

2022-2023 Benefits Overview

Understanding your benefits

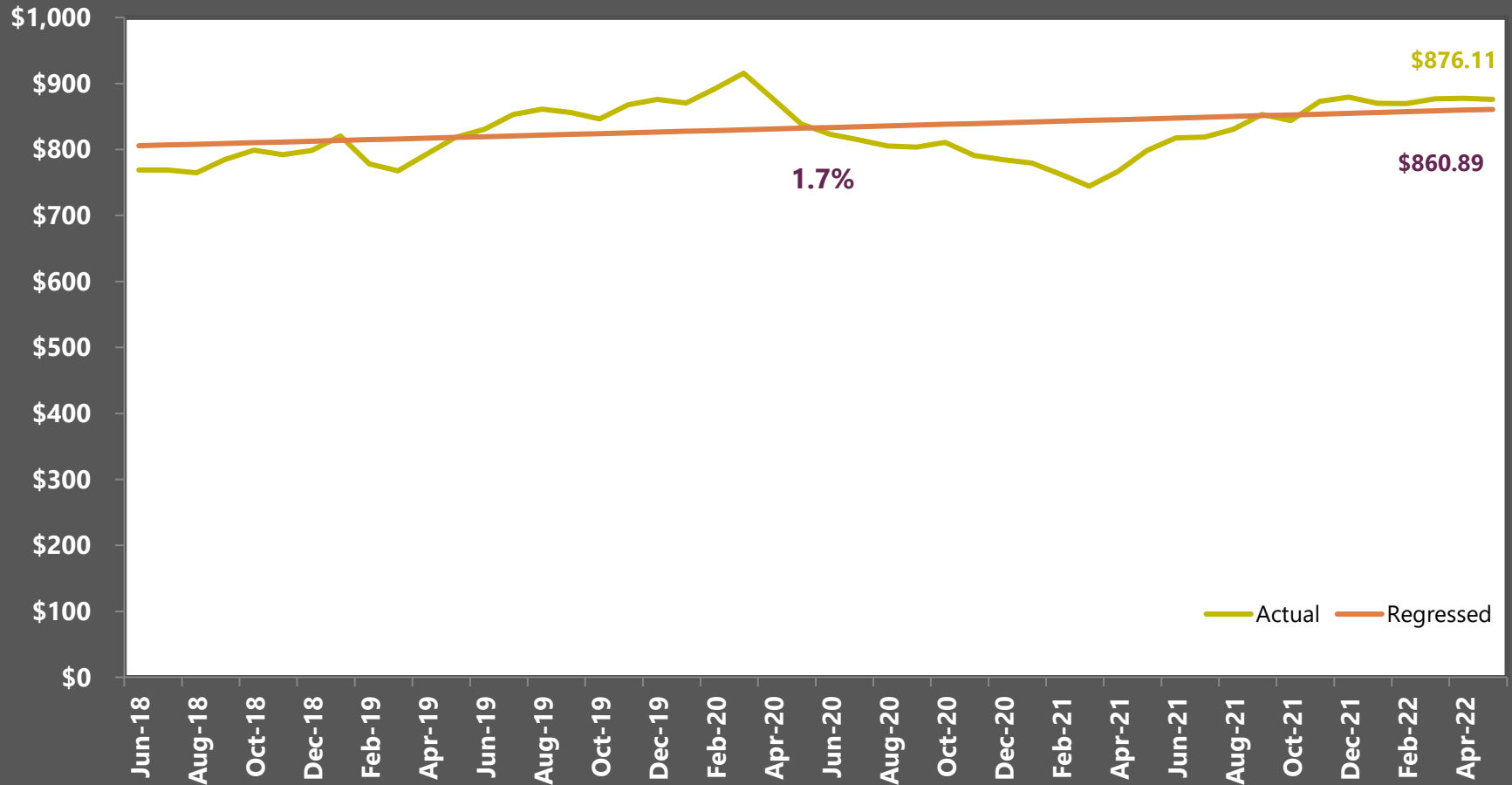


Healthcare Terms

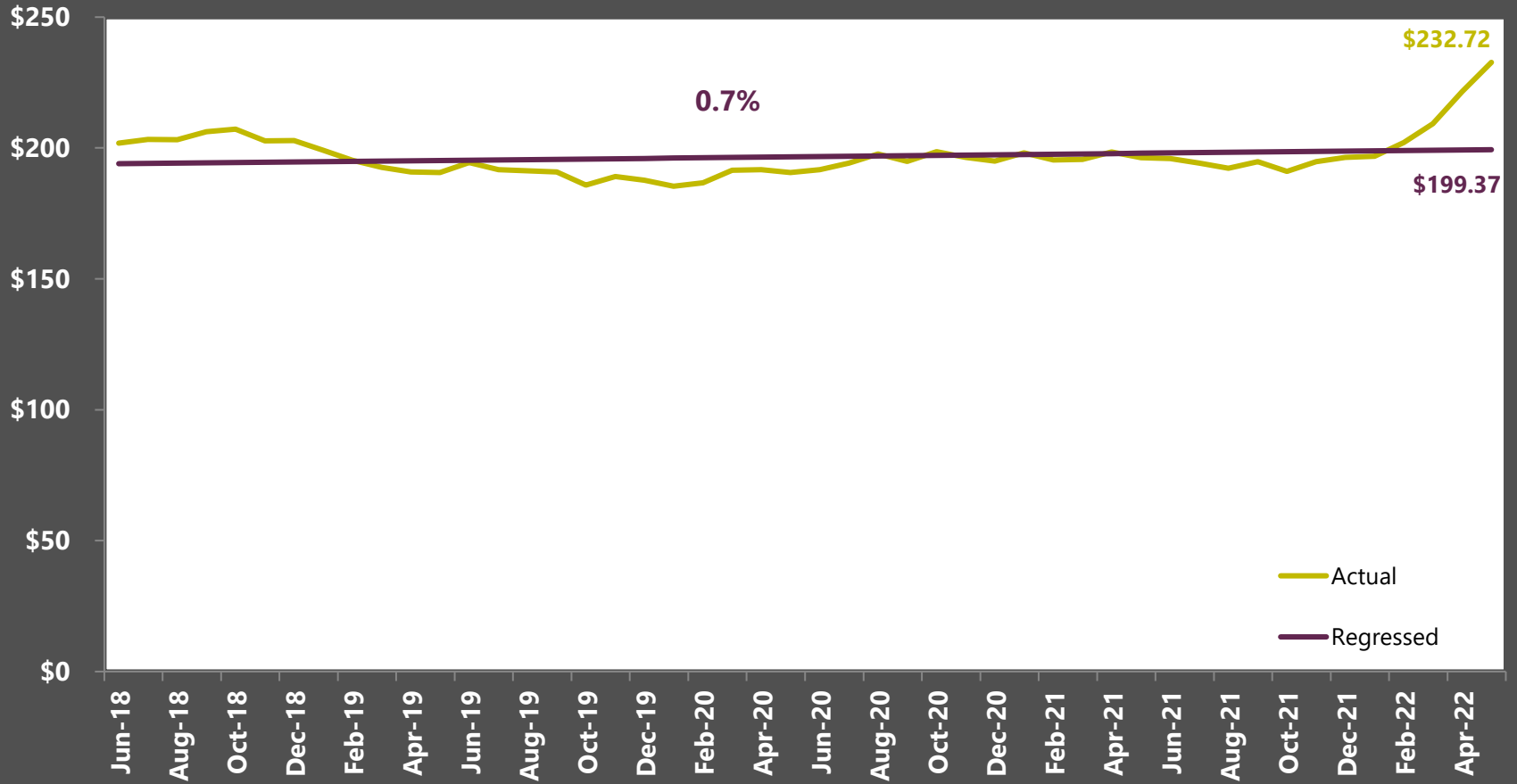
- ✓ **DEDUCTIBLE** – The amount you pay out of your own pocket before your insurance pays (like car insurance).
- ✓ **COPAYMENTS** – The amount you pay at the time of service, such as when you go to the doctor or the pharmacy (example - \$25 copay at the doctor's office).
- ✓ **COINSURANCE** – This is a percentage and represents the cost share that you pay vs. what the plan pays (example – after you pay your deductible, the plan pays 80% / you pay 20%).
- ✓ **OUT OF POCKET MAXIMUM** – The most you would have to pay in a plan year out of your own pocket. This includes any amount you pay for coinsurance, deductibles and copays (your annual total exposure).
- ✓ **NETWORK PROVIDER** – Doctors, hospitals and other healthcare professionals where there are negotiated prices in place, also called “in-network” provider or participating provider.
- ✓ **SELF FUNDED/SELF INSURED MEDICAL PLAN** - This is a type of plan in which an employer takes on most or all of the cost of benefit claims. The insurance company manages the payments, but the employer is the one who pays the claims.



