.sap.mypgc.us>.

*ESS will not be available for Open Enrollment changes on Tuesday, November 5, 2019 due to payroll processing.*

## VOLUNTARY BENEFIT PLANS ENROLLMENT

A full-time, part-time, or Limited Term Grant Funded (LTGF) employee who is actively working 15 or more hours per week can enroll in one or more of the voluntary benefit plan(s) listed below.

The following program(s) are not available for enrollment through ESS and may have different effective dates:

UNUM Whole Life insurance	UNUM Critical Illness Insurance
UNUM Group Accident	UNUM Short Term Disability
Legal Resources	Legal Shield
AFLAC Supplemental Dental	

You must contact the iBenefits Call Center at 1-877-242-1553 to enroll in the Unum and Legal plans. If you want to elect the Aflac Supplemental Dental plan, please call 410-394-9617 to speak with a representative. To cancel a current enrollment in a voluntary plan, you must contact the Provider directly.

## REVIEW YOUR OPTIONS

1. **Review This Benefits Enrollment Guide:** It includes information to help you select the coverage options that are best for you and your family. Make sure you have your assigned ESS username and password available.
2. **Login to your Employee Self Service (ESS) portal:** Select The Open Enrollment Module – available in ESS Friday, November 1, 2019 through Friday, November 15, 2019 until 11:59 p.m.
3. **Update Personal Information:** Verify that your dependent information, mailing address, and beneficiaries are up-to-date.
4. **Select Coverage:** Make your elections by clicking the box next to each benefit and each dependent you want to cover. Uncheck/zero out any boxes for coverage/beneficiary you no longer want.
5. **Confirm Your Elections:** Review your elections. Print and save your confirmation statement. Check your deductions are correct on your first paycheck in January 2020.

### PLEASE NOTE:

***The online enrollment portal closes at 11:59 p.m. on Friday, November 15, 2019.***



# BENEFITS AT-A-GLANCE



## Medical

Choose from three comprehensive medical plan options: Kaiser Permanente Health Maintenance Organization (HMO), Cigna Open Access (HMO), or Cigna Open Access Plus (PPO).



## Prescription Drug

Select prescription drug coverage through Express Scripts and have access to a nationwide network of pharmacies. Prescription drug coverage is not included with medical coverage.



## Dental

Dental coverage is available through Aetna. Benefits are available for both in- and out-of-network dental services.



## Vision

The Vision Service Plan (VSP) offers two vision coverage options: the VSP Basic Plan and VSP Buy-Up Plan.



## Flexible Spending Accounts

Save on everyday expenses with two tax-free accounts administered through ConnectYourCare: Health Care FSA and Dependent Care FSA



## Basic, Accidental and Supplemental Life Insurance

Prince George's County Government provides eligible employees with Basic, Accidental, & Supplemental Life insurance.



## Retirement Defined Benefit (Pension)

Administered by Maryland State Retirement and Pension System (MSRPS), you and Prince George's County Government fund the Prince George's County Government Retirement Plans. All eligible employees automatically contribute a percentage (varies by pension plan) of their annual salary and receive a defined monthly pension benefit at retirement.



## Employee Assistance Program

Free counseling and support to help you and your family manage life's ups and downs.



## Retirement Defined Contribution

Boost your retirement savings and achieve your goals with tax-deferred contributions to a 457 plan.



## Extra Life Insurance (XLI) & Long-Term Disability (LTD)

You may purchase supplemental XLI & LTD coverage.



## Voluntary Benefits

You have the option to purchase supplemental coverage for yourself, your spouse, and dependent child(ren).

# ENROLLMENT 411...

Benefit	Options	Who Pays	How to Enroll
<b>Medical</b>	<ul style="list-style-type: none"> <li>Cigna HMO, PPO</li> <li>Kaiser HMO</li> </ul>	You pay a portion of the cost of coverage Premiums are deducted from your paycheck on a pre-tax basis	Employee Self-Service
<b>Prescription</b>	<ul style="list-style-type: none"> <li>Express Scripts</li> </ul>	You pay a portion of the cost of coverage Premiums are deducted from your paycheck on a pre-tax basis	Employee Self-Service
<b>Dental</b>	<ul style="list-style-type: none"> <li>Aetna DMO</li> <li>Aetna PPO</li> </ul>	You pay a portion of the cost of coverage Premiums are deducted from your paycheck on a pre-tax basis	Employee Self-Service
<b>Vision</b>	<ul style="list-style-type: none"> <li>Base Plan</li> <li>Buy-up Plan</li> </ul>	You pay a portion of the cost of coverage Premiums are deducted from your paycheck on a pre-tax basis	Employee Self-Service
<b>Extra Life Insurance (XLI)</b>	<ul style="list-style-type: none"> <li>Extra Life Insurance (XLI)</li> </ul>	Basic Life Insurance is 100% employer paid. Optional upgrades available at a cost to the employee You pay the full cost of coverage for Extra Life Insurance on an after-tax basis.	Employee Self-Service
<b>Long Term Disability</b>	<ul style="list-style-type: none"> <li>Aetna Long Term</li> </ul>	You pay the full cost of coverage Premiums are deducted from your paycheck on an after-tax basis	Employee Self-Service
<b>Flexible Spending Accounts (FSAs)</b>	<ul style="list-style-type: none"> <li>Health Care FSA</li> <li>Dependent Care FSA</li> </ul>	Contributions are deducted from your paycheck on a pre-tax basis	Employee Self-Service
<b>Supplemental Insurance</b>	<ul style="list-style-type: none"> <li>Unum Whole Life</li> </ul>	You pay the full cost of coverage Premiums are deducted from your paycheck on an after-tax basis	Enroll Contact iBenefits: 1-844-816-0224 Cancel Contact UNUM: 1-800-635-5597
	<ul style="list-style-type: none"> <li>Unum Critical Illness</li> <li>Unum Group Accident</li> </ul>	You pay the full cost of coverage Premiums are deducted from your paycheck on an after-tax basis	Enroll Contact iBenefits: 1-844-816-0224 Cancel Contact UNUM: 1-800-635-5597
	<ul style="list-style-type: none"> <li>Aflac Supplemental Dental</li> </ul>	You pay the full cost of coverage Premiums are deducted from your paycheck on an after-tax basis	Enroll/Cancel Contact AFLAC: 1-800-992-3522
<b>Legal Services</b>	<ul style="list-style-type: none"> <li>Legal Resources</li> <li>Legal Shield</li> </ul>	You pay the full cost of coverage Premiums are deducted from your paycheck on an after-tax basis	Enroll Contact iBenefits: 1-844-816-0224

