RISK MANAGEMENT

BENEFITS EDUCATION & 2017 RETIREE OPEN ENROLLMENT



LATEST FLORIDA BLUE CHANGES

North Florida Regional Medical Center (NFRMC) Emergency Room Physicians are NO longer in-network with FL Blue

The co-pay for the facility remains the same because it is in-network. The physicians are not.

To present to NFRMC ER means you will have increased costs.



LEGISLATIVE CHANGES

FL House Bill 221

EFFECTIVE JANUARY 1, 2017

ER PHYSICIANS & URGENT CARE CENTERS
(NON-PARTICIPATING PROVIDERS)
MUST BILL AT THE IN-NETWORK RATE
CAN NO LONGER BALANCE BILL!!!

PLANS MUST PAY THE SAME RATE FOR IN/OUT NETWORK PROVIDERS (80%)

REQUIRES PLANS TO PROVIDE SPECIFIED COVERAGE FOR TREATEMENT OF DOWN SYNDROME



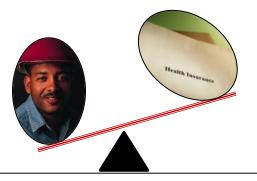
BENEFITS

HOW DO MY BENEFITS WORK WITH THE CALENDAR YEAR DEDUCTIBLE, CO-INSURANCE & OUT OF POCKET?



HOW YOUR HEALTH BENEFITS WORK

Joe's Plan Deductible: \$600

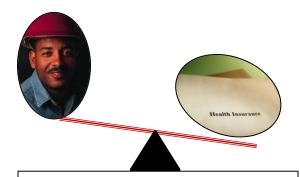


Joe hasn't reached his \$600 deductible yet

His plan doesn't pay any of the costs.

Specialist Office visit costs: \$125

Joe pays: \$125 His plan pays: \$0 In Network Co-insurance: 20%/80%



Joe reaches his \$600 deductible, co-insurance begins

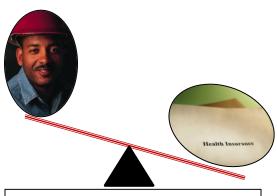
Joe's seen a specialist several times and paid \$600. His plan pays some of the costs for his next visit.

Office visit costs: \$125

Joe pays: 20% of \$125 = \$25

His plan pays: 80% of \$125 = \$100

Out-of-Pocket Limit: \$4,000



Joe reaches his \$4,000 out-ofpocket limit Joe has paid \$4,000. 00 out-of-pocket. Joe's plan pays the full cost of his covered health care services for the rest of the year.

Office visit costs: \$200

Joe pays: \$0

His plan pays: \$200



OUTPATIENT PROCEDURE CO-PAYS

QUESTION:

I HAD TO HAVE BLOODWORK FOR MY OUTPATIENT PROCEDURE AND I WAS CHARGED TWO CO-PAYS; ONE FOR THE BLOODWORK AND FOR THE PROCEDURE.

WHY IS THAT?



OUTPATIENT PROCEDURE CO-PAYS

CO-PAYS ARE BASED UPON THE DATES OF SERVICE. IF YOU HAVE A PROCEDURE AND ATTEND THE PRE-OP APPOINTMENT, YOU ARE CHARGED A CO-PAY AND ON THE ACTUAL DAY OF THE PROCEDURE, YOU MAY BE CHARGED ANOTHER CO-PAY.



PHARMACY APPEALS

QUESTION:

MY DOCTOR FILED AN APPEAL THROUGH PRIME THERAPEUTICS & I STILL HAVE NOT HEARD ABOUT MY MEDICATION. WHY AM I HAVING SUCH A HARD TIME?



PHARMACY APPEALS

PRIME THERAPEUTICS HANDLES PRIOR AUTHORIZATIONS BUT IF YOUR DOCTOR WRITES "APPEAL" ON THE DOCUMENTATION, PRIME CANNOT HANDLE THE REQUEST. APPEALS GO TO FL BLUE ONLY AND MAY TAKE UP TO 60 DAYS.



<u>ICMA</u>

QUESTION:

I Would Like To Personally Invest My 457, Roth IRA and RHS Funds? Am I Able To Do This And If So, How? Am I Able to Withdraw MY IRA Funds Online Too?



ICMARC.ORG

<u>ICMA</u>

VISIT ICMARC.ORG

AND REGISTER TO LOG-IN

IRA WITHDRAWALS
ASSESS BALANCES
CHANGE INVESTMENTS
UPDATE BENEFICIARIES



ICMARC.ORG









<u>ICMA</u>

QUESTION:

I NEED TO MEET WITH THE ICMA REP BUT WHEN I CALLED RISK MANAGEMENT, I WAS TOLD I HAD TO GO ONLINE TO SCHEDULE THE APPOINTMENT. IS THIS ACCURATE?

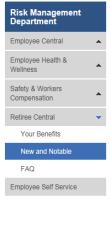


<u>ICMA</u>

SCHEDULING AN APPOINTMENT WITH

ADAM FERGUSON-INTRANET RISK MGT SITE





New and Notable

We are happy to offer our City of Gainesville retirees a one-stop location to obtain and download retirement and benefits information and forms that are related solely to them. No longer do you need to sift through folders and forms that do not focus upon your concerns.

Keep checking back for updates!

Helpful Benefits Information

- 2016 Retiree Benefits Booklet
- 2016 Open Enrollment and Benefits Presentation

Newsletters

- Employee Benefits Spring 2016
- Employee Benefits Summer 2016
- Florida Blue Better You July 2016
- Florida Blue Better You September 2016

Presentations

- Health Benefit Information
- Schedule a Meeting with Our ICMA-RC Representative
- ICMA-RC Invest Smart in Volatile Markets





ICMARC.ORG



2017 OPEN ENROLLMENT CHANGES



\$300 Rx Deductible

Rx Co-Pays Apply to:

Preferred and Non-Preferred Brands ONLY!!!!!

Generic Drugs do not have a Co-Pay!!!!!!

Co-Pay Tiers
Preferred Brand Drug-\$50
Non-Preferred Brand Drug-\$80
Specialty Drug-\$160

CVS Pharmacies (including ones located inside of Target) are NO longer in-network pharmacies!!!!



2017 OUT-OF-POCKET MAXIMUM

Individuals-\$4,500



Family-\$7,500





2017 IMPORTANT REMINDERS

All Qualifying Events during Open Enrollment must be completed on paper <u>and</u> completed within 30 days of the Qualifying event <u>and</u> necessary documentation must be provided.



2017 IMPORTANT REMINDERS

When enrolling dependents, please make sure that you have reviewed the dependent age limits on the benefit, prior to enrolling your dependent



2017 DEPENDENT BENEFITS

Age Restrictions

Health

- · Legal dependents are eligible to enroll in these benefits until the age of 26 (whether married, a student or residing with the parent/legal guardian).
- · Dependents who are over the age of 26, who are physically or mentally unable to work and are supported by the employee (medical documentation required).
- · Grandchildren-Newborns up to 18 months (as long as the parent of the child is covered by the plan).



MEDICARE

City Medicare Supplements

What Plans Are Offered?

- Part F-Covers Gaps in Parts A & B
- Part D-Prescription
 - \$350 deductible in 2016

How Does It Work?

The City will use its contribution towards your health insurance premium to purchase Medicare Supplements D (Rx) and/or F (Medical). The difference in cost, if any, is paid by the Retiree.



Q&ATIME

Questions?