Look Back – Medical Claims



Look Back – Pharmacy Claims



Disease-Specific Focus

CANCER



261

Patients

\$1.0M

Direct Cost Medical

\$310K

Direct Cost Rx

\$5,093

Direct Cost PPPY

\$2.3M

Indirect Cost

CARDIOVASCULAR



464

Patients

\$1.4M

Direct Cost Medical

\$192K

Direct Cost Rx

\$3,441

Direct Cost PPPY

\$3.9M

Indirect Cost

DIABETES



173

Patients

\$586K

Direct Cost Medical

\$876K

Direct Cost Rx

\$8,450

Direct Cost PPPY

\$2.2M

Indirect Cost

MUSCULOSKELETAL



818

Patients

\$2.9M

Direct Cost Medical

\$283K

Direct Cost Rx

\$3,865

Direct Cost PPPY

\$5.1M

Indirect Cost

MENTAL HEALTH



287

Patients

\$172K

Direct Cost Medical

\$129K

Direct Cost Rx

\$1,049

Direct Cost PPPY

\$2.5M

Indirect Cost

Leading Indicators

Count of Patients with a Leading Indicator Diagnosis

	Total	Cancer	Cardiovascular	Diabetes	Musculoskeletal	Mental Health
Personal History of Cancer	4	✓				
Family History of Cancer	64	✓				
Tobacco Use	109	✓	✓	✓		
Metabolic Syndrome	24	✓	✓	✓	✓	
Obesity	390	✓	✓	✓	✓	
Chest Pain	137		✓			✓
Elevated Blood Pressure	112		✓	✓		
Hypertension	521			✓		
Atherosclerosis	14			✓		
Palpitations	63					✓
Lipid Disorders	547		✓	✓		
Elevated blood glucose	157		✓	✓		
Diabetes	220		✓			
Proteinuria	20			✓		

	Total	Cancer	Cardiovascular	Diabetes	Musculoskeletal	Mental Health
Neuropathy	67			✓		
Gout	38		✓	✓		
IBS	31					✓
PCOS	15		✓	✓		✓
Pain Related to MSK	641				✓	
Back Pain	367					✓
Migraine	94				✓	✓
Sleep Apnea	113		✓	✓		✓
Depression	230		✓	✓	✓	
Malaise & Fatigue	386					✓
Insomnia	85					✓
Total Patients	1,647	434	764	1,047	414	744

City of Irving Benefits

- **Medical/Pharmacy** – BCBS
- **Dental** – MetLife
- **Vision** – Davis Vision
- **Life and Disability** – The Standard
- **FSA/HSA** – MetLife
- **Accident / Critical Illness / Hospital Indemnity** – Unum
- **Legal/Identity Theft** – MetLife



Medical Plan Design

IN-NETWORK BENEFITS ONLY**

	Choice	Quality	HSA
Deductible Individual / Family	\$1,000 / \$3,000	\$1,500 / \$4,500	\$2,200 / \$6,600*
Out-of-Pocket Maximum Individual / Family	\$4,500 / \$13,500	\$7,150 / \$14,300	\$6,550 / \$13,100
Coinsurance	80%	70%	80%
Preventive Care Annual Physicals, Age-Appropriate Screenings, etc.	100%	100%	100%
Primary Care / Specialist Office Visit	\$25 / \$40 copay	\$45 / \$60 copay	80% after deductible (85% for MCNT/USMD providers)
USMD & MCNT (Primary Care / Specialist)	\$25 / \$40 copay	\$40 / \$50 copay	85% after deductible
CareATC	\$0 copay	\$0 copay	\$40 charge
Telemedicine	\$25 copay	\$40 copay	80% after deductible
Advanced Imaging MRI, CT, PET, Ultrasound, Stress Test, etc.	80% after deductible	70% after deductible	80% after deductible

*If plan tier is employee plus 1 other covered individual, then a collective deductible of \$6,600 applies.

**Out of Network Benefits available. See Benefits Guide for Deductible, Out-of-pocket maximum, and Coinsurance amounts.

Preventive vs. Diagnostic Care

- **Preventive care** helps detect or prevent serious diseases and medical problems before they can become major. Annual check-ups, immunizations, and flu shots, as well as certain tests and screenings, are a few examples of preventive care. This may also be called routine care.
- **Diagnostic care** is related to services in which your provider is looking for something specific, often based on the results of a preventive test or screening. For example, a radiologist may ask for a follow-up mammogram for a patient. This follow-up is to check for something that may have been detected during the preventive or routine mammogram. The follow-up mammogram is diagnostic, and not covered as preventive care.

Cancer Screenings

Cancer Screenings	Recommendation*	2019		2020		2021	
		City of Irving	HMA Book of Business	City of Irving	HMA Book of Business	City of Irving	HMA Book of Business
Breast Cancer	Females Age 50-74 Mammography every 2 years	57%	54%	54%	47%	55%	53%
Cervical Cancer	Females Age 21-64 Pap Smear every 3 to 5 years	37%	31%	29%	27%	32%	29%
Colon Cancer	Males and Females Age 50-75 Colonoscopy every 10 years	19%	18%	20%	14%	17%	16%

*NCQA HEDIS Measures

Pharmacy Benefits

CHOICE & QUALITY PPO

- ❖ Generic – **\$0 copay**
- ❖ Preferred Brand Name – **\$40 copay**
- ❖ Non-Preferred Brand – **\$60 copay**
- ❖ Specialty – **\$100 copay**