# CORE BENEFITS OVERVIEW

Your benefits are an important part of your overall compensation. Prince George's County Government offers a comprehensive array of benefits to protect your health, wellbeing, family, finances, and lifestyle, including:

- Medical Benefits
- Prescription Drug Program
- Dental Benefits
- Vision Benefits
- Life & Disability Insurance
- Work & Life Benefits



# MEDICAL BENEFITS

Eligible employees have the following health plan choices:

- Cigna HMO, PPO
- Kaiser Permanente HMO

Your health insurance premium cost is shared with the County, which contributes up to 75% toward the total cost (HMO – 75% and PPO – 70%). All health insurance premium deductions are made on a pre-tax basis.

## Dependent Coverage

Make sure your dependents are eligible for insurance and that you have the appropriate documentation to show eligibility before you enroll them in any coverage. You are required to provide the documentation within 30 days of enrollment to the Benefits and Pensions Division to enroll a new dependent. For newborn children, age three months or younger, a hospital-issued birth certificate will be accepted in place of a government-issued birth certificate. If documents to prove dependent eligibility are not received within the first 30 days of their enrollment, your dependent's coverage will be terminated prospectively.



# MEDICAL BENEFITS

Benefit	Cigna PPO	Cigna HMO	Kaiser Permanente HMO
<b>Calendar Year Deductible</b>			
<b>Employee Only</b>	\$300	\$50	NONE
<b>Family</b>	\$550	NONE	NONE
<b>Out-of-Pocket Maximum</b> (per calendar year) * Please Note: some benefits do not apply toward the out-of-pocket maximum			
<b>Employee Only</b>	\$2,000	\$2,000	\$3,500
<b>Family</b>	\$4,000	\$4,000	\$9,400
<b>Emergency Services</b> (emergency room/care copays waived if admitted)			
<b>Emergency Room/Care</b>	\$150 copay/visit	\$150 copay/visit	\$50 copay/visit
<b>Emergency Medical Transport</b>	No charge	No charge	No charge
<b>Urgent Care</b>	\$50 copay/visit	\$50 copay/visit	\$15/visit
<b>Mental Health</b>			
<b>Outpatient Care</b>	Covered 80% after deductible	\$35 copay/visit	Individual: \$10/visit; Group: \$5/visit
<b>Inpatient Care</b>	Covered 80% after deductible	\$250 copay/visit	\$100/admission
<b>Maternity Care</b>			
<b>Office Visits (for mother)</b>	Covered 80% after deductible	No charge	No charge
<b>Childbirth/delivery: Professional services</b>	Covered 80% after deductible	No charge	Included in facility fee
<b>Childbirth/delivery: Facility services</b>	Covered 80% after deductible	\$250 copay/admission	\$100/admission
<b>Inpatient Services</b>			
<b>Hospital Stay</b>	Covered 80% after deductible	\$250 copay/admission	\$100/admission
<b>Hospice Care</b>	Covered 80% after deductible	No charge	No charge
<b>Skilled Nursing Care</b>	Covered 80% after deductible	No charge	\$100/admission
<b>Outpatient Services</b>			
<b>Primary Care Visit</b>	Covered 80% after deductible	\$30/visit, deductible does not apply	\$15/visit
<b>Specialist Visit</b>	Covered 80% after deductible	\$35/visit, deductible does not apply	\$15/visit
<b>Preventive Care</b>	Covered 80% after deductible	PCP: \$30/visit, deductible does not apply Specialist: \$35/visit, deductible does not apply	No charge
<b>Diagnostic Test (X-ray, bloodwork)</b>	Covered 80% after deductible	No charge, deductible does not apply	No charge

# PRESCRIPTION DRUG PROGRAM

The health and well-being of employees is a priority in Prince George's County Government. All of the benefits available to you reflect the County's commitment to providing high-quality, affordable medical plans and represent a significant component of your total rewards.

Access to prescription drugs is a vital part of our medical coverage. The County's prescription drug benefit through **Express Scripts** has a mandatory home delivery program for all maintenance medications. Your prescription drug insurance premium cost is shared with the County, which contributes 85% toward the total cost and you pay 15%

For greater details about the Prescription Drug Program, visit: [www.princegeorgescountymd.gov/OE](http://www.princegeorgescountymd.gov/OE).