MAIL ORDER

- ❖ Up to a 90-day supply
- ❖ 2 times retail copay

BLUE EDGE HSA – YOU MUST MEET YOUR DEDUCTIBLE FIRST BEFORE COINSURANCE

- ❖ Preventive Generics (call BVA for details) – **100%**
- ❖ Generics – **80%**
- ❖ Preferred Brand Name – **70%**
- ❖ Non-Preferred Brand – **50%**

MAIL ORDER

- ❖ Up to a 90-day supply
- ❖ Same as retail percentages

Carrier Formulary Changes

- Generally, happens two times a year
- Medications may go up a tier, down a tier or be entirely excluded
- Affected members will receive a letter in the mail at least 60 days prior to change which will outline options
- Work with provider for alternative medication

Medical – Know before you go

Care Center	Conditions treated	Your cost and time		
		Choice	Quality	HSA
<p>Emergency Room (ER) For critical injuries or illness Open 24/7</p>	<ul style="list-style-type: none"> Shortness of breath or chest pain Head injury/major trauma Severe cuts or burns 	<p>Physician: 80% coinsurance after deductible Highest cost Long wait times, averaging over 4 hours</p>	<p>Physician: 70% coinsurance after deductible Highest cost Long wait times, averaging over 4 hours</p>	<p>Physician: 80% coinsurance after deductible Highest cost Long wait times, averaging over 4 hours</p>
<p>Urgent Care Center For non-life-threatening conditions Staffed by nurses and doctors Usually have extended hours</p>	<ul style="list-style-type: none"> Minor cuts, sprains, burns, rashes Fever and flu symptoms Minor respiratory symptoms 	<p>80% after deductible Costs lower than ER Wait times vary</p>	<p>70% after deductible Costs lower than ER Wait times vary</p>	<p>80% after deductible Costs lower than ER Wait times vary</p>
<p>Doctor's Office Routine or preventive</p>	<ul style="list-style-type: none"> General health issues Preventive care/Routine checkups Immunizations and screenings 	<p>\$25 copay May charge copay/coinsurance and/or deductible Short wait times</p>	<p>\$45 copay May charge copay/coinsurance and/or deductible Short wait times</p>	<p>80% after deductible May charge copay/coinsurance and/or deductible Short wait times</p>
<p>CareATC Clinic</p>	<ul style="list-style-type: none"> General health issues Preventive care/Routine checkups Minor cuts, sprains, burns, rashes Labs (orders may be brought in from non-CareATC providers) 	<p>\$0 copay</p>	<p>\$0 copay</p>	<p>\$40 charge</p>
<p>Telemedicine</p>	<ul style="list-style-type: none"> General health issues 	<p>\$25 copay</p>	<p>\$40 copay</p>	<p>80% after deductible</p>

Blue Value Advisor (BVA)

Value for You and Your Employees

BVAs provide more than traditional customer service by helping your employees make better-informed health care decisions resulting in increased savings and satisfaction for everyone.

- Educate and empower members to be smart shoppers
- Make it easier for both employers and members
- Produce increased cost savings and return on investment

**Members can call BVAs
for support 24 hours a day,
seven days a week.***



Member Rewards

Save money on health and wellness products and services not covered by insurance. Deals offered through Blue 365:

- EyeMed, Davis Vision
- Dental Solutions
- TruHearing, Beltone, American Hearing Benefits
- Jenny Craig, Sun Basket, Nutrisystem
- FitBit
- Reebok, SKECHERS
- InVite Health
- Livekick
- eMindful

Fitness Program

Flexible options and access to a nationwide network of fitness benefits:

- Online enrollment and tracking
- Automatic monthly payment withdrawal
- Preference of gym networks and studio classes
- Mobile app with check-in and activity history
- Complementary and Alternative Medicine (CAM)
- Access to thousands of digital fitness videos, live classes, and fitness programs
- Discounts to services through WholeHealth Living Choices Program, register at whlchoices.com
- Earn points for progress to receive apparel, books, electronics, health, and personal care items

CareATC

Benefits Include

- **Primary Care Visits** and Chronic Disease Management
 - Free visits for Choice Local Plus & Quality Open Access Plus Members
 - Only a \$40 office visit fee for High Deductible health Plan Members who utilize the clinic for non-preventive services
- **Same Day/Next Day Appointments** by scheduling through the CareATC Mobile App
- **Less Wait Time, More Face Time** with your medical provider
- **Free On-site Labs**
- **Complete New Patient Paperwork online** at careatc.com/patients

Treatments and Services

Adult Immunizations
Allergies / Asthma
Annual Physicals
Colds / Congestion / Flu
Diabetes Management
Generic Medications
High Blood Pressure
High Cholesterol
Lab Work / Tests
Minor Non-Work Injuries
Sick Visits
Sports Physicals
Skin Care Screenings
Sport Physicals
Testosterone Management
Thyroid Disorders
Tobacco Cessation
Weight Management
Women's Health

Learn to Live - Retrain Your Brain

- More than half of people will struggle with mental health concern at some point in their lives.
- Digital mental health programs to help you find support in areas such as:
 - Stress, anxiety, and worry
 - Depression
 - Insomnia
 - Social anxiety
 - Substance use

PPO Medical Plan – Primary care Doctor’s visit / Prescription

Service	Cost for Service	Choice What you pay	Quality What you pay
Doctor’s Office Visit Charge	\$110	\$25	\$45
Strep Culture	\$30	\$0	\$0
Prescription (generic)	\$22	\$0	\$0
Total	\$162	\$25	\$45
CareATC Cost		\$0	\$0



HDHP HSA Medical Plan – Primary care Doctor’s visit / Prescription

Service	Cost for Service	What you pay (annual deductible)
Doctor’s Office Visit Charge	\$110	\$110
Strep Culture	\$30	\$30
Prescription (generic)	\$22	\$22
Total	\$162	\$162
CareATC Cost		\$40**

*You can use HSA dollars to pay the amount due for the visit

** Does not apply to deductible or Out of pocket maximums



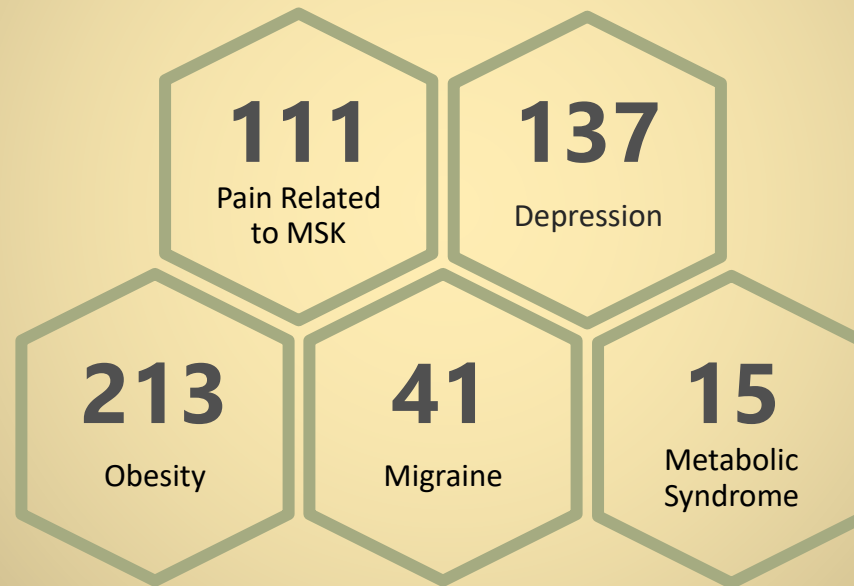


- **ONE ON ONE QUALITY CARE APPROACH**
- **SAFE AND EFFECTIVE SOFT TISSUE TREATMENT**
- **AVERAGE OF 3.2 VISITS UNTIL COMPLETE INJURY RESOLUTION**
- **OVER 45 DFW LOCATIONS**