	Pharmacy	Home Delivery
<b>Annual Deductible</b>	\$50 per person	
<b>Supply Limitations</b>	30-day supply	90-day supply
<b>Generic Drug</b>	\$10 copay	\$20 copay
<b>Formulary Brand Name Drug</b>	20% coinsurance (\$20 min/\$50 max)	20% coinsurance (\$40 min/\$100 max)
<b>Non-Formulary Brand Name Drug</b>	30% coinsurance (\$40 min/\$50 max)	30% coinsurance (\$80 min/\$100 max)

## What are Maintenance Medications?

Maintenance medications are prescription drugs that you need to take regularly. Drugs that treat ongoing conditions or needs like asthma, diabetes, birth control, high cholesterol, high blood pressure, and arthritis are usually considered maintenance medications. A maintenance medication can also be a drug that you take for three to six months and then discontinue. For example, an allergy medication that you take throughout the spring and summer could be considered a maintenance medication.





# DENTAL BENEFITS

The Dental Benefits provide coverage for many dental services that you and your eligible dependents may need. The plan offers network (DMO) or out-of-network (PPO) coverage. Aetna Dental provides national network coverage for Prince George’s County Government through two networks: Aetna Dental DMO and Aetna Dental PPO. You receive greater benefit coverage when you use a provider who participates in the Aetna Dental participating network.

***Aetna Dental DMO features:***

- A primary care dentist to manage your dental care. You choose the dentist from the dental network. Your primary care dentist can refer you to a specialist when necessary.
- No deductibles.
- No annual dollar maximums.

***Aetna Dental PPO features:***

- No referrals.
- No need to choose a primary care dentist.

This Dental Plan Summary Chart should be used as a general guide only. Refer to the Dental Plan Specific Plan Details (SPD) for further information at: [www.princegeorgescountymd.gov/OE](http://www.princegeorgescountymd.gov/OE).

If the information in the summary chart differs from the Specific Plan Details Document, the Specific Plan Details Document will govern.

Plan Features	Aetna Dental DMO	Aetna Dental PPO (non-participating)
<b>Annual Deductible</b>	NONE	\$25/individual \$0 Family
<b>Annual Benefit Maximum</b>	NONE	Plan pays \$1,500/person each calendar year
<b>Preventative &amp; Diagnostic Services</b>	Refer to Fee Schedule	Covered at 100%
<b>Basic Services</b>	Refer to Fee Schedule	Covered at 100% after deductible
<b>Major Services</b>	Refer to Fee Schedule	Covered at 50% after deductible
<b>Orthodontia</b>	Refer to Fee Schedule	Covered at 50%



# VISION BENEFITS

The Vision Benefits administered by Vision Service Plan (VSP) provide you and your covered dependents with vision care services, such as eye exams, eyeglasses, and contact lenses. You can choose between Base and Buy-up Plan options. A comprehensive plan summary can be found on the County's website. Your vision insurance premium cost is shared with the County, which contributes 85% toward the total cost and you pay 15%.

Feature	Base Plan Option Your coverage with a VSP Provider	Buy-Up Plan Option Your coverage with a VSP Provider
<b>Well Vision Exam</b>	\$10 copay Once every calendar year	\$10 copay Once every calendar year
<b>Prescription Glasses</b>	\$10 copay	\$10 copay
<b>Frames</b>	<ul style="list-style-type: none"> <li>• \$150 allowance for a wide selection of frames</li> <li>• \$170 allowance for featured frames</li> <li>• 20% savings on the amount over your allowance</li> <li>• \$80 Costco frame allowance</li> <li>• Every other calendar year</li> </ul>	<ul style="list-style-type: none"> <li>• \$250 allowance for a wide selection of frames</li> <li>• \$270 allowance for featured frames</li> <li>• 20% savings on the amount over your allowance</li> <li>• \$135 Costco frame allowance</li> <li>• Every calendar year</li> </ul>
<b>Contacts</b>	<ul style="list-style-type: none"> <li>• \$150 allowance for contacts; copay does not apply</li> <li>• Contact lens exam (fitting and evaluation)</li> <li>• Every calendar year</li> <li>• Copay up to \$60</li> </ul>	<ul style="list-style-type: none"> <li>• \$150 allowance for contacts; copay does not apply</li> <li>• Contact lens exam (fitting and evaluation)</li> <li>• Every calendar year</li> <li>• Copay up to \$60</li> </ul>





# LIFE & DISABILITY INSURANCE

## Basic Life Insurance

Basic life insurance coverage is administered through Aetna at no cost to you for basic life insurance up to two (2) times your base salary—up to \$200,000 based on your salary schedule—for all benefits eligible employees:

- Coverage is effective on the date of hire.
- The coverage amount automatically increases or decreases when you have a change in base salary.

## Accidental Death & Dismemberment (AD&D) Insurance

Accidental Death & Dismemberment (AD&D) Insurance is administered through Aetna at no cost to you. You are automatically enrolled in AD&D coverage on your date of hire, to a maximum benefit of:

- \$10,000 for all other Employee groups
- \$15,000 for Deputy Sheriff Civilians
- \$50,000 for Police Officers, Deputy Sheriffs, Correctional Officers, Firefighters, Paramedics, and Emergency Response Technicians

This benefit is payable for death or personal loss caused by an accident on or off the job.



# LIFE & DISABILITY INSURANCE

## Optional Coverage Rates – Extra Life Insurance (XLI)

Administered through Aetna, employees have the option of electing extra life insurance. You pay 100% of the cost of optional life insurance. You may purchase between one and four times your base pay in XLI, up to \$600,000. However, new hire elections of more than three (3) times your base salary and/or election resulting in \$300,000 or more requires the completion of an Evidence of Insurability (EOI) form. If you are enrolling in the XLI for the first time during open enrollment, EOI is required. If you are currently enrolled in the XLI plan, you can increase the coverage by 1 times your base salary up to \$300,000 without EOI. The XLI premiums are based on your salary and age. This premium is deducted from the first paycheck of each month and is an after-tax deduction.

Age Category	Monthly Factor per \$1,000*
Under age 25	\$.098
Age 25 to 29	\$.108
Age 30 to 34	\$.118
Age 35 to 39	\$.127
Age 40 to 44	\$.216
Age 45 to 49	\$.382
Age 50 to 54	\$.706
Age 55 to 59	\$1.107
Age 60 to 64	\$1.519
Age 65 to 69	\$2.911
Age 70 and over	\$4.694

\* Instructions for Calculating Monthly Premium: Multiply your annual base salary by your XLI election (your choice being 1, 2, 3 or 4 times your base salary); round to the nearest \$1,000. Divide by 1,000. Use this number to multiply the month factor for your age category. This will provide the monthly cost of your XLI.

## Supplemental Life Insurance (SLI)

***This benefit applies only to police officers, firefighters, paramedics, emergency response technicians, and deputy sheriffs.***

SLI is administered by Aetna and is equal to 50 times your monthly salary with a maximum benefit of \$300,000, which includes both basic and supplemental life insurance. SLI is 100% employer paid.

## Long-Term Disability (LTD)

All benefits-eligible employees may enroll in the Long-Term Disability (LTD) Insurance Program administered by Aetna. Long-term disability insurance provides income replacement that may be used in conjunction with your annual or sick leave. This program has a 180-day elimination period. Income is replaced at 50% or 60% percent of your base pay, reduced by deductible income. You pay the full cost of coverage the first paycheck of each month and deductions are done on an after-tax basis. This assures that any payments you receive from the program are not taxed.

	Public Safety Employees	Non-Public Safety Employees
50% of base pay	.00046	.00383
60% of base pay	.00673	.00596

Instructions for Calculating Monthly Premium: Multiply the rate times your base salary rounded to the nearest hundred. Divide the annual amount by 12 to find the monthly cost for this benefit.

# WORK & LIFE BENEFITS

## **Flexible Spending Accounts**

The County offers benefits-eligible employees two pre-tax flexible spending accounts (FSAs)—a Health Care Flexible Spending Account and a Dependent Care Flexible Spending Account. These accounts allow you to pay for eligible, out-of-pocket health and/or dependent care expenses. Every plan year you must designate the amount to be set aside in your FSAs. Funds do not roll over; you must use all your funds by March 15th of each calendar year.

**ConnectYourCare** administers these accounts.

### ***Health Care Flexible Spending Accounts (HCFSA)***

A Health Care Flexible Spending Account (HCFSA) allows you to set aside pre-tax money to pay for eligible health care expenses for you and your qualified dependents. Examples of eligible expenses may include health plan deductibles, copayments, and coinsurance; eye exams, contact lenses, and glasses; prescription drugs; dental care, including orthodontia; and over-the-counter (OTC) products with a physician's prescription. You do not have to enroll in a County medical plan to participate in an FSA through Prince George's County Government.

You can contribute up to \$2,700 annually to a Health Care FSA, and your entire annual election is eligible to be reimbursed prior to you having the full amount deducted from your pay. Deductions for the HCFSA reduce the gross income on your Form W-2 for federal and social security tax purposes. All receipts for expenses must be submitted by April 30th of each calendar year.

### ***Dependent Care Flexible Spending Accounts (DCFSA)***

A Dependent Care Flexible Spending Account (DCFSA) allows you to set aside pre-tax money to pay for eligible dependent care expenses for your qualified dependents. Examples of eligible expenses may include child care facility fees, before-school and after-school care, or local day camp. You can contribute anywhere from \$250 up to \$5,000 annually, per family, to a Dependent Care FSA. Review a comprehensive list of eligible expenses at [www.connectyourcare.com/tools/eligible-expenses/dependent-care-fsa-eligible-expenses/](http://www.connectyourcare.com/tools/eligible-expenses/dependent-care-fsa-eligible-expenses/). All receipts for expenses must be submitted by April 30th of each calendar year.



# WORK & LIFE BENEFITS

## Employee Assistance Program (EAP)

KEPRO's Employee Assistance Program is a free confidential program that offers face-to-face consultation with a local licensed provider and/or telephonic counseling with one of our Masters level clinicians. Access to services is available 24/7, 365 days a year. The plan provides up to eight (8) counseling sessions per issue.

All calls are answered live by professional counselors and service is available when you need it. There are no call backs, messages taken, voice mail, or hold times. Counseling services are available for issues affecting employees, dependents, and their household members.