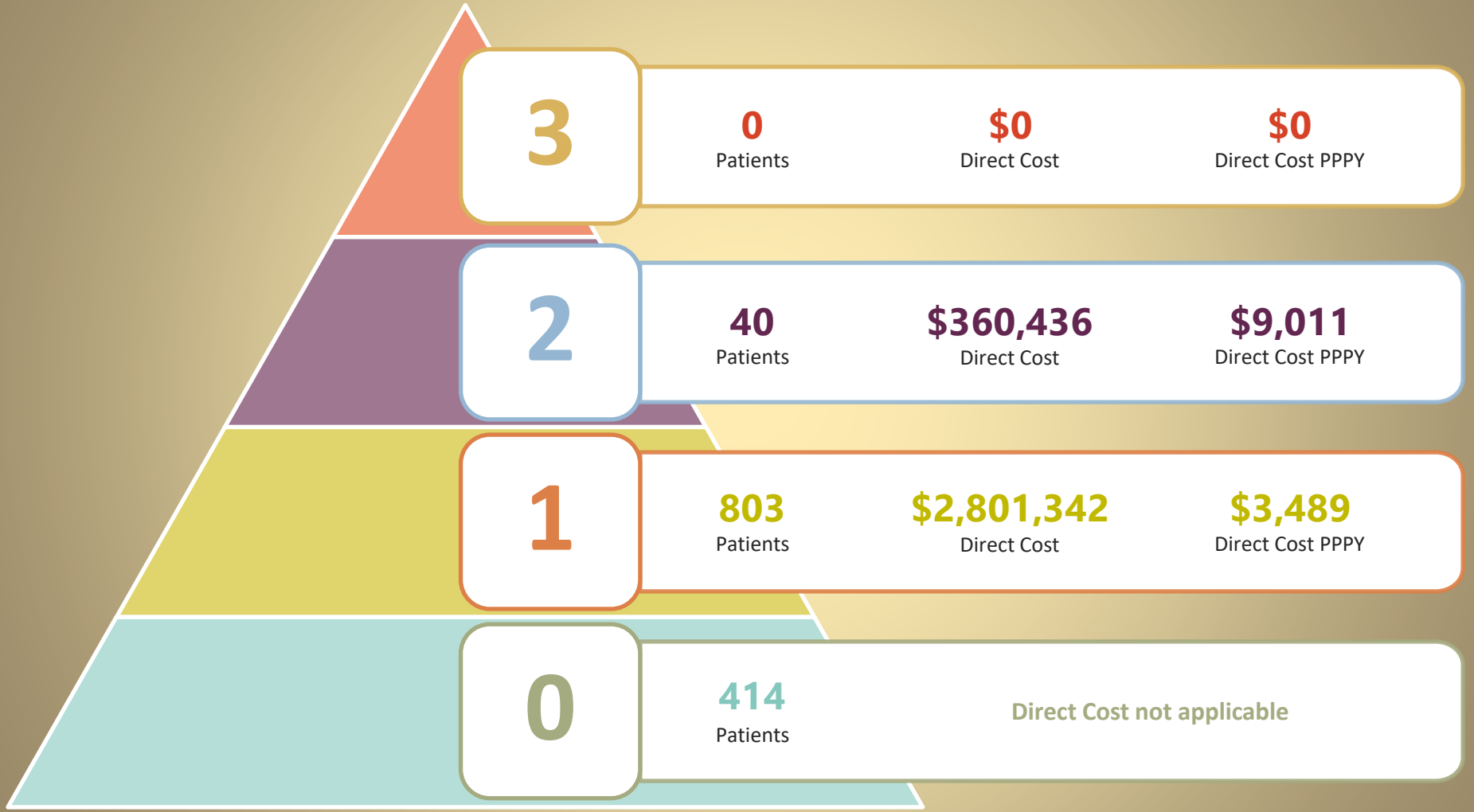
Musculoskeletal Leading Indicators

Count of patients with a leading indicator diagnosis who do not have a musculoskeletal diagnosis



*Based on medical diagnosis coding only

MUSCULOSKELETAL Stages



Dental

In-Network Benefits	Base Plan PPO	Buy-Up Plan PPO	MAC Plan
Plan Year Maximum	\$1,500	\$2,000	\$1,000
Deductible (Applies to Basic and Major Services Only)	\$50 / \$150	\$50 / \$150	\$50/No Limit
Preventive Services (Does not count toward annual max)	100% (no deductible) 2 per year	100% (no deductible) 2 per year	100% (no deductible) 2 per year
Basic Services	80% after deductible	80% after deductible	80% after deductible
Major Services	50% after deductible	50% after deductible	50% after deductible
Orthodontia (Children to age 19)	50% after deductible (\$1,000 lifetime max)	50% after deductible (\$1,500 lifetime max)	None

MAC Dental Plan – Maximum Allowable Charge

The maximum amount paid for a covered service from a provider, whether they're in-network or out-of-network.

In-network dentist: may charge more for a procedure than your plan's MAC fee. Because they're in-network, though, they've agreed to accept the MAC fee. The difference between the provider's charge and the MAC fee would be written off — you would not owe this difference.

Out-of-network dentist: Isn't contractually obligated to accept the MAC fee. That means you're responsible for coinsurance *and* any difference between the provider's charge and the MAC fee.

For example: You need a tooth extraction, your plan covers 80% of the cost for the procedure. The MAC fee for a tooth extraction is \$100 in your area, and your dentist, who is in-network, charges \$125. The plan would cover 80% of the MAC fee, which comes out to \$80. You would owe \$20, and the provider would write off the remaining \$25.

Vision

Benefits	Base Plan		Buy-Up Plan	
	In Network	Out of Network*	In Network	Out of Network*
Vision Exam	\$10 copay	Up to \$40	\$10 copay	Up to \$40
Frames	No Copay, \$150 Allowance**	Up to \$50	No Copay, \$250 Allowance***	Up to \$50
Lenses	\$0 Copay; Allowances can be found on INet	Reimbursed up to: Single Vision: \$40 Bi-Focal: \$60 Tri-Focal: \$80 Lenticular: \$100	\$0 Copay; Allowances can be found on INet	Reimbursed up to: Single Vision: \$40 Bi-Focal: \$60 Tri-Focal: \$80 Lenticular: \$100
Elective Contacts	No Copay, \$100 Allowance	Up to \$105	No Copay; \$200 Allowance	Up to \$105
Frequencies	Exam – every 12 months Frames – every 12 months Lenses or Contacts – every 12 months		Exam – every 12 months Frames – every 12 months Lenses or Contacts – every 12 months	