KEPRO EAP resources include:

- Confidential counseling
- Legal services
- Financial Services
- Webinar training
- Work - life referral services for child and elder care, home repairs, pet care, etc.
- Wellness coaching
- Lactation support
- 24- Hour Crisis Counseling



# DEFINED CONTRIBUTION (457) PLAN

In accordance with provisions of Section 457 of the Internal Revenue Code, Prince George's County has established a tax advantaged deferred compensation plan for its permanent full-time and part-time employees to save money for retirement. Employees will pay no state or federal income taxes on the amount deferred and investment earnings will grow tax deferred until you begin withdrawing from your account. Taxes are only paid on the amount withdrawn, after retirement or separation from employment.

## Minimum Contribution

Employees may enroll in the plan at any time. Ten dollars is the minimum amount that can be deferred per pay period. Employees may increase, reduce, or stop their contributions at any time.

## Maximum Contribution

For 2019, employees may defer up to \$19,000 annually. A deferral of \$19,000 per year equals \$730.77 per pay period. The maximum deferral may exceed these limits if you qualify for the 3 year "pre-retirement catch up" provision based on your normal retirement date or the "age 50+ catch up" provision.

The County has contracted with 2 providers to administer this program to offer a variety of investment options to participants:

- ICMA Retirement Corporation: 1-800-669-7400
- MassMutual: 1-800-743-5274

## Get to Know Your 457 Plan

- It's easy to contribute**
  - ▶ Contributions are made through a payroll deduction.
- A wide range of investments are available**
  - ▶ Create your own mix of investments choosing from available options or consider a diversified target date fund.
  - ▶ You can also get help with Guided Pathways® — [www.icmarc.org/guidedpathways](http://www.icmarc.org/guidedpathways).
- Get tax benefits along the way**
  - ▶ Pre-tax contributions lower your tax bill while earnings grow tax deferred.
  - ▶ Delay all taxes, until you take money out.
- Flexible withdrawal options**
  - ▶ Only 457 plans have no early withdrawal penalty regardless of your age.\*





# DEFINED BENEFIT (PENSION) PLAN

## PENSION PLANS

Prince George's County, Maryland (the County) has adopted separate single-employer; defined benefit plans covering all County sworn police officers, firefighters (including paramedics), deputy sheriffs, and correctional officers. These plans are included in the County's Basic Financial Statements as Fiduciary (Pension Trust) Funds. Each plan is reported in a separate Pension Trust Fund and is referred throughout this summary as "Pension Plans" or "Plans."

The Deputy Sheriffs' and Correctional Officers' Comprehensive Pension Plans were established July 1, 1996 for all new hires and participants electing to transfer from the State Retirement and Pension System of Maryland (SRPS) and the Deputy Sheriffs' and Correctional Officers' Supplemental Pension Plans. The Police, Fire Service, Deputy Sheriffs', and Correctional Officers' Pension Plans "the Comprehensive Plans" provide retirement and disability benefits for all full-time persons covered by the plans.

All other qualified general service employees and officers of the County are covered by the State of Maryland Pension and Retirement System. In addition, the County has established 7 single-employer defined benefit supplemental pension plans, which are hereafter collectively referred to as "the Supplemental Plans." Please visit <https://www.princegeorgescountymd.gov/470/Pensions-AdministrationMore> for more information on Supplemental Pension plans.

## QUESTIONS?

Employees who need assistance or have questions about their Retirement Benefits can contact:

### The Benefits and Pensions Division

**Call:** 301-883-6390

**Email:** [Pensions@co.pg.md.us](mailto:Pensions@co.pg.md.us)

**Visit:** 1400 McCormick Drive, Suite 110, Largo, MD 20774

**Hours:** 8:30 a.m. - 5:00 p.m., Monday through Friday



# VOLUNTARY BENEFITS OVERVIEW

**Voluntary benefits are insurance products that employees may choose to purchase through the County:**

- **Supplemental Insurance**
- **Legal Services**



# SUPPLEMENTAL INSURANCE



## Short-Term Disability Insurance

Unum's Individual Short-Term Disability Insurance protects a portion of your income if you are unable to work due to a covered injury or illness. Common reasons people use this coverage include injuries, a covered pregnancy, and digestive problems, such as gall bladder surgery.

Key features include:

- Income coverage of up to 60% of your salary
- You can choose a monthly benefit between \$400 and \$5,000 for covered disabilities due to injuries
- Deductions for the programs are done on an after-tax basis

## Supplemental Coverage

Unum provides supplemental insurance plans as a voluntary benefit to County employees. You pay the full cost of coverage. Premiums are deducted from your paycheck on an after-tax basis. Each plan includes a \$50 Wellness Benefit. The following plans are available through Unum:

- **Group Critical Illness Insurance Plan:**  
Group Critical Illness coverage from Unum can provide financial assistance when a serious illness strikes. Benefits paid by Group Critical Illness Insurance policies can help you with deductibles, co-pays, and other out-of-pocket costs when you are diagnosed with a covered critical illness, such as a heart attack, stroke, or cancer. Family coverage options are available for your spouse and children (under age 26).
- **Group Accident Insurance Plan:**  
Accident Insurance can pay a set benefit amount based on the type of injury you have and the type of treatment you need. It covers accidents that occur on and off the job. And it includes a range of incidents, from common injuries to more serious events. Family coverage options are available for your spouse and children (under age 26).



# SUPPLEMENTAL INSURANCE

## Whole Life Insurance

Unum is the Prince George's County Whole Life Insurance administrator providing life insurance for your spouse, children and yourself. Unum's Whole Life Insurance is designed to pay a benefit to your beneficiaries, but it can also gain cash value you can use while you are living. This benefit offers an affordable, guaranteed level premium that will not increase due to age. Unum provides the following coverage options:

- Whole Life Insurance
- Individual spouse coverage
- Individual child coverage
- Child Term Life benefit

Key features include:

- This plan can be used in addition to your County provided Basic, Supplemental, and/or Extra Life Insurance.
- You pay 100% of the premium cost.
- Deductions are taken biweekly on an after-tax basis. Payments you receive from the program are not taxed.



## Supplemental Dental Insurance

Supplemental Dental Insurance is administered by Aflac. Supplemental dental insurance is a separate plan that enhances your current dental coverage. An individual or family that needs coverage for a particular procedure not covered by their dental plan may choose to purchase supplemental dental insurance to help manage costs.

Key features include:

- Choose your own dentist
- No precertification requirements
- Pays an annual wellness benefit
- Premiums start as low as \$5.73 per week



# LEGAL SERVICES

The County offers two legal plan options: the Legal Resources Legal Plan and the LegalShield Legal Plan.

## Legal Resources Legal Plan

This plan covers the attorney fees for a broad range of the most often needed legal services. The plan covers you, your spouse, and qualifying dependent children. There are no annual usage limitations, copays, or deductibles for the fully covered services.

Plan features include:

- Legal services are covered in full for your monthly fee
- \$17 per month deducted on an after-tax basis the first pay period of the month
- Mandatory enrollment of 12 months

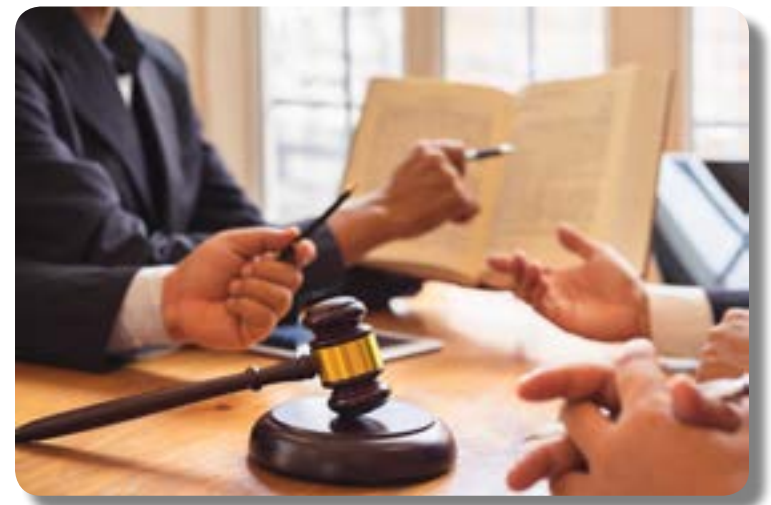


## LegalShield Legal Plan

This plan provides you access to advice and counsel on an unlimited amount of personal legal issues which include credit problems, family law, traffic violations, defense, and preparation of wills.

Plan features include:

- Deductions are taken on an after-tax basis
- Attorney fees not covered in full are provided at a 25% discount



# CONTACTS

## Office of Human Resources Management Benefits and Pension Division

### Benefits Division

1400 McCormick Drive  
Suite 245  
Largo, MD 20774  
Office: 301-883-6380

### Pensions Division

1400 McCormick Drive  
Suite 110  
Largo, MD 20774  
Office: 301-883-6390

### Office Hours:

Monday – Friday; 8:30 a.m. to 5 p.m. ET

### Office of Finance – Payroll

14741 Governor Oden Bowie Drive  
Suite 3126  
Upper Marlboro, MD 20772  
Office: 301-952-5362

Plan Provider	Phone Number	Website
<b>Medical</b>		
<b>Cigna Member Services</b>	1-800-244-6224	<a href="http://my.cigna.com">my.cigna.com</a>
<b>Kaiser Permanente Member Services</b>	301-468-6000 1-888-225-7202	<a href="http://my.kp.org/princegeorgescountygovernment">my.kp.org/princegeorgescountygovernment</a>
<b>Prescription Drug</b>		
<b>Express Scripts</b>	1-800-711-0917	<a href="http://www.express-scripts.com">www.express-scripts.com</a>
<b>Vision</b>		
<b>Vision Service Plan</b>	1-800-877-7195	<a href="http://www.vsp.com">www.vsp.com</a>
<b>Dental</b>		
<b>Aetna</b>	1-877-238-6200	<a href="http://www.aetna.com">www.aetna.com</a> DMO: <a href="http://www.aetnadmodental.com">www.aetnadmodental.com</a> PPO: <a href="http://www.aetnappodental.com">www.aetnappodental.com</a>
<b>Life Insurance &amp; Disability</b>		
<b>Aetna Long-Term Disability</b>	1-866-326-1380	<a href="http://www.aetna.com">www.aetna.com</a>
<b>Aetna Life Insurance</b>	1-800-523-5065	<a href="http://www.aetna.com">www.aetna.com</a>
<b>Flexible Spending Accounts</b>		
<b>ConnectYourCare</b>	1-877-292-4040	<a href="http://www.connectyourcare.com">www.connectyourcare.com</a>
<b>Employee Assistance Program</b>		
<b>KEPRO</b>	1-877-334-0530	<a href="http://www.eaphelplink.com">www.eaphelplink.com</a>
<b>Supplemental Insurance</b>		
<b>Unum</b>	1-800-635-5597	<a href="http://www.unum.com">www.unum.com</a>
<b>Aflac Dental</b>	410-394-9617	<a href="mailto:www.princegeorges.aflac@gmail.com">www.princegeorges.aflac@gmail.com</a>
<b>Legal Services</b>		
<b>Legal Resources</b>	1-800-728-5768	<a href="http://www.legalresources.net">www.legalresources.net</a>
<b>LegalShield</b>	1-800-654-7757	<a href="http://www.legalshield.com">www.legalshield.com</a>