*Reimbursed amounts

**\$200 allowance at VisionWorks

***\$300 allowance at VisionWorks

Vision – Member Scenarios

Scenario 1: Eye Exam & Glasses

	Base Plan	Buy-Up Plan
Eye Exam	\$10	\$10
Materials Copay	\$200 (Plan Pays \$150)	\$200 (Plan Pays up to \$250)
Single Vision Lenses	\$0	\$0
Total	\$60	\$10

*Amount can vary based on place of service

Vision – Member Scenarios

Scenario 2: Eye Exam & Contacts

	Base Plan	Buy-Up Plan
Eye Exam	\$10	\$10
Materials Copay	\$0	\$0
Contact Lens Fitting / Evaluation (\$100 charge)*	\$85 (15% discount)	\$85 (15% discount)
1 Year Supply of Contacts (\$300 charge)*	\$200	\$100
Total	\$295	\$195

*Amount can vary based on place of service

Flexible Spending Accounts (FSA)

- **YOU CAN ACCESS YOUR FULL ELECTION AMOUNT ON THE FIRST DAY OF THE NEW PLAN YEAR**
- **ANNUAL CONTRIBUTION WILL BE TAKEN OUT ON A BI-WEEKLY BASIS (FIRST 2 PAYCHECKS OF THE MONTH)**
- **\$500 ROLLOVER IS AVAILABLE; HOWEVER, YOU MUST ELECT A MINIMUM OF \$120 FOR THE NEXT PLAN YEAR**
- **ELIGIBLE EXPENSE EXAMPLES:**
 - Prescriptions
 - Copays, coinsurance and deductibles
 - Dental care
 - Vision care
 - Counseling and therapy
 - Psychology and Psychiatry
 - Chiropractic care
 - Etc.

Health Savings Accounts (HSA)

- **HSA CONTRIBUTIONS ARE TAX FREE**
- **HSA DOLLARS CAN BE USED FOR MEDICAL/RX/DENTAL/ VISION OUT OF POCKET COSTS**
- **UNUSED HSA DOLLARS ROLLOVER EVERY YEAR**
- **HSA ACCOUNTS ARE ONLY AVAILABLE FOR MEMBERS ON THE CITY'S HIGH DEDUCTIBLE HEALTH PLAN (HDHP)**
- **CANNOT HAVE A PO BOX AS YOUR MAILING ADDRESS**
- **CANNOT HAVE MONEY IN AN FSA IF YOU SWITCH OF AN HSA**



FSA/HSA Eligible Expenses

Amazon FSA/HSA Store; [FSA/HSASore.com](https://www.fsa/store)

- After sun relief/protection/tanning, bandages, bottles, backrests, breast feeding and nursing, canes, denture adhesive, deodorant, dry eye drops, electric heating pads, eyeglasses and lens accessories, feminine hygiene products, foot grooming, hearing aid batteries, lice treatment, lip care, magnifying glasses, mattress and pillow pads/covers, reading glasses, vitamins, wart removers and much, much more!

Dependent Care FSA

USE YOUR DEPENDENT CARE FSA TO PAY FOR:

- Before/after school care*
- Au pair services*
- Extended day programs*
- Preschool/nursery school*
- Summer day camp*
- Elder day care

***FOR CHILDREN AGES 13 AND UNDER UNLESS INCAPABLE OF SELF CARE**

INELIGIBLE EXPENSES:

- Overnight camps
- Kindergarten or higher-grade tuition
- Non-work-related day care
- Long-term elder care services

NOTE: MONEY NOT AVAILABLE UNTIL FUNDED. DOES NOT ROLL OVER.

Life Insurance

- BASIC LIFE/AD&D – City paid
 - *1x annual earnings*
 - Terminates at retirement
- VOLUNTARY LIFE/ AD&D – Employee paid
 - Employee: Max – \$800,000 / Guaranteed Issue – **\$500,000**
 - Spouse: Max – \$100,000 / Guaranteed Issue – **\$50,000**
 - Child: Max – **\$15,000**
- VOLUNTARY ENROLLMENT
 - Late enrollees must complete Evidence of Insurability
 - If enrolled, may increase your coverage during open enrollment without completing EOI up to Guarantee Issue



Worksite Products

Administered through Unum, the worksite products are 100% employee paid and available to you and your dependents.

Accident:

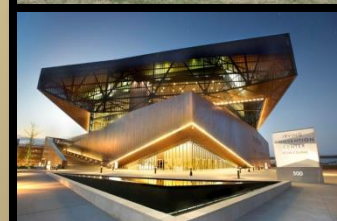
- Provides fixed cash benefits according to the schedule of benefits when a covered person suffers certain injuries or undergoes a broad range of medical treatments or care resulting from a covered accident.