# COST OF COVERAGE

## All Active Employees (Excluding Crossing Guards)\* Bi-Weekly Rates

Plan	Individual	Two-Person	Family
<b>Medical</b>			
Kaiser Permanente	\$55.06	\$109.86	\$159.18
Cigna HMO	\$60.38	\$120.76	\$168.85
Cigna PPO	\$94.60	\$190.75	\$267.88
<b>Prescription</b>			
Express Scripts	\$11.80	\$23.75	\$30.33
<b>Vision</b>			
VSP Base Plan	\$0.52	N/A	\$1.10
VSP Buy-Up Plan	\$0.86	N/A	\$2.24
<b>Dental</b>			
Aetna Dental DMO	\$11.52	\$18.07	\$23.08
Aetna Dental PPO	\$17.82	\$32.55	\$48.15

## Crossing Guards (Paid Over 21 Pay Periods) Bi-Weekly Rates

Plan	Individual	Two-Person	Family
<b>Medical</b>			
Kaiser Permanente	\$70.80	\$141.25	\$204.66
Cigna HMO	\$77.63	\$155.26	\$217.10
Cigna PPO	\$121.62	\$245.25	\$344.41
<b>Prescription</b>			
Express Scripts	\$15.17	\$30.53	\$38.99
<b>Vision</b>			
VSP Base Plan	\$0.67	N/A	\$1.41
VSP Buy-Up Plan	\$1.10	N/A	\$2.88
<b>Dental</b>			
Aetna Dental DMO	\$14.82	\$23.23	\$29.68
Aetna Dental PPO	\$22.91	\$41.85	\$61.91

\* Plan year 2020 is paid over 27 pay periods.

Medical HMO – County pays 75% and Employee pays 25%

Medical PPO – County pays 70% and Employee pays 30%

Prescription and Vision – County pays 85% and Employee pays 15%

Medical HMO – County pays 75% and Employee pays 25%

Medical PPO – County pays 70% and Employee pays 30%

Prescription and Vision – County pays 85% and Employee pays 15%

# REQUIRED NOTICES

## Grandfather Notice

The Prince George's County Government Health Plan is a "grandfathered health plan" under the Patient Protection and Affordable Care Act (ACA). As permitted by the ACA, a grandfathered health plan can preserve certain basis health coverage that was already in effect when the law was enacted. Being a grandfathered health plan means that your plan may not include certain consumer protections of the ACA that apply to other plans, for example, the requirement for the provision of preventative health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the ACA, for example, the elimination of lifetime limits on benefits. Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and that may possibly cause a plan to change from a grandfathered health plan status can be directed to OHRM Benefits and Pensions Division at 301-883-6380 or 1-800-634-5231 (press option 2 for Benefits). You may also contact the U.S. Department of Health and Human Services at [www.healthreform.gov](http://www.healthreform.gov).

## Privacy Notice

The County is required under the Health Insurance Portability and Accountability Act (HIPAA) to provide employees with a Privacy Notice concerning the disclosure and use of protected health information.

## Market Place Coverage

The Patient Protection Affordability Care Act (PPACA) requires employers to provide employees with a Marketplace Coverage Notice (Notice). Effective January 1, 2014, PPACA required each State to offer individuals within their State insurance options. The Notice will provide you with basic information about the new marketplace and your health coverage offered through Prince George's County Government (County). If you are considering options available in the marketplace, you will need OHRM's assistance with completing page three (3) of the Notice because the required data is specific to an individual. You can contact the Benefits and Pensions Division at 301-883-6380 for assistance.

## Termination of Coverage

Health benefits coverage for employees and their dependents will terminate on the last day of the month in which an employee elects to cancel their coverage, drop a dependent(s), terminate employment or becomes ineligible for coverage. Coverage for employees and their dependent(s) in the health benefits plan(s) may be voluntarily cancelled by completing the Health Benefits Enrollment/Change Form within thirty (30) days of a family status change or during open enrollment. Once coverage is cancelled, you may only enroll again at the next open enrollment or if a family status change occurs, provided you are still eligible for coverage. If an employee cancels their coverage during open enrollment, the coverage will terminate at the end of the current plan year.

## Termination of Coverage for Children

Coverage for your children will terminate on the last day of the month in which they:

- Reach age 26, unless they have been certified 30 days prior to age 26 to be totally unable to support themselves because of a mental or physical disease or disability;
- Reach age 18 (or specified age in court order) if they were covered as a result of legal guardianship; or
- Upon the date specified in the Temporary Custody Order.

## Termination of Coverage for a Spouse

Coverage for your spouse will terminate on the last day of the month in which your divorce, legal separation or annulment becomes final.

**NOTE:** It is mandatory for the employee to notify the Benefits and Pensions Division in writing within thirty (30) days of the date in which a spouse or dependent is no longer eligible (i.e. divorce, annulment, age attainment, etc.). Documentation must be provided. Any claims incurred after the last day of the month of the event will be the employee's responsibility. If notification is after the event, no refunds for health benefit premiums will be made even if the event results in a reduction in coverage.

# REQUIRED NOTICES

## **Continuation of Coverage**

The Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA) requires an employer to offer continuation of coverage under a group health plan to employees and their spouses and dependent children who lose coverage because of certain events. Spouse and dependent children of retirees also are entitled to continuation of coverage if they lose coverage because of one of these events. See Administrative Procedure 239 “Life and Health Benefits Upon Separation of County Service and Other Qualifying Occurrences” for more detailed information.

## **Eligible Individuals**

Employees who are enrolled in any County sponsored health coverage have the right to continue that coverage upon the occurrence of a “qualifying event” for 18 months. Employees who are disabled at the time of the original qualifying event have the right to continue existing coverage for up to 11 additional months for a total of 29 consecutive months of coverage. Dependents (eligible spouses and children) who are enrolled in any County sponsored health coverage have the right to continue that coverage upon the occurrence of a “qualifying event” for 36 months. These rates may differ from your rates as an active employee.

## **Qualifying Events**

- Employee termination (voluntary or involuntary as long as the employee was not discharged due to gross misconduct).
- Reduction in hours of work for the County to less than 15 hours a week.
- Legal separation or divorce of a covered spouse from a covered employee or retiree.
- A covered child ceases to be eligible for coverage as a dependent as described under “Termination of Coverage.”

You must contact the Benefits and Pensions Division in writing within 30 days of the qualifying event. Detailed information on the continuation of their benefits will be sent to the eligible individual. Under “Qualifying Events” 3 or 4 above, either the employee, covered spouse, or dependent must notify the County within 30 days of the qualifying event. If notification is made after the event, no refunds for health benefit premiums will be made. This will apply even if the event results in a reduction in coverage.

## **Payment of Premiums**

COBRA payments are due by the 1st of the month for the same month’s coverage. Coverage will be terminated if payment is not received within 30 days of the due date. Payments may only be paid by cash, certified check, cashier’s check, or money order. All payments should be payable to “Prince George’s County Government” and sent to the Benefits and Pensions Division.

## **Description of Benefits and Payment of Premiums**

### ***Coordination of Medical Benefits***

Eligible employees may choose to enroll in one of the medical plans offered by the County. However, employees must live in the service area of an HMO in order to enroll in the selected HMO. Benefits will be coordinated with any other medical benefit in which a covered person is enrolled. Employees are required to submit information on other medical benefit plans as requested, for purposes of coordination of benefits. Primary insurance coverage for dependent children is determined by which parent’s birth date occurs first in the year (commonly referred to as “The Birthday Rule”). Eligible employees may waive participation in the County’s medical plans and still enroll in the County’s prescription, vision and/or dental plans.

### ***Double Coverage***

Eligible employees may choose any, all, or none of the health benefit plans offered. County employees who are married to each other may not be enrolled in double coverage. Eligible children may not be enrolled in double coverage (coverage for one individual through two separate employees) by parents and/or step-parents who are both County employees.

Retirees reemployed by the County may not be enrolled in double coverage and must elect all benefits either as a retiree or as an active employee.

### ***Payment of Premiums***

Employee premiums are deducted from employees’ paychecks in the month of coverage.

# REQUIRED NOTICES

## **Family and Medical Leave Act (FMLA)**

The Family and Medical Leave Act (FMLA) requires group health benefits to be maintained during the period of leave which has been granted as if the employee continued to work instead of taking leave unless the employee elects to drop the coverage. If an employee is on approved leave without pay for family and medical leave purposes, the County will continue to pay the employer share of health benefits.

The employee's share of the premiums will be placed in arrears until the employee returns to work. At that time, the employee's deductions for health benefits will be doubled until the arrears have been satisfied. If the employee fails to return to work after the period of leave has expired, the County may recover the premiums that it paid for maintaining health and life insurance coverage during the period of unpaid leave.

An employee who elects to drop health care coverage during the approved FMLA period may reinstate that coverage at the end of the leave period. The employee must notify the Benefits and Pensions Division within thirty (30) days of return to work in order to re-enroll. Otherwise, the employee must wait until the next open enrollment and enroll for the following plan year.

## **Leave Without Pay (LWOP)**

Leave Without Pay (LWOP), which has been granted for purposes other than those that fall under the FMLA guidelines, requires the employee to pay both the employee and employer share of health and life insurance premiums. If premiums are not paid, the employee's benefits are cancelled. During the LWOP period, the employee will be contacted by the Benefits and Pensions Division and advised of the premiums owed and payment date. If the premiums have not been paid and coverage continues after the employee has returned to work, deductions will be taken from the employee's paycheck for the total amount owed. An employee may drop health coverage during LWOP, and will be able to resume coverage immediately following their return to work. The employee must notify the Benefits and Pensions Division within thirty (30) days of return to active status in order to re-enroll. The effective date will be the first of the month following enrollment. Otherwise, the employee must wait until the next open enrollment to enroll for the following plan year.

For employees who have exhausted disability leave and have been placed in an LWOP status, the County will continue to pay the employer share of health and life insurance premiums. In accordance with the negotiated contracts with the AFSCME union, the County will also pay the employee's share of premiums for employees represented by AFSCME Locals 2462, 2735, 1170, and 3389 who have been placed on LWOP after exhausting disability leave.

## **Change of Beneficiary**

Beneficiary changes can be made in SAP Employee Self Service by selecting "Enroll for your benefits" and clicking "Anytime Changes."