Critical Illness:

- Provides a benefit when a covered person is diagnosed with a covered Critical Illness or event after coverage is in effect.
- Available in fixed dollar amounts of \$10,000 \$15,000 or \$20,000.

Hospital Indemnity:

- Provides fixed cash benefits according to the schedule of benefits when a covered person is admitted to the hospital.



Legal Plan – MetLife

Money Matters	<ul style="list-style-type: none"> • Debt Collection Defense • Identity Management Services³ 	<ul style="list-style-type: none"> • Identity Theft Defense • Negotiations with Creditors • Personal Bankruptcy 	<ul style="list-style-type: none"> • Promissory Notes • Tax Audit Representation • Tax Collection Defense
Home & Real Estate	<ul style="list-style-type: none"> • Boundary & Title Disputes • Deeds • Eviction Defense • Foreclosure 	<ul style="list-style-type: none"> • Home Equity Loans • Mortgages • Property Tax Assessments • Refinancing of Home 	<ul style="list-style-type: none"> • Sale or Purchase of Home • Security Deposit Assistance • Tenant Negotiations • Zoning Applications
Estate Planning	<ul style="list-style-type: none"> • Codicils • Complex Wills • Healthcare Proxies • Living Wills 	<ul style="list-style-type: none"> • Powers of Attorney (Healthcare, Financial, Childcare, Immigration) 	<ul style="list-style-type: none"> • Revocable & Irrevocable Trusts • Simple Wills
Family & Personal	<ul style="list-style-type: none"> • Adoption • Affidavits • Conservatorship • Demand Letters • Divorce - 20 hours • Garnishment Defense • Guardianship • Immigration Assistance 	<ul style="list-style-type: none"> • Juvenile Court Defense, Including Criminal Matters • Name Change • Parental Responsibility Matters • Personal Property Protection 	<ul style="list-style-type: none"> • Prenuptial Agreement • Protection from Domestic Violence • Review of ANY Personal Legal Document • School Hearings
Civil Lawsuits	<ul style="list-style-type: none"> • Administrative Hearings • Civil Litigation Defense 	<ul style="list-style-type: none"> • Disputes Over Consumer Goods & Services • Incompetency Defense 	<ul style="list-style-type: none"> • Pet Liabilities • Small Claims Assistance
Elder-Care Issues	Consultation & Document Review for your parents: <ul style="list-style-type: none"> • Deeds • Leases 	<ul style="list-style-type: none"> • Medicaid • Medicare • Notes • Nursing Home Agreements 	<ul style="list-style-type: none"> • Powers of Attorney • Prescription Plans • Wills
Vehicle & Driving	<ul style="list-style-type: none"> • Defense of Traffic Tickets⁴ • Driving Privileges Restoration 	<ul style="list-style-type: none"> • License Suspension Due to DUI 	<ul style="list-style-type: none"> • Repossession

Employee Assistance Program

Administered through Optum, the Employee Assistance program is a free, confidential service available to you and your dependents that gives assistance with personal or work issues including stress, depression, legal referrals, etc. Up to six face-to-face visits per incident per year.

Professional services such as:

- Carpenters, Car repair shops, Caterers, Dog walkers/pet sitters, Electricians, Landscapers, Translators

Entertainment needs, such as finding:

- Concert or theater tickets
- Instructors for skydiving, golfing, horseback riding and more
- Kid-friendly restaurants
- Nearby golf courses

Financial Assistance like:

- Take a financial assessment, Watch self-directed learning modules, Access financial calculators, videos and articles, Access a full financial library at your fingertips
- Send and receive files securely with your Money Coach. Money Coaches – never sell you anything, Money Coaches have at least five years of professional finance experience, with an average of 20 years of experience.

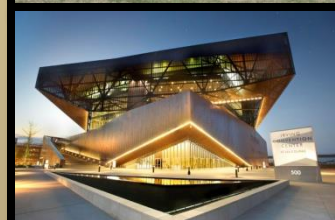




Taking care of people isn't easy. There will be times when you just don't know how to care for them. Maybe you're an expecting parent overwhelmed with planning and preparation. Maybe your nephew is having trouble focusing in school. Maybe it's a bad day for your spouse battling their chronic condition. Maybe your friend's anxiety has kept them from getting out of bed in a couple days. Maybe you notice your parents being more forgetful than usual.

Adult and Elder Care: Legal, Physical Health, Transportation, End of Life Planning, Insurance and more

Pediatrics and Child Care: Child Care, physical health such as durable medical equipment, doctors and specialist, Financial Assistance and more.



PlanSource Placeholder

For questions, please contact City of Irving Benefits Team

972.721.2696

Benefits@cityofirving.org

